



## Psychotherapy E-Newsletter Fall 2020

*Dear Colleagues,*

*We hope this Newsletter finds you and your loved ones healthy and safe during this enormously challenging year. We continue to provide you with informative and engaging information on our past and upcoming activities and programming.*

*Pre-Registration for APsaA's first VIRTUAL National Meeting held over three weekends (February 12-14, February 20-21 and February 27-28) will open December 15, 2020 through February 2, 2021. Please don't hesitate to reach out with your comments, thoughts and reflections. We look forward to hearing from you!*

*Best wishes,*

*Padma Desai, LPC, LMHC Editor, Psychotherapist Associates E-Newsletter  
Jonathan Kersun, MD, Chair, Psychotherapist Associates Committee*

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### **Report from the Virtual 109th Annual Meeting**

*"We must always take sides. Neutrality helps the oppressor, never the victim. Silence encourages the tormentor, never the tormented." Eli Weisel*

I was fortunate to attend APsaA's Plenary #3 at the first virtual Annual Meeting in June 2020 entitled "What Have We Been and What We Might Become?" Moderated by Dr. Maureen Katz and presented virtually during the Covid-19, anxiety and racism pandemics, the panelists discussed questions exploring psychoanalysts' role in world events: 1) Does psychoanalysis have a place outside the consulting room? 2) Is psychoanalysis up to confronting and mitigating racism in the context of institutionalized bias? 3) Is psychoanalysis obligated to address these issues?

Dr. Jane Kite, the panel chair, aptly captured the urgency of these issues by observing the

“broken world in which we now live - an indication that psychoanalytically informed activism is crucial.

Past-President Dr. Prudy Gourguechon, who consults psychoanalytically about national issues, maintained the profession *always* had a role beyond psychotherapy. However, she said psychoanalytic training ignores “applied psychoanalysis” because it’s uncomfortable, does not suit every practitioner, and must occur in the community.

President-Elect Dr. Kerry Sulkowicz identified social awareness as crucial for increasing clinical skills and enhancing practice, provided the clinician is not pathologically certain. He contended if psychoanalysis expands its focus beyond clinical work, it might help save the profession and would confirm Freud’s prediction that treating neuroses may ultimately not be the most important application of psychoanalysis.

President Dr. William Glover highlighted the application of psychoanalytic understanding to world events. Dr. Donald Moss credited the U.S. civil rights movement for enlivening human possibility, resulting in a de-emphasis on psychopathology and a focus on “psycho-possibility” and personal liberation through treatment. Therefore, psychoanalytic thinking is applicable to individuals *and* the community but is also *influenced by* social change.

The panelists then discussed whether psychoanalysis is able to mitigate societal ills. They agreed, conscious and unconscious bias contributes to embedded racism - not easily “excised.” Bill Glover recalled his beloved grandfather making a racist comment, and how difficult it is to reconcile racism in loved ones. Kerry Sulkowicz said this country hasn’t acknowledged its own oppression and genocide but is forced to pay attention due to George Floyd’s murder and other race-related atrocities. Don Moss observed how European Imperialism (white expansionists conquering and exploiting indigenous people), facilitated racism’s inclusion in psychological theory that falsely intertwines privilege with merit. But what prevents change? Prudy Gourguechon posited that collective shame, blindness, helplessness and defensiveness hampers effective action: “The white majority invented racism and it is our job to fix it.” But the panelists agreed, to achieve equality, we must identify with the oppressed *and the oppressor* and confront our own covert racism.

Finally, the panelists addressed whether psychoanalysis has an obligation to act. They agreed, inaction perpetuates harm, and neutrality enables oppression. Don Moss hoped we don’t return to our pre-crisis inertia after the “dust settles,” and invoked the notion that psychoanalysts *must* incorporate vocal anti-racism rather than rationalize “objectivity” based in privilege. The panelists emphasized, commitment to racial equality is a moral tenet that our profession *must embody, model and implement* - but how?

The discussants observed, psychoanalysis requires understanding and managing uncertainty and is therefore uniquely positioned to explain social behavior and defenses like projection, projective identification and denial - and to harness that in activism. Kerry underscored the importance of what he sees as essential psychoanalytic values, including telling the truth, listening non-judgmentally as well as embracing complexity, language, expressiveness, self-awareness and human equality. Ironically he added, due to Covid-19, virtual technology facilitates global engagement.

The panelists concluded, by incorporating relevant experiences during clinical training, the profession can confront racism and inequality. For example, Institutes can require trainees to work in the community to expand therapists’ reach; we can address people’s financial constraints as real, rather than interpreting them as shameful emotional baggage; Institutes could require Training Analysts to treat at least 2 very low fee patients to enable economically disadvantaged therapists to consider advanced training; perhaps Institutes can recruit racially inclusive faculty and trainees; and finally, APsaA can establish an anti-racism commission and address our previously unrealized racism during Study Groups and Town Hall meetings.

Lest we were prone to forget about all this after clicking the “leave meeting” tab, past, current and future APsaA leaders are committed to utilizing or modifying institutional structures in the context of dissolving geographic borders to bolster anti-racist activism and effect meaningful professional *and* societal change.

For information on APsaA’s recently established *Holmes Commission on Racial*

Equality, visit <https://apsa.org/commission-on-racial-equality>. Additional APsaA activities and resources can be found at: Addressing Racism <https://apsa.org/addressing-racism>

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## Reflections from APsaA's Covid Task Force: My Office is Open

As a member of APsaA's Covid Task Force, I participated in the August 2020 meeting. It is not uncommon that I find myself in a contrary position. As far as I can tell, I am not being oppositional for the sake of defiance, risk, or thrill. Rather, I move along the path that makes the most sense, considering as many variables – including unknowns – that I can. I am a psychiatrist, and I practice psychoanalytic psychotherapy. I have been seeing patients in my office throughout the pandemic.

I have learned through the pandemic that every practice situation is truly different. Each practitioner needs to assess their individual practice with respect to safety. While I have decided to see patients in my office, I recognize that many may not feel comfortable coming to session. I tell all my patients that I've had the virus. Also, all patients are offered the option of tele sessions. As the pandemic has worn on, approximately 1/4-1/3 of my patients have opted for tele sessions. The rest come to the office.

Another variable in my safety assessment is that I've had COVID-19, confirmed by PCR test. I know that the notion of immunity following infection with the virus is controversial. However, I operate under the assumption that my illness has conferred some antibody protection, and most data suggests that those who have had the virus should not get it again (Mandavilli, A. (2020) 'Can You Get Covid-19 Again? It's Very Unlikely, Experts Say' *The New York Times* July 22, 2020).

I have avidly followed news of COVID-19 since it emerged as a public health crisis. It is clear and understandable that a great deal of fear and anxiety surrounds this contagion. I have attempted to separate the emotion and unknown variables, guiding my clinical practice based on scientific evidence. Unfortunately, amongst experts – epidemiologists and infectious disease specialists – there is significant variability around how one should carry forth. "We asked more than 500 epidemiologists and infectious disease specialists when they expect to restart 20 activities of daily life, assuming that the coronavirus pandemic and the public health response to it unfold as they expect.

On sending children to school, camp or childcare, 70 percent said they would do so either right now, later this summer or in the fall.... Others, though, said they would wait for a vaccine, which could take a year or more." (Miller, C. and Sanger-Katz, M. (2020) 'How 132 Epidemiologists Are Deciding When to Send Their Children to School' *The New York Times* June 14, 2020).

Seventy percent of the experts would send their children to school now, while 30 percent would wait. Clearly, this is not a consensus. I suspect that the variability of opinions amongst experts reflects the amount that is unknown about this virus and the fact that it is a new phenomenon to our world. In order to know how the virus will act, we have to see how it acts. This takes time. Medical practices, dentists, and hair stylists are working in this manner currently. While therapists and analysts see their patients for approximately 45 minutes – a potentially heavy exposure – doctors, dentists, and hair stylists, get extremely close to their patients/colleagues. It is hard to know which is more risky. Since the implementation of universal masking, large academic hospitals in my area have not had a single case transmitted from patients, including infected individuals, to health care worker OR between healthcare workers.

Seeing psychotherapy patients in the office during this fraught time requires the practitioner to assess his/her own risk tolerance. It is easy to develop reasons NOT to do in-person work, attempting to construct a wall of protections. There is a tremendous amount of fear around the virus, and the fear persists despite evidence that measures are extremely effective at decreasing transmission. Until the virus is eradicated, there will

always be risk associated with live interaction. As I am following the generally accepted guidelines of distancing, etc, my anxieties about in-person meeting are allayed, despite the fact that I likely have protection from the virus. For some reason, my position is contrary and unusual. Yet I persist, until a compelling reason convinces me otherwise. I believe my practice would be the same, even if I had never contracted COVID-19. Given that there is so much variability amongst experts regarding how to act in the face of this pandemic, there is clearly no “correct” way.

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For Coronavirus-related resources for professionals please click [here](#).

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## **Interview with Co-Chair for North America, International Psychoanalytic Association’s Inter-Regional Encyclopedic Dictionary of Psychoanalysis (IRED)**

I recently had the privilege interviewing Eva D. Papiasvili, PhD, ABPP, Co-Chair for North America, International Psychoanalytic Association’s (IPA) Inter-Regional Encyclopedic Dictionary of Psychoanalysis (IRED). Below is a transcript of the interview:

PD: Eva, how would you describe the Inter-Regional Encyclopedic Dictionary of Psychoanalysis (IRED) for our Psychotherapist Associates E-Newsletter readers?

EP: IRED is a result of a unique collaboration of more than 120 contributors from across all IPA regions, that combines both dictionary (definition of the concept) and encyclopedic (evolution of the concept) dimensions, where each entry is fully representative of all contemporary psychoanalytic perspectives, worldwide. It is posted on the IPA website and free to access, intended for all who teach, study, work and write using psychoanalytic concepts. We recently released a publicity notice on IRED on the APsaA Extended Listserv.

PD: This sounds like a great resource for our PA members. It is an enormous undertaking, what was the genesis of IRED?

EP: The idea was the brainchild of Stefano Bolognini, M.D., past President of the IPA and the current Chair of IRED and past Vice-President Alexandra Billinghamurst, starting 2013. They had the vision to provide all psychoanalysts and psychotherapists across all mental health disciplines who work psychoanalytically with a comprehensive and authoritative international up-to-date resource, capturing how each concept evolved from Freud to the present time.

PD: So, this was something that did not exist before in a centralized way?

EP: Right, while there are many excellent regional dictionaries, IRED is unique in that it is fully representative of all theoretical trends and schools on a global scale. As such it is a universal tool for reference, education and consultation for any practitioner using psychoanalytic concepts.

PD: Given the depth and breadth of the vision, was initial goal about integration of concepts worldwide?

EP: The mission was not a forced integration of psychoanalytic concepts but rather a broad, complete representation across theoretical-historical-cultural milieu, with convergencies and differences clearly described, in respect to their theoretical specificity and richness of their historical and cultural background.

PD: What was the starting point to embark on this work and what was the methodology used to collect this information?

EP: We asked 25 consultants-psychoanalysts of varying theoretical and cultural

backgrounds from Europe, North America and Latin America to answer two important questions: 1) which five concepts are most relevant in your thought and work and 2) which psychoanalytical concept originated in your psychoanalytic culture or has special resonance to it? The responses, containing general as well as regionally specific concepts, were then collected across the three regions and were arranged according to most frequently occurring concepts.

PD: What were the initial findings from this endeavor?

EP: We found the following concepts occurred most frequently and were most relevant in the first tier: Transference; Countertransference; (The) Unconscious, Containment: Container/Contained, and Projective Identification. In the second tier it was Object Relations Theories, Conflict and Nachträglichkeit. Among the regionally specific concepts there were Setting, Enactment, Self, Intersubjectivity and many more entries are in the pipeline: IRED is a 'work in progress'.

PD: Given the wide geographic representation and scope of IRED what are the overall findings to date?

EP: Over the past five years of constructing intra-regional and inter-regional entries for the IPA Inter-Regional Encyclopedic Dictionary (IRED), we have been continuously impressed by the phenomenon which we call "Migration and Mutation of Concepts". We found that concepts 'Migrate' in between the theoretical, linguistic and cultural groups and 'Mutate' when crossing the 'in between zone'. This is most apparent when crossing (literally) the ocean, and arriving in the 'New World', but it is also perceptible in between psychoanalytic cultures within each continent.

PD: What is the current state of IRED at this time?

EP: Currently, IRED contains 13 tri-regionally finalized concept entries translated into ten languages so far and growing. In fact, IRED is currently the most frequently translated resource among all psychoanalytic dictionaries. There are many further concepts, regarded among most relevant to today's psychoanalysts' thought and work, in the pipeline.

PD: Lastly, what is the future going forward, how can IRED be the tool it was envisioned to be, a comprehensive resource for the psychoanalytical community?

EP: The goal is to keep expanding and building bridges across diverse psychoanalytical orientations worldwide. Because of its width and depth, IRED has been recommended by the IPA President, Virginia Ungar, M.D., to be included in the training curriculum of IPA-affiliated psychoanalytic institutes, as well as in current clinical and scholarly psychoanalytic publications as a vital up-to-date tool for consultation, research and reference.

PD: This is important work for the future of psychoanalysis. Eva, I want to thank you for sharing your work as IRED Co-Chair for North America. Our PA members can find more information on the IPA Inter-Regional Encyclopedic Dictionary of Psychoanalysis (IRED) e-book /flipping book at [www.ipa.world](http://www.ipa.world) (click on 'Resources' and on the image of the book). Members can also reach you regarding the above at the email listed below.

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## **Update on The Psychotherapy Action Network (PsiAN)**

It's hard to imagine a greater need for mental health advocacy than over these past few anxious, isolated months. So here at PsiAN, we've been more committed than ever to

protecting and promoting therapies of depth, insight and relationship, and we're eager to share with you what's been going on behind the scenes!

## Telehealth Advocacy

As the COVID pandemic continues, anguish and outrage over racial and economic inequities loom large, and in-person treatment seems like a distant fantasy, PsiAN has pushed hard for full and fair coverage of telehealth sessions. We have circulated a petition that has garnered nearly 50,000 signatures ([PsiAN Telehealth Petition](#)) and initiated a letter to Congress and the Department of Labor that was signed by many of the members of the Mental Health Liaison Group. We are advocating for telehealth treatment to be reimbursed at the same rates as in-person therapy, with no requirements from insurance companies to use their proprietary video networks (which cost therapists a lot), and for phone-only sessions to be covered as well (many lower income individuals might not have access to computers or smart phones). This is all outlined in our full [position statement](#). A new concern arises from people in crisis turning to websites or apps, thinking they will receive quality treatment. Some therapy app companies are also encouraging their therapists to practice therapy in states where they aren't licensed, thus putting their licenses at risk. The company is willing to pay any legal costs that result – but we see the legal fines as the least of the issues. In sum, we are concerned that individuals might not know that all treatment options are not created equal, and we are presently collaborating with other groups to help ensure that quality treatment is protected.

## New article on the value of depth therapy

We are always concerned about countering the prevailing misunderstandings about what depth therapies are and the benefits they offer. As an organization, we'll investigate the most effective ways to communicate this information to the public but believe social media and journalistic articles are the best places to start. **Linda Michaels** wrote a comprehensive [piece about the benefits of psychodynamic therapy](#), published by *Aeon* in March. Her article is an example of the press we can generate as members and was even highlighted by **David Brooks**.

## New PsiAN website

If you haven't yet wandered over to the PsiAN website, now's the perfect time -- we've transformed our website, and you can check it out [here](#). Our new site is streamlined and easily navigable, with tabs for each of our Committees and their initiatives, an organized and accessible compilation of PsiAN's [position papers and public statements](#), and a brand-new [PsiAN Forum](#), with **Steven Reidbord** as Editor, and **Todd Essig** as Advisor. The Forum will feature short essays, articles, and creative writing. If you're interested in contributing, we'd love to hear from you!

## Connecting with the next generation

For the third year in a row, we're also excited to (virtually) host 11 Carleton College undergraduates as PsiAN interns for a few weeks this month and next. We've found this is a great way to introduce undergrads to therapies of depth, insight and relationship. What they are typically taught in their psychology courses on campus leave out so much. They are mainly taught about the history of psychology and academic studies. We love seeing their eyes open wide when they learn that there's no evidence for the chemical imbalance concept, and much more. We encourage all of you to take opportunities to connect with college – even high school – students, as these are the next generation of therapists.

## Become our newest Strategic Partner—for free!

We're delighted to welcome the APA/DIV32 Society for Humanistic Psychotherapy and the International Psychotherapy Institute as our newest Strategic Partners. Joining us is **free** and makes a huge difference; our research has shown that collaboration among associations is far more effective in increasing the acceptance and provision of mental health services than working independently. We'd love for your institute, organization, school or agency to join as a Strategic Partner too!

Just some highlights about how PsiAN is working to promote healing, and our work seems

more important than ever during these trying times.

Linda Michaels, PsyD, MBA  
Co-Chair PsiAN  
[lindamichaels@psian.org](mailto:lindamichaels@psian.org)

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## Upcoming Events:

### **APsaA Town Hall #17** **December 6<sup>th</sup>, 2021, 7:00 P.M. EST** ***Holding On***

We invite all of you to join us at a special one hour APsaA Town Hall on December 6th, 7:00 P.M. EST. A space for the psychoanalytic community to share experiences and reflections. The pressing issues of the day will determine the focus of discussion at each meeting, with deeper, ongoing work occurring in other venues. All psychoanalytically oriented psychotherapists, students, candidates and analysts are invited, regardless of institutional affiliation.

**Please register here:**

<https://zoom.us/meeting/register/tJ0tdeChrjgsH9HE5WH9CqQzGOaptaBqd45a>

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*Join us at...*

**APsaA's VIRTUAL 2021 National Meeting**  
**held over three weekends for only 1 fee**  
(February 12-14, February 20-21 and February 27-28)  
**Pre-Registration opens**  
**December 15, 2020 through February 2, 2021**

**[Click here to register](#)**

Peruse the [Preliminary Program](#) for ALL of the details!

**Psychotherapist Associates VIRTUAL presentations and events at the  
2021 National Meeting:**

**Committee Sponsored Workshop:  
The Business of Practice: "Navigating Boredom"**

(Saturday, February 20, 2021 2:00 – 4:00 P.M. EDT)

**Psychotherapist Associates Present, Discussion Group:  
“From Persecution to Psychic Birth: Countertransference and Transference from  
An Object Relations Perspective”**

(Saturday, February 27, 2021 2:00 - 4:00 P.M. EDT)

**Psychotherapy Department VIRTUAL presentations at the  
2021 National Meeting:**

**Discussion Group 47:**

**“Psychoanalysis and Psychodynamic Psychotherapy”**

(Saturday, February 27<sup>th</sup>, 2021, 2:00 - 4:00 p.m. EDT)

**Committee Sponsored Workshop 1:**

**Psychotherapy Training Programs:**

**Engaging The Remote: Teaching In A Time Of COVID**

(Saturday, February 20, 2021, 2:00 – 4:00 P.M.)

**Psychotherapy Department Information & Networking Event**

(Saturday, February 20, 2021, 7:15 - 8:15 P.M. EDT)

Please visit APsaA's Psychoanalytic Psychotherapy **Tracks Page**

*All sessions open to PA's.*

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**Are you interested in contributing to the next Newsletter?**

Are you interested in writing a summary of one of the panels, symposia, discussion groups, or workshops at the next National Meeting in 2021? Do you have any other contributions in mind that you think might be of interest to fellow Psychotherapist Associates, such as articles about books or movies, talks or research reports?

**Please contact Padma Desai, LPC, LMHC ([padma@padmadesai.com](mailto:padma@padmadesai.com)) with suggestions, inquiries, or regarding contributions to the Psychotherapy E-Newsletter.**

**Information:** Please click on the link for information about joining APsaA's [Psychotherapist Associates](#). Benefits include a discounted meeting fee. Or contact APsaA's Membership Services Assistant, Bronwyn Zevallos ([membadmin@apsa.org](mailto:membadmin@apsa.org)) to receive a brochure.

You are currently on APsaA's list to receive the [Psychotherapy E-newsletter](#). If you do not wish to receive future issues, please let us know by sending an email containing your name to APsaA's Manager of Membership Services, Debbie Steinke Wardell ([dsteinke@apsa.org](mailto:dsteinke@apsa.org)), and we will remove you from our e-newsletter distribution list.