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Working in a Complex Intersection: Healing Disaster Trauma in a Foreign Culture

Alan Krohn

In 2005 and 2006, Shanthy Parameswaren, a psychiatrist originally from Sri Lanka, Harriet Calvert, a British clinical psychologist, and I went to Sri Lanka to do post-tsunami mental health work and to train others to do the same. A psychoanalytic perspective, including both Freud's topographic model (very relevant for post-disaster work) and his structural model, Henry Krystal's trauma/affect theory, Anna Freud's developmental theory, and Heinz Hartmann's ego psychology, all when flexibly applied, were very helpful.

We worked in a preschool in the tsunami affected area in northeastern Sri Lanka. We helped parents and preschool teachers understand the regressed behavior in their children after the tsunami. We talked about the value of listening to children, responding non-punitively to regressive behavior, and the importance of a gradual encouragement of phase appropriate autonomy.

We set up the first of a weekly series of meetings where parents could bring problems presented by older children. Such a child is described below. Her problems illustrate the indirect but profound impact of living in temporary camps with limited security and, as well, how psychoanalytic and cultural perspectives can be helpful in understanding this I4-year-old child's (and her mother's) particular response to a trauma that occurred in this unsafe environment.

About a month before I saw her, she was attacked from behind by a man, while she was urinating. He held a knife to her throat and grabbed for a chain he thought mistakenly she was wearing. By her account, he then forced her to hold some liquid in her mouth for a few minutes, so she wouldn't call out, while he ran away. She was frightened, often refused to go to school, and feared seeing the man who was still in the camp.

She had flashbacks and realistic fears. I talked with her about how her fear operates:

Your body belongs to you, but he grabbed it away during the attack. I asked if anything sexual had happened, and she insisted that it had not, but I am not sure. She was just scared, she said, that he would kill her. Yes, I said, of course, that is the most awful kind of loss, loss of your own life.

I asked if she felt unprotected. No, she said, she feels protected. But then at just this point, interestingly, she told me that at eight in the evening, she faints. *Continued on page 8*

INSIDE TAP...

Election Results 6
IPA Election Statements 10–13
Childhood, Fears, and Stories 18
Help for the Impaired Psychoanalyst 21
Fellows Make Major Impact on Association 27
APsaA Fellows 28–30
Distance Learning 32
Psychoanalysis in China34



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- 3 The State of the Association Lynne Moritz
- 5 Our Manner of Acting Eric J. Nuetzel
- 6 APsaA Elections
- 7 APsaA's Statement Against Torture Bennett Simon
- IPA Election Statements
- 4 Analyst/Researcher Begins Landmark Trial Marie Rudden
- **Science and Psychoanalysis:** Focus on Personality Disorders Robert Michels
- 16 The Analyst at the Morgue: Helping Families Deal with Traumatic Bereavement Bruce H. Sklarew
- 18 Childhood, Fears, and Stories: Impressions of a Symposium on Psychoanalysis and Children's Literature *Ellen Handler Spitz*
- 20 The PDM Hits the Big Time Dottie Jeffries
- 2 Help for the Impaired Psychoanalyst Rita Clark and Jerome A. Winer
- 22 Politics and Public Policy: The Height of Arrogance Bob Pyles
- 23 **Poetry:** From the Unconscious Sheri Butler Hunt
- 25 Bringing Psychoanalysis to High School Psychology Classes James Hansell
- 26 **COPE:** Learning Together in Supervision Workshops Daniel Jacobs
- 27 APsaA Fellows Make Major Impact Inside and Outside Association Charles P. Fisher
- 28 APsaA's Excellent New Fellows for 2006-2007
- 32 Cyberclasses Bring Psychoanalytic Knowledge to Turkish Mental Health Professionals Allen M. Siegel
- 34 Opening the Door to Psychoanalysis in China Shoshana Shapiro Adler and Elise Snyder
- 36 Letters to the Editor
- 37 Membership: The Association of Administrators: An Invaluable Resource for Psychoanalysis Debra Steinke Wardell

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The State of the Association

Lynne Moritz

(Taken from the address delivered at the Meeting of Members, January 19, 2007, New York City)

When I awoke yesterday morning, I still had no idea what I was going to be able to say to you today. We didn't yet know how today would end—one organization? Two? One organization in fragments? Actually, today we will leave this meeting in fairly good condition—one organization and a moratorium a time to find clarity about the direction that we should go.

There are very good things to report: Membership has been steady over the last five years. Financially, we are sound and doing very well. We publish the premier psychoanalytic journal in the world. We are halfowners of PEP WEB, a thriving company that is an extraordinary tool for psychoanalysts and researchers, an amazing instrument for access to the psychoanalytic literature. We have ongoing scientific and scholarly research and publications and scientific programs that are unparalleled. And we are bringing psychoanalysis out to the world in many ways though not enough.

There are also ways in which we are not doing well. Segments of our Association are, and have been, deeply unhappy with us. A fracture line exists in our Association that threatens to divide us: The question is, can an accrediting and certifying body live within a membership organization? This question must be answered. I hope, I dearly hope, that we can remain one organization. I believe that splitting into two will lead to two weaker structures—will destroy an essential dynamism. But the right conditions must be created to remain as one.

As you know, the last several years have been tremendously stressful for our Association. It is our politics that is killing us, not our science. While we fight, too much goes neglected—the convergence of psychoanalysis with cognitive psychology, neuroscience, and research in the

Lynne Moritz, M.D., *is president of the American Psychoanalytic Association*.

social sciences and humanities. The cutting edges of these fields press into our own, while we drain away our energy and resources fighting. The medicalindustrial com-



Lynne Moritz

plex turns our world against us; complex public issues, where we have expertise to offer; go minimally addressed; political savvy is turned inward instead of out. Rather, we use our creativity and our resources for the joy of savaging each other. We cannot continue on this path, because our Association will not survive.

We are a small organization—something like a little pipe-fitters union—we sorely need the support of each other and a way to go forward. Bjorklund says this is not unusual and not an emergency. We are among a large number of membership corporations, all in transition, all working to comply.

Moreover, the Board on Professional Standards is a Committee of the Corporation—IS! The Executive Council is our board of directors—IS! That's it. That's the law. We are one corporation. The Council has final, whole, entire fiduciary responsibility for us all. If we knew this before, we really, really know it now. BOPS reports, and must report, to the board of directors, because the board must ensure, have oversight, and be assured through these reports that BOPS does not bring us into legal liability. What possible liability? Bjorklund described two kinds: discrimination as to race, gender, age, sexual orientation, etc., or failure to apply our criteria in a fair and even way.

Bjorklund reviewed the board's role in assigning responsibilities and empowering committees to work. One such way is developing a charter. ("Charter" is another word for mandate.) All APsaA committees have mandates. In fact, BOPS has a mandate, specifically

We are a small organization—something like a little pipe-fitters union—we sorely need the support of each other and a way to go forward.

I bring you news. Last Wednesday, Eric Nuetzel, Dean Stein, and I conferred with our expert counsel on New York law, Victoria Bjorklund. The issues we wanted to explore grew out of the Compliance Task Force consultation with her. The first was a proposal that Bjorklund called a "charter" for the Board on Professional Standards (BOPS). What is this charter? How would it work? And, second, I wanted to know, what EXACTLY is out of compliance in the way we operate? We've been driven, for years now, by a group that insists we are noncompliant with New York law. The conclusion? It is true, but our noncompliance exists in a state of mind, more than in our operations. We have thought for 60 years, since our 1930s bylaws, that we were a bicameral organization. Without our noticing, the law changed in 1970.

detailed in the duties and responsibilities assigned in Articles XI and XII of our bylaws.

So what is out of compliance? We've been told that we are noncompliant in that the Council must "approve" and vote on the BOPS report. This is not true. We learned in this consultation that there are multiple legal ways for a board to receive committee reports. Some organizations specify in their bylaws a *manner* of acting. However, a report can be received (no vote), accepted (with vote), or approved (with vote). All are equally legal.

For our contentious group, this manner of acting has come to embody symbolic importance. There are those who believe that Council must assert its will and primacy over BOPS at every meeting; others, whose hearts and minds have been in education, feel that such *Continued on page 4*

State of the Association

Continued from page 3

would signify a lack of trust in BOPS to do its job. Bjorklund makes clear that a board of directors can allow a committee to carry out its mandate with relative autonomy, though as always, the board receives reports and retains final control. It is a matter of trust.

Embedded in our problem, Bjorklund believes, is a business decision that the Executive Council could make. As board of directors, the Council could decide that it is in the Association's best interests to accept the mandate for this committee, receive reports from it, comment on those reports with all appropriate feedback, listen for discrimination and fair application of criteria—and this would be enough. This could constitute its lawful oversight. In other words, we could legally proceed doing business in the way it has been conducted all along, if the Council will accept that for now. If necessary, this might be only a short-term solution to allow us time to find our path and direction.

Who knows? Maybe our future should be a corporation of institutes and a separate corporation for membership. Whatever happens, it should happen by consensus. We need the peace and the opportunity and the trust on all sides to think this through.

So the BOPS meeting ended Wednesday with the hope that Council would see the wisdom of Bjorklund's charter. And the Council meeting ended yesterday allowing work to continue for now. How long will this peace last? A week? A month? Could we have a year or more? Maybe we'll find that this is a perfectly good way to go forward. No one knows. Consensus would be best—but we must stop the kind of divisive bloodletting that has so occupied us for these last years.

Really, something extraordinary happened here this week. I think, for now, we can go forward. For now, we are all right. What needs to happen next is calm reflection—less passion, more reason, fewer threats. And we need time to remobilize ourselves. Please God, governance doesn't absorb us the way it has till this day! Let us do what we must in this wide world we live in. Let us turn with energy to the things we sorely need to do to ensure the place of psychoanalysis in the world. We have so much to do and so much to offer. That is my wish and my hope. I will work hard toward this end, and I ask for your help to do it.

New Active Members Winter 2007 Meeting of Members Waldorf-Astoria

David A. S. Garfield, M.D.

Sarah Ackerman, Ph.D. Tessa Addison, L.C.S.W. Gail Alexander, M.D. Laura Anderson, M.D. Frances Arnold, Ph.D. Kate Bar-Tur, L.C.S.W., M.S.S.W. Sharon Bassett, Ph.D. Jack Beinashowitz, Ph.D. Michael R. Bieber, Ph.D. Gerrian Miller Bobrowsky, Ph.D. C. Martin Bullard, M.S.W. Joseph Ciccone, M.D. Carol W. Coutu, Ph.D. Mirta Raquel Estamatti, Ph.D. Eric A. Fertuck, Ph.D. Christine H. Fewell, Ph.D.

David Goldberg, Psy.D. Cheryl Yund Goodrich, Ph.D. Diane Grise-Crismani, M.S.W. Ethan M. Grumbach, Ph.D. Ethan M. Grumbach, Ph.D. Pamela E. Haglund, Psy.D. Tak Yoo Hong, M.D., Ph.D. Christie Huddleston, M.D. Christie Huddleston, M.D. Christie Huddleston, M.D. Paul G. Hufnagel, M.S.W. Wendy Wiener Katz, Ph.D. Patricia Litke Kauffman, M.D. Nancy Joan Lawrenz, Psy.D. Felise B. Levine, Ph.D. Anellina Marrelli, L.C.S.W. Daniel Mollod, M.D. Michael L. O'Hara, M.D. Stuart J. Ozar, M.D. Christine M. Parcells, M.D., Ph.D. Sarah Paul, M.D. Ellen Pinsky, Psy.D. Edwig K. Plotnick, M.D. Kate Prendiville, M.S.W. Justin Richardson, M.D. Lauri R. Robertson, M.D., Ph.D. Diana S. Rosenstein, Ph.D. Deborah Shilkoff, L.I.C.S.W. Sandra W. Taub, Psy.D. Leslie Tepper, Ph.D. Brian G. Tobin, M.D. Howard K. Weiner, M.D. Samuel P. Wyche, D.O. Jaehak Yu, M.D.

Our Manner of Acting

Eric J. Nuetzel



The phrase manner of acting is a legal term, referring to the way a board of directors exercises its oversight of a committee. A board of directors has three options for such

oversight: receiving a report without a vote of the board of directors, *accepting* a report with a vote of the board of directors, or *approving* a report, again with a vote of the board of directors. All three are legal in New York State. Why is this important?

Our organization has historically functioned as if the Executive Council and the Board on Professional Standards (BOPS) were two nearly equal governing bodies. We have known that under New York State not-forprofit law only one board of directors can exist and that the board of directors cannot delegate its responsibility of oversight. The Executive Council, our board of directors, is legally responsible for all activities of the Association including those of the BOPS. The Association would be legally liable if any part of the Association, like the BOPS, were practicing some form of illegal discrimination. It follows that the board of directors needs to know what the BOPS is doing, and how the BOPS is doing it.

Victoria Bjorklund, our expert attorney for New York not-for-profit corporate law, has made it clear that in her view the Board on Professional Standards is a committee of the corporation. After receiving the report of the Compliance Committee's recent consultation with Bjorklund (the Compliance Committee is a committee of the Executive Council), I asked our president, Lynne Moritz, for a consultation with Bjorklund. The question I had for Bjorklund was how must the board of directors exercise its oversight? In legal terms, what must our board of directors' *manner of acting* be? Our president granted my request, and joined me in a consultation with Bjorklund and our executive director, Dean Stein, on January 10, 2007. The consultation occurred in the week prior to our recent national meeting. Bjorklund explained the three ways our *manner of acting* could be legal in New York State. This was big news to me.

Moritz and I knew that our efforts, along with those of Prudy Gourguechon and Jon Meyer embodied in the Renew Plan, might fail. Having been under the impression that our *manner of acting* was out of compliance with New York law, I was relieved to learn from Bjorklund that our board of directors had three options (outlined in the first paragraph). and suggestions provided by the board of directors by the BOPS—is very much within the spirit of the Education and Membership Agreement of 2001, which is the framework of our current bylaws.

NECESSARY AUTONOMY

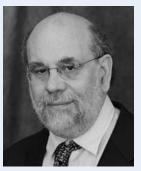
For 61 years, the Association has granted the Board on Professional Standards considerable autonomy in exercising its bylaw mandated functions, as it does the editorial board of JAPA and our Program Committee. None of these components of the Association would function well with the board of directors second-guessing its decisions. The board of directors has the right to do so, but in exercising its responsibilities it should only act to override the BOPS, the JAPA editorial board, or the Program Committee in a matter that would involve egregious irresponsibility, i.e., discriminating based on gender, religion, race, and such issues. Educational standard setting and credentialing decisions

The BOPS must *act* in a *manner* worthy of confidence. It must listen to the feedback and suggestions of the board of directors and take notice of the will of the membership. If the Executive Council continues to express confidence in the BOPS through its *manner of acting* and the BOPS remains worthy of that confidence, we might have the peace that we need to move forward.

This meant that the Association has been in compliance as regards our *manner of acting* all along. The Executive Council *receives* a summary (report) of the actions of the Board on Professional Standards at every meeting. *Receiving* a report is not a passive process. The Executive Council has an obligation to be active in its reception of the report and can ask for clarifications, provide feedback, and make suggestions based on the report. Active reception of the summary (report) of the Board on Professional Standards and its reciprocal—serious consideration of the feedback must not be micro-managed. These activities need a degree of autonomy for their integrity. The confidence the Association has had in the BOPS has been expressed through the Executive Council's *manner of acting*. As I write this, there are demands on our Internet list-servs for more active oversight of the BOPS by the Executive Council. Members should understand that these calls for greater oversight are about the politics of the Association, not the law in New York State or even "best" corporate practice.

Eric J. Nuetzel, M.D., *is chair of the Board on Professional Standards*.



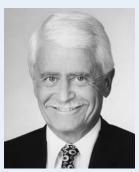


Secretary-elect Robert M. Galatzer-Levy

With 48 percent of the members voting, the proposed bylaw amendment (Renew the American) was not approved. The vote was 715 for, 716 against, 111 abstained. Because of the way votes are counted (abstentions are counted as "no" votes), this amounts to 46.4 percent of the vote in favor of the proposed bylaw. A vote of two-thirds of those members present would have been required for passage.

Robert M. Galatzer-Levy defeated Jonathan House

for secretary. He received 627 votes (54 percent) to 491 (43 percent) for House. He takes office for a two-year term after the meeting of members in June. Allan Compton and Graham Spruiell were elected councilors-at-large. They take office for four-year terms after the meeting of members in June. They defeated Ralph E. Fishkin, Michael Gundle, and Luba Kessler. As approved by the Executive Council at its meeting in June 2003, tallies for the office of councilor-at-large are not reported because the complexity of the necessary Australian ballot counting makes the numbers misleading.



Councilor-at-large-elect Allan Compton



Councilor-at-large-elect Graham Spruiell

Our Manner of Acting

Continued from page 5

Debates over our educational standards, especially our bylaw mandated certification requirement for training and supervising psychoanalyst appointments, divide the Association. The Board on Professional Standards has been working very hard to insure that our certification exam is administered fairly and evenhandedly. The Certification Advisory Research and Development Committee (CARD), along with the BOPS co-science advisors and the Committee on Research Education (CORE), have been assessing the reliability (fairness) of the certification exam. This group will also attempt to assess the validity of the exam, once reliability has been established for all aspects of the exam. Where the exam falls short, it will be modified. Innovative ways to make the certification process more acceptable to our membership are being contemplated. Despite these efforts, the link between certification and training and supervising psychoanalyst status will likely remain a source of conflict within the Association.

Our best hope is for a period of peace while we search for the best solutions and build consensus. The Board on Professional Standards is a committee of the corporation. The Executive Council is the board of directors with the responsibility of oversight. My hope is that the Executive Council will continue to *act* in the same *manner* as it always has in relation to the BOPS. I like the phrase manner of acting because it captures the heart of the matter. No group trying to do serious work with integrity can function effectively while being micro-managed. The BOPS must act in a manner worthy of confidence. It must listen to the feedback and suggestions of the board of directors and take notice of the will of the membership. If the Executive Council continues to express confidence in the BOPS through its manner of acting and the BOPS remains worthy of that confidence, we might have the peace that we need to move forward. This arrangement will not satisfy everyone, but for now it is the best that we can do. How we treat each other, individually and collectively, is the most important issue that we face.

APsaA's Statement Against Torture

Bennett Simon

On January 18, 2007, the governing board of the American Psychoanalytic Association approved a position statement strongly opposing torture and the involvement of any of its members in torture:

> The American Psychoanalytic Association joins with other mental health and medical professional organizations in strongly condemning the use of torture. As an organization of psychoanalysts who have devoted their lives to helping people undo the effects of trauma in their lives, we strongly protest any governmentally administered and governmentally approved torture of people who are detained. Torture degrades those tortured and those torturing. The effects of that physical and moral degradation, we know, are transmitted to the families and offspring of both victims and perpetrators.

> We also strongly condemn the participation or oversight by any mental health or medical personnel in any and all aspects of torture. Such actions are contrary to the basic ethical principles fundamental to the helping professions.

BACKGROUND

An inquiry to me by Louis Rose, a professor of history at Otterbein College in May 2006, led me to speak with Jon Meyer. I learned that he, as president of the American Psychoanalytic Association, had written to Senator John McCain, in November 2005, strongly supporting McCain's bill against torture. Thereafter, Prudy Gourguechon encouraged me in drafting a simple and clear statement, written with Roberta Apfel, that was unanimously approved by the governing boards.

There is a long history of analysts having to risk their careers and indeed their lives to stand up against governmental persecution and torture. I believe several later-to-become analysts were present at the liberation of the Nazi concentration camps, an experience that translated into a clear commitment to help future victims of torture. Many analysts worked with survivors of Nazi persecution, including helping them obtain reparations from the German government. There have been numerous workshops Source is Bernard Rubin's article, found at http://www.etasgenerauxpsychanalyse.net/mag/ archives/paris2000/teste I 80.html.

Three main mental health associations, sensitized to the issue of torture by revelations of Guantanamo and Abu Ghraib, have issued position papers prior to our own. The National Association of Social Workers strongly condemned torture and any involvement by its members in any aspect of planning or implementing "interrogations." The American Psychiatric Association issued a statement last May, which some claim has loopholes in it that might allow members to participate in certain situations. The American Psychological Association's statement against torture and participation in it by members has been very controversial, with some members arguing that it is too loose and permissive.

There is a long history of analysts having to risk their careers and indeed their lives to stand up against governmental persecution and torture.

over the years at national and international psychoanalytic meetings on working with the aftermath of such awful experiences. At the past few meetings of APsaA, there have been workshops on treating victims of torture, led by Michael Grodin, Apfel, and me, and a number of members and affiliates of the Association have been active in programs that treat victims of torture.

An unfortunate side of the involvement of organized psychoanalysis on the issue of collaboration in torture emerged, more generally, during the period of military juntas in Argentina, Brazil, Chile, and Uruguay, where many members suffered directly and indirectly. Allegations of some analysts being relatively sympathetic to the junta in Argentina have left residual bitterness. Then, there was the cause célèbre: A candidate in a Brazilian psychoanalytic society, Rio I, had been heavily involved with the military in torture activities. Helena Besserman-Vianna, who first reported this, was herself later vilified, sued, and threatened with expulsion from her society for her act of "whistle-blowing." She wrote of this in her 1997 book, Politique de la psychanalyse face à la dictature et à la torture. N'en parlez à personne (Paris: Editions L'Harmattan).

Accordingly, there is a virtue in the simplicity and clarity of APsaA's statement that does not allow moral loopholes. Two articles that address the "permissible under some conditions" fallacy are Leo Rangell's classic post-Watergate piece, "Psychoanalytic Perspective: Syndrome of Compromise of Integrity" (IJP, 1974, 55:3) and the surgeon-writer Atul Gawande's article on physician participation in the death penalty in the *New England Journal of Medicine*, March 23, 2006. Gawande's interviews of physicians participating in executions led him to change radically from his previous position of being willing to consider the possibility of the virtue of such involvement to arguing for a categorical ban on this practice.

I strongly urge our Association to incorporate the statement into our Code of Ethics. Codes alone do not make ethical behavior but they help in reinforcing internal moral codes and interact with necessary legal efforts to oppose the use of torture. Professional codes of ethics lend necessary moral and legal support to individuals in the military or other institutions where they might be compromised. We have decided not to be bystanders; let us take the next step.

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Healing Disaster Trauma

Continued from page 1

I asked her when the attack had occurred, and she said at eight. I said that sometimes something is just too much to feel. When you faint, you escape. Here was an hysterical symptom common during the Victorian era in the West. In this culture that has many physicalistic ideas about mental phenomena, just as in the Victorian era in the West, there is social and cultural support for this type of symptom.

One of the psychosocial worker trainees and I talked with the girl's mother about her daughter's responses to the trauma and suggested it would be helpful for her to walk her to school. The mother wanted to know if her daughter had some physical problem caused by whatever the man made her drink or hold in her mouth.

TRAINING AS THERAPY

Much of what we did during both trips was to train psychosocial workers, psychiatrists, psychologists, and teachers in basic psychoanalytic child and adolescent development, stage specific responses to trauma, the therapeutic process, and loss and bereavement. We used Robertson's film on separation and a video of children of different ages speaking about their reactions to the death of a loved one. On each day of the training we set aside times for discussion of their cases and for their responses to the material presented. We discovered that the material we were presenting raised issues of their own. In the analytic tradition we followed the material, which went way beyond responses to the tsunami. It focused on responses to the 20-year long civil war and

Much of what we did during both trips was to train psychosocial workers, psychiatrists, psychologists, and teachers in basic psychoanalytic child and adolescent development, stage specific responses to trauma, the therapeutic process, and loss and bereavement.

Was the girl sick after it happened? No, the mother said, but maybe it went into her brain little by little. She was also concerned that the girl's problems had to do with her nutrition, she doesn't want to eat fish. I asked what else she eats, and her diet sounded fine, including other sources of protein. Here we see the mother presenting the physicalistic theories of psychological problems emblematic of the culture. The fainting reveals a use of the body as metaphor: What is within her mind is viewed as a physical force working on her body. This mother viewed her daughter's difficulties as coming from the liquid the man made her hold in her mouth or the food she eats. This promotes an avoidance of feelings about the trauma through an illusion of passivity: The cause of the girl's problems is not her feelings but a chemical that has entered her brain. (This hysterical dynamic is described in my book Hysteria: the Elusive Neurosis, International Universities Press, 1978.) We arranged for the girl to talk weekly with the psychosocial worker. other much more individual and personal issues, which, in a country with virtually no 'talking therapy,' they had nowhere to explore. We ended up doing an amalgam of teaching, supervision, and therapy.

A few vignettes: The trainees raised problems that highlighted a cross-cultural difference between the Western and Sri Lankan views of the individual self. In one example, a trainee talked of a friend who was promised as a child bride by her family to another family. She hated the boy, fell in love with another, but the family would not withdraw from the arrangement, and the girl committed suicide (Sri Lanka has one of the highest suicide rates in the world).

In another example, a trainee asked, "What if there are two cures?" and described a depressed 18-year-old boy. He wanted to study electronics, which he loved, but his mother wanted him to be a teacher, which he hated. What should the counselor do? Helping him actualize his vision for himself and separate from his family was one of the "cures" and clearly the more Western one. But the group felt this would be the poorer alternative, it would make the mother and the family unhappy and that would be bad for all. It highlighted for me how much in the West self-actualization is embedded in, and an implicit value promoted by, our psychoanalytic efforts.

Several psychosocial workers asked to discuss another population they work with: torture victims. One of the workers spoke of wanting to work regularly with a survivor tortured in a government prison but felt he could not. Why? With fear of even sharing this with me, he said being Tamil himself, if he works closely with this prisoner, probably a Tamil Tiger rebel, the counselor himself would be suspected by the government of being a Tiger. Another worker talked of wanting to help a torture survivor think out how he might stand up to the Tiger organization's effort to recruit him back, but the worker felt, again realistically, that to do so would antagonize the Tigers and put the counselor and his family under threat from them.

They asked what I would do. I said, first, I was impressed with their courage to work with these torture survivors. I said I know what I wish I would do, but I'm not under the threat they are. I can only try to empathize with their helplessness and fear when faced with these choices. Near the end of this discussion I said, I don't think I was of much help with this. The counselor of the first torture victim said, "No, you helped me, you listened, you are my counselor"—one of the most moving moments for me. He then went on to say how the fear from both the Tigers and the government "gets inside me." This is, of course, the psychology of terror.

TRAGEDY OF CASTE

A minister from India who approached me at my hotel said helping tsunami victims in his part of India, Tamil Nadu, is difficult. There are different communities with no contact living side by side: the castes. We then spent two hours in what I can describe as very brief psychotherapy for him and an education for me about the personal effects of the caste system on someone from the *Continued on page 9*

untouchable/outcaste group, of which he is a member. He talked about how imprisoned he feels being in his caste, and that his caste is "in my bones" (similar to the torture counselor). He spoke poignantly about his son, who was a gifted cricket player in a country obsessed with cricket. He had advanced through successive stages. The boy was then told that he could not, because of his caste, go further. The boy never played cricket or talked about it again. He closed it off as if a physical limitation had prevented him from progressing further. It was, to me, chilling and enraging. The minister was, of course, describing a defense his son was employing to adapt to this horrendous unfairness, a defense whose long-term effects one can only wonder about.

As he was talking about his son and himself, I said what seemed obvious: "It seems that part of the problem you and others in your caste have is that what the society says about you, you believe to be true. You've internalized what you've been told throughout your life."

His eyes filled with tears, and he said, "Yes, it's inside me, that's right."

"So you get this view of yourself from the outside and from the inside, too." Analysts observe this with patients all the time—simple observation, but meaningful to this man.

He said, "I've never really put it this way to myself, but it's part of me."

"It is a terrible, prejudicial, irrational, cruel idea about yourself, and you are being unfair to yourself in the extreme to believe it. This may be presumptuous to say about your culture, but the people need to know that this caste system is simply a sickness of the culture. It is abusive and has not the slightest shred of reality to it." I found doing this work put me often at a complex and messy intersection of local values, human rights, and mental health.

I gained from my work in Sri Lanka as much as, or more than, I gave. I hope this article invites others in the analytic community to get involved in disaster mental health domestically or internationally.

As this article goes to press, sadly the cease-fire agreement between the Tamil Tigers and Sri Lankan government has broken down, and the country is descending once again into civil war.

Training and Supervising Analyst Appointments Announced By the Board on Professional Standards

January 17, 2007 Waldorf-Astoria, New York

Training and Supervising Analysts

Vera J. Camden, Ph.D. Cleveland Psychoanalytic Center

J. Todd Dean, M.D. St. Louis Psychoanalytic Institute

Charles F. Entelis, M.D. NYU Psychoanalytic Institute

Richard C. Fritsch, Ph.D. Washington Center for Psychoanalysis

Linda I. Garrity, Ph.D. Chicago Institute for Psychoanalysis

Peter Grant, Ph.D. Minnesota Psychoanalytic Society and Institute (New Training Facility)

Karen M. Johnson, M.D. San Francisco Psychoanalytic Institute and Society

Jack Avery Miller, M.D. Western New England Institute for Psychoanalysis

Elsa Pool, Ph.D. New Orleans-Birmingham Psychoanalytic Center

Barbara Rosen, Ph.D. San Diego Psychoanalytic Society and Institute

Cordelia Schmidt-Hellerau, Ph.D. Boston Psychoanalytic Society and Institute

Robin L. Turner, M.S.W., Psy.D. St. Louis Psychoanalytic Institute

Geographic Rule Training and Supervising Analysts

Daniel Jacobs, M.D. Cincinnati Psychoanalytic Institute

Geographic Rule Supervising Analysts

Ralph Beaumont, M.D. Greater Kansas City Psychoanalytic Institute (Provisional)

George E. Gallahorn, M.D. Washington Center for Psychoanalysis

Evelyne Albrecht Schwaber, M.D. Pittsburgh Psychoanalytic Society and Institute

Hugo Zee, M.D. New Orleans-Birmingham Psychoanalytic Center

Child and Adolescent Supervising Analysts

Lee I. Ascherman, M.D. New Orleans-Birmingham Psychoanalytic Center

Silvia M.V. Bell, Ph.D. Baltimore Washington Center for Psychoanalysis

Benjamin James Bennett, IV, M.D. Houston-Galveston Psychoanalytic Institute

Jay Alan Davis, M.D. Houston-Galveston Psychoanalytic Institute

Paul C. Holinger, M.D. Chicago Institute for Psychoanalysis

Michael Singer, Ph.D. Michigan Psychoanalytic Institute

Geographic Rule Child and Adolescent Supervising Analysts

Charles A. Mangham, Sr., M.D. New Center for Psychoanalysis

Jill M. Miller, Ph.D. New Center for Psychoanalysis

Dear Colleagues:

As Members of the American Psychoanalytic Association, we are all also Members of the International Psychoanalytical Association. Thus, our votes are deeply important in helping to determine the standing and direction of psychoanalysis in the world. Here is your chance-please inform yourselves, and please VOTE!

Very best wishes, Lynne Moritz, President

The winner of the election for president of the International Psychoanalytical Association will serve two years as president-elect beginning at the end of the Berlin Congress in July 2007. He will take office as president in July 2009, serving two years. Seven of the nine candidates for North American representative will take office at the end of the Berlin Congress and will serve two-year terms. The ballots were sent out February 28, 2007, and must be received by May 31, 2007.

Charles Hanly

I am running to be

IPA president to focus

the organization on what is the most impor-

tant issue we face: the

shrinking size of psy-

choanalytic practice. The

IPA has grown to take

on many goals. I want

As I talk to our mem-

bers about the IPA, I

hear one refrain over

and over. "What use is

the IPA to me?" Some

years ago, while running

for president-elect of



Charles Hanly

to focus our energies, for a short period, on this major problem which affects us all. As the largest psychoanalytic organization in the world, the IPA has the heft, funds, and resources to meet our mutual challenge.

Do we suspend all other activities? No. In research, "focusing" means we commit significantly to international research that is showing that analysis works. At congresses, it means major sessions sharing techniques developed by individuals and societies that have stellar records at growing analytic practices. It means sending analyst-consultants who have increased practice size to visit societies with individuals who are struggling. In communications, it means shifting our focus to the outside world. There are places—Sao Paulo, Toronto, Paris, Michigan-where analysis gets good press regularly and practices are thriving. Let's share their techniques.

I'm delighted to have an incomparable running mate from APsaA, Gunther Perdigao of New Orleans, who organized and ran the APsaA-FEPAL meetings. Between us we have 40 years of IPA experience and speak five languages.

I believe I have the administrative experience, the record of success, and academic credentials to be able to lead this intensification of focus. I was educated at the University of Toronto and declined a Rhodes Scholarship

to accept a Woodrow Wilson Fellowship (Oxford). I became a professor of philosophy, clinician, and ultimately training analyst. I served as director of the Toronto Institute and Erik H. Erikson Fellow at Austin Riggs Center. My psychoanalytic writings appear in the curricula of institutes in all regions of the IPA and include three books and 75 publications. I was elected to three Executive Council terms as vice-president North American (1993-2001) and two terms to the Board of Representatives as Global Representative (2003-2007).

I'm upbeat about growing analytic practices, because I already helped expand psychoanalysis, having received a series of IPA appointments involving increasing responsibility until I took charge of all new group activities in the three regions of the world. Now let us help each other do what we cherish most: practice more analysis.

Bob Pyles



the American Psycho-Bob Pyles analytic Association, I heard the same comment about our own Association. We don't hear that anymore.

The "Crisis in Psychoanalysis" hit our country early. Government intrusions, HMOs, managed care, and competition from other groups left us shocked and numb. We thought we were protected by private practice-but we weren't. Declining numbers of patients and candidates made it clear that our profession was facing extinction.

We rallied. As APsaA president, I spearheaded our efforts to develop a coordinated program of advocacy, litigation, and public information. We launched initiatives to bring psychoanalysis into the community and the universities. We hired a public relations professional and mounted a media campaign. Our efforts paid off. Our caseloads, membership, and recruitment have steadied, we are in a position of great influence on Capitol Hill, and Freud has been on the cover of Newsweek.

The "crisis" has now descended on the other regions. Like APsaA before it, the IPA must transition from a purely scientific and educational body to one that can help our societies meet the diverse threats arising in their respective countries. I chair the IPA committee charged with this task.

We live in a global society. A threat to psychoanalysis in any one country endangers us all, and a victory in one country strengthens us all. The IPA must function as a strategic center to gather information, coordinate strategies, and respond with practical help.

We must maintain the highest educational standards while safeguarding creativity and organizational cohesion. The "Three Models" proposal, from the IPA Education Work Group, which I chaired, will promote these critical values.

Finally, we must continue to bring psychoanalytic thinking to bear on world events. The address of our president, Claudio Eizirik, to the U.N. marks our finest hour so far.

This is my agenda, much of it to be carried out by small regional and interregional conferences on education, science, and clinical practice. I have many years of leadership experience in the IPA, and have served on the board and the Executive Committee, I would be honored to lead this effort.

Harriet I. Basseches

I seek the position of

North American repre-

sentative to the IPA to

help enhance commu-

nication between indi-

vidual members and

the IPA. For too many,

especially in the Amer-

ican Psychoanalytic

I was elected as a

North American repre-

sentative to the IPA

board in June 2005, and

then, by the board itself,

to the Executive Com-

mittee. Shortly there-

after I was named

coordinator of the IPA

Having grown up in

an institute where serv-

ice to our local institute,

as well as to our national

and international organ-

izations, was valued, it

seemed natural to par-

ticipate in institutional

activities. Thus, while



Harriet I. Basseches

Association (APsaA), the IPA has little real meaning to daily psychoanalytic life. I would work to change that in order to create the opportunity for personal, two-way dialogue between the members and the IPA through the North American representatives. I also would seek to foster a closer relationship between the North American representatives and the umbrella organization of IPA groups in North America—the North American Psychoanalytic Confederation, known as NAPsaC. I believe that such closer ties can benefit the North American region, including by more effectively communicating our North American concerns to the central IPA governance. My experience with governance and communication—as former president of the New York Freudian Society (NYFS), former president of the Confederation of Independent Psychoanalytic Societies (CIPS), current chair of NAPsaC—and my long-standing involvement in APsaA affairs when I was on the editorial board of TAP, gives me the background to succeed in encouraging both forms of communication, with individual members and between the representatives and NAPsaC. I hope you will consider voting for me.

Peter Blos, Jr.



Peter Blos, Jr.

funded Development of Psychoanalytic Practice and Training Program (DPPT). This program, now in its fourth year, funds a variety of research and programmatic responses to the acknowledged worldwide attrition in the number of analytic candidates and patients. It is striking and unfortunate that in the 2006 grant application period there were no applications from North America. Should I be elected to a second term, dissemination of information concerning this funding opportunity to the NA electorate will be a high priority.

As a member of the board and of the Executive Committee I have taken part in many decision-making discussions. Issues have included the development of educational policy for both adult and child analysis, financial allocations, and membership dues and benefits.

A second term of office will allow me to continue to be engaged in these matters as well as to be responsive to new proposals and initiatives. I will represent the views of NA psychoanalysts and I shall utilize my experience to work constructively with the new board while providing continuity as the new IPA director general takes office in July 2007.

Fred Busch



Fred Busch

many of you may know me via my publications and presentations, my involvement in the world of psychoanalytic organizations is probably not so well known. Starting in the early 1970s (in the fledgling candidates organization), I have stayed committed to the issues of how psychoanalytic organizations can support our profession. As a list of my involvement in the organizational side of psychoanalysis will come with the ballots, I will not mention them here.

In the recent past there has been a remarkable transformation in our thinking as we have become enriched by the views of understanding and treating patients that originate outside our national borders. Thinking of our professional interests in worldwide terms can also bring depth, freshness, and color to our perspectives. Organizationally, I see the IPA as a powerful force for the cohesion and development of the profession of psychoanalysis. I would see my own role in the discussions in the IPA as flexibly representing the needs of the North American region, while working for the overall goals of our international community.

Arthur Leonoff

It is hard to be a psy-

choanalyst today in

North America, Patients

continue to need our

help but access is lim-

ited by affordability,

insurance benefit eligi-

bility, and a health care

culture that favors brief,

I hope you will vote

for me for IPA North American representative.

I will end my four-year

term as IPA treasurer,

where I have made sev-

eral contributions finan-

cially, educationally, and

organizationally.



Arthur Leonoff

symptom focused interventions. Thus, we do as catch can but risk a critical dilution of identity and method. Our training and actual work are at risk of being too divergent. Further, there is a homogenization and ratcheting down of what constitutes a mental health service and who is eligible to provide it.

Perhaps we react by becoming more insular, engaging in depleting internecine struggles. This turns us inwards and we lose the effectiveness that comes with broader affiliation and outreach. Our local traditions and masters are surely important but pale in comparison to what we gain when we look and link beyond ourselves. I would like to capitalize on the international perspective of the IPA to further connect our component groups to shared goals and common purpose. The North American region still labors to define itself, but our groups are too loosely interactive or interconnected. I want to use this opportunity to work towards a true regional identity and to broaden North American links with colleagues around the world. The IPA represents the psychoanalytic community beyond ourselves, which in my view should be the focus of our investment.

Nadine Levinson



Nadine Levinson

As treasurer, I developed a reformed dues system that has one level of dues for everyone and an accompanying robust dues discount system. I serve on a special IPA-IPSO Work Group to create a better partnership with our candidates. As an IPA officer, I have first hand knowledge of the many IPA activities, programs, and policies, including participation in the ongoing development of the new IPA Educational Procedural Code, oversight policies, new groups development, and current research mandates.

In addition to my contributions as IPA treasurer; I continue to be active at the San Diego Psychoanalytic Society and Institute as chair of the TA Committee and serving on the Education and Progressions Committees. I was co-founder and treasurer of the American Psychoanalytic Foundation. I was appointed as one of the three founding directors of Psychoanalytic Electronic Publishing (PEP) and serve as president and co-managing director. In 2002, APsaA awarded me the Distinguished Service Award.

I would be honored to serve the IPA again as a NA Board representative. I believe in a sturdy IPA as a global umbrella for psychoanalysis, but also one that has strong regional and local links to all the societies.

Jon K. Meyer



Representing North America is not easy. Since we belong to the American Psychoanalytic Association, the Canadian, CIPS, and independent societies, the only way to be representative is to build

bridges. I am a member of APsaA and proud to have been your president, but I am also an Honorary Member of the Canadian, belonged to the New York Freudian Society, and established the first consultative committees between CIPS and the Association and the New York Freudian and the Association. In an adverse climate, we are stronger together than separate.

To meet our challenges, I initiated strategic planning, defended us state-by-state, and advocated for our patients' access to care. At the level of IPA organizational challenges, I chaired the IPA's House of Delegates and then served on the Structure and Mission (SAM) Task Force to reorganize the IPA. I believed that to better serve psychoanalysis, the IPA needed to function more effectively. In addition to advocacy, I never forgot teaching and promoting psychoanalytic ideas. I received your Edith Sabshin Teaching Award, served on the editorial board of JAPA, have been the Erik Erikson Scholar, currently chair the COPE group on reanalysis, and am on the Steering Committee of the *Psychodynamic Diagnostic Manual*, working to get psychodynamics back into diagnostic thinking.

I hope my broad experience and effectiveness make sense to you and I hope for your support.

Beth Seelig



Beth Seelig

can representative to the IPA will be to work collaboratively to find creative approaches to the challenges facing our profession.

We live in difficult

times for psychoanalysis.

Although psychoanalytic

ideas permeate society,

psychoanalysis must

cope with an adverse

economic and political

climate. My goal if

elected North Ameri-

At present I serve on APsaA's Executive Committee, as secretary of the BOPS, and as councilor-at-large. My service to the IPA has included being secretary, then North American chair of the IPA Committee on Women and Psychoanalysis, and subsequently North American chair of the Committee on Psychoanalysis and Society. In these capacities, I organized and co-chaired two very successful international conferences, in 2000, "Women and Power: Psychoanalytic Perspectives on Women in Relationships, Groups, and Hierarchies," and in 2005, "Interdisciplinary Perspectives on Trauma." I am professor of psychiatry, training and supervising analyst, and director of the Emory University Psychoanalytic Institute in Atlanta, Ga. I have presented papers in North America, Europe, and Latin America and published on altruism, sado-masochism, trauma, female psychology, and consultation in the course of psychoanalysis.

The challenges facing psychoanalysis are not confined to one region. Unfortunately, disputes over APsaA governance have tended to divert our collective focus from meeting these external challenges. If elected, I will work with my colleagues from all regions to find solutions to the real world problems facing our profession today.

Beth Kalish Weiss

IPA is uniquely suited to address the growing internal and external threats to psychoanalysis. A unified conceptualization would lead to a solid core which could recapture the inspirational quality prevalent in the past.

My focus will be on the maintenance of high educational, scientific, and ethical standards. My previous experience in academic administration on the graduate level of several universities, as well as offices held in CIPS, and in my own psychoanalytic society, support my commitment to these ideas. I served in the House of Delegates during its last years of existence. Because of my interest in research, I collected data by an international survey regarding threats to institutes by unaffiliated groups. The results showed increasing numbers of such groups competing with institutes of the Association and the IPA. Discussions led to creative innovative ideas for the future of psychoanalysis.

Recent state laws, which license psychoanalysis with appallingly low educational standards, have been a primary concern of mine. I initiated the California Psychoanalytic Confederation (CAPsaC), consisting of all IPAaffiliated institutes in this state, in order to monitor any legislation that could dilute standards of training or in any other way threaten psychoanalysis.

I believe the spirit of creative innovation must be maintained in the current organizational structure. It would be a privilege to serve on the Board of Representatives at this crucial time in our profession.

Sharon Zalusky

I ask to be re-elected as North American representative to the IPA Board. I am proud to have been part of a board that has strengthened psychoanalysis by embracing the diversity, which we find worldwide. We have done so while underlining our shared deep commitment to psychoanalytic education and practice. We are stronger because we acknowledge our differences and are able to work together to develop an aggressive concentrated plan to build the various regions and psychoanalysis in general. North America needs to have a strong presence in the IPA. We have much to learn from our colleagues, but we also have much to contribute.

Dialogue is essential to the development of psychoanalysis worldwide. While speaking to each other, we discover and reinforce our common roots. Our own thinking expands. As a member of CAPSA, the APsaA Program Committee, and as an editorial member of the *International Journal of Psychoanalysis*, I continue to demonstrate my commitment to the exchange of psychoanalytic ideas with colleagues worldwide.

I believe I am part of the new breed of psychoanalysts in North America whose training and appreciation have had many roots. Because of my own experience, I am aware on a very personal level of our complex history, which both separates us but also brings us together: We have shared needs and desires. I would like to represent them openly on the IPA Board.

Analyst/Researcher Begins Landmark Trial

Marie Rudden

Although our field has produced many studies that can imply that psychodynamic psychotherapy is efficacious, the development of randomized, controlled trials (RCTs), carefully constructed according to rigorous and accepted scientific standards, has been challenging. Such studies are very costly to conduct, and obtaining funds for psychotherapy clinical trials requires an expertise in study design and a dedication to communicating with an academic community that insists on evidencebased treatments. Scientifically credible outcome research involves each of the following components: developing a manualized treatment that is truly psychodynamic; insuring adherence to the treatment; deciding upon an appropriate but less active comparison condition; choosing widely recognized, reliable, and valid outcome and follow-up measures; and devising appropriately sensitive data analytic procedures. All of these components are time consuming and require sophisticated training and ongoing consultation with experts in academic research. It is the vanishingly rare researcher who can manage to combine the development of such expertise with an ongoing commitment to practicing psychoanalysis.

Something of a force of nature, Barbara Milrod has dedicated her career toward accomplishing just this. An *APsaA* certified psychoanalyst who typically treats three or four patients in psychoanalysis at a time and an associate professor of psychiatry at Weill Medical College of Cornell University, she has developed a gold standard clinical trial that was published in the February 2007 *American Journal of Psychiatry*. The outcome study yields extraordinary results: For 49 patients with primary DSM IV panic disorder, a response rate of 73 percent for psychodynamic therapy, as

Marie Rudden M.D., *is a member of the* Western New England Psychoanalytic Society and a training and supervising analyst at Berkshire Psychoanalytic Institute, a new training facility of APsaA. compared with only 39 percent for applied relaxation training was documented, with a drop-out rate of only 7 percent in psychoanalytic psychotherapy as compared with 34 percent for relaxation training. Milrod and renowned psychotherapy researcher Jacques Barber have now teamed up to head an NIMH-funded two-center (University of Pennsylvania and Weill Medical College) RCT of psychodynamic psychotherapy versus cognitive behavior therapy versus applied relaxation training for 233 patients.

Milrod began the arduous journey toward this outcome when she and Columbia Psychoanalytic-trained Fredrick N. Busch, mentored by co-authors Arnold Cooper and Theodore Shapiro, wrote a manualized psychoanalytic treatment, the Manual of Panic-Focused Psychodynamic Psychotherapy, published by the American Psychiatric Press in 1997. This followed several years of Busch's work with M. Katherine Shear, a respected psychiatric researcher and panic disorder expert, studying common dynamics and defenses of patients who had panic disorder. When Milrod discussed the initial pilot study design with Jean Roiphe and me, former analytic classmates at NYPI, during our monthly poker game, we volunteered to participate in the initial group of study therapists, as did Andrew Aronson, another classmate. and Meriamne Singer, all graduate analysts. Study therapists have continued to be clinicians with at least three years of psychoanalytic training. The pilot open trial suggested that the treatment had a strong effect on patients' anxiety and accompanying depression, paving the way for Milrod to obtain a coveted Career Development K grant from the NIMH. The RCT that is now being published represents research from that project. In addition to the outcome research, pilot process studies have been developed as part of the RCT.

Milrod's choice of studying panic disorder patients was a calculated one. It is a disorder with considerable anecdotal data within the psychoanalytic field (including one of her own papers) suggesting that it is treatable by the analytic method, and it is one in which excellent research benchmarks from the non-psychoanalytic research world exist. Furthermore, there is room for improvement in response and remission rates in the treatments of panic disorder that have been previously studied. Milrod has also attempted to study a modified form of this treatment in adolescent panic patients, but it has not yet been possible to obtain funding for this project, despite the apparent need for such research in this population.

Milrod was told by an early analyst colleague that her research endeavor would "have a huge impact on the analytic field, but you will never receive a word of thanks for it by the institutes," a comment on resistance within the psychoanalytic community to scientifically credible quantitative research. She does find her dual role as psychoanalyst and researcher to be a challenging one. Mainstream psychiatric researchers tend to be biased against psychodynamic therapies because of the paucity of rigorous research supporting them, while psychoanalytic institutes tend to view her work with some suspicion: "One colleague thought that I did psychopharmacologic research. Another senior analyst at my institute told me that he hoped that one day I would return to doing 'real analytic treatment.' "However, her work is acclaimed by influential psychoanalysts such as colleague Glen Gabbard: "Barbara Milrod has blazed trails into terrain where few psychoanalysts have the courage to go. Her research is a landmark in the efforts of psychoanalysts to gain scientific credibility."

Milrod gives considerable credit to her coauthors Busch, Shapiro, and Cooper for their extensive work on the early projects, as well as to Andrew Leon, professor of biostatistics at Weill, who has helped her enormously with learning details of study design, to her primary K grant mentor, John Clarkin, professor of clinical psychology in psychiatry at Weill, and to Shear and Abby Fyer, accomplished researchers in panic disorders for their generous mentoring. She is palpably excited about the twocenter study, which represents the first time in which a psychodynamic treatment for anxiety disorders will be tested prospectively against cognitive behavioral therapy in such a large patient group.



SCIENCE and Psychoanalysis

Focus on Personality Disorders

The Associa-

tion for Research

in Nervous and

Mental Disease

held its 86th

annual meeting in New York City

on December 8, 2006. The topic,

unusual for the

organization, was

Robert Michels



Robert Michels

Personality Disorders. The organizers of the program included two psychoanalysts—John Oldham and Otto Kernberg.

There were six papers on biologic and natural scientific approaches to these conditions. Svenn Torgersen from Oslo reviewed epidemiologic studies. The overall prevalence is about 10 percent. Antisocial is more common in males, dependent more common in females. Most of those afflicted are less educated, however obsessive-compulsive correlates with higher socioeconomic status. Ted Reichborn-Kjennerud, also from Oslo, then discussed genetic factors drawing on data from twin studies. He emphasized the importance of environmental-genetic interactions and estimated that, on the whole, about 50 percent of the etiology can be attributed to genetic factors. Larry Siever, from Mount Sinai in New York City, presented a wide range of neurobiologic research, and anticipated a theme of the meeting by introducing the concept of "endophenotype," an underlying dimension or clinical characteristic that is related to the disorder and that can be linked to a susceptibility gene. David Silbersweig of Cornell University presented fascinating findings from

his functional brain imaging studies of patients with borderline personality disorder, showing abnormal fronto-limbic emotional and behavioral inhibitory function. Their brains suggest deficient control of impulses-a core clinical feature of the disorder. Patricia Cohen of Columbia University offered a developmental perspective. She suggested that many personality disorders are not as stable in the transition from adolescence through young and middle adulthood as our traditional notions assume, and that, in general, core psychological characteristics (possibly temperamental or endophenotypes) are more stable than symptoms or symptom clusters. This came up several times during the day, and relates to the contrast between reliability (e.g., surface phenomenology, symptoms) and validity (e.g., core characteristics) in the definition and diagnosis of these disorders.

rather than rationality? He demonstrated that different brain regions were involved in emotional as compared to rational decisions, and conjectured regarding the evolutionary significance of the two systems and their possible maladaptive consequences in our contemporary world.

The afternoon was devoted to five more clinically immediate papers. Drew Westen of Emory compared psychodynamic, cognitivebehavioral, trait and integrative models, along with therapeutic strategies appropriate to each. Otto Kernberg of Cornell described his transference-focused psychotherapy, and presented the results of a randomized clinical trial comparing it with dialectical behavior therapy and supportive therapy. He found many similarities but also interesting differences. Transference-focused psychotherapy was most successful at the combined goal of maintaining patients in treatment and facilitating their improvement. Paul Links, of Toronto, reviewed the effectiveness of dialectical behavioral therapy, and finally Aaron Beck of the University of Pennsylvania did the same for cognitive-behavioral therapy. These three therapy-focused presentations made clear that

Our attention is shifting from symptoms and diagnoses to patterns of psychosocial functioning and mechanisms, from surface to depth, from whether treatment works to how it works, and for whom.

The final basic science paper was The Thomas William Salmon Lecture presented by Jonathan Cohen, the Higgins Professor of Psychology at Princeton. Cohen, a psychiatrist and cognitive psychologist, studied functional magnetic resonance images of the brain during complex mental tasks, the type in which psychoanalysts might be interested. He described studies in which subjects made decisions (some "moral," selecting between alternatives that involved responsibility for life and death; others "economic," making choices that involved selecting alternative financial rewards). He was particularly interested in irrational or suboptimal decisions—How did their brains function when individuals were governed by emotions

systematic clinical research on the efficacy and effectiveness of these treatments with difficult borderline patients is possible and can be fruitful. The era of anecdote and belief is being supplanted by an era of evidence and knowledge. The final clinical presentation was by Mary Zanarini of Harvard and McLean who described a I0-year prospective follow-up of 362 patients with borderline personality disorder. Four out of five attained good psychosocial functioning and, repeating a theme that reverberated through the day, the more dramatic symptoms resolved most quickly while the core psychological characteristics were slower to change.

Robert Michels, M.D., is Walsh McDermott University Professor of Medicine and Psychiatry at Cornell University. He is training and supervising analyst at the Columbia University Center for Psychoanalytic Training and Research.

The Analyst at the Morgue: Helping Families Deal with Traumatic Bereavement

Bruce H. Sklarew

The RECOVER Program in Washington, DC, provides no-cost support and counseling for families who arrive at the Office of the Chief Medical Examiner (the morgue) to identify their family members who have died suddenly—homicides, suicides, drug overdoses, accidental death, SIDS, and unattended death. This unique collaboration between the District of Columbia Office of the Chief Medical Examiner (OCME) and the Wendt

Center for Loss and Healing was initiated in November 1999 and remains the only program in the United States that provides onsite crisis grief counseling to all families every day of the year.

RECOVER was initiated by my chance meeting in a sushi bar in the spring of 1998 with the newlyappointed chief medical examiner for the District of Columbia, Jonathan Arden. When Arden spoke of the 1500 families that come to the morgue every year because of sudden

or traumatic deaths, I suggested a program in which specially trained therapists could provide expert and sensitive support for families at the morgue, as well as follow-up services and efforts to help bereaved children.

Trained grief therapists have assisted more than 7,000 families (13,000 people), accompanying them through the identification process and providing practical information, emotional support, and follow-up letters and phone calls offering continuing services. Next of kin are required to identify the deceased by viewing Polaroid photographs of stark, often bloated faces at the medical examiner's office before the body can be released.

Once a sufficient rapport in the intervention has developed, an OCME intake worker is called in with a photograph of the head of the deceased. To offer some control in this often overwhelming situation, family members decide when to turn over the photo. Some seem on the surface to be relatively matter-of-fact, using



defenses such as denial, avoidance, and isolation of affect, or even joking. On the other extreme, some family members engage in a desperate state of grief—overwhelmed, enraged, screaming, and in need of nurturance and help to contain them. Reactions vary from running out of the room to signing the photo after a quick glance to viewing it for many minutes to asking for a copy, feeling calmed, stroking or kissing the photo and saying, "Thank God I only have to see a photo."

The basic approach is to enhance a sense of safety and security among family members, thereby providing a Winnicottian holding environment. The bereavement work is more like psychological first aid than therapy with efforts to stabilize, meet basic needs, mitigate the stress, and facilitate problem solving. The approach is to respect and support the defenses and thus to prevent regression. In addition to the risk of suicide to avoid depression that they cannot bear, others may act out with impulsive action including verbal attacks, violence, substance abuse, and premature sexual behavior. A suicidal 15-year-old, who within a year lost his great-grandfather, father, and a series of aunts, uncles, and cousins, explained that the "sadness comes out as anger. Anger makes the sadness go away. Feeling it [the anger] usually works; doing something like beating up someone always works."

The bereavement workers are subjected to secondary trauma. They can overidentify with a survivor, become enmeshed, and have difficulty respecting boundaries. They endure other countertransference reactions, transference reactions, and projective identification. They are subject to intrusive violent images and thoughts

and other symptoms of PTSD as well as the odor of the morgue.

In her fourth homicide of the day, one worker was suspicious of a husband whose wife had been shot in the head; she described her acute discomfort sitting with him, wondering if he was the murderer. Another worker felt strange tension in the room when a 16-year-old boy identified his father. The father had abused the boy during his first six years. Protective custody had intervened and they had not seen each other for 10 years. The son said

he was particularly interested in doing the identification because he had the need to see his father dead. The father of a toddler killed by a truck asked to bring her teddy bear to the autopsy suite so she would not be alone.

This work highlights many aspects of traumatic bereavement. Traumatic loss-related feelings include depression, anxiety, fragile self-esteem, dysregulation, somatization, internalized aggression, emptiness, and hopelessness that may continue for many years, particularly at anniversaries, holidays, and special life cycle events.

The role of the socially engaged community analyst was begun by August Aichhorn, D. W. Winnicott, and John Bowlby with delinquents, Anna Freud with children separated from parents during World War II, as well as Erik Erikson, Karl Menninger, and Viola Bernard. *Continued on page 17*

Bruce H. Sklarew, M.D., who practices in Chevy Chase, Md., is chair of the Forum for Movies and Mind and film programmer for APsaA. He previously was chair of the Committee on Psychoanalysis in the Community and faculty at the Baltimore Washington Institute for Psychoanalysis.

Bereavement workers exemplify that role. Multiple recent interventions and consultations in situations of war, terrorism, traumatic loss, soldier children, homelessness, and exposure to violence are described in a book that originated from APsaA's Committee on Psychoanalysis in the Community—Analysts in the Trenches: Streets, Schools, War Zones (Eds. Sklarew, Twemlow, and Wilkinson, Analytic Press).

Personality Disorders

Continued from page 15

The day was bracketed by two comprehensive overviews, one by Joel Paris of McGill and the other by Andy Skodol of Columbia (but en route to Arizona). Paris discussed the under-recognition of these disorders by clinicians, while Skodol, who is leading the DSM V efforts on Axis II, discussed the contrast between evidence suggesting improvement over time and the traditional notion of longterm stability. He offered a model of manifest symptom clusters that come and go against a background of more stable traits, together with a possible diagnostic system of mixed categories and dimensions.

The most important thing about the meeting is probably that it occurred under the aegis of a major neuroscience organization. It is not surprising that personality disorders are complex and multifaceted, that they have important genetic and biologic determinants, that they are associated with specific patterns of brain functioning, that they can be treated, and that the type of treatment employed makes a difference. Yet each of these propositions has been disputed. The accumulation of a significant and consistent body of evidence on these and related points means that the field will attract a growing pool of resources-money, of course, but more importantly, talent and intellectual creativity. Our attention is shifting from symptoms and diagnoses to patterns of psychosocial functioning and mechanisms, from surface to depth, from whether treatment works to how it works, and for whom. Personality disorders, along with their treatment—psychoanalytic and otherwise—are finally receiving the attention they have long deserved.

New Affiliate Members Winter 2007 Meeting of Members Waldorf-Astoria

Benjamin C. Addleson, Ph.D. Carlos Almeida, M.D. Denise Ambre, M.S.W. Arthur James Ashe, M.D. Isabelle Babcock, Ph.D. Lauren A. Berg, M.A., L.P.A. Behrooz Bernous, Ph.D. Terry G. Blanken, Ph.D. Kevin Boileau, Ph.D. Deisy C. Boscán, Ph.D. Kimberly D. Boyd, M.D. Adam M. Brenner, M.D. Anne Buchinski, M.D. Christine Burbank, M.S.W. Sun Ju Chung, M.D., Ph.D. David Cole, M.D. Wendy Jane Comstock, M.D. Nancy Crawford, J.D. Jacqueline M. Delon, M.A., M.F.T. Edward Dewey, Psy.D. Diane E. Donnelly, Ph.D. Laurie Friedman Donze, Ph.D. M. Carole Drago, L.I.C.S.W. Robert L. Fenton, M.S.W. Cia Foreman, Ph.D. Mary Frank, M.D. J. David Frankel, Ph.D. Marsha (Pik-Nathan) Friedman, Ph.D. Stacey L. Fry, Psy.D. Linda E. Gold, A.C.S.W., C.S.W., B.C.D., L.M.S.W. Michael D. Groat, Ph.D. Richard I. Grossberg, M.D. Richard Hale, Ed.D. Jane Halperin, Ph.D. Amy Handler-Caldarola, L.M.F.T. Mari Katharine Hayes, Ph.D. Stewart Hockenberry, Ph.D. Connie Huang, M.D. Andrew W. Jen, Ph.D.

Mingeol Kim, M.D. Linda Shepard Kolodner, M.S.W. Sharon Lavon, L.C.S.W. Michael D. Levin, Psy.D. Joanna Lhulier, Psy.D. Esther Lowenstein, Psy.D. Laurie Malkoff, M.D. Lisa Marcus, Ph.D. Joel F. Martell, Ph.D. Paul A. Matkovic, Brian McAlpine, M.D. William R. Meeker, M.D. Lisa Anne Miller, M.D. Julia Mitrevski, M.D. Susan Moslow, Psy.D. Barbara Bridges Murray, M.D. Robin L. Onikul, D.D.S. Tae Young Park, M.D. Jeanette Redmond, L.C.S.W., B.C.D. Lora E. Reif, Ph.D. Paul P. Roberts, M.D. Shari L. Sengupta, M.D. Dhwani B. Shah, M.D. Laurence J. Sprung, M.D. Laura Steele, M.D. Beth Steinberg, Ph.D. Nancy G. Stevens, M.D., M.P.H. Barbara Teter, M.S. Robert K. Tittmann, M.D. Vaia Tsolas, Ph.D. Paula Waisman-Said, Ph.D. I. Marc Wallis, L.C.S.W., B.C.D. Laura Weiss, Ph.D. J. Candace Weissman, J.D., Psy.D. Jason A. Wheeler, Ph.D. T. Hilda White, M.D. lamie Winnick, M.D. Nancy C. Winters, M.D. Diane M. Wolman, M.S.W. Leigh Ann Zeller, M.S.W.

the illustrator-

designer Mo

Willems, and

others, who

alternated at

the lectern with

practicing psy-

choanalysts. The

analysts included

Steven Marans,

Childhood, Fears, and Stories: Impressions of a Symposium on Psychoanalysis and Children's Literature

Ellen Handler Spitz

"I waaaant my Momm-my!" wails an elfin white-haired Irish bard from the Mountains of Mourne. It is none other than Martin Waddell, legendary author of dozens of children's books, honoree of the coveted Hans Christian Andersen award. Imitating the fearful cry of an apparently abandoned child, he is reading, at a fascinating psychoanalytic conference in New York, from his 1992 picture book, *Owl Babies*, winner of the 1993 Parents Prize. A few moments later, to the delight of his enchanted audience, he pirouettes across the stage while flapping his wings in imitation of an owl mother returning to her three wide-eyed owlets who, with trembling anxiety, await her arrival.

When I learned that psychoanalysts Linda Mayes of the Yale University Child Study Center and Mary Target of the Anna Freud Centre in London were planning a conference on children's literature that was to highlight the topic of fear, I responded with élan because, ever since my own first article appeared in 1988, this has been a recurrent theme in my teaching, lecturing, and writing. I even devoted a key chapter to it ("What Is Too Scary?") in my latest book, *The Brightening Glance: Imagination and Childhood.* My expectations were, therefore, somewhat Dickensian.

Organized as a day-long symposium at the Bank Street College of Education on October 21, 2006, the program featured prominent children's book authors, among them, besides Waddell, such luminaries as Lois Lowry, Gregory Maguire, Robie Harris,



Ellen Handler Spitz

Alicia Lieberman, Judith Yanof, Karen Gilmore, Nicholas Midgley, Arietta Slade, and Jenny Stoker. Filling the hall to capacity was a cross-section of mental health professionals, early childhood educators, children's librarians, authors, and concerned citizens, some of whom had traveled long distances to attend. I noted that very few women of color were present and that the male sex was woefully underrepresented (the men in attendance were nearly all invited speakers); this skew, however, should be seen as a societal problem worthy of attention not a failing of the organizers. A colorful book exhibit accompanied the talks, and its displays garnered an eager crowd.

Lively and compelling as well as grave, exposing and exploring feelings as well as ideas, this conference struck me as a brilliant model for interdisciplinary colloquia involving psychoanalysis. My effort will be to convey its flavor, its vibrant dynamism for, unlike ordinary academic or psychoanalytic meetings, it crescendoed—as the day unfolded—and grew more and more emotionally riveting, inspiring, and, above all, personal. Here, in my rendition, are snippets of some of the highly charged stories that emerged, stories that show how both writers and analysts draw creatively on their own childhood experiences of fear. Each of these stories was core to the presentations that included them.

First, however, let me frame them by referring briefly to Stephen Sondheim and James Lapine's 1987 musical masterpiece based on fairy tales, Into the Woods. This work, though germane to the conference theme, was never mentioned; yet, it was-at least for me and possibly for others-a tacitly hovering presence. Into the Woods is a drama that, from its outset, requires a narrator who appears to stand outside the action. Indeed, in fact, he does manage to remain safely beyond the vicissitudes of his story all the way through Part I. In Part II, however, a terrifying and vengeful giant appears; the world shifts. Ambushed and captured by the panicky characters whose story he has been telling, our hapless narrator is catapulted into the tale himself. By co-opting him, the characters render him hors de combat, and they must now take over their own story. They must master their anxiety; they must save themselves. All ethical complexities now become their responsibility. No longer reliant on an external narrator, they must script their own drama in addition to continuing to play their separate parts.

What is the relevance of this? Within the context of the show, its relevance is, of course, that, as children grow up and move out into the world beyond the "happily-ever-after" endings of childhood stories, they must take over the narration of their own life histories and assume the attendant responsibilities. Its relevance here, I submit, is as an analogue to what went on at this Bank Street conference. The organizers, of course, could hardly have predicted this in advance or plotted it. The narrators, namely, the invited children's book authors and analysts alike, simply refused to occupy a safe space outside their stories. Unlike the narrator in Part I of Into the Woods. they chose to enter and to become parts of their own frightening tales. Moreover, they shared these experiences with their audience, which was extraordinary. Almost every speaker at this symposium abjured an external vantage point, refused—that is—to retreat to some high moral or intellectual ground beyond the range of his or her own disturbing material. Shunning pretensions of objectivity, the speakers took us inside with them. They spoke with candor and courage about their own real lives, not just their work. Continued on page 19

Ellen Handler Spitz, Ph.D., Associate Member of APsaA, is Honors College Professor of Visual Arts at the University of Maryland and the author, most recently, of The Brightening Glance: Imagination and Childhood, to be published in paperback in 2007 by Anchor-Vintage Books.

Rather than being reduced or trivialized by being "theorized," therefore, children's lives and literature were, on the contrary, at this remarkable conference, honored, and the topic of fear was neither tamed nor distanced.

In addition to Waddell's dramatic reading of *Owl Babies*, Pam Munoz Ryan, a prize-winning writer of adolescent fiction, told us that as a child she was shy and timorous. Unremarkable was informed that they did indeed remember it but that it had occurred quite differently. The raccoon, they said, was a nuisance in their neighborhood and had been destroying property. No benign ice cream truck had come that day; it had been, instead, a fire truck. No nice fellow had intervened in the animal's fate; it had been, in fact, a fireman. And this person had not liberated the furry little creature.

Similar moments studded this mesmerizing conference, and its lessons were clear: Truth sings its own song soft, wild, insistent, and inconsistent. We know it when we hear it, although we often turn away. It appears when we enter our own stories and take responsibility for them, frightening as they may be. My wish is for many more such conferences that stand bravely against the shallow, the quick, and the closed.

to others, she insatiably observed everything around her. Tenderly, she reported that her literary career was inspired by a formidable heavyset eighth-grade English teacher who taught her how to diagram sentences and who routinely turned off the lights while reading great works of literature aloud to her students. Ryan said this teacher would never have remembered *her*, but she, quiet and apprehensive, is the one who, years later, remembers the teacher. When we consider children's literature, we often find that the best writing for young people engages on many levels with just such discrepancies.

To illustrate other differences between the ways children and adults see the world and to point out hiatuses that may open up between what actually happens in childhood and what is remembered and to show how children not only shield themselves from what they fear but are passively guarded by their innocence and ignorance from what may be deeply disturbing to them, a story was told by Steven Marans about a man who remembered a cuddly raccoon caught in a tree when he was a little boy and was later rescued by a kindly Good Humor man. Years afterward, asking his parents if they could recall this incident, he He had shot it dead. To hear a story like this is to tremble empathically and retreat into the museums of our own minds where we set about wondering how much of what we have so assiduously preserved there must be similarly distorted. I am reminded of the Elephant's Child full of "satiable curiosity" in Rudyard Kipling's *Just So Stories*, who cannot fathom why his relatives all spank him when he asks what the Crocodile has for dinner. And of those small children who, watching Walt Disney's *Bambi* and failing to understand the meaning of percussive sounds heard in the distance, tug and pull and keep asking: "Where's Bambi's mommy? When is she coming back?"

Nicholas Midgley, an analyst from London, told of a man who, when he was six or seven years old, feeling in abject despair, was sitting on the kitchen counter with a bread knife in his hand. His older brother entered and sternly warned: "If you do anything with that, I'll hate you forever and never mention your name again." Many years later, this child now fully grown, confronted his brother and asked whether he remembered the incident; whereupon, the brother replied "Yes! Of course. And when I saw you with that knife, I told you to do it, and I have had that on my conscience ever since." Thus, the terrifying memories of two former children, both felt as true, both with profound psychic consequences, and yet in absolute contradiction with one another. One conjures Cain and Abel, and one finds here the kernel of a story that might expand into a spiraling account of disjunctions—fraternal, temperamental, chronological, and, withal, of the warding off of childhood fear as its theme.

Similar moments studded this mesmerizing conference, and its lessons were clear: Truth sings its own song—soft, wild, insistent, and inconsistent. We know it when we hear it, although we often turn away. It appears when we enter our own stories and take responsibility for them, frightening as they may be. My wish is for many more such conferences that stand bravely against the shallow, the quick, and the closed. For just one day at Bank Street, we glimpsed scenes that play behind facades of false certainty and security. We realized that, like it or not, we have all been abandoned children "alarmed into competence," as Gregory Maguire (Wicked) put it in his brilliant lecture on this same occasion. No matter how much we theorize, it will never be proof against the iterative plaintive cry of the baby owl or the knowledge that life and creativity are wondrously unpredictable-on the couch, in the playroom, and between the covers of a children's book: There will always be another way to tell the scary story.



The PDM Hits the Big Time

Dottie Jeffries

Over the course of his career, APsaA member Stanley Greenspan has been both an author and a publisher numerous times. He's published books with some of the largest and best-known publishers in the industry—and he's published with his own foundation. There's one thing he's learned from all these ventures, no book can be successful without a strong sales and distribution program.

Greenspan's most recent endeavor in publishing is the *Psychodynamic Diagnostic Manual* which was published earlier this year and for which he served as project coordinator. As *TAP* readers know, the Manual is a collaborative effort of the American Psychoanalytic Association, the International Psychoanalytical Association, Division of Psychoanalysis (39) of the American Psychological Association, the American Academy of Psychoanalysis and Dynamic Psychiatry, and the National Membership Committee on Psychoanalysis in Clinical Social Work, collectively known in this case as the Alliance of Psychoanalytic Organizations ("the Alliance," for shorthand). "When you self-publish, you don't have the infrastructure of sales and marketing that an established publisher has. So you need a book distributor who can provide those services. And in a situation where you self-publish and use a book distributor, you can actually realize more profits," he continued.

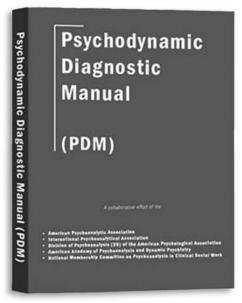
Greenspan set about researching book distributors and discovered Independent Publishers Group (IPG), a book distributor for independent publishers throughout the United States and worldwide. IPG, located in Chicago, was also recommended to Greenspan by several of his colleagues. It turned out by chance that I was also well acquainted with the firm and supported Greenspan in his decision to go with IPG.

"Because of the broad demand for the Manual, I wanted the PDM accessible to as wide an audience as possible and I knew we needed an experienced distributor to accomplish that," remarked Greenspan.

A full service book distributor offers a national sales organization which reaches

"Because of the broad demand for the Manual, I wanted the PDM accessible to as wide an audience as possible and I knew we needed an experienced distributor to accomplish that," remarked Greenspan.

Though several large, prominent publishers were interested in the book, Greenspan was fearful of working with them because of the loss of control authors often experience in the hands of large companies. So the Alliance, a non-profit group, opted instead to retain as much control as possible by self-publishing the Manual. "You're more at the mercy of a publisher than when you're on your own. But selfpublishing means finding a book distributor to get the publication to market," said Greenspan. booksellers (both academic and general), and most importantly, has a strong relationship with the major bookstore chains such as Barnes & Noble and Borders. Such distributors also sell to the major wholesalers (such as Ingram and Baker & Taylor), which in turn reach the smallest of bookstores, the academic market, and public and academic libraries. They also make sure your book is well presented on Amazon and other online retailers, and at relevant book trade and academic meetings. In addition, a range of publicity and marketing services, such as media lists, are offered at no charge or for a nominal fee.



Mary Rowles, title development manager at IPG, says, "The days when a publisher can effectively self-distribute are over. As the book industry consolidates, the costs and complexity of being accepted by the major chains and wholesalers have escalated. IPG frees a publisher or association to concentrate on their core business, while making sure their publications get the widest possible exposure to all markets. And if a publisher wants our expertise in adapting a professional book to a broader audience, we are happy to assist."

The world of non-profit publishers is not new to IPG as the firm also distributes the publications of the Urban Land Institute, Search Institute, The Independent Institute, and The Society for Human Resource Management.

So far, the Manual has been stocked by a number of bookstores across the country as well as by book distributors in Canada and Australia. And IPG has sold the Manual to the Nurses Book Club, a market probably no one in the Alliance ever thought would be reached. A total of 13,000 Manuals have already been sold.

What does the future hold for the PDM? Perhaps the sales of foreign rights (meaning translations in Italian, Spanish, German or other?) and an e-book version of the publication. "The Alliance welcomes further ideas for bringing the PDM to an even larger audience as well as feedback for the first revision (*Psychodynamic Diagnostic Manual II*) scheduled several years down the road," remarked Greenspan.

Dottie Jeffries *is public affairs director of APsaA*.

Help for the Impaired Psychoanalyst

Rita Clark and Jerome A. Winer

The taboo we analysts have that makes it difficult to talk about the storms of our personal lives often keeps us in a posture of denial of dysfunction or impairment. Many analysts go on as if there were no ill, stressed out, demented, or otherwise functionally impaired practitioners. We have our share of impaired persons, just like every other segment of society, and like everyone else, we engage in denial and even outright deception to avoid dealing with the resultant difficulties. This climate of avoidance helps no one and can lead to many problems that not only affect us, but also our colleagues, students, supervisees, and patients. When this denial breaks down and there is a scandal, the image of our profession in the larger world suffers considerable damage.

Patients often develop such intense positive transferences that they perceive us as invulnerable to the usual vicissitudes of life, never aging nor losing our capacities. Our unrealistic self-protective defenses can lead to egregious errors and serious consequences.

We have been exaggerating to make the point that psychoanalysts individually or collectively cannot be in a state of denial regarding impairment of our professional functioning.

Consider the tale of this psychoanalyst. He discovers a lump and consults a doctor. He is told that he has a medical problem that can be expected to get worse. He starts treatment, scheduling it for hours when he is not in his office. He continues to work and tells no one. When friends ask about his persistent fatigue

Jerome Winer, M.D., founded JPAC and continues as its chair. He has served as chair of the International Psychoanalytical Association Ethics Committee and director of the Chicago Institute for Psychoanalysis. he blows them off with a lascivious or selfaggrandizing joke about why he is so tired. When patients comment, he interprets their aggressive feelings towards him. He does not want to burden anyone else with his problem. He has a generally downhill course over an extended period of time but continues to work and to see new patients. He notices that referrals are not so plentiful and he wonders if anyone suspects that he has a problem. He becomes morose and distrustful. He feels increasingly isolated.

He has told a few close friends but has sworn them to secrecy, and they respect his wish to keep his medical problems to himself. They try to be supportive and optimistic. No one has the heart to suggest that he had better think more realistically about his future and make some kind of plan. What kind of plan could he possibly make and who could help him decide what to do? When he tries to imagine what he could do, he comes up with a black hole in which there is no one he can trust to help him. Besides, he might defy the odds and miraculously recover, but if people knew about his problem the damage to his practice would be irreparable.

He does think about his patients but decides that continuing with him for as long as he is able to see them is preferable to any other option. He, of course, is the only one who can decide when he becomes impaired. He does not want to stop working, and he knows that his patients would be devastated if he tried to get rid of them. He feels that he could not cope with the outpouring of grief and other emotions that would erupt should they know his situation. It would distract them from the true business of their hours with him, their own problems.

Eventually he dies, working until the end. His family has to put a sign on his door notifying patients that he has passed away. The family refers a few patients who call persistently to analyst friends who agree to this onerous duty. Some patients feel abandoned and one consults a lawyer. A dead analyst's estate can be sued for damages!

DID IT HAVE TO BE THIS WAY?

If he had called a member of the Psychoanalyst Assistance Committee (PAC) of his society and/or institute and arranged for a confidential consultation, the story would be different. A small subcommittee would be designated to help him deal with the many ramifications of his diagnosis and prognosis, in an atmosphere of confidentiality. He might be able to work for some time, but not take on new cases except for consultations and brief psychotherapeutic situations. As the illness progresses, he would begin to inform his patients, with the confidential consultation and assistance of his committee. All kinds of feelings would pour out. With help and support from the committee, gradually things might well fall into place as patients are dealt with individually. As the practice dwindles, in a planned way and to fill in his time and provide some compensatory income, other remunerative activities that seem appropriate to the PAC might come his way. He may be helped to get into supportive treatment outside of the PAC.

After he dies, his family and friends do not have to deal with suddenly deprived patients who are suffering an acute loss. They can cope with their own loss without the additional burden and disruption of having to concern themselves with unprepared patients. Although loss of a psychoanalyst presents many difficult problems for patients and colleagues, in this climate of open dealing and disclosure, the complexities can be more appropriately handled with beneficial results. And, no one sues.

The Joint Psychoanalyst Assistance Committee (JPAC) of the American Psychoanalytic Association was established in January 2005 to facilitate the establishment and functioning of local PACs. In many communities, referrals to local PACs remain far below their capacity to help. Some societies and a few institutes still struggle to establish PACs, although they were mandated by both Board and Council some years ago. Hopefully this article will motivate analysts to think about how to alleviate this situation either by joining a local PAC or by referring a colleague in need of help. At best, impaired analysts can be restored to full functional capacity. When this is not possible, they can be aided in transition to retirement with their dignity intact.

Rita W. Clark, M.D., is a member of both APsaA's Ethics and Joint Psychoanalyst Assistance Committees (JPAC) and co-editor of The Ethics Casebook. She is also the chair of the PAC at the Psychoanalytic Association of New York.

POLITICS and PUBLIC POLICY

"A shocking

case" that was

"the height of

administrative

arrogance," so

said one of the

three judges in

Maryland Board

of Appeals vs.

Eist. He told the

state's attorney:

The Height of Arrogance

Bob Pyles



Bob Pyles

"However this case is decided, you should go back and tell your bosses that this is how the Court of Special Appeals views their actions."

This was Harold Eist's fifth court appearance to defend his patient's right to privacy and his duty to practice ethically. As you may recall, Eist is a psychoanalyst and child psychiatrist practicing in Bethesda, Md. His ordeal began in 2001 when the estranged husband of his patient submitted a complaint against him to the board. Eist had been treating a mother and two children, and attested to her fitness as a parent during a bitter divorce. Soon after that, the complaint was filed, charging him with overmedicating the mother and children.

Since that time, the complaint was repeatedly found to be without merit both by two courts and peer review. Nevertheless, the board persists in its prosecution of Eist, charging him with failure to cooperate with their investigation.

The American Psychoanalytic Association was among 28 *amici*, representing professional organizations, patient advocacy groups, and privacy watchdog groups supporting Eist's commitment to professional ethics. Representatives from many of the groups filled the courtroom, and were heartened by the judges citing the *amicus* brief.

Bob Pyles, M.D., *is chair of the Committee on Government Relations and Insurance and a past president of APsaA*.

THE JUDGES DID THEIR HOMEWORK

The judges' thorough knowledge of the details of this five-year saga impressed the courtroom. They had scrupulously reviewed every twist and turn in this tortuous ordeal, reviewing the primary materials as well as the subsequent legal documents submitted by the attorneys. The judges were confident that the initial complaint was a transparent effort to influence a domestic dispute over custody, and thought it had little or no face validity. They challenged the board on their repeatedly "absolutist" actions in demanding the entire medical record regardless of the merit of the complaint, and over the patient's objection.

and cooperated with the board. The state's attorney said that he could not think of anything that Eist could have said and that the doctor "had a tough row to hoe." In spite of the judges clarifying that the board placed Eist in an impossible position, the state's attorney showed no interest or curiosity in how the board might proceed differently in the future. The state's attorney was indifferent to the fact that this false complaint produced a witch hunt, wasting the taxpayers' money, and costing Eist thousands of dollars and years of anguish.

A SOBERING NOTE

As gratifying as it was to hear the judges take the state's attorney to task, there is no guarantee of victory. The judges raised the question as to whether this court was the valid forum to decide on issues concerning the U.S. Constitution and its application to state law and procedures. As we saw in the HIPAA suit,

In state after state, renegade professional boards are operating without oversight, without checks and balances.

The judges pointed out that much of the record was in fact made public at the child custody hearing, and that there was no need to obtain the patient record, since the court transcript was public. The state's attorney defended the board's demand for the entire record in every case by saying that the board is busy and understaffed. When asked, the state's attorney reported that of the 970 complaints received in one year, approximately 3 percent were found to have merit. The judges found it "frightening" that the board demanded the release of the entire record in all these cases for so small a yield, and questioned the board's judgment in demanding entire records before any preliminary investigation was done.

A TOUGH ROW TO HOE

The judges were so familiar with the material and the process that they succinctly asked the state's attorney to demonstrate how Eist might have both protected his patient's rights where the judges seemed equally favorable to our arguments, they ruled against us on narrow legal grounds. We hope that these judges will have the courage and wisdom to uphold the principles of professional ethics and Constitutional rights to privacy embodied in this case. Regardless of the outcome, there is likely to be one more court hearing, at the highest court in Maryland.

A CASE OF NATIONAL SIGNIFICANCE

Although the key issue in this case is the privacy of mental health records, it is of national importance for another reason, as well. In state after state, renegade professional boards are operating without oversight, without checks and balances. For both these reasons, the decision in this case will be a significant precedent in Maryland and a persuasive precedent, throughout the country. By participating as an *amicus* in this case, the American Psychoanalytic Association is working to protect our patients and our profession.

From the Unconscious

Sheri Butler Hunt

John Garfield attended medical school at the University of California, San Francisco. His residency was at Harvard's Massachusetts Mental Health Center. He is currently professor of psychiatry and associate chair for Development and Psychotherapy Curriculum at the Chicago Medical School at Rosalind Franklin University of Medicine and Science. He has written a book, *Unbearable Affect: A Guide to the Psychotherapy of Psychosis* (John Wiley and Sons, 1995), as well as papers on self psychology and the psychotherapy of psychosis.

Garfield's poem is thoroughly appealing. Whether its beauty is in the contrast produced by anchoring solid stanzas within stormier verses, which produces a profound, quiet sense of containment, or something captured within the language itself is hard to say. Most likely, it is both. But the feeling of being allowed to participate in the rhythm of a good analysis, in which constancy is slowly taken in, is part of the deep appeal. This poem feels like an invitation to wholeness.

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

Correction: Nathan Simon's poem, which appeared in the last edition of *TAP*, was entitled "Two Almost Haiku."

Immersion

200/

Emergencia. Din. Dreams of danger. The Cacophony of Everyday Life Love feared lost must be Hidden In the blinding violence of desperate efforts Scattered shards, are they seeds? of insecurity Find a place on the Surface—a location.

The constant repetition of your presence

Goes unnoticed The quiet hum of your workaday way Goes unnoticed I am too frightened by the possibility Of poisoned chocolate almonds

And when the seasons change And when the rain comes A natural gravity allows the seeds The shards to sink down The sounds of sirens eventually surrender To the ticks and clicks of a 45 minute clock

The constant repetition of your presence Goes unnoticed The quiet hum of your workaday way Goes unnoticed I am less frightened by the possibility Of poisoned chocolate almonds.

Taking Hold

From crown to root, the distance of my universe In your universe is measured not in inches or time But by the qualities of the armature There is no swinging pendulum here The corners of my mouth have taste and distaste But they do not define me The constant repetition of your presence

Goes unnoticed The quiet hum of your workaday way Goes unnoticed As roots take hold, from surface to depth I find that I can breathe here

Expanding my reach I do not like what I touch I am ugly I am defective I am not pretty enough How the hell did I get from here to there? I cannot see underground or is it that

I prefer to remain Blind and angry, angry and blind And very very afraid

RECLAMATION

The constant repetition of your presence Goes unnoticed The quiet hum of your workaday way Goes unnoticed As you focus now on my footsteps, here, now I discover a certain security in my own choreography

Waking Up

As I shift the keys of my uncertainty do I Drive a new car, sing many new songs, open lost memories?

I am awash in the movement of my emotions.

I start to feel myself being felt and reach beyond the surface

Frightened by the renewed threat of blinding violence and

So many ugly things and most of all the pain of Hidden love

The constant repetition of your presence Is noticed

The quiet hum of your workaday way Is noticed

Staying with me as I'm finding my way Staying with me, staying out of my way

Through starts and stops and so much unfinished business

So many disappointments and painful silent rejections

I had paid so much attention to everything about me

And so little attention to me

From crown to root/root to crown, it runs more freely now

Less fear, more possibilities, can I continue this on my own?

The constant repetition of your presence Will soon be gone The quiet hum of your workaday way Will go with goodbye So keep me with you when I'm gone

I'll keep you with me as I go my way

-John Garfield



Karl A. Menninger Memorial Award Andrea Celenza, Ph.D., for her paper "The Threat of Male to Female Erotic Transference."





Special Recognition Journalism Award Joan Arehart-Treichel, who reports for *Psychiatry News*, a publication of the American Psychiatric Association.



Affiliate Council Concerning "The Importance of Language to Self Regulation."



Affiliate Council Scientific Paper Prize Winner Catherine Terri Lee, M.D., (Seattle Psychoanalytic Society and Institute) for her paper "Romantic Mirroring and Erotic Transference in the Female Analytic Dyad."

Bringing Psychoanalysis to High School Psychology Classes

James Hansell

For many years, the American Psychological Association (APA) has maintained an active educational and outreach program aimed at high school teachers of psychology and their students. This program, Teachers of Psychology in Secondary Schools (TOPSS) has almost 2,000 teacher members (called Teacher Affiliates of APA), and offers workshops, lesson plans, teaching standards, networking oppor-

tunities, and a scholarship grant and award program. It is estimated that half a million high school students take a psychology course each year. While the number of college students studying psychology is far greater, high school is often the first time that young people are formally exposed to the field, making it a critical time for the formation of first impressions.

One of the "signature products" of TOPSS is a series of "unit lesson plans" written by college psychol-

ogy faculty that enable high school teachers to teach specific areas of psychology; they are provided free of charge to interested teachers via hard copies and the Internet. To date, TOPSS has developed 14 different weeklong lesson plans on topics such as learning, memory, developmental psychology, and crosscultural psychology. Psychoanalysis, as you might guess, is virtually non-existent in these 14 current TOPSS lesson plans.

James Hansell, Ph.D., *is training and supervising analyst at the Michigan Psychoanalytic Institute and on the psychology faculty at the University of Michigan. He co-authored (with Lisa Damour, Ph.D.) the undergraduate textbook, Abnormal Psychology (second edition to be published in late 2007).* Enter Dottie Jeffries, APsaA's public affairs director. Jeffries became aware of the TOPSS program and asked me to take a look at the current lesson plans. She saw this as an opportunity to bring a positive, accurate picture of psychoanalysis to this critical population of teachers and young students before they are turned off to psychoanalysis by the typical negative misrepresentations or omissions. outlines, and then high school teachers with an interest in the subject add additional content such as in-class exercises, multimedia supplements, and homework assignments. With the help of the TOPSS staff and the teachers' network, we came up with a plan for a six-lesson unit on psychoanalysis consisting of the following topics:

Lesson I: Overview of Freud and psychoanalysis

Lesson 2: Psychoanalytic perspectives on mental disorders and treatment

Lesson 3: Psychoanalytic perspectives on development and personality

Lesson 4: Psychoanalytic perspectives on dreams

Lesson 5: Psychoanalytic perspectives on motivation and emotion

Lesson 6: Neo-Freudians and contemporary psychoanalysis

I then recruited some respected colleagues to help with writing the lesson outlines. Joshua Ehrlich from the Michigan Psychoanalytic Institute, wrote Lesson 2. Howard Lerner also from Michigan, drafted Lessons 3 and 5. Wendy Katz from the Columbia Psychoanalytic Institute,

wrote Lesson 4, and I drafted the others. After several months of e-mails and conference calls to edit, coordinate, and consult, the six outlines are now almost finalized. During the early months of 2007, the high school teachers will add the supplemental content, and we are hopeful that APA will be able to produce the whole package in time for the 2007-2008 school year. It will then be available to high school teachers throughout the U.S. through the TOPSS network. Existing TOPSS lesson plans on other topics will also be cross-referenced to relevant sections of the new psychoanalysis unit. Hopefully, some of next year's 500,000 high school students of psychology will be turned on to psychoanalysis and make their way in our direction as future candidates, patients, or supporters.



When I confirmed that psychoanalysis was not adequately covered in the existing lesson plans, Jeffries made contact with the staff of TOPSS to ascertain their interest in the development of a new weeklong lesson plan specifically on psychoanalysis. With her usual effectiveness, Jeffries quickly persuaded the TOPSS staff of the usefulness of a unit of psychoanalysis, and they agreed enthusiastically to support its development. (TOPSS's support includes underwriting the eventual production of the lesson plans along with editorial assistance from the TOPSS staff and the high school teachers' network).

With TOPSS sponsorship in place, Jeffries and I began to conceive the project. Most of the existing lesson plans involve five or six separate lessons which can be covered in one week. College faculty write the content

C O P E

Learning Together in Supervision Workshops

Daniel Jacobs

Most analysts would agree that supervision is one of the cornerstones of psychoanalytic education. Despite its centrality, I know of no institutes of the Association that require supervisors to have any formal training in the theories and techniques of supervision. Learning how best to supervise is left to individual effort. The COPE workshops on supervision held at APsaA's January and June meetings offer colleagues one way of continuing to learn by sharing ideas and experiences about supervision. Two on-going COPE study groups on supervision, attended by invitation, provide an additional forum and will be featured in a future *TAP* column.

The workshop meets regularly on Thursdays from 10 a.m. until noon and is open to all meeting registrants. Attendance at the Winter Meeting workshop ranges between 25-40 colleagues; a dozen or more attend in the spring. Because many of the participants have made the workshop a regular part of their meeting schedule, there is a continuity to the discussions and a growing sense of community among teachers who are working together to understand the complicated task of supervision.

The two-hour sessions have been used in a variety of ways. Several meetings were devoted to participants examining written supervisory reports that had been submitted anonymously. A lively discussion ensued about what makes

Eslee Samberg, M.D., *is editor of the COPE column*.

a report useful, how standards for report writing might be established, and how compliance by supervisors in meeting those standards can be encouraged. One meeting was devoted to the opening phase of supervision and the identification of incipient learning or teaching problems. At another meeting, Imre Szecsody reported on the education in supervision that each prospective supervisor at the Swedish Institute is required to take. In one session, Jean-Paul Pegeron discussed the course on supervision he offers candidates at the Michigan Institute and described its effect on their understanding and use of supervision. formal approach to teaching is now apparent: Candidates and supervisors are now more often on a first name basis; changing supervisors is now an easier and less fearful process. The respondents reported, however, that many more candidates are less prepared to do analysis than in the past, because of their limited clinical experience and abbreviated education in psychodynamic psychotherapy. At the same time, because of the decreasing number of candidate applicants in some areas, fewer appointed supervisors are actually conducting supervisions. At the 2007 Winter Meeting, Elizabeth Brett from Western New England discussed her institute's attempts to address problems of supervision and its reporting. These efforts may be a model for other institutes that want to reassess their approach to supervision.

Clearly, there is no dearth of issues to discuss and things to learn about supervision. The next step in making the workshops even more useful would be to take minutes of the meetings and to circulate them among those

Because many of the participants have made the workshop a regular part of their meeting schedule, there is a continuity to the discussions and a growing sense of community among teachers who are working together to understand the complicated task of supervision.

At present, an increasing number of candidates terminate their own training analyses before seeing a majority of their control cases. At one workshop meeting, this attenuation of the tripartite model of education and the resultant change in the nature of supervision was discussed. Candidates without an analyst, for instance, may well bring to their supervisors more of their unresolved conflicts, personal and professional, that their work with patients stimulates. At recent meetings, Gerald Melchiode reported on his informal survey of supervisors asking them to contrast supervision they conducted 10 years ago with supervision today. His findings indicate that a less attending and others who express interest in receiving them. In addition, the use of TAP and of a COPE newsletter or Webpage might convey to our membership the nature of our discussions on supervision.

The spring workshop on supervision is the last one I will chair. After 10 years as chair of these meetings, it is time to let another coordinate COPE's offerings in this area. I hope COPE will continue to hold these workshops. If so, I, for one, will plan to attend.

(Members may contact Robert Michels [rmichels@med.cornell.edu], COPE chair, for further information on COPE study groups and workshops.)

Daniel Jacobs, M.D., *is a training and supervising analyst at the Boston Psychoanalytic Institute; supervising analyst at the Florida and Cincinnati Psychoanalytic Institutes. He is co-author of* The Supervisory Encounter (Yale *University Press, 1995).*

APsaA Fellows Make Major Impact Inside and Outside Association

Charles P. Fisher

When the American Psychoanalytic Association Fellowship Program was created in 1991, it was conceived as an outreach program to expose future educators, researchers, and writers in mental health disciplines to the intellectual excitement of psychoanalysis. A goal of the fellowship was to educate a new generation of mental health professionals about psychoanalysis indirectly, by educating their future educators and leaders. Now in its 15th year, the fellowship is showing impressive results. As an example of the program's impact on our organization, the two most recent winners of the prestigious CORST essay prize have been fellows-George Mashour and Kevin Groark. Mashour, an anesthesiologist, neuroscientist, and a 2004-2005 APsaA Fellow, won the 2005 CORST prize for his integrative essay, "Toward a General Theory of the Unconscious in Psychoanalysis and Anesthesiology." Groark, an anthropologist, NIH research associate, and a 2006-2007 APsaA Fellow, won the 2006 CORST prize for his essay, "Placing the Self: Dreaming, Discourse, and Disavowed Volition among the Tzotzil Maya of Highland Chiapas, Mexico." These academics, coming from outside psychoanalysis and the mental health disciplines, are affiliated with APsaA because of the Fellowship Program.

Our fellows influence the organization in many ways. One impact, which may not be obvious, occurs within each year's cohort when the 17 fellows from across the country gather at the APsaA meetings in January and June. Over five days on each occasion, they meet intensively with one another, with members of the Fellowship Committee, and with outstanding psychoanalysts in our organization. Each fellowship cohort bonds closely, creating possibilities for personal, intellectual, and interdisciplinary interaction. The fellowship experience thus strongly influences networks of affiliation and cross-fertilization both inside and outside APsaA.



Charles P. Fisher

The yearlong mentorship for each fellow (and for each fellowship applicant) provides an opportunity to deepen individual interests in psychoanalysis. Fellows attend the general program at each meeting, and participate as presenters in the Research Seminar; the Special Programs for Psychiatry Residents, Psychology and Social Work Students; various Discussion Groups; and elsewhere in the program. Including Groark's CORST lecture, Christopher Shinn's Special Symposium on his play *Dying City*, Jeffrey Murer's Research Seminar presentation, "Constructing the

The intellectual content of APsaA meetings has been influenced by these presentations, and by the many contributions of Former Fellows to the program. Caroline Rosenthal Gelman chaired a Discussion Group on "Bilingual Treatment" in January. Stephen H. Behnke co-chaired a Discussion Group on the "Ethical Implications of Candidate Analyses." Ubaldo Leli co-chaired the Discussion Group on "Psychoanalysis and China." Brenda Bauer and Anthony Bram, both Former Fellows, co-chaired the Special Event on "Case Formulation and Treatment Planning." Other fellowship alumni who have made major impacts on the organization include Susan Vaughan (a founder of the Committee on Gay and Lesbian Issues), Kim Leary (an active contributor to APsaA meetings), Sandra Walker (editor of the APsaA publication Forward), Jennifer Stuart and J. Stuart Ablon (members of the JAPA editorial board).

Fellows bring enhanced diversity to APsaA. They come from all regions of the country, including areas in which psychoanalytic training is not available. Their diversity in terms of race, ethnicity, national origin, and sexual orientation is greater than has been typical of our organization. Their presence at meetings has a direct impact on our community. And their intellectual contributions reflect the diversity of their experience.

Perhaps the greatest impact of the Fellowship Program exists beyond the framework of APsaA. Our Former Fellows have become educators, researchers, and leaders in the core mental health disciplines and in the academic world across the country.

Enemy Other: Anxiety, Trauma, and Mourning in the Narratives of Political Conflict," and the four Special Programs for Students, there were seven presentations by fellows at the January meetings this year. The fellows provide an important outreach function at the meetings by speaking to trainees, mental health and other professionals, academics, the press, and others interested in psychoanalysis.

PSYCHOTHERAPY RESEARCH LEADERS

Perhaps the greatest impact of the Fellowship Program exists beyond the framework of APsaA. Our Former Fellows have become educators, researchers, and leaders in the core mental health disciplines and in the academic world across the country. A prominent area of impact has been psychotherapy research.

Charles P. Fisher, M.D., is chair of the Fellowship Committee and a training and supervising analyst at the San Francisco Psychoanalytic Institute.

APsaA's Excellent New Fellows for 2006-2007

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

Sara E. Allison, M.D.,

is a first-year faculty psychiatrist at the Baylor College of Medicine in Houston, Texas. She serves as an associate director of psychotherapy education for the residency program. At



Sara E. Allison

the Baylor Psychiatry Clinic, she conducts multidisciplinary, intensive focal evaluations of professionals in crisis and patients with complicated diagnostic/treatment issues. At the Michael E. DeBakey VA Medical Center, she works in the Health Care for Homeless Veterans Program and the Substance Dependence Treatment Program. After earning her B.S. at Creighton University, she received her M.D. from the University of Nebraska Medical Center and completed her psychiatric residency at Baylor in 2006. Her professional interests include expansion of psychiatric services provided to underserved populations, recoveryoriented mental health care, and resident education in psychotherapy.

Tom Beaudoin, Ph.D.,

is assistant professor in the religious studies department at Santa Clara University. His primary areas of teaching and research are the relation of Christian theology to contempo-



Tom Beaudoin

rary culture, with special focus on theology's engagement with postmodern philosophies, Foucault studies, and theories of everyday life. The author of two books and more than 50 articles, essays, chapters, and reviews, he is interested in psychoanalytic investigations of faith in everyday life and in academic theology. Thus, he is interested in how psychoanalysts "hear" theological statements, in the hope of helping theologians more richly understand where theological claims come from, what they mean, and how they function. Simultaneously, he is curious about helping psychoanalysts understand the forms of transformation of self and society within the theological tradition.

Joanna Bettmann, Ph.D., L.C.S.W., is an assistant professor at the University of Utah College of Social Work. She received her B.A. from Dartmouth College and her Ph.D. from Smith College School



Joanna Bettmann

for Social Work. She has worked as a clinical social worker since 1997 with children, adolescents, and adults. Her doctoral research explored shifts in the attachment relationships of adolescents, and she currently researches attachment issues in both adolescents and preschoolers. She is the research director for Open Sky Wilderness Therapy program in Durango, Colorado, where she is completing outcome and attachment research on adolescents and families. She also maintains a psychodynamically oriented private practice in Salt Lake City, Utah.

Anna R. Brandon, Ph.D., is an NIH Clinical Research Scholar at the University of Texas Southwestern Medical Center at Dallas, where she is conducting research on perinatal

mood disorders. She



Anna R. Brandon

graduated from Southern Methodist University with a bachelor of arts in psychology and a bachelor of business administration in organizational behavior. Her doctoral degree in clinical psychology was awarded by the University of Texas Southwestern Medical School, Brandon's dissertation research."Maternal and Fetal Representations, Dimensions of Personality, and Prenatal Attachment in Women Hospitalized with High-Risk Pregnancy," was recognized with a Sigma Xi Research Award and with the Robert J. Stoller Travel Award at the Winter Meeting of APsaA in January 2006. She is currently in her second year of the Dallas Center for Psychoanalysis Psychoanalytic Psychotherapy Program.

Marc Burock, M.D., M.S.E.E., is a fourthyear psychiatry resident at UCLA where he serves as the chief resident of the Anxiety Disorders Clinic. He graduated from Boston University with a B.S.



Marc Burock

in biomedical engineering and studied how sound is encoded in the electrical activity of the auditory nerve. During graduate studies at MIT, he obtained a master's degree in electrical engineering with thesis work focusing on the technical aspects of functional MRI methods. He went on to earn an M.D. from the University of Pennsylvania, and took a year out for research and cultural exchange at Nagoya University, Japan. His intellectual interests include philosophy of science, particularly interpretations of probability, and the relations between mathematics, morality, and the mind.

Monica Kelly Cowles,

M.D., M.S., is a psychiatric research fellow at Emory University in Atlanta, Georgia. She received a B.S. in mechanical engineering from the University of Florida, an M.S. in bio-



Monica Kelly Cowles

engineering from Clemson University, and her M.D. at the Medical University of South Carolina. Prior to medical school, she worked as an engineer in several companies, including Pratt & Whitney, Energizer Power Systems, and Fluor Daniel. Through her work as an engineer, she developed a focus on three-dimensional imaging and finite element analysis, both of which led her to her current research efforts involving imaging of the brain via fMRI and PET with a focus on mood disorders in the medically ill. She is interested in the interplay of biology and psychodynamics in the inner life of the medically ill.

Elizabeth Greene, M.D., is currently on

active duty with the United States Air Force (USAF) as a fifth-year family medicine/psychiatry resident in the National Capital Consortium Combined



Elizabeth Greene

Family Medicine/Psychiatry Residency. She completed a B.A. in biology at Johns Hopkins University and an M.D. at the University of Virginia. Her residency training has focused on developing competency in both primary care and in psychiatry and on exploring ways to integrate the two fields. She is particularly interested in psychosomatic medicine and long-term group psychotherapy for persons suffering from chronic pain. In addition, in several military training programs, she educates medical students and family medicine residents about psychiatry, through formal lectures and mentoring. After completion of residency, she will serve as an active duty psychiatrist for the USAF.

Kevin P. Groark, Ph.D.,

is an anthropologist on the research faculty of the University of Southern California, where he works as an NIH research associate. He graduated from UC Berkeley with an A.B. in anthropology,



Kevin P. Groark

earning his Ph.D. from UCLA with a specialization in medical and psychological anthropology. Since 1991, he has worked with the Tzotzil Maya of highland Chiapas, Mexico. His 2005 dissertation focuses on highland Maya ethnopsychology, exploring individual and social understandings of "pathogenic emotions" and their relation to internalized processes of social control. He is actively publishing psychoanalytically-informed articles drawing on relational, object relations, and British middle group theorists to analyze his Tzotzil field data. Through these articles, he is working to develop a "cultural psychodynamic" which merges analytic insights into the complex dynamics of human subjectivity and meaning-making with an appreciation of the structuring role of cultural models and structures of social practice. In the near future, he hopes to pursue training as a research psychoanalyst.

William Lamb, Ph.D.,

currently holds an academic appointment as a visiting scholar in the Department of Psychology at UC Berkeley, where he conducts psychoanalytic research. He received his Ph.D. in clin-



William Lamb

ical psychology from UC Berkeley where he studied under Enrico Jones. Prior to graduate school, he worked as a research assistant at McLean Hospital on the Boston Psychotherapy Study. He completed his clinical internship at St. Mary's Children and Family Services on Long Island, New York. His current research is focused on evaluating the outcome and understanding the process of psychoanalytic treatment. His dissertation, which was awarded the Korchin Dissertation Prize at UC Berkeley and the American Psychological Association Division 39 Dissertation Award, was the first to conduct a meta-analysis of outcome studies of long-term psychoanalytic psychotherapy. Michelle Benger Merrill, M.D., is currently a fourth-year psychiatry resident at New York State Psychiatric Institute/Columbia University. She graduated with a degree in neurobiology from the University



Michelle Benger Merrill

of California at Berkeley, and then completed her M.D. at Harvard Medical School, where she completed research and clinical work in Botswana, Guatemala, and Vietnam. Working with Steven Roose, her current research interests have focused on defining essential aspects of a treatment frame for psychodynamic psychotherapy that can be used in improving psychotherapy education and practice. Her interest in psychoanalysis grows out of her appreciation for the complexity and richness of the field and from her work with patients and mentors. Upon graduation, she hopes to begin analytic training, continue her psychotherapy research interests, and start a private practice.

Jeffrey Stevenson Murer, Ph.D., is an assistant professor of political science at Swarthmore College and a visiting associate professor at Haverford College. His research considers how manifestations of collec-



Jeffrey Stevenson Murer

tive trauma and loss affect European politics. In particular, he is interested in analyzing anxiety as a catalyst for significant collective political action. He has been an academic fellow for the past two years at the Psychoanalytic Center of Philadelphia, and held an Associate Research Fellowship in the human clinical sciences department at the University of Paris (VII) from 2004-2006. He has also been a guest lecturer at the Center for Research on Psychopathology at the University of Toulouse in France and the Academy for the Ministry of Internal Affairs in Volgograd, Russia. He received his Ph.D. from the University of Illinois at Chicago where he received the Annual Graduate Dissertation Prize for the best doctoral thesis in the social and behavioral sciences.

2006-2007 Fellows

Continued from page 29

Ora Nakash, Ph.D., is a staff psychologist at the Program for Psychotherapy at the Cambridge Health Alliance and a research associate at the Center for Multicultural Mental Health Research. She is



Ora Nakash

an instructor of psychiatry at Harvard Medical School. Nakash earned her master's degree in clinical psychology from Tel Aviv University and her Ph.D. from Boston University. She completed post-doctoral fellowships at the Cambridge Health Alliance Program for Psychotherapy, the Stone Center Counseling Center, and the Jean Baker Miller Training Institute. She is interested in the intersection between psychoanalysis and cross-cultural issues, particularly in exploring the impact and demands of immigration on psychological development and functioning. She is also interested in gender differences in emotional experience, particularly the impact of societal power differentials on women's mental health.

Sandra Rackley, M.D., is a third-year psychiatry resident at the Mayo Clinic, with plans to train in child and adolescent psychiatry. She studied mathematics at Davidson College and attended medical school at Mayo.



Sandra Rackley

She enjoys teaching medical students and junior residents, and was named "Resident Teacher of the Year" in psychiatry last year. Rackley is particularly interested in psychotherapy, spirituality, and religion. Her research in medical school was on the use of spiritual and religious coping by patients with spinal cord injury. She is interested in work abroad with underserved populations, and in clinical work with missionaries, pastors, and others in the ministry. In addition, she would like to help educate churches and mission agencies about mental health issues. She has worked in Pakistan, China, Honduras, and Bangladesh. Michele Schottenbauer, Ph.D., is a research assistant professor at the Catholic University of America, where she received her Ph.D. She completed a clinical psychology internship at Massachu-



Michele Schottenbauer

setts General Hospital, Harvard Medical School, and is the recipient of the 2006 American Psychological Association Division 12 Excellence in Research Student Award. Her research interests include outcome research on psychodynamic psychotherapy and psychoanalysis, treatment of trauma, the relevance of neuropsychology for psychotherapy, the use of fMRI in psychotherapy research, and therapy with children and adolescents. She plans to write a manual of psychodynamic psychotherapy for PTSD and pilot the treatment. In addition, she will continue work she started as a doctoral student at the National Institutes of Health, where she has been developing experimental computer-based measures for concepts relevant to psychotherapy outcomes.

Christopher Shinn, B.F.A., is an internationally produced playwright and an instructor in playwriting at the New School. His plays have been produced at theaters such as Manhattan Theatre Club, Playwrights Horizons, and



Christopher Shinn

London's Royal Court Theatre, among others, and have been seen in translation in Japan, Portugal, and Italy. Presently he is under commission to write a play about religious fundamentalism in the United States for the Royal Shakespeare Company. He is a winner of a 2005 Obie Award in playwriting, and was awarded a fellowship from the John Simon Guggenheim Memorial Foundation for 2005-2006. His latest play, Dying City, about a psychotherapist's dissolving marriage, set against the backdrop of the Iraq War, opened in London in May 2006. He is interested in psychoanalysis both for its potential applications to the work of intense artistic collaborations, as well as for its usefulness in understanding complex human motivations in dramatic works.

Craigan Usher, M.D.,

is a second-year fellow in the Massachusetts General Hospital/ McLean Hospital Child and Adolescent Psychiatry Program. During medical school at Georgetown University,



Craigan Usher

he received the Francis L. Clark Psychiatry Award. As a cinephile and general psychiatry resident, he coordinated the Harvard-Longwood Psychiatry Cinema program and now leads a similar series at Massachusetts General Hospital. A fan of the films of Wes Anderson (Rushmore, The Royal Tenenbaums), he has given talks about these movies linking them to Jonathan Lear's notion of irony. Clinically, Craigan is interested in psychiatric consultation in the intensive care setting and he has recently authored/co-authored book chapters on this topic. Interested in pursuing a career in academic psychiatry, Craigan is presently working on a group psychotherapy study and writing about psychotherapy with children.

Bertrand Wicholas,

M.D., is a fourth-year general psychiatry resident at the University of Washington in Seattle. He recently completed a two-year psychotherapy course at the Seattle Psychoana-



Bertrand Wicholas

lytic Society and Institute. Bertrand earned his B.A. in German studies at Cornell University. After college, he worked in investment banking before medical school. He completed premedical studies at Bryn Mawr College and earned his M.D. from Yale University, where he was elected Alpha Omega Alpha. His clinical interests include psychodynamic psychotherapy, eating disorders, general outpatient psychiatry, and psychiatry education. He is interested in the integration of various therapeutic approaches in the treatment of anorexia nervosa and bulimia. During his final year of residency, he will be developing a teaching curriculum on attachment theory as a theoretical framework for psychotherapy.

Fellows Make Major Impact

Continued from page 27

J. Stuart Ablon, an APsaA Fellow in 1999-2000, is director of the Psychotherapy Research Program at Massachusetts General Hospital. A nationally known researcher, he has contributed articles to JAPA, the Psychological Bulletin, the American Journal of Psychiatry, Psychotherapy Research, and many other journals.

Mark Hilsenroth, a 1997-1998 fellow, is associate professor of psychology at the Adelphi University Derner Institute. The author of an astonishing number of publications, his research interests include psychodynamically informed personality assessment, therapeutic alliance, psychotherapy process, and treatment outcomes.

Stephen H. Behnke (an APsaA Fellow in 1995-1996) is director of the American Psychological Association Ethics Office, and was a plenary speaker at the 2006 American Psychological Association convention on "Raising the Ethical Bar in Psychological Research."

Caroline Rosenthal Gelman, an APsaA Fellow in 1998-1999, is a full-time faculty member at the New York University School of Social Work. She brings a psychoanalytic perspective to social work training. With a colleague from the National Membership Committee on Psychoanalysis in Clinical Social Work, she developed training videos which teach and demonstrate the use of contemporary psychoanalytic concepts in social work practice. Gelman says that the APsaA Fellowship helped her make contact with a larger world of psychoanalytic educators, researchers, and clinicians.

Esther Rashkin is professor of languages and literature at the University of Utah. A multi-talented individual, she teaches comparative literature and practices clinically as a social worker. She also studies interdisciplinary connections between mind and brain, and is currently organizing a research project on neuro-imaging at her university.

Sarah "Holly" Lisanby (APsaA Fellow in 1994-95) is an associate professor of clinical psychiatry at Columbia University Medical Center and chief of the Columbia Brain Stimulation and Neuromodulation Division. She has authored or co-authored over 150 articles, abstracts, chapters, books, reviews, and editorials. She became internationally recognized as a leader in the field of transcranial magnetic stimulation (TMS) when her research team innovated the use of TMS as a treatment for major depression. In addition, in an important 2004 study, she and her colleagues used TMS to investigate the relationship between conscious self-representation ("autonoetic consciousness") and the retrieval of memory of personally experienced events ("episodic memory"). Lisanby entered the Fellowship Program with the hope that she would find guidance on how to pursue her joint interests in psychoanalysis and neuroscience. Through her APsaA Fellowship experience, she came to realize that to pursue her goal, she must first master basic neuroscience research techniques and then apply them to the questions that interested her. Now, after winning many international honors, she is succeeding in doing so.

Steven Schlozman, an APsaA Fellow in 1998-1999, is instructor in psychiatry at Harvard Medical School, lecturer in education at the Harvard Graduate School of Education, and associate director of Medical Student Education in Psychiatry for Harvard Medical School. About the fellowship, Schlozman reported, "I have no doubts that the fellowship was a significant part of my development. I think watching many of the presentations at the national meetings, especially the ones discussing art or literature, convinced me that there is an active and dynamic intellectual forum for applying psychiatric ideas to all walks of life."

These are only a few of the growing number of Former Fellows who are reaching out to the next generation of mental health trainees, undergraduate students, and networks of colleagues in their home institutions.

CALL FOR NOMINATIONS

For the Child and Family Community Service Award

From APsaA's Committee on Child and Adolescent Psychoanalysis (COCAP)

This award honors exemplary programs that bring the best of psychoanalysis out into the community to support and serve the needs of youth and families.

> Please send information about a program you wish to nominate to Kerry Kelly Novick (COCAP Chair) at kerrynov@aol.com by the end of May 2007.

Cyberclasses Bring Psychoanalytic Knowledge to Turkish Mental Health Professionals

Allen M. Siegel

While many worry about the future of psychoanalysis, eight years experience teaching principles and techniques of psychoanalytic psychotherapy to a group of 40 mental health professionals in Turkey (TAP Vol. 37, No. 1, 2003) leads me to believe the worry need not be valid. Through work in locations beyond the U.S., I have found that a deep hunger for psychoanalytic knowledge, as it applies to psychoanalytic psychotherapy, exists across the globe. The problem, until recently, has been how to reach those who hunger for what we have.

Thomas Friedman, in his book, The World is Flat: A Brief History of the 21st Century, tells us that, in fact, the world of information transfer is flat. The formerly isolating barriers of border, distance, mountain, and sea, he notes, are barriers no more. The wonder of communication via the Internet levels geographic barriers as it carries information to anyone, anywhere in the world. Eight years ago, when I began my work with the Turks, economics and limited technology required us to use speaker phones to conduct two-hour seminars every six weeks. Now, with improved classroom technology and under the auspices of the Chicago Institute for Psychoanalysis, we meet weekly for three-hour audio-video, real time, online classroom sessions. The teachers, drawn from the Chicago Institute community, are here in Chicago, the students in Istanbul, Ankara, and a few small academic towns in central Turkey. All sit at their personal computers and, through innovative software, create a classroom with no central location.



developed capacity to listen to their patients from a new perspective and now

The Turks, now

in their third quar-

ter of a two-year

psychoanalytic

psychotherapy

program, have

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Allen M. Siegel

hear human stories that once passed them by. Their therapeutic work has been enriched and their experience as practitioners has become enriching. While many had seriously considered leaving the mental health field earlier as a result of boredom and therapeutic confusion, they now find themselves immersed in an educational experience previously possible only in their dreams.

EXPLORING DISTANCE LEARNING

How is this learning experience possible? Can psychoanalytically-oriented psychotherapy, a treatment of intense personal engagement, be taught in a situation other than the traditional face-to-face, brick and mortar classroom? The issue is currently a matter of debate. Many of those opposed speak from the safety of untested, preformed ideas. The Chicago Institute for Psychoanalysis, however, has taken an activist position in this conversation, exploring what actually might be possible by creating an experimental online Distance Learning Program in Psychoanalytic Psychotherapy. The Turkish group, now officially established and governmentally recognized as the Anatolia Association for the Psychoanalytic Psychotherapies, Istanbul, has agreed to participate in this experiment as a pilot class. They have been wonderfully patient partners in this online project as together we have met and solved several technical and pedagogical problems.

The specific details of the distance learning program and curriculum can be found on the Chicago Institute for Psychoanalysis Web site located at www.chicagoanalysis.org. If you visit the site, you will find a Distance Learning button on the left hand side of the home page. Click it and you will come to the detailed explication of our what we are doing.

In our program teachers change quarterly and, in addition, we have a single moderator present in all classes for the entire year. The moderator's function is to raise guestions, stimulate discussion, and make intermittent comments. We have found that the anonymity possible in a virtual environment diminished as the moderator became familiar with the cyberstudents over the course of the year. We also find that the moderator's constant presence establishes continuity and fosters the friendliness that usually develops in face-to-face classrooms.

When the proposal for a distance learning program was first presented to the Chicago Institute, realistic concerns about staffing were raised. The institute's faculty, stretched by multiple commitments, felt the program might be a drain on its already heavily committed teaching resources. Many also felt that the scary, unfamiliar nature of new technology would dissuade faculty members from volunteering.

UNTAPPED TALENT POOL

The solution to this problem lay in the deep talent pool among the institute's advanced candidates and recent graduates, most of whom are computer savvy and many of whom already taught in venues outside the institute. Previously these people usually waited five years after graduation before they were asked to teach at the institute. It seemed that they might be eager to teach if asked. The assumption proved correct and a significant pool of enthusiastic teachers, unafraid of new technology, now exists. In addition to their excitement over teaching in this new venue, these people are delighted to be able to enter institute life earlier than usual.

To date, inquires about our program have come from curious Web-surfers in Pakistan, France, Australia, South Africa, Turkey, Dubai, Indiana, Illinois, Kansas, and Alaska. All inquiries are from geographically isolated people, unable Continued on page 33

Allen M. Siegel, M.D., is faculty member and director, Distance Learning Program of the Chicago Institute for Psychoanalysis; American director, Anatolia Association for the Psychoanalytic Psychotherapies, Istanbul; and assistant professor of clinical psychiatry at Rush University Medical Center, Chicago.

economically to reach psychoanalytic centers where they might find the knowledge about which they previously could only dream. Through the distance learning program, they need be isolated no longer. To paraphrase Thomas Friedman, this program has flattened the psychotherapeutic world.

It should be noted that this international interest has come about as a result of people simply surfing the Chicago Institute's Web site. Up to this point in the experiment we have done no active recruitment; however, e-mail announcements soliciting recruits for the next class will soon be sent to social workers, psychologists, and pastoral counselors in the U.S. We are approaching expansion slowly, with care to neither overwhelm ourselves nor promise anyone more than we can deliver. In this first stage of the project, translators were engaged for those Turks whose English is marginal. We've learned, however, that translation creates serious economic and technical problems. Therefore, future classes will be conducted only in English, with no translation available.

This experimental online experience is best summarized by one of our students:

As psychiatrists from different parts of the world connect through the Internet, an extraordinary experience of learning, sharing, and intellectual exchange is taking place. I, a Turkish born, U.S. trained neuropsychiatrist, recently moved back to Istanbul where I am an attending psychiatrist at Anadolu Medical Center, Johns Hopkins affiliated, Istanbul, Turkey.

In my unusual situation, this learning experience has played a special bridging role. I did my residency in New York and during that time also completed the psychoanalytic fellowship program at the New York Psychoanalytic Institute. The group there was formed of residents from various training programs in New York City. We met weekly to discuss papers and cases in the comfort of a training analyst's home. Needless to say, we shared not only the same geography but similar educational backgrounds as well. Compared to that experience, the online learning experience is more challenging in terms of the preparation and motivation needed to make it happen. In terms of content quality and the learning experience itself, however, it is nothing less, and perhaps even more exciting.

There's nothing like a satisfied customer.



New books by members

In 2006 and 2007, members of APsaA wrote or edited the following books and articles.

Charles Brenner, **Psychoanalysis or Mind and Meaning.** The Psychoanalytic Quarterly, New York.

Angelica Kaner and Ernst Prelinger, *The Craft of Psychodynamic Psychotherapy.* Jason Aronson: An Imprint of Rowman and Littlefield Publishers, Lanham, Md.

Leonard Shengold. *Haunted by Parents.* Yale University Press, New Haven, Conn.

Nathan Szajnberg. *Reluctant Warriors: Israelis Suspended Between Rome and Jerusalem.* Xlibris, Philadelphia.

Jerome A. Winer, James William Anderson, and Elizabeth A. Danze, eds. *Psychoanalysis and Architecture*. Mental Health Resources, Catskill, N.Y.

If you are the author of a book published in 2006 or subsequently, and would like to see it listed in *TAP*, please send the title with your name, publisher, publisher's location, and publication date to Michael Slevin at Slevinm@aol.com

Opening the Door to Psychoanalysis in China

Shoshana Shapiro Adler and Elise Snyder

The Chinese government declared this year "The Year of Harmony." The government is very concerned about the mental health of the Chinese people given the enormous pace of change there. It is sending psychologists all over the world to learn "best practices," many graduate schools of professional psychology have opened (e.g., two new schools with 4,000 students each in Xi'an), each middle school is mandated to have one psychiatric social worker for every 300 children, and all psychologists must be certified. (There are three levels of certification and very difficult examinations.) When Jiang Zemin, the president of China, recently visited Yale University, he said that democracy could not exist without a middle class and that they were trying very hard to create one. Is this emerging middle class one source of China's interest in psychoanalysis?

In 1929, Freud wrote to the ex-minister of education in China (Zhang Shizhao): "I am pleased by your intention, in whatever manner you care to carry it out, be it that you introduce psychoanalysis to your native country China."

Elise Snyder, M.D., *is president of the China American Psychoanalytic Alliance, APsaA councilor-at-large; president-elect, American College of Psychoanalysts; visiting professor, Sichuan University; associate clinical professor, Yale University School of Medicine; a graduate of the Western New England Psychoanalytic Institute; and a member of the Association for Psychoanalytic Medicine.* Elise Snyder first went to China in the early 1980s with her two daughters as tourists. Because they were such a small tour group, they were not assigned a "watcher" and were able to move about freely. Six years ago, she was invited to give two papers on psychoanalysis in Beijing: one at a conference at Beida University and the other to the Academy of the Social Sciences. She had learned of a group interested in psychoanalysis in Chengdu, a city of 11 million people in Sichuan province. There she gave several lectures, to audiences of more than 100 people. Chengdu has two related psychoanalytic groups. Recently, the Administration Institute of Chengdu University received permission from the national government to offer a non-clinical master's degree in psychoanalytic studies. In addition, the Chengdu Psychoanalytic Centre, a non-official organization affiliated with the Sichuan Philosophy Association, offers clinical training. One person in China who has had a partial Lacanian analysis is teacher, supervisor, and analyst of many of those interested in psychoanalysis in Chengdu.

THE CHINA AMERICA PSYCHOANALYTIC ALLIANCE

APsaA members interested in China and working with Chinese are incorporating as a non-profit through Yale University Law School's non-profit clinic. The group seeks to provide

Actually, some Chinese are already "psychoanalyzing" patients as a result of their training in China and they are dissatisfied with that training—the reason they want analyses and supervision with Americans.

In the '60s and '70s, especially among literary scholars, interest in psychoanalysis was intense. During the Cultural Revolution, most overt publication and interest ceased, but now both literary and clinical interest is on the rise. There are essentially no psychoanalysts in China. Qin Wei, a major player in the Chengdu psychoanalytic group, visited the United States five years ago with funds Snyder raised through the American Psychoanalytic Foundation. He lived with Snyder and her husband, gave lectures at psychoanalytic venues on the East Coast and attended the APsaA meetings. When Snyder visited China again, she and Qin Wei each presented papers on narcissism at a conference in Beijing. He is now in Paris engaged in a Lacanian analysis. Snyder went again to Chengdu where she lectured, did brief supervisions and consultations, and established relations with a group in Xi'an. Shortly thereafter, Ubaldo Leli, an analyst affiliated with Columbia, visited China and began to analyze someone in Chengdu. Leli has returned to China several times since.

analysis and psychotherapy for Chinese patients (predominantly mental health professionals) and to help spread knowledge about psychoanalysis in China. Groups of Chinese mental health professionals in Beijing, Xi'an, and Chengdu are interested in formal training in psychoanalytic psychotherapy. The China America Psychoanalytic Alliance (CAPA) will approach various foundations for money to pay tuitions at psychoanalytic psychotherapy training programs, such as those offered by APsaA institutes and societies. Money raised by CAPA will also help Chinese colleagues buy equipment for virtual classrooms (for psychotherapy training programs) and books.

American analysts are now analyzing seven people in China via SKYPE. SKYPE is a free, encrypted Internet audio and video protocol (www.skype.com). It is secure (unlike e-mail) if passwords are protected. For computer users who have webcams, it also has video possibilities. After initial glitches, SKYPE has worked well for all participants.

Shoshana Shapiro Adler, Ph.D., is a board member and secretary of the China American Psychoanalytic Alliance; assistant clinical professor, Department of Psychiatry, University of Colorado Health Sciences Center; a graduate in child and adult analysis of the Denver Institute for Psychoanalysis and faculty member there.

Leli is analyzing two people and Shoshana Adler, Anna Burton, Thomas Hoffman, Molly Rothenberg, and Cordelia Schmidt-Hellerau one each. Two others are about to begin their analyses. The patients range in age from 32 to 54. All of the analyses are going well. Surprisingly, cultural differences have had little or no effect on the development of transference or on the course of these analyses. Americans are also doing psychotherapy with three people (three, one fluent in French, are awaiting assignment) and supervising eight Chinese colleagues. Average fees are \$6 to \$9 a session. Money usually cannot be taken out of China, but can be deposited in a Chinese bank and used on visits to China or donated to CAPA.

Snyder discussed possible malpractice issues with a New York University law professor,

who consults with national and provincial governments in China. Malpractice is not a prominent phenomenon in China nor is psychoanalysis a recognized, licensed profession there. As a result, the members of CAPA are considered to be doing counseling rather than psychoanalysis or psychotherapy. This lawyer said issues of malpractice were "immaterial."

The question arises: Would Chinese patients and supervisees use their experience with us to analyze others? Actually, some Chinese are already "psychoanalyzing" patients as a result of their training in China and they are dissatisfied with that training—the reason they want analyses and supervision with Americans. CAPA members are not offering psychoanalytic training. What our Chinese colleagues do with their work with Americans is their decision. CAPA members are offering analysis in the context of counseling.

Cultural aspects of treating Chinese patients include the effects of the trauma of the Cultural Revolution, the dynamics of shame and losing face, the role of traditional Chinese medicine, and the tendency for Westerners and Chinese to idealize each other. Simpler problems also exist, such as time differences, i.e., daylight savings time does not exist in China, and holidays are different. Several CAPA members are looking into the possibility of doing research on transcultural analysis.

Please consider taking a Chinese analysand or supervisee or recruiting someone who will.

This is a fascinating and valuable adventure. Contact Snyder at elise.snyder@yale.edu, or call her at 212-533-0310.

In Memoriam

Ruth Aaron, M.D. November 27, 2005

Carl P. Adatto, M.D. November 22, 2006

Victor Bernal y del Rio, M.D. December 28, 2006

Woodrow M. Donovan, M.D. *March 31, 2006*

Theodore L. Dorpat, M.D. October 3, 2006

Elliott Foxman, M.D. December 21, 2005

William N. Goldstein, M.D. November 16, 2006

Janice Norton Kaufman, M.D. November 23, 2006

Lawrence C. Kolb, M.D. October 20, 2006

Leon Kupferstein, M.D. August 28, 2006 Norman A. Levy, M.D., Ph.D. December 21, 2005

Milton Lozoff, M.D. July 31, 2006

Harold E. Mann, M.D. *May 10, 2005*

James T. McLaughlin, M.D. July 13, 2006

Henry H. W. Miles, M.D. August 27, 2005

Rocco L. Motto, M.D. October 30, 2006

Mortimer Ostow, M.D. September 23, 2006

Joshua M. Perman, M.D. *May 19, 2006*

Simon Polan, M.D. *May 12, 2005*

Allan D. Rosenblatt, M.D. August 15, 2006 Jerome L. Saperstein, M.D. May 31, 2006

Donald G. Siegel, M.D. July 27, 2006

Matthew Silvan, Ph.D. September 30, 2006

Joseph Slusky, M.D. October 16, 2006

Julian L. Stamm, M.D. November 30, 2006

Anna Sternbach, M.D. August 31, 1994

F. Conyers Thompson, M.D. December 31, 2006

Morris I. Vilkin, M.D. September 30, 2006

Richard A. Wonka, M.D. July 23, 2006 Certified in Psychoanalysis By the Board on Professional Standards

January 17, 2007

Adult

Jeanne Bailey, M.D. Bernard Feinberg, M.D. David Frank, M.D. Cary D. Friedman, M.D. Kenneth M. Gruenberg, M.D. Oscar F. Hills, M.D. David M. Moore, Ph.D. Marsha B. Robertson, M.S.W.

Child and Adolescent Joanne H. Naegele, M.A.

New Academic Associates

Winter 2007 Meeting of Members

Waldorf-Astoria

Lisa L. Doane, M.D. Norma R. Green, M.D. J. Reid Meloy, Ph.D. Ylana N. Miller, Ph.D., L.C.S.W.



CONSIDER TOTAL HEALTH CARE

In Bob Pyles's column, "Lessons from Germany: Single Payer No Panacea" (*TAP* 40/4), he assumes incorrectly that Germany utilizes a single payer national health service (Kächele, Richter, Thomä and Meyer, 1999) and concludes there is little difference between a single payer and our multipayer system. Moreover, taking a narrowly psychoanalytic point of view, he fails to consider our more fundamental identities as citizens.

Psychoanalysts, as citizens, should consider total health care. The United States is the only industrialized nation not guaranteeing access to health care as a right of citizenship, despite spending a larger share of our gross domestic product than any other industrial country (7.9 percent in 2004). For all the expenditure, effectiveness is poor; e.g., the United States ranks 23rd in infant mortality.

Single payer administrative costs are 50-100 percent lower than comparable multipayer systems, and both the Congressional Budget Office and the General Accounting Office have determined that single payer coverage would provide total care for all while saving \$100-200 billion per year. Those 45.8 million Americans (in 2004) not covered by any health insurance would be covered and eligible for psychoanalytic treatment, thereby challenging the longstanding criticism that analytic treatment serves only the relatively wealthy.

In conclusion, as analysts we should look beyond our narrow professional identity. Clearly, a single payer plan, such as California's, Maine's, Massachusetts's and Vermont's, offers advantages both in comprehensive health care and in psychoanalytic treatment compared to our current multi-payer system.

Joseph Schachter, M.D., Ph.D.

RESPONSE

I am puzzled by Joe Schachter's letter, since his comments seem largely unrelated to anything I said in the article. I was trying to make two points:

I. No matter what health-care system is utilized, whether it is public, private, or a mix thereof, economic pressures will tend to drive down the quality of care. The only way to achieve and insure continuing quality health care is for us as individuals, and as professional associations, to actively advocate for our patients and our profession.

2. Some advocates for a "single payer" in this country tend to have a rather utopian (and naïve, in my opinion) vision that simply establishing such a system will "fix" our badly broken health-care system. In point of fact, the kind of single payer model that we are likely to wind up with, unless we can prevent it, is one which will not only be capitated in terms of total cost of treatment, but will be administered through managed care companies. Therefore, unless we can prevent it, we are likely to have the worst of both the public and the private systems.

With respect to psychoanalysis, Schachter makes the flawed assumption that a U.S. single payer system would cover meaningful psychotherapeutic treatment. One only has to look at Medicare to find ample evidence to the contrary.

Bob Pyles, M.D.

TAP welcomes letters to the editor. Letters must be less than 350 words long. Letters will be printed as space allows and at the discretion of the editorial board.



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The Association of Administrators: An Invaluable Resource for Psychoanalysis

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Debra Steinke Wardell

In this article, I would like to introduce a psychoanalytic tool that is often overlooked, and yet it not only affects APsaA's local organizations but APsaA's membership at large. The psychoanalytic tool is the Association of Administrators.

The Association of Administrators (AOA) is an organization that comprises the professional administrative staff of APsaA's accredited training institutes, centers, and affiliate societies. Often they are the first level of contact that your institute/society has with potential candidates and patients.

On the Tuesday of each biannual APsaA meeting, the AOA meets and provides an invaluable network of support. Those who attend often stay on for the BOPS and Council meetings where they become informed about the national issues that are being discussed and debated. They also learn about changes in adult and child training requirements, application procedures or deadlines for training and supervising analyst appointments, Committee on Preparedness and Progress/Committee on Research and Special Training (COPAP/CORST) waivers, or the next Affiliate membership drive. Many also attend the APsaA Academy, an indepth workshop for skills development in nonprofit management, as well as workshops on local outreach, public information media training, and marketing. During the AOA meeting, they have an opportunity to speak directly with the Association's staff and meet with APsaA's officers. They learn new skills and about new

For Membership assistance, please contact Debra Steinke Wardell, Manager, Education & Membership Services, 212–752–0450 x26 or e-mail: dsteinke@apsa.org. procedures and important national issues. They are introduced to important APsaA tools, such as the nationwide Calendar of Events on APsaA's Web site, the online AOA Manual, and other relevant sections of APsaA's new and improved Web site.

The AOA meeting is an opportunity for local professional staff to dialogue with their colleagues across the country. One administrator called their meeting a life source for their unique professional niche. Another administrator commented: "It helps to know that somebody else feels as overwhelmed as I do!" At the AOA meeting, administrators share a great deal of information from their varied backgrounds, ranging from a comparison of individual job responsibilities to the best practices in institute office organization to the development of large-scale fundraising events and marketing campaigns.

AOA members range from part-timers who work alone to full-time directors managing large staffs. Some work out of small offices while others are connected to universities. As some local organizations change from solely institutes/societies to centers or as perhaps two groups merge, administrators are able to draw on the resources of those who have already experienced such changes and learn from their personal experiences as well as find guidance and advice. And this is just the tip of the iceberg: Administrators bring their experience to site visits by the Committee on Institutes, fundraising events and parties for Freud's anniversary, and local psychoanalytic outreach, and offer their perspectives on which extension division courses are working and which are not. Chances are another society or institute has dealt with the same or related issues

before and these connections bring expertise and efficiency by saving the administrator time in the long run.

As local budgets are reduced, one of the items often eliminated is funding to send an administrator to APsaA's meeting. But is this a wise course of action when so much local continuity and coordination are provided by the administrators? The value of the AOA meeting, which provides face to face contact for the administrators and the opportunity to discuss their issues and challenges and assist others with what has worked for them and what has not, is immeasurable and often overlooked as a priority. The expenditure to send an administrator to the AOA can contribute to savings in the future. The organizations that continuously send their administrators tend to hold on to their staff and have less staff turnover than others. In addition, long-term administrators are often the institutional memory of an institute and/or society or center. They remain constant as institute and society officers change every two to four years.

This past fall, President-elect Prudy Gourguechon, posted an e-mail to the Leaders Email Listserv encouraging local groups to send their administrators to participate in this invaluable network. Gourguechon emphasized the national importance of administrator involvement at the AOA meetings.

From a mental health perspective, it is important for people to be a part of a network, especially the lone administrator who, surrounded by analysts, can feel isolated. Not only do administrators who attend the bi-annual meetings find a source of support, but this better prepares them to serve you, the psychoanalytic communities and the general public. Now that's a resource that should not be ignored.

As the liaison to the AOA, I am privileged to work with such a hard-working and dedicated group that truly keeps our local organizations running on track. The next AOA meeting is June 19, 2007, in Denver. Administrators who are new to APsaA or interested in learning about the AOA meetings should contact Janet Garrison, president of the Association of Administrators (j.garrison@ philanalysis.org). Garrison is also the co-administrative director at the Psychoanalytic Center of Philadelphia.

Affiliate Council Welcomes New Officers

New officers of the Affiliate Council began their terms at the end of the Winter 2007 Meeting. They are: Laura L. Jensen, president; M. Carmela Perez, presidentelect; Wolfgang Rosenfeldt, secretary; and Jill McElligott, treasurer.

Jensen is a graduate from her adult program and is a third-year child and adolescent candidate at the Denver Institute for Psychoanalysis. She has served as a delegate, newsletter co-editor, secretary, and president-elect of the Affiliate Council. She also served on the Task Force for Expanded Membership Criteria and on the Task Force for Reorganization for APsaA. She is in private practice in Denver, Colorado.

"During my presidency, I would like to focus on affiliates as the future of our profession but in a slightly different way than did Julio Calderon with his Leadership Academy," said Jensen. "I would like to concentrate on practice issues at our meetings and provide some experience-near venues for candidates to explore and expand their clinical repertoires. To this end, Jonathan Shedler, an Honorary Member of APsaA and a gifted diagnostician, clinician, researcher, and teacher who worked on the PDM has agreed to address candidates at the June meeting in Denver. I invite all candidates to attend and participate."

Perez is an advanced candidate at the NYU Psychoanalytic Institute. She has served as delegate and as committee chair of the Committee on Racial and Ethnic Diversity for the Affiliate Council. In the larger APsaA community, Perez has worked to organize a Wednesday discussion group at the national meetings, and she is a candidate member of the Committee on New Training Facilities (CNTF). As presidentelect, she will now sit on the Coordinating Committee of the BOPS and on the Steering Committee of the Executive Council. She is in private practice in New York City.

Rosenfeldt is a second-year candidate at the Dallas Psychoanalytic Center and a fourth-year psychiatric resident. He has served as a delegate for his institute to the Affiliate Council. He is graduating this year from his residency and starting private practice in Dallas, Texas.

McElligott is a second-year candidate in the adult program at the Psychoanalytic Center of Philadelphia and has applied for candidacy in the child program for 2007-2008. She served a two-year term on the center's Finance Committee and is currently serving a three-year term on the Curriculum Committee. She is co-founder and co-editor of the center's current newsletter. McElligott was a 2004-2005 APsaA clinical fellow and is associated with the APsaA Fellowship Committee. She maintains a private practice in Wayne, Pennsylvania.

How to Participate in APsaA's Scientific Program

Scientific papers for oral presentation must be no longer than 22 pages. Submit all manuscripts by electronic mail and please include an abstract. JAPA has right of first refusal on any paper accepted for presentation.

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

Discussion group proposals must be submitted in writing (two pages maximum, two copies). The Program Committee chair selects new discussion groups based upon their subject matter vis-à-vis material covered by existing groups.

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

The deadline for submission of panel proposals is October 1 for the Winter Meeting and March 1 for the Annual Meeting. The deadline for all other submissions is May 1 for the Winter Meeting and December 1 for the Annual Meeting.

Address correspondence to Glen Gabbard, Chair, Program Committee, c/o The American Psychoanalytic Association, 309 East 49th Street, New York, New York, 10017.

for the PERPLEXED READER

As TAP's circulation grows, an increasing number of our readers are not members of the APsaA but rather individuals who have significant interests in psychoanalysis. TAP's editorial board decided that it would be helpful to include a glossary of acronyms and abbreviations of the many groups frequently mentioned in TAP's pages. We hope the following is useful.

Affiliate Council. A part of the APsaA that represents candidates [students] from the institutes and new training facilities. Its officers are president, president-elect, secretary and treasurer.

APsaA, the American Psychoanalytic Association. A national psychoanalytic organization of more than 3,400 analyst members, founded in 1911. Its component organizations are forty-two psychoanalytic societies, six study groups, and twenty-nine psychoanalytic training institutes.

BOPS, the Board on Professional Standards. The part of the APsaA that establishes and monitors its educational functions, including accrediting institutes and certifying members. It consists of two fellows of the Board representing each of the twenty-nine institutes, and the chair and secretary of BOPS. The president, the president-elect, the secretary, and the treasurer of APsaA are non-voting ex-officio members of BOPS. The Board meets twice yearly at the national meetings.

CGRI, the Committee on Government Relations and Insurance. A committee of the Council which deals with political issues on both national and local levels.

Committees. Council committees are created by and report to the Executive Council. Board committees are created by and report to the Board. In addition, there are joint committees of Board and Council. These committees are created by and report to both Board and Council to deal with overlapping responsibilities of the two bodies. Ad hoc committees serve at the pleasure of the president, chair of the Board, or both.

COPE, the Committee on Psychoanalytic Education. A committee of BOPS that serves as a think tank on issues of psychoanalytic education. CORST, the Committee on Research and Special Training. A committee of the Board whose major function is to evaluate requests from APsaA

institutes to train candidates with non-mental-health, academic degrees.

Divisions. The approximately 55 Council and Joint Council-Board Committees have been organized into eight divisions: governance, psychoanalytic science, societal issues, communications, professional outreach, psychoanalytic practice, corporate outreach and liaison, and associates. Each Division is headed by a Division coordinator who assists chairs of committees with budgeting, program planning, manpower needs, and communication. Division chairs report to the president and meet with the Executive Committee as part of the Steering Committee.

Executive Committee. The leadership of the APsaA that oversees the many activities of the organization as specified by the bylaws. The committee comprises the president, the president-elect, the secretary, the treasurer, the chair of the Board, and the secretary of the Board. The Science Advisor to the Council serves as consultant.

The Council, the Executive Council. The governing body of the APsaA and its legal board of directors. It consists of a councilor and an alternate councilor representing each of the societies and study groups, eight nationally elected councilors-at-large, the current officers, the last three past-presidents, and the past secretary. It meets twice yearly at the national meetings. The chair of BOPS and the secretary of BOPS are non-voting ex-officio members.

JAPA, the Journal, Journal of the American Psychoanalytic Association. The official scientific journal of the APsaA, published quarterly. Members' List, Openline. Two Internet listservs that members use to share views and information.

National Office. The APsaA national headquarters in New York City whose staff conducts the administrative work of the organization.

Winter Meeting, January Meeting; Annual Meeting, Spring Meeting, June Meeting. The APsaA holds national meetings twice a year. In addition to the extensive scientific program, the Council, the Board, and the Affiliate Council meet. The Winter Meeting, also sometimes called the January meeting, is usually held in New York City. The Annual Meeting, also called the spring meeting or the June meeting, is held in various locations. An official meeting of members occurs at each of the two meetings.

www.apsa.org. url for the Webpage of the American Psychoanalytic Association.

OTHER ORGANIZATIONS AND TERMS

and

ACPE, the Accreditation Council for Psychoanalytic Education. The corporation formed by the Consortium, which is working toward accreditation of institutes.

APA, either the American Psychiatric Association or the American Psychological Association. These are major national organizations of psychiatrists and psychologists, respectively.

CIPS, the Confederation of Independent Psychoanalytic Societies. An organization of three U.S. psychoanalytic institutes that are component societies of the IPA: the Institute for Psychoanalytic Training and Research (IPTAR), the Los Angeles Institute and Society for Psychoanalytic Studies (LAISPS), and the Psychoanalytic Center of California.

The Consortium, the Psychoanalytic Consortium. An organization comprising the American Psychoanalytic Association, the Division of Psychoanalysis (39) of the American Psychological Association, the National Membership Committee on Psychoanalysis in Clinical Social Work, and the American Academy of Psychoanalysis. The Consortium was formed in 1991 and works on political and ethical issues and creating an external accrediting body.

Credentialing, accrediting, certifying. The two types of credentialing are accreditation of psychoanalytic institutes and certification of graduates of psychoanalytic institutes.

Division 39, Section 1. The Division of Psychoanalysis (39) is a component of the American Psychological Association. It consists of more than 3,000 members who have an interest in psychoanalysis. Section 1 is a component of Division 39 whose members have had training in psychoanalysis.

IPA, International Psychoanalytical Association, the International. A worldwide psychoanalytic organization founded by Freud in 1910. The APsaA is a member society of the IPA.

NAPsaC, the North American Psychoanalytic Confederation. One of the three regional groups of IPA. Includes APsaA, IPS, New York Freudian Society, Canadian Psychoanalytic Society, Japanese Psychoanalytic Society.

NMCOP, The National Membership Committee on Psychoanalysis in Clinical Social Work. A national organization representing 500 clinical social workers who are psychoanalysts or psychoanalytic psychotherapists.





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