The A FALL 2011 Volume 45, No. 3 PSYCHOLAR ALYST

Quarterly Magazine of The American Psychoanalytic Association



SCIENCE and Psychoanalysis

Do Psychodynamic Treatments Work? (Part 2)

Andrew J. Gerber

In my last column [TAP 45/1], I discussed different ways of reading the psychodynamic outcome research literature as exemplified by two recent papers: one by a group with which I am involved, The American Journal of Psychiatry, and another by Jonathan Shedler in the American Psychologist. My hope is to illustrate some of the important arguments in the field, all of which have direct implications not only for how clinical psychoanalysts read the literature, but for how they think about the involvement of ongoing empirical research in various psychoanalytic organizations, such as the American Psychoanalytic Association, the International Psychoanalytical Association, Division 39 of the American Psychological Association, and the newly formed Psychoanalytic Psychodynamic Research Society.

To sum up my last article: I noted Shedler read the research literature as largely supporting the efficacy of psychodynamic treatments.

Andrew J. Gerber, M.D., Ph.D., is a faculty member at the New York State Psychiatric Institute, the Columbia University Center for Psychoanalytic Training and Research, chairman of APsaA Committee on Scientific Activities, and secretary of the Psychodynamic Psychoanalytic Research Society.

He concluded, "Nonpsychodynamic therapies may be effective in part because the more skilled practitioners utilize techniques that have long been central to psychodynamic theory and practice. The perception that psychodynamic approaches lack empirical support does not accord with available scientific evidence and may reflect selective dissemination of research findings." My own group's paper was more cautious, concluding, "Existing randomized controlled trials of psychodynamic psychotherapy are promising

but mostly show superiority of psychodynamic psychotherapy to an inactive comparator. This would be sufficient to make psychodynamic psychotherapy an 'empirically validated' treatment (per American Psychological Association Division 12 standards) only if further randomized controlled trials of adequate quality and sample size replicated findings of existing positive

trials for specific disorders." Furthermore, we point out that although we studied this only with regard to psychodynamic psychotherapy, we would not be surprised if reviews of other psychotherapies yielded similar results.

Continued on page 16

INSIDE TAP...

Centennial Meeting in San Francisco. . . . 6–8

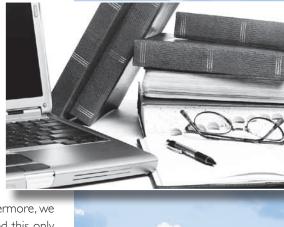
APsaA Elections ... 10-14

Treating Addictions 17

Promoting Your

Practice. 21

Remembering Leo Rangell 28–29



CONTENTS: Fall 2011

- 3 San Francisco: A Historic Meeting Warren R. Procci
- 4 UpComing Meetings
- 5 BOPS: Just the FAQ's
 The New Waiver Colleen L. Carney and Lee I. Ascherman
- 6 Centennial Meeting in San Francisco
- 9 Bylaw Amendment (Adapted from Council statement by Bob Pyles) (Submitted by Ralph Fishkin and Paul Mosher)
- APsaA Elections: Campaign Statements
- 15 Highlights of the Executive Council Meeting
- 17 New Psychoanalytic Understanding of Addiction Lance M. Dodes
- **Projections:** The Tempest Richard M. Waugaman
- 19 The King's Psychotherapy Lawrence D. Blum
- 20 **COPE:** Study Group on Supervision Barbara Stimmel
- 21 How to Promote Your Practice Online—
 And Why Doing So Benefits Psychoanalysis Renée Spencer
- 2.2 Candidates' Council: Candidate Council Hilli Dagony-Clark
- 24 Cases from the Frenkel Files: Failure To Protect John C. West
- **Politics and Public Policy:** Psychoanalysis: Professional Specialty or Specialized Profession? *Fredric T. Perlman*
- **Poetry:** From the Unconscious Sheri Butler Hunt
- Remembering Leo Rangell Bhaskar Sripada
- Remembrances of Leo Rangell, First Honorary President of APsaA, 1913–2011 Warren R. Procci

Correspondence and letters to the editor should be sent to TAP editor, Janis Chester, at jchestermd@comcast.net.

THE AMERICAN PSYCHOANALYTIC ASSOCIATION

President: Warren R. Procci
President-Elect: Robert L. Pyles
Secretary: Beth J. Seelig
William A. Myerson
Executive Director: Dean K. Stein

Honorary President Leo Rangell

THE AMERICAN PSYCHOANALYST

Magazine of the American Psychoanalytic Association

Editor
Janis Chester

Editorial Board

Brenda Bauer, Vera J. Camden, Leslie Cummins, Phillip S. Freeman, Maxine Fenton Gann, Noreen Honeycutt, Sheri Butler Hunt, Laura Jensen, Navah Kaplan, Nadine Levinson, A. Michele Morgan, Julie Jaffee Nagel, Marie Rudden, Hinda Simon, Vaia Tsolas, Dean K. Stein, ex officio

> Photographer Mervin Stewart

Manuscript and Production Editors
Michael and Helene Wolff,
Technology Management Communications

The American Psychoanalyst is published quarterly. Subscriptions are provided automatically to members of The American Psychoanalytic Association. For non-members, domestic and Canadian subscription rates are \$36 for individuals and \$80 for institutions. Outside the U.S. and Canada, rates are \$56 for individuals and \$100 for institutions. To subscribe to The American Psychoanalyst, visit http://www.apsa.org/TAPSUB, or write TAP Subscriptions, The American Psychoanalytic Association, 309 East 49th Street, New York, New York 10017; call 212-752-0450 x18 or e-mail info@apsa.org.

Copyright © 2011 The American Psychoanalytic Association. All rights reserved. No part of this publication may be reproduced, stored in a retrieval system, or transmitted in any form or by any means without the written permission of The American Psychoanalytic Association, 309 East 49th Street, New York, New York 10017.

ISSN 1052-7958

The American Psychoanalytic Association does not hold itself responsible for statements made in *The American Psychoanalyst* by contributors or advertisers. Unless otherwise stated, material in *The American Psychoanalyst* does not reflect the endorsement, official attitude, or position of The American Psychoanalytic Association or *The American Psychoanalyst*.

San Francisco: A Historic Meeting

Warren R. Procci

Ah, the City by the Bay, its charm never dims! Our recently completed San Francisco meeting, part of the ongoing celebratory recognition of APsaA's centenary, was wonderful. For starters, the party hosted by the San Francisco Psychoanalytic Institute and Society provided a very fitting and unusual start to the meeting, occurring behind the velvet rope of the exclusive nightclub, Infusion. In addition, there were museums, restaurants, including many with Michelin stars, and AT&T Park, all part of the attraction of this beautiful city. Our attendance was the best we have had at a spring meeting since San Francisco in 2004.

An overriding message from this meeting that I wish to emphatically convey is the necessity that APsaA attend to the necessities of the current real world.

DECONSTRUCTING BARRIERS; ESTABLISHING NEW RELATIONSHIPS

There were a number of historic and unique developments that occurred, many of them with just such real world implications. Let's start off first with some of what happened at the Board on Professional Standards (BOPS). The provisions of the Carlson Report, which had become an impediment to bringing new institutes into APsaA, will be discontinued, enhancing hope that we may be able to work more effectively with a number of other organizations that we would like to have as fellow Approved Institutes within APsaA. We saw a major step by BOPS in working collaboratively with the Accreditation Council for Psychoanalytic Education (ACPE) towards joint site visits by ACPE and BOPS.

Similarly, there were a number of intriguing and interesting events that occurred in our Executive Council. For example, the council authorized the expenditure of \$40,000 which ACPE will use to advance

Warren R. Procci, M.D., is president of the American Psychoanalytic Association.



Warren R. Procci

their application for recognition by the Department of Education. This would be a major step for us, having our Approved In stitutes accredited by a national cre-

dentialing body. Another seminal event was that the Membership Requirement and Review Committee (MRRC) for the first time admitted candidates from non-APsaA/non-IPA institutes under the "substantially equivalent" provision. No applicant was turned down and seven new members will join APsaA. Three individuals had their applications continued, and we are optimistic that all three will eventually be able to gain admission. This represents the culmination of years of difficult struggle by many of our leaders.

A VISION FOR FUTURE SPRING MEETINGS

Our Strategic Plan moved ahead. The council voted additional funding to begin the implementation of the plan. We had a twohour meeting with Steve Carey, our coordinator, and with many on the task force with a major, in-depth discussion by the council. The plan currently encompasses six groups of goals and a total of 24 individual priorities. All of these priorities are geared towards very real external challenges that are vexing us and that we simply must face in order to survive. Finally the Task Force on Spring Meetings presented a complex report to the Executive Council and a vote was taken to find a way to continue the spring meeting, albeit in a different format. The 2012 meeting will be held in Chicago within the usual format, and the Program Committee will empower a task force to poll the membership concerning preferences for alternate meeting formats.

REFLECTIONS ON IMMIGRATION

We had an exciting presidential symposium on the issue of immigration. There was a panel that included a discussion of the contributions that immigrant analysts have made to American psychoanalysis, the problems faced by undocumented adolescent immigrants, and the presentation of APsaA's position statement on immigration. A particularly novel treat for us was the presence of San Francisco 9th District Supervisor David Campos, who has played a key role in bringing substantial immigration reform to the City of San Francisco. And of course, as always, there were many very stimulating panels, papers, discussion groups, and plenary sessions

An essential message to take from many of these historic developments is that it is essential for us as an organization to recognize a need to deal with the exigencies of the real world. Psychoanalysis traditionally has focused almost exclusively upon the inner world and this served us well for decades. However with the declines in many crucial components of our Association, notably membership, new candidates, and practice, the time has come to realize that in order for us to best serve the needs of the inner world, we must find ways to understand the exigencies of the real world and to meet and master them.

Seeking a Path through Depression's Landscape

The New York Times Sunday Review prints a collection of letters to the editor. On July 16, APsaA president Warren Procci initiates and concludes the thoughtful discourse based on an article written by Peter Kramer, "In Defense of Antidepressants" (7/10/11). To read the letters visit http://www.nytimes.com/2011/07/17/opinion/sunday/117dialogue.html



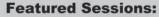
2012 National

Meeting

(JANUARY 2012)

Upcoming Meetings

2012 National Meeting January 10 - 15, 2012 **Waldorf Astoria Hotel New York City**



Panels:

Desire Chair: Melinda Gellman, Ph.D.

Presenters: Carol Gilligan, Ph.D., Kenneth Corbett, Ph.D.

Analyses without End Chair: Sydney E. Pulver, M.D.

Presenters: Glen O. Gabbard, M.D., Steven Roose, M.D., Helen Stein, Ph.D.

Siblings Chair: Rosemary H. Balsam, M.D.,

Presenters: Christine C. Kieffer, Ph.D., Jeanine M. Vivona, Ph.D.,

Joseph D. Lichtenberg, M.D., Salman Akhtar, M.D.

On the use of pre-symbolic, pre-verbal material: Where and how does it enter a particular analyst's work Chair: Henry J. Friedman, M.D.

Presenter: Dominique Scarfone, M.D.

Child and Adolescent Panel:

Role of Action in Adult and Child Analysis Chair: Karen Gilmore, M.D.

Presenters: David Ott, M.D., Eslee Samberg, M.D., Mark Smaller, Ph.D.

Two Day Clinical Workshops

APsaA is proud to announce the addition of a new Two Day Clinical Workshop with Dr. Richard Zimmer and Dr. Jay Greenberg. There are now six of these popular workshops!

University Forum: The Oedipus Trilogy will be discussed by two classicists, David Konstan (Brown), M.D., and Elizabeth Bobrick (Wesleyan) with

Melvin R. Lansky, M.D., and Leon Wurmser, M.D., as the psychoanalyst/moderators.

The 101st APsaA Annual Meeting will be June 12–17, 2012, in Chicago.

Check APsaA's Web site, www.apsa.org, for updates.

101st Annual Meeting (JUNE 2012)

102nd Annual Meeting (JUNE 2013)

Look for a new, redesigned spring meeting in 2013!

BOPS: Just the FAQ's

The New Waiver

Colleen L. Carney and Lee I. Ascherman

One of the most important changes to our revised Standards for Education and Training adopted last June is the new waiver which allows an institute to apply for a waiver of a training analysis for a prospective candidate who has been in an established analysis with an analyst who is not a training analyst. Since this waiver is one of the most confusing and misunderstood aspects of our new standards, we have decided to devote the first of our "BOPS: Just the FAQ's" columns, in which we will periodically address BOPS's most frequently asked questions, to this topic.

We greatly appreciate all of your questions as they challenge us to clarify the potential ambiguities in the new standards as we begin their implementation. Your questions also provide us with an opportunity to carefully reflect on the principles underlying all of the revisions and how each is a part of the larger picture of the psychoanalytic education we hope to provide all our candidates.

Q: WHY ARE THERE ANY PARAMETERS AROUND WHO SHOULD ANALYZE CANDIDATES?

Here we will address the most frequently asked question regarding the waiver of the training analysis requirement: Why are there any parameters around who can conduct the analysis of a candidate in training? Broadly speaking, this question usually involves issues of professional eligibility, clinical immersion, and personal suitability, including the ethical good standing of the personal analyst. We must first keep in mind that any waiver already reflects a deviation from usual operating procedures. In the instance of a waiver of the training analysis requirement, it is always understood within the context of our explicitly stated commitment to a training and supervising analyst system in all our accredited institutes. This is clearly stated in the revised standards and is consistent with IPA requirements. The burden then falls on us to think through and to document the rationale

personal analysis, usually for many years, who would rather forgo psychoanalytic training altogether than to switch to a training analyst. Even if relatively rare, this is a very real set of circumstances and one which the Board on Professional Standards ultimately believed warranted special consideration. At the same time, as educators, we bear the collective responsibility of ensuring an environment conducive to the development of a psychoanalytic process for our candidates as well as their supervised clinical cases. Expecting an analyst who is analyzing a candidate to have sufficient experience with the development and management of a psychoanalytic process as well as the termination of an analytic process reflects this responsibility. This is the rationale for the establishment of the training analyst system in the first place, since it involves a formal assessment of these qualifications, no matter how imperfect that system may be. How then do we responsibly adhere to that spirit while waiving the letter of this policy? This is truly the challenge of this new waiver.

How then do we responsibly adhere to that spirit while waiving the letter of this policy? This is truly the challenge of this new waiver.

As you know, the recent collaborative effort to revise our educational and training standards was not done with the intention of benefiting any individual analyst, candidate, or institute, but to strengthen our educational system as a whole. The long-term goal is to train more and more consistently competent psychoanalysts, and to prepare them to thrive in an increasingly challenging professional environment.

Colleen L. Carney, Ph.D., is chair of the Board on Professional Standards, and Lee I. Ascherman, M.D., is secretary. for when and why we would deviate from our usual policy. While at first blush this may seem like a small detail, upon reflection it is a challenge to tease out and articulate the internal consistency of our own training philosophy, one which has professional, legal, and educational implications.

The creation of a waiver of the training analysis requirement was, in some circumstances, a needed and constructive compromise to an intractable impasse in our organization. This compromise was born out of the generally shared recognition that there are a number of highly qualified prospective candidates who have been in a

Q: CAN PSYCHOTHERAPY PATIENTS ASK FOR A WAIVER IN ANTICIPATION OF APPLYING FOR PSYCHOANALYTICTRAINING?

This leads to a related frequently asked question: Are prospective candidates who are in psychotherapy with an analyst who is not a training analyst eligible to ask an institute to apply for this waiver? Simply put, this was not the intent of this waiver and reflects an erosion of the intended purpose. While all psychotherapeutic relationships are, hopefully, meaningful and significant, this is not synonymous with an analytic process. To equate the two minimizes the very education that we hope to bring through psychoanalytic training.

The guiding principle in considering these waiver requests must always be, what is in the best interest of the prospective candidate? While there is no doubt that a waiver of a training analysis may be of interest or benefit to the personal analyst and possibly the institute, this does not assure that it is

Continued on page 15

Centennial Meeting in San Francisco

Photos by Valerie Laabs-Siemon, Jake Lynn, and Mali Mann

APsaA Awards

HONORARY PRESIDENT

APsaA president Warren Procci presented the first American Psychoanalytic Association honorary presidential title to Leo Rangell, M.D., posthumously. [See pages 28 and 29 for remembrances.]

2011 TICHO LECTURE

President-elect Robert Pyles presented the Gertrude and Ernst Ticho Memorial Award to Deborah L. Cabaniss, M.D. She then delivered her lecture entitled "Teaching Psychoanalysis in the 21st Century."

2010 JAPA PRIZE

Steve Levy presented the *JAPA* Prize to Mari Ruti, Ph.D., for her paper, "The Singularity of Being: Lacan and the Immortal Within," published in *JAPA* 58:6. To listen to a podcast of Steve Levy interviewing Mari Ruti about the genesis of the article and the process of writing it, visit www.apsa.org.



Warren Procci with Leo Rangell's children, Judith Alley and Paul Rangell



Mari Ruti



Deborah Cabaniss

Centennial Meeting in San Francisco

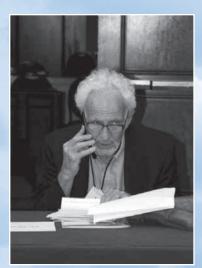
Photos by Valerie Laabs-Siemon, Jake Lynn, and Mali Mann



Leon Wurmser



Lauren Berg and Kassy Zerbe



Bruce Sklarew



1911 - COURAGE TO DREAM - 2011

100

Listen Up!

For the first time, digital audio recordings of select sessions from the 100th Annual Meeting last June in San Francisco are now for sale online. You may download MP3 recordings of the sessions and store them on your personal computer, or you have the option of purchasing CDs that will be mailed to you.

Visit the Web site of "Hungry Minds Recordings" to process your order at: www.hungrymindrecordings.com and scroll down the page to our section under "Hot Conferences" and click on "View More."

For those who weren't able to attend the 100th Annual Meeting, or for those who would like to have a permanent keepsake of a session you truly enjoyed, this is a terrific opportunity!

For more information, please contact Jake Lynn (212) 752-0450 ext. 29

Centennial Meeting in San Francisco

Photos by Valerie Laabs-Siemon, Jake Lynn, and Mali Mann



Alexandra Harrison



Meeting of Members
In the foreground are three past presidents:
Lynne Moritz, Prudy Gourguechon,
and Newell Fischer



Morris Eagle and Anne Erreich



Mali Mann, Miriam Tasini and George Allison



Our Hard-Working Staff
Left to right: Chris Broughton, Brian Canty, and Sherkima Edwards.
Not pictured: Tina Faison, Diana Franklin, Carolyn Gatto, Jake Lynn,
Johannes Neuer, Nerissa Steele, Dean Stein, Debbie Steinke-Wardell, Niki Turner.



Valerie Laabs-Siemon

Bylaw Amendment

(Adapted from Council statement by Bob Pyles) (Submitted by Ralph Fishkin and Paul Mosher)

In addition to voting for president-elect and two councilors-at-large, members are asked to vote on a bylaw amendment entitled "The American Model: Checks and Balances." This bylaw amendment seeks to amend Articles IV, V, and VI, addressing aspects of the roles of officers, Executive Council, and Committees of the Corporation. The amendment was approved by BOPS. Council lacked time to discuss the amendment and simply advised members to vote their conscience.

FROM THOSE IN FAVOR OF THE BYLAW

For those of you who are unfamiliar with the day-to-day governance of our Association, it has historically been run by the members of the Executive Committee, which includes the officers and non-voting representatives from BOPS and Council

Given that the dual charge of our Association includes education and membership issues, having an equal number of voting members from Council and BOPS fulfills this mission. This bylaw amendment would empower Council by placing two members of Council, elected by Council, on the Executive Committee. The amendment also restores the votes of the BOPS chair and secretary in the Council and Executive Committee. In addition, the votes of APsaA's officers would be restored in BOPS; the officers currently vote in Council.

The composition of the Executive Committee is of critical importance. This body works year-round to implement the policies of Council. Under this amendment, no further members would be added to the Executive Committee. The two members from Council and the two representatives from BOPS who already take part in the meeting would now be able to vote, restoring balance.

This proposal does not in any way change or affect the functioning of the Executive Council as our board of directors.

FROM THOSE OPPOSING THE BYLAW

The proposed amendment is bad policy and unacceptable to many APsaA members for the following six reasons.

It grants additional enhanced powers to the BOPS leadership within APsaA governance. At present the BOPS chair and secretary already have the unique entitlement of automatically gaining a vote on the Council's Executive Committee simply by being elected to a voting seat on the Executive Council.

This existing special status is sufficient recognition by APsaA of the importance of education in APsaA's mission, but that status is also presently conditioned on the willingness of the BOPS officers to acknowledge that they are part of a larger organization.

The BOPS officers are elected to their positions by BOPS, not the membership of APsaA, and are elected to lead the addressing of issues of psychoanalytic education.

The Executive Council and its Executive Committee are responsible for the overall management of APsaA, not just educational matters.

Ordinarily, service on the Council's Executive Committee requires election by the Executive Council.

Therefore, the right to a voting seat on the Council's Executive Committee should be contingent on the BOPS leaders' willingness to take the minimal step of running for election to a voting Council seat.

Certified In
Psychoanalysis
By the Board
on Professional
Standards

June 8, 2011

Adult

Marianna Adler, Ph.D. Houston-Galveston Psychoanalytic Institute

Cheryl L. Eschbach, M.D.

Emory University Psychoanalytic Institute

Barbara F. Marcus, Ph.D.

Western New England Institute for Psychoanalysis

Laura Anderson, M.D.

Denver Institute for Psychoanalysis

Elizabeth Tillinghast, M.D.

Columbia University Center for Psychoanalytic Training and Research

Child and Adolescent

Sheri Butler Hunt, M.D. Seattle Psychoanalytic Society and Institute

CAMPAIGN STATEMENTS

Eric J. Nuetzel



Eric J. Nuetzel

Generativity is the word that comes to mind as I imagine serving as president-elect and president of the American Psychoanalytic Association. Erik Erikson coined the term to capture an adult's

ability to productively influence the next and future generations by contributing something of value. Recently, I tried to put this into practice by leading the revision of our educational standards and through various efforts to strengthen research within our Association. More needs to be done. The concept of generativity is the opposite of stagnation, the inability to move forward for oneself or for others. Generativity, as a concept, embodies the personal desire to give back. Although the idea arose in regard to individual psychosocial development, generativity for our profession is our most pressing challenge. Our field is vibrant in many ways, yet I fear stagnation, and worse, if we do not find a way toward greater collective generativity.

Our problems are familiar to all; psychoanalytic patients are scarce, training programs are having difficulty finding candidates, the influence of psychoanalysis in academic settings is diminished, and the respect our profession once enjoyed in the general culture has waned. With rare exceptions, psychoanalysis is generally taught and practiced outside of formal academic settings. That model worked in the past because many, if not most, training programs in psychiatry considered psychoanalysis essential for an enlightened understanding of individual dynamics and psychopathology, and as the intellectual basis for all less intensive psychotherapeutic interventions. Psychoanalysis had an academic home and allies in major departments of psychiatry. With tremendous advances in psychobiology and the emerging emphasis on evidence-based medicine, psychoanalysis has lost its foothold within academic psychiatry. In most parts of the country, psychoanalysis is without an academic home.

What does the place of psychoanalysis within academia have to do with our current challenges? Everything. Universities are central to the intellectual community, to the development of critical thinking and disciplined inquiry, to the development of research, and they are where the students are. Educational outreach facilitates referrals for treatment. Well-educated, highly skilled, intelligent, and motivated students are our best hope for future candidates. We need to recommit to teach and supervise psychiatric residents, doctoral candidates in clinical psychology, social work students, as well as interested undergraduate and graduate students and postdoctoral fellows in all areas of humanistic inquiry. The field needs to foster the development of psychoanalytic clinicians, researchers, and scholars, Our members who are full-time academics and institutes within our Association that exist within universities could help guide us in developing formal structures between psychoanalytic institutes and universities, in order to build a solid presence within the academy.

Our Association has long been divided by conflicts over educational policy and governance. It is time for us to work together to address all of the issues we face. A useful model for moving forward is the recent Task Force on Educational Standards Revisions (TFESR), which brought together colleagues with opposing views to craft the new Educational Standards, adopted in June of 2010. These new standards introduced a waiver of the training analyst requirement. They also outline an institute option of a Developmental Pathway for advancement from candidacy through graduation. The pathway includes a local process with national input for those who wish to become certified graduates and training and/or supervising analysts simultaneously. These revisions were possible because members with passionate differences met together in a collegial and respectful process. We need more of that. We need to talk with, not past, one another.

The Qualitative Report of the Spring 2011 Strategic Plan (see the Members Section of the Association's Web site) recommends:

A more nimble Association,
Improved communication between
our societies, centers, institutes,
and the Association,
More inclusive governance with
candidate representation,
A review of our educational requirements,
Reclaimed connections between
psychoanalysis and academia,
Vigorous advocacy for privacy,
confidentiality, and reimbursement,
Support for psychoanalytically relevant
research, and

Civility and respect on our listservs.

All of the recommendations of the Strategic Plan deserve our attention. We need a nimble Association, good communication, continuous review of our newly revised educational requirements, and inclusive governance with candidate representation. Reincorporating psychoanalysis within academia is the most challenging recommendation, and that effort should be a priority. Relevant research and scholarship, along with vigorous advocacy would result in progressive evolution of our profession and our Association. These efforts should add value to being part of our Association, individually and collectively. If our stature within academia and the broader culture were to improve, civility and respect for one another just might grow.

Our Association has always tried to be a beacon for the psychoanalytic profession. We need to work together to move beyond our internal conflicts. If in time we are able to reverse the trends of fewer analytic patients, fewer analytic candidates, and diminished prestige within the intellectual and scientific community through a reincorporation of psychoanalysis into academic and research settings, we will have achieved something of real value. It would be an honor to serve the Association in such a generative effort. I welcome your support.

Please visit my campaign Web site: http://ericnuetzel.com.

Mark D. Smaller



Mark D. Smaller

"It always seems impossible until it's done."

Nelson Mandela

With 100 years behind us, the American Psychoanalytic

Association is at a crossroad and needs a serious new direction if not a complete transformation. Internal arguments can no longer cripple us, leading many members, active or estranged, to believe moving in such a direction is impossible. I am running for president because I believe that with the will of the membership APsaA can move forward. The majority of members want serious change.

With recommendations from our Strategic Plan in mind, consider the following:

Can we build on our greatest strength—an unwavering commitment to psychoanalysis—while focusing on our members' daily lives, practices, patients, and communities? We must commit in action to fresh ideas about the practice of analysis and psychotherapy; to real flexibility in educating new candidates; and to developing clinical skills based on supervision, personal analysis, curriculum, and the reliable case study method. We must include newer research in our curricula, from neuropsychoanalysis, follow-up and effectiveness studies, and from other scientific fields. I believe we can—now more than ever.

This new direction will embrace the application of psychoanalytic ideas in our communities where people are suffering. Having presented in two symposia at our June meeting in San Francisco—one on the impact of immigration enforcement on families and children, and the other on bullying—the success of these programs convinced me that other members recognize that being a psychoanalyst in 2011 includes a commitment to this work outside of our offices.

Participating a week later in a conference, "Reducing Youth Violence," in Pittsburgh produced similar results. The needs of children, families, schools, returning veterans, and communities continue to grow, especially during a depressed economy.

We have a professional, if not moral obligation, to contribute toward solutions to these critical issues.

Our lobbying efforts must move far beyond self-interest and practice concerns. Racism, homophobia, sexism, and bullying outside and within APsaA must be more thoughtfully addressed. Violence in our streets or international community must be APsaA's concern. Learning from our community work will strengthen the clinical work we do behind our couches. More importantly, such a commitment will interfere with our internal organizational preoccupations. Of this I am absolutely certain.

This new direction must include addressing meaningful collegial connections to each other. Anonymity promotes splitting and destructive behavior. Familiarity breeds connection and cooperation. As president-elect and president, I will make certain that people speak personally with each other—always. Without this connection, successful meetings, strategic planning, and governance reform will not be enough for real change. Let's put to rest the fear of many that psychoanalysis will move forward without APsaA.

How?

With your input and support, I will work with the Executive Committee and Executive Council/Board of Directors, to move in this new direction. All decisions will be organized around what will inspire and assist members in regaining enthusiasm and confidence in their psychoanalytic practices, and help institutes (recruitment, education, development) in a new world of practice. APsaA will become the resource for creative ideas that work and facilitate successful local efforts.

Many new members have no idea that APsaA can be useful to them or how they

can contribute to APsaA. This new direction moves us out of our current impasse.

Yes, we are at an impasse. In February our president, Warren Procci, reported that 100 members resigned during 2010. More troubling, 30 candidates during 2010 abandoned their training. One hundred thirty resignations are about 4 percent of our voting membership. Combine that with our aging membership, and without successful recruitment of new candidates, we will soon be out of business. One midsize institute reported only one new candidate in five years. Other smaller institutes could be forced to close down. Change at a glacial pace is no longer an option.

We are falling behind respected institutes outside APsaA. An outdated TA system and curricula that exclude contemporary approaches to analysis and psychotherapy will be our demise. It's no surprise that prospective candidates seek training from other organizations. We must overcome the perception that we are unwelcoming, old, and inflexible regarding practice, education, and research.

After over 20 years working for APsaA chairing committees, co-chairing the former Committee on Foundations for 13 years, and running in two national campaigns, I have visited or been in touch with every local group in the country. I am convinced that the majority of members want serious change. Impasses are opportunities that motivate me to work with others toward creative solutions.

Please join me to get done what many see as impossible. I pledge that we will work together with thoughtfulness, reflection, transparency, respect, and integrity. Let me know your ideas about how we can move forward, together (312-447-0605; marksmaller@gmail.com). You can review my CV at: www.markdsmaller.com.

Thank you for your nomination. I am humbled to be considered for a third time for national office and remain inspired to serve you. We can all agree—psychoanalysis, now more than ever!

Hilli Dagony-Clark



Hilli Dagony-Clark

I'm thrilled to run for APsaA's councilorat-large position. As an avid participant in the organization's academic and administrative life and a practitioner committed to psychoanalytic thought and practice, I

am dedicated to representing the views of like-minded colleagues. I'm interested in this position because I have been deeply influenced by tremendous opportunities available at our organization and wish to give back what I received many times over. Having a finger on the pulse of our Association through internal involvement and public outreach will ensure its productive evolution through its second century.

As president of APsaA's Candidates' Council, I feel uniquely suited to represent the membership. I am keenly aware of issues that affect education and training and am comfortable functioning in an administrative

role geared toward upholding standards and making changes. Before becoming Candidates' Council president, I was chair of my institute's Candidate's Organization, as well as Affiliate Council delegate, Program Committee chair, and president-elect. I was also recently elected to the board of directors at my institute. I have furthermore chaired several discussion groups at APsaA addressing theory and technique. My administrative responsibilities have taught me to represent candidates' views to the leadership in an effort to effect change and illuminate central issues.

I believe the issues that most require our attention are our vitality and necessity. Despite the cultural influence of psychoanalysis, it is nonetheless viewed as peripheral to short-term treatments. This is a consequence of a financial and social movement that embraces immediate gratification in lieu of deeper experiences that generate significant changes. We must therefore make APsaA's stellar services, such as outreach and

education, accessible to the public. While we must voice our differences internally so that we may sharpen our identity, furthering psychoanalysis through outreach must always be at the forefront of our mission.

We can achieve increased vitality by nurturing our members internally and engaging in outreach in the public sector. To combat declining membership and candidate dropout, as Candidates' Council president I plan to launch a mentorship program pairing incoming candidates with members so that individuals may feel connected to the organization in the beginning, middle, and conclusion of their professional lives. Furthermore, I believe we must become involved in lobbying and policy work aimed at promoting mental health nationally. Taking political positions on topics like homelessness and mental illness is vital for our survival.

APsaA is an incredible organization that offers immense opportunities. I hope that I can utilize my administrative leadership background and awareness of the candidate experience to serve the Association as councilor-at-large.

David I. Falk



David I. Falk

I am honored to be renominated for the position of councilorat-large. I have completed a partial term, and I wish to continue my efforts to improve the functioning of Council and to serve

the wishes of members of our diverse organization. Chief among these wishes is the strong hope that we can work together without the bitter argumentation that sometimes takes over our discourse. We have differences of opinion with regard to many issues, but I hope to work with all members with respect and kindness. We have all worked long and hard to attain our positions as psychoanalysts and we need to deal with each other with care for each other's concerns.

I am currently chair of Policies and Procedures where giving a vote to the Candidates' Council will be considered. I am chair of the Council Nominating Committee; I am the acting chair of the Committee on Council that continues to work to improve the functioning of Council; and I am a member of the Audit and Compensation Committees. Most important, I was recently elected by Council to be one of their two guest representatives to the Executive Committee.

I maintain a private practice while being president of the Cleveland Psychoanalytic Center, having served as their treasurer. I am continuing my work on a Healthcare MBA I started last year. I find that understanding the structure and functioning of organizations and the impact of finance issues on organizational life serves me well in my various roles. The work now under way with the Strategic Plan will serve to stimulate constructive problem

solving as we face changing numbers of members and dollars. I am hopeful that the membership will vote their conscience and approve the proposed bylaw amendment to give full voting rights to the representatives from Council along with votes to the BOPS representatives. I am one who feels that half a loaf is better than no loaf at all and I am supporting the proposed amendment. The amendment could have been more balanced if it allowed councilors to participate in BOPS. This would have achieved real balance and narrowed the distance and distrust between these two groups. Only by talking and working together as colleagues to address common problems will we overcome the longstanding conflicts that have divided us. If we are to survive, we will need to change our organization in response to the changing environment in which we work.

I hope to bring this valuable experience with me as I continue to represent the concerns and interests of our members.

Ellen Helman



Ellen Helma

My involvement with APsaA has enriched my professional life tremendously and strengthened my identity as a psychoanalyst. I became active in APsaA as a candidate when I chaired the

Affiliate Council Scientific Program Committee, and since that time I have served on the APsaA Program Committee, the Committee on Public Information, and currently on BOPS, the Committee on Child and Adolescent Analysis and the COPE Study Group on Boundary Violations.

On a local level, I am presently serving a second term as director of the Florida Psychoanalytic Institute. In previous years, I chaired our Program Committee, served as treasurer

of our society and later president of the society. I led our organization to embark on a strategic planning process that helped us to become a more open and welcoming community for all mental health clinicians. As society president, I initiated an amendment to our bylaws to allow two psychotherapist members to serve on our board of directors. To expand the reach and relevance of our institute, society, and foundation, I led the effort to hire a marketing and Web development company to create a new Web site for our organization.

Our work is isolating and we have to absorb a great deal of aggression in our consulting rooms. It is disheartening to see the attacks we levy at one another when there are differences of opinion. At a time when our profession is facing many external threats, we turn the aggression on one another, draining our organization of creativity and

constructive debate on important issues such as research, advocacy, practice development, and outreach.

My institute, like many others, faced a time of change and strain in recent years. As director of our institute I am excited to be part of a team that is determined to bring people together and move our organization forward. Through our efforts there is a renewed vibrancy and spirit in our institute and an excitement about psychoanalytic training in our local community. If elected councilor-at-large I hope to be able to work with others in fostering the same atmosphere of cooperation, collaboration, and respect. As a member of APsaA's board of directors I would advocate for redirecting our efforts from issues of governance to focus on some of the current threats to our profession, such as the impact of managed care, and research that scientifically supports the effectiveness of the work that we do with our patients every day.

Paul C. Holinger



Paul C. Holinger

I love psychoanalysis. I love it because it allows us to help people recover their lives or find life for the first time.

I love psychoanalysis because we can help children and adoles-

cents and prevent problems and enhance potential.

I love psychoanalysis because it gives us a way to understand the internal world of human beings, which in turn can lead to social activism and profound changes in our society.

Yet, as Lincoln said, "If the good people in their wisdom shall see fit to keep me in the background, I have been too familiar with disappointments to be very much chagrined."

So, regardless of the outcome, I will do whatever I can to be of assistance to psychoanalysis and our Association!

IPA Election Results 2011

PRESIDENT

The current president, Charles Hanly, has been elected unopposed for a second term 2011–2013

PRESIDENT-ELECT (WITH VICE PRESIDENT-ELECT)

Stefano Bolognini/Alexandra Billinghurst

TREASURER

Juan Carlos Weissmann

NORTH AMERICAN REPRESENTATIVES

Robert Lindsay Pyles

Edward Nersessian

Newell Fischer

Howard B. Levine

Maureen Murphy

Mary Kay O'Neil

Lee I. Ascherman

For more information, visit http://www.ipa.org.uk/eng/about-ipa/ipa-elections-2011/

Kerry Kelly Novick



Kerry Kelly Novick

Psychoanalysis matters. I am committed to psychoanalysis because it offers the most complete view of the human condition that we yet have. It can inform all the different ways of helping people

grapple with the challenges of life. I don't think that any one organization, or group, or theoretical model, or metapsychological point of view, or structure of treatment, or political stance has a corner on truth, or even necessarily the best or only possibility of progress in our field. But, just as we hope to bring our patients and students to see that they have greater freedom of choice in their lives, we do have serious choices ahead to make in our professional and organizational collective life.

I have chosen to run for councilor-at-large because I realized that my strong feelings about APsaA should be expressed by working to support the comprehensive mission as I understand it. What I think we need from our professional organization is creativity, innovation, and support for our practice, research, and education roles. As an organization I want us to live values of inclusiveness, diversity, imagination, and respect for the contributions of individuals with whom we may disagree. I hope, too, for increased advocacy, not only for psychoanalysis itself, but also for social causes where we have so much of substance to offer.

To this job I can bring the experience of 45 years of work as a practicing child, adolescent, and adult psychoanalyst; supervision and teaching in many different contexts and training settings from hospitals to nursery schools,

as well as numerous psychoanalytic institutes across the country; and a wealth of community effort, including being part of founding a successful, ongoing, award-winning psychoanalytic preschool. My professional life has always included active scientific endeavors, with many published articles and books, as well as a research grant from the IPA, and other grants from the APF. I am a training and supervising analyst of the IPA.

Administratively I have served on multiple committees at my local institute, where I have chaired our Child Analysis Committee, and was part of creating and implementing the first Integrated Child and Adult Curriculum in the world; I chaired the APsaA Executive Council's Committee on Child and Adolescent Psychoanalysis (COCAP) for several years; I have been councilor, secretary, membership chair, and president of the Association for Child Psychoanalysis; and I am a member of the IPA's COCAP.

Jeffrey K. Seitelman



Jeffrey K. Seitelman

We have an important opportunity to reinvigorate our organization with greater hope and strength, and to make an impact on and for the mental health and health professions. The American

Psychoanalytic Association, our Association, has enormous potential for standing up for psychoanalytic ideals and for the nurturance of current and future members. We must continue to make available psychoanalytic expertise for our communities which are in such pain. We must keep psychoanalytic thought and practice alive in the training programs of social work, psychology, psychiatry, the academy, and the various areas of medicine.

I am seeking your support to become an elected member (at large) of our board of directors, our Executive Council. My goal is

to represent your will and to help fully lead our organization into the 21st century. We have much work ahead. We must devote ourselves to internal and external issues: improved self-governance including adherence to the NYS laws under which we operate, the continued quest for greater openness, and consultation with our members on all matters of policy. All members need to feel considered and involved, that their ideas matter. Greater input and support for our training programs are needed; help to guide more of our members in developing and expanding their psychoanalytic and psychodynamic practices, and improving our presence in community work. Toward these ends I have long been an admirer and supporter of Ralph Fishkin's and Paul Mosher's efforts on behalf of our Council, bylaws, and governance, and Judy Schachter's enormous work to get our financial ship in order. Finally and urgently, we must have greater representation of our

Executive Council on the Executive Committee especially and including voting representatives from our candidates.

We can first set an example in the manner in which we conduct ourselves and our affairs, such that the mental health and health professional communities seek out our expertise, and we can learn from those outside our field in a mutual sharing. Appropriate governance behavior will improve our waning morale and declining membership. Newer and fresh young professionals must actively be recruited and positioned on the cusp of psychoanalytic practice. We must place ourselves in the service of all manner of psychoanalytic mental health initiatives for the benefit of our members, constituent societies, and our affiliated co-professionals in social work, psychology, medicine, and psychiatry. I believe we can be ready and able to do what it takes to help psychoanalysis grow and thrive.

I invite further comments/opinions to be e-mailed to me at: jeffseitelman@verizon.net. Thank you for your time and attention to these thoughts.

BOPS: Just the FAQ's

Continued from page 5

ultimately in the best interest of the candidate. We have assumed that a candidate is better served by remaining in a personal analysis which falls outside the usual organizational and professional umbrella, but we do not at present have any clear data to support this. However, we are now taking steps to study this very important question, first through the development of this waiver and next, through a systematic study of this and other aspects of our training programs.

DEVELOPING DATA TO ADDRESS THESE QUESTIONS

Our new standards require us to systematically study and produce data leading to informed changes to our evolving system of education. Through organized collaboration with our institutes and with the help of our BOPS science advisors, we plan to develop a method for data collection and its analysis. In the meantime, there are very specific things we can all do in this effort. The Committee on Institutes (COI) has the responsibility of establishing the guidelines for when these waivers should be granted. Individual institutes are asked to have clear policies and procedures in place to evaluate the suitability and eligibility of personal analysts. For each of us individually, there are some measures which we can take as psychoanalytic educators to create a healthy and nurturing environment for candidates:

- I. Communicate clear, consistent, and accurate information to candidates and prospective candidates about what will be expected of them during their training.
- Submit waiver applications to the COI early in the admissions process and prior to matriculation.
- 3. Do not have potential candidates for whom the institute has requested a waiver begin classes prior to approval of the requested waiver.

And by all means, keep the lines of communication open and the questions coming.

Highlights of the Executive Council Meeting

The Executive Council deliberated and approved a number of governance-related issues as well as some far reaching organizational issues at their recent June meeting in San Francisco.

Among the governance issues, an investment policy for APsaA's reserve funds and a use policy (defining how the reserve funds are to be used) were approved. A confidentiality policy concerning executive sessions was approved. The fiscal year 2012 budget was approved. And new election guidelines were also approved, which include the elimination of the Election Oversight Committee and a revised disclosure statement for candidates running for office.

STRATEGIC PLAN UNDER WAY

The most important topic covered during the Executive Council meeting was the consideration of the draft Strategic Plan developed by APsaA's Strategic Planning Task Force with assistance from Association Management & Marketing Resources (AMMR), a consulting firm experienced in working with national membership associations. Steve Carey, the lead AMMR strategist, presented the draft plan with assistance from several members of the task force. Every APsaA member received the draft plan in the mail in May. The Executive Council offered their comments and suggestions and enthusiastically authorized the task force to move to the next phase, which will be to incorporate those suggestions and develop an implementation strategy for the plan.

HISTORIC NEW PATH TO MEMBERSHIP

There was a historic moment during the council meeting when the Executive Council approved seven new APsaA members who were joining the Association through the new Alternative Pathway membership process. The membership had approved this change in the bylaws a year ago and these were the first applications from analysts who were not trained at either an APsaA institute or an IPA institute.

FUTURE OF THE SPRING ANNUAL MEETING

The Executive Council also approved a minority report recommendation of the Task Force on the Future of Spring Meetings, which charges the Program Committee with creating a new 2-3 day spring Annual Meeting format. The Program Committee will undertake an electronic survey of the membership for the purpose of incorporating member feedback in the redesign. The hope is that a redesigned spring meeting will be implemented in June 2013. As part of the resolution, APsaA's 2012 Annual Meeting in June will be held in the traditional format. The meeting will be June 12–17, 2012, in Chicago.

ACCREDITATION

The Executive Council approved an allocation of \$40,000 for the Accreditation Council for Psychoanalytic Education (ACPE). These funds, along with \$60,000 from the three other organizational members of the Psychoanalytic Consortium (Division 39 of the American Psychological Association, the American Academy of Psychoanalysis and Dynamic Psychiatry, and the American Association for Psychoanalysis in Clinical Social Work) will be used to support ACPE's efforts to seek recognition from the U.S. Department of Education as a national accreditation body for psychoanalytic training institutes.

Psychodynamic Treatments

Continued from page 1

THE ARGUMENT FOR RCTS

I highlighted one reason for this difference between Shedler and me: our disagreement about the place of randomized con-



Andrew J. Gerber

trolled trials (RCTs) in the field. I pointed out that the number of high-quality non-psychodynamic trials far exceeds the number of psychodynamic trials, and that most psychodynamic trials (which I believe is true of non-dynamic trials as well) only demonstrate the superiority of dynamic treatment over an "inactive" treatment, that is, one specifically designed not to work very well. I suggest that though every standard is flawed, RCTs have certain important scientific advantages (most importantly, that they reduce, but do not eliminate, the risk

one is suggesting that each study is part of a larger group of studies, and that the difference between them can be accounted for largely by measurement error or differences in the numbers of subjects enrolled in each study. I believe, however, that the largest differences between these studies is how the comparison group was defined, and therefore it is not meaningful to combine studies which used a well-designed or "active" comparison with those that used an "inactive" comparison that was specifically designed to fail. In fact, of the 63 comparisons between dynamic treatments and an "active" comparator, dynamic treatments won 6 times, lost 10 times (not a significant difference), but tied 47 times. Meanwhile of the 40 comparisons between dynamic treatments and an "inactive" comparator, dynamic treatments won 27 times, tied 12 times, and lost only once. Such a striking difference suggests that it is only through this lens, that is, considering separately what happens when the comparator treatments are designed to be good or are designed to fail, that we can make meaningful conclusions (and do meaningful aggregations of effect sizes).

There is important work to be done in developing and testing new treatments that can benefit an ever wider number of individuals with psychological difficulties and to do so in a way that is practical, empirically verifiable, and captures the richness of the human experience.

of investigators seeing only the conclusion they want to see in their data) and also represent a generally agreed upon "entrance fee" to the empirical research world. Even if we disagree with this standard, I argue, it is clearly in our own best interests to join in such efforts, rather than to dismiss them as unscientific.

The next issue I would like to raise, as Shedler does in his paper (and we specifically avoid in ours), is whether the aggregation of effect sizes over different variants of PDT, different diagnostic groups, and different comparator types is a worthwhile endeavor. By extracting from individual trials an effective size, that is a quantitative estimate of how efficacious a treatment is as compared to another, and then averaging multiple such effect sizes together,

The second issue that this raises is what it means to "tie" in a comparison of psychotherapeutic efficacy. At first glance, it may appear that the large number of ties indicates that dynamic treatments are "as good" as nondynamic treatments, and therefore equally worthy of the moniker "evidence based." The problem, however, is that there is an important scientific and statistical distinction between a tie which represents the failure of a study to show a difference and a tie which shows that it is unlikely that a real difference exists. This distinction, often quantified as the "power" of a study to detect effects of certain size, is most strongly influenced by the sample size of the study. In order for a study to show that the difference between two treatments is unlikely

to be real, the sample size must be large, i.e., "powered for equivalence"—on the order of 200 or more subjects in the total study. The others simply fail to show a distinction and leave unanswered the question of whether a real difference in fact exists. The sample sizes of the studies reviewed in our paper are small (the median is 73 subjects across all groups) and only one of the 47 studies which showed a tie with an active comparator likely had the sample size or power to show that these two modalities were equivalent. This limits the utility of these findings and increases the need for further, well-powered studies, to either establish that dynamic treatments are better than inactive comparators or at least as good as active comparators.

OLD WINE IN NEW BOTTLES?

Finally, I would like to take up another of Shedler's main points, that the mechanism of action for non-dynamic treatments is likely heavily rooted in techniques and concepts first described and developed by dynamic treatment and theory, and later appropriated and re-named by non-dynamic treatments. Though the richness and sophistication of psychoanalytic theory and technique are what drew me to the fields of psychology and psychiatry, and I share with Shedler the sense that they continue to capture the complexity of human experience in a more comprehensive way than any other single theory of the mind, I think it is an error to insult our colleagues by suggesting that their work is principally derivative of psychoanalytic thinking and/or offers no new significant contribution. If scholarship has taught us one thing, it is that there are many ways to describe complex phenomena and that, more often than not, each perspective adds to the whole picture rather than detracting from the original or true depiction. Psychoanalysis introduced a myriad of new and exciting concepts and techniques but also got stuck in certain ways. First, it evolved a methodology and culture that had trouble welcoming new ideas without first demeaning them and to this day lacks a systematic way of reducing individual bias in deciding which theory is best, which perpetuates cliques, cults of personality, and

Continued on page 20

New Psychoanalytic Understanding of Addiction

Lance M. Dodes



Lance M. Dodes

For many years psychoanalysts have avoided offering psychoanalysis to patients with a ddictions because of a series of misunderstandings. These include

early psychoanalytic views that people with addictions are too ill to participate in an analytic process, an unjustified reliance on the therapeutic reputation of I2-step programs (they are effective for only 5-I0 percent of people who attend), and an

overvaluation of neurobiological findings that have mistakenly suggested that addiction is a "brain disease"—a view based largely on findings with rats, which has been repeatedly demonstrated to be inapplicable to addictions in humans.

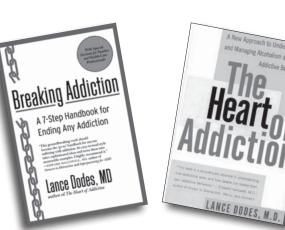
Addictions can, in fact, be shown to be primarily psychological symptoms, a subset of psychological compulsions generally, and as suitable for psychoanalysis or psychoanalytic therapy as other compulsions. As with other compulsions, people with

addictions run the gamut of mental health. Their analyzability depends not upon their addictive symptom but upon their overall level of psychological function.

Lance M. Dodes, M.D., is training and supervising analyst at the Boston Psychoanalytic Society and Institute, assistant clinical professor of psychiatry at Harvard Medical School, and author of The Heart Of Addiction (2002) and Breaking Addiction (2011), both published by HarperCollins.

THREE MAJOR ELEMENTS: HELPLESSNESS, RAGE, AND DISPLACEMENT

First, every addictive act is preceded by a feeling of overwhelming helplessness or powerlessness. The issues that precipitate such overwhelmed states are unique to each person, and a reason that individual psychodynamic therapy is frequently the most appropriate treatment for people with addictions. Addictive behavior functions to repair this helplessness. It is able to do this because taking the addictive action (or, significantly, even deciding to take this action) creates a sense of being empowered, of regaining control over one's emotional experience and one's life. Drugs are particularly apt for this



purpose because they possess the capacity to alter and, thereby, reclaim control of one's emotional state. However, non-drug addictions (for example, gambling, exercising, compulsive use of the Internet) can be shown to work in exactly the same way, since it is the ability to intentionally do something that will alter and control one's affective state that is important, not a physiological drug action. This reversal of helplessness may be described as the psychological function of addiction.

Second, states of overwhelming helplessness inevitably produce a particular sense of rage in response to the narcissistic injury of loss of control over oneself. As a reaction to



narcissistic injury this feeling may be properly termed narcissistic rage. Narcissistic rage is well known for its powerful compulsive qualities, its capacity to overwhelm one's judgment while in the throes of the rage, and its deep intensity. These characteristics are identical to those that describe addiction. Indeed, it is the presence of narcissistic rage (at helplessness) that gives addiction its most defining characteristics, and it is narcissistic rage at helplessness that provides the drive behind addiction.

The final element in addiction is understanding why it takes the forms it does. These

forms are a consequence of the fact that all addictive behaviors are displacements. For example, if a man were flooded with feelings of intolerable helplessness when he was unfairly criticized by his superior (because the criticism touched on specific unresolved issues) and he regularly dealt with such circumstances by drinking, his behavior could be understood to be a (temporarily successful) effort to reverse his helplessness via this displaced act. And this act would be intensely

driven by the rage associated with his need to overcome his intolerably powerless state. We call such repetitively driven behaviors addictions. On the other hand, if when he was criticized he had instead charged into his boss's office furiously complaining, he would have reversed his helplessness by this direct act. It is very unlikely that he would have had a drink. Addictions exist only when there is a displacement. Indeed, we name addictions by the displacement. This man had alcoholism, but if he shifted to reverse his helplessness by driving to a casino we would change his diagnosis to "compulsive gambling."

Continued on page 27



TEMPEST

Richard M. Waugaman



Richard M. Waugaman

By the time you read this, Julie Taymor's wonderful 2010 film version of Shakespeare's The Tempest starring Helen Mirren as "Prospera" will be available on

DVD. Since we could not obtain it for the June meeting, we instead showed the BBC's 1980 version directed by John Gorrie, with Michael Hordern as a more traditional Prospero. This older version includes more of the play's full text—both stage and film versions of Shakespeare's plays are usually cut, often extensively. For example, it was a treat to see the "masque" scene of Act 4, with Juno and two other goddesses.

Loss is a central theme in *The Tempest*. Prospero was marooned on an island after he lost his dukedom. He and his daughter Miranda have been the only human creatures on this island for 12 years, and now Prospero faces the loss of their close bond as she falls in love with Ferdinand. The play ends as Prospero voluntarily relinquishes his formidable magical powers. His precious books have been his intellectual companions on the island, but he even "drowns" his book of magic.

Edward de Vere, Earl of Oxford (1550-1604) voluntarily relinquished credit for some of the greatest works of literature ever written. As though seeking divine encouragement for his anonymity, he wrote the single

Richard M. Waugaman, M.D., is training and supervising analyst, emeritus, Washington Psychoanalytic Institute; clinical professor of psychiatry, Georgetown; and reader at the Folger Shakespeare Library. Thirty-five of his 100 publications are on Shakespeare and the psychology of pseudonymity.

word "continue" in the margin above a biblical passage that provides

reassurance that God knows all and will reward secret acts of virtue. Henry James was profoundly skeptical about the traditional authorship legend. In his essay on *The Tempest*, he wrote that it was nearly unbearable not to know more about the real author. He found it especially inconceivable that the greatest writer in history simply retired from his writing career, as the traditional theory maintains. Of the enigma of this ostensible retirement from writing, James commented, "Its power to torment us intellectually seems scarcely to be borne."

Freud became so taken with de Vere's authorship of Shakespeare's canon that, when he died, half of his books on English literature



If The Tempest was indeed Shakespeare's farewell to the stage, it should not surprise us to find several salient connections with the final two years of de Vere's life. His close friend Queen Elizabeth died in March 1603. De Vere was ill during the months leading up to his death in June 1604. As he was facing death, his youngest daughter, Susan, was preparing to marry Philip Herbert (one of the brothers to whom Shakespeare's 1623 First Folio of complete plays was dedicated).

People have loved Shakespeare's works for centuries, without knowing who their true author was. For psychoanalysts especially, these works of genius take on even greater depth and humanity when we begin looking at the complex interactions between de Vere's life experiences and his peerless imagination.

For more details on Freud, Shakespeare, and The Tempest, see www.oxfreudian.com.

New Members

100th Annual Meeting Palace Hotel, San Francisco

ACTIVE MEMBERS

Soh Agatsuma, M.D.

Denia G. Barrett, M.S.W.

Thomas F. Barrett, Ph.D.

Meryl A. Berlin, Ph.D.

Dana Blue, LICSW, F.I.P.A.

Jennifer Blum, M.D.

Roberta Brenner, M.S.S., L.C.S.W.

Natasha Chriss, M.D.

Kimberly Chu, L.C.S.W.

Kim Gelé, Ph.D.

Diane K. Gibson, M.S.W.

Jane Halperin, Ph.D.

Thomas B. Janoski, Ph.D.

Anne Malone, M.S.S., L.C.S.W

Mark Moore, Ph.D.

Eva Dubska Papiasvili, Ph.D., A.B.P.P.

Bruce Rudisch, M.D.

Caroline M. Sehon, M.D.

Carol J. Stuart, Psy.D.

Carl J. Tuss, M.S.W.

Margaret C. Walsh, Ph.D.

Tanya Weisman, M.D.

Diane M. Wolman, M.S.W.

CANDIDATE MEMBERS

Walter Lathy, M.F.T.

Martha Maer, L.P.C.

Andrew Rosendahl, M.D., Ph.D.

Adriana Shuster, M.D.

The King's Psychotherapy

Lawrence D. Blum



Lawrence D. Blum

In The King's Speech, Prince Albert gets the royal treatment—by being treated the same as everyone else. Like the commoners who consult Lionel Logue, Prince

Albert is helped to confront his avoidances, to tolerate his feelings, and to understand his fears and fantasies. A humane respect for emotional problems may be uncommon among humans but is captivating in this movie that has proved more popular than anyone expected. Albert's good fortune, his path toward emotional liberation, is that his speech therapy incorporates so many features of psychoanalytic therapy.

When Prince Albert turns to Logue for help with his debilitating, humiliating stutter, Logue promptly refuses special requests house calls—for royalty, insisting on "my house, my rules." He also makes the provocative demand that he and the prince should call each other by first names. Logue thus indicates to the prince that he will have to struggle with his shame and anxiety as anyone else would—royalty offers no protection from human emotions. He also immediately shows his patient that the relationship between them is a matter for observation and discussion. This setting of a framework that will allow the therapist and the patient to examine and discuss the relationship that develops between them is a fundamental psychoanalytic principle. It gives patients a new window on their own minds and how they relate to other people.

Lawrence D. Blum M.D., is a psychiatrist and psychoanalyst in private practice in Philadelphia and Cherry Hill, NJ. He is on the faculty of the Psychoanalytic Center of Philadelphia and is clinical assistant professor of psychiatry at the University of Pennsylvania.

Logue next devotes much effort to showing "Bertie" that his stuttering is aggravated by his anxiety: It is diminished when he is distracted by music, and he has less inhibition of speech when he can or sing. curse This recognition

paves the way to help Bertie look more deeply at the substance of the emotional struggles that interfere with his speech. In psychoanalysis, this process of clarifying present concerns to reveal more hidden matters is called analyzing defenses or "resistances." When he has successfully overcome some of his initial objections and feels less ashamed, Bertie can gradually see that as an adult he is continuing the fearful mental battles of his childhood. Bertie then tests out some of his long-suppressed challenges to his old adversaries, his father and brother, in his relationship with his therapist. As Logue tolerates these challenges without criticizing or attacking his patient, Bertie starts to feel free to find is own voice.

Unconscious, leftover struggles from child-hood influence all of us. The opportunity to play out, observe and alter them in relation to the therapist is one of the most important contributions of psychoanalysis. If you've ever wondered what psychoanalytic treatments are like, *The King's Speech* provides an unusually good cinematic representation of a psychoanalytic therapy. There's no magic to the iconic couch: The key is what goes on between the two people.

We live in a quick-fix society. We focus on what people do but don't look inside at why they do it. This is the kind of approach—just try to change the behavior—that did not work for Prince Albert and that left him



Colin Firth plays King George VI, who, to overcome his stammer, sees Lionel Logue, an unorthodox Australian speech therapist played by Geoffrey Rush.

discouraged about himself and about any prospect for help. But no matter the behavior, it is still wise to remember the mind, with all the complex feelings, thoughts, and emotional conflicts to which humans are subject. Treatments such as the one that helped Bertie require intense emotional involvement and much time. They aren't for everyone, and they don't follow a script. While most therapists are not trained to do them, psychoanalysts are. The royal treatment is still available to those who seek it out.

It is not a coincidence that such an affecting movie as *The King's Speech* depicts a treatment that is so psychoanalytic. No one goes to the movies to watch a formulaic treatment—or a prescription for Prozac. We go to be involved in the full play of human emotions—love, hate, fear, lust, envy, joy, greed, the hidden and forbidden yearnings. Even a stiff-upper-lip royal needs a home for the heart. The final joy of *The King's Speech* is seeing the king's hard-won ability to speak from his heart.

This article written by
Lawrence D. Blum
appeared in the May 2011
issue of Psychiatric Times
and is reprinted with permission.



Study Group on Supervision

Barbara Stimmel

The COPE Study Group on Supervision comprises several components. One is small ongoing working groups which convene during the National (January) and Annual (June) APsaA meetings. Their primary focus is the experience of the members of the group in their roles as supervisors. Typically, one member presents material which is vexing, informative, educational, or has some other interesting aspect which the group discusses. These sessions are confidential and intimate conversations among peers who come to know each other's work and thinking, thus allowing for growth.

Barbara Stimmel, Ph.D., is associate professor in the Department of Psychiatry at Mount Sinai School of Medicine and director of Seminar Series at the Institute of History of Psychiatry at Weill Cornell Medical Center.

A WELCOMING WORK GROUP

A second component of the Supervision Study Group is twice-yearly Supervision Workshops, which are open to all registrants of the scientific meetings and led by the study group chair. These include a presentation that offers clinical and theoretical material, for example, live supervision sessions between a supervisor/supervisee dyad, senior analysts describing their own experiences when seeking supervision, cross-cultural teaching and learning, supervisor/supervisee dyads sharing "sticky" moments in their work and its impact on the supervisee's work with the patient, regional differences in teaching and learning, debate about telephonic and televised supervision, the impact of peer pressure on one's work as a supervisor, the intersection of money and education, and inescapable transference-countertransference enactments. In other words, all the ups and the downs of supervision are on the table. The workshops also enjoy the ensured stability which comes

from many colleagues continuing to attend time after time. However, there is always room for one, or many more.

NEW INITIATIVES FOR SUPERVISING ANALYSTS

A significant new charge to the Supervision Study Group is in response to BOPS's adoption of two pathways, direct and developmental, for institutes of the Association to designate supervising analysts. A study group subcommittee will study methods for implementation of the new guidelines by APsaA institutes. This will include exploring programs that member institutes may use as templates for their routes of development for supervising analysts.

The study group will also develop seminars for APSaA members who are pursuing one of the pathways toward the designation of supervising analyst. These seminars will provide a venue for an exchange of ideas, questions, and perspectives about candidate supervision. This effort will offer guidelines to APsaA institutes and centers for ongoing seminars at the local level to provide continuing education of supervising analysts after their appointment.

We welcome the questions, suggestions, and participation of colleagues in all aspects of the Study Group on Supervision. Please feel free to contact me so that we can discuss this further (barbara.stimmel@mssm.edu).

Psychodynamic Treatments

Continued from page 16

strong regional and institutional disagreements. Second, it became principally identified with a core technique, four or more visits per week on the couch, which is feasible and appropriate for only a small fraction of individuals who cope with mental illness. The developments of later evidence-based psychotherapies, such as cognitive behavioral therapy by Aaron Beck (a psychoanalyst) or interpersonal psychotherapy by Gerald Klerman (also a psychoanalyst) and Myrna Weissman (a collaborator of mine at Columbia), represent important adaptations of core psychoanalytic ideas to new situations and populations. The most likely explanation for the fact that they do not more clearly describe and pay homage to their psychoanalytic roots, as Shedler wishes them to, is that our psychoanalytic forbears labeled them as heretics and refused to consider the valuable contributions they were making. It is thus not surprising that, as psychoanalysis has aged, the tables have turned and the newer psychotherapies are scornful of the establishment that once scorned them.

This cycle needs to end. There is important work to be done in developing and testing new treatments that can benefit an ever wider number of individuals with psychological difficulties and to do so in a way that is practical, empirically verifiable, and captures the richness of the human experience. Collaboration with our colleagues who study other forms of psychotherapy is essential to this effort.

Suggested Readings

Shedler, Jonathan. (2010) The efficacy of psychodynamic psychotherapy. *The American Psychologist* 65 (2): 98-109.

Gerber, Andrew J; Kocsis, James H; Milrod, Barbara L; Roose, Steven P; Barber, Jacques P; Thase, Michael E; Perkins, Patrick; Leon, Andrew C. (2011) A quality-based review of randomized controlled trials of psychodynamic psychotherapy. The American Journal of Psychiatry 168 (1): 19-28.

How to Promote Your Practice Online— And Why Doing So Benefits Psychoanalysis

http://www

Renée Spencer

It is now commonplace for individuals to go online to find a therapist, research a recommended therapist, and to obtain information about mental health



Renée Spencer

conditions and treatment. Many prospective patients expect qualified therapists to list their practices online. While the public is increasingly turning to the Internet for information, psychoanalysis is vastly underrepresented online compared to other forms of treatment. Sadly, searches for therapy outnumber searches for analysis by more than 100 to 1 according to Google Analytics data. In addition to listing your practice on the American Psychoanalytic Association Web site, you can also establish a broader Internet presence.

PERSONAL AND POLITICAL BENEFITS

There are several personal advantages of an online professional presence: developing new patient leads, converting or capturing word-of-mouth referrals who research you online, and helping protect your privacy (with an online presence that you create and control, accidental discovery of personal information is less likely). Even if your practice is full, you can refer patients who contact you through the Internet to like-minded psychoanalytic colleagues, which expands and strengthens your referral network.

Renée Spencer, Ph.D., M.F.T., is a candidate at the San Francisco Center for Psychoanalysis and has an abiding interest in the Internet as a tool for effective psychoanalytic outreach. In 2010, she and her husband Mark Spencer, M.B.A., launched www.GoodTherapists.org.

An online professional presence is not only about self-promotion. It is an increasingly visible outreach avenue for clinicians to share how they think about treatment, depression, anxiety, relationships, parenting, and other subjects from a psychoanalytic perspective. In order to further our own political interests in the survival of psychoanalysis as well as to effectively address prospective patients' needs, we must present psychodynamic therapy and psychoanalysis as appealing and productive treatment options.

WHAT YOU'LL NEED

- A marketing budget
- A high-quality photo
- The right state of mind

One necessary shift in mindset is adding a line item in your practice budget for online marketing. If you gain one patient, you will more than recover your annual advertising costs. A quality, friendly-looking headshot is crucial—a warm photo that is professional, well lit, and color-corrected to display well online. Some people opt to have their photo taken professionally. Your photo represents you and your services so it is worth the investment to make it look professional.

Lastly, you will need an adventuresome spirit, some creative energy, and perseverance.

THREE WAYS TO MARKET YOUR PRACTICE ONLINE

1. Claim Your Business on Google Places

One simple, free step to take is to claim your business on Google Places and write something about your practice. This may help your business come up on a map of local search results when someone searches for a psychiatrist, psychologist, social worker, or therapist, and a city or zip code.

2. List Your Practice in Online Therapist Directories

The quickest and easiest way to get your practice online is to join online therapist directories. They require only a photo, a brief practice description, and a monthly fee. When someone Googles your name, your directory profile(s) will come up at or near the top of search results. The more directories you join the better, as they increase your chances of being found online—though beware, they are not all created equal (see below).

Continued on page 23

Sample Comparison of Online Therapist Directories					
Directory	Messaging Differentiator	Number of Clinicians Listed	Traffic	Cost	
GoodTherapists.org*	Only lists "highest qualified therapists"	Psychoanalysts only	Medium & growing	\$50/month	
GoodTherapy.org	"Ethical & healthy" therapy	Moderate	Strong	\$20/month	
NetworkTherapy.com	None	Moderate	Medium	\$129/year	
PsychologyToday.com	None	Excessive, especially in major cities	Strong	\$30/month; 10% off for APsaA members	
TherapyTribe.com	Unique online discussion forums or tribes	Moderate	Weak	\$20/month	

^{*}GoodTherapists.org is a new directory launched in the San Francisco Bay Area and is now open to analysts throughout the U.S.

andidates' council

Candidate Council

Hilli Dagony-Clark



During my term I hope to focus on the notion of analytic identity within the psychoanalytic world and in the broader context of the mental health field. All of us, and especially trainees, must struggle to authentically internalize a psychoanalytic self, while accurately presenting ourselves as viable competitors in the mental health community. Powerful transferences to trainers, doubts about the efficacy of budding interpretive prowess, and insecurities about economic futures constantly threaten the stability of beginning analysts. Candidates must also move nimbly between their roles as students, patients, analysts, and supervisees several times daily. In short, acquiring analytic competence and identity are challenging tasks that I hope to highlight during my term.



opment of a solid analytic identity, candidate engagement within our organization is essential. Candidates are already involved in various groups in the organization, such as the Ethics Committee, Committee on Institutes (COI), Committee on New Training Facilities (CNTF), and the Program Committee. Candidates also participate on the editorial board of The American Psychoanalyst (TAP). Furthermore, as president-elect and president, Navah Kaplan and I are invited to attend many of the administrative meetings of the organization, including the meetings of the Board of Professional Standards (BOPS) and Executive Council. In fact, some members of the Association are interested in proposing a bylaw amendment that would give the Candidates' Council president the right to vote in Council. This would be a historic and vital development for the organization.

In addition to direct involvement with the membership, there are also several ways of becoming involved within the Candidates' Council directly. We need submissions and reviewers for our Paper Prize, contributions for our newsletter, research for our Ethnic Diversity Committee, assistance with our Digital Media and Communications Committee, and participation in our Candidates' Council Study Group. Our engagement both within the Candidates' Council and with the membership ensures that our voices are heard within an organization that we will inherit in the future.

ment I have begun promoting the involvement of candidates in several other aspects of APsaA life. To this end, Candidates' Council Education chair Caryn Schorr and I have been corresponding with Robert Michels, chair of the Committee on Psychoanalytic Education (COPE), to facilitate the integration of candidates into ongoing member study groups. Several e-mails have been sent on the candidate member listserv, and I hope that you take advantage of this wonderful opportunity to sit on study groups with senior analysts from around the country. Similarly, I plan to help foster a study group within the Candidates' Council. Consider joining this group as well.

Additionally, I hope to revitalize a mentorship program that would pair candidates with APsaA members. These mentorship relationships are intended to help candidates develop an analytic identity and practice through their affiliation with the organization and increase membership within the organization by personalizing that candidate's relationship with APsaA. We therefore need mentors both within the membership and the Candidates' Council.

Another exciting change involves our newsletter. We are transitioning to an electronic version of the Candidate Connection. I would like to thank the new co-editors of the newsletter, Michael Garfinkle and Jamieson Webster, for what I know will be an informative and thoughtprovoking newsletter during their tenure.

Continued on page 23

Candidate Council

Continued from page 22

Finally, I am introducing the new title of analytic trainees within our organization. APsaA members voted on a change in the bylaws in April involving the name of the membership category for APsaA candidates. Candidates training at APsaA institutes who joined the Association were called "Affiliate Members." With a change in the bylaws that category of membership will now be referred to as "Candidate Members," a more straightforward title.

Affiliate members are now officially called "Candidate Members." To that end, the Affiliate Council changed its name at the 100th Annual meeting in June to Candidates' Council.

I look forward to assisting you as best I can on issues of training, immersion into analytic practice, and the inner workings of

APsaA. Please don't hesitate to contact me if I can help with any of these issues

APSA Affiliate Members
have a new
official name:

Candidate Members

at 917-723-5841 or e-mail me at hilli@dagony-clark.com.

Hilli Dagony-Clark, Psy.D., is president of the Candiates' Council.

Promote Your Practice

Continued from page 21

What is an online therapist directory?

Online therapist directories are Web sites where potential patients search for a therapist by location or specialty. These directories are the equivalent of interactive yellow pages, which allow people to browse therapist photos and brief practice descriptions. Listings include contact information and links to therapist Web sites when available.

Key considerations for evaluating a directory are:

- How much traffic (i.e., visitors) does it generate?
- How many therapists are listed? Are there enough to offer sufficient choice and to convey legitimacy? Is the competition excessive?
- How does the directory differentiate itself from other directories?

3. Create a Web Site

Developing a Web site, depending on its scope, can involve a significant investment of time, energy, and, to a lesser extent, money. It requires more content development and technology considerations compared to a directory listing. However, Web sites provide more space to describe your practice

and specialties than a directory listing. For word-of-mouth referrals who Google your name, your site will come up immediately. Keep in mind that creating a Web site is only half the battle. If you want prospective patients who do not already know your name to find your Web site online, you will have to spend additional time and money to direct them to your site. Some of the things you can do are:

- List your practice in directories that link to your Web site
- Use paid advertising, e.g., Google Adwords
- Invest in SEO (search engine optimization) which is a strategy used by Web site developers to help your site get highly ranked in organic (unpaid) search engine results. You will need a professional to help you optimize your site for search engines if you choose to pursue high rankings.
- Optimize your Google Places local business listing

Therapysites.com offers easy and editable templates for \$59 per month that allow patient scheduling and online billing, 24/7 customer service, and integrated e-mail service. APsaA members receive one month free from Therapysites and six months free listing on PsychologyToday.com. Request the

unabridged version of this article from the author to read about additional options for creating a Web site.

WHAT TO EXPECT

Expect to find writing briefly about what you do in appealing layman's terms challenging—and a skill that you will likely have to work at over time. Many people find the process a useful and worthwhile endeavor. You should expect advertising your practice online to be an experiment that will take time and intermittent effort. Evaluate your success in increments of 6–12 months.

Expect the Internet to cast a wide net that may change the way you screen calls from prospective patients. It will also pose an interesting clinical adjustment to consider patients' transferences to your online practice description as part of their treatment.

Editor's Note: The unabridged original version of this article will appear in the September newsletter of the San Francisco Center for Psychoanalysis and is pre-printed with permission. Copies can be requested from the author at reneespencer@mac.com.



Failure To Protect

John C. West



John C. West

James Stewart was under the care of his psychiatrist, A. K. M. Fakhruddin, from May 1989 until Stewart's death in 2005. He was originally diagnosed with and treated

for depression. In 2001, Stewart was hospitalized following an incident of domestic violence and Fakhruddin changed his diagnosis to bipolar disorder. Fakhruddin saw Stewart regularly on an outpatient basis: His last visit with Fakhruddin was on August 23, 2005. On September 9, 2005, Stewart shot and killed his wife (Deloris) while in the presence of Melissa, their grown daughter; his wife Deloris was holding their grandchild at the time that Stewart shot her. Stewart then turned the gun on himself, committing suicide.

TRIAL COURT GRANTS SUMMARY DISMISSAL

Suit was brought by the estates of the Stewarts against Fakhruddin and his employer on two bases: failure to provide appropriate care for Stewart and failure to protect Stewart's wife. Fakhruddin defended on the grounds that his care was within the standard of care and that Deloris Stewart was aware of the danger presented by her husband, so there was no duty to warn. The trial court granted the motion for summary judgment and dismissed the action.

John C. West, J.D., M.H.A., is a senior health care consultant with Global Loss Prevention, Inc., a Chartis company. This column constitutes general advice not legal advice. Readers should consult with counsel for legal concerns. For questions or comments contact john.west2@chartisinsurance.com.

APPEALS COURT ALLOWS CASE TO PROCEED ON NEGLIGENT CARE CHARGE

The court of appeals did not rule specifically on the issue of whether Fakhruddin had a duty to warn Deloris Stewart, but did rule that the estates had stated a claim for the negligent care of James Stewart. The court held that the breach in the standard of care, if proved, could be brought for both the homicide of Deloris Stewart and the suicide of James Stewart. The court of appeals reversed the decision of the trial court and sent the matter back for trial.

The issue of negligence, on the other hand, can flow to any victim.

Cases like these normally revolve around the issue of failure to warn. The failure to warn issue, however, flows from a credible threat to the identifiable victim, not to persons who cannot be identified. In this case, while it may be difficult to prove that Deloris Stewart was unaware of her husband's violent tendencies, considering his previous incidents of violence, it may still have been arguably negligent not to warn her; making it sound practice to provide a formal warning to an identifiable victim.

UNLIKE DUTY TO WARN, NEGLIGENCE IS NONSPECIFIC

The issue of negligence, on the other hand, can flow to any victim. See, e.g., *Bragg v. Valdez*, 111 Cal. App. 4th 421, 3 Cal. Rptr. 3d 804 (Ct. App. Cal. 2003). The court in Bragg held that liability may attach when the patient was discharged early from inpatient care, allegedly because he did not have insurance,

and went on to kill a stranger. If the estates can show that the care provided by Fakhruddin fell below the standard of care (and the estates provide an expert who would testify to this), then any victim of violence perpetrated by Stewart would potentially have a claim. This reinforces the idea that practitioners need to be duly diligent and give objectively justifiable care, especially with suicidal or homicidal patients. It is important that the assessment and care plan can be defended. If the patient does not currently need inpatient care, this decision needs to be carefully documented so that it can be defended later.

Stewart v. Fakhruddin, No. M2009-02010-COA-R3-CV (Ct. App. Tenn. May 26, 2010)



Contacting the National Office

The American Psychoanalytic Association

309 East 49th Street New York, NY 10017 Phone: 212-752-0450 Fax: 212-593-0571 E-mail: info@apsa.org World Wide Web Site: http://apsa.org/

National Office Voice Mail Extensions

Chris Broughton	×19
Brian Canty	×17
Sherkima Edwards	×I5
Tina Faison	×23
Diana Franklin	×28
Carolyn Gatto	×20
James Guimaraes	×I2
Jake Lynn	×29
Nerissa Steele-Browne	xI6
Dean K. Stein	×30
Niki Turner	×18
Debbie Steinke Wardell	×26



POLITICS and

Psychoanalysis: Professional Specialty or Specialized Profession?

Fredric T. Perlman

PUBLIC

American psychoanalysts confront challenges that demand a concerted response but disunity, confusion, and pessimism can compromise our thinking and paralyze our collective will. Necessity compels us to examine the organizational structure of our professional enterprise. In my view, we must decide whether we shall function as a specialty of the mental health professions or a specialized profession in our own right. This article is intended to further the discussion by providing a sociological perspective on the nature of professions, with special reference to the issues of credentialing and the social status of professions.

WHAT IS A PROFESSION?

Social scientists employ the term "profession" to denote an occupational group, formed around a specialized knowledge base and expert skill set, that acts collectively to establish its standing in society, including basic institutional arrangements that govern the transactions of its members with the public. These arrangements are established because the nature of professional work demands protections for the public as well as the professional group itself.

Professional work is the application of specialized knowledge to the important problems of life. Because of its inherent or "legitimate" complexity, professional knowledge is inevitably a "mystery" to the laity. A prospective client cannot measure a practitioner's competence or assess the suitability of a proposed service.

Fredric T. Perlman, Ph.D., F.I.P.A., is co-chair of the Committee on Government Relations and Insurance and chair of the IPA Committee on Psychoanalysis and Government.



Fredric T. Perlman

The more personal the service, the greater the client's vulnerability, and the greater his or her need for some form of protection. Professions are thus occupations in which

the prevailing business norm of caveat emptor (let the buyer beware) cannot apply. The professional cannot market his services without having the public trust, and the public cannot utilize the professional's skill without confidence that the professional will render competent and ethical service. Both the prospective client and the practitioner need an institutional structure that will ensure the quality and safety of the service and thereby promote public trust.

Professions secure the public trust by establishing programs to advance professional knowledge; training institutions with minimum standards for training; high standards for competent and ethical practice (practice in the client's interest); disciplinary codes to enforce standards; and recognizable credentials to distinguish those professionals to whose competence and good character the profession attests. In a fully formed profession, the profession negotiates with the government to establish licensing laws that protect professional titles, define a professional "jurisdiction," and restrict practice within that jurisdiction to those who are licensed.

Together, these arrangements constitute a social contract or "corporate bargain" between a profession as a corporate whole (a single body) and the wider society: The profession guarantees the competence of its

members and the containing community reciprocates by recognizing the profession's expertise, conferring special respect and status, and granting legal protections through licensing laws. The existence of this corporate bargain constitutes the essential characteristic of a profession. It serves both the profession, whose social status and market prospects are enhanced, as well as the public, whose welfare is protected.

THE PROFESSIONAL COMMUNITY AND THE CREDENTIALING SYSTEM

Any occupational group seeking to establish itself on a professional model must establish boundaries that define a professional community. A professional community may be represented by more than one professional association, but those associations, whatever their differences, must be able to agree on a coherent set of inclusion criteria for membership in the profession. Minimum requirements for membership are ordinarily based on the attainment of basic competence to practice. Practitioners who fulfill those requirements are "certified" by the professional community, and that certification is signified by a recognizable credential.

The establishment of a professional community, with boundaries based on minimum qualifications for membership, is predictably controversial because it requires a painful differentiation between the "qualified" and the "unqualified." Intense conflict can result which may obstruct professionalization or produce schisms and competing communities, a situation that damages social credibility and undermines the effort to professionalize the occupation. Any occupational group that wishes to attain a professional status must come to terms with the issue of boundaries in order to secure a social contract with the community at large. Put simply, there can be no profession without a defined community of professionals.

Once basic inclusion criteria are established and the professional community is defined, the community can establish a credentialing system. This may begin with a single credentialing program, like the accrediting of training programs, and may take years to develop as

Continued on page 26

100

Psychoanalysis

Continued from page 25

an occupation progresses on its path toward full professionalization. A complete credentialing system includes three fundamental components: accreditation of educational programs, basic certification of qualified members and, ultimately, state licensing.

These three components—accreditation, certification, and licensing-together compose an interlocking system. Certification and licensing are both typically based on graduation from an accredited training program, and employment criteria may be based on all three. Although standards for certification and licensing may differ somewhat (certification requirements are sometimes more rigorous than licensing criteria), the successful system is coherent and assures prospective employers and clients that an individual is both qualified to practice and bound to standards of competence and ethical conduct that are enforceable by the profession as well as the state.

A credentialing system is initiated by a professional group in the form of accreditation and certification, but professional status is only fully established when the state establishes professional licensure. In the U.S., licensure is a function of individual states, and so a profession must typically engage in a long succession of state licensing campaigns to establish licensure. A large proportion of an occupational group's resources may be devoted to this end because licensure is critical to professional viability. At a minimum, state licenses protect professional titles, which is essential for collective public relations and marketing, while more robust licenses also restrict practice within a jurisdiction to "licensed" practitioners. Licensure benefits the public welfare by empowering the state to enforce standards of practice while it simultaneously serves professional interests by enhancing social credibility and, in the case of robust licenses, by establishing a "labor market shelter" that protects practitioners against unfair competition (i.e., competition from practitioners who have invested less time and money in their training). Such labor market shelters constitute

an important assurance to prospective aspirants that a large investment in professional training will be worth it.

PSYCHOANALYSIS AS A PROFESSION

Although psychoanalysis has the cognitive resources of a mature profession (e.g., specialized knowledge and expertise), there is no community of psychoanalysts in the United States that is sufficiently unified to establish a fully functional profession with a coherent credentialing system. A heterogeneous multitude of competing organizations and rival constituencies all claim to represent psychoanalysis. This state of affairs is the product of a historic scramble for control of psychoanalysis. The entrenched "medical orthodoxy" of the American Psychoanalytic Association, abandoned only after the Group for the Advancement of Psychoanalysis and Psychotherapy (GAPPP) lawsuit, prompted the formation of new analytic groups by social workers and psychologists who were previously excluded from APsaA. Most of these groups set up training programs on the Eitingon model, albeit with slightly modified frequency standards for training and control cases (typically three sessions per week). Most of these groups restricted training to licensed professionals in social work and psychology.

Psychoanalysis thus emerged as a specialty of the three mental health disciplines, each with its own separate organizations, and more recently, with its own separate discipline-based certifications. The new "tri-discipline orthodoxy," however, eventuated in the formation of yet other psychoanalytic groups, formed largely by aspirants from outside the mental health disciplines, many of which featured vastly different theoretical models and training standards. These groups also have their own professional associations, most importantly, the National Association for the Advancement of Psychoanalysis (NAAP) formed in 1972. The notion of psychoanalysis as a specialty of the three disciplines has been further challenged in recent years as APsaA and other freestanding training programs have, like NAAP, opened their training programs to a growing number of aspirants from outside the three disciplines. The psychoanalytic enterprise has thus become more and more a multidisciplinary enterprise.

If we are ever to pursue a professional model of organization for psychoanalysis, we must establish inclusion criteria that define a viable professional community, take responsibility for the services provided in our name, and create a credible credentialing system for our profession. The formation of the Psychoanalytic Consortium, followed by the historic compromises with respect to training standards and the ensuing establishment of the Accreditation Council for Psychoanalytic Education (ACPE), may serve as a foundation for the establishment of a more fully functional professional community. While ACPE standards for the accreditation of psychoanalytic training programs may not satisfy everyone, a slowly growing number of institutes, both inside and outside APsaA, are pursuing ACPE accreditation and quietly forming the nucleus of a newly emerging professional community. If this trend continues, the ACPE accreditation program could produce a large and viable psychoanalytic community. [See TAP 45/2, "Accreditation for Psychoanalytic Education: Current Status," page 24.]

As we confront one threat after another, we must address very basic questions about the nature of our enterprise. Do we wish to form ourselves into a fully functioning profession, with inclusion criteria, defined boundaries, and a functional credentialing system? If so, who shall be included within the professional community? What are the optimal inclusion criteria for the professional community we envision? With whom might we partner to create a true profession?

We need to address these fundamental issues now. The world around us is changing. We still have an opportunity to shape our future if we take a proactive approach to the kind of future we want. We may not have this potential forever:

Bibliographical material on request from the author at ftperlman@earthlink.net.

Addiction

Continued from page 17

The well-known ability of people to shift from one addiction to the other is due to the fact that these changes are simply shifts in the displacement they are utilizing.

TREATMENT IMPLICATIONS

When patients understand the psychology of their addiction, including the kinds of issues that lead to their repeated experiences of intolerable helplessness, two things follow. They are able to anticipate when their addictive drive will occur, sometimes far in advance and long before the addictive urge is upon them. And, knowing the specific issues that lead to their helpless feelings, they can (with some practice) discover more direct actions rather than their displaced, addictive ones to deal more precisely with them. Consequently, patients can often bring their addictive behavior under good control well before they have fully worked out the issues behind it. Conversely, analyzing the precipitants to each occasion in which they have an addictive thought enables patients to more quickly identify their central emotional issues, since it is always these central issues that lead to intolerable feelings of helplessness. For this reason, analysis of the precipitants to addictive behavior can be, like dreams, another royal road to the unconscious.

Referring our patients with addictions to others, even with the idea of a concurrent "addiction treatment," has serious disadvantages beyond the loss of opportunity to better treat them. It informs patients that their therapist does not feel competent to understand or deal with their problem (and, by extension, is not able to understand them); that they are essentially different from other people; and that their addiction is somehow separate from the rest of their psychology and cannot be integrated with it.

As analysts, we need to know the psychology of addiction and its corollaries: We are often the best treatment option for patients with addictive symptomatology, and we have something extraordinarily useful to teach the wider addiction treatment community about this very common and important problem.

From the Unconscious

poe/ry

Sheri Butler Hunt

Sheri Butler Hunt is on the faculty of the Seattle Psychoanalytic Society and Institute in the adult and child divisions. She is in private practice in adult, adolescent, and child psychoanalysis, and psychiatry. Psychoanalytic work inspires her poetry and prose.

Elemenopee

Little Billy is behind in school Says Mother, He can't spell Doesn't write much Won't do homework. Do I think it's that ADHD?

I do not, But Mother can't Let him learn just yet. She's too angry. Too afraid. Billy is her big alphabet.

I see Billy And through his frustration He smiles. His anxious intelligence peeks Around The corner.

Little fox pup Little seedling Knows when Not To come out And show his ABC's.

He knows All the way A through Z How to keep His elemenopee To himself. But, he's waited a while.

We don't spell Or drill Or practice. He steps out One Lego, one Monopoly game One Crazy 8 at a time.

Little hatchling
Little cub,
Then not so little.
He starts to see past me
And the world opens up.
He likes his very own elemenopee.

-Sheri Butler Hunt

Remembering Leo Rangell

Bhaskar Sripada

June 28, 1991

Location: Leo Rangell's residence in Brentwood, California

Edited conversation

I remarked to Leo Rangell that currently there were only two new candidates at the Chicago Psychoanalytic Institute and asked, "What is the current state of psychoanalysis and what is its future?"

Leo Rangell: The great Chicago Psychoanalytic Institute had only two new candidates. The fact that there are few candidates in many institutes is not an accident. That is our current state. The onus for the current status does not lie in either the public disillusioned with psychoanalysis or that the theory has been found to be deficient, but precisely the phenomenon of "transference to theory." The differentiation between psychoanalysts is based on passionate and heartfelt and intense feelings of difference. Psychoanalysts are at war with each other and are killing psychoanalysis! The movie Love Story has a phrase, "never having to say you are sorry." To me the phrase reflects a relationship where a person who has deserted a relationship wishes to return, but does not feel there is a need to say he is sorry. This separation has caused irreparable harm, but such a person does not wish to acknowledge it or see that he or she has wrecked the relationship. It is very instructive in describing such a situation and characterizing the dynamics of psychoanalytic splits.

Bhaskar Sripada, M.D., is a certified adult and child and adolescent analyst who practices in Glencoe, Illinois. For a transcript of the conversation from which "Remembering Leo Rangell" was excerpted, readers may contact the author at bsripada@gmail.com.

Bhaskar Sripada: What do you think of the development of Kohut's self psychology or the split it caused?

L.R.: I appreciate Kohut's specific contributions, but object to his



Bhaskar Sripada

alternate self theory. Kohut's first theory of narcissism was within the framework of psychoanalysis as a special aspect of drive. I subscribe to that view. In the second phase, Kohut extended the scope of narcissism beyond the implications of his original theory. In this phase, he went on to describe two separate lines of development: an objectrelated aspect of development that was sexual and aggressive and a narcissistic line of development related to the self. Well, a separate, narcissistic line of development could still be part of general psychoanalytic theory, even though I do not agree with it. In the third phase, Kohut postulated that narcissism is superordinate. Now the drives, sexuality, and aggression are secondary and are fragmentation products of narcissism. Here Kohut's theory becomes an alternate theory. It is here that I reject it.

I knew Kohut through all his phases. You know he was secretary of the American Psychoanalytic Association when I was its president. He was vice president of the IPA and then I became president when he thought he would, but didn't. It was a very crucial event in 1969 in Rome, after which Kohut became a Kohutian. He was not a Kohutian, although his name was Kohut, until 1970. Anna Freud and he were working together to get him elected president of the IPA. In '69 he lost the election for president. He would never, never, never have changed his theory if he were president. But when he lost the election and I won, he became a Kohutian. I am sure he

agonized as he created an alternate theory. You don't live more than one life. A lifetime is too quickly over.

You sent me a pre-presentation paper "Whither the Psychoanalytic Method?" by [Michael Franz] Basch. Here, Basch says that Kohut "made it possible to adhere to Freud's clinical method in the interest of transference analysis." Basch asserts "psychoanalytic [Freudian?] method, as a tool for research and therapy, is not in need of alteration." This paper recognizes the wide scope of Freud's ideas. It seems to reflect a turn away from self psychology as an alternate theory and a turn towards the direction of a return by self psychology to some variation of psychoanalysis proper.

B.S.: Why don't you rejoice more in the return of a prodigal analyst? You seem to be first asking for an apology.

L.R.: I do recognize that analysts who contributed to alternate theories have returned to the mainstream. We should not confuse the analyst who has never left the original psychoanalytic fold with the analyst who has formed an alternate school and now returns or wants to return to the psychoanalytic fold. Psychoanalysis is not the study of the self alone; psychoanalysis is not the study of relationships alone. Psychoanalysis never was and can never be complete. It is always in the state of being accumulated. Psychoanalysis needs good leaders. Psychoanalysts must retain their integrity and not seek to acquire a few loyal disciples around some new alternate theory. There are many, many good people who are on the sidelines who have given up the fight. To win they should not give up the fight, I'm still screaming too much. I'm too old to be screaming like this! Generations of analysts hand over the baton to each other and to the next generation of analysts. The time of my generation of analysts is coming to an end. I now hand it to you and the rest of the analysts to carry on the responsibility of furthering psychoanalysis. There is a lot of pain and joy to be had in working as a psychoanalyst. APS/A

Remembrances of Leo Rangell, First Honorary President of APsaA, 1913-2011

Warren R. Procci



Warren R. Procci

Our Association lost a giant when Leo Rangell passed away on May 28 after sharing 97 years with us. It had been my pleasure to count him as a friend.

(CAPS) and won many major accolades including the Heinz Hartman Award from the New York Psychoanalytic Institute. He was a very early winner of the Sigourney Award, the so-called Nobel Prize of psychoanalysis. When he finally laid his keyboard to rest, Leo had produced over 400 publications, including a final book when well into his nineties.

for Advanced Psychoanalytic Studies

FROM INAUSPICIOUS BEGINNINGS...

Let me begin by reciting some of the facts of this remarkable man's life and career, and then I'll share some personal recollections about Leo. His origins were modest. He was born in Brooklyn in 1913 to immigrant parents from Russia and Poland. Yiddish was spoken in the home, not English. His childhood was characterized by very little in the way of intellectual stimulation, which belies his major contributions to our field. Leo was a product of the New York City public school system. He made a major jump into the Ivy League earning a scholarship to Columbia University. This was followed by medical school at the University of Chicago.

Leo initially trained in neurology at Maimonides Hospital in New York City, but, fortunately for us, he was quickly derailed from this effort by the considerable stimulation going on in New York at that time in the field of psychoanalysis. Leo served in the Armed Forces during World War II, and once he returned, he settled in Los Angeles where he devoted the full force of his prodigious attention to psychoanalysis.

His first scientific publications appeared in the '40s, the start of an eight-decade contribution to our field. Leo steadily rose in both the American Psychoanalytic Association and the International Psychoanalytical Association, and he was president of both organizations, not once, but twice. He was a founding member of the Center

THE MIND OF WATERGATE; THE COMPANY OF LUMINARIES

My first exposure to Leo's thinking was breathtaking. It was his book, *The Mind of Watergate*. When it was published in 1980, I was a relatively young man quite upset by the events of Watergate. While not a book about politics or even a book about Nixon, it was vintage Leo. It was about the functioning of the human mind, explaining compromise of integrity and why and how the American population was able to elect as president a man whom they had known historically to be someone many had never trusted.

Leo became honorary president of the International Psychoanalytical Association in 1997, a title previously held by only three luminaries: Anna Freud, Heinz Hartman, and Ernest Jones. Leo stood, deservedly, in very elite company.

My recollections of Leo come from a friendship that evolved during my 30 years in L.A. and which accelerated over the last 10 to 15 years as I became much more actively involved in our national organization. Leo, of course, would be an invited speaker to psychoanalytic venues throughout the vast L.A. basin, and I was oftentimes asked to drive him, always a decided pleasure. I took him to the Newport Psychoanalytic Institute, to the New Center, and to Harbor UCLA Medical Center where I'm a clinical professor. In addition, Leo was a frequent dinner guest in my home, in recent years in the company of our member, Beth

Kalish, his partner. Leo and I had many, many long conversations. While he was quite capable of engaging in casual chat, and indeed he could always spark lively conversations, we inevitably found our way to psychoanalytic theory and its contribution to understanding the human mind. Leo was most excited when he was able to discuss how psychoanalytic theory contributed to a unique understanding not only of our patients but also of the entire world around us. It was a natural that he would be a contributor to the *Huffington Post* up until the end of his life.

UNIFIED THEORY FROM A UNIFYING THINKER

Leo once shared with me that he doubted the significance of his work. It was then that I made the decision that if I became president of APsaA I would find some special way to honor him. As fate would have it, I did become APsaA president. I thought he should be given the same title within the American Psychoanalytic Association, honorary president, which he had been awarded by the International Psychoanalytical Association. This would be a particularly fitting honorific and special since no one had ever been given this title before. In late April, I was able to call Leo and let him know that we had just awarded him the title, Honorary President of APsaA. Unfortunately, Leo did not live to come to the June meeting to be honored in person, but he knew about the title and was very thrilled by it.

Leo accomplished many, many things in psychoanalysis. I consider his interest in the concept of unified theory as his major, and arguably most enduring, accomplishment. Leo thought of psychoanalytic theory as a strong and powerful tree with a thick trunk holding up many branches. Leo himself was just such a thick trunk holding many branches. I will miss Leo Rangell, Honorary President of APsaA.



Editor-in-Chief Journal of the American Psychoanalytic Association (JAPA)

The American Psychoanalytic Association invites applications for the position of Editor-in-Chief of the *Journal of the American Psychoanalytic Association (JAPA)* for an initial 5-year term with a possible renewal for a second 5-year term. In December 2013, Dr. Steven Levy will end his term as Editor-in-Chief of the Journal. The new Editor-in-Chief will officially assume responsibility for the Journal in January 2014, but must be prepared to start working with the incumbent Editor in January 2013 to assure an orderly transition of leadership. The Search Committee will select a new Editor in June 2012.

JAPA is one of the world's most respected publications in psychoanalysis, offering insightful and broad-based original articles, groundbreaking research, thoughtful plenary addresses, in-depth panel reports, and perceptive commentaries. Included in each issue is the esteemed *JAPA* Review of Books, which provides comprehensive reviews and essays on recent notable literature. For over 50 years, *JAPA* has been the leading source of information on topics including clinical issues and new methodologies, education and professional development issues, interdisciplinary studies, and emerging theories and techniques.

Candidates should be recognized as leaders in psychoanalysis with openness to a range of theoretical and clinical interests and viewpoints. Candidates should possess an understanding of and interest in psychoanalytic writing; strong leadership qualities; intellectual vision; interpersonal skills; and experience relevant to editing a leading scholarly journal. Candidates must have the ability to tactfully assist contributors in the development of their submissions to the requisite level of excellence in order to meet the Journal's high standards.

Interested individuals should submit a letter describing the nature of their interest in the position, and a current CV detailing editorial experience. Send completed application materials to Dean Stein at the National Office (deankstein@apsa.org) no later than **October 31, 2011**.

NATIONAL OFFICE: 309 East 49th Street, New York, New York 10017 • Phone: 212.752.0450 • Fax: 212.593.0571 www.apsa.org

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

June 8, 2011

Palace Hotel, San Francisco

Training and Supervising Analysts

Sydney Anderson, Ph.D. Cincinnati Psychoanalytic Institute

Alan Kessler, Ph.D. San Francisco Center for Psychoanalysis

Virginia Anne McDermott, Ph.D. Minnesota Psychoanalytic Institute (Provisional)

Ann G. Smolen, Ph.D. Psychoanalytic Center of Philadelphia

Mitchell D. Wilson, M.D. San Francisco Center for Psychoanalysis

Ruth M.Yanagi, M.D. Chicago Institute for Psychoanalysis

Geographic Rule Training and Supervising Analysts

Frederic J. Levine, Ph.D.
Boston Psychoanalytic Society
and Institute

Alfred S. Margulies, M.D. Boston Psychoanalytic Society and Institute

Brenda Clorfene Solomon, M.D. Wisconsin Psychoanalytic Institute (Provisional)

Geographic Rule Training Analyst

Thomas W. Campbell, M.D. New Orleans-Birmingham Psychoanalytic Center

Child and Adolescent Supervising Analysts

June Greenspan-Margolis, M.D.
Psychoanalytic Center of Philadelphia

Ann G. Smolen, Ph.D.
Psychoanalytic Center of Philadelphia

Geographic Rule Child and Adolescent Supervising Analysts

Jack Novick, Ph.D.
San Diego Psychoanalytic Society
and Institute

Kerry Kelly Novick San Diego Psychoanalytic Society and Institute

Charles E. Parks, Ph.D.
Psychoanalytic Center of Philadelphia

In Memoriam

Siegfried Berthelsdorf, M.D. *January 31, 2011*

Stanley H. Cath, M.D. *June 24*, 2011

Arnold M. Cooper, M.D. *June 9, 2011*

Irving B. Harrison, M.D. *February 14, 2011*

Milton H. Horowitz, M.D. *February 19, 2011*

Alastair William MacLeod, M.D. October 1, 2004*

Lloyd Clifford Patterson, M.D. *April* 11, 2011

Leo Rangell, M.D. *May 28, 2011*

C. Downing Tait, Jr., M.D. *April 21, 2011*

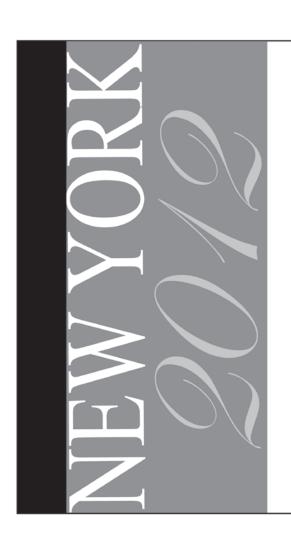
Harold L. Taylor, M.D. *March* 15, 2011

Robert Zaitlin, M.D. *February 21, 2011*

*only notified in 2011



NONPROFIT ORG.
US POSTAGE
PAID
ALBANY, NY
PERMIT #370



309 East 49th Street New York, New York 10017



National Meeting January 10-15 Be sure to attend!

Waldorf Astoria Hotel New York, NY www.apsa.org