Greetings from a newly reimagined TAP! If you’re reading this in print, you’ve undoubtedly noticed something different about this issue: we are now in vibrant full color, including some remarkable original artwork. This is also the first issue for our editor in chief Austin Ratner, whom I’m pleased to welcome to his new role. Austin is bringing fresh ideas about content as well as style—about which more in his editor’s letter. For my part, I’d like to share an updated version of remarks I made to the APsA board at our meeting in New York about our Association and its future.

While the pandemic isn’t over, I think we can feel good—though never complacent—about how we, as an Association, have coped with it. The pandemic and the shift to remote work have probably changed us and our profession forever. But we still managed to have one of our most successful and lively National Meetings in recent memory, with nearly 1,000 people in attendance in New York. In addition to excellent scientific sessions, we had the opportunity to meet first-time attendees at a packed gathering, as well as reconnect with old friends at various social events, including a performance by two extraordinary artists from Jazz at Lincoln Center. It does feel to me like we’re heading toward some version of a “new normal,” but we’re not there yet. We need to remain open-minded and curious about what the future holds, and continually adapt to a rapidly changing world.

To say there’s a lot going on in APsA would be an understatement. We recently saw the passage, by an overwhelming 81 percent of our voting members, of the Expanded Membership bylaw amendment. Many of you devoted countless hours to the development of what I believe is a major step forward in our history as a professional association, formalizing the inclusive and expansive vision of what a psychoanalytic organization can be: a home for all psychoanalytic work. It is not without controversy, but that’s often the case with innovation and change. I want to thank those who have led the way in this endeavor, many years in the making, for their vision, courage, and hard work. You will be hearing much more about Expanded Membership in the months ahead.

Other important initiatives are either well underway or about to begin, including the Holmes Commission, which will be delivering its report and recommendations in the spring. There’s the newly launched Commission on the Economics of Psychoanalysis, which will be exploring what have been rather taboo topics, including the economics of our members’ practices, of training, and of local and national institutions. There’s the In-
er-Institutional Leadership Initiative, in partnership with the Department of Psychoanalytic Education, bringing leaders of local institutions, societies, and centers together in small groups to share their leadership and organizational challenges with each other. There’s the Pathways to Membership project of the Membership Committee, which will be gathering narratives from as many of our members as possible, not only to help us learn how people went from their first encounter with psychoanalysis to becoming members of APsA, but also so that we can “reverse engineer” some of those experiences to attract new members to us. And there’s a task force that’s reimagining our national meetings for the future.

As noted above, we recently announced a new editor in chief for TAP, Austin Ratner. We’ve also welcomed a new editor for JAPA, Greg Rizzolo. Both Greg and Austin were selected by open applications for the roles from our entire membership and represent the next generation of editorial leadership. They bring ambitious, creative visions to their respective publications. We’re about to launch a new APsA website, which will support our redoubled focus on outreach and advocacy for our profession. Several new institutes have expressed an interest in joining APsA through our Institute Requirements and Review Committee, which I see as a sign of renewed excitement about our work. We have even moved our staff headquarters to a new space near Grand Central. This may be the best metaphor for what’s happening—moving from a dark underground space to a beautiful, light-filled office.

What I’m hoping to convey, more than a list of activities, is a process of culture change that is occurring in our Association. We’re opening things up, and trying to warm things up, too, by making APsA more welcoming of new and old members and guests, reducing administrative burdens of meetings, and creating more informal opportunities for members to socialize and deepen relationships. Many important committee chair appointments and other key roles are now being opened to expressions of interest from the entire membership, rather than being “tapped” by the leadership from a predictable pool. We will be instituting term limits for all roles, to ensure that leadership is refreshed and opportunities opened up for younger members to participate in every part of APsA.

Some of this change is anxiety-provoking and at times painful. Change inevitably involves loss, but also gain. Some people embrace change with gusto, others resist it tooth and nail. Most organizations are never fully ready for change, and never will be. One can’t wait to gain everyone’s emotional acceptance. Change would never happen if that were a requirement. What is necessary is a certain critical mass of readiness, achieved by respectful listening, by not-too-hard selling, and by pushing the organization forward despite the resistance. Some of the adaptation occurs with time after the change has already taken place, but not before. For APsA, I worry that if we don’t adapt—thoughtfully and deliberately—to our changing world, we will do ourselves, our patients, and our society a disservice. But one thing I am sure of is that the world needs psychoanalysis. As a clinical discipline, as a set of powerful theories with many applications, and—perhaps equally importantly—as a set of values, psychoanalysis can, in my view, serve as a kind of antidote to some of the prevailing and disturbing trends of our time.

I see APsA as being on the cutting edge of psychoanalysis today, and we want to learn and evolve not in isolation, but in partnership with diverse colleagues from around the world. APsA can be a laboratory for progress, while respecting that APsA can be a laboratory for progress, while respecting that other psychoanalytic organizations have different traditions and histories, and other concerns and goals.

I’m honored and proud to be part of this noble profession and this vital organization. We can be on the cusp of a psychoanalytic renaissance, if we allow ourselves to think boldly, to liberate ourselves from aspects of our own history that hold us back, and to take some chances. Thanks to all of you for being part of this journey, and for all you do on behalf of APsA.
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Unprotected Speech

TAP is a survivor. It began as the APsA newsletter, graduated to intermittent capitalization and italics as The Newsletter in the APsA bulletins, and for the last thirty-four years has been published under the name The American Psychoanalyst. During those years, psychoanalysis suffered more than a few reverses, but through it all TAP kept coming, three or four times a year, a heartbeat proving that psychoanalysis was still alive.

Nobody I’ve talked to remembers exactly what the newsletter looked like. Issues from that misty bygone era are now locked away in a document storage facility in Edison, New Jersey, with the forbidding name “Iron Mountain.” But TAP has in many ways remained a newsletter: a comfy space where psychoanalysts can report their activities to their peers in an informal but semi-public way. Written and edited at night and on weekends by volunteers whose workdays were devoted to their patients, TAP has been a labor of love. It’s drawn on the considerable intellectual firepower of the analytic community to produce some great thinking and writing from time to time, but it’s also struggled to staff itself and carry out its business. As listservs and websites have replaced some of its custodial functions, it has lost direction. Even to some of its writers and editors, it’s become a bit outdated and moribund.

I was invited to think of ways TAP might evolve. The search committee specifically welcomed change in tandem with APsA’s evolution into a more open and public-facing organization. That sounded right to me. Psychoanalytic knowledge is too important to be kept secret. So, perhaps against my better judgment, I applied to be editor and they offered me the job, perhaps against theirs. I am not a psychoanalyst. I am an author who has published two novels. Not exactly what you might imagine for an editor of the present publication. And yet I have published a history of psychoanalysis, as well as many articles pertaining to the topic, including an essay about transference that the New York Times Magazine in 2017 named one of its sixteen all-time best Lives columns. In addition, like many analysts, I have earned an MD.

Having undergone my own personal psychoanalysis and studied Freud’s writings under an APsA mentorship, I’ve become an advocate for the public rehabilitation of psychoanalysis. In keeping with that aim, I’m reimagining TAP as a voice that might beckon to readers beyond the profession, to interest them in psychoanalysis, restore lost trust, and welcome them to the indispensable conversation about feelings, transferences, defenses, and the unconscious mind. If TAP can be made more interesting to general readers, I hope it will become more interesting, not less, to APsA members too.

Under my editorship, TAP will continue to publish material pertinent to the internal affairs of the field of psychoanalysis, but it will also attempt transformation into something fresh and new. Progress is of course impossible without change. As Kerry Sulkowicz noted in his remarks to the APsA board at the winter meetings, change brings with it uncertainty and loss. Even change for the better—that is, “growth”—means inevitable discomfort. One such loss may be the former comfiness of TAP as a space for psychoanalysts to say whatever they want without fear of “outside” judgment or misunderstanding. TAP has in the past represented a form of “protected speech” within the walls of psychoanalysis, a form of speech that’s essential to the conduct of talking therapy but does not always lead to healthy public discourse.

What do I mean by psychoanalytic “protected speech”? Psychoanalysts have long understood that the severest of censors resides within, in the speaker’s unconscious mind. They’ve therefore taken great care, in consulting rooms hushed by white noise, to foster conditions that might relax this censorship, allowing patients to express uncomfortable, antisocial feelings. Sigmund Freud felt “outside” resistance to his antisocial ideas

The Psychoanalyst’s Aversion to Proof, cover sketch, Austin Rainer.
threatened psychoanalytic discourse altogether and preferred to confine that discourse to private institutions for psychoanalytic members only. My book *The Psychoanalyst’s Aversion to Proof* details the emotional underpinnings of that sort of protected speech, as well as an unintended consequence: the field’s withdrawal into a cloister.

That said, a good editor must tread a line between perilous withdrawal on one hand and, on the other, pandering to “the noble rabbles,” as Freud sarcastically described the public in a 1907 letter to Carl Jung. I look back at the Hogarth Press, which in 1924 published James Strachey’s English translations of Freud, as a fine example of editorial balance between quality on one hand and public currency on the other. Leonard and Virginia Woolf founded the press in 1917, hand-printing their books on their dining room table at Hogarth House, their home on Paradise Road in West London. In an early promotional flyer, the Woolfs described their mission as follows: “to publish at low prices short works of merit, in prose or poetry, which could not, because of their merits, appeal to a very large public.”

Merit and commercial appeal were in the Woolfs’ eyes mutually exclusive. They began by writing and publishing their own works on one hand and public currency on the other. Leonard and Virginia Woolf founded the press in 1917, hand-printing their books on their dining room table at Hogarth House, their home on Paradise Road in West London. In an early promotional flyer, the Woolfs described their mission as follows: “to publish at low prices short works of merit, in prose or poetry, which could not, because of their merits, appeal to a very large public.”

After a long period of contraction and marginalization, psychoanalysis has begun to make a recovery. I’m hoping *TAP* can help build its momentum by alerting more people to the treasures of psychoanalytic knowledge. I humbly ask for your patience, even your support, as we together discover what *TAP* might say going forward, who might help it speak, and which new audiences might listen. At the presidential symposium titled “The Question of Applied Psychoanalysis” at the 2023 APA’s winter meeting, Karen Lynn Leary observed that activists who attempt to create change must be able to tolerate uncertainty and unpreparedness. I find myself in that uncomfortable position now. My main preparation for this moment is having been unprepared so many times before. It’s the plight of the writer, trying out his voice with unknown audiences again and again, encountering a lot of rejection and just enough receptivity to keep him whispering, offering his unprotected speech to the darkness. “All these years,” the obscure writer Kilgore Trout says in Kurt Vonnegut’s *Slaughterhouse Five*, “I’ve been opening the window and making love to the world.”

I’ve organized this issue into six categories of offerings: Stories from Life, The Arts, Spotlight on Research, Education, Play, and Work. In *Stories from Life*, *TAP* marks the 50th anniversary of the Paris Peace Accords, which pulled US combat troops out of Vietnam, with a gripping personal account of the subsequent 1975 American evacuation of Saigon. Artist-writer-filmmaker Tati Nguyen, who was eight at the time of the evacuation, has hailed the baggage of history ever since. The Arts features an essay by eminent Shakespeare scholar Leonard Barkan on Shakespeare’s “divergence from Freud into postmodern terrain in Antony and Cleopatra and another on “regression in the service of the ego” in the plays of Aristophanes, written by poet Aaron Poochigian, translator of four Aristophanes plays published by Norton in 2021. In *Spotlight on Research*, Austen Riggs research director Katie Lewis and her coauthor Steve Ackerman write about their efforts to integrate psychoanalytic research with general psychological research. Education includes psychiatrist resident Abram Davidson’s account of his journey from pharmacology to psychotherapy. Education, along with *Spotlight on Research*, will be aimed at students in a psychology or psychiatry career track who want to learn more about psychoanalysis, its history, theory, and evidence base. *Play* introduces a crossword puzzle on psychoanalytic themes. Work includes an article on the social progress reflected in the work of this year’s recipients of the Sigourney Award, focusing on Jack Drescher and written by journalist Ryan Lenz, a former reporter for the Associated Press who was embedded with the 101st Airborne in Iraq in 2005.

I am lucky to have with me on the journey managing editor Lucas McGranahan, who is himself editor of *Tableau*, the humanities magazine of the University of Chicago, not to mention a PhD in philosophy, and art and design directors Austin Hughes and Melissa Overton, who have transformed *TAP* into something visually remarkable. Austin is a visual artist who spent years at design agency Donavan & Green creating movie posters for Paramount Pictures, Parsons School of Design catalogs, and more. He is an American Institute of Graphic Arts awards winner. Melissa served as creative director for the MoMA Design Store from 2015 to 2018; has designed print material for Ian Schrager hotels, Dolce & Gabbana, and many other high-end brands; and served as associate production manager at *Interview Magazine* in the 1990s. Many thanks to Michael Stiev, who edited *TAP* from 2004 to 2007, for his guidance and help.
How do we know when psychoanalysis works? While outcome assessment is common practice in the fields of medicine and mental health, some psychoanalysts have disputed its relevance, role, and purpose, deeming it overly simplistic, beside the point, or even dehumanizing to patients. In contrast, those involved in psychoanalytic research have long pointed out the necessity of evidence-based practices if psychoanalytic treatments are to be widely understood, appreciated, and applied. And in fact, since the late 1960s, over 300 randomized control trials have been published that demonstrate psychoanalytic treatments’ superiority over inactive control groups and noninferiority to other forms of evidence-based treatment (see sidebar, p.13).

In addition to proving psychoanalytic treatments effective, research can help guide and improve the care provided. One evidence-based practice model, measurement-based care (MBC), gives patients an important opportunity to provide information about the ways they suffer while also offering feedback about their experiences in psychoanalytic treatment. The use of MBC allows the patient to become a primary stakeholder in the process of identifying meaningful change in mental health treatment. In this article, we provide one example of an approach to developing an MBC project that we believe can meaningfully inform the care and treatment of patients in a psychoanalytic residential treatment setting.

MBC is a model of assessment intended to both define patient attributes and evaluate the quality of their outcomes. In contrast to psychological testing, which may be requested to clarify questions or concerns related to individual patients, MBC projects are developed with the goal of capturing aspects of functioning that are relevant across a given patient population (e.g., within a specific treatment setting), identifying differences in functioning for individual patients over the course of treatment as well as in comparison to peers. When used to inform individual treatment, MBC can expose hidden treatment barriers such as ruptures in the relationship between patient and therapist and negative reactions to the care provided. It can also engage patients in understanding gains and losses in specific domains (e.g., work and relationships). Furthermore, MBC can usefully assess what factors contribute to meaningful change over the course of treatment.

Recently, we implemented an MBC project at the Austen Riggs Center (ARC). ARC is a small, private, open psychiatric treatment setting that provides psychoanalytically informed residential care for treatment-resistant patients. One of the pillars of the treatment at ARC is acknowledging and promoting patient authority by encouraging patients to have an active voice in their work. Echoing broader areas of disagreement within the psychoanalytic field, one of the tensions at ARC is between (1) our desire to remain in dialogue with the larger world of mental health regarding empirical and clinical assessment and (2) maintaining a psychoanalytic, person-centered approach which anticipates ambiguity, nuance, and complexity in functioning over time.

The MBC project at ARC asks patients to routinely complete a series of measures to evaluate their progress.
There is extensive scientific evidence, collected over several decades, that psychodynamic and psychoanalytic treatment is an effective and clinically useful approach for treating many complex psychiatric problems such as severe character disorders, trauma, borderline personality disorder, anxiety, and depression. On this basis, experts agree that psychodynamic and psychoanalytic treatment is empirically based and a standard part of contemporary psychiatric practice. In fact, standard practice guidelines issued by major organizations such as the American Psychiatric Association include psychodynamic psychotherapy among other evidence-based treatment options.

While the MBC program is launched and data collection is underway, we view our primary challenge going forward as the need to develop a method for providing meaningful feedback to individual patients and their treatment team. Feedback about individual results may not only increase the meaning and value of assessments to patients and their teams, but also create an opportunity for maintaining an ongoing open dialogue with patients on their interests and values in the outcomes assessment process, as well as support patient agency and authority in their treatment.

In our experience of implementing an MBC initiative at ARC, we have found that concerns over whether this approach to measurement may be inherently disruptive to the process of treating patients are unfounded, and in fact the collaborative development of such a program has facilitated greater interest and investment in treatment. Evidence from the last several decades in fact has shown that information collection methods like MBC enhance the effectiveness of psychodynamic treatment by identifying potential ruptures and negative outcomes before they fully develop. Early identification of these types of treatment disruptions means they can be addressed, understood, interpreted, and used to deepen work. More importantly, the implementation of MBC can help us to understand what is most important to our patients and help them achieve meaningful goals.

We had some concerns that patients might view the MBC initiative as another bureaucratic demand being made on their time, potentially taxing already limited emotional resources. Instead, our patients were deeply invested in understanding the nature of their suffering and viewing the MBC initiative as a meaningful part of the treatment process. Encouragingly, we felt that the domains of issues generated by clinical staff were consistent with their interests. One suggestion provided by our patients was that we should assess their strengths as well as their challenges; we ultimately incorporated measures assessing hopefulness, optimism, self-confidence, and ability to have fun to address this important point.

A multidisciplinary team reviewed the list of domains and worked to identify valid measurement tools that could reflect the treatment process. We used an iterative process of reviewing published literature, holding focused meetings to discuss individual measures, and selecting the measure we felt captured the clinical domain of interest. Our priorities in selecting measures were to attend to relevance to clinical needs, psychometric properties, length of administration, and accessibility. This process led to the selection of eight measures which are completed at different points in the treatment.

Steven Ackerman, PhD, HIL, ABPP, is a treatment team leader, psychoanalyst, consultant to the therapeutic community program, accreditation and chair of the institutional Review Board at the Austen Riggs Center. He researches the therapeutic alliance through the intersection between personality, psychology, and psychotherapy processes.

Lewis, B. (2014). Is the director of research at the Austen Riggs Center. His research examines short-term changes in suicidal thoughts and interpersonal functioning using experience sampling methods. He has published on a range of topics, including suicidality, social connection, and multithreaded personality assessment.

In artmaking, according to Ernst Kris, the ego simultaneously surrenders and controls. In 1936, Kris described this phenomenon with the phrase “regression in the service of the ego.” He added the related psychoanalytic concept of “adaptive regression” in his seminal 1952 paper, “The Psychology of Caricature.” Adaptive regression means a movement backward—from adult reality to childhood make-believe, backward from maturity in the final stage of psychosexual development, the genital, to earlier stages. The difference from nonartistic regression is that the artist who surrenders to this primal material is still enough in control to generate work in a particular medium. The ancient Greek comedies of Aristophanes are illuminated by just such an understanding of adaptive regression. Drawing on Kris’s concept and Freudian theories in general, I will suggest that, while often juvenile or even downright infantile, Aristophanic comedy regularly portrays, or even enacts, temporal regression (a return to earlier stages of psychosexual development) and conceptual regression (a return to instability of identity and reality).

With its emphasis on eating, bodily functions, and sex, Aristophanic comedy regularly enacts regression to preadult stages of psychosexual development, in particular, the oral, anal, and phallic. Let’s start with the oral. Like many of Aristophanes’s plays, Birds ends with a feast. Portrayed as a glutton in comedy, Heracles surrenders his whole purpose as a negotiator in order to enjoy barbecued fowl. All id in Freudian terms, he is, according to his fellow ambassador Poseidon, “an idiotic pig.”

The irony is that Heracles’s all-consuming urge, instead of causing further conflict, precipitates the happy and festive denouement of the play—peace between the gods and the birds is concluded, and the wedding of the main character Peisthetaerus to Princess, an allegorical goddess of prosperity, is celebrated.

So in Aristophanic comedy preadult psychosexual stages like the oral can, in addition to being humorous, solve the problems which adults, with their less primal and more intellectual demands, have created.

Before we turn to the anal and phallic stages, I should explain that, in passages that focus on defecation and male genitalia, I sometimes used “baby words” in my translations, partly as an expression of the regression enacted in the plays and partly for aesthetic reasons. For example, I at times rendered words for feces as “poop” instead of “shit.” Constant obscenity in art, like constant violence, becomes tedious and ineffective. If one says “shit” over and over...
over again, the word loses its shock value. Furthermore, the word "poop" evokes regression to the anal stage better than the more adult word "shit." As he laments his constipation in a prayer to Eileithuia, the Goddess of Childbirth, don't you leave me helpless men. When I eat again, Nothing except this boner in my hand.

Whether one finds the metaphor offensive or humorous because offensive, its focus on orifices places it squarely in the Freudian scheme of psychosexual development. Throughout this play Aristophanes reduces intellectual concepts to bodily functions and libido, and he here equates intellectual contemplation with masturbation.

In the final stage, the genital, teens have learned, according to Freud, to balance their most basic urges against the need to conform to the demands of reality and social norms. By shamelessly revealing his masturbation instead of concealing it out of a respect for social norms, Strepsiades in Clouds enacts regression from the genital to the phallic stage of development. Endowed with a leather strap-on as part of his costume, he is toasting and turning on a bed under a blanket when Socrates, the headmaster of a school called "The Thinkery," enters. Strepsiades has been tasked with coming up with ideas, so Socrates asks:

<table>
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<tr>
<th>You have had any good ideas?</th>
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<tr>
<td>Strepsiades: No.</td>
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<td>By Zeus, no good ideas.</td>
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<td>Socrates: Nothing at all.</td>
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Strepsiades has not only received a failing grade from Socrates but failed the test of the genital stage by suppressing his urge in a social situation. I used the juvenile word "boner" here to suggest that Strepsiades is acting like a teenager who has regressed to the phallic stage by publicly playing with himself. Throughout this play Aristophanes reduces intellectual concepts to bodily functions and libido, and he here equates intellectual contemplation with masturbation.

As with all drama, ancient Greek comedy inherently presents the audience with a regression from a mature stage, with its acceptance of reality, into make-believe. The audience is expected to accept that, in the world of the play, male actors are females and the Theater of Dionysus in Athens is any number of faraway settings, even the exotic and impossible Cloudcuckooland. A night out at the theater demands that one pretend, and this acceptance of what is not so is itself a childish act. For all of the anxiety over masculinity in ancient Athens, its comedy required male actors to breach boundaries of gender identity and dress and act like females. The twenty-four-member chorus consisted of sphinxes (younger men) from a particular deme (district) of Athens. These young men played, as a collective, characters other than what they were—insects and animals in such plays as Frogs and Wasps and women in such plays as Lysistrata and Women of the Assembly. Furthermore, since all the actors were male, all the other named female characters were males in drag as well. This practice compelled the actors to explore another gender identity and exaggerate its stereotypical behaviors well enough to present a travesty of them. Given the number of male actors dressed as women, the play Lysistrata, for example, was one big "Drag Queen Story Hour." It is remarkable that Athenian males, who were even more "macho" (concerned with appearing masculine in public) than Athenian males, established and loved theatrical-religious festivals in which promising young men, selected by the civic-political head the archon, were required to dress in drag and act like females. In myth, the hyper-masculine hero Heracles both dresses in drag and does what was traditionally considered women's work, such as weaving, for a year. The implication is that acting like a female was a rite of passage to adulthood for the young men and to imply mortality for Heracles. It was as if one had to experience being the opposite of what he would become in order to fully understand his future role.

In its original performance, Women of the Assembly featured double drag—male actors playing female characters who dressed in drag as males. The concept of double drug reintroduces self-awareness and fun to gender identification: being a man is just the humdrum thing a man does each day, playing a woman who is acting like a man, however, makes the whole performance fresh and enlightening. It's the difference between "I'm a man" and "I'm a man." Though lacking, of course, male primary sexual characteristics, the female characters in Women of the Assembly have concerned themselves with secondary ones—body and facial hair. One says, "I've grown my armpit hair out/bushier than a thicket," and they all diet on fake beards—a hallmark of male adulthood in ancient Greece. They also rehearse what one might call tertiary sexual characteristics—walking and talking like men. Since respectable females traditionally have fairer skin than males in ancient Greece (because they are rarely allowed outside), one says she has been tanning so as to pass more credibly as a man. As with Lysistrata's confession of the anus and vagina earlier in the play, we here find the conflation of the vagina and mouth when the lead female character Praxagora, while enjoining the women to stay in their male roles, compares female pubic hair to the bushy beard of a prominent Athenian named Phormisius.

It would be just glorious if some woman clambered over the men and hitched her clothes up and exposed her—Phormisius!

It seems that focus on orifices is not just Freudian but Aristophanic as well. As a connoisseur of Aristophanic comedy and a man who has on occasion dressed and acted like a woman, I can attest that dressing in drag is not only fun but mind-expanding, and forth between primitive ideation and remote associations, on the one hand, and critical evaluative thinking, on the other, and between conceptual regression to make-believe that one can conceive of a utopia like Cloudcuckooland where all primitive urges are satisfied and all adult frustrations eliminated. As an artist, I spend my workdays unlearning and relearning. Indeed, artistic creativity over the millennia has had far less to do with pushing forward toward innovation (as technology and medicine do) and far more to do with going backward to the primal urges and thought-processes we have all experienced.
Some years ago I was invited to speak to the American Psychoanalytic Association on the subject of Shakespeare. The invitation surprised, even astonished, me since I recognized nothing in my work that bore the marks of whatever in those days I thought Freudian literary criticism looked like. The surprises kept coming: it turns out that Shakespeare played a regular role in these annual meetings. I learned that the Association chose a specific play each year, that literary scholars and psychoanalysts both gave talks on the play, and that the annual choice of a play was by no means restricted to the most obvious works in the canon such as Hamlet or Othello. When my schedule finally made it possible for me to accept this invitation, the play chosen for that year was *Antony and Cleopatra*. This was the biggest surprise of all, since it counted as my personal favorite among all the plays and since it is far from the sort of crowd pleaser that we professional Shakespeareans expect amateurs (dare I use the word?) even to have read. All of which may have aligned in its way with the one piece of clear advice that appeared in every communication I received from the Association: “You would be welcome to talk about whatever most interests you which need have absolutely nothing to do with psychoanalysis [emphasis mine].” I leave it to others to speculate on what is likely to emerge when an officer of the American Psychoanalytic Association instructs a non-psychoanalyst speaker that their talk before the Association “need have absolutely nothing to do with psychoanalysis.” Or rather I present a version of what I did talk about as it has been filtered through some ten years of further experience, as well as further experience with that play.

FALSE FRIENDS,

TRUE LOVES:

Reading Shakespeare’s *Antony and Cleopatra*

BY LEONARD BARKAN

Illustrations by Austin Hughes
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A. C. Bradley published his seminal work, Shakespearean

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one’s nearest and dearest. The real meaning is, of course,

but the don’t mean the same thing.

If you go to a Gymnasium in Germany, chances are you won’t

and, on the other hand, (in common with some other late works of)

its program of metamorphosis and beauty seem to go together

Shakespearean Tragedy: Lectures on Hamlet, King Lear, Othello,

of Shakespeare’s Genius

or, false friends. The expression itself has a poetic,

and, on the other hand, (in common with some other late works of)

inner lives was most at the center of Shakespeare appreciation,

as the central fact of Shakespeare’s genius the ability to create

Shakespearean Tragedy: Lectures on Hamlet, King Lear, Othello,

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some consistent or “true-to-life” notion of human character.

Following the narrative is not the only way to tell this story. For the fullest exposure we must look where we always look in Shakespeare: the language. To begin with, a rather innocent exchange, once again from the opening moments of the play, Antony has just offered a grand gesture of his commitment to Egypt and Cleopatra by declaring that Rome may as well melt into the Tiber for all he cares. This should greatly gratify Cleopatra, but it doesn’t. “Excellent falsehood,” she responds, possibly in an aside to the audience, or possibly (depending on how it is staged) in a speech that taunts him to his face, and then she continues.

Why, did he marry Fulvia and not love her? I’ll seem the fool I am not. Antony

Will be himself.

What Cleopatra apparently means to say is that she will pretend to be a fool (i.e., pretend to believe that his anti-Rome, anti-Fulvia protestations are sincere), but that, by contrast to her seeming foolish, Antony will actually be a fool. Except that Cleopatra stops herself before saying “fool” and substitutes “himself.”

And that takes us to the central term that encloses all of this multivalence of meaning: what might it mean to say that Antony will be himself? Shakespeare uses the term self (alone or attached to personal pronouns) sixty-three times in this play. Granted, that may sound more impressive than it is, since “self” is a favorite word throughout his oeuvre (which is interesting, as applied to the hero. Moments after the first appearance of that empty equation of “Antony” and “himself,” his follower, Philo, says,

Sometimes when he is not Antony

He comes too short of that great property

Which still should go with Antony.

What, if anything, does that mean? Dropping the word property into that sentence reminds us that we are in the world of Aristotelian philosophy, which will later become Lucrétian and still later Thomistic philosophy, all of which are fundamentally conscious of the properties of things as an account of their essence. But here the definition of that property is an empty set. To paraphrase those lines, when Antony is not Antony, he is ... not Antony. What Antony is, it seems, is a walking tautology.

Tautology is a kind of vacuous circle of meaning, a failed search for signification. We’ll return to Antony in a moment, but it’s also worth pointing out that the deep structure of the play, in which Roman values are set against Egyptian values, with most of the characters identified with one but torn between the two, constantly involves an attempt to make sense across a definitional divide. If Antony’s followers are constantly being asked to explain him and if they constantly respond with an empty equation (Antony = Antony), it’s part of a fundamental discursive activity where one person or group of persons tries to understand another and finds that there is no common language to facilitate that understanding. This process expresses itself in one of the most fascinatingly enigmatic exchanges in the play. Antony is being interrogated by his Roman colleague about one of Egypt’s most famous wonders:

LEPIDUS What manner of thing is your crocodile?

ANTHONY It is shaped, sir, like itself, and it is as broad as it hath breadth. It is just so high as it is, and moves with its own organs. It lives by that which nourisheth it, and the elements once out of it, it transmigrates.

LEPIDUS What colour is it of?

ANTHONY Of it own colour too.

LEPIDUS ‘Tis a strange serpent.

The crocodile is untranslatable; it can be defined only with reference to itself. In the gaps between one civilization and another, or even perhaps between one individual and another, everything is a tautology, definable only in terms of itself.

And that hollow thread of self will run through the play. Another, more prominent follower of Antony, Enobarbus, when urged by Lepidus to get Antony to talk peace with his fellow Roman triumvirs, says, “I shall entreat him to answer like himself.” What sort of answer will that be? Equivocal, not to say deceitful, as it turns out. In the course of cementing the marriage with Caesar’s sister Octavia (and thereby his alliance with Caesar), Antony tries to make a more substantial equation: “if I lose mine honour, / I lose myself”; but the purely strategic circumstances of this marriage, and his swift departure from it to Egypt, where, as he says, his “pleasure lies,” give the lie to any sense that Antony’s “self” equals “honour.” (And his follower Scarus will soon say of him, “Experience, manhood, honour, ne’er before / Did violate so itself.”) When the first battle is lost, yet another follower says of him, “Had our general / Been what he knew himself, it had gone well.” Here, the usage touches upon one of the most famous contexts of the concept self: “Know thyself, O, course to frame, know thyself.” But what can that universal injunction mean in this context if the play has refused to define the self that Antony is supposed to know (or what we are supposed to know of him)?

From this point, the plot of Antony’s career can be traced through this problematic self. In reaction to the lost battle against Caesar in Act Three, he says, “I have fled myself,”
which contains an interesting double meaning of which more in a moment; and he adds, saying his followers to decamp, “let that be left which leaves itself.” When Caesar has collected quite a few of these defectors, he orders them to be placed on the frontlines of the battle, so that, in his words, “Antony may seem to spend his fury / Upon himself.” By the end, it will be clear that both the protagonists are caught up in this empty circuit of self. Cleopatra is throughout the play the very contradiction to herself, as we see from one of her earliest attempts at controlling Antony. She doesn’t know where he is in the palace, and sends Charmian with the injunction, “if you find him sad, / Say I am dancing; if in mirth, report / That I am sudden sick.” She has no idea who she is, and has neither fabricated herself, nor one that is fabricated by contradiction. Whether all of this becomes her is an open question. No surprise that the central action in the last part of the play—the action that will, in fact, reunite the lovers—is their respective searches for a suitable way to die. And, as it turns out, a play about self is also a play about suicide, which, after all, contains the Latin word for self, plus the root for “kill.”

The tragedy of a self that isn’t a self turns into a celebration of a self which is fabricated by contradiction. Whether all of this becomes her is an open question. No surprise that the central action in the last part of the play—the action that will, in fact, reunite the lovers—is their respective searches for a suitable way to die. And, as it turns out, a play about self is also a play about suicide, which, after all, contains the Latin word for self, plus the root for “kill.” The tragedy of a self that isn’t a self turns into a celebration of heroic suicide. As he prepares to meet his doom, Antony identifies with Hercules: “Let me,” he says, “with those hands that grasp’d the heaviest club, / Subdue my worthiest.” By the end, it will be clear that what his sources delivered to him—figures of such inconsistency between insiders and outsiders that no notion of satisfying fullness can be entertained. So he flaunts that requirement, and offers a work that teaches us to be wary in general of “character” as a central element in fiction. This is particularly appropriate in the case of theatrical fiction, which is about a play by the very fact that the persons whom we are actually watching are by definition not being themselves. One final wrinkle in that term self, a potentially crucial distinction that I have so far elided. Consider the difference between “myself” and “my self”—between, in other words, a simple grammatical formation, in which a speaker refers back to a previously named person, and a vastly more complicated proposition, according to which individuals have some sort of inward essence that defines the uniqueness of their being. Consider what happens when we apply this distinction to one of the moments when the hero reflects on his own fate most succinctly, specifically the circumstance that his men will desert him. Should the text read,

I have fled myself; and have instructed cowards To run and show their shoulders.

Or should it read,

I have fled my self; and have instructed cowards To run and show their shoulders.

In other words, does it mean “My men may as well flee; after all, speaking for myself, I already have fled”—that is, by joining Cleopatra’s troops when she turned tail. Or does it mean, “I have abandoned my own deepest essence, so they may as well do likewise and do the thing that they want to do, since all bets are off”? The simple, orthodox answer is that Elizabethan typography and punctuation did not make such distinctions, at least not in any consistent way. The more complicated answer is a historical one—to, or to be more precise in the language of literary criticism, a historicist one. What, in other words, can we assume is the mentality, the episteme, the worldview on this subject in 1607, and how can we shape our own thinking, itself hopefully mined in 2023, so as to effect a channel of communication with that past moment that is both true to them and meaningful to us? In the whole world of issues about which we both know the moment to be as distinct from our own, there is no topic more vital and alluring than the question of whether people believed in this kind of personal essence, and/or how they might have framed such a belief, or their equivalent for it, either in their heads or in their language. Perhaps it is best to scale down all this vastness to orthography and to seek guidance in the Oxford English Dictionary, which defines words through their history. Focusing on the subject of that particle self, one goes through ten of the thirteen pages devoted to this word, beginning with Cynwulf in 900 CE—all of them about sameness and grammatical reflexivity—until one finally gets to:

That which in a person is really and intrinsically he (in contradistinction to what is adventitious); the ego (often identified with the self or oneself as opposed to the body); a permanent subject of successive and varying states of consciousness.

The earliest quotation they apply to that definition is from 1674, several decades post-Antony. Yet when you think about it, “that which in a person is really and intrinsically he (or she),” and “a permanent subject of successive and varying states of consciousness”—it sounds almost like a plot summary of Antony and Cleopatra. Not that Shakespeare has invented the self (though some have claimed it), or that he is “proving” with this play that there is such a thing as the self. Rather, that his play is an essay of self-questioning about how it is that the human personality might be said to be defined, described, or constructed. Which means in the end that Antony and Cleopatra isn’t just about whether there is such a thing as fictional personhood, but whether there is anything like real personhood. To return to the historicist mode, it begins to seem as though premodern thought on this subject looks quite a bit like postmodern thought on this subject. Antony and Cleopatra may have helped write some of our own contemporary—and even psychoanalytic—questions about the possibility that human character can be consistently grasped at all.  

Leonard Burkan recently retired from Princeton, where he taught literature, classics, and art history. He has published works on Renaissance art and literature, on Berlin, and on Rome. His latest book is entitled Reading Shakespeare: Reading Me.
Sigmund Freud and William Shakespeare go together like peanut butter and jelly. It’s rare to find a Shakespearean who’s not at least a little bit Freudian and perhaps even rarer to find a psychoanalyst without an interest in the Bard. Shakespeare scholar Leonard Barkan provides a classic example of the affiliation between the two geniuses in his recent book *Reading Shakespeare, Reading Me* (Fordham University Press, 2022), in which he appeals to Freud as an “authority of, I would say, comparable talent to Shakespeare’s in mapping the human condition.” However, in “False Friends, True Loves,” Barkan’s delightfully cheeky essay in this edition of *TA P*, he questions whether Freud and Shakespeare always stride together in perfect lockstep. Mapping the human condition was, after all, not Shakespeare’s only aim. Freud sought to understand human character in order to treat its maladies. Shakespeare studied it in order to create characters onstage.

And sometimes, Barkan suggests, the Bard did not even want us to believe in his characters, let alone understand them. In his late-career play *Antony and Cleopatra*, Shakespeare flaunts his characters’ constructedness and his own artifice: the identities of Antony and Cleopatra swirl and change in a windstorm of words. There are more speeches in this play than in any other Shakespeare play, and the characters, as Barkan shows, often expend their wind on contradictory accounts of themselves and others. Shakespeare went postmodern in the end, Barkan concludes, playing with the idea that human character is unknowable or a mirage woven from raveling strings of words. French psychoanalyst Jacques Lacan, who looked into the human heart and saw a lack, or at best a tornado of flying receipts and paper bags, would probably approve. Freud would not. The *Ur*-analyst suggested that repression obscures the self, not that repression
Bread and Shakespeare had much to say about dreams, and they evidently shared certain impressions of the nature of dreaming. For example, Shakespeare anticipates Freud’s theory of dreams as expressions of wishes. Freud famously used Moritz von Schwind’s 1836 painting The Peasants’ Dream as the frontispiece to his Introductory Lectures to illustrate this point. Schwind’s painting depicted a recumbent prisoner dreaming of escape through a high cell window. Likewise, in Shakespeare’s Richard III, the Duke of Clarence dreams of escape from prison but from death. He dreams his brother Richard knocks him overboard, but instead of drowning, Clarence visits wonders on the bottom of the sea, including skulls with gems for eyes “that mock’d the dead bones that lay scatter’d by.” Sir Brakenbury, Constable of the Tower, asks Clarence, “Had you such leisure in the time of death / To gaze upon the secrets of the deep?” Clarence answers, “Methought I had.” Of course, it was only a dream, and Clarence does not survive his death sentence in waking life. To add to that, his executioners drown him. In a woe of woe.

The image of death transformed to wonder in the dreamscape of the sea returns in Shakespeare’s grand finale, The Tempest, when Ariel works dreamy magic on death, singing again of sunken skulls with jewels for eyes (this time, pearls). In The Tempest, we enter the province of artistic daydreaming, of conjuration, a talent mastered by the play’s central character, Prospero. With his magical art, Prospero animates spirits just as Shakespeare animates characters in the fictional dream of the play: “Spirits, which by mine art / Have waked their sleepers, oped, and let ’em forth by my so potent art.” In the end, a son thought drowned turns up alive, symbolically reversing the fate of the Duke of Clarence—and perhaps that of Shakespeare’s own son Hamnet, who died. Prospero puts aside his magic arts, but their death-defying powers leave the world of the play permanently changed. 

After Mark Antony dies in Cleopatra’s arms near the end of Antony and Cleopatra, Cleopatra has a dream about him in which he appears godlike and physically bigger than the world. In narrating the dream, she asserts that when it comes to creation, nature cannot compete with dreams, but in this case she wishes that it could. She wishes that Antony could really be bigger than the world, bigger than a dream, bigger than death.

But, if there be, or ever were, one such, it’s past the size of dreaming: nature wants stuff To vie strange forms with fancy; yet ’t imagine An Antony were nature’s piece ‘gainst fancy, Condemning shadows quite.

She wishes her dreams were powerful enough to make itself come true. It’s an impossible dream. But it’s also one that Shakespeare’s career in a sense achieves. Shakespeare asks the question of his art to rise up and defeat death for real by outliving his physical body, even outliving other attempts at memorialization by people who in life wielded more earthly power than a lowly poet. His Sonnet 55 begins:

Not marble nor the gilded monuments Of princes shall outlive this powerful rhyme;

This is a moment in literature like Babe Ruth calling his shot in the 1932 World Series before swatting a home run into the centerfield bleachers at Wrigley. It’s like LeBron James tattooing “Chosen 1” across his shoulders at the beginning of his career and then going on to break the all-time career scoring record at the end. (He did it this past season, his twentieth in the NBA.) Shakespeare really did in a sense that death and time. More than four hundred years later, he still reigns supreme. As Gustave Flaubert said of him in an 1846 letter to Louise Colet, “He is a terrifying colossus: one can scarcely believe he was a man.” By dreaming—and staging—such evocative and penetrating dreams, Shakespeare made Cleopatra’s dream come true, only the giant bigger than the world, bigger than time, was not Mark Antony, it was William Shakespeare.

When Shakespeare is in his power-dream mode, he mocks death, whether by setting gems in skulls’ eyes or by satirizing his own carnage-filled tragedies, which he seems to be doing in part in Antony and Cleopatra. It’s a little bit funny that Mark Antony falls on his sword “and misses,” as Barkan puts it. The scene where Mark Antony tries to convince his friend Eros to kill him makes me laugh out loud when I read it. Antony asks Eros to do it no less than five times, an extent of repetition seen mainly in comedy, and as in comedy, the payoff comes with a reversal of established expectations: each time Antony asks to be stabbed, Eros resists; finally, the fifth time, Eros assents but surprises Antony by stabbing himself instead! In Antony’s death scene, Antony keeps saying, “I am dying,” but he won’t die. He keeps trying to speak his last words but can’t seem to get to the point, and when he asks Cleopatra to let him speak, she interrupts him, “No, let me speak.” May we all go out with our loved ones interrupting our last words! Antony’s death scene is funny, but it’s also profound. In it, Shakespeare’s words interrupt death. In the Bard’s career as a whole, his words in some sense interrupt mortality. The products of his imagination still have extraordinary power. They are, as Cleopatra says, “past the size of dreaming.”
I was not born here. I was born in a place that no longer exists. On a world map, Saigon is not there; where it used to be there is now a place called Ho Chi Minh City. Saigon, the city of my birth, lives on only in the mythical recreations of war films and in the hearts of those exiled from it. In our hearts, physical displacement becomes mental. The past is an actor who wears the present like a mask.

My childhood ended, in a sense, with the siege of my home city in the final days of the Vietnam War. The journey to the US that began then was one of transformation, a passage through new names and identities: first I was a child, then an evacuee, and then a refugee. After my departure from Saigon on helicopters, warships, and boats, and my passage through refugee camps, I transitioned upon arrival in Brooklyn to “resident alien,” then gradually over time I morphed into a “naturalized citizen.” These identities were not my choice, but created by an external body, by the US government, who granted the permission to physically remain on foreign soil. Many travelers and expatriates pass through these identities, but in my case they were baptized upon my head by others. And they were instigated by a displacement. It is still a scar. The internal injuries leave me yearning for something unattainable, to regain equilibrium from the loss of safety, of identity, of a past and a future. The striving to acclimate and settle here in the United States never ends.

Over my last remaining days in Saigon, in April of 1975, enduring week after week in a city where daily life unfolds before a backdrop of smoke-filled horizons blotting out the sun, with the soundtrack of explosions, fires, and death, my parents contemplate the future under a regime which will surely kill us either by physical violence or the assassination of our spirit. My mother decides she would risk everything rather than live another day in this grim reality. Each morning, instead of our familiar regimented routines, we the children are told to be ready for anything. We have not been able to...
“I WAS NOT BORN HERE. I WAS BORN IN A PLACE THAT NO LONGER EXISTS... SAIGON, THE CITY OF MY BIRTH, LIVES ON ONLY IN THE MYTHICAL RECREATIONS OF WAR FILMS AND IN THE HEARTS OF THOSE EXILED FROM IT.”
In truth, all sensation is already memory.

— Henri Bergson
memory, I know the idea of my nanny will cease to exist; she too will evaporate in the smoke. My breathing accelerates and I am gasping for a breath of clean air. We wait squating on the ground, huddled together for hours amidst the cacophony of sounds, mechanical noises blended with explosions, screams, and violently barked orders, all the while just waiting. The daylight is fading, a dusky haze of sunset blends with the smoldering city ablate, where no one can extinguish the burning anguish of its inevitable downfall. Someone points to us, and my mother says, “Yes, we are a family!” They ask questions, while those in charge count people, trying their best to keep families together. “How many?” We have the right number of members in our family to go.

 Though I become dissociated in the fugue state of watching myself go through the motions of being evacuated, I also notice and read the other silent faces who are in the same conversation with fear. I vaguely register a woman pushing past me to get on the helicopter, when she tugs the buttons off of my dress. I remember the pressure and pain from my mother’s hand grasping mine and my siblings’ wrists all together so tightly that it leaves bright red marks and starts to bruise. It’s a beat of silence, then the cold, the immense drastic temperature drop of being lifted upwards. I feel a rush from intense heat to the blast of cold in the open copter, in my inadequate attire, only to be jarred back again from the outstretched hands, only to be jarred back again from the shimmering abyss by the immediacy of noises and smells of burning anguish of its inevitable downfall. I can only feel the cold now, coughing, clinging closer to my mother. She is holding me as I gasp for air; an asthma attack forces me to focus solely on my breathing. But I am still an observer: it’s raining now and drops of rainwater drown the salt in my tears, mixed with a taste of ash in my mouth, trickling down into the sea. We are all saturated. It’s evening, the dark sky illuminated by the bright artificial glow from the deck of the spaceship, throwing giant shadows, all the danger of the moment consuming our senses, and somehow we endure it; even when our spirit could no longer, our bodies still pick up and carry on.

“Looking back, I remember an intensely physical sensation the French call l’appel du vide—the call of the void—a powerful urge to be enveloped in the ocean...”
Tati Nguyen’s recollection of her clandestine, frightening, hurried, but life-saving migration during the 1975 fall of Saigon shatters me into pieces. My generally good-hearted and kind self gets flooded with pain, horror, and confusion. My immigrant self knows the anguish of geo-cultural dislocation and nods in agreement with Nguyen. But that self also contrasts my voluntary exit from a mostly serene India with her involuntary and terrifying escape from a war-torn Vietnam; it makes me feel ashamed of my occasional indulgence in masochistic glorification of my losses. And then there are my writer and psychoanalyst selves. The former admires Nguyen’s craft, tries its best not to envy. The latter refuses to be gullible. It questions the reliability of the author’s memory and also wonders how her early psychic development could have colored the processing of this highly traumatic event. However, the same psychoanalytic self warns me against the unethical nature and erroneous results of such “wild analysis.” I am torn into pieces.

As soon as I utter these words, I realize that being torn and the mental pain (Seelenschmerz; in Freud’s phraseology) it brings are what all this is about. Tati Nguyen, a New York–based visual artist and filmmaker, offers us a narrative of her abrupt uprooting from the city of her origin—a city in flames, having fallen to the enemy in the final moments of a decades-long conflict. The author is all of eight years old at the time of this psychosocial amputation, and themes of being torn apart abound in her narrative. Let us take a look.
I. BEING TORN FROM ONE’S MOTHERLAND

Nguyen’s piece opens with the stunning declaration, “I was born in a place that no longer exists.” How terrible is that? How unmooring of the self and its grounding in a familiar ecological surround? Today, most psychoanalysts take living in a country for granted. The Jewish émigré analysts, dispersed all over the globe following the Holocaust, did not address their dislocation for a long time. It was too traumatic, and they did not want to call attention to their ethnicity and religion which had led to their persecution in the first place. Blocked (externally and internally) from the possibility of return, they had a pressing need to assimilate. It was with passage of considerable time and a growing sense of safety that they began to address such issues. A major impetus to psychoanalytic writing about geo-cultural dislocation (involving changes in landscape, climate, architecture, vegetation, little and big animals) came from less traumatized immigrant analysts (e.g., Leon and Rebecca Grinberg, César Garza-Guerrero, and myself) who had left their countries on a voluntary basis. One can speak of these things only when one is ready to speak. Nguyen has now given her experience a voice by addressing, in a sensitive and erudite manner, her loss of what Heinz Hartmann called an “average expectable environment”—a stable home conducive to normal childhood development.

II. BEING TORN FROM ONE’S HOME

In his insinuous fashion, Winnicott said that a home serves many emotional functions which become evident only when the home is lost. Nguyen’s memory of packing and repacking suitcases to take as the family was leaving poignantly describes the helpless effort of migrants to take their home along with them. At the end of her essay, she refers to bags that still contain photographs brought from those early days. Look, the American saying that one cannot go home again and the Spanish journalist Maruja Torres’s phrase “the wound of return” might be correct—we cannot return to an earlier phase of life, or a prior homeland, and experience it as we remember it because both we and the place have meanwhile changed considerably—but it is also true that we actually never leave our childhood homes. We carry them in our hearts till we die. We revisit them for what Samuel Novey termed a “second look.” We try to replicate them, frequent them in dreams, and allow them to house the poems we write late at nights.

III. BEING TORN FROM ONE’S LOVE OBJECTS

Nguyen’s description of being separated from her beloved nanny is truly difficult to read; it is simply too painful. Her weeping, wailing, screaming, clutching doors and walls, refusing to leave, and having to be tied to by her parents are unfortunately familiar to me. At age fourteen or fifteen, I witnessed a seven-year-old cousin being brutally separated from his nanny and sent away to an out-of-town British-run boarding school. Call the scene “A Child Is Being Separated,” if you will—a scene eerily similar to that described by Nguyen. My familiarity with the significance of childhood nannies is also derived from the lives of four great psychoanalysts (Freud, Ferenczi, Bowlby, and Bion) who were deeply affected by this relational bond, its rupture showing up in subtle and not so subtle ways in their theoretical formulations.

IV. BEING TORN FROM ONE’S CHILDHOOD INNOCENCE

A child needs safety, security, and environmental continuity for psychic growth and maturation. Such “holding” and “containing” provisions help the child negotiate its epigenetically unfolding developmental tasks. Oral clinging, anal retentiveness, and oedipal defiance notwithstanding, there is still a quality of innocence to childhood, a wide-eyed wonder that is most marked in the latency years. War, societal turbulence, and other life-threatening circumstances—with overwhelmed and scared parents—rob the child of such innocence. The “protective shield” is lacereated, trauma results, and long-term effects (e.g., flashbacks, psychic homelessness) ensue. Nguyen delineates all this in searing details.

V. BEING TORN FROM ONE’S RIGHT TO A SELF-EARNED IDENTITY

Under normal circumstances, identity evolves from a gradual internalization and discerning synthesis of significant objects of one’s formative years (e.g., parents, older siblings, grandparents, neighbors, schoolteachers). Such accretion is mostly unconscious and ego-syntonic. It is “owned” by the individual (e.g., “I am a proud parent of two wonderful kids,” “I am a nurse”). Under abnormal circumstances, the individual is assigned labels by others (e.g., “colored,” “terrorist,” “aliens,” “Interraccs,” “deplorable,” “woke”). This is a subcultural theft of the individual’s privilege of self-definition. It causes estrangement on both interpersonal and intrapsychic bases. Note how the Bulgarian émigré Julia Kristeva speaks of an immigrant’s mother tongue hiding inside him or her as a handicapped child tugged away in the back room of the family house. It is painful.

Lest the scenarios I have outlined seem unbearably dismal, allow me to add that all is not doom and gloom. Trauma is a double-edged sword. Human beings can get hurt, but they also possess perseverance, stoicism, grit, and resilience. “Being torn” is certainly a wound, but a wound can turn into a scar and a scar into a story. And it is at this juncture that creativity enters the picture. Creativity, according to Freud, is “a continuation of, and a substitute for, what was once the play of childhood.” A play that, we might add, gets at times cruelly aborted. The artist and the writer—and Tati Nguyen is both—can jump-start the process of thwarted development by her healing paintings and words. This is what Georges Braque meant when he stated that “art is a wound turned to light.” Nguyen has brought much light to the exiled and ethno-dystonic parts of our selves. Bravo! 

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1962
John Huston
Freud: The Secret Passion
Starring Montgomery Clift as Freud

1976
Herbert Ross
The Seven-Per-Cent Solution
Alan Arkin as Freud
In an adaptation by Nicholas Meyer of his novel expanding the Sherlock Holmes universe

1981
Nanni Moretti
Sogni d’oro
Story of an Italian film student who makes a movie called Freud’s Mother, featuring a depiction of Freud in the film within the film

1984
Moira Armstrong
Freud
BBC miniseries with Freud played by David Suchet

1985
Hugh Brody
Nineteen Nineteen
Frank Finlay as voice of Freud

2010
Felix and Percy Adlon
Mahler on the Couch
Karl Markovics as Freud

2011
David Cronenberg
A Dangerous Method
Viggo Mortensen as Freud, Michael Fassbender as Jung

2014
David Ruhm
Therapy for a Vampire
Karl Fischer as Freud

2020
Marvin Kren
Freud
Netflix series starring Robert Finster as Freud investigating a murder conspiracy

∞
Matthew Brown
Freud’s Last Session
Anthony Hopkins as Freud debating the existence of God with C. S. Lewis on the eve of World War II (in production)
Sigourney Award Committee recognizes ‘sea change’ in major psychoanalytic advances

BY RYAN LENZ
Illustration by Austin Hughes

Jack Drescher was not yet a doctor, just finishing up medical school and beginning interviews for training in psychiatry when he understood what would become his life’s work. It was 1980 and the American Psychiatric Association had only seven years earlier reversed a long-standing opinion that people like him were mentally ill. That reversal was hardly an apology, but Drescher knew it was the beginning of something important—a change for gay people and their mental health treatment. So when an interviewer for a residency at Cornell-affiliated New York Hospital said as part of the selection process, “Tell me about your intimate life,” Drescher saw no reason to lie. He was gay.

“He looked like I hit him between the eyes with a slingshot,” Drescher said. “Literally.” Why would he be so bold? “I thought it wasn’t a problem. I had read like everybody else that homosexuality was no longer considered a disorder. There had been nothing in my medical school training other than it was wrong to say the time.”

While Cornell did not accept him, Drescher went on to train in psychoanalysis at the William Alanson White Institute, and he has since committed more than forty years to advancing a scientific understanding of human sexuality in the face of growing cultural forces waging a vicious attack on the social acceptance of LGBTQ+ people.

Things in the field have changed. Late last year, Drescher was among five recipients of the 2022 Sigourney Award for major advances in psychoanalysis. Special attention went to studies into the nature of human sexuality and gender, explorations of identity as determined by the physical self, and efforts to unpack racial bias institutionalized in the field of psychoanalysis.

“The Sigourney Award Trust received work from an exceptional pool of global applicants representing sea changes in the understanding of psychoanalytic theory and its clinical application,” the committee said, noting the research affected people’s lives in “education, health care delivery, race, equity, gender, and sexuality issues, and community.”

Sea changes. The phrase appears again announcing the award for Drescher, a professor at Columbia University and New York University: “His work has managed to shift psychoanalytic thinking about LGBTQ+ people and brought psychoanalytic sensibilities into conversations outside of psychoanalysis, fostering a sea change in psychoanalytic organizations’ perspectives on gender and sexuality,” the committee said.

This strong praise has a sound basis: since entering psychiatry, Drescher has worked to rethink faulty psychoanalytic ideas about homosexuality based on solid scientific evidence rather than past understandings. Drescher’s work comes as human sexuality rises to the center of historic cultural challenges. In recent years, laws have been passed around the country both enshrining protections for LGBTQ+ people and tearing them down. The overall climate has sparked morally outraged rhetoric and inspired violence, most tragically in 2015 when a gunman killed forty-nine people at the Pulse nightclub in Orlando. Meanwhile, divisions linger internally in the traditional psychoanalytic center and have been embraced by conservative religious and political forces opposed to homosexuality.

“Reparative Therapies,” Drescher called attention to misguided attempts to change gender and sexuality, often motivated by conservative religious and political forces opposed to homosexuality.

That work seems more important now, especially as new horizons in psychology emerge. “We’re at the beginning of the conversation having to do with trans people, and it’s gotten ugly because politicians on the right and also people on the left have a very common view of gender, so they fall back on bedrocks that they think shouldn’t be transgressed,” Drescher said.

Drescher’s notable accomplishments include editing the section for Gender Dysphoria—formerly called Gender Identity Disorder—in the 2022 revision of the DSM-V and taking part in the World Health Organization’s working group that revised sex and gender diagnoses for the organization’s International Classification of Diseases. But perhaps most notable has been Drescher’s longstanding opposition to reparative therapy.

In his 1998 paper “I’m Your Handyman: A History of Reparative Therapies,” Drescher called attention to misguided and antiquated understandings perpetuated through the dangerous practice.

“The evolution of one branch of psychoanalytic theory into an anti-homosexual political movement illustrates the permeability of boundaries between clinical issues and political ones,” Drescher wrote presciently then. “In their open support of anti-gay legislation, reparative therapists have moved from the traditional psychoanalytic center and have been embraced by conservative religious and political forces opposed to homosexuality.”

It’s hard to imagine in 2023, nearly a decade after the US Supreme Court legalized same-sex marriage, as wider acceptance of LGBTQ+ identities becomes normalized in many parts of the world, just how powerful and important those words were as they called out a branch of psychoanalytic theory for its “mythic status as an implacable foe of Lesbian and...
I think psychoanalysis has lagged behind culture in terms of gay rights. Drescher said it has taken many years for the field of psychoanalysis to come to terms with itself.

“I do think that psychoanalysis has good things to offer to the culture—the very notion of the unconsciousness that may be in operation, that we may not be fully considering everything we’re doing, that everything is not immediately accessible to our thinking—is an idea that is very helpful in a variety of settings,” Drescher said. “But I think psychoanalysis has lagged behind culture in terms of gay rights. Psychoanalysis is behind the culture.”

Ryan Lenz is an award-winning journalist and writer who spent eight years documenting the rise of extremist ideas for the Southern Poverty Law Center. From 2005 to 2008, he covered the Iraq War for the Associated Press. He lives in Atlanta.

GIUSEPPE CIVITARESE, for work extending Bion’s reformulation of the concept of “hallucinosis” to transform it into a psychoanalytic technique. The committee noted that Civitarese “extends those ideas to show how human subjectivity is also intersubjective, essentially positing that mental life is rooted in co-being with others.” The committee noted Civitarese’s expository writing describing the experience of analytic transformation. “My work, although sometimes dealing with abstract and difficult concepts, is always grounded in a concern to improve the treatment of mental suffering,” he said. Civitarese has also written three books on contemporary art and literature, including the Italian-language work L’ora della nascita: Psicoanalisi del sublime e arte contemporanea (The Hour of Birth: Psychoanalysis of the Sublime and Contemporary Art), which won the Gradiva-Lavarone prize for the best psychoanalytic book of 2020.

DOROTHY E. HOLMES, for her landmark work examining race within psychoanalysis. Holmes articulates the necessity to “understand racist hatred that is carried widely in the culture and individually, and she shows that persistent racial unknowing is practiced in psychoanalytic institutions through silence, political intimidation, and disappearing in the face of repeated painful racial enactments,” the award citation noted. Holmes is a training and supervising analyst at the Psychoanalytic Center of the Carolinas and IPTAR, a training analyst at the Washington Baltimore Center for Psychoanalysis, and a teacher at George Washington University. “By examining systemic racism and its role in psychoanalysis, Dr. Holmes is inspiring open discussion of discriminatory practices that impact racial equity in psychoanalytic treatment and training,” said Robin A. Deutsch, a psychoanalyst who helps administer the award.

ALLESANDRA LEMMA, for clinical contributions addressing issues such as body modifications, transgender identities, and the impact of new digital technologies on the mind and body, especially applied to youth mental health. “Addressing a deep understanding of how modern identity finds its way through our physical self, her work explains widespread social phenomena in young people such as tattooing and cosmetic surgery, broadening the scope of thinking about what drives people to modify their bodies,” the committee noted. For the past ten years, Lemma has served as general editor of Routledge’s New Library of Psychoanalysis series. Her academic work has been translated into ten languages. She is a fellow of the British Psychoanalytic Society and a professor at University College London.

EDWARD TRONIC, for work focusing on the concept of repairing relational disruptions as a major change process in psychological development and the healing of psychological illnesses. The committee noted that his work in developmental psychoanalysis revised an understanding of infancy and development to involve “disorganization and repair.” A professor of psychiatry and pediatrics at the University of Massachusetts Chan Medical School, Tronic has published more than eighty papers on biological and scientific advances in psychology, genetics, and epigenetics.
Erika Schmidt was a woman of many firsts: the first woman, the first child analyst, and the first non-MD to be elected president of the Chicago Psychoanalytic Institute eighty-one years after its founding. As a self-described “dissident voice within BoPS [APsaC’s Board on Professional Standards],” and as a leader of the Association—she became the Executive Committee Lead Director of the APsaC board—she also helped inaugurate a new era for psychoanalysis as a whole. She believed in progress for the field and believed that psychoanalysis could in turn bring change to individuals and communities, where she applied psychoanalysis in pursuit of social justice for children. She died unexpectedly in late December 2022 at age seventy-three.

I first met Erika in the Fall of 2013 at what was then called the Chicago Institute for Psychoanalytic Institute and for our field as a whole. Erika and I chatted at the welcome meeting for incoming students; I remember her as friendly yet formal. I knew there must be something special about this woman who had just broken so many barriers and stepped right through the toxic clouds of prejudice and outdated, yet entrenched, traditions. But because she was quiet, polite, and unassuming, I didn’t realize the extent of her power and persistence. I didn’t realize then that she was a revolutionary leader who used her powerful voice on behalf of children.

Well before her election as president, Erika put her commitment to social justice into action. She helped launch, and was the first director of, the Center for Child and Adolescent Psychotherapy at the institute. The center focuses on providing mental health services on a sliding scale to underserved communities and educating members of those communities about the emotional life and developmental needs of children and their families. It offers individual psychotherapy, psychoanalysis, developmental guidance for parents, and school administrators. It also helps with family therapy, consultation, and referrals, all with a central goal of making quality services more accessible to those with limited financial resources. Prior to leading the center, Erika was the clinical director of the Chicago chapter of A Home Within, a national organization that organizes volunteer therapists to provide pro bono group therapy to children (grades K–8) who have been impacted by violence and loss. Englewood, a neighborhood on the South Side of Chicago, is often referred to as Chicago’s murder capital. Therapists traveled to the schools, meeting with the kids during the school day, in groups as small as four or five kids. They continue to meet weekly for as long as the children want to, and some of the groups have been meeting continuously for years. With their focus on understanding oneself and others, they have been able to transform lives and have earned their name of “Growth Groups” many times over.

In describing the impact of the Growth Groups and the appreciation the teachers, parents, and school administrators came to have for the therapists and their psychoanalytic approach, Erika often shared how surprised the teachers and parents were that the therapists kept showing up. They showed up week after week, year after year, and they showed up for every child in every group. The community was used to White, monied do-gooders suddenly appearing in their communities with offers to help, and then disappearing just as quickly. They saw the transformations in their children and they came to deeply appreciate the therapists’ dedication, care, persistence, and relationship.

Erika herself lived by these values, and she kept showing up. Throughout her career, she kept showing up for high-risk kids and families, especially the most vulnerable with the least resources. She built successful connections and programs to reach them, and she maintained a focus on the importance of children and the right they have to their inner lives and experiences. Indeed, her ideas on this topic are still being put out into the world: her article “The Rights of Children” was recently included in a book called Advancing Psychotherapy for the Next Generation: Humanizing Mental Health Policy and Practice (Routledge, 2023), edited by Psychotherapy Action Network.

Erika also kept standing up for psychoanalysis and worked to bring its values and therapies to the public. These goals and values informed the massive effort she and others at the institute undertook to transform its curricula and modernize the institution. The name was changed to the Chicago Psychoanalytic Institute, and formerly segregated programs were brought together, with all incoming students completing a first year of studies regardless of track or the therapy track. But they come in knowing that they are a part of a larger cohort of psychoanalytic therapists. When I went through the program, the psychotherapy classes met on Tuesdays and the psychoanalysis classes met on Fridays. We were never even in the institute at the same time, and there was no connection or collaboration with other students. With the transformations in the approach, schedule, and curricula, enrollment in the programs has increased appreciably.

I connected with Erika and the institute several years after completing the psychotherapy program. Like others, I was lured back by Jonathan Lear offering a class on Freud. I stayed on for the next year in Erika’s Freud class, in which we pursued a close and detailed reading of his texts. The depth and breadth of her knowledge of the psychoanalytic literature was impressive. She had a mastery of the history of the field, and particularly women analysts. And I was so impressed by the changes at the institute, and the ways in which it was recontextualizing its mission and its relationship with students and the broader community. The institute was also embracing students from all over the world—Australia, Iran, China—and investing in the necessary technology to do so well before the pandemic. I also became more aware of how threatening these changes were to some of the “old guard.” While I can appreciate the anxieties some analysts experienced due to Erika’s changes, I could not believe the extent of the resistance and virulence, hidden and blatant, they directed at Erika. Yes, Erika was direct, clear, and blunt, they directed at Erika. Yes, Erika was direct, clear, and decisive. This may have been mistaken for harshness, but as a friend said at an informal gathering after her death, Erika was without guile. She offered her best, most considered advice without guile. She offered her best, most considered advice and made informed, balanced decisions that aligned with her personal and professional values and principles. Part of me was scared of her at times, but mainly because she was strong, confident, and blatant, they directed at Erika. Yes, Erika was direct, clear, and decisive. 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honest answer that I could trust. And that I could ask for her help with any problem, at any time. I knew she would show up for me.

Erika’s generosity of time and spirit, her empathy, and her courage to do what’s right and what she believed in, even if that meant breaking boundaries or traditions, were all special aspects of her. Her dedication to helping kids and families and to advocating for psychoanalysis led to another connection I shared with Erika through the Psychotherapy Action Network. She met with us early on, when we were still trying to figure out how to build this advocacy organization and explain it and our big dreams. I’m sure our passion came through, but I don’t know about our clarity of vision. Yet Erika could see the potential, and she decided the institute would sign on as one of the first organizational members. We also asked her to join our Children’s Committee, and after a thoughtful pause, she agreed. Perhaps PsiAN’s focus on therapies of depth, insight, and free speech can be not only a tool and a practice from Freud, but also a verb—to free speech—to free our speech and our thinking, to create the power to free and alter a life. Perhaps this is why, as devoted as she was to studying therapeutic action, she prided action. She wanted to do things, make things, help change people’s lives. She loved this aspect of PsiAN, that “action” was not only in our name but driving everything we do. Her commitment to action touched all of the organizations, capacities, and structures she built in her career, and all of the children and families in whose lives she made real, tangible differences. She has had enduring impact for at-risk children and families, under-resourced communities, the institute community, the field of psychoanalysis, and depth therapy.

The informal gathering gave us a chance to be together, to talk, laugh, cry, and remember Erika. This group also organized a weekend of Reading for Erika, with each of us signing up to read, alone, uninterrupted, for one hour in honor of Erika. This gesture was lovely—genuine, deep, quiet, and powerful, not flashy. Personal and profound, quiet and connecting, suffused with poignancy, and rich with meaning—just like Erika.

We will continue to remember her, embrace her values and our shared commitment to building an advocate for change. She helped us prepare for our 2019 conference in San Francisco, introduced us to whoever thought could help, and presented there as well. As the start of the pandemic, she realized that therapists in training would need special support and developed a series of webinars to assist them with the transition to online therapy.

Throughout the six years of PsiAN’s life, Erika’s presence has been pivotal and valuable. Our work and friendship deepened over the last several years in particular, during which we met for two hours a week, every Friday. Two years ago, she joined our interim board, while still working as president of the institute, teaching, and maintaining a small private practice. This small group focused on defining the structure and resources we’d need to expand and solidify the organization for the future. In 2022, we launched our board of directors and Erika was elected vice chair. She led our Development Committee and our first coordinated, organized, and systematic effort to fundraise toward our mission. We set an ambitious goal, which made me doubt we could reach it. She set an ambitious goal, which made me doubt we could reach it. But the phrase suggests more than behavior and self-control. It suggests more than “personable.” He organized a panel to discuss the phrase “Personableness as a Function of Neutrality.” What does it mean to connect the quality of personableness to analytic neutrality? Something about how the analyst is to behave, or to appear. But the phrase suggests more than behavior and self-presentation, not only how the analyst should be but who the analyst is. I remember how eager, excited, and sometimes overwhelmed my classmates and I felt as new candidates, now over twenty years ago, setting out to learn the craft. We were in our own analyses, full of wonder, tinged with anxiety (at least I was). What rule, or code of conduct, is the student analyst afraid she would break? The essay does not only lay down technical principles and ethical precepts; it teaches us that they are the same thing.

“Observations on Transference-Love” (1915). There he addresses the young doctor, giving us terms that provide the foundation. The essay does not only lay down technical principles and ethical precepts: it teaches us that they are the same thing.

Voltage. As if. As if what? For Freud, it increased the appeal and force of the claims he’d experience. Voltage. As if there’s a shock, an unexpected force—something momentumous, a power carrying danger. Our technical term for that force set in motion is the transference.

In class one evening later that first year, another classmate expressed a need for guidance: “We need more help,” she said, “knowing how to behave,” and she offered the following example: “Say you’re out in the street, you’re walking the dog, or parking the car, and a patient comes toward you,” she said. “What do you do?” The teacher paused, then quietly replied, “’Say hello.” We laughed, understanding both the absurdity of the question and the underlying anxiety. But what’s the anxiety? What rule, or code of conduct, is the student analyst afraid she might break? My class then collaborated on a fantasy that the Education Committee would provide a booth in the common area where, behind a curtain, our own “Miss Psychoanalytic Manners” would sit. You could bring a coin, and in return for that token Miss Manners would answer any question about behavior appropriate to a psychoanalyst. We’d joke, imagining different answers depending on which of the senior eminentes sat hidden there. I look back on that playfulness as one way to manage our anxiety.

Freyd attempted early to evoke the analyst’s position and ethical responsibility in Papers on Technique, most incisively in “Observations on Transference-Love” (1915). There he addresses the young doctor, giving us terms that provide the foundation. The essay does not only lay down technical principles and ethical precepts: it teaches us that they are the same thing.

Two terms, a behavior and an attitude, can’t be separated. And together, abstinence and neutrality are forms of presence, not absence: a two-person humanity.

With these two concepts, abstinence and neutrality, plus an essential third element—the patient’s pledge to candor—Freud gives us psychoanalytic treatment. Everything follows from that spacious, flexible, three-part basis.

There is an institutional pull toward automatic formulation: a tendency to codify basic ideas into doctrine or a rulebook. There is also an equal and opposite tendency to dismantle the constructed doctrine. The slide into codification fosters a slide into equally gift debunking. In contrast, actual understanding of the principles indicated by Freud’s words is more difficult and more important. Understanding does not follow from organizational rules or codes; rather, it is the responsibility of each individual person. To put it another way, character underlies ethics.

Which returns me to that adjective: “personable.” Some more history, this from the Oxford English Dictionary on the word. Well into the twentieth century, we’re told, “personable” referred mostly to the physical, or external. Here I quote an OED source from almost five hundred years ago, 1541: “One woman . . . hath many children, of them some be fayre and personable, some ylle-favoured and crooked.” Oh, two hundred years later, in 1731, here’s Jonathan Swift. “My Master is a personable Man, and not a spindleshank’d hoddy doddy.”

Two hundred years pass, and in 1953, here’s the word having magnitude of that reciprocal force, we can also get stuck in the growth of a counter-transference literature appreciates the figure who is unresponsive to the point of disappearing. While more engaged analyst the obverse of the coolly detached analyst holds in safe-keeping the image of the heyday’s silent uninvolved doctor to the deeply involved, sometimes over-involved, analyst of today. Some might suggest that too much focus on the analyst’s internal states may overshadow or even erase the patient’s experience, today’s more engaged analyst the obverse of the coolly detached figure who is unresponsive to the point of disappearing. While the growth of a counter-transference literature appreciates the magnitude of that reciprocal force, we can also get stuck in our own vocabulary, at times become almost formulaic: for example, the analyst is to be but who the analyst is the answer is inside the adjective itself: The analyst is a “person” and “able”—able to become a person.

I think of Hans Loewald’s 1960 “Therapeutic Action” paper: “Not only does the analytic attitude include physical and social posture ("outside") and ("inside"), but it requires, he writes, "an objectivity and neutrality the essence of which is love and respect for the individual and individual development." The analyst has to be able to envision the other as a developing person. "In sculpturing," Loewald writes, "the figure to be created comes into being by taking something away from the material." And he continues: "In analysis, we bring about the true form by taking away the neurotic distortions. However, as in sculpture, we must have, if only in rudiments, an image of that which needs to be brought into its own."

The analyst holds in safe-keeping the image of the person’s potential—his or her "person-hood." The activity is a nonintrusive lifting-away; tact is involved: how much to direct, how much to hold back. The other is a person, and to experience that truth, to become "able" to perceive it, is a process that entails a reciprocal presence as a person, and not as a thing or an ideal or a set of abstract categories. The analyst’s offering is in this view an active mirroring: a human transaction, between persons.

I could spin forever in playing the adjective game. Here’s another way to play. This time, imagine you overhear not a colleague but instead a patient talking about you. What would you most wish to hear the patient say about you? And then turn it around: What would you like to hear the patient say? Most, and then least.

Enjoy the game.

Eleven Pinsky is the author of Death and Fallibility in the Psychoanalytic Encounter: Mortal Gaffs. Routledge, 2017. She became a psychoanalyst as a second profession following twenty-five years as a middle school English teacher. She is on the faculty of the Boston Psychoanalytic Society and Institute.
“W e got the best drugs.” That was my answer when asked why I chose psychiatry as my specialty. Between the psychopharmacologic art of finding the right antidepressant (hint: it’s always bupropion), the transformative magic of panic-blocking benzos, writing ADHD scrips to stimulate students, treating bipolar disorder with all-natural lithium, and calming voices with clozapine, you name it, we got it. I read textbook chapters on mechanisms of actions of antipsychotics and built a mental framework for organizing medications by side-effect profile, potency, and metabolism. I planned whiteboard lectures that I taught to medical students and co-residents because I was so pumped to talk about psychopharmacology.

I had little interest in psychotherapy and psychodynamics. Don’t get me wrong, I was all about building the therapeutic alliance, but for me that was just the means to the antipsychotic end. I did learn some motivational interviewing techniques and cognitive behavioral talking points that could inspire change, with few to no side effects. But it wasn’t until halfway through my second year that an attending physician displayed psychodynamic interviewing techniques in short interactions with patients that I started to think about what it meant to really understand patients and help patients understand themselves. I began to grasp the difference between medications that can treat and words that can heal.

A case I encountered while on call in the emergency department illustrates the difference well. AJ was a twenty-seven-year-old black female who was in a six-month relationship, had no kids, lived with her twin sister in an apartment, and supported herself by working as a receptionist. She had a history of major depressive disorder with psychotic features and had just been discharged from our inpatient psych unit the day prior after a twelve-day stay. In fact, she had been inpatient for twenty-three days over the prior month with two nearly back-to-back admissions. During those stays she had received an aripiprazole 300-mg the prior month with two nearly back-to-back admissions. AJ told me her dad picked her up from the hospital and drove her to the family home with almost no conversation on the car ride home. When she arrived, her mom was busy with the phone and didn’t greet her, and her twin sister was out on errands. While she was in the hospital, she was deprived of family contact due to COVID restrictions, so this would have been the first time she had seen their faces in two weeks. I pointed out that it would have been natural to feel disappointed that the family she hadn’t seen in two weeks didn’t seem excited to have her back. We explored these thoughts and the feelings they stirred, until I asked her to fantasize about the ideal welcome. She dreamt up an extended family waiting for her, and her sister greeting her in the car. She wanted to feel supported, like they were in it together.

She told me about the rest of that day. Within a few hours of coming home she felt light-headed and became worried that she was going to faint, so she started pacing. Bio-brain interrupted my thoughts. Was this antipsychotic-induced akathisia? Antipsyprazole is a known offender, and the skin-crawling restlessness that comes with akathisia can be described as anxiety with pacing. If so, prescribe propranolol 10 mg twice a day and have her follow up outpatient. But maybe it was something deeper than cellular signaling. I asked if it was easier for her to feel anxious than for her to feel disappointed by her family. She agreed with my interpretation, and I could sense a smile of self-recognition underneath her facemask. She told me that after a few hours of pacing at home she called EMS herself and was brought to a different hospital where she sat in the waiting room for two hours. While she waited, her anxiety subsided, so she felt ready to return home without being seen. We briefly touched upon what she thought the waiting room offered her that was lacking at home. We concluded that she had been taken care of by doctors and nurses before, and that therefore she associated the hospital with the calm it gave her. We didn’t continue the conversation much further; she said she felt much better and thanked me. She said no one had taken the time to speak to her like this before. I gave her the number to our clinic and to several resources for community care. While in the emergency room she was able to eat, nap, and call her sister, who agreed to take her home and help her follow up outpatient. I called AJ eight months after our initial encounter, and she had not returned to the hospital since. From the time of her first hospitalization, this was the longest she had gone without an inpatient psychiatric stay. I am not sure where my career will take me, but I want to hone every tool at my disposal so that the future me can best serve his patients and himself. I realized that I initially felt biased toward the biological approach after coming from years of medical school and undergraduate study of the natural sciences. The further I transitioned from the theoretical and the closer I got to the actual patient, the more I saw the intangibles at play. My practice has become a blend of medicine and the dynamic mind, coiled together in a double helix. The more I grow, the tighter these strands twist, and I catch brief moments when they blend into one cohesive art.”

Abram Davidov is a third-year psychiatry resident in Detroit. He studies neuroscience and creative writing as an undergraduate. When not walking his dog, Moose, playing chess, or reading comics, he likes to practice psychiatry.
What did William Blake, Aldous Huxley, and Jim Morrison have in common? The answer can be found in this line of poetry: “If the doors of perception were cleansed, everything would appear to man as it is, infinite.” This quote from Blake’s eighteenth-century Marriage of Heaven and Hell provided the title of Huxley’s influential book The Doors of Perception (1954), which reflects on his experience with the psychedelic mescaline and advocates for psychedelic-assisted psychotherapy. Jim Morrison and his band named themselves “The Doors” after reading Huxley. Were they alive today, these three visionaries would feel right at home with the current renaissance of psychedelic research, brought to public attention, for instance, by Michael Pollan’s 2018 book How to Change Your Mind (2018). The Doors of Perception (1924):

One of the most striking results of the modern developments of our knowledge concerning the influence of mental factors in disease is that they are bringing back medicine in some measure to that cooperation with religion which existed in the early stages of human progress.

Rivers speaks from first-hand experience with the healing practices of Melanesian shamans. Shamans are regarded as having access to, and influence in, the world of good and evil spirits. They typically enter a trance state during a ritual, which allows them to practice divination and healing. While this practice may seem quaint to medical clinicians, hundreds if not thousands of combat veterans now seek care for war-related mental health problems from shamans at ayahuasca retreats across Central and South America. In addition, many clinicians now seek out those shamans for instruction.

Medical psychotherapy also emerged out of older traditions of trance states and ritual healing. Father Johann Gassner (1727–1779) successfully employed Catholic exorcism rites to treat physical illnesses. In 1775, Franz Anton Mesmer (1734–1815), a University of Vienna-trained physician, delivered an invited presentation to the Munich Academy of Sciences on Gassner’s exorcisms in which he reported that, while Gassner believed he was casting out demons, his miraculous cures were achieved through “animal magnetism.” Medical historian Henri Ellenberger cites the intersection between Gassner’s religious view of healing and Mesmer’s secular approach as the point of emergence of modern psychiatry.

Mesmer’s own magnetic treatments often proved effective when contemporary medicine had failed. Consequently, he was in such demand that he had to optimize the number of patients he could treat in a single session. By holding metal rods inserted into tables or bathtubs, he could “magnetize” large groups of people simultaneously. Alternatively, he could link them by ropes to a “magnetized” tree.

Eventually, disgruntled members of the French medical society demanded that King Louis XVI investigate Mesmer. Louis charged Benjamin Franklin (in France as a representative of the American colonies) with heading a scientific commission which demonstrated conclusively that there was no magnetism in mesmerism. Thus discredited, mesmerism remained suppressed for a century.

Franklin was an expert on magnetism but he wasn’t a clinician. This may be why his report didn’t focus on the fact that many of Mesmer’s patients achieved significant improvement which they had not attained through conventional treatment. Looking back, we could accuse Franklin’s commission of throwing the baby out with the (magnetized) bathtub water. We don’t want to repeat that mistake now.

It was only through the authority of Jean-Martin Charcot (1825–1893), father of neurology, that a form of mesmerism reentered French medicine as hypnosis. In 1885, Sigmund Freud, then a recent medical graduate, traveled to Paris to study neuroanatomy. As he watched Charcot demonstrate that hysterical symptoms could be manipulated through hypnosis, Freud remembered a case described to him by his mentor, Josef Breuer. As Breuer treated a young woman for hysteria, he noted that she could spontaneously enter trance states. It occurred to Breuer that he might be able to probe her thoughts by hypnotizing her. To both doctor’s and patient’s surprise, once hypnotized, she became able to trace each of her thoughts by hypnotizing her. To both doctor’s and patient’s surprise, once hypnotized, she became able to trace each of her thoughts by hypnotizing her. To both doctor’s and patient’s surprise, once hypnotized, she became able to trace each of her
Mysticism can be defined as the belief that communion with the infinite, or knowledge not otherwise accessible to the intellect, may be attained by a transcendent state of mind and spirit. Altered mental states, psychosis and soma tymal, were highly effective in relieving psychiatric symptoms among WWII veterans as documented by military psychiatrists Roy Grinker and John Spiegel in their 1945 report, *Men Under Stress*. Their success prompted the establishment of departments of psychiatry across the US after the war, which Freud defined as "an extraordinary degree" with the anesthetic agents of his time. By “conversion” James did not mean the adoption of a religious belief but rather a transformation in an individual’s character or personality. James’s contemporary Mary Baker Eddy founded Christian Science after receiving medical treatment by a mesmerist. Christian Science’s motto is “Heal the sick, raise the dead, cleanse the lepers, cast out demons.” This implies a deep link between faith and medical experiences. It also brings us to Gasser’s exorcisms.

With this truncated history in mind, can we tease out the role played by altered states (exorcism, mesmerism, hypnosis, psychedelics, and others) in achieving therapeutic goals? When psychedelic-assisted psychotherapy succeeds, are the effects primarily pharmacologic or psychological? What role might its unique therapeutic relationship play? Could these components be intrinsically linked? To answer these questions, we’ll need to know a great deal more about neuroscience and human nature. We may also have to reappraise our core beliefs as well as some lessons our teachers taught us.

William Blake, quoted at the outset, had an intellectual and spiritual predecessor, the inventor and scientist Emanuel Swedenborg (1688–1772). Both Blake and Husley allude to Swedenborg’s book, *Heaven and Its Wonders and Hell From Things Heard and Seen* (1758). Swedenborg described a transformative experience he termed “vastation” and claimed that confrontation with dark and ominous forces prompts a renewal or purification through purgation. Like Swedenborg, Henry James Sr., the father of writer Henry James and William James, reported his own spiritual and intellectual transformation through vastation.

In *The Varieties of Religious Experience*, William James provides numerous examples of historical figures who attained enlargement of both mind and soul through perceived confrontation with “the infinite.” He held that, while such incidents might have “morbid origins” in brain pathology (e.g., temporal lobe epilepsy) or intoxication, and may seem irrational to observers, they are, in general, positive because valued ideas and insights often remain with that person for the rest of their life. For James, the experience of vastation was transformative. He believed that these experiences could restore physical and mental health and that such cures could be equal or superior to those obtained by medical means. It’s not that James was dismissive of standard medical practice; he simply recognized that some people require a different path to health. Regarding mechanisms of action, James suggested that, through mystical experience, people come to perceive both sickness and evil as illusions and, thereby, overcome their depressing effect on the flesh.

Two methods of producing altered mental states, hypnosis and soma tymal, were highly effective in relieving psychiatric symptoms among ancient Greeks and Romans who practiced various forms of religious experience. A Study of Religious Experience: An Essay in Human Nature (1902). James focuses on spontaneous conversion experiences (which tend to be sudden and dramatic) but also mentions that conversions were observed “in an extraordinary degree” with the anesthetic agents of his time. By “conversion” James did not mean the adoption of a religious belief but rather a transformation in an individual’s character or personality. James’s contemporary Mary Baker Eddy founded Christian Science after receiving medical treatment by a mesmerist. Christian Science’s motto is “Heal the sick, raise the dead, cleanse the lepers, cast out demons.” This implies a deep link between faith and medical experiences. It also brings us to Gasser’s exorcisms.

Cultural hostility toward certain drugs limits their use in psychotherapy. . . . Little attention has been paid to the potentially beneficial use of substances that induce abnormally states of consciousness. . . . Widespread prejudice against “psychotropic hedonism” (Klerman, 1972) may be as much to blame as concern over the unreliability of the drug’s effects.

This statement is highly relevant to recent consideration of psychedelic-assisted psychotherapy. Frank believed that all healing practices restore morale in those who lack a “sense of inner freedom, self-efficacy and satisfaction with life.” Psychological trauma can be understood as a paradigm for loss of morale suggested that all therapies, including those involving various rituals of medication, prayer, and, sometimes, mind-altering drugs—that are intended to provide experiences of direct contact with transcendental healing powers—have in common the restoration of morale. This is largely accomplished within and through the therapeutic relationship. MMMA, psilocybin, mescaline, ayahuasca, and ketamine are just a few of many substances capable of eliciting profound sense of receptivity and connection. This experience, while short-lived physiologically, may nonetheless provide an enduring psychological buffer against cognitive and emotional distress commonly accompanied with traumatic memories.

Another World War II psychiatrist refused to jump on that bandwagon: Jerome Frank chose to explore “non-specific” factors which he believed were essential in all forms of healing. In the third and final edition of *Persuasion and Healing* (1991), Frank concluded that cultural hostility toward certain drugs limits their use in psychotherapy. . . . Little attention has been paid to the potentially beneficial use of substances that induce abnormally states of consciousness. . . . Widespread prejudice against “psychotropic hedonism” (Klerman, 1972) may be as much to blame as concern over the unreliability of the drug’s effects.

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Following Frank, such experiences may work primarily by restoring morale through a revelatory experience akin to those described by psychologist and philosopher William James in *The Varieties of Religious Experience*. A Study of Religious Experience (1902). James focuses on spontaneous conversion experiences (which tend to be sudden and dramatic) but also mentions that conversions were observed “in an extraordinary degree” with the anesthetic agents of his time. By “conversion” James did not mean the adoption of a religious belief but rather a transformation in an individual’s character or personality. James’s contemporary Mary Baker Eddy founded Christian Science after receiving medical treatment by a mesmerist. Christian Science’s motto is “Heal the sick, raise the dead, cleanse the lepers, cast out demons.” This implies a deep link between faith and medical experiences. It also brings us to Gasser’s exorcisms.
A recent experience left me concerned that the lack of exposure to psychoanalytic theory and technique among recent mental health trainees might limit their ability to provide such treatment. While attending a presentation by psychiatry fellows on psychedelic-assisted psychotherapy, I noted that, although they described each agent’s chemical structure, putative sites of action, and potential adverse effects in detail, they gave short shrift to the “assisted psychotherapy” component of treatment. Thirty years after the onset of the “Decade of the Brain,” newly minted psychiatrists may have trouble seeing beyond the biomedical reductionism of our time. If psychedelic-assisted psychotherapy is validated as clinical practice, psychoanalytically trained clinicians should have an important role to play in training its practitioners.

Another concern is that clinicians who lack experience with psychoanalytic principles fail to perceive countertransference pressures that often emerge in the treatment of trauma. The history of psychiatry is replete with examples of brilliant clinicians who employed altered states to overcome intractable mental disorders and ended up getting lost in the phenomena they helped promote. Among these were Mesmer, the British academic physician John Elliotson (1791–1868), Charcot, and Breuer. Each was brought to grief once they realized that singular (and sometimes remarkable) responses to their efforts which they had thought were entirely under their control and rooted in objective science were, in fact, subjective phenomena which primarily operated at the level of the unconscious: their own as well as their patients’.

Without an understanding of how psychological trauma may manifest in transference and countertransference, clinicians are especially susceptible to the temptation to “do magic.” And, although they may achieve stunning therapeutic successes along the way, they may ultimately find themselves in the same regrettable position as did Mesmer and Charcot. While psychedelic agents may be safe as prescribed in treatment trials, once they are approved for prescription there is no way to regulate their off-label use. Research trials have strict criteria which usually exclude patients with schizophrenia, bipolar disorder, or dissociative disorder, but given recent experience with off-label use of ketamine, it is likely that psychedelics will be prescribed for a range of conditions despite the absence of any evidence base and in a wide variety of doses and frequencies. There is also a critical need to develop training and standards for those who will attend patients during psychedelic experiences—especially as nonmedical facilitators may be trained to supplement the limited mental health workforce.

Definitive evidence for or against the efficacy and safety of psychedelic-assisted psychotherapy in controlled settings can be expected in the near future, but a clear understanding of its mechanism of action is far from off. That said, we should not repeat the Franklin Commission’s mistake of throwing out the baby with the bathwater even if it were shown that the clinical efficacy of this approach has more to do with the patient’s subjective experience than with the psychedelic itself. As William James concluded, no matter how it might be achieved, “union or harmonious relations with the higher universe [result in] a process wherein work is really done . . . and produces effects psychological or material, within the phenomenal world.” These may include what he describes as “a new zest which adds itself like a gift to life . . . An assurance of safety and a temper of peace.” James presages key ideas which Freud will develop in his surroundings (from people to inanimate objects) became the things themselves. This opens the door to merger of the self and things. This might also provide opportunities in developing a positive mindset and provide an optimal psychotherapy. The therapist must skillfully assist the patient into account, might the therapeutic action of psychedelic-revelation of universal harmony and peace.

While psychedelics may help create conditions conducive under their control and rooted in objective science were, in fact, subjective phenomena which primarily operated at the level of the unconscious: their own as well as their patients’. Without an understanding of how psychological trauma may manifest in transference and countertransference, clinicians are especially susceptible to the temptation to “do magic.” And, although they may achieve stunning therapeutic successes along the way, they may ultimately find themselves in the same regrettable position as did Mesmer and Charcot.

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ACROSS
1 Climate-change skeptics are often said to be in it ___
7 Go backwards, backwards
14 Suspects
15 Cinnamon or ginger may be used to make it ___
16 “Stable genius” Trump’s mental status, according to Trump
17 One way to learn
18 Began anew
20 It rules Myanmar
23 Farah Fawcett’s paramour Ryan
24 Something to convert to ___
27 Song by U2 or Harry Nilsson
29 Broadway musical featuring Rumplestiltskin
31 Uproar
32 Do drugs
33 “Stable genius” Trump’s mental status, according to Trump
34 “Stable genius” Trump’s mental status, according to Trump
37 Piet Mondrian painted it ___
38 Boys named for a biblical Phoenician king
39 Joe Dimaggio’s less famous bro ___
40 He designed a famous pyramid ___
41 Cleary
42 “Warm lights in ___ a secret chamber shine”: Edna St. Vincent Millay
43 Cleveland Cavaliers, from 2015 to 2018, for short ___
44 American beer initials ___
45 Burnett, winner of 13 Grammys from 2001 to 2012 ___
47 Roles ___
49 His father told him, “Thy wish was father, Harry, to that thought”: Henry IV, Part 2 ___
51 Tattoo’s boss on Fantasy Island ___
54 Sun god of Greek mythology whose son Phaeton died ___
55 Class of poisons ___
56 Judicial clemency ___
57 Replies to bad news ___

DOWN
1 Compliment, to one in denial ___
2 Esta, to a Spaniard in denial ___
3 Oui, to a Parisian in denial ___
4 Active, to one in denial ___
5 Knows where one is, to one in denial ___
6 Amount a pauper has, to one in denial ___
7 Notre Dame has lost two, the second time in April 2019 ___
8 Member of a securities, singly ___
9 Two-handled soup bowls ___
10 Used books are sold in this condition ___
11 Insurance policy often provided by employers, for short ___
12 The electric kind does just as well in water ___
13 Semi-mythical owner of many NYC pizzerias ___
14 Semi-mythical owner of many NYC pizzerias ___
15 Athenian, first Swedish Nobel laureate, to his mother ___
16 “Stable genius” Trump’s mental status, according to Trump ___
17 One way to learn ___
18 Began anew ___
20 It rules Myanmar ___
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