APsA Priority Topics for Developing Education

This list was created using data from the
2026 Needs Assessment Survey
In order of most requested to least requested

What topics would you like to see in future educational activities?

1. Countertransference and enactments with complex, treatment-resistant patients
2. Integrating multiple theories
3. Clinical impasses, especially those tied to the analyst's own conflicts
4. Translating across diverse psychoanalytic frameworks
5. How we help our patients engage in symbolic thought if they are not able to do so at the start of treatment
6. Supervision: Competencies for supervisors and supervisees
7. Telehealth vs in-person treatment and analytic process
8. Termination
9. How we deepen the process
10. Somatic, unrepresented, or regressed states
11. Subtle psychic disjunctions with patients that can disrupt treatment
12. Field Theory
13. Exposure to senior-level analytic work
14. Pathological narcissism
15. Shared trauma-based transference/countertransference dynamics
16. Bionian Field Theory
17. Somaticization
18. Dissociation
19. Switching between virtual and in-person frames
20. British Object Relations
21. Masochism
22. Erotic transference and countertransference
23. Dissociation and dissociative disorders
24. Theories of Gender and Sexuality
25. internet therapy
26. Racial/ ethnic transferences and countertransferences
27. How to recognize inevitable enactments, and work through them with patients
28. Intense countertransference reactions arising in toxic polarizations and organizational pathology
29. Ethical principles in clinical practice
30. Trauma-Informed Therapy
31. The social influence on the unconscious: trauma, race, gender, culture
32. Nonverbal communication in treatment
33. Patients' experiences of treatment, including intersubjective understanding
34. Retirement and closing a practice

35. Suicidality and other deadly impulses
36. The analytic mind and attitude in 2026
37. Neuroscience and neuropsychoanalysis
38. Borderline pathology
39. Shame within the clinician and within the patient
40. How do we identify a process of deepening a patient's self-understanding through the treatment
41. Malpractice and misjudgments: Our own and our colleagues'
42. Religious transferences and countertransferences
43. Formulating dynamics, using different theories, during ongoing treatment
44. Relational Theory
45. Supporting under-represented populations within the APSA community
46. How providers manage intense affects
47. Writing about cases
48. The impact of Race and Ethnicity
49. Resilience domains, early aggression, and how to treat aggression-related issues
50. Frame: Race, culture and sexuality
51. When we decide to get consultation
52. How we bear witness to painful experiences in our patients lives
53. What makes providers reluctant to deepen treatments and/ or increase frequency
54. Interpersonal Theory
55. When and how do we increase frequency of treatments
56. How personal desires, values, and ideologies shape theory, technique, and countertransference
57. Meaning expressed in money
58. The effect of cultural "otherness" on psychoanalytic treatment
59. Practice will
60. Non-Western cultural structures
61. How does the provider help the patient to recognize transference
62. Autism and Autistic Spectrum Disorders
63. Power Dynamics
64. Internet addiction
65. How to understand patients' reluctance to follow the frame
66. Modern Ego Psychology
67. Assessing suitability for psychoanalysis, psychotherapy, medications, and other forms of treatment
68. Narrative and philosophical frameworks (e.g., Ricoeur)
69. Money in patients' lives
70. Power, omnipotence, and moral superiority dynamics across clinical and sociocultural contexts
71. Misogyny's developmental roots, rejection sensitivity, and the impact of the "manosphere.
72. Drug and alcohol abuse
73. Attachment Theory
74. Analytical oriented work with families and groups
75. Child-centered theories in the vein of Melanie Klein
76. Sociopathy
77. Social and historical forces that shape patients' defenses and transferences
78. How does the provider identify transference

79. Self Psychology
80. Socially-imposed trauma and associated painful affects
81. Sex addiction
82. Child-centered theories in the vein of Anna Freud
83. Writing case formulations and treatment goals
84. Out-reach to underserved communities
85. Play used in child and adult treatments
86. Social Theories
87. Couples/ family therapy
88. How to choose a frame
89. Developing the therapeutic relationship
90. What distinguishes transference analysis from 'gas-lighting' about social reality
91. Co-Dependency
92. Compromise Formation
93. Special knowledge needed to treat LGBTQ+ youth
94. Applying Bionian Field Theory to social location and in group-based field learning
95. Cultural differences between American and Chinese practitioners
96. Synchronicity
97. Intimate partnership dynamics and the "Third:" couples-oriented work
98. Uncanny or mystical experiences
99. Drive Theory
100. Children with primitive anxieties and features of borderline personality disorder
101. Dual diagnosis patients
102. Children under five, including play technique and developmental interpretation
103. Climate anxiety
104. Early motherhood under trauma and sociopolitical pressures
105. Practice building
106. Evidence-based ketamine treatment for complex and treatment-resistant depression
107. Navigating confidentiality with minors, including developmental factors, parent involvement, and permissions
108. Concurrent parent work, in child and adolescent treatments
109. Cult survivors
110. Ethical and emotional complexities in medical settings like the NICU
111. Frontline medical workers in community clinics
112. The pregnant adolescent