Directing the Madness of Marat/Sade

Phillip S. Freeman

My invitation to consult to a theater production was itself a theatrical moment. Having discussed some plays as part of a standing liaison between the Boston Psychoanalytic Institute and the American Repertory Theater of Cambridge, I was flattered to be invited to a lunch—they said to clear some hours—with the Hungarian director, Janos Szasz, to discuss his plans for the first major American staging of the Peter Weiss play, Marat/Sade, since the famous Peter Brook production of the 1960s.

Marat/Sade is set in the Charenton Asylum in 1808, 15 years after the assassination of Jean-Paul Marat in his bath. The Marquis de Sade, confined to the asylum, dramatizes the assassination as an entertainment for the asylum directors, using the patients as actors. The revolutionary fervor of the play spreads to the performers and general mayhem ensues.

As best as I could understand, the director had spent time in a Hungarian asylum as a fulfillment or alternative to his military service. He wanted to speak to a psychoanalyst about staging a play in an asylum. I took the liberty to pitch a production that would emphasize psychological nuance over stylized ideological debate. He said, “We are seeing the same play.”

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Strategic Planning: Now the Hard Part

Jon Meyer

We have two strategic initiatives, reorganization and programmatic planning. It is crunch time for both. The Task Force on Reorganization needs to make decisions that will lead to recommendations. I believe it is making strides.

As necessary as it is, however, reorganizing governance is inward looking while the real challenges to psychoanalysis come from the outside. The climate report spells trouble in our psychoanalytic ecology. We have lost the seat reserved at the cultural table for major ideas and knowledge, mental health care is being industrialized, and the very definition of psychoanalysis is being challenged. We have to act. Another fact of life, however, is that even as a strong 3,400-member organization, we are never going to have the numbers or dollars to do it all. We must be selective. We needed to know our priorities, so we did a survey of our members’ values. Now we need to organize those priorities into a strategic plan.

We have lost the seat reserved at the cultural table for major ideas and knowledge, mental health care is being industrialized, and the very definition of psychoanalysis is being challenged. We have to act.

Crafting a strategic plan is complex and I don’t have space for detail. I can illustrate the process, however, by work in the advocacy and education priorities.

The Oxford negotiations relate to the advocacy priority. In fact, the Oxford negotiations illustrate the strategic principles of selective action, targeted goals, principled arguments, and knowledgeable messengers. Oxford miscalculated in demanding records without respect for confidentiality and in demanding repayment when records were considered inadequate. When indignant clinicians protested, Oxford took the important step of convening knowledgeable messengers. Oxford miscalculated in demanding records without respect for confidentiality and in demanding repayment when records were considered inadequate. When indignant clinicians protested, Oxford took the important step of convening knowledgeable messengers.

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Furthermore, to be strategically effective, our current programs must work with the task force. Student Associates must reach out to undergraduates as well as to graduate students, and our Associates Programs must evolve a way to reach out to their professors. While we should introduce undergraduates to psychoanalytic ideas, we don’t think that support should be based on dues income alone. To develop the program, we have applied for and received a Developing Psychoanalytic Practice and Training (DPPT) grant from IPA.

On the other side of psychoanalytic education, a major continuing education effort is the Scientific Program. It is not generally known, but is a sad fact, that the program is chronically underfunded and unable to keep up with the times. In thinking strategically, it seemed clear that a modern, first-class program required fundraising. With Glen Gabbard, chair of the Program Committee, and Stanley Coen, chair of the Program Committee’s University Forum, I asked the Executive Council for authorization to explore pharmaceutical and other corporate funding. Now that Council has given approval on a conditional basis, we will explore the possibilities for “no strings attached” funding. Meanwhile, there will be an off-site University Forum fundraiser—a benefit concert—during the 2006 New York meetings.

Discussions with the Ticho Foundation, established in memory of our deceased friends, Ernst and Gertrude Ticho, have resulted in what I hope will be the first of many Gertrude and Ernst Ticho Lectureships. This first lectureship, fittingly scheduled next June for Washington, D.C., where the Tichos lived, worked, and taught, will recognize and reward an early- to mid-career analyst. To my knowledge, this lectureship is the first named and sponsored lectureship in the Association’s history.

Jon Meyer, M.D., is president of the American Psychoanalytic Association.

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As fundraising necessities and innovative approaches have been talked about, some other potential sources of support have developed. In that light, I have asked Glen Gabbard to work out a budget for an optimal modern program (e.g., allowing for PowerPoint presentations and adequate support for major speakers). The optimal program budget is an important strategic step because it defines fundraising targets to discuss with potential donors.

While the Oxford negotiations, the Task Force on Undergraduate Education, and the Scientific Program are just examples of elements from our strategic plan, I think they are good ones. The essence of the strategic planning process is that, since we cannot do everything, effectiveness requires focus and principled approaches. Our priorities give us our focus. Within priorities, we must look not only at direct implementation of the priority (e.g., training in psychoanalysis and psychotherapy), but also at the underpinnings of the priority (e.g., introduction to psychoanalytic ideas in college) and at programs that logically extend the benefits of the priority (e.g., the Scientific Program). While dues support may provide a hard money basis for crucial programs, as it does for the Scientific Program, in many instances to expand our reach and be innovative and effective, we must fundraise.

There is a lot to digest, but I hope you think about the examples and processes. As always, a central part of strategic planning is dialogue and I look forward to talking with you again in New York. In the meanwhile, I will appreciate all your comments, thoughts, and critiques.

Dear Colleagues,

It gives me great pleasure to announce the results of our participation in the CIGNA settlement portion of the RICO (Racketeer Influenced and Corrupt Organizations) suit. As you may recall, a large class action suit was brought on behalf of all physicians against most of the major managed care companies under the RICO statute, charging them with racketeering business practices. Two of the companies have settled, and the Association participated in those settlements as a signatory. This gave our physician members the right to retain their portion of the settlement or donate their share to our Association.

I am pleased to be able to tell you that 600 of our members elected to donate their share, giving us a total of $77,000 to enable us to continue our work protecting and representing psychoanalysis. Many thanks to our members for their generous donations, and many thanks to Bob Pyles, chair of the Committee on Government Relations and Insurance, and Janis Chester, president of the American Association of Practicing Psychiatrists and psychotherapy associate, for working to bring this about.

Jon Meyer, M.D.
President
The Soul of Our Association

Eric J. Nuetzel

Our Association is in a state of flux. The Task Force on Reorganization (TFOR) will soon present a plan with new bylaws for the structure of our governance. The Membership Requirements and Review Committee (MRRC) is proposing bylaw changes in regard to membership eligibility. The Task Force on Expanded Membership Criteria (TFEMC) continues to explore different models of membership. Institute leaders are deliberating about the future regulation of our institutes, and the Project for Innovation in Psychoanalytic Education (PIPE) is reconsidering our training analyst system and other aspects of our educational system.

It is an exciting time, a time of great promise, a time of real possibility. As members, we will soon be asked to vote on fundamental issues that will define our Association for decades. In order to fulfill our responsibility as members of a national psychoanalytic organization, we need to think deeply about who we are, and who we want to be.

The American Psychoanalytic Association has a long and proud history. Founded in an era of reform for medical education in the early part of the 20th century, the Association assumed a medical psychoanalytic identity. High quality and thorough psychoanalytic education has been a central focus of the Association from its inception. The mid 20th century formation of the Board on Professional Standards (BOPS) embodied this commitment. The last quarter of the 20th century saw fundamental changes in our organizational identity. Other mental health professionals, from the fields of psychology and social work, became eligible for training in the Association’s institutes as the result of a settlement of a lawsuit intended to open our training programs to them. Established academics and others prominent in fields outside of mental health (such as law) also have a route to full clinical psychoanalytic training through the Association’s Committee on Research and Special Training (CORST).

Under New York State law, where we are incorporated, we are a not-for-profit membership organization. As a membership organization, the rights of members are of central importance, and it seems inherently fair for all members to have the same rights and privileges. We also have major educational responsibilities. As a result, those entrusted with the educational responsibilities of the Association, those treating and supervising our psychoanalytic students and those serving as fellows and on committees of BOPS have to meet additional criteria for service. Our current and eligibility criteria, the future regulation of our component institutes, and our training analyst system.

If we can resolve this tension in some way, shape, or form, we should be able to move ahead as a psychoanalytic organization committed to excellence in education, research, and practice. If we can find a way to balance the needs of our members with the integrity of our educational system, we will be poised to continue as a voice and a beacon for psychoanalysis in the 21st century and beyond.

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Psychoanalysis and Race Redux

Celia Brickman

The Winter/Spring 2005 issue of TAP featured four articles addressing the need for a greater degree of racial and ethnic diversity within the American Psychoanalytic Society. Each of the articles (by Michelle Morgan, Dorothy Holmes, Mark Smaller, and Sandra Walker) made eloquent pleas for increased cultural diversity in training institutes, curricula, and communities served. All argued for the importance of working towards the goals of diversity and cultural competence.

While these goals are of crucial importance, they are also circumscribed in ways that merit consideration. Diversity and cultural competence are ahistoric terms that cast the question of race and psychoanalysis as a contemporary demographic one. But in addition to its contemporary urgency, the lack of diversity in psychoanalysis has a history that is tied to vexed conceptions of racial difference woven into psychoanalytic theory. Thinking about the problem solely in terms of demographics avoids investigating how psychoanalytic theory itself may have colluded in the psychoanalytic community’s exclusion of raced others.

Furthermore, once nonwhite candidates make it to the institutes, they are expected to accommodate themselves to the psychoanalytic canon without consideration as to whether the history of exclusion of nonwhites from psychoanalysis might be reflected in certain aspects of psychoanalytic theory and practice. If we think of the influx of women candidates over the past generation and the critical rethinking of key issues of gender and sexuality that resulted, we can begin to imagine the kind of theoretical challenges that are entailed when a population historically excluded from psychoanalysis begins to enter its community.

Celia Brickman, Ph.D., an APsaA research associate, is senior fellow at the University of Chicago’s Divinity School, and practices psychotherapy at the Center for Religion and Psychotherapy of Chicago. She is author of Aboriginal Populations of the Mind: Race and Primitivity in Psychoanalysis (Columbia University Press).

While psychoanalysis has played an important role in many critiques of racism, it too conceals within itself an unacknowledged and problematic racial subtext. This can be seen most clearly in Freud’s work which, because of its foundational status, continues to wield its influence in contemporary psychoanalysis.

Freud borrowed liberally from a 19th-century anthropology uninhibitedly racist in its ranking of all cultures along a color-coded scale, according to which the most primitive cultures were those of the darkest skinned peoples, while the most advanced cultures were those of the whitest. Freud made use of this anthropology in his works on culture and society, but their implications found their way into his metapsychological and clinical works as well.

THE PROBLEM OF “PRIMITIVITY”

The nodal point at which assumptions about race converge in psychoanalytic theory is the concept of “primitivity,” which functions simultaneously as a psychological and an anthropological category. On the one hand, Freud affirmed the universality of the psyche through his affirmation of the universality of primitivity: He saw the primitive psyche at work in us all. Nonetheless, his use of the term itself retained its racial inflections, and “primitivity” remained the pejorative term for discrediting the tensions of civilization.

The unfortunate but unavoidable implication of the conflation of the psychological and anthropological meanings of primitivity was that the psychology of “primitive” (nonwhite and non-Western) peoples was held to be equivalent to the “primitive” (infantile and/or unconscious) psychic register of the modern, Western adult.

While psychoanalysis itself has given us the insight that seemingly irrelevant elements—of a dream, a text, or a body of work—often hold the key to understanding otherwise repressed desires and inclinations, Freud spells out his views on broad social and historical issues in his cultural works; thus they provide the key to the otherwise hidden (repressed) relationship between Freud’s metapsychological ideas and social issues such as race.

PSYCHOPATHOLOGY AND RACIAL DIFFERENCE

In his cultural works we can see how Freud mapped the development of the psyche onto the racially conceived stages of cultural evolution developed by 19th century anthropology, adopting the popular, but now discredited, notion that individual psychological development recapitulated human racial evolution. The generally unrecognized implication was that as the modern individual moves up the developmental scale, s/he simultaneously recapitulates, or moves up, the racial/evolutionary scale, towards maturity and civilization and away from qualities held to characterize the cultural and psychological worlds of dark-skinned, “primitive” peoples.

Conversely, regression was believed to retrace not only the steps of individual development but also of racial evolution. Consequently, when we regress, we become re-immersed not only in the “primitive” processes of childhood, but also in the “primitive” stages of evolution.

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Reflections on Teaching Psychoanalytic Ideas in a University Setting

Ellen Handler Spitz

Inspired by the special section on teaching psychoanalysis to undergraduates in the last issue of TAP, I thought readers might like to hear also from a professor based in the arts.

My work, for many years, has been with students who seek to understand psychoanalytic ideas in order to grasp more subtly the objects of their inquiry, both for purposes of creation and for critical interpretation. These objects include performance and installation art, art of emerging media, and the more traditional arts of drama, music, dance, and, of course, both literary and visual works. I find my task endlessly fascinating and challenging, and I have not solved many of the problems it raises for me as a teacher nor the problems it raises for my students.

My goals may be somewhat different from those of other professors who bring psychoanalysis into their teaching. Whereas others may explain psychoanalytic ideas as they would other bodies of theory, it is my conviction that enabling students to grasp these particular concepts in a strictly cerebral way does not do them justice. Students may think they have mastered ideas which have, in fact, in their profoundest aspects, eluded them. Verbally gifted students in particular can manipulate psychoanalytic ideas quite skillfully and produce clever writing that may miss what is deepest, truest, and indeed most troublesome in the material. When it comes to working with psychoanalysis, cleverness can, as we know, work against one and be an obstacle. This is a grave problem in academia where cleverness and rapid comprehension are highly prized.

To understand psychoanalysis in more than a shallow way, important emotional and introspective work must be done. This takes a gradual letting go of previously held habits of thought and a receptivity to disturbing feelings that may need to be repressed. Psychoanalytic texts, consequently, can be notoriously difficult to remember. I tell my students that if they are not a bit unsettled by the material during the course of the term, they are probably not getting it. But this sort of counsel bucks the tide of our cool, slick, externalizing culture.

EPHANPY

How can I enable students to feel for themselves—suddenly—sometimes quite dramatically—the immense power of psychoanalytic ideas? That power cannot be experienced except in a personal way. Some students have a unique moment during the course of the term when some element strikes home. One gifted graduate student read every assigned text and sat in my class with a serious face for over a month rarely asking a question or contributing to the discussion; I could tell she was struggling to find something but that so far nothing had quite fit. Suddenly, we arrived at the oeuvre of Winnicott, and this young woman came alive with energy and excitement. The look on her face changed to one of intense fascination.

Ellen Handler Spitz, Ph.D., is Honors College Professor of Visual Arts at the University of Maryland (UMBC). She studied at the Columbia University Center for Psychoanalytic Training and Research. Her new book, The Brightening Glance, will appear in 2006.
Prudy Gourguechon

We are nearing our 100th anniversary as an organization. Our analytic founders must have been excited with the discovery of a tool that seemed able to alter the understanding of people, ameliorate the irrationality of human groups, and even, possibly, end neurotic misery. We still occasionally feel those pioneers’ excitement. It happens, for example, when correlations between psychoanalysis and neuroscience emerge. Or a member finds a group of therapists in Turkey or China hungry for our ideas. Or one of us uses analytic principles to address problems of community violence. Or we become nationally known as the defender of patients’ rights.

Our strength is our members and our organization. I believe in keeping APsaA unified, resourceful, and flexible. Divisions weaken us. Civil conversation will help bridge our differences.

Our organization must serve its members. Individual members’ needs, both lofty and mundane, will always be my focus. But we also serve the profession and the public. We are in the privileged position of having something to contribute to the healing of our world.

There are two paths we must follow as an organization to maximize our effectiveness. We must engage the community and we must preserve our organization.

Engagement means looking outside the group and rejecting the pull of internecine conflict. The arenas for engagement between psychoanalysis and the world are almost limitless. Some of the areas of public life where we can and have engaged include the fields of education, business, neuroscience, government, and the media. Our recent initiatives in psychotherapy are vital to our future. We must continue our contributions to especially vulnerable communities.

We have made great progress in these areas and we can do more. As president I would vigorously support and further develop these engagement efforts. The benefit of engagement is always reciprocal. To survive, we must not remain overly focused on our internal issues of governance, turf, and power. Niko Canner cautioned us, “Find a couple of things you agree on and do them. The rest doesn’t matter that much.” He was right. Most of us agree that when analysts in New York or Chicago set up on-campus treatment programs for high school students that it’s an exciting application of our field. Most of us are glad when analysts add their interpretations to art criticism, or aid in the understanding of the political process. A friend of mine is fond of saying, “We can do well by doing good.” Let’s agree to do good together using our analytic tools in the wider world. Our “doing well,” in terms of having more candidates and patients, will follow.

We also must preserve our organization. For example, we are the only interdisciplinary psychoanalytic organization with the size, staff, and experience to mount a strong nationwide response to political, legislative, and other threats. Preservation means recognizing that we have a tremendous asset in a nationwide system devoted to educational excellence and national standards. Descending into a balkanized federation of institutes, each doing its own thing, weakens us. When we lobby in Washington or negotiate with insurance companies on behalf of patients, our system of high national standards is a key strategic weapon. But progress must occur in various areas, including our training analyst system. I favor a personal analysis system that will allow institutes to train candidates who are in analysis with non-training analysts.

We also need to continue public advocacy and lobbying. In these areas we have accomplished more than organizations 40 times our size. And we need to help local groups address state-by-state legislative issues.

Our science and research arm is highly productive and needs more attention and support.

So, why do I deserve your support? I’ve been an active leader in the organization for over 10 years. Wherever I’ve taken on responsibilities, I’ve brought about innovative and important changes. I have a record of producing results, bringing people together, and solving thorny problems.

While serving as secretary, I established the 10,000 Minds Project, designed to expose undergraduates to psychoanalysis as an explanatory theory of the human mind and behavior. I set up a Task Force on Psychoanalysis and Undergraduate Education. We’ve developed projects to introduce psychoanalysis into multiple gateways on campuses, including undergraduate psychology courses and texts, humanities and social sciences departments, and student life and health programs. The 10,000 Minds Project recently received a $40,000 IPA grant.

Before I became secretary, I was editor of TAP for four years. I established columns on key areas of psychoanalytic science and research, and politics and public policy. I solicited articles on applications of psychoanalysis in far-flung arenas, from forensic anthropology to narrative medicine to sports and dozens more. These reports often are the most inspiring. I saw TAP as a way to lift morale and create community.

Before editing TAP I chaired the Fellowship Committee, where we mentored the next generation of scholars and educators. During my tenure as chair we expanded the fellowship program first to include social workers and later academics.

The president serves as spokesperson for the organization. I have experience establishing relationships with reporters at publications including the Wall Street Journal and the Chicago Tribune. I’ve also testified before a senior federal committee regarding medical ethics and patient privacy. I’ll put my communications skills to work as president.

I am honored to run for president of APsaA and I would appreciate your support and vote.
Another element of my vision relates to our governance. To advance our field and our organization in a consistent, systematic manner in pursuit of an agenda, we need long-term planning. Historically we have been led by presidents, many of whom have had extraordinary vision, generally looking toward what could be accomplished during their terms. This is a “dogma of the quiet past... inadaptable to the stormy present.” What we need now is the capacity to craft a long-term plan that survives until it is accomplished rather than ending with the term of that particular president. One way to accomplish this is to invest more influence in a more enduring governmental structure such as a board of directors or an expanded Executive Committee. It may seem odd for a presidential candidate to advocate a shift in power; but I am convinced that this is in our best interests. The “quiet past” of being a membership organization concerned primarily about putting on annual meetings and publishing our journal is not consistent with our present ambition as a national organization embracing leadership in advancing our field. Of course, inherent in my vision is protection and improvement of psychoanalytic treatment.

How can we accomplish all of this? “As our case is new so we must think anew and act anew.” We need change in our governance and in the oversight of our resources. I firmly believe this. This won’t be easy but here are a few thoughts which can help. We must move our essentially stable membership base to one of modest growth. Please note I strongly favor remaining an organization of psychoanalysts and not becoming “an interest group.” After a full term as your treasurer, I am convinced that we need more resources in order for our Association to provide the necessary leadership to steer psychoanalysis into the future. We simply cannot accomplish these goals within our current financial structure which relies on members’ dues, subscription fees, and meeting revenues. We must develop external sources for funding in a strategic and carefully planned manner.

So why should you vote for me as your next president-elect? For 30 years I have been preparing for such leadership. I have been a director of Psychiatric Residency Training (1982-88, at Harbor-UCLA Medical Center). I went through the certification (1989) and training analyst (1991) processes. I served as president-elect (1992-94), president (1994-96), and dean of my local Institute (1996-2001). Nationally I chaired a major APsaA committee, the Committee on Government Relations and Insurance (CGRI) (1997-2000). I served a full term as councilor-at-large (1997-2001) and have twice been elected your treasurer (2002-05, 2005-). I have served on both BOPS and Council. Serving in office, however, is not enough. Accomplishment is what counts. While chair of CGRI, I played a major role in bringing onboard a new legislative representative to advance our Association’s agenda, in expanding CGRI’s budget, and in establishing face-to-face contacts in Washington with key officials. While treasurer, I have been developing policies for managing and protecting our invested assets, for overseeing our internal fundraising procedures and in establishing an Audit Committee to bring us into conformity with the Sarbanes-Oxley Act.

Additionally, I serve as a member of the Board of Trustees (1999-) of my alma mater, Wagner College. I sit on the college’s Executive Committee as chair of its Committee on Academic Affairs. I have extensive contact with the college’s president, provost, faculty, and students. This gives me an excellent strategic platform from which to help advance our Association’s goal of greater ties with the academic community, and, of course, in reaching out to the now iconic “10,000 best minds.”

A final comment. I relish being in leadership positions. I enjoy meeting and working with all of my colleagues and helping them advance our field. I am asking for your vote. Let’s dream a bit together.
Ralph E. Fishkin

I would like to express my gratitude to the Nominating Committee and the Executive Council for selecting me as a candidate for councilor-at-large, and I hope that I will have the opportunity to serve.

I would like to tell you a little about myself. In Philadelphia, I have served on the Education Committee, the Candidate Progress Committee, and as a candidate advisor for the Psychoanalytic Center of Philadelphia. Prior to the Philadelphia merger, I served on these same committees at The Philadelphia Association for Psychoanalysis, and was a member and chair of its board of directors. I was also a member of the Reunification Committee that brought about the first reunification of psychoanalytic societies in the United States.

In my four years on the Executive Council, I have been appointed to The Ad Hoc Committee to Study Certification, and elected by the Executive Council to the Committee on Council and to the Membership Requirements and Review Committee.

I have seen the Executive Council grow in its strength and awareness of its important role as the board of directors of APsaA. I favor continued direct representation of each society on the Executive Council, as well as an elected Council chair and an expanded committee structure, which will further strengthen the Council in its role as the APsaA board of directors.

I believe that the Local Option Bylaw Amendment gives individual institutes the flexibility to tailor requirements for training analyst appointment to their own particular local needs, while continuing to retain meaningful standards. The Local Option Amendment does not abolish certification, and, in effect, encourages those institutes that want to maintain certification as a requirement for TA appointment to continue to do so. Recent BOPS position statements have acknowledged the need to study existing requirements and to create alternative pathways for certification, but our current bylaw requirements for certification constrain BOPS from implementing such new proposals.

Our reorganization should ensure that every APsaA member with creative and innovative ideas about psychoanalytic education will have the opportunity to become members of BOPS committees that deal with these issues. I strongly endorse efforts to expand membership in APsaA via user-friendly membership procedures and the appropriate bylaw amendments required to facilitate this process. I support the passage of the Membership Bylaw Amendment.

Traditionally, research in psychoanalysis has been underemphasized. Recent developments in psychoanalytic research [see JAPA, Vol. 5, 3/2] have the potential to help us to better define psychoanalytic processes, to answer longstanding questions about treatment frequency, and to apply these methods to the assessment of psychoanalytic skills. I will urge the Executive Council to promote the awareness and use of these research methods and findings, and to find ways to foster further research in these crucial areas.

Elise W. Snyder

Many of you already know me. A description of my work in APsaA gives a good idea of what I believe. I was a councilor for many years and then councilor-at-large. I know how the organization works. I am all for “standards,” but not when “standards” is a code word for power, privilege, and prestige. Certification should be an honor for which people strive, not a criterion for training others, participating on Board committees, or checking on the adequacy of the training of analysts. I am certified. For me it was a helpful experience to review my cases. While certification has grown more user-friendly over the years, for many it is neither helpful nor useful. I am not a training analyst. In reviewing my practice I found at least 10 people who would have been wonderful analysts, but chose to complete their analyses rather than switch to a TA. A few entered training later in APsaA accredited institutes; others trained with other groups, most did not become analysts. These were not “necessary losses.” Many of you have similar experiences. I think any graduate of our institutes with, say, five years’ experience should be able to analyze a candidate. Peer and/or other supervision would be useful. A radical suggestion perhaps, but one that might insure the viability of our institutes.

I was chair of the Fellowship Committee during its early years when it was “the best thing happening in APsaA.” We brought large numbers of young people into APsaA, many became analysts and all became committed to psychoanalysis. We mobilized 400 analysts to give an hour a week as mentors—often people who had been disaffected with organized psychoanalysis. We became the model for local fellowship programs. We are an aging organization. We need young people. There are ways to attract them.

As chair of the Committee on Societies, I sought to strengthen societies and foster the commitment of practicing analysts who are, after all, the bedrock of analysis. As chair of the Membership Committee, I learned a lot about why people had left APsaA and how the organization could change so that analysts would want to be members.

I am for change and proud to have been in the forefront of those working for change. I am saddened that so many of our changes have been too little and too late. We need greater openness to admitting new groups and new members. Years of our humiliating attitudes have not made new groups eager to join us. We need the strength of numbers and the talents of others, particularly in the current political (and insurance company) climate to ensure that psychoanalysis, as theory and practice, remains viable.
Bob Tyson

The earth’s atmosphere is warming but the world’s environment is progressively cooler for established psychoanalysis. This cooling of interest is not simply an Association phenomenon but a global one. To counteract that trend, efforts to better the training, practice, image, and interest in psychoanalysis would be enhanced by cooperation and collaboration among psychoanalysts and analytic groups everywhere. Until relatively recently however, APsaA has “gone it alone,” isolating itself from these efforts. Fortunately, but cautiously and slowly, various Association officers have reached out to open up channels of contact and discussion with our neighbors to the north, the south, in Europe, and with the IPA administration. And as a kind of “in-reach,” similar overtures have been made to non-APsaA groups in our own country.

There are many more possibilities to be explored and leveraged. Psychoanalysts around the world share common interests in psychoanalysis as a form of treatment as well as an intellectual endeavor with applications at the frontiers with the humanities and the neurosciences. I count myself as one of these analysts. My work with IPA—of which APsaA is an integral part—over the past 15 years has given me the background for this view. It also has motivated me to work toward greater integration of a variety of efforts so far pursued in parallel, but without functional awareness that other analysts have addressed the same problems.

As a BOPS fellow, 1984–89, I moved that BOPS debate local option for admissions of non-medical applicants and for appointment of TAVSA’s, rather than march silently backwards into the future. Obviously that was premature. Nonetheless, I continued to be a consistent advocate locally, nationally, and internationally for necessary changes in psychoanalytic organizations. Such modifications match the evolving needs for training and education with changes in psychoanalytic thinking and the surrounding world. For example, as secretary general during Kernberg’s IPA presidency (1997-2001), I oversaw the transformation of an essentially 19th century organization into one that engaged the 21st century. Consequently I am in favor of the currently proposed local option bylaw which, in my reading, does nothing to impair BOPS’s setting and maintaining educational and training requirements. It simply makes certification a local option as a precondition for TA appointment. BOPS still must approve APsaA appointments. I am delighted to see APsaA committees and task forces working effectively toward broadening membership requirements and revamping the organizational structure. I feel honored to be considered as a candidate for councilor-at-large and to have the opportunity to participate in the refocusing of our energies from administrative and governance issues to matters that pertain to the relevance and vitality of psychoanalysis in the world of today and tomorrow.

Sandra C. Walker

I am running for councilor-at-large because I believe that the board of directors of APsaA must become a more forward and outward looking body. In order to do so, it must consider the needs and draw on the talents of psychoanalysts early in their careers as analysts. Today’s early career psychoanalysts are often mid-career professionals with seasoning in the affairs of their first disciplines and great experience in the professional world. They, along with our Affiliate and Associate Members, are the future of our organization. If we fail to recognize their professional achievements and aspirations and their needs for professional affiliation and participation, professional growth, practice development, public policy and regulatory information, and enhancement of the esteem in which the public holds our work, we cannot hope to retain their membership, and we certainly cannot hope to receive their service.

I believe that APsaA is becoming more progressive and proactive as an organization. However, I think we can do more to engage and retain members, particularly those in the early years after graduation from psychoanalytic institutes. As a 2003 graduate of the Seattle Psychoanalytic Society and Institute (SPSI), I believe that I have openness to the concerns of both our Affiliate and early career members.

Having been first a fellow and then an Affiliate Member of APsaA, I also have more than a decade of experience with this organization. I currently represent SPSI as an alternate councilor. I continue to serve on several APsaA committees. I also edit the Association’s “best practices” newsletter, FORWARD!

As an active participant in APsaA, I have seen it struggle with its internal divisions and with its history. I have met and worked with many hardworking people of good will who are persisting in the necessary work required to sustain and enliven APsaA in the 21st century. Through heated organizational debates, what continues to impress me is that APsaA and psychoanalysis are deeply meaningful and important to those who are in leadership roles. In a leadership role, I want to help insure that our organization is also deeply important to the members who give us their trust.

My qualifications for service as an executive councilor include prior service on 11 other boards of directors of educational and human service organizations large and small. These include the Board of Directors of the Seattle Psychoanalytic Society and Institute and the American Psychoanalytic Foundation, prior to its re-establishment as a committee of the APsaA Corporation. I am currently serving as a non-voting member of the Board of Trustees of the American Psychiatric Association for 2005-06.
A Look at the “Uncanny”
Contemporary Scene

Vera J. Camden

I take as the departure point for this special section on “Psychoanalysis and the Arts” Freud’s essay on “The Uncanny” (1919) which, he admits, is a rare excursion into the realm of aesthetics or what he calls the “theory of the qualities of feeling.” He strives to explain here what others have neglected: the special core of feeling that inspires the uncanny. He very interestingly begins his essay with a comprehensive linguistic survey of the various meanings of the word unheimlich or uncanny. For some six pages, he outlines definitions and usages of this word in order to demonstrate definitively that unheimlich contains within it, its opposite. He writes, “Thus heimlich is a word the meaning of which develops in the direction of ambivalence, until it finally coincides with its opposite, unheimlich.

The uncanny is linked to what is known and unknown, familiar and unfamiliar, present and absent, alive and dead. It is a place of fear and uncertainty and, yet, also a place of intense homeliness or familiarity. These contradictions contain its power. After his lengthy linguistic preamble, Freud moves on to a remarkable series of examples to illustrate his explorations, running the gamut from linguistics to literature to popular magazines to common anecdotes to allusions to his own clinical and theoretical studies, to quite casual clinical commonplace, all such sources are pilfered to find instances of the uncanny.

Importantly, Freud’s essay starts by trying to account for a feeling, one that occurs in life as in literature and which, he insists, the aestheticians have neglected because they have preferred to study the beautiful and the sublime.

The uncanny is linked to what is known and unknown, familiar and unfamiliar, present and absent, alive and dead. It is a place of fear and uncertainty and, yet, also a place of intense homeliness or familiarity. These contradictions contain its power.

to the same sources as the power wielded by the artist, namely the power to stir up infantile and animistic worlds. The uncanny puts us in a primitive state. We feel we are at once on familiar and yet foreign territory. We are quite off balance.

The three articles we have brought together here on the contemporary artistic scene each reference works which put the reader, viewer, and audience off balance. The artistic productions they discuss accomplish the end that Freud identifies as one of the functions of analysis itself: to put the analysand off balance enough that the unconscious can be heard.

PHONY SURREALISM

Donald Kuspit specifically invokes Freud’s essay on “The Uncanny” to lambaste American surrealism, which he calls inauthentic and compromised, a denial of the very existential core of European surrealism. If the core of aesthetic feeling is the uncanny, European surrealism responded to this conviction, depicting the latent dreamscape in all reality.

The uncanny and the unconscious are made perceptually manifest in their works. Such works are necessarily themselves instinctually evocative and reminiscent of the dream. This effect defines the surreal and, yet, for Kuspit, is entirely missing from the works of the American surrealists, who sacrifice the unsettling world of the uncanny for a socially informed and, therefore, tepid understanding of the tradition they appear to emulate.

The effects of the uncanny in narrative are, according to Freud, experienced as real. This is why, for instance, we do not think of fairy tales or indeed the diary of the madman as uncanny. “There is no question, therefore, of any intellectual uncertainty here: we know now that we are not supposed to be looking at the products of a madman’s imagination, behind which we, with the superiority of rational minds, are able to detect the sober truth.….” The experience of the uncanny is aesthetically evocative precisely because it circumvents those sensations of superiority and calls our everyday reality into question.

CHALLENGING REALITY

It is this very reality that is challenged by Meg Wolitzer in her work, as she describes it in an interview with psychoanalyst Sandra Leong.

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American Surrealism: Revolution of the Psyche or of Politics?

Donald Kuspit

Freud’s (1919) essay on “The Uncanny,” influenced surrealism. Freud suggests that a feeling with the quality of uncanniness is the core aesthetic feeling. Like psychoanalysis, surrealism investigates complex states of feeling, and for it none is more complex than the feeling of uncanniness, that is, the feeling that dream and reality interpenetrate. It is as though dreams are an independent reality, parallel to everyday reality, and everyday reality is a kind of dream, parallel to the dreams one has while asleep. The surrealists understood this core uncanniness in Freudian terms and they made unfamiliar works of art—works that never let the viewer feel at home, in order to evoke the feeling of uncanniness, which they regarded as existentially fundamental.

The surrealists wanted to overthrow the viewer’s confident adult judgment. This unsettling shift of psychic position away from conscious experience, with which we feel at home, toward unconscious fantasy, with which we do not feel at home, while seeming to integrate both, is the uncanny ambition of surrealism.

Is there really an American surrealism? Or did many of the American surrealist artists use surrealism as a kind of window dressing for their social concerns, thus betraying the spirit of surrealism, which is heavily indebted to Freud and his methods of investigation of the unconscious?

I suggest that American surrealism is a compromised, inauthentic surrealism. Homegrown American surrealists—as distinct from such European surrealists as Max Ernst, Andre Masson, and Yves Tanguy who came to America to escape the Nazis, or such would-be European surrealists as Joseph Cornell, Arshile Gorky, Robert Motherwell, and Mark Rothko—were indeed, to suppress and deny the reality of the unconscious. They were subliminally anti-surrealist, not just because of their social interests, but because they were afraid of the unconscious. They gave it lip service. Yea-saying it was a way of giving themselves trendy surrealist credentials, rather than a matter of conviction. In their best work we see a struggle between dream and reality, with reality winning.

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ERSATZ FANTASIES

It is because of these shortcomings in terms of richness of fantasy that the work of the American surrealists is less evocative than that of the European surrealists, and why it misses the main point of surrealism to generate a sense of the uncanny. The American surrealists did not believe that reality itself was in question. Andre Breton, the poet and critic who is the so-called

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Lying Down with a Book
An Interview with Novelist Meg Wolitzer
About Psychoanalysis and Her Writing

Sandra S. Leong

Meg Wolitzer suspects that writing about psychoanalysis in The Position, her latest novel, was a way of having a “funny, challenging conversation with my analyst—even if I’m the only one doing the talking.” In this interview, she addresses the psychoanalytical community at large.

SL: When I first met you in college, you were already publishing regularly in “glossies” and in the middle of writing the beautiful and auspicious debut novel, Sleepwalking. You’re the author of six more, including the newly released, The Position. You’re a screenwriter; and have seen your novels made into films. Your short stories have been anthologized in the prestigious Pushcart and Best American volumes. You’ve taught at the elite Iowa Writers’ Workshop, among other places. You’re in psychoanalysis. Has your analysis had any conceivable effect on your writing?

MW: At first, I barely discussed my work with my analyst. I had always had a love of writing and a facility with language, and so I never saw this area as one that might give me enormous trouble. But during my analysis, I realized that it was my facility and ease that had led me to a kind of stasis in my writing—perhaps invisible to other people but increasingly obvious to me. At a certain point, I began to talk about my writing during every session.

SL: What facilitated that?

MW: It was after I received a quite critical review in the daily New York Times. At first, I addressed the feelings of anger and embarrassment, but after a while I began to look at what the reviewer had actually said.

SL: I’ve often heard writers talk about rage, despair, and trauma over—not just bad reviews—but lukewarm, mildly withholding, or simply not unconditionally loving reviews. Never have I heard one calm down sufficiently to use it constructively.

MW: Believe me, in terms of turning that review into something constructive, we’re talking months and years of hashing it out, not days and weeks. I’m as thin-skinned as any writer I know. Even analysis can’t change that. It’s just my constitution. But yes, I was able to calm down enough to look at the situation with something vaguely resembling clarity.

SL: You mentioned your constitution. Is there a writer’s constitution?

MW: I’m certain there are many kinds of writerly constitutions out there, but my own is a combination of grave self-doubt and feverish excitement. There’s a hopefulness in the idea of creating something new—a sense that you can set it right next time, a grand “do-over,” and a chance to redeem yourself. I like the movement toward things, the tropism that is central to both art and psychoanalysis.

SL: Your newest novel, The Position, opens with four children seeing for the first time their parents’ runaway best-selling book, Pleasuring, which features graphic illustrations of their parents’ lovemaking. The Oedipal couple met while the mother was the father’s analysand.

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SL: The Times called your novel, The Wife, a light-stepping, streamlined novel fashioned from the heavy themes of gender, writing, and identity: “…rage might be the signature emotion of the powerless, but in Wolitzer’s hands, rage is also very funny.”

MW: I was pleased when the reviewer referred to rage and humor in the same opening sentence. In fact, my suppression of anger had led to a Bonsai-like writing style over the years. When I realized I could use this one-two punch in my fiction, it allowed me to write The Wife. This was the first book I’d written in the first person—the first time I’d decided to throw over the distancing and perhaps more potentially lyrical “she” in favor of the angrier “I.”

Tell us about the books on your parents’ shelves, your apprehension of the secret, yet exhibited contents of their minds.

MW: The idea of the parents’ book being filled with sex and thus dangerous and exciting is only part of the equation. I have always felt that all books are, in a sense, burning-hot objects.

The books in my parents’ den were extremely compelling to me: not just the sex books, though those were there too, because my father is a psychologist, but also The Family of Man with its black and white photographs of bodies and my mother’s feminist manifestos.

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PSYCHOANALYSIS AND THE ARTS

American Surrealism
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Pope of Surrealism, wrote in his 1928 essay, “Surrealism and Painting,” that surrealism—the idea of superreality or surreality—was an attempt to answer the question of reality raised by scientific investigation into matter and psychoanalytic investigation into the dynamic unconscious. Both called everyday perception and understanding of reality into serious question.

There are few, if any, esoteric symbols in American surrealism, not much childhood vision, and hardly any sense of the omnipotence of the dream. Instead, there are numerous popular symbols and a good deal of recognizable material and familiar subject matter. All of it is conveniently intelligible, a means of communicating with the dispossessed masses.

Compared to the European surrealists, the American surrealists seem sexually and aggressively inhibited, which is why their works lack the instinctive appeal of European surrealist works. Their art generates neither love nor hate, but tepid understanding.

[Editor’s note: This article is a greatly abbreviated version of the talk that Donald Kuspit presented at the National Academy of Design Museum in conjunction with the exhibition on American surrealism. We would like to thank Laurie Wilson of the New York Psychoanalytic Institute for helping to obtain and edit this article.]
Theater through the Psychoanalysts’ Lens

Phillip S. Freeman

There are many reasons to anticipate that psychoanalysts will have a professional affinity for theater: the multi-layered complexity of actor, character, and author; the real space that extends like a dreamscape into an infinite off-stage regress, the real time that is also imagined and pliable, and the inevitable lens of audience subjectivity. All this before considering the possibility that, inside the coiled spring of analytic restraint, the listening, the stillness, lies the occasional yearning to share the stage.

Only moments after the final lines and curtain calls of Caryl Churchill’s play, A Number, two psychoanalysts occupied the space vacated by the performers and a cadre of analysts attending the winter 2005 meeting gathered in the front rows. In the two-actor play, a man having lost his wife to suicide, neglects and then abandons his young son. Seeking a second chance, a do-over, and a return to better times, he offers his son’s cells to a scientist who clones a replacement. The play begins at the moment that the abandoned son, now 40, returns to confront the clone and to announce his discovery that, unbeknownst to the father, other copies were made.

Reviews of A Number focused on the ethics and realities of cloning, but a room of analysts came to question whether the play was not ultimately more concerned with pathological mourning, attempts at self-perfection through children, and the possibility that, even when technology appears to redefine such limits as mortality and generation and to offer new powers to reset the clock, the timeless unconscious still finds a route to repetition, in this case, repetitions of murder and loss. The joke is that, when we finally meet the pure clone, a clone raised apart from the father and family ghosts, he is not a monster at all. In fact, he is the only well adjusted and loving soul we encounter. (Although at least one analyst found him self-less.)

Pre- and post-performance discussions and liaisons between institute and theaters have been increasing around the country. At times, these collaborations, combined with individual initiatives, have created opportunities for analysts to become involved in productions as performers, consulting directors, and producers.

In recent years, the chairs of a revived discussion group at the national meetings, “Psychoanalysis and Theater,” have coordinated attending a play with analyst discussions and encounters with members of the production. Invited dramaturges and performers and videotaped readings have enhanced prepared talks and various formats of post-production question and answer sessions. While the logistics required to anticipate and secure tickets to plays having runs coincident with the meetings can be tricky, plans are to continue efforts to coordinate attendance and discussion in a manner that invites analysts to participate in the exhilaration of the stage.

Contemporary Scene

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Wolitzer here speaks about using her analysis as a way out of a creative “stasis” in her own creative life. She muses about her “conversa-tion” with her analyst in writing her highly acclaimed new novel, The Position. In this work she ironically portrays “primal scene” encounters of children with their parents’ sexuality. This topic of the primal scene—of which we do not “hear much these days,” according to Wolitzer—is both known and unknown in contemporary culture. The silence around specifically parental sexuality is uncanny in the context of a permissive culture so saturated with the sexualization of children and adolescents. Wolitzer’s narrative art breaks that silence with wit and compassion—and puts us all off balance.

If Freud is right that aesthetic power derives from an encounter with the known and the unknown, then the power of Carol Churchill’s recent Broadway play, A Number, surely derives from its confrontation with the evitable reality and unreality of human cloning. Psychoanalysts Phillip Freeman and Fred Sander describe their recent experience as interpreters of this play to an audience of analysts who gathered in New York for a post-performance discussion. In this discussion the analysts exemplified their roles as mediators and guides to new frontiers of human knowledge and experience. The human clone is, perhaps, quintessentially uncanny as a character: he (or it?) is embraced as a familiar while denied as an alien. Both recognize the realm of the theater as a place of aesthetic exploration of unconscious fantasy and desire and, as analysts, acknowledge their place as facilitators into realms unconscious and unknown. Indeed, as the sidebars to their discussion suggest, Sander and Freeman also enjoy breaking out of the coiled spring of analytic restraint to share the stage as producer and director, respectively of Pygmalion and the chilling Marat/Sade.

Each of these articles explores how aesthetic feeling is rooted in unconscious experience and how the uncanny as the core aesthetic feeling leads us along the royal road to creative discovery and expression.
Bringing Galatea to Life

Fred Sander

As the chairman of the New York Psychoanalytic Institute annual theater series, I chose three plays, Neil Labute’s The Shape of Things, an adaptation of Mary Shelley’s Frankenstein, and Arthur Miller’s The Crucible, for discussion in the 2001-02 season. They were all versions, broadly defined, of Ovid’s Pygmalion myth.

These plays, in addition to George Bernard Shaw’s 1913 adaptation of one person, Henry Higgins, transforming Eliza Doolittle, became the focus of my subsequent development of the Pygmalion myth for a Muriel Gardner lecture at Yale in 2002.

While researching the myth, I came across an earlier adaptation than Shaw’s by W.S. Gilbert before he had begun his collaboration with Sullivan. The play, his most successful, Pygmalion and Galatea (1870), dealt with the sculptor and his wife, Cynisca, who was also his model. He had created a slightly younger copy of her; Galatea, in his studio. When his wife left for a day, Galatea came to life and immediately fell in love with her creator.

This oedipalized and pre-oedipal adaptation of the myth also suggested cloning, a topic of increasing current interest. Galatea ultimately returns to her pedestal ending the adulterous mayhem her coming to life created, a satisfactory ending for the Victorian audiences of the time.

The play had last been produced in New York 80 years ago. Though I had never, at least consciously, considered moonlighting as a producer, I vowed to see this play produced one way or another and showed the script to an actor friend who I thought would be an ideal Galatea. She agreed and passed the script on to a director she thought might be interested. I had the script, with slight modernization of the language, digitalized. I also added an improvisational second ending, which would permit an audience member, during the curtain call, to bring Galatea, still on her pedestal, back to life.

The director loved the play and the saga of its production began. I arranged for informal readings of the play, bought a book on producing, spoke with a literary lawyer, and went to the Internet hoping to find some philanthropy or society that might want to fund a production. I contacted one of two Gilbert and Sullivan societies in New York that puts on an operetta monthly at Cami Hall, directly across the street from Carnegie Hall. They told me they had always wanted to do a Gilbert play and gave me a night (December 12, 2003) in their calendar.

Fred Sander, M.D., is an associate clinical professor of psychiatry at the Weill Cornell Medical School, and on the faculties of the Columbia Institute for Psychoanalytic Training and Research and the New York Psychoanalytic Institute psychotherapy training program. He leads the New York Psychoanalytic Theater discussion series.

The director cast the play with actors he had worked with and they rehearsed only once, the afternoon of the play, for the evening production. (Because the director did not like the idea of tinkering with Gilbert’s ending, it was agreed that the performance would not include my improvised second ending.)

I hired a caterer to generously feed the actors and provide cookies for the audience that evening. Although the actors expect no further remuneration for such readings, I paid them each $100.

I was a psychological wreck that day, especially since I could not really hear the actors during the rehearsal. That evening after the first lines were spoken, before a standing-room-only audience, I realized they had saved their voices for the actual performance. With my camcorder, I recorded the reading, as well as a panel discussion I had arranged for immediately following the play. Phil Freeman and I presented that tape to the theater discussion group at the APsaA 2004 Winter Meeting, when we also added the second ending I had written.
Directing the Madness of Marat/Sade

Continued from page 1

After lunch he asked me to accompany him to their rehearsal space. In the basement of a church the entire company and school were gathered in seats around two chairs. One was for the director, the other, I learned, was for me. He introduced me as his “assistant director” and explained that, for the next two hours, I would be discussing with them the nature of madness and asylums while viewing Frederick Wiseman’s documentary about the Bridgewater State Hospital for the criminally insane, Titicut Follies. As suddenly as that, I was on.

In the ensuing weeks, I worked with each member of the cast, 37 of them, as they developed the characters that would populate the asylum. Initial discussions about the credibility of their simulations of mania, rituals, depression, and perversions evolved into more nuanced discussions about the possible penetration of internal fantasy into external behaviors, the use of reality distortions to manage anxiety, and the use of symptoms as communications. Relationships developed and, with them, the sidebar dramas of parallel process, including the parallel between the attempt to develop the performance that would please the “blank screen” director and the attempts of the “inmates” to figure out how to live in a complex and dangerous world.

I have never found the simulation of madness interesting except to the extent that it reveals the assumptions underlying the ideas about madness that inform the performance. The actors demonstrated an uncanny ability, however, to develop highly specific imaginings that translated into performances capable of evoking a wide range of powerful affects in the audience. The final production—it was stunning—was as complex and layered in its way as an analytic hour. Having witnessed the creative process, it was possible to see in the still evolving product the compression of the extensive past efforts, mistakes and growth, and the general direction of the unpredictable future.

Reflections on Teaching

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Winnicott’s notions of intermediate space, the capacity to be alone, and the anti-social tendency as a cry for help all moved and inspired her. These notions made sense to her in ways that other ideas we had worked with had not. Thus, Winnicott served for her as a point d’entrée.

To foster such moments in a room full of students who come for a term, I have learned to move very slowly. My students bring their texts to class, and we read together, idea by idea. When I detect doubt, disbelief, embarrassment, or derision, I try to valorize these responses. Students start out as strangers to one another and to me, and they need to learn they can take risks. The process cannot be rushed.

When feasible, I invite a practicing psychoanalyst to come in to tell the students about clinical work and answer questions—which are often not the same as those they ask of me—and this allows them to envision psychoanalysis as more than words on a page. I sometimes ask my students to do a spontaneous writing exercise (I write also). Other unplanned experiences prove helpful, too. Occasionally, they choose partners, dream up scenarios and characters and act out a concept; sometimes I have them take parts and play roles with the text itself as script, and we manage to bring it to life.

CLASSROOM IMPROV

Unprepared experiences serve many rich educational purposes. They help to concretize abstract concepts; they enliven the classroom; they work to undercut academic stodginess, which I consider detrimental to the open, improvisational milieu that is conducive to the apprehension of psychoanalytic ideas and methods. Unprepared exercises propel passive students into action and expand the realm of communication and expression beyond the boundaries of the typical seminar discussion format. They simulate a kind of free association. I have been known to read poetry aloud to my students when I feel that poetry alone can reveal what a theoretical text is toiling lamely to convey.

As I look forward to my teaching next term, I am not sure exactly what I will do creatively to address the issues I have mentioned. Of course, a key factor is that, just as in a good psychoanalysis, it is not only the patient who learns, likewise, in a good classroom, it is both teacher and students who grow. The late Darius Ornston described Strachey’s influence on the original German of Freud’s texts by pointing out that Strachey, perhaps in order to conform with prevailing conventions of British medical parlance, emphasized a hierarchical factor in his translation that exceeds what inheres in the German: The Standard Edition treats the analyst as knower and the analysand as seeker, a tilted relation that in Freud’s original manuscripts is more fluid. This resonates with me, for I cherish my classroom as a scene of interchange and even of a kind of intellectual improv drama. Who the students are and what they bring with them matters. With the texts before us, we reflect and play and laugh and sometimes feel moved to tears. We might consider Melanie Klein’s ideas in the light of global racial prejudices, or the other way round, or Freud’s notion of the uncanny vis-à-vis contemporary experiments with virtual space.

Young, wide-eyed, not easily duped or intimidated, these eager faces will turn to me and try to push me towards the outside and into the future, but all the while I will be looking back at them and, while following them to some extent, be at the same time gently directing their gaze toward the past and inward, and together we will work to bring psychoanalysis into the 21st century and the 21st century into psychoanalysis.
How to Grow a Psychoanalytic Community: Face Reality

Jane Currin Walvoord

Today, many of our institutes are struggling to make ends meet. In addition, APsaA institutes and societies exist in a negative or un-informed community environment. How did we get here and what can we do about it? In a search for possible solutions, I spoke to representatives from five institutes—in St. Louis, Cleveland, San Francisco, Chicago, and Michigan. Each institute was remarkable for its long existing or renewed sense of hope and motivation among its members and for its existing or developing fiscal stability.

What are these institutes doing right and what can we learn from them? I found that they have several characteristics in common.

First, while each institute or psychoanalytic center varies widely in structure, its members have struggled to design an efficient organization that conforms to the institute’s history and needs. All have a fiscally responsible lay board. And all but one have professional development directors.

BOARD BUILDING

While the structure and makeup of the boards of directors vary, they are all fiscally responsible for the work of their institutes. The boards, with the exception of Cleveland, are self-recruiting. Prominent and expert community business leaders work together with a varying percentage of analysts to provide each institute not only with financial health but also with a challenge to make psychoanalysis relevant to the community.

Eric Nuetzel of the St. Louis Psychoanalytic Institute offered this advice about how to begin: “Identify people who have an interest in psychoanalysis, and ask their help in extending into the community.” Analysts who have grown up in the community may be helpful by contacting their friends. In many communities, friends such as these have been around for so long they seem obvious, so much so that no one has thought to request their guidance.

Once organized, board members need help in establishing relationships between each other and the membership. A 30-minute presentation of some aspect of the work of the institute at board meetings and at social events, such as an annual dinner or party, can help accomplish this goal. Arranging for relationship building opportunities reduces fears about potential power struggles and increases the sense that everyone has a stake in the health and welfare of the institute.

PROFESSIONAL HELP

In order to carry out the work of the board, an institute needs professionally trained personnel. Some institutes with little or no funds for a professional development director have focused their initial energy on finding a donor who will underwrite the cost, while others start off with part-time help or share the expense with a nearby institute.

Many institutes are struggling with an attitude of long-standing discouragement born of frustration. As Drew Clemens from the Cleveland Psychoanalytic Center said, “Cynicism combined with passivity is a deadly combination.” For all five institutes, the work of the board and development staff has been inspiring. Discouragement yields to enthusiasm and momentum is tangible even in those situations in which a board and staff are relatively new. But development personnel cannot be expected to produce results overnight.

INFRASTRUCTURE

Andra Lichtenstein, a board member of the San Francisco Psychoanalytic Foundation, pointed out, “It takes time to build an infrastructure for fundraising. Sometimes the culture of an organization needs to be changed so that people understand about giving.”

Brochures and newsletters and a donor recognition program have to be developed. Members need to learn how to ask for money directly. It takes about three years to get going. The first year is spent getting ready, the next in establishing the organization’s internal giving pattern and commitment to community service, making it possible to then reach out to foundations and arrange for planned giving. As members of psychoanalytic societies and institutes, we often give money to non-profits, but we tend to think of our own institutions as providing member services rather than as an organization that serves the community as well.

COMMUNITY SERVICE

The good news about community service is that it represents a mutually beneficial strategic partnership. Opportunities for candidate training in community schools and clinics as well as developing and sharing mailing lists and publicity with community arts organizations are all part of an optimally functioning plan for community service.

Chicago and St. Louis both have long-standing low fee clinics and well developed arrangements with schools for kids in trouble. These programs provide opportunities for training experience for candidates or psychotherapy students. They also build relationships and offer learning through in-service training by the institute faculty.

Martin Laub, director of development and public affairs at the Chicago Institute for Psychoanalysis, said, “Fundraising isn’t called fundraising anymore. It’s given way to development. We’re developing programs that provide benefits to the community and developing relationships with potential donors to support those programs.” And relationships build trust and loyalty.

Harold Kulish of the Michigan Psychoanalytic Foundation, in reference to direct solicitation told me that it is best to talk about the community service aspects of the institute, for instance, a low fee clinic or programs for children. He said, “If you try to explain what psychoanalysis is or what it does, you hit a dead end. You get caught up in questions about the difference between a social worker and a psychiatrist…. The best thing to say is, ‘This...”

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Psychoanalytic Research Today

Robert Michels

One is not usually concerned about whether research is “psychoanalytic.” The critical questions are, rather: Does it address an interesting question and is it well done? However, last year Clinical Neuroscience Research, the official journal of the Association for Research in Nervous and Mental Disease, decided to devote two issues to “Research in Psychoanalysis and Psychodynamics.” Steven Roose and I were invited to serve as guest editors, and we set out to select papers considering all three questions: Is it interesting, is it good, and is it psychoanalytic?

The association, founded 84 years ago, is a society of neurologists, psychiatrists, and scholars interested in neuroscience and related fields. It has an annual scientific meeting and, for the last four years, has published its own journal. Most of the topics are decidedly neuroscientific (e.g., “Molecular and Cellular Approaches to the Treatment of Brain Disease,” “Biology of Schizophrenia and Affective Disease,” “The Dementias,” “The Conscious Brain,” “Convulsants and Anti-convulsants from Bench to Bedside”). Clearly our issue was going to be different, but at the same time we wanted to engage our audience, relate to the traditions of the society and the journal, and make certain that the difference that persisted was in relevance to psychoanalysis, not in being interesting or being good.

The issues have just been published (Clinical Neuroscience Research, Vol. 4 Nos. 5-6, May 2005) and we are proud of them. The process was interesting, and sheds some light on contemporary “psychoanalytic” research. We included 11 papers, five by psychoanalysts interested in research, six by other researchers interested in psychoanalysis.

The first two papers are on attachment and separation, their biologic substrate and psychologic phenomena. They discuss infants, rat pups and prairie voles, oxytocin neuroimaging, and home visits designed to enhance parent-infant relationships.

The next four papers address the neurobiologic substrate of behavior, with discussions of stress, psychotherapy, anxiety, depression, and psychoanalytic constructs; and review their relation to endocrine, immune, and functional neuroimaging studies. The authors are primarily neurobiologists talking to analysts rather than the other way around. They attempt to translate their views across disciplinary boundaries, thus, “The physiology of the stress response shares many features that skillful therapists observe in the lives of their patients as they…[avoid] scenarios, which they find almost unendurably painful” (Gold, 2005, p. 323), or “Frontostriatal systems subserve top-down processing in the CNS, thereby contributing to numerous important psychological functions, including the control of impulses and drives that are established within affective systems, and the construction of experience according to preestablished conceptual schemas-processes that likely underlie cognitive distortions, projection, and transference phenomena” (Peterson, 2005, p. 361).

The next set of three papers are by analysts, about analytic treatments, and will be more familiar to analysts, although perhaps more controversial. They represent state of the art discussions of empirical research in psychoanalytic therapies. The first, an “exhaustive review of the psychotherapy outcomes literature,” concludes that while brief psychodynamic psychotherapy appears to be comparable to empirically supported treatments, “no trial has shown it to be superior,” and that existing studies of long-term psychoanalytic psychotherapy “failed to unequivocally demonstrate that psychoanalysis is efficacious relative to either an alternative treatment or an active placebo” (Fonagy, Roth, Higgitt, 2005, p. 373). The second describes one of the most robust randomized clinical trials of a specific psychodynamic treatment (Otto Kernberg’s “Transferance Focused Psychotherapy for Borderline Personality Disorder”) ever undertaken, and reports preliminary findings (Clarkin, Levy, Schiavi, 2005). The third addresses an important methodologic issue, treatment manuals for long-term psychodynamic psychotherapy and psychoanalysis, arguing that, “Manuals for psychoanalysis are necessary if psychoanalytic outcome research is to meet the methodological standards set by the medical and scientific research communities” (Caligor, 2005, p. 396). Many analysts would respond that if this is true, such research is impossible.

While the first two sets of papers address developmental and neurobiologic concepts fundamental to psychoanalytic theory, and the third addresses problems in studying the efficacy and process of treatment, the fourth and last set of two papers is likely to be of greatest immediate interest to practicing clinicians. They both discuss the relation between psychoanalytic and psychopharmacologic treatments.

The first, a study of current practices, reports that more than half of analysts have prescribed medication for an analysand and a third of analysands are taking medication, primarily for mood disorders (Cabaniss DL & Roose SP, 2005). The second, which I discussed in more detail in these pages a few months ago, describes the predictive value of early trauma on the differential response to pharmacotherapy and psychotherapy (Craighead & Nemeroff, 2005).

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Standardizing Assessment Of Clinical Learning—A Multicenter Project
Deborah L. Cabaniss

For the past 12 years, our research group at the Columbia University Center for Psychoanalytic Training and Research has been investigating the problems generated by the lack of standardized objectives in psychoanalytic education. Now, with grant support from the International Psychoanalytic Association (IPA), we are looking to build a consortium of institutes both from APsaA and IPA to join us in our work. Some of the conclusions from our studies, to date, are listed below:

- Lack of clearly stated, consensually held criteria for clinical assessment leads to confusion and frustration among candidates.
- Lack of consensus about criteria for the assessment of clinical skills leads to overemphasis on length of control cases as the basis for decisions about progression.
- Supervisory reports too often focus on the patient's progress rather than the assessment of the candidate's learning.
- These observations led us to convene a task force to develop criteria for progression and graduation. The group, composed of faculty and candidates, recommended criteria based on qualitative assessment of the candidate's learning rather than on the length of control cases.

NEED FOR LEARNING OBJECTIVES

Our first step was to acknowledge that no valid assessment could be developed without clear delineation of the learning objectives upon which the assessment was based. In collaboration with the chairs of the curriculum and progression committees, we concluded that learning objectives for psychoanalytic training should:

- Vary according to the year/phase of candidacy
- Reflect teaching goals in all clinical tracks, including supervision, technique classes, and process classes
- Be clear and reflect demonstrable skills
- Be available to both faculty and candidates and be used to facilitate learning as well as to guide assessment

We then divided the learning objectives into six domains:

- Assessment/Diagnosis/Treatment Planning
- Establishing Treatment/Working Alliance
- Empathy/Analytic Listening
- Technique
- Formulation/Writing
- Supervision

Each of these domains has demonstrable objectives that are pertinent to all three phases of training: first year, mid-level (second to third year) and senior (fourth to fifth year and above). First year objectives focus on assessment and development of analytic listening; mid-level objectives focus on learning analytic technique with the help of a supervisor; and senior level objectives focus on the development of independence in all areas. The objectives have a developmental trajectory, with the same objectives becoming increasingly sophisticated as the training progresses. This allows supervisor and supervisee to focus on learning goals that are appropriate to the phase of training, but also to see what lies ahead. The senior objectives can be used as graduation criteria and thus constitute operationalization of clinical psychoanalytic competence.

Supervisory Assessment—The companion piece to the learning objectives is the supervisory assessment form, which asks the supervisor and supervisee to comment in a guided, narrative format on each of the major domains covered by the learning objectives. Both supervisor and supervisee fill out the assessment form and discuss their evaluations with each other.

Mid-phase Criteria—This last document helps to separate assessment of the patient's therapeutic gains from assessment of progression of the candidate. While the learning objectives and supervisory assessment clearly delineate the candidate's learning, the mid-phase criteria are learning tools for supervisor and supervisee to assess the phase of treatment of the candidate's control case.

Studying the New Methodology—Most often, new educational initiatives are conceived, instituted, and subsequently revised without the benefit of systematic assessment. We plan to obtain systematic assessment of our educational initiative at all stages of project development. Feedback forms will be sent out to all participants one month after assessments are completed. This assessment will evaluate the impact of the new methodology on supervision, supervisory evaluation, candidates, and progression.

IMPORTANCE OF A MULTICENTER APPROACH

We presented our methodology for clinical assessment at the Workshop on Supervision at the 2005 Winter Meeting of the Association. Representatives from many institutes felt that the objectives could be used for assessment of clinical skills at their programs. In particular, they responded to the advantages that could be gained from having clear, written, demonstrable objectives that could help them create a transparent assessment procedure that was focused on clinical learning and free from overly subjective evaluations.

In response to this interest, we are inviting all institutes of APsaA to join us in an educational consortium consisting of psychoanalytic training programs that want to use and evaluate this methodology. Each partner institute will designate a point person who will be in contact with the Columbia team and who will come to an annual meeting (to be held during the Winter Meeting of the American...

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APsaA Key Player in Negotiating New Documentation Standards With Oxford Behavioral Health

Lynn Stormon

The American Psychoanalytic Association has become a force to reckon with in the national mental healthcare arena by setting uncompromising standards for privacy and confidentiality and by successfully advocating for the patients and practitioners of psychoanalytic psychotherapy.

Prime among our efforts were lengthy negotiations that shifted Oxford Behavioral Health’s concern about billing abuse and fraudulent claims to a commitment to protect patient confidentiality. Oxford’s newly revised documentation standards policy now specifies the maximum amount of information that can be requested for routine claims review in a template that explicitly excludes psychotherapy notes and does not reveal the content of the patient’s material.

The new documentation standards policy, which took effect on April 1, 2005, may serve as a national model for third party documentation standards. In a recent interview, Alan Muney, Oxford’s medical director, said that his company has begun internal discussions with its nationwide parent company, United Healthcare, about expanding what Muney calls “a good pilot.” Discussions between Oxford and the American Psychoanalytic Association are now exploring how best to use the new policy proactively to inform and promote an ethics-based approach to documentation standards industry-wide. “The American Psychoanalytic Association takes the position that observing ethical standards makes for good practice, good care, and good business,” said Association President Jon Meyer.

RETROACTIVE AUDIT COMPLAINTS

Negotiations were originally instigated by complaints about Oxford’s retroactive audit of services, which involved the application of an “extrapolation” method to a small sample of patient records that failed to meet documentation standards for correctly coded claims, which resulted in the demand for repayment of reimbursements to Oxford. Repayment requests were reported to be quite substantial, amounting to tens of thousands of dollars in addition to legal fees.

Jay S. Kwawer, director of clinical education at the William Alanson White Institute, reports that he was asked for medical records for 29 patients, including psychotherapy notes for 106 sessions. The services that Oxford sought to audit dated as far back as 1996, six years earlier. “Despite the fact that I was never a contracted ‘network provider’ with Oxford,” Kwawer reported, “they felt entitled to impinge on my professional autonomy with increasingly threatening demands that individual session notes be provided to them, without ever providing signed authorizations from patients consenting to the release of this information.”

In the face of Kwawer’s unwillingness to compromise his ethical or legal professional obligations, Oxford repeatedly affirmed its entitlement to such records, insisting that all insured patients automatically consented to the disclosure of such private information simply by visiting a doctor’s office and seeking reimbursement for treatment.

Muney responded to the concerns of several professional organizations by convening meetings to work out an acceptable documentation standard that provided Oxford with information needed for claims review yet safeguarded patient confidentiality. Participating organizations included the American Psychoanalytic Association, the American Psychiatric Association, the New York State Psychiatric Association, the American Psychological Association, the New York Psychological Association, and the New York State Society for Clinical Social Work.

“When we undertook to review documentation,” Muney said, “we uncovered much disagreement among the professional organizations about what is appropriate documentation from a medical records point of view as well as from the confidentiality point of view.”

“Members of the contingent from the Association were experienced and knowledgeable about HIPAA (Health Insurance Portability and Accountability Act) and “minimum necessary standards” and were committed to articulating and representing the ethical obligations of practitioners to protect their patients’ rights,” commented Meyer, who attended the Oxford meetings along with Jim Pyles, Bob Pyles, and Dean Stein, APsaA executive director.

PATIENT PRIVACY PROTECTION

Meyer was involved in many subsequent discussions and direct negotiations to refine Oxford’s new documentation standards policy and create a template for routine claims review that excludes psychotherapy notes. “This was a model of how disputes between clinicians and insurers should be settled,” Meyer said. “I think this discussion with Oxford establishes a national paradigm for resolving issues between patients, clinicians, and insurers both in terms of process and in terms of an outcome that respects HIPAA protection of psychotherapy notes and the ethical standards of the Association.”

As a result of the negotiations, Oxford’s revised documentation policy standard now specifies seven “data elements” that comprise “Basic Information” for “regular and routine healthcare operations”:

1. Patient name
2. Clinician name
3. Date of service
4. Diagnosis

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Meeting the Challenge of New NIMH Funding Priorities

Georgia Royalty

John Oldham, professor and chairman of the Department of Psychiatry and Behavioral Sciences at the Medical University of South Carolina, represented the American Psychoanalytic Association at a one-day meeting sponsored by the National Institute of Mental Health (NIMH) in March in Washington, D.C. NIMH Director Thomas Insel extended the invitation to 39 organizations representing professional mental health disciplines. The purpose of the meeting, the first of its kind, was to communicate the current priorities for funding NIMH research grants to representatives from the various mental health organizations and to establish a forum for input from these organizations. In addition to APsaA, such organizations as the American Psychological Association, the Institute for the Advancement of Social Work Research, and the American Association for Marriage and Family Therapy were included.

The day consisted of planned meetings, in part to disseminate information regarding the budgetary challenges facing NIMH. These include drastically declining percentages of budget increases (from a budget increase of 13.8 percent in 2001 to a budget increase of merely 0.4 percent in 2006); the high percentage of existing multiyear grant commitments; the increased cost of funded grants; increased numbers of applications; and a high level of funding committed to training grants. As a consequence, plans are underway to modify the past priorities and restructure the budget, for example, by reducing the training grant support.

During the meeting, Oldham received the discouraging clarification that, amid these monetary challenges, research on long-term treatment and psychoanalysis is not seen as a priority and applications for research funding in this area do not have a high chance for success. Research grant requests that demonstrate a clear and persuasive possibility of leading to results that will reduce in a timely and definitive way the burden of mental illness (in terms of the toll mental illness takes financially, societally, and individually) are most likely to be successful.

In the context of this climate, Oldham believes a likely avenue for attracting NIMH interest and funding, as well as an extremely productive research area, is the biological study of psychotherapy. There is evidence that long-term therapy is a biological treatment that can create changes in brain structure and function that are discernible with neuroimaging. In addition to assessing changes in the brain due to psychotherapy, neuroimaging has allowed researchers to ascertain changes in certain brain regions that predict treatment outcome for particular mental disorders. The technological advances that are allowing researchers to investigate brain structure and functions will dramatically improve our ability to understand the actual biological mechanisms of change during psychotherapy, something Freud could only dream about. APsaA’s support of Oldham’s attending this meeting and his willingness to participate are examples of our organization’s increasing dedication to the role of research in advancing our profession.

New Benefit for APsaA’s Malpractice Insurance Program

In response to a number of inquiries regarding the possibility of offering increased limits for Administrative Hearings within the professional liability policy underwritten by The American Home Insurance Company, we are pleased to report that the following options are now available in addition to the $5,000 automatically included within the current policy rates:

- $5,000 excess of $5,000 (total limit $10,000)—additional premium $175
- $20,000 excess of $5,000 (total limit $25,000)—additional premium $500

Any request for increased limits may be made in conjunction with the renewal of your current policy or at such time you purchase your first policy if you are not currently participating in this program. Further details will accompany your renewal package or you may contact Margaret Church, Program Administrator; at Frenkel & Co., (201) 356-3422.

Multicenter Project

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Psychoanalytic Association in New York) to discuss the feedback and plan changes to the instruments. This phase is integral to the project, since data will be considerably more meaningful if collected at many institutes. Our previous multicenter studies have demonstrated the feasibility and benefits of doing collaborative work. Our hope is that this collaborative project will help move psychoanalytic education toward use of more standardized educational methodology.

For information about the learning objectives and about joining this project, please contact me at the Columbia University Center for Psychoanalytic Training and Research, dsc3@columbia.edu.
Aisha Abbasi, training and supervising analyst at the Michigan Psychoanalytic Institute, wrote her poems originally in Urdu, which is her native language. Abbasi trained as a physician at Fatima Jinnah Medical College in Lahore, Pakistan. She did her psychiatric residency at Henry Ford Hospital, Detroit, Michigan. Her Urdu poetry has been published in Takhleeq (Creation), a literary magazine in Lahore. She regularly presents her work at Mushairas (Urdu poetry readings) that are held in Michigan yearly and are attended by Urdu poets from India, Pakistan, and Canada.

Abbasi collaborated on the translation of her poetry with Carlo Coppola. Coppola's Ph.D. degree is from the University of Chicago, where he studied Urdu, Hindi, Sanskrit, Persian, and Pali. He co-founded the Journal of South Asian Literature and then for 39 years functioned as the co-editor. Active in organizing and participating in programs on applied psychoanalysis, he was named Distinguished Friend of Psychoanalysis by the Michigan Psychoanalytic Institute in 2002. He currently teaches at Oakland University, where he is professor of modern languages and literatures and of linguistics.

Coppola believes that every translator knows or should know:

Translation is utterly impossible, but...one does it anyway. One does not merely translate words, phrases, sentences, etc.; one translates cultures, world views, belief systems....Translation is a thankless task; not everyone will be pleased with the results, especially the author, if s/he is totally honest with the translator. Generally, the most effective and affective translations have been collaborative, the author working with a translator (preferably a person of letters him/herself) whom the author respects. The Italian expression, Tradutorre tradditore! (Translators [are] traitors!), is true. Every act of translation is essentially an act of betrayal of one language to another; the justification is, if one is lucky, a glimpse of the original in the target language.

From the Unconscious

Sheri A. Hunt

If you had to die,
You could have waited a few days—
So much left
For us to do:
You had to place your hand
on my daughter's head
To see how tall she's grown,
Celebrate
My twentieth wedding anniversary,
Kiss my forehead,
Clasp me to your chest
So light could suffuse
My life.
When you would have talked
To my beloved,
You'd have strengthened
The spheres of my love—
I'd have been enriched
By your nearness.

My first poem is published:
You cannot read it.
Whom can I point to
And say to all:
This is my father,
Mountain tall,
Handsome as a god,
Whose laughter
Awakens a thousand passion storms
In the womb of earth.

When I was small,
You held me on your lap.
Now I am so far from you
That, even if I bring you flowers,
They’d die along the way.
So I simply write
A poem for you:
In my daughter’s sprouting height,
In the boldness of my laugh,
Bits of you live on.

Aisha Abbasi
Translated from the Urdu by the author and Carlo Coppola

Pursuit (Ta‘aqib)

In a mustard-flowered field a girl
Draped in a rainbow-colored sari,
Her hair webbed with flowers.
Wind wraps around her feet
As her steps seem to take flight.
Bending aside with her hand
Yellow-jeweled flowers,
She presses on,
As if descending into the sun’s golden heart.

And behind her,
Carrying myriad thoughts of love,
Who is this
Picking up flowers as they fall
From her tangled hair,
Kissing them,
Trying to find,
In the wind-fluttered edge of her sari,
His destiny?

But then a desire swells
In the girl’s heart:
Someday, the one long trailing her
Silently
Would stop,
And bar her way, too.
Then all the flowers in her hair
Would be given to the wind,
The sari rainbow colors
Would mantle the golden field,
And within the mustard-flower yellow
Fire flames of rose-red
Would bloom
And the pursuit would end at last.

A LOVE LETTER—FOR MY FATHER
(Ek muhabbat namah—apne bap ke nam)

Sheri A. Hunt, M.D., is a candidate at the Seattle
Psychoanalytic Society and Institute in both the adult and
child training programs. A published poet and member
of TAP’s editorial board, she welcomes readers’ comments
and suggestions at sherihunt@hotmail.com.
is what we do [for the community], not ‘This is who we are.’ … Some people care little about psychoanalysis, but they believe in supporting service to the community.’

INNOVATIVE APPEALS

The methods for development are many. They range from annual and endowment appeals to targeted direct mail or personal contact through conferences, benefits, and lectures. San Francisco has developed a program they call “Theater on the Couch,” in which analysts speak at the close of performances at the local repertory theater. This program will be extended to a film house as well. The theater directors were so thrilled with the first panel presentation, they have made it a part of their fall presentations and included it in all their publicity.

In Michigan they have found several techniques that work to create a successful benefit, showing a larger than usual profit. They put on a lighthearted show that is fun, because people like to walk out feeling good. Any intellectual comedian with some name recognition who can joke about psychoanalysis is a consistent draw. For a good show, the foundation can charge a significant amount of money, taking in much more than is necessary to cover the cost of the entertainer. A local comedy club has been a good source for finding the right act and presents an opportunity for the members of the benefit subcommittee to attend a performance, so they know what they are getting.

Cocktails before the performance and dessert afterwards turn out to be enough. Dinners are not popular and are too expensive, thus reducing profits. A warm-up musical group playing during the cocktail hour, such as the symphony youth group, helps improve relaxation and receptivity. One rule is, never include a half-hour introduction from the president or chairman of the board because it interferes with the ambiance. Dessert and coffee after the performance allow the audience to enjoy the afterglow and make contact with friends. If all goes well, an annual benefit can become a prestigious and valued community event.

As analysts, we believe in what we do. Psychoanalysis is valuable to individuals as well as to communities. But our ability to provide psychoanalytic care has diminished because we have lost touch with our constituencies. It is time to face reality and recognize that psychoanalysis needs vibrant and expanding community support in order to survive.

Psychoanalysis and Race

Psychopathology and racial difference, conceived of as evolutionary inferiority, were linked together as regressions to primitivity.

As the individual moved up the developmental/evolutionary scale, primitive processes were repressed in the unconscious. “The man of prehistoric times survives unchanged in our unconscious,” wrote Freud; and throughout his texts the unconscious and the id are commonly described in terms of the primitive or prehistoric mind. But while the modern (white) self developed the secondary processes of consciousness, so-called primitive peoples were believed to remain limited to the “primitive psyche,” i.e., to the unconscious itself.

None of this implies that Freud was, or that psychoanalysis is, intentionally racist. But like other disciplines that arose at the turn of the last century, psychoanalysis was influenced by racist ideas pervading the social and scientific thought of those times. While contemporary forms of psychoanalysis differ in important ways from Freudian psychoanalysis, the history of the feminist encounter with psychoanalysis demonstrates that issues of difference, even if buried deep within the bedrock of Freudian theory, will continue to persist in contemporary forms of analysis until they are acknowledged, confronted, and worked through.

The implicit racial identity of the normative psychoanalytic subject as white needs to be questioned; and the supposed racial neutrality of the ubiquitous idea of primitivity needs to be repeatedly problematized. Such theoretical rethinking is required above and beyond the necessary remedies of diversity and cultural competency if psychoanalysis is to truly open itself up beyond the cultural and racial confines to which it has been, historically, limited.
Executive Council Report

Jane Currin Walvoord

EXECUTIVE COMMITTEE
- Jon Meyer, Lynne Moritz, Eric Nuetzel, and Beth Seelig sent a letter to the New York State Department of Education asking that APsaA be recognized as a registering, certifying, and accrediting body under the new New York licensing law.
- Dean Stein recommended that a committee be formed to plan a celebration for APsaA’s 100th anniversary, which will occur in 2011. He envisions a multi-faceted publicity campaign, emphasizing the contributions of the profession over the past century. The Executive Committee endorsed the plan and the formation of a planning committee.
- Because it will not be possible to hold the annual meeting in May 2006 in Atlanta, nor in Toronto in May 2007, when the American Psychiatric Association is meeting, the Executive Committee reiterated the decision to continue to hold annual meetings in June.
- Warren Procci announced that suggestions for nominations for the Sigourney Award are now welcome. This year’s awards will be granted to individuals from areas outside North America and Europe. The Sigourney Committee is also seeking judges who will consider the nominations.

COMMENDATIONS
Both Marvin Margolis, chair of the Ethics Committee, and Cal Narcisi, chair and founder of the Committee on Child and Adolescent Psychoanalysis, have completed their terms. Jon Meyer, APsaA president, thanked both for their consistent dedication and service to the Association.

TASK FORCE ON EXTENDED MEMBERSHIP CRITERIA (TFEMC)
Discussion of the proposals of the TFEMC focused on the issues of equivalency determination based on training requirements and letters of sponsorship rather than demonstrations of clinical competence. Richard Lightbody expressed a concern that the letters could be perfunctory. He suggested, in order to make the letters more credible, that they be required from analysts with a heightened fiduciary responsibility on a national level, such as an executive councilor or a fellow of BOPS, who has knowledge of the applicant’s work, character, and level of ethical functioning.

Harriet Wolfe responded, saying that the TFEMC preferred letters from someone active on the local level because the members of the task force felt this would provide a richer sense of the contributions of the applicant to psychoanalysis. The TFEMC feels the procedures for determining equivalency should be as transparent and user friendly as possible. Also, in trying to include individuals who have trained in unusual ways, those at the local level will know more about these ways than someone on the national level. The guidelines will be based on the model of the Association for Child Psychoanalysis and will be specific.

FUNDING FOR APsaA PROGRAMS
Glenn Gabbard and Stanley Coen, speaking for the Program Committee, requested authorization from the Council for APsaA to investigate the possibility of unrestricted grants from pharmaceutical companies to help fund innovative programs in the Association. A lively discussion highlighted the need to consider both sides of the issue and to educate the membership. A motion was made to authorize the Executive Council and the executive director to explore the issue with the caveat that no arrangements to accept funding would be made without authorization from the Council. The motion passed by a vote of 34 to 6 with 2 abstentions.

MEMBERSHIP REQUIREMENTS AND REVIEW COMMITTEE (MRRC)
The motion to accept the MRRC’s bylaw amendment proposal, making IPA graduates as well as IPA members automatically eligible for membership passed unanimously. The second proposal to change the designation of Academic Associate to Academic Member received stimulating debate. Eric Nuetzel, BOPS chair, explained that BOPS had not voted substantively on the proposal, but had voted to table the motion for an advisory opinion, reserving the Board’s prerogative to offer an opinion after the Council had taken action on the issue. The Council’s motion to adopt the proposal did not receive the necessary two-thirds majority vote. The proposal was referred back to the MRRC for further consideration.

TASK FORCE ON REORGANIZATION (TFOR)
Robert Galatzer-Levy reported that the TFOR is working out the location of educational functions in the organization. Regarding the board of directors, the task force has been trying to integrate two central views, efficiency vs. adequate representation and protection of representation. Another concern has been the role of officers. Since officers have a difficult task, there have been a limited number of people willing to take on the responsibility. The task force has been attempting to create positions that are more workable. [See “Task Force on Reorganization Proposes New Model for BOPS,” page 28]

CERTIFICATION AMENDMENT
In introducing the discussion on the proposed bylaw amendment on certification and local option, Jon Meyer reminded the Council that the proposal was a petition amendment. It was written in bylaw language and the Council was not free to modify it or stop it from going forward. The question before Council was whether the Council recommended adoption by the membership.

The motion to approve the amendment proposal was defeated, by a vote of 18 in favor, 22 opposed, with no abstentions.
Board of Professional Standards Report

Jane Currin Walvoord

In the June meeting disputatious issues of bylaw amendments, reorganization, and membership were once again prominent on the agenda. In this light, Eric Nuetzel, BOPS chair, opened the meeting with this appeal: “You can readily appreciate that the Association is in a state of flux. It is a challenging time, but also a time of opportunity. As we participate in these discussions today, we have the opportunity to influence our educational system for the better for decades to come. So I hope we can put aside old prejudices… and see what we can do to make things better.”

CERTIFICATION AMENDMENT

Beth Seelig presented a draft advisory opinion statement on the proposed bylaw amendment regarding certification and “local option” for discussion. She pointed out that the proposed amendment, if passed, would prevent BOPS from requiring certification for training or supervising analyst appointment. There was discussion with some revisions to the position statement and the motion to issue the advisory opinion was passed with a vote of 43 in favor, 5 opposed, and 2 abstentions.

BYLAW AMENDMENTS PROPOSED BY THE MEMBERSHIP REQUIREMENT AND REVIEW COMMITTEE (MRRC)

Prudy Gourguechon presented the details of two amendment proposals from the MRRC, which carries out the routine functions of admitting new members and reviews and proposes methods for expanding the membership base. The first amendment proposed that IPA graduates be automatically eligible for membership. The MRRC saw this amendment as housekeeping because IPA members are already members of APsA. After lively discussion, a motion to approve was easily passed (35 to 4, with 3 abstentions). Nuetzel and Seelig were delegated to draft an advisory statement, after consideration and action by the Executive Council.

The second proposal was intended as a correction of an injustice. Academic candidates are privileged to vote, however, when they graduate, they become Academic Associates and lose the franchise. This amendment would change the designation of Academic Associate to Academic Member, and would restore their right to vote. While there was much support for the need to rectify the inequity, as the discussion progressed, it became clear that the designation of Academic Associate covers many different categories, including those graduates who had been clinical candidates but opted to graduate without completing clinical work or supervision requirements. The motion to table the discussion pending further deliberations was narrowly passed (25 to 21).

TASK FORCE ON REORGANIZATION (TFOR)

Stephanie Smith reported that the TFOR has adopted a resolution: APsA shall be a professional membership organization of psychoanalysts and students in psychoanalytic training that qualifies individuals for membership. The members of the task force have expressed a commitment to one class of membership with equal rights and are struggling with the associated implications.

CERTIFICATION ADVISORY AND REVIEW COMMITTEE

Cal Narcisi voiced concern that the fee for certification, which has been unchanged for many years, is too low to cover the extensive costs. He recommended that the fee be raised immediately to $250 and again in three years to $500. The proposal was passed unanimously.

COMMITTEE ON CHILD AND ADOLESCENT ANALYSIS (COCAA)

Ruth Karush, in her final report to BOPS, said that her tenure as chair has been one of the most satisfying positions she has had and the privilege to hold. After thanking her committee and many others she has found helpful and supportive, she said she was proud of the brochure, “All about Children and Adolescents,” the pilot programs for child focused separate track training and the repository on the Web of curricula to be shared. She also reported the establishment of the COCAA Research Project that will hopefully demonstrate the efficacy of child and adolescent analysis. COCAA’s new chair will be Phyllis Tyson.

COMMITTEE ON PSYCHOANALYTIC EDUCATION (COPE)

Larry Interbitzen, in his farewell remarks, challenged BOPS to give issues of teaching and learning a higher priority rather than maintaining an “overwhelming preoccupation” with standards and certification. “I am convinced,” he said, “that learning about learning process can be transformational and could cast some of our most vexing problems, like certification, marketing and maybe even psychoanalysis itself in a new light.” Robert Michels will be the new chair.

AFFILIATE COUNCIL’S MEMBERSHIP DRIVE

Julio Calderon, the incoming president of the Affiliate Council requested the help of at least one faculty member fromevery institute in an Affiliate Membership drive. Even though the first year of membership is free, and the procedure for joining is simple, only 61 percent of new candidates have initiated membership. Invitation letters to new candidates will be mailed from the National Office just before October 15. The goal is to recruit 100 percent of the new fall 2005 candidates reported to the National Office.
Task Force on Reorganization Proposes New Model for BOPS

Stephanie Smith

The Task Force on Reorganization continues to make progress towards designing a governance structure for APsaA within the mandate provided by APsaA’s membership. The task force met twice this summer, first at the APsaA meeting in Seattle, and then two weeks later in New York. We spent a total of five days working together, furthering the development of various structural models under consideration. We made use of the vigorous debates that had taken place on the task force e-mail list and, most important, made valuable use of the input that we have received from the membership.

The Seattle meeting fostered free discussion of substantive issues, as well as discussion of our group processes, which provided a foundation for decision making in New York. Task force members have increasingly come to appreciate their differences, listen to each other, learn from each other, and develop a spirit that has deepened our conversation. The goal is to build consensus and, if necessary, develop workable compromises.

The task force discussed salient issues, including credentialing, and proposed models for a board of directors, for membership, for officers’ roles, and for the place of science and scholarship in relationship to governance. It became clear that options and decisions in one area depend heavily on decisions made in other areas. For example, the structure of APsaA shifts radically when viewed in relation to a fully externalized BOPS, BOPS as a subsidiary corporation, or a BOPS that remains a committee within APsaA. From the standpoint of governance, many questions follow. Should the membership have oversight over certifying and accrediting functions? Should there be a firewall to protect standards and, if so, what kind of firewall? Which educational functions would remain in APsaA if BOPS were fully externalized? Would APsaA lose a major focus if major educational functions were no longer part of the organization? Can educational functions be “unpacked” from one another? BOPS committees accredit, certify, and also nurture. What would APsaA be like if it were only a membership organization, without an accrediting and certifying body, and, therefore, without “APsaA institutes.”

The task force welcomed, and continues to welcome communication from the membership. In Seattle, the task force held an open meeting with the membership, met with members of the Executive Committee, and met with the chair of the Committee on Council. We presented our work to BOPS and to Council. We also sent observers to the Congress of Institutes to gather information for our work.

AREAS ADDRESSED

The New York retreat addressed four areas: regulatory functions (BOPS), small board structures, large board structures, and the role of officers. Task force members proposed models for large and small boards of directors and discussed their advantages and disadvantages. The responsibilities of a board are to provide oversight, determine policy, and have authority and responsibility for the organization. Can a large BOD be effective? Nimble? Some task force members believe that they can, particularly with well structured board committees, and that a large board is more democratic. Other task force members believe that a small board, although seeming less democratic, can be more effective, efficient, functional, and would be able to meet more frequently. The subsequent wide-ranging discussion focused on such issues as how the large board could operate effectively through its executive committee, the officers’ roles under each structure, and the nature of democracy in an organization like ours.

Stephanie Smith, M.A., L.I.C.S.W., is vice-chair of the Reorganization Task Force. At the Boston Psychoanalytic Society and Institute, she is faculty, vice-chair of the Child Analysis Committee, an associate supervising child and adolescent psychoanalyst, and secretary for the society.

Regarding the fate of BOPS, there was growing consensus for choosing a subsidiary corporation model. The task force was concerned that a fully externalized BOPS would “eviscerate” APsaA of its educational functions and might violate the spirit of our agreement with the Psychoanalytic Consortium. The history of APsaA’s attempts to maintain BOPS within APsaA without a clear demarcation of roles led the task force to decide that there must be an adequate firewall to protect regulatory functions while ensuring that BOPS does not have an inappropriately dominant role in the Association. The subsidiary corporation model offers significant protection in both directions. The parent corporation (APsaA) can only fire the board of directors of the subsidiary corporation for being remiss in its fiduciary responsibilities or for posing a threat to APsaA by putting APsaA at financial risk. The subsidiary corporation would have separate bylaws, which offer more protection than having educational standards determined in the bylaws of the parent corporation. The presence of a substantial representation of APsaA on the BOPS board and some representation of BOPS on the APsaA board would ensure continued input in both directions.

The task force proposed and voted on the following motion:

We move that the Association form a Limited Liability Corporation, with the Association as its sole member (hereafter the Subsidiary Corporation) for the purposes of accrediting institutes and certifying graduates. The officers of APsaA, at least four at large elected representatives and at least two candidates, elected by affiliated candidate representatives of the APsaA shall serve as voting members of the Board of Directors of the Subsidiary Corporation. Each fully approved institute, provisionally approved institute, and new training facility having status.

Continued on page 41
Early Admission Program
Off to Fast Start in Michigan

Steve Nickoloff

The Michigan Psychoanalytic Institute has been fairly successful at recruitment, attracting an average of five to seven well-qualified candidates each year. However, in recent years we have become increasingly concerned that many, if not most, of our applicants were middle-aged, having received their training in another era; further, it had been 10 to 15 years since we had attracted significant numbers of medical applicants.

“We were completely losing the younger generation of psychiatry residents,” lamented Marvin Margolis, chair of the Strategic Planning Committee, which took up this issue as one of the institute’s most significant current challenges. “Our quite substantial teaching efforts were not having the desired effects.” Also, this class size was hardly sufficient for the needs of a state of over 10 million people. We felt we could, in fact must, do much better.

Meanwhile, a competing psychoanalytic group not affiliated with APsaA, with more flexible and generally less demanding requirements, was becoming increasingly successful in recruiting many younger colleagues who would have been quite suitable for analytic training with us.

We put together a small ad hoc committee to study the problem. We contacted or visited many psychoanalytic institutes around the country with innovative programs, and discussed the issues with residents who were known to have psychoanalytic interests, as well as recent graduates who had either not applied or moved to other cities.

LOGISTICAL CHANGES

We found that many psychiatry residents were interested in psychoanalytic training but felt put-off by a number of logistical issues. First, despite lots of teaching by analysts, most residents were not knowledgeable about our many educational programs, never or rarely had visited the institute, and generally did not feel welcome. A second issue involved scheduling: Our training program met for classes two weekday mornings per week, a commitment that residency directors adamantly opposed and for which they would not allow the residents to leave their clinical assignments. It was a deal-breaker: The final objection was financial: A nearly full-fee analysis was simply not possible on a resident’s salary, even with moonlighting income.

The end result of these difficulties was that many of the most talented residents were graduating, often moving to other states, without ever considering analytic training as a realistic option. In short, it appeared that our present system, designed several generations ago, was no longer in tune with today’s realities.

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OVERCOMING OBJECTIONS

Interestingly, the training directors at our four local psychiatric residencies, none of whom were particularly psychoanalytically oriented, ultimately expressed unqualified support for the program. This seemed to be the result of two factors. First, these proposals came in the context of a long-term experience of our faculty providing solid teaching and supervision; thus, we had established their trust and confidence. Second, by conceiving the program in a way that wrapped around the structure of the residencies, we addressed their main concern that the residents’ service obligations not be interrupted. Not only did their objections evaporate, they, in fact, came to see it as a selling point for their residencies.

This accomplished, we began several initiatives to publicize the program. We began offering informal evening gatherings with refreshments at analysts’ homes, combining...
Washington State Approves Mental Health Parity Law

Michael Gundle

Mental health parity for insurance coverage became law in the state of Washington in March 2005 when Governor Christine Gregoire signed the bill passed by both houses of the legislature. This was the culmination of an eight-year effort by a coalition of dozens of organizations representing clinicians and consumers. The Seattle Psychoanalytic Society and Institute (SPSI) played an active role from the beginning, starting with our decision to hire Laura Groshong to be our lobbyist in Olympia in 1997. Groshong is a social worker; trained in psychoanalysis, who combines clinical practice with part-time work as a lobbyist.

With remarkable persistence over eight years, she helped organize a network of lobbyists from all the mental health organizations in Washington as well as the state medical society. This network developed relationships with state legislators and educated them over time to the needs of our patients. It included organizations representing psychoanalysts, psychotherapists, psychiatrists, psychologists, social workers, physicians, consumers, and many others. In the last three years this coalition grew to include 126 different organizations. The coalition hired a well-known and charismatic former Seattle politician who energized the effort, largely by speaking publicly and often of his own bipolar disorder and its successful treatment.

When we started in 1997, Groshong told me, one legislator said to her that people didn't need mental health treatment; they needed religion. After eight years of work, many state legislators rose in the recent debate to speak openly of the mental health treatment from which their relatives had benefited, and some even spoke of the treatment they personally had received.

CLOSE VICTORY

This law almost did not happen. Many observers believe it only passed now because for the first time in many years, both houses of the legislature have Democratic majorities and the governor is a Democrat. However, those majorities are both very slim, and Gregoire's margin of victory in a highly contested election was exactly 129 votes!

Naturally, compromises were necessary. Each of the seven mental health organizations represented by lobbyists in Olympia had its own priorities. The psychologists and psychiatrists certainly had different positions on prescribing privileges. In weekly meetings the seven lobbyists agreed in the first few

months to set these differences aside in order to pursue the common goal of mental health insurance parity. It took several more years to come to agreement on exactly what to ask for in a new statute. Then Ron Bachman, a consultant who had worked on parity in 30 states, was brought in. He had the statistics to counter the message from the insurers and business interests that mental health care was too costly to be included as a mandated benefit. Agreeing to limit the mandate to companies with more than 50 employees was one way to keep the costs down. In the end, according to PricewaterhouseCoopers, this law will add only 0.5 percent to the premiums of most workers.

The final law requires companies with more than 50 employees that have group insurance for their employees to provide the same coverage for all DSM-IV diagnoses as they provide for any other medical condition.

NATURAL DEDUCTIONS

The coalition that formed to urge passage of this law has already decided to remain in existence for three more years in order to monitor the law's implementation. We understand that protecting mental health coverage will require a long-term, coordinated effort.

Of course, the final result will be determined by the way the regulations implementing this law are written. The coalition that formed to urge passage of this law has already decided to remain in existence for three more years in order to monitor the law's implementation. We understand that protecting mental health coverage will require a long-term, coordinated effort.

Although the state of Washington, since it insures itself, is not required to comply with this law, it has announced that it will. Some large self-insured corporations, like Boeing and Microsoft, are also expected to yield to pressure to comply with the new rules. The new law will not affect those with individual policies, and, of course, it will not help the state's 750,000 uninsured. In the end, however, it is estimated that 1.6 million Washingtonians will see an improvement in their mental health insurance coverage.
POLITICS and PUBLIC POLICY

Brave New World

Robert Pyles

“Our national healthcare system can no longer beguile itself with the myth that quality care involves only one doctor and one patient alone in a room where confessions are made and promises are kept….A visit with a physician may be the point of entry into the system for a given episode of illness, but it contorts the process and potentially undermines the quality of care to pretend that an institution can be reduced to a personification of the secret-protecting family doctor.”

This chilling testimony was delivered not by Darth Vader, as you might think, but by a lawyer for the American Hospital Association at a hearing of the National Committee on Vital and Health Statistics, Subcommittee on Privacy and Confidentiality, in Chicago on Wednesday, March 30, 2005. Industry representatives went on to agree that a national electronic health information system (a) should not permit patients to have any control over the information that goes into the system, (b) should pre-empt stronger state privacy laws, (c) should not be required to inform patients of non-routine disclosures of their personal health information as currently mandated by HIPAA (Health Insurance Portability and Accounting Act), and (d) should eliminate the “minimum necessary” standards currently required by HIPAA (these limit the amount of information that is permitted to be disclosed).

Jim Pyles and Prudy Gourguechon testified for the American Psychoanalytic Association and the contrast between APsaA’s representatives and the industry spokespeople could hardly have been starker. The Association testified that any national health information system should be solidly grounded in traditional standards of medical and professional ethics and constitutional law.

They quoted the Department of Health and Human Services themselves as noting, “The entire healthcare system is built on the willingness of individuals to share the most intimate details of their lives with their healthcare providers….More than anything else, the relationship between a patient and a clinician is based on trust.”

This meeting in Chicago was followed by a meeting in Washington, D.C., between representatives from the Association (Jon Meyer, Jim Pyles, and me) and top ranking representatives from the office of David Brailer, President Bush’s new czar for electronic medical records. We stressed the need for privacy safeguards to be built into any national electronic medical records system. This should include patient consent, patient control over “levels of confidentiality,” and accountability to the patient from those who would access information. Although we received a thorough hearing, it is difficult to know what the ultimate effect will be. Kathleen Fyffe of Brailer’s office observed ruefully that over 50 percent of large computer systems fail (other articles say 75 percent) and the ability to protect such systems from hackers is severely limited. With this in mind, we suggested that only minimal core information, such as that which might be needed in an emergency room, be entered into such a system. We suggested that “minimum necessary” core information agreed on between Oxford Health Plan and us could be used as a template. Fyffe was extremely interested, and asked for the relevant documents.

CONGRESSIONAL ACTION

We also met with Congressman Patrick Kennedy’s (D-RI) staff on April 29. On May 10, the congressman introduced the 21st Century Health Information Act of 2005 (HR 2234). The final version of the bill contains numerous privacy provisions based on recommendations we made to the congressman’s staff. Although the bill does not go as far as we would like to protect privacy (for example, there is no provision for patient consent), it is much improved over earlier versions. A Senate version of this bill is likely to be introduced in the future by Senator Hillary Rodham Clinton (D-NY) with Republican co-sponsorship. The purpose of the bill is to provide federal grants and loans to develop “interoperable regional health information networks,” i.e. electronic medical records. This bill, if passed, will go a long way toward creating the tightly controlled and totally inclusive managed care network that failed when the original Clinton Health Plan was defeated in 1994.

It is a world where insurance companies and HMOs increasingly insinuate themselves between us and our patients. Their goal is to erase the boundary between the role of the healthcare professional and that of the payer, and ultimately, to control all aspects of health care.
Psychoanalytic Community Sends Aid to Tsunami Survivors

Christine Ury

In the aftermath of the tsunami in Southeast Asia, the Baltimore Washington Center for Psychoanalysis has set up a Tsunami Survivor Mental Health Relief Fund to collect money to be sent to two trauma intervention groups, one in Indonesia and one in Sri Lanka.

In the Aceh province of Indonesia and Jaffna district of Sri Lanka, family and community life has been dramatically altered. Hundreds of thousands have died, gone missing, or been displaced by the tsunami that ripped across Southeast Asia.

The initiative to set up the fund came from Noreen Honeycutt, a member of the center and director of its consultation and referral service. Honeycutt, already involved in disaster response training and a member of the Maryland Volunteer Corps, felt “horrified and overwhelmed” upon hearing the news of the tsunami on December 26, 2004, and decided she had “to do something.” And so, she did.

Enlisting the help of Patrick Cody, community liaison director of the Baltimore Washington Center; Honeycutt set up mailing lists, flyers, and a national listserv. Donations totaling $13,000 have been received. Half the money came from a benefit concert organized by Lizbeth Moses, a member of the center; and the rest from all over the United States.

Cody got the co-directors of the National Child Traumatic Stress Network, Robert Pynoos and John Fairbank, to recommend contacts in Sri Lanka and Indonesia whom they had previously trained in trauma intervention. The two trauma intervention groups sent Honeycutt their assessments of the effects of the disaster on mental health. They also sent an outline of resources and mental health services needed and proposals for trauma intervention programs.

The first line of work that trauma workers have done is disseminating information about normal responses to trauma, such as shock, denial, intense emotions, and flashbacks. They have encouraged normal coping methods and the expectation of a natural recovery without psychiatric intervention. Trauma workers have also stressed supportive listening, reuniting families, and structured activities.

In areas that have been hard hit by the tsunami, trauma therapists are trying to integrate the community’s culture with trauma therapy. For example, in Aceh where the meunasah (village mosque) is at the center of the community’s culture, religion is very much part of the therapy. Suparatini said, “They have notions that the disaster should be viewed as honor from God, that they’re chosen as strong people to bear the loss and grief. It becomes easier for them to accept what happened because hundreds of thousands of ‘brothers and sisters’ suffer the same thing.”

One of the goals of Western psychological aid is to help the Southeast Asians to build and strengthen their own mental health support systems and infrastructure.

The cultural integration of local customs with therapy techniques is especially important because it allows the whole community to mourn together. Collective mourning helps to diminish the potential denial of the trauma at a societal level where severely entrenched and long-standing military conflicts can complicate conflicts created by the trauma and divide people.

One of the goals of Western psychological aid is to help the Southeast Asians to build and strengthen their own mental health support systems and infrastructure. With this in mind, Honeycutt states it is time for all psychoanalytic institutes to reach out beyond their own circles, be part of the community at large and respond to the tremendous needs of others in crisis.
A Psychoanalytic Perspective on Trauma: A Personal View from Paraguay

Michael I. Good

On August 1, 2004, a huge fire broke out in the multilevel Ycua Bolanos shopping complex in the outskirts of Asunción, the capital of Paraguay. Possibly due to a chimney fire or propane gas canister explosion in an oven, the conflagration occurred when the mall was thronged with about a thousand midday Sunday shoppers buying groceries and lunching at the food court. The death toll rose to over 460 adults and children, with many hundreds more seriously injured. When the fire broke out, it was reported that the doors were ordered locked to prevent theft, thus impeding escape. The loss of life was reported to be the most tragic single incident in the history of Paraguay. President Nicanor Duarte visited the scene and declared that three days of national mourning would begin August 2.

Although some 5,000 miles away, the fire was hardly a remote catastrophe to us in Boston when we learned about it on the news that evening. As we had planned for months, on August 2 my wife, younger daughter, and I would be leaving for Paraguay to visit our older daughter, a Peace Corps Volunteer in a faraway village, about an eight-hour bus ride from Asunción. The timing of our trip suddenly seemed most unpropitious. In a country surrounded by land, I had previously planned to meet José Arias, an adult and child psychiatrist who practices and teaches in Asunción. He would be my contact person in this third-world country where unusual things were reported to happen. We had been linked by Myron Belfer, an adult and child psychiatrist in the Department of Social Medicine at Harvard Medical School in Boston. Arias, who is on the psychiatric faculty of the University of Asunción, is the president of both the Paraguayan and the Latin American Associations of Psychiatry and Psychology for Infants and Adolescents (APPPIA and FLAPIA).

He received his psychiatric training at Johns Hopkins Medical School, had an analysis, and is both psychiatrically and psychoanalytically informed.

NEED FOR ANSWERS

Upon arriving in Asunción, I called Arias on his cell phone. We soon met and talked about the horrific fire and what he and his colleagues were doing in its aftermath to try to help surviving victims, their families, and the bereaved. There were a few dozen psychiatrists and perhaps a hundred or so psychologists and more social workers in the city. They had begun working within schools and municipal office buildings to find and treat the multitude of those with posttraumatic shock and grief.

With many questions about how to proceed, they were hungry for input about psychic trauma. But Paraguay has no psychoanalytic institute or society, so Arias asked me to give a lecture on psychic trauma from a psychoanalytic perspective. Since he is fluent in English, he would translate.

Having left the morning after the conflagration, however, I had not imagined nor prepared for an impromptu invitation to lecture. Because the journey was to have been a pleasure trip, I certainly had brought along no notes. Under the circumstances, however, I could not refuse the possibility of trying to be helpful. Fortunately, I had just been editing and contributing to a volume on current psychoanalytic views on trauma (including severe trauma), fantasy, and reality since Freud’s seduction hypothesis, so that some content was fresh in my thinking, [see “New Books by Members,” page 38]

After several days of touring the spectacular Iguazu Falls, Itapua Poty (my daughter’s locale), and the nearby threatened forest and ecosystem reserve of the Cordillera de San Rafael (ProCoSaRa), we returned to Asunción. Meanwhile, Arias had printed colorful flyers with the lecture title, “El Trauma Psicologico Y Sus

Effects En La Subjectividad” (Psychological Trauma and Its Subjective Effects). The program was organized by the Prevention Program for High Risk Behavior and Mental Health of the Municipality of Asunción, APPPIA, and FLAPIA.

DEFINING TRAUMA

Some attending the conference spoke English; Arias translated admirably for the majority. I talked about the history and evolution of the psychoanalytic concept of trauma, as well as clinical and diagnostic issues. One issue was that since it was so soon after the tragedy, one had to be aware of the possibility that some of the immediate acute stress and grief reactions would become the more chronically debilitating posttraumatic stress disorder

Continued on page 39
Honors for Distinguished Colleagues

Michael Slevin

Awards were presented at the 94th Annual Meeting of members in Seattle for distinguished contributions to psychoanalysis.

Brenda Solomon presented the National Psychoanalytic Woman Scholar Award to Nancy Kulish for her outstanding career as psychoanalytic clinician, author, and educator, and especially for her many contributions to the psychoanalytic understanding of the psychological development of women. She has inspired women, through her mentorship and scholarship, both to become psychoanalysts and to take early leadership positions. Under the auspices of this scholar award, she will be visiting the St. Louis and the Montreal psychoanalytic institutes.

After reviewing all of the major psychoanalytic literature for the year, the committee selected the paper both as representing a major body of research that has extended over Blatt’s career and as describing an important research project that demonstrates how psychodynamic constructs can assist in identifying patients who have different responses to different psychotherapeutic modalities.

The JAPA paper prize was awarded to Leon Wurmser for his paper, “Psychological Reflections on 9/11.” It was the first time an article-length book review won the prize.

Arthur Leonoff, a past president of the Canadian Psychoanalytic Association, was made an honorary member of APsaA. He noted, “There has always been a strong tradition of personal relationships between members of the Canadian and members of the American Psychoanalytic Association. These personal bonds and friendships have translated into close intellectual and professional ties over the years.”


Michael Slevin, M.A., is editor of TAP.

Committee on Scientific Activities Announces Third Annual Scientific Paper Prize Competition

The winning author will receive an award of $500.

Papers by North American authors (whether or not members of the American Psychoanalytic Association) are eligible for the prize.

Papers that are published by peer reviewed journals between October 1, 2004, and December 31, 2005, will be eligible. The judges will review the major psychoanalytic journals to identify papers for consideration, but applicants are invited to submit papers published elsewhere.

The deadline for submission is February 1, 2006.

Five copies of the paper and a cover letter should be sent to:

Robert Michels, M.D.
Chair, Subcommittee on Paper Prizes
418 East 71 Street, Ste. 41
New York, NY 10021
Jerome Winer Receives IPA Award

Rebecca Meredith

On June 9, 2005, Jerome Winer of the Chicago Institute for Psychoanalysis received the Award for Extraordinary Meritorious Service to the International Psychoanalytic Association (IPA). The award was presented by IPA treasurer Nadine Levinson at the Executive Council session at APsaA’s 94th Annual Meeting in Seattle.

Winer received the award for his service as chair of the Committee on Ethics for the IPA, a position he assumed in 1997 during the presidency of Otto Kernberg. Prior to his tenure as chairman, the committee had existed with a smaller membership under the leadership of Paulina Kernberg, but an official, unified ethics code had never been adopted. Aided by IPA attorney Tom Asher, a Massachusetts-based specialist in international law, Winer formed an 18-member committee representing the International’s three zones. Co-chair Edward Nersessian headed the North American Zone, Romulo Lander the Latin American, and Jorge Canestri, who assumed chairmanship after Winer’s term ended, headed the European Zone.

Robert Tyson, secretary general of the International during the revised committee’s initial years, describes the task it faced:

“This original committee had input from the American Psychoanalytic Association, as well as many other sources, which Winer and his colleagues integrated into two documents. One dealt with ethical principles and the other with procedures for their implementation. The drafts were distributed to all IPA societies with requests for feedback, which Winer and his committee processed into the final form of the new procedural code dealing with ethics. This code was passed by the Executive council in July 1999.

Kernberg attributes the panel’s success, in part, to the particular talents that Winer brought to his job. “He was one of our most effective committee leaders in the way he dealt with a delicate issue; always calm, cool, not letting himself get drawn into controversy. Because of this, his opinion was always respected. In his quiet way he was most efficient and a pleasure to work with,” Kernberg says.

Winer’s term ended, headed the European Zone.

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—Otto Kernberg

Matters of ethics in psychoanalytic organizations have long been a part of Winer’s curriculum vitae. He was initially approached by Kernberg and Tyson when he was a member of APsaA’s Committee on Psychoanalytic Education (COPE). As a COPE member, Winer had formed a study group to look into the problem of faculty analysts who may become impaired due to age, physical or mental illness, or other debilitating events. When the group became a committee of the Board on Professional Standards, he served as its first chair.

As a result of this study, Winer wrote the article, “BOPS Studies the Functionally Impaired Analyst,” for a 1993 issue of TAP (Vol. 23, No. 2). In his piece he listed some of the numerous challenges that analytic institutes face in dealing with a member’s impairment, including fear of becoming entangled in retaliatory legal action with a colleague and friend, a feeling of “there but for the grace of God go I” toward the impaired party, concern for the financial hardships that forced retirement might bring, and the lack of an accepted means of challenging a senior analyst’s authority. He also outlined his proposal for APsaA’s establishing a Psychoanalytic Assistance Committee to advise local institutes on creating impairment committees of their own.

“Our goal,” Winer comments, “was to have a committee in every institute so that members could get the assistance they need to get back into practice unimpaired or to transition out with dignity.”

Phase II of the ongoing work involves providing assistance to psychoanalytic societies in creating their own panels to deal with issues of impaired analysts before professional ethics violations occur.

Once in service to IPA, Winer says, he discovered unique challenges and rewards involved with doing international work. One of the most positive aspects of the job was getting to know people worldwide and finding out what kinds of ethical issues come up in various locales.

He also credits a certain amount of the group’s ability to work so effectively together on the recent ubiquity of Internet access. “The electronic age, just coming into being at that time, made communication possible,” he says. “We were able to communicate via e-mail with 18 committee members. Not having this ability may be one reason it was never done before.”

Tyson agrees, adding, “This was a landmark for IPA, and required Winer to adjudicate multiple standards, notions, and practices from more than 60 societies and in more than 20 languages. He served in exemplary fashion. There should be an Order of the Purple Couch and he, its recipient.”

The Extraordinary Meritorious Service Award replaced the IPA Distinguished Service Certificate in 1999. Since then, recipients have included David Sachs, Inga Villarreal, Anne-Marie Sandler, John S. Kafka, and Han Groen-Prakken all in 1999, and Ethel Specter Person in 2001.
At present, we are far more than a membership organization. We are a membership organization of professional psychoanalysts with an educational mandate. We are thus also a professional organization committed to helping educate the next generation of psychoanalysts for the public good. As a membership organization, we must regard being responsive to the needs and desires of our members as an important value. As a professional organization, safeguarding the public interest must be our primary concern. To me, this is what is at stake in all of the changes we are contemplating: Do we exist to serve ourselves? Or do we exist to serve the public? Our Association has always functioned as a professional organization, committed to serving the public. Our Association may have been slow to adopt needed change as time and circumstances have changed, but if so, it is because we have been guided by the ideal of working in the public interest as we have moved thoughtfully and carefully forward. My deep wish is that we will continue to be guided by that ideal. If not, we will have lost our soul.

In Memoriam

Warren J. Barker, M.D.  
October 4, 2000

H. Robert Blank, M.D.  
March 16, 2005

Herbert H. Cibul, M.D.  
January 21, 2005

Richard K. Cole, M.D.  
February 15, 2005

George C. Darr, M.D.  
December 23, 2004

Marshall Edelson, M.D.  
January 16, 2005

Rudolf Ekstein, Ph.D.  
March 18, 2005

John J. Francis, M.D.  
March 14, 2005

Mary E. Giffin, M.D.  
October 25, 2002

Gene Gordon, M.D.  
April 1, 2005

Suzanne Kaufman Kling, M.D.  
March 2, 2005

Donald G. Langsley, M.D.  
January 13, 2005

Alfred A. Messer, M.D.  
December 29, 2004

Steven E. Clarke, M.D.  
March 10, 2005

Robert A. Savitt, M.D.  
March 10, 2005

Isadore Spark, M.D.  
April 3, 2005

Brandt F. Steele, M.D.  
January 19, 2005

Jacob E. Stump, Jr., M.D.  
September 25, 2004

Cibeles E. Vidaud, M.D.  
April 4, 2005

Certified in Adult Psychoanalysis by the Board on Professional Standards  
June 8, 2005

Steven E. Clarke, M.D.
Fred L. Griffin, M.D.
Andrew C. Lotterman, M.D.
Janice Mill, Ph.D.
Cordelia Schmidt-Hellerau, Ph.D.
Sharen Westin, M.D.

Psychoanalytic Research

There were only 11 papers, and none discussed language, family, culture, somatic symptoms, dreams, or any of a number of other subjects that have engaged the interest of psychoanalysts interested in research and researchers interested in psychoanalysis. However, we believe that even this small sample demonstrates that the field is alive and well, although still in its infancy and in need of support and nurturance. One cannot predict what its future will deliver—that is the nature, and the fun, of research. However, based on this evidence one can promise those interested in entering the profession not only currently rewarding clinical experience but also new ideas, new findings, and continued scientific growth.
How to Participate in APsaA's Scientific Program

Scientific papers for oral presentation must be no longer than 22 pages, double-spaced; longer papers (40 pages maximum) are considered for pre-circulation and small group discussion. Include an abstract and submit eight copies. JAPA has first claim on any paper accepted for presentation or pre-circulation.

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

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

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

The deadline for submission of panel proposals is October 1 for the Winter Meeting and March 1 for the Annual Meeting.

The deadline for all other submissions is May 1 for the Winter Meeting and December 1 for the Annual Meeting.

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

APsaA Foundation Announces 2005 Grant Awards

The American Psychoanalytic Foundation Committee (APF) of APsaA is pleased to announce that the following grants were recently approved.

San Francisco Foundation for Psychoanalysis Pre-School Consultant
Project of the San Francisco Psychoanalytic Institute and Society Child Development Program—$2,000 grant

Massachusetts General Hospital and J. Stuart Ablon
Transfer and archiving of the Berkeley Psychotherapy Research Project’s archive to Massachusetts General Hospital—$2,000 grant

St. Louis Psychoanalytic Institute
Library Outreach Program—$2,000 grant

Wisconsin Psychoanalytic Society
Support for a forum at the NAACP Annual Meeting in July 2005 on the psychology of racism—$2,000 grant

Susan Lazar, M.D.
Publication of a monograph, “Is Psychotherapy Worth It? Costs, Social Cost and Cost Effectiveness”—$2,000 matching grant

Affiliate Council of the American Psychoanalytic Association
Scientific Paper Prize—$750 grant

The APF provides small grants for outreach programs to the community. APsaA members, institutes, societies, and centers across the country are eligible to apply. Be sure to review the grant guidelines at http://www.cyberpsych.org/apf/apfguide.htm to see if you can realize your project by applying for funding from the APF.

The next deadline for APF grant applications is October 15, 2005. Don’t miss out on this opportunity! Grant proposal guidelines may be downloaded at http://www.cyberpsych.org/apf/apfguid
New books by members

In 2004 and 2005 members of APsaA wrote or edited the following books.


Salman Akhtar ed. Freud along the Ganges: Psychoanalytic Reflections upon the People and Culture of India. The Other Press, New York.


Fredric N. Busch, Marie Rudden, and Theodore Shapiro, Psychodynamic Treatment of Depression. APPI Press, Washington D.C.

Stuart Feder, Gustav Mahler: A Life in Crisis. Yale University, New Haven.


Gerald J. Gargiulo, Psyche, Self and Soul (Rethinking Psychoanalysis, the Self and Spirituality). Whurr Publishers, London.


Benjamin Kilborne, Persone che scompaiono: vergogna e apparire. BORLA Roma.


Maria Ritter, Return to Dresden. University Press of Mississippi, Jackson, Miss.


Frank Summers, Self Creation: Psychoanalytic Therapy and the Art of the Possible. Analytic Press, Hillsdale, N.J.

If you are the author of a book published in 2004 or subsequently, and would like to see it listed in TAP, please send the title with your name, publisher, publisher’s location, and publication date to Michael Slevin at Slevinm@aol.com.
and some would not. In psychoanalytic terms, trauma is defined not by the event but by the intrapsychic effects.

A comparable disaster was the Cocoanut Grove nightclub fire in Boston some 60 years ago, which is a prototype in the study of trauma and bereavement due to conflagration. The human factor in causing a disaster is a troublesome contributor to traumatic outcome. In this case, the doors had been locked, and there was palpable rage as well as grief among survivors and families.

The audience was very receptive and responsive. Some shared their experiences with individuals and families. Among the issues we discussed were sleep problems, survivor guilt and grief, the possible need to wait for traumatized persons’ readiness to talk about their overwhelming experience, longer-term therapeutic planning in the community at large, the notion of transmission of trauma through projective identification, and the countertransference stresses on treaters and other helping persons. Given past Paraguayan tragedies, I wondered with them how the nation’s history might affect the individual experience of trauma. After the gathering, which lasted over two hours, Arias expressed his wish for a return engagement.

In a related development a psychology trainee planned to travel to the U.S. to take a course on psychic trauma. Also, a link with another Peace Corps Volunteer led to the referral of a host family in a remote area whose daughter had come to Asunción to work as a cashier at the shopping complex and, sadly, had perished in the fire. Arias offered to see her family, who were overwhelmed with grief and could not sleep.

Meanwhile, Paraguay is now suffering further because of extreme drought and ruined crops. In the arid conditions at the reserve of Pro-CoSaRa, thousands of hectares of forest burned in February 2005. In the wake of all these great tragedies, it is heartening to know that there are Paraguayans who, like many others in our field in South America, have an interest in viewing the extreme range of human experience through a psychoanalytic lens.
**Oxford Behavioral Health**

*Continued from page 22*

5. CPT code or description of service
6. Other session participants
7. Focus of psychotherapy session.

In addition, psychiatrists are required to supply a brief description of medical evaluation and medication management services. The policy explicitly states: “This policy does not replace professional standards of record keeping or the clinical record-keeping requirements of state licensure law, governmental agencies, or other third party payers.”

Oxford does not cover psychoanalysis or modified psychoanalysis under CPT code 90845. The new documentation standards pertain to charting and reporting psychotherapy only. Practitioners who did not meet Oxford’s documentation standards may have been following the American Psychoanalytic Association’s six practice guidelines, which pertain to psychoanalytic treatments coded under CPT code 90845. These guidelines help clinicians set up and safeguard the necessary conditions for effective psychoanalytic treatment and may be viewed in the Practice Bulletins posted on the Association’s Web site at: http://www.apsa.org/ctf/pubinfo/NewsRoom/practice_bulletins.html.

Oxford’s new documentation standards policy includes the following noteworthy points:

1. Information specified as required by the policy statement is the maximum that can be requested for regular and routine documentation review.
2. If further information is needed by Oxford, a separate and contemporaneously signed HIPAA-compliant authorization from the patient/subscriber must be sought by Oxford rather than placing the burden on the clinician to obtain consent, which would put the clinician between the insurer and the subscriber.
3. Information released for “regular and routine healthcare operations” should be maintained separately from psychotherapy notes so that, in conformance with HIPAA protections and the Association’s practice guidelines, psychotherapy notes are explicitly excluded.
4. Clinical information only reports the clinician’s actions, for example, “assessed psychosocial issues,” “prescribed medication,” or “updated mental status.” The content of the patient’s material is not requested and need not be reported.

The template or “Psychotherapy Treatment Record” that was developed to conform to the new documentation standards policy is notable for its simplicity and is optional in filing claims.

“The successful conclusion of our negotiations with Oxford is a cause for celebration,” said Meyer. “It is the first time that psychoanalysts and psychodynamic psychotherapists have been represented in direct negotiations with an insurance carrier to preserve the patient’s fundamental right to privacy and confidentiality and in so doing take a crucial step toward ethic-based treatment. Oxford, after having been a cause for much concern, now deserves enormous credit for their decision that ethics-based practice is good business practice.”

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**PSYCHOTHERAPY TREATMENT RECORD**

*Basic Information*

<table>
<thead>
<tr>
<th>CLINICIAN NAME ________________________________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>PATIENT NAME ________________________________________________</td>
</tr>
<tr>
<td>DATE OF SERVICE _____________________ (m/d/y) ____________________</td>
</tr>
<tr>
<td>DIAGNOSIS: DSM-IV / ICD-9CM CODE or Focus of Treatment ________</td>
</tr>
<tr>
<td>CPT CODE ___________________________________________________</td>
</tr>
<tr>
<td>OTHER SESSION PARTICIPANTS □ Parent □ Spouse □ Child □ Friend □ Other ________________________________</td>
</tr>
<tr>
<td>Reason for participation □ Family Therapy □ Marriage Counseling □ Collateral to Individual Therapy</td>
</tr>
<tr>
<td>FOCUS OF PSYCHOTHERAPY SESSION (check one or more)</td>
</tr>
<tr>
<td>□ Assessed family, work, marital, and/or social issues</td>
</tr>
<tr>
<td>□ Assessed symptoms of patient’s illness or condition</td>
</tr>
<tr>
<td>□ Assessed patient’s functional status (home, work, daily living, social activities, family, etc.)</td>
</tr>
<tr>
<td>MEDICAL EVALUATION &amp; MANAGEMENT SERVICES (Psychiatrists Only for 90805 and 90807) (Check one or more)</td>
</tr>
<tr>
<td>□ Prescribed medication</td>
</tr>
<tr>
<td>□ Assessed efficacy of current medication, side effects, and adverse reactions</td>
</tr>
<tr>
<td>□ Discussed medication with patient</td>
</tr>
<tr>
<td>□ Assessed and/or updated patient mental status</td>
</tr>
<tr>
<td>□ Assessed and/or discussed non-psychiatric health issues</td>
</tr>
<tr>
<td>□ Discussion, consultation, and/or coordination of care with:</td>
</tr>
<tr>
<td>□ Physician □ Other healthcare professional □ Family member □ Caretaker</td>
</tr>
</tbody>
</table>

Signature ___________________________________________________________________
**Letters to the Editor**

TO THE EDITOR:


For the record, neither the membership nor the leadership of the White Institute has sought to initiate an application to join the Association at this time. Representatives of the White Institute and the Association’s leadership have engaged collegially in exploratory discussions about matters of mutual interest over the past 10 years or so, and we have accepted the Association’s gracious invitations to send liaison representatives to the recent BOPS and Executive Council meetings in Seattle in June 2005. We look forward to continuing this dialogue.

TAP welcomes letters to the editor. Letters must be less than 350 words long. Letters will be printed as space necessary by the editorial board.

As a matter of historical accuracy, the White Institute last initiated an application to join the Association more than 55 years ago, in November 1948, at a time when the institute qualified under existing rules. This application was deferred for more than four years, during which a number of qualifying rules were changed by the Board on Professional Standards. Following a face-to-face meeting with the Association’s Committee on Institutes in November 1952, during which issues of theoretical divergence and training practices emerged as apparently insuperable obstacles, the White Institute formally withdrew its application, with regret.

Thank you for this correction.

Jay S. Kwawer, Ph.D.
Director of Clinical Education
William Alanson White Institute
of Psychiatry, Psychoanalysis
and Psychology
New York

We apologize for the error. Thank you for the correction.

Michael Slevin, Editor

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**Task Force**

Continued from page 28

as of January 2006, shall have representation on the Board of Directors of the Subsidiary Corporation. Until the Subsidiary Corporation is formed and approved, the accrediting and certifying activities on behalf of the American Psychoanalytic Association will remain in the province of the current Board of Professional Standards. The Subsidiary Corporation shall be represented on the Board of Directors of APSaA.

All members of APSaA are eligible to serve on Committees and the Board of Directors of the Subsidiary Corporation.

We will instruct our attorney to develop language that achieves the following: the Board of Directors’ interventions in the Subsidiary Corporation shall be limited to discharging the Board of Directors of the Subsidiary Corporation.

The motion passed 11 to 2, with one abstention. Most task force members were pleased with the solution and ready to move on to further decisions. Future planning includes monthly telephone meetings, with the availability of weekly telephone meetings if needed, and a third retreat in September. The task force is committed to providing a written document in January 2006 and providing the necessary bylaws by June 2006.

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**Michigan**

Continued from page 29

information, conviviality, and usually a clinical presentation. This seemed to facilitate the building of relationships, and residents came to see us as more approachable and welcoming. We arranged to give formal informational presentations on the program to all residents at each of the residency programs. Also, we coordinated these efforts with those of our Student and Trainees Association (SATA) and sent informational mailings. We worked with our faculty on the importance of discussing training opportunities as part of their teaching.

Mel Bornstein, our liaison to one local residency, noted: “It is crucial for our faculty to have active roles in the local educational initiatives, to be available and encouraging to trainees, to be sources of identification. Institutes cannot survive if they are insular and apart from the training facilities.”

Barely more than a year after beginning these initiatives, our efforts appear to have paid off. We are delighted to have five applicants to the program; four have been accepted. All are psychiatric residents, from PGY-1 through 4. They are a very bright and motivated group; while much younger and less experienced than our typical applicants, they give every indication of the potential to become excellent analysts. Several of them felt that it was the individual mentoring and encouragement to apply that they received from faculty that were most instrumental in their decision.

Al Garmo, a recently accepted PGY-4 applicant, said, “It’s what I imagined psychiatrists really doing. I was taken with their deep understanding of patients and their obvious enthusiasm. I wanted to be part of that, and [the Early Admission Program] made it practical.”

We anticipate in the near future half of our candidates may be products of our Early Admission Program. In a parallel way, we would like to offer the same opportunity to psychologists and social workers and have begun the multi-step process of obtaining approval at the national level for such initiatives. We hope that our program will serve as a model for other institutes as they reach out to a new generation of psychiatry professionals.
Got Committees?
Ideas on How to Get Involved
Debra Steinke

So you are an APsaA member, maybe new or maybe not so new. And you would like to get more involved and serve the psychoanalytic community. But where do you begin?

From public information to access to care and government relations to insurance, APsaA has over 100 committees. There are standing committees of the Executive Council (EC), standing committees of the Board on Professional Standards (BOPS), joint committees, ad hoc committees, subcommittees…

This can look overwhelming especially to someone new to the Association. APsaA is working to create a user-friendly network of committee point people who will help to best utilize your talents on the right committee.

HOW CAN I JOIN A COMMITTEE?
The first step is to peruse the Association’s list of committees that is located in the Member’s Only section of the Web site: http://www.apsa.org/closed/index.htm and click on Association Committee Listing and Committee Mandates to review their responsibilities. Once you have an idea of what is available, contact APsaA’s secretary, Prudy Gourguechon (prudygourguechon@sbcglobal.net)

Your Member Benefits Are At Work for You.
Connecting a New Computer to the Internet

Paul W. Mosher

It’s a depressing fact of life that unprotected computers connected to the Internet are not only vulnerable, but, in fact, are very likely to be compromised. Hostile computers running programs called, “bots,” are constantly scanning the Internet for unprotected computers, and immediately exploiting broadband connections of naive home users. An experiment carried out in late 2004 showed that a new computer running any version of Windows that is less up to date than Windows XP with Service Pack 2 already installed. If you use a version of Windows XP which needs to be updated to Service Pack 2 via the Internet, you will not have time to do the upgrade before being attacked.

An experimental set-up was obtained a copy of a free software firewall, such as Zone Alarm, by downloading it with a different protected computer, and installing it on the new computer before putting the new computer on line. There would probably not be sufficient time to go to the Zone Labs Web site to download the program with the unprotected computer itself.

As soon as the new computer is connected, install and update your virus checker, and install and update a spyware and adware blocker. This is the minimum protection you must have.

Paul W. Mosher, M.D., is a councilor-at-large of APsaA, a founding board member of Psychoanalytic Electronic Publishing, and a long time computer hobbyist.

New Members (as of June 2005)

ACTIVE MEMBERS
Ann E. Alaoglu, M.D.
Sarah Rabb Bennett, L.M.S.W.-A.C.P.
Paula Christian-Kiger, Ph.D.
Norma I. Cofresi, Ph.D.
Carla Elliott-Neely, Ph.D.
Mark Fabi, M.D.
Esther Fine, Ph.D.
Lynn V. Friedman, Ph.D.
Hilde Fromm Gasiorowicz, M.S.W., B.C.D.
Maria Teresa Greig-Custo, M.D.
Beatrice B. Griffin, L.I.S.W., M.S.S.A., B.C.D.
F. Delia Kostner, Ph.D.
Joan Lentz, Ph.D.
Edwin Ira Levy, Ph.D.
James Naiman, M.D.
Tamar a Razi, M.D.
Susan H. Stones, L.C.S.W., M.S.S.W.
Scott A. Turpin, M.D.
Barbara Zimmermann-Slovak, Ph.D.

AFFILIATE MEMBERS
William Howard Braun, Psy.D.
Barton W. Bryant, Ph.D.
C. Martin Bullard, M.S.W.
Kourosh Dini, M.D.
William Dinneen, Ph.D.
Robert T. Elliott, M.D.
Diana C. Fuery, Ph.D., L.C.S.W.
Laura J. George, D.S.W.
Bernadette S. Kovach, Ph.D.
Varsha Morar, M.D.
Theresa L. Rieth, Ph.D.
Michele Rosenberg, M.D.
Bruce E. Rudisch, M.D.
Etta L. Sandler, L.I.C.S.W.
Janet M. Schwind, Ph.D., L.C.S.W.
Jane G. Tillman, Ph.D.
Michael Weiss, M.D.
ASSOCIATING WITH APsAA

AFFILIATION CATEGORIES FOR EDUCATORS, STUDENTS, PSYCHOTHERAPISTS, RESEARCHERS

Over the last several years, APsAA has developed a number of categories of affiliation to allow colleagues and friends interested in psychoanalysis to establish a tie to our organization. Associates of APsAA get more out of the national meetings, can start to network nationally with like-minded professionals, and contribute to the richness and vibrancy of the psychoanalytic community. Each Associate category is sponsored and supported by a committee of the American Psychoanalytic Association.

EDUCATOR ASSOCIATE—available for teachers and administrators at all levels of education, pre-school through college, who are interested in the application of psychoanalytic principles in classrooms. Any educator who is sponsored by a member of the American Psychoanalytic Association is eligible. Yearly enrollment fee: $25.00

PSYCHOTHERAPIST ASSOCIATE—available for psychoanalytic psychotherapists with a minimum of a master’s level degree and licensed and/or certified by the state in which they practice. Individual Psychotherapist Associates are listed in a National Directory of Psychotherapist Associates, prepared annually. Yearly enrollment fee: $50.00

RESEARCH ASSOCIATE—available for research scientists, research oriented clinicians, and others with an interest in psychoanalytically oriented research. The sponsoring committee will facilitate presentations of research at psychoanalytic meetings. Yearly enrollment fee: $40.00

STUDENT ASSOCIATE—available to medical students, psychiatric residents, psychology, social work, and graduate students of all academic disciplines. Yearly enrollment fee: $25.00

Standard benefits provided to Associates in all the above categories include reduced APsAA meeting registration fees, advance notification of meetings, and subscriptions to this newsletter. Reduced subscription rates to the Journal of the American Psychoanalytic Association (JAPA) are also available.

Please note: Individuals who qualify for full APsAA membership are not eligible to join as Associates.

Contact APsAA’s national office for more information: 212-752-0450 ext. 26. E-mail: membership@apsa.org. Or go to the APsAA Web site, apsa.org, to download the latest brochures.