Jonathan Shay is internationally renowned for his groundbreaking work on the psychological sequelae of war. His two books, Achilles in Vietnam and Odysseus in America, have created new and deep insights into the nature of these injuries. Shay has compared his work with Vietnam veterans to the descriptions of battle trauma in the works of Homer, providing new perspectives on issues related to the traumatic effects of combat that are as old as mankind itself. In recognition of his work, Shay was honored with a MacArthur Fellowship. Shay was the keynote speaker at the Presidential Symposium of APsaA’s Winter 2009 Meeting; an excerpt from his moving presentation entitled “The Long Haul: Healing the Wounds of War” follows. It is also available on the American Psychoanalytic Association Online Audio Library at http://www.apsa.org/onlinelibrary. This excerpt opens with his introduction by Robert Pyles.

I consider it a singular honor to have the opportunity to introduce Dr. Shay. I can think of no more fitting speaker to begin our Association’s Soldiers and Veterans Initiative introduced by our president, Prudy Gourguechon. I believe you will find Dr. Shay’s work fascinating, and his personal story as moving as those he writes about. Dr. Shay.

It really is a great pleasure to be here. Dr. Pyles’s enormously generous introduction has given me a license to tell you some of the rather sweet story—I hope you’re moved in that sense—of how these two Homeric books on war and returning from war came to be. I’ve also discovered that there’s a “man bites dog” newsworthiness to my improbable career.

I went to work for the VA in 1987 expecting to do something utterly, utterly different. I was expecting to re-open the experimental neuropathology laboratory that I had had at Mass General Hospital, and the veterans kidnapped me. They saw something in me that I for sure didn’t see in myself, and they redirected my life by at least 90 degrees. And I thank them for it. Another way that the veterans redirected me is that I have learned over 20 years that while they are a very contentious bunch who will argue about anything, the one thing that they are absolutely unified on is they don’t want other young kids wrecked the way they were wrecked.

And so it is the veterans who have set my feet on the missionary path. I describe that when I speak with active duty folks as a missionary from the veterans I serve. They don’t want other young kids wrecked the way they were wrecked, so listen up.

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Correspondence and letters to the editor should be sent to TAP editor, Janis Chester, at jchestermd@comcast.net.
When my children were in grade school, they were taught to write essays by a method that spooked me. They had to write an introductory paragraph listing three points they were going to make, then write three paragraphs, one on each point, and a concluding paragraph saying what they had said. This technique was stunning in its lack of creativity, but somehow comforting in its rigid structure. I secretly envied the structure and certainty. How calming to know exactly where you were in an argument or a process. And perhaps this pedagogic method did not really teach writing, but it certainly reinforced accountability.

For this presidential column, I decided to adopt some of that elementary structure and demand for accountability. It is now a year into my service as your president—halfway through my term. What did I say I was going to do? What did I do? How did I do at doing what I said I was going to do?

This exercise is as much for myself as it is for you. One of the frustrations of the APsaA presidency, acknowledged by many of my predecessors, is that you feel you are elected to accomplish certain goals. Goals associated with improving practice or the state of psychoanalysis in the United States. Goals, you hope, that would make analysts proud to be APsaA members. And then you quickly face a host of distractions in organizational preoccupations with governance and other intercurrent crises that lead to a diversion from one’s goals. I believe our organization still spends far too much time dealing with governance, and conflicts over governance, when the only point of governance is to allow us to accomplish our mission of serving members and advancing the profession of psychoanalysis. In all we do organizationally, we should be continuously asking ourselves if the effort spent best serves the members, the profession, and the public.

Reviewing my original campaign platform and early TAP articles, I can list these original goals:

- Focus on societal issues, especially veterans and their families
- Form a comprehensive Education Department
- Attend to outreach and membership needs
- Support ongoing and new activities in advocacy, public information, and communications, as well as psychoanalytic science, psychoanalytic education, and psychoanalytic psychotherapy
- Promote a personal analyst system
- Bring to fruition an expanded membership pathway
- THE STATUS OF THESE EFFORTS Socio-political Issues

We have created a template for position statements to guide committees unfamiliar with this mode of action. Position statements are a key step in ensuring a psychoanalytic voice on a wide range of important social issues. A statement opposing corporal punishment of children is in the works. The Soldiers and Veterans Initiative (SVI) has accomplished quite a bit, with a strong section on our Web page, several position statements, a dedicated Internet discussion group, several press placements, and the moving article by Russell Carr, a candidate stationed in Iraq, in the last TAP, calling us all to service. A specially designed logo called attention to SVI activities and various speakers and sessions at the January 2009 Meeting, including the Presidential Symposium with Jonathan Shay. We are now identifying our focus for a next stage of activity.

Education Department

This project has far exceeded my wildest hopes. The outreach Education Division is morphing into an Education Department, a common structure in successful nonprofits.

Societal Issues

We are currently analyzing the results of the Member Needs Survey that was distributed...
Advocacy efforts continue to be strong, with our special expertise in privacy playing a pivotal role in the formulation of the privacy provisions of the electronic medical record portion of the Obama stimulus package.

The American Psychoanalytic Foundation supports outreach efforts, and APsaA’s director of public affairs, Dottie Jeffries, conducts an excellent workshop at the meetings. But the Committee on Foundations, a major site for the dissemination of information on outreach projects, has disbanded. Also gone is Forward!, the newsletter that featured outreach efforts. Outreach is something that happens locally, but inspiration and communication about outreach projects has to be done nationally as well. It’s a tricky thing to embed in our national organization and I plan to give it more of my attention in the year ahead.

SUPPORTING ONGOING AND NEW EFFORTS

The Psychoanalytic/Psychodynamic Research Society has received seed money and is pursuing incorporation. The Roose/Columbia pilot study has been funded. Our science committees are extremely active and working in a strong collaborative way.

Public information and communications has been strong for a long time, but it also requires much ongoing maintenance and attention. The Executive Committee just approved an upgrade in the content management system of our Web site which will have numerous benefits including the ability to host blogs, a function that improves our standing in Internet searches. At the encouragement of the staff, I have started a president’s blog as an experiment. We need to modernize the Find an Analyst feature on the Web site so that it includes pictures, maps, and personal Web site links. The Web site should be updated more regularly.

We are completing a communications plan that sorts out various possibilities and sets priorities among the burgeoning new media opportunities. A wise consultant has advised us to concentrate on our own Web site, and avoid the temptation to get involved in a great number of social media sites. A terrific new feature of the APsaA Web site is our new audio library—a very long time in anticipation and finally arrived.

Advocacy efforts continue to be strong, with our special expertise in privacy playing a pivotal role in the formulation of the privacy provisions of the electronic medical record portion of the Obama stimulus package. We can expect many more developments on the health-care front in the next year, and should be alert to their effects on our members.

Regarding the personal analyst system: No, I have not made that happen, nor can I alone. However, the discussion recently undertaken within BOPS of the two-track system that Lynne Moritz and I suggested last year does allow for the possibility that a group of institutes wishing to make slight or even radical changes in the training model could assemble and with great collaborative effort produce an alternative set of standards that would be different but no less excellent. I think this is the best available opportunity for change.

The issue of expanding membership to include those who have trained outside the institutes of the Association or IPA is now in the hands of the membership in the form of a proposed membership bylaw amendment that will make it possible, if it is approved, for individuals with equivalent training to apply for membership. I strongly support the bylaw amendment and encourage you to do so as well. I believe passage of this amendment will only benefit our profession and our Association, and will not hurt it in any way.

I will spell out the following goals for the remaining half of my presidency, in addition to not dropping the threads that have already been woven into something strong and interesting:

• Examine our organizational stance towards supporting outreach efforts and propose needed structures to improve this support
• Finish the communications plan and the updating of the infrastructure of our Web site, with consolidation of the audio library, blog (add a science blog), and an enhanced Find an Analyst feature
• Identify a meaningful next focus for the Soldiers and Veterans Initiative and set up a structure to monitor the Obama health-care plan as it evolves

This deliberate gaze backward leaves me pleased with what’s been accomplished. At the same time, I am left with a cautious feeling. Our organization is at once incredibly vibrant and able to accomplish a tremendous amount.

We need to watch our tendency to get preoccupied with governance issues at the expense of programmatic focus. We must keep our attention always on what we the members need and want to have for successful professional lives, and what we need to do to advance our profession of psychoanalysis and realize its potential in contributing its unique insights to the larger world.
Certification Examination Committee: Status Report

Written in collaboration with the Certification Examination Committee

The Certification Examination Committee (CEC) is fully aware of and very concerned about the problems involved in having an organization with both membership and accreditation aspects, the controversies about the relationship between certification and appointment of training analysts, and the serious difficulties in conceptualizing and carrying out a fair and informative certification exam in psychoanalysis. Much discussion and/or research is being conducted on all three levels.

As these larger and very complex issues are being sorted out, the current CEC is committed to improving certification and providing the best process possible. As Abraham Lincoln stated in his 1862 Annual Message to Congress, “We can succeed only by concert. It is not ‘can any of us imagine better?’ but ‘can we all do better?’… Object whatsoever is possible, is not ‘can’ but ‘can we’ do better?…’

The CEC has an evaluative function and, on several levels, educative aspects as well. The CEC continues to strive to improve in all areas. Above all, the CEC wants to help applicants succeed.

Research is essential to the CEC, and the CEC has been actively involved in research on many levels. As noted above, studies of validity occurred over the past several years, with one result being the psychoanalytic competencies. This work, under the direction of the late Stuart Hauser, was conducted in collaboration with the CEC and a group of non-CEC scholars and clinicians. More recently, with the assistance of Isaac Galatzer-Levy, studies of inter-reliability have been performed, on both the 11 major groups and also the several subgroups. The inter-rater reliability correlations have been very high (p<.001). In addition, in 2009 the CEC began conducting exit interviews and written surveys. The exit interviews resulted in suggestions about CEC procedures specifically and ideas about psychoanalytic education in general; nearly all the interviewees commented spontaneously about how much they had learned in the process of writing up their cases. The exit survey was anonymous and comprised both specific questions as well as an open-ended section. Questions such as “Were the interviewers courteous, respectful, and collegial?” and “Were you satisfied with the interviewers’ understanding of your cases?” were ranked on a negative-to-positive scale, and the applicants ranked these very positively; the applicants also had several excellent suggestions in the open-ended section.

With respect to future directions of the CEC, three issues stand out. First, research will continue in several areas, particularly on the interviews and inter-rater reliability. Second, the Alternative Certification Process (ACP) will be assessed following its initiation in the spring of 2009; the number of applicants will be expanded if it proves effective. Third, the CEC will work with the Committee on Institutes (COI) to consider integrating certification with pre-graduate education. This would mean reconceptualizing certification and having a two-part or possibly three-part evaluation, with applicants able to take parts of the exam during their candidacy if they choose, much like the National Boards in medicine or the dissertation process in psychology. This process would also allow for more discussion and collaboration between local institutes and national committees on issues of curriculum and clinical standards. As always, your thoughts and ideas are encouraged and welcomed.

Editor’s Note: The Board on Professional Standards invited the Certification Examination Committee to submit a column for this issue. The regular BOPS column will return in the next issue.
BOPS and Council Report

Highlights from January 2009 Meeting

Jane Walvoord

AFFILIATE COUNCIL REPORT

Laura Jensen, the outgoing president of the Affiliate Council, reported that the Affiliate Council is developing a blog site that will increase the dialogue among candidates. It will allow for posting photos of meetings as well as polling and informing candidates about important issues facing the Association. The site will be available to all candidates, including those who are not yet members, thus encouraging Affiliate membership. This was Jensen’s last report as Affiliate Council president. Jensen was thanked with a standing ovation.

INNOVATIONS OF CERTIFICATION EXAMINATION COMMITTEE

Paul Holinger, chair of the Certification Examination Committee (CEC), reported that new applicants for certification are now assigned a writing mentor for the purpose of making the certification process a better learning experience. If applicants are better prepared and know more about what to expect when they enter the interview, the encounter stands a better chance of becoming a rewarding and educative experience. An exit survey and interview are underway in order to gain valuable feedback for the CEC to evaluate the usefulness of their methods and procedures.

PSYCHODYNAMIC/PSYCHOANALYTIC RESEARCH SOCIETY (PPRS)

In recognition of the vision of Stuart Hauser and with thanks to others, Linda Mayes presented a formal proposal to the Executive Council for a separate but affiliated research society. PPRS will be a not-for-profit membership corporation with APsaA as the sole member. PPRS will provide a home for investigators who are not eligible to become members of APsaA or IPA. APsaA meetings will be enriched since PPRS will hold its meetings simultaneously, allowing the researchers to meet and form an identity with APsaA and its members.

PROJECT FOR INNOVATION IN PSYCHOANALYTIC EDUCATION (PIPE) REPORT

PIPE has been focusing on the immersion standard for training analyst (TA) appointment. This standard needs to be updated because many analysts today have fewer patients in analysis and some institutes have an urgent need for training analysts. The current standard is four patients seen four or five times a week over five years or 3600 hours, with a minimum of two cases for a period of time longer than five years. However, this seems unreasonable given today’s practice climate. Therefore, if an analyst is well thought of in his/her institute and is five years out, the members of PIPE recommend a lower requirement of 2700 hours over the five-year period post graduation, with the expectation that these hours will contain significant experience begun after graduation. With a minimum of two cases seen four times a week, the requirement could be attained in just over seven years. In the evaluation of TA applicants, institutes are encouraged not to focus on the hours alone but on the overall quality of the work. If a talented analyst achieves the required hours in just four years, a waiver of the five-year requirement would be considered. PIPE also envisions a waiver system, with a subcommittee of the Committee on Institutes administering waivers. The subcommittee would also handle other matters of development and continuing education of training analysts such as oversight of the evaluation of training analysts. In addition, the committee could study the TA system with an intent to publish its findings. Such a subcommittee would guarantee both the institute and the committee a fair process and a chance to learn from each other. The members of PIPE anticipate that the subcommittee will operate in good faith and the institutes will know they have some leeway, fostering trust between the institute and the organization.

Another focus of the PIPE committee is on TA qualifications. Training analysts are expected, at all times, to be as qualified as they were when they were appointed. Therefore PIPE recommends a culture of development at all levels which will provide avenues for development prior to and after being appointed TA. This development might include attendance at required study groups on the institute level or workshops, either local or national. Encouragement of consultation among peers would also contribute to a spirit of collegiality, tolerance, and overall career enrichment.

POSITION STATEMENTS FROM THE SOCIETAL ISSUES DIVISION

The Executive Council unanimously approved the following position statement presented by Ethan Grumbach, chair of the Committee on Lesbian, Gay, Bisexual, and Transgender Issues:

The American Psychoanalytic Association opposes the military policy mandated by Title 10 of the United States Code (Section 654) which prohibits an individual’s service in the military on the basis of sexual orientation. Section 654 bans openly gay, lesbian, and bisexual individuals from serving in the military. APsaA strongly advocates that the United States Government overturn the current policy.

The Council also unanimously approved a position statement presented by Mark Smaller, chair of the Committee on Social Issues, entitled “Inner Wars Come Home: The Traumatic Impact on Families and Children When Our Veterans Return.” The statement includes the following actions:

Continued on page 35
Psychoanalysts and Film: Then and Now

The first documented viewing of a film by Freud occurred in 1907 on a rooftop at the Piazza Colonna in Rome. In a letter home, he wrote that the audience was beguiled by “pictures of landscapes, Negroes of the Congo, and glacier ascents” mingled with ads. During their 1909 visit to the United States, Freud, Jung, Jones, and Ferenczi viewed silent one-reelers in New York.

Ferenczi was very excited; Freud was only quietly amused. In “Freud and Film: Encounters in the Weltgeist,” in a 1999 issue of JAPA, I speculated that Freud, without attribution, incorporated knowledge of the 1895 Lumière film apparatus into his model of the mind in chapter 7 of The Interpretation of Dreams, written in the mid- and late-1890s.

Freud refused a $100,000 offer from Samuel Goldwyn in 1925 to consult on the making of a film about famous love stories in history, beginning with Anthony and Cleopatra. Keenly sensitive to the exploitation of psychoanalysis for sensationalist ends, he rejected the offer, as reported in The New York Times: “Freud Rebuffs Goldwyn; Viennese Psychoanalyst Is Not Interested in Motion Picture Offer.”

FILM’S FIRST PSYCHOANALYST

Also in 1925, producer Hans Neumann approached Karl Abraham and Hans Sachs to collaborate on G.W. Pabst’s educational and dramatic film about psychoanalysis, Geheimnisse einer Seele (Secrets of the Soul). In the film, a Viennese chemist struggles with an impulse to slit his wife’s throat and has a knife phobia. This man leaves his keys on a table in his club. Another man picks up his keys and follows him home. As he fumbles in his pocket to find his keys, the other man hands him his keys saying, “You have some mixed feelings about going home. When asked, “How do you know?” the other man says, “I am a psychoanalyst, the first appearance of a psychoanalyst in film. He proceeds to cure his new patient, largely through dream interpretation. Freud, strongly objecting to the collaboration of Abraham and Sachs, said, “Pictorial representation of psychoanalytic abstractions is not at all possible.” He believed that nothing good or useful could come out of the project and he preferred that his name not come into it at all.

The cinema project was, to Freud, an unquestionable betrayal of his theories. This “film affair” resulted in a crisis between Freud and Abraham that continued unresolved until Abraham’s death.

Nevertheless, Sachs became the film’s chief consultant, explaining that film was an excellent medium for presenting dreams and wrote a monograph to accompany the film. The film was shown on Freud’s 70th birthday at the Berlin Psychoanalytic Conference, which he was too ill to attend.

In contrast to Freud’s view, Otto Rank said in 1914 that cinematography reminds us of the dream-work. “The uniqueness of cinematography in visually portraying psychological events calls our attention with exaggerated clarity to the fact that the interesting and meaningful problems of man’s relation to himself—and faithful disturbance of this relation—finds here an imaginative representation!”

CONTEMPORARY CONTRIBUTIONS

Irving Schneider focused on categorization of how psychiatrists are presented in film in a 1977 paper on “Images of the Mind: Psychiatry in the Commercial Film” in the American Journal of Psychiatry.


Andrea Sabbadini edited two volumes, The Couch and the Silver Screen: Psychoanalytic Reflections on European Cinema (2003) and Projected Shadows: Psychoanalytic Reflections on the Representations of Loss in European Cinema (2007), both evolving from the biannual European Psychoanalytic Film Festivals sponsored by the Institute of Psychoanalysis in London. A complete bibliography is available at their Web site [see box on page 11]. The fifth conference, “Screen Memories from Eastern Europe,” will be held from October 29 to November 1, 2009, featuring psychoanalysts and eminent film scholars. Andrea Sabbadini is the chair and Bernardo Bertolucci is the honorary chair.

“Freud Refuffs Goldwyn; Viennese Psychoanalyst Is Not Interested in Motion Picture Offer.”

—The New York Times, 1925

Bruce H. Sklarew, M.D., is an associate editor of Projections: The Journal for Movies and Mind, organizes the film programs at meetings of the American Psychoanalytic Association, and has co-edited two books on Bernardo Bertolucci.
Italian fashion magazine AMICA recently published a photo-essay on psychoanalysis in New York, citing Freud’s influence: “After Freud, affect became language.” Seven psychoanalysts were pictured, including four members of the American Psychoanalytic Association, along with one canine companion. Some statistics about modern practice were highlighted including the average analytic work week (48 hours), the number of Americans involved in psychotherapy at some point in their lives (50%), the average length of treatment (12 sessions), the total number of mental health professionals in the U.S. (467,000), the annual income of a psychoanalyst ($168,000–248,000), the cost per session ($60–125).

The American Psychoanalyst would like to thank AMICA for granting permission to reprint the article, and to acknowledge the work of Michele Ciavarella (writer) and Jonathan Torgovnik (photographer) along with Stefano Bolognini, M.D. (translator). Bolognini is a member of the Italian Psychoanalytic Society and Bologna Psychoanalytic Institute.
PSYCHOANALYSIS IN NEW YORK

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THE AMERICAN PSYCHOANALYST • Volume 43, No. 2 • Spring/Summer 2009
After Freud Left:
Symposium on His 1909 U.S. Visit

John Burnham

Sigmund Freud made his one and only visit to the United States in 1909, 100 years ago. He arrived on August 29, and he departed on Sept. 21 from a pier in Hoboken, New Jersey, just across the river from Manhattan. He finally arrived back in Vienna on October 2. A century after the trip was completed, on October 3-4, 2009, a symposium at the New York Academy of Medicine will offer “After Freud Left: Centennial Reflections on His 1909 Visit to the United States.”

Psychoanalysis flourished among Americans more than anywhere else in the world. The symposium participants will explore Freud’s North American legacy. He once remarked mischievously that he left the Americans “a virus.” What happened with the virus is a historical question, and the speakers will combine the history of psychoanalysis and American intellectual history, offering perspectives to illuminate thoughtfully the larger interactions of Freud’s teachings with practice, institutions, and culture.

The speakers represent fresh, twenty-first-century scholarship in the history of psychoanalysis and its cultural context. Several of the presenters are conspicuous in the current “New Freud Studies” movement. Scheduled speakers are Ernst Falzeder and Hale Usak from Austria, Sonu Shamdasani and Richard Skues from the UK, and from the United States, Elizabeth Lunbeck, George Makari, Louis Menand, and Dorothy Ross. I am working with the New York Academy of Medicine as the outside organizer. Major funding comes from the Foundation for Idiodynamics, Personality Theory and the Creative Individual, based in St. Louis, with substantial assistance from the Austrian Cultural Forum of New York.

It is only fair to ask: Why make so much of Freud’s expedition to the United States? The answer may not be obvious to people who see psychoanalysis from the inside: Freud’s visit has become one of the iconic events in American history. Every basic college textbook in U.S. history, regardless of the author’s approach, still includes a mention of the visit as a symbol of cultural change. The visit provides the means by which American historians remind a very general audience of the importance of Freud’s ideas and the power of those ideas.

Most of the detailed past accounts of the visit focus on Freud’s personal experiences in the New World. He was impressed by the skyscrapers. He had great difficulty with the public toilet facilities: “They escort you along miles of corridors and ultimately you are taken to the very basement where a marble palace awaits you, only just in time.” Above all, Freud found that his digestion was thrown off. He even believed at one point that he may have had a small attack of recurring appendicitis. In any event, the diet he was fed in America caused him constant unhappiness, the memory of which stayed with him the rest of his life.

AMBIVALENT REACTION

Another set of historical accounts traces Freud’s continuing criticism of Americans and their culture. The usual story is that, conditioned by his unhappy culinary experiences, Freud was at best ambivalent about the United States or, more often, hostile or contemptuous. Many of his comments were truly “dyspeptic.” Ernest Jones quoted Freud’s later remark, which has in turn been much quoted: “America is a mistake; a gigantic mistake, it is true, but none the less a mistake.” But for a while, at least, Freud also had other thoughts. Four weeks after his return, he wrote to his British colleague, “The memory of the trip becomes more and more wonderful.”

In any event, speakers at the October symposium will take a new look at what happened “After Freud Left.” Indeed, because of the symbolism of the visit, it is safe to say that the symposium itself will be a significant event in American psychoanalysis and culture in general. Continued on page 13

John Burnham, Ph.D., is research professor of history and (by courtesy) professor of psychiatry at Ohio State University. He is the author of many books and articles on the history of psychoanalysis and related subjects.

Centennial Events

To publicize the symposium, on Sept. 21, the 100th anniversary of when Freud left the New World and boarded the North German Lloyd Line luxury steamer, Kaiser Wilhelm der Grosse, there will be a media event in Hoboken on the site of the departure pier. It will be preceded by a preparatory lecture at the Hoboken Historical Society on September 20. Another media event is planned at the Freud Museum in Vienna for October 2, the day when 100 years ago Freud once again reached his home at 19 Berggasse.
Then and Now
Continued from page 7

INTERDISCIPLINARY APPROACH
The self-published journal, Projections, by the Forum for the Psychoanalytic Study of Film began in the late ’80s and continued through 2002. In 2007 it was reformulated by Ira Konigsberg, a film scholar and frequent presenter at the film programs at APsaA meetings, as editor-in-chief and myself as associate editor. Projections: The Journal for Movies and Mind (www.Berghahnbooks.com/journals/proj) exemplifies an interdisciplinary approach that includes psychoanalysis, film scholarship, neuroscience, and cognitive views in exploring film. The editorial board consists of many eminent scholars and psychoanalysts. Submission of articles is welcome at brucesklarew@att.net.

In 1985 the Forum for the Psychoanalytic Study of Film, recently renamed the Forum for Movies and Mind (www.cyberpsch.org/forum/index/htm), began to present film viewings and psychoanalytic discussions in many venues including Congresses of the International Psychoanalytic Association, the National Gallery of Art, the Corcoran Gallery of Art, the Smithsonian, the New School for Social Research, the American Film Institute, the Film Society of Lincoln Center, and the New School for Social Research in New York in 1985 with Bernardo Bertolucci. These collaborations led to visits to Bertolucci film sets in Morocco, Katmandu, Seattle, Tuscany, and Paris. He later participated in two other Forum sponsored conferences and speaks of psychoanalysis as another lens on his camera. He said that he makes his films on a “dream loom.” Further information on the Forum and Projections is described in TAP 42/3. Krin Gabbard elaborated on the approaches used by film scholars to study film in TAP 29/4 and Glen Gabbard described the methods used by psychoanalysts to understand film in the JFP, 1997.

FIRST PSYCHOANALYTIC FILM PROGRAM
The first major program on psychoanalysis and film was initiated in the early ’80s by Steven Steury of the Baltimore Washington Institute for Psychoanalysis and held in Washington. The Forum began with a major conference co-sponsored with the Film Society of Lincoln Center and the New School for Social Research in New York in 1985 with Bernardo Bertolucci. These collaborations led to visits to Bertolucci film sets in Morocco, Katmandu, Seattle, Tuscany, and Paris. He later participated in two other Forum sponsored conferences and speaks of psychoanalysis as another lens on his camera. He said that he makes his films on a “dream loom.” Further information on the Forum and Projections is described in TAP 42/3. Krin Gabbard elaborated on the approaches used by film scholars to study film in TAP 29/4 and Glen Gabbard described the methods used by psychoanalysts to understand film in the JFP, 1997.

FIRST PSYCHOANALYTIC FILM PROGRAM
The first major program on psychoanalysis and film was initiated in the early ’80s by Steven Steury of the Baltimore Washington Institute for Psychoanalysis and held in Washington. The program, which presented 16 films, was co-sponsored with the American Film Institute. Leon Levin of the Baltimore Washington Institute for Psychoanalysis organized a nearly 15-year collaboration with the Baltimore Institute of Art showing and discussing four films a year: In London, Andrea Sabbadini organizes frequent film programs with the British Psychoanalytic Institute. Other Institutes presenting film discussions are Washington, D.C., St. Louis, Chicago, Denver, Los Angeles, Seattle, and Boston.

Film discussion is an excellent vehicle for the public to engage with psychoanalytic ideas in a lively and palatable way.

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The Forum began with a major conference co-sponsored with the Film Society of Lincoln Center and the New School for Social Research in New York in 1985 with Bernardo Bertolucci. These collaborations led to visits to Bertolucci film sets in Morocco, Katmandu, Seattle, Tuscany, and Paris. He later participated in two other Forum sponsored conferences and speaks of psychoanalysis as another lens on his camera. He said that he makes his films on a “dream loom.” Further information on the Forum and Projections is described in TAP 42/3. Krin Gabbard elaborated on the approaches used by film scholars to study film in TAP 29/4 and Glen Gabbard described the methods used by psychoanalysts to understand film in the JFP, 1997.

FIRST PSYCHOANALYTIC FILM PROGRAM
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London
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Initiated in the mid-’80s when Paul Dewald was the program chair at all APsaA meetings, extensive film presentations and discussions under my chairmanship have continued at all APsaA meetings. Two or three sessions showing complete films are usually accompanied by discussion groups using clips on the same theme. Film scholars often are co-discussants with psychoanalysts. The topics have included the works of Bergman, Bertolucci, Kieslowski, Vigo, and Woody Allen; viewing film and the dream experience; Holocaust films; and loss and trauma. The New York Times, Dec. 23, 1991, covered the American Psychoanalytic Association’s film program that included my oedipal interpretation of Casablanca.

Collaborations with art museums, film societies, and universities provide large lay audiences and the venue. Film discussion is an excellent vehicle for the public to engage with psychoanalytic ideas in a lively and palatable way. Psychoanalysts have studied literature because it offers portrayals of people in conflict and insight into human motivation and behavior. We have also explored content and the creative process in mythology and the arts.

Now psychoanalysis has been applied to the twentieth century’s most prominent new art form—film. Glen Gabbard has said that films “serve many of the same functions for contemporary audiences as tragedy used to serve for fifth-century Greeks. Not only do they provide catharsis, they also unite audiences with their culture with their mythological dimensions in the same way that Aeschylus or Sophocles provided vision for the citizens of Athens.”
The Pain of a Bear Market

John W. Schott

Almost every investor has heard the cautionary statement, “Beware of greed in a bull market and fear in a bear market.” This interdiction is a valuable one. Today we want to take you to a higher level of understanding about this statement especially as it applies to emotions felt in down (bear) markets.

Let us begin with the happier days of up or bull markets. Most investors during a bull market (the exception being traders) do not so much experience greed as they do marked happiness or excitement. Rising markets stimulate ideas of retirement and the fulfillment of dreams. The higher the market goes, the more extreme the hopes become. Remember back in 1998 and 1999 how many people were going to, or in some cases actually did, leave excellent jobs and professions to “play” the market full time. How many friends and acquaintances were planning to retire at age 55.

The significant fact about this kind of euphoria is that it means that the person has become grandiose. Grandiosity is a stage gone through in early childhood which can easily be rekindled. The easy money of the late ’90s came from being a participant in a market mania or market bubble. However, the exuberant investors believed that it was their skill which led them to a sense of grandiosity. They had never heard the sage Wall Street saying, “Never confuse genius with a bull market.” Wise investors in the late ’90s made some easy money and then battened down the hatches even if it meant being on the sidelines during the latter part of the bubble.

BEAR MARKET DEPRESSIVE SYNDROME

The same grandiose aspect of the personality is at play in bear markets, but in reverse. Having taken a huge amount of undue credit for itself in the bull market, the self now blames itself for the failures in a bear market. The combined pain of loss of self-esteem and loss of money damages an investor’s narcissism in a severe way, sometimes even to the point of an actual depression or at least a mental state highly similar to a depression, which I call the bear market depressive syndrome or BMDS for short. In BMDS individuals experience some combination of dysphoric mood, sleep disturbance, decreased concentration, irritability, guilt, discouragement, and somatic symptoms such as gastrointestinal disturbance or headaches.

The rational person would say to himself, “I know markets are cyclical. I know a market bubble must be followed by a severe correction to get values back to normal!” In fact, rational and experienced investors know that while a bear market may be painful, it affords the opportunity to buy good stocks at bargain prices. For the mutual fund buyer, he or she knows that dips provide a useful way to dollar-cost-average and ultimately give superior results.

The very important lesson for all investors is to appreciate that every investment carries risk, some greater than others. U.S. and Canadian government bonds (as well as those of other developed nations) are sometimes perceived as risk free. However as buyers of U.S. T-bonds have learned in recent years, currency and interest rate risks are associated with government bonds and can be fairly severe.

Therefore, remember every investment carries risk and it is not always possible to tell in advance what the risk will be.

RISK: THE BETA FACTOR

Before investing think about risk and consider it in two dimensions. First, calculate the risk in the usual ways. Be cognizant that most investments carry both market risk and company specific risk. By market risk, I mean interest rate risks, wars, political risks, acts of God, broad market declines, and others too numerous to mention. Company specific risks mean management skills, management honesty, product problems, lawsuits, and whatever competition can throw at the company. When assessing these risks, it is helpful to discuss them with a neutral third party, a friend or, perhaps better, a financial advisor. You will gain valuable insight from the process, something akin to financial psychotherapy. Be warned that Wall Street and academia have a different definition of risk than you do. To them, risk is volatility. It is measured by beta, the measurement of how closely an investment mimics the market as a whole. A beta of one means that stock rises and falls exactly with the market as a whole. A beta of greater than 1.0 indicates high volatility, but remember volatility and risk are not at all the same thing.

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John W. Schott, M.D., is a member of the Boston Psychoanalytic Society. He is director and portfolio manager at Steinberg Global Asset Management. He also publishes a monthly newsletter on investment psychology, The Schott Letter.
THRILL SEEKING VS. RISK AVERSION

The second aspect of risk, equally if not more important, is the psychology of risk and what it means to you individually. People differ widely from each other in this important dimension. Certain reality factors will bear on this. They include your age, your earnings, your inheritances and expected inheritances, your health, and whether or not you are married and have children. In addition, your attitudes about risk will be shaped consciously and unconsciously by your genes, by your parents’ attitudes toward risk, by your feelings about money, by your confidence, and by your past experiences with losses. If you are a person who has experienced many painful losses in your life, you may be very loss averse. Yet this is a highly personal quality, because some people with a history of many painful losses are driven to repeat them in an attempt to gain mastery, a form of repetition compulsion.

At first glance this may seem daunting. It is truly complicated, but be assured most people can invest successfully. Be aware as you begin to think about risk and how to manage it that research has shown we tend to overestimate our capacity to tolerate loss. Danny Kahneman, a psychologist at Princeton University who shared the Nobel Prize in economics for his work in behavioral finance, and his mentor Amos Tversky demonstrated that the average individual believes he can tolerate twice as big a loss as he actually can. In other words, if you believe you can tolerate a 20 percent decline in the market value of your investments without feeling much pain, you will actually begin to panic at 10 percent decline. What can you do with all this knowledge to become a better investor?

• Consider being a dollar-cost averaging investor. Select good mutual funds or stocks that you regard as excellent long-term investments and systematically invest the same dollar amount at fixed time intervals, e.g., quarterly.

• Diversify your investments. If you have all growth funds, add some value funds or vice versa. If you buy individual stocks, diversify by always investing in many sectors which are uncorrelated, meaning that they tend to perform independently of each other. Therefore your results may be smoother causing you less anxiety. Beware of “di-worsifying.” Do not make a bad investment for the sake of diversification. Incidentally, 17 stocks, if chosen from different sectors, will give 90 percent of the diversity of the market as a whole. Thirty stocks will give you 98.6 percent of market diversity.

• Emulate the great investors.

First, these investors know they will make errors. In fact, it may not even be their error. Remember no one can accurately predict the future. If 60 percent of your investments turn out to be successful, you will do well. If your batting average is higher, you will do really well.

Second, concentrate on your investments as businesses. Follow the companies’ business results more than you follow the shares’ prices. If the business is doing well, ultimately the stock price will follow.

Third, my colleague Dick Geist has observed that many of the greatest investors have had a friend or partner on whom ideas could be tried out. Warren Buffett and Charlie Munger are the most famous example of this. At first glance, they seem like an odd couple, but their differences apparently complement each other. Certainly no one could challenge the results. So if you have a friend whose input you value, try running investment ideas by him or her. Absent such a person in your life, try to utilize your broker or advisor this way.

• Repeat to yourself every day that this is the kind of market Warren Buffett and the other truly great investors relish. Keep a wish list of the companies that you consider the greatest investments and at what price you would like to buy them. If the share price is reached, buy the stock without trying to get it more cheaply.

• Time is your friend. In growing economies like the U.S. and Canada’s, the long-term trend of the market is almost always up. If you have shares in a good business, even if the price drops, your odds of doing well in time are very good.

CALL FOR SUBJECTS:

Study on Termination

The termination phase of psychoanalysis has limited representation in psychoanalytic literature. I am interested in studying the process from the perspective of the patient, and would like to interview people who have terminated a psychoanalysis to explore several questions about their experience and any others that may emerge. These interviews could be conducted on the telephone at the convenience of the volunteer. All material will be strictly confidential and presented anonymously. The participant will have the opportunity to read and approve the use of his or her material prior to any publication of the findings.

Please contact: Judy L. Kantrowitz, Ph.D.
617-738-1689
Judy_Kantrowitz@hms.harvard.edu

After Freud Left

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The best news is that it will be free and open to the public, and members and associates of the American Psychoanalytic Association will be especially welcome. Details are available on the New York Academy of Medicine Web site (www.nyam.org, click on events, then conferences). While registration is free, one can also sign up for a luncheon on the premises on Saturday (for which there will be a fee).
APsaA Secures Privacy Protections in Stimulus Bill

Jim Pyles

The American Psychoanalytic Association (APsaA) worked intensely and directly over the past year with many members of Congress to secure privacy protections in the Health Information Technology for Economic and Clinical Health Act (HITECH Act), which was part of the American Recovery and Reinvestment Act of 2009 signed into law by President Obama on February 17. That legislation will be implemented by regulations adopted over the next year. The goal of the legislation is “utilization of an electronic health record for each person in the United States by 2014.”

It is likely that many of the privacy protections included in the HITECH Act would not have been included had it not been for APsaA’s efforts. The success of this effort was due to the commitment of APsaA’s leadership working with Washington counsel, APsaA members, and key members of Congress who withstood intense lobbying pressure from the insurance and information technology industries to defend the ethical practice of medicine and psychotherapy. Members of Congress who deserve particularly high praise for their efforts are Congressman Ed Markey (D-MA), Congressman Henry Waxman (D-CA), and Senator Olympia Snowe (R-ME). Others who were also helpful were Congresswomen Lois Capps (D-CA) and Jan Schakowsky (D-IL) and Senators Chris Dodd (D-CT), Ben Cardin (D-MD), and Barbara Mikulski (D-MD).

The HITECH Act contains the following provisions that should help preserve the patient’s right to health information privacy as a national electronic health information system is implemented:

• **Privileges:** Nothing in the legislation shall constitute a waiver of “any privilege otherwise applicable to an individual,” thereby expressly recognizing and preserving by statute the psychotherapist-patient privilege recognized in the Supreme Court’s 1996 decision in Jaffee v. Redmond [see page 16].

Private pay: Under a new right, individuals who are willing to pay privately cannot have their health information disclosed to health plans without their consent for payment and health care operations.

• **Minimum necessary:** Covered entities (including psychotherapists) and business associates disclosing identifiable health information shall have the right to decide what is the minimum necessary amount of information for any use.

• **Breach notice:** Individuals have a right to notice when their identifiable health information has been, or reasonably is believed to have been, accessed or acquired as the result of a security breach.

• **Segmentation:** The Department of Health and Human Services (HHS) is required to consider issuing standards for technologies that protect the privacy and promote the security of health information by allowing segmentation of particularly sensitive health information (such as mental health information) in order to minimize concerns by patients.

• **Encryption:** HHS is required to consider issuing standards that allow individually identifiable health information that is being transmitted or transported to be rendered unreadable by unauthorized individuals.

• **Accounting:** Individuals have new rights to obtain an accounting for disclosures of identifiable health information for treatment, payment, and health care operations.

• **Restrictions on sale:** New prohibitions are placed on the sale of health information without the individual’s authorization.

• **Restrictions on marketing:** New restrictions are added on the use of health information for marketing without the individual’s authorization.

• **Fundraising**: A new right gives individuals the opportunity to opt out of fundraising communications that use identifiable health information.

• **Consumer representation:** The number of consumer representatives on a key policy committee is increased from one to three.

• **Public participation:** HHS must provide notice to the public and an opportunity for public comment on regulations implementing the act.

• **Enforcement:** New civil and criminal penalties are established for business associates (those who handle health information on behalf of practitioners) and for employees of covered entities (hospital personnel, for example). The act also increases the civil monetary penalties for privacy breaches and provides for state attorneys general to bring enforcement actions to protect residents of the state from violations of the HITECH Act.

**OUR KEY STRATEGY**

The strategic key to obtaining these new privacy protections was APsaA’s adoption of a clear set of privacy principles in July of 2007, which became the core privacy concepts contained in joint letters to Congress from nearly 30 members of the Mental Health Liaison Group as well as numerous additional letters filed jointly by APsaA and the National Association for Social Workers. Those privacy principles then were incorporated into the TRUST Act (H.R. 5442) introduced in February 2008 by Congressman Markey and 13 other key Democratic members of the House including Rahm Emanuel (D-IL) and Henry Waxman.

Senator Snowe led the effort in the Senate to block repeated efforts by Senator Kennedy to pass the Wired for Health Care Quality Act (S.1693). The Wired Act, sponsored by Senators Ted Kennedy (D-MA), Hillary Clinton

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Our Finest Hour

Bob Pyles

On June 18, 1940, Sir Winston Churchill, prime minister of England, prepared his country for massive air attacks by Germany, which became known as the “Battle of Britain.” He said to his countrymen, “Let us therefore brace ourselves and so bear ourselves that if the British Empire and its Commonwealth last for a thousand years, men will still say, ‘This was their finest hour!’” After Britain successfully repelled the repeated attacks by the Wehrmacht, Churchill said about their young fighter pilots, “Never in the field of human conflict was so much owed by so many to so few.”

I was reminded of those inspiring historical events, certainly among the many turning points in World War II, by the major role of this Association in protecting health care privacy for all Americans, which was included in the American Recovery and Reinvestment Act, signed into law by President Obama on February 17. This was the culmination of the most successful advocacy effort by the American Psychoanalytic Association to date and resulted in major health care privacy protections for 304 million Americans.

LEADING ROLE

While other groups were involved in achieving these results, our Association played a leading role, along with Deborah Peel’s “Patient Privacy Rights” and National Association of Social Workers (NASW), in obtaining strong privacy protections where none existed before. This is all the more remarkable, considering the massive lobby opposing such protections by such powerful groups as the insurance and managed care industries, the American Hospital Association, and the information technology industry (with the exception of Microsoft, which supported our stand).

Nonetheless, EMRs are viewed as a kind of “magic bullet” which will give the impression that Congress is taking significant steps to improve health care policy.

The stimulus package included $19 billion for the initiation of an electronic health records system. An all-encompassing Electronic Medical Records (EMR) system is being viewed by the Administration as an essential portion of their health care reform effort, and one they are certain will save money and improve care. Unfortunately this appears to be an unwarranted assumption, based on a single seriously flawed study by the Rand Corporation. Many studies suggest quite the opposite, i.e., health care quality is not improved, medical errors may in fact be increased. Estimates for “wiring” the country run to $500 billion.

Nonetheless, EMRs are viewed as a kind of “magic bullet” which will give the impression that Congress is taking significant steps to improve health care policy.

PROTECTING PRIVATE PRACTICE

To sum up our achievements: Private practice is protected, personal health information cannot be sold or marketed, the Jaffee privilege is protected, and practitioners can determine what is the “minimum necessary” information that has to be turned over to insurance companies for payment of claims. [See “APsaA Secures Privacy Protections in Stimulus Bill,” page 14 for further details.]

Our Association has played a major role throughout this struggle which began during the last Congress, when Senators Hillary Clinton and Ted Kennedy introduced S.1418, the “Wired” bill. We were able to help stop this bill, with the help of several senators, most notably Senator Patrick Leahy (D) of Vermont. On the House side, Congressman Edward Markey (D-MA), working closely with us, introduced privacy principles into the Pro(Tech)T Act HR 6357.

Like the Senate bill, the House bill also did not pass, but both the Senate and House bills were poised for the advent of the EMR effort in the stimulus package.

Ultimately, the Pro(Tech)T Act became the prototype for the privacy protections included in the stimulus bill. We owe special thanks to Representative Markey, whom our Association honored last year with a Special Presidential Award, and Senator Olympia Snowe (R-ME). Working closely with them, we were able to play a leading role in both the House and Senate versions of the bill.

Over the past two years, a great many of our members have called their congressmen and senators with enormous effect. The Association owes particular thanks to David Miller and Joanne Gold of the Washington Center for

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Privacy Protections
Continued from page 14

(D-NY), Mike Enzi (R-WY), and Orrin Hatch (R-UT), had none of the privacy protections that were included in either the TRUST Act or the HITECH Act. The failure of the Wired Act to pass in the Senate allowed new bills to progress through the House that contained more of the privacy protections that were included in the TRUST Act championed by Congressman Markey. As the HITECH Act moved toward a final vote, a strong effort was made by Senator Enzi to strip out the privacy protections. We also had to work intensely with Senator Snowe’s staff to obtain last minute changes to the breach notice provisions to prevent them from being weakened by an exception.

FUTURE FOCUS
As with any major piece of controversial legislation, we did not get all that we sought. APsaA privacy principles that were not included in the HITECH Act were express recognition that individuals have a right to health information privacy, consent for all disclosures of identifiable health information, and a definition of privacy that includes the individual’s right to control uses and disclosures of health information. With more than 42 million electronic health records improperly disclosed since January 2005, those protections are likely in a later day. The near term goal for APsaA is to make sure the hard won gains reflected in the HITECH Act are not lost as the regulations are formulated.

From the Unconscious
Sheri Butler Hunt

The American Psychoanalytic Association has had the pleasure of featuring one of John Samuel Tieman’s poems before, entitled “Prodigal.” We are very pleased to feature this one, with its stark, affecting imagery and interesting endnote.

ST. PATRICK’S BASILICA, MONTREAL

the leaflet says Emile Nelligan once prayed here
horified and solar and pale
dementia like an ice violin
a vein where no one finds gold

what did you see when you saw Jesus
a rag doll a neon eclipse Baudelaire
fantastic nostrils sudden birds
psalms sung by orphans

nearly fifty years in a hospital and
I envy you, Emile Nelligan, envy you composing
the same poem every morning and every morning

When my wife, Phoebe Cirio, and I vacationed in Montreal a few years ago, I was amazed at how little I knew about Canadian poetry. We went to Sunday mass at St. Patrick’s Cathedral, where I read in a brochure that Emile Nelligan was baptized there. Without explanation, it read “Nelligan” like I should just know him. He is considered the Arthur Rimbaud of Canada. Schools and libraries are named after him. Like Rimbaud, he stopped writing in his late teens, in Nelligan’s case at the onset of schizophrenia. Emile Nelligan spent the rest of his life, the next 42 years, in a hospital. And became a legend.

—John Samuel Tieman

Sheri Butler Hunt, M.D., is a graduate analyst in the adult and child divisions at the Seattle Psychoanalytic Society and Institute. A published poet and member of TAP’s editorial board, she welcomes readers’ comments and suggestions at sherihunt@hotmail.com.
CANADIAN HEALTH-CARE SYSTEM

You would not learn from reading Dr. Berger’s article, “Canadian Health-Care System Not the Answer for U.S., Single Payer No Panacea,” (TAP, 43/1) that the U.S., compared to Australia, Canada, Germany, New Zealand, and the United Kingdom, has the most expensive health-care system, both in terms of cost per person and percent of gross domestic product, and the poorest quality of health care (Davis et al., 2007). For example, U.S. infant mortality rate is higher than that in Canada, the United Kingdom, Australia, Germany, Spain, France and Japan.

Although he is comparing the Canadian system to the U.S. system, you would learn nothing about the millions of Americans who have neither health care nor access to psychiatric care. Nor would you learn that virtually all health-care experts acknowledge that a single payer system is the least expensive health-care system (though they don’t all agree it would be the best system) and therefore one that could provide health care to all members of the society. Certainly he doesn’t acknowledge that the health-care system for the elderly in the U.S. (Medicare) is a government run, single payer system which has remained extraordinarily popular, although very hard on its medical providers. What Dr. Berger highlights is that Canadian psychoanalysts are underpaid, and that Canadian patients have long delays before obtaining medical care (the U.S. and Canada rank lowest in the prompt accessibility of appointments with physicians).

It seems clear that in his dichotomous nosology Sir Isaiah Berlin would have characterized Dr. Berger as a hedgehog (a focused worldview, an ideological leaning, and strong convictions) rather than a fox (pragmatic, more prone to self doubt, and inclined to see complexity and nuance).

Joseph Schachter

Joseph Schachter, M.D., received a Ph.D. from Harvard University, an M.D. from NYU Bellevue, and psychoanalytic training at Columbia University Psychoanalytic Center. He was a training analyst at Pittsburgh Psychoanalytic, and is an honorary member of the William Alanson White Society.

RESPONSE

Dr. Schachter’s gratuitously offensive response to my article—making insulting comparisons of me to various animals—reflects the simplistic nature of his comments.

Many years ago economist Irwin Stelzer rejected the notion of comparing the qualities of health-care systems in different countries according to the percentage of GDP spent. In most areas of life, if you spend less you run the risk that you will receive poorer quality of whatever it is that you are buying. It applies to your clothes, your food, your housing, and to almost any service you can think of.

If Americans have been prepared to pay more for their health care, then maybe that is because what they expect to receive in most cases is prompt care, of very high quality, in comfortable surroundings. In countries that spend less, each of those benefits may be much reduced. Most readers will have heard about very long waiting times for consultation and treatment in Canada.

The quality of diagnosis and treatment in the U.S. remains far above that of most other countries, and the physical quality of clinics and hospitals remains far superior to all except a very small number of highly expensive and exclusive private institutions.

Similarly, it is absurd to choose just one item of measurement—such as infant mortality levels—and imply that such a statistic can demonstrate the superiority of one system over another; when there might be numerous other factors affecting any such statistic, and when other measurements might produce different results.

I would urge Dr. Schachter and other readers who might still think that the Canadian system might be the solution to the admitted deficiencies in current U.S. health care, to read the superb testimony titled “Canadian Care. So Many Lessons, So Little Time” just recently presented to the Pennsylvania House of Representatives by Brian Lee Crowley, president of the Atlantic Institute of Market Studies. This brilliant survey explains in greater detail the pitfalls of allowing medical care to become more socialized and politicized than it is already.

Joseph Berger

Joseph Berger, M.D., grew up in London and studied and worked as a doctor in the socialized British system. He trained as a psychiatrist in the United States and has practiced for the past 35 years in Canada.

TAP welcomes letters to the editor. Letters must be less than 350 words long. Letters will be printed as space allows and at the discretion of the editorial board.
At the APsaA Winter 2009 National Meeting in January, as part of the APsaA Workshop on Film and Psychoanalysis, Esther Rashkin delivered a fascinating paper entitled “On the Desire to be Human: Androids, Cyborgs, and the Analytic Process in Star Trek: The Next Generation.” Evincing the same sensitivity and erudition that she displays in her new book Unspeakable Secrets and the Psychoanalysis of Culture, Rashkin brought together close reading techniques borrowed from literary and cultural studies with analytic psychosocial interpretations. The paper was an explication of Data’s Day, a single episode of the legendary 1990s TV series still in reruns. In order that the audience might follow the intricate close readings elaborated in the paper, the episode was shown at the beginning of the session in its entirety.

Data’s Day, as its title suggests, follows the character Data—a technologically advanced android who serves as an officer aboard the Starship Enterprise—throughout one eventful day. As Rashkin suggested but did not make explicit, Data’s intense desire to be human, or rather to feel human, mirrors our own desires to establish and maintain meaningful human connections. And while Data’s quest is to become more human, part of Rashkin’s quest seems to be to use Data’s dilemma to help define what it means to be human in the first place. Early in her talk, she recounted the contested history of psychoanalytic theories of development in order to argue that it may be precisely a desire for human contact, rather than, say, a drive for pleasure, that grounds and defines our humanity.

The paper focused extensively on a scene in which Dr. Crusher, the ship’s chief medical officer, teaches Data to dance. Rashkin’s reading shows the ways in which dancing is an essentially human activity, one whose social and cultural nuances are not as automatically or instrumentally acquired as are its steps. Dancing, in other words, is not easy for an android to master. In order for Data to enter into the dance of human cultural and social life, he needs what D. W. Winnicott famously termed a “good-enough mother.” Data chooses poorly insofar as Dr. Crusher is unable to provide him with the nurturance and guidance that he needs. Because Data appears humanoid—that is, physically, linguistically, and cognitively developed—he serves as an interesting test case, a kind of postmodern corollary to the 18th-century figure of the wild child. Rashkin argued that Data’s hybridism makes him closer in definition to a cyborg than an android: He is half human and half machine. Using Winnicott’s concept of the false self, Rashkin brilliantly suggested that Data is a liminal figure, on the boundary between authentic human experience and inauthentic automatism. Complicating this already rich reading, Rashkin pointed to Dr. Crusher’s inability to respond to Data’s need for nurturance and suggested that, at least emotionally, Crusher too might be a cyborg—part authentic and part inauthentic at the same time.

Rashkin’s unique melding of science fiction and psychoanalysis not only stirred the audience to ask question after informed question, to which she deftly and thoughtfully responded; it also resulted in a powerful reading that has at least two ethical implications. First, she implies that our desire for human connection and our ability to experience connection that is “good enough” may matter more in some ways than whether or not that desire can ever be completely satisfied. Secondly, she powerfully demonstrates that psychoanalytic traces in culture do not emerge exclusively in the realm of high art. The world of pop culture is also rich terrain for psychoanalytic thinking and deserves to be explored as seriously as Data takes his quest to become more human. We can only hope that Rashkin will continue this line of inquiry and that this fascinating material will be available soon in article or book form. As Captain Picard himself would say, “Make it so, Data. Make it so.”

D. B. Ruderman, Ph.D., is a 2008–09 Fellow of the American Psychoanalytic Association. He will be joining the faculty of Ohio State University, Newark, in the fall.

Aliens and Alienists

D. B. Ruderman

D. B. Ruderman

D. B. Ruderman, Ph.D., is a 2008–09 Fellow of the American Psychoanalytic Association. He will be joining the faculty of Ohio State University, Newark, in the fall.
How did I decide to work on *Star Trek: The Next Generation* after years spent writing about the complex intersections between psychoanalysis and literature, film, and the sociohistorical problems of anti-Semitism, racism, and colonialism?

It began one evening while channel surfing. I landed on an episode about an interspecies love affair that raised intriguing questions about desire, identity, sexuality, and who—or what—one loves when one falls in love. Adding to my curiosity was the fact that a main character in the series, Counselor Deanna Troi, was a bi-species empath (half human, half Betazoid), who served as the chief psychologist for the crew and families aboard the Starship Enterprise.

After a few more episodes, I was convinced that the series had something to say about intrapsychic and not just interstellar exploration, and about the unconscious dynamics of individuals, families, and groups. I was hooked.

As I read through the numerous academic studies of *Star Trek*, I was struck by how enthusiastically scholars discussed questions of race, class, gender, capitalism, and colonialism in *The Next Generation*. They said little, if anything, however, about the psychological dimensions of the android Data’s quest to feel human, or about Counselor Troi’s role as a clinician. Data was of interest primarily as an incarnation of the promise—and also the dangers—of technology, and of the complexity of living and working alongside a sentient android. Troi was generally dismissed as a sexist caricature of women as overly empathic, nurturing caretakers. Moreover, she couldn’t be taken seriously as a professional since she almost never practiced therapy.

These responses were surprising since it seemed to me that Data’s desire to experience human emotion had a psychoanalytic richness and complexity that begged to be explored.

At the same time, Counselor Troi appeared to be practicing a great deal of therapy. She just was not doing it in a classical fashion with patients lying on a couch in her office. Instead, she provided therapy wherever and whenever it was needed: on the bridge, in the lounge, in the ship’s hallways, even on other planets. Far from a non-practicing, unprofessional maternal figure, Troi struck me as an astute, analytically oriented clinician. She was well versed in the workings of the unconscious, defenses, and transference, and she displayed a sophisticated capacity to hold, contain, and (not surprisingly for an empath), empathically attune to others.

My mission was clear: not to explore outer space, but to elaborate the ways in which the characters and stories of *Star Trek: The Next Generation* dramatized the complex world of intrapsychic, inner space.

Certainly, not all works of pop culture can sustain intensive psychoanalytic inquiry or reveal an awareness of mental functioning and analytic process that clinicians or academics would find of interest. But just as Data’s desire to learn to dance can be understood as the story of a failed therapeutic encounter that impinges on the android’s quest to become more human, so I expect to find, as I write about other episodes involving alien encounters, technological advances, and successful and aborted relationships, tacit dramas about unconscious process, psychic development, and the way analytic therapy works to alleviate suffering. Stay tuned.

Esther Rashkin, Ph.D., L.C.S.W., author of *Unspeakable Secrets* and the Psychoanalysis of Culture, and *Family Secrets and the Psychoanalysis of Narrative*, is University of Utah professor of French and cultural studies, former APSaA Fellow, and in private practice, Salt Lake City.
American Psychological Association Publishes High School “Lesson Plan” on Psychoanalysis and Psychodynamic Psychology

James Hansell

We all know how important high school can be in creating lasting identifications and ideals. As a result, APsaA has been interested in bringing psychoanalytic ideas into high school curricula as part of our effort to attract the best “10,000 minds” of the next generation. For example, APsaA’s own Andrew Gerber first met APsaA member Stuart Hauser at a national high school science fair. That encounter sparked a change in Gerber’s primary interest from the physical sciences to psychoanalysis.

For more than 15 years, the American Psychological Association (APA) has maintained an active educational and outreach program aimed at high school psychology teachers and their students. This program, Teachers of Psychology in Secondary Schools (TOPSS) has almost 2,000 teacher members (called Teacher Affiliates of APA), and offers them workshops, lesson plans, teaching standards, networking opportunities, as well as scholarships, grants, and awards. It is estimated that half a million high school students take a psychology course each year. While the number of college students studying psychology is far higher, high school is often the first time that young people are formally exposed to the field, making it a critical time for the formation of first impressions.

James Hansell, Ph.D., is training and supervising analyst at the Michigan Psychoanalytic Institute and on the faculties of the Departments of Psychology and Psychiatry at the University of Michigan. He is co-author (with Lisa Damour) of Abnormal Psychology, currently in its second edition.

One of the “signature products” of TOPSS is a series of “unit lesson plans” written by college psychology faculty that enable high school teachers to teach specific areas of psychology; they are provided free of charge to interested teachers via hard copies and the Internet. To date, TOPSS has developed 17 different week-long lesson plans on topics such as learning, memory, developmental psychology, and cross-cultural psychology. Psychoanalysis, as you might guess, is virtually nonexistent in these 17 lesson plans.

Enter Dottie Jeffries, APsaA’s public affairs director. Jeffries became aware of the TOPSS program and asked me to take a look at the current lesson plans. She saw this as an opportunity to bring a positive, accurate picture of psychoanalysis to this critical population of teachers and young students before they are turned off to psychoanalysis by the typical negative misrepresentations. When I confirmed that psychoanalysis was not adequately covered in the existing lesson plans, Jeffries made contact with the staff of TOPSS to ascertain their interest in the development of a new week-long lesson plan on psychoanalysis.

With her usual effectiveness, Jeffries quickly persuaded the TOPSS staff of the usefulness of a psychoanalysis unit, and they agreed enthusiastically to support its development. (TOPSS support includes underwriting the eventual publication of the lesson plan along with development and editorial assistance from the TOPSS staff and the high school teachers’ network.)

With TOPSS sponsorship in place, Jeffries and I began to conceive the project. Most of the existing units involve five or six separate lesson plans which can be covered in one week. College faculty write content outlines, and then high school teachers with an interest in the subject add additional content such as in-class exercises, multimedia supplements, and homework assignments. With the help of the TOPSS staff and the teachers’ network, we came up with a plan for a six-lesson unit on “Psychoanalysis and Psychodynamic Psychology” covering the following topics:

**Lesson 1:** Overview of Freud and psychoanalysis

**Lesson 2:** Psychoanalytic perspectives on mental disorders and treatment

**Lesson 3:** Psychoanalytic perspectives on development and personality

**Lesson 4:** Psychoanalytic perspectives on dreams

**Lesson 5:** Psychoanalytic perspectives on motivation and emotion

**Lesson 6:** Neo-Freudians and contemporary psychoanalysis

Excerpt from Psychoanalysis and Psychodynamic Psychology

**INTRODUCTION**

Psychodynamic theory, despite criticism that it is unproven, continues to be a popular and influential approach to explanation and treatment and is, in fact, supported by a substantial research basis. Psychoanalytic theory also has a particular place of importance in the field of psychology as the first and most comprehensive theory of personality and psychopathology.

Continued on page 24
Education Division Launches Teen Web Site Project

Stephen Sonnenberg

In this Internet age, APsaA is aware of the importance of outreach to its members and the outside world via computers and other devices which access the World Wide Web.

Under a grant from the International Psychoanalytical Association’s Developing Psychoanalytic Practice and Training Program APsaA’s new Education Division has initiated the Teen Web Site Project, which is creating a Web site for teens on sex, dreams, and how it helps to think about life through a self-reflective, psychoanalytic lens. The effort is an exciting collaboration among APsaA analysts, non-analytic members of the Education Division Liaison to Schools Committee, and high school students, their teachers, and in some cases the clinician parents of students.

The development of this partnership is an example of how the Education Division is reaching out and partnering with institutions at every level of the American education system.

Two important participants in the Teen Web Site Project are APsaA Educator Associates who come from the Education Division’s Liaison to Schools Committee. They are Tillie Garfinkel, the committee chair and a public school principal with a longstanding interest in, and extensive knowledge of, the ways psychoanalytic understanding can be useful in the school environment; and Dan Frank, a member of the committee, a student of human development with a Ph.D. from the University of Chicago (where his mentor was the distinguished analyst, Bert Cohler), and the principal of the Francis W. Parker School in Chicago.

SEX AND DREAMS

In order to make the Web site a possibility it was clear at the start that a primary site where analysts and students could interact in an ongoing way had to be identified. Dan Frank was approached, and he proposed a Francis W. Parker-APsaA partnership. His vision for Web site planning was that Parker students would discuss sex and dreams with analysts and identify areas where analytic thinking could be helpful to them. Frank also emphasized that students and analysts would have to engage in a conversation through which analytic sensibility could be defined in a way which made sense to high school students and form the foundation for conversations which would eventually appear on the Web site. He also recognized that Parker teachers would have to be involved, because interaction between students and their teachers would also be an important dimension of the developing Internet site.

Finally, seeing Parker as a learning community which included the families of its students, Frank believed that mental health professional parents should participate in the project.

In September, 2008, a think tank meeting was held at Parker, in which Frank led a group composed of analysts Cynthia Carlson, Bert Cohler; Robert Galatzer-Levy, Prudy Gourguechon, Jim Hansell, and me. In another category was Colin Pereira-Weber, who is not only an analyst, but a Parker parent, and two psychoanalytically oriented psychotherapist parents, Evelina Pereira-Weber and Shira Saville. Parker teachers included Theresa Collins, Mike Mahany, and Kate Tabor of the English Department. Marty Moran and Julie Schumacher of the History Department, Ray Llanes, who teaches Web page design, Gary Childrey, a teacher of psychology and the school counselor; and Duane Freeman, another school counselor. Paul Erb, of the Information Services Institute, participated by telephone at the invitation of Frank.

In addition, two Parker students attended the think tank, Nicole Hunter and Joey Schullo.

As a result of the think tank the central goal of the Web site was established: to create an informative, interactive site dealing with sex and dreams, which would answer the questions teens have, while promoting awareness of psychoanalytic sensibilities and values.

WIKI POSTINGS

The project manager’s position has been assumed by Kate Tabor. Tabor was instrumental in introducing the think tank participants to a wiki, an Internet space where students, teachers, and analysts have interacted through postings. An interesting series of wiki contributions are the dream poems of students in Mahaney’s English class. These are poems based on dreams the students have remembered upon awakening. The poems will soon be discussed by the analysts working on the project, and their responses will be vetted by Garfinkel, who will work with these analysts to craft their comments to the needs of teens using the Web site.

Next steps, under Tabor’s management, will involve working with Parker teachers, and

Continued on page 24
STDs—Reaching Out to Teens

Dottie Jeffries and Mary E. Tressel

Despite their fixation on all things digital, today’s teenagers still cling to a static art form that has been popular since Baby Boomers were their age: the pop art poster. From the “Hope” posters of President Obama’s successful campaign by graphic artist Shepard Fairey to the standard rock band and movie star variety, posters are a proven cultural communications vehicle in public space. The American Psychoanalytic Association took advantage of this phenomenon by developing a new poster focused on “Psychological STDs” (Stress, Trauma, and Depression) to serve as the heart of a new outreach effort to teens.

THE RESEARCH

APsaA has paid close attention to the paths professionals traverse on their way to becoming psychoanalysts. The “10,000 Minds Project” determined that the future of psychoanalytic thought depends on engaging undergraduate college students in psychoanalytic ideas. Further research and a New York Times article entitled, “Freud Is Widely Taught at Universities, Except in the Psychology Department,” revealed that psychoanalytic theories were often presented by college professors in abstract or harshly critical ways. In one effort to combat this tide of misinformation, APsaA established the “Teach Psychoanalysis” Web site (www.teachpsychoanalysis.com) to provide course material, recommended resources, specific teaching aids, and career opportunities for interested instructors. Additional outreach efforts were utilized to enhance psychoanalytic dialogue and research through the nation’s higher education system.

APsaA sought to build on the success of the 10,000 Minds Project and drill deeper to develop an interest in psychoanalysis with even younger students. An organizer of New York City’s primary science fair has commented that interest in the behavioral sciences is very keen among high schools so the organization’s objective is to expose today’s teenagers to the benefits of psychoanalysis and to cultivate interest in learning more about the field of study before they enter college. APsaA zeroed in on the two primary areas of interests that compel teenagers to enroll in psychology courses during high school as reported by San Antonio, Texas, high school teacher of psychology Kay Minter: sex and dreams.

THE POSTER

APsaA worked with a graphic designer to create a poster that addressed the adolescent fascination with sexual activity, while outlining three of the most commonly experienced teenage psychological ailments. The “Psychological STDs” are defined as “Stress, Trauma, and Depression.” A pensive teen girl provides an illustration of the deeper issues at play in the poster’s text.

For each of the STDs, a definition is provided along with suggested psychoanalytic treatment approaches. For instance, the difference between normal mourning behavior and chronic depression is outlined. The text offers an affirming message: “Psychoanalysis holds that by understanding on a deeper level what’s going on now and its connection to your past, you can experience relief from the current bout of depression and enjoy life again.”

The new poster introduces basic psychoanalytic theories in an engaging, eye-catching way. Approximately 1,600 posters were produced and distributed nationwide via the mailing list of the Teachers of Psychology in Secondary Schools (TOPSS) division of the American Psychological Association. A cover letter sent with each poster guides the teachers to a dedicated Web page in the Education Division of APsaA’s Web site (http://www.apsa.org/TRAININGANDEDUCATION/EDUCATIONINITIATIVE/PRECOLLEGE/tabid/198/Default.aspx). This Web page features:

• A fully annotated lesson plan for addition to high school social science curriculum, “Freud’s Impact on the 21st Century”
• An article entitled, “Catching Them Early: Teaching Psychoanalysis to High School Teachers”
• Links to APsaA Web pages such as: Q&A about Dreams; Q&A about Guilt, Apathy, & Violence; Psychoanalytic Perspectives about Dreams; and The American Psychoanalyst Special Section on Dreams
• Additionally, the cover letter offered local members of APsaA as a resource for classroom speakers to interested teachers

THE RESULTS

Psychoanalysts who attended APsaA’s Winter 2009 Meeting were fascinated with the educational poster.

“To me, the poster represents a new level of achievement for APsaA’s public information outreach efforts,” commented APsaA president Prudy Gourguechon. “The STD theme is incredibly arresting, and the twist, changing the meaning of STD from the common one of sexually transmitted diseases to the newly coined mental health message, grabs the viewer and keeps her focused and thinking for a prolonged period of time. I think the twist and the new message are powerful tools to combat the micro attention span of most teens (and American adults). Our psychoanalytic message must always be conveyed succinctly, but it is also complex and finding a visual and linguistic hook to slow down the observer and turn her into a reflective thinker is terrific.

“When I first saw this poster at our January 2009 meeting, I immediately had visions of it in every high school nurse’s office, home room, and teen clinic. My dream would be to find a partner with greater resources than ours to help distribute it widely. A space at the bottom could be left to insert local resources,” Gourguechon said.

Copies of the poster for high school teachers are available in APsaA’s Online Store. For more information about the poster, contact Dottie Jeffries at djeffries@apsa.org.

Dottie Jeffries is the director of public affairs of the American Psychoanalytic Association.
Mary E. Tressel is an award-winning independent public relations consultant with 20 years of experience. In addition to her work with the San Francisco Center for Psychoanalysis, she has been providing public relations support to APsaA for the last four years.
You’ve been hearing about STDs (sexually transmitted diseases) since the fifth grade. Here are the facts about high school’s toughest psychological STDs: stress, trauma, and depression.

Stress - Psychological stress is a reaction to external pressure. Some stressful situations are of the once-in-a-lifetime variety, like taking the SATs or going to a new school. Others are lifelong—a chronic illness, for instance, or a learning disability. It’s normal to react to stress with worry and tension. The psychoanalytic approach consists of helping you to understand that these responses are normal, healthy and necessary, assess the extent of the pressure; and develop a strategy for coping with the pressures.

When your stress seems out-of-control, an analyst or mental health professional might encourage you to investigate whether the current stressful situation is reminding you of earlier stressful situations, such as a separation from a parent, an accident, or an illness.

Trauma - Psychological traumas is a deep emotional blow or wound. While many emotional wounds take a while to resolve, a psychological trauma continues to linger. When the shock is powerful enough—abuse, a death, or an accident—your mind may not be able to respond sufficiently through regular emotional channels such as mourning or anger. Often you find yourself re-visiting the trauma through repetitious thoughts, dreams or placing yourself in other traumatic situations. Psychoanalysis can help you to develop emotional and behavioral strategies to deal with the trauma.

Depression - Freud was the first to differentiate between mourning and depression. Mourning is temporary sad behavior that follows the loss of a loved one or some other major disappointment in life. Depression looks and feels like mourning but carries a crucial extra component: low self-esteem.

Depression in general is anger turned inward—self-loathing. You may have feelings of helplessness, shame, and humiliation. As a result, you distance yourself from your closest relationships, find no satisfaction in school, and don’t see the point in normally pleasurable activities such as going to the movies with friends, reading a good book or eating your favorite foods. Sometimes this withdrawal makes you want to do nothing but sleep; sometimes the self-loathing thoughts keep you awake at night. You may even be thinking of suicide.

Psychoanalysts believe that such extreme emotions are not just biological but can sometimes be caused by current or past very difficult life events, such as an early separation from a parent through death or divorce, an accident, a mental illness in the family, or something that doesn’t seem obviously traumatic. Psychoanalysis holds that by understanding on a deeper level what’s going on now and its connection to your past, you can experience relief from the current bout of depression and enjoy life again.
“Lesson Plan”  
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I then recruited some respected colleagues to help write the outlines. Joshua Ehrlich, from the Michigan Psychoanalytic Institute, drafted Lesson 2. Howard Lerner, also from Michigan, drafted Lessons 3 and 5. Wendy Katz, from the Columbia Psychoanalytic Institute, wrote Lesson 4, and I drafted the others. After many months of e-mails and conference calls to edit, coordinate, and consult (including very helpful input from honorary APsaA member Nancy McWilliams, then president of Division 39), the six outlines were finalized in 2006. In 2007, the high school teachers added the supplemental content, and another round of editing began. Currently, I am pleased to report that APA has just published, and has begun to publicize, the whole, final package. (APA members can check it out at: http://www.apa.org/ed/topss/unitlesson.html). As a result, we hope that some of next year’s 500,000 high school students of psychology will be turned on to psychoanalysis, and may make their way in our direction at some point in the future as mental health professionals, patients, or supporters.

Teen Web Site Project  
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students, as well as analysts, to implement the transfer of material from the wiki to the Web site. This will include writing scripts and outlines for tapings of conversations between students and analysts, which correspond to the main questions students want answered. These tapings will take place next September.

The Teen Web Site Project is innovative because it blends the perspectives of APsaA analysts, high school teachers and parents, and high school students, in the construction of an Internet site to be used by teens. This model of analysts working together with these groups to create an educational vehicle which offers accurate, psychoanalytically informed and sensitive information is an exciting example of what is possible as APsaA actualizes its commitment to finding its place in the arena of public discourse.

AMERICAN PSYCHOANALYTIC FOUNDATION COMMITTEE


BOSTON PSYCHOANALYTIC SOCIETY

$2,500 for the migration of its unique collection of deteriorating audiocassette tapes to a digital format, thereby preserving valuable recordings and making them available to a wider community of psychoanalysts, historians, and other researchers. Once they are digitized, these recordings of interviews and lectures will be available online.

CHICAGO INSTITUTE FOR PSYCHOANALYSIS

$5,000 for a new outreach initiative—The Analytic Service to Adolescents Project (ASAP) at Morton Alternative High School located in Cicero, Ill. This in-school program has a four-fold aim:

  • To provide six high-risk students at Morton Alternative High School with the opportunity to meet with two clinical social workers in individual sessions once a week;  
  • To provide group counseling to another set of six high-risk students once a week;  
  • To provide the parents and siblings of all 40 students enrolled at the school with the opportunity to meet with a family coordinator; an experienced social worker who will make personal visits to their homes on a regular basis; and  
  • To provide weekly group consultation to Morton’s six teachers and six staff members so that they may better manage the emotional demands of their own positions, working in a school setting that is rife with daily tension and difficulties.

In this way, the ASAP project strives to be a community intervention whose activities will help not only the high-risk students themselves, but also their families and teachers. Such an endeavor can have a tremendous impact on the school population as a whole, producing benefits that are powerful and far-reaching.

JENNY WAELDER HALL CENTER FOR CHILDREN

$2,900 to train military child psychiatry and social work fellows at Walter Reed Army Medical Center (WRAMC) in psychoanalytically-informed consultation to preschool day care center staff. WRAMC offers a two year post-graduate fellowship training program to child psychiatrists and social workers (four to six each year) in the army and navy. This project will provide the fellows with training specific to the particular challenges faced by children of military families, such as the impact on the children (and families) of parents who are, will be, or have been deployed and parents who return from combat with significant mental and/or physical impairments.

APsaA MEMBER JULIE JAFFEE NAGEL, PH.D.

$2,000 to support “On the Aural Road with Psychoanalysis and Music”—a series of programs available to APsaA’s affiliate societies that will focus on the concepts that link “tone and talk,” i.e., music and psychoanalysis. Each program will include a presentation, a lecture/recital that illustrates the intersection of music and mind, and an opportunity for faculty and candidates to discuss how psychoanalysis and music inform each other. Each presentation will highlight music as an instrument of change in the clinical encounter.

NEW CENTER FOR PSYCHOANALYSIS

$4,000 to develop a training module for mental health professionals and others working with patients with eating disorders.
Meeting the Challenge of Rehabilitation for Boundary Violators

Marvin Margolis

The past 25 years have led to a sea change in the way our institutes and societies handle ethical issues. Ethics and assistance committees have been mandated by APsaA. Our ethics code has been revised; we have published an Ethics Case Book, and made significant advances in candidate and faculty ethics education. As a result there seems to be a decrease in the most egregious boundary violations. We cannot be as proud of our efforts to establish rehabilitation programs for ethics violators. Our ethics code is essentially silent about rehabilitation. There are no procedures recommended by our Ethics Committee. In most of our sites there have been at best only preliminary discussions regarding rehabilitation. Nevertheless, rehabilitation efforts are under way in a small number of our sites. The challenge for our Association in the next decade is to establish rehabilitation programs for ethics violators.

To further this process, the Committee on Psychoanalytic Education (COPE) established a new study group on “Boundary Violations and Rehabilitation,” which began meeting biannually in 2007. The members of the committee, which I chair, have been active in both local and national ethics committees. The members include: Sydney Arkowitz, Rita Clark, Suzanne Gassner, Prudy Gourguechon, Rion Hart, John Hall, Frederic Levine, and Vaia Tsolas. We began by reviewing the existing literature and interviewing former patients and their analysts as well as colleagues involved in rehabilitation where that is in place. We are indebted to them for their courage to revisit these painful issues so that others could profit from their experience and hard-won insights.

AMBIVALENCE

As analysts we might be curious about the disparity between our vigorous attention to sanctions and our relative neglect of rehabilitation. Clearly, we have been profoundly disturbed by the unethical conduct of our colleagues. It is even understandable that we would want to deny our commonality with such behavior by extruding them from our midst. Therefore, we may tend to view such colleagues as being unworthy of remedial action. However, as analysts we are also committed to a belief in the potential for change that can arise from a treatment that aims at explicating and resolving unconscious conflicts. This is the tension we work with that undergirds our ambivalence towards rehabilitation.

It has become painfully clear that the sequelae of severe boundary violations are so widespread that rehabilitation programs must encompass our entire analytic community and oftentimes our larger community of support. Of course the highest priority should be given to patient-victims as well as to the analysts who have transgressed. Our rehabilitation focus in the past has often been too narrowly directed at the impaired colleague. Clearly the rehabilitative effort for most situations will take place over a period of years.

BROAD SPECTRUM

Where a broad spectrum of efforts has been mobilized, some communities have responded positively. Where a comprehensive strategy was not undertaken, the residual damages have been deep and of long duration. A demoralized, divisive, depressed psychoanalytic community interferes with the growth of practice, candidate recruitment and education, and even undermines the progression of colleagues towards certification and training analyst opportunities. The psychoanalytic culture of these communities that contributes to the ethical morass must be changed. Our study group is collecting narratives of community healing to learn what they did to achieve their success. Trauma can lead to growth. A psychoanalytic community that experiences ethics crises can emerge from such a calamity with greater understanding of its problems and adopt creative efforts to reaffirm its psychoanalytic identity. The same applies to the individuals involved directly in these problems.

Some feel that outside analysts by virtue of their greater objectivity ought to be in charge of the transgressors’ rehabilitation efforts. They claim that local colleagues are too familiar with the erring analyst and are less likely to be objective. Protagonists of local efforts note that their knowledge of and ongoing contacts with these colleagues is more comprehensive. Most would stipulate that a return to treatment and supervision would be central to any rehabilitation plan. Many would also include restitution of analytic fees. All seem to agree that remorse and a personal apology would be desirable but difficult to assess in regard to its sincerity.

Colleagues who will monitor the transgressors’ rehabilitation need to report their findings to an oversight committee distinct from the group that originally decided on the sanctions. The period of rehabilitation is very difficult for the sanctioned colleagues as well as the involved patients. Both therapist and patient often suffer ostracism. They are frequently treated as toxic, damaged goods. All parties deserve our support and encouragement during this difficult period.

RESTORATION

Clearly it is very difficult to determine an end point to this process. The damage lives on for years. Yet, the oversight committee must ultimately suggest a phased-in reentry for the full restoration of member privileges and responsibilities. As in clinical practice, we look for a good enough result, not a perfect rehabilitation.

Some of our ethics committees are overly severe in their sanctions. This can be as unfortunate as the earlier period in which ethical...
I look forward to serving you as your president these next two years, and meeting and working with many of you during my term. I hope you enjoy this first issue of our revamped newsletter, The Candidate Connection. I want to thank Susan Flinders, editor, and Navah Kaplan, assistant editor, for all their hard work in bringing this project to fruition. I also want to thank all of you who contributed to this issue and to encourage everyone to consider writing for our newsletter in the future. The Candidate Connection will be published twice a year, in June and January.

Before I share with you some thoughts on what issues I plan to focus on during my presidency, I would like to tell you a bit about the Affiliate Council officers who will be serving with me in the Executive Committee. The president-elect is Hilli Dagony-Clark, who is a fourth-year candidate doing combined adult and child training at the New York Psychoanalytic Institute. Richard Grossberg is the treasurer, and a fourth-year candidate from the Cleveland Psychoanalytic Center. He is a pediatrician who came to training through COPAP, the Committee on Preparedness and Progress. Anne Malone, secretary, is a senior adult candidate and a third-year child candidate from the Psychoanalytic Center of Philadelphia.

We have been hard at work since our January meeting in New York, updating our rosters and reaching out to many of you to get involved in APsaA. For example, we learned that out of the 103 new candidates that started training in fall 2008, 34 had not joined APsaA. The Affiliate Council Executive Committee followed up with these candidates, many of whom had forgotten to join APsaA with the early pressures and busyness of beginning analytic training. It seemed that candidates were often uncertain where to get applications, and how to follow up with the application process. So, together with the National Office, we were able to put the APsaA Affiliate membership application online. All new candidates can download the application at www.apsa.org/joinapsaa. Please share this information with other candidates and your institutes.

THE BUSINESS OF RUNNING A PRACTICE

As you know, the demands of analytic training, which can challenge the balance between personal and professional lives, and the recent economic pressures make this a particularly trying time for all of us who are beginning or developing our psychoanalytic practices. Throughout my training both in psychology and psychoanalysis, I have been interested in how little attention is devoted to teaching the business aspects of running our practices. One gets the sense that discussions of promotional endeavors, marketing, and outreach are considered at the very least distasteful, if not unnecessary. This may have been the case decades ago, when psychoanalysis was in its heyday, and there was no shortage of patients interested in and eager to engage in psychoanalytic treatment. However, as you well know, we live in a fast-paced world that relies more and more on technology as a way of communicating, where many, if not most, patients expect speedy results, and where we now compete in a vast marketplace of mental health treatments. The recent economic downturn is an additional important example of how we need to contend with external realities.

Although these may sound like considerable challenges, they are certainly not insurmountable, and I believe that they offer us great opportunities to re-enliven and propel the field of psychoanalysis forward, as well as develop successful practices. During my term as president, I would like to try to help us focus on these precise issues—how to develop successful practices as psychoanalysts in our current world and our current economy, and how to promote ourselves and psychoanalysis both in our local communities and nationally.

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The Candidate
Online Journal Thrives

Brenda Bauer

The Candidate, a free online journal, now in its fourth year, has stimulated lively, thoughtful scientific exchanges generated by its first three volumes, and recently announced its call for papers for Volume IV on Power (see box below). Conceived by 15 New York University Psychoanalytic Institute (NYUPI) candidates to provide a context for candidates to think, read, critique, and write about issues germane to their candidacy and psychoanalytic education, the journal is guided by faculty members Rachel Blakeman and Hilary Rubenstein Hatch (both inaugural editors of Volumes I and 2 while candidates), Donald Moss, Steven Reisner, Joseph Reppen, Arden Rothstein, Jennifer Stuart, and Lynne Zeavin. The Advisory Board consists of analysts experienced in publishing from many institutes around the country.

The journal has always reached out to all psychoanalytic institutes, regardless of affiliation or theoretical orientation. One goal of this endeavor is to deepen and enrich the training experience by encouraging such diversity. Although The Candidate directs its call for papers to candidates, it also welcomes submissions from faculty, graduates, and non-candidates that address issues relevant to candidates, such as psychoanalytic education and the institutional milieu. Additionally, the journal occasionally invites specific authors to write on a particular subject, and frequently to prepare a presentation that pertains to a specific volume.

POPULAR, INDEPENDENT, THOUGHT PROVOKING
It is remarkable that at a time when many journals, and even magazines and newspapers, are folding, The Candidate has seen record numbers of unique visitors visit its Web site. In 2008 alone, over 4,000 unique visitors logged on to the Web site, rivaling the circulation of many major journals. Could it be that high demand for The Candidate indicates not only significant candidate interest but also greater than anticipated general interest in psychoanalysis?

The Candidate has spawned other ventures, such as the Inter-institute Candidate Alliance, a group of candidates from several New York City psychoanalytic institutes, APSaA institutes, and independent institutes, which organizes free programs aimed at candidates from the many psychoanalytic institutes. Last September, for example, this group organized a panel titled, “Orthodoxy Is Unconsciousness: Examining Gatekeeping Practices at Our Institutes. A Dialogue across Institutes Initiated by Candidates.” The panel included seven analysts, representing seven different New York institutes. Candidates served as moderators.

The official deadline for submissions is June 1, 2009, however; The Candidate will consider submissions for Volume IV throughout the summer. The Candidate is always interested in receiving papers on other psychoanalytic topics.

Submissions may be sent to candidatejournalsubmission@gmail.com. Inquiries may be directed to Jason Wheeler, Ph.D.

We are pleased to announce that beginning with the publication of Volume 4, The Candidate Journal Prize will be awarded for the best paper published in each volume.

To make a charitable donation in support of this free online journal, please make checks payable to “FOSPER” and indicate “The Candidate” on the memo line. Checks may be sent to Terry Blanken, Ph.D., 5 West 86th Street, Suite 9C, New York, NY 10024.

The Candidate at a Glance

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**The Candidate**

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**KEEPING IN TOUCH**

There is a lot for us to do, but there are simple steps we can begin to take. One is for us to communicate better with each other and to use the resources we have to do so. This newsletter is one way we can keep each other updated not only about committee work and training issues at our institutes, but also about how we can further develop our practices and ourselves as analysts. Another resource we have at our disposal is our Affiliate listserv. Why is it so underutilized? Finally, as some of you may have read in the minutes of our January meeting, Laura Jensen, our previous Affiliate Council president, is working on a candidate blog, www.affiliatecolumn.wordpress.com, that will be up and running soon.

Another sure way to move forward in developing our practices and the field of psychoanalysis is to get involved, locally both at your institutes and within the communities where you practice, as well as nationally. The value and benefits of doing so cannot be stressed enough. I can tell you that from my own experience, being involved nationally at APsaA and at my home institute (NYU), as well as participating in a variety of community endeavors, has enabled me to develop a network of colleagues and friends, which in turn has helped me build a more stable practice.

**GETTING INVOLVED**

I want to end by briefly reviewing some of the ways in which you can get more involved nationally and to emphasize that the commitment to participate in any of these does not require endless hours of work. You will get out of it, as with many things, as much as you put into it. First of all, you can become an Affiliate Council delegate or alternate. Would it surprise you to know that there are several institutes not currently represented? The delegates are the most important part of the Affiliate Council, because they are the link between APsaA and its individual institutes. You can become a member of any of the existing Affiliate Council committees (Affiliate Participation, Candidate Organizations, LGBT Issues, IPSO Liaison, Racial and Ethnic Diversity, Scientific Paper Prize, TAP newsmagazine, and Scientific Programs and Training) or even develop and propose ideas for new committees. Finally, you can become a candidate member in many of APsaA’s committees, where you can learn and join in the efforts the Association is putting forth to restore and develop the place of psychoanalysis in today’s world.

The Affiliate Council meets during the APsaA meetings on Thursday morning, and this meeting is always open to all candidates. This summer, the Affiliate Council will meet during the IPSO/IPA Congress (www.ipa.org.uk) on Wednesday, July 29 at 9:00 a.m. My plan is to devote a good portion of this meeting to a beginning discussion of the business of developing our psychoanalytic practices—what we do, how we do it, and how we can do it better. I hope to see many of you there. In the interim, if you have any questions, please feel free to contact me by e-mail, drperez@dynamicpsych.com, or phone, 212-674-6444.

**Editor’s Note:** TAP has invited the Affiliate Council president to reprint the President’s Letter from the Affiliate Council newsletter, The Candidate Connection, on an ongoing basis.

**RICH MULTIMEDIA WEB SITE**

The Candidate also maintains an exciting video and audio archive on the “Screening Room” section of its Web site. Here, Hilary Rubenstein Hatch, a candidate then, interviews Roy Shafer about his psychoanalytic candidacy from 1954-1959. Shelley Orgel interviews Dale Boesky, Donald Moss interviews Nancy Chodorow, and candidate David Cole interviews The New Yorker art critic and bestselling author Adam Gopnik, to name a few original video highlights. There are also videos of Jacob Arlow, Ernest Jones, reminiscences of Freud, and an online photographic tour of Freud’s consulting room in Vienna to round out these offerings.

The “Culture Desk” offers book and film reviews and cultural commentary. Panels and roundtable discussions (events that are free and open to the public) are also documented and catalogued—most recently, the “Money, Gender, and Psychoanalysis Roundtable”—making for a rich multifaceted Web site.

In short, The Candidate is not simply an online journal, but a unique repository of original writings and recordings, as well as a growing media collection of seminal psychoanalytic thinkers. Envisioned by candidates for candidates, it appeals to even the most experienced students of psychoanalysis.

**The Affiliate Council will be meeting in Chicago, during the IPA Congress. Join us on Wednesday, July 29 at 9:00 a.m.**
The Importance of Becoming Involved: Finding a Home and a Future in Psychoanalysis

Hilli Dagony-Clark

After completing a psychodynamically-oriented doctoral psychology program, I found myself deeply invested in learning more about the complexity of the human mind through the most comprehensive and thorough method I knew: psychoanalysis. While obtaining clinical hours and studying for my licensing exam loomed large in my mind, more expansive was the gap that was once filled with the magic of discovery. I very much wished to apply concepts I found captivating during my graduate studies—intrapsychic conflict, compromise formation, transference—and see them come alive in a meaningful treatment process. Stuck between my newfound identity as a psychologist and the clinician I wished to become, analytic training seemed an ideal option. Little did I know that this training would not only provide me with a precious scholarly future but would also afford me access to an interconnected kinship spanning institutes, states, and countries. It is through involvement with this psychoanalytic community that I received referrals, began a private practice, and took on an active participatory role. My involvement in the psychoanalytic community has been remarkable in that it has allowed me to discover the richness and depth that characterizes stellar educational ideals fueled by the clear devotion and commitment of individuals at the very heart of the field. There are endless reasons to become involved in a psychoanalytic community that many consider home. Outlined are a few compelling motives aimed at addressing the importance of active participation in our field. While the busy world keeps us all spinning, involvement with psychoanalytic thought and principles provides a welcome anchor.

PROMOTION OF SOCIETAL MENTAL HEALTH

The fact that Americans are in the midst of a deep national crisis is well known. Families bereft of members serving in the military, individuals losing their jobs and homes, and the threat of terrorism, are just a few of the worries plaguing the national psyche. Psychoanalytic treatment, with its comprehensive vision of the unconscious and the endless possibility of creative thought in a quest for personal meaning, can provide infinite relief and adaptive solutions to those in the midst of sudden crisis or chronic disturbance. Psychoanalysis is unique in that it allows for discovery of the mind through a privileged and intimate relationship for the purpose of transforming long-standing, maladaptive, and deeply entrenched responses to the world. Promoting psychoanalytic treatment through communication with the media and community outreach is needed to raise public awareness of psychoanalysis and thus provide suffering individuals with enduring relief and intrapsychic freedom.

PREVENTION OF OUR FUTURE

In a world where short-term psychotherapies based on symptom reduction and/or pure medication management are promoted by insurance companies and sought by many in desperate need of quick solutions, it is easy for psychoanalysis to be overlooked. The intensive time and financial obligations, as well as the methodical and often painful uncovering of the inner workings of the mind, are far from effortless. It is our responsibility as representatives of our field to advance our position and uphold psychoanalytic thought. Involvement in research; treatment of low-fee analytic patients; pro-bono supervision and teaching; and participation in local, national, and international psychoanalytic committees are all ways to ensure our lasting presence in the mental health world.

PERSONAL GROWTH AND DEVELOPMENT

Involvement in a professional body devoted to the enhancement of psychoanalytic ideals is essential to the psychoanalytic clinician. Since the work of psychoanalysis is at times challenging, lonely, rewarding, exhausting and deeply powerful, access to psychoanalytic education, peer supervision, and engagement with like-minded colleagues is crucial for the personal and professional empowerment of the psychoanalyst. The danger of committing ethical violations, losing cases prematurely, or burning out could be mitigated through participation in psychoanalytic activities aimed at uniting and teaching analysts who are deeply invested in their work.

Participation in the psychoanalytic community provides opportunities to contribute to those in distress, ensures our survival as a field, and fosters academic growth and a sense of community. Although conflict within psychoanalytic organizations might decrease individuals’ willingness to commit to extracurricular psychoanalytic activities, the global rewards for involvement far outweigh the current difficulties. I have found my professional home through my psychoanalytic studies, psychoanalytically related activities, and the people I have come to know. I can think of no better way to ensure the progression of psychoanalytic thought and treatment than to continually involve myself in the local, national, and international psychoanalytic community that has already given many of us so much.

Hilli Dagony-Clark, Psy.D., is president-elect of the Affiliate Council, a candidate in adult psychoanalytic training at the NY Psychoanalytic Institute, and a candidate in child psychoanalytic training at the combined Child Program of NY Psychoanalytic, NYU Medical, and Columbia Psychoanalytic Institutes.
The Long Haul
Continued from page 1

THE ESSENTIAL TRIAD: COHESION, LEADERSHIP, AND TRAINING

Now I’ll give you a one-breath summary of preventive psychiatry in military organizations, and it really is one breath although I may expand some sentences and make it two breaths. But when you hear these three simple things I want you to know that it is a vast issue in practice and very heavy lifting for the military services. So here’s the pitch.

There are three things that protect the mind and spirit of the people we send into a fight, and those three things are first, cohesion, which is positive qualities of community in the face-to-face unit; second, expert ethical and properly supported leadership; and then third, prolonged cumulative and highly realistic training for what they actually have to do and face. Do those things and do what it takes to improve cohesion, leadership, and training and avoid doing those things that wreck them.

But the story that I started to tell you was how I stumbled into saying some new things about Homer’s epics. During my first year at the VA Day Treatment Center in Boston in a program for Vietnam combat veterans who were angry, abusive, demanding, narcissistic—gosh, they were wonderful people!—I realized that I was hearing fragments of the story of Achilles over and over again, sometimes the whole narrative sequence in the form Homer gave us in The Iliad. And in the same period I became painfully and embarrassingly aware that even in the VA where you would assume that everyone understood how to take a decent combat history that there were very, very few adequate combat histories in the clinical record. So I wrote a little paper that appeared in the Journal of Traumatic Stress. Basically what it said was if you want to take a decent combat history, remember the story of Achilles and you’ll touch all the bases. I was proud of that. What a nifty teaching idea! Well, at the time my daughter was a freshman at Harvard College and taking Professor Gregory Nagy’s course that the freshmen lovingly called Heroes for Zeoros. Gregory Nagy, I suppose it is fair to say, is the leading Homer scholar in the world, but maybe just to stick it to him I say one of the two or three leading Homer scholars in the world. He came to my apartment and said, “Would you expand this into a book for one of the series that I edit because this has never been said before.” “What?” All I said is that The Iliad really is about war and what matters in the heart of the soldier in war. “Never been said before,” said Nagy. Well, I can tell you that if Shay says that something is or is not in the corpus of Homeric criticism that and a nickel will get you a bowl of gum in the supermarket, but if Nagy says something is or is not in the corpus then you can go to the bank with it.

So, I cut out the general psychiatry part of my practice, kept the combat veterans program, rented a studio, and wrote Achilles in Vietnam. This was my one shot at immortality. If you write something decent about Homer, they will literally read it for centuries. It has been extraordinary what that book has done in the world and done for me, and veterans are kind enough to tell me what it has done for them. The second book, Odysseus in America was, of course, no accident, but I’m just your ordinary human critter and I went back to the same well where I got an adequate drink before. I tried to pull the same stunt with The Odyssey and you have to judge whether I pulled it off. It took a different approach because these literary works are very different. The Iliad is a tragedy; The Odyssey is a romance. The Iliad is a very straight ahead linear narrative; The Odyssey is a widely complex narrative structure with stories within stories within stories.

Maybe I pulled it off and maybe I didn’t but it gave me an opportunity to do two things which I wanted to do. One was to be explicit, it was implicit in Achilles in Vietnam, but to be explicit in part three of Odysseus in America about the preventive agenda that you just heard. And the other was to make a point that this is not a partisan or ideological issue, and I made it by soliciting the jointly written foreword by a conservative Republican and a liberal Democrat, both of whom have credibility as veterans, “people who paid their dues” and “had seen the elephant.” I can tell you it was work getting them to agree on a common text.

PARALLEL PROCESS AND SOCIAL TRUST

Having heard my rap on prevention, don’t be surprised if you hear snatches of it coming back when I talk about the situation of trying to get things right in the clinic. Remember, my mantra is the positive qualities of community in the face-to-face unit which is, in military jargon, cohesion. In the clinic what we have to attend to is positive qualities of community among the veterans in the program and also, equally important, positive qualities of community in the clinical team. This is not intuitive. There are traditions very much built into the structure of American medicine and American psychiatry and certainly psychoanalysis, that elevate the one-on-one dyadic relationship between a skilled, empathic, and engaged
A stable trustworthy and safe environment of other veterans, in my view, is the royal road to recovery for veterans with psychological injuries.

Now you may suspect me of playing some sort of logical game with you here, but it isn’t. It is very practical clinical stuff working with this population. The key issue, the key barrier; to getting care of veterans with these severe psychological injuries is the issue of trust, the issue of their settled incapacity for social trust. They are not going to trust you on the basis of your credentials or your institutional position. That’s my working definition of social trust in the treatment setting.

Now trust is this explosive issue, especially with those patients, those veterans, who drive us utterly crazy, the ones who are enormous consumers of our energy, our worry, our hospital beds, our staff meeting time, prison cells, whatever resource you name; the key issue is that their capacity for social trust has been destroyed. Now what’s left when social trust is destroyed is not a vacuum, it’s not nothing. What’s left is an active and potentially quite dangerous and firmly settled expectancy of harm, exploitation, or humiliation from every person and institution that they encounter. I confirmed the position that the people I learned from originally asserted, that recovery from this situation happens quite well in a stable and safe community of peers, peer veterans.

THE ROYAL ROAD TO RECOVERY

So, let’s come back to this logical structure. Why is three the minimum case? Because community exists when each of this triad has the well-founded expectancy that when he or she is apart from the other two that the other two, first of all, remember his existence, and second of all, continue to care about this absent person’s well-being and are not planning harm, exploitation, or humiliation. I say all this not because I think that individual therapeutic work is worthless. Far from it, just about every veteran in this program spent long periods in very helpful and valuable individual therapy, but it was always in the context of the group therapies and of the milieu. The holding environment for them was their peers, the trustworthy community of peers. A stable trustworthy and safe environment of other veterans, in my view, is the royal road to recovery for veterans with psychological injuries.

Now it is not as easy to pull off in the real world as for me to stand up here and say it. I need to point out to you some of the depressing downside. Number one is that cohesion, to use the military term, is simply a phenomenon of nature. It is neither intrinsically good nor intrinsically bad. It’s a little like electricity. If it bakes your bread, it’s great. If it electrocutes your daughter, it’s horrible. Cohesion is much the same. Just as military small units can sometimes degenerate into criminal gangs, in the long history of the VA and vet centers occasional groups of veterans have formed criminal gangs in the context of the treatment setting. So there are deformities and degenerations of cohesion that these communities can undergo. It’s critically important for the clinicians not to be so starry-eyed that they either get co-opted by a world view that says that this
misbehavior is good, right, just, and, in a way, cool and that clinicians intervene to stop destructive things that can arise in cohesive groups of trauma survivors. So it is not all sweetness and light and that’s just an example. You have to be vigilant and sure that your team structure and trust within the team in the mental health workplace is doing its self-healing and self-critical work in keeping itself open to the larger ethical horizon. It’s very easy to lose the ethical bubble under the enormous pressure that psychologically injured veterans place on us.

If I trash the diagnosis PTSD, it is because I regard it as badly out of focus, a rather accurate description of a very narrow and specific sort of fear syndrome if you wish, but it misses what actually wrecks the lives of veterans and their families and misdirects us in all kinds of bad ways.

There’s a lot more to say about all of these things. I do hope that you will find a way to have a look at the chapter in the Saigh and Bremner textbook which is cited in your handout [Posttraumatic Stress Disorder: A Comprehensive Text, 1998]. I wrote that with my colleague, Jim Monroe, and it covers a lot more than I can cover today. I regret that because of intellectual property issues that chapter is not available on the Web, which is a drag.
When the trauma surgeon encounters this infantryman, he or she, the surgeon, is thinking first of all about controlling hemorrhage which kills people fast and controlling infection which kills them more slowly. These are the two main complications of ballistic and blast injuries. Obviously the medic out in the field has been thinking about these complications, the soldier’s buddies, and if he is able the soldier himself. The validity of this way of thinking does not rely on the injury being as extreme as a total traumatic amputation of the limb.

ADAPTATION AND PHYSIONEUROSIS

Now in the mental health arena I have advocated that we think of the primary psychological injury as the persistence into civilian life or into life in garrison as the persistence of absolutely valid adaptations that kept you alive in a situation where other human beings were trying to kill you. And doing a damn good job of it because the person to your right, the person to your left were dying or being maimed by the enemy’s action. These are serious adaptations and they’re as much in the physiology as in the mind and Abram Karn diner referred to combat neurosis as a physioneurosis to emphasize this. But it’s also in the social connection which we witness as the incredible bonding of people who fight side by side. The primary injury is the persistence of these adaptations into civilian life or life in garrison. The adaptation occurs in the brain, the mind, the social, and the cultural because we’re just one critter.

Just as an aside, I know that some will bridle at applying the word “injury” to the bonds of absolute obligation that arise between combat buddies but ask military and veteran families about this. Ask direct leaders in garrison about this and ask them if these virtuous adaptations in combat do not sometimes become disabilities when put into play in civilian or garrison life. This is awkward and uncomfortable. We don’t like to think of virtues as disabilities, but I submit that it’s an accurate and actionable understanding. But it’s not real comfortable.

I’m speaking as someone who has done a lot of work with the military forces but as a clinician I’ve only worked with veterans who were injured years ago. And on that basis I have come to the conclusion that the primary injury rarely wrecks a veteran’s life and this is part of my gripe with PTSD. PTSD is not a bad summary of the persistence of valid adaptations. Just like the primary injury, that traumatic amputation, just like that is rarely with today’s military medicine fatal to the infantryman, but the complications can be; just like that complications of primary psychological injury can be disastrous and fatal, and I regard suicide as a complication of combat trauma. Even lesser complications than suicide can totally wreck the capacity for a flourishing human life, not only of the veteran, but the whole family, sometimes their workplace, sometimes their local community. And I, and many historians, believe that the pathogen burden, to use a public health term, of unhealed combat trauma and the complications of combat trauma contributed mightily to the destruction of the Weimar Republic in Germany in the 1920s…

Boundary Violators

Continued from page 25

problems were neglected. Knowledge of the potential for professional ruination can therefore lead some colleagues to bypass our institutions to create their own rehabilitation program. We need to study the problem of overkill as an impediment to improving the ethical climate. Our goal is to create a respected, fair system that all will seek out for help. Finally, it must be recognized that some colleagues may not be capable of rehabilitation. This determination is a difficult one and may require a long period of time.

We are at the very beginning of a long period of evaluation of these recent rehabilitative efforts. We are all indebted to the groundbreaking efforts of Glen Gabbard and Andrea Celenza who have written about our organization’s efforts to create pathways of rehabilitation. Many models of rehabilitation need to be studied. Long term follow-up of results is necessary. Our study group would welcome information of any rehabilitation programs ongoing or completed, formal or informal; complete confidentiality will be followed. We would hope to present a report based on aggregate data so that no institute, society, or individual can be recognized.

While much progress has occurred in recent years, we all recognize that there will always be a few who become involved in unethical behavior. Our group feels that most colleagues can slip into unethical practices at times of uncommon stress and vulnerability. They, along with their patients and communities, merit our best effort at rehabilitation.

In closing, we can acknowledge that the ethical climate in our institutes and societies has improved. APsaA has a deserved worldwide reputation for developing strategies to deal with these problems. The development of a comprehensive approach to rehabilitation is our next challenge.
Samuel Ritvo

Rachel Z. Ritvo, David Z. Ritvo, and Jonathan I. Ritvo

Samuel Ritvo, former president of the American Psychoanalytic Association, passed away on December 3, 2008, at the age of 91. He was an active contributor to the field of psychoanalysis, in particular child psychoanalysis, whose illustrious career spanned 60 years.

Sam first learned of psychoanalysis from articles about Freud he happened upon while delivering newspapers to pay for his education at Harvard during the Depression. In medical school at Yale in the late 1930s, he participated in a discussion group in the Department of Pediatrics led by Edith Jackson, an analysand of Sigmund Freud and co-worker of Anna Freud. The Freuds’ ideas about psychological development, fantasies, and unconscious conflict struck a chord in Sam, who had faced a slew of challenges as a child with a congenital clubfoot. His medical school thesis, written under the guidance of pediatrician and psychoanalyst Helen Richter Gilmore, applied Erikson’s epigenetic theory to a child with an eating disorder. Unlike pediatrics, the Yale Department of Psychiatry in the early 1940s was hostile to psychoanalysis. On his psychiatry rotation, Sam would hide his Freud volumes by turning the covers inside out. Thus Sam began his residency training in pediatrics at the University of Minnesota in Minneapolis rather than in psychiatry.

Homesickness and the desire to undertake a personal analysis motivated Sam to leave Minnesota, after his internship year, for New York, where he did a further year in pediatrics at Babies Hospital, an affiliate of Columbia University Medical School. He continued at Columbia with a three-year residency in psychiatry at New York State Psychiatric Institute. His residency directors supported his leaving the hospital each day for his analysis with Marianne Kris. The New York Psychoanalytic Institute was not so supportive, rejecting his application for training because he was “too anxious.” Determined to pursue an analytic career, he made an appointment with the chair of the Education Committee, Sally Bonnett. He told her he had been further analyzed and was no longer so anxious. To his amazement she scrawled a note in response: “Admit Dr. Ritvo to classes!” For the rest of his life he was an ally, always quietly and discreetly, of the many individuals—as well as non-medical mental health professionals as a group—whose psychoanalytic careers were being sidetracked, stalled, or thwarted by what he saw to be, all too often, hasty and biased dismissal by powerful analysts.

In 1950, Milton Senn invited Sam to join the Yale faculty and participate in the transformation of the Gesell Institute into the Yale Child Study Center (CSC). Sam had research and teaching responsibilities. He set up the child psychiatry training program, one of the first in the nation. His first trainee, Al Solnit, became president of APsaA two years after Sam. He remained training director until 1963 and a member of the faculty until last year.

Sam’s research assignment was to assist Ernst Kris with The Yale Longitudinal Study of Child Development. A prospective, observational study of families enrolled during the mother’s first pregnancy. The Longitudinal Study employed a multidisciplinary team of psychoanalytically oriented pediatricians, psychologists, early childhood educators, and psychiatrists to document the development of the children and the family. When indicated, psychoanalysis was provided. A second research project, The Family Study, arose out of the Longitudinal Study. Under the guidance of Marianne Kris, the Family Study took advantage of a rare opportunity that arose when all four...
members of one family were in psychoanalysis simultaneously. The process of these analyses in conjunction with observations from nursery school and pediatric visits of the two children provided a treasure trove of data for articles published primarily in the Psychoanalytic Study of the Child. Yale Press will publish a volume on the Longitudinal Study in the coming year. Three weeks before his death, Sam completed a chapter for that volume which includes a follow-up interview, conducted in 2005, with “Evelyn,” whom he had analyzed as a child 50 years earlier.

The Child Study Center and the Western New England Psychoanalytic Society and Institute (WNEIP) were Sam’s two professional homes throughout his long career. At CSC he had a unique position as a clinical faculty member with an office on site where he could see private patients as well as teach and supervise. In 1965 he was the first clinical faculty member ever to be made a full professor. He taught generations of child psychiatrists, who visited New Haven’s many ethnic grocery stores during their peripatetic supervisions with Sam. Curiously enough, walks to collect food also stood out in Evelyn’s recollection of her analysis some 50 years after the fact.

Sam was a founding member of the Western New England. He served as a training and supervising analyst from 1957 to mandatory retirement age, director of the clinic from 1962 to 1970, and chair of the Education Committee from 1974 to 1983. With Sy Lustman, Sally Provence, and Al Solnit, he founded the child analytic program at WNEIP in 1962. Sam always brought bagels and lox to Saturday morning meetings.

Although Sam did not enjoy administrative tasks, he valued active participation in professional organizations. He was a founding member of the American Academy of Child and Adolescent Psychiatry and was one of the five signatories to the articles of incorporation that created the Association for Child Psychoanalysis in 1963, later serving as president of the association. Active in the American Psychoanalytic Association, he served on many committees and as president in 1968.

Sam was a sophisticated analytic thinker whose writings were based on keen clinical observations and the organizing influence of ego psychology. His early writings were on child analytic process and the development of the ego and superego. Because he analyzed so many Yale students, late-adolescent development and the transition to adulthood became a focus of his writing. When Yale became coed in the 1970s, eating disorders and mother-daughter conflicts drew his attention. Conflicts of aggression interested him late in his career as he came to value the contributions of Paul Gray.

Sam was a long-time, loyal participant in the Princeton Center for Advanced Psychoanalytic Studies groups organized by Sam Guttman. Enjoying the twice-yearly opportunity for deepening psychoanalytic dialogue, Sam cherished the opportunity to engage with Paul Gray, who elaborated a technique for listening closely to the interplay of drive and defense in the moment-to-moment utterances of the analysand. Testing out this technique with his own patients and teaching it to colleagues at WNEIP kept Sam excited about psychoanalysis to the day he died.

Sam will be remembered not just for the contributions he made to the field but also for his remarkable personal qualities. People were drawn to Sam—to his warmth, his lack of pretense, and his humor. He conveyed his sense that each human life is to be embraced and celebrated in all its diversity of strengths and frailties. But he didn’t stop there: He also sincerely believed in the power of the ego—that people could face and master the challenges their psyches presented to them. He leaves behind untold patients, students and colleagues, family and friends who are grateful to him for the support he gave to their personal strivings.

BOPS and Council

Continued from page 6

1. Greater public and private access to and support for mental health services to veterans, their families, and children.
2. Guaranteed privacy, a foundation of effective treatment and patient rights, with release of information only with the patient’s permission or legal compulsion.
3. Preventive support services for children and families when a family member is deployed.
4. Education of mental health students and professionals about the long-term effect of parental trauma on children.
5. Support for public awareness and education through the media about the impact of depression, PTSD, and brain injuries not only on the veteran but also on his or her family and children.
6. Advocacy for any legislation that will support diagnosis, immediate, and longer term care for veterans, their children, and families.

Our Finest Hour

Continued from page 15

Psychoanalysis, who worked doggedly to help achieve this victory.

Having established this successful beachhead, we have much more to do. We are now moving into the implementation phase, and any or all of these hard won achievements could be undermined by guidelines and regulations yet to be written. Certainly the health information technology (HIT) and insurance industries are already gearing up to try to roll back as many of those gains as they can. The secretary of Health and Human Services (HHS) has been empowered to enact a number of regulations in the coming months regarding implementation of HIT policy.

With the strong alliances we have developed, with our members who are increasingly active advocates for our patients and our profession, and with our respected leadership on Capitol Hill, our Association is in a very strong position to help defend and expand these privacy achievements.
IPA Congress in Chicago

To coincide with the centenary of Freud’s visit on the occasion of his Clark University lectures, the IPA will be holding its biennial Congress in Chicago. With the theme “Psychoanalytic Practice: Convergences and Divergences,” the Program Committee wants you to share your clinical experience with some of today’s most important psychoanalysts: Anna Ornstein, Antonino Ferro, Arnold Goldberg, Cecilio Paniagua, César Guerrero, Claudio Eizirik, Ilse Gubrich-Simitis, Janine Puget, Jean-Claude Rolland, Juan Pablo Jiménez, Leonardo Peskin, Leopold Nosek, Marilia Aisenstein, Robert Paul, Ron Britton, and Warren Poland.

Recent research shows the efficacy of psychoanalytical therapy for some of the most frequent psychological problems. As reported in JAMA, “the therapy can be effective against some chronic mental problems, including anxiety and borderline personality disorder.” This gives us the hope we need to keep working on a field that has been cited as relieving “symptoms of those problems significantly more than did some shorter-term therapies.”

With a variety of themes that includes: eating disorders in adolescence, couple and family psychoanalysis, new parental configurations, transracial adoption, migration, clinical practice in social crisis, building up subjectivity, neurosciences, encopresis, “telephone analysis,” the focus will be on clinical practice and how various theoretical models, as well as our different cultures, psychoanalytic traditions, societies and realities, give rise to different practices.

Famous for its architecture, its beautiful urban landscape, its museums and concert halls, its parks and beaches, Chicago is also an important center in the history of the psychoanalytic movement. Franz Alexander, Thomas French, Therese Benedek, Maxwell Gitelson, and Heinz Kohut are significant figures in Chicago’s psychoanalytic tradition and have impressed an indelible stamp on contemporary psychoanalysis.

We look forward to welcoming you to the 46th IPA Congress!