OVERWELMING EXPERIENCES IN EVERYDAY LIFE
by Patricia Harte Bratt, PhD

Have you or someone close to you been exposed to sudden, unexpected, life-threatening, or overwhelming events? This could be the result of surgery, accident, illness, financial crisis, family or marital crises, loss of a loved one, sudden personal danger; or exposure to violence, war; or a natural disaster. Often we think of trauma as only occurring in the face of instant, catastrophic events. But that is not so. Traumatic stress has many faces. Overwhelming experiences can occur in everyday life, but responses to them can be mastered and transformed into emotionally resilient problem-solving patterns if recognized.

What is trauma?
There are two types of trauma — physical and mental. Physical trauma includes the body’s response to serious injury and threat. Mental trauma includes frightening thoughts and painful feelings. They are the mind’s response to serious injury. Mental trauma can produce strong feelings. It can also produce extreme behavior: intense fear or helplessness, withdrawal or detachment, lack of concentration, irritability, sleep disturbance, aggression, hypervigilance (intensely watching for more distressing events), or flashbacks (sense that event is reoccurring).

A response could be fear. It could be fear that a loved one will be hurt or killed. It is believed that more direct exposures to traumatic events causes greater harm. For instance, in a school shooting, an injured student will probably be more severely affected emotionally than a student who was in another part of the building. However, second-hand exposure to violence can also be traumatic. This includes witnessing violence such as seeing or hearing about death and destruction after a building is bombed or a plane crashes.

Traumatic stress has many faces. However, its universal components, regardless of source, are:

- it was unexpected;
- the person was unprepared; and
- there was nothing the person could do to prevent it from happening.

ACAP’s work with trauma victims has spanned over 30 years of service, treating and training individuals, staff, and organizations confronted with those facing the front line of overwhelming experiences. Those working with these vulnerable populations who have benefited from ACAP’s programs include: child advocacy/protection workers, child life specialists, NJ hostage negotiators, school districts, domestic violence workers, caregivers of the elderly, mental health and medical professionals, family courts, and the governor’s taskforce for PTSD, among others.

The events of September 11 underscored the increasing need for this type of specialized training and services. During the six months following the attack, ACAP faculty provided critical incident services for more than 3,000 victims and their families. The apparent need for expansion in the area of trauma-specialized training and formation of our Applied Psychoanalysis Division accelerated the development of ACAP programs for groups serving vulnerable populations.

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Since my last column, there have been a number of developments in the political field. In New Jersey, where there had been a dormant certification statute for several years, the state has promulgated regulations that have awakened the legislation and all of the various psychoanalytic groups in New Jersey. As I stated in my previous column, several entities are forming or endorsing accreditation agencies that represent a challenge to ABAP and to the recognition of independent psychoanalysis. Recently, William MacGillivray, President of APA Division 39, made a sweeping plea in the division’s newsletter for all tri-discipline institutes to accredit with ACPE, the arm of the consortium. In his column, MacGillivray went so far as to refer to the New York State licensing statute and the one proposed in Massachusetts in the following way:

“More and more state legislatures are being asked to define psychoanalysis as a separate practice subject to separate licensure. The “standard of care” for psychoanalytic practice could be increasingly defined as a sub-doctoral and non-mental health profession requiring medical oversight. In addition, if once-a-week psychoanalyses are defined as “standard,” seeing analysands more than once a week might be considered non-standard.”

All independent psychoanalysts should be concerned with statements like this that attempt at best, once again, to relegate psychoanalysis to the scope of practice of other professions, and, at worst, to eliminate us as practitioners completely. The time to rally around our legislative efforts is at hand and has never been more important. Our biggest asset will be our numbers, so it is imperative that all NAAP members ask, no implre our independent psychoanalyst colleagues who are not members to join NAAP now.

It is not only the tri-discipline institutes that are being recruited by ACPE, but the long-standing independent institutes as well. But make no mistake about it: just as Theodore Reik was offered the opportunity to be a second-class member of New York Psychoanalytic, so would any institute and its independent psychoanalyst members be second class in an ACPE world. We cannot and will not go backwards in this way.

Your support of NAAP and ABAP is essential for our psychoanalytic survival.

Douglas F. Maxwell
President

MEET AEOLIA GRACE BILLETER

Meet Aeolia Grace Billeter, daughter of NAAP member Susanne Billeter and husband Jeff. Aeolia, whose name means “Wind of Grace,” recently celebrated her first birthday.

Fast Facts

- **Favorite Food:** puréed mangoes
- **Favorite Toy:** Baby Einstein Take-Along-Tunes; mommy’s breasts
- **Favorite Activity:** Commando-crawling across floor to retrieve her ball; driving mommy crazy; coolly surveying the world from her Baby Bjorn carrier
- **Best Buddy:** Mommy! No. Stuffed. Animals. (Scary.)
ABAP, INC., MEETING IN NYC
by David J. Dalrymple

Service Is Valued in Accreditation
ABAP, Inc., is a national service agency for institutes with psychoanalytic training programs. This is an important service given that state licensing boards usually will not recognize professional training unless it is properly accredited. Therefore, service is the core of ABAP’s mission, goals, objectives, and attitudes. Accreditation is not a vendor of education. Instead, it ensures the attainment of certain thresholds of acceptability; it promotes quality and integrity at each threshold; and it serves psychoanalytic education and training without controlling it. The dedicated leaders in this accreditation community know that providing service is more important than seeking, securing, or exercising power. They

concentrate on helping psychoanalytic institutions while exhibiting a sense of discipline and restraint about the real or imagined uses of their influence.

As an accreditation body, ABAP, Inc., also informs the public about the accreditation status of training programs. It provides information and collegial “coaching” about the meaning and practices of accreditation. It maintains a means for concerned parties to seek assistance or file complaints and grievances as necessary. It serves the advancement of intellectual, professional, and analytical work by encouraging the fullest possible development of student and candidate capacities.

The work of ABAP, Inc., is primarily mediated through the volunteer professional services of its leaders from a broad array of training programs and schools of psychoanalytic thought. Your colleagues serve as Board members, committee members, and On-Site Evaluators. We especially welcome colleagues who have been involved in psychoanalytic training communities, particularly seasoned faculty members and clinical supervisors. Please contact the Chair of Nominations, Jessica Mitchell (WITPP), at jessica@jessicamitchellphd.com or connect with this office if you would like to participate in the work of ABAP, Inc.
Expand Your Professional Horizons with a Ph.D. in Depth Psychology with emphasis in Psychotherapy

Designed for practicing psychotherapists, this unique program fosters a radical reconnection to the living psyche—a process which involves not only the mind but also the heart, and ultimately one’s whole being. In the life-long process of becoming and being a depth psychotherapist, a commitment to consciousness is crucial. Seeking to acknowledge our own unseen aspects and to penetrate the hidden depths waiting in our clients, we are also led to search for the unacknowledged and unseen assumptions underlying our culture and its values.
THE DUALITY OF PHYSICS AND PSYCHOANALYSIS

By Joe Wyatt

A couple of years ago I began to have the thought that Physics is Psychoanalysis by another name and Psychoanalysis is Physics by another name. I have learned from my studies of Physics and my own analysis that one has to pay attention to these strange ideas that pop up from time to time.

My inquiry into this idea started with my attempts to define Physics for my high school Physics students. I realized that the existing definitions of Physics in the textbooks and other places treated Physics as a “thing.” But Physics is not a “thing” like an object is. If Physics is not a “thing,” then what could it be? I finally realized that Physics is nothing more than a conversation that we have invented to understand the world around us in words. It is, however, a very particular conversation with its own vocabulary and way of speaking. While many everyday human conversations that we engage in are not based on any evidence, the salient feature of the Physics conversation is that it is based on evidence as much as possible. In Physics a piece of knowledge or a fact is considered evidence only when in principle it can be verified and tested by any other human being. This is called the hard evidence criteria. We do not have to actually verify the evidence each time we use it. But we must be able to do this in principle so that we could actually test the evidence on our own if it was important enough or we came upon some new information that caused us to be suspicious of the validity of previous information. In ordinary human conversation we do not normally use this hard evidence criteria.

Another distinction of the Physics conversation is that the Physicist both experiences and observes the world. When the Physicist experiences the world he or she is viewing the world through the filter of their internal emotional states. When the Physicist observes the world he or she tries to minimize the effect of their internal emotional states on their observations. If you engage in the Physics conversation long enough, you come to some startling revelations. You realize that Physics does not explain much and that generating understanding is not the most important feature of the Physics conversation. Physics gets its power not from its explanations but from its ability to describe the external world in language. For example, we know from observation and theoretical considerations that all observers measure the speed of light as the same regardless of their motion but we do not know why this is so. The power comes from describing how light works rather than why it behaves that way. The more precisely you can describe the external world in language the more power you have to exploit the external world to satisfy your needs and wants.

I have a sign in my room at school that reads, “Success in life and science depends on four things: observational competence, computational competence, linguistic competence and a willingness to surrender to the tyranny of the data.” The fourth one is the most important for it further distinguishes the Physics conversation from other conversations. It points to the fact that Physicists are willing to let the evidence trump their feelings and beliefs when the evidence contradicts those feelings and beliefs. Most people will disregard any evidence that contradicts their preconceived notions of how the world works based on their feelings and beliefs. Because of this it is almost impossible to disabuse people of their world view after it has been established. If you speak to a person from a position of evidence and that person listens from a position that evidence doesn’t matter; you get nowhere.

It is also possible to view Psychoanalysis as a conversation that we invented to understand in language the internal world that we all inhabit. Like Physics it has its own vocabulary and way of speaking. If you stop and think about it, Psychoanalysis, like Physics, does not explain much, and generating understanding is not the most important feature of the Psychoanalytic conversation. Psychoanalysis gets its power from its ability to describe the internal psychic world in language. The more precisely you can describe the internal psychic world in language the more power you have to resolve internal psychic conflicts and satisfy your needs and wants. The salient feature of Psychoanalysis that distinguishes it from Physics is that Psychoanalysis focuses on the feelings and emotions as a way of interpreting and understanding the world. In other words, feelings and emotions can trump the data from the external world or badly skew the interpretation of data from the external world to be consistent with ones feelings and emotions.

At first glance, it seems that Physics and Psychoanalysis are alike in that they are conversations but different in the content of those conversations. Physics deals with the external world and Psychoanalysis deals with the internal world. However, if one realizes that human beings inhabit an internal world that is embedded in an external world, everything changes. For all of our existence on this planet, evolution has shaped our physicality and our internal psychic world in response to the external physical world. It is, therefore, impossible to separate the Physics conversation that deals with the external world from the Psychoanalytic conversation that deals with the internal world. It is clear to me that the two most powerful conversations humans have ever invented to describe our world, the Physics conversation and the Psychoanalytic conversation, must be conjoined and intermingled into a single conversation that can be several orders of magnitude more powerful than either by itself. Physicists talk about the external world and Psychoanalysts talk about the internal world. The joining of these two conversations shifts the focus of these conversations to the boundary between them. This would suggest that the basic human problem is how to make the compromises on this boundary that reconciles the wants and needs of the internal psychic world with the external physical world.

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In recent years, especially with the introduction of functional MRI (fMRI) technology, the socio-psychological phenomenon of empathy became the center of attention for neuroscientists. Today, everyone agrees that this phenomenon is pretty complex and that it should be looked at from a multi-disciplinary platform. Although this approach is the most efficient one, its potential downside could be the confusion of tongues between the collaborators of different educational backgrounds, with virtually immanent linguistic biases. These biases include general views on empathy as something very positive (which allows people to feel connected, supported, and that they are helping others - by understanding what they are going through) or something controversial and even negative (as it can cause the “over-identification” with the client and be an obstacle in the analytic situation).

Empathy can be described as the ability to understand and share the emotions of others, or the ability to put oneself in the other person’s mental shoes, while there is a definite distinction between the self and the other during this experience. In the new MIT Press book “The Social Neuroscience of Empathy,” editors J. Decety and W. Ickes describe some perceptions of empathy as the “emotional contagion,” as “projection of one’s own thoughts and feelings,” and as a “fundamental aspect of social development.” Empathy is thought to involve not only emotions/feelings, but also observation, memory, and reasoning.

Modern neuroscientific discoveries show that the “sharing of emotions of others is associated with activation of neural structures that are also active during the first-hand experience of that emotion” (T. Singer and T. Lamm, University of Zurich). Their research also revealed that although this activation seems to be just “automatic,” empathy overall is not a pure automatic mirroring of other people’s feelings. Rather, it can be moderated, adjusted, enhanced, or otherwise, depending on such factors as inter-personal relationships between the involved parties, adoption of the perspective of the other person, contextual appraisal, etc. Singer and Lamm show that empathy involves “information sharing” (bottom-up information processing), perspective taking, and executive control to modulate one’s emotions (top-down processing) through very specific neural pathways that interact with each other.

British psychiatrist Dr. Simon Baron-Cohen, who specializes in autistic developmental spectrum disorders, proposed a new view on empathy as the measure of our human and social abilities (he even equates evil to “empathy erosion”). On the Bell curve distribution, a minority of humans will have the highest degree of empathy or the lowest (zero) degree of empathy, while the majority will be somewhere in-between. Dr. Baron-Cohen introduces another factor when evaluating the pathology of empathy, the “cruelty factor.” People with zero degrees of empathy, and who are cruel, are defined as zero-negatives (e.g., those with Borderline PD, Psychopathic/ Antisocial PD, and Narcissistic PD). Those with zero degrees of empathy but no cruelty (zero-positives) would usually be on the autistic spectrum (like Asperger’s disorder). Their brains process information differently, and while these people are lacking social tools, their strength is in attention to patterns and details, which leads to giftedness and often innovation.

Neuropsychiatrists (like Drs. Baron-Cohen and Thomas Lewis) see empathy as a complex psychological process with different components (emotional, cognitive, metacognitive, biological, and social). Insecure attachments (due to neglect/abuse), studied first in young delinquents by John Bowlby, are the environmental factors contributing to low/zero empathy. The genetic pool of young teens with conduct disorders/low empathy shows low activity of the MAO-A gene (as per Caspi). Other genes associated with low empathy conditions are: CYP1B1, HSD17B2, GABRB3, etc. Also, studies showed that higher testosterone levels in the amniotic fluid of high empathy conditions are: CYP1B1, HSD17B2, GABRB3, etc.

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DOMESTIC VIOLENCE AND INTERGENERATIONAL TRAUMA

By Jan Middeldorf

Domestic violence is an epidemic that affects people from all social and economic classes; yet it is mostly ignored, swept under the same rug of the unconscious, as are its causes: unspoken trauma passed down through the generations. Our conference on June 2nd focussed on four aspects of DV.

First, we described the dynamic of the batterer who comes from the position of mortally fearing abandonment, thus bringing an undermining transferenceal suspicion to their partner relationship. Given that the pain of social rejection is experienced in the same part of the brain as physical pain, self-protective anger is aroused, and grows as more actions of the partner are interpreted as withdrawal. Of course, the batterer’s attitude in itself causes the other to feel insecure about the relationship, creating a nasty feedback loop. The rise of unregulated affects is regressive, because it skews the level of neuronal activation towards the affective limbic system and away from rational cortical functioning. At the apex of the DV cycle, the batterer has lost most of their executive function and is operating from a purely pain-fuelled defensive posture. The Symbolic register is out, the Imaginary is simply terrifying, the Real takes over; and the violence begins.

Unfortunately, this leads the batterer to be inducted into the criminal justice system, which is inappropriate because he or she was temporarily insane, and this system refers them to ‘anger management,’ which does no good since it ignores the powerfully irrational states of mind that cause the ‘crime.’ And thus we have the completely predictable repetition that is the revolving door of DV vs. the System. Our second point, therefore, was to analyze this batterer-system interaction as a repetition of the crushing power of the parent-figure on the already crushed subject.

Yet there is a cause for this madness, and thus a cure. Humans throughout history have lived lives that were highly traumatic, because survival was never assured from day to day. Only recently has there been a consistent rise of the powers of abstraction and symbolization that have led to a somewhat more stable and predictable life for many. But the traumatic unconscious imprints are still there, timeless and unchangeable.

The mother cannot help but pass on her trauma-based emotional reactions to the baby, especially on a micro-level of completely unconscious communication. The degree of attunement between people has been documented to an astonishingly deep level of neuronal entrainment. Thus, trauma does not have to happen just through actual abuse, as it most often does, it can also be communicated unconsciously. The batterer acquires a feeling of catastrophic dread that is not compensated for by soothing solutions, and thus lives in a permanently aggressive state.

Understanding this leads to effective treatment of such patients. A fragile and terrified self needs a place where affect regulation can take place. It is only when the therapist can acknowledge, witness, and join this seemingly irrational experience, recognizing the rage as a natural reaction to a perceived loss, that the patient can open up and eventually explain to us the pain of their battering experience.

At some point we’ll be asked how to stop the cycle. Here we can use all the information we have to ask the patient to observe the unfolding of this repetition. Our joining the experience, each step of the way, instates affect regulation, as well as the speaking of the truth of trauma. In this way healing occurs both in the Imaginary, whose grip gets loosened, and the Symbolic, where creating a narrative can effectively put those very old ghosts to rest.

Jan Middeldorf, PsyD, NCPsyA, is Executive Director of the Colorado Center for Modern Psychoanalytic Studies. He is supervising and training analyst at CCMPs, the Philadelphia School of Psychoanalysis, and the Kentucky Psychoanalytic Institute, and also was President of the New Mexico Psychoanalytic Society.

TRAUMA AND RESILIENCE STUDIES (TRS) PROGRAMS LAUNCHED AT ACAP’S SUMMER CONFERENCE

ACAP has been developing its Trauma and Resilience programs for close to two years and has now launched the initial phase with an exceptionally successful summer conference, “Trauma and Resilience: Healing the Inner Animal,” held on the lovely Caldwell College campus this July. The three-day event had a record attendance with participants from widely diverse professional backgrounds enjoying 25+ workshop choices. Our Sunday Dinner keynote speaker, former NJ First Lady Mary Jo Codey, held the audience spellbound with humor and compassion talking about her own painful journey through post-partum depression to becoming a mental health advocate.

Dr. Patricia Bratt gave the Monday keynote, “Healing the Inner Animal,” providing an overview of how stress reactions develop, the nature of resilience, and how to build resilience skills. Dr. Bratt’s special guest on Monday was Helaina Hovitz, a young woman who was 12 and in school at the World Trade Center on 9/11. Ms. Hovitz, now an author, and Dr. Bratt discussed the traumatic experiences of the “9/11 children,” their struggles to adapt after the disaster, and the community’s failure to recognize the emotional needs of these small victims. Ms. Hovitz has become a strong advocate for trauma and resilience training for allied professionals who will be on the frontline with children in any disaster.

The feedback about the conference has been universally positive. We are so pleased with the community atmosphere, and the opportunity to meet many new colleagues. It is a definite testimony to the need for TRS opportunities, inspiring us to proceed with the full TRS program. We are especially excited about the communities’ responses to learning more about the impact of “overwhelming experiences in everyday life” as triggers for traumatic stress responses, as well as the more conventionally considered catastrophic events that can precipitate stress reactions.
Susan Kavaler-Adler, PhD, ABPP, NPsyA, DLitt

- 37 years in private practice: psychologist, psychotherapist, psychoanalyst, mentor, and individual and group supervisor for mental health practitioners
- Founder, executive director, training analyst, senior supervisor, & faculty at the Object Relations Institute for Psychotherapy and Psychoanalysis – since 1991
- Internationally known object relations theorist, with contributions to the field related to developmental mourning and self-integration through developmental mourning; creative process and creative blocks; healing through creative process and obstacles to healing in well-known women writers and artists, the “demon-lover” complex
- Author of five books and 60 peer-reviewed articles on object relations clinical theory, psychotherapy, and psychoanalysis; 11 awards for psychoanalytic creative writing

Groups Offered:

- **Monthly Psychotherapy and Mourning Group**, with Guided Psychic Visualizations (1st Saturday of the month, 12–4pm; September through June; 115 E 9th Str., 12P, NYC; $130/monthly) – membership is limited, but currently one opening is available
- **Monthly Supervision Group, with Role-playing and Teaching Clinical Theory (In-person)**; 1st Friday of the month, 1:15–2:45pm; September through June; 115 E 9th Str., 12P, NYC; $75/ month)—ongoing group, open for new members. All mental health practitioners are welcome!
- **Monthly Supervision Group (Virtual)** - via Internet or phone, 2nd Friday of the month, 11:30am–1:00pm; September through June; $75/ month)—ongoing group, open for new members. All mental health practitioners are welcome!

Publications:

- *The Compulsion to Create: Women Writers and Their Demon Lovers*—published with Routledge in 1993; with Other Press in 2000; currently republished with ORI Press
- *Klein-Winnicott Dialectic: Transformative New Metapsychology and Interactive Clinical Theory*—in contract with Karnac
- *Anatomy of Regret: From Death Instinct to Reparation and Symbolization through Vivid Clinical Cases*—in contract with Karnac

Contact Dr. Kavaler-Adler by phone 212-674-5425 or email DrKavalerAdler@Gmail.com
For more information, visit www.KavalerAdler.com
Practice location: 115 East 9th Street; 12P; NY, NY, 10003
In the past 24 months ACAP has developed a full range of trauma and resilience programs, including two Level I (in alignment with national certification requirements) Trauma and Resilience Studies courses: GSPA 521 - Evolution of Psychoanalytic, Trauma, and Resilience Concepts, and GSPA 534 - Trauma and the Resilient Mind: Contemporary Theories. A pilot, needs-assessment courses, surveys, and a conference were designed to evaluate the demand for this type of program. The response was immediate with individuals from an array of fields inquiring about and/or registering for the programs. Our full diploma program, combined with a graduate degree and clinical experience, enables graduates to apply for Trauma Specialist Certification.

We at ACAP are extremely excited about this opportunity to review our curriculum, design new courses, and reach out to professional groups outside the traditional ACAP scope. It is heartening to see the positive response from the community, and to find another route where modern psychoanalytic principles can be adapted and applied successfully inside and outside of the clinical setting.

Some startling statistics:

- NIMH states that Trauma-related Disorders is the second most costly medical condition after Heart Conditions.
- Recent research indicates virtually all mental hospital patients were victims of trauma prior to admission.
- At least 1 in 5 out of 300,000 returning soldiers experience Post-Traumatic Stress Disorder (sciencedaily.com/releases/2008/04/080417112102.htm).
- Every year 3.3 million incidents of child abuse are reported in the United States.
- Every year 2.1 million older Americans are victims of abuse.

fluid during pregnancy is associated with significant difficulties for these children (when eight years or older) in reading faces (which is one of the measures of empathy). Recent studies at Utrecht and Cambridge Universities also supported the idea that the influence of testosterone is responsible for low empathy states (and inability to “mind-read” the social cues in “normal” adults).

The neurobiological “center” of empathy was discovered with personality changes (not language/memory/reasoning, but severe problems with socialization and empathy) in the famous patient Phineas Gage (1848). A metal rod pierced through his Ventro-Medial-Prefrontal Cortex (VMPFC) (as later found with fMRI by Dr. Hanna Damasio and others) and changed his life forever. Further, neuroscientists discovered the whole network/circuitry for empathy. It includes the Dorso-Medial-Prefrontal Cortex (DMPFC), Orbito-Frontal Cortex (OFC), Anterior Insula (AI), Somato-Sensory Cortex (SMC), and others. With the help of fMRI again, they found that in personality disorders, empathy circuits are underdeveloped or low-functioning. From the neurobiological perspective, empathy is one of the measures of empathy.

Even more alarming, it is estimated that for every incidence of trauma reported, 5 go unreported or undiagnosed.

The ACAP TRS program

We invite you to explore our new Trauma and Resilience Studies programs. Our goal in these courses is to help participants acquire resilience-building tools through an enriched perspective on the nature of trauma and resilience through interactive courses and hands-on experience.

ACAP’s innovative TRS courses are designed to advance knowledge and skills for anyone working with vulnerable populations, and providing preventive support for yourself and colleagues, and at home. Students come from many professional disciplines: mental health, education, emergency management, grief counseling, law, and more. The nine courses are sequenced so that you may take as little as a single course, or a brief certificate program, and then apply these toward matriculating in the full TRS Diploma Program, if you choose.

For more information, visit our websites trauma-studies.com and acapnj.org.

The ACAP TRS Ladder

- **Single course**: Personal growth, professional advancement, skill building
- **Level I Certificate**: TRAUMA AND RESILIENCE STUDIES (TRS)—2-course Professional Specialization
- **Diploma Program**: TRAUMA AND RESILIENCE STUDIES (TRS)—9-course, in-depth experience exploring the varied forms of trauma, methods for assessing stress reactions, resilience-building tools, new strategic communication skills, and an opportunity for a supervised clinical experience. With this program, and additional clinical hours, one can apply for certification as a Trauma Specialist.

NEUROBIOLOGY OF EMPATHY

is a process which involves covert modeling (of the feelings/suffering of others) as well as imaginative projection (located in Posterior-Superior Temporal Sulcus, PSTS) via the “mind’s eye” through space/time/identity, which allows the taking of the perspective of “another.” Empathy also involves the ability of adjusting the balance between self and others (through frontal cognitive areas).

Empathy is also an evolutionary and a social process. Studies on monkeys who refused to pull a chain (associated with availability of food), when they had learned that it was also associated with pain induced to other members of the group, speaks volumes. In one of his lectures, Dr. Baron-Cohen said: “Empathy can save the world.” I agree. Otherwise, as Mark Twain said once, “By trying we can easily learn to endure adversity - another man’s, I mean.”

Inna Rozenstvit, PhD, MD, inna.rozenstvit@gmail.com, is a neurologist and neuro-rehabilitation specialist, trained in psychoanalysis and psychotherapy. She is also a founder of Neurorecovery Solutions.
The Postgraduate Institute for Psychiatry and Psychoanalysis (PIP) in Seoul, Korea had its first graduation on August 26, 2012. PIP was founded in Seoul in 2007 by Dr. Ben Kim, who trained as a psychoanalyst in New York, and has the distinction of being the only training institute which is a member of NAAP to be located in Asia. At the time of PIP’s founding, psychoanalysis was not generally known to the Korean people. Dr. Kim recognized the necessity of a structured psychoanalytic institute which would follow international training standards. He invited various psychoanalysts who were trained in New York and London to participate in establishing this institute. These psychoanalysts ranged from different schools of thought such as Modern, Contemporary Kleinian, Jungian, Self Psychology, and Object Relations.

PIP’s first psychoanalytic class began with thirty students in January 2008. These first graduates were psychoanalytic psychotherapists before beginning the PIP psychoanalytic track to become psychoanalysts. They completed a minimum of 50 courses (75 credits); 300 hours of personal analysis based on a twice-weekly schedule; 170 hours of personal supervision; 70 sessions of group analysis; 70 sessions of group supervision; 750 hours of clinical experience under supervision; and the successful completion of a graduation paper. The requirements of PIP, which has been following the quarter-semester system since its establishment, are higher and more professional compared to other psychological institutes in Korea.

After a year of basic studies in psychoanalysis, students did their fieldwork for one year and then treatment service for two years. The nine graduates finished all the requirements in four and a half years. On the graduation day, Dr. Kim, the founder, said to the graduates, “Be humble. The theory and technique of psychoanalysis will lead you. But only your sincerity and patience will lead to the cure which theory and technique alone cannot reach.”

Some of these graduates will enter the psychoanalytic track program to become psychoanalysts and some will work to help people as psychoanalytic psychotherapists.

**Annual Seminar**

PIP held its Fourth Annual Seminar on August 25-26 in Seoul. The theme of the seminar was “A 21st Century Approach to Psychoanalysis.” Five faculty members made presentations and led discussions on their topics.

PIP announced Simon Hyunkun Shin as Executive Director; Young Mi Song as Dean of Clinical Training, and Jung Bum Lee as Medical Consultant.

**IN MEMORIAM**

**Barbara Ann Little Horse, March 6, 1934-July 22, 2012.** A longtime resident of NYC’s West Village, Dr. Little Horse passed away after a brief illness. She received her BA in Theater and Psychology from Goddard College in 1958, an MA in Professional Studies from the New York Institute of Technology in 1987, and her doctorate in psychoanalysis from Heed University in 2006. She is survived by her three children and a sister.

**Leonard Liegnr, August 16, 2012.** Dr. Liegnr received his degree from New York University School of Medicine, and was a Captain in the U.S.A.A.F. in World War II. Until his retirement, he was Director of Radiation Oncology at St. Lukes Hospital, NY. He was a member of the Hospice Movement in England, and founder and board member of the Center for Modern Psychoanalytic Studies, where he served as faculty member and Board of Trustees member. He is survived by his wife Evelyn, children Laurel, Steve, Kenneth, and Irene, grandchildren Alison, Peter, Joshua, Jacqueline, Jordan, Amy, and Adam, and great grandchildren Ryan, Elia, Isabela, Vivienne, and Avery. In addition to publishing scientific papers, Dr. Liegnr was proud of his paper on Humanizing the Physician, based on his many years of treating cancer patients. Contributions in his memory may be made to the Center for Modern Psychoanalytic Studies.

Don’t forget! The copy deadline for our bumper Winter 2013 issue, with conference coverage, is Thursday, November 15.
A four-day intensive workshop for preparing to take the New York State license in psychoanalysis examination was held in my Manhattan office/studio June 11-14. In attendance were six people, five women and one man, who had recently graduated or were about to graduate from various psychoanalytic institutes. They represented the theories and clinical practices of the various institutes where they had received their analytic training. In the workshop, I addressed how they could adapt their training to the requirements of the examination by writing practice case studies following the rules and regulations of the examination. These rules and regulations can be found online under the title New York State Licensing Examination for Psychoanalysts.

There are seven sections to the examination. Workshop attendees created case studies to apply to each section, and this was followed by a class discussion. One section was covered in the morning and one section in the afternoon until all seven sections were covered. On the afternoon of the fourth day time was spent with a final review of each case and how well it applied to the rules and regulations of the examination.

Attendees brought their laptops to write their cases, which were practice case studies that were not going to be used during the actual examination. For their practice case studies attendees would answer the following questions:

- Who is the patient?
- What is the presenting problem?
- What is the treatment summary (the nature of change that the patient undergoes)?
- What is the prognosis (how is the patient likely to develop in the future or respond to crises of a similar nature)?
- What was it like to encounter the patient of the practice case study in the clinical relationship (the relationship to the analyst)?
- How are supervisory sessions applied to the treatment of the patient in the practice case study?

Certain words that examinees need to know were also reviewed and studied in the workshop. The words include: Resistance, Contact Functioning, Symbolism, Defense Mechanisms, Object Manifestations, Transference, Counter-transference, Ego Functioning, Object Constancy, and Narcissism.

The most amazing experience for everyone at the workshop, including this instructor, was realizing how unified the various psychoanalytic theories and clinical practices of training institutes become when taking this examination.

This intensive four-day workshop will be offered annually during the second week in June. It meets from 9 AM to 4 PM with an hour for lunch. During the winter months the instruction can be offered in eight one-hour weekly sessions to review work on practice case studies that have been done at home. Please call (212) 744-3822 or e-mail rqstudios@aol.com for further information.

Robert M. Quackenbush, PhD, LP has been a member of NAAP since 1991. In addition to being the third person and first male to gain a New York State License in Psychoanalysis, he is a well-known author, illustrator, and educator.
THE OBJECT RELATIONS INSTITUTE for PSYCHOTHERAPY & PSYCHOANALYSIS
A New York State Chartered Educational Institute
Third Decade in Making & Educating Mental Health Professionals
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OUR TRADITIONAL AND NEW—VIRTUAL AND INTEGRATED—CERTIFICATE PROGRAMS IN 2012–2013 ACADEMIC YEAR

- One-Year Program: Introduction to Object Relations Theory & Clinical Application
- Two-Year Program: Advanced Object Relations Clinical Theory & Technique
- One-Year Clinical Mentorship Program for Psychoanalysts and Psychotherapists
- Four-Year Full Certificate Training Program in Psychoanalytic Psychotherapy and Object Relations Clinical Theory
- Four-Year Full Certificate Training Program in Psychotherapy, Psychoanalysis, and Object Relations Clinical Theory
- One-Year Neuropsychoanalysis and Object Relations Theory - NEW
- One- and Two-Year Certificate Programs of the Center for Parent-Child Development and Object Relations
  Clinical Theory and Technique - NEW

Virtual programs will be offered via audio and video/audio meeting platform (with minimal requirements for a telephone and/or Internet connection).

Integrated (Virtual & Traditional) programs will be offered as a combination of virtual and two full weekends a year of traditional in-person meetings.

Registration is open through October 2012. Call 646-522-0387.

INDIVIDUAL COURSES & SEMINARS (NEW SINCE 2011)

- Child Development & Application of Object Relations Theory to Working with Children (Seminar)
- Infant Observational Research & Its Impact on Psychoanalytic Object Relations Clinical Theory and Technique (Seminar)
- Interpretation of Dreams & Object Relations Clinical Technique (Comprehensive Course)
- Neurobiology for Psychotherapists and Psychoanalysts (Seminar)
- Neurobiology of Object Relations (Seminar) - NEW in 2012-2013
- Group and Individual Clinical Mentorship

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- Free educational mini video series “Object Relations View” – at our YouTube Channel, “ObjectRelations2009”
  (also available at www.ORINYC.org)

Useful information related to getting financial assistance for your education from your employer Object Relations Institute for Psychotherapy and Psychoanalysis (Training Foundation) is a 501(c)(3) nonprofit educational organization. Our EIN # 133697333. We are chartered by NYS Department of Education to provide post-graduate training in psychotherapy and psychoanalysis.

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Find us on Facebook: type “Object Relations Institute”. Join our Facebook Cause (#361700)
“Support Mental Health Education”!

Visit our YouTube Channel “ObjectRelations2009” for educational mini-video-series and highlights of our annual conferences!

Produced by mindmendmedia @ MindMendMedia.com
This course, 122903-1088, is approved for continuing education by the National Association of Social Workers - NJ Chapter for the Approval Period: September 1, 2012 - August 31, 2014.

Social workers will receive 1.5 clinical hours continuing education hours for participating in this course. $12.00 fee for CE certificate.

Friday, November 2, 7-9 PM
What are Children Communicating through Art?
Annette Vaccaro, LCSW, ACS, NCPsyA

This session offers a unique perspective on the patterns, signs, symptoms, and clinical issues associated with childhood sexual abuse. Understanding the unspeakable aspects of a child’s inner world can sometimes be revealed by examination of the symbolic communications present in art. Special emphasis will be on intra-psychic processes and assessment of the effects of traumatic events on a child’s internal states. The primary and secondary indicators of

ACAP is looking forward to an exciting new year with the full launch of the Trauma and Resilience Studies programs, the second offering of the One-Year Program in Modern Psychoanalysis, and the Clinical Supervision Course for social workers, counselors, and art therapists. We will continue our “Not Only Friday Nights Lecture Series” addressing topics important to all mental health, educational, and emergency response professionals.


ACAP will be hosting:
Friday, October 12, 7-9 PM
Getting Close: Attachment, Dissociation and Relationship Impasses
Charles Pumilia, PsyD, NCPsyA

This workshop will explore a psychodynamic understanding of specific trauma, as well as trauma of everyday life through the exploration of cases where early object loss, followed by experiences of emotional distance, disconnection, and neglect, can lead to maladaptive patterns such as dissociation and troubled relationships. Along with other factors, early traumas such as attachment failures and neglect influence how we develop our world view and attitudes toward ourselves and others. Unresolved early trauma can create the foundation for a possible inter-generational process because the unacknowledged pattern is continually repeated in unsuccessful attempts to resolve painful, residual feelings. The process of treatment with this type of symptom pattern, and useful intervention strategies with this type of detached patient will be discussed.

In the autumn of 1912, the psychiatrist and psychoanalyst Carl Jung delivered a series of nine lectures at Fordham University. Although titled “The Theory of Psychoanalysis,” he outlined the future development of his work as differing from the theories of Sigmund Freud. First published in the inaugural edition of the Psychoanalytic Review, a revised edition of these lectures, Jung Contra Freud, is now available.

Fordham University, in collaboration with the Jungian Psychoanalytic Association of New York, seeks to honor the 1911-1912 Jung Lectures with a Public Lecture and a Conference that promises to locate Jung in the academy and beyond, in the years when the lectures were delivered and published, today, and in the future.

PUBLIC LECTURE
On Friday evening, October 26, Sonu Shamdasani (University College London) will present a Public Lecture with a response from Martin Schulman (Former Editor, Psychoanalytic Review).

Saturday Conference
Invited speakers include Joseph Cambray (Harvard Medical School), Eugene Taylor (Saybrook Graduate School and Harvard Medical School), and Ann Ulanov (Union Theological Seminary).

The Public Lecture and Conference will be held at Fordham University’s Rose Hill campus.

For more information email jungatfordham@fordham.edu
abuse will be outlined and demonstrated with examples of art created by children in treatment. The role of mandated reporting will be reviewed, as well as the red flag indicators in children’s art that lead to a consideration of possible sexual abuse.

This course, 122903-10820, is approved for continuing education by the National Association of Social Workers-NJ Chapter for the Approval Period: September 1, 2012 - August 31, 2014.

Social workers will receive 1.5 clinical hours continuing education hours for participating in this course. There is a $12.00 fee for CE certificate.

ACAP is a non-profit organization.
Suggested donation $10.00.

Sunday, December 16, 1-4 PM
Holiday Jazz Fundraiser and Party at ACAP

With jazz guitarist Rob Silver

**Coming in Winter 2013...**

Friday, January 11, 7-PM
*Healing With Humor: The Mind Tickling the Body to Resilience*
Karen Lazar, PhD

Sunday, February 10, 12-2 PM
*Memories and the Trauma Narrative: Writing to Heal*
Alina Enista, PhD, Michele Bernstein, MA, Nancy Gerber, PhD

For more information: www.acapnj.org and www.trauma-studies.com

**C.G. JUNG INSTITUTE OF NEW YORK**

CGJI-New York is pleased to announce the graduation of Lynda Joslyn and Georgia Diakos as Jungian analysts in May, 2012.

The Institute also welcomes our new candidates who have been admitted to the training program for the fall of 2012.

Two Jungian analysts have been appointed to the Board of the Institute: Ronald A. Grant, MD, DMIn, LP, will serve as Treasurer and Chair of the Review Committee, and Maria Taveras, LCSW, will serve as Chair of the Outreach and Development Committee.

The Institute will host the annual meeting of CNASJA, the Council of North American Societies of Jungian Analysts, on October 25. It will also host the semiannual meeting of ABAP (the Assembly of Psychoanalytic Institutes and the Committee on Accreditation) on October 26.

**CENTER FOR HUMAN DEVELOPMENT**

CHD looks forward to graduating its first students this year. Our fall classes are up and running and all count toward the required New York State licensing hours.

A new elective was designed by the Dean of Clinical Training at CHD, Dr. Benedict Kim, PhD, LP: Treating Borderline Personality Disorder: Additional courses include: History of Psychoanalysis from 1920 through 1940, Susan Jakubowicz, PhD, LP; Latency through Puberty, Ronnie Greenberg, LCSW, LP; Core Concepts in Modern Psychoanalytic Group Technique, Case Supervision, Susan R. Blumenson, PhD, LP; Introduction to Psychoanalytic Research, Michaela Kane Schaeffer, PhD, LP; Continuing Case Seminars on Clinical Practice I, Richard Friedman, PhD; and Case Seminar on Clinical Practice, Jacqueline Swensen, PhD, LP.

Spring 2013 classes are listed on our website and anyone interested in any of the offerings is welcome to register.

CHD’s psychoanalytic program is licensure qualifying. Once students graduate and are certified by CHD, they can apply directly to New York State to sit for the licensing exam in psychoanalysis.

For further information about our program, call CHD’s administrative office at 212-642-6303, e-mail us at CtrHumanDev@aol.com, or visit our website.

**INSTITUTE NEWS**

**PSYCHOANALYTIC PSYCHOTHERAPY STUDY CENTER**

PPSC will be a big presence at the 2013 AAPCSW conference.

We are very pleased to announce that recent graduate Raine Gifford is the first prize winner of the student paper competition for the AAPCSW national conference next spring in North Carolina. Raine’s is a truly exceptional and publishable paper about daydreams which is an expanded version of a paper she wrote in the Dreams class with Sue Sherman, who will be a discussant for the March 2013 presentation.

Also accepted was a proposal for a panel presentation entitled: "Yes, and... Not ‘Yes, but...’ which will showcase PPSC’s philosophy and demonstrate the limits and benefits of working within one model or integrating models. Judy Levitz will moderate a discussion of papers by 4 graduates: Leslie Cardell, Paul Hays, Michael Jenkins and Renee Obstfeld, each of whom will share their clinical work and how the PPSC training model shaped their professional development.

**AUTHORS IN OUR MIDST**

November 8-11, 2012, NYC, Various Venues

A distinguished faculty of more than 175 clinicians, educators, and researchers from eight countries will offer an inspiring program of papers, panels, workshops, half-day master sessions, full-day classes, and two-day intensive trainings at the Expressive Therapies Summit in New York City. Now in its third year, this unique continuing education event offers creative arts therapists and their healthcare colleagues the opportunity to come together to learn, collaborate, and network. A variety of approaches featuring multidisciplinary collaborations will be taught in extended, hands-on sessions at Pratt Institute, Fordham University, Free Arts NYC, NY Open Center, and other Manhattan locations.

This year, the Creative Arts Therapy Program at The New School is co-sponsoring a special Friday (11/9) symposium on Neuroscience and the Therapeutic Power of the Arts. That evening, Waking the Brain through Music and Art will feature filmmakers, clinicians, researchers, and administrators. On Saturday evening, also at The New School, four artists whose work is in the collection at MoMA, including two pioneers of the 70s performance movement, will speak on Creativity, Spirituality, and Healing.

**Summit Topics Include:** Addictions; autism spectrum; grief and loss; bullying; LGBTQ issues; children and adolescents; mindfulness, yoga, and meditation; trauma and dissociation; multicultural populations; Alzheimer’s and dementia; body image and eating disorders; therapist self-care; supervision; military wellness, and more.

**Summit Approaches Include:** Imago, Integrative Therapy, DBT, Recovery Model, Positive Psychology, Focusing, Equine Facilitated Therapy, Trauma-Focused Treatment, Play Therapy, and more.

Expressive Media, Inc. (EMI), the sponsor of the Expressive Therapies Summit, is a nonprofit organization cofounded in 1985 by art therapist, psychologist, and psychoanalyst Judith A. Rubin, with her colleague Eleanor Irwin, pioneer drama therapist and psychoanalyst.

NBCC and ASWB continuing education credits are available, free of charge. Daily and package rates for the Expressive Therapies Summit range from $149 - $499. To register for one or more days of the event, or to be added to the mailing list, visit http://summit.expressivmedia.org.

**PSYCHOANALYTIC COMMUNITY CALENDAR**

**OCTOBER**

All month: Dream Art Sculptures (exhibition); info@junglibrary.org
19: The Myth of Prometheus: A Parable for our Time (presentation); The Jung Club, www.thejungclub.com
19: Adapting to the Changing Scene in the Practice of Psychoanalysis and Psychotherapy (scientific meeting); NJI, njinstitute.com
21: The Efficacy of Psychodynamic Therapy (conference); Contemporary Freudian Society; connieS3@aol.com
21: Dreaming for Two (focus seminar); NJI, njinstitute.org
26-26: The Fordham Lectures: 100 Years Later (lecture/conference); jungatfordham@fordham.edu
27: Generosity & Greed: Shaping Self and Society (conference); NAAP
28: The Efficacy of Psychodynamic Psychotherapy (presentation); Philadelphia School of Psychoanalysis, events@psptraining.com
28: Alcohols Anonymous and Psychoanalysis-Collision or Collaboration (seminar); CMPS, cmps.edu

**NOVEMBER**

2: 40th Anniversary Celebration-NIP; 40years@nipinst.org
2: To Have and to Hold: The World of the Compulsive Hoarder (scientific paper); CMPS
2: Indications of Trauma & Sexual Abuse in Children’s Behavior and Art (workshop); ACAP, acapnj.org
2-4: Sustainable Psychoanalysis (conference); IFPE; ifpe.org
3: Healing through the Dark Emotions (workshop); CGJ-NY, info@cjiungny.org
4: Open House; NPAP; npap.org
4: Countertransference (scientific paper); CMPS
5: The Prophecy of the Seeress (screening); cjiungny.org
6: The Flying Dreams of a Flight Attendant (forum); CGJ-NY, info@cjiungny.org
8: An Introduction to the Brain for the Psychoanalytically Minded (part 3 of course); CMPS, cmps.edu
8-11: Expressive Therapies Summit 2012 (conference); summit@expressivmedia.org
9: Pinter’s Landscape (performance); CMPS
10: The Most Compelling Work We Do (conference); www.psybc.com/liveevents13.php

**DECEMBER**

1: Boys Will be Boys and Not (conference); NJI; njinstitute.com
1: Kabbalah, Bion, Kundalini (presentation); Mike Eigen at NPAP, mikeigen@aol.com
1: Healing with Humor: the Mind Tickling the Body to Resilience (presentation)
1: Individualizing Gender and Sexuality (annual conference); CMPS/NYGSP, cmps.edu
7: Modern Psychoanalysis – Its Place in Psychoanalytic History (presentation); CMPS
16: Holiday Jazz Fundraiser & Party - ACAP

**JANUARY**

1: Created in the Patient’s Image (student paper); CMPS
1: Healing with Humor: the Mind Tickling the Body to Resilience (presentation)
13: Treatment of Trauma in a Disabled and Narcissistic Patient (scientific meeting); NJI
I do not have space here to fully explore the implications of this joining of the Physics and Psychoanalytic conversations but let me briefly mention a few that I have considered. The Physics conversation suggests that the Psychoanalytic conversation should reexamine the idea that it is the experiences of the patient and the analyst for each other that is most important in the analytic process. The Physics conversation suggests that, while the experiences of the patient and analyst are important, analysts need to place more emphasis on observing the patient. The Psychoanalytic conversation has already made it clear to me that in the classroom I should focus not on how my students learn but rather on why they resist learning. I am committed to a full exploration of the implications of this joining of the Physics and Psychoanalytic conversations and invite anyone interested in joining me to contact me at topgunjwyatt@aol.com.

Joe Wyatt lives in North Plainfield, New Jersey. He teaches Physics at Bayonne High School and is an advanced clinical student at ACAP in Livingston, New Jersey. Joe received his B.S. from MIT and an MBA from the University of Hartford. He is an associate member of NAAP and a member of the American Association of Physics Teachers.