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NAAP’S 39TH ANNUAL CONFERENCE
SATURDAY - OCTOBER 22, 2011

TRAUMA AND RESILIENCE

FAMILY MATTERS

KEYNOTE SPEAKERS:
FRANCOISE DAVOINE, PHD
JEAN-MAX GAUDILLIERE, PHD
How does psychoanalysis grow? Let me count the ways…. Let’s begin by working together on two projects: The Conference Committees and NAAP’s 40th Celebration Committees.

In my past NAAP NEWS columns I spoke about people power as the engine of NAAP. We have four opportunities to help power NAAP now. The time to form these committees is now. Call Margery Quackenbush at 212-741-0515 and sign up for one. NAAP would love for you to join us in these endeavors.

The following are the committees and, in brief, their responsibilities. I hope from reading my past columns you have been thinking about which committee you would like to be on.

To review: We would like the Conference Committees – the Think Tank Subcommittee and the Event Planning Subcommittee to incorporate representatives from all of NAAP’s schools of thought to reflect NAAP’s diversity.

The Think Tank Committee will decide upon NAAP’s Annual Conference theme, keynote speakers, and/or panelists, as well as the workshops and their leaders. The Event Planning Committee will be the facilitators of the conference. All members of both subcommittees are essential to the success of our conference and to the success of NAAP. Working on the Conference Committee is a chance to provide superb, stimulating psychoanalytic food for thought, as well as food for body and soul for our NAAP community and beyond. It is also a chance to get to know one another in new, fascinating, and fun ways by working and playing together for the benefit of you, psychoanalysis, and NAAP. As Aristotle and David Brooks have said – we are social animals.

Now to NAAP’s 40th Celebration Committees – the Event Planning Subcommittee and the History Subcommittee. The Event Planning Committee needs many to carry out the various tasks required for the celebration. So join us on this committee. The History Committee will help put together the Celebration Souvenir Journal, which will include the history that led up to NAAP’s creation, as well as the initial and current years of NAAP to highlight the contributions of all of NAAP’s organizational members. Again, on these committees we would like representatives from all schools of thought and all of NAAP’s member institutes. We all have a lot to celebrate together.

We have wanted psychoanalysis to be an independent profession and to be inclusive of all the psychoanalytic schools of thought. We have accomplished a lot and continue to do so. NAAP has you to thank for all that we have done collectively. We want to celebrate our accomplishments together and as we do so we also want to think about where we want to go from here. Come join us to plan for our 40th year celebration.

Call Margery Quackenbush at 212-741-0515. She is looking forward to hearing from you. Let Margery know the committee of your choice: the Conference Think Tank, Conference Event Planning, 40th Celebration Event Planning, or the 40th Celebration History Committee. It is only with you that we can accomplish all that we have, need, and want to do to continue developing psychoanalysis as an independent profession for you the practitioner and for the public we serve. Hopefully, our growth will never stop; let’s celebrate and grow together.

What is happening elsewhere in psychoanalysis? A lot! Here is some interesting news.

On May 24, 2011, I attended a New York Psychoanalytic Society & Institute (NYPsI)
meeting that is one small part of their year-long Centenary Celebration. The meeting was entitled “100 Years panel on research: Can science save the clinic? Evolution of treatment research at NYPSI and by its members.” It was a very interesting evening. I was glad to see a few NAAP members in attendance. The piece of information which I found to be the most interesting was the following statement: “If we want insurance to reimburse psychoanalytic treatment then we have to demonstrate evidence of treatment through outcomes.”

Research is hugely important. It is the inquiry and investigation into a subject to discover and/or review facts, theories and applications to advance knowledge (Random House Dictionary, 2nd ed., unabridged, 1987). If we want to advance, teach students, candidates, and graduates new knowledge, and educate the public and insurance companies about what we have to offer and its efficacy, it behooves us to do research. In our institutes many of us do research. Would it help if we did more to advance our field of independent psychoanalysis? Of course, the question for psychoanalysis is: What kind of research? (1) Evidence based? (2) Another form, more in keeping with psychoanalysis? (3) Or, both? Would this be a worthwhile exploration? Could this exploration and its results enrich our scientific discourse? Let’s not forget the comment Donnel Stem shared with us at our 2010 annual conference: “...as long as the practitioners of conflicting theories are conducting genuine conversations with one another, the existence of multiple conceptions of practice is a sign of the field’s vigor.”

Irwin Z. Hoffman is certainly one who has been a part of the research conversation. On January 19, 2007, he gave the plenary address at a meeting of the American Psychoanalytic Association and gave the same address to NPAP on October 12 that year. It would be worthwhile for all of us to hear his talk “Doublethinking Our Way To “Scientific” Legitimacy: The Desiccation of Human Experience.” Then, continue the discussion within NAAP, with our member institutes, to help one another develop the best forms of psychoanalytic research in keeping with each of our schools of thought. Effective research can surely advance psychoanalysis as it has in so many fields including ours. Freud began psychoanalysis through a form of research which he developed. Our field has evolved; we need to find the forms of research which can help psychoanalysis, and each of our schools of thought, to continue to develop and evolve.

**EXCERPTS FROM THE LAST INTERVIEW WITH DR. JEFFREY SEINFELD (MAY 2010)**
by Jack Schwartz

**Forum:** To get started, Dr. Seinfeld, tell us about the evolution of your clinical approach?

**Dr. S:** What influenced me psychodynamically was ego-psychology, British object relations, and self-psychology. I have also been influenced by various philosophical traditions, especially the existentialist, like Sartre, also Martin Buber; and on the spiritual side - Eastern philosophy, all which informed me in my thinking. The first extensive reading I did was Freud and Melanie Klein, which I liked a lot. I read both thoroughly upon graduating Social Work school.

**Forum:** Why Melanie Klein?

**Dr. S:** It was the emphasis in her work on destructiveness in children and then their efforts at reparation. In my early training I worked at the JBFCs. At the Jewish Board, I was exposed to the “modern” psychoanalytic school, the work of Spotnitz and others, so I was inclined to think about childhood aggression, as I was seeing that a lot in the children I worked with. …To understand the importance of aggression in children, through Melanie Klein and Klein’s work, was an early inspiration to me.

**Forum:** Klein’s work saw aggression as more intrinsic and less to do with outside experience; how do you see it?

**Dr. S:** Klein did a lot of her work during WWII in England with children who were under a great deal of duress and trauma. Winnicott, who was working as a psychiatrist at a Social Work agency, picked up on Klein’s work and he saw the types of dynamics that the children were displaying as a result of trauma, and Klein failed to take into account the environment into those dynamics. A lot of the disintegration, spitting, aggression in kids was a result of the separation from their families, dropped into unfamiliar homes, exposed to violence; Klein didn’t take that into account enough. I see the type of aggression Klein talked about more as a result of trauma, rather than innate.

**Forum:** From the object relations perspective, we see the connection from Klein to Winnicott, but what of Fairburn, which you mention in your writings?

**Dr. S:** Yes, there is a big line from Klein to Winnicott, in fact Klein supervised Winnicott. Whenever you read Winnicott you have to [consider] that he is in dialogue with Klein. Winnicott is taking in what Klein is saying, but bringing in the environment. Meanwhile, Fairbim is up in Scotland and reading Klein, so kind of experiencing Klein in a more isolated way. He was also working with soldiers who were in combat so he had a different concentration, so he was seeing different dynamics and thus came up with this whole idea of the “moral defense.” This involves the internalization of the abuse, and the need for a
sense of recognition. Our sense of self is a lot based on the need to be seen for whom we really are and the lack of that leads to pathology and that ties up to Winnicott’s “true self.” Although Winnicott was rather negative about Fairburn, feeling he tried to separate himself too far from Freud, Winnicott respected that Fairburn had a gift in working with traumatized individuals and understood how the abuse could be internalized. I was drawn to Fairburn because he was also interested in philosophy, he was a divinity student, and was especially influenced by the writings of Hegel.

Forum: I want to review your key works, The Bad Object, The Empty Core, Holding and Interpretation, and Containing Rage, I noticed that two of your books emphasize the individual's internal experience “bad” and “empty”, while the other books speak of the therapists experience “holding” and “containing”. It is like a dialogue is occurring between your books; did you write them with that in mind?

Dr. S: That’s true, there is a different perspective, I try to understand the phenomenology of the inner state of the client and try to reflect that back, trying to understand and get into their head and understand their experience.

Forum: I noticed your work is a lot about language, about articulating the inner state of the individual.

Dr. S: Yes, I try to find the words that are as close to it as possible. And, I stand corrected when I am off. I often play with language back and forth with the client if my language is not quite precise enough. There is a kind of rhythm that happens with each client in the way we communicate. Some encounters are really lively, some are more cerebral.

Forum: Are there clients [for whom] you cannot find a rhythm?

Dr. S: Yes, it’s kind of common; I often talk about what is happening between us if that occurs. Or; if there are difficult situational things that are very valid, but the very validity of it may stop them looking at themselves. So, I try to get them to look at their attitude about the situation and get them to consider [that] maybe they have a part in their situation — their part in the way they are feeling about it. For example, I treated an attorney who was struggling with a severe regression, and he didn’t want to do a thing for himself. He didn’t take care of himself and he was regressing more and more. After reviewing in detail all the things of his life that were stressing him and making him regress, and after a lot of mirroring, I then said to him that the baby wants to be taken care of like a little prince and there is a part of him who is like ‘king baby’ and felt really entitled and that people should take care of him just the way he wants and if they don’t, they don’t think he is important enough — when I said that, it hit home. It is not that they don’t care enough but also they think you are not important enough to be cared for. But, to say something like that you have to build a lot of trust and connection. You have to consider the paranoid-schizoid position, that is where everything happens; the client often feels I am just blowing in the wind through all these circumstances, as opposed to the depressive position, where the person feels responsible to make things happen, you have to empathize enough with the paranoid-schizoid position to support the defenses against the regression, so that leads to the person taking responsibility for himself. You have to relate to the person’s developmental level, I do a lot of work with those two positions, which determines whether I respond empathically or more interpretatively.

Forum: Any new projects?

Dr. S: First on my list, is that I am going to be director of the Spirituality Program at the NYU School of Social Work. Spirituality in clinical practice, which I will be writing on next. I think it is a neglected area in psychotherapy. In some ways it will be an updating of what Winnicott talked about with the idea of the transitional object and the concept of God, some notions about recovery, some of the Buddhist traditions, I am still working on it. It is not about theology, it will be more pragmatic.

The full interview, “Encountering Clinicians: Exclusive NJSCSW Interviews with notable contributors in the field of Mental Health: Interview with Dr. Jeffrey Seinfeld, May 2010,” was published in NJSCSW’s Forum in 2010. It is also available at www.ORINYc.org/faculty.html (click on “Jeffrey Seinfeld, PhD”).

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It is as though the leftover bits of the Real, unearthed from the rubble of history, were sending cries, toward the analyst, sounds and words arrested in mid-flight. They (words, sounds, silences) are the prelude to the soaring of a subject.

*History Beyond Trauma* p.251

Drs. Françoise Davoine and Jean-Max Gaudillière, authors of *History Beyond Trauma* and the 2011 conference keynote speakers, will discuss their cases, experiences, and theories, developed over decades of study, of the essence of traumatic experiences and their communication through the generations. It is a family matter; they conclude; the family of origin and the family of mankind in the social realm. Davoine and Gaudillière’s poetic descriptions of the function of madness -- unspoken, unthinkable traumatic experiences lived through the generations until freed in the relationship with an analyst accompanying them, listening for the fossil messages -- have a magical, transporting quality of their own. They will guide us through case vignettes, demonstrating the power of listening and understanding, both in the transference and the partnership of the new bond forged in the analytic relationship, on the safe emergence, integration, and release of intergenerationally held trauma. Their stories resonate with the discovery of the resilience and connectedness sustained through silent internalization of traumatic experiences: how it protects and can pervert at the same time. There will be extensive opportunity for questions and explorations of these ideas with Drs. Davoine and Gaudillière following their presentations, “The transmission of trauma, a truth claim and its perversion” and “The scientific frame of transference in the case of trauma and psychosis: the irrelevance of causal categories,” respectively.

The Gradiva® Awards Luncheon, will again be hosted by Dr. William Hurst, with a lunch provided by the Marriott’s culinary artist, Chef Edward.

And there’s more. The 2011 roster of afternoon workshops is guaranteed to present a delightful dilemma of choices, as you can see here:

- **Creating Resilience in the Treatment of Attachment Trauma** Jacqueline Carleton
- **Dead Spaces, Empty Places: Searching for Life in Psyche and the Analytic Field** Patricia Vesey-McGrew
- **How Five Generations Survived Pervasive Trauma and Torture** Janice Michaelson
- **“I’m worried…can anybody hear me…does anybody care?” Panic Disorder: Early Emotional Neglect and Traumatic Object Loss** Charles Pumilia
- **Meeting Alfred Adler: Antidote to Trauma in the Family and Beyond** Ellen Mendel
- **From Motherhood to Motherland: Integrating Individual and Family Psychoanalytic Psychotherapy in the Treatment of a Survivor of Maternal Suicide** Jack Schwartz
- **Premature Birth, Premature Trauma: Developing reflective function through integration of painful experiences** Stella Acquarone
- **Repetitive Separations, Attachment Issues and Childhood Depression among American-Born Chinese Infants** Dorothy Yang
- **The Third: Trauma, Time, and Telepathy** Dan Gilhooley
- **The Effect of Intergenerational Abandonment on the Immigrant population of NYC: A Unique Form of Depression and its Treatment** Dayle Kramer
- **Transference-Countertransference Issues in Working with Trauma Patients** Krystyna Sanderson
- **Trauma and Dissociation: 9/11 and the India/Pakistan Partition** Alan Roland
- **Trauma and Resilience: Object Relations View** Susan Kavaler-Adler
- **Intergenerational Trauma of Slavery and its Aftermath** Gilda Graff

Be sure to save room for the Wine & Nibbles reception following the workshops. It’s a wonderful chance to process the day and catch up with friends.
**ARTICLES**


**Somerstein, Lynn.** The Great Mistake. *Psychoanalytic Perspectives*, Fall 2010, pp. 259-278.

**BOOKS**


**STAGE PRODUCTION**


**STUDENT PAPERS**

**Brewster, Fanny.** (Student) Mythology and the Battered Feminine: The Use of Feminine Mythology and Dreamwork as Practice in the Healing of Battered Woman Syndrome. CJ Jung Institute, NYC, 2010.

**Coonce, Jennifer.** Projective Identification: An Exploration of a Kleinian Theory and its values in a clinical setting, including a comparison to modern analytic technique. NYGSP, 2010.

Last month I presented some ideas on the mechanics of Managing your Life, not your Schedule but didn’t talk much about how to choose whether or when to engage in a task or not. This month we explore some ideas about how you might think when making choices.

Making choices about what is important goes back to what you value the most. Most of us, I believe, make a valiant attempt to live our lives according to certain values. Of course everyone’s values will vary to a certain degree, but the process we use to choose behavior can be similar for everyone.

Going back to one of my earlier articles I talked about the need to define the vision and mission for your practice as a way to focus your energy in order to “do well enough to do enough good,” to make the world a better place. When your vision and mission are established you can use them to help you make smarter choices about what is important and what is urgent.

When confronted with a multitude of choices, your mission statement can provide a reality check. When activities or ideas synchronize with your purpose, your clients, your family, and your vision, that in itself can provide confidence for your looking into the opportunity further. Analogously, if they fail to correspond with your mission, it becomes an easy choice to say, “I think I’ll focus elsewhere,” without doubt or regret. But sometimes that is not so easy; hence, another technique.

Four Critical Questions
These questions come from an admittedly subjective research study of 29 fellow consultants. My intent was to discover how people who seem to be decisive make decisions. The first typical answer I got while conducting the survey, was, “I don’t know, I just do it!” But as we talked a little more about things that they took into consideration, some themes began to emerge that seemed to affect the outcome in either a positive or negative way based on the factors that were contemplated in the decision-making process. If choices were thought through in a specific way, they were considered successful. 26 of the 29 consultants said they considered some form of all four of the following points when making choices:

1. What is the worst thing that could happen?
2. What is the best thing that could happen?
3. Is the best thing worth risking the worst thing?
4. Can I live with the worst thing if it happened?

What I also found interesting was that if they considered only the first two of the above, positive perception of the outcome dropped by 50%. Now, the subjective conclusion I drew from this unscientific study was that one was more likely to make a better choice if all four of these things were considered.

However unscientific my research, I have begun to apply it to choices in my life with what I believe to be considerable success. Here is an example of how I applied it to a recent family dilemma:

When we bought our charming old Cape Cod home with only one small bath, our working situation was different, so morning “bathroom time” was not an issue. The situation changed, and my wife and I now leave the house at the same time in the morning. This was causing considerable conflict in our household because, among other things, the bath just isn’t big enough for two people! So, as the months progressed there arose more and more tension in our household.

We tried taking shifts, and fought over who would have to get up earlier; we tried romantic morning showers together; and disagreed about morning “intimacy;” we tried having one of us shower the night before and fought about who was getting to watch Letterman. It was becoming a real problem! It was important and becoming more and more urgent.

So we talked about adding a second bath. Well, I’m known as “frugal” when it comes to expenditures like this, so I needed to choose whether to do it myself or hire a contractor. Here’s how it went. If I do this project myself:

1. The best thing that can happen is that we get a second bath at a reasonable cost.
2. The worst thing that can happen is that I’ll get halfway through the project and have to call in a contractor, and pay twice as much.
3. To us, getting a second bath at a reasonable cost is worth the risk of having to pay twice as much, because no matter what, for the sake of our marriage (the mission), we need a second bath.
4. We also agree that we could live with the worst case. We have a little money put away for vacation and would be willing to give that up and stay home, if we needed to.

So, good news! I built the bath in the basement, only had to call in a contractor for a small portion of the project — which raised the price somewhat, but not as much as I had feared — and, best of all, there is peace in the McCombs’ household again. Mission accomplished!

Steve McCombs is a Performance Consultant at Western Technical College in La Crosse, Wisconsin, and a Public Board Member of ABAP. He can be contacted at stevemccombs@netscape.net.
Dr. Susan Kavaler-Adler has over 35 years experience in Psychoanalytic/ Psychodynamic/Object Relations Psychotherapy with Individuals, Couples, and Groups, while utilizing unique approaches to working with:

- Depression | Anxiety & Fears | OCD | Loss, Grief, & Mourning | Self-Sabotage | Abandonment & Separation
- Guilt & Shame | Fear of Success | Fear of Envy
- Trauma & PTSD | Relationship & Betrayal Issues
- Divorce/ Domestic Abuse & Violence | Dissociative Disorders | Elderly Persons Disorders | Gay Lesbian Issues | Parenting Issues | Blocked Creativity | Spirituality Personal Growth & Development | Personality Disorders | Borderline Personality / Schizoid Personality

**Additional modalities utilized:** Guided psychic visualization; creative healing writing.

**On-going Groups**

Monthly Group Supervision & Mentoring for Practicing Clinicians (meets 1st Friday of the month, September through June) **accepting new members starting September 2011!**

Monthly Therapy and Support Group with Emphasis on the Individual Mourning, Grief, and Psychic Change Process: Opening Blocks to Love and Creativity (meets 1st Saturday of the month; September through June) **accepting new members starting September 2011!**

**Future Groups, Seminars, and Individual Consultations for:**

- Focus: Self Sabotage, Fear of Success, and Fear of Envy
- The Writing and Creative Process Group (or Seminar)
- Study & Experiential Group on Working with Resistances in Psychotherapy
- Klein-Winnicott Dialectic (Seminar)

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**The Compulsion to Create**  
*Women Writers and Their Demon Lovers*  
Susan Kavaler-Adler, PhD, ABPP, NPsyA, D.Litt  
Foreword by Joyce McDougall, Ed.D.  
*OtherPress, 2000; Routledge, 1993*  
New, improved, illustrated edition will be published in 2011

**The Creative Mystique**  
*From Red Shoes Frenzy to Love and Creativity*  
Susan Kavaler-Adler, PhD, ABPP, NPsyA, D.Litt  
Foreword by Martin S. Bergmann, PhD  
*Routledge, 1996*  
New, improved, illustrated edition will be published in 2011

**Mourning, Spirituality and Psychic Change**  
*A New Object Relations View of Psychoanalysis*  
Susan Kavaler-Adler, PhD, ABPP, NPsyA, D.Litt  
Foreword by Joyce McDougall, Ed.D.  
*Brunner-Routledge, 2003*

**Klein-Winnicott Dialectic**  
Susan Kavaler-Adler, PhD, ABPP, NPsyA, D.Litt  
Will be published in 2011

**Anatomy of Regret**  
Susan Kavaler-Adler, PhD, ABPP, NPsyA, D.Litt  
Will be published in 2011

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WAS EMILY DICKINSON A NEUROSCIENTIST?  
HOW NEUROBIOLOGY RELATES TO PSYCHOANALYSIS AND TO OUR SENSE OF BEING HUMAN 
by Inna Rozentsvit

“The Astonishing Hypothesis is that ‘You’, your joys and your sorrows, your memories and your ambitions, your sense of personal identity and free will, are in fact no more than the behavior of a vast assembly of nerve cells and their associated molecules. As Lewis Carroll’s Alice might have phrased it: “You are nothing but a pack of neurons.”’” Francis Crick

Preparing for a talk, “Neurobiology of Destiny OR Neurobiology is Destiny,” a few years ago, I discovered a beautiful poem by Emily Dickinson, “The Brain”:

“The Brain - is wider than the Sky - 
For - put them side by side -
The one the other will contain 
With ease, and You — beside.

The Brain is deeper than the Sea - 
For, hold them, blue to blue, -
The one the other will absorb, 
As sponges, buckets do.

The Brain is just the weight of God - 
For, heft them, pound for pound, 
And they will differ, if they do, 
As syllable from sound.

Through this poem, Emily Dickinson was able to transcend many bridges, and not only to modern American poetry. For decades, even centuries, we “designated” neurologists and neuroscientists to be in charge of the Brain; psychiatrists and psychologists – in charge of the Mind; poets – in charge of the Soul; and philosophers – to ponder upon what it means to be Human. Driven to learn as much as possible in our specialties, we came to the realization that it is not really enough to be good at just what we are “designated” to do, and that to succeed, we need to cooperate (remember the Prisoner’s Dilemma?). That is how, despite all resistances, new paradigms have emerged in science and in all spheres of our lives. One of those paradigms is drawing on the understanding of the neurobiological roots of everything – from politics, national security, trade, finance, and economics to memory and learning, our sense of “being a human,” feeling ourselves flourishing, “good enough” parenting, and “holistic” health.

In clinical mental health practice, learning about the neurobiology of the psyche helps us to better understand ourselves and our clients’ conditions – including disorders of personality, intellect, self, attachment, emotions, social adjustment, sexual identity, reality testing, addictions, psychological trauma, and many others. So, what is neurobiology? When Sigmund Freud said, “Anatomy is destiny,” did he really mean “Neurobiology is destiny,” considering that our knowledge and our professional lingo had changed through the past century! Very likely he did. Neurobiology is a collective word for all the neurosciences: neuro-anatomy, physiology, histology, pathology, physiology, chemistry, endocrinology, imaging, and psychology, as well as neurology, psychoanalysis, computational neurobiology, and many other disciplines contributing to our knowledge about brain-mind-soul interactions.

Another paradigm (or rather, paradigm shift) emerged in science and everyday life, from a desperate need of different professionals to learn from each other, to cooperate, and to engage in trans-disciplinary explorations rather than in individual specialty-based research, or even in an inter-disciplinary (team-based) approach. In 1962, Thomas Kuhn wrote: “The historian of science may be tempted to exclaim that when paradigms change, the world itself changes with them. Led by a new paradigm, scientists adopt new instruments and look in new places. Even more important, scientists during revolutions see new and different things when looking with familiar instruments in places they have looked before. It is rather as if the professional community had been suddenly transported to another planet – where familiar objects are seen in a different light, and are joined by unfamiliar ones as well” (The Structure of Scientific Revolutions, p.111).

Should psychoanalysts worry that neuroscientists will claim an authority over “mind matters,” since brain and mind are so interconnected and since neuroscience has more “evidence-based” research? Definitely not. We should open our minds and learn from each other. Neuroscientists offer “broader views of behaviors that were previously considered entirely psychological in origin…” (while)… Psychoanalytic theory is challenged … to provide important questions for further research. … (T)here is no danger that mind will disappear” (Cooper, 1985).

Inna Rozentsvit, M.D., PhD, MBA, MScEd, is a neurologist and neuro-rehabilitation specialist, trained in psychoanalysis and psychoanalytic psychotherapy, with extensive experience in brain trauma and autoimmune neurological and neuropsychiatric conditions. She is the author of the forthcoming Neurobiology is Destiny: A Guide to Brain-Mind-Soul Matters, designed for non-scientists and mental health professionals. Dr. Rozentsvit is also instructor of a new course at the Object Relations Institute for Psychotherapy and Psychoanalysis, “Neurobiology for Psychoanalysts and Psychotherapists.”
This year’s Symposium, “Our Practice Today: Treatment and Transformation,” challenged “traditional psychoanalysis” with an over-arching view of twenty-first century discourse. What concepts and parameters define the boundaries of post-modern research and intervention? How does psychoanalysis weave between spheres; art and science, one- and two-person epistemological frames, psychic reality and fantasy, and the nature of treatment and cure?

Panels during the two-day conference aimed to target a number of significant concerns, a weltanschauung of possibility.

A plenary by Fred Pine gave an illuminating guide to the weekend’s mission. Expanding on ideas from his significant oeuvre (Developmental Theory and Clinical Process, 1985; Drive, Ego, Object Relations and Self, 1990; Diversity and Direction in Psychoanalytic Technique, 2003), he advanced the possibilities of an analytic field challenged by research and technique, an exciting exploration of developmental lines in the context of ever-challenging biological, social, and clinical complexities.

Jane Hall’s “How Often? How Long? How Deep?” explored the question of what is mutative about therapy, emphasizing the role of parameters and boundaries in affective experience between patient and analyst. Jane Hall and Edgar Levenson presented clinical and theoretical contributions to highlight creative and fluid intersubjective states and an appreciation of interpersonal enactment and the meaning of “consciousness.” Levenson’s attention to the “mental construction” highlighted its superlative position over particularistic concerns for time and frequency, “Grappling with the mysteries and enigmas of endless knowing and change.” Peter Dunn’s humorous review brought to life the need to challenge the multitude of voices and metapsychological positions that can stifle creative movement and affective freedom, emphasizing the shift from insight into behavioral change, action, and enactment.

“Beyond the Dyad” opened an interactive space for working with couples and families. Fred Sander (Created in Our Own Images, 2010) presented a succinct history of the family systems paradigm, citing the seminal writings of Nathan Ackerman (1950s) and literary works such as Edward Albee’s, “The Cocktail Party.” Sander’s attention to language, ethnology, and child development included the role of myth in artistic and analytic inspiration. Exploring Ovid’s “Pygmalion” (“The Pygmalion-Galatea Process”) and its adaptation by George Bernard Shaw (Henry Higgins), he spoke to the eerie role of idealization and expectation, where “the shaping of the other to meet an image” precludes the possibility of genuine intimacy. Panelist Vivian Eskin presented an inspiring example of clinical work with a distressed three-year-old boy and his mother following the father’s departure to fight in Afghanistan. Therapeutic play with both mother and son reflected developmental complexities in the context of attachment and rupture, particularly the meaning of maternal holding, “triangular space,” and the quality of marital and family functioning in pre- and post-war separation. Appropriate to the current political

On April 26, 1986, while I was in Eastern Europe, I witnessed the panic and fear from the unknown ramifications of the Chernobyl nuclear disaster that occurred in Ukraine, which propelled me to start the not-for-profit, NGO World Information Transfer (WIT). Spurred on by the Soviet government’s purposeful withholding of critical health information about the radioactive emissions from the explosion and fire at Chernobyl, I determined that WIT’s overarching purpose would be to provide timely and accurate science-based information on a wide range of health and environment issues. To that end WIT has convened 20 annual international conferences at the United Nations. This April, the 2011 Conference commemorated the 25th anniversary of Chernobyl by focusing on current research about nuclear power. Ironically, Japan’s ongoing nuclear tragedy at the Fukushima nuclear facility marked almost exactly 25 years since the Chernobyl disaster. The Conference highlighted the differences between Japan’s response to their nuclear disaster and the Soviet reaction, noting that Japan heedled lessons learned from Chernobyl.

There are two key lessons that Japan has applied. First, post-traumatic stress disorder (PTSD), the ramifications of which are still evident in the Chernobyl area, was one of the two major health consequences of the Chernobyl disaster. PTSD was largely caused by the continuous lack of credible information about what had happened and how to respond. By offering instructive information about the power plant accident and why populations had to evacuate, explaining why no one should ingest contaminated dairy products and discarding those products, and highlighting procedures for containing potential hazards, the Japanese government sought to reduce PTSD. Conference speakers noted that informed government leaders communicated openly by providing accurate information, thus facilitating each individual’s ability to care for himself and others.

The second lesson learned from Chernobyl and related to the first is that thyroid cancer and disease were the main physical health consequences caused by the release of Iodine 131, the main component of Chernobyl’s emissions. Because Iodine 131
environment, this was a stimulating exploration of war and bereavement on family members (child and adult) left behind. Moving to a different sphere, Carl Bagnini created the “dream” space, a focus for understanding unconscious, interlocking defenses – “the therapeutic potential from affect in dreams and the telling of them.”

Exploring a couple’s pre-marital anxieties through dream analysis, Bagnini pointed to the meaning of “collective resonance,” where the couple’s internal narratives and multiple self-states inhabit dream metaphor and affective condensation. Bagnini’s sensitivity to the role of the third (the analyst) expanded “dream” analysis to take advantage of projective processes in transference and counter-transference in the couple’s treatment (an area particularly meaningful to those analysts, like myself, who work with couples and families in novel and challenging ways).

In “Treating Children in the Nursery and Playroom”, Will Braun presented an exceptional journey into child analysis. A several-year play therapy revealed the role of a multi-functioning symptom (“stool holding”) in child development and intrapsychic struggle. The treatment of a three-year-old boy was a remarkable and creative testament to how a sensitive analyst could use play (and metaphor) to work through severe and non-symbolized struggle. In an action-packed world of hide-and-seek and monster and war games, the analyst and patient (and, eventually, patient’s father) managed to challenge autonomy and gender-related (oedipal) conflicts with increasing clarity. The critical focus on the child’s parents illuminated the need for couple intervention in child therapy contexts. In this case, for example, the parents’ own backgrounds, as well as sado-masochistic and gender-related struggles, were brought to the forefront for concern and intervention.

Laura Kleinerman (Past Director, Child and Adolescent Training Program, IPTAR) provided an especially erudite evaluation of the case. She brought attention to Freud’s early writings on infant sexuality and “Little Hans” (1908), the role of “coded” communication in child analysis and the dual role of action and interpretation in the developing relationship between analyst and young patient. Finally, the developmental vicissitudes of a “multi-functioning symptom” were well portrayed and clinically addressed – a projection for early maternal ambivalence and anal and oedipal conflicts.

Ultimately, Symposium 2011 traversed a wide terrain: dyadic, triadic, and hybrid forms of family treatment, child and child-parent analysis, intervention with dying patients and their families, neuro-psychoanalysis, and cross-cultural (cyber) analysis. Multiple voices provide space for creative modes of treatment and transformation. A psychoanalytic bridge for novel forms of application and possibility.

Claire Beth Steinberger, EdD, JD, has a private practice in New York and New Jersey, specializing in individual, couple, and family dynamics. She is a licensed school psychologist, psychoanalyst, and marriage and family therapist. Claire Steinberger is on the teaching and supervisory faculty of NPAP, ORI, and Family Forensics Institute.

2011 WORLD INFORMATION TRANSFER CONFERENCE continued...

...lasts about 8 days, fast distribution of potassium iodide and the discarding of all dairy products eliminate the potential for this disease.

Lessons learned give hope for the future. Scientists, politicians, and the interested public learned that repressive governments neither shield nor protect their constituents from harm. Transparency and investigation encourage not only the mitigation of disaster but allow the population to exercise their resiliency and capacity. This prevents many physical problems, and limits the development of PTSD. As difficult as it is for people to change their patterns of thinking and acting, the famous “fear of the unknown” received a recognizable shift in coping with the current disaster in Japan.

However, each nuclear accident, regardless of its specifics and irrespective of how it differs from other accidents, rekindles fears that the atomic age is an excessively dangerous one. The maniacal Dr. Strangelove, unable to be controlled, embodies this fear; and Oppenheimer’s words, that we have made an evil thing, ring true again. Humans fear what they define as evil, and evil is typically perceived as something (or someone) unable to be controlled. Can nuclear power ever be considered good? Or can nuclear power at least be regarded as neither evil nor good, but dispassionately as one of several sources for electricity? And if the answer is negative, what will Japan and Ukraine do to meet their energy needs. As we pass from the atomic age to the era of global warming we will have to find an answer.

Papers from the 2011 World Information Transfer Conference will be available in August at worldinfo.org.

Christine K. Durbak was President of NAAP 1996-1998 and was on the Board from its inception. She is a practicing psychoanalyst, President of Executive Stress Management, and former CEO of Physicians Weekly. In 1987 she founded World Information Transfer, Inc., an organization in consultative status with the United Nations whose focus is on the interrelationship between health and the environment. Dr. Durbak is also an adviser to the Government of Ukraine.
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In the hundred years since Sigmund Freud published his paper on Leonardo da Vinci, psychoanalysis and art theory have developed along parallel trajectories. Where once psychoanalysis focused on the motivational conflicts of the creative artist, and art history focused on the artist’s product, both fields have today converged on the study of creativity as a multidimensional process. The conference presented leading experts in both fields who engaged in conversation, tracing common ground, challenging the boundaries of both fields, and highlighting the clinical implications for psychoanalytic work.

The invited speakers were Harold Blum, MD, Clinical Professor of Psychiatry at New York University School of Medicine, Executive Director of Freud Archives of the Library of Congress, and past Editor-in-Chief of JAPA; Rosalind Krauss, PhD, University Professor in the Department of Art History at Columbia University, and holder of the Meyer Schapiro Chair in Modern Art and Theory (1995-2006); and Joseph Lichtenberg, MD, Editor-in-Chief of Psychoanalytic Inquiry and the “Psychoanalytic Book Series,” and Founder and Director Emeritus of the Institute of Contemporary Psychoanalysis in Washington, D.C.

After opening remarks by conference co-chairs Susan Klett, LCSW-R, BCD, Eva D. Papiasvili, PhD, ABPP, and Linda Mayers, PhD, Dr. Blum gave his presentation, “The Psychological Birth of Art: Prehistoric Cave Art.”

As exemplified by slides of cave paintings, Dr. Harold Blum contended that homo sapiens was no longer rigidly bound by instinct and developed the capacity for symbolization and creativity. Examining the paintings deep inside the caves, Dr. Blum theorized that the cave likely symbolized the mother and her life-giving womb, while the movement into and out of the cave might be interpreted as the transitional process from the merger with the mother to the development of self and object representations. Dr. Blum advanced the thesis that the human concern with birth, death, attachment, separation, identification, and loss, the mastery of trauma, the fascination with magic, and the need to understand the unknown, are among the powerful determinants of the figures and symbols depicted in prehistoric art. Dr. Blum concluded that the extraordinary evolution of the human brain has led to mind, symbolism, cultural transformation, and the psychological birth of art.

Dr. Rosalind Krauss’ presentation “Picasso according to Freud” followed. Using images of paintings from Ingres to Picabia and citing works from Freud to Barthes, Professor Krauss examined the dynamic underpinnings of Pablo Picasso’s oeuvre. She contrasted Picasso’s mastery of drawing during the first decade of the 20th century, his “Rose Period,” with his “de-skilled” period of paste in the following decades. She compared the “superb display of evocative contour” of his Rose Period with the “clumsy, thick, and insensitive” contours he used in paste. Using the works of Picasso’s contemporaries as evidence, she pieced together a picture of Picasso as a man not immune to anxieties and turmoil. Professor Krauss applied Freud’s early definition of the concept of reaction-formation to dynamically explicate the parallels between Picasso’s underlying unconscious processes and the qualitative changes in his paintings. The discussion with the audience expanded the dynamic understanding of the complex connections between creative processes and psychopathology.

In the afternoon Dr. Joseph Lichtenberg took the floor and presented “Creativity and the Clinical Exchange.” He engaged the audience with various examples of creativity with “a big C,” such as “Cervantes, Shakespeare, Dostoyevsky, Nietzsche, Mozart, Picasso, Freud, and Einstein.” These he compared with examples of creativity with “a little c,” such as those of the many less illustrious “poets, painters, and psychoanalytic theoreticians” we encounter or ourselves embody. After examining the dynamic complexities of both kinds of creativity throughout history, Dr. Lichtenberg concluded that the similarities lie in their “ability to transform their actual, imagined, and/or observed, lived experience into a work… that is, an aesthetic variant of issues that deeply preoccupy them.” Comparing the psychoanalytic process to the artistic process of creation, and using examples of his own clinical work, Dr. Lichtenberg compared the creative, bi-directional therapeutic process to that of the artist, who, rather than using language, uses a paintbrush to create his vision on canvas. Unlike the painter, however, who creates a new vision on a blank canvas, the analyst creatively alters beliefs which have been formed in the patient’s psyche.

The rest of the afternoon was taken up by the roundtable/summation, during which all three speakers engaged in a conversation with each other and the audience. The themes of discussion included various methodologies (e.g., reconstructions and constructions in art therapy and psychoanalysis), issues of what constitutes...
evidence, especially when the artist lived some 30,000 years ago, the value of theoretical conjecture, and the use of the psychoanalytic concepts of introjection, projection, transitional phenomena, and trauma, regressive and progressive forces inherent in the creative processes, multiple symbolic processes, etc. The consensus was that art and creativity can coincide with profound psychological problems (Krauss), can permeate every aspect of human interaction (Lichtenberg), and that motivation and the ability to create and appreciate art belong to the essence of being human (Blum).

Eva D. Papiasvili, PhD, ABPP, is the Executive Director and Dean of the Institute of the Postgraduate Psychoanalytic Society.

Linda A. Mayers, PhD, is the Director of Training of the Institute of the Postgraduate Psychoanalytic Society.

Susan A. Klett, LCSWR, BCD, is the Past President of the Postgraduate Psychoanalytic Society.

NPAP DEDICATES LIBRARY TO DOUGLAS F. MAXWELL
by Anne Cutler and James Holmes

On April 17, NPAP hosted a party to celebrate the dedication of its library to Douglas F. Maxwell, in appreciation of his generous financial gift to the Institute. Present at the event were members of NPAP as well as representatives from NAAAP and IFPE. Ann Rose Simon of NPAP hosted the speeches paying tribute to Maxwell. Speakers included Carl Weinberg, President of the NPAP Association; Sherman Pheiffer, President of the NPAP Training Institute; Pamela Armstrong-Manchester, President of NAAAP; Merle Molofsky, IFPE Board Member and former NPAP Board Member; Sy Coopersmith, past NPAP President; Jennifer Harper, past NAAP President; and Tom Wagner, NPAP Librarian.

Douglas Maxwell also addressed the group. Speakers referenced Maxwell’s passion for psychoanalysis; his dedication to NPAP, NAAAP, and IFPE, three organizations with which he has been actively involved; and his tireless efforts working to craft the Psychoanalytic License in New York State, which ensured that psychoanalysis would remain an independent profession.

Housed at NPAP at 40 West 13th Street, the Douglas F. Maxwell Library is available to NPAP Candidates-in-Training and Members. It contains over 2,500 volumes of psycho-analytic books and journals spanning the history of psychoanalytic development from Freud to contemporary thinkers. The volumes are currently being catalogued and once complete the catalogue will allow library users to search the holdings. Plans are underway to make the catalogue available for remote access and for materials to be electronically reserved and checked out. Currently, users may borrow most volumes by checking them out at the NPAP reception desk. The Douglas F. Maxwell Library also provides on-site access to the Psychoanalytic Electronic Publications (PEP) archive.

For information, call 973-251-9312 or email events@acapnj.org.

Laura asked, “Does an abused child always become an abusing parent?”

A Consultation Center, NJCC therapist reported zoning out, withdrawing, getting headaches. He could not work with the level of trauma and emotional devastation his patients described in every session. It was too painful.

A class explored two cases of PTSD to understand whether a different therapeutic approach was needed if the condition resulted from head injury or emotional trauma.

These are a small sampling of issues that students in the new ACAP Trauma and Resilience Studies (TRS) program will explore while learning about the facets of traumatic responses, and developing tools for building emotional resilience. Overwhelming experiences can occur throughout the lifespan. They result from environmental events, like a flood or war; repeated bullying, physical injury or illness, or violence in the home. There are countless triggers for traumatic reactions. Our constitution, previous life experience, ability to access resources, and capacity for emotional resilience all govern how we cope.

The innovative TRS program will launch in 2012. Students from many disciplines, such as mental health, first responders, law, education, child protection agencies, human resources, and the clergy will find that TRS courses and experiences will provide them with the skills to accomplish their important work with more confidence and less vulnerability to burnout. Graduates of the full TRS program receive a certificate of completion, and may apply for Trauma Specialist Certification. Courses and workshops will offer CE credits for many professions, and practical seminars for anyone engaged in trauma-related work.

For information, call 973-251-9312 or email events@acapnj.org.
Theresa Aiello, a soft-spoken, engaging New York University associate professor at NYU’s School of Social Work, is well-known for her expertise in treating children and adolescents. (Her book Child and Adolescent Treatment for Social Work Practice: A Relational Perspective for Beginning Clinicians was published in 1999 and reprinted in 2004.) This came through in her presentation on “Rescue Fantasies and the Therapist’s Subjectivity: Crossing Boundaries and Ethical Considerations,” at the conference co-sponsored by The Child and Adolescent Psychotherapy Studies Program of The New Jersey Institute for Training in Psychoanalysis and The N.J. Society for Clinical Social Work, held on April 10 at the Marriott at Glenpointe Hotel, Teaneck.

An important theme of the conference was how the therapist’s rescue fantasies intersect with grandiosity, omnipotence, and self-idealization, reinforced by society’s view of the therapist as an ideal mother. Aiello first discussed the theoretical underpinnings of rescue fantasies and boundaries and then related the analytic treatment of a confused, 30-something female who had achieved some degree of professional success. The analyst? Ralph Greenson. The patient? Marilyn Monroe.

**Theoretical Considerations**

Aiello referenced many analytic sources, from Freud and Bion to Lacan and Lang. Winnicott described how his own hateful countertransference to his nine-year-old patient probably reflected primitive feelings of the boy’s mother toward her child. As such, it aided in understanding his patient’s unconscious.

Therapists sometimes react with guilt and despair at their countertransference, and, as Greenacre noted, may view themselves as saviors and rescuers. Freud discussed the child’s fantasy of being adopted (the ‘family romance’ fantasy), a wish to secure a family other than one’s own that often focuses on viewing the therapist as the idealized parent.

Therapists may also have their own unconscious wish to have been rescued as a child, and then there is their wish to adopt a patient. Aiello recognized the psychodynamics at work in a residential setting in which she was employed: Staff members often expressed their own fantasy that Aiello adopt a nine-year-old boy in the facility, a wish also voiced by the boy himself.

**Ralph Greenson and Marilyn Monroe: Crossing Boundaries**

This brought Aiello’s discussion to boundaries, boundary crossings, and boundary violations. Aiello delved into the enmeshed relationship between Marilyn Monroe, whose substance abuse, suicide attempts, and hospitalizations were already well documented, and Ralph Greenson, already a well-known and respected psychiatrist–psychoanalyst in Los Angeles.


Greenson characterized Monroe as “a perpetual orphan,” an “adolescent girl, who needs guidance, friendliness, and firmness” (www.telegraph.co.uk: Christopher Turner, Marilyn on the Couch, June 23, 2010).

Although Greenson fully embraced Freudian theory and technique, his own veered wildly away. He saw Monroe daily and sometimes more often in sessions in the two-year period prior to her death in 1962. At his suggestion she bought a house near his home. Monroe modeled her home decor on Greenson’s home, and his brother-in-law became her attorney. Monroe’s on-site aide was the former owner of Greenson’s home, who reported Monroe’s activities to him. He also dealt with studio executives on her behalf regarding medical and business matters and asked his daughter to establish a friendly relationship with Monroe, which she did. Monroe and Arthur Miller joined in the Greenson family gatherings.

Aiello recounted how Greenson got overly involved with other patients as well. Douglas Kirsner’s 2007 article (“Do As I Say, Not As I Do:” Ralph Greenson, Anna Freud, and Superrich Patients,” Psychoanalytic Psychology, 24, 3) relates how Greenson flew across the country to interview a prospective male companion for another patient, the very wealthy Lita Annenberg Hazen, who was president of his Foundation for Psychoanalytic Research in L.A. (His match-making was unsuccessful.) At his suggestion, Hazen made generous contributions to Anna Freud’s London clinic over a ten-year period, and he and Anna Freud freely discussed Hazen (as patient and donor) in their correspondence.

Aiello also spoke of the interview with the Greenson children in 2010 when the family was auctioning off some Monroe memorabilia (Christopher Turner, Marilyn on the Couch, June 23, 2010, www.telegraph.co.uk). At the time Monroe was their father’s patient, both children were in their twenties. Daniel Greenson, also a psychiatrist-psychoanalyst, now thinks Monroe’s death was self-inflicted: “My father was hurt by the fact that she killed herself, and he would tell himself that it was accidental.” With some perspective, he now sees his father as “increasingly desperate”:

“He felt that therapy as he knew it [with Monroe] wasn’t working, he couldn’t hospitalize her; because everyone came to stare and gawp [sic] at her . . . and medication wasn’t helping in her case.”

continued on page 16
Said his son, “[H]e couldn’t give up on the idea that he could help her, but then the whole thing came down. The fact is, it didn’t work, I mean, she killed herself.” (C. Turner, 2010)

Joan Greenson agreed with her father that Monroe had accidentally overdosed: “It may have been foolhardy but he was willing to take a risk.” She had mixed feelings about her sibling relationship with Monroe:

“She gave me self-confidence, she taught me how to dance and stuff like that… [I]t was sort of like having a very bizarre sister that I never had. It was always complex – partly because she was complex, her moods up and down, but also because of her fame.” (C. Turner, 2010)

Audience members suggested that Greenson might have been avoiding conflict with his celebrity patient, falling into a false self, abandoning his technique for his own grandiose benefit, establishing a master-slave dynamic, and serving his own narcissism needs. “He lost it,” Aiello observed. “Greenson could have continued treating Monroe analytically.”

Blurred Boundaries in Digital Communication

The afternoon session’s four presentations continued the discussion of boundaries. Jodi Kosofsky, MA, LP, NCPsyA, director of NJI’s Child and Adolescent Psychotherapy Studies Program, a N.Y. State-licensed psychoanalyst, faculty member, training analyst and supervisor at NJI and NPAP, kicked off with a consideration of “Information-Fatigue Syndrome.” She focused on blurred boundaries in the digital age. Internet users may lose control of boundaries and succumb to “digital depression.” Emails and texting make social interactions easier, yet more remote. Empathy is lessened in exchanges in which tone and body language are missing; cyber bullying is but one recent result.

Kosofsky cited depression, sleep loss, Internet addiction, cardiac stress, eyestrain, boredom, and “analysis paralysis” (postponing decision making) as results of overusing digital innovations. Cyber-space becomes a substitute for real life, and Internet users may become more impulsive, more narcissistic, and more in need of immediate gratification. Still, social interactions may be enhanced and information gathering made easier. What we do with these innovations is ultimately up to us, concluded Kosofsky.

Patients Who Induce the Therapist’s Rescue Fantasies

Suzanne Saldarini, MA, LPC, NCPsyA, NJI faculty member and control analyst; and certified in school psychology with extensive experience in public and private schools, and Melissa Brinton, LCSW, a candidate in NJI’s Child and Adolescent Psychotherapy Studies Program and a clinician, case manager; and school social worker; presented cases on “Self Harm” and “Bullying.”

Brinton related the ongoing case of M, an 18-year-old Asian female, the child of unmarried parents. M’s father had failed to set limits, indulging her with material things. In contrast, her mother had tried to set limits, but with five children by her first husband, she entered and left M’s life at will. When M’s father died suddenly, the teenager became depressed and entered a residential facility where she began cutting herself, a manifestation of her emotional state. M was then left without a father and with an unreliable mother; her failure to achieve object constancy led Brinton occasionally to think of taking in M, before realizing her own rescue fantasy.

Saldarini recognized her own rescue fantasies during her treatment of Lizzie, her patient for 15 years. She provided a holding environment and a sense of reality for Lizzie, who was raised with a violent, abusive schizophrenic brother, the family’s emotional center. Lizzie’s mother feared him and expected Lizzie to cater to him as she herself did. Upon entering treatment, Lizzie was a hoarder who only ventured outside with her mother. Now forty, Lizzie has stopped cutting herself, delays purchasing new items (thereby indirectly controlling her hoarding), and now ventures forth on her own.

Howard Cutler, LCSW, NCPsyA, director of NJI’s Clinic, and the final presenter on the program, addressed “Eating Disorders,” first defining anorexia nervosa, bulimia nervosa, binge eating, and a preoccupation with food. He outlined their physical symptoms and health consequences. Therapists do indeed experience anxiety in treating those with eating disorders, said Cutler; who had specialized in the assessment and treatment of eating disorders at the Renfrew Center.

Cutler recommended working with a team composed of psychiatrists, physicians, and nutritionists who specialize in eating disorders. Patients often present with other disorders, he explained, among them obsessive-compulsive disorder, bipolar disorder, depression, and symptoms involving lack of impulse control, cutting, and substance abuse.

Patients with eating disorders experience parents who are “absent, too present, or too intense,” summarized Cutler. Boundary issues between parent and child are often transferred to the therapist. Patients are unaware of their feelings or cannot manage them; Cutler described them as “compliant, complaining or critical, or people pleasers.” Many therapists themselves wish to be saved; sometimes they have their own eating disorders. “Eating disorders are smoke screens for other issues,” concluded Cutler.

Aiello’s riveting, well-researched morning presentation treated countertransference and boundary issues from myriad theoretical views as well evidenced in a case gone awry; and the afternoon session illustrated how managing these matters only occurs when the therapist’s countertransference is identified and analyzed.

Millicent Lambert, MA, NCPsyA, is a certified psychoanalyst and freelance editor.
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The Object Relations Institute (ORI) for Psychotherapy and Psychoanalysis is a New York State Chartered Educational Institute which was founded in 1991. Our training programs include a few programs for matriculated students who are enrolled in psychoanalytic & psychotherapeutic tracks, while there are various introductory courses offered for new mental health practitioners and interested public, and also courses for experienced clinicians of any school of psychoanalytic thought who wish to enhance their practice by application of the Object Relations theory.

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For more information and to download applications—visit our web site: www.ORINYC.org and/or email our administrator at admin@orinyc.org, call 646.522.0387.
Symposium 2011 sported a “New Yorker” cartoon on its program with the caption “I Know I’m Real. I’m not sure about you.” It was a conference whose breadth matched its depth as psychoanalysts of various trainings presented their work in a vast array of treatment paradigms that challenged their audience as much as they affirmed psychoanalytic treatment.

Reflections on the cartoon, which arose with references in several presentations, brought to mind a Winnicott’s True Self/False Self and the possibility of a Real Self/Unreal Self conceptualization. Ironically, the patient in the cartoon is lying on the couch, wearing a superhero costume and speaking the words, behind which the analyst sits quietly taking notes. And to be real is often another word for being alive….

When colleagues recently discussed the confusion among the public about what a treatment service might be, the word “treatment” seemed obvious enough as a clinical association, especially in a medical-center setting where the conference took place. Historically, psychoanalysis began as a “treatment” for emotional suffering, as the conference organizers note in their introduction. But “treatment” is also used in everyday language as in how we treat each other and the difference that good treatment of a person can make as well as the problems bad treatment can create. And so, each case presented became the analyst’s treatment of another person, how he or she handled the feelings that arose, and the reactions that ensued both in themselves and in the other. And it was such treatment that transformed the lives of each presenter’s patients.

The integrity of psychoanalysis was maintained from the beginning of the conference with Dr. Fred Pine’s plenary presentation on our “Practices” today, describing them as a noun – what we are, and as a verb – what we are doing. And what we do was challenged by Edgar Levenson, MD, who spoke after Pine. “How often? How long? How deep?” he asked. “The question evokes the questioner. The best answer to any question – as any New Yorker will tell you – is ‘Who’s Asking’? True, frequency and duration concern us all, but for some of us it’s a pragmatic issue, and for others it is canonical.”

The presentations went as deep into the mind and brain on the Neuropsychoanalysis panel on Mind and Matter as they did with, e.g., couples and children, as well as working with dying patients and their families. The ultimate far reach of psychoanalysis was made known in the cross-cultural issues in psychoanalytic treatment as presented by Elise Snyder, MD, of the China American Psychoanalytic Alliance, where Skype sessions are the norm in bridging East and West. “The people I have met in China, more than 150 in our training programs, and those who have applied for treatment are not very different from the candidates and students and patients I see here,” Snyder said. “The differences are between individuals, not between Chinese and Westerners.”

Perhaps Snyder’s closing statement gives us something to contemplate regarding how we treat cultural differences. “America is of course a nation of immigrants. It may be that American analysts are far more used to doing what others might think of as cross-cultural analyses… the issue for us as analysts is in the meaning of these differences for the individual patient. If we are not anxious about other cultures, or xenophobic, analysis is quite possible across great cultural divides.”

Rob Marchesani, MSSc, LP, is president pro tem and faculty member and supervisor at the Westchester Institute for Training in Psychoanalysis and Psychotherapy, and practices in NYC.

On Sunday, May 1, 2011, Jodi Kosofsky, MA, LP, PsyA, received the 2011 Outstanding Service Award from the New Jersey Institute for Training in Psychoanalysis, Inc. Jodi serves as the Director of the Child and Adolescent Program as well as the Chair of the NJ Institute Recruitment Committee. She is also a member of our Faculty and Curriculum Committee and a Control Analyst.

Those of you who have worked with Jodi know that she tirelessly works for the betterment of NJI and the field of psychoanalysis. Her award was in recognition of her outstanding efforts and constant attention to detail, quality, and the principles on which NJI was founded.

The award ceremony took place at the Glenpointe Marriott Hotel in Teaneck, New Jersey. Members of NJI came together to personally support Jodi and provide speeches of acknowledgment of her commitment and hard work to advance the profession of psychoanalysis. The speakers included Janice Victor, LCSW, NCPsyA, Neil Wilson, PhD, Suzanne Saldarini, LPC, NCPsyA, Linda Levy, PhD, NCPsyA, and Burton Settler, PhD, NCPsyA.

We look forward to Jodi’s continued involvement as a valued member of NJI.
Ruth Lijtmaer, PhD, presented the following papers, “Multiple Jeopardy Part I: Intersection of Social Identities” on the panel of the Multicultural Concerns Committee, and “Countertransference with Latino Patients’ Healing Practices,” on the panel “How the Spiritual Matters in Psychoanalytic Practice: Identity and Growth.” The papers were presented at Division 39, APA, April 13-17, in New York City. Dr. Lijtmaer also presented the paper “Here and There: Psychoanalytic Perspectives on Immigration” on the panel “Broken Attachments: Privilege and Culture and Psychotherapy” at the Center for Psychoanalysis and Psychotherapy of New Jersey, Fairleigh Dickinson University, Madison, NJ, on May 1.

Sandra Indig, LCSW, reviewed a presentation by George Hagman, LCSW, entitled “The Artful Brain: Survival through Creativity,” in volume 42:1 of The Clinician.

The Misfit, by Steven Poser, PhD, was published in June as a Kindle Single by Rosetta Books. Ralph Greenson was Marilyn Monroe’s fourth and last analyst, who undertook to treat her in the last fifteen months of her life, which ended with her killing herself by overdosing on barbiturates. He decided early on that she was too fragile, needy, psychotic, and suicidal to be treated as a normal analytic patient. Instead, he saw her seven days a week, brought her into his home, and adopted her as a member of his family. This essay presents portraits of both patient and analyst caught up in a tangle of unconscious enactments. A classic borderline personality, the childhood roots of Marilyn’s psychopathology are explored, as well as her use of her sexual power to gratify instable infantile needs to be loved and wanted as a child, her primitive anxieties, her exhibitionism, and her profound disturbances of identity.

Journeys to Foreign Selves: Asians and Asian Americans in a Global Era, a book by Alan Roland, PhD, has recently been published by Oxford University Press. In our global era, where people and cultures have traversed the world as never before, there are clinical psychoanalytic journeys to foreign selves, and to a self that until very recently remained foreign to our psychology. The former journeys explore the role that culture plays in the inner world, where radically contrasting cultures result in significantly different configurations of the self. The latter are journeys into a self which up until recently have been considered totally foreign, if not taboo, in psychoanalysis and other psychological theories: those of the spiritual self and its experiences. Such explorations require still another journey into the effects of culture on our psychoanalytic theories, such as Freud formulating a universal psychology and the psychic unity of mankind, to counter prevailing nineteenth-century colonial ideologies such as social evolutionism and progress; but which intrinsically inhibits the conceptualization of psychoanalytic cultural psychologies of Asians and others outside of the Northern European/North American culture belt.

Farrell Silverberg, PhD’s, most recent article, “The Tao of Self-Psychology: Was Heinz Kohut a Taoist Sage?” was published in this summer’s Psychoanalytic Inquiry, Vol. 31:3. The theme of this Special Issue of the journal is Consequences of “Empathy”: Kohut in the 21st Century – Part II. In addition to being a NAAP analyst, Dr. Silverberg is the first Western student of Buddhist-Taoist psychotherapy master Dr. Rhee Dongshik, which has uniquely qualified him to write about Self-Psychology from an Eastern perspective regarding the subject of empathy in treatment.

Drawing on his extensive experience providing premarital therapy, Michael Beck, PhD, has written two chapters in the book All-in-One Marriage Prep. These chapters focus on substance abuse and anger management. Dr. Beck describes those things a person should be concerned about that are predictive of problems with anger issues in marriage. He goes on to describe how people can better manage their own anger and how spouses can help the people they do marry who have anger issues.

In the chapter on alcoholism, there is an extensive portion devoted to those factors that are predictive of subsequent alcohol problems. Both chapters are invaluable to anybody contemplating marriage in the future. All-in-One Marriage Prep has been nominated for the Eric Hoffer Prize.
**ACAP Academy of Clinical & Applied Psychoanalysis**

**ACADemy of CLINical AND APPLIED PSYCHOAloysis**

**ACAP’s One-Year Program Announces Second Semester Courses**

The opening semester, Winter 2011, of ACAP’s One-Year Program offering coursework, CE credits, a diploma upon program completion, and credits toward the ACAP Psychoanalytic Certificate program, met with great enthusiasm from its 2 participants. Students from several disciplines enrolled in courses, several of whom had attended prior ACAP events but did not feel ready to enroll in the full Psychoanalytic Training program. Our feedback from this experience indicates a demand for deeper studies of the unconscious, motivation, interpersonal and clinical skills, and a collegial environment where difficult cases can be shared and explored not only among those with previous mental health or medical training, but among educators, HR professionals, the clergy, management specialists, and other disciplines. We are excited to announce Semester 2 of the One-Year Program, to which anyone may apply, and which offers CE credits for several professions. Please let anyone who may be interested know about this brief and exciting adventure into psychoanalytic exploration. Information is available at www.acapnj.org, by calling 973-629-1001, or emailing acapnj@acapnj.org. Distance Learning students are welcome to apply for this program.

**Strategic Planning Made Fun: ACAP’s 2011 Process**

ACAP Trustee Lew Kruwicz, MBA, who has over 30 years experience in providing strategic, process, and IT consulting services to public and private sector clients, felt brave enough to take on the ACAP Board and lead us through a formal, strategic planning process this year. Despite endless exploration and mirroring by analysts on the Board, he and the other Trustees did a remarkable job, as they described, “herding cats.” ACAP is fortunate to have outstanding Board members whose expertise in fields from community agency management, medicine, law, and accounting, to nonprofit development, educational grant acquisitions, and financial planning give focus and balance to those psychoanalysts on the Board who have more exploratory imaginations, and are less fiscally minded. Our non-psychoanalytic Trustees were astonished to learn that ACAP a true cooperative, operates with more than 20,000 professional volunteer hours per year, and with 2.5 paid staff. With guidance from Trustee President, Dr. Moe Freedman, Lew walked us through the process of defining ACAP’s current position; reviewing mission, goals, and future visions; narrowing our focus from an array of prospects to two major initiatives, and helping us rough them out. For a group who spend a lot of time examining lives, we have so little experience systematically studying the institution. There was much labor and many laughs, and the initiatives are now in development process. The first initiative is implementation of a different fund-raising model, led by new Trustee, ACAP’s student representative on the Board and Founder! Former President of Good Grief, Inc., Mary Robinson. Mary is helping us learn how to orchestrate a grass roots fund-raising venture that she has studied and found successful in her nonprofit ventures. The other major initiative the Board decided upon is the development of a multi-faceted Trauma and Resilience Studies program to be launched in 2012. This program in Applied Psychoanalysis will complement and expand ACAP’s existing psychoanalytic and Continuing Education programs. Thanks to Lew Kruwicz and Moe Freedman, strategic planning was not so daunting. Who knew being organized and systematic could be fun?

**Not Just Buildings Get Renovated: ACAP’s Curriculum Project**

ACAP Curriculum Chair Charles Pumilia, PsyD has steered a year-long Curriculum Committee review and revision of the ACAP curriculum. Thanks to his and the Committee’s efforts our curriculum is updated and streamlined to reflect more diverse theoretical readings, current publications in the field, and inclusion of the Trauma and Resilience Studies material. Syllabi are organized topically so students can have an understanding of why selections are chosen in the order presented and the relationship of each course to its place in the curriculum. Underway now are revisions of “methods of evaluation,” defining outcome expectations for courses, and review and revision of student writing projects throughout training. It has been an enormous undertaking: re-reading existing materials, sifting through hundreds of additional journal articles and books, and attempting to consolidate syllabi to what is thought essential from a vast array of possible, and important, readings. A Sisyphean project wrested to human scale by Dr. Pumilia and the Committee. Seeing the new lists makes you want to enroll in every course!

**ACAP’s Grant Funded Program for Preventing Staff Burnout and Secondary Trauma, and Providing Enhanced Care of the Elderly Impaired Continues to Exceed Expectations and Provide Essential Data for Future Programs**

ACAP’s grant funded program, coordinated by Annette Vaccaro, LCSW, and called, “Strategies for Communicating with the Aging Adult: A Training Program for Caregivers and Health Professionals” continues to exceed expectations. We have progressed from working only with nonprofit organizations to packaging the program and offering it to “for profits.” The initiative has been successful in its initial forays into the corporate environment, with more than 350 health professionals and caregivers participating in training sessions and conferences since last spring. This five-session, interactive curriculum offers real-life scenarios, innovative methods, and issue-specific skills to improve communication with the vulnerable and challenging elderly. Participants develop strategies to better communicate with the mentally impaired elderly and to improve their in-home care by training family and professional caregivers of all categories, including: family members, administrators, social workers, rehabilitation staff nurses, and nurse aides. The program’s goals are to improve medical treatment compliance and quality of life within senior care facilities and to better the transition of discharged patients to independent living.
**Study Outcomes**

Our measures as of September 2010 included: a survey for instructors, qualitative interviews, quantitative scales, logs, and monthly curriculum meetings. Data from 2011 is under review by the research evaluation team.

ACAP’s independent research consultant concluded that in 2010 this training:

1. Assisted caregivers in becoming more comfortable listeners when interacting with the elderly
2. Specifically helped caregivers become actively interested in the personal stories of those in their care.

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**cmps**

CENTER FOR MODERN PSYCHOANALYTIC STUDIES

Center for Modern Psychoanalytic Studies

Arnold Bernstein, one of the founders in 1971 of the Center for Modern Psychoanalytic Studies and a senior analyst, has a new book entitled *The Emergence of the Wonder Child and Other Papers.* This book presents the evolution of a practitioner-scholar’s thoughts about psychoanalysis from a man who has devoted over fifty years of his professional and intellectual life to its development. The *Emergence of the Wonder Child and Other Papers* will interest those seeking to understand and advance modern psychoanalysis, and especially those seeking to master the science of therapy. To Dr. Bernstein, Dr. Robert A. White, formerly a professor and Director of Harvard University’s Psychological Clinic, wrote: “It is a pleasure to have psychotherapy discussed in plain, simple, and basic language. I think you have laid an excellent groundwork for students who want to think about psychotherapy sanely and without the somewhat cloudy metaphors that often pass for theory in this field.”

CMPS is offering the book for $47.50. Call (212) 260-7050 or email cmps@cmps.edu

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**INSTITUTE NEWS**

**IPS proudly celebrated the graduation of Maria do Ceu Dias from the Integrated Child Program on Sunday June 11, 2011. Ms. Dias is continuing in the Adult Psychoanalytic Program.**

IPS is pleased to announce that we have been accepted as an accredited member of ABAP.

We are excited about the launch of our new website, www.ipsnewjersey.org. The new site will provide visitors with a sense of the warm and welcoming environment that IPS offers.

We are looking forward to our Open House and Conversation on September 11, 2011. Be sure to join us!

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**NEW JERSEY INSTITUTE FOR TRAINING IN PSYCHOTHERAPY**

NJII is full of news this issue! We are so pleased to announce the 2011 graduates of our 5-year psychoanalytic program — Deborah Bunim, Ph.D., LCSW, PsyA, and Wendy Winograd, LCSW, NCPsyA, and our 2-year Child and Adolescent Psychotherapy program — Ana Falcon, LPC, and Cheryl Schwartz, MA. We congratulate them and wish them luck in their future endeavors.

In addition to honoring our graduates at the May 1 Graduation Brunch, we proudly honored Jodi Kosofsky, MA, LP, NCPsyA, NJII member, faculty, control analyst, and Director of our Child and Adolescent program, with the 2011 Outstanding Service Award for her dedication to the founding principles of The New Jersey Institute for Training in Psychoanalysis, Inc.

As we move forward into the summer we are proud to offer the following: Summer Workshop Intensive Part II with *Ethics for the Experienced Practitioner,* with Janice Victor, LCSW, NCPsyA, and *The Impact of Cultural Diversity in Psychotherapy,* with Kay Itzigsohn, MA, LPC. This will be held Sunday, June 12, at the Institute. For more information call 201-836-1065. The cost for the day, which includes lunch, is $125. 5.5 Continuing Education Credits will be offered for this event.

On June 9, 16, and 23 we will be offering *Applications of Psychoanalytic Techniques in Everyday Psychotherapy* with Harriet Diamond, LCSW, NCPsyA. Classes will be held on Tuesday evenings, 7:00-8:30 PM. The fee is $100 and 4.5 CEUs are available.

We will also be hosting an Open House on Sunday, June 5, 10:00 AM-12:00 PM, for interested professionals looking to enhance their clinical skills and deepen their knowledge and understanding of psychoanalytic concepts.

We are delighted to announce our new 1-year programs for fall 2011:

- Psychoanalytic/Psychotherapy Certificate Program
- One-Year Child and Adolescent Psychotherapy Program
- One-Year Supervision of the Analytic Process Program

Please visit www.njinstitute.com for more information or e-mail njinstitut@aol.com.

**OBJECT RELATIONS INSTITUTE**

Susan Kavaler-Adler, ORI Founder and Director will be presenting a full-day workshop at the NJ Society for Clinical Social Work on September 25. The workshop is entitled “Fear of Success and Unconscious Loyalties to our Bad Objects.”

ORI has established the Object Relations Institute Press and are pleased to announce that the first two books will be published in September 2011. In addition, we would like to announce a Call for Psychoanalytic
NATIONAL INSTITUTE FOR THE PSYCHOTHERAPIES

The NIP Trauma Treatment Center is currently accepting applications for Affiliate Clinician positions. Qualified applicants will be licensed mental health practitioners who are:

- Experienced clinicians trained in EMDR or Somatic Experiencing
- Familiar with psychodynamic theory and principles
- Familiar with psychological trauma
- As an Affiliate Clinician in the NIP Trauma Treatment Center, you will
- See NIP Trauma Treatment Center patients in your own office.
- Be reimbursed $35 per 60-minute session.
- Participate in low-cost, small group supervision with EMDRIA-approved Consultants.
- Be invited to attend the NIP Trauma Program’s acclaimed monthly Saturday morning clinical seminars.

For further information, please call 212.582.1566, ext. 8710 or email info@nipinst.org.

INSTITUTE NEWS

Adolescent Treatment Workshop Series

This fall we will offer an Adolescent Treatment Workshop Series on Transference Focused Psychotherapy. The Westchester Institute and Dr. Pamela Foelsch will present this series of workshops for the treatment of adolescents who are at high risk for developing severe personality pathology.

This unique method was devised originally by Dr. Paulina Kernberg and Dr. Pamela Foelsch following the publication in 2000 of Dr. Paulina Kernberg’s book on personality disorders in children and adolescents. It is their belief that identity formation is fundamental to the development of normal personality and functioning. This treatment can be used to intervene and reduce the likelihood of developing a personality disorder by clearing blockages to normal development.

The series will consist of four workshops on Saturdays, 10 AM - 1 PM, as follows:

- Sept. 24 – Adolescent Identity Treatment;
- Oct. 15 – Diagnosis and Assessment of Personality Pathology in Adolescents;
- Nov. 5 – Establishing a Treatment Frame;
- Dec. 4 – Techniques of Treatment.

Each workshop is $40.00 and CEUs will be offered for Social Workers in Connecticut and New Jersey. All workshops will take place at Scarborough Presbyterian Church, 671 Scarborough Rd., Scarborough, NY 10510.

Pamela A. Foelsch, Ph.D., is a Clinical Assistant Professor of Psychology in Psychiatry at the Weill Medical College of Cornell University. She participates as a senior supervisor of Transference Focused Psychotherapy (TFP) at the Personality Disorders Institute directed by Otto F. Kernberg, MD, and co-directed by John F. Clarkin, Ph.D. Dr. Foelsch is also the Director of ProfPsych Comprehensive Services, a clinical practice group located in Westchester County that provides a variety of psychological services including evaluation, testing, and treatment of a range of disorders in children and adults, with particular expertise in the diagnosis and treatment of personality disorders.
The Art of flourishing: A new East-West Approach To Staying Sane And finding love in An insane world

by Jeffrey B. Rubin PhD - Crown Archetype

In more than thirty years of studying, practicing, and teaching Eastern meditative and Western psychotherapeutic disciplines, Dr. Jeffrey Rubin has discovered that combining both paths is profoundly more effective than following one alone. In The Art of Flourishing, he has integrated meditative, psychotherapeutic and yogic practices to show readers how to thrive and live well, even in times of upheaval – this is Meditative Psychotherapy.

With an easy-to-follow, accessible strategy, The Art of Flourishing gives readers the tools to resolve the challenges that interfere with achieving enduring fulfillment within themselves and their relationships.

“Like” the book blog on Facebook – type in “Dr. Jeffrey B. Rubin/ Author.”

Visit www.drjeffreyrubin.com for more information on the author and his earlier books and articles and blog, as well as the dates for the upcoming workshops and talks.

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THE ART OF FLOURISHING:
A NEW EAST-WEST APPROACH TO STAYING SANE AND FINDING LOVE IN AN INSANE WORLD

by Jeffrey B. Rubin PhD - Crown Archetype

For centuries, artists and writers have been plagued by the fallacious shibboleths they believed as axioms, e.g., that you have to be crazy to be an artist, and that, if you are, then you can’t go into psychotherapeutic treatment because it will threaten to “resolve” the craziness of the artist. Is this true and, if yes, does it have to be so?

These questions lead to an in-depth exploration in Dr. Susan Kavaler-Adler’s two books on brilliant (and tortured) female artists and writers - The Compulsion to Create: Women Writers and Their Demon Lovers and The Creative Mystique: From Red Shoes Frenzy to Love and Creativity. Psycho-biographies of Suzanne Farrell and Charlotte Bronte, as well as Anais Nin, are contrasted with those of Emily Bronte, Emily Dickinson, Edith Sitwell, Sylvia Plath, Anne Sexton, Virginia Woolf, Camille Claudel, Diane Arbus, and Katherine Mansfield, along these dimensions. Originally published by Routledge in 1993 and 1996 respectively, both newly edited and illustrated books are being re-published by the ORI Press in 2011.

Both books illustrate how those artists who fail to achieve psychic dialectic, love-creativity dialectic, and intersubjectivity are mired in the fall out of developmental disruption and derailment. Such developmental arrest changes a potentially healthy life-long connection to a pathological and frozen state, in which “developmental mourning” is not possible. In this “pathological mourning” state, early traumatic disruptions are repeated perpetually as sadomasochistic enactments that constitute a “demon-lover complex.” In the “demon-lover complex,” aggressive reactions to maternal failings are both split off and projected into masculine figures due to oedidal eroticization in pre-oedipal psychic structures, compounding the failings of mothering with the failures and losses related to fathering.

Focusing on the father-child relationship rather than limiting herself to the mother’s influence was one of the major contributions of Dr. Kavaler-Adler to psychoanalytic thought, as was pointed out by Dr. Jeffrey Seinfeld in his previous review of The Compulsion to Create.
NAAP was saddened to learn of the death of member Robert Raab, who passed away on September 29, 2010, at the age of 86. Raab, who obtained his degree as a psychotherapist at the age of 84, was head of the Suburban Temple in Wantagh, New York. He was also author of three books, *Coping with Death*, *Coping with Divorce*, and *The Teenager and the New Morality*. We extend our condolences to his family.

NAAP also regrets to inform our members of the passing of Julia Gargiulo, wife of longtime NAAP member Gerald J. Gargiulo, on May 13, 2011. Julia Gargiulo was a former English Professor at Pace University, a social worker in Connecticut, and a practicing psychotherapist who worked closely with her husband. We extend our heartfelt sympathy to Dr. Gargiulo and family.

In the spring issue of NAAP News, President’s Report, page 3, there was an incomplete quote from Theodore Reik. We apologize for this error.

Enter Theodore Reik: “We all stand on the shoulders of giants.” (Isaac Newton, 1676; John of Salisbury, 1159). Reik is the father of many of the NAAP and non-NAAP institutes. He was also the analyst and supervisor of many of the NYPSI’s analysts of his day! It is said that Theodore Reik told Phyllis Meadow: “Make something of psychoanalysis, Phyllis!” And in 1972 NAAP was created with 5 other founders and added 10 institutes just one year later.