

NEWSLETTER

Committee on Psychoanalysis

A National Membership Committee of The National Federation of Societies for Clinical Social Work

VOLUME 4

FALL 1990

Third Psychoanalytic Conference

Cecily G. Weintraub, Ph.D. Rockville Centre, NY

The Third National Clinical Conference of the Committee on Psychoanalysis will be held in New York City at the Vista Interna-Hotel, Thursday, November 1, 1990 through Sunday, November 4, 1990. According to conference directors, Walter J. Alvarez, M.S.W. and Rosemarie Gaeta, M.S.W., this year's "The conference theme, Continuing Evolution Psychoanalytic Thought: Infancy to Adulthood" reflects the historical commitment of



the clinical social work profession to the individual throughout the life cycle and in society.

continued on page 11

American Psychoanalytic Considers Easing Waiver Requirement

Kenneth Adams, Esq. Washington, D.C.

Several years ago a group of psychologists sued the American

Psychoanalytic Association ("the American") and the International Psychoanalytic Association ("the International") over their refusal to permit member institutes to admit and train non-physician mental health professionals.

The case was settled with an agreement which included a commitment that at least 28 percent of the candidates admitted to training in institutes accredited by the American would be non-physician candidates, assuming enough qualified candidates applied. To im-



plement that commitment, the agreement called for a Committee on Non-Medical Clinical Training (CNMCT) to screen applications from non-medical candidates who had achieved the highest clinical degree available in their profession, and to grant waivers to member institutes to consider candidates approved by the CNMCT. It would then be up to each member institute to admit or not admit those candidates, but they would be free to admit them without jeopardizing their accreditation by the American. During the past two years there have been many complaints about how the CNMCT waiver process has operated. For the most part, the complaints have not been focused on exclusionary practices by the institutes, but rather continued on page 9

Rosemarie Gaeta, M.S.W. Chair-Elect, National Committee On Psychoanalysis

In January 1990, I was nominated for the position of National Committee Chairperson-Elect. This nomination was put forth in a general election to the membership of the Committee on Psychoanalysis. I understand there was overwhelming support for the nomination from the many members who cast their ballot. I thank you all for your votes of confidence and am delighted to accept the position as Chair-Elect.



For those of you who may not be familiar with my professional credentials and experience with the Commit-

tee on Psychoanalysis, I have been asked to write a few words about myself: My psychoanalytic training was completed at the Institute for Psychoanalytic Training and Research (IPTAR) in New York City. After graduation, I became a member of that Institute's Society continued on page 11

Narcissistic Hazards Of Success

Dale R. Meers, D.S.W. Washington, D.C.

In his Medical Orthodoxy and the Future of Psychoanalysis (1965), Kurt Eissler was remarkably prescient of the suicidal propensities of psychiatric psychoanalysis. Incongruously, his conviction that lay analysis in the U.S. was moribund ignored orthodoxy's narcissistic contribution to the viability of lay analysis.

Agrippa's heretical rejection of a demonological etiology of mental illness left him in fear of his life, and he died with a formal, clerical curse on his tombstone. Premonitory (?) in historical context, Descarte, a safer generation later, was accepted as a greater authority on psychology than his medical contemporaries, and Kant, later yet, considered medicine as intruding into the field of psychopathology. Progenitors of psychiatry and social work shared quite radical philosophic and moral objections to miserable, horrendous neglect, derogation and not infrequent sadistic mistreatment of the insane. Psychiatry's Pinel and Esquirol are remembered for striking the chains of the mentally ill, and the lay, activist philanthropic Tukes for the establishment of model institutions for their benign care. Lost to our history are those activists who over

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| Clinical Social Workers | Special Section | on |
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Committee On Psychoanalysis Invited To Psychology Sponsored Psychoanalytic Meeting

Marilyn Stickle, M.S.W. Arlington, VA

The National Membership Committee on Psychoanalysis was invited to attend a meeting sponsored by Division 39 (Psychoanalysis) of the American Psychological Association held in Washington, D.C. on May 5th. Two representatives of the Committee attended the meeting, Marilyn Stickle, M.S.W., and Marga Speicher, Ph.D.. Other attenincluded dees psychoanalytic training institutes and study groups as well as three other national organizations of psychoanalytic practitioners.



The purpose of the meeting was to explore the feasibility of establishing a federation of interested psychoanalytic practitioners to further the cause of psychoanalysis as a treatment modality. The idea of a federation was likened to the United Nations where all disciplines, all theoretical points of view, and all groups of any size would be equally represented. A national federation could: (1) establish a speaker program; (2) lobby at the National level on behalf of psychoanalysis; (3) do public relations; and (4) get group discounts on journal subscriptions.

The meeting was well attended, and by and large the participants were enthusiastic about working jointly on the issues facing psychoanalytic practitioners. Some participants expressed a great deal of concern about possible loss of autonomy and the difficulties that would lie ahead in working on differences among groups. Our National Membership Committee representatives expressed concern that any federation must be independent of psychology or any other discipline. This view was shared by the majority of attendees, and was supported by representatives of Psychology's Division 39.

The conference concluded with a committee appointed to establish a second meeting to continue exploring the establishment of a national federation. Speicher agreed to serve on the committee representing both the C.G. Jung Institute of New York and the National Committee on Psychoanalysis.

Call For Papers For 1991 Conference -Committee To Conduct Series Of Psychoanalytic Workshops And Papers As Part Of The Federation's Twentieth Anniversary Conference

In celebration of the National Federation 20th anniversary, the Committee on Psychoanalysis will conduct a psychoanalytic series of workshops and papers as a "specialty tract" within the National Federation's clinical social work conference. This conference will be held at the Palmer House in Chicago, Illinois, September 27-29, 1991. The theme of the Committee's psychoanalytic tract will be Psychoanalytic Theory and Treatment. (See article in this issue of the Newsletter, "Clinical Social Work: Integrating Psychodynamic Treatment With The Demands Of Today's Marketplace" by Irmgard Wessel, M.S.W. for details of the Federation's conference.)

Please submit three copies of a full paper or draft of a paper. Only unpublished papers will be accepted. Include biographical abstract and credentials. 90 minutes is allotted for the presentations of a paper, panel or a workshop. Papers and workshop proposals will be returned only upon request and only with a stamped, self-addressed return envelope.

Please send your papers or workshop proposals (three copies) to: Helga Justman, M.S.W., P.O. Box 259, Belvedere, CA 94920. Submissions must be received by January 15, 1991.

Member Profile Ernst Federn, A.C.S.W. Vienna, Austria

When on January 8, 1948 my wife and I arrived at the port of New York, I had left behind a Europe ravaged by war. My land of birth, Austria, was at that time occupied by four governing powers. I had spent the years between 1938 to 1945 in concentration camps, three months in Dachau and the rest in Buchenwald. After my liberation by the U.S. Army, I had gone to Brussels, Belgium, with the hope soon of later joining my family in New York. (In 1938, they had had



the good luck to escape from Austria.) I still had to wait to get my fiancee out of war-torn Vienna in order to marry her before leaving Europe. At that time an unmarried couple could not enter the United States together as immigrants. With a year in prison for my political activities as a member of the Socialist Resistance against the Clerico-Fascist government in Austria I had no other experience than the few years of studies at the University of Vienna and the eight years imprisonment in the concentration camps. I never had worked a paid job though I had done much digging and laying bricks. I had also had the good fortune of being a night watchman in Buchenwald for more than three years. After I amived in Brussels I was still not allowed to earn any money and so I spent my time lecturing and writing. My father financially supported me. Finally I married my fiancee in 1947 after an agonizing struggle with post-war bureaucracies.

It seems that to introduce my father to the reader of this *Newsletter* is hardly necessary. A co-worker of Freud's since 1903, my father had become Freud's personal deputy in 1924 and was the acting vice-president of the Vienna Psychoanalytic Society until 1938. He was a pioneer of the psychoanalytic treatment of psychoses and as early as 1914 was a well-known man. I had been his secretary from 1936 to 1938 after having been expelled from the university. My wife and I, at that time, had planned to study child guidance work but our plan was cut short by the occupation of Austria in March 1938. In some of my lectures I refer to myself as a "psychoanalyst by birth."

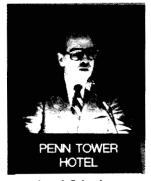
My extended family had also been prominent in Vienna and Berlin. My aunt was the director of the Settlement House in Vienna, the only private social agency in Austria. It had been founded in 1902 by my grandmother. (I am now Chairman of the Board of this same settlement house.)

Consequently, social work was a well-known field for me. It was also a most natural career choice for a newly arrived immigrant. My father had done much preparatory work in that direction and I was accepted as a student at the Columbia University School of Social Work, in 1948. I was housed at the Carnegie Mansion on Fifth Avenue. I even received a grant for work in child therapy. My good friend Mrs. Sylvia Grobe, then a field instructor and supervisor at Columbia University said to me: "Ernst, you have survived Buchenwald you will surely survive New York City." Another member of the faculty who was of great help was the director of admission, Mrs. Betty Anderson. My teachers were pioneers of social work and my advisor for my thesis, at that time still required for the masters degree, was Gordon Hamilton, which was quite an honor. Gertrude Blank in an article in the Newsletter. Committee on Psychoanalysis, Fall 1989, repeated her difficulty in being accepted as a social worker after she had acquired a Ph.D. and had gone into private practice. My problem was not unlike hers. I tried to practice psychoanalytic social work within the agency I worked for seven years, the Community Service Society. My supervisor soon advised continued on page 6

Second Psychoanalytic Conference Sets A New Standard

Benjamin Mankita, M.S.W. Nassau County, NY

"The Widening Scope of Psychoanalytic Treatment," was the topic of the Second National Clinical Conference of the Committee on Psychoanalysis of the National Federation of Societies for Clinical Social Work, Inc. Held November 16-19th, 1989, at the Penn Towers Hotel on the University of Pennsylvania campus in Philadelphia, this broad-based, informative professional gathering brought together psychoanalysts from all over the



Joseph Palombo

PENN TOWER HOTEL

Margaret G. Frank

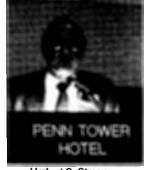
Approximately 350 attendees were counted, up from 250 at last year's conference. These professionals were treated to a formidable "bill of fare." In conception, this conference exposed those in attendance to interesting clinical and theoretical Workshops perspectives. geared to studying the ever-widening scope of psychoanalytic treatment methodology, conceptualization and patient population. The Conference Committee, co-directed by Mitchell May, M.S.W. and Marsha Wineburgh,

M.S.W., tirelessly labored for over a year to bring this undertaking to fruition, and deserves great praise.

country.

A major objective of this conference was to compare, contrast and present major threads in psychoanalysis today. Drive/Conflict Theory, British Object Relations Theory, Developmental Ego Psychology, and Self Psychology. This was accomplished in several ways. The Conference began with the classic film "The Rat Man" followed by a panel discussion. Each panel member presented a

different clinical approach to the case. Charlotte Schwartz, M.S.S., discussed "Theoretical and Technical Considerations," Judy Ann Kaplan, M.S.W., presented "The Rat Man's Fantasy: Implications for Development of Male Gender Identity," and Crayton Rowe, Jr., M.S.W., explored "Notes on Freud's Rat Man: A Self Psychological Perspective." The comparative views of the case showed that the controversy continues. Rosemarie Gaeta, M.S.W. moderated this first major presentation.



Herbert S. Strean

These four major threads were

explored in dynamicallypresented workshops, such as those "Psychosomatic Reactions," "Understanding Religious Experience," "From Delusion to Play," "Dreams," "Countertransference," "Infertility," "The Perfect Woman," and so on. If I were to truly delve into each, this article would turn into a treatise of eclectic pearls.



Judith M. Mishne

By design, I have not yet mentioned the keynote addresses.

continued on page 11

National Election Results

Geraldine Schick, M.S.W. Los Angeles, CA

As National Elections Committee Chair for the national election, I would like to announce that Crayton E. Rowe, Jr., M.S.W. and Rosemane Gaeta, M.S.W., have been chosen by the national membership to be nominees for President and President-Elect, respectively, of the Committee on Psychoanalysis. Their names were submitted for appointment to Scott J. Cleveland, M.S.W., President of the Federation board in keeping with our by-laws. On March 22, 1990, Rowe and Gaeta were subsequently appointed by Cleveland for the next term of office. Out of the total membership, there was an outstanding return of 250 ballots. 240 members cast their ballots for Crayton E. Rowe, Jr., M.S.W., and Rosemarie Gaeta, M.S.W.. 10 votes were for write-in nominees.

Clinical Social Work: Integrating Psychodynamic Treatment With The Demands Of Today's Marketplace

Irmgard Wessel, M.S.W. New Haven, Ct.

The National Federation of Societies for Clinical Social Work is celebrating its 20th Anniversary with a National Clinical Social Work Conference at the Palmer House in Chicago, Illinois, September 27-29, 1991. The title of the conference is "Clinical Social Work: The Art and The Market Place." Three areas are being highlighted during the educational forum. The Committee on Psychoanalysis is planning speakers and workshops on psychotherapy and psychoanalysis. Substance abuse and dual diagnosis for the practicing clinical social worker is being offered. A third area is focusing on managed care, ethics, forensic issues and psychopharmacology. There will be a gala anniversary party featuring past Federation and State Society Presidents. An early "Super Saver" registration is being planned. The planning committee consists of Barbara Alexander, M.S.W., Illinois, Lynette Sim, Ph.D., California, and Irm Wessel, M.S.W., Connecticut.

Committee On Psychoanalysis To Be Reorganized To Gain Sales Tax Exemption

The Federation Board at their May 1990 meeting voted to establish an educational organization, "Foundation," to meet the Committee's request that the Committee on Psychoanalysis be organized to qualify for federal and state sales tax exempt status as well as qualify for the lowest bulk mailing rates. The Federation does not qualify for state sales tax exempt status under its incorporation. (State societies do not usually qualify for sales tax exempt status as most state governments require that an organization be primarily charitable and/or educational to qualify as an exempt organization and, thereby, meet similar federal exemption criteria.)

Needless to say, sales tax exemption and special bulk mailing rates will save thousands of dollars per year not only for the national but for the area committees. It is a necessary step to ensure the development of our Committee.

The Foundation will include specialty organizations like the Committee on Psychoanalysis and importantly, will remain under the authority of the Federation. In this way the specialty organizations will truly represent practice specialties within the clinical social work profession in a similar manner as they are represented within in medicine and psychology. The Committee will be reorganized as an independent functioning organization but within the guidelines of the Federation. The membership will be involved in the formulation of a draft of the proposed bylaws of the Committee which will then be submitted to the Board of the Federation for revision and final approval.

THE COMMITTEE ON PSYCHOANALYSIS

A NATIONAL MEMBERSHIP COMMITTEE OF THE NATIONAL FEDERATION OF SOCIETIES FOR CLINICAL SOCIAL WORK, INC.

NOVEMBER 1-4, 1990: VISTA INTERNATIONAL HOTEL, NY, NY PROUDLY PRESENTS ITS THIRD NATIONAL CLINICAL CONFERENCE

☆ STEPHAN BECKER ☆ RUDOLF EKSTEIN ☆ ERNST FEDERN ☆ DALE R. MEERS ☆ JEAN SANVILLE ☆

The Continuing Evolution of Psychoanalytic Thought: Infancy to Adulthood

Thursday, November 1

5:00pm Conference Registration

6:30pm Welcome Walter Alvares

> Introduction Rosemarie Gaeta

Keynote Address
From Psychoanalysis to
Clinical Social Work:
An Evolutionary Process
Ernst Federn

8:00pm WELCOMING RECEPTION

8:30pm Introduction

Keynote Address
Treatment of Psychotic
Children and Adolescents:
A Psychoanalytic
Social Work Approach
from the Federal Republic
of Germany
Studing Becker

Friday, November 2
P-PAPER W-WORKSHOP D-DISCUSSION
8:00 am Conference Registration

9:00am CONCURRENT PRESENTATIONS (Select one from 1-10)

- Child Therapy: Working with Parents (PW) (Hampstead Series)
 Sara McGrath Lundberg
- 2. Relevance of Infant and Nursery School Observation to Clinical Work with Children (P/W) (Hampstead Series) Karen Marachke-Tobier
- 3. Issues of Narciseism in the Treatment of Men by Women Therapists (P/D) (Complementary to Presentation #13) Frances Brown
- 4. Basic Concept Workshops Classical Theory Donald W. Whipple
- 5. Basic Concept Workshop: Self Psychology Claire Hertz
- Basic Concept Workshop: British Object Relations Marsha L. Wineburgh
- 7. Basic Concept Workshop: Jungian Analysis Marga Speicher
- 8. When the Going Gets
 Rough "Difficult Points
 in Treatment identification,
 Exploration and Working
 Through (PANEL)
 Dianne Heiler Kaminsky, Moderator

Countertransference Binds in Treatment Pamela Feldmen

Critical Points in Treatment Dianne Heller Kaminsky

Impasses in Treatment Marcia Rabinowitz

- 9. Therapy Sessions Illustrating a Cannibalistic Fantasy to an 18 Month Old Non-organic Fallure to Thrive Child (P/D) Cecily G. Weintraub
- Forced Termination and Transfer of Patients: Treatment Issues for the Departing Therapist and Referral Therapist (P/W)
 Cally Shabold

CONFERENCE PROGRAM

11:00am CONCURRENT PRESENTATIONS (Select one from 11-21)

- Vignettee from the Psychoanalytic Treatment of a Four Year Old Boy (P/W) (Hampstead Series) Claudia Lament
- 12. Perversions in Women (P/W) (Hampstead Series) Barrie M. Biven
- Gender as an Riement in the intersubjective Field: The Female Therapist and the Male Patient (P) (Complementary to Presentation \$3) Rosem ary Lukton
- 14. Psychoanalytic Psychotherapy in Times of Managed Care, HMO's and PPOs: Clinical, Administrative, and Legal Considerations (Panel) Ingrid N. Grossberg Sidney H. Grossberg Aviva Sandler Robert M. Weiss
- Clinical Applications of Ego Psychology (W)
 Gertrude Blanck
 Rubin Blanck
- Margaret Mahler's Contribution to our Understanding of Object Relationships and Object Relations (P/D)
 Joyce Edward
- 17. Substance Abuse: Transitional Phenomena and the Fallure to Achieve Affective Representation (P/D) Martin Greene
- In Search of Empathy: Contributions of the Four Psychologies of Psychoanalysis to the Understanding of a Clinical Case (P/D) Judith D. Schiller
- Reviving the Stalemated Treatment through a Self Psychology Re-Analysis (P/W)
 Florence Rose
- 20. Case Management as a Developmental Process: The Contribution of D.W. and Clare Winnloott (P/D) Joel S. Kanter
- 21. Little Secrets Revealed in the Specimen Dream (P)
- Roalyn Goldner
 12:30pm LUNCH (On Your Own) or
 Attend an informal conversation
 hour on "The Public Image of
 Clinical Social Work"
 Richard M. Alperin

2:30pm Welcome Rosemarie Gaeta

Introduction
Ellen G. Ruderman
Keynote Address
Interpreting Reparative Intents
Jean B. Sanville

7:00pm Gala Yacht Party (optional)
Dinner, Open Bar, & Music
aboard 'The Empress of New York."
Boarding at 23rd St. Pler.
Tickets by separate
advance resistration.

Saturday, November 3
8:00 am Conference Registration

Introduction Crayton E. Rowe, Jr

> Welcome Some Remembrances of an Early Social Worh Psychoanalyst Occar Sternbach

Keynote Address
The Life Cycle of Relationships:
Parent and Child, Man and Wife,
Teacher and Student
Rudolf Ekstein

10:45am COFFEE BREAK

11:15am CONCURRENT PRESENTATIONS (SELECT ONE FROM 22-32)

- 22. Affect and Adolescence (P/W) (Hampstead Series) Stephanie Dee Smith
- 23. Developmental Issues in the Analysis of the Prelatency Chlid (P/W) (Hampstead Series) Carla J. Elliott-Neely
- 24. Countertransference and Gender: Developmental Considerations (P) Ellen G. Ruderman
- 25. PhD Envy A Psychoanalytic Case Study (PANEL) William Behr

Discussion of Paper Related to: Masochism Helen O. Adler Discussion of Paper Related to: Transference

- 26. Problems of Psychoanalytic Insight (P/W)
 Oscar Sternbach
- 27. The impact of Cumulative Trauma on Narcissistic States (W) Elaine Rose
- Technical Recommendations for the Treatment of the Berwal and Pathological Narcissistic Conflicts in Borderline and Narciselstic Patients (P/D) Ronald S. Sunshine
- Current Legal and Ethical Issues in Clinical Practice (W) David G. Phillips
- Practice Development for the Analytically Oriented Clinician (W) David Grand
- 31. Development from Archaic to Mature Selfobject Transferences An Advanced Self Psychology Workshop (W) Crayton E. Rowe, Jr.
- The Concept of Ego Building and its Application in Child Treatment (P/D)
 Toni C. Thompson

1:001:00pm (Included in four-day registration or by separate registration with day rate or student rate)

Introduction Waiter Aivares

Welcome
Adrienne Lampert, President of the
National Federation

Introduction Rosemarie Gaeta

Keynote Address
Psychopathology of Everyday
Clinical Practice: The Pragmatism of Ego Psychology
Dale R. Meers

3:30pm CONCURRENT PRESENTATIONS (SELECT ONE FROM 33-43)

- 88. Psychotherapy with the "Untypical" Child (P/W) (Hampetead Series)
 Steven Marans
- 34. Self Psychology vs. Instinctual Conflict: Some Dangers in Straddling the Fence (P/W) (Hampstead Series) Lucy Biven
- 35. A Critical Review of Psychoanalytic Theories of Pemale Homosexual Development: Implications for Treatment (P) Maggie Magee Diana C. Miller

- 36. A Case Presentation from a Gender Specific Point of View (P) Judy Ann Kaplan
- 87. The Triple Lens of Contemporary
 Psychoanalytic Vision: The Reconstructed Past of an Adult
 Patient seen from Classical Psychoanalysis, Self Psychology and
 Object Relations Points of View
 (PANEL)
 Alan Grossman, Moderator
 Bruce Yale Bleecker
 Alan Delber
 Janie S. Lieberman
- 38. A Psychoanalytic Approach to the Assessment and Treatment of Marital Conflicts (W) Herbert S. Strean
- The Concept of Object in Freud's Metapsychology (P/D) Charlotte Schwartz
- 40. The Use of Countertransference and Induced Countertransference to Assess Different Diagnostic Entities: Clinical and Technical Considerations (W) Switz Teitelbaum
- 41. The Therapoutic Dialogue:
 Differing Perspectives on the Role
 of the Therapist in the
 Transference (P/D)
 Joan V. Klein
- 42. Growing Up Bi-Racial in America: Issues of Identity Formation and Implication in Psychotherapy (P/D)

 Janies C. Warner
- 43. Addiction as a Transference: Clinical and Theoretical Considerations (W) Mitchell May

5:30pm Open Business Meeting. ALL Members of the Committee on Psychoanalysis are invited to attend

6:15mm DUTCH TREAT COCKTAIL PARTY

8:00pm Dinner On Your Own or Join a DUTCH TREAT SMALL DINNER PARTY (optional) (Sign up at Hospitality Table)

Sunday, November 4

8:30am Breakfast 9:00am Welcome Irmgard Wessel 9:15am Keynote Panel

Comparative
Theoretical and Treatment
Advances in
Child and Adult Analysis:
A Hampstead Perspective

Moderator: Rosemarie Gaeta

- The Process of "Working-Through" in Child Analysis
 Carla J. Elliott-Neely
- 2. Play and Talk Steven Marans.
- 3. Technical Parameters: Ego Psychological Distinctions Between Maturational, Pathological and Culture Deviance Date R. Meers
- Cognitive Dimensions in Technique Katherine Rees

11:30am CLOSING REMARKS

The Continuing Evolution of Psychoanalytic Thought: Infancy to Adulthood November 1-4, 1990 - The Vista International Hotel NY, NY

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REGISTRATION FORM

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| 3 | 13 | 24 | 35 | (INCLUDES DINNER, OPEN BAR, & MUSIC) | |
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| MAIL TO: CRAYTON E. ROWE, JR., | | | | Conference Day Rates Available | able at Door. |
| | | M. ON PSYCHOA | | • For Special Hotel Rates: | |
| 230 WEST END AVENUE, SUITE 1D | | | FE 1D | Call Vista Internation | |
| | NEW YORK, | NY 10023 | | 1-800-258-2505 or 212 | -938-1990 |

•ADVANCE REGISTRATION IS RECOMMENED. ADMISSION BADGES WILL BE HELD AT REGISTRATION DESK. ALL CANCELLATION REQUESTS MUST BE SUBMITTED IN WRITING BY OCT. 15,1990. ALL CANCELLATIONS SUBJECT TO A \$35 ADMINISTRATIVE FEE. NO REFUNDS ARE POSSIBLE FOR REQUESTS POSTMARKED AFTER OCTOBER 15,1990.

This educational activity meets the standards of Virginia Commonwealth University. 2.1 continuing education units (21 hours) have been approved. The number of these units fulfills the educational requirements of the American Board of Examiners for one year.

Das Verein Für Psychoanalytische Sozialarbeit: An Introduction For American Social Workers

Thomas R. Federn, M.S.W New York, NY

In a previous issue of the Newsletter it was announced that a liaison had been established between our organization and a similar one in Western Europe, der Verein für Psychoanalytische Sozialarbeit (the Society for Psychoanalytic Social Work), based in Rottenburg am Neckar, West Germany.

The best way to introduce the Verein is to point out important differences between it and our own organization. It, unlike ours, does not draw its core membership from psychoanalytically-oriented social



workers who want to emphasize the role which social workers play in the provision of psychoanalytic psychotherapy. Rather, its base membership is found in a special residential treatment center organized in the mid-1970s in Rottenburg, West Germany by Stephan Becker, a prominent West German child analyst. The Therepeutisches Heim (literally translated, the Therapeutic Home) was created because some personnel of the Child and Adolescent Psychiatric Clinic of the University Hospital of Tübingen University became dissatisfied with the institution's ability to adequately meet the treatment needs of the most severely disturbed patients entrusted to its care.

For the information of readers who might not be familiar with West Germany, I would like to add that Tübingen is one of the most outstanding universities there, indeed in all of Europe. The founders of the Therapeutische Heim were particularly concerned about two negative environmental factors at the University Clinic: the frequent changes in clinic personnel, and limitations on the duration of treatment imposed by governmental regulation. It was estimated that in the course of one severely disturbed 8-year-old girl's yearlong stay at the University clinic, that she had therapeutic dealings with approximately fifty (!) clinicians.

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Elaine Rose Appointed Chair Of The Committee's Division Of Clinical Social Work Practitioners Of Psychoanalysis

In 1926 Sigmund Freud in his landmark book, *The Question of Lay Analysis* firmly stated his view that medical training is not "... the training most suitable for an analyst." In 1990 Arnold Cooper, M.D., writing in the *Psychoanalytic Quarterly* said, "The history of psychoanalysis has to a large degree been shaped by creative non-medical individuals who have dedicated themselves to psychoanalysis." Unfortunately, in the years between, the practice of



psychoanalysis has been arrogated by medicine. In the article by Kenneth Adams, Esq., it is noted that psychologists have successfully moved in the courts to challenge medical ownership of the field. For many years psychologists and social workers have also independently and jointly sought analytic training in non-medical interdisciplinary training institutes. Organized social work, however, until the formation of the Committee on Psychoanalysis, has never provided a voice or specialty identity for the independent social work psychoanalyst on par with psychoanalyst practitioners of other professions.

The practice of psychoanalysis is now in ferment and it is clear that the decade of the 90s will see the "demedicalization" of psychoanalysis. Therefore, it has become evident that clinical social workers who practice psychoanalysis need a division within the Committee through which to interact with the other professions in the field and with the other specialties of clinical social work. The division would also provide an identity as clinical social work psychoanalysts and educate the membership and community about the history of psychoanalytic thinking in the formation of the social work profession itself.

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Member Profile

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me that I should become a psychoanalyst since I would never make it as a social worker. The then director of family services at the Queens office, the unforgettable Florence Fltzherbert saved me for the profession by supervising me herself. After seven years as a caseworker I became a clinical supervisor at Children's Village, Dobbs Ferry, N.Y.

In 1961 we moved to Cleveland Heights, Ohio, where I took the position of a supervisor and casework therapist with the Jewish Family Service Association where I spent eleven years. There, I got used to being considered a social worker by psychoanalysts and considered a psychoanalyst by the social workers. This did not keep me from being active in N.A.S.W. and from gaining some recognition in Cleveland and other parts of the country. My papers were published in various professional journals, and I edited by father's book Ego Psychology and the Psychoses with Eduardo Weiss, M.D., and the Minutes of the Vienna Psychoanalytic Society with Herman Nunberg, M.D.. I never succeeded in having a paper published in a social work journal, though.

In 1950, our son Thomas was born. He is now a Fellow of the Clinical Social Work Association. The next important event happened in 1972 when I received a call, long in preparation, from the Austrian Ministry of Justice. They invited me to work as a consultant for the reform of the Austrian correctional system. This call had been the work of Christian Broda, the longest serving minister of justice in Europe, probably in the world. Before he died in 1987, Broda had been awarded the Prize for Human Rights by the Counsel of Europe. He had been my friend since boyhood and as a adult he gave me the unique opportunity to write my own working contract. It consisted of two days working in psychoanalytic therapies in a penitentiary of 900 inmates, in addition to working therapeutically in a special prison with 100 substance abusers. I also supervised during this period.

Though the ministry kept me under contract for 8 years after my legal retirement age, I eventually felt the need to quit. Since 1988 I have been writing papers, books, and giving lectures on various topics all over the world. My wife and I now take long vacations and look after our health. We also enjoy watching our grandson, Nicklas grow up.

The Nature Of Professional Malpractice

David Phillips, D.S.W. New York, NY

In a previous column, published in the 1988 edition of the *Newsletter*, I suggested that due to the changing climate of legal and ethical obligations clinical practitioners are becoming aware that they no longer live in a world in which the treatment of the individual is solely a private transaction between therapist and patient. In no area is the changing climate of professional practice felt more powerfully than that of the so called "malpractice crisis."



The increase in malpractice suits against physicians has received

extensive attention, but non-medical practitioners should be aware that they are also at risk. Douglas Besharov, for example, has noted that as recently as 10 years ago a malpractice suit against a social worker was virtually unknown but currently there are at least 19 separate areas of practice in which social workers have been sued. Some of these areas of liability include inappropriate treatment, such as when a social worker oversteps the limits of his or her training or experience; failure to consult with or refer a client to a specialist when this might have been appropriate; failure to be available when needed by a client, an area of liability also called abandonment; and, failure to prevent the suicide of a client.

Malpractice litigation in medicine dating back to the 1890s has spelled out a series of concepts which are known as the "standard of due care." This standard, the standard of due care within the profession or specialty is exactly that which would be applied to the members of other professions in the case of a malpractice suit. In this column I will outline the core elements of this concept and suggest some basic ways in which social workers can protect themselves and their clients from possible malpractice.

THE BASIS FOR MALPRACTICE

In order for a plaintiff to prove a claim of negligence or malpractice against a professional person he or she must demonstrate four key points: 1) the defendant undertook a professional responsibility; 2) that the behavior of the professional was in some way a dereliction of that responsibility; 3) that harm was done to the client; and, 4) that the dereliction of professional responsibility was the direct cause of the harm that was done.

For a plaintiff to show negligence by a professional he or she must first prove that a responsibility had been undertaken. If there was no professional relationship there can be no negligence. Then, the plaintiff must prove that the treatment did not meet professional standards. In most cases which allege professional negligence, experts in the profession will be consulted to assist in determining the skill, care, and knowledge which constitutes the "standard of due care" within that profession or specialty. The legal definitions of due care and negligence are such that there is no inference of negligence just because the patient's condition does not improve. The standard of due care may, however, require the professional to consult with other practitioners in many situations. A professional is responsible for securing consultation on a case when he or she knows or should have known that the method of treatment is proving ineffective. Professionals also have an obligation to remain abreast of new developments within their fields and may be held liable if a patient is damaged because of their failure to do so. In a case cited by Holder, for example, a physician was held liable when a medication he administered resulted in permanent damage to a patient's eyesight. Recent medical literature had contained numerous articles warning of the possibility of such a side affect, but the physician was found negligent after admitting that he had not read any of the

Even if the plaintiff can prove that the professional did not fulfill the required standard of care, he or she cannot recover damages continued on page 10

News And Views From The Members

All members of the National Membership Committee on Psychoanalysis are invited to submit information on their professional accomplishments for publication in future issues of the "News and Views From The Members" column. Send your name, degree, city, state and a comment about your recent accomplishment to: Florence W. Rosiello, M.S.S.W., 124 West 79th Street, Suite 2BN, New York, NY 10024.

Claire Hertz, M.S.W., New York, NY

She is currently a faculty member and on the supervisory staff of the Institute for Contemporary Psychotherapy. In addition, Hertz is conducting a study group in "Self Psychology, Intersubjectivity, and Object Relations." A Chairman of Self Psychology at the Psychoanalytic Psychotherapy Study Center, she is also on both their supervisory and advisory staff. This fall Hertz will lead a workshop in the 1990 national conference by the Committee on Psychoanalysis in New York City. She recently published an article in the Fall 1989 edition of Contemporary Psychotherapy Review, the Journal of the Institute for Contemporary Psychotherapy and its Society entitled, "A Self Psychological Analysis of Analysis of Transference."

Lillian Rosengarten, M.S.W.

Rosengarten is leading ongoing Cancer Support groups. Rosengarten is associate director of the Group Therapy Dept. at the Training Institute for Mental Health in New York City. For information call Rosengarten 212-787-0208.

Florence Rosiello, M.S.S.W., New York, NY

Has had an article published in *Contemporary Psychotherapy Review*, Fall, 1989, Vol. 5, The Journal of the Institute for Contemporary Psychotherapy and the Society of the Institute for Contemporary Psychotherapy. The article is entitled "Affective Elements in Supervision and Parallel Process." In addition, Rosiello is currently a faculty member at the Psychoanalytic Psychotherapy Study Center.

Diana Siskind, M.S.W., New York, NY

Siskind is acting as one of the issue editors for a forthcoming volume of *Psychoanalytic Inquiry* which will be called: "Separation-Individuation Revisited." In addition to this editing project, she is writing a book on child treatment from the perspective of psychoanalytic development object relations theory.

IMPAC Program For Mental Health Benefits Implemented

Cora Lea Chittenden, L.C.S.W. Colorado Springs, CO

After 3 years of planning, the implemention phase of a campaign to educate consumers and employers about the declining amount of available coverage for mental health services is under way. I am serving as the Chairperson of the ad hoc committee of the El Paso County Interdisciplinary Mental Health Professional Affairs Committee (IMPAC).

We have already recruited 7 community leaders to serve on our non-industry Advisory Coalition. Also, we have hired a marketing consultant who has prepared a comprehensive campaign plan and have begun fundraising efforts.

IMPAC, composed of psychologists, psychiatrists, clinical social workers and clinical nurse specialists, was formed to try to combat the recent trend towards reduced mental health coverage. Both inpatient and outpatient services have been reduced in terms of days of service authorized and financial limits. This comes at a time when studies confirm a direct relationship between mental health services and containing medical costs. It is interesting to note continued on page 8

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IMPAC Program For Mental Health Benefits Implemented

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that the Wall Street Journal reported on December 13, 1989, that a four-year study of mental health treatment at McDonnell-Douglas Corporation found that narrowly focused cost-cutting efforts applied to psychiatric care or treatment for drug and alcohol abuse can later cost a company millions of dollars. The study was based on medical claims and absentee records for more than 20,000 of the company's 125,000 employees. The article said, "Instead, employers can shrink their bill for mental health care by taking the long view, even if that means spending more in the early stages of treatment."

Mental health care benefits is an area that managers know little about, and IMPAC plans to provide employers with Information concerning appropriate treatment and adequate coverage. IMPAC will create an ongoing data base to monitor changes in mental health coverage in Colorado. The marketing plan is designed to mobilize people in Colorado Springs to convince insurance carriers, PPOs, HMOs, and companies with their own programs to increase mental health benefits. An additional goal is to serve as a model for other communities through the distribution of our material. The campaign is aimed at educating the public to ask, "What is my mental health coverage?" Most people do not know what their mental health coverage is and that they have the right to ask for appropriate coverage. The campaign will also target state government institutions where the Insurance Commissioner and legislature are authorized to set standards for coverage. Elements of the campaign include a speakers bureau, seminars, press briefings and articles, posters and brochures, a newsletter, direct mail campaign, MP briefings, advocacy advertising and public relations, the previously mentioned data base, research, and a fundraising campaign. The function of the Advisory Coalition is to help broaden the base of support for industry efforts.

Those who have already agreed to serve as members of the Advisory Coalition are, Tom Minor, CEO of the Atwell Corp. (formerly Honeywell); former judge, John Gallagher; local attorney, Larry Gaddis; Emma Hayes, a social worker representing Pikes Peak Mental Health Center; Mac Clark, Assistant Superintendent, Air Force Academy School District; and Laura Feldman, D.O.

The fundraising effort is directed to the membership of the four sponsoring organizations, to mental health providers who are not members of the associations, to the general public and to mental health support groups, and granting agencies. We need \$25,000 for the first year of the campaign and we are on our way to achieving that goal.

Lack of coverage and inadequate or minimal coverage is clearly self-destructive to the health care system. Affordable cost-effective mental health care package. Presently, employees are urged to accept weak and inadequate benefit packages for short-term savings. Many of us have been faced with the tragedies of these inadequate plans in our practices, for example, a childhood trauma victim with 6 to 20 outpatient visits per year, a suicidal client who has no inpatient coverage, or a psychotic child who has 7 days inpatient care and 20 outpatient visits.

Das Verein Fur PsychoanalytischeSoczialarbeit: An Introduction For American Social Workers

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Recognizing that the effective treatment of psychotic children requires an institution capable of structuring itself in accordance with the emotional needs of its patients, private funds were obtained and in the fall of 1977 a private dwelling was purchased. In the early spring of 1978 two therapists began the Inpatient treatment of this particular psychotic girl under the psychoanalytic supervision of Stephan Becker. In 1979 a second analytic supervisor was added and another psychotic child joined the patient population. The two therapists lived in the Heim itself on a separate floor to which the patients had no access. The treatment process occurred within the framework of a structured daily schedule with fixed "rituals" (meals, sleeping, activities, etc.). Although this schedule would undergo some modification in succeeding years, it continues to this day. Unlike many, if not all, psychoanalytically-oriented residential treatment centers, the most important part of the treatment process was not the personal therapy or analysis of the patient; the patients were far too emotionally troubled to be involved in traditional psychoanalytic psychotherapy. Rather the essence of the treatment process was the social interaction between the therapists and the patients.

The interest of Stephan Becker and his associates in the use and application of psychoanalytic theory to the "social" treatment of severely disturbed children soon led them as well to, in my opinion, a rather radical redefinition of what constitutes a psychoanalytically-oriented therapist. Prior to the establishment of the Heim, in Western Europe, as to a certain extent here in the United States, psychoanalysts were understood as individuals whose professional activity was more or less restricted to the performance of long-term intensive individual psychotherapy. The notion of using knowledge contained in psychoanalytic theory to inform, direct, and guide other types of psychotherapeutic work, particularly that of a social and interactional nature, was not one that was receiving much attention. Psychoanalytic work was more or less equated with doing psychoanalysis or psychoanalytic psychotherapy. Becker and his colleagues made a conscious decision to change this situation. They regarded anyone making intelligent use of psychoanalytic theory for any psychotherapeutic (emotionally beneficial) end to be engaged in psychoanalytic work. In a very real sense they represent a return to Sigmund Freud's own concept of a comprehensive psychoanalytic movement (Bewegung) which engaged in many different activities, only one of which was the provision of analysis and/or psychoanalytic therapy.

Becker's psychoanalytic organization has bome fruit in the Verein für Psychoanalytische Sozialarbeit. This organization has four very successful multi-day annual conferences to its credit. (I was fortunate enough to present a paper at the second one.) Today It is an organization which constantly reminds the Western European community that psycanalysis is much more than just theprovision of traditional long-term psychotherapy and that psychoanalysis' greatest contribution to present and future society is its ability to profoundly inform a broad spectrum of different types of social work.

In 1980, the Verein für Psychoanalytische Sozialarbeit was granted füll legal recognition as an independent residential treatment center. As such it is now eligible to receive funds directly from the government. Previously its financial survival had been dependent on private donations. Also in 1980 its size was Increased to its present one: five children and/or adolescents and between five or six therapists. A school for the children was established on the premises and the practice of having the therapists live there was abandoned. I am pleased to report that at this moment Stephan Becker and his colleagues are in the process of opening another, similar Heim.

Narcissistic Hazards Of Success

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Nineteenth century disillusionment with the curative effects of moral treatment of the mentally ill paralleled the explosive scientific revolution in physics and biology that still continues. Medical psychologists surrendered to Griesinger's neurological somatologists and emerged in this century as the profession of psychlatry, embracing Kraepelin's diagnostic conclusions of genetic irreversibility and pharmacological therapies.

British studies of the working poor in the mid-1800s, of which Marx and Engels' are best remembered, contributed a radical reconceptualization of social responsibility for individual moral impoverishment and degeneracy. The new sociology confirmed common sense, extended political reform and contributed to the establishment of the Charity Organization Societies, 1869. The COS's Friendly Visitors morally echoed St. Vincent de Paul, that the nature of their helping relationship was more important than any pragmatic service rendered. Their presumptuousness, in presenting themselves as models for the rescue of the "worthy poor," has obscured their introduction of method. Clinical social work historians should appreciate that the narcissistic institutions of the COS anticipated Kohut's formal conceptualizations of psychotherapy as an identificatory "transmuting internalization."

From the inception of the profession, care of the mentally ill was an elemental commitment. In 1879, representatives of State Boards of Charities and Prisons initiated the annual conference that social work was to preempt as its own national forum. Treatment of the mentally ill was the first subject of the Conference of State Boards. Of the "founding fathers," Sanborn, Wiens and Letchworth separately studied progressive care of the mentally ill in Europe, introduced foster homes for the chronic, harmless insane in the U.S. (preceding psychiatry by a quarter of a century), sponsored Dougdale's renowned psychological studies of the purported constitutional defectiveness of the Jukes, and published two books on mental illness. Ambivalently extending membership to include the new COS methodologists, the Conference of State Boards eventually surrendered both its character and name (1879) to become the National Conference of Charities and Corrections. Psychiatric social work (1905) dates from the neurological clinics of Massachusetts and New York, four years before Freud's psychoanalytic lectures at Clark University. Psychoanalytic conclusions on the developmental, non-genetic origins of neuroses and their treatability were consistent with casework experience, and were adopted with striking enthusiasm. Continuing its professional metamorphosis, in 1917 the National Conference of Charities and Corrections became the National Conference of Social Work.

American Psychoanalytic Considers Easing Waiver Requirement

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with the unpredictable way the CNMCT has handled the approval and disapproval of waivers. As a result, the lawyers who brought the lawsuit on behalf of the psychologists threatened to take renewed legal action.

Recently the Executive Committee of the American's board recommended that the American discontinue the waiver requirement for certain non-physician candidates. Specifically, they proposed that member institutes be free to admit qualified candidates who hold degrees as "doctors of clinical psychology (Ph.D. and Psy.D), doctors of mental health (D.M.H.), and doctors of clinical social work (Ph.D. and D.S.W.)." As of this writing the board has not acted on the Executive Committee's recommendation.

The recommended change would make it easier for psychologists to be admitted to training institutes accredited by the American, but would not make it any easier for the large majority of clinical social workers who do not hold doctoral degrees. Therefore, we sent the following letter to the American, advising them that the terminal degree in clinical social work is the M.S.W., and that in the social work field the doctoral degree does not correlate to clinical training or experience. We asked that the waiver requirement be

discontinued for clinical social workers based not on a doctoral degree but on the M.S.W. degree, or some other standard (such

Sustained directly by Adolph Meyer and conceptually by Freud, the Conference welcomed a new hybrid of radical, dynamic psychiatrists, who appeared on every program from 1917-1929.

Academic psychiatric social work training began at Smith College in 1917. In identification with dynamic psychiatry, the early case workers ignored Descarte, Kant, Tuke and the COS's anticipation of Kohut. Psychoanalysis was not the intellectual property of a psychiatric subspecialty, yet the new PSWs accepted A.A. Brill's arrogant assertion that it was.

Psychiatric psychoanalysis maintained a training monopoly for seventy years in the U.S., with Brill credited with statutory exclusion of lay analysts from practice. Psychiatry gave ambivalent, grudging acceptance to psychoanalysts, who defensively insisted on a primary identification with a profession that was more contemptuous than comprehending. Historians may speculate whether the narcissistic injuries of psychiatric psychoanalysts contributed to an ineptness in rejecting psychiatrist applicants for training at the height of popularity following WWII. If rumor approximates reality, academic psychiatrists earlier rejected for analytic training were pleased to repay their psychoanalytic colleagues with Agrippa's coin.

The prestigious Association of Psychiatric Social Workers, mimicking the "uplifting" intent of its COS heritage, sacrificially dissolved itself in the creation of NASW. Had our PSWs understood transmuting internalizations, they might have comprehended that fragility contributes to messianic alternatives.

Our status in the Federation is somewhat like that of the psychiatrist psychoanalysts of the 1940s. Our eclectically trained colleagues in the Federation are suspicious of our parentage and propensities for arrogance. We have been afforded provisional, perhaps begrudging acceptance as a subspeciaity. Unlike the COS, psychiatry's psychoanalysts or PSWs of yesteryear, we can assure our colleagues of our staid purposes, if not our humility. We have more than enough problems to resolve with our own training and clinical standards without worrying about theirs.

Psychoanalytic fratricide has richly deserved most of the derogation it has gratuitously received. Orthodoxy is a contradiction in science, yet serious, distinguished analysts from Jung, Rank, Reich, Ferrenzi, Klein, Sullivan, Homey to Kohut, have both accorded each other and suffered Agrippa's fate. It is improbable that social work psychoanalysts suffer less from theoretical and technical convictions of grandiosity that incite institutional nepotism. Our success will test our humor, good sense and the maxim that God sometimes punishes by granting one's wishes.

as board certification by the American Board of Examiners in Clinical Social Work) which correlates to clinical training and experience.

To the extent that the proposed amendment will remove the barriers which now keep some candidates from psychoanalytic training, it is a step forward; for social workers, however, it would be a step backward. This would mean that clinical social workers, alone among board-certified and licensed psychotherapists, would be denied the right to define for themselves (through their own professional associations and educational institutions) the standards of education and clinical competence which give them legitimacy as clinicians, and therefore make them eligible for admission to psychoanalytic training.

Psychiatrists and psychologists would be eligible for analytic training solely on the basis of their status as qualified clinicians in their own fields; only the discipline of clinical social work would be denied that legitimacy. M.S.W. social workers would continue to be subject to a waiver process in which their eligibility for analytic training is made to depend on subjective judgments of their individual backgrounds and characteristics, rather than their status as licensed clinicians.

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American Psychoanalytic Considers Easing Waiver Requirement

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Realistically, it may be too late in the process to change the recommendation of the Executive Committee. We are not opposed to approval of the present recommendation, as we do not want to impede the liberalization of the waiver process, which has operated as a roadblock to opening up the American-accredited institutes to qualified non-physician candidates. If the Executive Committee recommendation is adopted in its present form, we will work in consultation with the Committee on Psychoanalysis to persuade the American to take the next step at its next meeting, and to adjust the criteria for defining which clinical social workers do not require waivers in order to be considered for admission to institute training.

The following is a reprint of Adams' letter to the American Psychoanalytic Association:

May 9, 1990, Homer C. Curtis, M.D., President The American Psychoanalytic Association, 111 North 48th Street, Philadelphia, PA 19138. Dear Dr. Curtis:

This firm is counsel to the National Federation of Societies for Clinical Social Work, the principal national professional organization representing the clinical social work profession. It has just come to our attention that your Board of Directors is considering a recommendation from the Executive Committee to discontinue the waiver requirement for "doctors of clinical psychology, doctors of mental health, and doctors of clinical social work." It is my understanding that if the recommendation were adopted, clinical social workers who hold a Ph.D. or D.S.W. degree would not be required to obtain a waiver before having their candidacy reviewed by member institutes, but those who hold an M.S.W. degree would still have to seek a waiver.

In the clinical social work field, the terminal degree is the M.S.W.. There is no accredited clinical doctorate degree. While some clinical social workers possess doctoral degrees, most doctoral candidates work in academia or social work administration. Conversely, most of the acknowledged leaders in the field of clinical social work practice do not hold doctoral degrees.

The National Federation recognizes, respects and supports your objective of setting high standards of training and experience for psychoanalytic training and practice. We would be pleased to assist the American Psychoanalytic Association in developing objective criteria by which you can determine which clinical social workers are appropriate candidates for your institutes to consider. For example, you may want to consider using board certification as a standard. (The American Board of Examiners in Clinical Social Work offers a board certification examination to clinical social workers who hold an M.S.W. degree from an accredited institution, with a core curriculum in clinical course work, and who can demonstrate at least five years of approved post-Masters clinical practice.) Whatever standard you ultimately decide to use, it must be one which correlates to clinical training and experience, and the doctoral degree does not.

The waiver program presently requires candidates to demonstrate that they hold the highest clinical degree offered in their particular discipline. In the clinical social work field, that is the M.S.W. degree. We urge you to employ the same standard as a threshhold for consideration of applicants by your member institutes, if the Board decides to discontinue the waiver requirement for the most highly qualified candidates.

Sincerely,

Kenneth L. Adams, Esq.

The Nature Of Professional Malpractice

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unless it can also be proved that the negligence caused injuries which would not have occurred in its absence. This requirement of proof, known as demonstration of "proximate cause" contains two elements which are the responsibility of the plaintiff to demonstrate, 1) the plaintiff must show that harm resulted from the professional's negligence; and 2) the plaintiff must show that the negligence was the cause of the harm. Before a plaintiff can recover damages, In other words, he or she must eliminate his or her own condition as a probable cause of the resulting harm. In another case noted by Holder, a man suffered a broken leg in an auto accident and was treated in a hospital emergency room where a cast was put on the wrong leg. The patient suffered a resultant stiffness in the injured leg, but was still unable to recover damages in the subsequent malpractice suit. In this case, expert witnesses held that the damage to the leg was as likely to have been caused by the original accident as by the negligent treatment. The patient, in other words, was unable to eliminate his own condition as a probable cause of the damage and was therefore unable to establish proximate cause between the negligent treatment and the harm done to him. In dealing with psychiatric cases the courts have used a number of factors as tests of criteria in determining damages resulting from negligent treatment including subsequent hospitalization of the patient, the patient's incapacity to work, and disruption in family relationships.

PREVENTION OF MALPRACTICE

All experts agree that the best way to win a malpractice case is to prevent it from happening in the first place. *Psychotherapy Finances*, a newsletter for a private practitioners, has published a specific list of suggestions on preventing malpractice and the following thoughts are adapted from this list.

1) Make sure that you understand what your scope of practice is, and do not practice beyond it. "Scope of practice" is defined by a number of factors including licensure, training and experience. Governmental regulations, for instance the Rules of the Board of Regents in New York State, often prohibit professionals from practicing beyond their scope. If, for instance, you are trained in psychoanalysis and decide you want to offer marital or sexual therapy you will be held to the standard as if you were an expert in these areas.

2) Keep careful records. Carefully kept records are the best defense for both you and your client in a malpractice action and, in addition, state regulations often require record keeping. Psychotherapy Finances recommends that practitioners should keep both progress notes and periodic summaries of progress, notes on explanations given to clients on all forms of treatment, copies of test data, and, notations of phone conversations and all other contacts with "significant others" who may be concerned with the case.

3) Make sure to practice effective communication, especially at the beginning of treatment. The initial phase of treatment, especially the first session should be thought of at a time in which you not only evaluate the patient, but also clarify and agree on the various aspects of the structure of therapy. You should make clear what your policy is about payment, vacations, fee for missed sessions, etc.

4) Recognize the "high risk" patient and possible danger signs in the treatment. Patients who are highly critical of previous therapy or who have unrealistic expectations of treatment may be more likely to bring legal action. Therapists are warned against overly zealous attempts at bill collection, especially with terminated patients which may sometimes trigger a law suit.

Besharov, Douglas, "The Vulnerable Social Worker," National Association Of Social Workers, 1985.

Furrow, Barry, Malpractice in Psychotherapy, Lexington Books, 1980. Holder, Angela, "The Duty of Care," Medical Ethics, M.I.T. Press, 1983. Psychotherapy Finances, Volume 15, No. 7, 1989.

Third Psychoanalytic Conference

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On Thursday evening Ernst Fedem, A.C.S.W. from Vienna, Austria will open the conference with the first keynote address, "From Psychoanalysis to Clinical Social Work: An Evolutionary Process" which will set the historical context for the meeting. Next, Stephan Becker, Dr. Soc. Paed. is to address "Treatment of Psychotic Children and Adolescents: A Psychoanalytic Approach" from the Federal Republic of West Germany, a contribution which reflects the continuing emphasis on the psychodynamics of the individual within society. The Friday afternoon keynote address will feature Jean Sanville, Ph.D., editor of the Clinical Social Work Journal; her topic is "Interpreting Reparative Intents." On Saturday moming Rudolf Eckstein, M.S.S.W., Ph.D., will focus upon "The Life Cycle of Relationships: Parent and Child, Man and Wife, Teacher and Student." At the Saturday afternoon luncheon Dale Meers, D.S.W., will lecture on the "Psychopathology of Everyday Clinical Practice: The Pragmatism of Ego Psychology." Sunday morning Rosemarie Gaeta, M.S.W. will moderate a keynote panel including Carla J. Elliott-Neely, M.S.W., Ph.D., Steven Marans, M.S.W., Dale Meers, D.S.W., and Katherine Rees, M.S.W., Ph.D., these psychoanalytic graduates of the Hampstead Clinic will discuss "Comparative Theoretical and Treatment Advances in Child and Adult Analyses: A Hampstead Perspective."

In addition to the keynote speakers a special feature will include a mini course on child treatment called "The Theory and Technique of Hampstead: A Workshop Series" led by an invited group of Hampstead Child Therapy trained clinicians. This "mini-institute" will run within the general conference.

Forty-three presentations of panels, papers and workshops will be offered to participants throughout the weekend.

An antidote to the program will be a celebratory yacht party planned for Friday evening. There will be dutch-treat opportunities to explore ethnic cuisine with a clinical social worker host andhostess to aid conference guests in this socializing. The hospitality committee has also planned an informal swim party at the Vista Hotel.

Rosemarie Gaeta, M.S.W. Chair-Eiect, National Committee On Psychoanalysis

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generations delivered the mentally ill from debtors prisons and poor houses. Awakening national concern for benevolent institutional care of the insane, the school teacher Dorthea Dix is claimed as a social work activist. Her success, incidentally, contributed to the establishment of the Association of Medical Superintendents, 1844, later the American Psychiatric Association., which is a newly designated (provisional) component member of the International Psycho-Analytic Association (IPA). I am in fulltime psychoanalytic practice in Manhattan, and Staten Island, New York. For the past 3 years I have been the Chairperson of the New York State Society's Committee on Psychoanalysis. I was recently re-appointed to this position by the incoming president of the New York State Society.

On the national level I have been serving our membership Committee on Psychoanalysis as the National Liaison to Area Committees and as a member of the Executive Council of the Committee. In my capacity as National Liaison, I have helped coordinate the work of the various area chairpersons throughout the country. Therefore, I have become familiar with the unique characteristics of each local membership group and have been educated to the groups needs and interests. This experience should prove invaluable in fulfilling the function of National Committee Chairperson-Elect. Also, on the national level I have helped organize the first and second national clinical conference of the national membership Committee on Psychoanalysis by serving as Director of Public Relations and Hospitality (1988-1989) and as member of the Program Committee (1989). Currently, I have the honor of serving as Co-Director of the 1990 national psychoanalytic conference and look forward to this event.

My commitment is to help advance the interests and strengthen the identity of clinical social workers who practice the specialty of psychoanalysis and psychoanalytic psychotherapy. We must continue to promote national visibility and establish national legislative parity with other professions if we are to keep our profession strong and vital. (See election results on page 3.)

Second Psychoanalytic Conference Sets A New Standard

continued from page 3

These major presentations were informative, enjoyable and most educational. Joseph Palombo, M.A., address was entitled "Bridging the Chasm between Clinical Theories and Developmental Theories" was an outstanding call for a more scientific approach toward uniting the various pieces of psychoanalysis into a more cohesive and coherent whole. Margaret Frank, M.S.S.W., addressed, "The Widening Scope of Psychoanalytic Thought: Influences of Developmental Object Relations Theory Upon Concepts and Practice' presented, through personal case material, how a confluent understanding of development, ORT, and practice experience was instrumental in several cases. Herb Strean, D.S.W., was informative and humorous in his "Sex, Psychoanalysis and Social Work: Friends and Enemies." The closing keynote address by Judith Mishne, D.S.W., "The Four Psychologies and Their Place in Clinical Work with Borderline Patients," brought everything into perspective and coordination.

The next conference will be held in New York City, November 1-4, 1990, at the Vista International Hotel. The theme: "The Continuing Evolution of Psychoanalytic Thought: Infancy to Adulthood," will feature such distinguished presenters as: Stephan Becker, Dr. Soc. Paed, Rudolf Ekstein, M.S.S.W, Ph.D., Ernest Federn, A.C.S.W., Dale Meers, D.S.W., and Jean Sanville, Ph.D.. Further



information can be obtained from Crayton Rowe, Jr., M.S.W., 230 West End Ave., # 1D, N.Y., N.Y. 10023.

Ben Mankita is in private practice on Long Island, NY and is on the faculty of the Adelphi School of Social Work.

Elaine Rose Appointed Chair Of The Committee's Division Of Clinical Social Work Practioners Of Psychoanalysis

continued from page 6

To that end, Crayton Rowe, Jr., M.S.W., Chair of the Committee, with the approval of the Executive Council of the Committee appointed Elaine Rose, L.C.S.W. as Chair of the Division of Clinical Social Work Practitioners of Psychoanalysis. Rose brings to the Division 20 years of experience as a clinical social worker and 15 years devoted to her own training and now teaching of psychoanalytic theory. She is on the Executive Board and Faculty of the Los Angeles Institute and Society for Psychoanalytic Studies where she received her analytic education, as well as on the faculty of the Wright Institute, Los Angeles, a postgraduate center for education in psychoanalytic psychotherapy.

While it is too soon for the announcement of firm plans for the Division, the first activity will be the organization of a national study group to address these major questions: What constitutes psychoanalysis? Who is a psychoanalyst? How should the Division develop to meet the needs of the membership of the Committee on Psychoanalysis?

Reports From Area Committees

Walter Alvarez, M.S.W., National Area Chairperson for the Northeast;

Rosemarie Gaeta, M.S.W., National Lialson to Area Chairpersons;

Beverly Gorsuch, M.S.W., National Area Chairperson for State of Washington;

Billie Lee Violette, M.S.W., National Area Chairperson for State of Northern California;

Ellen Ruderman, Ph.D., National Area Chairperson for Southern California.

Report From The Northeast Area Walter Alvarez, M.S.W. National Area Chairperson for the Northeast New York, NY

On Saturday May 5th, 1990 the Northeast Area group of the Committee on Psychoanalysis held its first general planning meeting. The meeting, attended by over 40 members, generated much excitement and enthusiasm and affirmed the willingness of members in the northeast area region to become actively involved both in the area and national levels. This meeting represents a sig-



nificant step for the northeast area. Although there has been consistently a strong membership base in this area, our manpower resources have been directed primarily on national programming and development at the expense of local planning and development.

The meeting included a panel presentation by Walter Alvarez, M.S.W., Northeast Area Chair, Rosemarie Gaeta, M.S.W., National Chair-elect, and Marsha Wineburgh, M.S.W. The panel presented an overview of the Committee on Psychoanalysis structure as well as a presentation on professional and legislative issues of significance to members in the northeast area. The panel presentation led to a lively discussion and provided the membership with its first opportunity to speak as an organization group within our national organization. Many significant ideas and concerns were expressed. The major theme that dominated the discussion was related to the eagemess of the area members to have an active role in the continued development of this important specialty committee both nationally and locally. The area has formed several active committees to provide appropriate vehicles to fulfill these goals.

The National Clinical Conference And Its Impact On Unification Of Regional Groups Rosemarie Gaeta, M.S.W.
National Liaison to Area

Chairpersons New York, NY

As National Liaison to regional membership groups, I have been impressed with the growing sense of one national community that is developing throughout the country. No doubt, much of this is due to the dedicated efforts of all the area chairpersons of the Committee on Psychoanalysis. The area chairpersons have been able to address their local membership not only on local needs and issues, but also by helping to provide a feeling of connection to



a larger professional community. It is only through a national organizational structure that a union of clinical social workers who practice the specialty of psychoanalysis and psychoanalytic psychotherapy can be an effective force.

In an earlier correspondence, the Northem California Area group sent its members: "All the functions of the Committee on Psychoanalysis must be carried out on a national level, just as the American Psychoanalytic Association performs these functions nationally for psychiatrist-psychoanalysts and as

Professional parity for clinical social workers cannot be achieved on a local level.

The 1989 national clinical conference held in Philadelphia, under the direction of Marsha Wineburgh, M.S.W. and Mitchell May, M.S.W., was a great success and paved the way not only for continued solidification of the identity of the clinical social worker who practices the specialty of psychoanalysis and psychoanalytic psychotherapy, but for stronger union of clinical social workers from distant and distinct parts of the country. Together we were able to use the occasion of a national clinical conference as a vehicle to engage in a creative dialogue with our profession's theoreticians and practitioners.

As a chair of the third National Clinical Conference, November 1-4, 1990 in New York City, I have been impressed with the quantity and quality of nation-wide submissions for presentations. Not only has national participation permeated the conference program itself, but there is very strong national participation on the conference committee. The conference has been a joint "project" drawing us all closer together. The promise of success will be shared by all.

Report From Washington State

Beverly Gorsuch, M.S.W. National Area Chairperson for State of Washington Seattle, WA

The Area Committee in Washington State is currently in transition. I am stepping down from my position and we are in the process of nominating and choosing a successor. The Board of the Washington Society of Clinical Social Work has responded to all requests from the national Committee for letters of support on national issues. The main



focus of our Committee members has been to create more opportunities for psychoanalytic study and training for clinical social workers. This has been accomplished by taking leadership roles, myself as president, and William Etnyre, M.S.W., and Roberta Meyers, M.S.W., as board members of the Northwest Alliance for Psychoanalytic Study.

Report From Southern California Ellen G. Ruderman, Ph.D. National Area Chairperson for

Southern California Los, Angeles, CA.

The Southern California Area Committee of the Committee on Psychoanalysis launched its 1990-1991 schedule with two outstanding clinical programs which were attended by over 100 clinical social workers and other mental health professionals.

On January 20, 1990 Jean Sanville, Ph.D. presented an excellent and illuminating paper entitled, "An Odyssey to Psychoanalysis," which



described her own journey as a social worker toward a psychoanalytic identity. The large and enthusiastic audience of over 110 clinical social workers affirmed the growing number of psychoanalytically-oriented social work clinicians in the Los Angeles community interested in our Committee and in programs of this nature.

On March 3, 1990 Charlotte Riley, L.C.S.W., presented a paper on "D.W. Winnicott's Model of Infant Development: Some Considerations in Psychoanalysis Work." Trained at Tavistock Institute in England, Ms. Riley currently has a private practice in psychoanalysis in Santa Monica. Her excellent paper combined intergration of Winnicott's theory to the treatment of severly disturbed children and to the treatment of adults. This all-day conference was held at Burton Chace Park in the Marina. Both programs were coordinated by the Education/Program Sub-Committee Chaired by Ellen G. Ruderman, Ph.D and Susan Moscov, L.C.S.W., Martha Slagerman, Ph.D., Chair of the Membership Sub-Committee, along with her Committee ably assisted in these programs. Afternoon workshops followed Riley's presentation and were given by: Selma Brown, Ph.D., Rosalyn Benitez-Bloch, D.S.W., Lynda Chassler, L.C.S.W., Adele Fry, Ph.D., Jean Sanville, Ph.D., and Geraldine Schick, L.C.S.W.

The two programs generated considerable enthusiasm in the clinical social work community. We now have locally well over 100 members of the Southem California Area Committee on Psychoanalysis.

In its formative period, the Southern California Area Committee, under the direction of the then appointed Chair, Geraldine Schick, M.S.W., organized sub-committees and planned future programs. The Governing Board: Ellen G. Ruderman, Ph.D., Chair, Education/Program Committee; Martha Slagerman, Ph. D., Chair, Membership Committee and Acting Treasurer; Rebecca Jacobson, Ph. D., Legislative Committee; Selma Brown, Ph.D., Liaison to the State Society for Clinical Social Work; Terrence McBride, L.C.S.W., Chair, Conference Committee.

Following passage of the by-laws for the National Committee on Psychoanalysis by the National Federation of Societies for Clinical Social Work on October 26, 1989, the first election of an Area Chairperson for the Southern California Area Committee on Psychoanalysis was held. The former Chairperson to serve until by-laws were passed to provide the mechanism for an election. Nominations Chairperson for the Southern California Area Committee was Jessica Lehman, L.C.S.W. On February 21, 1990 the former Education/Program Chair, Ellen G. Ruderman, Ph. D. became the first elected Chair to the Southern California Area Committee on Psychoanalysis.

On March 3, 1990 the newly elected Chair formed an Execuctive Committee composed of the following persons: Chair, Education/Program Sub-Committee: Mae Denton, Ph.D., Asst. Chair, Rosalyn Benitez-Bloch, D.S.W., Asst. Chair, Susan Moscov, L.C.S.W; Membership Committee: Co-Chairs, Jessica Lehman. L.C.S.W., Maggie Magee, L.C.S.W; Treasurer: Pat Sable, Ph.D.; Secretary: Miriam Hamis, L.C.S.W; Consultant: Jean Sanville, Ph.D.; Consultant (Re: State Society): Helen Ziskind, L.C.S.W; Liaison to Committee, San Diego Area: Louis C. Mone, Ph.D. Liaison to Committee, Orange County Area: Selma B. Brown, Ph.D. In April following her appointment as Chair, of the newly forming National Division of Social Work Psychoanalysis, Elaine Rose, L.C.S.W was asked to be a part of the Executive Committee. The Southern California Committee continues to grow in membership and to elicit interest and enthusiasm from the social work and mental health community as well.

Future goals for the Southern California Area Committee, as proposed in the first meeting of the newly created Executive Committee, include the continued growth and expansion of the local area membership, promotion of increased visibility in the mental health community through quality psychoanalytic educational programs and increased interfacing with other organizatons providing psychoanalytic educational programs.

In April, 1990 the Chair and the Executive Committee invited Lynette Sim, President of the State Society for Clinical Social Work to a luncheon meeting in which numerous issues pertinent to both organizations were raised and discussed. This kind of meeting was viewed as the beginning of a series of fruitful talks between Lynette Sim representing the Society for Clinical Social Work and our local Area Committee. We hope to continue these dialogues in an open and explorative manner, and in this regard on June 10, 1990 this Chair appeared before the Board of the State Society for Clinical Social Workers providing greater clarification of local committees efforts to provide representation for those psychoanalysts and psychoanalytically-oriented social workers in the Los Angeles area, and of the goals, and objectives of the Committee on Psychoanalysis.

Second, at the request of the Executive Committee of the Southern California Area Committee to support M.S.W.s as candidates for psychoanalytic training at Institutes affiliated with the American Psychoanalytic Association. The Board of the State Society voted unanimously to support our request that the State Board of the Society for Clinical Social Work in California send a letter to the National Federation making the following points: That the National Federation take a stand on this issue as all M.S.W.s are in jeopardy of being isolated from the professonals practicing psychoanalysis if the forthcoming amendment to the by-laws of the American Psychoanalytic Association is approved as written; that while the amendment to the by-laws removes the waiver for mental health professionals with Ph.D.s by not removing the waiver for M.S.W.s they are not recognizing the M.S.W. as the terminal degree. This is both degrating and demoralizing, putting a cloud over all M.S.W.s in the country. Among other important requests we asked the Federation to send letters to all major psychoanalytic institutes educating them to this issue. After the unanimous approval of the Board, the Chair of this local committee was asked to supply Lynette Sym, State Society President with information relevant to our request; Sym will then compose and send a letter to the National Federation.

The meeting was viewed as setting the stage for future communications. What was stressed was that as the State Society had been instrumental in creating a subspecialty identity for those clinical social workers who are specifically engaged in the practice of psychoanalysis and psychoanalytic psychotherapy.

The current Executive Committee of the Southern California Area Committee would like to extend its appreciation to the following people: Geraldine Schlick, M.S.W. (former Chair), Selma Brown, Ph.D., Rebecca Jacobson, Ph.D., and Martha Slagerman, Ph.D., for their part in establishing the Committee on Psychoanalysis in Southern California.

Report From Northern California Billie Lee Violette, M.S.W. National Area Chairperson for Northern California San Francisco, San Mateo, CA

The Northern California Committee on Psychoanalysis was

established in Berkeley, March 18, 1989. The organization has attracted members who, although practicing analytically-oriented psychotherapy have a divergence of interests. The committee was organized under the leadership of Rosemary Lukton, Ph.D., past dean for the California Institute for Clinical Social Work. Lukton served as Chair pro tem, and on her planning committee were Lisa Blumefeld, Ph.D., Helen Gallant, L.C.S.W., Linda Cozzarelli, L.C.S.W., Mike Johnson, D.S.W., Cynthia O'-Connell, Ph.D. and Jacova Silverthome, M.S.W.



Committees were established to implement the structure of the organization so as to provide social workers the opportunity of becoming analysts using the existing institutes to obtain the course work. In addition to the above mentioned persons, the committee members consist of Karla Clark, Ph.D., Shirley Issel, M.S.W., Kim Ward, M.S.W., Sharon Karp-Lewis, M.S.W., Charlotte Prozan, M.S.W., Velia Frost, L.C.S.W., Terry McCall, M.S.W., Ardelle Merritt, M.S.W., Phyllis Greene, M.S.W., Martha Rabkin, M.S.W., Marsha Fine, L.C.S.W., Nidra Rosenthal, M.S.W., Cathy O'Brien, M.S.W., Carol Rush M.S.W., and myself.

In December 1989, I was appointed Chairperson for the Northern CA Committee on Psychoanalysis. The selection was based on the belief that as a new member of both the Committee on Psychoanalysis and the California Society for Clinical Social Work, I would be a neutral link between the often-divided groups.

At the current time, Lukton and I are in the process of forming an election subcommittee so that the next chairperson can be elected by the membership. The organization is dealing with the redistribution of responsibilities (hopefully rewards), and the structure of meeting times and locations. Our mailings have been going out to 130 members. For the organization to serve the diverse interests and large geographical area involved, some way needs to be found to obtain active participation on the part of a much larger body of the membership.

The regular meetings have been held every two months in either Berkeley or San Francisco. The focus of the general meeting has been an educational offering organized by Charlotte Prozan, M.S.W., chairperson of the program committee. Prozan began the offerings by presenting on feminism and psychoanalysis, which is an area in which she published her paper that appeared in Women, Power, and Therapy, edited by Marjorie Braude, M.D. She organized the following panel and presentations: A panel that described advanced training available to licensed clinical social workers, at Division 39s new institute, Institute for Clinical Social Workers, C.G. Jung Institute, SF Postgraduate Institute for Psychoanalytic Psychotherapy, Masterson Institute, the Psychotherapy Institutes for Marin and Berkeley, and the Feminist Psychotherapy Institute. Rachel Wahba, M.S.W., spoke on envy in the transference. The topic by Joan Dunkel, M.S.W., was on countertransference issues in working with AIDS patients. Michael Johnson, D.S.W., discussed realities of modern-day practice: finance and politics. Velia Frost, M.S.W., spoke on utilization of object relations theory in working with narcissistic couples. Upcoming presentations will be by Karla Clark, Ph.D., of the Masterson Institute; Judith Schiller, Ph.D, Dean of the Institute of Clinical Social Work; and Gareth Hill, Ph.D., of the Jung Institute

Following each presentation is a social hour with refreshments organized by Helen Gallant, M.S.W., membership chair. Members bring recent publications and brochures. Recently, Patricia Sax,

Ph.D. book review editor for the *Clinical Social Work Journal* invited members to submit book reviews. Gallant also attended the national conference in Philadelphia on which she reported at the December meeting. She has been asked to be on the planning committee of the next national conference.

The educational committee of the organization has been establishing peer study groups. They are to be located across the Bay Bridge in the "East Bay" (which includes Berkeley and Oakland), across the Golden Gate Bridge in Marin County (which includes Sausalido and Tiberon), and San Francisco proper. Each group focuses on particular theories of psychoanalytic thought and practice relevant to the interests of the members. The credit for this goes to the co-chairs of the educational committee, Jacova Silverthome, M.S.W., and Linda Cozzarelli, M.S.W.. The groups offer the opportunity for advanced learning at no additional cost to the members..

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Letter To The Editor

Excerpted: I was stunned and dismayed to read (Fall, 1989 Newsletter, Committee on Psychoanalysis "How Did We Let This Happen?") about Gertrude Blanck's "ex-communication" from the field of social work by Columbia University. That Dr. Blanck, a woman whose vital contributions and professional stature are virtually unequaled in our field, was so treated, is shameful and an embarrassment to our profession. [However,] in my opinion, Dr. Blanck does not speak for the majority of clinical social workers when she attempts to say that social work should not aspire to...[and] should best leave to other professions,...advocacy and administration.

I do not share these sentiments. I believe that statements like these leave us vulnerable to charges of elitism from our colleagues, and may further the divisiveness already so rampant in our profession. I consider the many forms of advocacy, when used appropriately and judiciously, to be an indispensable part of social work practice, particularly for those of us who are agency based. A number of my social work colleagues are involved in the work of advocacy. They have helped procure funds and worked to obtain needed changes in our local government and health-care system [so]that people in need, such as abused children, people with AIDS, and chronic mentally ill, receive care which is more compassionate and comprehensive. To suggest that this is not social work, or that these tasks would be better left to lawyers and bureaucrats, reflects an image of social work far different than my own.

William S. Meyer, M.S.W. Director of Training, Division of Psychiatric Social Work, Duke University Medical Center, Durham, N.C.

Letter From The Editor

I would like to thank our members for their submissions to the *Newsletter*. We have received more articles this year than ever before and are pleased at the development of this publication.

While I realize that many of our members are either in private practice like myself, and/or working in agencies, and that spare time is at a premium, it would be a boon to the *Newsletter* if our editorial board reflected more of a national participation.

Those members with experience in publishing, writing, or a desire to be more involved with the Committee in Psychoanalysis should contact me if they would like to help with editorial duties of the Newsletter.

Florence Rosiello M.S.S.W. 124 West 79th St. Suite 2BN New York, NY 10024

Committee on Psychoanalysis

A NATIONAL MEMBERSHIP COMMITTEE OF THE NATIONAL FEDERATION OF SOCIETIES FOR CLINICAL SOCIAL WORK, INC. (Committee Est. 1980)

The Committee on Psychoanalysis was formed as a standing committee of the National Federation of Societies for Clinical Social Work in May 1980, in response to the need for a national advocacy group for Clinical Social Workers who practice psychoanalysis and psychoanalytic psychotherapy. While Clinical Social Workers are a major provider group of psychoanalysis and psychoanalytic psychotherapy in the nation, they have been forced to look to psychology and medicine for standard setting and clinical identity as psychoanalytic practitioners. The Board of the National Federation voted in October 1985, to expand the scope of the Committee to allow all interested members of State Societies of Clinical Social Work to join the Committee directly. Annual dues and contributions are used exclusively by the Committee for its work.

Major goals: In addition to ensuring parity for Clinical Social Workers as psychoanalytic practitioners and educators, the Committee's goals are to provide:

- A national specialty identity for clinical social workers who
 practice psychoanalysis and psychoanalytic psychotherapy.
- National standards for psychoanalytic training and practice by Clinical Social Workers.
- 3) National educational conferences.
- 4) Forums for specialty interests.
- 5) Area conferences.
- 6) Publications.

Who may become members? Any individual of a State Society of Clinical Social Work who is interested in working toward achieving the goals of the Committee may become a members. If you are a member of a State Society of Clinical Social Work, we will send you information regarding membership in the State Society in your area. Your Society must be a member of the National Federation.

Membership Application

COMMITTEE ON PSYCHOANALYSIS

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