



NEWSLETTER

The National Membership Committee on Psychoanalysis in Clinical Social Work, Inc.

Affiliated with The National Federation of Societies for Clinical Social Work

VOLUME 9

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NMCOP Advances



From the President
Cecily G. Weintraub,
Ph.D., BCD

My first speech as NMCOP president in New York in September 1993 began with the words of the great Rabbi Hillel who said, "If I am not for myself who will be? If I am for myself alone, who am I?" This phrase has been the theme and guiding philosophy of my term as your president. As this two year administration draws to a close, we can all share the excitement over the political involvement and organizational development of the NMCOP during this time.

Political Involvement

We have gained national stature within our own profession and across the mental health profession lines as a result of increased presence and exposure. Our work to strengthen our identity and parity recognition as psychoanalytic practitioners with all mental health professions has continued successfully.

I am pleased to announce that the Psychoanalytic Consortium which has continued to develop as a collegial body since 1992 now has the formal support of the four constituent groups. The member organizations—our National Membership Committee on Psychoanalysis, The American Psychoanalytic Association, The American Academy of Psychoanalysis, and Division 39 of the American Psychological Association—have now voted to join the Consortium. Bylaws are being drafted to define the objectives, structure, and governance of this body.

Also, as I previously reported to you, the

Psychoanalytic Consortium has strongly opposed the petition of the National Association for the Advancement of Psychoanalysis (NAAP) and their American Board of Accreditation in Psychoanalysis (ABAP) to the Committee on Recognition of Post secondary Accreditation (CORPA) and to the United States Department of Education to become the recognized accrediting training body for psychoanalysis.

All the member organizations of the Psychoanalytic Consortium have been extremely concerned that ABAP's standards for training are inadequate and testified against ABAP at the CORPA hearing on August 19, 1994. Crayton Rowe, our articulate founder and wise negotiator who is also chair of the Consortium's "Watchdog Committee" testified for the NMCOP.

As a result of the NMCOP and Consortium efforts in August, 1994, the American Board of Accreditation in Psychoanalysis (NAAP's accrediting Board) failed in their application to become the accrediting body for training programs in psychoanalysis. As was expected, the ABAP appealed CORPA's Committee on Recognition decision. We will know CORPA's final appeal decision in August, 1995. We will keep you, our membership apprised.

Nonetheless, we believe that because of the joint opposition of the NMCOP with the Consortium to NAAP's efforts at CORPA, the ABAP withdrew their petition to the United States Department of Education. To this date ABAP has not reapplied.

Next, a "Certified Psychoanalyst" law was recently passed in the state of Vermont. This law recognizes graduation from a psychoanalysis program in any state-chartered

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psychoanalytic training institute or doctoral program in psychoanalysis accredited by any national accrediting association. There are no specific training standards outlined in the legislation. While there is a requirement that an individual hold a master's degree, there is no requirement that the master's degree be in one of the mental health professions or that the individual be certified or licensed in one of the mental health professions. The NMCOP will vigorously pursue this professionally inadequate psychoanalysis certification law passed in Vermont in the same manner we have addressed other "fifth profession" threats.

Finally, the status of the American Psychoanalytic Association's required waiver for MSW's to undertake psychoanalytic training in their institutes remains essentially unchanged despite our ongoing efforts catalyzed by the NMCOP past president, Rosemarie Gaeta. We continue to look after the interests of our membership in these negotiations pressing for equal recognition and parity with other members of the Psychoanalytic Consortium.

The NAAP/CORPA circumstances and the Waiver status provide a natural juncture at which to pause and ask about the meaning and lessons of this situation for our professional membership. As we know, the NAAP issue is historical and is continuing. Therefore, your leadership has focused on proactive solutions to avoid revisiting stalemated issues yet again. We must credential ourselves as a specialty within our profession. I have aggressively sought specialty recognition for the psychoanalytic social work practitioner within social work.

These efforts, as you know, have taken me to testify before the American Association of Social Work Boards (AASSWB) in Culpepper, Virginia to inform and influence that group's writing of state licensing bills to be protective of clinical social workers who practice psychoanalysis and psychoanalytic psychotherapy.

More recently, the American Board of Examiners in Clinical Social Work (ABE) requested my presence in Wilmington on a subcommittee to define the scope and requirements of specialty practice headed by Delores Dungee Anderson with ABE president Joyce Cunningham attending and

collaborating.

Our efforts were furthered by the excellent collaborative relationship with the Federation whose president, Chad Breckenridge, and representatives, J. Robin Robb, Vice President for Professional Development and Ann Neumann, Chair of the Couple, Marriage and Family Committee participated in these negotiations.

Further, because we have adopted the Standards of Practice written by the National Study Group, we were able to offer a framework through which specialty recognition can proceed. These meetings were collegial but specific and determined. Through our comments, we have sounded a necessary professional "wake up call."

It is my belief that if we do not protect ourselves within our own profession, no one else will. We must not underestimate the importance of the professional identity we have. It is the basis for licensure and all further specialty endeavor.

Organizational Development

We have emerged from fledgling independent status to become a vital cohesive group which addresses the critical professional issues in this problematic social climate.

Two years ago we began without an infrastructure. We have written our bylaws which reflect our commitment to protect the identity of the clinical social work psychoanalyst and psychoanalytic psychotherapist and the patients we serve. We have a functioning Executive Committee branching out to cover the needs of our constituency. We are finalizing our affiliation with Federation as the result of collegial collaborative efforts.

Our educational efforts for us as professionals and for the community at large are noteworthy. We look forward to the Fifth National Clinical Conference in New York in October, 1995 and we thank Carol Greifer for her Herculean efforts. Our group owes a debt of gratitude to the prodigious work of the National Study Group under the leadership of Joyce Edward. We are delighted with the efforts of Roslyn Goldner, Judy Ann Kaplan, and Elaine Rose to organize supervisory groups across the nation which will culminate in the Pre-Conference Day on Supervision. Finally, we thank Joyce Edward and Jean Sanville for editing *Facilitating Healing: A Psychoanalytic Perspective* (tentative title) for bringing the first publication of the

NMCOP to fruition. This is offered to our professional schools of social work and, all mental health professionals and the public.

We have served the public as leaders in the fight for quality health care reform and parity mental health benefits through our own legislative committee led by Laura Groshong and through collaborative efforts with the Psychoanalytic Consortium and the Coalition for Mental Health Providers and Consumers, national forums of interdisciplinary efforts.

I offer special thanks to the Executive Committee who have headed committees, served as area chairs, and participated in many arenas including Jim Engelbrecht, Peg Frank, Carol Greifer, Laura Groshong, Bill Meyer, David Phillips, Ellen Ruderman and Elaine Smith who have been there every step of the way with me these past two years. The Area Chairs including Muriel Brotsky, Cathy Buirski, Laurie Curtis, Judy Freed, Susan Levine, Erica Rothman, and Cathy Siebold have furthered our programs throughout the United States.

Blanche Edwards, our secretary has made the practical end of things happen with an ease that mystifies me. I am especially indebted to Jeff Kluewer for stepping in and helping us produce the 1995 Newsletter. Thanks also to Susan Mellan for coordinating the "Pull Out Section."

Finally, I thank my husband Joel and daughters Becca and Stephanie who have lived each day—some longer than others—always supportive, helpful and loving as we did mailings in the car, found fax machines in remote areas on vacations, and provided a limo service for me, a person who often didn't remember from which airport she was leaving.

As I have criss-crossed the United States for the NMCOP during this time, from Texas to North Carolina to Virginia, to Wilmington, from New York to Washington it has been my honor to represent you, my pleasure to have met so many colleagues and friends, and a personal privilege to have played a part in advancing our professional organization. We have heeded Hillel's challenge to consider, protect, and further ourselves as a professional group while simultaneously we have taken a leadership role in promoting the highest ethical standards of practice and health care for the public.

I wish Peg Frank a fruitful tenure and all good luck.

Tension in the Profession



From the
President-Elect
Margaret Frank,
LICSW, BCD

WE have just passed the vernal equinox bringing us closer to July and the beginning of my presidency. I want to share a few reflections on my tenure as president-in-training. First, I reflect upon Cecily Weintraub Ph.D., our current President, who has tutored me in the history and the ways of NMCOP. She has been a warm, patient and energetic teacher and has orchestrated her years as president in a fashion that fills me with awe. I cherish the time we have had together and the relationship that has grown between us. Lucky for all of us that her counsel will be available in her position as Past President. In addition I want to thank Crayton Rowe and Rosemarie Gaeta not only for their ongoing work but also for their availability to me with my questions and anxieties.

As you know I have been able to form an overview impression of our organization through my work as National Liaison. I have written of that experience in the Liaison report.

I wish to reflect and expand upon one aspect of the Liaison report in this column. I believe it is central to our being and our identity. This aspect has to do with a tension which seems to exist between some clinical social workers who see themselves "only" as psychoanalytic psychotherapists. There are within this population of current and potential membership people who seem threatened by their colleagues who have pursued analytic training and some social work analysts who seem to wish to form a new identity which excludes clinical social work. Both "poles" are uncomfortable with NMCOP because it reaches out to the entire range of the psychoanalytic psychotherapies.

We cannot overlook the tension that exists within our organization and within our field. This is not a new tension but in this economic and political era it must be addressed head-on. The pressures of managed care and psychopharmacology bear down on both the training in and use of

psychoanalytic theory in clinical practice. I have given several "grand rounds" throughout the country this past year and have had residents in psychiatry tell me that my presentation was the first clinical material that they had heard in the training.

I ask your indulgence if I talk for a moment about myself. It is four decades since I graduated from Columbia University School of Social Work. I studied in the then named "psychiatric social work sequence", but not without a heavy (beyond the requirements) exposure to group work and community organization. My vita contains uninterrupted clinical work, years involved in Peace Corps and Vista training in urban community development, and teaching in almost every school of social work in the Northeast Corridor.

Like most of you, I have always studied. Eventually, the road led to attending an analytic institute. The path of learning did not stop there. Currently I have the pleasure and challenge of working with several people who are fortunate enough to enter psychoanalysis. The remainder of my clinical work resides in the realm of psychoanalytic psychotherapy. The line between psychoanalytic practice and psychoanalytic therapy is not so clear. The challenge in the latter is to bring all that you know and understand to people of differing structures in a format which may involved less contact than would be optimal.

There is no question that I no longer practice on the "front line"; however, I have a vivid view of it through teaching, supervision and consultation. My behind-the-scenes role as teacher and consultant spans so many years that I have seen the shift (in what used to be called the field of child guidance) from clinical concerns about children who stole, stuttered, were enuretic or encopretic, who had tics or temper tantrums. All were from families struggling with a range of environmental as well as emotional problems.

The front line work of yesterday was indeed a challenge in navigation between inner and outer realities. TODAY THIS WORK IS AWESOME. Clinical social workers must face a political and economic climate which fosters managed care, psychopharmacology, and short term treat-

ment without regard to the needs of children or adults. Changes in our social climate have yielded a world of drug and alcohol abuse. AIDS is a nightmare that has reached out beyond racial and class lines and forces us to face the issue of untimely physical deterioration and death. Children come to us for treatment with no or disabled parents, with diseases for which there is, as yet, no cure. The face of the family has changed beyond recognition.

Within all of these pressures, clinical social workers carry the burden of attempting to restore and repair development in settings in which it takes heroic efforts to retain a therapeutic focus.

It would appear that we in the field of clinical social work have created a form of discrimination with respect to standards of training. The schools of social work offer less psychoanalytic theory to the very practitioners who will enter the "front line". It is as though we are saying that the most complicated life situations need less psychoanalytic understanding rather than more.

Clinicians, in turn, have to arm themselves with knowledge in post graduate programs which they should have received in their basic training. I know I am not alone in experiencing the excitement which can accrue to people who are fortunate enough to work with front line practitioners. I have seen that increasing their understanding and use of psychoanalytic theory clarifies their abilities to retain a therapeutic focus, prevents burn out and, of equal importance, aids their patient population. I have written on this theme as part of the collection of articles to appear in *Facilitating Healing: A Psychoanalytic Perspective*, edited by Joyce Edward and Jean Sanville

I envisage NCMOP as an umbrella organization which first and foremost supports the importance of psychoanalytic theories in practice and encompasses a practice range that spans from the front line to the private office. What a waste of energy for practitioners within this span to be tense or threatened by each other. This energy needs to be used to influence training, and to fight those forces that impinge upon us compromising the quality of our work.

Projects and Prospects



**Report from the
National Study Group
Joyce Edward, CSW,
BCD, Chair**

Since our last report to NMCOP members, the National Study Group has worked on two major projects, the Pre-conference on Supervision and the Reader, which I have several times reported on in this Newsletter.

All Day Pre-conference Seminar

Let me begin with a brief report on the Supervisory Pre-conference Seminar, which has been developed by three members of the Study Group, Roslyn Goldner, Judy Ann Kaplan and Elaine Rose serving as co-chairs. They have worked closely with area chairs throughout the country to offer Conference participants an extraordinary program. The announcement of this program, *Experiences in Supervision: Psychoanalytic Supervisors and Supervisees at Work* which appears elsewhere in the Newsletter, attests to their creativity, hard work, expertise and devotion. I might mention that this Seminar is, in part, the outcome of recommendations for further educational offerings made by participants in the last two Conferences who were queried through a questionnaire developed by the Study Group.

As part of the program, the Study Group together with Area chairs have been developing small supervision groups to be held from April to June all over the country. At the time of this writing we know of four groups being offered in the Bay Area and four in the Los Angeles area of California. Eleven groups are being offered in the New York and New Jersey areas and there is one group in the Massachusetts area. There is much enthusiasm for these programs and the NMCOP at its most recent Board meeting expressed interest in continuing these and/or other area study groups on an ongoing basis.

The Reader

Now let me turn to the Reader which Jean Sanville and I have had the pleasure of co-editing. We are both very pleased to be able to announce that we are currently in the process of submitting the completed manuscript to Jason Aronson.

If you recall, the Study Group decided to

develop a Reader when we confirmed by an informal study, what all of us knew: that fewer and fewer schools of social work are including a psychoanalytic perspective in their curriculum. With a few exceptions, psychoanalytic theory is either addressed minimally or not addressed at all in social work programs.

In the light of this neglect, the Study Group decided that it might make its most useful contribution by developing a compendium of articles that would demonstrate the value of analytic theory in working with the kinds of clients/patients that social workers are challenged to help today. At first we saw this compilation as containing both new and previously published papers and thought of it primarily as a resource for students in schools of social work and in other mental health training programs. In addition we considered that the papers might also be drawn upon to educate the lay public, including those non-professionals who are increasingly determining the shape of mental health treatment in this country.

As we proceeded further with the Reader, we began to alter our original idea. First we discovered that publishers were more amenable to a book with original papers. We therefore stopped considering any additional previously published papers. At this point all but three of the papers are original. The reprinted ones are articles we had committed ourselves to publish prior to the change of view. We also began to consider the value of appealing to a broader readership and started to consider articles of varying complexity.

There are now presentations well suited to the needs of students and beginning workers, as well as chapters that will challenge supervisors, teachers as well as the more experienced clinician. A glossary of psychoanalytic terms is being provided to make it easier for readers of varying degrees of familiarity with analytic theory to understand a range of papers. A special bibliography of articles and books by social workers related to the papers in the book is being offered to help readers find out more about the subjects that interest them.

We did limit our papers to those that focused on psychotherapy and tried to include as many once-a-week patients as possible. However, there are some articles that describe work with patients who are being seen more frequently. We have also included some articles in which parameters

are employed which would not be permitted in certain agencies or under managed care arrangements. Our rationale for this has been that we want to show what can be accomplished when treatment arrangements can be made flexibly and fitted to the unique needs of individual patients.

I should like to mention here that there were several fine accounts of psychoanalyses with the more difficult patient submitted. We felt that for our purposes it was best to remain focused on psychotherapy papers. However let me say that I think a very useful book could be developed in the future on analytic work by social workers particularly with the more troubled patients.

As papers were submitted and the book has developed, we began to recognize more fully how valuable the papers could be for all mental health professionals. Some of our writers had, in fact, very successfully presented their papers to a wider audience of mental health professionals. This led us to try to develop a title that would broaden the appeal of the book. Earlier we were considering as a title, *The Contribution of Psychoanalytic Theory to Social Work Practice*. However, we began to feel that this title might discourage other professionals from considering the book. At the present we are tentatively naming the book *Facilitating Healing: A Psychoanalytic Perspective*. I say tentative, because we have yet to get a response to this title from Jason Aronson. I might add that when we mentioned this title to the Board of the NMCOP, participants seemed quite enthusiastic about it.

At this point the articles are all completed and they are being given their final editing by Jean Sanville, who is also writing a Postlude to the book. There are 23 chapters in total. A tentative Table of Contents is offered on page 18 of the Newsletter. Unfortunately the book will not be ready by the Conference, but we can have flyers available about the book which can be used to preorder it.

Each article has been selected because it demonstrates the use of analytic theory in working with the kind of individuals that private practitioners and agency clinicians are serving today. About half the articles are drawn from private practice and half from agency work. Though we have striven for excellence, the quality of writing varies as in any book. Several of the papers have been

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rewritten a number of times by the authors and your editors have themselves rewritten several chapters. While these particular chapters presented writing problems, they either offered particularly valuable accounts of process or they took up an important topic, or they represented an as yet unrepresented theoretical view. As you will see, we have covered a broad theoretical ground.

With the exception of one, all of the chapters are written by social workers. We did get the approval of the Study Group to make an exception for an article on the treatment of a recovering drug addict by a psychologist, since we had no article submitted on that important topic.

Facilitating Healing: A Psychoanalytic Perspective provides the reader with the opportunity to see how analytic theory has been extended and enriched over the years by the development of self psychology, object relations theory, developmental theory, ego psychology, intersubjective theory, Kleinian theory, interpersonal theory and other points of view. Background chapters address some of the key common concepts in analytic theory such as the unconscious, the tendency to repeat the unknown past, transference, countertransference and resistance. It shows how these and other phenomena are manifest in sessions and how they are understood and responded to by professionals of different persuasions. We offer some general articles such as one on the history of the relationship of social work and psychoanalysis and a chapter on social work education and analysis.

The chapters feature detailed process notes which afford the reader an opportunity to observe both partners in the treatment process at work and to carefully follow what transpires between them. Among the case examples offered are accounts of work with a filicidal woman; with survivors of violence; with an adult survivor of childhood sexual abuse; with a recovering HIV infected, former prostitute, drug addict; with a handicapped foster mother who, though unable to handle her own latency age son, was nevertheless able to become a foster parent to an infant; with a patient dying of AIDS; as well as patients who have suffered less severe trauma and whose personalities are stronger. One such patient presents difficulties in achieving intimacy due to unresolved oedipal problems. Another is having problems supporting her aged, ill mother in the loving way she consciously wishes to, in part, due to unconscious rage over mother's preferred place with father.

Among the many analytic theorists whose contributions are drawn on to guide the work recounted are Freud, Stern, Kohut, Winnicott, Masterson, Arlow, Matt-Blanco, Casement, Gertrude and Rubin Blanck, Mahler, Fairbairn, Bollas, Sanville and Pine. The readers will have the opportunity in this one book to gain a view of a significant spectrum of current analytic thought and to gain an appreciation for the sensitivity, vitality and creativity among psychoanalytic thinkers and practitioners from Freud's time to today.

Concluding Comments

With the completion of the Reader and the presentation at the Conference of the Supervision program, this Study Group, as it is presently constituted, will have completed its work. We shall hold a final meeting during the next Conference to consider what we have done, what we wish perhaps we had done or done differently and to formulate recommendations for our new President, Peg

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International Federation for Psychoanalytic Education

SIXTH ANNUAL CONFERENCE

THE FUTURE OF PSYCHOANALYTIC EDUCATION

October 13-15, 1995

Toronto Hilton Hotel

Toronto, Canada

Conference sessions will explore:

- *Psychoanalysis as an academic discipline (other than medical).*
- *The changing characteristics of the student of psychoanalysis.*
- *The psychoanalytic training program in a competitive world: Life in the marketplace of multiplying institutions.*
- *Qualification, certification, credentialing, and licensing: When does one become a psychoanalyst and who decides?*
- *The psychoanalytic institute: Does it teach only its preferred point of view or does it represent the multitude of psychoanalytic approaches to theory and practice?*
- *The psychoanalytic teacher, supervisor, training analyst: What are the qualifications and what should they be?*
- *Psychoanalytic education and the realities of professional practice: Surviving professionally and economically as a psychoanalyst.*

The IFPE welcomes your inquiries about our organization and your requests for program brochures for our Sixth Annual Conference: **The Future of Psychoanalytic Education**. Send your inquiry by letter, telephone, or telefax to our administrator at the following address:

Leon Cahan, IFPE Administrator
6815 Washita Way
San Antonio, Texas 78256-2304
Telephone (210) 698-2311 Fax (210) 698-2477

Confronting Managed Care



Legislative Committee
Laura W. Groshong, MA, BCD
Legislative Chair Update

After all the intense activity set in motion by President Clinton's proposed health care reforms last year, this year feels almost calm by comparison. The main "action" legislatively has shifted to the state level where several states are considering enacting some sort of health care reforms from mandatory coverage of pre-existing conditions and portability to a mandated set of basic benefits made available to all citizens.

The shift in the makeup of Congress has put health care on the back burner nationally and when it is taken up again, health care is likely to be viewed far more narrowly than it was in the reforms proposed by President Clinton. The issues likely to be addressed include insurance reforms; 100 percent deductibility for health care expenses of the self-employed; and more coverage of home and/or community based care.

The issue on many of our minds, i.e., the impact of managed care on mental health treatment, is one which is not likely to receive much attention soon. This would involve business regulation and the prevailing sentiment being seen at all levels is for deregulation. The best way to change the problems managed care has presented — intrusiveness, loss of confidentiality, lack of support for professional standards of good treatment — will most likely take legislative action.

We will continue to try to work with individual companies and take a stand legally when the opportunity arises. It is shocking to many of us that though there are some standards and regulations governing insurance, there are none on a Federal or state level which apply to managed care.

Our best hope, I believe, is to work with other mental health organizations beginning with the Federation, in efforts to impact future legislation. Ken Adams, Federation lobbyist, is working with several other groups in a loose coalition designed to advocate for point-of-service options; to make sure reviews are conducted by qualified independent clinicians in a timely manner; to promote the goal of "any willing provider" inside and outside the managed care network (point-of-service options); and to provide consumer education regarding the limits being placed on consumer choice of provider and delivery of service.

The NMCOP Legislative Committee, in addition to myself, includes Laurie Curtis and Ro Gaeta. The tasks we have set for the moment include working with the Consortium to develop its legislative agenda; developing a complete list of all Federations and NMCOP members for lobbying purposes; and working with clinical programs in schools of social work to enable students to see how clinical and legislative goals should work together in a total professional identity.

I hope to be able to continue the outstanding work for the previous Legislative Chair, Alice Medine King, which, to me, is a daunting task. I am hoping to support the efforts of the Federation and the Coalition of Mental Health Professionals and Consumers in developing a list of the ways in which managed care under-

NMCOP in IFPE



Marga Speicher, MSW, Ph.D., BCD

The International Federation For Psychoanalytic Education (IFPE) is an interdisciplinary, multi-theoretical organization in which clinical social workers have participated since its inception in 1990. It has continued to grow to serve more widely its goal: to meet the needs and interests of psychoanalytic clinicians, theorists, education.

The 5th Annual Conference, held in Chicago, Illinois, October 8th and 9th, 1994, centered around the theme Confronting the Challenges to Psychoanalysis. Merton M. Gill, M.D. received the Hans W. Loewald Memorial Award for his lifetime contributions to psychoanalytic thought. In his keynote address, "Psychoanalysis in Transition," he asked participants to examine more deeply the challenges arising from the inner world of psychoanalytic thinking and from the surrounding culture. He brought to the conference the experiences, reflections, thoughts, questions of a lifetime of full engagement in the psychoanalytic field. The key issues he named were explored more specifically

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Frank and the Board. It will then be up to them to decide if another Study Group should be convened, who its members should be, and what its tasks might be.

May I, in closing, thank Elaine Rose for founding and serving as first chair of the group, each of the members for the wonderful work they have done and the cooperative, warm and intelligent way in which they have done it, and the Board and officers of the NMCOP for the support and encouragement they have afforded us. Especially do I want to thank Cess Weintraub, our President, who was always available to me and to our members for wise counsel, caring encouragement, and continuous support. It has been a special honor for me to have served as Chair of this very special group.

mines good clinical principles and standards and have already received some excellent examples from NMCOP members. Please send any experiences you have had in this area — as well as unusually good support from managed care for clinical excellence — to me at 4026 NE. 55th St., Suite C, Seattle, WA 98105.

Finally I urge all of you to join the Coalition, which now also has a National Board drawn from diverse professionals and consumers across the country. Information about the Coalition can be obtained by calling (516) 424-5232. The Coalition is taking the lead across disciplines on a number of legislative tasks.

The more we can work together, the more we will achieve. Thanks for your help.

Coalition Goes National



Update on the Coalition of Mental Health Professionals and Consumers
Joyce Edward, CSW, BCD,
Co-founder and Past Co-Chair

Recognizing the special role NMCOP members have played in the formation and development of the Coalition of Mental Health Professionals and Consumers, we thought there would be an interest in an update on the activities of the Coalition. As many of you know Joe Cattano, Pat Fuchs, Alice Medine King, Michelle Levine, Carlene Tockman, Patsy Turrini and myself were among the founders of the Coalition and most of us have been active Board members since its inception. Members of the NMCOP have also been active supporters and participants.

If the connection between the two organizations needed any more strengthening, it received it from the fact that our past Chair of Legislation, Alice Medine King, was also the Legislative Chair of the Coalition. As most of you know, she served at the same time as Legislative Chair of the Consortium. Thus any legislative effort mounted by the one organization gained the support and active involvement of the others. Those who participate in the lobbying effort at the last Conference in Washington saw this remarkable NMCOP chairperson in action and had the opportunity to discover how much can be done when organizations band together in the pursuit of a common purpose.

Thanks to our involvement and the dedicated efforts of clinicians representing all the major disciplines as well as consumers and their advocates, the Coalition has developed during its short existence into a large organization with more than a thousand members from all over the country. It has inspired the development of chapters and affiliate organizations throughout the country and has provided educational and lobbying material for a variety of mental health organizations and consumer groups. It has lobbied both at the state and national level and its influence has been felt throughout the country.

Throughout the history of the Coalition different group affiliated with it, have sought to work together, to share ideas and to support one another's endeavors. We have faxed, telephoned, conference called, met with other groups and coalitions geographically close and E-mailed. Finally, in November of 1994, the time seemed ripe for us all to meet face to face and explore ways of working together even more effectively.

A Conference in Washington was held that month which was attended by thirty-two leaders of affiliate groups from 16 states (from as far away as Seattle, Washington). The most important accomplishment of that meeting was the unanimous decision to form one umbrella organization: The National Coalition of Mental Health Professionals and Consumers.

The group formulated its mission as follows:

"The National Coalition of Mental Health Professionals is a grass-roots organization of mental health professionals from all disciplines, consumers of mental health services and consumer advocates. Our goal is to preserve the personal privacy and confidentiality of consumers and the integrity and quality of psy-

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EXCELLENCE



PSYCHOANALYSIS IN TRANSITION: A Personal View

Merton M. Gill

"Gill's final volume is about what interested him the most—the nature of psychological therapy informed by psychoanalytic concepts.' In it, he once again demonstrated that his was one of the most youthful minds in contemporary psychoanalysis."

Robert Michels, M.D., Cornell University Medical College
0-88163-112-4 1994 200pp. \$29.95



IF SOMEONE SPEAKS, IT GETS LIGHTER

Dreams and the Reconstruction of Infant Trauma

Lynda Share

"Share has amassed, organized, and integrated a vast amount of psychoanalytic and interdisciplinary knowledge and has skillfully focused it on the dream.... she has convincingly demonstrated that the dream is an archive of the patient's veridical, as well as mythical, reality. We are the beneficiaries of a very rich harvest."

James S. Grotstein, M.D., *Psychoanalytic Books*
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The Psychoanalytic Consortium Hangs Together



Rosemarie Gaeta,
CSW, BCD
First President,
NMCOP

The Psychoanalytic Consortium, founded in 1992, is now formalized by an official vote of membership by the Executive Boards of its four constituent organizations, the National Membership Committee on Psychoanalysis; Division 39 of the American Psychological Association; The American Academy of Psychoanalysis; and the American Psychoanalytic Association.

This joint alliance, The Psychoanalytic Consortium, has the intention to protect the interests of psychoanalysis proper, the practitioner of psychoanalysis, and the consumer.

The four member organizations have formed a By-Laws Committee to define its structure and governance. The structure and governance of The Psychoanalytic Consortium is based on a model of parity and respect for the autonomy of each individual organization.

Members of the By-Laws Committee of the Psychoanalytic Consortium are: Leopold Caligor (Division 39); Rosemarie Gaeta (NMCOP); Judith Schacter and Larry Chalfin (American Psychoanalytic Association); and Josef Weissberg (American Academy of Psychoanalysis).

This committee has prepared a preliminary draft of by-laws which has been approved by the representatives of each individual organization to the Psychoanalytic Consortium Board. At this stage, each representative will bring the by-laws for approval by the Executive Board of his/her constituent organization.

The National Membership Committee on Psychoanalysis in Clinical Social Work, in affiliation with the National Federation of Societies in Clinical Social Work, is the only national organization that protects the interest of the psychoanalytic practitioner in clinical social work. It has been imperative that clinical social workers be treated on a parity with other mental health disciplines.

The leadership of the NMCOP has worked hard to ensure our proper place in the psychoanalytic community. While much has been accomplished in the political and practical arenas in establishing mutual trust and respect, as well as in our efforts towards establishing parity for our profession within the psychoanalytic community, clinical social work still has remaining problems.

For example, our membership is aware that the American Psychoanalytic Association still retains its policy of making a national waiver process necessary for the MSW clinical social work applicant for entry level to its psychoanalytic training programs. This policy of the American Psychoanalytic Association remains a symbol of discrimination against the clinical

social worker and is antithetical to the concept of parity as is embodied in the spirit of the Psychoanalytic Consortium. The NMCOP will insist on addressing this inconsistency in further negotiations with the American.

Change, especially attitudinal change, is an evolving process and cannot be mandated simply by enactment of a law. The Civil Rights Movement in this country certainly attests to this fact. However, parity is the first step to equal opportunity. Parity lays the ground work for people to have actual experiences with those practitioners to whom they have a negative preconception.

These negative attitudes have the potential to affect such issues as future accreditation and certification in psychoanalysis. Some implications are of great concern to the membership of the NMCOP. They must be given careful and dedicated attention by our leadership in order to ensure the protection of the psychoanalytic practitioner in clinical social work.

The American Psychoanalytic Association, which sees itself as an interdisciplinary organization, has been in the throes of coming to terms with integrating its own interests with the interests of the practice of psychoanalysis within the larger psychoanalytic community.

Judith Schacter, President of the American Psychoanalytic Association, wrote in the Fall 1994 issue of *The American*

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Coalition Goes National

Continued from previous page

chotherapy and mental health services through public and professional education and legal and legislative action."

The NCMHPC will serve as the overall organization responsible for instituting, directing and coordinating efforts throughout the country to educate, lobby and legislate. Local groups will continue to operate, particularly as regards local and state legislative activities. A National Board is being developed. As of now there are two social workers on the Board, Sheila Peck of Island Park, NY and Joan Shapiro of St. Louis, Mo. (look for Joan's excellent article on managed care in the next *Clinical Social Work Journal*). The Co-founder and Co-chair of the Coalition, Karen Shore, Ph.D. has been elected Interim Executive Director until the

group is officially incorporated.

This change should greatly increase the organization's capacities to lead the way in health care reform. It will develop a national coordinated effort and will seek to increase financial resources as well as promote increased membership so that, among other things, we will be in a position to conduct an ongoing national media campaign and national lobbying effort. At the same time the National Coalition will continue to develop and offer the resources, consultation and support needed by local members. These include the distribution of lobbying kits, a bi-monthly newsletter, fact sheets, etc.

For now Coalition members will continue as they have been. Those NMCOP members who have not yet joined the Coalition are urged to do so. All members are encouraged to become more active. Contact with the Coalition will still be made by writing P.O.

Box 438 Commack, New York 11725-0438, telephoning or faxing (516) 424-5232 or through E-Mail "NCMHPC@aol.com". The Coalition office will remain for now in the basement of the home of Carlene Tockman, a NMCOP member.

Though the founding NMCOP members of the Coalition have declined serving on the National Board, we remain supportive and active, albeit to a lesser degree. As you can imagine, these past years of active involvement which have been exciting, challenging and rewarding have led us nonetheless to seek a bit of a respite. We do so, with great confidence. The new Board members, all of whom I have had the pleasure of working with and meeting in person, have impressed me with their devotion, integrity, intelligence, creativity and willingness to work hard. Be assured that the National Coalition is in the best and brightest of hands!

NMCOP in IFPE

Continued from p. 6

in workshops, panels, papers throughout the weekend which concluded with the Presidential Address, "The Psychoanalytic Process and Interiority: Inherent Challenges and Resistances."

The NMCOP holds institutional membership and many NMCOP members hold individual memberships. Clinical Social Workers have been actively involved in planning and programming, as well as being presenters at all IFPE conferences. I served as President in 1994 and enjoyed most fruitful, collegial relationships with psychoanalytic clinicians, theorists, educators, from various professional disciplines and theoretical orientations. The participation of clinical social workers in the IFPE is most welcomed and valued. Our clinical experiences, our perspectives and knowledge enrich IFPE's discussion and we profit from the interdisciplinary and multi-theoretical exchange.

The IFPE's 6th Annual Conference will be in Toronto, October 13 through October 15, 1995 at the Toronto Hilton Hotel with the theme "The Future of Psychoanalytic Education." Mark your calendars, come, contribute, learn, enjoy! For information about the IFPE contact Marga Speicher, MSW, Ph.D., 6815 Washita Way, San Antonio, Texas 78256-2304, Telephone (210) 698-5520, Telefax (210) 698-2477.

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Interview with Anthony LaBruzzo - See Page 6

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Effects of Early Trauma



Review by Judith R. Shore, Ph.D., BCD

If Someone Speaks, It Gets Lighter: Dreams and the Reconstruction of Infant Trauma.

Lynda Share; Hillsdale, NJ; The Analytic Press; \$36.00; 256 pp.

In this fascinating and well written book, Lynda Share poses the question: "How do the earliest experiences of life etch their mark on the human character?" In a careful, step by step examination of the elements of trauma, psychoanalytic reconstruction, prenatal and neonatal mental life, infant memory, and psychoanalytic dream theory, Share attempts the answer. She succeeds admirably.

Share accesses wide ranging sources from numerous fields including psychoanalysis, experimental psychology, neurobiology and child psychiatry. The information is presented in a clear and logical manner, taking the reader through the existing literature in a way that makes it both exciting and easy to read. She follows her review of past and current research with extensive clinical material that illustrates and reinforces her arguments.

These data, Share says, "point to a stunning conclusion: birth and early infant trauma can have enduring effects and can be encoded in various memory systems such that they can be accessed through dream analysis and other psychoanalytic methods" (p.226).

First, Share carefully reviews Freud's changing thinking on trauma and its effects, and his emphasis on the process of reconstruction, "based on the assumption that the dynamic unconscious preserves the past and that the past remains alive in the present. He considered it a matter of the "skillfulness of our technique whether or not we can find the past" (p. 33).

Share then looks at Freud's ideas about memory, comparing them to recent research, noting the limitations of his energy theory and his failure to explore and elaborate details of the early mother-infant relationship, as his focus remained on the Oedipal experiences as the crucible of all psychopathology. She appreciates Freud's beginnings, and then courageously continues where he left off.

Next, Share looks critically at both histor-

ical and current research into infant and childhood trauma. Shock trauma usually originates from one or a series of real external events that overwhelm the child's abilities to cope and capacities to defend effectively, creating a situation of internal helplessness. These situations would include an assault, surgery, or accident, as well as traumatic birth procedures and experiences or the death of a parent.

A strain trauma is qualitatively different and refers to "the effects of a long-term situation involving the accumulation of frustrating tension" (p. 42). Parental impinge-

ments, inadequate care, and projections of the mother's pathology into the child are the main sources of such trauma. Share emphasizes that the object relations theorists' attention to the mother-child interactions, to the mother's misattunements and inability to provide affect-regulating functions have enabled us to understand the depth and profundity of such experiences on the developing personality of the infant.

Share also carefully explores the meaning of psychoanalytic reconstruction, infant mental life and infant memory. The evidence she gathers suggests that "mental equipment and the potential for mental life

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The Psychoanalytic Consortium

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Psychoanalyst,

"More work was done in concert within and with others outside of our Association than has been acknowledged, but it was far from our potential for integrated efforts. The pressing need to address external accrediting and credentialing must reap the rewards of this hard earned experience of communication and compromise and sidestep the painful temptations of splits and struggles

between psychoanalytic organizations and Board and Council, which have a way of turning us away from the harsh reality of the context of psychoanalysis at this time."

There are many representatives from all four constituent organizations who sit on the Board of the Psychoanalytic Consortium that believe strongly "We (as psychoanalytic practitioners) must all hang together—or we 'hang' separately." The NMCOP is committed to continue with diligence our efforts to work together as a unified coalition so that psychoanalysis remains a vital profession fostering academic excellence and effective treatment.

Goal to Double Members



Membership Committee Report
Elaine Smith, MSW,
BCD

Current NMCOP membership spans thirty states, three European countries, and Canada! In eleven different regions around the country, COP social work analysts and psychoanalytic psychotherapists have created area groups which regularly sponsor clinical presentations, study groups, workshops on federal and state legislation and legal issues impacting on psychoanalytic practices, inter-area speaker exchanges, and opportunities for psychoanalytically-trained social worker clinicians to share their concerns, ideas, and professional experiences.

Though many members are concurrently

affiliated with various clinical societies and psychoanalytic institutes, they nonetheless recognize that the NMCOP is the only organization anywhere with the specific aim of fostering and protecting the rights of qualified social workers to practice psychoanalysis and psychoanalytic psychotherapy.

Our goal for 1995 is to double our national membership. We are asking every current member to invite at least one colleague to join our organization's efforts this year to promote and protect their competency and authority to practice as social work analysts and psychoanalytic psychotherapists. In doubling our members, we will double our strength to advocate for ourselves and our chosen profession!

We welcome inquiries regarding membership. Please contact Elaine A. Smith, Membership Chair, at (718) 442-7018, for information and answers to any questions that you may have.

A Message from the Conference Director



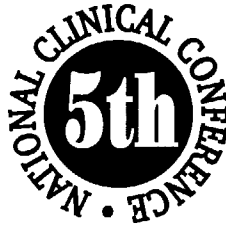
*Carol Greifer, CSW,
BCD
NMCOP Conference
Director*

One of the many goals of NMCOP is that of providing an educational arena in which the clinical social work community can learn, exchange ideas, and expand the horizons of our thinking. In an effort to meet the needs of our membership and the social work community at large, we have put together an unusual conference entitled, "Mind, Memories and Metaphors: Psychoanalytic Explorations." It will be held at the Grand Hyatt, New York, October 27-29, 1995.

From Betty Friedan's address on generativity in older age to the Hampstead's focus on children, from papers on the severely disturbed to papers on psychoanalysis with the neurotically structured, the conference offers the creative talents of clinicians who will address a broad spectrum of topics and interests. We will offer over forty papers and panels which will expand current thinking from the perspectives of differing theoretical points of view.

This year we are offering something new. On Thursday, October 26, the National Study on Social Work and Psychoanalysis will present a special all-day pre-conference workshop entitled, "Experiences in Supervision: Psychoanalytic Supervisors And Supervisees At Work." Co-chairs Roslyn Goldner, Judy Ann Kaplan and Elaine Ross have assembled an outstanding roster of participants.

We would like to have the opportunity to welcome you personally and to have you share the fun, collegiality and excitement the conference offers. There will be time for theater, for good food and a fabulous "New York Experience." Don't be left out! Register now.



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Local Committees Forming



National Liaison Report
Margaret Frank,
LICSW, BCD

The telephone is a marvelous invention!

As President-Elect I have functioned as the liaison to the different areas, "old", new and forming. As of the time of this report, there are three areas working to form local committees: Florida, Oklahoma, and

Washington D.C. I will meet with Jarpley Long who is with the forming D.C. area. Cathy Buirski (Colorado) is attempting to seed a group in Oklahoma through a satellite training program. Lynn Leavy is attempting to span the distances in Florida into order to engage psychoanalytic psychotherapists and psychoanalysts in the state.

Contact with the different areas throughout the country highlights some of the differences in various regions and the parallel nature of their concerns. There are quite a number of areas in which the relationship to

the State society and the NMCOP area committee is strong. They join together on program and planning to bring rich programs and projects to their constituents. There are other areas in which the State Society and the NMCOP area group have not yet been able to enrich each other.

A state of tension exists without full awareness of the common nature of concerns and interests. Forming a national organization is an on-going process. We welcome each new area and are committed to work on stresses and tensions.

Effects of Early Trauma

Continued from p. 10

exist from the earliest time of life" (p. 116).

Research in neurobiology, child psychiatry and experimental psychology is cited which lends support to the concept that early perceptual and affective experiences and traumas are stored in the unconscious/conscious mind and can be retrieved later on. She addresses diametrically opposed theories and comes to the fascinating conclusion that two different types of memories are actually being addressed.

The first is Terr's (1988) concept of "behavioral memory", which is analogous to Freud's concept of "perceptual image", and lends itself to veridical reconstruction. The second type of memory is Terr's "verbal memory", similar to Freud's "memory image", which is often distorted, modified and superimposed on by current and developmental experiences.

Several prominent researchers agree with this assessment. Mardi Horowitz (1994) states, "Once experienced, the perceptions of a traumatic event seem to be inscribed in a special form of memory. {which} have a tendency to unusually vivid, repeated imagistic representation... The traumatic event tends to persist in the mind not only in the form of unintegrated and active memories, but in schemas in which the self is relatively vulnerable to threats of death, dismemberment, loss, insult, degradation, or torture" (p. 494).

Van der Kolk and Fisler (1994) add that memories of traumatic experiences "may be stored outside conscious awareness and expressed in somatic symptoms" (p. 161), and Krystal (1978) emphasizes that the differentiation of affects and speechless terror

that accompany trauma, interferes in an essential way with the capacity to articulate feelings, leaving them to be mutely expressed by bodily dysfunction.

In the last three chapters, Share focuses on psychoanalytic dream theory, cases of reconstruction of infant trauma from the literature, and eight analytic cases of her own. This is a most moving and remarkable series of case vignettes, each centering around a pivotal dream of the patient's which they analyze in a thorough, careful fashion. Share invites us into her own process as well as the patient's; the material is rich and powerful.

She shows profound respect for the essential person in each case. Her work illustrates the importance of the therapist's ability to not be like the individual's original objects, but to be attuned and capable of holding the fragile self while exposing the unconsciously remembered traumas. She is ruthlessly honest and able to acknowledge to herself and to the patient that her prior lack of understanding of the patient's essential schema or metaphor was experienced as a repetition of the original traumatizing mother, who was "not in touch with the mind of her baby" and, I would add, with the affect of the infant-self.

Thus her exquisitely sensitive understanding and both reconstructive and here-and-now transference interpretations were able to touch the depth of these patient's primal experiences. As she states: "To touch the patient we must touch the part of the patient that is not yet conscious" (p. 240).

Share reminds us that dreams are not only a reflection of the "core of the unconscious," but remain our most significant access to it. The noticeable shift in affect state of the patient is an observable verification of our accuracy in understanding what was previ-

ously hidden. The most controversial issue in this book is Share's contention that memories of actual birth experiences are central.

In my reading of her cases, I noted that there was also ongoing strain trauma—a continual misattunement with the primary caregivers—that may be of even more significance in the shaping of the individual's personality. I agree with Share that more research is needed to clarify the existence and function of these early memories.

This exciting book has tried to stretch our understanding by attending to findings in adjacent fields, and carefully explicating both the constraints they place on our psychoanalytic hypotheses and the new avenues they open for exploration. Such heuristic cross-fertilization is essential if we are to develop more powerful theories. Share's contribution not only enriches our clinical work but pushes the boundaries of theoretical generalization as well.

Notes

Horowitz, M.J. "The Effects of Psychic Trauma on Mind: Structure and Processing of Meaning." In Barron, Eagle and Wolitzky, Eds. *Interface of Psychoanalysis and Psychology*. Washington, DC, American Psychological Association, 1992, 489-500.

Krystal, H. (1978). "Trauma and Affects." *Psychoanalytic Study of the Child*. 33, 81-116.

Van der Kolk, B. and Fisler, R. "Childhood abuse and neglect and loss of self-regulation." *Bulletin of the Menninger Clinic*, V. 58, No. 2 (Spring 1994), 145-168.

Judith R. Schore, Ph.D., BCD is a California licensed clinical social worker in private practice; Core Faculty, California Institute for Clinical Social Work; Visiting Lecturer, University of Southern California School of Social Welfare; Clinical Supervisor, Airport-Marina Counseling Center

Reports from Area Committees



Curriculum Development



Maine Area Report
Cathy Siebold, DSW
Area Chair

For the past two years a small group of psychoanalytically oriented social workers have held monthly study group meetings. This group's purpose has been two fold: to establish a local area group of the Committee on Psychoanalysis and to establish a psychoanalytic presence among social workers in Maine.

In Maine, through the Society for Clinical Social Work an Advanced Training Program in psychodynamically oriented treatment methods has been started. As Chair of the Committee that developed the program, I have been involved in curriculum development and recruitment of social workers to train and supervise candidates.

Although still developing, we are expanding the curriculum for the fall to include core courses in the History of Psychoanalytic Thought, Introductory Case Seminar, and Contemporary Theories.

June Agenda



Massachusetts Area Report
Margaret G. Frank,
LISCW, BCD

The Massachusetts area is looking forward to an early June meeting. In addition to the important opportunity to network and to increase our membership, there will be a number of important items on the agenda:

STANDARDS: Discussion of the NMCOP standards for training in psycho-

analytic psychotherapy and psychoanalysis.

CERTIFICATION IN PSYCHOANALYSIS: Review of the work of the Psychoanalytic Consortium and the new requirements adopted by the State of Vermont for certification of psychoanalysts.

OCTOBER 1995 Meeting of NMCOP in N.Y.C.

COLLOQUIUM FOR FALL 1995 Planning for meetings to discuss works in progress

MANAGED CARE - role of NMCOP in monitoring ethical issues which arise through managed care.

AREA CHAIR: the election of a new area chair since the current chair will become president of NMCOP in July.

Children Victims of Violence



Connecticut Area Report
Judith Freed, Area Chair
Report by Greta Ospa,
CISW, BCD

The Planning Committee of the Connecticut Chapter of COP whose membership is open to all Connecticut members of NMCOP has met several times in the past year to determine the interests of the membership, organizational structure, and to plan clinical presentations.

The Connecticut chapter of NMCOP has defined itself as an organization that has as its separate focus and mission the orientation to psychoanalytic theory and technique as applied to a variety of clinical work (e.g. short term psychotherapy, psychoanalysis, couples treatment, group work).

Organizationally, we have elected to maintain a close connection to CSCSW, Inc. by being a standing committee rather than a separate professional organization

within the state.

In November of 1994 we sponsored a presentation by Dr. Steve Marans who brings his psychoanalytic training and understanding of child development to an innovative program that deals with the impact of community violence on children. Dr. Marans outlined the collaborative program between the Yale Child Study Center and the New Haven Department of Police Service, as well as presenting brief clinical case vignettes of the treatment of children who have witnessed or been the victims of violence.

"In work with children and families exposed to violence, the development of a program on Child Development and Community Policing addresses another aspect of psychic trauma that occurs when what Freud referred to as the 'actual danger' (Freud, 1926) is in the form of gunfire, wounding and death. In the current collaboration developed between the Yale Child Study Center and the New Haven Department of Police Services, child analysts and analytically informed clinicians have turned to the police as the professionals who have the greatest amount of immediate and sustained contact with the children and families most directly in the line of fire." (Marans, S., "Community Violence and Children's Development: Collaborative Interventions", Ch. 6, Children and Violence, Vol. 11 *The Child in the Family*. Chiland, C., & Young, J. G., Eds. 1994.) We thank Dr. Steven Marans for sharing his special knowledge with us.

On Sunday, April 23rd, 1995 there was a clinical case presentation by Doriene Sorter, Ph.D., CSW entitled: "A New Perspective on Patient-Therapist Interactions: Procedural Knowledge and Therapeutic Action." Dr. Sorter is a graduate and member of the Institute for the Psychoanalytic Study of Subjectivity. She received her doctorate in Clinical Social Work from New York University and is a member of the New York State COP. We had an interesting presentation and discussion, and welcomed new and current members of the Connecticut Committee on Psychoanalysis.

Reports from Area Committees



Three Programs Sponsored



Pennsylvania Area Report
Susan S. Levine,
MSS, LSW

Our area group has continued to meet as a small study group. The focus of our discussions moved from female psychology to a consideration of the intersubjective approach to psychotherapy and psychoanalysis.

We have co-sponsored with the Pennsylvania Society for Clinical Social Work three programs: this fall clinicians and scholars representing a variety of perspectives (including Jennifer Bonovitz, Ph.D. and Deborah Anna Luepnitz, Ph.D.) discussed a case of sexual abuse, and last spring I presented, "The Artist as a Young Woman; A Case Portrait" with discussants Elisabeth Young-Bruehl, Ph.D. and COP member Jeffrey Applegate, D.S.W.

We look forward this spring to an evening with Prof. Doug Davis of Haverford College who will share some of his original research on one of Freud's little-known early cases. I am pleased to report that Marsha Pilz and Lois Schneider have agreed to constitute an Executive and Advisory Committee to the Area Chair. Congratulations are due to Lois on her graduation last fall from the Institute for Psychoanalytic Psychotherapies.

Collaboration with other professions regarding mental health politics has continues; psychologist Margaret Baker, Ph.D. is organizing a local chapter of the Coalition of Mental Health Professionals and Consumers and has asked me to be on the board. I am immersed in my first year of training at the Philadelphia Psychoanalytic Institute where new COP member Anne Sclufer is a classmate.

Is it spreading the PR net too far to say in this forum that I am looking for control cases?!

Free Supervisory Groups



New York/New Jersey Area Report
David G. Phillips,
DSW, BCD

Since the next National Conference of the NMCOP will be held in New York, members of the New York/New Jersey area are especially interested in planning in relation to it. Currently we are developing a program in conjunction with the pre-conference seminar titled "Experiences in Supervision: Psychoanalytic Supervisors and Supervisees at Work" being planned by the National Study Group on Social Work and Psychoanalysis.

In order to help generate interest in and material for this exciting program, we have organized a series of short term, small group supervisory experiences which will be offered during the spring to all members of the State Societies for Clinical Social Work in New York and New Jersey.

These supervisory groups, to be offered without cost to the participants, will be conducted by some of the most experienced psychoanalysts and psychoanalytic supervisors in the area. Many groups will focus on specific areas of treatment concern such as understanding and interpretation of projective identification; British object relations theory; psychoanalytic work with children; and modification of psychoanalytic techniques for work with severely disturbed patients.

Another exciting activity, to be carried out in a busy spring, will be the first in a series of brunches to be co-sponsored by the New York/New Jersey Area Committee and the New York State Society for Clinical Social Work. It is the intent of these "get acquainted" brunches to present topics of interest to both psychoanalyst and all clinical social workers in an informal setting and format.

For the first brunch, to be held May 21st, we are particularly fortunate in being able to present Dr. Herbert Strean whose extensive writings and lectures have done so much to

introduce and clarify psychoanalytic theories and issues. His topic, which is also connected to the Pre-Conference Seminar, will be "Thoughts on the Supervisor's Multiple Countertransferences".

Conference and Classes



North Carolina Area Report
Erica Rothman, MSW,
CCSW

The North Carolina Committee on Psychoanalysis continues to establish its presence among other professional associations in the state. The COP co-sponsored an extremely successful conference in October with the N.C. Society for Clinical Social Work on: "Help For the Therapist: Making Ethical Decisions About Managed Care." Cecily Weintraub, Ph.D., President of the NMCOP, was keynote speaker.

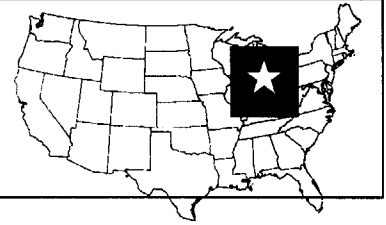
Her talk, "The Psychopathology of Everyday Managed Care," addressed the complex ethical issues that arise when a third party enters the dyadic relationship of therapist and client. In the afternoon session, a panel of other professionals continued the dialogue, giving participants a comprehensive overview of issues to look out for when considering using managed care with clients. Two months later, the COP offered a follow-up discussion group to which any Clinical Society member was invited.

The N.C. Psychoanalytic Psychotherapy Study Center will "graduate" its first class of eight advanced curriculum students in May. In addition, nine students will complete a one-year introductory course which was offered for the first time in the Fall of 1994. Plans for the Fall of 1995 include offering both the one-year introductory course again, as well as admitting a new class to a second advanced curriculum.

While the Study Center is administratively a Division of the N.C. Psychoanalytic Society, it has active participation of COP

Continued on next page

Reports from Area Committees



Leaders and Partners



Minnesota Area Report
Laurie E. Curtis,
MSW

Conference and Classes

Continued from previous page

members and other social workers as Steering Committee members, classroom teachers, supervisors and as students in the program. For information about the program, contact Chris Erskine, CCSW, at (919) 929-1888.

N.C. COP members will be polled in early Spring 1995 to determine on-going direction of the committee. We anticipate the formation of study groups, quarterly evening discussion groups, and perhaps an annual conference with an out-of-town speaker.

COP members Hilde Gasiorowicz, Celeste Norcia, and Stephanie Koehler are participants in a year-long "Survey of Contemporary Psychoanalysis Program" sponsored by the Minnesota Society for Contemporary Psychoanalytic Studies. Edythe London is the President of the Minnesota Psychoanalytic Foundation, while Rita Weiss has organized special projects, and particularly the Peer Supervision groups for the Foundation in the Twin Cities area. Elizabeth Horton continues her energetic involvement in Mental Health Care Reform and managed care. Laurie Curtis is a member of the Foundation sponsored three-year Psychoanalytic Psychotherapy Training Program. members are also involved in numerous other professional coalitions, including the Minnesota Mental Health Professional Coalition, and the Minnesota Coalition of Licensed Social Workers.

We continue to define our relative roles and mutual strengths with the wider psychoanalytic community. We hope to contribute to this vital national dialog by joining you at this year's fifth national conference in New York in October. See you there!

The Minnesota Committee on Psychoanalysis continues to exert its regional presence via its ongoing activities, both collectively and individually. Our Committee gathers monthly for our Journal Club and individual members have maintained their efforts both locally and nationally. Minnesota COP members continue to evaluate areas in which their psychoanalytic interest in clinical practice and in advanced educational offerings might be furthered is interdisciplinary collaborations. We have, therefore, carefully explored collaboration with other psychoanalytically-interested disciplines

to achieve together the best possible service for our patients and our community.

Individual COP members remain in major leadership roles in our community. Chad Breckenridge is President of the National Federation of Societies For Clinical Social Work, Inc. He and Anne Gearity continue to serve as faculty for the Advanced Clinical Studies Program at the University of Minnesota. Peter Grant is a senior candidate at the Institute For Psychoanalysis in Chicago, and thus will be our first full-fledged social work psychoanalyst in the Twin Cities.

Reports from Area Committees



Meetings and Speakers



Texas Area Report
Jim Engelbrecht,
LMSW-ACP, BCD
Texas Chair

We have been very active organizing local activity in the Dallas area. Regular meetings began in the Fall of 1994 and continue through May, 1995. Our opening meeting consisted of a multi-disciplinary discussion of the place of clinical social work in the psychoanalytic landscape. Fred Griffen, MD, and Larry Shadid, MD, from the Dallas Psychoanalytic Society participated along with the President of the Dallas Division 39, Laural Bass Wagner, Ph.D., as well as two social workers currently in analytic training in Dallas, Gayle Marshall, LMSW-ACP, and Sarah Raab, LMSW-ACP.

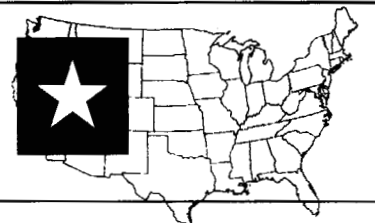
That meeting was followed the next

month by Elaine Sheldon, LMSW-ACP, and Gail Weisblatt, LMSW-ACP, discussing the nature of a good psychodynamic social history. In January, 1995, a prominent local psychoanalyst, Maxwell Soll, MD, spoke on the subject of "Brief Psychoanalytic Psychotherapy, An Oxymoron". In February, Jane Walvoord, LMSW-ACP, our Dallas Chairperson, presented a case of an "entertaining patient" in conjunction with an article on "acting out".

In March, 1995, Cess Weintraub, Ph.D., President of the NMCOP, presented at a spring workshop jointly sponsored with the Texas Society for Clinical Social Work. This will be a day-long conference on "Helping The Therapist Make Ethical Decisions in the Era of Managed Care". In April, Gayle Marshall, LMSW-ACP, a local social worker in analytic training, discussed a reading. In May, Jim Engelbrecht will lead a discussion on impasses in psychotherapy.

Due to the emphasis on local activity, membership is increasing in Dallas, and we are hopeful that other major cities in

Reports from Area Committees



Washington State Mental Health Benefit



Pacific Northwest Area Report
Laura Groshong, MA, BCD

The primary activity of NMCOP in the Pacific Northwest this past year has been in the area of health care reform. In 1993, the Washington state legislature passed a bill requiring the state to develop a Uniform Benefits Package which would cover all Washington state citizens by July 1, 1995. Health care was exhaustively reviewed by a group formed specifically for this purpose, the Washington Health Services Commission. There were numerous public meetings by the five committees which made up the Commission and a report was issued by the Commission on December 1, 1994.

Our branch of NMCOP has taken an active role in the development of the mental health component of the Uniform Benefits Package including serving on committees, consumer education and lobbying efforts. NMCOP has worked closely with the WSSCSW (Washington State Society for Clinical Social Work), the local branch of the Federation and NASW as well as allied mental health organizations in coordinating a broad-based benefit all groups could support. NMCOP also took a leading role in educating other mental health professionals on the issues (fee-for-service, parity, NCQA standards, any willing provider, medical necessity, confidentiality and utilization/review) and how to present our concerns to lobbyists. We have also had a close working relationship with the local branch of the Coalition of Mental Health Professionals and Consumers.

The results of this massive project are in process as this is written. It appears there will definitely be a mental health benefit, possibly 30 sessions/30 inpatient days per year as recommended by the Commission. However, the case management of the ben-

efit will seriously impact the degree of care actually approved and we are working hard to make the benefit unmanaged. Nonetheless, our members have a good feeling about the impact we have had on the health care reforms and the increased understanding we have fostered of mental health problems and their treatment.

Presentations and Panel Discussions



Northern California Area Report
Muriel Brotsky, MSW

Our chapter continues to see its major function as providing educational and collegial support to interested clinical social workers. An active steering committee, with Velia Frost as co-chair, has planned four Saturday morning no-admission (except for donations) meetings, in which members of our community can present and discuss with colleagues their current thinking. Judith Kay Nelson, PhD, presented "Seeing Through Tears — a theoretical and clinical View of Crying". Susan Hanks, PhD, LCSW, Founding Director of the Family and Violence Institute, presented "Clinical Caveats and Counter-Transference Challenges with Battered Women and Men who Batter".

There has been increased interest in psychoanalytic training for social workers with the opening of our newest institute: The Psychoanalytic Institute of Northern California (PINC). The San Francisco Psychoanalytic Institute is also now actively accepting social workers. Three new graduates, Jill Horowitz, Jane Jordan and Barbara McSwain, took part in an interesting panel discussion of "The Effect of Psychoanalytic Training on the Practice of Psychotherapy". Jill Horowitz, Training and Supervising Analyst of PINC, will also talk about

"The Analyst as New Object: Clinical Presentation of Three cases".

We are planning one large community meeting at which Dr. Judith Wallerstein, author of "Surviving the Break-up: How Children and Parents Cope with Divorce", will present the research on which her new book "The Good Marriage: How and Why Love Lasts" is based. This event will be co-sponsored by the California Society for Clinical Social Work.

We were very sorry to lose our long term Area Chair, Billie Lee Violette, and are grateful for her past dedicated service. We are happy that she is pursuing her psychoanalytic training at PINC, and we wish her well.

Presentations and Newsletter



Southern California Area Report
Ellen G. Ruderman, Ph.D., SciD, BCD

Despite the PTS suffered by all after the earthquake, the Southern California Area Committee had an exciting and productive year. On January 6 and 7, 1994, an excellent conference featuring Patrick Casement whose paper, "On Being in Touch: A Clinical Study of the Working Through in an Analysis of Cumulative Childhood Trauma," enjoyed a positive response, and was followed by many social workers interested in knowing more about the COP.

In the "Reflections: A Series of Psychoanalytic Papers," Maggie Magee, MSW presented (February, 1994) "The Hidden Transference: The Early Father and The Female Therapist"; Lynda Chassler, Ph.D. presented (March, 1994) "In Hunger I am King - Understanding and Treating Anorexia Nervosa from a Psychoanalytic Perspective," discussant

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was Dan Paul, Ph.D.; Judith Hyman, Ph.D. presented (June, 1994) "Shifting Gender Identifications in the Unfolding of Fathering: On Intimacy Between Fathers and Their Babies".

Educational programs for members only in 1994-95 included Lynda Share, Ph.D. "Dream Interpretation Course," Jane Rubin, Sci.D., Supervision and Consultation Group (with emphasis on Transference)," Jean Sanville, Ph.D. "Professional Writing Course."

The year culminated in an exciting membership meeting with presentations on "Managed Care - A National Issue: Clinical Considerations." Tanya Moradians, Ph.D. New membership chair, described it as follows: "The Southern California Area COP had its first combined membership/educational meeting at the home of Dr. Jean Sanville. Overall, an excellent attendance of new and renewing members. All expressed great interest in the topic of managed care. The presentations by Drs. Ellen G. Ruderman and Rosalyn Benitez-Bloch, "Treatment Repercussions of Managed Care," were superb and there followed an enthusiastic discussion from the audience who were reluctant to eventually end the day's activities."

The Southern California Area Committee takes pride in presenting its first newsletter, The Scope, with Editor, Rosalyn Benitez-Bloch, DSW and Publication Chair, Judith R. Schore, Ph.D. at the helm.

Focal concerns of the Committee continue to be the encroachments and intrusions of managed care, the plight of psychoanalytic and psychodynamic clinical sequences at the varying university schools of social work, and increasing interest and concern re: the waiver on MSW's by the APA. Meetings are being held to continue research all three.

Appreciation to chairs Wm. Noack (ed/prog), Roz Benitez-Bloch for The Scope and her numerous other contributions, Pat Sable (treasurer), Lynda Share (liaison to Institutes), Judith Schore (publicity), Tanya Moradians (membership), Jennifer Abbott (liaison to California Coalition/Div. 39), Evelyn Tabachnick (public relations) and of course, to Jean Sanville for graciously lending her assistance and her home for so many of our programs.

Area Reports

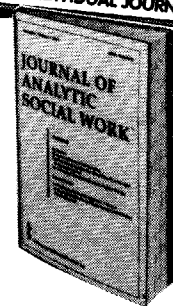
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Judith Holm, MSW, BCD

Died March 4, 1995

Judith Holm became a national leader in the drive to upgrade standards for Clinical Social Work. She was in the field since 1963, worked in a variety of mental health settings and established her private practice in 1970.

As a charter member and President of the Ohio Clinical Society, she was instrumental in developing and passing licensing laws for social workers in Ohio. She was President of the National Registry of Health Care Providers in Clinical Social Work and was instrumental in developing and establishing a

National credential for Clinical Social Work, Board Certified Diplomate.

She was the founding President of the American Board of Examiners in Clinical Social Work established in 1987 which now has 15,000 registered BCDs.

Judith was also elected to the National Academy of Practice in Social Work as a Distinguished Practitioner in 1989. We have lost a valued Clinical Social Work Leader and a very good friend.

— Adrienne Lambert, CSW, BCD

CSCSW Anniversary



Colorado Area Report
Cathy Krown Buirski,
MSW

The new President of the Clinical Society, Howard Snooks, desires more active participation of the NMCOP. He wants to be a President who encourages a connection between the NMCOP and the clinical society. We are working together to increase membership.

As I indicated in the last Newsletter, efforts to increase membership in the NMCOP here have been a difficult process. Clinical social workers seem reluctant to join another organization. Our Newsletter and Fact Sheet have been distributed at numerous lectures and social work functions in the last few months.

The Colorado Society for Clinical Social Work had a 20th anniversary celebration and conference in Boulder in October and asked me to present a paper on psychoanalysis and social work. A paper presented by C. Buirski was well attended and lively discussion about psychoanalytic thinking

Social workers are active in psychoanalytic presentations at the two institutes here. The Colorado Center for Psychoanalytic Studies, where I am the Director of Training, has a satellite program in Oklahoma City. The social workers in that program are interested in joining the NMCOP, and may join as independents.



Jean Sanville

Facilitating Healing: A Psychoanalytic Perspective

Jean Sanville and Joyce Edward, Co-editors

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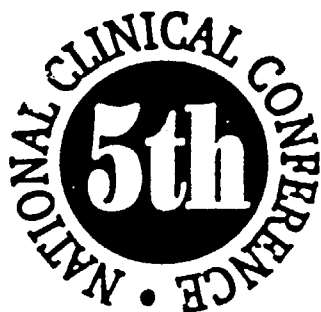
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User Friendly Guide to Acronyms for the Psychoanalytic Clinical Social Worker

AASSWB	American Association of State Social Work	CPP	The Council of Psychoanalytic Psychotherapists	NCMHPC	National Coalition of Mental Health Professionals & Consumers
ABAB	American Board for Accreditation in Psychoanalysis	CSWE	Council on Social Work Education	NFSCSW	National Federation of Societies for Clinical Social Work
ABE	American Board of Examiners in Clinical Social Work	DIV 39	Division of Psychoanalysis of the American Psychological Association	NICSWA	National Institute for Clinical Social Work Advancement
AMER.	The American Academy of Psychoanalysis	IFPE	International Federation for Psychoanalytic Education	NMCOP	The National Membership Committee on Psychoanalysis in Clinical Social Work, Inc.
ACAD. of Psa.	The American Psychological Association	IPA	The International Psychoanalytic Association	TAP	The American Psychoanalyst (Newsletter of The American Psychoanalytic Association)
APsaA	The American Psychoanalytic Association	JAPA	Journal of the American Psychoanalytic Association	USDOE	United States Department of Education
CORPA	Commission on Recognition of Postsecondary Accreditation	NAAP	National Association for the Advancement of Psychoanalysis		

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**Experiences in Supervision:
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Session 1. **Rosemarie Gaeta**, Moderator. Supervisor **Roslyn Goldner** will work with supervisee **Kerry L. Malawista**.* Supervisor **Rosemary Lukton** and supervisee **Diane C. Dean*** will discuss the session.

Session 2. **Jerome Cohen**, Moderator. **Elaine Rose** will supervise **Judith D. Schiller**,* with a follow-up discussion between supervisor **Judy Ann Kaplan** and supervisee **Susan Levine**.*

CASE PRESENTATION: An Inquiry into the Influence of Differing Theoretical Perspectives

Session 3. **Joyce Edward**, Moderator. This session will start off with a case presentation by **Lynda Chassler**.* Then we will be especially privileged to hear comments on the case by practitioners from three theoretical backgrounds. **Barry M. Biven** will represent the traditional theoretical perspective, and **Crayton E. Rowe** will comment from the self psychological viewpoint. **Jean Sanville**'s observations will incorporate the British independent tradition with social constructivism.

PANEL DISCUSSION: Full Audience Participation

Session 4. **Marga Speicher**, Moderator. A panel discussion will allow participants to interact directly with supervisors and supervisees from all sessions.

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* Invited participant.

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