

# aapcsw

## American Association for Psychoanalysis in Clinical Social Work

Winter 2015

# newsletter

## From the President

Penny Rosen, MSW, BCD-P

A subtitle of a conference theme—“belonging and not belonging”<sup>1</sup>—considers the intrapsychic as well as contextual phenomena, including the influence of psychosocial, sociocultural factors. The topic refers to the tension that exists between the force to belong and the pull to be autonomous. Acknowledging these complex forces at play brings up the question of how this impacts us as an organization. How do we as a professional organization create a meaningful place of belonging for our members? It raises other questions: How can we encourage more participation among our membership? How can AAPCSW serve as the organization that members affiliate with as their way of giving forward and promoting the profession?

One main aim of AAPCSW is to provide an organizational identity. Though our theoretical orientation may differ, the basic principles of psychoanalysis and psychoanalytic thinking are our common bond. Over time forums have been established to reinforce the sense of organizational belonging. Our newsletter, website, and listserv are fruitful communication vehicles for our members.

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[www.aapcsw.org](http://www.aapcsw.org)

Committees, such as Diversity/Otherness, Social Justice/Responsibility, Scholarship, and Child/Adolescent were formed to contribute to newsletter columns and to conference panels. The New Professionals Committee was instituted for mentoring new professionals, in addition to providing this group their own listserv. The Area Chairs organize regional educational programs and meetings on topics of interest that will attract and connect members. These efforts advance our profession and create a sense of belonging among us. But we still need to explore new avenues for more involvement with the membership and ways to build our community for the next generation.

Another strong position of AAPCSW is our educational commitment: to promote and disseminate the understanding of psychoanalytic theory and knowledge. Our new website, launched in October 2014, will allow us to add and develop educational resources including the possibility of online publications. To engage the larger psychoanalytic community, our Public Relations Committee is working with the Consortium of Psychoanalytic Organizations on a campaign to promote psychoanalysis and

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1. Conference hosted October 2014 by the International Association for Psychoanalytic Self Psychology.

# editor'sword

Donna F. Tarver, LCSW



hosting us again this year.

Again we are delighted to have so many contributions to our member news column and appreciate the submission of pictures with your news. Congratulations to all for your accomplishments!

The *Newsletter* welcomes readers' letters, articles, and opinions on topics of the day and clinical issues; book reviews; notices of or reports on conferences; and news of interest to our membership. We encourage social workers with an interest in writing to use the *Newsletter* as a vehicle for converting their interest into the writing process.

Thanks to all contributors to the newsletter—Emily Avilés, Jerry Brandell, Beverly Caruso, Amy Ferlazzo, Nina Hausman, Penny Rosen, Sarah Schwartz, Diana Siskind, Neshe Taylor, Patsy Turrini, and Ashley Warner.

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## aapcsw aims&purposes

- To represent and protect the standing and advancement of psychoanalytic social work practitioners and educators.
- To provide an organizational identity for social work professionals engaged in psychoanalytically informed practice.
- To promote and disseminate the understanding of psychoanalytic theory and knowledge within the social work profession and the public.
- To affect liaisons with other organizations and professions who share common objectives for social work and the advancement of psychoanalytic theory and practice.
- To advocate for the highest standards of practice and for quality mental health care for the public.
- To bridge social work and psychoanalytic discourses by integrating concerns for social justice with clinical practice, and to conceptualize psychoanalytic theory and practice within its broader social-political context.

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Newsletter articles are opinion articles representing the authors' viewpoints and are not statements of any positions of AAPCSW itself. AAPCSW is not responsible for the accuracy or content of information contained in the articles.

## aapcsw

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# Board Certification for the Clinical Social Worker Psychoanalyst

The Board Certified Diplomate in Clinical Social Work–Psychoanalysis (BCD-P), offered by the American Board of Examiners in Clinical Social Work (ABE), enables clinical social workers to be recognized for proficiency in Psychoanalysis. For example, the Accreditation Council for Psychoanalytic Education, Inc. (ACPEinc.), expects of its accredited psychoanalytic institutes that their “analysts of candidates” be “certified by their relevant board” (as by ABE and the BCD-P, in the case of clinical social workers) or “demonstrate equivalent clinical expertise through a process independent of the institute or program.”

The BCD-P is based on practice competencies identified through research and consultation and embodied in ABE’s position statement, *The Practice of Psychoanalysis: A Specialty of Clinical Social Work*. Applicants must hold ABE’s advanced generalist certification, the Board Certified Diplomate in Clinical Social Work (BCD), or, in the process of applying, fulfill the requirements for the BCD; and they must meet the criteria (below) whether a graduate of a psychoanalytic institute or not.

To apply for board certification as a Clinical Social Worker Psychoanalyst, email Kate at kab@abecsw.org or call 1.800.694.5285, ext. 16.

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## Graduated from an Institute:

**Training:** graduate of a psychoanalytic institute training program

Personal analysis by a training analyst or equivalent (who had at least 5 years of post-graduate experience as a psychoanalyst), in-person, for a minimum of 40 weeks/300 hours during a year (at a frequency of 3–5 sessions per week, on separate days)

### Supervision:

- 1) Received supervision in practice for at least 150 hours by a training analyst or equivalent
- 2) Under supervision, conducted 2 in-person adult psychoanalysis cases—at least 1 supervised to completion—lasting at least 2 years in one instance, and at least 1 year in the other

### Specialty Practice Experience:

- 1) Within the past year, amassed a minimum of 300 hours of clinical social work practice informed by psychoanalytic theory and formal psychoanalysis with at least 2 analysts
- 2) Within 3 years or more, amassed 4,500 hours of post-master’s clinical social work practice informed by psychoanalytic theory

**Continuing Education:** within the past 3 years, amassed 40 clock hours of clinical continuing education, of which 50% was psychoanalytically oriented

**Evaluation of Practice:** 2 successful evaluations by colleagues/supervisors/consultants who are psychoanalysts and who are clinical social workers, psychologists, or psychiatrists

### Did Not Graduate from an Institute:

**Training:** achieved equivalency of knowledge in history of psychoanalysis, psychoanalytic theory, psychoanalytic technique, normal and abnormal growth and development within the context of psychoanalytic models, and sociocultural factors and gender issues

Personal analysis by a training analyst or equivalent (who had at least 5 years of post-graduate experience as a psychoanalyst), in-person, for a minimum of 450 hours, meeting at least twice a week

### Supervision:

- 1) Received supervision in practice for at least 150 hours by an analyst(s) equivalent to a training analyst and who, at the time of supervision, had 5 years post-graduate experience as a psychoanalyst
- 2) Under supervision, conducted 2 in-person adult psychoanalysis cases—at least 1 was supervised to completion—lasting at least 2 years in one instance, and at least 1 year in the other

**Clinical Consultation:** in the past 2 years, was a consultee or consultant for at least 20 hours (in formal or informal setting) in the practice of psychoanalysis

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## Children of Separation and Loss

By Gertrude Pollitt; Hamilton Books, a member of Rowman & Littlefield, 2014; 184 pages

Reviewed by Patsy Turrini, LCSW

What could be better than a good memoir: informed, with insightful explanations from an experienced psychoanalytic thinker? Dr. Gertrude (Stein) Pollitt offers opportunity for new discoveries as she records and discloses herself, providing the reader with an opportunity for an increased understanding of the mind, the self, and the human condition. Memoires, with their details of universal emotions and needs (teddy bears, stories from father), can jiggle up one's forgotten joys and sorrows. And what could be better than to learn the writer is a social worker, psychotherapist, psychoanalyst, and educator. Dr. Pollitt is currently executive director emerita Center for Psychoanalytic Study in Chicago, and serves as a consultant to agencies, schools, and mental health professionals. She has a small private practice in Chicago and, surprise, is now 95, having undertaken to write this memoir recently. She has been published in professional journals. I highly recommend her book for its inspirations of her acute memory and ability to explain history, life meanings, and many types of losses and their dynamics. She can inspire all of us to write our memoirs. I apologize in advance for my inability at moments in this review to contain my own divergent thoughts, although hopefully they will seem not too tangential or outrageous.

When Dr. Pollitt was five, her older sister committed suicide; her father died when she was 13, and

Vienna is taken over by the Nazi's when she was 20. Her perspectives on the loss in early childhood and her amazing stamina in the face of horrific, ghastly world horrors that were a part of her life ever after provide a detailed history and an inside look at moments of cataclysmic suffering.

While living an interesting, intellectually stimulating life with parents who admired and loved her (she was a child born late to her parents) and living with the seemingly distant anti-Semitic community, her father unexpectedly died from a heart attack. She allows us to think of this tragedy and loss and learn of the cultural expectations and pathways of the grief: "It was such a painful time for me that I have blocked out many of the details. Father was a guide, a role model, an ego ideal, and someone to discuss ideas with . . . and above all my best friend" (21). "I wore black for six months, black and white for another three months, and ended the mourning period with a black band around my arm," she recalls. "Toward the end of the mourning period I came to the conclusion that the memory of my father was internalized within me. This meant that his emotional and intellectual values became my own. I was a chip off the old block" (22). Her loving identification and internalizations can be thought of as one part of her that enabled her to survive aloneness, singularity,

continued on page 6

I welcome recommendations for books to be reviewed and am always glad to have a book by one of our members sent to me for review. More and more of you have been writing books and announcing it on our listserv. The growing number psychoanalytic social workers writing books is a tribute to the growth of our profession.



Also if you are interested in reviewing books, please let me know and I will be in touch with you. Film reviews are welcome, if the film has relevance to our field.

My email address is [dwsiskind@aol.com](mailto:dwsiskind@aol.com).

Diana Siskind, MSW • Book & Film Review Editor

# Clinical Implications of the Psychoanalyst's Life Experience: When the Personal Becomes Professional

By Steven Kuchuck; Routledge, 2013; 258 pages

Reviewed by Donna F. Tarver, MSSW

There are many things to recommend Steven Kuchuck's latest book, *Clinical Implications of the Psychoanalyst's Life Experience: When the Personal Becomes Professional*. What I found most compelling is that the book seamlessly demonstrates Kuchuck's premise and the primary subject of the book—that each clinician's choice of theory, clinical interests and technique, and presence in the consulting room is an outgrowth of his or her earliest life experiences, crises, and ongoing history and development. In the book's introduction he shares some of the important elements of his own early history and their impact on him and his evolution as a clinician. Kuchuck entered graduate school and then institute training at a classical Freudian institute relatively early in his life. Over the ensuing twenty years, his identity as an analyst evolved in a fashion much more congruent with his own values and beliefs. That evolution has seen him become a faculty member, supervisor, and board member of NIP, as well as co-editor of the *Journal Psychoanalytic Perspectives* and an associate editor of the Relational Perspectives Book Series from Routledge. From classical Freudian theory to established relational theorist—a complex but understandable transition in light of his history. A transition from training and theory that labeled him, as a gay man, damaged and that insisted he keep his core identity secret to his present relational perspective where his subjectivity is to be understood and used in the service of the treatment.

In this edited book, Kuchuck not only chronicles his own evolution but he presents chapters by other clinicians—both established writers and newer contributors—who write about their own histories and how their early life experiences have contributed to their choice of theory, clinical technique, and persona in the consulting room. These writers include Kuchuck's own colleagues, mentors, friends, and co-theorists. Their influence on his thinking and development is also skillfully woven into the fabric of the book. The book serves as memoir, expli-

cation of theory, tribute to his colleagues, and a celebration of his “arrival” at a place where his own subjectivity can comfortably serve as a guide to his thinking and to his work.

The book is divided into two sections. The primary focus of the authors in part 1 is on early life events and their impact on the analyst's theory and practice. The book's authors share a part of themselves and help us understand something about how they have become the clinicians that we have come to know from their writings, teaching, and presentations. I will give a brief snapshot of the nine authors in part 1 to demonstrate the depth and diversity of their offerings. In chapters 1, 2, and 3, Sally Bjorklund, Susie Orbach, and Galit Atlas share with us how early loss, confusion, and secrecy has impacted their development and choices of interest and focus as analysts. Joyce Slochower writes a fascinating chapter 4, describing growing up with parents who were both Freudian analysts and the impact on the development of her own professional identity and choice of theoretical models, and she ends with some interesting thoughts about theory's dynamic function. I found Irwin Hirsh's chapter 5, titled “Emerging from the Oppositional and the Negative,” particularly interesting. He introduces his piece by telling us that his most significant learning in life, particularly in his work life, has come from failures. He then goes on to explain his understanding of how much of what he feels most strongly about has grown out of negative experience. “Out from Hiding,” chapter 6, by Kenneth A. Frank, describes his long struggle with his deep wish to express himself and be known and his competing strong need to maintain his privacy. Anna Ornstein's powerful chapter 7, “The Development of My Analytic Subjectivity,” includes the story of relocating with her husband Paul to the United States after growing up in a bitterly anti-Semitic Hungary and being one of her family's few survivors of the Holocaust. In chapter 8, “The Personal Is Political,

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attacks, and humiliations, and to bear witness to the suffering of others.

We are accorded an opportunity to bask in the glory of having a good-enough father. The father can be the universe for both a boy and a girl. I often think of my friend who told me that, when she was six and a latency age child during WWII, she knew we would win the war: her father was in the army.

Pollitt's mother, devastated at her husband's death, stayed many weeks in bed, and after high blood pressure, seemed oddly helped by a blood-taking remedy. Pollitt's care of detail fosters awareness of complexities of culture and death and grief. She gives us a salient analytic thought: "In one loss, we usually rework previous losses, which gives us some relief, but in my opinion, one can never completely overcome losses—especially sudden losses, which are the most traumatic" (21). I recommend her book for the insight she brings, and even as much detail as I am providing, this review cannot do justice to her contributions.

She loved to climb into her parents bed, hear her father's stories, fall asleep, and then be carried back to her own bed, which she resisted "but learned to tolerate." Her memory of the yellow and blue of the painted walls of her childhood bedroom are marked for her, and she uses the colors now for decorating her place (7). The pleasures of her past fuel the pleasures of the day.

In Vienna, adolescence and the major physical and erotic changes were off limits for discussion. Menstruation came as a shock, a belief in injury, common in that culture. In high school, "the headmistress was a middle-aged spinster called Frau Director Degen" (19). How telling the word *spinster* is for its now-antiquated meaning. I understand we no longer use the "S"-word signifying that a woman without a man is a woman without stature and place. "In the Austrian-Hungarian Empire there was no separation of church and state"; the Catholic religion was taught in all schools both public and private, though special classes for other religions were allowed (19).

Pollitt documents Hitler, Nazism, and the virulent Anti-Semitism that took over Europe and Vienna in 1938. The Anschluss was unexpected and was suddenly upon her. "My family and I were appalled," she says, "to think that such a disaster could befall a city that had so recently been a center of civilized

society. Until then I must have repressed any awareness of the economic turmoil, the boiling anti-Semitism, the rise of a fifth column, and the not-so-gradual increase in violent confrontation between political parties" (27).

But who could have imagined it? Can we imagine it now? What is anti-Semitism, and how can it continue to exist? And—surprise, surprise—how did ISIS/ISIL take the US government and most of us unaware in the last few months? Brutal killing groups are still a plague on our world.

Throughout the book Pollitt provides us with insights into defense mechanisms, her personal patterns and insights. Is this one denial? I don't think so. I'd rather say that a sane person cannot fathom the sickness of the inhumane brutal, killer, dangerous mind.

"Vienna had always been a hot bed of anti-Semitism," she remembers (20). She recalls the dangerous vicious lies about Jews that she heard as a child, lies that did not seem to affect her but that unfortunately served to entangle and get internalized by millions of Germans. "In those days people generally did not consider Hitler a serious threat, but laughed at him, and thought him crazy"(21). That makes perfect sense to me, for it remains almost impossible to grasp Hitler's destruction; who can believe he thought that way or carried out his plans. Hitler was paranoid. He projected his paranoid concepts of disease and danger onto an outgroup; he reached people already susceptible. Are we all susceptible to fears, and what some of the Kleinians believe is the Expectable Normal; P/S (Paranoid-Schizoid) < > D (Depressed). We move back and forward between P/S and D, two poles. According to this view, if we become Depressed we are lucky.

Whether that makes sense to anyone, I have found it worthy of consideration. Erickson describes basic distrust, and Spitz and Grotstein discuss stranger anxiety and predator fear as an innate biological inheritance. Fear of the other and projections outward fuel distorted realities. Hate speech continues to be regulated and fought about in the States; Justice Holmes said, there is a law against yelling "Fire!" in a crowded theater. Minds ready to be stirred to paranoia are a tinderbox of dangers. Careful we must be. It was easy to deny a Hitler then, unthinkable—but not now. Dr. Pollitt's detailed information and historical data can be a catalyst for

re-deepening our awareness and efforts to find solutions to murderers who can gain control over the world.

Before the war ended, the then Gertrude Stein, age 20, fled to England. She left her mother, relatives, country, and friends. She had no money or support in London; she worked as a maid with very sadistic women (not Nazis) and suffered through the blitz (Germany's effort to bomb England off the face of the earth) and into surrender. Her capacity to survive the aloneness, dangers, and terrors is remarkable. Her next book might help us learn about the attributes and processes that she drew on for her sanity and survival. I note that she always made friends, and I know how valuable having good friends is for survival and sanity. Is it not an ego asset to have the capacity for basic trust and the capability to seek union with friends.

Dr. Pollitt survived the Blitz, and in 1943 became a nursery school teacher. She received a scholarship from the Czech Ministry of Social Welfare and attended at the London School of Economics, in the department of social services. While studying at the London School she was impressed by Melanie Klein, who taught the course on early childhood development. She says of Klein: "Because of her ability to be in touch with her inner young child, Klein was very much aware of youngsters' nonverbal communications and believed that an analyst can gain insights into young children's unconscious by observing their play. . . . She [Klein] was the originator of Object Relations theory which stresses the importance of the interaction between the infant and the mother person" (53).

Then Pollitt was sent for training at the Tavistock Clinic (194-45), where she met Anna Freud, and Klein again, and heard the dialogues of differences in their perspectives. Pages 55 to 62 outline these differences, and it is worth the price of the book if only to view these detailed concepts and controversies. Winnicott was a third contributor in Pollitt's studies there. I was struck by her noting that Klein taught that "the expression of negative feelings in the treatment situation liberates the ego, of the child, is very helpful in furthering a positive relationship, and has a curative effect releasing guilt feelings and anxiety" (61). Apparently Anna Freud disagreed with this view.

After these studies, Pollitt worked at United Na-

tions Relief and Rehabilitation Agency (UNNRA) in 1945, and through UNNRA was taken as part of the training to view Dachau concentration camp that still contained evidence of dead bodies. "Primitive man showed more compassion when killing animals," she says, "than those twentieth century Nazis who sadistically planned these atrocities in the highly orderly and compulsive manner revealed at Dachau" (68). Dr. Pollitt documents the history of WWII with dates, times, places, and personal detailed emotion and vital information.

Thousands of displaced children who had lost their parents in concentration camps and war strikes were cared for in camps and at centers. Often Dr. Pollitt led the way and developed soothing, creative group experiences and healing programs for these children. Case examples are cited. How awesome she was as she made such monumental programs for these children; rich details are provided for the reader. At one time, she escorted General Eisenhower on a tour at Camp Foehrenwald, in Germany, and translated for him. (She knew German and French). He told her she was beautiful, and much to her embarrassment insisted she mention his compliment in the paper he wrote and she read to the staff (70). How fun is that, and what a wonderful memory. It brings out the envy in me. "Camp Foehrenwald was a showcase, visited by such dignitaries as Eisenhower and Patton. The camp and General Eisenhower's visit appeared prominently in the award-winning documentary film, *A Long Way Home*. I make two very brief appearances in this film greeting General Eisenhower" (69).

When Politt is finally able to get to the US, in 1949 (visa, emigration, quota problems), her life takes on easier aspects. I was somewhat surprised that she says of her arrival, "When we arrived (by boat) in New York Harbor, we were welcomed by the Statue of Liberty. The Statue is a metaphor for the United States and all it stands for, and had a great emotional effect on me. To me it meant freedom of speech, freedom of thought, freedom from intolerance, freedom for repression, and a fluid class structure. No longer was I a foreigner in a strange land" (104). I too love the Statue of Liberty and grew up by these inspired fundamental principles that become part of me. That one who lived so far away still carried such inner needs and awareness of these principles has prompted me to consider how early formed

principles become part of one's self representation, part of the core ego, the ego ideal, and inner meanings that are attached to the self. Are we made up of sets of thoughts and practices that we are exposed to and select for their intrinsic survival value? Do these inner beliefs protect us and provide for inner hope? Dr. Pollitt must have felt safe arriving here. The Statue of Liberty is a woman, a caring woman, welcoming people to a safe haven. Is the statue our unconscious early mother of safety? The architect drew on "Libertas, the goddess of Freedom, wildly worshiped in ancient times" and her face "was fashioned after the architect's mother" (Wikipedia).

Shortly after arriving, Pollitt married Irwin Pollitt, a man she knew from Vienna and who now lived in the Midwest, and we are treated to rich information about their life in Chicago: their wonderful times, and their many travels. For those interested in travel, she provides an account of many worldwide journeys.

She then began training at the University of Chicago School of Social Service Administration (1956) in social work and obtained her master's degree. "The lectures were dynamic and stimulating and the general focus of the teaching was psychodynamic taking into account the unconscious, the pre-

conscious, the ego and the superego in the developmental processes. We gained new insights into humanity and its social and economic needs, we could feel new windows opening within ourselves" (110). I earned my masters degree in social work during this same period, and it is heartening to read of similar training courses, so valuable over time, and, as I understand now, missing in our current schools of social work.

Following her social work training, she enrolled in the Institute for Psychoanalysis that had been founded by Franz Alexander, MD. Her coursework entailed four years of part-time study plus two supervised control cases in the area of child and adolescent psychotherapy. In the 1950s, she explored the feasibility of private practice for social workers with an NASW study, and she began a small practice in a home office in Glencoe, a town near Chicago, a move precipitated by a change in her husband's work connections. In 1985 she was invited to be consultants to the Center for Psychoanalytic Study in Chicago, a new institution

She found her personal psychoanalysis valuable: "It enabled me to clear up some of the cobwebs of my mind, . . . some repressions were lifted. I was able to identify with the analysts inner security"

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(119). During the analysis, a letter arrived providing the information of the fate of her mother. Her mother had been sent to Theresienstadt concentration camp. “Once again my feelings of guilt were activated. My analyst helped me work through all these feelings” (120).

Her father’s younger brother located her after an eight-year search, and after their reunion, he and his family would visit regularly from NYC. She remains closely attached to his children; her uncle and his wife have since died. Again, we recognize the losses she suffered, losses that come to all of us, especially as we grow older.

And before the memoir ends, we sadly learn of her husband’s death and the termination of the Center for Psychoanalytic Study, “an exhausting and drawn out affair.” Many colleagues had died, and Dr. Pollitt did not have the energy any longer to continue such arduous administrative and fundraising work. It reminds me what a colleague recently said to me: “Remember in the ’60s when we all thought we could save the world with psychoanalysis?” Yes, I did think so, and perhaps I still do. Dr. Gertrude Pollitt has done much to save the world, and she knows how to enable people to gain mental health and well-being and become able to contribute to society.

There are several pages of informative and touching pictures that begin with Gertrude as an infant in a high chair, followed by pictures of her family, of the UNNRA camps, and of her and Eisenhower; the final picture is of Gertrude wearing a ball gown made from a Nazi flag.

Thanks to Dr. Gertrude Pollitt for providing us with this deep informative book on history and on psychoanalysis and social work. I hope that all will be able to read the book. This review is but a smidgen of what she includes. Thanks for listening.

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Clinical Implications, continued from page 5

the Political Is Personal,” Chama Ullman, the daughter of Holocaust survivors, continues with the theme of the resulting impact of the analyst’s political environment on the analyst’s subjectivity when she writes about her life as a psychoanalyst in Israel. Eric Sherman’s very personal, poignant struggle with coming out as a gay man in New York in the 1980s, being the only openly gay candidate at NIP in the early 1990s, and the impact of these struggles

on his development as a clinician is beautifully shared in the final chapter of part 1, “Sweet Dreams Are Made of This.”

In part 2 the focus is on later life events and passages and their effect on the analyst’s development. The seven chapters are written by Michael Eigen, Steven Kuchuck, Philip Ringstrom, Noah Glassman and Steven Botticelli, Hillary Grill, Eric Mendelsohn, Bonnie Zindel, Deborah Pines, and Martin S. Bergmann. These seven chapters touch on a variety of subjects—adoption, parenting, fatherhood, illness, and the impact of losing a parent, losing a long term marriage, and losing a spouse and an analyst. The final chapter, by Bergmann, is about age and his thoughts about being a clinician at age 99. The book was published shortly before his death in January 2014.

In the introduction Kuchuck points out that with the exception of Bergmann, “all of the contributors to the book would likely self-identify as relational, interpersonal, or self-psychological.” (This is despite the fact that persons of other persuasions were invited to participate). Upon considering reviewing this book, I wondered if it might be better reviewed by someone with a relational perspective. As I read the book, however, I realized that by knowing and understanding the writers’ histories and how their theoretical perspectives had developed, both their theory and techniques became more accessible and useful to me. What a remarkable sharing of personal information and remarkable thoughtfulness went into the writing of these chapters. The writing is autobiographical—not self-disclosing—and Kuchuck tells us that, to his surprise, in many of his discussions about the book he is asked about self-disclosure, which is erroneously assumed by many to be a part of a relational perspective.

My strongest recommendation for Steven Kuchuck’s book comes from the fact that I found it so evocative of thought, memory, and emotion. I find very few books that have the capacity to provoke as much intense thought and feeling and so many memories. In particular, I was reminded of the powerful sense of finding a home that I experienced as I began to read psychoanalytic writing some 30+ years ago. As you might suspect, I am writing my own personal chapter for Kuchuck’s book. I think that he would be pleased.

# Announcing a Special Issue of *Psychoanalytic Social Work*

I am delighted to announce the publication of a special issue of *Psychoanalytic Social Work* completely devoted to conference papers from our 2013 biennial AAPCSW National Conference, *Under One Tent: Psychoanalytic Insights, Identities, and Inclusions* (vol. 21, nos. 1–2, January–December 2014). Presenters voluntarily submitted their papers to the Journal. This double issue, which AAPCSW president Penny Rosen and I co-edited, consists of ten outstanding papers, selected through an anonymous, double-blind, peer-review process that involved members of our standing editorial board, as well as ten additional AAPCSW members who served as volunteer reviewers.


The authors are Elissa Baldwin, F. Dianne Barth, Fanny Chalfin, Sally Davis Comer, Andy Dunlap, Sharon Farber, Sheila Felberbaum, Kari Fletcher, Raine Gifford, Naomi Schlesinger, Wendy Winograd, and Peter Wood.

I would like to express my deep appreciation to Penny Rosen as well as to the volunteer reviewers who so generously offered their time and expertise in putting this issue together: Samoan Barish, Joan Berzoff, Rosalyn Benitez-Bloch, Gail DeLyser, Joyce Edward, Masayo Isono-Ragins, Kim Sarasohn, Anne Segall, Sue Sherman, and Diana Siskind.


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# area representatives' corner

## Northern California

**Velia Frost**, LCSW, Area Co-Chair

**Rita Karuna Cahn**, LCSW, Area Co-Chair

*Report submitted by Nina Hausman*

### **Out of the Box—Working with a Difficult Patient**

On November 14, 2014 the Northern California chapter of the AAPCSW hosted “Out of the Box—Working with a Difficult Patient,” with Clara Kwun, LCSW, in San Francisco. The event took place in the home of Gabie Berliner, PhD, LCSW, allowing for an informal and welcoming atmosphere. Co-chairs Velia Frost, LCSW, and Rita Karuna Cahn, LCSW, provided information on AAPCSW, CCSW (the Coalition for Clinical Social Work), and several other clinical resources. They introduced Clara Kwun, noting her role in CCSW as a mentor and her commitment to social justice in her work as a therapist.

Kwun introduced us to her client “Grace” by highlighting relevant cultural factors, adverse childhood experiences (including physical abuse), and the destructive behaviors that Grace was exhibiting (including drug abuse and partnering with violent men). However, Grace also had several supportive relationships with friends, who had encouraged her to seek therapy.

Kwun often felt fear, anxiety, and frustration in response to Grace’s risky behaviors, as well as tenderness and love when Grace’s likeable personality and excitement for self-exploration showed. Kwun noted how she herself sometimes swung from a fantasy of abandoning the course of therapy to wanting to rescue Grace from her own life choices.

Kwun understood that this powerful counter-transference reflected a strong connection to her client, allowing for meaningful psychological work to be done if they both could persevere. In order to do so, Kwun fine-tuned her “clinical sensibility” to ground and guide her. She explained: “Clinical sensibility is a curiosity about your clients and your vulnerability and unconsciousness. We don’t know



what we’re going to learn, so we need a willingness to be uncertain.” This concept was informed by the work of Thomas Ogden, whose article “What I Would Not Part With” provided a theoretical frame for Kwun’s work with Grace.

Because Grace was not self-referred for therapy, Kwun described how she worked with Grace’s reluctance to engage in the therapy process. For example, Grace once lied about having to miss an appointment in order to work but later admitted she had been hung over. Kwun was able to reflect back an empowering and positive relational interpretation about this to her client: “You were sensing that lying to me won’t help you and that there might be something to this therapy relationship.”

Ogden posits that it is our job to help our client “face the music,” that is, not to let our own discomfort get in the way of sharing with our client an observation about them that they may not like. This allowed Kwun to remain honest with Grace when reflecting back thoughts and feelings Kwun experienced in response to Grace’s dangerous behaviors. Ogden notes the seeming paradox therapists face of “not seeming judgmental, while still being guided by your values.” As contemporary therapists, many of us enjoy an increased sense of authenticity by expressing our feelings and opinions to clients, yet we still may feel challenged in deciding to what extent we should depart from the archetype of the traditional, “neutral” psychoanalyst.

Kwun reminds us that relationships, and getting to know yourself as a therapist in each relationship, take time and relentless curiosity, as well as continued awe for the work we do. As a beginning social worker, I found it encouraging to hear a seasoned clinician talk about how she welcomed her counter-transference, even though it could be incredibly uncomfortable, and how she continually assessed it to ensure she was using it clinically in an ethical manner. “If I can’t be myself, what’s the point?” Kwun reflected. “But we can’t just be ourselves either, we need clinical judgment. If we want too much from our patients, then we don’t give room for their full psychopathology to emerge.”

Aside from her own clinical judgment and expe-

rience, Kwun relied on conferencing with other therapists, engaging with her larger community and exploring theory to help her determine how to use her own feelings and thoughts in an ethical and clinically useful way. Kwun's ability to share some of her counter-transference with her client provided Grace with a space where she could be confronted about her behavior with compassion, and without being abandoned. At the same time, as Kwun had had to accept her limited power in changing Grace's life, Grace had to come to terms with her childhood experiences, her parents' limits as human beings, and the absence of an easy road to adulthood.

During the course of therapy Grace experienced a healthy attachment to Kwun, which allowed her to reflect on her past experiences and on her current life. Grace was able to identify and manifest more of what she truly wanted in life and leave behind what was not constructive to her. This relates to Ogden's concept of "dreaming oneself into being" as Grace started moving from a life of reactivity and survival to one of increased awareness, self-compassion, and conscious choice.

The warm, self-reflective nature with which Kwun spoke about her client was mirrored by the audience, which had been invited to interweave their questions and comments throughout the presentation, contributing to an atmosphere of deepened understanding, curiosity, and connection.

#### Reference

Ogden, T. H. 2005. "What I Would Not Part With." *Fort Da* 11, no. 2: 8-17.

## Southern California

**Ellen Ruderman**, PhD, PsyD, LCSW, *Los Angeles Area Chair*

**Karen K. Redding**, LCSW, PhD, *Orange County Area Chair*

*Report submitted by Neshe Taylor, MSW Student Intern, University of Southern California*

### **Criminalization of the Mentally Ill: A Way Out**

The American Association of Psychoanalysis in Clinical Social work presented a symposium on October 25, 2014, "Criminalization of the Mentally Ill: A Way Out." It was hosted by University of Southern California, Orange County



Academic Center. The symposium was held to address the treatment of mentally ill prisoners, who make up a third of prisoners nationwide. There were four panelists: Lori Rifkin, Esq.; Professor Conrad Fuentes, LCSW; Geoff Henderson, MA; and Edward Kaufman, MD.

What stood out to me most from this symposium was how mental health treatment has historically been administered in the jail and prison systems. The inmates are put into cages, whether they are attending group sessions or are in private sessions with therapists. The metal cages are called treatment modules by Corrections and they are inhumane. Even if the therapist feels safe with the inmate, the client must be placed in a treatment module. Prior to and after any therapy, the inmate must be strip-searched. This is a deterrent to anyone seeking treatment. Rehabilitation is not the focus when someone who suffers from mental illness is incarcerated. The focus remains on the jail or prison protocols that were created for criminals, not individuals who suffer from mental illness.

Graphs were shown to reflect that when mental hospitals were closed, the prison population increased. Most of the mentally ill inmates are being held for minor infractions of the law like trespassing, petty theft, public intoxication, or minor drug possession. A lot of the inmates are also homeless. When they are released from prison, it is generally in the middle of the night with no clothes, money, medication, phone, or anywhere to go. Those being released are confused and helpless. Many of them are not fit to stand trial, and if they are placed on parole they cannot make the required weekly check-in because they do not have the capacity or the means. This results in the parolee having a warrant issued for their arrest, which puts them back into the justice system. It is a vicious cycle that must change.

What seems to be most glaring is the need for changes in the penal system in how it deals with mentally ill inmates. Although people need to be held accountable for their crimes, they need to be treated humanely and with dignity and respect. Those who suffer from mental illness do not want to be sick. They want to live happy, healthy lives, just like those who do not suffer from mental illness. In some instances, the individuals are not responsible for their actions because they are delirious or psychotic and cannot find or afford to get the help they need to lead a normal life.

If the penal code were changed and mental illness were taken into consideration, those who suffer would not be charged with criminal offenses and would not be stuck in the justice system as criminals. They would be rehabilitated and provided every opportunity to receive the help they deserve to get. That would be the humane way to deal with mentally ill individuals who have been charged with crimes.

Another concern that was discussed is that our society does not understand mental illness, and because they do not understand it, it scares people and they are unaware how to address issues that arise. People look at others suffering from mental illness as being less than human. Those who cannot function due to their illness and are homeless are treated even worse. People lack compassion as a result of their lack of understanding.

The jails and prisons are not meant to help those with mental illness, they are meant to protect the public from criminals. So to put a mentally ill person in a system where they are not treated is counterproductive and does not serve the purpose of protecting the public, it just criminalizes those who need help the most.

The way out of the current situation for mentally ill inmates is to change the laws and policies of how mentally ill inmates are treated in the prison system, which Lori Rifkin is actively pursuing. She recently was one of the attorneys who successfully sued the state of California Prison System for their treatment of the mentally ill. Lori also stated a system needs to be put in place so those who have been lost in the system can be tracked and not forgotten.

Dr. Ed Kaufman was an expert witness in the same suit. He wrote and read a story as if he were a mentally ill prisoner in the California penal system. He described several evidence-based practices of sentence reform and alternatives to incarceration.

Professor Conrad Fuentes agreed and suggested more community resources for mentally ill inmates being released to reduce recidivism. He also added that family support was helpful to those who have gotten involved in gangs to fill that need for the sense of belonging that gangs once provided to individuals. Professor Fuentes also stated that everyone attending the symposium could help change the stigma against mental illness by educating at least one person in his or her lifetime.

Geoff Henderson is currently working for the Orange County Sheriff's Department and is trying to incorporate more programs into their jail system to provide support services to inmates being released, as well as establishing better mental health services to mentally ill inmates who are currently serving jail time in Orange County, CA.

Criminalization of the mentally ill is a national issue that requires immediate attention. The torment of the individuals who suffer has gone on far too long and action must be taken to change policies and laws for those affected. Community resources need to be established to provide support. Social justice is not being served to the mentally ill and we as a society are all responsible for doing our part to educate, advocate, and help those in need. This is the way out of criminalizing the mentally ill.

## Massachusetts

Susan Bokor Nadas, LICSW, *Area Chair*

*Report submitted by Emily Avilés, MSW candidate, Smith College School for Social Work*

### **An Afternoon with Hilary Maddux and Elizabeth Corpt**

Last year on a snowy November day, Hilary Maddux, LICSW, presented her award-winning 2012 paper, "Adrienne Rich's 'Transcendental Etude': The Poetics of Self-Transformation" at the home of Susan Bokor Nadas in Arlington, MA. Maddux was joined by discussant Elizabeth Corpt, who offered a response through her paper, "The Transformation from Non-Being to Being." This intimate lecture and discussion was enthusiastically attended by 15 clinicians from the Boston area.

Before presenting her paper, Maddux first read Adrienne Rich's evocative poem "Transcendental Etude" in its entirety. With Rich's words echoing in our minds, Maddux introduced lecture attendants to Sean, a young male patient. Through this clinical vignette—grounded in Rich's poem—Maddux explored nuances of silence, of listening, and attuning to the expression of that which is wordless. She notably described an "aesthetic sensibility," which privileges the personal lyric and holds transforma-



tive potential. Maddux suggests that tuning into this aesthetic, what she calls the “aesthetic listening perspective,” may allow psychoanalysts to reach more deeply into the within and the between of the unspoken—sometimes unspeakable—experiences of our patients and ourselves.

Corpt was moved by these and other ideas put forth by Maddux, and responded to Maddux in her paper, “The Transformation from Non-Being to Being.” In her discussion, Corpt considered the role of what she called the “aesthetic gestalt” and “negative space” in healing work with patients. These concepts, she suggests, allow subjective space to come alive. Being in these moments, she noted, is not about technique, but instead about sharing a personal lyric. Turning then to the life and writings of Virginia Woolf, Corpt went on to explore experiences of being and non-being. She observed that we and our patients may draw hope from these small moments of being, of being shocked into reality.

The discussion that followed the lectures was energetic and thoughtful. Attendants were curious to discuss topics such as how writing may support and improve clinical work, disconnects between the language of poetics and the language of some clinical writing (ex. writing for insurance), as well as the idea of the holding environment as a creative act. Together, Maddux, Corpt, and Nadas facilitated an enriching discussion and lyrically spoke to our early experiences of “being-in-the-world,” self-transformation, and good-enough analysis.

## Minnesota

**Beverly Caruso**, LICSW, Co-Chair

The Minnesota Chapter started our season with an exciting conference titled “Infant Observation: One Way of Learning to Connect with Primitive Emotional Experience in Yourself and Your Clients.”

Presenters Patti Antin, LCSW, PhD, FIPA, and Gloria Levin, PsyD, LP, FIPA, are experienced IO facilitators. They are both members of the North American Tavistock Observation Organization. They reintroduced us to the work of Esther Bick, who was interested in the baby’s internal works as well as the development of the baby’s mind in connection with his/her environment. We learned her method of infant observation can be an essential tool for

therapists to develop their receptivity to early non-verbal states of mind, thus allowing them to connect with primitive emotional experiences in themselves and their clients. The conference was well attended by our association and many in our analytic community. In response to the conference, we initiated an infant observation study group in Minneapolis.

We followed this conference with a Sunday Seminar discussion on the conference. Sunday, February 8, two of our members presented “Navigating the Clinical Fog,” a presentation and discussion on listening for deeper meaning in the therapist/client relationship.

Our spring seminar will be coordinated and presented by Kathleen Fargione. She will discuss a paper by Ofra Eshel, who won the 2013 Tustin Memorial Trust Foundation Award. This paper describes her treatment of a sexual offender. The seminar is titled “Analyst’s Receptive Capacity in the Treatment of a Sexual Offender.” We are looking forward to this rich experience.

Our final seminar in April is titled “Mind of the Writer” and will be led by a member of our association, Madeline Sprengnether, writer, professor and psychotherapist. We welcome any visitors from nearby states to attend our Sunday seminars.

Member Ellen Luepker continues to provide 30 hours of supervision training required for certification to supervise in our state. This is her fourth year leading, Advanced Clinical Social Work Supervision Seminars.

## North Carolina

**Terrie Baker**, MSW, LCSW, Area Co-Chair

**William Meyer**, MSW, BCD, Area Co-Chair

*Report submitted by Sarah Schwartz Sax, MSW student, Smith College School for Social Work*

### **Growing Up on Psychiatric Medications**

Presented October 11, 2014, at the University of North Carolina–Chapel Hill School for Social Work, by Jerry Floersch, PhD, LCSW, with discussant David Smith, MD.

As the guest speaker at the AAPCSW North Carolina chapter’s fall lecture, Dr. Jerry Floersch



offered an enriching perspective on the meaning of medications in the lives of adolescents. To a crowd of more than 30 attendees, Dr. Floersch compared social work's person-in-environment model to a fruit smoothie. Medications, he contends, are one of the "fruits" that many young people raised on pharmaceuticals must make meaning of. These meanings are highly intermingled with other ingredients such as race, class, gender, or social support. The field of social work must wonder if its signature concept, person-in-environment, has not become a person-in-pharmaceutical-environment model.

What do medications mean to the emerging person given the developmental age at which they are introduced? For example, when a child begins psychiatric medications between the ages of three and six, Piaget's "magical-thinking" may constitute a significant part of that child's understanding about the medication. Adolescents, in contrast, are negotiating what to internalize about their parents and what to differentiate from; they are constantly questioning, "Is this me, or not-me"? When psychiatric medications have become part of the adolescent's everyday life, they inevitably will question, "Is this me, or is this my meds?," which adds another layer to the other identity topics (such as race, gender, and sexual orientation) that teens will work through.

To further explore these concepts, Dr. Floersch interviewed 40 adolescents and their parents about the meaning of their medications. He found that a coherent medication narrative helps teens to maintain self-determination, while also engaging in self-regulation. Such narratives include three major themes: beliefs about the need for medication, beliefs about the effect of the medications, and beliefs about the hoped for effects of the medication. And it is the social worker who can consider how different psychosocial forces affect the teen's internalized medication narrative. For example, does the teen comply with their medication in order to keep her or his anxious mother calm? Or, does the seven-year-old borrow the school and parental narrative about the medication—"Ritalin will help you succeed in school"—and how would the latter then mediate the child's own negotiation of Erikson's industry versus inferiority developmental process?

Finally, Dr. Floersch encouraged the group to consider the impact of the Internet's "hyper-

presence" on childhood development and how this may be encouraging the use of medications. He stated, "Children's expressions are often reflected in their social systems," and implored that social workers "need to be the advocates of slowing down." He challenged the group to consider this as a collective obligation, particularly when considering the intersection between the psychosocial side effects of the child's mind on the Internet and the child's mind on medication. For example, he asked, "Are we medicating sleep-deprived, Internet kids instead of dealing with the psychosocial side effects of too much Internet use?"

## Washington State

**Amy Ferlazzo**, LICSW, Area Chair

In 2014, the Washington State area chapter co-sponsored two local events that featured AAPCSW member organization and participation. The first was a series of monthly workshops titled "Working with Suicidal Clients," which meets a new continuing education requirement for WA practitioners and provides a psychodynamic understanding of suicide, its assessment, and its prevention in treatment. Seattle member Keith Myers of Wellspring Family Services co-teaches and developed the workshops, which are continuing in 2015. The second event was the tenth International Evolving British Object Relations (EBOR) conference, titled "From Reverie to Interpretation: Transforming Thought Into the Action of Psychoanalysis." Maxine Nelson, an analyst in private practice and a member of the Northwest Psychoanalytic Society and Institute, was a conference organizer. New York member Carl Bagnini presented an individual paper at EBOR.

**AAPCSW Area Chapters** Northern California ● Southern California ● Colorado ● Connecticut ● Illinois ● Indiana / Kentucky ● Massachusetts ● Michigan / Ohio ● Minnesota ● Nebraska ● New Jersey ● New York ● Upstate New York ● North Carolina ● Pennsylvania ● Greater Washington DC / Baltimore ● Washington State



From the President, continued from page 1

psychoanalytic practice. We also foster knowledge and community building at our biennial national conferences.

Our national 2015 conference, *The Art of Listening: Psychoanalytic Transformations*, has already begun to meet our sense of belonging. By opening up the Call for Papers to the general psychoanalytic community over a year ago, we received papers full of rich ideas. It is an opportunity for many, including clinical social workers, to share their ideas at a national level. The papers were subject to peer review, and the committee of readers of the papers was comprised of members. Some members are participating on the conference committee, while others are presenters or moderators. This allows for an inclusiveness of member involvement. If you have not as yet been to one of our conferences, we encourage you to attend. Conference attendees contribute immensely to the sense of belonging and community building.

The presentations include a vast range of topics, including the many forms of listening, the analyst's inner and/or life experience, themes of diversity, couples therapy, adult development, clinical impasses, treatment of children, adolescents, adults, and older adults, new technology's influence on development, meditation, intuition, neuroscience, clinical case study research method, "evidence"-based practice, pedagogy, original theoretical constructs, mourning, trauma, social activism, bullying, personality disorders, and more.

Special features of the conference were organized to afford opportunities for socializing and dialogue with colleagues:

- Thursday's Taste Carolina Gourmet Food Tours, a walking tour through food and drink to discover the exploding "foodie" scene of downtown Durham
- Thursday evening's Opening Reception in downtown Durham
- The Friday afternoon film—*The Stories We Tell* (by Sarah Polley, filmmaker/writer/director) and discussion by Samoan Barish at the Carolina Theatre
- The Post-movie Reception Hour with light hors d'oeuvres and drinks
- Saturday's luncheon with hammered dulcimer music provided by North Carolina's own recording artist—"Dulcimer Dan"

- Saturday night's Jazz and Juleps, with farm-to-table cuisine, live jazz led by John Chiamonte and Jerry Brandell, and a Mystery Guest at the Durham Arts Council. It will be a night to remember!

Join us in Durham at the conference, a place to actualize our common goals and enhance a sense of belonging to our professional community.

More plans are in formation and evolving to establish AAPCSW as a meaningful place of belonging for our membership, whereby the vital force within us to belong is nurtured.

### **Other noteworthy news:**

I would like to extend special acknowledgements and thanks to: Louis Straker (Technology Committee Chair) and Barbara Matos (Administrator) for their involvement in the website redesign project; Ashley Warner (Associate Newsletter Editor), Cole Hooley (New Professionals Chair), and Louis Straker (Technology Committee Chair) for producing the video shoots for the web; Olivier Massot (web designer), who worked indefatigably to get the website redesigned and set up in time for the conference registration; Miguel Noguera (videographer and video editor) for shooting the videos; Larry Schwartz (administrative coordinator) for the 2015 conference; and Kelly Martin (graphic designer) for the *Newsletter* and conference brochure.

Tributes honoring two highly esteemed members, Irmgard Wessel and Sally Comer, who passed away, are posted on our web.

# membernews&newmembers

**Carl Bagnini** is a featured presenter with two video-conferencing training programs at the International Psychotherapy Institute in Washington, DC, and in Port Washington, NY. Carl presented “What’s Love Got to Do with It? Erotic Transference, the Ego Ideal, and Mourning the Oedipal” in October 2014 and will present “A Couple with Traumatic Lesions: A Case Study” on March 25, 2015. He presented “The Primacy of Reverie in Making Contact with a New Couple” at the Evolving British Object Relations Conference in Seattle, October 2014. His book chapter “Men in the Nursery: A Discussion-Play Group with Fathers and Their Infants and Toddlers” was published in *Being Present for Your Nursery Age Child* (Karnac, 2014). His book *Keeping Couples in Treatment: Working from Surface to Depth* (Rowman and Littlefield) is out in a paperback edition as of 2013. Carl’s chapter, “Technology-Stirred Projective Processes in Couple Teletherapy” will appear in Jill Scharff’s edited book for Karnac, *Internet Communication in Human Development, Psychotherapy, and Training*, due out in July 2015. Carl is also leading an object relations case discussion group at the Adelphi University Derner postgraduate program in psychoanalysis.

**Diane Barth**’s book *Integrative Clinical Social Work: A Contemporary Perspective*, published in March, 2014 by Springer, has now become available in paperback for around \$40. Other 2014 publications were “Integration, Connection and Individuation in Shaeffer’s ‘Transference, Countertransference and Mutuality in Relational Social Work with College Students’” (*Clinical Social Work Journal* 42, no. 1: 22–26); “Putting It All Together: An Integrative Approach to Psychotherapy with Eating Disorders” (*Psychoanalytic Social Work* 21: 19–39); and “Eating Problems,” in A. Gitterman, ed., *Handbook of Social Work with Vulnerable and Resilient Populations*, 3rd ed. (New York: Columbia University Press). Diane presented “Mixing Metaphors: An Integrative Clinical Approach within a Psychodynamic Frame” at the PPSC Annex in November 2014.

This year **Joan Berzoff**, professor at Smith College School for Social Work, as a co-principal investigator was awarded a two-year PCORI grant, a \$2 million federal grant to help patients and families move from dialysis to hospice care. She developed a training program for dialysis social workers in New Mexico and in Massachusetts as part of the grant. She also co-authored a study to explore the curricular needs of Palestinian students prior to teaching in Palestine. That work was presented at CSWE and at SWRR and is under submission for the *Journal of Teaching and Social Work*. Additionally, she wrote a number of papers accepted for publication: one on Sullivan and the Relational School for the *Smith Studies in Social Work*, another co-authored with Jim Drisko on preparing doctoral students for clinical leadership in the 21st Century. She submitted three other manuscripts related to clinical practice. Joan gave psychiatry grand rounds at the Mass General and Cambridge City Hospitals and is at work on the fourth edition of *Inside Out and Outside In: Psychodynamic Clinical Theory and Practice in Multicultural Settings*, with colleagues Pat Hertz and Laura Flanagan.



**Rita Karuna Cahn** had an article published in “Analytic Lives in a Wounded World,” edited by Doris Brothers, PhD, a special issue of *Psychoanalytic Inquiry* (vol. 34, no. 7, October 2014). Rita’s article, “Bearing Witness in Israel/Palestine: Finding My Voice,” is based on her experiences traveling in Israel/Palestine in 2003 and 2004 with the Compassionate Listening Project. It reveals the challenges, both internal and external, that she

has faced over the past decade when trying to tell the stories from her trips. The article expands on the essay presented at the 2011 AAPCSW Conference. From the abstract: “My focus is on the emotional impact of becoming the bearer of stories of unbearable human experience that I felt compelled to bring back and share. I reveal my struggles with continuing to speak and write publically about the injustice that I witnessed. In the course of standing up to both internal and external attacks on bearing witness, I have discovered a stronger therapeutic voice with my patients as well.” The article expands on the essay she presented at the 2011 AAPCSW Conference.

**Michael De Simone** presented “Recognizing and Working through Counter-Resistances in Psychotherapy with a Focus on Erotic and Aggressive Transferences” to the Staten Island Chapter of the New York State Society for Clinical Social Work on Sunday, November 16, 2014. A major theme of the presentation was the importance of awareness of resistances to therapeutic work that the clinician may bring to the treatment endeavor.



**Jay Einhorn**

became president of the Chicago Association for Psychoanalytic Psychology in September 2014, after having been CAPP’s chair of Peer Study Groups for a decade or so. Working with CAPP’s Council, he has initiated a series of dialogues for therapists called “CAPP Conversations,” which have included “Fundamentals of Psychodynamic Psychotherapy: What Are They?!,” “Psychodynamic and Cognitive Psychotherapies: Separate Universes or Overlapping Dimensions?,” and “Adoption: Developmental and Psychodynamic Issues.” Future Conversations are planned. If you’re in Chicagoland and are interested in attending, or

have ideas about topics to present or locations to present at, contact Jay at [jay@psychatlarge.com](mailto:jay@psychatlarge.com).



**Randy Freeman** graduated from the

Psychodynamic Psychotherapy Certificate Program at the International Psychotherapy Institute in the Washington, DC, area summer 2014. The intense two-year program included weekly didactic sessions, affective group attendance, attendance at four weekend programs yearly, supervision, a writing assignment, and the opportunity to present a case. Qualifications for attending the program included completion of a two-year object relations core program. She presently works from her office in Wayne, NJ.

**Joan A. Friedman** was a presenter at TWINS 2014 in Budapest, November 16–19. ([www.twin2014.eu](http://www.twin2014.eu)). The event was hosted by the International Society of Twin Studies and the Third World Congress on Twin Pregnancy: A Global Perspective. She discussed how the management of twin pregnancies can impact the development of individuality in twins.



**Laura W. Groshong** has a private practice in Seattle and is director of government relations for the Clinical Social Work Association. She presents frequently on the intersection between clinical social work practice and statutory regulation. She is co-guest-editor of the 2015 special edition of the *Clinical Social Work Journal* on cyber technology in clinical social work. On April 16, 2015, at the Social Work Distance Education Conference at the University of Indiana, she will be an invited participant on a panel on the pros and cons of online MSW education. The conference is sponsored by the Council on Social Work Education and the University of Indiana.

**Rebecca Harrington** presented “Childfree by Choice” at the April 2014 Division 39 Annual Meeting in New York City. In January 2015, she presented the paper as part of NIP’s Contemporary Family-Making Series. In February 2015, she will present it at the Women’s Mental Health Consortium. She is also currently expanding the paper into a full-length article for publication. Rebecca will present her next paper, “Childfree Lives: Choice vs. Circumstance in the Analytic Dyad,” at this year’s Annual Meeting of Division 39 in San Francisco.

AAPCSW listserv moderator **Joel Kanter** responded to a *New York Times* article about the violence potential of young men (“See Son’s Violent Potential but Finding Little Help or Hope,” by Benedict Carey, June 21, 2014). Joel’s comment was selected by the *Times* as one of their “NYT Picks”:

“As a psychotherapist, helping teens and young men like the one featured in this article requires more than simply finding the right diagnosis and medications; it requires an empathic understanding of the unhappiness and anger that they experience. Too often, mental health personnel, let alone the insurers, focus solely on the externals of problematic behaviors and imagine these as merely the manifestations of a malfunctioning brain. This perspec-

tive—often akin to trying to wedge the round peg of a troubled individual into the square hole of the DSM and biological psychiatry—just leaves the young person feeling more alienated and adrift . . . and even more pessimistic about any mental health intervention. And the families in these situations need expert consultation on an ongoing basis to help them provide the optimal balance of support and structure that can help their child develop their self-regulatory capacities and interpersonal skills. Each of these situations is quite unique and manualized ‘cookie cutter’ interventions rarely work. Successful interventions require a persistent trial-and-error approach over a period of several years, not fits and starts with a revolving door of psychiatrists, therapists and treatment programs.”

**Danielle M. Kasprzak**, an MSW candidate at the University of Minnesota, has been named the humanities editor at the University of Minnesota Press. She will be acquiring titles in a wide range of humanities and interdisciplinary fields, including American studies, literary criticism, cultural studies, and cinema and media studies. Within these fields, her primary editorial interests are gender and sexuality, critical race and ethnic studies, cultural history, avant-garde and experimental cinema, and critical examinations of digital culture and new media. She is passionate about manuscripts that promote radical understandings of social justice and speak to broader audiences, especially within the fields of disability studies, childhood studies, queer/transgender studies, and feminism. Danielle also acquires titles for the Forerunners: Ideas First series, a thought-in-process series of short, breakthrough digital works in all areas where Minnesota currently acquires.

**Debra Koppersmith** will be teaching a class for CAPA (Chinese American Psychoanalytic Alliance) on gender development in the spring of 2015.



**What’s your news?** Graduations, presentations, publications, awards, appointments, exhibits, and so on are all items the AAPCSW membership would like to acknowledge in the this column. Feel free to include a photo. **New to AAPCSW?** We invite you to introduce yourself. Contact me at [awarnerlcsww@gmail.com](mailto:awarnerlcsww@gmail.com).

Ashley Warner, MSW, BCD • Member News Editor; Assistant Editor, *Newsletter*

**Liling Lin** presented excerpts of her award-winning AAPCSW paper at the 2015 annual winter meeting of the American Psychoanalytic Association.

**Risa M. Mandell** published “Double Catch: Writing Reverie in Motion” in the Spring 2014 edition of *Otherwise/Uncut*, the journal of the International Forum for Psychoanalytic Education (ifpe.org).

**Louis Pansulla**, with a full-time clinical, supervisory, and consulting practice in NYC, has been appointed as full faculty at the Institute for Clinical Social Work (ICSW) in Chicago. He is teaching in the Doctoral and Advanced Studies Program at ICSW, with a focus on relational theory, psychodynamics of difference, and clinical practice and technique. He will be supervising PhD students as well as serving as part of students’ dissertation teams. In addition to his writing and teaching at other institutes, Louis maintains a practice in NYC where he sees a wide range of patients, including LGBTQ patients, and runs groups for gay men. He is also currently serving on the AAPCSW Board of Directors as treasurer.

**Gertrude Pollitt** is the author of *Children of Separation and Loss*, published May 2014 by Hamilton Books. The memoir describes her experience as a Holocaust victim and, in the aftermath of WWII, as the director of the United Nations agency for unaccompanied and orphaned children. (The book is reviewed on page 4.)

**Christine Schmidt’s** personal meditation “Holding Silence” was published in the inaugural issue of *Voyages in Psychotherapy*, January 2014. [www.voyagesinpsychotherapy.com](http://www.voyagesinpsychotherapy.com).

**Cathy Siebold** presented “Women’s Sense of Agency: Recognizing the Contribution of Familial, Class, and Cultural Forces to Women’s Struggles” at the Greater Washington Society for Clinical Social Work’s Fourth Annual Alice Kassabian Memorial Lecture on November 1, 2014.

**Brian R. Smith** presented his clinical paper “This Couch Has Bedbugs” at the 103rd Annual Meeting of the American Psychoanalytic Association. He was also recently promoted to the position of division director of Adult Intensive Services at Aurora Mental Health Center.

**Lucille Spira** (pictured below) is co-editor, with Arthur A. Lynch and Arlene Kramer Richards, of *Encounters with Loneliness: Only the Lonely* (IP Books), which won a Gradiva Prize for Best Anthology, 2014. (The book is reviewed by **Renee Goldman** in the Spring/Summer 2014 AAPCSW Newsletter.) Also, Lucille was program co-chair for the COWAP Conference on Women sponsored by the IPA, held in New York City, October 2014.



Left to right: Lucille Spira, LCSW, PhD; Arthur A. Lynch, PhD; Arlene Kramer Richards, EdD; and Arnold Richards, MD, at the Gradiva award ceremony, November 15, 2014, in New York.

## Mark D. Smaller, First Social Worker Elected President of APsaA

Mark D. Smaller, PhD, in June 2014, assumed the role of president of the American Psychoanalytic Association, having served as president-elect since June 2012. Dr. Smaller, the first social worker elected president in APsaA's 100-year history, will serve until June 2016.

Dr. Smaller received his bachelor's degree from the University of Michigan in Ann Arbor and his master's and doctorate degrees in social work from the University of Chicago. He trained in child, adolescent, and adult psychoanalysis at the Chicago Institute of Psychoanalysis, from which he graduated. He is on the faculty of the Chicago Institute for Psychoanalysis and the Institute for Clinical Social Work.

In addition to his private practice in Chicago and Saugatuck, MI, Dr. Smaller is the founding director of Project Realize, an in-school treatment and research project at Morton Alternative High School located in Cicero, IL.

Dr. Smaller has served APsaA in a number of leading roles: as chairman of the Committee on Public Information, the Committee on Social Issues, and the Committee on Foundations. In 2008 he received the American Psychoanalytic Association's Distinguished Service Award. Dr. Smaller is a former director and current trustee of the Neuropsychology Foundation, located in New York.

Dr. Smaller describes his commitment to moving psychoanalysis beyond the office setting: "We need to raise public awareness of the value of psychoanalysis not only as an effective treatment method, but also underscore its application in solving social issues, enriching literature and the arts, facilitating effective business and management, and its usefulness in the everyday lives of children and families."

## aapcsw

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[www.aapcsw.org](http://www.aapcsw.org)

Board Certification, cont. from page 3

**Continuing Education:** within the past 3 years, amassed 40 clock hours of clinical continuing education, of which 50% can be identified as psychoanalytically oriented

### Specialty Practice Experience:

- 1) Within the past year, practiced at least 300 hours (post-grad) informed by psychoanalytic theory and formal psychoanalysis with at least 2 analysands
- 2) Within 3 years or more, practiced at least 4,500 hours (post-grad) informed by psychoanalytic theory

### Evaluation of Practice:

- 1) Successfully evaluated by colleagues/supervisors/consultants who are psychoanalysts and who are clinical social workers, psychologists, or psychiatrists, and
- 2) Subject of favorable letter of assessment from at least 1 of 2 colleagues who served as consultant or supervisor while you were obtaining your practice knowledge.

### Annual Recertification Requirements to Maintain Credential:

- Currency of practice (at least 300 practice hours) and active practice of psychoanalysis with at least 1 analysand
- 20 hours of clinical continuing education, of which at least 25% must apply to psychoanalysis
- Highest clinical-level state licensure in good standing and adherence to ABE Code of Ethics.

- Renewing Member     New Member

## Profile Information

First Name \_\_\_\_\_  
 Middle Name \_\_\_\_\_  
 Last Name \_\_\_\_\_  
 Credential(s) \_\_\_\_\_  
 (preferred directory listing, e.g., PhD, LCSW, BCD, etc.)  
 Email \_\_\_\_\_  
 Website \_\_\_\_\_  
 Grad School \_\_\_\_\_  
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 Degree(s) \_\_\_\_\_

## Treatment Issues & Areas of Practice

Check all that apply

- |   |   |
|---|---|
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| <input type="radio"/> Autism                                | <input type="radio"/> Hypnosis                          |
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 Adults     Older Adults

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The AAPCSW online **Member Directory** is public and includes name, credentials, office address/phone, and practice areas. Do you want to be included in the directory?

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## Optional Contributions

Members may make tax-deductible contributions to NIPER (National Institute for Psychoanalytic Education and Research, the education arm of AAPCSW), the NIPER Student Conference Fund, and the National Advocacy for Psychoanalytic Social Work. Please visit [www.aapcsw.org](http://www.aapcsw.org) to learn more.

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