

aapcsw

American Association for Psychoanalysis in Clinical Social Work

2023, issue 2

newsletter

From the President and President-Elect

Brian Ngo-Smith, LCSW, BCD-P, FABP, and Janice Berry-Edwards, PhD, LICSW, LCSW-C

Greetings, colleagues!

We write to you as Brian's term as President of AAPCSW comes to an end (December 31), and Janice's term nears its commencement (January 1). This seemed an important opportunity to reflect on this moment of change. AAPCSW is all about making connections with friends and colleagues who think and practice with the shared values that come from the overlapping fields of social work and psychoanalysis, and we have found this in the valuable relationship that has been growing between us over the last two years of our terms as President and President-Elect.

The bond that developed between us has roots that intrigued and drew us together. Early on in our terms, we learned of an uncanny connection to an unusual place: Waterloo–Cedar Falls, Iowa. Brian was born in Waterloo and spent several years of his childhood in neighboring Cedar Falls. Janice, much to her dismay, also found herself there, as an undergraduate student at the University of Northern Iowa. Cedar Falls was Janice's

first experience living as the other, in a community where she felt isolated. But in Waterloo, the town where Nikole Hannah-Jones, the Pulitzer Prize-winning creator of the 1619 Project was born and raised, Janice found a place to be where she was not the other.

The Midwest, like plenty of other parts of this country, has historically been about as hospitable to Black folks and queer folks as psychoanalysis has been, so while it's not surprising that we both moved away from that region, perhaps it is notable that we each moved closer to psychoanalysis. Janice found her way back to her home on the East Coast, Brian eventually migrated west to Denver, and we both represent the curious and circuitous paths that can lead to psychoanalytic social work. It is the way these unique origin stories blend into shared professional values that makes up the heart of AAPCSW, and we hope that, as there is the biennial change in leadership, our members are reminded how eager we are to hear from each of you, to learn more about your path to this organization, and to recruit you to get involved so our community can grow more vibrant and diverse.

We believe that, like the title of our 2023 conference, this moment of change in leadership also represents a bridging of the divide, as Janice becomes the first Black President in the history of AAPCSW and, for that

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editor'sword

Christie Hunnicutt, MSW, LCSW



I am hoping that this *Newsletter* finds you all well and attending and/or participating in the biennial 2023 AAPCSW Conference!

We want to take time to welcome President-Elect Dr. Janice Berry-Edwards, who will be transitioning into the role of President of AAPCSW in January 2024: We are excited for what is ahead with your leadership. We must also recognize and thank our current President, Brian Ngo-Smith, for the hard work, innovative thinking, and forward-moving leadership of this most recent Presidential term: It has been a pleasure to have you at the helm. Both leaders came together for this issue, offering a collaborative and meaningful column that introduces beautifully notions of race, transition, and change that preface and initiate the incredibly important subject matter provided in this issue.

Golnar Simpson has submitted a highly important commentary on the experiences of marginalization, polarization, and the hope for change through ongoing learning and understanding, reflected in the staple Diversity & Social Action Committee column. Dan Buccino, Teresa Méndez, Brian Ngo-Smith, and Dr. Janice Berry-Edwards offer an incredibly meaningful and analytical summary of the 3-part town hall series titled "AAPCSW Town Halls on the Holmes Commission: Final Report on Racial Equality in American Psychoanalysis," a magnanimous yet magnificently achieved feat. In addition, Dan Buccino highlights a psychoanalytic education program that places social workers at the forefront of designing, delivering, and furthering psychoanalysis in the workforce. And finally, from a practice lens, Ada Frummerman provides commentary on the notions of death and illness in psychoanalytic practice and Joel Kanter offers an update on the Psychosis Consultation Group.

It is always important to acknowledge the contributions and show gratitude to all who have contributed to this *Newsletter* issue. Thank you also to all members who submitted content for this edition, including Josh Abrahams, Kevin Barrett, Carlton Cornett, Valerie Frankfeldt, Michelle Kwintner, Cathy Siebold, and Lee Whitman-Raymond. Special thanks to Kelly Martin, Barbara Matos, Olivier Massot, and Penny Rosen.

Please continue to send all your wonderful accomplishments, experiences, news, thoughts, and ideas to us so that we may fully represent the content that is most relevant, contemporary, and inclusive of subject matter that our members are truly passionate about. We always seek any contemporary commentary, perspective, and/or clinical practice that recognizes the ongoing mission and values of our organization.

Be safe and be well!

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Where Do We Go from Here?

Golnar A. Simpson, PhD, LCSW

The past—or, more accurately, pastness—is a position. Thus, in no way can we identify the past *as past*.

—Michel-Rolph Trouillot (1977)

Everything is now. It is all now.

—Toni Morrison (1987)

I am writing this column on the sixtieth anniversary of the March on Washington and the remembrance of Martin Luther King’s “I Have a Dream” speech at the Lincoln Memorial on August 28, 1963. This pivotal historic event takes on a powerful fresh meaning with the daily breaking news of racial hate crimes. The most recent incident occurred on this anniversary commemoration. Three Black Americans were gunned down by a young white assailant in Jacksonville, Florida, the site of the 1960 KKK massacre of a large crowd of Black people at a sit-in demonstration opposing racial segregation that became known as the Ax Handle Saturday.

Moreover, a few other recent central human rights violations of marginalized groups add to the poignancy of this day. The Supreme Court’s ruling against women’s rights to self-determination in reproductive health has in many states led to the passage of extreme restrictive laws and fundamental disregard for life and death situations. Additionally, the Supreme Court’s eradication of Affirmative Action based on the absurd claim that race in college admission policies is no longer needed, while there is heightened racialized hate crimes in society, tries the limits of every fair-minded person concerned with the quality of education for all. At the same time, the ongoing

ferocious hate-filled attacks on LGBTQ+ rights, at almost every level of existence, has intensified.

Concurrent with these scenes are other mind-numbing daily violent global and local events, including climate change, socioeconomic inequality, political hyperpolarization, and a pandemic level of “othering” that cast dark clouds over our personal and professional lives! As citizens and mental health professionals, our vigilance to the resulting tragedies and our urgent ethical responses are a necessity.

At this specific moment, how do we understand the current state of affairs in the world, in general, and in our professional lives, in particular? Where do we go from here? The circular relationship of time—past, present, and future—along with the concept of “liminality” seem to be a good start. As Malksoo (2012) states:

Liminal moments are in-between situations and conditions where established structures are dislocated, hierarchies reversed, and traditional settings of authority possibly endangered. . . . It is thus a realm of great ambiguity, since the liminal entities are neither here nor there; they are betwixt and between the positions assigned and arrayed by law, custom, convention, and ceremonial. Yet, as a threshold situation, liminality is also a vital moment of creativity, a potential platform for renewing the societal make-up. (481)

As psychoanalytic clinical social workers and psychoanalysts, we are familiar with the dynamics of “transitional spaces” and/or “liminal moments” and the challenge of maintaining their viabilities in the face of powerful internal and external forces. As such, we are indeed in a liminal moment and in need

AAPCSW Diversity & Social Action Committee

Golnar Simpson, Kathryn Basham, Janice Berry-Edwards, Ellyn Freedman, Scott Graybow,
Carolyn Gruber, Corbin Quinn, and Audrey Thayer Walker

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See www.aapcsw.org/about_us/committees.html#diversity.

of further clarity in defining how we move this process forward. As Nancy Chodorow (2020) states: “How do we experience ourselves in relation to the other? How do we create the experiential immediacy of the present?” (251). How do we safeguard our basic regard for the other from the impingement of societal forces on the other’s rights as a core principle of our democracy? This applies to the human right to quality health and mental health care.

Fortunately, in this moment of liminality, windows are beginning to open. At the societal level, cumulative experiences such as the COVID-19 Pandemic and the powerful Black Lives Matter movement have encouraged outcries for much needed policy changes, for example gun violence, climate disasters, and abject poverty. Furthermore, at the professional level, from faculty and students in academia to professional membership organizations, a clarion call has been issued to explore innovative ways to move forward. Our contemporary knowledge of the complex inside/outside dynamics of human functioning commensurate with our professional values can guide us to necessary action.

In light of the ongoing challenges, the Diversity and Social Action Committee is continuing its focus on matters of race and gender. This year, at the November AAPCSW’s biennial conference, we have organized two round table presentations by

members of our committee titled “Race, Gender, Life, Liberty: A Psychoanalytic Perspective,” around brief theoretical and practice formulations, including case vignettes in conversation with the attendees. We believe that at this critically important liminal moment we can come together, talk openly, listen deeply, and learn from each other through “holding” one another’s concerns and ideas. At this time, with various enormous tasks before us, silence indeed is not an option! Together, as our professional pioneers had done in facing challenges of their times, we too can continue our efforts and persist. See you in Chicago!

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Monthly Psychosis Consultation Group

Joel Kanter, MSW

In January 2022, under the auspices of AAPCSW, Brian Ngo-Smith, Mark Ruffalo, and I initiated a free monthly consultation group for colleagues interested in psychodynamic approaches to psychosis. Surveying our professional landscape, we understood that neither graduate nor postgraduate education offered significant training or support for helping these challenging clients; too often, colleagues struggle with this work in isolation in their home communities.

Now co-lead by Mark Ruffalo and myself, we meet on the second Monday of each month, 8:00–9:00pm ET. Readings are pre-circulated before each meeting for discussion, and sometimes we have

guest “faculty” to discuss relevant topics. Past guests have included Nancy McWilliams discussing her papers on treating schizoid conditions and Michael Garrett on the integration of CBT and psychodynamic approaches.

The group is open to colleagues from all disciplines, and AAPCSW membership is not required. Besides colleagues from all over the US, we’ve had participation from Canada, China, New Zealand, Mexico, and Brazil. (No CEUs are offered.)

If you are interested in participating in this group, email me at joel.kanter@gmail.com.

Death and Illness of the Analyst

Ada Frummerman, LCSW

The illness, aging, and death of the analyst has been written about focusing primarily on the analyst's experience of coping with aging, illness and imminent death (Schwartz & Silver, 1990). More recently a book on the subject, *What Happens When the Analyst Dies* (Heilbrunn, 2019), has addressed the experience from the viewpoint of the patient. However, this is not a "new" issue. Freud practiced for years while dealing with painful and ultimately lethal jaw cancer. He wore an agonizing prosthetic device and lost hearing in one ear. This necessitated sitting on a different side of the couch. And at times the prosthesis made talking almost impossible. He made no mention of the clinical meaning or impact of his progressive disability on his patients or on himself" (Schwartz & Silver, 1990, p. 142). Did his patients know? He is said to have admonished a patient who was withholding her fears about his condition: "We have only one aim and one loyalty, to psychoanalysis. If you break this rule you injure something more important than any consideration you owe me" (Schwartz & Silver, 1990, p. 247).

This topic has become more relevant as analysts become older, continue to practice and supervise. In 2022, the IPA stated the average age of their members was sixty-five and training analysts was seventy-three (Goldberg, 2022). While aging does not inevitably lead to illness, the possibility of impaired functioning must be faced. For instance, one patient noticed that her analyst had trouble hearing. When she pointed this out, the analyst acknowledged only that her son had told her to get hearing aids. The patient left treatment.

This issue raises many important and difficult questions. What is the best way for an analyst, who has been diagnosed with a serious, potentially fatal illness, to communicate about this with her patients? Furthermore, if an analyst has been treated for cancer, for instance, and is in remission, should she inform new patients of her health issues? This issue was raised by Amy Lichtblau Morrison, MSW, in the book *Illness in the Analyst* (Schwartz & Silver, 1990).

Another issue that may militate against disclosure is the analyst's reluctance to tell

colleagues about her condition arising from fear that they will no longer refer new patients and her income would suffer. The same analyst (Lichtblau Morrison) who had informed her colleagues said that initially they did not refer patients who were judged to need long-term treatment. However, over time she began to receive referrals for patients needing long-term care.

Many varying scenarios have been anecdotally presented. One individual reported that her analyst abruptly terminated treatment via a text message. No explanation was given, and the patient subsequently learned that the analyst had died of cancer. In another instance, the analyst did not acknowledge her illness when the patient asked her directly. (This analyst was wearing a wig.) On the other hand, some of the patients of this analyst thought that she had simply gotten a new hairdo. In yet another instance an analyst did not tell colleagues or patients that she was sick, and her sudden unexplained death was traumatic. Many questions arise. If the analyst is forced to cancel many sessions—with no prior warning—what should the patient be told? If the analyst returns to work and her appearance is visibly different (e.g., has lost hair, weight), how should this be addressed? While the analyst may have legitimate concerns about how a fragile or long-term patient will handle news of the analyst's illness, the potential for far greater trauma to the patient may grow exponentially if the analyst abruptly leaves practice or dies. On the other hand, there are reports of patients who seemed to be unmoved by the death.

The purpose of this piece is not to be critical of individuals who have not handled these situations in an "ideal" manner. There is no template that outlines the best possible way to approach these issues. The aim is to raise awareness of the potential for conflicts between analysts and their patients in perhaps the most momentous situations therapy can present.

There is a genuine need for this issue to be addressed. Training institutes and other professional organizations have rarely faced this openly.

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The Sue Fairbanks Psychoanalytic Academy: Advancing Post-Graduate Psychoanalytic Education by and for Social Workers

Daniel L. Buccino, LCSW-C, BCD, Immediate Past Co-President, AAPCSW

During our term as co-presidents of AAPCSW from 2019 to 2021, Teresa Méndez and I repeated incessantly that if it weren't for social work and social workers, psychoanalysis couldn't have been born and would cease to exist. The recent launch of the Sue Fairbanks Psychoanalytic Academy (SFPA) at the University of Texas School of Social Work, and its inaugural certificate program cohort, during the 2022–23 academic year, operationalizes that fact in very novel ways. The second, 2023–24, cohort is just underway, with twice as many students enrolled as the first year.

The SFPA is perhaps the first comprehensive post-grad certificate training program in 110 years that was designed by and for social workers and which features prominently the writings and theoretical contributions of social workers while also foregrounding social work's commitment to social justice. The SFPA believes that “the social” vs. “the clinical” is a false distinction and that psychoanalysis itself provides ways to understand and advance both realms.

Recently, the *New York Times* featured yet another article about a renewed interest in Freud and psychoanalysis revealing again that the reports of its death have been greatly exaggerated. And were

it not for social workers—as therapists, analysts, patients, supervisors, supervisees, and students—filling the conferences and couches of analytic enterprises today, psychoanalysis may not have survived.

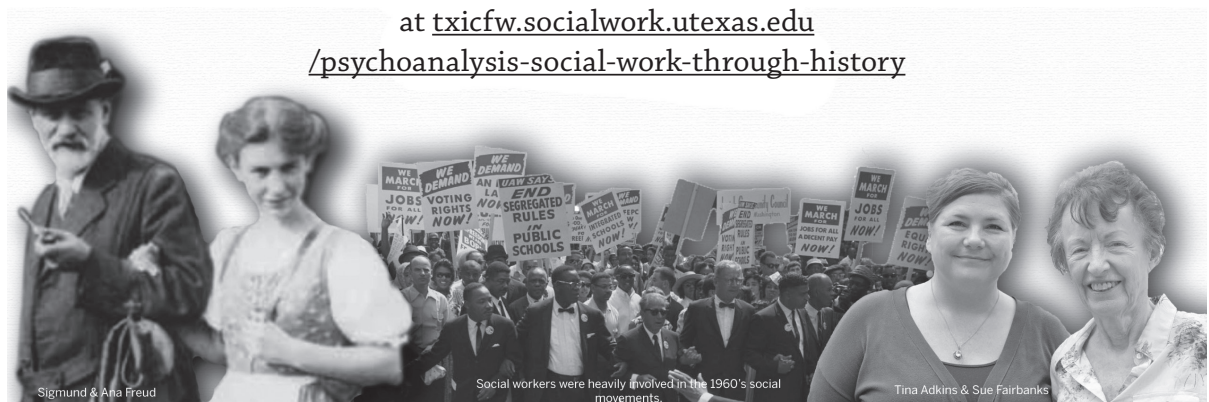
From Bertha Pappenheim, or Anna O., whose instrumental role in the development of the “talking cure” was credited by Freud himself (in 1895 he called her the “actual founder of the psychoanalytic approach”) and who went on to become a prominent social worker and activist, to the social work students today, we believe that psychoanalysis began in conversation with a social worker and that the future of psychoanalysis remains intimately connected to social workers. This lineage is something for our membership to be proud of.

Given some of the recent upheaval in some of the major psychoanalytic organizations and programs, it is clear that there is some generational and theoretical shift that needs to continue to happen in the psychoanalytic enterprise but that process will not come easily. However, social workers will undoubtedly lead that process as we comprise the vast majority of mental health practitioners and our profession is fundamentally more diverse than the other core mental health professions that feed

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psychoanalysis. AAPCSW is well positioned for leadership here and the SFPA represents a major effort to centralize and recognize the role of social work as unique creator and disseminator of psychoanalytic knowledge and expertise.

The contemporary turn in psychoanalysis asks us to take up social, economic, political, and relational dynamics, considering the intrapsychic and interpersonal, and we know that these are the very tenets at the center of the social work perspective, foundational to our “person-in-environment” approach. In fact, they form one of AAPCSW’s Core Values: to acknowledge the intersection of our inner and outer worlds. In this way, contemporary psychoanalysis may be at once attempting a return to Freud, albeit to a more radical version than that initially transmitted in this country, and a return to fundamental social work values and principles. So while we continue to advocate for the value of psychoanalytic principles in today’s mental health care landscape, we will also advocate for the unique role of social work in psychoanalysis. The SFPA stands with AAPCSW to embrace and claim our identities as both psychoanalysts and social workers, as psychoanalytic social workers.

A second pillar of AAPCSW and the SFPA is the recognition that social work is a profession expressly founded on a commitment to social justice, another of AAPCSW’s Core Values: to integrate concerns for social justice with clinical practice. Freud founded his “impossible profession” on a bedrock of social justice, envisioning an international network of free clinics to make treatment available to all.

The SFPA takes up this imperative to make psychoanalysis and psychoanalytic training and treatment available to more people.

The SFPA, led by Dr. Tina Adkins at the UTexas Institute for Family and Child Wellbeing, at the UTexas School for Social Work, unites psychoanalysis and social work by offering education and training that weaves psychoanalytic theory,

practical skills and social work values to help practitioners better serve the needs of community members. The curriculum was conceived and developed by AAPCSW keynoter and author Beth Kita, with Tina Adkins. Instructors in the first year cohort included current AAPCSW president Brian Ngo-Smith; AAPCSW past co-presidents Dan Buccino and Teresa Méndez; and social workers Ryan Parker and Danny Yu. Cathy Eisenhower will be joining Ryan Parker as an instructor this year.

The program is organized around five, 5-week modules centered on the following topics: critical social work and psychoanalysis—reckoning with our roots; the inner worlds of individuals and groups; agency and organizational life; the sociopolitical realm; and surviving and thriving in social work.

Most students in the program have been early to mid-career social workers and most are working in the public sector. Given the ease of attendance by Zoom, there have been a couple of international students, spanning several time zones. It was extremely heartening and gratifying to witness the growth and development of the first cohort over the course of the year. Many were inspired to make career changes to more clinical settings and several committed to more intensive psychoanalytic training. A number of them have joined and already become active with AAPCSW, and learners from both cohorts are looking forward to meeting with us all in person in Chicago in November at our biennial conference, where we will convene a panel to describe the program in even more detail.

As concerns persist about the diminishing quality and quantity of clinical education in social work schools these days, and the increasing scarcity of psychodynamic clinical education in particular, The Sue Fairbanks Psychoanalytic Academy Certificate Program offers a unique curriculum to recenter psychoanalysis at the heart of clinical social work education and re-centers social workers at the heart of psychoanalysis. See txicfw.socialwork.utexas.edu.

child&adolescent

Working with children, adolescents, and their parents? The *Newsletter* welcomes your articles pertaining to child and adolescent practice. Contact the Child & Adolescent column editors: Karen E. Baker, MSW, kembaker1@comcast.net • Wendy Winograd, LCSW, BCD-P, DSW, wendywinograd@gmail.com

AAPCSW Town Halls on the Holmes Commission

Final Report on Racial Equality in American Psychoanalysis

Daniel Buccino, MSW, LCSW-C, BCD; Teresa Méndez, MSW, LCSW-C; Brian Ngo-Smith, LCSW, BCD-P, FABP; and Janice Berry-Edwards, PhD, LICSW, LCSW-C

AAPCSW just concluded a three-part town hall series reviewing the Holmes Commission Final Report and considering next steps for AAPCSW. This report is an incredibly rich and extremely novel study of 200 pages with another 200 pages of appendices and data analysis. It will bear extended unpacking and will undoubtedly spin off multiple other peer-reviewed studies. Though commissioned by the American Psychoanalytic Association, it looks at American psychoanalysis most broadly. Given the progressive ethical commitments of the social work profession, and the fact that more and more candidates and faculty are social workers, AAPCSW has an enormous opportunity and responsibility to metabolize and act on this report.

As much as there is a wish for a tidy summary of this 400-page report, the Holmes Commission Final Report is a document that deserves the opportunity to speak for itself. Racism, in all its forms and manifestations, does not make for easy material. Just as those who filled out surveys and participated in interviews have grappled with racialization and racism in their organizational and clinical lives, and just as the Holmes Commission itself grappled with racialized enactments, attacks, and defenses in its group process, those seriously interested in its findings and implications are going to have to do some work of their own.

Instead of a summary, Teresa Méndez, Past Co-President of AAPCSW and a member of the Holmes Commission, focused on Chapter 7 of the Report, which elaborates the Commission's own "Internal Enactment." She attempted to offer those in attendance at the AAPCSW Town Hall something of her experience as a member of the Holmes Commission and how it was that the Holmes Commission Leadership Team was able to contain and make thinkable the ongoing racial enactment that unfolded in the group.

Teresa explained: "Today I will be engaging with the chapter on Enactments, which I believe is most central to the workings of a psychoanalytic organization like AAPCSW. And which I personally feel is

the heart of the report, and was the heart of the Holmes Commission process—as heartbreaking as it was at times. I was at a wedding once where the officiant spoke of a dynamic between those being married as one that could be at once heartbreaking and heart-reassembling. I think a fully-engaged and formulated enactment can be exactly that—and what are we all as psychoanalytic clinicians if not intimates with the ways in which we break each other's hearts and, hopefully, together, find some way to reassemble or reconstitute."

Like most mental health professions, American Psychoanalysis remains largely a profession of white women with 86% of faculty and 73% of candidates identifying as white, and 64% of faculty and 68% of candidates identifying as female. It is therefore notable that the leadership of the Holmes Commission is all Black. It was a credit to the work of the Leadership Team, and the group, that there was both space for a racialized enactment to emerge and a genuine interest in where it came from and what it meant—a sense of not only its inevitability but its importance to the work. There was a decisive effort to move from the individual the enactment emerged through to the group—to consider what this member held and expressed for the group, not least the envy that many in the group likely felt toward the impressive, creative, and unorthodox Leadership Team.

The Commission's project was an evaluative study to determine in what ways and to what degree systemic racism is manifest in psychoanalytic institutions and institutional practices, and to recommend ways to limit the negative impact of systemic racism in psychoanalytic institutional practices. The process of the Holmes Commission also underscored another important finding of the Report—that being "prepared" to wade into the work of race, racism, and racial enactment is about openness and receptivity—a willingness to enter into deeply uncomfortable, and for some abject, places as much as it is about knowledge or theory.

The Holmes Commission Report employs a mixed-method design, employing robust quantitative

and extensive qualitative data, which combines “the numbers” and “the stories,” to achieve very deep and meaningful insights. This is not an anecdotal report or theoretical hypothesis or the musings of a few experts. This is far from the single-case study design of most psychoanalytic research. The Holmes Commission Report analyzes survey and interview data from over 2500 respondents over a 2-year period—from three main groups of participants: faculty, staff, and administrators of psychoanalytic organizations; candidates associated with training institutes; and people who were psychodynamically oriented but had not entered a psychoanalytic training program.

Countering one of the central objections to this report, and indeed to any effort to interrogate or integrate the “social” with, or into, the “psychoanalytic,” was the conclusive finding of the Holmes Commission that “the social is deeply embedded in and inseparable from” the psychological. Though indisputable to many for years, this is now settled science and we must strongly reject any effort to quibble with this inseparability going forward. Indeed, trying to do so itself becomes a racial enactment.

Another of the primary resistances to this report is that it doesn’t adequately consider economic issues enough. That, of course, is another common racist erasure—to somehow claim that something isn’t really about race, that it’s more about class or gender or something else. Though Chapter 4 is, in fact, largely about the (still raced and racially exacerbated) economic challenges to undertaking and completing psychoanalytic training, the report is very clear that for those who do make it into and through training, race and racism remain real, unique and specific challenges.

The study is unequivocal in its stories and strongly statistically significant in its numbers on literally hundreds of different questions about how BIPOC candidates, analysts, and faculty experience overt and covert racism on many levels and believe it is a bigger and more prevalent concern than do their white counterparts. Though there are some expected generational differences—(younger) BIPOC and white candidates’ views about racial issues were more likely to be in some alignment—the racial differences were still much more pronounced and remained discrete.

Though candidates experienced and reported more racism than more (senior) faculty, both BIPOC candidates and faculty reported noticing and experiencing more racist acts and racial enactments and felt their organizations did not respond adequately to them. It seems that white faculty in particular had the most difficulty acknowledging systemic racism in their organizations and in considering ways to limit the negative impact of systemic racism in their institutional practices.

Again, in a 400-page study, there are and will continue to be multiple ways to slice and metabolize the data, but this report is methodologically rich, very strong, and cannot be dismissed.

There is plenty of work for us all to do in unpacking the Report and enacting its recommendations, and AAPCSW is well positioned to lead the way toward, as the Holmes Commission calls for, a more evolving, integrated, ethical, generative, humane, honest, reliable, relevant, nurturing, thoughtful, informed, self-reflective, and liberatory psychoanalysis. The three Town Halls offered rich opportunities to begin to think about this report, as well as to encounter racial enactments as well.

While the Town Hall format does not lend itself to an ongoing, immersive, process group experience, nor a sustained study group to review the report itself, AAPCSW is committed to addressing what our members hope to see from the organization going forward. To that end, our Diversity and Social Action Committee will be organizing and hosting a study group to more purposefully work through the final report. For those who are interested in learning more about this project as it gets developed, please contact the committee’s chair, Golnar Simpson, at golsimpson@verizon.net. Our Communications Committee will begin to create a working group to address our listserv, which is where the majority of communications amongst members occur, and which is therefore where most racial enactments are likely to take place. Many attendees at the Town Halls expressed an interest in helping to develop a more community-led set of guidelines for our listserv so that enactments or other conflicts that emerge can be thoughtfully addressed. If interested in learning more about that work group, please contact the committee chair, Christie Hunnicutt, at AAPCSWNewsletter@gmail.com.

committeereports

Membership

Josh Abrahams, MS, LCSW, *Co-Chair*

Kevin Barrett, AM, LCSW, *Co-Chair*

The Membership Committee is excited to announce the appointment of an Area Chairperson for Texas—Robin Hopkins, LCSW, LCDC. Robin currently works as a Child and Youth Behavioral Military Family Life Counselor at Fort Cavazos, Texas. While participating in the Sue Fairbanks Psychoanalytic Academy Contemporary Psychoanalytic Social Work Practice Postgraduate Certificate Course Program, Robin learned of AAPCSW and joined as fast as she could. Robin is also certified in DBT and Trauma-Informed Expressive Art Therapy.

Besides enjoying spending time with her family and beloved pets, Robin also enjoys coffee, crafting, and reading all things Winnicott and psychological thrillers with her mystery book club. Texas members: Feel free to reach out to Robin to share interests and ideas. You will find her to be responsive and enthusiastic (socialworkerrobin@gmail.com; 254.290.8618).



Submitted by Josh Abrahams

Communications/Outreach • Diversity & Social Action • Education • Membership • See page 14

Death and Illness of the Analyst, continued from page 5

Two exceptions that I am aware of is a conference sponsored by AAPCSW. In its 2000 conference, the workshop “The Impact of Catastrophic Events” was held. And in 2019, the International Psychoanalytic Association held the workshop “The Aging of the Female Analyst.”

This critical issue is one in that institutes and professional organizations should recognize as just as crucial as it is difficult. Minimally, these organizations can provide some guidance and support. In that regard, Theresa Rosenblatt has suggested that the training institutes should offer a course that addresses these issues (Heilbrun, 2019).

If the analyst receives a life-threatening diagnosis, what are the options? If the analyst is sick, and has not disclosed this, what are the potential implications for treatment (particularly if obvious symptoms of illness are present)? If the analyst chooses to disclose her situation, other scenarios may unfold. For instance, one analyst suggested that her patient should feel free to choose another analyst. And if the death is sudden and not preceded by illness (e.g., sudden heart attack or an accident),

how might the patient be best served and by whom?

Additionally, should an analyst, no matter how old, make provisions in advance for either prolonged absence or death? A “professional will” can designate a colleague who can communicate with her patients (and are there any confidentiality issues to take into consideration?). There are no easy answers, but the daunting challenge posed cannot justify failure to grapple with and meet it.

Ada Frummerman, LCSW, is a therapist in private practice. She recently retired after twenty-two years at Lenox Hill Hospital’s Outpatient Center for Mental Health.

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From the President and President-Elect, continued from page 1 matter, in the history of any of the major psychoanalytic organizations in the US that constitute the Psychoanalytic Consortium.¹ In this spirit, we encourage our membership to work alongside us to bridge the continued divides in our field—for example, between comprehensive clinical training in graduate schools of social work and sustained and ethical attendance to legacies of injustice, or the similarly confounding collision in psychoanalysis between the social and the psychic, which reverberates throughout the final report of the Holmes Commission on Racial Equality in American Psychoanalysis. To that end, we aim to mark this era in AAPCSW and the larger field by embracing the challenges ahead of us, as the Holmes Commission presses us to do, and by continuing to offer our leadership in the service of decolonizing psychoanalytic social work.

We hope you will continue to find AAPCSW to be a professional home and that you will support us as we grow more inclusive and equitable so that all will feel welcome in our community.

—*Brian and Janice*

1. The Psychoanalytic Consortium is comprised of five psychoanalytic organizations: the American Academy of Psychodynamic Psychiatry and Psychoanalysis, the American Association for Psychoanalysis in Clinical Social Work, the American Psychoanalytic Association, the Confederation of Independent Psychoanalytic Societies, and the Society for Psychoanalysis and Psychodynamic Psychology: Division 39 of the American Psychological Association. You can find out more about its history at www.psaconsortium.org.

Member Profiles

As we move into fall, please remember that your member profile needs to be current and your information up to date. Within the next several months, we will have PEP-Web subscriptions (renewals and new subscriptions) due and the election of officers for 2024–2026 will take place. We also have the biennial AAPCSW/NIPER Conference occurring November 9–12 in Chicago.

If you have not received information on the conference or other information on AAPCSW News and Reminders, please check your computer settings to make certain they are allowing you to receive all messages. Also—check your SPAM folder! If you have unsubscribed from general news, you can resubscribe to receive AAPCSW emails by updating your member profile settings.

Thanks, and should you have any questions/suggestions/concerns, please be in touch: barbara.matos@aapcsw.org or 301.799.5120.

Barbara Matos, MS
AAPCSW Administrator

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Every Third Saturday on Zoom • 4:00–5:30pm EDT

Contact Karen Baker (kembaker1@comcast.net)
or Wendy Winograd (wendywinograd@gmail.com)

See www.aapcsw.org/events for dates • No CE hours

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.

membernews

Daniel Buccino, LCSW-C, BCD, immediate past co-president of AAPCSW, has been promoted to Associate Professor of Clinical Psychiatry and Behavioral Sciences at the Johns Hopkins University School of Medicine. He is the first social worker and first non-doctoral-level faculty member to be promoted to Associate Professor in the 115-year history of the department, the first and oldest academic psychiatry department in America.

After over thirty years at Hopkins, directing mood disorders and substance use disorders treatment programs in the public mental health system, Dan is also pleased to announce the expansion of his private practice of psychotherapy and psychoanalysis, clinical consultation and supervision, executive and leadership consultation, expert performance coaching, and civility education in Baltimore.

Carlton Cornett, MSW, LICSW, was published by the International Psychotherapy Institute in May 2023: *The Psychotherapeutic Relationship: Forty Years of Learning to Be with Patients*. The IPI publishes ebooks that can be downloaded without charge at their website, www.freepsychotherapybooks.org. He is excited to have the IPI as a publisher because this makes his book more accessible to a wider audience, especially younger therapists whom he hopes will find something in it that speaks to them.

The book is a description of his mentors and the process of developing a clinical point of view. He believes that psychotherapists begin to develop a perspective on human development in their original families. Often, they play a therapeutic role even as young children. When pursuing professional training, they are attracted to psychological theories that make their experiences understandable. Refinement of the psychotherapist's craft occurs during work with patients/clients and through contact with more experienced colleagues whom they respect and admire. It is in these relationships with more seasoned clinicians who accept and respect them that they learn to allow their whole selves to come through in their work. They then model to those who seek their aid how to accept themselves.

Cornett was a Clinical Assistant Professor of Psychiatry at the Vanderbilt University School of Medicine in Nashville, Tennessee, between 2007 and 2021 and is currently on the faculty of the Advanced Psychodynamic Psychotherapy Program of the Nashville Center for Psychoanalysis and Psychodynamic Psychotherapy. In 2021 he retired to Keene, New Hampshire, with his partner of over thirty years, DeWayne Fulton.

Valerie Frankfeldt, PhD, LCSW, co-presented the workshop "Keeping Good Boundaries: Finding Clarity and Negotiating Gray Areas in Clinical Practice" as part of PPSC Annex and PPSC Learning Lab: A Live Zoom Masterclass with PPSC Faculty on September 9.

Valerie has a special interest in the effects of digital life and devices on boundary anomalies in analytic work. To that end, she has most recently published two papers on the topic: "The Pandemic, the Protests, the Chaos: A Destabilizing Effect on the Analyst" (*American Journal of Psychoanalysis*, 2022), and "Digital Communication in Psychoanalysis: An Oxymoron?" (*Psychoanalytic Social Work*, 2020). Valerie is a training analyst, faculty member, and supervisor at the Psychoanalytic Psychotherapy Study Center in NYC.

Michelle Kwintner, PhD, LCSW-R published "Psychoanalytic Social Work: How to Do Things with Words and How to Say Things with Deeds" in the 2022 volume of *Psychoanalytic Social Work* in memory of William Meyer. At the IPA in Cartagena, she presented a paper titled "Surviving Online Space in the Two-Person Setting," part of the pre-congress workshop "Tele-analytic Practice in Times of Social Division, Pandemic, and War." She looks forward to seeing members at the upcoming AAPCSW conference in Chicago.



Cathy Siebold, DSW, LICSW, has now closed her New York City office and is residing full time in Cambridge, Massachusetts. Cathy's featured book review titled "Mourning and Melancholia: Redux of Shoshanna Ringel's Book" (Psychoanalytic Social Work) is available online. She will be presenting the paper "But Is It Psychoanalytic?" at the October 2023 IFPE conference in Pasadena, California. She looks forward to seeing everyone in Chicago at the AAPCSW conference.



Lee Whitman-Raymond, Jessica Whitman-Raymond Lucier, Rob Whitman-Raymond, and Becky Whitman-Raymond have completed their new book, "Where's Becky? How Becky Raised Her Family," a memoir that describes the development of a family over thirty years, written in four voices: mom, dad, older sister, and, intermittently, the star of the show, Becky. The inspiration for this book emerged out of the authors' experiences of being a family on a major road trip without a map. They are hoping that "Where's Becky?" will be a source of direction for other families on a special needs journey.

Lee, Rob, and Jessica Whitman-Raymond are psychoanalytic therapists and writers. Lee has been writing since she was four. She took a fellowship at Brown University where she completed her MFA in poetry under the tutelage of Michael Harper. Lee eventually published her award-winning manuscript *The Light on Our Faces*. The poem "Knock" was

published in 1997 in *Worcester Magazine*, and "Talking Back to Maleficent" was published in *Kaleidoscope*, a journal of disability, in 2016. Lee lives for music, plays three instruments, and sings. Becky speaks several languages (not all of them understood). She is a master beader and craftswoman who almost always sings on key.

The authors write, "It has been said that if you can't find the book you need, then you must write it. This book was born out of our family's bafflement over the development and behavior of our youngest daughter and our fruitless search for directions on how to live with the challenges she brought to us individually and collectively." Published by Newman Springs Publishing, Jessica Whitman-Raymond Lucier, Lee Whitman-Raymond, Rob Whitman-Raymond, and Becky Whitman-Raymond's insightful tale is written with the insight of psychoanalysis, the style of dedicated writers, and the authority of a family determined to not only survive but to flourish. Readers who wish to experience this original work can purchase *Where's Becky? How Becky Raised Her Family* at bookstores everywhere, or online at the Apple iBooksStore, Amazon, or Barnes and Noble. For additional information or media inquiries, contact Newman Springs Publishing at 732.243.8512.

What's your news? We would like to acknowledge your professional accomplishments; feel free to provide a photo. **New to AAPCSW?** We invite you to introduce yourself.

Contact Newsletter editor Christie Hunnicutt at AAPCSWNewsletter@gmail.com

aapcsw corevalues

- Recognize the dignity and worth of each human being.
- Acknowledge the intersection of each individual's inner and outer worlds.
- Convey a psychoanalytic sensibility in our work with all populations and in all settings.
- Integrate concerns for social justice with clinical practice.
- Promote inclusivity and affirm the diverse identities of our colleagues and of those with whom we work.
- Cultivate a community of professionals that advocates for open inquiry and respect for difference.

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American Association for Psychoanalysis in Clinical Social Work

AAPCSW promotes psychoanalytic education, advances clinical social work, facilitates the production and dissemination of knowledge, and advocates for high standards of practice. The AAPCSW website (www.aapcsw.org) offers an array of information about AAPCSW. Information on benefits, listservs, programs (both local and national), activities, our history, resources, newsletters, video series, and other items of interest can be found there.

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newsletter



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R e a c h i n g Across the Divide

Bringing a Psychoanalytic Sensibility to Culture and Practice

● At this conference, we will explore what we are experiencing inside and outside our consulting rooms. “Divisiveness” seems more prominent today than at other times in history. Is it no greater but rather less hidden today? How are we to hear the other and bridge the gaps that we encounter? From its focus on internal conflict to the ways in which we understand and face difference, psychoanalytic thinking has much to say about the topic of divisiveness. Join us as we discuss the theory and therapeutic stance of responding to divisions, as they relate to the issues that are presented to us in our practices, in our communities, and in the world.

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