

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

Affiliated with The National Federation of Societies for Clinical Social Work, Inc.

Volume 12

Winter 1997

President's Message:

Observations of a Multiple Personality Disorder Within Our Profession

Margaret Frank, LICSW, BCD

President



Margaret Frank
NMCOP President

Greetings for the New Year. The (day) light is beginning once again to increase. I realize that I have chosen a rather grim title for my message to the NMCOP membership. It is my hope to bring attention to and shed some light on problems which I have observed all of my professional life. They have become crystal clear during my tenure as president of the NMCOP

which involves among other things trying to increase membership, working in the Psychoanalytic Consortium, and working with our colleagues in the Federation.

At the risk of over simplifying the core problem in MPD, it involves the inability to *integrate* different aspects of the person. When depicted in sensational movies, each element of the personality attempts to dominate and none has love and respect for each other. The plain Jane denies her sexy sister Lila who scorns both Jane and Jennifer, the angry aggressor. There is no orchestration of these elements. Thus, they cannot become a harmonious whole.

I believe this condition exists in the field of social work. A large segment of our profession works on the

“front line.” Their activities are complicated not only by the severely disabled people who are their clients but by the systems of laws and agency structures which sap their energy as they attempt to negotiate on behalf of their clientele. Is their work respected by those who are in private practice? Some of us who worked earlier in our careers on earlier front lines retain the memory of the efforts and rewards of “neighborhood work.” But, many in our profession have taken a short cut from graduate school directly into private practice. It is well known that the word sent around to applicants to schools of social work is “Don’t let them know of your interest in private practice!” To complicate matters the front liners resent their colleagues “avoidance” of the hardest work in the psycho-social scene. There is another segment of our professional population which is comfortable with the title of clinical social worker. They have most often added considerable post graduate education to their repertoire of knowledge and skill. They supervise in agencies and maintain private practices. A percentage of this group has gone on for further training to become analysts. Some are strictly in private practice and some enjoy the better informed practice of psychoanalytic psychotherapy and psychoanalysis. Some additionally remain devoted to making their knowledge available to the front line

Please see President's on page 3

Featured Articles

PRESIDENT'S MESSAGE	1	North Carolina	12
A WORD FROM THE EDITOR	2	New York - New Jersey	13
CREDENTIALING: A CRUCIAL ORGANIZATIONAL FUNCTION	2	Texas	13
BOOK REVIEWS	4	1997 NATIONAL CONFERENCE INFORMATION	10-11
Fostering Healing and Growth: ...	4	UPCOMING IN THE MAY ISSUE	14
Object Relations in Severe Trauma: ...	5	AIMS AND PURPOSES OF THE NMCOP	15
FROM ONE SOCIAL WORKER...?	6	1997 MEMBERSHIP APPLICATION	16
THE COURTS AND CONGRESS	7	ADVERTISEMENTS	17
MEMBERSHIP NEWS	8	MEMBERSHIP DISCOUNT SUBSCRIPTIONS	
Northern California	8	The Analytic Press	18
Southern California	8	International Universities Press	19
Florida	9	DIRECTORY — 1997-98 NMCOP BOARD OF DIRECTORS	20
Minnesota	12		

... from the Editor

Donna Tarver
Editor



Donna Tarver

The newsletter welcomes readers' letters, articles and opinions on topics of the day, clinical issues, book reviews, notices or reports of conferences, and news of interest to our membership.

Thanks to all contributors to this issue: Muriel Brotsky, Laurie Curtis, Margaret Frank, Ellyn Freedman, Hilde Gasiorovicz, Laura Groshong, Charles McNamara, Bill Meyer, David Phillips, Ellen Ruderman, Diana Siskind, and Carol Tosone. Special thanks to Margaret Frank for editorial assistance and words of wisdom; and to Joyce Edward, Jean Sanville, and Diana Siskind for ideas and encouragement for the newsletter.

The editor encourages readers to respond to the provocative article by William S. Meyer, NMCOP Treasurer, found on page 6.

Credentialing: A Crucial Organizational Function

David G. Phillips, DSW
President-Elect



David Phillips
President-Elect

One of the most important activities of the National Membership Committee on Psychoanalysis in Clinical Social Work (NMCOP) is its membership in the Psychoanalytic Consortium, of which it is a founding member. It participates in that organization with the other major professional groups that represent psychoanalysis in this

country: the American Academy of Psychoanalysis, The American Psychoanalytic Association, and the Division of Psychoanalysis (39) of the American Psychological Association.

A major concern of the Consortium is that of insuring the highest standards of training and practice in psychoanalysis and psychoanalytic psychotherapy, and fulfillment of this goal was one of the main reasons for its development. As part of this process the Consortium successfully opposed the efforts of the National Association for the Advancement of

Psychoanalysis (NAAP), and its subsidiary organization the American Board for Accreditation in Psychoanalysis, to be officially recognized as an accrediting body in psychoanalysis. The basis of this opposition was our shared belief that these organizations do not really represent the major groups of psychoanalysts in this country, and that the training and certifying standards that they proposed for psychoanalysis were not adequate.

Although the Consortium was opposed to the efforts of NAAP, it is also fully aware of the importance of credentialing in the field. Credentialing is an umbrella term which refers to both the determination that training programs meet established standards (accreditation), and, that practitioners have authenticated their status as being appropriately trained and competent in their speciality (certification). Both accreditation and certification are vitally important concerns. These are the ways in which professional organizations assure both the public and various regulatory organizations that practitioners and training programs are competent, and able to do what they say they do.

Currently, the Consortium, as a group, is struggling with a proposal to develop an "external credentialing" organization which will fulfill this activity for all of its member groups. One of the functions of such an organization will be to set a "floor" of minimal standards of training which practitioners must attain in order to be certified as psychoanalysts or psychoanalytic psychotherapists. Organizations within the Consortium may set standards for their own members which are higher, but not lower, than the minimum.

Other member organizations within the Consortium have, in fact, well-developed procedures for both the accreditation of training programs, and the certification of practitioners. The American Psychoanalytic Association has, for many years, set standards for the almost 30 training programs which it accredits, and for graduates of those programs which it certifies as psychoanalysts. Division 39 of the American Psychological Association has begun to establish psychoanalytic training programs around the country. In addition, after many years of study and effort it also has begun to award Diplomates to advanced practitioners of psychoanalysis who pass an examination administered by the American Board of Examiners in Professional Psychology.

The NMCOP has developed a set of standards for the certification of social work practitioners of psychoanalysis and psychoanalytic psychotherapy, but has

not yet developed a process to implement these standards and begin a certification process.

An additional effort to move forward in this area is taking place through the close working affiliation that NMCOP has with the National Federation of Societies for Clinical Social Work. Both groups have been negotiating with the American Board of Examiners in Clinical Social Work, the organization that administers the Board Certified Diplomate, (BCD). We believe that ABE, with its extensive experience in establishing and administering the Diplomate, would be a natural organization to manage certification of clinical social work practitioners in various specialities. The ABE has indicated their interest in moving ahead on this issue, and planning is currently proceeding between the various concerned groups.

President's Message continued from page 1

practitioners. The NMCOP aims to work for and represent this group.

This representation takes place as we sit with our colleagues in the Psychoanalytic Consortium, it takes place as we monitor the legislation which could affect parity of social work psychoanalysts, it takes place as we join with the Federation in preparing briefs, and attempting to influence education in our schools of social work.

WHY IS IT HARD TO EXPAND THE MEMBERSHIP OF THE NMCOP? I believe the answer lies in identity confusion. Last month I talked with a social worker who had just graduated from an APAsA Institute. She will become a member of the APAsA. I asked her why she was not a member of the NMCOP. Her reply was, "I am not a social worker. I am a psychoanalyst." She is not alone. I have challenged a few of our colleagues in the Federation who I know to practice psychoanalytic psychotherapy. They, too, claim to have a different identity. I am not ignoring the economic pressures which we all share. I do not think they provide a full explanation of our problem. Groups within our profession are too often divided and competitive. We struggle within ourselves even as we struggle to gain respect for our profession from the world about us.

This year we have taken part in several "friends of the court" briefs. In the first, a district judge did not view social work as deserving the privilege of confidentiality. The Supreme Court ruled in our favor in response to briefs put forth by ABE, the Federation, NASW, and the psychoanalytic organizations which comprise the membership of the Consortium. Currently, we are

supporting a brief sponsored by ABE and the Federation in response to a local judge who cited social work as providing "junk medicine" - and incapable of rendering a diagnosis.

Closer to home we have battled in the arena of the Psychoanalytic Consortium on the issue of external credentialing of psychoanalysis. The Consortium was able to pull together as a group when we were fighting NAAP's bid to the Department of Education to be "the" credentialing body. But, when it comes to working together to form an acceptable structure to credential all psychoanalytic sites, the tension mounts. I had the opportunity of attending the Council meeting at the American Psychoanalytic Meetings in N.Y.C. in December. I could see the contention and division within their ranks. I was invited to address the Council and, in short, I called for "good faith" involvement in our Consortium work. So, splits and divisiveness abound within our profession and between the professions. Most of us care deeply about our work and the rights of our patients. How much better could we serve them and ourselves if we would orchestrate ourselves into a harmonious whole?

In closing, I wish to sound the brighter notes of the year and of the future. The Executive Committee of the NMCOP is a hard-working group. We meet once a month on the phone and face to face once a year. The energy and humor of this group are nourishing. We have an exciting meeting to attend in Seattle next fall. One book has emerged from our Study Group with others in the works. Our newsletter has a new Editor who approaches her work with energy and graciousness. The problems I have expounded on above are not discouraging but challenging. We need the help and energy of our current membership to approach the realm of solutions.

I look forward to seeing you all in Seattle.

The Newsletter is published three times yearly in February, May and October. Deadlines for submission are January 15, April 15, and September 15.

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BOOK REVIEWS

Fostering Healing And Growth: A Psychoanalytic Social Work Approach

Joyce Edward and Jean Sanville, Editors

Reviewed by Carol Tosone, Ph.D.

Kudos to Joyce Edward, Jean Sanville, and their contributors for their pioneering work in describing the nature and scope of psychoanalytic social work practice.

Fostering Healing and Growth: A Psychoanalytic Social Work Approach is a culmination of the dedication and efforts of the National Membership Committee on Psychoanalysis to examine the evolution of psychoanalytic thought within the field of clinical social work. As reflected in the rich theoretical and clinical interests of the contributors, the Study Group's primary goal of defining the identity of the contemporary social work psychoanalytic practitioner has been well-achieved.

It is not uncommon for social workers who have received advanced training in psychoanalysis or psychoanalytic psychotherapy to struggle with the question of their primary identification. Should they describe themselves as clinical social workers, psychotherapists, or psychoanalysts? Do they practice clinical social work, psychoanalytic psychotherapy, or psychoanalysis? While the book does not directly address these questions, it does focus on the ongoing and often ambivalent relationship between social work and psychoanalysis.

The book contributors are excellent role models for successful adaptation to this dual identity. While they work in a variety of settings and represent a plurality of treatment models, each skillfully demonstrates the value of psychoanalytic concepts in work with traditionally "untreatable" patients. These clinicians apply the "ever-widening scope of psychoanalysis" to patients who have severe pathologies, cumulative traumas, developmental deficiencies and environmental deprivations.

To be more specific, there are 23 cases discussed, representing patients from diverse cultures, racial groups, socioeconomic levels, and sexual orientations. They suffer from modern day maladies which include addiction, anorexia, post-traumatic stress disorder

resulting from abduction, rape, incest, and physical abuse, postpartum depression, physical disability, prostitution, HIV-positive and AIDS statuses, suicidality, schizophrenia, and even filicide. These presenting problems do not occur in isolation, but rather in a pattern of co-morbidity. For instance, in one case the reader encounters a young African-American woman, a recovering heroin addict who is

HIV-positive and who has an extensive history of prostitution; in another case, there is a handicapped paraplegic woman whose son was placed in foster care.

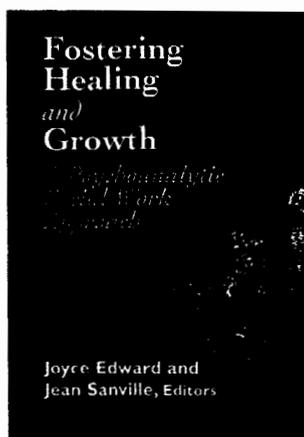
These are the types of cases with which beginning social workers and social work students are well-acquainted. These multi-problem patients are seen in "front-line" settings, such as residential treatment facilities, foster care, family agencies, hospitals and outpatient clinics. Those who are new to the field of clinical social work may particularly appreciate the extensive

case histories, the open and honest discussions of countertransference reactions, and the inclusion of verbatim process recordings in several of the chapters. The contributors also do a highly laudable job of modeling the ongoing processes of assessment and self-monitoring, cornerstones in the social work and psychoanalytic traditions.

Seasoned clinicians can also benefit from the detailed discussion of these cases, as well as the chapters devoted to the treatment of higher functioning patients in private practice. It should be noted, however, that several of the more difficult patients were treated successfully in a private practice setting. In fact, these authors are testament that psychoanalytic theory and technique can be fruitfully applied to patients not expected to benefit from insight-oriented treatment.

Particularly impressive is the flexible treatment parameters utilized in each case. The social work axiom "start where the client is" is evident throughout the book in all of the cases. To illustrate, in her work with victims of childhood sexual abuse, Dr. Graziano may offer an extended session or allow for supportive physical contact when appropriate. As another example, Dr. Aronson permitted a masochistic anorexic patient, who was terrified of connection to call her answering machine in lieu of face to face meetings. This intervention was employed until the patient could better tolerate the closeness of the therapeutic relationship.

A notable strength of the book is that the clinical



contributors focus extensively on discussion of the vicissitudes of the treatment relationship, particularly the transference-counter-transference matrix, development and maintenance of the working alliance and course of therapy. Another significant strength is the explication and application of existing schools of psychoanalytic thought. In addition to the four psychologies (classical, ego, self, and object relations), innovative perspectives are also considered, such as intersubjectivity and the work of Matte-Blanco.

Still other strengths are the inclusion of chapters on the history of psychoanalytic social work, the applicability of Winnicott to an understanding of the "good-enough social worker," and the relevance of psychoanalysis for social work education. There are also well-written chapters on supervision and working

with the parents of children in treatment. The book concludes with an outstanding synthesizing chapter by Dr. Sanville, followed by an abridged glossary of psychoanalytic terms by Patsy Turrini.

In summary, this is an exceptional book and tremendous contribution to psychoanalytic social work. It is theoretically solid, clinically relevant, and can appeal to students and experienced clinicians alike. As noted in the book, the contemporary social worker must be prepared for all patients and settings. **Fostering Healing and Growth** is essential reading for those practicing in the complex and ever-changing mental health care environment.

This article is reprinted with the permission of the New York State Society of Clinical Social Work.

Object Relations In Severe Trauma: Psychotherapy of the Sexually Abused Child

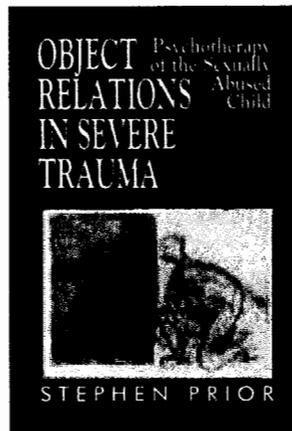
Stephen Prior, Ph.D.
Northvale, New Jersey:
Jason Aronson. 1996. 188 pp.

Reviewed by Diana Siskind, CSW

This is an immensely valuable book. The author, a sophisticated thinker and obviously gifted clinician, sets out to integrate and expand our existing theories of object relations to encompass conditions particular to children who have been subjected to repeated sexual abuse. He suggests that when trauma is not an occasional occurrence, but part of the daily climate, the impact of this factor on developing psychic structure cannot be fully understood by established theories of early development, nor by theories of the severe disorders: borderline and psychotic states. Dr. Prior presents graphic case examples that take us deep into the lives of these children; children living out nightmares from which there is no waking. To deal with the daily horror of their lives, these children struggle with a core dilemma which they solve by believing that they caused the abuse, deserve it, and finally by equating abuse with love. This psychic maneuver, designed to avoid at all costs living in an objectless state, naturally leads to new horrors.

In a detailed case example the author describes the connection he gradually established with a severely abused young boy, and offers the reader both the

theory building that was generated by this and other treatment situations with abused children, and the treatment technique that evolved.



The existence of severely abused children is a reality that most of us have to address whether directly in our practice, or through teaching and supervising beginning therapists. This book is of equal value to the seasoned therapist, to the beginner, and to everyone in between, for it leads us into uncharted areas of early development and guides our psychotherapeutic work with this population. If our legislators were added to the list of readers, we would perhaps stand a chance of seeing a reversal in the trend toward short term solutions to human devastation. This book eloquently persuades that knowledge, skill, devotion, and a wholehearted commitment of time, are the basic conditions if we are to have any impact on these young lives.

(Portions of this review appeared in: **Psychotherapy Book News**, and on the book jacket. This review is being reprinted with the permission of Jason Aronson, Inc., Publishers.)

Diana Siskind, CSW, BCD is a member of NMCOP and has been a participant at its annual meetings. She has joined the NMCOP Study Group. She recently finished her second book: **Working With Parents: Establishing the Essential Alliance in Child Psychotherapy**, to be published by Jason Aronson, Inc., Publishers in May 1997.

From One Social Worker . . . ?

William S. Meyer, CCSW

Treasurer



William Meyer

An acquaintance of mine told me the following true story: Her neighbor, chairman of a prominent university's philosophy department, was flying to a national philosophy conference. A chipper not-very-well-educated woman sat beside him on the plane. Ignoring the fact that he was working on a manuscript, she proceeded to make idle chitchat. "And what do you do?" she inquired. Mildly irritated, but willing to respond good-naturedly, he responded, "I'm a philosopher." Her eyes widened. "Oh, really," she said, more than a bit awestruck. "What are some of your sayings?"

I enjoyed this story when I heard it, but later I wondered whether the chairman was amused by this interaction - or did it also, at least a bit, get under his skin? Did he feel some sense of aggravation that here was yet another person who knew nothing about his field or what he did?

It is an aggravation that as a social worker I know all too well.

Just last weekend, I was giving a talk on postpartum depression at a conference on issues related to new mothers. During lunch, all the speakers were seated at a designated table. It was my good luck to be seated next to the keynote speaker - a warm engaging woman physician. After polite introductions around the table, the physician and I began a more personal conversation regarding ourselves and our professional lives. I told her that I now spend some of my time working in the outpatient obstetrics department at Duke University's medical center. "I'm delighted to hear that," she said. "I always tell my colleagues who work with women's health that they should have a psychiatrist or psychologist affiliated with their practice."

I winced. Here was another ill-informed individual, who doesn't know about clinical social workers and what they do. And, unlike the woman in the story above, this individual was highly educated. So, as I always do, I attempted to educate her. "Psychiatrist, psychologist, or social worker," I said, feeling a bit ill at ease as though I had just informed her that she was not being politically correct.

"Oh I know," she said. "I just use the word psychologist to apply to both." Should I just let it go? No, I've taken it this far. "They're really not the same," I protested.

"Oh I know. I'm in therapy with a social worker right now, and I'll tell you, I really like the way this woman treats me. She really seems to want to know me in a way that I haven't experienced with other mental health professionals." Stymied, I muttered that I was glad that she was seeing someone she was so fond of. The conversation drifted elsewhere.

If this woman is so knowledgeable about social work, why does she use the word psychologist? Why is she uncomfortable saying that the person she is seeing is a clinical social worker? Does she feel shame?

A colleague of mine, whom I will refer to as Mr. J., relishes the story in which he "outed" Dr. C., a prominent psychoanalytic author and lecturer. Mr. J. was preparing to provide the introduction for Dr. C.'s lecture, which was being delivered to a mostly social work audience. Incredibly, Mr. J. was instructed by Dr. C.'s secretary, that he was not to reveal Dr. C.'s social work background in his introductory remarks. My colleague agreed, but with considerable impish pleasure, passed this juicy tidbit on to a few of the more outspoken social work members of the audience, just prior to Dr. C.'s talk. Dr. C. was indignant and no doubt embarrassed, when the focus of the question and answer session ultimately centered around his professional background and his desire to keep it hidden.

I enjoyed this story as well . . . at least the part about Dr. C.'s exposure. But I was also sad that Dr. C. felt a need to disavow his social work background in the first place. How many of us, like Dr. C., struggle with similar sentiments? How deep and rampant are these feelings in our profession - and most importantly - from where do they arise?

Throughout the years that I have served as treasurer and board member of the NMCOP, a constant issue of concern has been how to increase the membership of the NMCOP. Invariably a portion of these discussions center upon the fact that there continues to be no small number of analytically trained social workers who either never did identify or no longer wish to identify themselves with social work or with social work organizations.

Please see Social Worker on page 14

THE COURTS AND CONGRESS

Legislative Committee Report

Laura Groshong
Legislative Chair



Laura Groshong

The passage of The Kennedy-Kassebaum Bill was the big mental health care news of 1996. The bill (SB 2031/HR3103) does guarantee portability and the right to insurance regardless of pre-existing conditions and is a good step toward improving access to health care coverage. The removal of the mental health parity

section is seen as a mixed blessing because without regulations on the U/R procedures which severely limit parity in access to treatment, no guarantee of parity in payment will give patients access to the same level of treatment in terms of sessions covered. The down side of the K-K Bill is the inclusion of a section which calls for "administrative simplification." This section "mandates the development and adoption of standards for electronic exchanges of information" including privacy rules within three years. This is very similar to the Bennett-Leahy Bill (SB 1360) which focused exclusively on developing a data bank which included all health care information and could be accessed by several groups of "trustees." This bill or a version of it will go into effect eventually. A hearing was held in Washington, D.C. on January 22 to begin the process of determining what the information bank will look like. We will be lobbying strongly to exclude mental health from this system. Current managed care U/R procedures have substantially changed the information which is "public" within the managed care system. This would be exponentially increased if health care information were available across health care systems and employer and/or credit systems as well. We will need to keep a close eye on the way this develops and keep working on ways to limit information required by managed care. The NMCOP has developed a Position Paper on Confidentiality with background materials which can be used in any efforts NMCOP members may undertake at the state or national level. Please contact your Area Chair if you are interested in acquiring this packet.

Please try to take the time to acquaint yourself with the positions of your legislators on mental health

treatment and access to it; confidentiality as a necessity for quality mental health treatment; and regulation of U/R procedures as they impact mental health benefits. Making your views known to your legislators (or potential legislators) does make a difference.

NMCOP Joins Federation And ABE In Filing Amicus Brief

Donna F. Tarver

The NMCOP has joined Federation and ABE in filing an amicus brief in the 4th Circuit challenging a judge's findings regarding the competency of an LCSW to testify in court. The case concerns a woman in Winchester, Virginia who sued her employer for civil rights violations and state law violation for infliction of emotional distress stemming from alleged acts of sexual harassment. As part of the plaintiff's case the attorney introduced the testimony of a Maryland LCSW, who treated the plaintiff while practicing in Winchester, to support a) a diagnosis of post-traumatic stress disorder and b) the fact that the employer's actions had caused the condition. The Court refused to allow the LCSW to testify, stating that the Judge was concerned that her diagnosis was "junk medicine" and that (despite her credentials, which include a Ph.D. in social work and 20 years of experience) he was not sure that she had the "experience, training, and knowledge . . . to render an opinion" about the condition. He asked, "What gives a social worker a right to render an opinion in psychology, having had a couple of courses in psychology?" The case was subsequently dismissed, and now the plaintiff and her attorneys are appealing to the 4th Circuit (which includes Virginia). They have requested that the Federation file a "friend of the court" brief challenging the judge's actions in excluding the LCSW's testimony and in general questioning the competency to make diagnoses. ABE and the COP have joined the Federation in this effort. This case must be addressed and the appeal won, so that a new precedent is not set in the Circuit court system.

MEMBERSHIP NEWS

Northern California Area Report

Muriel Brotsky
Area Chair



Muriel Brotsky

The winter and spring of 1996 we concentrated on presenting meetings on topics of interest to clinicians. The impact of managed care was discussed in terms of the increasing number of individuals who are not covered by insurance for long term treatment, who are requesting reduced fees. Dr. Patricia Sax led a discussion on "What Fees Do We Charge - and to Whom?" The response of members given the opportunity to present their own dilemma's was so enthusiastic that another discussion was scheduled the following month. Velic Frost, LCSW presented "An Object Relations Approach to Understanding and Treating Couples," exploring the psychodynamic underpinnings of functional and dysfunctional interactions. This provoked such interest, that two follow up meetings were scheduled to give members the opportunity to discuss their own work further.

The committee also worked closely with the California State Society providing experienced clinicians for their new Mentorship Program. NMCOP North and South were asked to present at their 27th Annual State Conference. John Bogardus, LCSW presented "The Influence of Post Modernism in Psychoanalytic Thinking and Practice." The practical effects of incorporating these ideas in clinical practice were discussed and a critique of certain aspects of postmodern thinking was offered.

Southern California Area Report

Ellen Ruderman
Area Chair



Ellen Ruderman

SOCIAL WORKERS HELPING SOCIAL WORKERS:

Southern California Area NMCOP Seminar Program: To assist and encourage those clinical social workers who have recently graduated from schools of social work, or have been in the field post graduation for

1-7 years or more in agency or clinical practice, the Southern California Area NMCOP is providing an **Introductory Mini-Series To Psychoanalytic and Psychodynamic Thought: Clinical Perspectives.**

Membership Committee Report

Laurie Curtis
Membership Chair



Laurie Curtis

The NMCOP represents social work psychoanalytic practitioners as well as social workers who have an interest in the study of psychoanalysis. Our membership encompasses individuals from twenty-seven states and two additional countries. Regional activities are organized within specific geographic areas defined by concentrations of members. The current twelve active "areas" support local educational activities that include conferences and symposia, supervision groups, study groups, journal clubs, and brunch meetings.

National activities permit members to be involved in the legislative process or in a national study group. The NMCOP is a founding member of the Psychoanalytic Consortium, which also includes the American Academy of Psychoanalysis, American Psychoanalytic Association, and Division 39 of the American Psychological Association. This multi-disciplinary group has as its goal to strengthen psychoanalysis in the United States while ensuring high standards of training and practice in those fields that practice psychoanalysis. They are currently working on the issue of external credentialing for analytic practitioners.

The NMCOP is pleased to host a national conference every other year. We hope that you will join us this year in Seattle, September 25-28, when the NMCOP will host the Sixth National Clinical Conference *Expanding the Psychoanalytic Lens: Diversities & Integrations.*

If you would like to join the NMCOP, please fill out the membership application located on page 16. New members are welcome to join at any time. Please call or write with any questions or comments.

These short term clinical courses (from 3 to 5 weeks) began in September, 1996 and will run throughout 1997. They are offered in a diverse range of clinical subjects and will be taught by experienced social work clinicians. For those professionals who choose to go on, in the future, to Psychoanalytic Institutes or to the California Institute of Clinical Social Work, the Southern California Area NMCOP, at its future Membership Meetings will invite representatives from all of these psychoanalytic learning facilities to provide information about their respective Institutes. CEU's will be provided. For further information, call Dr. Ellen G. Ruderman at (818) 784-7090. For registration information call Dr. Pat Sable at (310) 476-0928.

MENTORSHIP: The Southern California NMCOP is encouraging its members to take part in the Mentorship Program of the California Society for Clinical Social Work. Coordinated by Margaret Bonnefil, this program promises to be an excellent way for experienced social workers to help social workers entering the field.

PROGRAMS: In conjunction with the Northern California Area NMCOP, the Southern California Area NMCOP was part of the California State Society Conference in November 1996. An exciting presentation was given by both Area NMCOP groups on "The Person And Life Stage Of The Psychotherapist." John Bogardus and Ellen Ruderman were featured presenters, discussant: Judith Schore, contributors: Pat Sable, Roz Benitez-Bloch, Helen Ziskind.

IN MEMORY: We were greatly saddened by the passing of Dr. Jeanette Alexander. Jeanette was a courageous and valiant person who spoke her mind, advocated that clinical social work be proud of its contribution to psychoanalytic thought, and provided encouragement and mentorship to many social workers entering the field. We still recall her inspiration to many of us to put our "words and music" together and become more active for mental health, social work and societal causes. To her family and close friends our most sincere condolences. In her memory, the Southern California Area NMCOP has made a contribution to the "Jeanette Alexander Fund" of the California Institute for Clinical Social Work, of which Jeanette was one of the Founders.

ORANGE COUNTY GROUP

We welcome our Orange County colleagues! A new section of the Southern California Area Committee was launched in the spring of 1996 in collaboration with the Southern California Area NMCOP executive board and under the leadership of Diane Meadow,

Ph.D. and Kim Khazeni, LCSW and ably assisted by a planning committee consisting of 20 persons: Chair, Jane MacDonald, Program committee, Terri Ehlers, LCSW, Publicity, Andrew Schwartz, Ph.D. liaison with clinical psychologists in the area, Virginia Hunter, Ph.D. liaison with the psychoanalytic institutes.

Saturday, August 17, 1996 was the third meeting at the U.S.C. Orange County Campus featuring a presentation by David Wayne, M.A., psychoanalyst and doctoral candidate at the Newport Psychoanalytic Institute. His presentation was titled, "Male Analyst Working with the Maternal Erotic Transference." A case presentation illustrated his major points and a lively discussion followed.

Orange County is now actively recruiting new members for the NMCOP in the area and within the next few months anticipates forming one or more ongoing study groups for its members. Those interested in learning more about NMCOP activities in OC please contact Diane Meadow at (714) 707-5191 or Kim Khazeni at (714) 509-3041.

Florida Area Report

Ellyn Freedman
Area Chair

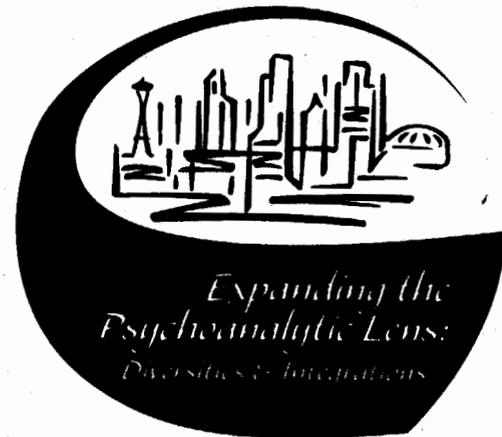
A Florida Area of the NMCOP has been initiated. A core group of psychoanalytically trained social workers headed by Ellyn Freedman, Miami Beach, has met to identify goals and objectives including the implementation of a weekly study group, a mini-conference with the Florida Society of Clinical Social Work, recognition and collaboration with local psychoanalytic institutes, and a publication mentorship group. The group has identified at least 15 MSW graduates of psychoanalytic institutes throughout the state, most expressing a desire to connect with colleagues as they live in communities with little or no psychoanalytic presence. The group includes a rich blend of orientations and experience including ego psychology, object relations, and self-psychology. Exposure of psychoanalytic theory and technique to the clinical social worker has also been identified as a need, as there has been no psychoanalytic institute in Florida accepting social workers until a few years ago. All are excited about our meeting and working together in this forum. Anyone interested in the activities of the Florida Area please contact Ellyn Freedman at (305) 866-9386.

NIPER/NMCOP

Sixth National Clinical Conference

September 25–28, 1997
Seattle, Washington

Margaret Frank, NMCOP President
Laura Groshong, Conference Director



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Minnesota Area Report

Hilde Gasiorovicz
Area Chair

Several recent changes have marked the Minnesota NMCOP Chapter's agenda, beginning with the transfer of chairperson from Laurie Curtis (still immersed in national membership functions) to Hilde Gasiorovicz and a small steering committee.



Hilde Gasiorovicz

Fall '96 activity began with Cecily Weintraub, Ph.D.'s visit from New York. She was invited back by popular demand for a second conference presentation in the Twin Cities, this time before three dozen clinicians representing several mental health disciplines. She entitled her paper "Time and Time Again." Using the film "Back to the Future" and an afternoon case presentation by another clinician, Dr. Weintraub discussed brilliantly and in depth both theoretical and clinical issues related to oedipal repetitions in adulthood. NMCOP members were able to spend time with Dr. Weintraub at an informal dinner the previous evening.

This combination of pleasure and study has continued as the Minnesota NMCOP's modus operandi and has resulted in a two-fold increase in membership. Bi-monthly Sunday brunches are the setting for our study groups. In January, members did an aloud reading of the play "Mrs. Klein" to begin an exploration of the British School of object relations. In subsequent months we will read more about Melanie Klein and go on from there to explore Winnicott and others.

Members can look forward to other benefits, as well, including listing in a professional directory which is already taking shape.

North Carolina Area Report

Charles B. McNamara

North Carolina NMCOP Film Program

The members of the North Carolina Area of the NMCOP are experimenting during the 1996-97 year with a new film program designed to serve both NMCOP members and others interested in the issues raised by a psychoanalytic perspective. Five films with themes lending themselves to analytically oriented discussion are being viewed from October 1996 through May 1997. Prior to the films being viewed, a principal discussant will summarize the relevant themes of the film and serve as a leader of discussion following the film.

Sunday, October 27, 1996 the group viewed the film "Crumb" a haunting documentary revealing an intimate portrait of the controversial cartoonist R. [Robert] Crumb and his unusual—and quite disturbed—family of origin. Crumb is best known for his slogan "Keep on Truckin'" and his provocative underground comics of the 1960's and 70's. The group's discussion centered on similarities and differences between creativity and madness, and how each can be a partial response, and an attempted solution to stressors in one's development. Discussant and host for this film was Bill Meyer.

Sunday, November 17, 1996 the group viewed "Denial" starring Robin Wright and Jason Patric. Ostensibly, this is a story of a young woman and her reaction to a failed and tragic love affair. On a deeper level, it is the study of an individual's struggles to form an identity. The film was introduced and discussed from the complementary theoretical positions of Winnicott and Self Psychology. Discussant for this film was Arianne Palmer.

Sunday, January 19, 1997 the film viewed was "Wild Strawberries" which is one of the early masterpieces of the Swedish director, Ingmar Bergman. This story with a theme of emotional/spiritual atrophy is about Isak Borg an old man who is traveling to receive an academic honor. The story is brooding, poetic, psychologically insightful, and painfully self-questioning, and affords the viewer access to the character's dreams, inner conflicts, missed chances, and efforts at reconciliation with himself and others. Discussant and host for this film was Lou Lipsitz.

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March 1997: Date and film to be announced.

Sunday, May 1997: "The Bell Jar." A film version of the novel by the noted American poet, Sylvia Plath, depicting the developing depression and eventual suicide attempt of a young, female college student. The novel was clearly autobiographical, drawing heavily on the author's own experiences while a student at Smith College. It was published only weeks before Plath's second suicide attempt, tragically successful, in February 1963.

Discussant and host: Charles McNamara, 1600 Ferrell Road, Chapel Hill, NC — Tel: (919) 968-1661.

New York - New Jersey Area Report

David G. Phillips
Area Chair

Members of the New York - New Jersey Area group of the NMCOP are proud to announce that the 1999 National Conference is now being planned for New York City. The current tentative date is late October of 1999. We hope that all NMCOP members and friends will join us for an outstanding professional meeting, and a great party to mark the dawning of a new century for clinical social work, psychoanalysis, and psychoanalytic psychotherapy.

We are also delighted that two respected social work analysts have agreed to take on key roles in the planning of the Conference. Rosemarie Gaeta, former President of the NMCOP and Director of the 1990 Conference, has agreed to serve again as Conference Director. Judy Ann Kaplan, Director of Faculty Relations for the 1990 Conference and member of the National Study Group on Psychoanalysis and Social Work, will serve as Program Director. We intend to follow up the exciting 1997 Conference, *Expanding the Psychoanalytic Lens: Diversities & Integrations* now scheduled for September in Seattle with another outstanding meeting. Stay tuned for further developments.



David Phillips

Texas Area Report

Donna F. Tarver
Area Chair

The Texas Area of the NMCOP is in its third year of presenting monthly educational programs during the academic year. The programs are designed to give analytically trained and informed social workers the opportunity to approach both theory and technique from an analytic perspective, and to develop a presence within the mental health community. The group also hopes to give beginning social workers the opportunity to be exposed to a clinical perspective and that has most likely not been a part of their academic training.



Donna Tarver

The Area was fortunate to have Joyce Edward, MSSA, BCD as a Special Guest Lecturer at its October Monthly Meeting. Ms. Edward presented her paper entitled *Recollections and Their Meanings: The Multiple Functions of Memory* which provided a very thought provoking look at the significance of what is remembered.

A successful third annual Spring Conference was held by the Area in Dallas on February 8, 1997 with NMCOP President, Margaret Frank, LICSW, BCD as Distinguished Guest Speaker. Ms. Frank's presentation of her paper *From Monologue to Dialogue: The Influence of Intersubjective Theories on the Therapeutic Process* promoted an active discussion of "voices to be heard within the analytic space."

Jane Walvoord, LMSW presented an interesting, provocative, and sometimes controversial case which was discussed by Ms. Frank and the group. Ms. Frank's engaging presentation encouraged a new level of discussion within this group which it is hoped will solidify the group and encourage membership. For program and membership information in Texas please contact Donna F. Tarver, Texas Area Chair at (214) 691-2171.

ARTICLES IN UPCOMING ISSUE:

- ❖ Report on how the National Study Group's book **Fostering Healing and Growth** is being used in the classroom.
- ❖ A film review.
- ❖ Full report on the National Study Group's January meeting in New York.
- ❖ A preview of the National Study Group's new book which is currently in the planning stages. Including a call for papers.
- ❖ An area report from Colorado.
- ❖ Preview of the Seattle 6th Clinical Conference, *Expanding the Psychoanalytic Lens: Diversities & Integrations*.

Social Worker continued from page 6

What are the reasons for this?

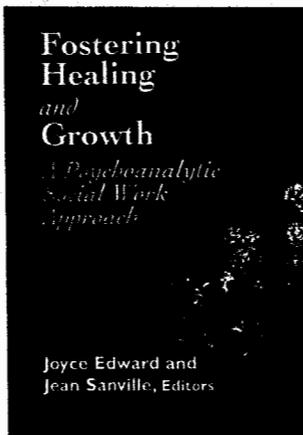
The very people who have been in the trenches and then worked the hardest to receive advanced training, who then have the most advanced clinical skills and deepest knowledge of human development and psychological functioning, those who could be visible role models for aspiring student clinicians - come to treat their identification with social work as though it is a shameful secret. They then advertise themselves as psychoanalysts or psychotherapists, or even family therapists, without also stating they are social workers or using their social work credentials, thereby keeping the public from knowing that social workers are among the well-trained providers of clinical services.

Psychiatrists and psychologists would not do this. Why do social workers?

So important is this topic that I thought it would be interesting to inquire of analytic social workers how they understand this issue. It is no doubt a symptom - over determined - worthy of analysis. How do we understand it and what more can we do - if shame is the issue - to cultivate a sense of professional pride?

I ask you to take time to examine this question and to send your responses to the newsletter so that we can begin a dialog which can explore this issue and lead us to conclusions which can not only inform us, but define solutions we can take to change this problem.

Fostering Healing And Growth: A Psychoanalytic Social Work Approach



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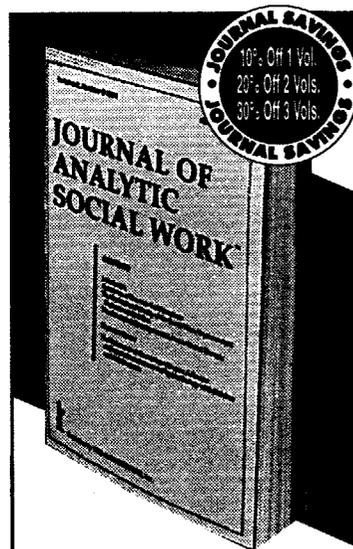
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- ❖ To work for equal recognition and professional parity for qualified psychoanalysts and psychoanalytic psychotherapists in social work with other mental health disciplines through education, legislation, and collaboration with other disciplines.
- ❖ To effect a liaison with other disciplines identifying themselves with the theory and practice of psychoanalysis.
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See page 16 to join or renew your membership

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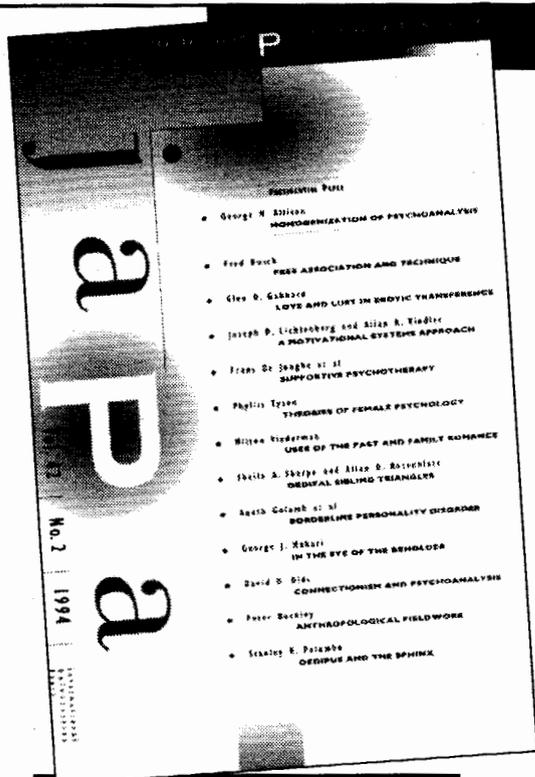
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