President’s Message:
David G. Phillips, DSW
President

In an earlier edition of this Newsletter (Volume 14, Fall 1997) I reviewed some of the history and goals of the NMCOP. In this column I will outline some of our current activities in moving toward the achievement of these goals. (Our continuing work in conjunction with the Psychoanalytic Consortium is being discussed in a separate article by our Past-President, Margaret Frank).

It is well known that psychoanalysts and psychoanalytic psychotherapists have been more severely affected than any group of mental health professionals by the restrictions of managed care. The National Coalition of Professionals and Consumers, chaired by Dr. Karen Shore, is probably the most active and effective group working to combat the excesses of managed care. As this group has grown and developed, it has reached out to other professional organizations for support. The National Coalition is currently planning a “Rescue Health Care” rally in Washington, tentatively scheduled for the Spring of 2000. In a recent action by the Board, the NMCOP has joined the American Psychoanalytic Association and a number of other organizations which are supporting this action of the Coalition.

As I noted in my earlier article, the erosion of clinical content from the curriculum in graduate schools of social work has been a continuing concern. Graduates of these programs are often at a disadvantage in both postmasters practice and training because of their lack of a strong clinical background. An important achievement was the publication of the highly praised volume “Fostering Healing and Growth: A Psychoanalytic Social Work Approach”, edited by Joyce Edward and Jean Sanville. This book was designed to be used as a text in graduate schools, and to show the usefulness of psychoanalytic concepts to work in social work agencies.

A second volume in this series, as yet untitled, has been completed and will be published early next winter. This volume was edited by Joyce Edward and Elaine Rose, and is in honor of Jean Sanville who is a leading social work analyst, and the long time editor of the Clinical Social Work Journal. This book is a demonstration of the...
The newsletter welcomes reader's 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. At our Executive Committee meeting in New York the last weekend in January we got an exciting preview of the program for the upcoming 2000 Clinical Conference. Conference Director, Rosemarie Gaeta emphasized her commitment to encouraging social workers to do more professional writing. In this effort Diana Siskind has organized a three hour workshop on writing for the conference that will feature published authors sharing their experiences in writing, and a panel of journal and book publishers offering information regarding the more practical aspects of transforming ideas into articles and books. Additionally, Roberta Ann Shechter has organized a series of twenty-nine pre-conference writing workshops around the country throughout the year leading up to the conference (see centerfold for details). The Newsletter encourages social workers that have an interest in writing to use the Newsletter as a vehicle for converting their interest into the writing process.

Joining us at the Board Meeting along with Rosemarie Gaeta were Judy Ann Kaplan, Conference Program Chair, and Helen Hinkley Krackow, Call for Papers Committee Chair and Ellen Muska a member of the program committee and new Area Coordinator for New Jersey who bravely volunteered to serve as Treasurer for the Conference. They have formed a multi-talented program committee who is hard at work to provide us with a very strong program for the Conference.

Diana Siskind has again brought us three exceptional Book Reviews by Rena Bushman, Patsy Turrini and Yvonne Young.

Thanks to all contributors to this issue: Rena Bushman, Margaret Frank, Hilde Gasiorowicz, Bill Meyer, David Phillips, Ellen Ruderman, Diana Siskind, Patsy Turrini, Yvonne Young.

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quality of clinical work by a number of social work analysts, and also contains an extended interview with Jean Sanville.

I am also very pleased to announce the appointment of Dr. Barbara Berger to the newly established position of Chair of the Education Committee of the NMCOP. Barbara is well known for the many leadership positions she has held in the Illinois Society for Clinical Social Work, and in the Clinical Social Work Federation. In addition, she is Dean of Admissions at the Institute for Clinical Social Work in Chicago. This is one of only three programs in the country that offer a Ph.D. in Clinical Social Work. The initial charge for Barbara's Committee will be to join with Federation's Education Committee, and any other organization, that is involved in the effort to strengthen the clinical content in the curriculum of graduate schools of social work.

As we enter the final year of the 20th century we face a tremendous range of challenges and opportunities. This year will be a particularly busy and exciting one. I hope that NMCOP members will support and participate in the clinical conference sponsored by the Clinical Social Work Federation which will be held in Washington D.C. the end of April, 1999. But, at the same time, be sure to also plan for the 7th National Conference of the NMCOP, to be held in New York City in January of 2000. Finally, best wishes for a happy, healthy, and productive New Year to all members and friends of the NMCOP.
When I first started my professional career, over twenty years ago, I knew who I was. I was, so as not to be confused with the ordinary social worker, a psychiatric social worker. Never mind the fact that I had just received my graduate degree and was working in an inner-city community mental health center, I knew to which group I wanted to belong and from which group I wanted distance. Some years later - I don't recall when - my group affiliation expanded such that I became a clinical social worker. And now?

Well, a funny thing happened to me in the middle of my psychotherapy career. The outpatient clinic in the Department of Psychiatry at Duke, where I had been working and teaching for 15 years went through massive changes. The Department was, as they say, "down-sized" and two years ago I began providing casework services in Duke's high-risk OB clinic for indigent pregnant women and girls. Although I have maintained a small psychotherapy practice and continue teaching in our local psychoanalytic psychotherapy program, during much of the working day I am back, working in the trenches, pulling active duty.

My psychoanalytic background serves me well in this work. Not a day - in fact, hardly a sustained interaction - goes by that, in assessing or interacting with one of our patients, I don't draw on the contributions of the likes of Anna Freud, Margaret Mahler, John Bowlby, D.W.Winnicott, and Selma Fraiberg. How impoverished would my clinical perspective be if I was unfamiliar with the works of such luminaries!

But as all social workers know, casework involves more than being a good interviewer and "listening with a third ear." Sometimes you have to haggle with the local DSS on behalf of your clients, vicariously suffering for an hour, one or another of the indignities which your clients experience daily. Sometimes it means having to temporarily sit on your feelings so that you can humanely deal with the drug-abusing mother who has four children in foster care and is pregnant with her fifth. Often it means going home at the end of the day feeling frustrated that you didn't do more to alleviate the enormous sea of misery that came washing through your doors. These are the experiences shared day-to-day by many who are in our profession. As one senior social work colleague who works with people who are HIV+ exclaims, "I no longer go to work, I go to war!" How much I admire her devotion and tenacity.

As time has passed I feel as much honor in identifying with this hard working, noble profession as does the physician who is identified as a doctor. To be sure, it rankles me that many in social work are ignorant of and hostile toward psychoanalytic contributions, but many of us are working on that issue.

So now, after twenty years experience, just who do I think I am?

Although I provide social casework, I am grateful that my career still involves writing, teaching, supervising and the private practice of psychotherapy. Social casework can be richly rewarding but relentlessly brutal. These other activities bring a balance to my working life, which probably gives me the stamina to do and teach the social casework, which much of my job now demands. But now, when someone asks what it is that I do, neither my narcissism nor insecurities demand superfluous modifiers.

I say simply, "I'm a social worker," and I feel proud.
In the analytic process we take a journey with our patients into unexplored territory. The trip at times will feel arduous, tedious, long or short, but by its very nature it will always be an adventure. No matter how seasoned we are as analysts, how much we have studied the process, we must be willing to confront the unknown of our patients and ourselves. In that process, one would expect the trip would have an impact on all participants. As one analyst in “The Patient’s Impact on the Analyst” describes it: “I think every successful analysis induced changes in me. The most striking ones have come about in some more disturbed, but analyzable patients, [but this occurs] with more or less regularity with ordinary patients in small, not noticeable increments” (p.203).

The analyst is usually behind the couch, literally and figuratively, both with the patient and in the literature which generally concentrates on theory and technique. With the evocative title of her book, Kantrowitz promises the analyst center stage. She fulfills this promise with abundant and detailed illustrations of the catalysts, the process and the effects of change within the analyst. Analyst and patient may share a similar life situation, affect or defense with their patient. These similarities may act as catalysts for change. Other catalysts may come from the analysts’ admiration of the patient; their countertransference responses, or result from interpretations their patients make of them. The analysts surveyed for the book relate their self-recognition and how it propels them to do further self-analysis, including exploration of their own dreams and forbidden wishes, consultation with colleagues and trusted friends and sometimes further psychoanalytic work.

Since the tools of the analyst’s trade are so intimately entwined with the analyst’s personality, the examination of the interaction of the work and the analyst seems crucial to our understanding of therapeutic change. Kantrowitz observes an interesting phenomena in her data which could explain the delay in this long overdue dynamic approach. According to Kantrowitz, the era in which the analyst was trained seems to greatly affect the analyst’s comfort in self-revelation. In the early history of psychoanalysis training was of paramount importance while personality structure or specific vulnerabilities of the analyst were underplayed in discussions of the therapeutic process.

Throughout the book the personality of the analyst is examined in a variety of ways that launch the reader into a new exploration. We see the circular effect of the analyst on the treatment process, and of the patient on the analyst. Kantrowitz relates the case of the therapist who battled cancer, who for years avoided cancer patients, because of her fear that stirring up her own feelings would make it difficult for her to conduct treatment. However, when an esteemed former supervisor was about to retire and asked her to continue his work with his cancer patient, she accepted the challenge. With this patient the analyst confronted her own terror of dying, and as she did this she found something had shifted inside her. She gained control of some fears and became more comfortable with the idea of dying. She did this by following the patient’s lead and was able to adjust her own more maladaptive defense. The analyst saw the patient as courageous while the patient found the analyst’s support and insights helpful. Helping the patient master fears helped her with her own. She borrowed the patient’s courage. Kantrowitz notes that “the psychological shifts [appear to be related to] reworking of early pain and fear in the context of mutual respect and regard” (p. 117).

To collect data, Kantrowitz sent a questionnaire to 1,100 analysts, most of whom are training and supervising analysts at American Psychoanalytic Association institutes. Three hundred ninety-nine analysts responded to her anonymous questionnaire which was cleverly designed to provide clear categorization of the possible effects on the analyst. In addition, Kantrowitz had follow-up interviews with twenty-six of the ninety-two analysts who were willing to give up anonymity for further elaboration of their experience. Each of Kantrowitz’s categories stirs us into thinking about our own work, how we have been changed by our patients, and how these changes affect our further work with one particular patient or another. While some of her
categories will trigger stronger reactions in us than
others, overall, the categories appear to be so universal
as to make one hard pressed not to have at least a twinge
of recognition in reading them.

Kantrowitz notes that analysts do not undertake this
work for their own personal growth (p.61), at least not
consciously. But analytic work imposes the need to deal
with one’s own inner conflicts, and the analyst is
continuously subjected to the reappearance of potentially
distressing material. While this is stressful, at the same
time it allows for the reworking of the material (p. 77). It
does not seem far fetched to hypothesize that the analyst
may in part be drawn to the work because of this
opportunity. In analytic practice we may be stirred up by
the conflicts of others but it is in the process of receiving
these conflicts that we are likely to do our best work. In
the same way that mistakes and failures nag at us and
encourage us to reexamine our work, thereby, often
teaching us more than our successes, so too do we learn
from those difficult patients who unravel us.

A beginning analyst is often made uncomfortable by
strong countertransference reactions. The patient who so
intensely transmits the feeling to be obliterated that the
therapist forgets the appointment, or falls asleep in the
session may make the new therapist want to undo this
reaction, perhaps by making some reasonable sounding
excuse for the missed appointment, or loading up with
caffeine before the session, anything but acknowledge or
examine the significance of the countertransference
reaction. In her book, Kantrowitz gives some examples
of these analytic enactments where the analysts
unconsciously shut out the patient. She then presents
vignettes showing how the awareness by the analysts of
the intense need to defend against unacceptable feelings
was then used to explore the historical source of the
experience. This helped the analysts regain a
professional stance with the patient and at the same time
further resolve a personal conflict that had been
reactivated.

Kantrowitz illustrates how the work with patients
provides an opportunity to investigate areas of
unresolved or partially received conflict or distress that
otherwise might be avoided; transgressions can be
opportunities for productive work. She tries to come to
grips with the process of the therapist’s transformation
and comments that it is easier to empathize with
someone else’s strong feeling, and then become
conscious of the parallel issue in oneself.

Kantrowitz is very cautious in her analysis of reported
changes. She points out the difficulty of obtaining purely
objective research data, and is concerned with the lack of
hard evidence.

She raises the ongoing dilemma: What is change? How
do you observe it? Measure it? She raises questions
about perceived versus observable change. While she
seems reluctant to overvalue reported changes in the
analysts, she allows the beautiful, unobjective analyst’s
vignettes to speak to us in a profound way.

As much as we as therapists would like to think of our
work as scientific, with measurable increments of
change, and as much as our health care system insists
that we do this, it is not to be. We need to use our passion
to inform us in our work, and to get the support we need
to do this. The desire to integrate our feelings and
intellectual understanding was described by a new
patient of mine who, filled with emotion, tried to hold
back her tears and describe her feeling. She astutely
observed that if she feels too much, she cannot talk, and
if she holds back what she feels there is little to talk
about.

“The Patient’s Impact on the Analyst” has an immediate
appeal with its focus on the analyst, and hopefully this
recognition and attention will encourage more openness
and the development of more support networks doing
this rewarding, but difficult work.

Rena Bushman, MSW is a practicing psychoanalytic
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She is the Corresponding Secretary on the board for
the Society of the New York School for
Psychoanalytic Psychotherapy and Psychoanalysis.

ARTICLES IN UPCOMING ISSUE:

- Book Reviews.
- Summaries of Chapters from Fostering Healing and Growth.
- Information on the 7th National Clinical Conference to be held in New York in January of 2000.
- An article letting members know of our efforts to reach out to potential new members across the country, including identifying coordinators in new areas.
THE HANDBOOK OF INFANT, CHILD AND ADOLESCENT PSYCHOTHERAPY VOLUME 2 NEW DIRECTIONS IN INTEGRATIVE TREATMENT


Reviewed by Yvonne Young, CSW, BCD

I like the idea of a handbook. I am reminded of my years as a Girl Scout when I would browse through my handbook deciding what badge I would try to earn next; there was an excitement about the skills that were there for me to master. Knowing that all the information I would need in an emergency was stored in my first aid handbook helped me to feel at ease, like an adult. I know that a handbook is an introduction to basic information.

This particular HANDBOOK OF INFANT, CHILD AND ADOLESCENT PSYCHOTHERAPY has been assembled by the Reiss-Davis Child Study Center in Los Angeles. The stated goal of the editors, Bonnie S. Mark and James A. Incorvaia, is to expose therapists to a wide variety of treatment options all based on a psychodynamic understanding, to encourage flexibility in the age of managed care. The editors support Integration Psychotherapy, treatment that includes cognitive behavioral techniques, reflects knowledge of family systems and child development and has a base in psychodynamics and use of transference.

The term integration psychotherapy is important as it indicates that there is a foundation into which new techniques and new knowledge becomes integrated. With an understanding of ego psychology, child development and a commitment to treat the whole child, integration becomes comfortable. Beginning therapists need to be encouraged to establish such a foundation through advanced training so their work becomes seamless rather than a conglomerate of technique used in a scatter shot fashion.

The handbook is divided into four parts. Each part has an introduction with a brief summary of the article included in the section. Much like looking through a first aid or Girl Scout handbook these synopses help the reader direct her interest. In general, the quality of writing is good and the subject matter interesting.

The handbook includes several "HOW TO" articles.

Barry Brazelton writes on a prevention program helping parents at risk become more attuned to their offspring by scheduling well baby clinic visits at times of critical periods of psychological and motor development. Two articles instruct on including treatment of learning disabilities in a psychodynamic psychotherapy. An interesting article is about establishing a father - toddler group to support more effective parenting, stronger identity of the father and therefore children who are emotionally competent. Another article is excellent to include in teaching beginning child therapists. This chapter describes the tools of play therapy as fitting into verbal and nonverbal categories.

Scholarly articles include one on the transmission of womanhood in the mother-daughter dyad and another on the transmission of trauma in a holocaust family. A long, dense piece discusses how memory works and how trauma affects memory. An article by Carol Gilligan (who may be familiar to many readers) introduces her ideas about female development and cultural dissociation. There are several pieces on family dynamics.

Case presentation chapters present a variety of treatment styles. One, the case of an adolescent with a history of

Aims And Purposes Of The NMCOP

✧ To further the understanding of psychoanalytic theory and practice within the profession of social work and to the public.

✧ To promote a unique and special identity for all social work professionals engaged in psychoanalytically informed practice.

✧ 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.

✧ To advocate for the highest ethical standards of practice and for quality mental health care for all.
abuse, describes the inclusion of a hypno-therapist in three-time a week psychotherapy. Another is a case of a young adult treated in group and individual therapy that includes a graveside visit with his therapist. Three therapists of differing theoretical orientations analyze the treatment of a six-year old boy illustrating how they understand the treatment.

This incomplete chapter list is sufficient to illustrate the variety, breadth and scope of the handbook. It would be useful to therapists in clinic or agency settings. Therapists who are teaching beginning students will find many of the articles helpful. Beginning therapists may use the articles to clarify their interest in a particular style or to serve as a springboard to further reading on trauma literature or theory. For the established-trained therapist, in private practice the handbook serves as a reminder, if we need one, that our learning can never stop.

Speaking to the editor's suggestion that we need flexibility in the age of managed care, I would note that not one case in the book was treated in less than twenty sessions. Most cases were treated for years as we know is often necessary. Many of the cases used more than one treatment modality, and often patients were seen several times a week. Managed care frowns on this type of treatment.

At a time when Magellan Behavioral Care reduces fees of individual, couple or family therapy from $65 to $45 per session and pays $40 for group therapy without notifying patient subscribers of a shift in their benefits - it is not technical flexibility that we need but political action. Insurance companies cannot decide by economic fiat that group treatment is the best treatment for most patients. Joining the Guild is one step toward having more political clout.

Yvonne Young, CSW, BCD is a graduate of the New York School for Psychoanalytic Psychotherapy. She is in private practice in Greenwich Village treating children, adolescents and adults.
Los Angeles
Pat Sable, Ph.D.
“Writing for the Profession: Discussion of Ideas and Suggestions for Sharpening Writing Skills”
Friday, April 23, 1999
8:00 - 9:30 PM
RSVP by 4/16/99
Enrollment is limited
Call 310.476.0928

Encino
Ellen Ruderman, Ph.D.
“Writing for the Profession: Discussion of Ideas and Suggestions for Sharpening Writing Skills”
Friday, May 21, 1999
9:00 - 10:30 AM
RSVP by 5/14/99
Enrollment is limited
818.784.7090

Northhampton
Gerald Shamess, MSS, LICSW
“Writing for Publication: Adding Your Voice to the Ongoing Professional Conversation”
Wednesday, May 19, 1999
7:00 - 8:30 PM
RSVP by 3/10/99
Enrollment is limited
Call 413.585.7984

Ann Arbor
Morton Chetnik, MSW
“Using the Patient’s Language in Professional Writing”
Monday, April 12, 1999
8:00 - 9:30 PM
RSVP by 3/30/99
Enrollment is limited
Call 734.665.0723

Durham
William Meyer, MSW, BCD
“The Work and Play of Clinical Writing”
April 1999 (Exact Date TBD)
RSVP by 3/15/99
Enrollment is limited
Call 919.544.1293
BEGIN THE MILLENNIUM IN A SCHOLARLY SPIRIT:

Prepare by attending a FREE! pre-conference writing workshop(s) in 1999
sponsored by the NMCOP.
Workshops will begin in March to commemorate Social Work Month and will run throughout the year.

NEW YORK

New York City
Herb Stream, DSW
"How to Write a Book in Clinical Social Work"
Saturday, March 20, 1999
2:00 - 3:30 PM
RSVP by 2/20/99
Enrollment is limited
Call 212.662.7368

New York City
Roberta Ann Shechter, DSW
"Finding Your Voice in Clinical Journal Publishing"
Saturday, March 27, 1999
1:00 - 3:00 PM
RSVP by 3/22/99
Enrollment is limited
Call 212.570.9413

New York City
Jane S. Hall
"Write A Book! I Did It, You Can Too"
Monday, April 12, 1999
8:00 - 9:00 PM
RSVP by 3/19/99
Enrollment is limited
Call 212.675.7364

Merrick, Long Island
Patsy Turrini, MSS
"Professional Writing: Generating Commitment and Courage"
Wednesday, April 21, 1999
6:45 - 9:00 PM
RSVP by 4/10/99
Enrollment is limited
Call 516.223.7645

New York City
Judith B. Rosenberger, CSW, PhD
"Writing for Journals"
Tuesday, April 27, 1999
6:00 - 7:30 PM
RSVP by 2/10/99
Enrollment is limited
Call 212.987.8239

New York City
Judith Marks Mishne, DSW
"Demystifying the Process of Writing for Publication"
Wednesday, May 12, 1999
8:00 PM
RSVP by 5/7/99
Enrollment is limited
Call 212.799.3588

New York City
Joyce K. Aronson, MSW, PhD
"Mastering the Struggle to Write by Sticking Close to the Clinical Material"
Sunday, June 6, 1999
2:00 - 4:00 PM
RSVP by 5/15/99
Enrollment is limited
Call 212.860.1961

Dix Hills, Long Island
Michelle Joy Levine, MSW
"Helping More People Through Writing a Self-Help Book"
Saturday, June 12, 1999
11:00 AM - 12:00 PM
RSVP by 5/10/99
Enrollment is limited
Call 516.462.2825

Penn Valley
Susan Levine, M.S.S.
"The Write Stuff"
Saturday, June 26, 1999
11:00 AM - 12:30 PM
RSVP by 6/19/99
Enrollment is limited
Call 610.664.4633
The Analyst's Preconscious (1996)


Reviewed by Patsy Turrini, MSS
Private Practice, Merrick, New York

Hamilton's research that began in 1985 sought to
discover what analyst's draw upon to "elucidate
the minds of others and to delineate the dimensions of
 technique existing in the analysts preconscious that are
 shared by or unique to analysts in various
psychoanalytic cultures and geographies" (New York,
San Francisco, Los Angeles, in the United States, and
London in Britain). Hamilton developed a
Psychoanalysts "Orientation Questionnaire" (POQ) , and
a semi-directed personal interview. For the researchers
in our field, her discussion of cluster and statistical
analysis can be informative. Through her experience
and reading of the psychoanalytic literature, she developed
a roster of "clusters of belief". For example, she defined
transference and found 50 types of transferences clusters
such as: transference neurosis; transference as
resistance, transference and developmental deficit;
erotized transference; narcissistic transferences;
transference reconstruction, et. al, to name only 6 of the
50, (Table 1, p. 12.). The appendix of these 50 terms is
worth looking at, for it demonstrates the vast spectrum
of a single subject within psychoanalysis. This work
substantiates that psychoanalysis has many paradigms. It
reminds me that Hartman was reported to have said that
we have a text in psychoanalysis; it is everything that
has ever been written.

She concentrates on the personal interviews, and not the
statistical data for she believes that ultimately it is in
“what analysts say about their use of concepts that we
can discover the preconscious connections between
different ideas" (p.17). The chapters in the book reflect
the "maps or sketches analysts drew of the routes they
followed in their daily practice." She interviewed 65
analysts selected from APA and IPA members in the
United States and Britain. (As you will note, this
selection would exclude most social workers and there is
no mention of social work analysts in this book). Oh my,
whenever will we be discovered?

None the less, as I try to suppress my hurt at being
negated as a vial and sought after analytic person, and
wishing I could object to someone about the neglect, I
would still heartily endorse this book, for Hamilton has
undertaken to examine a plethora of ideas from the
world of psychoanalysis and philosophy that effect
analysts. She looks at; "networks of concepts", topographical levels, processes, motivational influences,
loyalties, attachments to theory and teachers, culture,
age, and geographical influences to name just a few. (By
the way, she does not examine gender differences). All of
these factors influence our clinical social work analytic
world too. In addition to her background in psychology,
she studied philosophy and she cites theorists such as
Berlin, Gunbaum, Wittgenstein, Hanly, to name only a
few, thus enriching the book for those who seek to
expand their cross field perspectives.

Seeking out her conclusions was difficult, and if the book
is revised I would hope thought would be given to
succinct sections. The findings are found throughout her
discussion in the many chapters, amidst her speculations
which I also found worth examining. I located the
following conclusions: 1) Analysts practice and think
much more loosely than they publicly claim; 2) Analysts
in the main are guided by many dimensions (which she
calls pluralism, as contrasted to monism and relativism);
3) The analyst has a preconscious model of the self as a
humanist and a scientist; 4) There is agreement that
infant research has percolated into the psychoanalytic
theory of development; 5) The effects of institutional
affiliation, particularly outside the main regional
psychoanalytic societies, have been underestimated in
public discussions on theory-practice links; 6) People we
work with in close proximity rub off on us; we may be
quite unaware that a thinker we thought of as peripheral
to our core beliefs has crept into a central position (p 39);
7) The central tenants of psychoanalysis have shifted;
8) American analysts wanted to project an image of
themselves as “eclectic” and unfettered by group
affiliations and loyalties” (p. 9). The above list does not
do justice to her findings, correlations and suggestions.

Another way to convey the content of this book is to
share the Chapter headings. After the introduction,
Chapter 2 is named “Pluralism and Belief”; 3) One is Not
Neutral About Psychic Truth; 4) Objective Reality and
the ‘Real Relationship’ : Freudian Views; 5) Objective
Reality and the ‘Real Relationship’ : British Independent
Kleinian and American Self Psychological Views; 6)
Containment and the Holding Environment: American
Analysts; 7) Holding and containment: British Analysts;
8.) Do Patients Really Love Their Analysts?; 9)
Countertransference, Affective, Cognitive, and
Imaginative Responsiveness; 10) The Analyst’s Model of
Change; 11) The Reparative Process; 12) Dream
Interpretation in Contemporary Psychoanalysis.
Afterward and Appendix, References and Index.

Hamilton delves into many issues. One of them is the
review of the historical events that influenced the
direction of psychoanalytic thought and research.
Modern science from Newton on organized the idea of a
"chaotic mass of observational data could be explained by a limited number of laws, which would determine precisely the movement and position of objects in the material world. It was hoped that the same methods could be applied to human matters—to morals, politics, and the organization of society—so that all observational data could be organized into a single, coherent, perfectly orderly system (Berlin, 1992b)" (p. 22). Hamilton suggests that different groups deal with the goal of the hard sciences by staying close to the goal, and other groups by leaving the goal completely. She believes that pluralism, described as acceptance of numerous psychoanalytic propositions has greater value than relativism. According to her definition, relativists find no truth in any paradigm, and monists value one unit only. Pluralists are open to finding truths in various paradigms; they do not believe in the primacy of subjective reality, and believe "there is a world out there independent of mind." (p. 20).

Hamilton's studies sound an alarm bell for me. Group membership and loyalty to the group, despite the denials of Americans, controls the minds of its members. What a pity. How can the groups and members of groups in psychoanalytic communities become more open to exploring the vantage points of others—though not to become so open as Hamilton warns to end up "terminally open". How can the analytic social work community contribute to pooled knowledge that would be accessible to APA and IPA communities? Of course we do this through the books and journals that are published; and through teaching. But who reads whom?

I would like to end with a note of concern that the ego psychologists do not fare well in her book; it’s as if they no longer exist, save some brief mention of Mahler. There is no mention of Hartman’s contributions of The Ego and the Problem of Adaptation. There is no mention of the work of our dear Americans, Gertrude and the late Rubin Blanck. What happens to significant psychoanalytic constructs such as the good enough environment, inborn ego apparatus, maturation, allo and autolastic change, to name a few of Hartman’s contributions (The Ego and the Problem of Adaptation, 1958, International Universities Press). She delineates a group called Developmental Freudians, but they only seem to have heard of Daniel Stern. Who decides what will be taught, and what will be thrown out? Penicillin was discovered from scientific notes left over in a bin by a prior scientist. Science is so hit and miss. Do psychoanalytic social workers have common ground? Do analytic social workers agree that environment is important? Do we have constructs that we hold dear that we should share? I cannot imagine working without making a diagnosis of the environment in which the patient lives and the way that particular environment is effecting the individuals life.

Thank you for this opportunity to review the book and pass on some of my concerns.

Psychoanalytic Consortium Update

Margaret G. Frank, MSSW, BCD
Past President, NMCOP

The Psychoanalytic Consortium has been meeting now for a number of years. The composition remains the same; namely the four founding organizations which represent the sub specialty of psychoanalysis in medicine, psychology and social work. The issue of representation of other alliances of psychoanalytic practitioners is under discussion. The issue remains one of creating space for varying perspectives without creating a planning group which defeats itself through its cumbersome size.

Issues related to ethics, the possibility of a jointly sponsored meeting have been under consideration in recent meetings. However, currently, the Consortium is devoting most of its time and energy to carving out standards for external accreditation in psychoanalysis. The kindest view of this process would be to say that the professions are having to come to grips with differing perspectives on what is acceptable training for psychoanalysis. Under the best of circumstances, this could be a rich and self-searching inquiry. It has not been. While trust has grown in an impressive fashion amongst the professions competition, narcissism, a rigid holding to tradition and economic anxieties create a tension which disables the group from pursuing real inquiry. Compromise does emerge from our investment in working together. Those which believe that their standards are the "highest" have been reassured that they can maintain their standards while accepting different standards which are deemed "lesser" as an acceptable base line.

Psychoanalysis in Social Work has not at present become a part of the deepest tensions. The American and Division 39 have "brushed" horns over standards and competition in various locales throughout the country in the formation of training institutes.

As the most recent version of standards for accreditation evolve, members of NMCOP will be asked to review them within their areas and express their views about the content.

The Consortium meets approximately five times a year. NMCOP is represented by our current president, the president elect, the past president and Crayton Rowe, the founder.
Southern California Area Report

Ellen Ruderman
Area Coordinator

The So. Calif. Area Committee is looking forward to an exciting REFLECTIONS SERIES - a series of interesting and innovative papers and presentations by COP members presented for Clinical Social Workers and the mental health community.

The REFLECTIONS PROGRAMS for 1999 will consist of:

February 20, 1999 - “A Psychoanalytic Story: One Lesbian Life in Letters And Images”
Maggie Magee, MSW
Diana Miller, M.D.

March 13, 1999 - “Infertility: Clinical Implications and Analytic Views”
Joan Rankin, LCSW

April 10, 1999 - “Act III: Psychoanalysis as Drama”
Norman Tabachnick, M.D.
Evelyn Tabachnick, Ph.D.
Eleanor Grayer, Ph.D.

May 15, 1999 - “Almost All in the Family: Emotionally Abusive Attachments”
Pat Sable, Ph.D.

September 24th and 25th, 1999: SAVE THE DATE:
The yearly Southern California Area Committee Membership Meeting will be combined with an exciting day and 1/2 conference entitled: ATTACHMENT ISSUES AND WOMEN: PSYCHOANALYTIC PERSPECTIVES. The next COP Newsletter will provide more information on the forthcoming Mini-Conference. For information, to date call: Dr. Ellen G. Ruderman, 818-784-7090, Dr. Rosalyn Benitez-Bloch, 310-207-1666, or Dr. Pat Sable, 310-476-0928.

* As she has on so many professional COP occasions in the past, Dr. Jean Sanville has graciously allowed us to use her home for the REFLECTIONS SERIES.

AND SPEAKING OF DR. JEAN SANVILLE: On January 15, 1999, the Southern California Area Committee on Psychoanalysis in Clinical Social Work joined with the Los Angeles Institute and Society for Psychoanalytic Studies in the pleasurable experience of co-hosting a Dinner in Honor of Dr. Sanville on her Special Birthday. In what turned out to be a warm and lively evening, over 100 of Jean’s friends and colleagues met at the Doubletree Guest Suites in Santa Monica to pay tribute to an outstanding lady.

SOUTHERN CALIFORNIA AREA COMMITTEE ON PSYCHOANALYSIS CLINICAL SOCIAL WORK EXECUTIVE BOARD

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Minnesota Area Report

Hilde Gasiorowicz
Area Coordinator

The Minnesota chapter is beginning its seventh year. We are currently preparing for our Fourth Annual Conference, to take place on January 23, which we are cosponsoring with the Minnesota Society for Clinical Social Work. The conference, entitled "Trauma and Memory," will be presented by Anne Gearity, a distinguished member of the COP and Minnesota Social Worker of the Year in 1996. She will present an original paper and clinical material. Four respondents, two from social work and two from other disciplines will discuss the paper and the case presentation, offering diverse perspectives.

Anne's work with pre-verbal children who have experienced trauma has informed her interest and research. The evening before the conference, there will be a pot luck dinner for COP members and guests, an annual event that precedes the conference and gives COP members and speakers an opportunity to socialize and enjoy good food and wine.

Our chapter now consists of 20 members. We continue to meet every six weeks on Sunday mornings, and function more or less as a study group. After a year-or-so of reading and discussing object-relations papers, we shifted to a different format, and have begun alternating between readings, discussion and case material based on papers from Fostering Healing and Growth and presentations by COP members. One of these was about Munchausen's by Proxy. February's will be a Jungian perspective on Garrison Keillor's world. Our summer program was a pot luck dinner and the remarkably sensitive French film, "Ponette." The film depicts a little girl's grief at her mother's sudden death, and revolves around the gradual working through with the help of the children and adults in her life, supported by her own resources--her capacity to comfort herself by re-evoking her mother in fantasy. The little actress who played Ponette was so exquisitely attuned to the role that we were all swept up by the depth of her grief.

Many of us in the COP are also involved with the other analytic organizations in this community. We have members active with and serving on boards of Division 39, the Minnesota Chapter; the Psychoanalytic Foundation of Minnesota and the Minnesota Psychoanalytic Society and Institute. As the smallest of the psychoanalytically oriented organizations in the Twin Cities, we are known outside of the social work community primarily through our annual conferences and through our work with other organizations. A larger presence in the psychoanalytic community is one of our long-term goals; meanwhile, staying afloat in the face of increasing membership dues is our immediate challenge.

profiles

Dr. Pat Sable, Ph.D.

By Ellen Ruderman

DR. PAT SABLE is an Adjunct Associate Professor at the University of Southern California, the same University where she had earlier received her MSW and Ph.D. She has a private practice in West Los Angeles, California.

Dr. Sable has had over twelve papers published in the area of Attachment Theory and Issues with adults and the application of attachment theory to clinical practice. Recently, she published a paper on Pets and Attachment throughout the Life Cycle and their effects on the individual’s well-being.

Currently, Dr. Sable is writing a book which will be published by Jason Aronson entitled: “Disorders of Adult Attachment” which applies attachment theory to clinical work with adults. Her book includes an overview of attachment theory, its meaningfulness in the historical development of the individual, and clinical approaches utilizing an understanding of Attachment Theory.

Since 1990, Dr. Sable, or “Pat” has been the Treasurer of the Southern California Area Committee on Psychoanalysis In Clinical Social Work. She notes that she became interested in the COP as a possible vehicle to bring attachment theory more into psychoanalytic thought. She has been very impressed with the COP’s open attitude toward attachment concepts, and plans to be a part of the COP’s So. California REFLECTIONS SERIES in May, 1999 whereupon she will present her paper entitled: “Almost All in the Family: Emotionally Abusive Attachments.”

Dr. Sable has lectured throughout the community at Seminars and Conferences discussing Attachment Theory on T.V., (Discovery Channel), and has been a Founding Member of the Attachment Study Group. She has also been a Consultant for Bereavement Groups, including one for Pet Loss, a dynamic, she feels, which is often overlooked in Society.

Her colleagues of the Southern California Area Committee Executive Board are appreciative of Pat’s tireless efforts on behalf of the COP, and will launch a Welcoming Book Party for her new book when it is published.
Committee on Psychoanalysis
A National Membership Committee affiliated with the Clinical Social Work Federation

1999 MEMBERSHIP APPLICATION

Last Name: ___________ First Name: _______ Degree: _______

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☆☆ Please check preferred mailing address: □ Home □ Office ☆☆

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To which state Clinical Society are you a member in good standing?

Would you like to be included in our membership directory? Yes □ No □

Would you like your home □ office □ both □ listed in the directory?

MEMBERSHIP CATEGORY (check one)

General Member $55.00 □
Retiree $45.00 □
Student $40.00 □ (Please send copy of full time MSW student ID)
Friend $45.00 □ (Open to those who are otherwise ineligible to join their state Clinical Society or the CSWF)

Membership runs from January 1 through December 31 of each year. Membership in a state Clinical Society is required, or in the Clinical Social Work Federation if there is no local state Society in your area.

MEMBERS WHO JOIN BEFORE MARCH 31 WILL BE INCLUDED IN THE 1999 MEMBERSHIP DIRECTORY.

Please mail application and dues to:
Laurie E. Curtis, M.S.W. - Membership Chair
6420 Willow Wood Road, Edina, MN 55436
(612) 493-0171 E-mail: Lauriealan@aol.com

Ver. 4.0 - 1999

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NMCOP NEWSLETTER
In the final two decades of the current century, the study of gender and sexuality has been revived from a variety of directions: the traditions of feminist scholarship, postclassical and postmodern psychoanalytic theory, developmental research, and cultural studies have all contributed to renewed fascination with those powerfully formative aspects of subjectivity that fall within the rubric of "gender" and "sexuality." Clinicians, for their part, have returned to gender and sexuality with heightened sensitivity to their role in the treatment situation, including the richly variegated ways in which assumptions about gender and sexuality enter into our understandings of "normality" and "pathology."

*Studies in Gender and Sexuality* is a response to the excitement attendant to recent research and writing by scholars and clinicians alike. It will provide a forum for examining gender and sexuality that is both multidisciplinary and interdisciplinary; in this way it seeks to broaden the purview of theoretical, clinical, and cultural — of all its readers and to promote constructive exchanges among them. As clinicians and scholars who have written and practiced at the intersection of feminist theory and clinical psychoanalysis for the past two decades, the Editors are particularly interested in those areas of controversy that invite the divergent perspectives and insights of different disciplines. Early issues of the journal will focus on transgender identities and intersexuality; contemporary readings of the category of perversion; puberty and adolescence revised and revisited; and the intersections among class, race, and gender in theory, culture, and the clinical situation.

The primary goal of *Studies in Gender and Sexuality* is to promote dialogue on these and other timely topics among clinicians, researchers, and theorists. Consonant with this goal, the journal will also publish related work from the humanities, social sciences, and natural sciences, where questions involving gender and sexuality are currently in lively debate.
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