

## From the *President*



Cathy Siebold, DSW

In the sixteenth century, advances in technology and knowledge led people to believe that the known universe could be explained. Newtonian physics and the creation of calculus, for example, provided explanations for how the universe worked, and a language (math) supported those beliefs. Such ideas of a clock-work universe reached their culmination in the late nineteenth century, just before revolutions in physics and math began to raise serious doubts as to their validity. Freud was a product of this late-nineteenth-century world, this world that was dominated by an optimistic vision whose origins could be traced to sixteenth-century enlightenment beliefs. Among these beliefs: that scientific inquiry could provide broad explanations for natural forces and a scientific method based on logical positivism could support the accuracy of observed natural phenomena. Freud was trained first as a scientist. He wanted to demonstrate that his theory of mind could be studied through neuroscience, that the unconscious was based on underlying natural forces. He abandoned this effort (Freud 1950 [1895]) to explain the mind, probably because the science of the time did not support his efforts.

What we call scientific evidence has come to provide a gold standard for measuring even the ineffable qualities of human suffering. We have depression scales and empirical data suggesting which treatment methods will or will not alleviate pain. New drug research claims efficacy and broad application that will do almost everything to heal the human condition.

What do claims of scientific evidence mean and why are we so enamored of them? The term science refers to a method of inquiry. This method is based on the ability to limit conditions so that the researcher can observe something in a controlled way. Observing what happens to a cell when you add an antibody in one cell and an isotonic solution in another would be an example of an experiment based on the scientific method. The repetition of this procedure numerous times, and the calculation of the forces at work, lead to findings about what impact the antibody has on protein expression or other cell processes. Although this seems to be a reductionist strategy that could lead to clear outcomes, cells are complex systems that can be impacted by light, intensity of exposure, temperature, and so on. Moreover, no two cells are alike, and even the same cell may change over time. Scientific findings are not absolute, even in what appears on the surface to be a simple experiment.

Science is a method of inquiry, albeit a very powerful one. As such, it is no more immune to human bias and manipulation than any other method of inquiry. Since science depends on a strict controlling of variables, it is in fact particularly susceptible

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# Editor's Word

As I read the submissions to this newsletter, I quickly became aware of the excitement that people are feeling about our upcoming March conference in Los Angeles. Joan Rankin and her committees of volunteers from California and all across the country have been busy at work on the conference since the fall of 2009. When we attend a conference that seems to flow along seamlessly it is easy to overlook the fact that literally hundreds of hours of preparation go into the production of one conference. Thanks to Joan and all who have worked so hard to make this a success. Hope to see you there!

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

Thanks to all contributors to this issue: Theresa Aiello, Penelope Andrew, Marybeth Atwell, Karen Baker, Joan Berzoff, Janet Burak, Rita Karuna Cahn, Patrick Cody, Kate Croskery-Jones, Jan Freeman, Velia K, Frost, Terry Klee, Elaine Leader, Frances M. Levine, Ellen T. Luepker, Lanning Melville, Lee Whitman-Raymond, Judith Rosenberger, Ellen G. Ruderman, Cathy Siebold, Diana Siskind, Pat Sable, and Yvonne Young. ■



Donna Tarver, MSSW

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## Aims & Purposes of the AAPCSW

- To represent and protect the standing and advancement of psychoanalytic social work practitioners and educators.
  - To provide an organizational identity for social work professionals engaged in psychoanalytically informed practice.
    - To promote and disseminate the understanding of psychoanalytic theory and knowledge within the social work profession and the public.
- To effect liaisons with other organizations and professions who share common objectives for social work and the advancement of psychoanalytic theory and practice.
  - To advocate for the highest standards of practice and for quality mental health care for the public.

American Association for Psychoanalysis in Clinical Social Work

AAPCSW

# From the *President-Elect*

Since the fall of 2009, the majority of our efforts and focus has been on the conference—*Connection in a My Space World: Embracing Culture and Creativity in Psychoanalytic Thought*—taking place March 17–20 in Los Angeles at the Marriott Marina del Rey Hotel. For those who will be in attendance, you can anticipate taking in the aesthetic beauty of the surrounds as well as participating in a conference environment that promises to be innovative and meaningful as it addresses the intersection between psychoanalysis, art, the social world, and clinical practice. As I contemplate the current culture and the “my space” world, I find myself thinking about our ever-expanding and ever-changing world as it relates to matters of race, gender, class, violence, parenting, and technology, to name but a few.

The acceleration of cultural changes in these areas impacts our intrapsychic space and our interpersonal space. Most recently, the explosion of technology, with cell phones, the Internet, Skype, social networking, and twittering, not only has entered the world stage but also has brought new challenges to our clinical work. These technological advances have both positive and negative impact on one’s internal and external world, which ushers in the tension between encouraging change on the one hand and resisting it on the other. It will be intellectually and clinically stimulating to conceptualize cyberspace, contemporary family life, and creativity, and to explore its impact on relationships, intimacy, ethics, privacy, and parenting.

As we navigate our way through these changes, our psychoanalytic understanding will serve as our compass

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From the President, continued from page 1

to misapplication to complex and poorly controllable phenomena. The desire to believe that science is capable of establishing an objective truth, because its method protects against bias or subjectivity is an ideal that is unlikely to be met in practice. Stephen Jay Gould (1983) wrote about bias and the impossibility of objective truth in many of his articles for the *Natural History Magazine*. One of his columns explored the use of intelligence measurements to mask cultural biases. These biases supported a eugenics movement that had begun in the latter half of the nineteenth century. The movement’s



Karen E. Baker, MSW

while we attempt to understand how technologies and cultural events influence the treatment alliance, transference, countertransference, fantasy and conflict. I am certain that the conference will cultivate a rich dialogue among us about these issues, as we search as for meaning, creative solutions, and adaptations not only within the social structure but also within the internal processes of the analyst and the patient and their dynamic relationship.

The area chairs have actively promoted the conference and have continued to work on expanding our membership, as well as on organizing creative programs in their areas. Be sure to read the *Area Representative’s Corner* to see what local chapters are doing or visit our website at [www.aapcsw.org](http://www.aapcsw.org) for news updates.

I also want to bring to your attention that the Child and Adolescent Practice Committee is in the process of embarking on its next project: a special edition on children and adolescence in the *Journal of Psychoanalytic Social Work*. This special edition is scheduled to appear in fall 2012. A call for papers will be included in the conference packet. I hope that many of you will submit papers to this special edition.

Finally, I would like to thank Elaine Leader for her article “Community Policing and Teen Suicide Prevention” (see page 4). The article describes an innovative program that created a policing alliance with local LA law enforcement to improve their handling of teen suicide victims and their families and to train and sensitize police officers to the needs of suicidal adolescents. An inspiring read! ■

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participants asserted that society should strive to weed out the imbeciles or physically deformed as a way to improve the species.

During the early part of the twentieth century, Goddard used this bias to support practices that would exclude certain groups from immigrating to the United States. He used the Stanford Binet IQ test to restrict immigrants from Eastern Europe, particularly Jewish immigrants. According to his findings, the majority of émigrés were moronic and therefore not worthy of admission to the US. He based his findings on the

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# Community Policing & Teen Suicide Prevention

Elaine Leader, PhD, BCD, FAGPA

In 1996, TEEN LINE, the Los Angeles-based teen-to-teen hotline affiliated with Cedars-Sinai Medical Center, inaugurated a community policing alliance with local law enforcement to improve police handling of teen suicide victims and their families, and to sensitize police officers to the needs of suicidal adolescents. This was to be accomplished through a training that incorporates didactic, audio-visual, and experiential components. Key elements are the utilization of suicide survivors as panelists, thus putting a face to teen suicide, and the distribution of relevant materials.

TEEN LINE began instructing officers at the Los Angeles Police Department's Juvenile Procedures School. This mandatory continuing education is offered eight times a year, each class consisting of twenty-five to forty juvenile officers. Also developed were customized trainings to meet specific needs of varied law enforcement settings: Police Explorers, D.A.R.E officers, SWAT team members, Los Angeles Unified School District Police, California Hostage Negotiators, sheriffs, and other local police departments.

## The Team

*Some team members' names have been changed.*

Brian, a successful football coach for 40 years, has turned the tragedy of his teenaged daughter's suicide into a determination to prevent other teen suicides. He volunteers as TEEN LINE's Riverside County Outreach Coordinator.

Kate's daughter made two attempts despite hospitalization and anti-depressant medication, finally completing suicide by drowning herself in the family's pool. Kate's description of the impact on her family is powerful testimony to the destructive effects of a teen suicide.

Roger's son committed suicide in his senior year at a private high school. A straight-A student and star athlete, he was despondent after a romantic break-up.

Losing him devastated his parents and friends. Although heartbroken over his loss, Roger has committed himself to speaking out so other parents may be spared such devastation.

At fifteen, Sandra made two serious suicide attempts. She describes what underlay her depression and her run-away and drug abuse behavior. She credits an officer's intervention and intensive help at a residential treatment facility with "turning her life around." When Sandra says, with tears in her eyes, "Remember that troubled youth are usually just scared little kids inside," officers really take note.

Carla tried to kill herself when she was sixteen. With an alcoholic stepfather and sickly younger sister, Carla felt ignored and verbally abused at home, so went to live with a roommate while going to school and working full-time. She fell apart when her first love rejected her. She took pills but survived. Now twenty-one, Carla speaks of the loneliness and hopelessness she felt in the past.

Vera was fifteen when she found out she was pregnant. Jilted by her boyfriend and from a dysfunctional family with a father and brother in and out of jail for drug offenses, Vera felt she could not cope. Her grades dropped from A's to F's. Deciding to die she told a school friend her plan. She started downing pills as other students walked by. Later, she threw up the pills and survived. She describes the moment that she was falling asleep as the scariest of her life—not wanting to die, but not wanting to face all her problems.

At fourteen, Jessica realized she was attracted to other girls. From a Latino family, she was afraid of being thrown out if her parents knew. Depressed and contemplating suicide, she acquired a gun. Fortunately, she'd received a copy of TEEN LINE's Youth Yellow Pages in school. She called the hotline—for the first time, someone listened to her without judgment or bias. She felt understood and

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## Working with Children, Adolescents, & Their Parents

The Newsletter welcomes your submissions pertaining to child and adolescent practice, as well as to working with their parents. Submissions should be 800–1000 words and e-mailed to the editor

(kembaker1@comcast.net) as an attached Microsoft Word file. Next submissions deadline is April 15.

Karen E. Baker, MSW



# Guide to Psychoanalytic Developmental Theories

by Joseph Palombo, Harold K. Bendicson, and Barry J. Koch; New York: Springer, 2009; 416 pages, \$119 (hardcover)

Reviewed by Yvonne Young, MSSW

*Guide to Psychoanalytic Developmental Theories*, written by Joseph Palombo, Harold K. Bendicson, and Barry J. Koch, is a well-organized look at many of the different theoreticians and their theories that inform our work. The theories are presented as Drive Theory (Sigmund Freud); Ego Psychology (Hartmann, Anna Freud, Spitz, Blos, Greenspan); Object Relations (Klein, Winnicott, Mahler, Kernberg); Life Cycle (Erikson); Interpersonal (Sullivan); Self (Stern, Kohut); Attachment, Part 1: Traditional (Bowlby Ainsworth); and Attachment, Part 2: Neurodevelopment (Schore, Fonagy). Each chapter is organized to cover biographical information, the developmental theory, either a case illustration or an in-his/her-own-words section, summary and conclusion, keywords, references, major works, and supplementary readings.

The book is an outgrowth of the authors' frustration, as teachers at psychoanalytic institutes, with their students' lack of information about or familiarity with psychoanalytic concepts. The authors' stated mission is to "introduce readers to developmental theories, given that a foundational concept of psychoanalysis is that an understanding of psychopathology requires a developmental framework. Providing students with this background would enhance their development as clinicians" (1).

So who should read this book, other than students at psychoanalytic institutes?

I don't consider myself to be an intellectual, and I enjoyed reading this book. Generally speaking, I don't much care for comparing theories. I was trained by people who had studied with the Gertrude and Reuben Blanck and I have felt well grounded in ego psychology and object relations theory, as well as in the basics of Freud. I have always thought that theory builders had to be adamant about their particular theory to the exclusion of everything else (as if the human being was not complicated

enough to have several theories combined to help us understand development); otherwise, why were they building a theory? In short, theory builders have a narcissistic investment in their theories, which leads to a lot of needless competition between professionals who follow a particular theorist and those who don't. And in this book one sees the impact of this type of competition—how

the "powers that be" would not accept certain ideas, or people, and how that set back our clinical understanding. These illustrations are generally in the biographical sections of the book.

At the institute where I trained we were taught that being well grounded in a particular theory allows one to pick and choose from among the concepts of a different theory. For instance, where would we be without the concept of projective identification from Melanie Klein, or the understanding of how trauma impacts the developing child from Rene Spitz and John Bowlby? Is it imperative that the students using this book should be grounded in a particular theory rather than being left on their own to pick and chose? Perhaps if the students are assigned to do research on the theories that most interest them they will organically reach their own theoretical approach. At the end of each chapter there is a list of keywords as well as a comprehensive reading list that includes not only references to the chapter but also major works by the theoretician and supplementary readings. This would be good for the real intellectuals in our midst.

The main pleasure I derived from reading this book was from a historical perspective. I began my training in 1978, yet at the time I did not have any idea that Spitz had published his research a scant nineteen years before that (2). I remember being at a conference in Philadelphia at which Margaret Mahler pronounced that aggression was

See Theories on page 13

## Book & Film REVIEWS

The Newsletter welcomes reviews of books and films relevant to membership concerns, and members who author books and/or chapters are encouraged to contact Diana Siskind, book and film review editor, upon publication.

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Diana Siskind, MSW

# Area Representatives' Corner

## Northern California

Velia K. Frost, LCSW & Rita Karuna Cahn, LCSW, AREA CO-CHAIRS

Our group has been active in making community connections. A group of social workers in the Bay area, under the leadership of Elizabeth Simpson, LCSW, has organized a task force named the Coalition for Clinical Social Workers with the mission of bringing psychodynamic education to the social work community. Several of our members have been involved in creating the organization in response to the paucity of psychodynamic education offered in social work schools. Two programs have been effective in attracting young practitioners in the community and have connected our local AAPCSW with a fresh group of practitioners to attend our meetings and hopefully join us.

Our meetings are informal and we welcome group participation. On January 29, I presented the latest version of my work with couples (which will also be offered at the March conference) titled "The Inevitable Tensions of Marriage: Cooperation, Capitulation, Love, Annihilation." I examined how two people co-create a third entity that elicits experiences from elation to suffocation. I described how certain couples can tolerate a spectrum of emotions while others collaborate to keep relationships static. I identified qualities of interactions that will sharpen assessment skills and treatment interventions. Case material and handouts were offered to illustrate how these ideas can be applied in a session.

On April 16, Penny Schreiber, PhD, will present her paper "Holding A Sense of the Patient's Future: A Psychodynamic Exploration of Hope and Possibility," demonstrating how therapists hold a sense of their patients' futures and how this impacts their work. The future is a part of every psychotherapy treatment, whether acknowledged and worked with or not. Based on findings from her Sanville Institute dissertation, Dr. Schreiber suggests that holding hope and possibility for the patient provides an often unspoken and unexamined frame of reference in psychotherapeutic work. Often, cultural expectations that individuals can achieve all they need to through personal ambition and drive can leave them unready to deal with difficulties and failures. They may then arrive for psychotherapy with a sense of fore-

closed future. This makes the therapist's holding a sense of the patient's future very important. Therapists can be hesitant to address their vision of a patient's future, out of fear of influence, but often have the experience of seeing possibilities that patients cannot see in themselves.

We have had a very positive response to these programs and look forward to stimulating and informative discussion. ■

## Southern California

Joan Rankin, PsyD, LCSW, AREA CHAIR—LOS ANGELES

Karen Redding, PhD, LCSW, AREA CHAIR—ORANGE COUNTY

Reported by Ellen G. Ruderman, PhD

Under the able leadership of its chair, Joan Rankin, and the participation of her executive board, Southern California area chapter had an exciting 2010 Reflections Series. In January, Carole Bender, JD, LCSW, presented "Legal and Ethical Issues for the Advanced Clinician" for the area chapter and the wider mental health community. The program was well attended, with an ambience that was friendly and inviting. Dr. Bender gave an enriching and informative program on legal and board-requirement issues pertinent to clinical practice and the practitioner.

This was followed by a unique presentation in March, "Early Adulthood Through the Eyes of Young Film Makers." The presenter and organizer of this stimulating program, Pat Walter, MFT, ATR, brought together two interesting young filmmakers, Sushrut Jain and Judy Prays. A discussion followed the viewing of their films, which focused on an exploration of young adults (twenty- to thirty-five-year-olds) through the medium of film. Rosalyn Benitez-Bloch, DSW, discussant, gave an enhancing reflection of the program, which elicited considerable interest and enthusiastic response from the clinical audience.

In October 2010, another excellent Reflections Series presentation was offered. Organized and facilitated by Paula Shatsky, MFT, ATR, the area chapter was pleased to welcome William Brennan, ThM, MA, LHMC, a psychoanalyst from Providence, RI, who is a co-chair of



the History Committee of the International Forum for Psychoanalytic Education. His presentation, "Ferenczi's Forgotten Messenger: The Life and Work of Izette De Forest," was followed by discussant Katherine Basche Schwarzenbach, PsyD, training and supervising psychoanalyst at the Institute for Contemporary Psychoanalysis, who is especially interested in the life and writings of Sandor Ferenczi. Joan Rankin, on behalf of the executive board, organized a dinner for Dr. Brennan at Il Moro Restaurant.

We look forward to more Reflection Series programs of interest to clinicians. In May 2011, Ellen Ruderman will present "The Psychoanalytic Consultation Group: Meeting with Colleagues and Consultant to Explore Case Impasses, Countertransference, and Innovative Treatment Planning."

**The Conference:** Joan Rankin, both director of the forthcoming AAPCSW conference, *Connection in a My Space World: Embracing Culture and Creativity In Psychoanalytic Thought* (March 17–20, 2011), and chair of the Southern California area chapter, is pleased to announce that numerous reservations have already been received, both for the conference and for hotel arrangements at the Marriott Marina Del Rey. She is also pleased to announce that the Southern California area executive board committee members (as well as the Orange County executive board, under the leadership of Karen Redding) had all volunteered to chair or be on conference committees, which adds a positive flavor and assurance of the conference's success. The Southern California and Orange County area chapters, as hosts of the forthcoming conference, are pleased to welcome their colleagues from across the country and from Los Angeles, Orange County, and surrounding California cities to enjoy and participate in this exciting event. ■

## Michigan / Ohio

Karen E. Baker, MSW, AREA CHAIR

Reported by Marybeth Atwell, MSW, MEMBERSHIP LIAISON

I would like to begin the Michigan/Ohio chapter report by introducing myself. My name is Marybeth Atwell and I am in private practice in East Lansing, MI. I am also a candidate in psychoanalysis at the Michigan Psychoanalytic Council and have recently taken on the role of the membership liaison for our chapter. I am very excited about becoming more involved with the organization.

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## Infidelity Exposes Role of Disavowal in Marriages

Patrick Cody, reporting from North Carolina

"Clinical Dimensions of Infidelity: Concerns, Causes and Consequences" was the talk given by Constance Goldberg, MSW, at a meeting of the North Carolina chapter of the American Association of Psychoanalysis in Clinical Social Work (AAPCSW), October 16, 2010. The symposium was held at the UNC–Chapel Hill School of Social Work, with Nancy Perault, MSW, providing the discussion. Goldberg works in private practice in Chicago and is on the board and faculty of both the Institute for Clinical Social Work and the Center for Religion and Psychotherapy; Perault is a psychotherapist in private practice in Chapel Hill, North Carolina, and is on the board of AAPCSW,

Infidelity opens a Pandora's box of issues for couples (and therapists), Goldberg said, giving special consideration to the role of disavowal in lives of both spouses. The spouse who is engaged in the extramarital relationship may be expressing parts of him- or herself that are otherwise disavowed in the primary relationship.

Often there is unacknowledged depression in the perpetrators, who may be "self-medicating" with excitement. Disavowal is common among aggrieved spouses, who may know and not know of the affair at the same time. With infidelity, couples may be acting out aspects of an unconscious and unacknowledged marriage agreement.

Therapists can get involved in disavowals, colluding with patients in leaving certain aspects of their relationships unexamined. To better work with such clients, therapists need to recognize the role of disavowal in their own lives.

Once the truth of infidelity is known, there is no return to the relationship as it was before. A return to the protection of disavowal is not possible.

Goldberg recommended orienting work with individuals and couples towards understanding the events as traumatic, understanding why they occurred, reevaluating the relationship, and moving beyond the affair. "They must reweave the fabric of their relationship rather than render it asunder," she said. The effectiveness of therapy may be measured by the increase in empathy in

See Infidelity on page 14

# Member News . . .

**Theresa Aiello**, PhD, presented a day-long workshop “Child Treatment, Play Therapy, and Mentalization” to NASW on November 13, 2010. She has been nominated to the National Academy of Practitioners, and her article on 9/11 will be published in the online *Journal of Traumatology* special edition on 9/11. She will be both discussant and presenter at the AAPCSW Conference in Los Angeles in March, and in April she will be presenting “The Problem of Rescue Fantasies in Treatment of Children” to the New Jersey Institute for Psychoanalysis Child Program.

Besides her private practice in New York City, in which she treats many artists, writers, and actors, **Penelope Andrew**, MSW, is an active member of the Women Film Critics Circle and has written film reviews on such recent and classic films as *The Illusionist*; Ernst Lubitsch’s masterpiece *Cluny Brown*; *Made in Dagenham*; and *Winter’s Bone*. Penny also wrote a long feature article with commentary on the artist and great granddaughter of Sigmund Freud, Jane McAdam Freud, titled “NYC Psychoanalytic Society Hosts Artist Jane McAdam Freud: The Edge of Analysis, Art, and Politics,” part 1 of which appeared on the *Huffington Post*, with part 2 continuing on the website of WBAI Radio. McAdam Freud just opened her first one-woman show in NYC, which Penny will cover for *HuffPost* and WBAI.

**Karen E. Baker**, LMSW published a paper titled “From ‘It’s Not Me’ to ‘It Was Me After All’: A Case Presentation of a Patient Diagnosed with Dissociative Identity Disorder” in the July–December 2010 edition of *Psychoanalytic Social Work* (vol. 17). The paper discusses the case of a woman diagnosed with DID and describes the restoration of a cohesive sense of self and the process of integration from the “it’s not me” self to the patient’s knowledge that “it was me after all.” Also, in November, she presented a paper titled “The Transformation from Deadness to Human Relatedness” at the meeting of the Michigan Society for Psychoanalytic Psychology, and in October presented the case of a seven-year-old boy struggling with self-regulation to Ken Corbett, PhD, at the Michigan Psychoanalytic Council’s fall conference, *Boyhoods: Rethinking Masculinities*. The presentation discussed the

interplay between the boy’s familial disruptions, his own dysregulation, and the process of change. In January 2011 Jerrold Brandell, PhD, editor in chief of *Psychoanalytic Social Work* invited Karen to join the editorial board of the journal.

**Joan Berzoff**, MSW, EdD, received the Greatest Contribution to Social Work Education award from the Massachusetts chapter of NASW. She has two books forthcoming: *Falling through the Cracks: Psychodynamically Oriented Clinical Practice with Vulnerable, Oppressed, and At-Risk Clients* (Columbia University Press), and the third edition of *Inside Out and Outside In: Psychodynamic Theory and Practice with Multicultural Populations* (Roman Littlefield), featuring new content on trauma, cognitive-behavioral theory, gender, race, relational and intersubjective theory, and updates on affective disorders, personality disorders, and psychoses. Joan also gave the endowed lecture “Psychodynamic Theory and Practice with Vulnerable and Oppressed Populations” at the University of Texas.

Doing therapy with couples in trouble can often feel like walking into a battleground. How do we help our couples deepen their connection? And how do we keep ourselves grounded and resilient? One way is through consultation with other dedicated therapists in a safe, nurturing environment. **Cheryl Dolinger Brown**, LCSW, runs monthly group supervision in New York City on Fridays and sees people individually (in person and on Skype) to help find solutions for working with difficult couples. She has thirty years of experience providing individual and couples therapy and is a certified imago relationship therapist, an imago advanced clinician and consultant, a psychoanalyst (NPAP), and a certified somatic experiencing practitioner.

**Janet Burak**, LCSW, continues her work on intimacy in mid-life and beyond. Last year’s workshop series for single women, “Intimacy Issues in Mid-Life and Beyond,” was successful in boosting ongoing treatment or giving others the impetus to begin therapy. This winter, she led the workshops “Sexuality in Mid-Life and Beyond” at NYC Senior Citizens Centers.



AAPCSW member **Joe Cronin**, LCSW, is moving his life and practice from Chicago to New York City this winter, after more than thirty years in Chicago. He will commute to Chicago weekly to practice part-time while beginning to work in NYC. His new office is at 142 West End Ave, Suite 1S; his phone number is 773.844.9206. He says, "I will dearly miss my Chicago friends and colleagues, and look forward to making new friends in NY."

After reading about A Home Within in a prior AAPCSW newsletter, **Kate Croskery-Jones**, MA, Mdiv, JD, contacted the organization. As a result, a new chapter of A Home Within is now being formed in the greater Milwaukee area. A Home Within connects high-quality therapists with foster children in need, whose lives have often been marked by trauma and instability. Participating therapists agree to provide pro bono therapy to a foster child once a week indefinitely, as well as participate in a regular consultation group. See [www.ahomewithin.org](http://www.ahomewithin.org).

**Jan Freeman**, MSW, is a new faculty member of the Psychotherapy Training Program of ISSTD, the International Society for the Study of Trauma and Dissociation, and is teaching the yearlong standard course on working with complex trauma and dissociative processes with Joan Turkus, MD. The seminar-style class of fourteen filled up very quickly and has a waiting list for next year. An advanced course will also be offered next year. The standard and advanced course curriculums have been developed and updated since the training program's inception in 2001 and is now taught at over forty-five sites in the US, Canada, Europe, and the Middle East, as well as online. There is also a child and adolescent course which is taught at several sites and online.

Jan was also invited by the Washington Center for Psychoanalysis to act as co-coordinator of this year's annual film series course. This year's theme is trauma, and seven films were chosen on topics ranging from

relational trauma to war trauma with expert discussants for each film. The series more than doubled its registration from recent years, and a listserv discussion group has been created to continue the very lively discussions begun after each film. Dr. Richard Kluft was guest discussant on December 10, when the 1976 film *Sybil* was viewed, and the discussion was so lively that it continued until almost midnight instead of the usual 10:30pm stopping time. Other included films: *Waltz with Bashir*, *The Girl with the Dragon Tattoo*, and *Turtles Can Fly*. One film is shown each month September through April.

**Terry Klee**, LCSW, has been invited to conduct a workshop at the 36th Annual Association for Women in Psychology (AWP) Conference, held in Philadelphia March 3–6. It is titled "I Am, But Not? The Surprising Answers of Identity, Generativity, and So-Called Childlessness." Her submission to the AWP was inspired by the reception of her 2010 paper "No Other Than Mother?" presented at the Westchester Center for the Study of Psychotherapy and Psychoanalysis (WCSPP) annual retreat. Terry also recently became the editor for their quarterly publication, *WCSPP In Touch*. E-mail: [tak2108@columbia.edu](mailto:tak2108@columbia.edu).

In December, TEEN LINE was featured in a one-hour documentary, *E! Investigates Teen Suicide*, hosted by Laura Ling. AAPCSW member **Elaine Leader**, PhD, CGP, FAGPA, is co-founder and executive director, TEEN LINE, Cedars-Sinai Medical Center, Los Angeles. (See article, page 4.)

**Frances M. Levine**, MSW, BCD-P, is currently teaching a course in self psychology based on the fundamentals of Kohut at the New Jersey Institute in Teaneck. She will also be giving a play therapy workshop using Kohut's experience-near technique at NJI in March 2011.

See Member News on page 10

## Share Your News

Dear AAPCSW Members—  
We want to hear from you!

Please call, write, or e-mail me with your news: graduations, presentations, publications, awards, appointments, exhibits, and so on, are all items the AAPCSW membership would like to acknowledge in the *Member News* column.

Feel free to include a photo, if you like.

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assumption that intelligence was innate, and not vulnerable to environmental influences. His seeming scientific approach led to large numbers of people being labeled morons, and therefore not eligible for admission to this country.

Another example of the use of scientific inquiry to support bias was Pearson's efforts to restrict Jewish immigration to England. Pearson, who is considered a founder of modern statistics, also supported the eugenics movement. He developed his well-known correlation coefficient, Pearson's R, to test assumptions about inferiority of those seeking asylum in Britain. One of Pearson's concerns was that Jewish émigrés would be a threat to the British. To try to impact the flow of immigration, Pearson created his mathematical formula to demonstrate that the Jews of Europe were not superior to the British and therefore should not be allowed to emigrate. The story does not end there. Pearson had difficulty proving his point, and so he kept manipulating the data analysis to get the result he wanted. Unlike Goddard, Pearson's findings did not become policy.

These examples demonstrate the way that bias in science is not new, but it is rarely discussed. Recently, we have had a host of stories coming out that support questioning our idealization of scientific enquiry. Jonah Lehrer's recent article in the *New Yorker* (December 13, 2010), for example, gives multiple examples of the way that research demonstrating the efficacy of mood stabilizers is not supported by continued studies. Similarly, we hear assertions about evidence that certain therapies are effective, only to have those same results questioned as the study conditions are repeated by independent researchers. The desire to manipulate the data—or as in the case of research on the association between autism and vaccines, to just make it up—as a way to achieve a result could also be considered part of the human condition.

“Seeing is believing, but believing is seeing” is a phrase we could all adopt when reading the latest evidence that something does or does not work. Claims-making is the way that groups of people put forward their bias (Siebold 1992). Does the scientific finding lead to the claim, or does the claim lead to the scientific finding, is important to consider. As I write this, I am also cognizant that bias is part of psychoanalytic theory and work as well. We may desire to see progress, or to see problems, for reasons that are part of our psychic makeup. Freud wanted to believe that the talking cure was helpful, and

so he hid facts about the Anna O case for decades. Anna O, the first analytic patient, was not cured by uncovering her memories. She spent several years at a sanatorium after Breuer abruptly broke off his treatment with her because he was uncomfortable with her expressed fantasy that she was pregnant with his child.

The desire to know, to have certainty, is part of what it means to be human. Jerome Bruner (1990), and before him, George Herbert Mead (1934), spoke of the human need to make meaning of our experience. As we enter the twenty-first century in psychoanalytic thought and practice, there is gathering support for considering the complexity of dyadic, triadic, and beyond experiences. We both know and don't know. Individual experience can be organized in patterns or categories, but it is also unique. Our knowledge is informed in conscious and unconscious ways and what we think is happening can only partially explain our observations. As we look forward to the 2011 conference we see presentations that demonstrate uncertainty. The conference includes themes of treatment, but it also incorporates other sensual expressions such as in art, drama, dance and music that also seem to help some people, some of the time. How different approaches to alleviating mental suffering are beneficial can be hypothesized, but in keeping with the critical analysis of reductionist methods that I have asserted in this piece, it cannot easily be proved. I look forward to seeing you all in LA. ■

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**Rooted in the past,  
focused on the present,  
looking toward the future.**

less scared of her suicidal thoughts, enough to carry on.

*Arlene*, now twenty-three, remembers feeling depressed and “different” as young as eight years old. In adolescence her feelings of alienation led her into abusing drugs and making several suicide attempts. An arrest for possession of heroin paraphernalia led to over a year in residential treatment.

Dr. Elaine Leader—co-founder and executive director of TEEN LINE and coordinator/trainer of the Team—presents the overview. She encourages officers to share their own experiences with teen suicide, either personal or professional. This is an important part of the learning process. She sets the tone of the class by sharing a poem, written by a sixteen-year-old, and two suicide notes. One note has a positive outcome: the writer, an eighteen-year-old, overcame her depression with intensive therapy to become a successful professional in the community.

### **Evaluation**

Officers complete a brief evaluation form at the completion of training. In addition, the LAPD Juvenile Procedures School conducts its own training evaluation and the TEEN LINE class is consistently rated the highest and most valued by juvenile officers. Almost all mention the value of the personal stories and the resources we provide them, particularly the hotline number and the Youth Yellow Pages.

Some officers are responsible for Explorer groups in their communities. Their goal is to prepare youth, ages fourteen to twenty-four, for possible careers as peace officers. Most youth come from low-income families and are predominantly Latino or African American. Officers are particularly sensitive to Explorers’ moods, since several years ago one took an officer’s gun and committed suicide. Sometimes an officer might alert us to an Explorer that they are concerned about; we have also used the evaluation forms Explorers complete to earmark youth we consider vulnerable.

### **Conclusion**

The emphasis of the training format is in the sharing of experiences. The panelists share their painful past experiences and describe their healing journeys. Likewise, when the officers share their own past and current experiences with teen suicidal behavior, on both a personal and professional level, an additional dimension of understanding occurs. To effect attitudinal change,

we acknowledge the difficulty of the officers’ assignment while showing our concern for their task

Despite the difficult material encountered in discussing teen suicide, the TEEN LINE Team has been inspiring, and in turn, inspired by, the contacts made through this community policing alliance. Our research documents that our training model is an effective tool for teen suicide prevention within the context of a community policing effort. ■

*Elaine Leader, PhD, is executive director of TEEN LINE at Cedars-Sinai Medical Center, Los Angeles, CA. For more information on TEEN LINE, contact her at 310.423.3401 or drleader@earthlink.net, or visit [www.teenlineonline.org](http://www.teenlineonline.org).*

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innate, that without aggression there would be no growth. A gasp came from the audience. It is this book that put that gasp into perspective for me. I also remember a conference at which Daniel Stern presented his research findings on infant behavior, and my good friend was distraught because this meant that Mahler’s theory was wrong. I remember too the delight that Stern took in debunking Mahler. There was also a nasty conference at which Otto Kernberg and James Masterson attacked each other, over what I am no longer sure. Now I can see where my dislike of theory builders comes from—I didn’t care for all this arguing in my new psychoanalytic family.

This book took me for a ride down memory lane. While I cannot promise such a trip for you, I can say that if you like to think about the history of the ideas that you work with every day, then you should definitely read this book. ■

*Yvonne Young received her psychoanalytic training at the New York School for Psychoanalytic Psychotherapy and Psychoanalysis. She has a private practice in New York City, where she treats people of all ages.*

clients, both toward themselves and their partners.

As patients increase in knowledge of themselves and their partners, they may be able to live with a fuller sense of self, tolerating feeling states better, especially those that are painful.

In her discussion, Perault said that there are many reasons why people engage in infidelity, making it difficult to assign a specific psychological meaning to the experience. Affairs are often not about sex, and can happen in “happy relationships as well as troubled ones,” when a partner does not know how to handle what is going on within themselves or in the relationship.

Perault spoke about the concept of disavowal, referring back to Freud and later Kohut’s concept of the “vertical split in the psyche,” particularly as associated with narcissistic vulnerability. She concurred with Goldberg’s assessment that an examination and understanding of the aggrieved spouse’s disavowal seems crucial for emotional growth.

Perault then addressed the experience of infidelity from the perspective of couples work. “It takes two to tango,” Perault said, “and couples therapy looks at the dance—if you will—the marriage, the relationship, as a dynamic system.”

Perault referred to the intersubjective school of self psychology in noting that there are three experiences that deserve attention when working with a couple: “the experience of one’s self, the other self, and that what is created between them.”

In working with couples, the most difficult and important shift in therapy is from trauma recovery to a more reflective stage of the treatment, she said. Creating a shared narrative, as outlined in the work of Donald Baucom et al. (2009), is an essential piece of the healing process.

Questions to consider include What parts of the self was the participating partner able to express in the affair that were not being expressed in the marriage? What caused these parts to emerge? Can and how might these parts be integrated back into the marriage? Can the couple create a different marriage, not just put their old contract back together?

Perault suggested that sitting with each other’s pain is itself an act of forgiveness. Forgiveness is not a one-time event, rather it is a process. Healing is not always possible.

Even for those partners who separate, moving toward some mutual understanding of what happened and why

can lead to more effective communication and problem solving, especially when partners continue to co-parent. ■

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*Patrick Cody is a first-year student at the Smith College School for Social Work and an intern at Duke University Hospital’s psychiatric inpatient unit.*

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## Area Repts’ Corner, continued from page 7

Three years ago I attended the conference in New York and had such a positive feeling about the presentations and the people there. I felt that I found a place where my strong social work values came together with my growing interest in psychoanalysis. I am now part of the local chapter’s steering committee, chaired by Karen Baker. We are in the process of working together to revitalize our chapter after a couple of inactive years.

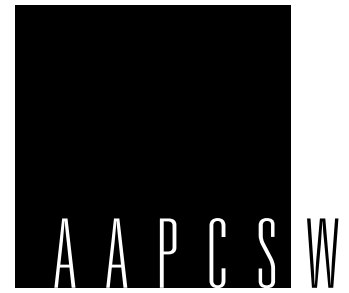
Currently we have twenty-one members and are actively working to encourage others to join. In our recent meetings, we have made important decisions pertaining to programming and outreach activities. The committee has decided to sponsor two presentations per year, one in the spring and one in the fall. CE credits will be offered for the programs in collaboration with the Michigan Psychoanalytic Council. We have gathered some very good ideas for topics and presenters.

In addition, we found ourselves discussing the absence of psychoanalytically oriented work in the various clinical settings in our communities. We agreed that there is a growing need for our voices in these most difficult times, as we deal with trauma from returning veterans to the many unemployed workers here in our Midwest states. One of our members introduced the idea of developing a curriculum/education training manual to be used by clinical social workers for the purpose of outreach and training within agencies or other clinical settings. We discussed other outreach possibilities, such as presenting at NASW conferences and offering supervision groups at agencies. We perceive a great need and desire by clinicians in the community for more training and supervision. We are excited about this project and the possibility of providing an important link with community treatment settings. ■

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