



From the *P*resident

Penny Rosen, MSW, LCSW, BCD-P

In writing, on this frosty wintery day, the first column in my tenure that began October 2013, I have been reflecting on the thirty-three-year history of AAPCSW and its achievements. One of its early missions, as conceived by our founder, Crayton Rowe, was to establish parity among mental health disciplines. Over time we have made strides in this direction, while our efforts are ongoing. On a national level, from its inception we were involved in the formation of the Consortium of Psychoanalytic Organizations and are members on its board, and we are represented on the board of the Accreditation Council for Psychoanalytic Education (ACPEinc).

Currently, our membership has grown in numbers and our mission has expanded. Past presidents Samoan Barish, Cathy Siebold, and Karen Baker have formed committees in the areas of education, research, children and adolescents, diversity and otherness, and social action/justice. These committees organize panel presentations at our biennial national conferences and also contribute articles to the Newsletter. Needless to say, much more can be cited in terms of the many achievements of the past. Now our current agenda rests on where we go from here.

As part of our current and future-oriented goals, we are examining how we can be responsive to the pressing issues of our time, to new trends in our work, and to the community at large, by applying psychoanalytic thinking and discerning where we may have an impact. On a national level, we are partnering with the Consortium of Psychoanalytic Organizations to sign on to bills related to social policy issues such as violence and gun control. In addition, through collaboration with the consortium, we will create initiatives to promote psychoanalysis in the eyes of the public through the media, addressing the predominant search in our culture for symptom-relief and fast-fixes and emphasizing how psychoanalytic practice values the subjective experience of the other. This initiative is in the early stages of development.

Within our organizational structure, we are conceptualizing ways for more extensive interaction and exchanges between our committees. For instance, the committees will feed material to the Education Committee for online learning opportunities that will be presented to our membership. Given the interest in more in-depth continuing professional development, we plan to have at least one online moderated topical forum on a subject of interest within the next year. We are looking forward to using technology to offer members more opportunities for professional learning and thinking. More developments are under consideration and will be reported in future columns.

Other joint efforts have included our second annual cosponsorship of a conference with the Consortium of Psychoanalytic Research Inc. (CPRincdc) in Washington, DC. The conference was held on February 2, 2014, and this year's topic was cultural awareness and its implications for research (see www.cprincedc.org). Golnar Simpson, Diversity

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Editor's Word

Again we are delighted to have so many contributions to our member news column and appreciate the submission of pictures with your news. Congratulations to all for your accomplishments. A particular congratulations to the *Newsletter's* own Ashley Warner on the recent publication of her memoir. Thanks to David Phillips for his response to Louis Ruffalo's op-ed piece in our last issue. We would very much like to hear from others of you with op-ed pieces on other topics and with responses to any *Newsletter* articles. We appreciate Karen Redding's sharing of her goodbye and memories of Jean Sanville, and thanks to all of you who responded with your own tributes and memories of Jean.

The *Newsletter* welcomes readers' letters, articles, and opinions on topics of the day and clinical issues; book and film 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 the additional contributors to this issue—Rebecca Fadil, Penny Rosen, and Marcella Wagner. ■



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.
- To promote and disseminate the understanding of psychoanalytic theory, research, and knowledge within the social work profession of and to the public.
 - To bridge social work and psychoanalytic discourses by integrating concerns for social justice with clinical practice, and conceptualizing psychoanalytic theory and practice within its broader social-political context.

American Association for Psychoanalysis in Clinical Social Work

AAPCSW

Board Certification for the Clinical Social Worker Psychoanalyst

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

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

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

Graduated from an Institute:

Training: graduate of a psychoanalytic institute training program

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

Supervision:

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

Specialty Practice Experience:

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

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

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

Did Not Graduate from an Institute:

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

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

Supervision:

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

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

Continuing Education: within the past 3 years, amassed 40 clock hours of

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The Social Justice column arises from the passions of some of our committee members and the larger AAPCSW membership. The Committee on Social Justice is hoping that the column can be dialogic and conversational, that is, encourage a reflective back and forth within the organization. Toward that end, we invite and encourage submissions of articles relevant to the committee's mission (see below), as well as responses to articles that have been printed. Please contact Jennifer Tolleson, chair, if you are interested in joining us or with any submissions or ideas (jentolleson@comcast.net).

Note: This article is an opinion article representing the author's viewpoint and is not a statement of any position of AAPCSW itself. AAPCSW is not responsible for the accuracy or content of information contained in the article.

Next issue: Brenda Solomon, PhD, with "Dollars and Sense: Market Pressures on Social Work Education"

Praise for Mandela's South Africa but Silence for Palestine

Rebecca Fadil, LCSW

Nelson Mandela's recent death has made me think about something our professional community has long ignored . . .

Shortly after the world learned of Mandela's death, Gaza was struggling for its life. The 2008 bombing of Gazan infrastructure and the continued siege by air, land, and sea left Palestinians without water and electricity for up to eighteen to twenty hours per day. In December the streets of Gaza flowed with sewage after the one remaining sewage treatment plant ceased functioning. Then, disaster struck—a freak snow storm pounded the Middle East, leaving Gaza freezing and drowning, without electricity to power their sewage treatment plant, warm their homes, or pump their water. The media blitzed coverage of Mandela's death, but the people of Gaza drew little attention.

Outgoing UNRWA commissioner general Filippo Grandi said, "Gaza is on the verge of catastrophe. The dipping temperatures have staved off cholera and typhoid for now but 1.8 million people are freezing and starving and we are all responsible." He also stated that nineteen of the twenty UN projects in Gaza had ground to a halt, and Gaza was quickly becoming uninhabitable.

The AAPCSW listserv was very active after Mandela's death, praising his virtues and the South African national struggle for justice and equality that he represented. People were seemingly able to readily criticize the policies of apartheid South Africa but failed to make the obvious connection to the system of racial segregation and violence being meted out to the Palestinian people by the Israeli government in 2014.

The Israeli occupation of Palestinian land and the gross human rights violations being perpetrated against the Palestinian people are arguably the most pressing human rights issue of our generation, yet, embarrassingly, they have been largely neglected by our community.

What does the absence of this conversation mean for

The AAPCSW Committee on Social Responsibility and Social Justice, formed in 2007, is a national committee of social workers, psychoanalysts, and allied professionals who are concerned with integrating a human rights and global justice discourse with clinical practice. Toward this end, we work to promote critical social-political awareness among clinicians, to conceptualize psychoanalytic clinical practice within a broader social-political context, and to expand the usefulness and availability of psychoanalytic clinical services for all people.

a professional community committed to the ethos of social justice?

Victor Wolfenstein writes in *Psychoanalytic Marxism*, “We must interpret the world in order to change it. Psychoanalysis is not merely a theory of personality and clinical practice; it also embraces a way of viewing the world, a frame of reference, an organizing set of values, and a morality. Thus, it is inherently political.”

I would argue that we are witnessing the untreated intergenerational effects of trauma on both sides of this conflict and colluding in its repetition by our silence.

How is it that we celebrate the end of apartheid in South Africa and mourn the death of a man once committed to militant resistance, yet remain silent as Israeli policy continues to hold more than 1.8 million people in Gaza under siege by air, water, land, and even electromagnetic sphere?

How is it that social workers remain silent about what South African Arch Bishop Desmond Tutu has called Israeli apartheid yet at the same time extoll the virtues of the man who fought against apartheid in South Africa? Last year I traveled in the West Bank with a black South African minister. He was quite shaken by what he saw and heard. On more than one occasion he remarked that he thought Israeli apartheid seemed more cruel than South African apartheid. These kinds of things are difficult to measure, so who can say which is worse; yet, it is probably helpful to point out that South Africa did not conduct its apartheid government with the unspoken approval of the world community. South Africa did not have American F16s, helicopters, cluster bombs, and drones to use at its disposal. South Africa became isolated and suffered from boycotts and sanctions imposed on it by the world community.

We have a situation where, on the one hand, apartheid South Africa was scorned by the world and suffered years of sanctions, and, on the other hand, Israel continues to enjoy international support, free commerce, favorable trade agreements, military funding, and protection from the world's largest superpower.

One might ask, Why is Israel singled out for criticism when there are so many other hot spots of violent oppression around the world? While this is true, other instances of occupation have rarely continued for over fifty years with the collusion and financial support of the world's foremost superpowers. Israel receives \$3.1 billion per year in direct military aid from the United States (not counting the considerable nonprofit 501c[3] contributions). Because our taxpayer dollars are used to fund this occupation, we are complicit in these human rights violations, and this is also why much of

the Arab world sees it as the American-Israeli occupation of Palestine.

I have seen with my own eyes in the West Bank how Jewish Israelis on one side of the road enjoy the benefits of Israeli citizenship—voting, state-provided infrastructure, electricity, water, and swimming pools—while Palestinians on the other side of the road live under Israeli military law, remain stateless refugees unable to travel, and in many cases have little access to drinking water. Palestinians are not permitted to vote for the people that represent them in the military governance that creates and enforces the laws they must live by. Rules of law in the West Bank and Gaza are established by military order of the regional commander not by parliamentary debate. The institutionalization of racism is eerily familiar. For example, Palestinians must carry their identity cards with them at all times. These identity cards dictate where they can live, work, and travel, which roads they may travel on and which buses they may board. Palestinians are subject to over five hundred checkpoints on Palestinian land in the West Bank; only thirty-six of those are on the West Bank–Israel border. The identity card determines the color of one's license plate, and the color of the license plate determines which roads one may drive on.

The ANC was once perceived much like the PLO. Mandela himself for a short while was an advocate of militant resistance. Israel's security is important, but don't Palestinians also have a right to live in security? Don't they too have a right to protect themselves from violence? Since 1948 Palestinians have suffered the lion's share of fatalities. Israel's attack on Gaza in 2008 caused 1400 Palestinian deaths, most of them civilian and children, compared to Israel's 13 deaths (4 of which were a result of friendly fire). It is not the homes of Israelis in Tel Aviv that are broken into in the middle of the night by armed soldiers mapping. “Mapping” is a kind of census taking that the IDF does at night in the homes of Palestinians to “make their presence felt.” As one former IDF soldier shared with me, “We are told to make them feel hunted . . . , to make our presence felt. . . . That's the sign that hangs in our barracks.” How does it feel to be young Palestinian children awakened in the middle of the night by soldiers tromping through their homes, knocking over belongings and humiliating their parents? What sentiments and feelings will they grow up with?

What defines terrorism? If the definition of *terrorism* is the killing of innocent people for political gain, then the IDF or the US army could be defined as terrorist organizations. This is precisely how many Iraqis, Afghans, Palestinians, and Arabs feel around the world after

experiencing firsthand US drone attacks and “collateral damage.” It is important to remember that it was Jewish militias in the 1930s and 1940s like the Irgun and Stern gangs (many subsequent Israeli prime ministers were leaders of such groups) that began a campaign of terror by blowing up hotels, markets, post offices, and buses. Many of the so-called founding fathers of Israel were proponents of tactical terrorism. Former prime minister Yitsak Shamir himself has stated, “Neither Jewish ethics nor tradition can disqualify terrorism as a means of combat.”

Terrorism has become a buzz word used to shut down any legitimate discourse around understanding international parties to a conflict. Definitions are dependent on who controls the narrative, and narrative control is governed by the degree of state power, resources, and influence. States with the power to define *terrorism* have been given carte blanche legitimacy to use any means to put down “terrorist” elements, yet all the while further fomenting seeds of the same tactics by the next impoverished generation of “terrorists.”

As clinicians, we know that something as dramatic and violent as a suicide bombing is a symptom. Palestinians did not become suicide bombers in a vacuum. We must look beyond the much clichéd reason of Israel’s right

to defend itself to understand the reaction formation. For example, what was behind the Jewish militia Irgun’s bombing of the King David Hotel in 1946? Would we find similar drives of fear, mistrust, survival?

The firing of homemade rockets by militants in Gaza is wrong, foolish, and strategically inept in every way, yet it cannot be realistically compared to the one hundred tons of bombs dropped on a besieged civilian population in Gaza during the so-called Operation Cast Lead. Schools, hospitals and UN facilities were not spared during this attack of state-sanctioned violence.

So, then, not to condone terrorism, but if we were to enter the world of the “other” as we have been trained to do, could we see how others may view the current rhetoric around terrorism as hypocritical?

Yes, it is true, Israel may not be exactly like South Africa, but it is similar enough to give us pause and urge us to ask questions about what exactly we’re supporting. If we examine our own resistance to acknowledging the disconnect between being advocates of Mandela’s righteous fight against apartheid yet not standing up to the injustices to Palestinians, what would we find? Is it paranoia, fear, trauma, internal identification with the aggressor, fear of being called an anti-Semite? A self-hating Jew?

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I find it increasingly difficult to live with myself by doing and saying nothing simply because it would be uncomfortable to do so. Eventually, we will all have to answer to our children and grandchildren about what we did or did not do during Israel's occupation of Palestine. This was underscored in December by the sheer numbers of people living on the brink of a humanitarian disaster in Gaza. Some say that the emerging boycott and sanction movement against Israel is threatening to the state, but Mandela said, "Ending apartheid didn't destroy South Africa; it saved South Africa and liberated both prisoner and warden."

We, as Americans, have had a one-sided view of the Israeli situation for more than sixty-five years, promulgated by AIPAC. Here in the United States, Zionism has erroneously become equated with Judaism, so that any criticism of Israeli policy is interpreted as hate speech against the Jewish people.

Conflation of Zionism with Judaism obscures the fact that Judaism is a religion and Zionism is a political ideology. Some Israeli academics have begun to refer to Israel as an ethnoc-racy. Can Israel be a democracy if it is only a democracy for its Jewish citizens and not all of its citizens? The silencing of one particular narrative is, of course, a central feature of oppression. Not speaking out helps to maintain the structure of any oppressive and unjust society.

Another aspect to this one-sided narrative is the frequent claim that the conflict is "complex." Maintaining the illusion of "complexity" for the public is another way for those in power to perpetuate the status quo. For Israel, the status quo means that they will continue to hold Gaza as an open-air prison, continue to gobble up land by building more settlements in the West Bank (which was designated for a future Palestinian state by the UN long ago), and continue its policies of apartheid inside and outside the green line, policies that privilege one ethnicity over others. (According to Jewish Voice for Peace, the situation is not very complicated and can be summed up in six minutes; see jewishvoiceforpeace.org/content/israeli-palestinian-conflict-101.)

How and why has the discourse become structured to reinforce this silence? It has become familiar to hear that anti-Semitism is the agenda lurking behind the "pro-Palestinian cause." I have no doubt that anti-Semitism against the Jewish people still exists. I would object however, to characterizing the criticism of Israel as "pro-

Palestinian" when it is more accurately described as a pro-human rights and pro-justice issue. Likewise, it is also possible that anti-Semitic racism toward Palestinians (and Arabs in general) could be masquerading behind Israel's frequent claims for national security which is arguably a more widespread phenomenon at this point in time.

If we were more psychologically conscious about where our politics came from and why, what would we find? Where did we get our political views on this conflict? Use of the term conflict itself belies a certain posture. The UN and International Court of Justice recognizes

this as an occupation, yet after the Oslo Accords in the 1990s, it became known as "the conflict." After key Israeli military archives were released in the late 1990s much of the Exodus-era narrative we all grew up on has been debunked by Israeli legal and historical scholars. In many ways Israelis are far ahead of Americans in having open discourse about the occupation. Even here in the United States things are changing. There was an article in the *Jewish Forward* recently about comparing Israel to apartheid South Africa.

Is it possible that there are elements of reality that are simply too painful or inconvenient to acknowledge? If this were true for a nation-state, how would they defend against such painful truths? How would individuals respond to such painful truths? Silence? Fear—of offending family, friends, influential colleagues? Fear of self-annihilation itself?

I am reminded of Martin Luther King Jr.'s letter from a Birmingham jail in which he confesses that he has been "gravely disappointed with the white moderate . . . who is more devoted to 'order' than to justice; who prefers a negative peace which is the absence of tension to a positive peace which is the presence of justice."

Resistance to the dominant narrative is difficult. As a professional community, we have no problem criticizing the many flawed policies of the US government. Why should Israel, or any other country for that matter, be any different? When we think about South Africa, do we praise and remember favorably those who remained neutral or "balanced" on apartheid?

Let us imagine for a moment that the policies of the state of Israel represent a kind of collective psychosis. The collective unconscious of Israel is suffering from the trauma of the past. State policy could be seen as a reaction formation as a result of their trauma as a people. After

Terrorism has become a buzz word used to shut down any legitimate discourse around understanding international parties to a conflict. Definitions are dependent on who controls the narrative.

centuries of discrimination and abuse, trust has been critically damaged. Is it possible that they have constructed an elaborate narrative to defend against this chronic and persisting fear of annihilation in their collective unconscious?

It is our job as the international community to create a holding environment in which we compassionately present doses of reality for Israel to bump up against so as not to collude in their psychosis. As citizens of the country that financially and militarily supports them, isn't it up to us to set limits and hold them accountable? Shielding Israel from legitimate criticism does not heal the wounds of the Holocaust nor does it effectively protect the citizens of its state.

Israel's overdetermined reaction comes at a price, and as former IDF soldiers from Breaking the Silence would say, there is a significant moral cost to this occupation. Many argue that instead of creating a safe homeland for Jews, Israel's policies in the occupied territories have, in fact, made life more unsafe for Jews all over the world.

The unresolved Palestinian-Israeli conflict will continue to be used and exploited by other groups and regimes that fuel global conflicts, grievances, grudges, and rogue jihadism. Whether we like it or not, the Israeli-Palestinian conflict is at the center of our geopolitical universe and will be for the foreseeable future.

If we are to be faithful to our social work roots, is it not our duty as human beings to call out those who violate international law and human rights, even if it is unpopular to do so and no matter who they are?

We are in need of the difficult working through of the meanings and functions of our silence on the humanitarian catastrophe unfolding before us. It's time to open our eyes, ears, minds, and hearts. We are social workers, after all—the very term represents a drive to understand individuals in their bio, psycho, social, political, economic, and geographical context. Where is our professional compass and commitment to justice?

How do we want to be remembered twenty or even ten years from now? What will you say when your grandchild asks you which “side” were you on? I hope we have the courage to begin the conversation. By talking about it ourselves we also give others permission to speak of it as well. ■

Rebecca Fadil, LCSW, attended Tel Aviv University during the Oslo years and ended up working for a small village (an intentional community founded by a Jewish Egyptian priest) on the green line called Neve Shalom/Wahat al-Salam, where Jews and Palestinians have been living and raising their children together in a binational/bilingual primary school since the 1970s. NS/WAS has become a model for peaceful

coexistence between Jews and Palestinians based on democratic principles of mutual respect by choice not coincidence. It was while working for NS/WAS that she met her future Palestinian American husband. Fadil has worked at the Karen Horney Clinic; at the Arab American Center in Brooklyn, New York; and as special assistant to the director of the US/Middle East Project at the Council on Foreign Relations, and has taught at Long Island University, Pace University, and St. Francis College. Fadil completed her training at the New York School for Psychoanalytic Psychotherapy and Psychoanalysis and is in private practice in Manhattan.

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In Response to M. Louis Ruffalo's "Self-Responsibility & Contractual Psychoanalysis"

David G. Phillips, DSW, LCSW

Dear Mr. Ruffalo,

I am writing you to comment on your article "Self-Responsibility and Contractual Psychoanalysis" published in the Fall 2013 Newsletter of the AAPCSW. When I first read your very interesting and provocative piece, I thought of responding on the listserv, since that seems to have become the main vehicle for conducting discussions of this sort in the modern world. In thinking a little more, however, I felt that it would be more appropriate to respond in the *Newsletter*, since that was where your original article had been published, and with the support of the editor, Donna Tarver, this is what I am doing.

First of all I must compliment you on publishing an article with this type of fascinating and thoughtful content. Although I disagree with you on virtually every major point, it is exciting to use the Newsletter as a forum to discuss this kind of issue. Now to my disagreements, which will focus on three major points.

In the context of discussing the response that professionals may make to an emergency, such as a suicidal crisis, you state, "The manner in which the therapist responds . . . reflects not only his professional training but also his own personal values." The response to such an emergency would be in the context of the contractual relationship in which the therapist "must be steadfast in his commitment to the patient's personal liberty and self-determination, regardless of any so-called emergencies that may arise during the course of the relationship."

While it is correct that we all work as therapists within the context of our personal values and our therapeutic orientation, this statement seems to not take into account the fact that the therapist may be licensed in the state where he or she practices, and the license, in essence, constitutes a contract between the professional and the wider society. If the therapist chooses to practice under the protection of a license, he or she has agreed to follow the guidelines and regulations that accompany that contractual relationship. While I am not particularly familiar with licensing regulations in your state, I suspect that something might be said about a responsibility to protect patients in an emergency situation. Similarly, the codes of ethics of professional associations and other elements of the standard of practice in the profession also refer to the professional responsibility to protect the welfare of patients. There is, in other words, a wider context of guidance that also determines therapeutic responsibility

and may well take precedence over professional training and personal values. These points are discussed by Faye Mishna and her coauthors (2002) in their very useful article on professional responsibility in dealing with suicidal patients.

You quote John Stuart Mill in a passage that advocates noninterference in the personal liberty of individuals as long as the actions of the individual do not harm others. This is, presumably, the philosophical basis for the practice of contractual psychoanalysis when you say that its underlying ethical principle is "autonomy, the freedom of a person to live one's life, to choose among alternative courses of action so long as no injury occurs to others."

As a student of the subject, you are probably aware that there are a number of problems in consequentialist ethical theories, of which Mill's utilitarianism is the most well known. (This theory holds that the sole basis on which ethical judgments should be made is the principle of "utility," the action that creates the greater proportion of value over disvalue.)

One of the problems with utilitarian ethical judgments in this type of case is the difficulty in evaluating and predicting what will constitute "harm to others." No one would argue that adherence to the concept of personal liberty supports the idea that individuals should be able to obtain a gun and shoot anyone who annoys them, but as clinical social workers how do we evaluate and predict the harm done by a suicide? Perhaps the suicidal patient doesn't harm others in the sense that he doesn't blow up a plane and take with him a number of other individuals, but how about the possible impact on a family—emotional and financial—of losing a parent prematurely? While I certainly think that suicide (the voluntary cessation of the individual's life) can be justified under certain circumstances, nonintervention in suicidal emergencies may often be hard to justify on utilitarian grounds. It is hard to say that we, as clinical social workers, support the autonomy of the individual in all of his or her actions as long as no harm is done to others—it is often too difficult to weigh the proportion of value over disvalue and to predict the various dimensions of the possible harm.

A main argument against intervention in certain types of emergency situations, according to contractual psychoanalysis, is adherence to the principle of autonomy. You



are correct in stating that the principle of autonomy is “closely related” to the social work principle of self-determination—autonomy is, in fact, the basis of self-determination. You also argue that social workers and social work codes such as the NASW Code of Ethics pay “lip service” to self-determination and that “social workers routinely restrict patient’s freedom of choice and action when such action is negatively valued by society. Examples include . . . involuntary commitment when the patient is deemed a risk of suicide or self-harm.”

The problem here is that of a simplistic view of autonomy, which is, in fact, a very complex principle, having a number of limitations and preconditions. (For an excellent discussion of this issue, see Beauchamp and Childress 2009, chap. 4.) It is fine for clinical social workers to support the principle of autonomous decision making, but as trained professionals they also understand that not everyone is equally capable of making an autonomous decision and that not everyone is capable of making an autonomous decision at all times. As Tom Beauchamp and James Childress (2009) point out, a truly autonomous decision requires that the decision be voluntary and be made by an individual of mature years who has the cognitive and emotional capacity to actually understand the

consequences of the decision and the availability of possible alternatives. While I agree with Thomas Szasz (1986), who argues that suicidal intent is not, in and of itself, an indication of mental illness, I find it hard to argue against intervention in the intentions of self-destructive patients who may actually be mentally ill or otherwise impaired in their judgment. Autonomous decisions require the capacity for autonomous decision making. I would suggest that intervention in this type of situation can be justified by both utilitarian ethical theory and by our understanding of professional responsibility. At the very least we can intervene to help the patient through the crisis, and help him or her to recover to the point that he or she is capable of making a meaningful autonomous choice.

I hope you find these few brief thoughts interesting, offered, as they are, in the spirit of continuing professional discourse. I look forward to further discussion on these important issues and further publication in the *Newsletter* of articles of this quality. ■

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and Otherness Committee chair, attended the program. We were also cosponsors of a Psychoanalytic Fair organized by Teachers College, Columbia University, on February 8, 2014, in New York City. Its purpose was to disseminate information on psychoanalytic training in the NYC metropolitan area as well as to promote psychoanalytic thought. A panel discussion addressed the theme of the relevance of psychoanalysis in the twenty-first century. Janet Burak, New York membership liaison, represented us at the exhibit.

On the educational front, we are also supporting the position paper of the Clinical Social Work Association (CSWA), which is based on a comprehensive study of online MSW education (www.clinicalsocialworkassociation.org). The paper is being reviewed by CSWE. Joel Kanter, listserv moderator and DC Area chair, was our representative at the CSWA summit meeting in the fall of 2013. Other future endeavors with CSWA are being discussed.

At the biannual meeting of the Consortium of Psychoanalytic Organizations in October 2013, a fifth organization, the Confederation of Independent Psychoanalytic Societies, was voted on as a new member to join the existing member organizations: AAPCSW, American Academy of Psychoanalysis and Dynamic Psychiatry, American Psychoanalytic Association, and Division 39 (Psychoanalysis) of the American Psychological Association.

On our home front, we regret Jennifer Tolleson's resignation from the position of president-elect, which was necessitated by her added responsibilities as the new associate dean of the Institute for Clinical Social Work in Chicago. At the same time, we congratulate her on acquiring this highly esteemed position. She will continue to chair the Committee on Social Action/Justice. To fill the position of president-elect, a special election took place, with Judith Aronson as the nominee. Susan Bokor Nadas was also voted onto the board as a new Member-at-Large of Small Areas.

We want to acknowledge and thank many dedicated advisory board members who made significant contributions and are leaving their positions at this time: Sally Fine (New Professionals chair), Richard Karpe (Technology chair), Lee Whitman-Raymond (Rhode Island area chair), and Nancy Perault (Speakers Bureau chair). The

Speakers Bureau Committee was disbanded because it was underutilized. We would like to welcome on the advisory board Lou Straker (Technology chair), Cole Hooley (New Professionals chair), and David Kearby (area chair of Indiana and Kentucky). Many members have been active in different advisory positions, and we would like to encourage more of you to get involved.

2015 Conference

Our conferences have always been a highlight of our organization. As the chair of the 2015 conference, *The Art of Listening: Psychoanalytic Transformations*, to be held again in Durham, North Carolina, I will continue to report on our planning activities. We are in the process of reviewing submissions to the Call for Papers. Karen Baker and Kim Sarasohn are the cochairs of the Call for Papers, and Susan Sherman and Diana Siskind are the Student Paper cochairs.

Our four plenary speakers and their topics are:

Gilbert Cole—"Private Practice: Listening Alone and Listening as a Group"

Elizabeth Corpt—To be announced

Jack Drescher—"Can the Psychoanalysis of the Future Bring Anything to Sex and Gender Studies?"

Theodore Jacobs—"Listening, Dreaming, Sharing: On the Use of the Analyst's Inner Experiences"

One new feature at the conference will be viewing a noncommercial film (to be announced) followed by a discussant and audience participation. The film will be shown at the nearby Carolina Theatre. We are looking forward to greeting everyone who attended the 2013 conference in Durham and all who will be coming for the first time in 2015. Remember, Southern hospitality cannot be surpassed and neither can the superb, stimulating content of the conference.

The Conference Planning Committee (list will be expanded): Karen Baker, Samoan Barish, Lisa Barnhardt (exhibits chair), Barbara Berger, Judy Ann Kaplan, Patricia Macnair (treasurer), Bill Meyer (conference consultant), Susan Bokor Nadas, Nancy Perault (Hospitality Committee), Peter Perault, Penny Rosen (chair), Cathy Siebold (program consultant), Carolyn Stevenson (editor), Wendy Winograd.

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AAPCSW offers the PEP subscription to our members for \$80 per year.

Members can opt-in four times a year. Please contact Barbara Matos, barbara.matos@aapcsw.org, for the next enrollment date.

Tributes to Jean Sanville . . .

My time with Jean was always treasured, as was being with her recently on Saturday afternoon. She passed on, just yesterday morning, Monday, November 4, at 2:37 a.m. I took some poems with me to read to her at her bedside, since we often shared reading poems to each other. She was calm, peaceful, and seemed ready to move on. Jean showed me a number of pathways, including this one: moving on and into the great mystery. I sense that she went “gently into the night.” I remain grateful for her kind and loving ways. Just wanted to share . . .

—Karen Redding, Laguna Beach, CA



LAISPS members are very saddened by the loss of one of our few remaining founders. Jean was a gentle giant in terms of her fine mind, sense of fairness, and compassion for all. She taught, supervised, and analyzed many of us. She leaves a rich and meaningful legacy to LAISPS and to psychoanalysis.

—Lynn Goren

Karen, Thank you for your beautiful and heartfelt announcement. You really captured her essence.

—John Chiaramonte

I've known Jean for my entire career. Having just returned from IFPE conference on Transience and Permanence, I am confronted again by the former with Jean's passing. The community won't seem the same without her.

—Veronica D. Abney, PhD

What a great picture of her, Karen! Really captures her vivacity. I was in a reading group with her for a few years. She wanted to read novels by African American women and that's what we did. She was also my teacher at UCLA. How much she influenced the development of our field. She was a great leader.

—Cydny Rothe

Karen, Thank you for sharing this. Jean is someone who touched all who met her. How fortunate for all of us to have her prodigious legacy.

—Robin Young, PhD, New York, NY

I met Jean Sanville once in the early 1980s when she and her partner and coauthor (*Illusions in Loving*, 1978), Joel Shor, who analyzed my husband, Murray Kagel, and became his friend, visited New York. She was intelligent, charming and will continue to be a valued role model as a woman, social worker, psychoanalyst, scholar and teacher.

—Connie Moss Kagel

Karen—what a lovely tribute to one of our special members and models! Thanks so much for sharing this in just the way you have here!

—Christine Erskine
(formerly DC, now in Boone, NC)

Thank you, Karen. Tiny as she was in her body, Jean Sanville was a giant in clinical social work and the psychoanalytic community. Among her many accomplishments and contributions, she helped found both the Los Angeles Institute and Society for Psychoanalytic Studies and the California Institute for Clinical Social Work, in the mid-1970s. CICSW was, and is, an innovative doctoral program in northern and southern California. In recognition of Jean, its founding dean, the institute changed its name in 2005 to the Sanville Institute. Jean's comments on that occasion are here—sanville.edu/about/remarks-from-jean-sanville/—and they capture her voice so beautifully. We will miss this sparkling intellect and remarkable woman.

—Whitney van Nouhuys, PhD
Academic Dean, The Sanville Institute
Berkeley, CA

Dear Karen, Thank you for sharing the news of Jean's death. Sad it is to hear that Jean, whom I too found sound generous and encouraging in my own professional career, has died. She was a great inspiration to all of us who believe that social work psychoanalysis has much to offer. Her work will continue to impress generations of social workers to come. I'm glad to hear the end was peaceful.

—Cathy Siebold DSW, New York, NY

Thank you so much for informing us about Jean's death. As a person, a clinician and a scholar, she was a treasure to the profession and to many of us personally.

—Jeff Applegate

Jean Sanville was a generative, kind, gracious woman who greatly touched me. She was a friend and colleague. When she came to our AAPCSW conferences, she felt she was coming home. I will miss her. I wrote the following in tribute to her at a conference long ago:

"We pay tribute to Jean Sanville, recognizing the work of an outstanding woman in the field of psychoanalysis and social work. Jean has always worked hard and supported the NMCOP. I served on the original study group with Jean for many years. She was involved in all our conferences and I served on a number of panels with her, so I saw firsthand just how much she brings to her work. Jean's contribution to psychoanalysis and social work has opened new vistas in the landscape of our dual disciplines. Much like Freud, Jean goes beyond the psychoanalytic realm, into the culture at large. Reading her work, one is reminded of those elite renaissance women who were able to grasp and integrate diverse fields of knowledge within a coherent, elegant, and sophisticated narrative and art, all which stimulates our thinking and awakens our senses. It is a pleasure and an honor, personally and professionally, to congratulate Jean.

With deep gratitude and love,
Judy Ann Kaplan, past president, NMCOP,
New York, NY

I, too, have really fond memories of Jean. Each year, she hosted local Smith SW alums and MSW students who were doing their field placements in Los Angeles. She loved holding gatherings in her beautiful house. She would tell stories about her latest research and urge us to keep after Smith to make sure they retained their psychodynamic focus. She took an interest in each and every student. She was a feisty and inspirational presence and a "grande dame" of social work in LA.

—Lynn Rosenfield

While I did not study with Jean her writings were and are very special, in that she demonstrated intellectual humility and expressed an essential humanity, whether talking clinically, about theory or in learning psychotherapy. We live at a time of reductionism in all facets of mental health funding and in clinical training. Political-economic greed and basic assumptive fanaticism neglects the "person" in favor of part objects or "behavioral" health (whatever that means). The loss of Jean Sanville feels especially tragic at this critical moment for psychoanalysis.

Best Wishes, Carl Bagnini

At this sad time, I am reminded, like many, of my contacts with Jean over the years and the interest she took in the legislative work that I have been doing over the past fifteen years. She and Ellen Ruderman arranged for me to give a talk at her wonderful home early in my legislative career. Jean and Ellen's support as well as the interest of others who attended was an inspiration for me to continue to develop this side of my professional work. Jean's interests were deep and wide and gave all of us permission to make connections that might not be obvious but expanded our thinking and the scope of our wonderful profession. I was also moved by Karen Redding's description of her time with Jean during her last days and very much appreciated her sharing that with us.

Best regards, Laura W. Groshong, LICSW

The following was posted on the APsaA listserv:

Jean Sanville 1918–2013

The fields of psychoanalysis and social work lost a great leader, pioneer, innovator, clinician, and theoretician this past Monday. Jean Sanville, PhD, died peacefully at her home in Los Angeles at the age of ninety-four. Jean's contributions to our fields were enormous. She helped found both the Los Angeles Institute and Society for Psychoanalytic Studies, and the Institute for Clinical Social Work in California, a doctoral program in clinical social work. That institute was renamed the Sanville Institute for Clinical Social Work in her honor in 2005. She published many papers, and at least five books on psychoanalytic treatment, including *The Playground of Psychoanalytic Therapy*; *Fostering Healing and Growth: A Psychoanalytic Social Work Approach* (with Joyce Edward); *Therapies with Women in Transition* (with Ellen Ruderman). I had met and knew Jean over the years. I remember this slight, tiny woman, who was anything but slight and tiny in her convictions about psychoanalytic ideas, treatment, organizations, and our two fields. Whenever clinical social workers were having a conference during the '70s, '80s, '90s, and until recently, Jean's name always came up as a potential

speaker. Never would one walk away from her presentation without feeling the impact of her ideas and words. The last time I saw her was during a Presidential Symposium on Social Work and Psychoanalysis that had been organized by Dick Fox when he was APsaA president years ago. Jean represented so much of the history, good and bad, between APsaA and other psychoanalytic organizations. Her comments during that symposium on various papers presented were invaluable. She will be missed in our field. I have pasted below some of her remarks from the Sanville Institute for Clinical Social Work website that I think capture something of who she was. I especially like the last line. She will be sadly missed.

From Jean Sanville (2005): "Where to begin to tell you what it means to me to have the California Institute for Clinical Social Work renamed THE SANVILLE INSTITUTE? And that this change of name is happening because the Institute no longer limits its doctoral program to clinical social workers but extends its educational offerings to those holding master's degrees in a closely related profession marriage and family therapy professionals who work in domains almost indistinguishable from those of social work. So, there would seem to be every reason to assume some basic similarities in what we do, although, for historical reasons, there may have existed some differences in how we think. Historically, we social workers may have drawn much more heavily upon psychoanalytic theory. I am sad that in today's world there would seem to be few schools of social work still embracing the concepts of Freud and his creative followers. I think, or hope, that my own alma mater, Smith College School of Social Work is an exception. We might predict that in California both of these helping professions could be enriched by their 'intermarriage.'" (sanville.edu/about/remarks-from-jean-sanville/)

"Psychoanalysis: Now More Than Ever"

—Mark D. Smaller, PhD

President-elect, American Psychoanalytic Association

With Jean's passing it seems like some of the sparkle has gone out of the world. Along with her loving ways, her beautiful mind and person, her delightful sense of humor, her interest in all things both large and small, her fine creative and intellectual capabilities, and her contributions to psychoanalysis and to the general good, Jean made the world seem a bit brighter. She certainly brightened my life, and I am so grateful for our many years of friendship and for all that we shared. The good times were enhanced by her presence and the difficult ones easier to bear with her support.

—Joyce Edward

Dear Joyce, This is a very touching tribute to a very special woman. After reading the testimonials, I realized I missed out on knowing a wonderful and gifted person. The memory I have was walking together and talking casually on our way to the Saturday night gala in downtown Manhattan at the 2004 conference. She was a bit frail, and I was impressed that she was strong in spirit. She really made an impact. We do have legendary pioneering figures among us.

—Penny Rosen

I was so so very sad to learn of Jean's final days and death from her niece. We all mourn her loss, our beloved and highly esteemed founder and first dean of the Sanville Institute, formerly the California Institute for Clinical Social Work, as well as her vast overall contributions to our field. Jean was a true scholar and an original thinker, who published many papers and important books. The educational principles she espoused, indeed her vision for advanced clinical education, are followed today, as they were set in motion by Jean. Jean's values and ethos inform us and guide us. She and I had a very special relationship from the time we worked together during the original process of forming the Sanville Institute. Our collegial and personal bonds were deep and we remained in close contact throughout all these years. I treasured Jean and feel very fortunate to have known her and worked with her for so many years. Nothing will be the same without her!

—Samoan Barish

Believing Mirrors is a term I just learned from Julia Cameron, in a workshop November 1, 2013, titled "The Right to Write" (she has also written a book by that name). She believes we are all writers. Jean Sanville, whom I met a few times but never knew well, through the comments on AAPCSW has provided me a model of courage and commitment to helping people to good health. She was a Believing Mirror for psychoanalysis. I have appreciated the comments; her ideas and legacy live on. Thanks.

—Patsy Turrini

With the death of Jean Sanville on November 4, 2013, the social work and psychoanalytic communities have lost an admired and beloved friend, colleague, mentor, teacher, analyst and collaborator. Jean had a long and exceptionally distinguished career. She was on the faculty of the School of Social Welfare at UCLA and Smith College School for Social Work in Northampton, Massachusetts for many years. She was a cofounder and first dean of the California Institute for Clinical Social Work (CICSW),

a doctoral program in clinical social work, later renamed in her honor, the Sanville Institute for Clinical Social Work. Jean was a founding member, the first social worker in the group, and a training and supervising analyst at the Los Angeles Institute and Society for Psychoanalytic Studies (LAISPS), where she held the posts of President and Chair of the Committee of Training Analysts in addition to many other positions. The Jean Sanville Award has been a signpost of writing scholarship for LAISPS members for a number of years. Jean was also a prominent figure in the antitrust lawsuit in 1985 against the American Psychoanalytic Association and the International Psychoanalytical Association for restraint of trade in the exclusion of non-medical mental health professionals from psychoanalytic training in the United States. The settlement in 1987 represented a ground-breaking shift in the culture of psychoanalysis in this country, and paved the way for the acceptance of LAISPS into membership in the IPA in 1995, in which Jean was a central moving force. Around the same time, Jean was one among several analysts, along with LAISPS, from the Institute for Psychoanalytic Training and Research (IPTAR), the New York Freudian Society (NYFS) and the Psychoanalytic Center for Psychoanalysis (PCC) who began to talk informally about creating a national organization to represent them in relationship to the IPA, independent of the APsA. As a result, she was among the founders of the coalition of Independent Psychoanalytic Societies of the U.S. (IPS), now known as the Confederation of Independent Psychoanalytic Societies of the US (CIPS). Along with Norbert Freedman from IPTAR in New York, Jean was cochair of the IPS for the first three years of its existence, and remained a member of the Board of Directors for nearly ten years. In 2009 Jean was recognized for being one of the pioneers of CIPS and appointed Life Member. Jean's professional contributions were endless. Her CV of published papers in the social work and psychoanalytic literature was several pages long. She was a sought-after teacher and taught several generations of social workers and psychoanalysts, and her clinical work spanned over five decades with patients of all ages. She was the coauthor, with Joel Shor, of *Illusion in Loving: A Psychoanalytic Approach to the Evolution of Intimacy and Autonomy* (1978), and coeditor, with Joyce Edward, of *Fostering Healing and Growth: A Psychoanalytic Social Work Approach* (1996). Her book *The Playground of Psychoanalytic Therapy* (1991) was an original and creative synthesis of contemporary object relations theory and infant observation research, including the significance of play and playfulness in the clinical setting. It represented the culmination of decades of her intellectual and emotional devotion to equality, diversity, understanding and independent thinking. Personally,

Jean was steadfast in her relationships to others, a charming wit, and ever-encouraging to those who aspired to more accomplishment in writing, teaching and leadership responsibilities. She will be remembered for her keen intellect and her great professional achievements, and especially for her grace and generosity in welcoming LAISPS members and their guests, as well as other groups, for numerous functions in her home. Jean's home was a meeting place for intellectual dialogues, cultural and political meetings, random social gatherings, celebrations and more. Jean will be greatly missed and deeply mourned.

—Terrence McBride, PsyD, FIPA
LAISPS, Los Angeles

I am deeply saddened by the loss of Jean Sanville, my esteemed colleague and friend. Jean was “a woman for all seasons” and one of the undisputed leaders of our profession. I am fortunate in having had the opportunity to personally know more about her creative side and the keenness of her mind while we were coediting our book *Therapies with Women in Transition*. For almost a year, we met at her home every other Thursday evening, enjoyed the dinner she cooked, and evaluated the clinical articles intended for the book. Then the fun began. Jean was so open in sharing her worldviews, her philosophy, and what she foresaw for our field. We touched on creative approaches to relationalizing psychoanalysis and psychotherapy, the political and economic state of the world (which depressed both of us), the need for health care, new ideas for educational programs that would benefit clinicians, the future Columbinas if we didn't get rid of guns, and, of great interest to the two of us, the current status of women and questions about whether the feminist revolution had yet reached its full potential. In fact, as editor of the *Clinical Social Work Journal*, Jean was instrumental in publishing one of my first articles on women. We resolved to campaign for Hillary when the time came, and I agreed to make the banners. Needless to say, I was in awe of Jean's creative ideas and her extensive knowledge and involvement in so many causes. As I look back at my own satisfying career, those meetings with Jean remain as one of my most valued professional and personal experiences. Jean contributed to psychoanalysis and clinical social work in so many ways. She was in the vanguard of helping clinical social work to achieve the recognition it deserved within the psychoanalytic realm. She was analyst, teacher, mentor and guide for so many as they evolved in our profession. Many of the AAPCSW Membership were encouraged by her to write innovative papers—many of which she had published. As AAPCSW chair of the National Study Group, Jean was one of my

models for how the group could elicit new ideas and meaningful contributions to the field. The AAPCSW Southern California is also so grateful to Jean for her continuing generosity in opening her home for so many of our chapter's meetings and presentations. Indeed, we will never forget that she was the first to embrace the idea of starting a chapter in Los Angeles and tirelessly advocated for what was then known as the Committee on Psychoanalysis. To Alice and Jeannie, and to her many close and dear friends, I and the members of the board of the AAPCSW Southern California Area Chapter join with you in your sadness, but know that she will always live in our memories.

—Ellen Ruderman

The following was originally written for the LA Times.

Jean Sanville: A Life in Dialogue

Jean Sanville, beloved clinical social worker and psychoanalyst, died peacefully in the early morning of November 4 at her home in the Brentwood Hills of Los Angeles. She was ninety-four.

Jean was a brilliant teacher, a devoted and wise clinician and healer, a prolific and gifted writer, and a generous mentor to hundreds of therapists in the U.S. and around the world.

For Jean, psychoanalysis did not stop at the walls of the consulting room. She knew how culture impacted and was impacted by personal development. She loved people of diverse cultures as she loved and embraced difference itself. Her community was the whole world. She served as consultant in Peru, Dominican Republic, India, Sri Lanka, Mexico, Indonesia, Singapore, and Japan. President Forbes Burnham of Guyana invited Jean to present a series of talks on national television to build mutual understanding and peace and stem the tide of internecine warfare that was ravaging the country.

Her capacity for empathy was boundless. With a generosity of spirit, warmth, and ability to see and respond to the goodness in people, everyone whom Jean touched and who touched her became kindred; "hers."

Her favorite saying was "Life begins in dialogue, and psychopathology can be seen as a derailment of dialogue." This dialogue was a living emotional reality she embodied daily, not only with patients, but also with students, colleagues, friends, fellow writers, and others.

The power of reparative intent was another of her creative lodestars. Genuine dialogue was therapeutic and could help "re-rail" earlier derailments. The ability to play, with ideas and with one another, figured prominently in her writing and teaching, and permeated her relationships.

Jean was born on December 6, 1918, in Tionesta, in rural western Pennsylvania. *Tionesta* is a Native American

word that means "waters meet." As in her writing and in her mind, where ideas comingled freely—psychoanalytic, artistic, sociocultural, political—so in Jean's house too did countless groups, colleagues and friends find a welcoming space where they came regularly to "multilogue," where the play of ideas could be engaged freely and take root.

Her mother, Ruth Board, was a school principal, and her father Forest Board, a physician. Jean would joyfully accompany her father on home visits at night in horse and buggy. She knew illness and loss early on and her efforts to understand led to disappointment with organized religion, though she conveyed a remarkably profound spirituality. She found Karl Menninger's *The Human Mind* on her father's bookshelf and reading it catalyzed her interest in pursuing a "new profession," clinical social work.

Jean graduated from University of Colorado, Boulder, in 1940, and received her MSW from Smith College School for Social Work in 1949, where she remained on the faculty. Her refusal to sign the required "loyalty" oath, like her friend and colleague Erik Erikson, cost her position as an associate professor at the UCLA School of Social Welfare, but she accepted Erikson's invitation to come to Harvard. Later, as executive secretary of the Hacker Foundation for Psychiatric Research and Education, she would study the "intermarriage" of creative expression and personality.

Jean was fierce in engaging the struggle for social workers and all non-medical therapists to have the right to full psychoanalytic training. A trailblazing pioneer and organizational midwife, she was cofounder of the California Society for Clinical Social Work, founding dean of the California Institute for Clinical Social Work (CICSW), and cofounder of the Los Angeles Institute and Society for Psychoanalytic Studies (LAISPS). Such was her scholarship and writing acumen that LAISPS named its most important writing award the Jean Sanville Award, for original scholarship in psychoanalytic writing. In 2005 CICSW was renamed in her honor, the Jean Sanville Institute.

Jean is survived by her sister Alice Board Reynolds, brother-in-law Dr. Dean Reynolds, niece Julie Bovard Peterson, nephew Dean Lee Reynolds, and her step-children Bob Shor and Heidi Oleszcuk. She was preceded in death by her son Peter Livermore and her step-daughter Sabrina Sanville.

"All the light," wrote the Spanish poet Vicente Aleixandre, "suddenly gathers, suddenly, in a whole lifetime . . . that unrolls and unfolds, like a huge wave, like a huge light that lets us look on each other at last." Jean Sanville and her life were just such a light.

—Joe Bobrow, PhD

Board Certification, continued from page 3

clinical continuing education, of which 50% can be identified as psychoanalytically oriented

Specialty Practice Experience:

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

Evaluation of Practice:

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

Annual Recertification Requirements to Maintain Credential:

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

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8:45–9:30am Registration and Breakfast

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PROGRAM

Michael H. Stone Personality Disorders: The Treatable and the Untreatable

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In the Next Issue:

Donna Tarver, MSSW, reviews *Clinical Implications of the Psychoanalyst's Life Experience: When the Personal Becomes Professional* (Routledge, 2014), edited by **Steven Kuchuch**, LCSW.

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Area Representatives' Corner

On "From Ruin to Rebirth: Treating Addiction and Trauma Relationally"—A Report from North Carolina

Marcella Wagner, Smith College
Graduate Social Work Intern

Submitted by
William S. Meyer, MSW, BCD, Area Chair



On September 21, 2013, the North Carolina AAPCSW Chapter sponsored a lecture titled "From Ruin to Rebirth: Treating Addiction and Trauma Relationally." Natalie Peacock-Corrall, a clinical social worker and graduate and faculty of the Psychoanalytic Education Center of the Carolinas, offered a talk about the transformative power of the psychotherapeutic relationship in treating clients with trauma and addiction histories. During the talk, Peacock-Corrall interwove rich creative elements such as art, music, and play into her case presentation.

Based on leading addiction research, Peacock-Corrall suggested that addiction is primarily an attachment disorder. Lacking early solid connective relationships with caregivers, the person who abuses substances never develops a sense of internal solidity nor the capacity to self-soothe. Such individuals attach to "external bad objects" such as drugs and alcohol to "provide from what is out there what is not in here."

Because addiction is an attachment disorder, it can only be healed in relationship to others. Peacock-Corrall offered that "trauma changes the brain, addiction changes the brain, and good psychotherapy also changes the brain." The client internalizes the qualities of the therapist, a good-enough object, and is able to let go of the external bad objects.

Following this overview of addiction, Peacock-Corrall took us into the riveting world of her twelve-year treatment with "Mr. B." Mr. B is a middle-aged married man and father with a history of trauma in childhood and cannabis addiction in adulthood. Peacock-Corrall described his childhood under the punitive rule of his remote and rigid father. Mr. B was the primary caregiver and only emotional support for his bedridden mother. In response to this chronic trauma, Mr. B self-medicated with marijuana, a drug that soothed and numbed his intense rage.

Throughout her case presentation, Peacock-Corrall expertly interlaced multiple psychoanalytic concepts, such as transference, countertransference, enactment, and the holding container. In early treatment, Mr. B had an intensely negative transference toward Peacock-Corrall, seeing her as his "rejecting, judgmental, and demanding father." In response, Peacock-Corrall described feeling "strangled, drugged, sedated, and deadened" in Mr. B's presence due to his rage, hopelessness, and narcissistic tendencies.

Peacock-Corrall's two pregnancies provided a natural experiment to evaluate the progress of their work together. During her first pregnancy, she and Mr. B became locked in a hostile enactment. He experienced her as the mother who abandoned him at a time of great need, and he would often refuse to engage with her during therapy. In her second pregnancy, their therapeutic alliance was stronger. Peacock-Corrall offered empathy and support and, as she survived his anger, he learned that his anger could not destroy her. They grew from the rupture, reflection, and repair that characterize relational psychoanalytic work.

In recent years, Mr. B has mourned the loss of his mother and father while strengthening his relationships with his children, sister, and nephews. Mr. B now playfully claims his spot in therapy, telling Peacock-Corrall that in addition to her own two children, she has a "fifty-year-old child too."

As Peacock-Corrall described Mr. B's substantial progress, her voice and demeanor softened, and she came alive with creativity and play. She revealed how she integrated tools of the unconscious such as metaphor, daydreams and dreams, and music into their work together. Feeling free to now play, Mr. B recently brought his love of music into his treatment. Peacock-Corrall ended by playing some of Mr. B's favorite songs and playfully interpreting the lyrics as an expression of his unconscious.

As a first-year MSW student, I was drawn to Peacock-Corrall's firm foundation in psychoanalysis combined with her spirited use of creativity and play in treatment. We witnessed the evolution of both Peacock-Corrall as a developing therapist under supervision and the growth of psychoanalysis in the Triangle area of North Carolina.

Continued on page 22



Member News

Carl Bagnini, LCSW, BCD, announces the paperback edition of his book *Keeping Couples in Treatment: Working from Surface to Depth* (Jason Aronson). Carl is teaching Skype seminars on couple treatment with study groups from South Africa and the Psychoanalytic Psychotherapy Couple Group in the Berkeley Area in California.

Jerry Brandell, PhD, has edited a sixteen-chapter book, to which he is also a contributing author. Titled *Essentials of Clinical Social Work*, the work will be published by Sage (Los Angeles) in early 2014.

Sharon Farber, PhD, is running a writing group for clinicians who want to write in a lively, engaging way about clinical material and other aspects of their work and lives—a journal article, blog, book, magazine, newspaper article, newsletter. Because some members write about deeply personal matters and read their work at the meeting, to feel comfortable doing this, continuity of attendance is required. This is not a drop-in group; if you join, you will be expected to attend regularly. There is also the possibility of phone participation for those at a distance.

Sharon has experience with different kinds of writing and the publishing industry, having published two books, *When the Body Is the Target: Self-Harm, Pain, and Traumatic Attachments* and *Hungry for Ecstasy: Trauma, the Brain, and the Influence of the Sixties*, as well several journal articles and a blog for Psychology Today called “The Mind-Body Connection” (www.psychologytoday.com).

com/blog/the-mind-body-connection). For further information Sharon can be reached at Sharonkfarber@gmail.com or 914.478.1924.

Laura Groshong, LICSW, Clinical Social Work Association (director, government relations), gave a six-hour ethics talk for the Greater Washington Society for Clinical Social Work on March 1, 2014, in Bethesda, Washington, titled “The End of the World as We Know It and We Feel Fine: Changes Coming to LCSW Practice,” summarizing changes to HIPAA breaches and business associate agreements; electronic record keeping; Medicare and PQRS; and health care delivery systems, that is, health homes and ACOs. She has given seven webinars on these topics in the past year and three presentations on the use of the technology in clinical social work, “I Googled You: Staying Clinically Centered in an Online World.” She is a coeditor of “Has the Train Left the Station? Use of Cyber Technology in Clinical Social Work Practice and Education,” a special edition of the *Clinical Social Work Journal* to be published later this year.

As a founding member of the THRIVE Infant Family Program, **Ethan Grumbach**, PhD, FIPA, shares the creation of a new app for iPads and iPhones. It is specifically created for parents who have a child in a neonatal intensive care unit. Although the NICU is staffed with highly specialized, exceptional clinicians, babies and parents often feel pervasively unsafe, unseen, unknown. Parents, at a deep emotional level, are as vulnerable as their infants. Post traumatic stress disorder is now aptly applied to the NICU experience.

Sensitive to this emotional aspect of the NICU experience, THRIVE spent hundreds of hours listening to NICU parents’ often intractable, mournful narratives and felt privileged to intervene, to be instrumental in mitigating their suffering. Recognizing the enormity of this issue, the THRIVE Let’s Talk NICU App was conceived to address the profound emotional wounds of NICU parents and their babies.

The app is now commercially available at the App Store and can be located by searching “NICU THRIVE” or going to itunes.apple.com/us/app/nicu-thrive/. The format is designed to simulate a NICU parent group and provides narratives in the first person by mothers, fathers, siblings, and grandparents. Utilizing psychoanalytic theories, the group leader begins to help parents name their suffering, offers a degree of containment for their pain, and, as important, illuminates the dictum that by their presence

What’s Your News?

Graduations, presentations, publications, awards, appointments, exhibits, and so on are all items the AAPCSW membership would like to acknowledge in the *Member News* column. Feel free to include a photo.

New to AAPCSW?

We invite you to introduce yourself in our *New Members* section.

Ashley Warner, MSW, BCD, Assistant Newsletter Editor
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and their words, parents can emotionally nourish their babies, despite significant obstacles. Through the use of artwork and music, relaxation techniques that rest the mind, and choreographed bodily movements that relax the body, the app provides listeners with a means of acknowledging the depth and complexity of their tragedy and their profound feelings of loss while supporting their dreams for their babies' survival and a healthy future. Although an app can never replace an intimate therapeutic relationship, it is a significant offering that reflects and legitimizes the emotional devastation resulting from the NICU experience.

An NPAP program curated by **Richard Karpe**, LCSW, BCD-P, PC, Program Committee member, is scheduled for Saturday, May 3, 2014, 10:30am–1:30pm, at the NPAP Meeting Room. It takes Sigmund Freud's essay "The Uncanny" as well as E. T. Hoffman's stories "The Sandman" and "The Devil's Elixir" as a point of departure. Invited discussants will highlight the context and the rich meanings of these texts and look at them as lasting inspirations for contemporary psychoanalytic work—each from a different theoretical perspective. Moderated by Richard, the panel includes NPAP members Dr. Jane Kupersmidt (reflection on the texts and their context); Dr. Carl Jacobs (ego psychology); Arthur Pomponio, PhD, LP (relational); and a special guest, Dr. Alain Vanier (Lacanian orientation), a psychoanalyst practicing in Paris, a member and former president of Espace Analytique, distinguished professor of psychopathology and psychoanalysis at the University of Paris Diderot–Paris 7, and a supervisor at Après Coup Psychoanalytic Association.

Clinical Implications of the Psychoanalyst's Life Experience: When the Personal Becomes Professional (Routledge), edited by **Steven Kuchuch**, LCSW, has been released and will be



reviewed in the next edition of the *Newsletter*. Steven is a faculty member and a supervisor and is on the board of directors at the National Institute for the Psychotherapies. He is a practicing psychoanalyst in Manhattan. He is also coeditor of the journal *Psychoanalytic Perspectives*

and associate editor of the Relational Perspectives Book Series published by Routledge.

Jeff Savlov, LCSW, was honored to be a judge at the University of Vermont Global Family Enterprise Case Competition in Burlington, Vermont. Jeff combines his training as a psychoanalyst and family therapist with his experience in his family's



commercial printing business and corporate work in sales and marketing as he consults with enterprising families in their business endeavors. Much of the work is interdisciplinary, working with other professionals and their family clients (attorneys, accountants, wealth managers, etc.). The focus of this consulting work is on the interplay of family dynamics with ownership and leadership of a family's shared assets. This competition saw twenty teams from ten countries and judges from twelve countries.

Naomi J. Schlesinger, LCSW, BCD-P, announces her essay "Loss to Legacy: The Work of Mourning Early Parental Death" to be published this year in *Psychoanalytic Social Work*. The paper deals with helping to retrieve an inner sense of the deceased parent.

Esther Urdang, PhD, LICSW, notes that her new book, *Parallels between Writing Biographies and Clinical Practice: Impact, Influence, Value*, is to be published this spring by NASW Press. She is currently writing the third edition of her textbook *Human Behavior in the Social Environment: Interweaving the Inner and Outer Worlds*, to be published by Routledge Press. Esther had been a faculty member at Boston College Graduate School of Social Work for twenty-seven years. In her teaching she emphasized clinical social work's need for a strong psychodynamic base within the biopsychosocial perspective. These two books reflect this orientation.

Ashley Warner, LCSW, BCD-P, announces the publication her first book, *The Year After: A Memoir*, about the emotional healing journey following trauma. Kirkus Reviews describes the writing as "nearly poetic moments of prose" and calls it "honest, moving, and inspirational." It is available via online booksellers, including Amazon.com.

Her supervision with local therapist Judy Byck, LCSW, was invaluable, and she recalled, "Judy stuck with me as a supervisor and I stuck with Mr. B." Peacock-Corral also paid her respects to such stalwarts of the North Carolina psychoanalytic community as Ernest Braasch, Rebecca Goz, Harold Kudler, and William Meyer. Leaving the presentation, I carried with me Peacock-Corral's humility in recognizing the influence of her teachers alongside her gift of imbuing her work with a creative touch that makes it her own. ■

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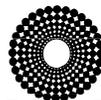
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