



Alexander Grinstein, M.D.

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Member Profile

Few analysts have been as active as long or contributed as much to psychoanalysis in Michigan as Dr. Alexander Grinstein. He has touched the lives of almost every practicing analyst in the MPI-MPS as teacher, supervisor, analyst, mentor or friend. Although today the interested student of psychoanalysis and psychoanalytic history is more likely to find him between appointments in his book-lined office than chairing a committee meeting, he is still a vital presence in the community after more than 60 years of service.

Born in Russia, Dr. Grinstein arrived in the U.S. at the age of 5. He earned his undergraduate degree at the University of Buffalo, where he majored in psychology. There he first encountered the works of Freud. He was fascinated, he said, by the idea of the unconscious, a concept quite unlike anything he'd encountered previously, and his fascination continued to grow as he learned more. Although he had first planned to become a psychologist, upon graduation in 1938 he opted for the more practical profession of medicine, following in the footsteps of his parents, who were both physicians. He enrolled at the University of Buffalo Medical School, which was at the time one of only two medical schools in the country to offer a course in psychiatry. In 1942, when he arrived in Michigan for his residency in psychiatry at the now-defunct Eloise Hospital, he promptly inquired about psychoanalytic training opportunities in the Detroit area and was referred to Dr. Richard Sterba, a former training analyst from Vienna who had recently relocated here. Dr. Grinstein began his psychoanalytic training early in his residency, completed the training in 1949, and in the following year became the youngest member of the American Psychoanalytic Association.

In 1953, the state intervened to close the Detroit-Cleveland Psychoanalytic Society and Institute because it was offering training to non-medical candidates; it subsequently lost its APsaA accreditation. When the new Michigan Psychoanalytic Institute was formed a few years later, Dr. Grinstein was appointed one of its first Training Analysts.

A prolific writer, Dr. Grinstein has many papers and eight books to his credit, the first of which, "Understanding Your Family" (1957), written collaboratively with Editha Sterba, was intended for a lay audience. Soon thereafter, he embarked upon a series of works on Freud's life. The first of these,

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2005 MPF BENEFIT

Please mark your calendars for Friday, November 11, 2005. The annual Michigan Psychoanalytic Foundation benefit will be held at the Somerset Inn in Troy and will feature a wine reception, lively entertainment, and a fabulous dessert buffet.

The headliner for the evening is Wayne Cotter, a well-known comedian from Los Angeles. More details will be forthcoming in the fall newsletter.

From Outgoing MPI President Nancy Kulish, Ph.D.



Some years ago I was privileged to attend a conference at an Upstate New York retreat, which was attended by prominent psychoanalytic thinkers from around the world. There were self-psychologists, Freudians, Lacanians, etc. It provided an opportunity for these people to gather together to compare and contrast their differing theoretical stances and

approaches to doing psychoanalytic treatment. Somewhat intimidated, I mostly observed and listened. I was struck by what seemed to generate the most intense arguments among participants. Heated debate broke out when analysts discussed clinical technique but not when they spoke about what seemed like vast differences in theoretical perspectives. Even when individuals professed to the same theoretical framework, they argued about technique: around small questions of what to say and how and when to say it in the clinical moment. In contrast, psychoanalysts sat quietly with smiling equanimity when opposing psychoanalytic theories were aired.

I wondered, what was this seeming paradox--theory versus technique--about? My hunch is that our theories about the mind feel farther removed from where it seems to count. At the level of technique, what we actually say and do and feel, we meet our patients in real time.

In looking back over my three years as President of the Michigan Psychoanalytic Institute, I have observed a similar phenomenon. Here, we are not even divided by vast differences in theory or outlook. Yet, it is on the "how to"--the details and the techniques to accomplish our goals--where sparks and friction occur. We worry and fret about what kind of benefit we should hold to raise money; we become impassioned about the question of categories of membership for our faculty; we argue fervently on what exactly we should require of our students in the way of writing up clinical cases. On the other hand, I have also been struck by the basic underlying agreement in our shared goals and values. We share a deep belief and validated experience in the power and benefit of psychoanalysis. We are united in our institutional goals to provide the highest quality psychoanalytic training and services; we do not always agree on how to reach them.

There are moments when these underlying commonalities became more visible: in a recent set of retreats on pedagogy and curriculum, the Educational Committee was of one mind. Unanimously, they felt that the goal of the curriculum, and the method in which it is to be taught,

should emphasize process rather than content. That is, we should endeavor to impart what is known as the "analytic attitude" (the search for meaning and the tolerance for uncertainty), and to stress critical thinking and inference making. Another example comes to mind: in a recent Finance Committee meeting, after several wrenching months of arguing about how we might keep to a balanced budget, or what we might need to cut in view of worries about the future economy, we were able to agree on a set of underlying principles to guide us on how to order financial priorities. I look back to the site visit from the American Psychoanalytic Association, which came in the first year of my term. After months of the typical paranoia that accompanies such site visits, quibbling about the unbelievably complicated schedule which managed to inconvenience everyone, and a disastrous start with one of Michigan's worst ice storms on the visitors' first day, we ended up receiving constructive recommendations and an outstanding evaluation.

I think that as we work through our inevitable differences, we will be able to face the huge challenges ahead: juggling a commitment to excellence in training and

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FREE ASSOCIATIONS

Newsletter of the Michigan Psychoanalytic Institute and Society

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GRINSTEIN from cover

"On Freud's Dreams," (1968), takes as its subject the eighteen dreams of Freud's own which he had used as examples in his "Interpretation of Dreams." Dr. Grinstein ferreted out additional "associations" from a variety of source materials (biographical information about people appearing in the dream, newspaper articles and other informative contextual materials), which enhance the readings of Freud's own texts. His second contribution to Freud scholarship followed in 1990 with an examination of letters from Fliess to Freud which, as with the preceding volume, treated references in the letters as associative material. The final volume of his trilogy, "Conrad Ferdinand Meyer and Freud: The Beginnings of Applied Psychoanalysis" (1992), examined Freud's waxing and waning interest in the Swiss writer and demonstrated connections between Meyer's life history and his literary works. This sowed the seeds for the next book, a study in applied analysis, the area that Dr. Grinstein identifies as his specialty.

"The Remarkable Beatrix Potter" (1995) received good reviews, sold well and won a national award. It is an engaging peek into the writer's secret life through an analysis of her conflicts, as spelled out in her letters and diaries and played out in her work. For the serious student of psychoanalysis, works such as this are as close to clinical material as can be obtained outside of the consulting room and make for fascinating reading. A psychoanalytically-informed biography of 19th century novelist Wilkie Collins came out in 2003, and Dr. Grinstein's latest book, a study of the American poet Edwin Arlington Robinson, is currently in the hands of the publisher.

Perhaps Dr. Grinstein's best-known contribution is "The Index of Psychoanalytic Writings," a 14-volume work of bibliographic scholarship. This invaluable resource for students and researchers, developed in pieces over almost 20 years, secured Dr. Grinstein's reputation for conscientious, thorough scholarship.

The analysts who interviewed Dr. Grinstein for this piece were not part of the exciting new beginnings of psychoanalysis but rather belong to a generation accustomed to hearing rumors that psychoanalysis is dead. They couldn't resist asking for his speculations about what the future of psychoanalysis would hold.

Dr. Grinstein's response was philosophical. While aware of the social pressures for shorter, less intensive treatments, he affirms the value of the psychoanalytic approach. "The kind of work that we do is very, very slow, very thorough.... psychoanalysis deals with character improvement, change in personality, which is...very time-consuming. You get results, but they're not so spectacular as the public would like." He pointed out that Freud predicted long ago that there would be a lot of psychoanalysts but not that much psychoanalysis, adding, "There will always be curious, creative people who are interested in their inner workings." That is true and should set to rest our fears that psychoanalysis could die out. ❖

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Miss Cecily Legg Celebrates 90th Birthday !

By Carol Austad, M.D.



Miss Legg celebrated her 90th birthday with friends, former students, and colleagues this month in Ann Arbor. She came to our Ann Arbor community 35 years ago to teach at the University of Michigan in the Child Psychoanalytic Study Program. She has been a member of the Child/Adolescent Faculty at the

Michigan Psychoanalytic Institute since the inception of the Child and Adolescent Program. Trained at Hampstead with Anna Freud, she has been a wonderful teacher to several generations of child analysts here in Michigan. Having "retired" several times, she still is involved in issues pertaining to children. Notably, she still serves up wonderful tea and stories at her home in Glacier Hills. Happy birthday Cecily! ❖

Porcerelli Wins APsA Research Award



John Porcerelli, Ph.D. has received a Career Research Award grant from APsA to study three types of psychotherapy processes within interpersonal psychotherapy for postpartum depression. His collaborators on the study are Scott Stuart, M.D. (University of Iowa Medical School) and Stuart Ablon, Ph.D. (Harvard Medical School).

Dr. Porcerelli's study builds upon two recent studies of psychotherapy process. The first was conducted by Ablon & Jones (1998). They developed ideal prototypes of psychodynamic and cognitive behavioral treatments (CBT) and compared them in successful treatments. Ablon and Jones developed a therapy process instrument--the Psychotherapy Q-Set (PQS)--to assess what goes on in psychotherapy and psychoanalysis between therapist and patient. They applied the PQS to sessions of CBT and psychodynamic therapy. By comparing the actual process of psychotherapy sessions with the CBT and psychodynamic prototypes, they were able to empirically identify how much each treatment used techniques from both schools of therapy. Their findings were quite surprising. They discovered that psychodynamic therapists used both psychodynamic techniques and cognitive behavioral techniques and CBT therapists used a lot of CBT technique and very little psychodynamic technique. However, it was the psychodynamic techniques within both treatments that were associated with positive outcome!

In a second study, Ablon & Jones (2002) used their methodology for developing prototypes from the PQS to test the effects of interpersonal therapy (IPT) and CBT technique on therapy outcome using data (PQS-coded therapy

sessions) from the NIMH Treatment of Depression Collaborative Research Program (TDCRP; Elkin et al., 1989). IPT and CBT were the (manualized) psychotherapy treatment groups within the TDCRP. When the CBT and IPT processes were assessed in each treatment, it was discovered that CBT technique was used a great deal by both CBT and IPT therapists. In addition, CBT technique was strongly associated with positive outcome in both therapies.

The work of Jones & Ablon (1993) and Ablon & Jones (1998, 1999, 2002) has demonstrated the association between prototypes of three therapies (psychodynamic, IPT, and CBT) with therapy outcome. In their 1998 study, Ablon & Jones reported the surprising finding that adherence to the psychodynamic prototype in both psychodynamic and CBT was robustly associated with therapy outcome and that adherence to the CBT prototype was not associated with therapy outcome for either treatment. In the 2002 study, Ablon & Jones reported the surprising finding that IPT and CBT were both strongly associated with the CBT prototype and adherence was strongly associated with therapy outcome. These results set the stage for Porcerelli's study. By using an already completed (and successful) study of IPT treatment for postpartum major depression (conducted by Stuart & O'Hara at U of Iowa), Porcerelli and his collaborators will assess the degree to which therapists in that study used psychodynamic, IPT, and CBT technique and which techniques were associated with positive outcome. ❖

In the Ann Arbor Community: Analysis Beyond the Couch

By Carol Barbour, Ph.D.

Chair, MPI Ann Arbor Committee

We all tend to be more aware of our public analytic events than of the quiet ongoing efforts of many analysts to demonstrate psychoanalytic understanding and values in the community. Recently two of many such dedicated colleagues spoke with me for a look at what some local analysts are doing "beyond the couch."



Carol Austad, M.D.

Carol Austad, M.D., a member of our Child and Adult faculty, is a long-standing volunteer analyst in several venues. She feels a strong professional necessity as a child analyst to try to make a difference in public policy about children's well-being and parenting issues. She has been involved from inception in the development of a flourishing local psychoanalytic nursery school, Allen Creek, under the leadership of Kerry Kelly Novick and Jack Novick, Ph.D. She is also Medical Consultant to the school. Her work there as a family consultant regularly meeting with a nursery school cohort group has been an especially satisfying opportunity to assist families and children at several crucial developmental stages. The toddler's declaration of independence stage and the mutual aggression that goes along with it is a developmental step when many families experience some disequilibrium.

Experience has shown that psycho-analytically-informed assistance in parent-toddler groups is especially cost-effective for helping families navigate this growth successfully.

Dr. Austad also is an active member of the MPS Psychoanalysis in Medicine Committee, chaired by Cassandra Klyman, M.D., which has presented a well-received series of workshops at the Michigan State Medical Society meetings and area hospitals on a variety of topics ranging from "Helping The Difficult Patient," to "Pain," and to "Heartache and Heartbreak," for primary care and cardiology physicians. For many years she has attended UM Pediatric Grand Rounds and consults with pediatricians in the community. She is also a longstanding consultant to Redford High School counselors and makes time as well to respond to frequent invitations to present on analytic topics in various community settings.



Joshua Ehrlich, Ph.D.

Joshua Ehrlich, Ph.D. is a member of our MPI Adult faculty who is co-director, with Mark Ziegler, Ph.D., of the MPI Ann Arbor Fellowship program; co-director of CPPEP, with Jonathan Sugar, M.D.; and an active member of several committees, including the Ann Arbor Committee. He has taken analysis beyond the couch within his private practice in his work as a family facilitator for families engaged in high-conflict divorces. Some families may be referred by their attorneys privately for help in avoiding litigation and arranging custody, while others come by court order for help in making the adjustment from pre- to post-divorce and in implementing the court orders.

Dr. Ehrlich finds an analytic perspective crucial to establish and maintain a neutral, containing space for the emotional storm within the divorcing family's disequilibrium. This safe haven can allow the ex-spouses to work out many issues as they can increasingly tolerate their intense emotions including anger and sadness. Family members are often at their most vulnerable during these difficult times, so he may make himself available as an "auxiliary ego" as needed. Goals of the consultation are to minimize the negative effects of high-conflict divorce on the children involved and to help implement the most suitable arrangements for the child's developmental stage. In many cases, through the parent work, the ex-spouses come to understand their high-conflict divorce as a defense against mourning the family separation, which then enables them to speak with their children and help them grieve as well. Usually the families meet with Dr. Ehrlich in several intensive structured sessions the first few months, then continue to meet every few months or less often over a span of months or years as they progress toward a new equilibrium post-divorce.

Dr. Ehrlich notes the helpfulness of establishing post-divorce co-parenting before the children reach pre-adolescence at age 11 or 12, when their developmental progression in further independence shifts the established

equilibrium further and may stir up conflict between ex-spouses, as well as between parents and children. Dr. Ehrlich finds his consultation work with these families very rewarding, as he can help each family member move forward again in his or her life by mitigating the divorce crisis and difficult transition for all concerned. Dr. Ehrlich writes and presents on these matters for attorneys and judges, in addition to his other analytic interests.

These are two among many other local analysts committed to bringing analytic understanding to various settings. We all appreciate their collective efforts to share their analytic expertise with the community. ❖

U of M Students Support Treatment Clinic

Jim Hansell, a popular psychology faculty member at the University of Michigan and a psychoanalyst, faced a challenge. He was about to teach "Introduction to Psychopathology" to 220 undergraduates, and he was excited about using his new book, *Abnormal Psychology*, as the textbook for the course. He was determined to involve his students in thinking about mental health as a social issue, and, at the same time, committed to removing any appearance of a conflict of interest by requiring the use of his own book.

Dr. Hansell came up with an innovative solution. He decided to donate the royalties from the use of his textbook in the course. Seeking to involve the students in the process, he asked them to choose mental health charities that would receive the royalties. The students responded enthusiastically with various suggestions. They ended up voting as a class to make donations to four organizations, which included the Alzheimer's Association, Red Cross Tsunami-related mental health relief efforts, a greater Detroit child and family support agency, and the MPI Treatment Clinic.

In regard to the Treatment Clinic, the students were enthusiastic about its mission of offering high-quality, intensive treatment at reduced fees. Jim sent the Treatment Clinic a check for \$300 on behalf of the students of Psychology 270. Jim reports: "Needless to say, I was thrilled with the class' response to this whole idea, and I plan to repeat the process in future classes."

The MPI Treatment Clinic thanks Dr. Hansell and his students for their generous and innovative way of supporting the cause of affordable psychoanalytic treatment in our community. If you wish to make a donation to the MPI Treatment Clinic, please contact Dwarakanath Rao, M.D., Chair. ❖

Suggestions

Ideas for future issues? News we need to know? We welcome all comments and suggestions. Write to:

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Or email us at: newsletter@mpi-mps.org.

Kulish Named National Women's Scholar

MPI President Nancy Kulish, Ph.D. has received a high honor from the American Psychoanalytic Association, having been named National Women's Scholar for the American Psychoanalytic Association for the year 2005-06. In this role, she will visit several institutes and societies of the American throughout the coming year. The Committee on Psychoanalytic Education is underwriting the expenses for her activities, which will include presentations, workshops, and mentoring. Her receipt of this award honors our Institute and Society as well as Dr. Kulish herself, and we share in celebrating her achievement. ❖

How Do Patients Get Better?

By Gene Hudson, M.A.

Dr. Martha Stark, professor of psychiatry at Harvard Medical School and a practicing psychoanalyst, suggested in a most engaging and memorable presentation an answer to this question at the annual APT workshop held April 25-27, 2005. She postulated there are historically three modes of working in the therapeutic process that promote change in the patient: through enhancing knowledge (by way of the therapist's interpretations), through sharing parts of the therapist's ego with the patient, and through the use of the real relationship that develops in the therapy. While some would suggest that these modes are mutually exclusive, or that the relational mode is moving too far away from fundamentally sound technique, Dr. Stark clearly proposes that the most effective therapy occurs when the therapist is able to move easily between each of these modes to facilitate meaningful change in his/her patients.

The later part of Dr. Stark's presentation was focused on the theme of "Relentless Hope: The Failure to Grieve". In her thesis, she discussed how the inability to grieve the loss of the idealized mother, or experience the inevitable failings

See STARK page 10

Extension Division Offers Second Fellowship for Ann Arbor

By Joshua Ehrlich, Ph.D.

The Extension Division at MPI is delighted to announce a new Psychoanalytic Psychotherapy Fellowship in Ann Arbor, beginning in September, 2005. Running parallel to the highly successful Fellowship in Farmington Hills, the Ann Arbor program will feature weekly case presentations by child and adult psychoanalysts. Informal and flexible, the Fellowship is a rich opportunity for participants to gain greater access to psychodynamic and psychoanalytic concepts and technique. A detailed description and an application are available on our website at www.mpi-mps.org. Interested individuals are also welcome to contact either Joshua Ehrlich, Ph.D. (734-663-7839) or Mark Ziegler, Ph.D. (734-761-1833). ❖

Scholarships

By Chris Howlett, M.D.

As important as treatment and outreach are to the mission of the Michigan Psychoanalytic Institute, education is its primary purpose. Psychoanalytic candidates and psychotherapy students are the future of psychoanalysis and training them is our top priority. We are pleased to have scholarships available to allow more people to take advantage of our various programs, which include the psychoanalytic training programs, the psychoanalytic psychotherapy educational programs, and the fellowship program. Scholarships have been made possible by a generous gift from Drs. Samuel G. and Geraldine G. Reisman, as well as subsequent gifts and fundraising efforts.

The Scholarship Committee is charged with awarding the available funds based on merit and need. The application deadline is July 6, 2005 for the 2005-2006 academic year and will be awarded by early September. For questions, please contact Chris Howlett, M.D., Chair of the Scholarship Committee, at (248) 642-9350. An application is available for download from the website at www.mpi-mps.org or contact the Michigan Psychoanalytic Institute at (248) 851-3380. ❖

Sterba Fund

There are still limited funds available through the Sterba Fund to help support the cost of analysis for eligible applicants. For further information, please call Dr. Karen Weiner at (248) 353-1020. ❖

Training in Child and Adolescent Psychoanalysis

Training in child and adolescent psychoanalysis is available at MPI either combined with adult training or after graduation from adult training. A candidate can elect to take supervised child and adolescent cases along with their adult cases while engaged in the integrated curriculum. The integrated curriculum is designed to expose all candidates--combined adult and child/adolescent or adult-only--to a psychoanalytic developmental perspective in all their courses, whether the focus be on theory, technique, or normality/psychopathology. All continuous case seminars are led together by an adult-only and a child/adolescent analyst faculty member. Presentations alternate between adult and child/adolescent cases. It is felt that experience with each age group enriches the work with analysts of all ages. Additionally, child/adolescent candidates attend a once-monthly evening clinical seminar which alternates between candidate and faculty presentations.

All professionals interested in psychoanalytic training are invited to consider doing the combined child/adolescent and adult training. Please see the MPI Bulletin for details about the child/adolescent training program, or contact Dr. Carol Austad of the Child Analysis Entry sub-committee (734-663-3060), or Dr. Ivan Sherick, Chair of the Child Analysis Committee (734-662-2211). ❖

From Outgoing MPS President Charles Burch, Ph.D.

Closing Thoughts: The Search for Truth

About a dozen years ago while having lunch with Glen Gabbard, M.D., who was MPI's Visiting Professor that year, I asked him how he would define psychoanalysis. He paused briefly and then said he liked the definition he had heard from Horacio Etchegoyen, M.D., then President of the International Psychoanalytic Association, who said, "Psychoanalysis is finding out the truth about oneself." This epigrammatic expression of the complexity of treatment captures an idea I'd like to reflect upon briefly with respect to the work we do and the community of analysts and therapists who comprise the Michigan Psychoanalytic Society and its associated organizations.

Unless one has been living on a remote island for the last dozen years, one knows that psychoanalysis (and I would include psychoanalytic psychotherapy in this discussion), as a psychological field of inquiry about a troubled mind and as a treatment method, has been in a fight to retain a strong position in the competitive world of treatment for mental conditions. Suffice it to say, pronouncements of the death of psychoanalysis cast about over the past dozen years have been highly exaggerated. This is not to deny that we have serious questions to face and address with the same truth-seeking honesty we apply in the clinical situation. I assert that we, as analysts, therapists and members of a distinguished psychoanalytic community, will improve our work and our chances of retaining a prominent—if not the preeminent—role in the mental health field if we are dedicated to truth-seeking both in the consulting room and in the training of psychoanalysts, therapists, teachers and researchers.

The search for truth in our work and in our organization means a willingness to ask and investigate probing questions. We must be willing, for example, to ask whether or not a treatment is accomplishing something and identify better both what it is and how it got there. I think we must move away from belief in psychoanalytic treatment because it was personally meaningful, even life saving, and engage in serious efforts to study what, as generalizable fact, makes the difference in the work. Fortunately, there is much significant work underway by competent investigators such as our own John Porcerelli, Ph.D., who are analytically trained and are building a body of evidence which lends empirical support to our anecdotal knowledge that intensive, analytic treatment yields better, more lasting effects than less intensive and shorter treatments. These findings are also consistent with findings from studies in Sweden and in Germany. We must overcome our reluctance to embrace the need for good research and also the integration of "research thinking" into our daily work and our lives as members of a psychoanalytic community.

Similarly, I think it is imperative that we apply the same probity to our psychoanalytic community and the profes-

sion we have worked to hard to attain. I fear that in our quest to retain the position of leadership for psychoanalysis in the mental health field, we have neglected to examine the core elements of psychoanalytic treatment. We may find ourselves influenced more by the socio-cultural forces inherent in any organization than a search for the truth. What I mean is this: can we investigate questions such as, when is psychoanalysis the treatment of choice? At what frequency of sessions can we reasonably expect an analytic process to result? Is there an irreducible core in an analytic process? Are we advised, as Merton Gill stated in his late writings, to think of psychoanalytic therapy as well as psychoanalysis proper as part of a whole, not neatly divisible into psychoanalysis and psychotherapy? Can we face honestly that some treatments are mired in endless repetitive cycles under the guise of "it just takes some individuals a very long time to get at what they need to?" While some treatments may take a very long time, establishing criteria for knowing which treatments are truly at an impasse and which are proceeding, albeit slowly, so that it is possible to identify and fix problematic treatments, is crucial to our long-term viability. My friend and colleague, Jim Hansell, Ph.D., incoming President of the Society, has suggested to me that he thinks it may be advisable for an analyst to seek a consultation with a colleague once a year for ongoing analyses. An attorney acquaintance said to me that while he thought there was much wrong with the managed care health system, he thought it was more than a little challenging for a therapist to explain in clear terms to a case manager why someone needed to be seen multiple times per week for a period of several years.

I think we must strive for honesty with ourselves and those we treat that psychoanalysis requires a substantial commitment of time, energy and money but that it can provide, for those who choose it, the best help they can get. I do not think these facts of length and cost should be avoided in our strategic plans at any level. We are, regrettably, often competing with numerous other forms of psychological treatment of much shorter duration. In my view, we should be neither apologetic nor blindly accepting of what we do, but willing to provide a clear, well-informed response when asked, "Why do you think psychoanalysis or psychoanalytic therapy is the treatment of choice?"

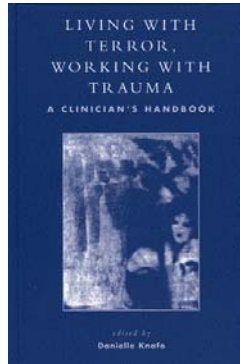
Over the years, I find myself turning back to the writings of Erik Erikson for his wisdom about both psychoanalysis and the contexts in which we live and work. He spoke eloquently of "vital virtues" which help animate a person through the life cycle. In order to retain our vitality, to cultivate our evolving analytic identity and renew our strengths, we will do well to remind ourselves, as Erikson states, that we, as analysts or therapists, have the capacity to diagnose and cure, critique and change. This is a "generational principle" which can also be applied to ourselves and to our psychoanalytic organizations. ❖

Book Review

Living with Terror, Working with Trauma: A Clinician's Handbook

Edited by Danielle Knafo
Jason Aronson, 2004

By Henry Krystal, M.D.



This is a remarkable book containing 28 chapters by many well-known authors who address the ways mental health practitioners can assist survivors of terrorism to deal with their trauma. Drawing upon experiences of leading practitioners and experts in the Middle East (both Israeli and Palestinian) and the United States, it offers ideas to help people to heal and even grow from their traumatic experiences. The editor, Knafo, herself has an interest-

ing background, having lived in South Africa and Israel and now practicing psychoanalysis in the United States. Among the well-known authors, Harold P. Blum introduces us to the issues of psychic trauma and traumatic object loss, Judith Herman reviews the concept of complex PTSD, and Marvin Hurvich explores the context of trauma in reference to the fears of annihilation.

The concepts are so broad that they permit a reconsideration of the implications of living in the atomic age that is so profoundly a part of our history that we cannot overlook it. Robert J. Lifton challenges us in his chapter, "Is Hiroshima our Text?" He suggests a need to attend consciously to what we tend to ignore as if it were an irrelevant part of the "background."

One of the special merits of this book is that the experiences of the contributors are so varied. For instance, Kinzic has worked for twenty years with Cambodian refugees in this country. Handlin and Haas have been working with Viet Nam veterans. Van der Kolk brings in the neuroscience perspective and reminds us cogently, "The body keeps the score." Serlin and Cannon approach trauma and its therapy from what they call a "humanistic" view, and John Wilson concentrates on problems of the countertransference, empathic strain and compassion fatigue in working with traumatized people.

Coming from another psychoanalytic quarter, Martin and Maria Bergmann (separately) open another territory to be followed by a few pioneers who review and reflect upon the post 9/11 New York people's survival and various challenges of life with terror. Bennett Roth takes us on an exploration of the idea of large group destruction. Isaac Tylim alerts us to the challenge of dealing with a population in the context of terror and massive loss. Volkan takes on a new concept of preventive medicine in traumatized societies. There seems to be no limit to the topics: terror and revenge, forgiveness, creative and clinical transformation.

In addition to brilliant and renowned clinicians, the book

is enriched by poetry and art of a number of different types. It includes such poets as Alkalay-Gut, Ruth Knafo-Seaton and artists such as Kiki Elephant, Bracha Ettinger, Włodzimierz Książek and Carolee Schneeman. Besides the artists who participated in creating this book, the editor also presents some work of Charlotte Salomon (1940-1942)—a teenage artist, poet and playwright who perished in Theresienstadt.

I also have a couple of contributions in this book. The first one is a chapter entitled, "Resilience: Accommodation and Recovery." This is a forty-year retrospective study of my work with my fellow Holocaust survivors. I have been working with Holocaust survivors since the early sixties. Since Germany passed a law on compensation to victims in terms of industrial disabilities, we had to establish in German courts that mental and emotional disabilities should be included. We won, and since then I have been working with the German restitution authorities and German psychiatrists. We have been involved in the development of the concepts and therapy of trauma and its sequelae. In addition, I had a number of such patients in analysis and/or psychoanalytic psychotherapy. One of the earliest comments I made in this respect was that the most important asset that favored surviving was an ample residue of "primary narcissism" which, I ventured, was derived from an early "eyeball-to-eyeball" (or actually right hemisphere-to-right hemisphere) programming of the infant with the message of his or her essential lovability and goodness. This leads to a lifetime expectation that the next person encountered will like him/her. Ongoing work made possible the reinterpretation of such assets as being derived from secure and enduring attachment to the mother. Other assets and resources were similarly traced through the experiences of the persecutions, and separately and independently, the capacity for post-liberation recovery and establishment of families. An example of the complexity of survival and recovery included the question of religion. How was the survivor going to establish faith in a benign and omnipotent God after what he had witnessed?

My other contribution is a chapter entitled, "Optimizing Affect Function in the Psychoanalytic Treatment of Trauma." Acknowledging the existence of problems of alexithymia, impairment of affect tolerance and problems of affect regression, it becomes clear that it is not possible to treat posttraumatic individuals successfully with the techniques developed for, and effective in, the treatment of, "good neurotics." In this chapter, I review a preparatory phase of treatment and its necessary modifications. The key observation of recent decades is that this challenge can be met adequately only by a phenomenon beyond a didactic program. It is achieved only in the relational interaction, which fosters a kind of harmony and the kind of joint creativity in which the cultivation of affect tolerance and affect maturation is possible. In this process, the affects become verbalized, and can serve as signals in life and in treatment. Otherwise, the regressed affects that are mostly physical do not serve as effective signals in information processing.

For those colleagues who are prepared to face the challenges of up-to-date revisions in the many aspects of trauma and its after-effects, this book is a perfect source. ❖

The Film Strip

Sylvia

By Patricia L. Gibbs, Ph.D.

The movie "Sylvia" is best seen as portraying a segment of Plath's life--that which was spent with Ted Hughes. Because of this focus, the film omits crucial aspects of Sylvia Plath's life and gives us a distorted and incomplete picture. Many of Plath's poems have been understood as having feminist themes; however, I believe the film does not reflect this interpretation adequately. Nor does the film understand the complexity of Plath's character from a sophisticated psychoanalytic perspective, or describe adequately the toxic effects Ted Hughes had upon Plath.

Plath's poem "Daddy" is understood to reflect her belief that Hughes was a replacement for her father, who died when Sylvia was only nine years old. The poem, written after Plath discovered Hughes's affair, is an angry depiction of her hostility towards her father and Ted, as well as her own self-destructive attraction to sadism. Plath writes: "Daddy, I have had to kill you. You died before I had the time....Every woman adores a Fascist, the boot in the face, the brute, Brute heart of a brute like you...Daddy, daddy, you bastard, I'm through."

The sadomasochistic nature of Plath's relationship with Hughes can certainly be understood in unconscious, intrapsychic terms. In understanding Plath's life, however, it is also important to consider environmental influences. I would like to consider some possible interpersonal processes between Plath and Hughes that may have affected Plath deeply. I think it is interesting that the woman in the film with whom Hughes had his affair later also committed suicide, and murdered the daughter whom Hughes had fathered. I believe that understanding Plath's *intrapsychic* capacities within the intense *interpersonal* processes that were played out between herself and Hughes is essential. We do not live within the vacuum of our own *intrapsychic* processes, and the destructive forces of Hughes's deception and infidelity cannot be ignored. Our psychoanalytic theory explains this process, called projective identification, as having both intrapsychic and interpersonal aspects.

In considering the force of Hughes's personality on Plath, I would like to mention a curious discovery I made while reading of one of Plath's books, *Johnny Panic and the Bible of Dreams*. The book was originally published in 1952, and was copyrighted by Sylvia Plath from 1952 through 1962--until her death--in her name. Because Plath was still married to Hughes at the time of her death, under British law he inherited her estate, including all the rights to her manuscripts. In 1977, Hughes printed *Johnny Panic and the Bible of Dreams*, assuming the copyright name in 1977 and 1979. In the introduction that he then dared to write for Plath's book, he says, "No doubt one of the weaknesses of these stories is that she did not let herself be objective enough." Plath's comment in the movie that her problem is that she has "a husband who thinks he can tell her how to write" takes on significance in this context.

I would argue that there is something simply *wrong*

about Hughes's betraying and deceiving Plath as he did and then offering any criticism or claiming any ownership of any kind, over her work and its merits or weaknesses.

Once Hughes took possession of Plath's work and copyright, the Estate severely restricted access to her material. Several authors made charges of censorship. In his introduction to her "Collected Poems," published by Hughes in 1982, he states that he "omitted some of the more personally aggressive poems from 1962," and he says he might have omitted one or two more, if Plath had not previously published them in magazines. And this is where I would say the feminist viewpoint has a legitimate claim against the corruption of male privilege and power. Can we imagine that any writer would want her creative products to be criticized--how else to say this--*objectively*? Hughes's allegation that Plath's weakness lies in her lack of objectivity should be applied to himself. The fact that he so intimately knows his author, and has been the very subject of so many of her resentments and hatreds, would seem to immediately disqualify him as a fair and objective critic of her work. Hughes's possession and control of Plath's work after her death, and his restriction and manipulation of it, is completely absent in the film. I believe this omission can be seen as reflecting the very sexism that still defines many aspects of our culture - including the sexism involved in biographical depiction in the film industry.

The murderous rage that was such an important part of Plath's unconscious self-destructiveness is best understood

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services with limited time and personnel; raising monies for our non-profit endeavors in an era of a strained economy; standing up to the competition from other approaches in the market place--the lures of fast cures and easy answers. We need to find ways to maintain and secure our continuing presence in our two campuses, Farmington Hills and Ann Arbor; to attract younger students and help them afford the training; to involve our younger faculty more readily in leadership positions; to expand services in our low-fee treatment clinic. We also need to increase our interactions with biological psychiatry, academic psychology and social work, with other local psychoanalytic groups and mental health professionals, as well as the larger academic community; to support and to generate research ourselves in psychoanalysis so that we can communicate and make our contributions known to the world at large. We will continue to quarrel passionately on how to do all this, but I am optimistic that our shared commitment to an approach to understanding the human condition will ultimately bind us together.

I consider it a privilege to have had this experience of working with you to steer what I believe is one of the best psychoanalytic institutions in the country. Personally, it has been challenging and enriching. I thank all of you ... faculty, candidates, members of the foundation board, and friends ... for your ideas, hard work and help. ❖

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of the real mother, leads to the repetitive compulsion to "relentlessly hope" for a current relationship to fill that longing to recapture the idealized maternal object. This then leads to a sado-masochistic interplay in ensuing relationships, something that can only be overcome by working through the grieving process of the lost idealized maternal object. ❖

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in psychoanalytic terms. Aspects of Plath's relationship with her mother will help us understand some of this murderous rage. The movie does not reveal the enormous role Sylvia's mother had in her becoming a writer. Aurelia actively encouraged her daughter to become a writer, bought her diaries, and entered her in writing contests as an adolescent. Plath writes in her early diaries of hating her mother; however, her deep and frequent lifelong correspondence with her mother continued right up to her suicide. The movie illuminates none of this for us.

The failure to understand Plath in terms of her most widely known work, *The Bell Jar*, is, I believe, another major failing of the movie. The novel allows us to understand Plath's murderous rage much more meaningfully than does the movie. At one point in the novel, which Plath did consider to be autobiographical, Ester sleeps in the same room with her mother. In the streetlight filtering through the blinds, Ester describes the pin curls on her mother's head as "a row of little bayonets." Sleeping with her mouth open slightly, her mother begins to snore. "The piggish noise irritated me," Ester says, and she tells herself the only way to stop it would be "to take the column of skin and sinew from

which it rose and twist it to silence between my hands." Tragically, Plath's unconscious murderous rage motivated her to repeatedly seek revenge, destruction, and death, throughout her life.

Indeed, Marjorie Perloff, in reviewing Plath's work and life, states: "Plath's suicide was inevitable...it was brought on, not by her actual circumstances, but by her essential and seemingly incurable schizophrenia." Her novel *The Bell Jar* is considered by many to offer insight into the experience of schizophrenia and psychotic depression. It also reveals the impact that Plath's hospitalization and electroshock treatments had upon her. The movie, unfortunately, tells us little about Plath's work on *The Bell Jar*, or anything at all about her nervous breakdown, hospitalization, and treatment. Ronald Hayman, however, in his biography of Plath, claims that the shock therapy that Plath received after her 1954 breakdown changed her relationship with her mother forever, whom she blamed for authorizing the ECT. In *The Bell Jar*, Plath speaks about the shock treatments, saying, "When Ester tries to smile, she finds her skin has gone stiff, like parchment. The doctor fits metal plates on either side of her head, buckles them into place with a strap....She shuts her eyes...something shakes her like the end of the world, shrilling through an air crackling with blue light...to make it feel like her bones would break and the sap fly out of her." The movie's avoidance of the pain involved in Plath's breakdown, suicide attempt, and psychiatric treatment is striking, and gives us an inauthentic reflection of her life.

Finally, I'd like to offer a brief consideration of Plath's motherhood. The particulars of Plath's suicide force us to remember that she was a mother who killed herself. Hayman says that Plath's last poems were filled with hate towards her mother. I frankly see more man-hating than mother-hating in Plath's last poems, such as "Daddy" and "Lady Lazarus." But it doesn't matter, of course, since conscious experiences reflecting hate and murderousness are always associated with an unconscious experience of a hateful and murderous *self*. There is no difference between the self and the object unconsciously. So, perhaps Plath's last poems do help us understand something about her experience of motherhood.

Borrowing again from psychoanalysis, we know that those we consciously claim to hate, we unconsciously identify with. And every mother knows the mixed feelings involved in seeing one's own mother in ourselves as we mother our children. I believe that loving mothers commit suicide *mostly* because they are convinced that their children are better off without them. Plath would be horrified to see herself filled with the very hatred and murderousness she saw in her own mother, Hughes, or anyone else.

The movie's focus on Plath's relationship with Hughes lends itself to an understanding of Plath that is incorrect and incomplete. Feminist themes are undeveloped, and exclude Hughes's posthumous control and manipulation of Plath's work. Psychodynamic influences pale in the movie's understanding of Plath. A psychoanalytic understanding of Plath's unconscious murderous rage and self-destructiveness would have added valid insight into the film's depiction of Sylvia Plath. ❖

Changing of the Guard at APT and MPS

Both the Michigan Psychoanalytic Society and the Association for Psychoanalytic Thought have elected new officers. Elections for officers of the Institute are in progress and will be reported in the October issue. The new APT President is Paul Dube, M.S.W. Other officers are: David Lundin, Vice President; Gene Hudson, Programs, Susan Zalupski, Membership; Roz Griffin, Secretary; Diana Constance, Treasurer.

New officers of the Society are as follows: James Hansell, President; Steven Nickoloff, President Elect; Dan Blake, Treasurer; Paula Kliger, Secretary; Michele Morgan, Representative to the Executive Council, APsA; Barry Miller, Alternate Representative to the Executive Council.

Congratulations to all. ❖

Member News

Ronald Benson, M.D. has just been elected to be a Trustee of the American Council of Psychoanalytic Education (ACPE). This is the independent accrediting board for Institutes in the United States developed by the Consortium. His term is three years.

Julie Jaffee Nagel, Ph.D. presented a paper titled "Psychoanalytic Perspectives on Music and Its Interpretation" in the Discussion Group "Psychoanalytic Perspectives on Music" at the Winter, 2005 meetings of the American Psychoanalytic Association. In February, she gave a presentation on Stage Fright at Shenandoah University in Winchester, Virginia. In March, she gave a seminar on performance anxiety to the voice students of Shirley Verrett at the University of Michigan School of Music. In April she performed a Slavonic Dance for piano, 4-hands, with her husband, Louis Nagel, DMA at a benefit event for the University of Michigan Mott Children's Hospital. Her chapter, "Music, Psychoanalysis and Animals" (in collaboration with Louis Nagel, DMA) was published in the book, *Cultural Zoo: Animals in the Human Mind and its Sublimations* (edited by Salman Akhtar and Vamik Volkan).

Dwarakanath G. Rao, M.D. was appointed Chair of the APsA Workshop for Directors of Psychoanalytic Clinics in January, 2005. The workshop is held annually during the APsA meetings. Dr. Rao's book chapter entitled "The Wolf in the Consulting Room" was published in Akhtar, S. and Volkan, V. (Eds). *The Mental Zoo: Animals in the Human Mind and its Pathology*. Madison: International Universities Press, 2005.

Alan Krohn, Ph.D. was an invited speaker at the Carter-Jenkins Center in Tampa in February. He gave a paper "Hysteria: the Elusive Neurosis," a condensation and updating of his book. Dr. Krohn also conducted three seminars at the Carter-Jenkins Center on hysteria and basic psychoanalytic concepts.

Linda A.W. Brakel, M.D. has been invited to present a 3-hour workshop on research on primary process to The American College of Psychoanalysts' annual meeting in Atlanta, May 21, 2005.

Linda A.W. Brakel, M.D. and **Howard Shevrin, Ph.D.** have had their paper, "Anxiety, Attributional Thinking and Primary Process," accepted for publication in the *International Journal of Psychoanalysis*.

Kerry Kelly Novick has been appointed Chair of the American Psychoanalytic Association's Committee on Child and Adolescent Analysis (COCAP), charged with raising the profile of child analysis within and outside the profession. She has also been appointed to the President's Task Force on Expanding Membership Criteria for the American Psychoanalytic Association.

Kerry Kelly Novick and **Jack Novick, Ph.D.** have just published a book called *Working With Parents Makes Therapy Work*, available through the publisher, Jason Aronson, or Amazon and other book sites.

They were the speakers at the annual symposium of the Virginia Psychoanalytic Society in April 2005, and gave the John Hadden Memorial Lecture at the Hanna Perkins Centre Annual Symposium in Cleveland.

They were invited to speak to the Early Childhood Project group of the San Francisco Psychoanalytic Institute in April.

In the fall of 2004, Jack and Kerry Novick presented four papers to the Swedish Association of Child and Adolescent Therapists, an organization of 25,000, in Stockholm. They have been invited back for October, 2005, when they will also speak in Helsinki, Finland to the psychoanalytic group and to adolescent psychiatrists and therapists.

The Novicks' book, *Fearful Symmetry: The Development and Treatment of Sadoomasochism*, first published by Jason Aronson in 1996, is being reprinted in paperback.

Jack and Kerry Novick's article, "Soul Blindness: A Child Must Be Seen To Be Heard," has been published in a collection of papers *Divorce and Custody*, Linda Gunsberg and Paul Hymowitz, editors, The Analytic Press.

In addition to their faculty appointments at the Michigan Psychoanalytic Institute, the Michigan Psychoanalytic Council, the New York University Psychoanalytic Institute (PANY), and the New York Freudian Society, Jack and Kerry Novick have been appointed to the faculty of the Chicago Center for Psychoanalysis.

Cassandra M. Klyman, M.D. presented a paper entitled "Death in the Nursery: Suicide and Infanticide as a result of Post-Partum Psychosis" at the meeting of the American College of Forensic Psychiatry, which was held at the Four Seasons Hotel in Newport Beach, California from April 6-10, 2005. Dr. Klyman's Committee on Psychoanalysis in Medicine presented a paper, "Heartache and Heartbreak," at the Bon Secours Hospital Grand Rounds on April 7, 2005. ❖

CALENDAR

June-August
Summer Vacation



September 24 Ann Arbor
Alan Sugarman, Ph.D.
San Diego Psychoanalytic Institute

October 1 Ann Arbor
Music School Event

October 16 Bloomfield Township
Reel Deal—To Be Announced

November 11 Troy
Michigan Psychoanalytic Foundation Benefit

November 13 Ann Arbor
Reel Deal—To Be Announced

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