



Wayne Cotter

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Michigan Psychoanalytic Foundation's 2005 Benefit

By Elly Falit, M.S.W.

The 2005 benefit will be held on Friday, November 11th at the Somerset Inn in Troy. The evening will begin at 7:30 with a wine and music reception.

This year's entertainment should be appealing to young and old alike. The singing group Vision from the Detroit High School of Performing Arts, which was a huge hit at last year's benefit, will be performing a whole new repertoire of songs. Vision will be followed by Los Angeles comedian, Wayne Cotter, of whom Jay Leno has said, "If I'm not available, I tell people to get Wayne Cotter." With material that is both squeaky clean and uniquely clever, Cotter has an ability to adapt his show to each particular audience. He has appeared on all of the late-night talk shows, on Bill Maher's Politically Incorrect, as host of the Fox TV series Comic Strip Live, and has been nominated as Best Standup Comedian by the American Comedy Awards. The evening will conclude with a lavish dessert buffet.

The benefit is the only major fundraising event of the Foundation. It supports the programs and operations of the Institute. The Benefit Committee is confident that the 2005 event will be an enjoyable evening for everyone. Please contact the Institute office for information and tickets (248-851-3380). ♦

How to get there

Somerset Inn Ballroom
2601 West Big Beaver
Troy, Michigan
248-643-7800



MPI President's Column

A Look at the Numbers: The Institute and the Community

By Harvey Falit, M.D.



Our Institute is renowned for the quality of the training it offers to psychoanalytic candidates and for the quality of the education it offers to mental health professionals through our seminars, fellowships and psychotherapy educational programs. What is often not appreciated is the extent to which our

Institute contributes to the mental health needs of the community in southeast Michigan.

Because our teaching enables mental health professionals to develop skills for working therapeutically with individuals suffering from a wide range of mental health problems, this teaching is itself a significant contribution to the community. The development of psychotherapeutic skills has been neglected by many of the major mental health training programs across the country. However, here in southeast Michigan, the members of our Institute help trainees develop these skills because of the time they donate towards teaching these students. The faculty, candidates and affiliates of the Institute donate the following each year: over 700 hours of faculty teaching to psychoanalytic candidates in our core program; over 400 hours of faculty teaching to students and residents-in-training in four southeast Michigan psychiatric residencies, and in three area psychology graduate programs. In these same programs we provide over 3,500 hours of supervision and mentorship to professionals in training. In the psychotherapy programs and seminar series of our Extension Division, we provide over 3,400 student-class-hours of teaching and 300 hours of low-fee supervision and mentorship.

The Institute also provides direct services to individuals in need. Through our Treatment Clinic offices in Farmington Hills and Ann Arbor, we provide over 1,400 hours of reduced-fee psychotherapy and over 5,200 hours of low-fee psychoanalysis to children, adolescents and adults.

Is all this really necessary? Does it make a contribution to the community? Our donors support these programs by contributing to our annual fund-raising which makes the administration and operation of the Institute possible. Our professionals take time away from their practices to offer these services. Are our donors contributing to a worthy cause?

Let's look at the current state of psychiatric treatment in Michigan. Shortages in funding, the successes [and excesses] of managed care and psychopharmacology, and a Zeitgeist oriented towards the "quick cure" have led to a

situation where the needs of many patients with severe and disabling neuroses have been neglected. Over the last 15 years in Michigan there has been a greater than 50% reduction in the portion of health care dollars going to psychotherapy and psychoanalysis. [In his discussion of the current funding of health care, Dr. Tom Carli of the University of Michigan points out that psychiatric expenditures have gone from 10% of medical spending to 5% of medical spending. Of this 5% at least 2/5 - 2% - is spent on psychopharmacological interventions.] This drastic reduction in funding of psychotherapy and psychoanalysis has diverted attention from individuals suffering from myriad mental health problems that need more intensive, skilled therapeutic intervention.

At the Institute, we believe that the needs of these patients should not be ignored. As part of our ongoing programs we are treating such patients at lower fees, training mental health professionals in how to work analytically with these patients and, where possible, facilitating the development of programs to treat such individuals. It is in this context that our efforts in the community need to be viewed. The direct care which we provide to patients speaks for itself: provision of low-fee psychotherapy and psychoanalysis helps those patients who could not otherwise afford treatment. Provision of no- or low-fee consultation to schools provides opportunities for children to receive the benefits of psychoanalytic thinking in addressing their academic, personal and family problems. Finally, in our core psychoanalytic and Extension Division programs and in our teaching, mentoring and supervising in the major local psychiatry and psychology training programs, we help current and future providers of psychiatric care understand the needs of these patients and thus improve care for psychiatric patients - now and in the future.

And we must look beyond the numbers. About two years ago, our sister organization, the Michigan Psychoanalytic Society [MPS], organized a Crisis Response Committee. The members of this committee have cooperated with the Red Cross to obtain Red Cross training for some of our members. These members can cooperate with a network of psychoanalysts who respond in times of disaster. One of our analysts [Alan Krohn, Ph.D.] has been to Sri Lanka following the tsunami and has participated in the Red Cross efforts to help victims of Katrina. The chair of this committee, Paula Kliger, Ph.D., representing the Society, has been active in the effort to help those individuals who have been displaced to the Detroit area by Katrina. These committee members are first responders and counselors to the first responders in these disasters. It is because of good work like this that the members of the Institute and its sister organizations are supported by the members of the community.

We think it's worth it.

Crisis Response Committee (CRC): Leading the Disaster Mental Health Response to Hurricane Katrina

By Paula Kliger, PhD, CRC Chair

On August 30, the whole world watched while Hurricane Katrina, the largest ever Category Four (4) Hurricane, packing winds and rain of more than 165 mph, devastated the Gulf Coast regions and inland areas of Louisiana, Mississippi and Alabama. We found ourselves glued to television and radio newscasts that played reels and reels of repeated horrendous images. Hundreds of thousands of people, forced to evacuate their homes, lived and worked in the most devastated areas. People lost nearly everything--all personal possessions--often with the exception of the clothes they wore to escape the gargantuan storms, the escalating and enveloping flood waters. Millions lost their basic livelihoods, tenured jobs and entire businesses. And most devastating of all were the shocking deaths and traumatic separations from loved ones.

Wherever we found ourselves, in the heart of the affected areas to the remotest areas of the country, we were all affected by Katrina. Those of us who were not the first responders--those men and women seen trudging or floating through contaminated and debris-filled New Orleans flood waters looking for survivors--felt powerless, stunned, and, at first, like we could only watch. But we wanted to do *something*. Through the repeated, shocking images, we felt more in touch with the pain and suffering, and our sense of powerlessness and helplessness grew in proportion to the cumulative impact of the images. As our feelings burgeoned, we began to express not just a want but a *need to do something*.

We could hear a yearning to do something to help in the voices of nearly everyone we might meet, in our practices, at the grocery store, in the cleaners, and out with family and friends. We were asked to give money to support the relief efforts. But it just did not feel like enough. Church, temple, and synagogue groups, for-profit and not-for-profit businesses, professional athletes, schools, Salvation Army, Habitat for Humanity, individuals and families reached out and committed more of themselves to relief and recovery efforts.

The Michigan Psychoanalytic Society's Crisis Response Committee and Network, working closely with the American Red Cross (ARC) organization helped to take the lead in our Michigan area and beyond, supporting the Disaster Mental Health Katrina relief and recovery efforts. Paula Kliger, Ph.D., a 12-year ARC Disaster Mental Health Leader and Trainer Volunteer, coordinated work with ARC Disaster Services to recruit psychologists, social workers and psychiatrists within our psychoanalytic community (that have been trained in ARC Disaster Mental Services) for local and national disaster deployment.

Over several weeks of the relief efforts, several psychoanalytically-informed therapists and analysts

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2006 MPI Open House and Gourmet Deli Brunch

If you are interested in:

- Becoming a psychoanalyst
- Studying psychoanalytic psychotherapy
- Meeting a multidisciplinary group of professionals dedicated to excellence in practicing, teaching and researching psychoanalysis and psychotherapy
- Becoming a member of APT or a student member of SATA
- Or, are simply curious about what the Institute has to offer you...



Join us with your guest on
December 3, 2005
from 11 a.m. to 1 p.m.
at Michigan Psychoanalytic Center
32841 Middlebelt Road, Suite 411
Farmington Hills, MI 48334

We will begin with a brief description of our programs and short testimonials from graduates and colleagues who are currently in training. We will continue with a gourmet brunch and a chance to meet each other.

We are looking forward to seeing you!

To R.S.V.P., or for more information, please contact Dr. Lena Ehrlich, at (734) 662-7570. ❖

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affiliated with our Michigan Psychoanalytic Society and Center have given their expertise and innumerable hours of time in ARC training, preparation and deployment as Disaster Mental Health volunteers. Especially noteworthy are the following individuals:

Dr. Alan Krohn, trained in ARC Disaster Mental Health, volunteered to be deployed to the disaster site. He spent several days in preparation and then served two weeks as a Disaster Mental Health volunteer in Baton Rouge, Louisiana. Dr. Krohn also served as a mental health professional volunteer in Southeast Asia, assisting therapists in their work with those affected by the tsunami.

Drs. William Nixon and Monisha Nayar, Paula Kliger and Rosie Lopez, M.A. have volunteered and prepared rigorously for national deployment to a nationally-affected site, as they are needed.

Drs. Susan Wainwright, Marc Hirsch, Carol Levin, Monisha Nayar, Diana Constance and Paula Kliger and Keke Pyrros, M.A., Diane Lothrop, M.A., and Rosie Lopez, M.S., all ARC Disaster Mental Health trained volunteers, volunteered to be deployed locally to provide immediate mental health services to the Hurricane Katrina evacuees that came to the City of Detroit Katrina Disaster Reception Center. This Center was opened and managed by City of Detroit Emergency Services and Wayne County Community Mental Health. The Red Cross Disaster Services was called on to support these efforts. Our colleagues were/are there.

With the sensitive and caring introduction and inter-

face of Drs. Harvey Falit and Linda Brakel, Drs. Julie Nagel (trained in DMH and a member of the CRC) and Paula Kliger met and spent a wonderful evening with Eve Fortson, M.D., an analyst from New Orleans. Dr. Fortson is staying with her family in the Ann Arbor area for an indefinite period of time because she also was forced to evacuate her New Orleans home some weeks ago. We welcome Dr. Fortson to our community.

The orientation and training as well as our affiliation with the American Red Cross has allowed psychoanalysts and psychoanalytically oriented colleagues to contribute more actively within the community at large: to step into the Katrina Disaster relief and recovery situation (or similar situations), with recognizable expertise, and armed with a structure and framework that allows us to use psychodynamic understandings to help people with critical psychosocial, emotional and physical needs.

Members of the Crisis Response Committee (CRC) are not only prepared to work closely with the ARC locally and nationally. The CRC is planning longer term outreach efforts with Wayne, Oakland, Washtenaw and Macomb counties involving their mental health and emergency professionals, religious leaders, educators, and Homeland Security for purposes of learning from them and to build solid working relationships and a more integrated critical response network. Also, CRC is planning presentations and workshops for interest and educational purposes. For example, on Saturday, January 14, 2006, Dr. Alan Krohn will present his extraordinary experiences and insights from his work with the people of Sri Lanka, Southeast Asia. We look forward to seeing you there. Dr. Krohn will also be writing an account of his experiences in Baton Rouge, LA, for the next issue of Free Associations. Please contact the CRC for more information about the next trainings and our activities. ❖

Benefit Contributors Now Recognized by Category

In previous years, the Foundation has thanked contributors by including their names in an alphabetical list. This year we have created categories of giving, as follows:

\$ 5 000 +	Sponsors
\$ 2,500 -- 4,999	Patrons
\$ 1,500 -- 2,499	Benefactors
\$ 700 -- 1,499	Sustainers
\$ 300 -- 699	Supporters
\$ 50 -- 299	Contributors

If you prefer to have the amount of your gift remain private, please let the office know so that we may honor your wishes.

All gifts are appreciated, and we are proud of the enormous good that we are able to do in our community thanks to the generosity of our many members and friends. ❖

GLBT Network at Motor City Pride

By Kathleen Moore, Ph.D.

The GLBT Network, a liaison committee of the Michigan Psychoanalytic Foundation, rented a booth at the Annual

Motor City Pride event in Ferndale on Sunday June 5. It was, as always, a fun and celebratory event, and we were proud to be a part of it.

Pride events take place during the month of June in communities all across the country to commemorate the June 1969 beginnings of the gay and lesbian rights movement. Motor City Pride is sponsored each year by the Triangle Foundation, Michigan's leading advocacy organization for the gay, lesbian, bisexual, transgender and allied communities. Triangle offers direct services to those who have been victimized by crime, harassment or discrimination, and offers indirect service to the whole community through its educational programming and promotion of mutually respectful relationships between the glbt and the straight communities. ❖

News from the Ann Arbor Community

By Julie Jafee Nagel, Ph.D., Chair, Ann Arbor Committee

With the return of the fall season, the Ann Arbor Campus of MPI hosted several exciting and well-attended programs. The first event of the year, jointly sponsored by the APT, the Ann Arbor Committee, and the Michigan Psychoanalytic Society, featured a paper by Dr. Drew Westen of Emory University, "Rethinking Transference: A View From Neuroscience." The Society's second scientific presentation featured Alan Sugarman, Ph.D., a child and adult training and supervising analyst from the San Diego Psychoanalytic Society and Institute. His paper, "Fantasizing as Process, Not Fantasy as Content: The Importance of Mental Organization" was discussed by Don Spivak, M.D., and was followed by lively comments and questions from the audience. Both presentations took place in September in the Psychology Department at the University of Michigan. The next Society presentation in Ann Arbor will take place on February 11, when Jon Markey, M.D. will deliver his paper, "Anniversary Reactions: Historical Overview and Clinical Relevance," with Mayer Subrin, M.D. as the discussant.

James Hansell, Ph.D. and Michael Shulman, Ph.D. have inaugurated the University of Michigan Interdisciplinary Psychoanalytic Studies Group (UMIPS), which is a series of informal Friday brown bag discussions. The first presentation was made by Kimberlyn Leary, Ph.D. on the topic of "Critical Moments as Relational Process: The Psychodynamics of Negotiation and Mediation." Dr. Leary is Director of Psychology Training, Cambridge Health Alliance; Affiliate Faculty, Program on Negotiation, Harvard Law School; and Visiting Associate Professor of Psychology, Harvard Medical School. Additional programs are planned for November 11 (Daniel Frank, Ph.D., "The 'School Romance': Psychoanalytic Perspectives on the Subjective Experiences of Students, Educators, and Parents") and January 27 (Jonathan Metzl, M.D., Ph.D., "The Protest Psychosis: Race, Stigma, and Schizophrenia"). Programs are from noon-1 p.m. at 4437 East Hall, University of Michigan, Department of Psychology. On October 1, the MPI/Ann Arbor Committee

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The Reel Deal: Plumbing the Depths of Film

"a storehouse for the psychological images of our time"

--Glen Gabbard

"Filmmaking, film analysis and psychoanalytic work operate in the area of insight and of the gradual releasing of awareness from unawareness"

--Andrea Sabbadini

Jointly sponsored by the Association for Psychoanalytic Thought and the Academic Council of the Michigan Psychoanalytic Society, the Reel Deal series is one of our most popular and well-attended events. For each presentation, highlight film clips are shown (the entire film can be obtained on DVD and viewed in advance), and a discussion is conducted by a panel consisting of both academics and psychoanalysts. Ample time is allowed for audience participation.

Film I for this year, "**Closer**," was held on Sunday, October 16 and featured Bruce Russell, Ph.D. from Wayne State University (Academic), Loretta Polish, Ph.D. (psychotherapist), and Marc Rosen, Ph.D. (psychoanalyst). Remaining talks in the series are:

Film II - "**Kinsey**"

Sunday, November 13, 2005, 11:00 AM to 1:00 PM
4448 East Hall, Ann Arbor (NW corner Church and S. University)

Panelists: Academic: Ira Konigsberg, Ph.D., University of Michigan; MPI Advanced Candidate: Michael Shulman, Ph.D.; Psychoanalyst: Sally Rosenberg, D.O.

FILM III - "**Crash**"

Sunday, February 19, 2006, 1:00 PM to 3:00 PM
Oakland Room, main level of Oakland Center, Oakland University

Panelists: Academic: Jude Nixon, Ph.D.; Psychoanalyst: Merton Shill, Ph.D., Wayne State University, University of Michigan; Psychoanalyst: Paula Klinger, Ph.D.

FILM IV - "**Bad Education**"

Sunday, March 19, 2006, 1:00 to 3:00 PM
Oakland Room, main level of Oakland Center, Oakland University

Panelists: Academic: Brian Murphy, Ph.D., Oakland University; Psychoanalysts: Jolyn Wagner, M.D., Don Spivak, M.D.

Tickets are available on site.

General public, \$15; APT members \$10; students \$5.

For more information call Dave Lundin, (248) 874-0081. ❖

Suggestions

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

The Michigan Psychoanalytic Center
32841 Middlebelt, Suite 411
Farmington Hills, MI 48334

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

Psychoanalysis in the 21st Century

"Good Vibrations": Complexity Theory and Dynamic Treatment*

By Carol Levin, M.D.

In a talk on complexity theory that Robert Galatzer-Levy gave at APsA's winter meeting, he used the phrase "good vibrations" to capture the essence of his emerging view of the therapeutic action of dynamic treatment. He quoted a patient's dream of being attacked, barely escaping and then being told by a manager to sit down and wait. The patient protested in his dream: "Don't you understand how serious this is? There are attackers outside!" But the manager giggled and the patient sighed and they "giggled and sighed together until [the patient's] fears slowly melted away." Galatzer-Levy noted that he is prone to giggle, and thinks that his patient got better not from understanding or working through terrifying fantasies, but from their "giggling and sighing together—coming into a peaceful state that somehow made the terrifying fantasies melt away." In his view, the usual foreground of dynamic treatment—content, insight and interpretation—becomes the playground through which the dynamic therapist and his/her patient are connected and function as markers of transformative deep resonance in a therapeutic situation. A time-worn idea, we might say, evoking the "corrective emotional experience" we are all so familiar with, but Galatzer-Levy, the Boston Change Study Group, Stephen Seligman and William Coburn, just to name a few, are formulating explanatory theory that supports this old idea that has become embedded in the relational theories of therapeutic action. Complexity theory involves a paradigm shift from an older, objectivist isolated mind perspective to a perspectival, constructivist point of view in which emotional experience is inherently relational. It gives us a language that captures the rich texture of what we do and what we offer our patients, helping us loosen our rigidities and understand how we create optimal therapeutic systems.

Complexity theory is a theory of explanation, not prescription or proscription. While in linear systems cause and effect are predictable and proportional—like when a stone travel a distance that is proportional to the force with which it is thrown—in non-linear dynamic systems different processes are in play: more is possible than can ever be actualized. Complexity theory studies the processes by which complex systems come into being, are ordered and change. We are all familiar with the butterfly effect: a flap of a butterfly's wings in Rio can create a hurricane in, say, Louisiana. This is popularly known as the theory of "tipping points": that at some particular point in a non-linear dynamic system, when conditions are in a particularly sensitive state, a small change in a particular input can produce dramatic changes in the dynamics of the system. Thus cause and effect in complex systems are not proportional or predictable and are transformed into one another as the system reorganizes, as it is propelled to do. Simple rules lead to complex yet ordered structures.

Further, coupled systems of oscillators are particularly

rich generators of emergent phenomena with properties and processes that are qualitatively different from those of each oscillator functioning alone (take, for example, our legs, which can perform qualitatively different actions singly—hopping—versus when working together—walking or running). Systems are called chaotic when small changes lead to major changes in the system's evolution. Complexity and creativity emerge on the border of chaos, and to facilitate their emergence there is an inevitable compromise between the need for familiarity and stability and the need for novelty, with different risks inherent in being skewed in either direction (for example, stagnation or fragmentation). Complex systems theorists view a dynamic treatment as creating a new, complex system made up of two interpenetrating experiential worlds. The whole treatment setup couples two complex oscillators—two whole people—and creates a new system in which they are together often enough, and long enough, to rework patterns of psychological action that have not worked well for the patient, who has lived in attractor states (patterns) that have been too rigid (not permitting adaptation or creativity in the face of new experience) or too loose (leading to fragmentation in the face of challenges). People enter this new complex dynamic system in some sort of disequilibrium, fertile ground for new solutions to life problems to emerge. Things get shaken up, and perturbations of all sorts (for example, interventions, empathic failures, outside experiences) introduce novelty into the relatively stable setup of the dyad. The aim of dynamic treatment is thus to facilitate the emergence of new and more useful configurations of experiencing and behaving which are then sustained by reiteration (as opposed to repetition) in the treatment and in the interpenetrating systems in the patient's outside life. Each treatment is self organizing and complex, developing its own way without explicitly planning how things should go, and technique thus is dependent on the properties of the system at a given moment.

The Boston Change Study Group has moved away from their initial position that only "lit up" moments of heightened affectivity move the process along, and joins Galatzer-Levy in thinking that the "hours of struggle, jostling, chatting and speculating are just as central to [therapeutic] change as dramatic, apparently transformational moments," and that both participants in the dyad are deeply affected and changed by the process. Usual guidelines for the therapeutic setup and our participation in it enable us to provide enough stability to allow newness to emerge while helping to protect the therapeutic process from falling into chaos. A lot of what dynamic clinicians do explicitly and implicitly involves creating interventions that move the process along by titrating novelty within familiarity. What seems to matter for moving the process forward is that the dyad works together to discover and create meaning rather than the particular content of that meaning. Complexity theorists view the goal of a therapeutic process as restoring a person's derailed capacity for ongoing development and change, and view training as learning how to become part of the solution rather than part of the problem.

In conclusion, then, I hope that this overview of complex

systems theory piques your interest so that you will want to read some of the rich clinical papers emerging in our literature on this new paradigm in dynamic thinking.

I am viewing the dynamic treatments along a continuum in which each treatment varies in the details of the setup (depending on what is possible for patient and therapist) but is grounded in these ideas. Galatzer-Levy gave his talk at an ongoing Discussion Group at the winter meeting of APsaA called "Complex Models of Mind in Relation to Psychoanalysis," chaired by David Olds, M.D., which I encourage you attend this winter in New York. The Boston Change Process Study Group usually has a Discussion Group chaired by Jeremy Nahum, M.D. at the winter and/or annual meeting. If you would like an annotated bibliography on these ideas, please email me at levinc@msu.edu. ❖

From Incoming MPS President James Hansell, Ph.D.



As the incoming President of MPS, I'd like to thank Dr. Chuck Burch and his entire Executive Council for turning over MPS in such good shape. In particular, due to Chuck's careful planning, the Society had an excellent year financially in 2004-2005, and our budget picture is much brighter than it was last year

at this time. Additionally, thanks to the hard work of Dr. Michael Singer and his Program Committee, we have in place an outstanding series of events for 2005-2006 about which you will be hearing much more!

I'd also like to take this opportunity to offer some reflections on the state of our Society and my hopes for the next two years. Attending meetings of the American Psychoanalytic Association (as I did most recently in Seattle last June) is always an occasion for pride in our Society. Our members are highly visible and prominent in the APsaA conference programs, including panels, clinical workshops, discussion groups, committee meetings, and leadership on the Board of Professional Standards and Executive Council. APsaA members from around the country speak enthusiastically about Michigan as a star on the national scene; our clinical practices, scholarly contributions, and political leadership are widely admired. Clearly, we're doing many things right.

At the same time, we need to keep raising the bar--for ourselves and for others who look to our Society for leadership. In that spirit, I would like to mention three related areas that strike me as ripe for "raising the bar" within our Society over the next two years. These three areas are:

1. Contributing to the long-term financial health of our family of organizations. We can't afford--literally and metaphorically--to be spending so much of our time and energy on financial matters, energy that should be devoted to our basic missions of teaching, training, professional development, advocacy, and scholarship. Over the long-term, we must professionalize our fundraising in a manner that better provides for our current and future needs so that we can turn our attention to other priorities. In the meantime, I urge all of our members to do whatever they can to ensure the success of our fall benefit and fundraising.

2. Reaffirming the focus of the Society on its important guild functions--namely, providing opportunities for

members to further their professional development and clinical skills, and advocating for our profession in the political, legal, and social environments in which we practice and live.

3. Examining the issue of membership in the Society. Do we want to remain a Society comprised almost exclusively of graduates of our Institute, or should we expand, perhaps developing new categories of membership and new sources of members? What other models for membership could be viable and valuable? The implications of these questions are serious, so we will have to give them careful consideration.

I look forward to leading our Society over the next two years as we continue the work that the Society has been doing and address the issues I've described above. I hope to get input and help from many of our members over the fall as the Executive Council begins to plan our priorities. I'm already grateful to my talented Executive Committee (Dr. Nickoloff, President-Elect; Dr. Kliger, Secretary; Dr. Blake, Treasurer; Dr. Burch, Past-President; Drs. Miller and Morgan, Representatives to the APsaA Executive Council), and I anticipate working productively with them, and with our membership, in the coming years. ❖

Save the Date! April 24-29, 2006

Visiting Professor of Psychoanalysis

Dorothy E. Holmes, Ph.D.

Training and Supervising Analyst

Baltimore-Washington Institute for Psychoanalysis

Professor and Program Director, Doctor of Psychology Program, George Washington University

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presented its 6th annual program on Career Anxiety, co-sponsored by the University of Michigan School of Music, Department of Outreach, Louis Nagel, D.M.A., Director. This year's program, moved to a larger venue in the School of Music, focused on training and careers, but also emphasized developmental issues that consciously and unconsciously affect individuals as career decisions are being formed in childhood and adolescence. Panelists included Gabriel Bolkosky (Director of the Phoenix Ensemble, independent violin studio, performances nationwide, University of Michigan Graduate School Music); Professor John Ellis (Director of Graduate Studies in Piano Pedagogy, Director of the University of Michigan Piano Pedagogy Laboratory Program); Julie Jaffee Nagel, Ph.D., (psychoanalyst, pianist, author of articles on stage fright, career choice, music and emotions, faculty of the Michigan Psychoanalytic Institute and University of Michigan Department of Psychiatry); Michael Singer, Ph.D. (Associate Supervisor in Child Psychoanalysis, Faculty Michigan Psychoanalytic Institute and University of Michigan Department of Psychiatry); and Maryanne Telese (leading soprano in major opera companies, 1974-2001 and currently a successful real estate agent). We look forward to your joining us for other creative and inter-disciplinary events during the coming year. ❖

In Memoriam

**William Francis Shuter, Ph.D.
(1931 - 2005)**

By Madeline Wright, Ph.D., M.S.



Bill Shuter was a loving and beloved friend to me and to many people in various communities and groups that did not always overlap (yes, I lifted the adjectives from the title of Roy Schafer's article, "The Loving and Beloved Superego"). He was a devoted, passionate Catholic, a member for decades of Holy

Trinity Student Parish on the campus of EMU. Accordingly, one set of his friends gathered in that circle. Another set was, of course, centered at the Institute.

Bill found a way of bringing his disparate circles of friends together. To take the most convenient example, myself, I can't see how I would ever have found my way into analysis without his gentle mediation and influence. Without analysis, I would not have thought of trying to begin a new career and life as a therapist. Without analysis, I might never have known that MPI existed. Without analysis, I do not like to think what might have happened. Even though I am now writing about myself and not directly about Bill, I think the personal references tell more about him than they do about me. Bill wanted to help people. He wanted to relieve suffering. He looked for ways to reconcile people in conflict. When the Catholic Church became riven by scandals, he looked for a psychoanalytic solution. His intervention was to set up a public meeting with representatives from the church hierarchy and from the Institute. I remember the pain-filled questions that came from the audience. It was not a comfortable gathering. Interventions of that sort are not likely to be comfortable, but they are precious.

For at least a week after Bill died, I couldn't think of any quotations, any prayers, any hymns, any poems to help me. He was my dear friend, and I was in a strange state of disconnection. Later, I began to remember a sentence in Latin, something not too odd for me, since my first career has been teaching classical languages. The sentence is: "*Bonum est diffusivum sui.*" It is from the Summa Theologiae of Thomas Aquinas (prima pars, quaestio V). An awkwardly literal, schoolchild-type translation would read: "Good is diffusive of itself." In short, goodness moves outward, reaching toward objects, whether human, animate, or inanimate. Anyone who saw how Bill tended his banks of plants in both summer and winter, and how he adorned them with little statues of angels and gargoyles, knows what I mean. Goodness diffuses itself. It spreads itself around. It does not stay locked up inside. Bill had goodness, and we happy few who knew him are recipients and beneficiaries, charged with keeping these ripples of goodness proceeding outward.

Dr. Wright (Ph.D., Medieval Latin; M.S., Clinical Psychology) is Academic Dean at Ave Maria College, Ypsilanti, Michigan. She may be reached at (734) 730-1117. ❖

His Good Works Enriched Our Lives

By Marvin Margolis, M.D., Ph.D.

On 9/5/05, at the age of 73, William Francis Shuter, Ph.D. died of complications due to Addison's disease. He had suffered from this illness for the past 25 years. This kind, thoughtful man was a candidate in our Institute. He had been a professor of English literature at Eastern Michigan University (EMU). He was deeply devoted to English literature, to Catholicism, to psychoanalysis, and to his friends.

English Literature. After receiving his Ph.D. at the University of Wisconsin, Bill came to EMU and remained there for his entire academic life. He loved to teach Shakespeare and the Bible as literature. Bill always prepared anew for each class. In fact, he became interested in rereading and wrote a book about the subject. He also wrote a book about Walter Pater, an Oxford scholar of the Renaissance. Bill was a leading member of an international group of Pater scholars. He published regularly. He was saddened by the trends in his field that diminished the centrality of the classical canon. He was an academic bridge-builder and received major grants to develop interdisciplinary projects. Bill loved to organize meetings to further academic collaborations.

Catholicism. Bill was a devoted Catholic and was a member of Holy Trinity Church in Ypsilanti for almost his entire adult life. He was dedicated to the cause of peace and justice as an outgrowth of his religious faith. He enjoyed organizing celebrations centered about Our Lady of Guadalupe or the Passover Seder. These were also bridge-building opportunities between the Church and the Mexican community and Jewish communities. He was a reader at church services. Dr. Shuter was especially committed to youth ministry in outreach activities to the students at EMU.

Psychoanalysis. Bill became a candidate in order to further his efforts to write at the interface between psychoanalysis and Catholicism as well as psychoanalysis and English literature. Bill's interest in psychoanalysis was deep and consuming. He helped organize our Academic Council to further dialogue between psychoanalysts and academics. Most recently, Bill was the chairman of this Council. Before becoming a candidate, he was an academic fellow in our Institute. Dr. Shuter in recent years wrote many papers in the area of applied psychoanalysis. He wrote about Pater, Oscar Wilde, King Lear, and the Mass. At the time of his death he was doing research on a paper about the role of Mary in Catholic devotions. His fellow candidates (20-30 years younger) welcomed his thoughtful contributions to class discussions. Our entire community benefited from the programming offered by the Academic Council under his leadership. An all-day symposium at Oakland University ("Emma on the Couch") on Jane Austen's Emma was one of his most memorable programs. He had hoped to establish a Journal of Applied Psychoanalysis at our Institute. Candidates are planning a project to honor his memory. Bill left half of his estate to the Michigan Psychoanalytic Foundation.

Friendship. Bill was devoted to his friends. Many of his

students became life-long friends. There was nothing he enjoyed more than having dinner with friends. He loved deep, stimulating discussions while breaking bread and drinking a glass of wine. Bill was at the ready if a friend needed a ride to the airport or would open his apartment to friends in need of a temporary haven. He might even do "bread runs" and bring bread from Zingermans to those lucky ones on his list. He was a great listener. One friend said at the funeral that Bill always elicited the best out of his friends in these conversations.

We will all miss this kind devoted scholar/friend whose good works enriched our lives. We know that his spirit will continue on in the important work of the Academic Council, which he co-founded.

New Graduates



Paula Christian Klinger, Ph.D.

Originally from New York City, Dr. Paula Klinger graduated from the Michigan Psychoanalytic Institute, January 11, 2005 from the Adult Psychoanalytic program. Dr. Klinger is a clinical psychologist who received her Bachelor of Arts degree with honors in psychology and a minor in music from The City College, The City University of New York in 1979. She moved to Michigan where she received her Masters Degree in psychology in 1983 and Ph.D. in Clinical Psychology with a minor in statistical measurement and design in 1984 from Wayne State University.

Dr. Klinger took an unusual path to psychology. She began her career in music. Within the performing arts, she traveled extensively and was significantly influenced to study psychology after she returned from South Vietnam where she sang for US troops and for the South Vietnamese people, especially the children, who were also survivors of combat. In addition, because of her combined college interests in music and psychology, she was invited to create The Bridge: a music therapy intervention program for people who had had extensive histories of hospitalization because of their severe thought and emotional disorders. Usually alone and abandoned by their families, these people lived in single occupancy dwellings in New York City and they had little support or outlet for their own artistic self-expressions. Encouraged by their responses, Dr. Klinger went beyond her undergraduate studies to pursue a doctorate.

In Michigan, Dr. Klinger has practiced clinical psychology for 20 years, assessing and treating children, adults, couples and families. She also taught full-time for nine years as an Assistant Professor within the Psychology Department of University of Detroit Mercy. She became most well known for her undergraduate and graduate level courses that explored identity formation in the context of our multifaceted socio-cultural complexity.

Dr. Klinger has also been recognized for her research, assessments, and psychodynamically-informed work in organizations, including interventions that have focused on Crisis and Trauma Recovery, Leadership Development,

Organizational Culture Change, and Psychodynamic Process Consultation. In addition, she has served as an American Red Cross Disaster Mental Health Volunteer for more than 10 years, training psychologists, nurses, social workers, and psychiatrists to be first responders in tragedies like the Oklahoma City Bombing.

Dr. Klinger is a member of the American Psychoanalytic Association and American Psychological Association. She was recently named a Fellow to Michigan Women Psychologists and, in 1992, to The Michigan Psychological Association for her community field work in crisis and trauma response and recovery.

Dr. Klinger is married to Paul Klinger; she has one daughter, Sara. In her spare time, she continues to work in the arts, and is especially happy when she can spend time writing and performing music with her family. Dr. Klinger also creates visual illustrations for classes and trainings to stress the many ways that the mind shapes who we are, what we express, and our impact on the lives of others.



Dr. Monisha Nayyar graduated from the adult program on May 10, 2005 and will continue on to complete the child program. She obtained her undergraduate degree in Clinical Psychology from the University of Connecticut and her doctoral degree in Clinical Psychology from Wayne State University in 1985. She practiced for

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GRADUATES from 9

several years as a family therapist, utilizing a range of therapeutic techniques from behavioral to family systems and more dynamically-oriented approaches. She continued her training by taking the two-year adult psychoanalytic psychotherapy program after which she became a candidate. This introduction to psychoanalytic thinking was a natural extension of her interests as a clinician

Dr. Nayar works with individuals, couples and families and specializes in rehabilitation of the neurologically impaired and trauma work. She feels that her psychoanalytic training has enhanced her understanding of her patients as well as the quality of her services. In the course of her career she has had the opportunity to speak on trauma as well as rehabilitation psychology, particularly with respect to family adjustment concerns. She has written and presented on additional topics from a psychoanalytic perspective, including the role of religious icons and mythological figures as used within the context of traumatic experiences.

Currently, Dr. Nayar practices in Southfield and West Bloomfield. She is the proud mother of two daughters who remain her "biggest accomplishments in life." After graduation, her goals include expanding the understanding of psychoanalytic principles and creating liaisons with other disciplines and organizations. She also looks forward to spending more time pursuing other hobbies, which include gardening, hiking and reading.



Jon J. Markey, M.D. graduated from the adult program on May 10, 2005. He has been in the practice of psychiatry at his West Bloomfield office for ten years. The practice has encompassed the treatment of adults and children, both for which he is Board Certified. Dr. Markey is the sole child psychiatrist at William Beaumont Hospital's Center for Human Development (CHD). Dr. Markey is member of a multidisciplinary team at the Center. His specialty is to diagnose and differentiate neurologic and psychiatric disorders in children and adolescents statewide who present to him. Dr. Markey has been on staff at Beaumont for six years.

Dr. Markey graduated cum laude from the Detroit Psychiatric Institute and received the First Annual Thomas Petty, M.D., original paper award. He completed his medical degree at the Wayne State University School of Medicine. His master's degree in Biological Sciences and an undergraduate degree in Humanities and Biological Sciences were obtained also from Wayne State University. Dr. Markey studied sleep disorders extensively at the Henry Ford Hospital Sleep Research Center, and three publications resulted from this research.

Dr. Markey has served in the instruction of residents and medical students throughout his career at William Beaumont Hospital, Wayne State University Medical School, University of Michigan Medical School, and Henry Ford Hospital. He served as the Chief Resident at the Hawthorn Center where he completed his Fellowship in Child Psychiatry.

Dr. Markey has been married to his wife, Barbara A. Markey, M.D., for 17 years. They live with their two children; David, age 8, and Grace, age 6, in their West Bloomfield home. In his leisure time, Dr. Markey enjoys reading, tennis, running, skiing, and gardening. ❖

Member News

Richard Hertel, Ph.D. chaired a discussion group entitled "Trauma in the Transference" at the June '04, January '05, and June '05 American Psychoanalytic Association meetings. In this group, colleagues present clinical material involving their patient re-experiencing with the analyst some aspect of a previous trauma. Attendance has been high (40-55) and has included people who have published in this area.

Dr. Hertel also chaired a panel of the recent International Psychoanalytic Congress meetings in Rio entitled "Trauma and Dissociative States." His work with a local psychotherapy discussion group and a local trauma discussion group are also continuing.

Dr. Hertel will be giving a paper, "Visual Impairments and Emergent Character Defenses" at the Michigan State Medical Society Foundation 140th Annual Scientific Meeting in Troy, Michigan.

Julie Jaffee Nagel, Ph.D. was invited to be a member of the University Forum subcommittee of the Program Committee of the American Psychoanalytic Association.

FREE ASSOCIATIONS

Newsletter of the Michigan Psychoanalytic Institute and Society

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Peter J. Blos, Jr., M.D. announced that June 15, 2005, was the last day of his clinical practice of child, adolescent and adult psychoanalysis. He will continue being available for supervision, teaching and consultation.

In June, Dr. Blos was elected to the Board of the International Psychoanalytic Association as the Global Representative from North America. (As such, he is one of the seven North American elected representatives, voted on by the entire IPA membership.) In July, at the first Board meeting after the Congress in Rio de Janeiro he was elected to be the North American representative to the Executive Committee. He was also appointed to be Chair of the Committee on Developing Psychoanalytic Practice and Training. This Committee provides grants to study what can be done in various areas of the world to improve practice and increase training interests.

Dr. Blos is continuing to teach in the week-long seminars of the IPA-sponsored Psychoanalytic Institute of Eastern Europe (PIEE). In October he will be in Rabach, Croatia, for the seminars devoted to child and adolescent psychoanalysis. In February, 2006, he will be in Riga, Latvia, for the seminars devoted to psychoanalytic candidates of the PIEE.

Ronald M. Benson, M.D. was the keynote speaker at the Cincinnati Psychoanalytic Institute's retreat on September 30 and October 1, 2005. The title of the retreat was, "The Future of Psychoanalysis; the Future of the Cincinnati Institute". Topics addressed were the relationship of child and adult psychoanalysis, a model for optimal faculty involvement, a vision for future psychoanalytic training that takes into account the cost and benefits of training, and a corporate culture where leadership is sought and leaders are supported. This retreat was designed to produce a vision for the next phase in the development of this venerable Institute.

Jean-Paul Pegeron, M.D. has had a paper accepted for publication in a special edition of the *Psychoanalytic Inquiry on Psychoanalytic Education*, which will appear in 2006. The title of his paper is: "A Course on the Supervisory Process for Candidates...and Supervisors: An Attempt to Address Inconsistencies in Psychoanalytic Education and the Fundamental Paradox of Psychoanalytic Education". Dr. Pegeron wants to take this opportunity to thank all of the candidates and graduate analysts who took the course and provided him with the feedback which he incorporated into the paper.

Patricia L. Gibbs, Ph.D. will present her paper, "Storytelling in Cyberspace: Analysts' Use of the Internet and Ordinary Everyday Psychosis" at the Sixteenth Annual Conference of the International Federation for Psychoanalytic Education (IFPE) on October 22, 2005, in Ft. Lauderdale, Florida. A later version of the paper, entitled, "Reality in Cyberspace: Analysts' Use of the Internet and Ordinary Everyday Psychosis" was accepted for publication by the *Psychoanalytic Review*. ♦

Publication Notices

Boesky, D. (2005). Analytic Controversies Contextualized. *Journal of the American Psychoanalytic Association*, 53: 835-863.

Cogan, R. & **Porcerelli, J.** (in press). Personality disorders and adaptive functioning of patients beginning and ending psychoanalysis. *Psychology & Psychotherapy: Theory, Research and Practice*.

Cogan, R. & **Porcerelli, J.** (in press). Changes in personality during the first 6 months of analysis using a clinician Q-sort measure: A preliminary report. *Journal of the American Psychoanalytic Association*.

Huprich, S., **Porcerelli, J. H.**, Binienda, J., Karana D. (in press). Functional health status and its relationship to depressive personality disorder, dysthymia, and major depression: Preliminary findings. *Depression & Anxiety*.
Kim, M., Cogan, R., Carter, S., & **Porcerelli, J. H.** (in press) Defense mechanism and self-reported violence toward strangers. *Bulletin of the Menninger Clinic*.

Layne, J. & **Porcerelli, J. H.**, & Shahar, G. (in press). Psychotherapy of self-criticism in a case of mixed anaclitic-introjective depression. *Clinical Case Studies*.

Liebman, S., **Porcerelli, J.**, & Abel, S. (in press). Reliability and validity of Rorschach aggression variables in an adjudicated sample. *J Personality Assessment*.

Porcerelli, J. H., Shahar, G., Blatt, S. J., et al. (in press). Object relations following intensive psychoanalytically-oriented inpatient treatment. *Journal of the American Psychoanalytic Association*.

Porcerelli, J., West, P., Binienda, J. & Cogan, R. (in press) Physical and psychological symptoms in emotionally abused and non-abused women. *Journal of the American Board of Family Practice*.

Cogan, R. & **Porcerelli, J.** (2005) Personality disorders and adaptive functioning of patients beginning and ending psychoanalysis. *Psychology & Psychotherapy: Theory, Research and Practice*, 78, 235-248.

Liebman, S., **Porcerelli, J.**, & Abel, S. (2005) Reliability and validity of Rorschach aggression variables in an adjudicated sample. *Journal of Personality Assessment*, 85, 31-37.

Cogan, R., **Porcerelli, J.**, Kamoo, R., & Leitman, S. (2004). Defense mechanisms & violence toward partners and strangers: Defense Mechanisms Manual and Defense Mechanisms Rating Scale. *Journal of the American Psychoanalytic Association*, 52, 477-478.

Cogan, R., & **Porcerelli, J. H.** (2004). Personality pathology, adaptive functioning, and strengths at the beginning and end of psychoanalysis. *Journal of the American Psychoanalytic Association*, 52, 1230-1231.

Cogan, R., Stringer, C. A., Aldredge-Clanton, J., & **Porcerelli, J. H.** (2004). Diagnosis of ovarian cancer: Regression in early memories in the face of danger. *Journal of the American Psychoanalytic Association*, 52, 1242-1243.

Porcerelli, J., Cogan, R., Kamoo, R., & Leitman, S. (2004). Defense mechanisms & self-reported violence toward partners and strangers. *J Personality Assessment*, 82, 317-320. ♦

CALENDAR

October 22 Farmington Hills
"Finding A Voice': A Useful Metaphor in Working
With Inhibitions of Self -Expression in Women"
Aisha Abbasi, M.D.

November 11 Troy
Michigan Psychoanalytic Foundation Benefit

November 11 Ann Arbor
UMIPS Brown Bag Discussion
"The 'School Romance': Psychoanalytic
perspectives on the subjective experiences of
students, educators, and parents"
Daniel Frank, Ph.D.

November 13 Ann Arbor
Reel Deal - Kinsey

November 17 Farmington Hills
"Psychoanalytic Perspectives on Music and
Its Interpretation"
Julie Nagel, Ph.D.

December 3 Farmington Hills
MPI Open House

January 14 Farmington Hills
"Report of an International Disaster Mental
Health Intervention"
Alan Krohn, Ph.D.

February 11 Ann Arbor
"Anniversary Reactions: Historical Overview
and Clinical Relevance"
Jon Markey, M.D.

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