Dear Fellow Members,

Those who were in Toronto experienced the benefits of first-class organization and hospitality at our annual meeting. Those who were not able to attend had the consolation of reading the abstracts and summaries of the panels, workshops, and Heiman van Dam's Kris Lecture in the June issue of our Newsletter. They were compiled through the diligent and timely work of Kent Hart’s committee of reporters and abstracters, then edited by Kent and by Paul Brinich. The Toronto arrangements committee, ably chaired by Elizabeth Tutors, assisted by Nancy Hall and Rachel May of our staff, deserve our appreciation for a job well-conceived and well done.

As we plan and prepare for our next meeting, in Chicago, there are several developments that will become agenda items by then. Starting in Charlie Mangham's years as president of the ACP and continuing through Peter Blos Jr.'s years, we have been taking stock of ourselves organizationally, reviewing what we could do, what we would like to do, and what we are able to do. This has been particularly difficult since the times are not only changing but changing with great rapidity, moving in directions currently unclear and/or undesirable. I have asked Marty Silverman to chair our new Committee on Long-Range Planning and have recruited several of our more active members to participate. If you have some strong convictions and/or ideas concerning where you would like to see the ACP go in the coming years, or ideas about how best to get there, please call or write Marty or me.

As with many organizations where its members come into professional maturity rather late in life, a great proportion of our members are in their 60s and 70s. Whether to label these members “old,” “older,” or “more mature” would indeed convey an attitude, especially since I am now a member of that no-longer-select group. Not only do these members affect our dues income, but I think they may also affect the image of the ACP as well as our functioning. I believe that candidates and newer members should be represented in our committees and be active participants in the many other functions of our organization. Accordingly I have asked Stevie Smith to contact our candidate members and newer members to encourage their participation in the work and activities of the ACP. I fear that for many we will be too late, their time being already committed to teaching, consultation, and committee work for other organizations. I hope that there are many with some measure of organizational time available who would welcome the opportunity to be involved with the ACP. If Stevie has not contacted you, please don't hesitate to contact her at (617) 492-8541.

Much effort and expense has focused on having our central office functioning well and up to speed. While costly, we now have the computer, the software, and the printers that we need and everything has been transferred to our New Jersey site. It will not be long before you will receive the benefits of these efforts, namely an up-to-date roster of the ACP. It is still not too late for last-minute changes to be included in the roster (including FAX numbers, e-mail addresses, and so on). Please get them to Nancy Hall as soon as possible. A form appears on page 11 of this issue of the Newsletter. In the meantime our program committee and our Chicago arrangements committee are preparing a scientific and social event for our next annual meeting, scheduled for March 29-31, 1996. Our meetings have aimed for an enjoyable balance of scientific interest and social collegiality in a hotel and city that has something for almost everyone. Our Chicago meeting will be no exception. Save the dates.

Unlike past meetings, CME credit will not be available. We were under the impression that many of our medical members did not need the ACP credits and in all likelihood they were able to get the required CME credits from other sources. In not renewing our accreditation for CME we have saved a $1500 application fee (due every five years) plus an annual fee of $500. We hope that our reasoning and assumptions are correct. Our accreditation for CE credits with the American Psychological Association is, however, still in force. Your feedback on...

(Continued on page 2)
President’s Message . . .

(Continued from page 1)

these matters is welcome.

At the Chicago meeting we are thinking of re-instituting an aspect which has been absent from our more recent meetings. Karen Marschke and Cliff Wilkerson are exploring the possibility of a meeting on Sunday afternoon - following the Marianne Kris lecture -- for those mental health professionals who are not members of the ACP but who are interested in child analysis and its application in a variety of settings. I will have more to report on this and other matters after the December Executive Council meeting.

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Book Notice

Reconstruction in Psychoanalysis
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by
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“In this book Dr. Blum offers us a most comprehensive review and integration of current theory and practice regarding the problem of reconstruction in psychoanalysis. Based on the deliberations over many years by some of the most experienced analysts in the field, buttressed by rich clinical evidence, and incorporating the relevant findings of recent work in child observation, this volume lends an authoritative voice to a fundamental but perplexing problem of psychoanalytic theory and technique. For many years Dr. Blum has studied every aspect of the problem of reconstruction. His original critiques and his creative insights make this volume an important contribution to the literature.”

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Note to contributors: Send contributions to the Editor at the address above. Deadlines fall one month before our publication dates of March 1, June 15, and October 15. If possible, send both hard copy and word processor files on floppy disks (3.5 or 2.5 inch) MS-DOS format files (e.g., WordPerfect, MS Word) are preferred (including those created under Windows) but Macintosh format files are also acceptable. Contributions can also be sent via E-mail.

2
The Twenty-Sixth Annual Margaret S. Mahler Symposium

Intimacy and Infidelity:
Separation-Individuation Perspectives

Reporter: William M. Singletary, M.D.

On Saturday, May 6, 1995, Selma Kramer, M.D. presented the psychoanalytic community with the 26th Mahler Symposium, again co-sponsored by the Department of Psychiatry and Human Behavior of Jefferson Medical College and the Philadelphia Psychoanalytic Institute and Society, with the enthusiastic encouragement of the Margaret S. Mahler Research Foundation. As usual, the audience included prominent members of the psychoanalytic community from Philadelphia, New York and Washington, as well as prominent child psychiatrists and other workers in the mental health field. Conference attendees included: Troy Thompson, Chairman of the Department of Psychiatry at Jefferson, Anni Bergman, Bernard Pacella, Eleanor Galenson, Donald Meyers, Patricia Nachman, Charles Socarides, Ed Kessler, Eilene Sackler-Lefcourt, Wendy Olesker, and Patsy Turrini. In her opening remarks, Selma Kramer, M.D. noted the probable relationship between the development of a hierarchy of attachments in early childhood and the later capacity for intimacy and fidelity. The child who is discriminating in his attachments and will not turn to just anyone is most likely a child who will eventually be capable of intimacy and fidelity.

In his presentation, "Intimacy and Individuation", Alvin Frank, M.D. focused on the vicissitudes of individuation as shaping the experience of intimacy. He began by noting that while intimacy involves closeness and familiarity, it follows a developmental line. Experiences of intimacy, as well as anxieties and pathologies concerning intimacy, are different in each developmental stage. He referred to Erikson's assertions that a sense of identity is a necessary prerequisite for the experience of true intimacy and that the avoidance of intimacy because of fears of merger, fusion, and ego loss may lead to a sense of isolation. Dr. Frank presented the case of a young man who sought treatment because his fears kept him from having sexual or intimate relations with a person. He experienced a number of anxiety symptoms with obsessive and phobic features. At times he was terrified that he would not be able to control his actions, that he would run amok, and possibly throw himself into an obstacle.

A number of circumstances in this man's early life, including deprivation and rejection, interfered with individuation. From early in life he was burdened by anxieties related to a frightening and unsupportive environment, as well as to the danger of his own rage and to a fear of loss. While he wished for merger with another in intimacy, his concrete conception of merger as a literal experience made intimacy terrifying to him. His pathologic compromise involved finding intimate fulfillment in "twinships", where he could simultaneously merge and be reassured of his separateness as being one of a pair. However, in trying to be both merged and separate, he could be neither. Envy and jealousy were important components of these relationships.

While the patient showed symptomatic improvement, in the analysis there was no convincing evidence of an object transference and no significant deepening of his presentation as a psychological being. He seemed to form a self-object transference with the analyst fulfilling intrapsychic functions consistent with a greater degree of individuation. In general, the meaning and the impact of the analyst were muted except during the analyst’s absences. At those times the patient attempted to face feared situations and demonstrate his selfness by overcoming his symptoms; these attempts were rarely successful.

In early life, disappointments and hurts are experienced as products of infidelity. This patient continued to experience disappointments and losses as infidelities and betrayals. The resulting bitterness and rage interfered with the development of psychological structure as typically occurs when the inevitable losses associated with growth and with living lead to identifications and internalization. This interfered with the process of individuation. A vicious circle was established whereby, as in early childhood, losses were experienced as infidelities and betrayals. The rage and bitterness associated with losses then interfered with the development of psychic structure via internalization following losses. In turn, this interfered with individuation and the development of emotional maturity.

In her discussion of Dr. Frank's presentation, Helen Meyers, M.D. agreed with Dr. Frank that the development of intimacy involves many developmental stages and that there are many different forms of intimacy in adult life. Dr. Meyers considers intimacy to involve a partial or temporary symbolic merger, a limited crossing of the boundaries, while, at the same time, separateness and individual identity are maintained. Thus, she agreed with Dr. Frank that a successful separation-individuation process, with the establishment of boundaries between self and object and the development of a separate self, as well as the development of a sense of identity, are prerequisites for the adult capacity for intimacy. Dr. Meyers thinks that Kohut may have misinterpreted Mahler's separation-individuation process as leading to a goal of isolation rather than a goal of relatedness and the capacity for intimacy between two separate and individuated people.

In “Transformations of Narcissism: From ‘Omnipotentiality’ to Fidelity,” Louise Kaplan, Ph.D. focused on a central theme in Margaret Mahler's writings, the transformations of narcissism which play a crucial role in the regulation of human moral life. Dr. Kaplan noted...

(Continued on page 4)
Intimacy and Infidelity . . .

(Continued from page 3)

Erickson's definition of fidelity as the capacity to pledge one's loyalty to ideals and social values. Dr. Kaplan implied that the bonds of affection between parent and child facilitate the development of the adolescent's capacity to make moral and ethical commitments. She emphasized that Mahler, drawing on the work of Spruiell, made a distinction between certain aspects of narcissism. Mahler stressed that self-love and self-esteem depend on object relations, while omnipotence is related to aggressive strivings and individuation and is fueled from within.

Dr. Kaplan chose to focus on the relationship between transformations of omnipotence and fidelity. She noted that Mahler considered the main source of narcissistic enhancement from within to be the infant's autonomous achievements of the practicing subphase and that Mahler felt that during the rapprochement subphase the infant's sense of omnipotence, which is shaken by the development of representational intelligence, is specifically vulnerable. In adolescence, personal narcissism must be deployed into impersonal ideals that involve an individual's attachment to a new family and to the human community, to society and civilization.

Transformations of adolescent omnipotence are most closely related to the regulation of aggression. Drawing on the work of Parenis, Dr. Kaplan discussed the role of adults in society in general in providing a cultural life which can contain destructive aggression and facilitate the maturational processes whereby omnipotence and non-destructive aggression are employed in contributing to culture and civilization. However, when the adolescent process involves narcissistic mortification, then omnipotence and aggression can acquire destructive aims against civilization itself. The humiliation that accompanies libidinally frustrating object relationships is a major factor in transforming aggression into a destructive force. Likewise, humiliations related to cultural deprivations may lead to a hostile response to social reality. This is seen in vandalism and homicide. The emergence of fidelity depends on a youth's ability to find, in the larger social order, values or ideals which can accommodate her moral aspirations and to which she might be true.

Drawing on the work of Pumpian-Mindlin, Dr. Kaplan then considered adolescent "omnipotentiality" and its transformations. While adolescent fantasies of power are potentially realizable, they are actually possible only if they are brought into harmony with the demands of civilization. Also, adolescent omnipotentiality can be transformed into adult power and authority. However, for this to occur, an adolescent needs to challenge the established social and cultural order, to test her omnipotence against reality, and to push against the boundaries and limitations of the adult world. Adults need to recognize the necessity of this unsettling process for the future of civilization and for the renewal of the ethical possibilities of society. In addition, adults should be aware that adolescents want to be able to respect and emulate us and that adolescents need adults who represent and convey social values and ideals capable of inspiring fidelity in them.

In his discussion of Dr. Kaplan's presentation, Eric Lager, M.D. expressed appreciation of Dr. Kaplan's cultural considerations in the development of fidelity. Dr. Lager stated that the possibility for the development of fidelity in a given culture reflects the degree of equality between men and women and the level of interest in the emotional development of children. Cultures in which one sex is dominant produce a high rate of infidelity. Also, the development of object constancy, which depends on early parent-infant interactions, is a necessary step toward the eventual development of fidelity. Dr. Lager then presented a thought-provoking discussion which combined the psychoanalytic and anthropological viewpoints and examined cultural factors which influence the development of fidelity.

In "Second Adolescences and Fourth Individuations: Male Infidelity in Long Marriages" John M. Ross, Ph.D. presented a clinical example to illustrate his view that pressure toward further individuation can motivate adultery in men, who mostly suffer from moral masochism, after many years of marriage. The primary focus was on the husband's projecting a paternal superego transference onto his wife from whom he then seeks to individuate through an affair.

Dr. Ross considers individuation to be a complex process of self-articulation and self-sufficiency which evolves throughout life. Dr. Ross briefly noted his conviction that an unconscious fantasy of masochistic and homoerotic submission to the same-sexed parent lies at the core of neurotic conflict and the tendency to submit to a sadistic superego in male masochism. While such fantasies contribute to the development of object constancy, they are oedipal in origin and are recast in adolescence. He went on to discuss the ego ideal and related paternal transference phenomena in later life. Dr. Ross drew on Mahler's concept of individuation as elaborated by Peter Blos in his consideration of adolescence as a second individuation in which the son needs to replace his tender, dependent, and submissive relationship to his father with his own set of ideals, injunctions, and value system. Dr. Ross stressed that it is in the sphere of the ego ideal that further individuation can take place in adult life. However, such changes in adult life are not inevitable and, when they occur, do not involve the core self representation.

Dr. Ross then turned to his own thoughts about the developmental uses of romantic love in a man's late adolescence and early adulthood. Through identifications with his female beloved's femininity, his own critical conscience is softened, and his ideals and values become less stereotypically masculine. In modifying those aspects of his superego which reflect masochistic submission to his father and efforts to win his father's love, the young man becomes more of his own person, better individuated. However, over time a regression ensues; men seem to be uncomfortable with the freedom of autonomy and seem to

(Continued on page 5)
need their authority figures and moral masochism. The man eventually transforms his wife into a father figure who demands duty and performance and imposes her ideals and values on him. In this process, emotional and erotic tendencies are diminished. This gradual change usually indicates the return of the former homoerotic, masochistic submission to the parent of the same sex. This is accompanied by dependency, moral masochism, and self-denial along with inhibition of initiative and purpose. The husband is unable to see his wife as the person she is.

In a repetition of the adolescent process, the husband seeks a new lover with whom he can identify and become more of an individual. Dr. Ross emphasized that even though this enterprise may be misguided and the results may be destructive, that there is a progressive impetus here. However, such efforts usually do not accomplish their developmental goals.

In his discussion of Dr. Ross's presentation, Lawrence Blum, M.D. considered his ideas concerning men's paternal transferences to their wives to be a valuable clinical observation. However, he expressed some doubt that the patient whom Dr. Ross presented was primarily undergoing a process of individuation through his affairs. Dr. Blum raised the possibility that this patient's infidelity primarily reflected neurotic conflict. He then asserted that egocentric and narcissistic issues, including feelings of omnipotence, underlie oedipal wishes. He added that the analysis of egocentric and other narcissistic features of neurotic patients is a common and essential feature of most analyses which sometimes goes unmentioned.

As always, the program concluded with a spirited discussion among panelists and guests. Issues raised included: to what extent does a culture nurture empathy and sharing versus narcissistic object choices; the importance of the early attachment to mother for the later development of the capacity for fidelity and intimacy; and the fact that the search for individuation is a lifelong process. In closing, Dr. Kramer invited us back to next year's 27th Mahler Symposium.
News from the Committee to Coordinate Assistance in Child Analysis in Eastern European Countries

Lilo Plaschkes, MSW, Chair

[What follows is a report forwarded to us by Lydia Tischler, a Hampstead-trained child analyst in London.]

1. The Child Section of the Czech Society for Psychoanalytic Psychotherapy (CSPP), an organization founded in 1993, has received a travel grant from the British Council. This grant allows the CSPP to invite members of the Association of Child Psychotherapists (the UK professional association which includes many graduates from the Anna Freud Centre and from the Tavistock Clinic's child psychotherapy training programme) to assist the CSPP in setting up a training in psychoanalytic child psychotherapy. Mrs. Miranda Feuchtwang and Mrs. Lydia Tischler will coordinate the programme from the London (ACP) side; they plan to visit Prague from February 9 - 11, 1996. [An outline of the proposed training programme appears later in this article. Ed.]

2. The European Federation for Psychoanalytic Psychotherapy in the Public Sector (EFPP) includes psychotherapists working in national health networks throughout the European Union Countries (EUC). At the EFPP meeting in March, 1995, delegates agreed that "Affiliate status may be accorded to organizations in other [i.e., non-EUC] European countries."

Lydia Tischler has agreed to act as co-ordinator for Central and Eastern European countries and, as a first step, will gather the following information:

- the names of training institutes
- information about the quality of their training programmes
- the names of groups of psychoanalysts and psychoanalytically-oriented psychotherapists which already exist at local, regional, or national levels
- details regarding the activity of EFPP members in training activities in these countries.

[Our own members might wish to inform Lydia Tischler of any training activities by ACP members which are planned or which have already taken place. Ed.]

3. The Second Conference of the EFPP, held in de Haan, Belgium from October 13-15, 1995 included a workshop on the development of links with Eastern and Central Europe. Participants included Dr. J. Harnatt (psychiatrist and psychotherapist from Hungary) and Ph.Dr. Michael Sebek, C.Sc. (a "direct" member of the IPA and a training analyst in Prague). This proved to be a very useful beginning of a dialogue with colleagues from Eastern Europe.

Proposed Child Psychotherapy Training Programme

Potential course members will be psychoanalysts or candidates from the psychoanalytic institute of the Czech study group of the IPA -- psychotherapists who will already have a grounding in basic psychoanalytic theory and concepts. The expertise lacking in the Czech Republic specifically concerns supervision of psychoanalytic work with children and adolescents.

The proposed training programme appears feasible within the constraints of the current situation. It covers some of the components of the minimum training standards laid down by the EFPP. In addition to the course co-ordinators and supervisors, specialist tutors will be invited as guest speakers from the Anna Freud Centre, the British Association of Psychotherapists, and the Tavistock Clinic. The course will run over six weekends per annum, with seminars and supervisions on Friday evenings, all day Saturday, and Sunday mornings.

The theoretical seminars will cover the following topics:

**Childhood development and its disturbances**
- Early infant development; mother-child interactions and interventions
- Assessment, based on Anna Freud's Profile and including defense mechanisms
- Latency; learning difficulties and behaviour problems
- Adolescence and disturbances of adolescence (e.g., anorexia nervosa, sexual deviations, delinquency)
- Psychosomatic disorders
- Borderline, atypical, autistic, and psychotic children
- The work of Melanie Klein, Anna Freud, and Donald Winnicott

**Aspects of practice and technique**
- Play and symbolic communication
- Transference and counter-transference
- Work with parents.

[In addition to the above, Ms. Tischler sent on to us a summary compiled for the EFPP by Leena Hästbacka of Finland which details, on a country-by-country basis, some of the developments regarding psychoanalytic child and adolescent psychotherapy in Eastern European countries. An edited version of that summary appears below. Ed.]

**Estonia**

Some Swedish psychoanalysts have lectured on psychoanalytic subjects in Tallinn. In September, 1994 the Helsinki Society of Psychotherapists started a training in psychoanalytic psychotherapy for ten Estonians. They visit Helsinki for weekends twice each month over a three-year period. The training follows the principles used in Finland and includes seminars, supervisions, and personal psychotherapy. The training is supported through voluntary fund-raising efforts. In addition, two Estonians are currently candidates in psychoanalytic training in Finland.

Swedish family therapists have been in contact with child and adolescent psychiatric clinics in Tarto; some Finnish psychotherapists have been in contact with child psychologists in Tarto. Two Estonians have been to Sweden for one-month-long lessons in testing and diagnostics; others have sought test materials and instruction in testing on a private basis in Finland. There has been a suggestion that the Swedes may try to get funds to train two young Estonian child psychologists in child psychotherapy over a four or five year period; the hope would be that these two might provide psychotherapy and training to others in Estonia.

An Estonian psychologist has written stating that they very badly need education and training in child and adolescent psychotherapy but that they are without financial resources; they

(Continued on page 7)
hope for help from the EFPP.

Lithuania
Five Lithuanians have been in psychoanalytic training in Finland since 1990. It is hoped that they will return to Lithuania in one or two years. The Lithuanian Association for the Application of Psychoanalysis in Vilnius has seven members who are doing child therapy. Two have visited the Anna Freud Centre for three months. They have seminar leaders from Finland, Holland, and Germany on topics such as "Transference in child analysis and child therapy." While they started a training in psychodynamic therapy last year, this includes little regarding child psychotherapy. Lithuanian psychotherapists have requested help in organizing weekend seminars for child psychotherapists; these might be held two or three times each year over two or three years. They would be available to Polish psychotherapists as well. While they are unable to provide funds, they can provide accommodations.

Latvia
An "East European Summer School" was held in Estonia this past summer; the teachers were IPA psychoanalysts and some Latvians were able to attend. The EFPP has had contact with a child psychiatrist working in a family center in Riga.

Hungary
Hungary has a long tradition in psychoanalytic child psychotherapy and their psychoanalytic training is quite advanced. A child therapeutic clinic in Budapest trains child therapists. The training includes personal therapy, small-group work, and mother-infant observation. A child and adolescent psychotherapy clinic in Budapest treats mostly adolescents using mainly brief therapy methods. There is also a psychoanalytic institute of child and adolescent therapies. All told, there are 22 child guidance clinics throughout Budapest. Most include some psychoanalytically-trained child therapists. There are also some child analysts in Hungary who provide lectures, seminars, and supervision.

Poland
Poland has had a good deal of contact with British psychoanalysts. There is a Polish Association for the Development of Psychoanalysis in Warsaw. Belgian and French psychoanalysts have visited Poland as well, and every second month Swedish psychoanalysts provide seminars and supervision in Poland. Some child psychotherapists from England have contacts in Krakow.

Russia
There are psychoanalytic institutes in Moscow and St. Petersburg; they have contacts especially with German psychoanalysts. Some English child analysts and child psychotherapists have visited these institutes.

Czech Republic
The Czech Association for Psychoanalytic Psychotherapy was founded last year in Prague and includes a child and adolescent section. There is also an IPA-sponsored study group. Czech therapists have asked British psychoanalysts to organize a training in child psychotherapy.

Rumania
French psychoanalysts have visited Rumania and plan to organize regular cooperative visits every second month. Two psychoanalysts from Paris have been to Rumania to help with the treatment of children. They are financed by non-governmental subsidies. One Swedish psychoanalyst visits Rumania twice each year, teaching and supervising psychoanalytic psychotherapy. One Rumanian psychologist is starting her psychoanalytic training in London this year.

Croatia
Italian psychoanalysts have a continuous relationship with Croatia. Two French psychoanalysts visit Zagreb twice each year on a regular basis.

Slovenia
Italian psychoanalysts, together with Slovenes and Croats, plan to organize a psychoanalytic training. Italian psychoanalysts visit Slovenia regularly and provide financial support for a regular series of seminars and supervision.

Additional Remarks
There is much interest throughout Eastern Europe in psychoanalytically-oriented education and training. However, there is little in the way of systematic training. The EFPP has receive requests from various countries where mental health professionals would like help in providing psychoanalytic psychotherapy to children and adolescents.

[It is heartening, in these days of "managed care" and shrinking support for intensive, careful analytic work, to hear reports like these from our colleagues in Eastern Europe. We hope that "our" ACP members will find ways to add their efforts to those of the ACP/UK and the EFPP. Many of us have links to Eastern Europe via either our personal or our psychoanalytic heritage; it would be especially gratifying to contribute to the re-establishment of child psychoanalysts in the places where it first flourished three quarters of a century ago. A form appears on the back page of this issue of the Newsletter upon which members may indicate their interests in and links to Eastern Europe. Ed.]
Notes from the Internet

From Judy Chused [Washington, DC, USA]

This year a series of child seminars on The Mind of the Child Analyst at Work will be held jointly by the Washington and Baltimore-Washington Psychoanalytic Institutes in anticipation of the annual meeting of the Association for Child Psychoanalysis, scheduled for March 29-31, 1996 in Chicago.

These seminars (the second in a series sponsored jointly by the two institutes) will focus on the experience of the child analyst during analytic sessions. We will look at how our thinking is informed by our observation of the child, our theory, as well as our affective and behavioral responses in the moment-to-moment interaction with the child. During the seminars we hope to clarify how our experience during the sessions and our theory mutually influences each other. We also are interested in examining how we process information from various sources (internal and external) when making interpretations or clarifications.

There will be a total of five sessions, one and one half hour in length, beginning at 8 p.m. The first seminar will be on Wednesday, October 25, 1995 at Dr. Paula Atkeson's home. Tentative dates for subsequent seminars (all on Wednesday evening at 8 p.m.) are: November 29, 1995 and January 31, February 21, and March 6, 1996. Each seminar will begin with the presentation of process notes from the analytic treatment of a child or adolescent, followed by a discussant/facilitator speaking briefly of how he heard the material and what he believes informed his hearing. After this the floor will be opened to a general discussion of alternative modes of listening/processing the analytic hearing. After this the floor will be opened to a general discussion of how he heard the material and what he believes informed his or adolescent, followed by a discussant/facilitator speaking briefly.

GRANTS APPLICATION REMINDER

Please be advised that applications for grants for 1996 need to be received by us by the end of December 1995. This year four grants were awarded, one to Cleveland, two to the Anna Freud Centre, one to the New York Freudian Society. The grants are made in support of low fee child analytic training cases, to specific individuals in training, sponsored by their educational institutions. A continuing stipulation is that the training institution must match our grants. These awards are made during our annual meeting in the Spring each year.

(Continued on page 10)
The Parent Child Center is a place where parents and children gather weekly and interact with other parents and children in a cheerful, safe environment. Parents learn by sharing their concerns and questions with other parents and with a group leader, a child psychoanalyst, and other professionals who give feedback about the child's play and interactions.

Every week, while the children play, the parents discuss various issues, including: their own child's development, behavior, and activity; the importance of play for children and their parents; how young children and family members affect one another; the wide range of normal behavior; and how to deal with troublesome issues in a positive supportive manner. It's important for parents to know that there isn't one "right" way to raise children. At The Parent Child Center each parent enhances his or her own individual parenting style. The Center is a place which further learning and increases the joys in the relationship between parent and child, from newborn to age three.

Now in its fifth year, The Parent Child Center staff has developed a unique technique utilizing a parent-child focus of parent education. The groups are not simply parent discussion groups with parallel child play groups nor parent child activity groups. Parents both discuss their questions with each other and with the group leader as well as play with their children and watch their children play with other children, with other parents, and with the staff. The play of the children with the professionals in the group is used to demonstrate the importance of play for children and their parents. Parents' questions about their children often can be addressed most effectively by discussing the child's play and interactions in the group. Observing the interactions can help the parents better understand the needs of their children.

The child analyst facilitates discussion among the parents who discuss their child's development, behavior, activity, interactions at home, and the child's activity in the group. The child analyst provides general educational information about development as well as appropriate observations about individualized issues. An important function of the Center has been to help parents develop friendships with other parents of children of similar ages and extend their outside relationships. Group cohesion is an important factor which is helpful for the parents.

The Teacher/Program Coordinator develops activities for the children and supervises the staff who work with the children. The staff observe the developmental levels of the children and participate in the discussions with the parents, especially with regard to pertinent developmental observations. The developmental observations are integrated during discussions with the Program Coordinator after the group and in the weekly staff meetings in order to enhance the communications to the parents.

Some of the important themes that are of concern to parents include: sleep problems; conflicts around baby-sitting arrangements; anxieties about leaving the baby; problems as a result of father's absence from the child's life (although strongly encouraged, not many fathers have actually attended groups); weaning; sibling rivalry; anxiety about anticipating changes; discipline; and differences of opinion between mother and father. Many mothers compare and contrast their manner of interaction with their child and their own mothers' interaction with them. New mothers often voice a need for "permission" to be the mother (replacing their own mothers, so to speak). This concern is often accentuated with adoptive parents and with parents who have had IVF (in vitro fertilization).

One issue which has been central for many, if not all parents, has involved accepting and dealing with the children's activity and aggression. Parents often are concerned about activity and aggression during all developmental stages. However, since many children often express anxious clinging behavior consistent with a rapprochement crisis during the second year of life, this is a time when parents can have a difficult time as the child struggles with his or her beginning sense of mastery and independent activity. Parents question themselves about how to limit aggression appropriately; how to differentiate between activity and aggression; and how to cope with their own anxiety about the children's beginning exploration. The parental concern with the child's aggression may manifest itself in a variety of ways:

1) Excessive anxiety and ambivalence about the child's difficulty with sleep: excessive worry about SIDS (sudden infant death syndrome) in babies or anxiety about allowing the child to fall asleep by him or herself.
2) Excessive anxiety about weaning and toilet training.
3) Many concerns about separation.
4) Problems with limit setting ("I am going to destroy my child if I get into a battle with him."). How do I teach my child to assert himself? To defend himself?
5) Some parents worry that they are too strict and others worry that they are too lenient.

5) Excessive anxieties about the child's beginning exploration.
6) Excessive fears of injuries and dangers.
7) The general theme of a conflict between too much control and too much gratification -- one parent may feel that the other is too strict or vice versa.
8) Power struggles between parents with regard to whether a child should be confronted with fears or helped to avoid fears.
9) Difficulties accepting a child's regression.

From the outset, The Parent Child Center has been a rewarding experience for both the participants and the staff. Regular staff discussions enable the staff members to learn and to continually refine their techniques. After each parent child group meeting the teacher coordinator reviews the specific activities and interactions with the staff members who work with the children. During weekly staff conferences information about the groups is shared and discussed among the entire staff. These weekly discussions are extremely valuable because in most situations there isn't a simple rule for the staff to learn and to follow in a rote manner. Some of the important issues which have been addressed continuously by the staff include:

1. The importance of finding a balance between direct advice and advancing and furthering a discussion among the parents.
2. How best to discuss an individual dyad's problem within a group setting.
3. How best to include and integrate the observations of the child's play and behavior in the discussions with the parents.
4. How to deal with a developmentally delayed child.
5. How to sensitize parents to the child's reactions to the

(Continued on page 10)
The Parent Child Center . . .

(Continued from page 9)

parent’s effect even when the words are not understood (since the discussions among the parents occur within earshot of the children).

6. How to introduce a problematic issue that the staff observes.

7. Other important issues include: problems encountered if the groups are too large or too small; pros and cons when the staff models for the parent; pressures of a single parent; impact of divorce on the children; problems with children who are difficult to comfort; issues of autonomy and language development; and how best to work with children who have trouble leaving their mothers’ side in the group, children who have tantrums, and those who want to leave the groups early.

8. We have worked with a fair number of twins and their parents. Some of the important issues have involved: one being more advanced than the other, one being more needy than other, and the parents paying more attention to the more demanding twin. Often parents feel ambivalent because of differences between the children and their own different reactions to the children.

9. Sometimes parents may request an individual consultation with the analyst leading the group. One or two meetings may be arranged for private discussion. Ongoing individual work with them by the group leader would become problematic and if necessary the parent is referred appropriately.

Anyone wishing further information about the Center, please contact the Director, Program Coordinator, or other members of the staff.

Executive Committee: Leon Hoffman, M.D., Director; Ted E. Becker, M.D., Donald Cohen, M.D., Michael Lack Fleisher, M.D., Salvatore Lomonaco, M.D., John B. McDevitt, M.D., Henry Nunberg, M.D.

Associate Directors: Wendy Olesker, Ph.D., Roger A. Rahzt, M.D., Susan P. Sherkow, M.D.

Professional Staff: Anna Balas M.D., Mary Sickles, M.D., Lissa Weinstein, Ph.D., Francoise G. Graf, M.S., Program Coordinator; Marlene Nunberg, Ph.D., Laura F. Rubinstein, C.S. W.

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CHILD ANALYSIS:
CLINICAL, THEORETICAL, and APPLIED

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and The Hanna Perkins Therapeutic School

CONTENTS, VOLUME 6, JUNE 1995:

On Working With and Through the Parents in Child Therapy .................................................. Erna Furman
Working With, Through, Alongside of, Without and In Spite of the Parents: Discussion of Erna Furman’s article .......................... Ava L. Siegler
Some Aspects of the Analyst-Analysand Relationship............................................................................... Robert A. Furman
Supporting Drive Fusion: Mitigating Destructive Aggression in Infants, Toddlers and Preschoolers......................... Thomas Barrett
Miriam Williams Reminisces ................................................. Miriam Williams
Consideration of Bi-Sexual Conflict: A Brief Review of the Biological Theories of Sexual Orientation: An Introduction to a Workshop-Seminar on Bisexual Conflicts in Children and Adolescents ..................... H. Michael Meagher
Gender Identity Disorder and Homosexual Wishes in Adolescent Girls: A Clinical Study......................... Anne Hurry, Marie Woods, and Deborah Bandler Bellman
Bisexual Conflicts in a Pre-Pubertal Boy: A Case Report ...................................................................... William C. Wimmer
Discussion of the Case of Marty................................. Anne Hurry

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Notes from the Internet . . .

(Continued from page 8)

For further details and applications, get in touch with Nancy Hall, our secretary.

Sam Weiss [CompuServe 70252,2263]

From Leon Hoffman [New York, NY, USA]

At the Toronto meeting, the Executive Council agreed to the formation of a Publications Committee which would develop a series of publications to communicate child and adolescent analytic and developmental principles to the public. It has been established that there are four categories of personnel that need to learn more about the value of child analysis and child analytic and developmental principles. These are adult analytic colleagues; mental health professionals such as psychiatrists, child psychiatrists, psychologists, social workers, and other mental health workers; pediatricians and school personnel; and parents and parent groups.

The substance of the publications would include parent-child issues, normal developmental issues, crises, indications for treatment, psychotherapy, dynamic psychotherapy, psychoanalysis, and particularly the special training of child analysts and how this training benefits the conduct of psychotherapy. After preliminary discussion, it seems that first audience to be addressed are adult analytic colleagues.

If any members of the Association are interested in the project, please contact the chair of the Committee on Publications, Leon Hoffman [CompuServe 73542,334]
Calendar of Events

November 10, 1995
Inaugural Joint Meeting, Psychotherapy Sections of the British Psychological Society and the Royal College of Psychiatrists

Psychotherapy and Attachment
The Royal Society of Medicine
1 Wimpole Street
London W1M 8AE ENGLAND
For further information contact Cassie Cooper
Psychotherapy Section, BPS
University of Westminster
Social and Policy Sciences
Harrow Campus
Northwick Park
Harrow HA1 3TP ENGLAND

November 30, 1995
Anna Freud Centenary Lecture
Attachment: Facing the Professional Demands of Today's Research Findings
Lecture by Penelope Leach
Edward Lewis Theatre, Middlesex Hospital Medical School, Windeyer Building
46 Cleveland Street
London W1 UK
For further information contact Janice Lucraft
The Anna Freud Centre
21 Maresfield Gardens
London NW3 5SH UK
☎ -------011-44-71 794-2313
FAX----------011-44-71 794-6506

December 1-2, 1995

Roster Update Form
Please complete this form (or a copy) and send it to our administrator, Mrs. Nancy Hall,
P.O. Box 253, Ramsey, New Jersey 07446 USA ☎/FAX (201) 825-3138 CompuServe: 76422,3352
so that we can be sure that your information is up-to-date and accurate in the ACP Roster which is currently in preparation.

Name: ________________________________________________________ Degree: __________
Home Address: _______________________________________________________
City: ______________________ State/Prov.: ______ Postal Code: _______________ Country: __________
Office Address: _______________________________________________________ Country: __________
City: ______________________ State/Prov.: ______ Postal Code: _______________
Preferred mailing address for ACP correspondence (circle one): Home   Office
Telephone Home: Country code:_____ Area code_________ Number: ______________
Office: Country code:_____ Area code_________ Number: ______________
FAX Home: Country code:_____ Area code_________ Number: ______________
Office: Country code:_____ Area code_________ Number: ______________
E-mail: CompuServe:_______________ Internet:_________________ Other: ______________
### Response form for ACP Members who are interested in helping the Committee to Coordinate Assistance to Eastern European Countries

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Do you plan to travel to any Eastern European countries in the near future?   Yes | No
If so, when and where do you plan to go?                                     

Have you already visited any Eastern European countries?   Yes | No
If so, where do you have some useful contacts?               

Have you given a workshop or paper in Eastern Europe?   Yes | No
If so, please provide details:

- **Audience:**
- **Topic:**
- **Supervision:**
- **Comments and ideas:**

Please return this form (or a copy) to
Lilo Plaschkes, MSW, 10 West 66th Street, Apt. 26C, New York, New York 10023 USA or call (212) 362-4983