Dear ACP Members, Colleagues and Friends,

First and most especially I thank you for the many letters, phone calls, faxes, and direct remarks in which you conveyed your appreciation and warm support for my understanding of our Association’s needs and for some of the ways I have hoped to meet them, as shared in my first message. I am also most grateful to the many who have already put their support into action by offering to serve and joining our shared endeavor with enthusiasm and good will. Inviting our thirty members to work on our committees (most of whom had never participated in our administrative tasks), I was met with eager willingness.

The Program Committee, with their newly open appeal for participation, were rewarded with a response of eighteen analytic case reports – an unprecedented and most welcome event, followed up by a major all summer effort to process this wealth of material. This, in itself, was a feat of dedication on the part of the Program Committee’s Chairs and members, benefiting us all in the form of an excellent scientific program at the Seattle meeting. Our Nominating Committee found ready acceptance by a number of non-medical nominees, where reluctance and refusal had become increasing hurdles, and some who could not accept now for the most important family reason (mothering their very young children) promised to join us in the future. However, whereas the above mentioned Committee Chairs and members as well as many others of our seventeen committees have been hard at work, I wish to express special gratitude to our Executive Committee and devote most of this Message to sharing with you its efforts and accomplishments. Mrs. Nancy Hall is a seminal part of the Executive and especially deserving of our deep appreciation.

At the start of my tenure, I could well understand – and, no doubt, you can too – that some of the existing tensions that had concerned me were exacerbated by misgivings about the changes and new policies, but it did not take very long to help us become a working team, with the shared goal of doing what is necessary and good for our Association. A long list of “housekeeping” tasks confronted us and no group of councillors and officers was ever called upon to work harder. They were part of every issue, shared their views on it, resolved it by their votes – a new, even burdensome expectation. Yet their good will and dedication were such that they also joined in the “extracurricular” undertaking of producing an ACP Statement on Violence in Youth. It was completed and distributed at the start of July and is detailed in this Newsletter as “A New ACP Venture,” inviting your participation as well.

Our mid-year Executive Committee meeting, in Cleveland on October 10, was part of the ongoing work and proved most successful: all Officers’ and Committee Chairs’ reports were ready and distributed well in advance and were studied so thoroughly that those...
President’s Message . . .

present at the meeting could contribute their ideas promptly and concisely, and most of those who could not be present had sent in detailed written comments on each item. Attendance matched that of previous meetings. Conference call facility with good reception enabled a number to join in by phone. The spirit was congenial and included touches of humor even to the very end of four solid hard working hours. The cost was one fifth of the previous mid-year meeting. We felt proud of our Association and of our work for it, and I hope you will share this good feeling.

Now to the specifics which included many issues transacted since April and fifteen more items on the presidential agenda of the recent mid-year Executive meeting: In my report to you, I can only highlight some items. I hope you will read the minutes, study the special sections in this Newsletter, and contact me with questions and concerns.

Our newly engaged legal counsel has been most helpful, especially with clarifications and recommendations concerning our insurance policies and bylaws:

a. As to insurance, we obtained an “Executive Summary” and detailed it in order to finally understand what we were and were not covered for which the layman cannot figure out from the thirty plus pages of insurance policy (see p. 25 “Insurance Policy”). This new understanding showed that we lacked a bodily injury insurance, covering accidents occurring in connection with ACP business. An appropriate “rider,” i.e., additional insurance, has now been

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President’s Message . . .

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purchased. Counsel also advised us to add two insurance amendments to our bylaws, which I shall describe under b.

b. Bylaws: Although our legal counsel found our bylaws essentially sound and serviceable, like most bylaws, they require some updating and additions. In all he recommended five amendments. All of them were discussed and approved by the Executive Committee and will be submitted to you, the entire membership, for vote by mail in preparation for our Annual Meeting in Seattle, in March 1999. The first amendment will confirm the ACP right to hold annual meetings anywhere the Executive decides. Since the ACP is incorporated in the State of New York but has its office wherever the current President is located and since we also sometimes hold meetings outside the USA, it will prevent possible confusion, or even challenge, to specify clearly the right to choice of venue. The second statement confirms the number of voting members of the Executive Committee needed to form a quorum and to take executive action. These requirements became blurred with the addition of the two non-voting candidate members and need clarification to preserve the intent of the section. The third amendment brings us up to date technologically, providing for the use of phone conferencing. The fourth and fifth amendments deal with insurance – one to provide legal protection for all who work administratively for the ACP in areas where the insurance policies may leave a gap, the other entitling the Executive Committee to buy insurance. With these amendments we shall spare ourselves much needless work and trouble. I hope you will study them carefully and support the Executive with your “yes” vote.

Among other items, legal counsel also reviewed our

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ACP NEWS

From the Editors . . .

The first From the Editor . . . column from PMB announced in March 1993 that Paul M. Brinich was accepting the editor’s baton from Moisy Shopper. In his inaugural remarks, Paul reviewed and endorsed some of the priorities his predecessor set for this publication. They included greater coverage of the international scene as it relates to child analysis, continued documentation of the scientific activities of our members, and reporting on the growing significance of child analysis in the training of adult analysts. He expressed the hope that “the Newsletter is and will remain an informal, comfortable vehicle for communication amongst our members.” In a modest news item, perhaps easily overlooked on page 3 of the June 1998 issue, Paul Brinich announced it was his turn to pass the baton to new editors. It should tell you something that it takes two of us to take on the tasks Paul and Moisy managed singlehandedly.

Paul’s From the Editor . . . messages over his five-year tenure illustrate his vision for the Newsletter. In the first of these he welcomed news of the activities of our members and proposed the idea of “correspondents” who would take it upon themselves to keep our membership up-to-date about child analytic activities around the world. In his third column he noted that many ACP members are involved in projects which apply psychoanalytic principles to important social problems, but few accounts of these activities get the broader circulation they merit. After noting the threats posed to child analysis by psychopharmacological and behavioral approaches to treatment, he concluded “It is crucial, in these times, that we stay in touch with each other, that we provide each other with support in what is always difficult work. Writing for the Newsletter will not ensure the survival of civilization; but it will contribute to our ability to speak clearly about the problems we see before us. And that is not nothing.” In June, 1996 he listed some possible directions for the Newsletter. These included the idea of a “Candidates’ Column,” to address issues of special concern to our growing number of candidate members, and interviews with senior members to help preserve a sense of continuity with the past. In his next message in October, 1996, he continued to solicit reports of members’ activities stating, “Obviously the Newsletter must remain, first and foremost, a means of communication amongst our members.” We have tried to incorporate all these elements in our first edition.

Fortunately for all of us, Paul remains available to share his experience, insight and his vision for this Newsletter and we look forward to stepping up to help fulfill it. At its meeting in October, the Executive Committee expressed the view that the Newsletter is a vehicle for the members, about the members, existing in part to provide moral support and to demonstrate that child analysis remains alive and well, despite all rumors to the contrary. As editors we hope to continue the legacy left by Moisy, Paul, and the many contributors to these pages. We hope to hear from more of you and we welcome your letters and suggestions for the future. One final, simple word is for Paul Brinich - Thanks!

Denia Barrett and Barbara Streeter
President’s Message . . .

(Continued from page 3)

newly acquired harassment policy and grievance procedure for employees, both of which are required for continuing education accreditation by the American Psychological Association. He also provided the statement which, in order to avoid misunderstanding or ACP liability, needs to precede all our programs in writing, print, words, or internet: It specifies that the views or opinions of individuals in our programs are their own and do not necessarily represent those of the ACP as an organization.

Much thought and discussion were devoted to our relationship with non-members, especially in the area of their attending ACP scientific meetings and receiving our Newsletter. We have always welcomed and reached out to non-members:

a. non-members who are a part of our members’ families and, as “guests” accompany members to our meetings but do not participate in the scientific program
b. non-members from professionally related mental health groups who do participate in our scientific program and who constitute the Category: “Non-member” on our registration forms.

Confusion among our own members had, increasingly, led to diverse advice to non-members and caused inadvertently unfair treatment. By tracing our historical precedents in this matter as well as debating the pros and cons of members and non-members benefiting in joint discussion groups, we endorsed the following policy:

As with our incoming members, non-members shall be invited to meetings by a sponsor whose name will be listed on each non-member’s registration form. Personal knowledge will, we hope, assure that a non-member can integrate the presented material and informal analytic discussion in a mutually helpful manner and that the number of attending non-members will not become too big to accommodate. Non-members with financial hardship may ask their sponsor to help obtain a reduced fee through our Treasurer. The lowest reduction will be to the level of our candidate registration fee.

During recent years, non-members attending our meetings became automatic recipients of our Newsletter. At this time some 200 non-members are receiving it at a yearly cost to the ACP of about $2,000, a figure due to increase with each meeting. With deficits in our budget during recent years, and with our Newsletter serving primarily communication among ourselves at present, the Executive Committee voted for this change: Non-members will receive a complimentary Newsletter copy with their first attendance but also a notice stating that a yearly fee of $10 is mandatory to cover cost if they wish to continue their subscription. This notice is included with this Newsletter to all current non-member recipients.

Guidelines for spending have been adopted in several additional areas:

a. The Marianne Kris Award had, in recent years, gone from the customary $100 amount for the inscribed bowl to increasing costs, even as high as $4,320 with payments for travel/hotel/registration/honorarium/objects d’art. It was decided that award recipients should be ACP members as a rule, that no payments will be made to them or on their behalf, and that the President, in consultation with the awardee, may spend up to $150 on a commemorative item of their choice.

b. Invited speakers who are not ACP members will not be charged a registration fee but will not be paid an honorarium or reimbursed for expenses. This policy is in keeping with that of other psychoanalytic organizations, some of which, however, do charge a registration fee (IPA always, American Psychoanalytic Association sometimes). In cases of financial hardship, the itemized cost of expenses may be presented to the Executive Committee in advance of the actual invitation so that it may consider and possibly provide some scholarship funding. This policy was prompted by tracing, over many years, Treasurers’ reports of difficulty and inconsistency in this matter, and of expenditure in 1997 rising to $2,375 for one invited speaker.

c. We now follow a general policy of mandatory pre-approval of expenses by the Executive Committee; for example, Mrs. Nancy Hall submitted a request for a new copier which, in just one year, would pay for itself when we don’t need to contract copying/printing outside. The machine she researched and suggested was deemed “a very good buy” and promptly approved.

d. Dues payment: We have worked diligently and tactfully to make contact with members who had not paid their dues. Out of 44 who had not paid for three years, 19 are now back “on board,” out of an additional 16 who had not paid for two years, quite a number came through, with the final tally not yet completed. We learned a lot in the process about the reasons for non-payment (only two pleaded financial hardship) and are taking steps to remedy them. One problem is that our members really did not know that two years of non-payment of dues is, according to our bylaws, the end of membership.

Soon you will receive your new Roster, thanks to Mrs. Hall’s work. The Roster will provide additional information on members, including candidate or member status, and will also contain a copy of the ACP by-laws for everyone to have readily on hand. We all need them

(Continued on page 5)
President’s Message . . .

(Continued from page 4)

to inform ourselves not only about dues payment but about our rights as members, our obligations in elected or appointed office, our stated goals as an organization as well as our limitations, such as not “carrying on propaganda or otherwise attempting to influence legislation.” (Article V., Section 6. d). It is one of the many ways in which the ACP differs from other professional psychoanalytic bodies.

Our new Long Range Planning Committee helps us look to the future but we can only do so by knowing the past. We now have a copy of our 1963 and 1971 Articles of Incorporation, safely stored in a fireproof locked container to prevent them disappearing again. We also have new metal cabinets to store past documents which were not safe in cardboard boxes in the garage and which have already proved an invaluable source of past practices to guide us in new policies. Also, we shall try to have a regular brief historical article in our Newsletter to acquaint or reacquaint us with past events.

Thank you for reading this long Message to its very end. I welcome your responses and I am looking forward to thinking and talking about ACP matters with you during our Friday morning Open Meeting and Sunday Business Meeting in Seattle. §

A NEW ACP VENTURE
Introduction to Violence in Youth Statements
Erna Furman

During June 1998 members of the Executive Committee, several Chairs of Committees, and I worked together to produce the open letter, in two versions, on the then particularly “hot” topic of violence in youth. It was a first for our Association to take an agreed upon stand on a specific issue concerning children and families and to try and alert officials as well as lay people to our viewpoint and approach. We all felt very good about this undertaking and describe it here not only to inform you, but in the hope that you will participate in our effort to make the letter widely known.

Version One, starting with “a) Government at all levels...” is for government officials.

Version Two, starting with “a) As parents, teachers...” is for media, lay groups, child and family related agencies.

Both letters were sent out with a cover letter, preferably of a person-to-person nature, whenever one of us knew the recipient and was in some relationship to him/her, such as a constituent.

We hope that you will use the versions to copy and mail them to whomever you think would be interested. Thank you for your effort!

In order to avoid duplication, the following were contacted (and quite a number responded with individual letters showing thoughtful concern and appreciation of our offer to help): President Clinton, Vice-President Gore, Janet Reno, D.A. Shalala (Dept. Health and Human Services), E. Moscicki (NIMH), V. W. Anthony (National Consortium for Child Mental Health Services), Senator C. Dodd (Children's and Families’ Subcommittee of Senate Committee on Labor and Human Resources), Senator D.R. Coats and Senator P. Wellstone (same Committee), Sherrod Brown (Subcommittee on Women and Children of the Committee on Health and Environment).


U.S. Congress: D. Degetter, L. Stokes, D. Young, R. Torecelli, M. Roukema;

Child agencies in Canada: Canadian Assn. of Psychoanalytic Child Therapists, Canadian Group of Child Analysts in Montreal.

Child agencies: 18 organizations (international, national and local), including Children’s Defense Fund, Children’s Aid Society, Children Now, Child Welfare League, Children’s Watch (detailed list available from Mrs. Nancy Hall).

I trust that by the time this Newsletter reaches you, our statement will also have been put on our ACP Internet space.

Despite much effort and several promising “nibbles” the statement has not yet appeared in newspapers. If you have helpful contacts, please use them.

We shall appreciate hearing from you about the statement as such, about your efforts to publicize it more widely, and about your support or otherwise for ACP statements of this kind on topics of concern. We look forward to hearing from you!
As child psychoanalysts and as citizens we share the widespread and deeply felt concern over the many recently reported incidents of children using guns for lethal purposes and endangering not only their families but adults and peers in schools and other public places. We wish there were some single factor that causes this tragedy and some single way to stop it. But we all know this is a multi-determined problem. Without a comprehensive assessment of the individual child’s personality as well as of general societal factors we cannot find solutions. We also know that efforts to reduce, perhaps even stop the problem, will have to be a joint effort in which everyone needs to take part. We list a few ways which can make a start:

a) Government at all levels, from the President to local councils, helps by investigating ways in which laws, law enforcement, mental health, education and protective services can improve their role in reducing violent incidents by youth. Greater collaboration with and coordination of service providers is necessary, including such US Justice Department programs as the Child Development-Community Policing Program and the Comer School Development Program.

b) The media, in all forms, help by adjusting the content and timing of news coverage and all programs with a view to the vulnerability of youth to overstimulation and to their immature means of coping with impressions and exercising self-control. The ready contagion effect of coverage of violence by youth makes such adjustments crucial. Government leadership in this area is therefore important.

c) Mental health professionals, ourselves included, can help by making a concerted effort to recognize and contain those children and adolescents who may be prone to aggressive discharge and to ameliorate danger situations before they turn into catastrophies. In schools and other children’s service agencies there is dire need for many knowledgeable counselors.

d) As parents, teachers and caregivers we have the most immediate opportunities to help - preventively and at a time of danger - by following some well known common sense guidelines.

I. When children learn to use any potentially dangerous implement, such as scissors, we carefully gauge not only their readiness to master the skill but their capacity for sound judgment. Until they have demonstrated both, we keep such implements out of their reach and allow use only under close supervision. The same applies to guns.

II. When children want to dash into the street, we know how to help them by saying “no” and holding them back. We can also keep them safe by saying “no” and enforcing it when they are drawn to violent and exciting video games and movies.

III. TV programs and news coverage can be as “indigestible” for children as a huge bag of Halloween candy. We help our children by limiting the amount of candy they eat. It is the task of those who know the child best to judge the appropriate level and amount of TV stimulation. We can help by keeping our finger on the power button and by viewing with the child when indicated.

IV. Finally, but most importantly, we know that our children are more likely to do as we do than as we say. Our control of our own impulses, especially in responding to stress and when we discipline our children, is the most valuable way of helping them with their self-control and with their ability to consider the well-being of others as we consider theirs.

President and Executive Council
Association for Child Psychoanalysis
ACP Statement for internet, newspapers and other media:

**VIOLENCE IN YOUTH: BEGINNING TO TACKLE A DIFFICULT PROBLEM**

**VERSION II**

An open letter from the President and Executive Council of the Association for Child Psychoanalysis

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President and Executive Council
Association for Child Psychoanalysis

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We wish to extend our appreciation to Deborah Gray, Executive Secretary of the Hanna Perkins Center, for teaching herself to use MS Publisher and singlehandedly producing the copy for the Newsletter.

We would also like to thank Nancy Hall for her prompt E-mail responses and provision of the minutes of the meetings, and Paul Brinich for his thoughtful preparation and assistance throughout the transition.

The Editors
As one of the forty some child analysts who met together in April 1965 in New York to serve as “Founding Members” of the American Association of Child Psychoanalysis, I thought I knew all there was to know about the early history of the ACP. But some of the documents in our Archives taught me otherwise. In the first place, there was an initial group of 17 child analysts who met in December 1962 at the home of Marianne Kris and they were the first “Founding Members.” In her letter of invitation to this group, she wrote of the new Association: “Its aim is to provide, for all those with appropriate qualifications (M.D.’s as well as lay analysts), a forum to discuss child analysis and to contribute to its advancement.” It is hard to imagine a better, more concise explication of the mission of the ACP than this very initial one.

The new organization was incorporated shortly thereafter in early 1963 with Marianne Kris, Albert Solnit, Samuel Ritvo, Grace Abbate and Marjorie Harley signing the initial Articles. What happened next is a bit hard to tell from the documents available. In a letter to Grete Bibring, then President of the American Psychoanalytic, Dr. Kris wrote in April 1963 of the founding of a forum for the discussion of child analysis, “to provide a scientific home in which members of the American Psychoanalytic Association and those well recognized child analysts who are not members of the American” could join together. She went on to say that as the new organization was being formed the founding group realized their aims could be accomplished more adequately as a section within the American. In her opening remarks for the April 1965 meeting, however, she reported that the Executive Committee of the American “approached us for details of our goals” for the new Association and “suggested we should try to form a section within the framework of the organization of the American.” It would be hard not to believe that the letter to Grete Bibring was the politically correct explanation, the remarks of 1965 perhaps a historically more accurate explanation.

In the early 1960’s, a number of child analysts were not eligible for membership in the American: those who had been trained abroad who were not physicians such as Anna Maechen and Edith Buxbaum; those who had received a “bootleg” training in this country such as Marjorie Harley and Marion Barnes, as well as the graduates of the Hampstead Child Therapy Course and the Cleveland Child Therapy Course.

It was to be a year and a half after the letter to Dr. Bibring before the concept of a “Scientific Forum on Child Analysis” could be put to a vote by the members of the American. The idea was first discussed in the American’s Executive Committee and then studied by a special Ad Hoc Committee who submitted a report to the Council of the American. The proposal was guided through this long journey by the political skill and wisdom of Al Solnit and a favorable report of the Ad Hoc Committee was accepted by a 28 to 4 vote of all the Societies in the American. In all presentations the epitome of political tact and wisdom can be noted as the words “lay” and “non-medical” never appear until the final report. Apparently there was such anxiety in the American that non-medical analysts might try to use the Forum as a back door to membership in the American, lowering its professional standards, that the report included such provisions that only those who were members of the American could have a say in who was accepted to participate in the Forum. To some these provisions were nuisances that could be endured; to others they were intrusively controlling and something short of respectful to the lay child analysts.

The extensive safeguards proved inadequate and the resolution to establish within the American a “Scientific Forum on Child Analysis” was rejected by the membership 329 to 309 with 350 abstentions. It was after the defeat of the Resolution in December 1964 that Dr. Kris moved the new organization “out of its slumber existence on paper to life,” as she expressed it in the meeting of April 1965. Although perhaps some were disappointed by the rejection by the American and the unsuccessful expenditure of a great deal of effort and energy, others felt it a blessing as the “anxieties” prevailing in the American might well have created a suffocating political atmosphere not conducive to the aims of the new organization.

The first scientific meeting of the new Association was in the Spring of 1966 at the Menninger Clinic in Topeka with Anna Freud, Heinz Hartmann, Heinz Kohut, Karl Menninger among others in attendance.
PROGRAMS AND ACTIVITIES OF OUR MEMBERS

PROGRESS AND GROWTH AT ALLEN CREEK SCHOOL, MICHIGAN'S PSYCHOANALYTIC PRESCHOOL
From Kerry Kelly Novick

Allen Creek Preschool in Ann Arbor, Michigan is one of a handful of preschools actually operated by child analysts. It has been an amazing adventure for a group of enthusiastic and devoted clinicians and educators to start a grass-roots 501c3 non-profit organization. Fifteen years of volunteer consultation to area preschools built a foundation of community support. After incorporating in 1994, we began parent-toddler groups in borrowed church space, then built our own building, and now have an actively functioning preschool staffed by able teachers and experienced child therapists.

What makes Allen Creek a "psychoanalytic preschool"? Part of the answer lies in our effort to integrate psychoanalytic developmental knowledge with the curriculum, educational practices, and tone of the classroom and the school as a whole. Fundamental to the Allen Creek approach is that each family has its own Family Consultant, who meets weekly with parents, observes in the classroom and conferences regularly with teachers. We currently have over thirty therapists who together volunteer more than 2500 hours each year to provide family consultation to the parents of Allen Creek pupils. Family Consultants bring many years of experience to Allen Creek - they are all seasoned child therapists, child and adult psychoanalysts, psychoanalytically-oriented social workers, psychologists, and child psychiatrists - among them are many ACP members. These are dedicated professionals who volunteer their time because they want to learn more about early development, and they enjoy being out in the community, meeting the needs of young children and their parents, and sharing psychoanalytic knowledge about development with a wider audience.

Family Consultants work with each other in a "buddy system" of peer supervision, and meet weekly in a group conference with school staff. Once a month we meet all together to discuss what we are learning about the development of young children, aspects of the developmental phase of parenthood, and techniques of parent work in a population that spans the whole spectrum from optimal development to recognized developmental delays, interferences, or disabilities.

Thanks to the efforts and generosity of friends and colleagues, especially ACP members in the USA and abroad, we have been able to offer scholarship support to 2/3 of the 30 families now enrolled in our parent-toddler classes, preschool and pre-kindergarten. Our Early Childhood Outreach has expanded to bring consultation services to over 800 children in various centers. Teachers, preschool directors, hospital pediatric departments, special education and early intervention programs, and community agencies all make use of Allen Creek's depth of psychoanalytic developmental knowledge to enhance their services through discussion groups, consultation, and lectures.

Parent and community volunteers help with many school functions. We have been fortunate to receive in-kind help from many area businesses. Together all these people devoted to the welfare and healthy development of young children and their families have created a new school community that brings psychoanalytic ideas to a practical application that all can appreciate and understand.

We hope that many ACP members will come to visit us in Ann Arbor, share with us and the other psychoanalytic preschools what your local experiences have been in working with the preschool population, and help us all bring psychoanalytic understanding back out into the community.

THE SOCIAL-EMOTIONAL LEARNING PROJECT AT TEACHERS COLLEGE, COLUMBIA UNIVERSITY

An Update:
The Project for Social and Emotional Learning (PSEL) at Teachers College continues to be involved with a series of educative, scholarly and consultative activities to promote social and emotional learning in pre-Kindergarten, elementary and high-schools today. Our two primary goals are to be helpful to educators and school specialists "in the field" and to influence how educators are trained nationally.

During the last year, we have sponsored a series of educative programs: our first annual conference which focused on social and emotional learning and the middle school child; a series of psychoanalytically and non-analytically informed graduate-level courses for masters and doctoral-level students; and an intensive Summer Institute.

We are also involved with a series of consultative relationships with individual schools and districts that want to review and further develop the formal and/or informal programs to enhance educators’ capacity to be psychologically minded and/or promote psychosocial learning for "normal" students and/or "special needs" students and/or educators.

The PSEL has also initiated the Social Emotional Learning book series that will be published by Teachers College Press. The books in the series are designed to promote an interdisciplinary dialogue between analytic and
NEW VENUE FOR PUBLIC HEALTH APPLICATIONS OF CHILD PSYCHOANALYSIS

Gilbert Kliman, M.D., Medical Director of THE CHILDREN'S PSYCHOLOGICAL TRAUMA CENTER, INC., San Francisco, announced that a new grant has been received for application of The Cornerstone Method for treatment of preschoolers. The grant, from Cadence Design Systems of San Jose, will permit a third California county public school to host a Cornerstone site for treatment of its emotionally disturbed preschoolers. At present the method is in use at two sites in San Francisco, one being a public school special education class, and one site in San Mateo County special education preschool services. This new grant will allow a Santa Clara County public special education program or other public health application of Cornerstone to be developed. Dr. Kliman invites those child analysts who wish to carry out the Cornerstone Method in their local public school system special education programs to correspond with him regarding a contract with CPTC for a period of training in the Cornerstone Method. Videotapes concerning the Cornerstone Method may be purchased by writing CPTC at 2024 Divisadero St., San Francisco, 94115.

S$210 MILLION MARK EXCEEDED FOR CHILD VICTIMS OF TRAUMATIC WRONGDOINGS

Child psychoanalytic testimony can give powerful voices to children in court. In the past ten years, jury awards and settlements for children concerning whom one of our members, Gilbert Kliman, M.D., has testified, now total over $210 million dollars. Due in part to the impact of his testimony in Dallas, Texas, eleven molested altar boys were awarded a world-record making amount by a jury -- $119,000,000. Recent cases include wrongful deaths of parents, in which Dr. Kliman has been helping children obtain compensation for loss of parental services. His web site, www.justiceforchildren.com, has many details of the cases and views of attorneys regarding this work. At the recent IACAPAP meeting, Dr. Kliman presented a new theory of posttraumatic stress disorder as a biologically determined form of altruism in the form of iconic behavioral communications about life-threats. Kliman believes the iconic communications have an evolutionary value, and tend to promote survival of those who witness the iconic behavior. At the IACAPAP meeting Kliman used his courtroom and forensic experience to illustrate his theory with behavioral phenomena observed during videotaped interviews of some of the life-threatened child victims about whom he has testified.

The Social-Emotional Learning Project . . .

(Continued from page 9)

non-analytic practitioners as well as provide information, perspectives and programmatic efforts that can be stimulating and helpful to teachers, administrators and school specialists. In addition to the book series, our scholarly activities have included beginning the ‘Case Study Project.’ This project involves the creation of a series of case studies of individual children as well as children in groups (classes), classes and educators that we hope will provide a common foundation for all graduate-level courses at Teachers College. If there are other ACP members who might be interested in contributing to this effort, please do let me know. I believe that the creation of this Case Study Data Base has great potential for illustrating the value of thinking in a psychoanalytically informed manner.

A number of members of the ACP, the American and Division 39 have been actively involved with these activities. I welcome fellow ACP members who may wish to contribute their expertise and efforts to this endeavor.

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COLLABORATION WITH A CHINESE PSYCHOLOGIST IN CHINA
Paul Kay, M.D.

Since June 1996, I have been corresponding with a school psychologist, Professor Liu Ping, in Beijing, China. I met him during a trip to that country last May as part of a group of psychoanalysts from our country and abroad (The Citizen Ambassador Program, formerly the “People to People” program which began in Eisenhower’s administration). We visited medical schools, hospitals and universities. We met and exchanged views with psychiatrists, psychologists and other mental health professionals.

At Beijing Normal University, Professor Ping spoke eloquently about learning problems in children. He spoke to him at dinner right that night about keeping in touch with each other when I got home. He seemed eager to do so. We have been doing that through letters and phone calls since last summer. A small group of Fellows and faculty members in the Child Psychiatry Division of The North Shore University Hospital (Manhasset, New York) have joined me in this correspondence. (I call it the American-Chinese-Bridge for starters.) We have been meeting approximately every six weeks either at my home or that of Dr. Fornari, the Director of the Child Psychiatry Division. (Sandy Kaplan, M.D., is the chairperson.)

We have been exchanging views and information with Professor Ping about various aspects of our work and experiences. He has been sending us vignettes of the children he treats for learning (and related) problems and asks for our reactions to them. He also raises various questions about, and makes comments on, social and cultural aspects of his work. We have been responding to his vignettes and questions. He then responds (more or less) to our response.

Dr. Fornari and I hope that the way in which he and I deal with the cultural differences, which exist between us and Professor Ping, may help the Fellows to deal more effectively with the cultural differences which they encounter in their daily work with minority group patients. They may, also, we hope, learn something from our diagnostic and (analytically-toned) psychotherapeutic discussions of the clinical data made available by Professor Ping and ourselves.

Professor Ping is one of the very few school psychologists in China. He has written papers on children’s learning problems which he has presented at meetings in other countries. He has, on his own initiative, also been promoting the use of psychological assistance for children with learning and related problems through the print and other media. Psychotherapy, even in its simplest forms, has yet to be accepted by the Chinese public, especially when it involves children, due to cultural and other influences. He has been reading Freud and other psychoanalysts on his own for some years! Freud and psychoanalysis are not exactly popular in China. A few of the younger people in the field of mental health, however, have been fascinated by Freud and psychoanalysis in general and reading the pertinent literature.

I have been sending Professor Ping books, journals, and other material. The ACP members saw the exhibit in the afternoon prior to the evening reception. Our impressions were similar to those of others who had seen it at a reception the night before. While it was fortunate that it had finally opened after a delay of more than two years because of Freud’s very vocal and zealous critics and a shortage of funds, the exhibit itself was rather disappointing from both the curatorial and content points of view. For example, the main gallery was dimly lit as were the display cases. A display sign read that Freud applied his theories to his famous cases rather than that he had derived his theories from them. As far as I could see, there was nothing about the case of Little Hans and the origins of child analysis.

But ACP members should see the exhibit and make their own judgments.

THE FREUD EXHIBIT AT THE LIBRARY OF CONGRESS
Joseph S. Bierman, M.D.

The ACP took part in a collaborative effort of seven psychoanalytic organizations to mark and celebrate the opening of the long awaited Freud Exhibit at the Library of Congress on October 15, 1998. The seven included the American Psychoanalytic Association, the American Academy of Psychoanalysis, the Association for Child Psychoanalysis, the Independent Psychoanalytic Societies, Division 39, and the National Membership Committee on Psychoanalysis in Clinical Social Work. Two functions were planned. The first was a symposium for science writers in Washington, DC on October 1 to give them some preparatory background in psychoanalysis with which to write about the Exhibit. About ten writers attended, including those from Science, Newsweek, and U.S. News and World Report. It was considered a success.

The second function was a reception in Washington, DC at the home of Dr. Barbara Jones, a member of the American Psychoanalytic Public Information Committee, from 6-8 p.m. on the day of the opening of the Exhibit, to which 15 members from each of the seven participating organizations were invited. In addition various guests were invited such as the columnist Elizabeth Drew, and Ben Bradlee of the Washington Post. It was hoped that there would be some good P.R. for psychoanalysis and contacts made from this reception.

Each organization contributed $500 for the reception and $60 for the science writer symposium.

An informal poll of some of our members after the reception showed that our attendees unanimously enjoyed it and enjoyed especially talking with analysts from various organizations and locales. They welcomed the opportunity to talk about the Exhibit and analysis with the specially invited guests. The consensus was that the ACP could not have afforded NOT to join with the other groups.

Only a minority of the attendees at the reception had actually seen the Freud Exhibit. This reporter and two other ACP members saw the exhibit in the afternoon prior to the evening reception. Our impressions were similar to those of others who had seen it at a reception the night before. While it was fortunate that it had finally opened after a delay of more than two years because of Freud’s very vocal and zealous critics and a shortage of funds, the exhibit itself was rather disappointing from both the curatorial and content points of view. For example, the main gallery was dimly lit as were the display cases. A display sign read that Freud applied his theories to his famous cases rather than that he had derived his theories from them. As far as I could see, there was nothing about the case of Little Hans and the origins of child analysis.

But ACP members should see the exhibit and make their own judgments.
## Chinese Psychologist in China . . .

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papers and audio tapes which I hope he can use. His education and training, by our standards, seems to be meager. He is essentially self-taught. I regard him as a pioneer. I admire him. §

This article originally appeared in the International Association for Child and Adolescent Psychiatry and Allied Professions (IACAPAP) Bulletin number VI, September 1997 and is reprinted with permission.

Dr. Kay would like to hear from anyone doing similar consulting and would like to form a study group.

☎ 516-487-5252

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### CANDIDATES’ CORNER

**Noontime Nourishment at TRW:**

**Child Analysts Answer Parents’ Questions**

Kristen Bergmann

Over a year ago I was invited to join Dr. Barrett in meeting with a group of parents through the Extension Division of the Hanna Perkins Center. I was interested in working with parents on a consultation basis and in the challenge of discussing psychoanalytic ideas with parents concerning their children. The group, which has been meeting for over two years, meets monthly during the lunch hour at TRW corporate headquarters – the name “Noontime Nourishment” has been coined. Dr. Debra Hutton was the previous consultant.

There is a core group of parents who come to the meetings and at times they bring along other parents who might be interested. The parents with whom we have met have children of all ages, and we have even met with a few parents who are expecting their first child. A broad range of themes has been discussed from bedtime and toileting troubles to school troubles. Many topics keep coming up as different children grow and mature. Other parents are able to give suggestions and remember when they were dealing with the same issues with their children.

Recently, parents were concerned about how to explain what is happening in politics to their children. More importantly, they asked how to explain what their children are hearing on the TV and from their friends. Specifically, a school-age child wanted to know what the President did wrong and why this was such a big deal. We discussed the fact that many times a child asks a question already having an idea of what the answer is. It is always in parents’ best interests to first ask what the child thinks before giving an answer or panicking. This approach allows the child to take an active role and prevents the parents from explaining more than the child can handle. It also allows the parents to clarify any false notions. I found this approach of talking with children very helpful for both myself and for parents.

Many times an underlying issue is how hard it is to be a working mom. It seems as though parents are very concerned about making up for the time they are away and, as a result, little events seem very significant for both the children and the parents. We discuss how important it is to acknowledge the missing feelings on both the part of the child and the parent.

I thoroughly enjoy working with parents in this way and have found my understanding of psychoanalytic theory an invaluable tool in understanding child development. The challenge for me has been to use this information in a way this is meaningful to parents. §

Mrs. Bergmann is a candidate in the course in child psychoanalysis offered by the Hanna Perkins Center.
MINUTES of the EXECUTIVE COMMITTEE MEETING
Friday, April 3, 1998  Back Bay Hilton Hotel  Boston, Massachusetts
These Minutes were accepted at the Executive Committee Meeting of October 10, 1998.

This publication is our way of distributing these minutes to the membership. Any errors or corrections may be sent to the Secretary, Joseph Bierman, M.D., or to the Association’s Administrator, Mrs. Nancy Hall, P.O. Box 253, Ramsey, New Jersey 07446.

Present: Theodore J. Jacobs, M.D., President; Judith Chused, M.D., Secretary; Alan B. Ziets, M.D., Treasurer; Erma Furman, President-Elect; Joseph Bierman, M.D., Secretary-Elect; Paula Aikses, D.S.W.; Peter Blos, Jr., M.D.; Paul Blink, Ph.D.; Barbara Deutsch, M.D.; Nathaniel Donson, M.D.; Renee Gelman, M.D.; Jules Glenn, M.D.; Alan Gurwitt, M.D.; Leon Hoffman, M.D.; Laurie Levinson, Ph.D.; Karen Marschke-Tobier, Jill Miller, Ph.D.; Julio Morales, M.D.; Perry Kelly Novick; Jack Pelaccio, M.D.; Lilo Plaschkes, M.S.W.; M. Barrie Richmond, M.D.; Anita Schmukler, D.O.; Martin Silverman, M.D.; Moisy Shopper, M.D.; Stephanie Smith, LICSW; Janet Szydlo; Sylvia Welsh, Ph.D.; Judy Yanof, M.D.; Nancy Hall, Administrator.

President Jacobs welcomed everyone and expressed appreciation to the entire Executive Committee for the diligent work done by the Committees and for the support given to him during his term.

Minutes
Corrections to the Minutes of December 19, 1997:
In the report of the Nominating Committee the question was raised regarding the double nomination of Dr. Morales and the lack of a 2nd nominee for treasurer. The official vote on the Bylaws change was approved. This addition provides for two Candidate members to be elected to serve on the Executive Committee in a non-voting capacity. Therefore, the December 1997 report is not complete because the Nominating Committee will now be selecting four Candidate members for this election.

Motion: Accept the minutes as corrected. The vote was favorable.

Report of the Secretary — Judith Chused, M.D., Secretary

ACP Membership: Current Status

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Congratulations to the newly elected President-Elect Martin Silverman, M.D.; Secretary-Elect Elizabeth Tuters, C.S.W.; Councilors Arthur Farley, M.D., Ruth Karush, M.D., and Steven Marans, M.D. Also congratulations to the two Candidate Councilors, Nathaniel Donson, M.D. and Sylvia Welsh, Ph.D., the first Candidates to serve on the Executive Committee.

Thank you to outgoing Councilors whose terms expire at this 1998 Annual Meeting: Alan Gurwitt, M.D., Anita Schmukler, D.O. and Judith Yanof, M.D. Special thanks to outgoing President Theodore Jacobs, M.D., Secretary Judith Chused, M.D. and Treasurer, Alan Ziets, M.D.

Membership Changes since the last Executive Meeting.

December 19, 1997

Deceased
Sidney Berman, M.D. Bethesda, MD
John A. Flower, M.D. Durham, NC
Edwin S. Kessler, M.D. Mobile, AL
Helen Schur, M.D. New York, NY

It has since come to the secretary’s attention the deaths of Catherine Berwald and Alice Rolnick from Cleveland Heights, OH.

Resigned
Sara Amiel-Buskiler Israel
Ann Halsell Appelbaum, M.D. New York, NY
Richard Kaufman, M.D. Northbrook, IL
Paul Keith, M.D. San Diego, CA

Report Of The Treasurer — Alan Zients, M.D.

(A detailed report is on file in the Central Office)

Financial Assets
Our funds are invested with the Vanguard Group. The Endowment Fund has a balance of $71,077. This is an increase of $13,181 from the 1996 year end figure of $57,896. The Operating Fund had a balance of $57,992 on 12/31/97 which compares to $49,269 on 12/31/96. Our total assets as of 12/31/97 were $129,069 which compares with $107,165 on 12/31/96. In addition, the checking account had a balance of approximately $18,090 as of 12/31/97.

Income for 1997 was $77,572 with expenses of $81,857. In 1996 the income was $70,113 with expenses of $82,337. Every effort is made to reduce expenses.

A decision was made in 1997 to permit dues payment through the use of Visa and MasterCard. Our costs for this service is 2.65% per transaction in addition to $7.30 per month. An initial expenditure of $300 for the terminal was necessary. In order to obtain the best rate for Visa and MasterCard, we transferred our banking from the Lakeview Bank in Ramsey, New Jersey to Commerce Bank also in Ramsey, New Jersey. The use of Visa and MasterCard permits European members to charge their dues and eliminates costly conversion costs to US dollars.

European Dues
All dues are now collected through the Central office with the administrator, Nancy Hall. We are thankful to Ros Bidmead and The Anna Freud Centre for the years of assistance they have provided in collecting dues from our European colleagues. The amount of $1765 was transferred from the ACP European account to the ACP account in the US.

Dues

The dues collected in 1997, including $2,198 contributions to the Grants Program, were $45,200 as compared to $37,632 in December 31, 1996. This is due in part to an increase in the dues payment. Out of a membership of 634 members, 60 did not pay their dues in 1997. Some of the unpaid members may be emeritus (over 75) and exempt from payment. We are making every effort to collect delinquent dues. Members who have not paid their dues for three years will have their membership terminated if there is not a prompt response to our request for payment.

Grants—Alan B. Ziets, M.D.

Funds are available with a matching grant from the Institute for treatment of a child in analysis of a low income family. The

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Committee reviewed two requests. 1) $1500 for the continuation of a 1997 grant with matching funds from the Chicago Psychoanalytic Institute and 2) a grant for $2,000 with matching funds from the New York Psychoanalytic Institute.

A question was raised concerning the obligation of an applicant to present a case at our Annual Scientific Meeting. This should be a condition of the grant and scheduled as feasible.

A motion was made to approve the grants with the condition that a formal application be submitted also. The vote was favorable.

Report of the Ethical Guidelines Ad Hoc Committee – Moisy Shopper, M.D.

The Committee presented guidelines in the report in December, 1997. The one change in this committee was the addition of Jill Miller. Dr. Shopper outlined the work to be done and the need to have a lawyer of record. The items to be addressed are: 1) consultation with insurance and legal professionals in the proper way to proceed, 2) implementation of procedures to handle ethical complaints, 3) examination of ethical codes of other organizations to determine how to write one, 4) drawing up an Ethical Code of our own.

Erna Furman has spoken with a legal firm in Cleveland who does legal service for many nonprofit organizations and is familiar with the ACP.

Report of the Arrangements Committee – Jack Pelaccio, M. D.

Our Boston bookings are just under 100 rooms at the time of this report. I think that a number of members are staying outside the hotel since many have friends, colleagues, or family in the area. The final arrangements for food and entertainment are being firmed up for the dinner Friday night. The Boston Institute and the Psychoanalytic Institute of New England are putting together the cocktail party at the Harvard Club for Saturday night.

Seattle 1999

At our last board meeting we agreed upon Seattle as the location of our next annual meeting. A number of members recommended the Four Seasons Olympic Hotel as the optimal site. Cathy Henderson in Seattle confirmed the desirability of that hotel. It sounds like an outstanding site. My concern about the Four Seasons had been price, so when we were able to obtain rates of $140, $160, $180, for moderate, deluxe, or executive suites (single and double rates are the same) I booked the dates for the meeting, March 26-28, 1999. A deposit of $2,000 has been made to secure this room rate. The Four Seasons is on the National Register of Historic Buildings. It is the only hotel north of San Francisco and west of Chicago to have earned the AAA Five-Diamond & Mobil Five Star Awards for excellence in service and accommodations. It appears to be the best Seattle has to offer.

A full compliment of luxury services and amenities are available such as 24 hour room service, health club, heated indoor pool, saunas, massage and exercise rooms, and three restaurants. The hotel was recently rated #26 in the top 100 world-wide hotels in a Conde Nast Traveler’s poll, and jumped from # 11 to # 6 among North American property ratings. This hotel is so special and the room rates are so low, that members may be willing to travel extra distance to attend the meeting. Since members may want to extend their time in the Pacific Northwest we will hold some rooms before and after the meeting. Victoria Island, British Columbia and other beautiful islands are just a ferry ride away from Seattle.

Suggestions were offered for the ACP Annual Meeting to be held in the year 2000. Erna Furman spoke of the need to meet in places where the local analytic community can make outreach to mental health people so that our presence can help there. Other members enumerated major points of consideration in selecting a site: 1) cost to members 2) accessibility with regard to travel, etc., 3) the importance of generating a profit from the Annual Meeting and 4) off site points of interest. Site suggestions in the USA were Baltimore, Annapolis, Miami, Chapel Hill, and Sante Fe. European sites suggested were Paris or London.

The preliminary vote on the top choice was 1. Miami—10
2. Baltimore—4

Report of the Communications Committee – Leon Hoffman, M.D.

The Web Page, conducted and monitored by Perry Branson, M.D., has proven to be a way of generating more activity. ACP general policy has been to stay away from specifications, leaving that to individuals.

Report of the Committee to Coordinate Assistance in Eastern European Countries – Lilo Plaschke

Since my report in December there are no major activities to report. After Peter Blos and I return from teaching at the Eastern European Summer School in Croatia this August I will have more to report about the work in the area of psychotherapeutic and psychoanalytic work in the different Eastern European countries.

Matias Lunacek, of Slovenia, a Child Psychiatrist and a Candidate in Psychoanalytic Training has been developing a service and research model for DAY CARE of children. This project, funded in part by the State of Slovenia and part privately, has been running for one year. It has been very successful. It is based on the concept of care provided as a family unit and serves 10 children 0 to 5 years. Dr Lunacek works with the parents and teachers and observes and when necessary consults re a child. Teachers male and female are selected according to their ability to work with children in this age range. I was very impressed with the work when I served as a consultant in discussing one of the children with him last summer in Lithuania. He has written up this project and is waiting to get it translated into English. I also suggested that if possible they could Video this project. I have had some correspondence with a therapist who is also a Clinic Director in Bulgaria. There is an interest to receive videos as well as books. The Margaret Mahler Foundation, of which I am a member, is willing to donate some videos and books which are an edited version of the paper presented at the Annual Mahler Symposium on Child Development. The videos have now gotten updated comments by Drs. John McDevitt, Harold Blum, Annie Bergman and Fred Pine. I have offered to take some with me this Summer. The members of the Foundation want to assure that the material goes to known people and not be distributed randomly.

I have been asked to serve on the IPA European Sub Committee on Children and Adolescence as an Advisor on E. Europe. The co-chairs are Anne Marie Sandler [London England] and Veronica Machtlinger [Berlin]. Their mandate is to explore what analytic institutes are doing in training clinical and theoretical work in child and adolescent work. I am very pleased to have this appointment. It was Peter Blos, Jr. who had appointed me to chair the Committee to explore what the ACP could do to help Eastern European countries interested in developing child analysis.

It has been through his work and mine that the Summer school included work with children and adolescents. Now through Bob Tyson's initiative, the IPA is including child analysis. I will have the opportunity at this year’s EE Psychoanalytic Summer School to

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explore the points of interest in the mandate of the COCAP and how they relate to the different countries represented in Croatia. I have some data from Lydia Tischler from the training program she initiated in Prague. Any information that any one has from their travels, and can give to me, I would be very glad to have.

Report of the Extension Division – Karen Marschke-Tober

New York The 12/21/97 meeting had about 50 attendees. Feedback was very positive and many thanks go to those who participated and made it such a success.

Boston An extension program for Boston was planned with the help of Alan Palmer in Boston. Though the program was not completed in time to be included in our annual mailing, a separate mailing to prospective attendees in the Boston area was arranged through the coordination of the Boston Psychoanalytic Association and Nancy Hall.

Upcoming

Toronto The APA has offered us a room on May 31st from 2:00-5:00 for an extension program on the Sunday afternoon of their meeting. Plans for the meeting are in process and as soon as they are complete a flyer will be prepared and mailed locally through the efforts of Elizabeth Tuters and Nancy Hall. The initial APA mailing did not accommodate a flyer, but they will likely include our flyer in their next mailing which will go out late April.

New York We need to plan ahead if we want to go forward for an extension program at the next December 98 APA meeting. Their mailing will go out in September and we should be prepared. The committee is interested in feedback, particularly from members who will be in New York for the midwinter meetings.

Seattle Discussions with Seattle members, especially Catherine Henderson, a committee member will move forward to see what if anything they would like by way of an extension program at our next meeting. In addition to these specific plans, we are open to suggestions for further outreach and additional extension efforts. It would also be very helpful if members willing to participate in extension programs would make their interest known to the committee and give an indication of the topic of the paper they might present. This is an excellent opportunity to re-present papers which may be appropriate for, or adapted for, a broader audience. In this way we could begin a mini registry or menu for something they might be interested in reserved for them, apart from the ones we attend. This way each can discuss their own ideas. Dr. Hoffman felt that since it is ACP’s mandate to foster development of child psychoanalysis, it should behoove us to have input into these programs in the way of education and as a resource. Dr. Shopper spoke of the lack of awareness and the importance to establish that child psychoanalysis does have something to offer.

Report of the Liaison to IACAPAP – Stephanie Smith, LCSW

Dr. Thomas Barrett will chair an ACP sponsored half day symposium at the IACAPAP Congress this July in Stockholm. The Title is "The Other Child: Therapeutic Efforts on Behalf of Siblings of Children with Severe and Disabling Congenital Anomalies".

There will be two analytic case presentations and two discussants. The symposium will explore the personality development of the well child, with particular attention to defenses and also how parental attitudes towards the well child are affected by having a child with a severe deformity. The first case, a late adolescent girl, will be presented by Robin Turner (USA) with a discussion by William Heuves (Netherlands). The second case, a latency girl, will be presented by Beatrice Griffin (USA) with a discussion by Nathaniel Donson (USA). Dr. Barrett’s efforts have been remarkable and this symposium will be a significant contribution by child analysis to the IACAPAP program.

Report of the Liaison to IPA – Peter Blos, Jr., M.D.

ACP Reception at the 41st IPA Congress, Santiago, Chile

At this time I have nothing specific to report. I am in touch with the IPA Central office and have told them of our interest in holding a reception for all child analysts at the Santiago Congress. I am also in the process of being in touch with a child analyst in Chile, Dr. ‘Ililana Puiluan, about this matter as well.

Report of the Membership Committee – Kerry Kelly Novick

The Membership Committee has worked on several matters since the last annual meeting.

1. New Sponsorships

There have been many sponsorships for candidate memberships, most of which have been routine. The membership committee has prepared a list of 29

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individuals for circulation to the general membership. Since we anticipate receiving more sponsorships immediately after the meeting, we have deferred sending out the list until the end of April.

The rate of sponsorships for Regular members seems to have diminished. Does this reflect a slowdown in the rate of graduations from child trainings? The Committee will have a list of 3 individuals for circulation next month.

2. Procedures for dealing with objections to sponsors

The Membership Committee devised an ad hoc procedure to deal with the unprecedented situation of an objection being lodged. This led to recognition within the ACP of our need for more explicit ethical guidelines and procedures for dealing with complaints in relation to prospective and actual members. The Membership Chair is working actively with the officers of the ACP to address these issues.

3. Revised text for Guidelines to Sponsors

Sponsors continue to have difficulty in relation to the information requested when sponsoring someone, particularly for Regular Membership. To help clarify the process and requirements, the Membership Committee will include the following paragraph on the form of Guidelines for Sponsors:

The ACP is a community of analysts whose work and communication is founded on comparable experience and education. Therefore, the organization requires that Regular Members have had supervised analytic experience with children from each of three age groups: preschool, latency, and adolescence--and that the analyses were conducted at a frequency of four or five sessions per week. Although individual clinicians often specialize, ACP analysts can assess and treat children of any age. This provides the basis for essential common understanding of development and developmental processes.

The Administrator will in future automatically send the guidelines to sponsors to fill out, both to continue to educate our members, and to standardize the information in our records.

Kerry Novick reminded the members of the Executive Council that there are two points to consider regarding requirements for Regular Membership: 1) Ethical standards and 2) Training of the nominee.

Report of the Newsletter — Paul Brinich, Ph.D.

The following is a brief report on the Newsletter for review by the ACP executive committee. This is substantially the same as the report I sent to you last November as we have switched to twice-yearly publication and thus have not published an issue of the Newsletter since the December Executive Committee meeting. The next issue of the Newsletter will appear after our Boston meeting. [It will once again be an “Abstracts” issue.]

During 1997 we published three issues of the Newsletter; some data appear below:

On the above production costs were added the cost of some supplies (e.g., printer toner), software upgrades, the replacement of our “486” computer with a newer machine, and the purchase of a scanner for inputting materials sent in hard copy form. The total for these expenses was about $2,200.00 (after subtracting the amount we gained from the sale of the old computer).

I was pleased that we managed to get the “abstracts” issue of the Newsletter to most ACP members in June. Experience has shown that it is wise to insist upon quick work by the reporters who prepare the abstracts. Most reporters submitted their materials on disk or via e-mail; this speeds up the process of editing.

The November issue was, like the June issue, 36 pages; this was because the “minutes” of the Cancun executive committee meeting and of the annual business meeting were both included in the November rather than the June issue. [This may be worth our consideration. How high a priority do we wish to put on getting the minutes to our members quickly?]

As agreed at the Cancun meeting, we have reduced the frequency of publication of the Newsletter to two issues each year (the Abstracts issue in May or June and another in November or December). (Since mailing costs are a large portion of the Newsletter’s expenses, this alone will cut expenses by about $700 per year. See the chart above for the cost of mailing our March issue.)

Once again I would suggest that the Executive Committee consider establishing a regular budget “line” for the Newsletter, one that would bring some long-term planning to this project. Specifically, although our switch to “desk-top” printing reduced our printing costs substantially, the equipment needed to do this work needs periodic replacement (as software changes and hardware ages). I would suggest that we budget a certain amount -- perhaps $1000 per year -- to cover such periodic, re-occurring expenses associated with the Newsletter and its production.

Finally, as I warned in my report last November, I have recently taken on the role of “interim” director for the Children’s Psychiatric Institute here in North Carolina (effective 1/1/98). The additional responsibilities involved are substantial (overall management of a 65-bed psychiatric hospital for children and adolescents) and this change has me looking around for other areas where I can “cut back.” I’ve done the Newsletter for 5 years now (2 issues in ’93, and 3 issues in ’94, ’95, ’96, and ’97) and I think it would be a good idea for the ACP to be developing a successor as editor. I’ve enjoyed many aspects of the job but it does take roughly 2 days of fairly concentrated work to put together each issue.

It is essential that this person be someone who is comfortable with computers and with the Windows 95 environment; I’d be happy to spend some time introducing him or her to how I’ve organized things and why. I am happy to report that Barbara Streeter and Denia Barrett (both in Cleveland) have expressed an interest in the job. I will be discussing some of the details with them during the course of our meeting in Boston. I am sure that other ACP members will have important and useful input regarding the future of the Newsletter and its leadership. For example, I think we might do more to encourage regular contact between the Editor and others with links to APsaA, to the Association for Child Psychotherapy (UK), to the European Psychoanalytic Federation, and to the IPA. I welcome your suggestions and requests for clarification.

Mrs. Furman expressed reservations about establishing a budget for the Newsletter at this time. Since there will be new editors of the Newsletter, it is not known what equipment will be needed. The necessity of making sure that the abstract to be put in the Newsletter has been reviewed by the person who is being abstracted was stressed.

It was agreed that when the Minutes are included it should be in a single issue such as the June issue. See the chart above for the cost of mailing our March issue.)

Question: Is the Newsletter a private document?

After a general discussion, The Executive Council agreed that nothing should be in the Newsletter that we don’t want made

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public. When the Minutes of the Executive Committee meeting are included, it should be stated whether or not these minutes were approved by the Executive Committee. When the Minutes of the Annual Business meeting are included in the Newsletter, corrections should be invited in preparation for the approval at the next Business meeting of the membership.

Report of the Nominating Committee — Jules Glenn, M.D.
I again thank the Nominating Committee for their cooperation and thoughtfulness in selecting members of the Association for Child Psychoanalysis to run for office.
A total of 484 ballots were mailed to all regular members of the ACP. Of these 225 were returned — 46%. The following are the results:

- President-Elect: Martin Silverman, M.D.
- Secretary-Elect: Elizabeth Tuters, C.S.W.
- Treasurer: Julio Morales, M.D.
- Councillor: Arthur J. Farley, M.D.
- Ruth K. Karush, M.D.
- Steven Marans, M.D.
- Candidate Councillor: Nathaniel Donson, M.D.
- Sylvia S. Welsh, Ph.D.

President Jacobs announced that Dr. Jules Glenn is retiring as Chairman of the Nominating Committee after many years. Dr. Jacobs stated, “He has done a tremendous amount of work with total dedication and we thank him for it.”

Report of the Program Committee — Laurie Levinson, Ph.D. and Janet Szydlo, Co-chairs
The Committee will take a different approach in choosing a topic for the Annual Meeting in Seattle in 1999. The topic will come from clinical case papers submitted. Another possibility is to have no set topic. We have many people applying to give papers. The role of Moderator has changed as the framer of the discussion and workshop leaders have their choice of having a discussant. We will listen to the response of this program.
There was discussion of factors that make for a good program, the essential one being to bring it alive. Ideas were given for future programs.

Report of Study Groups and Continuing Medical Education — Julio Morales, M.D.
Our association with the Committee of Joint Sponsorship of the American Psychoanalytic Association and the Council of the American Psychological Association to provide CME and CE credit for the annual meeting, is well established at this time. We are also pleased to inform you that we are providing CE credit for the activities of some study groups throughout the country.
As I am stepping down as the Chair of this Committee to assume my duties as Treasurer of the Association, I would like to express my gratitude to our President, Dr. Ted Jacobs, and to other members of the Association for their support of this Committee. In particular, I want to thank our Executive Secretary, Mrs. Nancy Hall for her many hours of dedicated work in the preparation of lengthy reports necessary for the effective functioning of this Committee.

Old Business
There was no old business.

New Business
The category of Collegial Membership was discussed. Collegial membership was established for colleagues who have not obtained full child analytic training but have contributed to child analysis through research, educational activities, or any other way deemed worthy by the sponsors in special recognition. Dr. Herve Benhamou, M.D. of France has been recommended for Collegial Membership by Professors Serge Levovici and Dr. Colette Chiland of Paris. Dr. Benhamou has been trained in the analysis of children and adolescents. He is presently working as the head of a team in Centre Alfred Binet and Hospital Esquirol. He has important relationships with colleagues in Russia, in Moscow and St. Petersburgh, and in the United Kingdom with the Anna Freud Centre. He is a member of the IPA and has participated in the seminars of the Paris Psychoanalytical Society.
A motion was made to extend an invitation to Dr. Benhamou for Collegial Membership in the ACP. The motion was seconded and unanimously approved.

Meeting adjourned at 3:45 p.m.
MINUTES of the ANNUAL BUSINESS MEETING
Sunday, April 5, 1998  Back Bay Hilton Hotel  Boston, Massachusetts

This publication is our way of distributing these minutes to the membership. Any errors or corrections may be sent to the Secretary, Joseph Bierman, M.D., or to the Association’s Administrator, Mrs. Nancy Hall, P.O. Box 253, Ramsey, New Jersey 07446. The minutes will be submitted for approval at the Annual Business Meeting in Seattle in April, 1999.

Presiding: Theodore J. Jacobs, M.D., President; Judith Chused, M.D., Secretary; Alan B. Zients, M.D., Treasurer. President Jacobs called the meeting to order at 9:05 p.m. with a welcome to all members in attendance encouraging questions from anyone.

Minutes: The minutes of the last Annual Business Meeting held in Cancun on March 22, 1997 were approved.

Report Of The Secretary – Judith Chused, M.D.
Dr. Chused reported on the status of the membership. Presently in the USA there are 401 regular members, 118 candidates, and 2 collegiate members for a total of 522. Outside the USA there are 88 regular members and 22 candidates for a total of 110. A combined total of ACP membership is 632.

Thanks were given to the outgoing officers and councilors. Officers who have served for two years are Theodore J. Jacobs, M.D., President; Judith Chused, M.D., Secretary and Alan Zients, M.D., Treasurer. Councilors whose terms expire at this 1998 Annual Meeting are Alan Gurwitt, M.D., Anita Schmukler, D.O. and Judith Yanof, M.D.

A moment of silence was observed for those members deceased the past year.

Deceased
Sidney Berman, M.D.  Bethesda, MD
Peter Blos, Ph.D.  New York, NY
Virginia L. Clover, M.D.  Irving, TX
John A. Flower, M.D.  Durham, NC
Edwin S. Kessler, M.D.  Mobile, AL
Naomi Ragins, M.D.  Pittsburgh, PA
Helen Schur, M.D.  New York, NY

It has since come to the secretary’s attention the deaths of Catherine Berwald and Alice Rolnick from Cleveland Heights, OH

Resigned:
Ann Hallev Appelbaum, M.D.  New York, NY
Richard Kaufman, Ph.D.  Northbrook, IL
Sara Amiel-Busikler  Israel
Paul R. Keith, M.D.  San Diego, CA
Jay Davis, M.D.  Austin, TX
Barrie Biven, M.D.  South Africa
Michael Fishman, M.D.  Bethesda, MD

New Members Since the 1997 Annual Meeting in Cancun, Mexico

Regular Members
1. Anne Alvarez
2. Julia Fabricius, B.Sc.
3. Newell Fisher, M.D.
4. Penelope J. Hooks, M.D.
5. Katharina Seifert

Candidate Members
1. Ivers Bever
2. Sarah A. Birss, M.D.
3. Nancy Blieden, Ph.D.
4. Kimberley D. Boyd, M.D.
5. Anita Bryce, Ph.D.
6. Kim Bullock, M.D.

7. Stan Case, M.S.W.
8. Charis Cladouhos, M.D.
9. Bayard D. Clarkson, Jr., M.D.
10. Cheryl Chapman
11. Paul Dube
12. Stephen Elig, M.D.
14. Eleanor Herzog, Ph.D.
15. Deborah Hutton
16. Lee Jaffee, M.D.
17. Keith Kanner, Ph.D.
18. Howard Lerner, Ph.D.
19. Barbara S. Lewis, M.D.
20. Nels Magelson, Psy.D.
21. Robert C. Nardone, M.D.
22. Kristen Nott
23. John Olson, M.D.
24. Rachel Seidel, M.D.
25. Nina Stark, LCSW
26. Barbara Stimmel, Ph.D.
27. Melissa Stoker
28. Jonathan Sugar, M.D.
29. Karen Strupp, Ph.D.
30. Shira Vollmer, M.D.

Report of the Treasurer
This report reflects our finances through December 31, 1997. Our funds are invested with the Vanguard Group. The Endowment Fund has a balance of $71,077. This is an increase of $13,181 from the 1996 year end figure of $57,896. The Operating Fund had a balance of $57,992 on 12/31/97 which compares to $49,269 on 12/31/96. Our total assets as of 12/31/97 were $129,069 which compares with $107,165 on 12/31/96. In addition, the checking account had a balance of approximately $18,090 as of 12/31/97.

Income for 1997 was $70,113 with expenses of $82,337. Every effort is made to reduce expenses.

A decision was made in 1997 to permit dues payment through the use of Visa and MasterCard. In order to obtain the best rate for Visa and MasterCard, we transferred our banking from the Lakeview Bank in Ramsey, New Jersey to Commerce Bank also in Ramsey, New Jersey. The use of Visa and MasterCard permits European members to charge their dues and eliminates costly conversion costs to US dollars.

European Dues
All dues are now collected through the Central office with the administrator, Nancy Hall. We are thankful to Ros Bidmead and The Anna Freud Centre for the years of assistance they have provided in collecting dues from our European colleagues. The amount of $1765 was transferred from the ACP European account to the US account.

Dues
The dues collected in 1997, including $2,198 contributions to the Grants Program, were $45,200 as compared to $37,632 in December 31, 1996. This is due in part to an increase in the dues payment. We are making every effort to collect delinquent dues. Members who have not paid their dues for three years will have their membership terminated if there is not a prompt response to our request for payment.

Report of Committees
Arrangements – Jack Pelaccio, M.D.
The 1998 meeting in Boston is different from Cancun in 1997 because many people signed up ahead of time and stayed longer. In order to get the meeting rooms free we needed to book 100 rooms. This was not achieved until the very last deadline.

Seattle 1999
The Four Seasons Olympia has been booked for March 26-28,

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Annual Business Minutes . . .

(Continued from page 18)

1999. We try to move ahead quickly because in this economy hotels fill up quickly. Suggestions have been given for the Annual Meeting in 2000, but no decision has been made.

Communications – Leon Hoffman, M.D.
An important accomplishment of this Committee has been the development of a Web Page for which Perry Branson, M.D. is responsible. Much content work between the American Psychoanalytic and ACP has been done. Dr. Hoffman is the chair of this committee of the American Psychoanalytic and the representative is Dr. Shopper. This communications committee will cultivate a lot of the outreach material and distribute it to members.

Coordinate Assistance to Child Analysis in Eastern Europe - Lilo Plaschkes, M.S.W.
Dr. Peter Blos, Jr. and Lilo Plaschkes were involved for the third year in teaching at the Eastern European Summer School in Croatia. They reported the gratifying work that is being done there with adolescents and children.

Extension Division – Karen Marschke-Tobier, C.S.W.
The clinical workshop to be given after this Annual Meeting is a joint effort of the ACP and the Boston Psychoanalytic Society and Institute. The program is on psychotherapeutic work with inner city children. Dr. Martin Silverman will present “Intensive Psychotherapy of Disadvantaged Children in an Inner City Low-Fee Clinic Setting.” In December 1997 the extension division program was “The Psychology of Learning Disabilities: A Psychoanalytic Perspective” with presentations of clinical cases by Drs. Susan Sherkow and Martin Silverman. Dr. Jules Glenn, a specialist in learning disabilities led the open discussion.

Liaison – Barbara Deutsch, M.D., Chair
This work has centered on having a workable connection with other groups, particularly the American Academy of Child and Adolescent Psychiatry. Active and interested people in the American Psychoanalytic have reached out to the ACP for a closer association.

Liaison – Program Committee, International Psychoanalytic Association - Peter Blos, Jr., M.D.
A meeting will be held in Santiago, Chile on July 25-30, 1999. Two half day panels are scheduled on Child Psychoanalysis and Adolescent Psychoanalysis. There will be a cocktail reception sponsored by the ACP.

Liaison-International Assoc. for Child and Adolescent Psychiatry and Allied Professionals – Stephanie Smith, LCSW
The 1998 meeting will be in Stockholm, Sweden on August 2-6. Dr. Thomas Barrett will chair an ACP sponsored half day symposium on “The Other Child: Therapeutic Efforts on Behalf of Siblings of Children with Severe and Disabling Congenital Anomalies.”

Membership – Kerry Kelly Novick
There have been a gratifying number of new candidate members which increases the vitality of the organization. The number of regular members has been much smaller.

Newsletter – Paul Brinich, Ph.D.
There were three issues published in 1997 for a total cost of $6,270.88. A decision has been made to publish the Newsletter twice a year. The new editors of the Newsletter will be Barbara Streeter and Denia Barrett, who will assume their duties after the June 1998 issue.

Dr. Brinich stated that the Minutes appear in the Newsletter before they are formally accepted. This is done for circulation to the members to allow for corrections. The members voiced their appreciation to Dr. Brinich for his dedicated and creative work as editor of the Newsletter.

Nominating – Jules Glenn, M.D.
The following officers were elected to serve for the next two years: President-Elect Martin Silverman, M.D., Secretary-Elect Elizabeth Tutors, C.S.W., and Julio Morales, M.D., Treasurer.

The newly elected councilors who will serve for the next three years are: Arthur Farley, M.D., Ruth Karush, M.D., Steven Marans, Ph.D. and candidate councilors Nathaniel Donson, M.D. and Sylvia Welsh, Ph.D. This is the first time elected candidate councilors will be serving on the Executive Committee.

President Jacobs announced that Dr. Glenn is retiring from chairmanship of the Nominating Committee. He spoke of the dedicated job he has done in getting the very best people to run for office. Members showed their appreciation with a round of applause for Dr. Glenn.

Program – Laurie Levinson, Ph.D. and Janet S. Szydlo, Ph.D.
The co-chairs issued a call for papers for the meeting in 1999 in Seattle. The topic will be determined from the papers received. The Program Committee met earlier to evaluate the program for 1998.

Study Groups and Continuing Medical Education—Julio Morales, M.D.
The arrangements with the American Psychoanalytic and the American Psychological are now firmly established. The requirements of these sponsors have become increasingly difficult including writing lengthy reports and giving personal interviews in Chicago. Membership has shown they are strongly in favor of receiving CE/CME credits for the meetings they attend. Study Groups also need to have this credit for license renewal. Dr. Morales expressed his appreciation to Dr. Jacobs and the other officers for their support of this program.

Dr. Morales will no longer be the chair of this committee, having assumed the duties of treasurer.

Old Business
There was none.

New Business
Dr. Jacobs announced the invitation for collegial membership will be extended to Herve Benhamou, M.D. of France. Dr. Benhamou has been trained in the analysis of children and adolescents and is now head of a major organization in France.

Dr. Theodore Cohen spoke of the upcoming 30th anniversary of the Study of the Vulnerable Child Workshop with the ACP and the American Psychoanalytic. This will be celebrated at the December 1998 meeting of the American Psychoanalytic and the 1999 ACP meeting in Seattle.

In his concluding remarks as President, Dr Jacobs gave special thanks to Nancy Hall, administrator, for her responsive work throughout the year and to her friend Mell Storey for her assistance at this meeting. Other chairmen voiced their appreciation also.

(Continued on page 20)
Dr. Jacobs introduced the new officers: President, Erna Furman; Secretary, Joseph Bierman, M.D.; and Treasurer, Julio Morales, M.D.

Address by Mrs. Furman
I have Joe’s kind permission to speak for both of us. I wish to make three points: 1) Thank you for entrusting us with the stewardship of this very beloved association, 2) I wish to thank our predecessors, Drs. Jacobs and Chused. We have learned an enormous amount in working with and through them. From them we learned a great deal about this organization and the running of it. This we very much appreciate, and 3) The valuable lessons we have learned during our years of apprenticeship have given rise to the formulation of some ways in which we hope to preserve and invigorate the values that this organization stands for and its goals for which it was founded. My only way to speak to all of you is through the Newsletter and so in the upcoming Newsletter some of these ideas will be in print. Please read the Newsletter. For you, of course, it is much easier to be in direct touch with me and we do want to hear from you. From every one of you, I take every thought, every suggestion very seriously. We will serve as best we can. We want to earn your trust. Thank you.

The meeting was adjourned at 9:55 a.m.

Update on ACP Committees: Chairs and Members
October 1998

Erna Furman, ACP President

ACP Committees, Chairperson, and Committee Members, confirmed by the Executive Committee: The names with asterisks * are newly joined or appointed since June 1998, completing all Committee memberships to work for the ACP.

1. Abstracts
   Chair: Kent Hart, M.D.
2. Arrangements
   Chair: Jack Pelaccio, M.D.
   Members: Catherine Henderson, Ph.D., Juan Rene Geada, M.D.*, Joseph S. Bierman, M.D.* (ad hoc)
3. Communications
   Chair: Leon Hoffman, M.D.
   Members: Roy Aruffo, M.D., Thomas Barrett, Ph.D., Perry Branson, M.D., Paul Brinich, Ph.D., Cynthia Carlson, Barbara Deutsch, M.D., Nathaniel Donson, M.D., Theodore Jacobs, M.D., Laurie Levinson, Ph.D., Frances Martin, Judith Pitlick, Howard Rudominer, M.D., Anita Schmukler, D.O., Moisy Shopper, M.D., Donald Silver, M.D., Stephanie Smith, LICSW, Barbara Streeter, Andrea Weiss, Ph.D.
4. Coordinating Assistance in Eastern Europe
   Chair: Lilo Plaschkes, M.S.W.
   Members: Peter Blos, Jr., M.D., Elizabeth Tuters, C.S.W.*, Maurice Apprey, Ph.D.*, Adriana Lis*
5. Ethical Guidelines
   Chair: Peter Blos, Jr., M.D.
   Members: June Greenspan-Margolis, M.D., Paul Brinich, Ph.D., Barbara Carr, M.A., Barbara Lewis, M.D.* (candidate member)
   Consultants: Anne Hurry, Kerry Kelly Novick, Gustav Amnell, M.D.
6. Extension
   Chair: Karen Marschke-Tobier, C.S.W.
7. Grants
   Chair: Charles Mangham, M.D.
   Members: Robert Gillman, M.D., Jill Miller, Ph.D., Cynthia Carlson
8. Liaison
   Chair: Barbara Deutsch, M.D.
9. Liaison – IPA Program and European Federation
   Chair: Peter Blos, Jr., M.D.
10. Liaison – IACAPAP and Association for Clinical Social Workers
    Chair: Stephanie Smith, LICSW
11. Long Range Planning
    Chair: Jack Novick, Ph.D.
    Members: Robert A. Furman, M.D.*, Frances Marton, C.S.W.*, Mary Jane Otte, Ph.D.*, John Rosegrant, Ph.D.*, (candidate member)
    Consultants: Christel Airas*, Julia Fabricius*
12. Membership
    Chair: Kerry Kelly Novick
    Members: Ava Bry Penman, Heiman van Dam, M.D., Ruth Hall, Lilo Plaschkes, M.S.W., Janet Shein Szydlo, Jack Novick, Ph.D., Anne Hurry, Colin Pereira Weber, M.S.W.
13. Newsletter
    Co-Chairs: Denia Barrett and Barbara Streeter
14. Nominating
    Chair: Marion Gedney, Ph.D.
    Members: Maurice Apprey, Ph.D., Werner Schimmelbusch, M.D.
15. Program
    Co-chairs: Laurie Levinson, Ph.D. and Janet Shein Szydlo
    Members: Thomas Barrett, Ph.D., Paul Brinich, Ph.D., Barbara Deutsch, M.D., Kent Hart, M.D., Leon Hoffman, M.D., Theodore Jacobs, M.D., Randi Markowitz, M.Sc., Karen Marschke, C.S.W., Jill Miller, Ph.D., Jack Novick, Ph.D., Kerry Kelly Novick, Eva Landauer, M.S., Wendy Olesker, Ph.D. Ava Bry Penman, Katherine Rees, Ph.D., L. Noah Shaw, M.D., Stephanie Smith, LICSW, Elizabeth Tuters, C.S.W., Catherine Henderson, Ph.D.
16. Register of Cases
    Chair: Robert Galatzer-Levy, M.D.
17. Study Groups and Continuing Education
    Chair: Stanley Leiken, M.D.
    Member: Barbara Streeter, L.P.C.C.

Please note: Consultants are not committee members. Their services are used ad hoc at the committee’s discretion. The President and President-Elect are ex-officio members of all committees, thus enlarging by two the above listed membership counts.
Any errors or corrections may be sent to the Secretary, Joseph Bieman, M.D., or to the Association’s Administrator, Mrs. Nancy Hall, P.O. Box 253, Ramsey, New Jersey 07446. These minutes will be submitted for approval at the Executive Committee Meeting at the Annual Meeting of the Association in Seattle in April, 1999.

The Executive Committee meeting was called to order by Mrs. Erna Furman at 1:00 p.m. EDT at the Hanna Perkins Center, 2084 Cornell Road, Cleveland OH 44106.

Those attending in person included (in alphabetical order) Denia Barrett, Joseph Bieman, Peter Blos, Jr., Arthur Farley, Erna Furman, Jack Novick,, Kerry Novick, Lilo Plasschkes, M. Barrie Richmond, and Barbara Streeter. Nancy Hall was also present. Present for all or part of the time by telephone conference call were Nathaniel Donson, Marion Gedney, Kent Hart, Cathy Henderson, Ruth Karush, Stanley Leiken, Charles Mangham, Steven Marans, Julio Morales, Martin Silverman, Stephanie Smith, and Elizabeth Tuters.

Discussion of the minutes of the Executive Committee meeting of April 3, 1998.

Several topics in the minutes were enlarged upon and clarified. Under the heading of Grants on p.2 the matter of the grantee on page 21 in the penultimate paragraph the following statement should be included: When the President announced that the locale had not been decided. There was a discussion about the timing of that decision. While the decision is usually made at least one year ahead of the designated meeting, there may be the need for an earlier decision based on available hotel space and rates. Thus, Dr. Pelaccio, the chair of the Arrangements Committee, with input about hotels from Dr. Geada from Miami and Dr. Bieman from Baltimore, will be in charge of deciding when we have to make a decision about the locale. If this precedes the Seattle meeting, there will be a mail ballot sent to the Executive Committee.

The corrections and emendations to the minutes were passed with the necessary 8 votes.

The President’s Report

a. Confirmation of Committee members.

Mrs. Furman announced that the confirmation of the members of the remaining Committee members on the Ethical Guidelines, Coordinated Assistance to Eastern European Countries, Future Planning, and Arrangement Committees has been completed. Elizabeth Tuters added her name to the list confirming the Committee members.

b. Documents and Archives

Through the efforts of attorney Ken Silverman, Dr. Martin Silverman’s son, the ACP has been able to obtain copies of both the 1963 and 1971 articles of incorporation of the ACP. A fee of $112 was paid to the agent who carried out the actual acquisition of these documents.

c. Harassment Policy and Grievance Procedure.

Because the ACP needs to have a sexual harassment policy and grievance procedure in order to qualify for the Continuing Education accreditation by the American Psychological Association, Dr. Stanley Leiken, Chair of the Continuing Education and Study Group Committee provided the policy and procedure used by the Los Angeles Institute and Society, adapted it to the needs of the ACP and had it reviewed by counsel. Mrs. Furman also adapted the Grievance Procedure of the Hanna Perkins Center to the needs of the ACP. Legal counsel reviewed the adaptations.

The discussion centered on whom these policies would cover. By a vote of 9 to 0 the Executive Committee accepted the harassment policy and grievance procedure for potential employees of the ACP and to delete the phrase “a cohort fellow member.”

d. Differentiating the Opinions of the ACP from the Opinions of Individual Members for Purposes of Clarification and Legal Protection.

Because of the increasing contacts of the ACP with other mental health professionals as well as the lay public through such activities such as the internet, workshops, newspapers, etc., we are increasingly exposed to potential misunderstandings and liabilities. It is deemed necessary to distinguish between the official opinions and statements endorsed by the ACP and those of individual members who participate in our programs or correspondence. Therefore, the Executive Committee voted with 9 in favor to use the following statement recommended by counsel: “The statements (or opinions) rendered by the speakers (or: presenters, writers.....fill in names if possible) in this program (or: presentation, workshop) are their (or: his, her) own and do not necessarily represent those of the ACP as an organization.”

e. Recommended Amendments to the Bylaws

Our legal counsel reviewed our bylaws and while he found them essentially sound and serviceable, he recommended four amendments to bring them up to date:

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Executive Committee Minutes . . .

(Continued from page 21)

1. To assure that a question about the legitimacy of the venue of our Annual scientific and business meetings will not be raised, counsel recommended the following addition to Article III (Meetings), section 3: “The Annual meeting shall be held at any location designated by the Executive Committee.” It was approved with 9 votes in favor.

2. To assure that our bylaws are up to date in regard to current communication technology and to assure that vote on the use of such technology such as phone conferencing does not need to be voted on prior to each meeting of the Executive Committee, counsel recommended the inclusion of the following amendment in Article V (Executive Committee), section 5: Any meeting of the Executive Committee may also be held through use of telephone or any other communications equipment if all persons participating can hear each other. Participation in the communication is deemed to constitute any participant’s presence for purposes of establishing a quorum for that meeting.” The Committee approved with 9 votes in favor.

The matter of the definition of a quorum for an Executive Committee meeting as consisting of half of its membership and the requirement of a majority vote of the entire membership of the Executive Committee as stated in Article V, Section 5 came under discussion. The impact of two non-voting members, the Candidate Councillors, on these requirements was explored. Mrs. Furman will consult with legal counsel to see what, if any, changes might be necessary.

3. Counsel recommended an amendment to provide necessary and customary protection against undue litigation demands for all members of the Executive Committee, Chairs and Members of Committees. This amendment would cover gaps that can arise in insurance contracts. It would be inserted in Article V (Executive Committee) Section 9. a.b.c.d.e. It was approved with 9 votes in favor.

4. The amendment to Article V (Executive Committee), Section 6. e. is designed to enable the Executive Committee to purchase the necessary insurance without being potentially blamed for using ACP money to protect themselves. This was approved with 9 votes in favor.

The proposed amendments will be sent out to the membership to be voted on.

f. Insurance Policies (Current and Proposed)

Upon the request of Mrs. Furman, legal counsel reviewed the ACP Professional Liability Insurance policy and found that it was satisfactory except for the fact that it did not include a general injury liability which ought to be part of the coverage. Legal counsel contacted the insurance firm. As a result there is now a correct policy with a rider to the existing policy. The cost will be between $350 and $400. This insurance upgrade was approved with 9 votes.

A question was brought up about when the President can go ahead and approve expenses without the approval of the entire Executive Committee. Mrs. Furman was of the opinion that there has been too much presidential privilege, and that everything beyond the yearly budget should be approved by the Executive Committee. If there is some question that a person has about a possible ACP expense and cannot submit the request to the Executive Committee in advance, such as Mrs. Furman had about going to the Carter Center meeting, she suggested the following procedure. 1. Pay for it yourself. 2. Prove to the Executive Committee that it is a necessary expense to be reimbursed. 3. If the Committee does not approve, you have incurred the expense yourself.

g. Roster and Status of Members Not Paying Dues.

44 members had not paid dues for three years. The ACP sent each a letter personally signed by Mrs. Furman requesting a response with a deadline stated. 15 responded, including 2 hardship cases with whom there then were negotiations. Ultimately, 25 members were dropped. There are accommodations for hardship, but no one should be allowed to pay nothing. A good rule of thumb for hardship payments would be the fee charged by the member for between 1 and 2 private sessions if somebody earns less than the dues.

There was a discussion of the reasons that these members did not pay their dues for three years. Medical candidates were prominent as a group in the non-payers. Some did not know that they were members. With some it was a way of saying no while their Institutes had put them up for membership without really consulting them. There will now be a modification of the procedure for sponsored membership. The sponsor will be asked if the proposed applicant has approved the application for membership. The applicant will then receive a letter inviting them to accept the sponsored membership. Upon the applicant’s response, a dues notice and a packet of information will be sent.

Are there additional reasons for non-payment? Dr. Nat Donson volunteered to make exploratory calls to other candidates who have not paid for 3 years and 2 years. He will enlist the aid of Dr. Sylvia Welsh, the other candidate councillor, in this endeavor. It was suggested that they ask the candidates how the ACP can be of help to them.

Dr. Donson volunteered as a way of becoming more involved as a candidate in the work of the ACP. Dr. Donson will review a letter that Dr. Robert Furman had written during the debate about candidates being on the Executive Committee, listing some ways in which candidate members could be helped to become part of the organization.

Because Stephanie Smith could only attend by telephone briefly, she gave reports on two committees at this point in the meeting.

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Executive Committee Minutes . . .

(Continued from page 22)

Report of the Liaison to IACAPAP.
She thanked Dr. Tom Barrett for his hard work in arranging the successful ACP/IACAPAP program held in Stockholm, August 1998. He will send in a report to the Newsletter. The next program will be held in New Delhi, India on October 29-November 2, 2002.

Report of the Liaison for Clinical Social Workers.
This is a new liaison committee. At the suggestion of Mrs. Furman, Stephanie Smith got in touch with a local clinical group in Dallas which had evidenced interest in child analysis. She raised two points for discussion. The first was the matter of meeting with national organizations on the one hand, and with smaller subgroups or local groups on the other. Mrs. Furman expressed the view that our contacts should be with individuals because we want relationships with people whom we can help and who can help us. The second was the possibility of a joint meeting(s) of all of our liaison committees to see if there are some overarching principles that can be applied to the various groups with which we would have some liaison. It was decided that the various liaison committees should meet and have a first draft report ready for the Seattle meeting.

Dr. Richmond will facilitate contact with Dr. Bert Cohler as a possible chair for a liaison committee with Division 39.

h. Marianne Kris Award and Invited Speakers - Guidelines on Expenses.
Since there had been wide variation in regard to the material aspects of the award over the years, it is deemed essential to formulate clear guidelines to avoid unfairness to awardees, to invited speakers, and to the ACP. In his treasurer’s report of March 1995, Dr. Samuel Weiss had stressed the need for a clear policy in this matter. For example, the Marianne Kris Award and Plenary Speakers travel, hotel and gift expenses in 1997 totaled almost $6700 (4320 + 2375), while in 1993 the Award expenses were $90.

Because they were unable to attend the meeting in person or by conference call, Paula Atkeson, Rene Gelman and Jill Miller had each communicated to Mrs. Furman that this kind of expense was too much, that we need to limit what is expended. After a free wheeling discussion, the Executive Committee settled on the following guidelines:

- The Marianne Kris Awardee should be an ACP member. The ACP should not pay expenses or an honorarium. Accompanying the award, a certificate and a small gift chosen by the President in consultation with the Awardee should not exceed $150. If a non-member is chosen as the Awardee or as an invited speaker, he/she will not pay a registration fee but will not receive other payments, such as an honorarium or expense reimbursement. If he/she needs financial help to attend the meeting, the amount provided must be determined with the approval of the Executive Committee. In that instance, the Treasurer is to advise the Executive Committee about the financial state of the ACP, so it can decide about what may be reimbursed.

Mrs. Furman announced that the next Marianne Kris Awardee will be Dr. Peter Blos, Jr. He will talk on “Countertransference: Problems and Issues in the Analysis of Children.”

i. A Policy on Non-Members Attending ACP Scientific Meetings
The need to set a clear policy grew out of hearing from a number of non-members, including inquiries on the Internet, that when they inquired from various members if they could attend the scientific meetings, they received varying responses such as “never” and “oh come on,” and “just register.”

Originally, all non-members had to be personally invited in order to attend.

The discussion covered various topics. Could non-members be allowed to attend some papers and not others? Would this bring up feelings of exclusion? Would small group discussion become difficult for members and/or non-members? The Seattle members, with their searing lawsuit in mind, had written that they wanted local choice in the matter and were concerned about exclusion from some papers. Legal counsel had stated that if we would spell out ahead of time what we would be doing, it would be unlikely that we would be sued. The following was decided:

Non-members need to be sponsored by an ACP member. The Committee discussed and set guidelines for the fees to be paid by non-members. $200 is the registration fee for a non-member. If there is a hardship, the fee may be lowered to $100, which is the fee charged to candidates and students. The sponsor would need to consult with the Treasurer who can apprise the sponsor whether or not the state of the treasury would allow a reduction. The registration slip should have the name of the sponsor on it.

The discussion then turned to the pros and cons of keeping the ‘Guest’ category at meetings. The contribution of this category, which usually covers spouses and significant others, to the friendly, gregarious atmosphere of the meetings and to the Treasury was deemed more important overall than other concerns such as the possibility that a non-member paying a full registration fee might have some complaints about a guest member attending a Marianne Kris Award lecture. The Committee decided to keep this category.

j. Policy on Newsletter to Non-Members
For some time, the Newsletter has been sent out to non-members who have attended one or more annual scientific meetings. There are now about 200 copies circulated to non-members. This policy has never been voted on, while the distribution to psychoanalytic institutes here and abroad, numbering 40 copies, was approved by the Executive Committee. We hear from all over the world, for example, Lithuania and Czechoslovakia, about how pleased they are to get it.

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Executive Committee Minutes . . .

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The cost of sending out the Newsletter to the non-members is considerable and is estimated to approach $2000 a year. This calculates out roughly to each member giving a subsidy of $5 per year to the non-members receiving the Newsletter.

The discussion centered around several topics. Should we charge the non-members for mailing out copies to them? What is the philosophy of the Newsletter under the new Editors, Barbara Streeter and Denia Barrett? Should it be a voice for the ACP or for special child analytic groups? Might the circulation to non-members have a reining in effect on the publication of presented case material because of concerns about confidentiality? The Executive Committee decided to charge non-members $10 a year for the cost of the Newsletter. The philosophy has not altogether been decided on. What is certain is that the Newsletter is for the ACP. Notable events of other child psychoanalytic organizations can be covered in small notes rather than in multipage articles. There has been some general concern about confidentiality in some write-ups that have been published. The Editors will be observing any trends, especially concerning non-members as readers. They will keep us informed about the choice of material and will think about whether they would like additional people to help them.

k. Update on Violence in Youth Statement

Mrs. Furman reported that we are very satisfied with the response to our Violence in Youth Statement. For example, we have heard from the Department of Health and Human Services and the Justice Department and from Senators Allard and Nighthorse Campbell of Colorado and Lautenberg and Torricelli of New Jersey. Responses are still coming in.

l. Invitation to Carter Center Conference

The Carter Center in Atlanta sent an invitation to attend the Fourteenth Annual Rosalynn Carter Symposium on Mental Health Policy, chaired by the former First Lady. Since the conference, the title of which this year is Promoting Positive and Healthy Behaviors in Children, is a way for “leaders within the mental health community” to get to know each other and discuss issues, Mrs. Furman deemed it worth while to attend to explore possible future benefits of our presence there.

We have been getting invitations at least since last year and most probably for the last five. Mrs. Furman estimates the expenses of her attending to be $700 to $750. She asks to be reimbursed but if she is not, she will shoulder the expenses. In a discussion of the issue of cost, Mrs. Furman apprised the Committee that the expenses of this meeting were less than one-fifth of last year’s mid year meeting. The Executive Committee polled 7 members in favor of reimbursement but by this time, around 5 p.m., had lost a quorum when two members on the telephone had left. A mail ballot will be sent to the other members of the Executive Committee.

New Business

1. Another expense that was discussed was cost of $480 involved with the mailing for the Anna Freud Centre program on Violence in Young Adult Males to be held in New York in December. Laurie Levinson and Leon Hoffman put out the funds for this and ask to be reimbursed. On the one hand the ACP had agreed to be a cosponsor with the idea that it would not cost us any money. The program is not about children or adolescents, and the presenters are not Hampstead trained people. There will be the need to send out ballots to the Committee since there was not a quorum available. There were 4 in favor and 1 against.

2. Mrs. Nancy Hall recommended the purchase of a new Canon PC795 copier for $1000-1100. This new copier, the choice of which was carefully researched by Mrs. Hall, could produce potential savings of $1000 a year in copying/printing expenses that are sent out. There were 5 yes votes and ballots will be sent out to the remaining members of the Committee.

The remaining members of the Committee and attendees thanked Mrs. Furman for all of the work that she put into preparing for and organizing the meeting. Many thanks were also given to Mrs. Nancy Hall in recognition of all of her efforts.

The meeting was adjourned after 5 p.m.

The reports of the Secretary, the Treasurer, and the Committee Chairs did not become transacted business and will be addressed at the next Executive Committee Meeting.

Postscripts: The requests for reimbursement for the Carter Center and Anna Freud Centre expenses as well as funds for a new copier were approved by mail ballot. Collegial Membership for Dr. Merton Shill, sponsored by Dr. Jack Novick, and on the agenda as new business, was approved by polling the Executive Committee by fax, as was approval of an additional bylaws amendment (Article V, Section 5) which clarifies the status of voting and non-voting members of the Executive Committee for purposes of quorum and Executive Committee action.

Respectfully Submitted,

Joseph S. Bierman, M.D., Secretary
## INSURANCE POLICY
### Executive Summary

**ASSOCIATION PROFESSIONAL LIABILITY POLICY**

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<tr>
<th>Insured:</th>
<th>Association for Child Psychoanalysis, Inc.</th>
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<tr>
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**Major Endorsements/Exclusions:**
- Breach of Contract Exclusion
- Insured Association vs. Insured Exclusion
- Pending and Prior Litigation Exclusion
- Absolute Pollution Exclusion
- Definition of Wrongful Act Endorsement
- Spousal Endorsement
- Multi-year Endorsement
- New Jersey Amendatory Endorsement

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**Breach of Contract Exclusion:**
If the ACP fails to meet the terms of a negotiated contract, the policy will not cover; e.g., if we have a contract with a hotel in which to hold meetings and we cancel last minute, the hotel may sue us for breach of contract unless we have previously taken care to specify in the original agreement a certain notice period or other cancellation conditions.

**Insured Association vs. Insured Exclusion:**
If an ACP Member sues the ACP for wrongdoing, the ACP is insurance covered, but if the ACP sues a member for wrongdoing that member is not covered, e.g. if the ACP sues an officer for absconding with ACP funds, that officer is not covered by our policy.

**Pending and Prior Litigation Exclusion:**
No coverage for legal suits initiated prior to September 15, 1997, the start of policy coverage. Does not apply as there were no litigations.

**Absolute Pollution Exclusion:**
This would cover lead or pollution in buildings we own. Does not apply as we do not own premises.

**Definition of Wrongful Act Endorsement:**
If sued for wrongful acts, such as defamation (but not crimes) the policy would cover the accused officer or councillor.

**Spousal Endorsement:**
If an ACP administrative member is sued, along with his or her spouse, for actions taken as a part of regular duties, the spouse is covered as well.

**Multi-year Endorsement:**
The Coverage extends over the entire duration of the policy, i.e., through September 15, 2000.

**New Jersey Amendatory Endorsement:**
An insurance firm may change its terms at any time if it so advises the policy holders, e.g., such a change in terms was made by insurance firms following major losses through hurricanes and floods.

This summary endorsed by counsel July 29, 1998.

Erna Furman

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THIS SUMMARY IS AN OUTLINE OF THE COVERAGES PROVIDED, FOR FULL DESCRIPTIONS, CONDITIONS AND EXCLUSIONS, PLEASE READ YOUR POLICY
On Saturday, May 2, 1998, Selma Kramer, M.D. presented the psychoanalytic community with the 29th 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 Psychiatric 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: Stephen Schwartz, Chairman of the Department of Psychiatry at Jefferson; Anni Bergman, Gertrude Blanck, Robert Prall, Patricia Nachman, Lucy D. Inman, Charles Socarides, Houston MacIntosh, Wendy Olesker, Paul Schwaber, Gilbert Rose, and Patsy Turrini.

In his presentation, “Twinship and Twinning Reactions in Siblings,” Ricardo Ainslie, Ph.D. explored the role of twinning reactions in twin and non-twin siblings and concluded with a critique of the concept of twinning reactions. In twins, the twinning reaction is characterized by two key elements which result from their characteristically diffuse ego boundaries. First, there is a tendency to polarize identity characteristics into traits such as male/female, active/passive, leader/follower, and intelligent/less intelligent, as a strategy for anchoring a sense of self and for averting dangerous feelings of rivalry and competition. Dr. Ainslie noted that these polarized traits are not necessarily stable and do not necessarily reflect actual talents or capacities. Second, there is a propensity toward regressive blurring of boundaries between the twins. A common twin feeling is that only together do they constitute one complete person. Thus, in twins, there is a heightened conflict between normal developmental wishes to be more separate and autonomous and opposing wishes to merge and to form a symbiotic relationship. Significant levels of separation anxiety and dependency are frequently noted in twins.

Dr. Ainslie then suggested that such twinning reactions are an outgrowth of the unusual developmental circumstances which govern the twin relationship and alter the child’s passage through symbiosis on the way to separation-individuation. First, parenting twins simultaneously presents challenges for parents: caring for two infants at once and being adequately attuned to each individual infant. Second, as a respite from these challenges, parents may foster or accentuate the twin-twin relationship as twins become more aware of each other during the first year of life. These alterations in the symbiotic phase may interfere with the infant’s developing sufficient ego strength to effectively meet the challenges of separation-individuation and the rapprochement sub-phase of development. Furthermore, to the extent that twins comfort and soothe one another, the transitional function aspects of the twin relationship are enhanced. Thus, twins may continue to use the twin relationship as a means of managing anxiety, especially at times of heightened tension, such as rapprochement. In addition, overburdened parents may continue to accentuate the transitional aspects of the twin-twin relationship and not support and foster appropriate degrees of separation and individuation in the twins. This altered situation leads to the common characteristics in the psychological organization of twins, e.g. a strong tendency toward interidentification with concomitant self-object confusion, dependency, separation anxiety, and role complementarity.

Next, in considering twinning reactions in non-twin siblings, Dr. Ainslie stated that it is likely that all sibling relationships lend themselves to similar processes if there is sufficient intensity. He went on to suggest that twinning reactions are not so much about twins as they are about the consequences of close relationships where strong libidinal and aggressive components are at play, including marital relationships. Dr. Ainslie closed by underscoring the clinical importance of our growing understanding of sibling relationships and development. Thus, all depictions of siblings in psychoanalytic treatment do not represent displacement from parents, and sibling transferences may be formed.

Henri Parens, M.D., in his discussion of Dr. Ainslie’s presentation, emphasized the complex and rich ways that all siblings influence each other. Through his direct infant observational research, Dr. Parens found that siblings are meaningful as specific and primary love/hate objects and that certain features ascribed to twinning reactions, e.g. polarization of identity characteristics, occur as commonly in non-twin siblings. However, Dr. Parens said that there are certain twin-specific phenomena, e.g. blurring of self-boundaries and heightened separation anxiety, which result from their traveling in the same canoe, i.e. going through developmental phases together and during the same emotional-psychological family era.

In “Sisters and Their Disappointing Brothers,” Rosemary Balsam, M.D. explored female development through the lens of cross-gender sibling rivalry. She used analytic material of adult women who had grown up with extremely difficult and disappointing brothers to elaborate themes of the inner world of female gender development. She pointed out that this sibling constellation provided a sharp contrast to the one usually presented by authors with a more phallocentric view of female psychosexual

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Brothers and Sisters . . .

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development, that of the favored son and the denigrated daughter. In the families of Dr. Balsam's patients, the male child was seen as defective and despised and was subjugated, while the girl held all the hopes of the family and was grossly favored. Dr. Balsam considered her paper to be about siblings, but also to represent a clinical investigation of reversing gender stereotyping. She wondered what sort of woman would one see if her motives were to maintain the male as despised, defective, and subjugated.

Dr. Balsam presented detailed material from the analyses of two women, one with a brother who suffered from a severe psychiatric disturbance as well as a significant physical defect and another whose two-year older brother had serious birth defects and died when the patient was three years old. However, in her investigation, Dr. Balsam was also able to draw upon her experience treating five other woman with brothers who were very disappointing to them as well as to their entire families. These women were not self-effacing underachievers. In fact, they were quite successful in the world and were powerful, dominating and diminishing of the opposite sex much as the classically powerful “male” within the older phallocentric model.

Although these women were quite different from each other, there were notable similarities. They were highly ambitious, aggressive, and successful in the material world. A major feature of their inner lives was a narcissistic world view. In general, there was a noticeable lack of tenderness, concern, conscious guilt, and remorse regarding their damaged brothers toward whom they experienced primarily hatred. Although most of these women were heterosexual, and many had husbands and children, they were most troubled in their intimate relationships with men.

While these women evidenced numerous intrapsychic vulnerabilities, Dr. Balsam was particularly interested in understanding the factors underlying their adaptation, including their capacity to be involved in passionate, if mainly need-satisfying, relationships, and their ability to remain organized in their worlds with good-enough reality testing and affect regulation in the face of much raw and primitive fantasy and affect, especially aggression. Each woman had at least one parent who was entranced with and devoted to the growing girl's wondrousness and her abilities. This parent was extremely indulgent and lax in limit-setting with the daughter, while seeming to despise the damaged son. The girl became all-good while the boy was seen by the parents as a totally negative creature. The parents nurtured this state of mind in the girl, leading to a fusion between parents and daughter. The disappointing and imperfect son was separated off (and at times actually sent away to an institution). This state of affairs seems to have been re-created when the girls became adults. They were charismatic, and each created environments in which their attributes were appreciated and in which they experienced positive, all-indulgent reactions. Negatives of any kind, including shame, sadness, and disappointment, were met with ferocious anger, and the “bad” was sent away and kept outside. Another aspect of the inner world of narcissism, which was prevalent in all of these women, related to gender identity. While their core gender identities as females were clear to themselves, the later constructions of their gender identities were fluid creatures of blended male and female body aspects and attributes. In this narcissistic world of omnipotence, these patients could magically be either male or female and never needed to make a commitment to be either specific gender to the exclusion of the other.

Dr. Balsam also mentioned a double fantasy about men, a female Beast/Baby fantasy of men similar to the male Madonna/Whore fantasy of women, both of which occur in association with much fear of the opposite sex and their power. The basis for the Beast/Baby fantasy was a strong negativity to the male both as boy and man. The Beast fantasy was a version of the little girl’s fear and horror of the sexual father, and the Beast’s animal desire for sex was his main characteristic. He wanted to violate females to create a monster child. The woman’s main pleasure was in wooing and controlling him. As “Baby,” the male was despised and denigrated for his weakness, helplessness and stupidity. Any worship of the adult male went side-by-side with much desire to control through denigration. Dr. Balsam concluded that the clinical picture of a wish for power and dominance along with diminishment of the opposite sex is not distinctively “male” but may occur in either men or women and largely reflects a pre-genital, narcissistic intrapsychic world.

In his discussion of Dr. Balsam’s paper, Harold Blum, M.D. noted the range of ways in which a defective child may be treated by parents, including: an object of contempt, shame, and humiliation, a socioeconomic burden, a cross to bear, a scapegoat for other personal and familial problems, a reason for either rejection of or reliance upon the spouse, a source of masochistic gratification, or a source of pride in devotion to the defective, deformed and handicapped. Likewise, in sibling relationships, the entire array of affective reactions is to be found with envy, jealousy, and rivalry on one side and empathy, sympathy, generosity and love on the other. The parental reactions (e.g. depression) and defenses (e.g. avoidance of discussion and mourning) as well as parental attitudes, both conscious and unconscious, in addition to the sibling experience itself, all have a powerful influence on the developmental outcome of the normal child including the child’s standards, values and ideals. Dr. Blum reminded us of the numerous kinds of attitudes and outcomes which, in part, are derived from sibling relationships, including concern for the community and the standard of equal justice for all.

In “Childhood Sibling Rivalries and Womb Fantasies in Adults,” Vamik Volkan, M.D. described the development and content of one manifestation of sibling rivalry, a pathogenic womb fantasy. He also described the role of womb fantasies in psychopathology and how such a fantasy can be recognized and treated psychoanalytically. Dr.

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**Brothers and Sisters...**

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Volkan first noted that while the birth of a sibling may be temporarily disruptive, that it need not be pathogenic. While the birth of a baby creates a sense of object loss for an older child, the sense of loss is ordinarily worked through in a reasonably healthy environment. The older child's equilibrium is re-established as he or she realizes that there are sufficient maternal supplies for both siblings and that mother can be shared with the new sibling without any threat to survival. In fact, a positive sibling experience can help children learn a sense of fairness and social justice. However, when childhood representations of siblings and sibling experiences are involved in pathogenic unconscious fantasies, they may play a role in symptom formation and/or the formation of certain character traits. While there are many different kinds of unconscious fantasies related to siblings, e.g. being a replacement child or being involved in twinning, unconscious womb fantasies seem to be most prominent. These pathogenic unconscious fantasies may become entangled with other manifestations of sibling rivalry and make it necessary to reconstruct such unconscious fantasies in analytic treatment, in addition to analytic work on less complicated manifestations of sibling rivalry. Dr. Volkan used the concept of unconscious fantasy to refer to repressed "interpretations" of a child's experience of a traumatic event. The child's experiences and memories should be included in our description of the unconscious fantasy.

Unconscious womb fantasies usually appear in an older child who experiences the mother's pregnancy as traumatic and the birth of the younger sibling as an intrusion. The story line of an unconscious womb fantasy usually refers to the child's imagining entering the mother's belly and killing the fetus so that he or she will be the sole occupant of the womb. The wish to kill the fetus is in conflict with the child's fears of losing the mother who is carrying the fetus, of losing the mother's love, and of being punished by the superego. Displacement and avoidance are used to deal with the child's anxiety. Thus, via displacement, an enclosed space, e.g. a closet or an airplane, comes to represent mother's womb and is then avoided; claustrophobia develops. A variation on this theme may occur if the patient projects his or her hostility onto the fetus. A ferocious fetus is produced, and the patient, while wanting to enter mother's womb (the enclosed space), is afraid to do so because of fear of encountering this ferocious fetus. In some patients such an enemy in the womb is a representation both of a sibling and of the father's penis. Womb fantasies may also lead to the formation of certain character traits. For example, in women, the wish to kill the fetus inside the mother by blowing up the womb may lead to a fear of self-annihilation since the woman herself also wishes to be inside the womb. Next, the woman's identification with her pregnant mother whom she wishes to harm may lead to a fear of pregnancy. Then, this fear of pregnancy may lead to the development of unusual tomboyish traits. For example, a patient refused to take the elevator to her analyst's office. Initially, she declared that she was an athlete and that walking up the stairs would help keep her skinny (not pregnant). Much later she became aware of her anxiety that if she were in the analyst's elevator (womb), then her hostility would blow it up, and she and the other passengers (siblings) would be killed. Also, in contrast to claustrophobia, womb fantasies may be dealt with by counterphobic behavior. A patient may compulsively seek to enter certain enclosed spaces representing mother's belly. In male adults, compulsive heterosexuality may be a manifestation of the wish to enter the mother's womb repeatedly. One such male patient reported that, as a child, he felt compelled to hide in a huge mailbox nearly every morning. Male hypersexuality may also reflect a wish to gain entry into and become the only occupant of mother's belly.

During the evaluation and initial phases of analytic treatment, one can hear clues related to childhood sibling images, experiences, and unconscious womb fantasies. Dr. Volkan also described how unconscious womb fantasies need to come to life in analysis in the form of therapeutic stories, specific types of transference neuroses which patients "live" in the transference. Such therapeutic stories seem more real to the patient than usual transference experiences and are necessary to work through the conflicts and to neutralize or tame the powerful affects pertaining to unconscious womb fantasies. One of the most important technical maneuvers is to not interfere with the evolution of the therapeutic story by premature interpretation.

In her discussion of Dr. Volkan's presentation, Barbara Shapiro, M.D. chose to focus on the factors which promote an older child's adequately resolving sibling rivalry and, thus, not developing the malignant rivalry and hatred which are components of pathogenic unconscious womb fantasies. First, in order to be able to give emotionally to her children, the mother must have adequate libidinal supplies, either from internal resources or from others' support and nurturance of her. Next, for a number of reasons, the older child is better able to love, as opposed to hate, the new baby if the older child sees that the parents are able to love the new baby, as well as the older child, in spite of the older child's entreaties to send the new baby back. Third, if the child sees that the parents continue their relationship to each other, this balances oedipal fantasies that the baby is the child's own and that the child has gotten rid of one parent. Finally, as the baby becomes able to smile and respond to the older sibling as a love object, the older child can give love in return.

Dr. Harold Blum presented the Annual Margaret S. Mahler Literature Prize to Henri Parens, M.D. in recognition of his outstanding accomplishments and contributions to the developmental and psychoanalytic literature. His past work on the development and modulation of aggression in infancy and childhood remains of significant importance, and his present innovative work in the area of education for parenting has great potential and promise in many directions.

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As always, the program concluded with a spirited discussion among panelists and guests. Issues raised included: the importance of twinning reactions, the importance of the reaction of the family to a sick child, the transgenerational transmission of parental fantasies, the need to explore unconscious fantasies in analytic treatment, the importance of direct infant observation in psychoanalytic research, the fact that sibling relationships and rivalry afford parents an opportunity to help their children deal with general issues related to rivalry, a child’s reactions to the death of a sibling, the relationship of sibling rivalry to the international political scene, and the relationship of womb fantasies to fears of death.
Dr. Peter Fonagy spoke on modifications of psychoanalytic technique with severely personality disordered children, giving “only highlights.” He indicated an urgent need for systematic research on outcomes of psychoanalytic treatment. The work he described in today’s workshop was derived from Mary Target’s review of 750 charts from the Anna Freud Centre; that review has been published elsewhere.

In the past, we had clear criteria for beginning a child in analysis; the child was expected to be anxious, inhibited, or neurotic, brighter than average, psychologically minded, with internal conflict as the primary cause of his symptoms, and with no major ego deviations, living in a supportive and stable environment, motivated for treatment with a good capacity to form relationships. As we look at the list of criteria, we must wonder why such a child would need psychoanalysis! These children do in fact do well in psychoanalysis -- about 80% show improvement -- but they seem to do equally well with nonintensive forms of treatment (1-2 times a week).

There is a second group of children whom we would describe as severe cases. They have very poor adaptation, and do not meet the criteria above. They often have multiple diagnoses including some Axis II features, and have at least one diagnosis of an emotional disorder. These children benefit very little from nonintensive treatment -- only 20% show improvement -- but show large gains from intensive therapy, with 75-80% improving. There is also a group of moderate cases who show no difference in outcome between intensive and nonintensive treatment. An even more disturbing aspect of this outcome study is the negative outcome seen in the severe group, where 50-60% show no change or change for the worse with 1-2 times weekly treatment. This is worrying because nonintensive treatment is what these children typically get, if they get any treatment at all. This study certainly suggests that children with impaired object relations, low frustration tolerance, and no major ego deviations, living in a supportive and stable environment, motivated for treatment with a good capacity to form relationships.

Events have meaning and behavior is intentional -- in the context and a person’s state of mind may not be identical. Understanding mental states is defined as the understanding of the possibility that someone other than the self has a mind. This capacity develops somewhere around the second or third year of life, and rests on the appreciation that objects and events can have multiple meanings, that meanings can be separated from the context of the behavior, and that verbal and symbolic referents can express these meanings.

Dr. Fonagy believes that in Cluster A and Cluster B patients, there is a lesser dysfunction or capacity to mentalize. More impressive even than that is the finding that in children with secure attachment at 12 months, 64% pass a “theory of mind” task at 5-1/2 years. For children with an insecure attachment at 12 months, 67% fail the “theory of mind” task at 6-1/2 years.

Dr. Fonagy assumes that development of the cognitive self or psychological self (the part of the self-devoted to representations of mental states) is strongly nested within the primary attachment relationships. The parent’s capacity
THE VULNERABLE CHILD. . .

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to observe the child’s mind is what starts the development of the child’s capacity to understand mental states. The child “finds himself” in the caregiving mind as a thinking being, and this perception becomes the core of a psychological self. The attachment figure discovers in the child an intentional being, “re-presents” this back to the child so that she perceives herself in the caregiver’s behavior as someone who is wishing, believing, desiring, thinking, feeling -- and this representation seems to be at the core of a sense of self. So the core of our self is not the internalization of the caregiver, but is the internalization of the image from within the caregiver’s mind of us as an intentional being, so that we feel ourselves to be so.

What happens if the caregiver does not respond to the child’s internal state? Instead of an expression of distress, the caregiver’s face might reflect, for instance, hostile intent toward the child. The result is twofold: first, there is no symbolic binding of the constitutional states; and second, what the child internalizes (in place of the mirrored representation of his own constitutional state) is the representation of the other. As Edith Jacobson noted, this occurs before the boundaries of the self are formed, so that what is internalized is not the other qua other but is the other qua self.

The attachment figure is, perhaps, in a state of temporary dissociation, and responds to the child’s distress with anxiety or absentmindedness. This is provocative to the child, and the child’s projection of his internal state fails. What the child is then forced to internalize is the attachment figure. Unable to find himself as an intentional being, and to internalize that representation, he internalizes the representation of the other. What seems to happen is that the child then has an “alien other” within his own internal representation of himself. This makes the self an incoherent structure, and the child then must externalize that part of the self in order to experience himself as a coherent single being. The externalization occurs by manipulation of the behavior of the other, as the child becomes controlling and demanding.

The sequela of this disorganized attachment pattern are clear. From the age of about 3-5 on, we see extreme controlling behavior and sometimes extreme aggressive behaviors -- in general, a Cluster B pattern. There is a wish to make the other behave in a way that creates an illusion which the child can internalize, so that what was inside is now outside.

The core of this self representation is based on a distorted and barren picture of the child that is incorporated into the representation of the self. The experience of the self will be out of touch with current experience. The fear of separation from the physical other is not primarily due to overly intense attachment, but is due to the absence of a relationship. The other is necessary as a vehicle to carry that part of the self that must be externalized. If the other disappears, the child panics because he fears the potential destruction of part of the self structure. The body also becomes a vehicle for a part of the self in these children, and they start abusing their bodies. They experience the “alien” part of their mind as residing in the body, so they try to destroy it in order to be able to feel free or coherent.

What follows (from this theory) is that we really need to change the primary aims of our technique from a focus on the recovery of unconscious representations and reintegration of the self structure, to a technique that enhances the reflective process. Until that is achieved, there is little likelihood of other therapeutic gains. We enhance the reflective process through understanding and labeling emotional stimuli and focusing the child on the emotional states of the object. We should avoid interventions that imply complex mental states such as ambivalence or conflict. Most importantly, we assist the child by focusing on the therapist’s mental state as a precursor to self reflection.

The message which Dr. Fonagy would like us to take away is that psychoanalysis is only one way of achieving improvement in mentalization. In general, treatment needs to be: consistent and reliable; highly structured; intense; theoretically coherent (not necessarily analytic, but the minds of the “treaters” must be seen as integrated, coherent minds); flexible; relationship-focused; and with an individualized care plan.

Dr. Mary Target’s presentation of a long-term follow-up study of child psychoanalysis and psychotherapy followed. Dr. Target began by indicating that this study is a “sequel” to the retrospective chart review of nearly 800 cases at the Anna Freud Centre that Dr. Fonagy mentioned and which has been published. She emphasized that these results are still quite tentative and preliminary, but they raise some interesting questions. Among others, she was interested in what children actually remember about their child analysis or therapy and what is the impact of trauma on their lives. The retrospective case review revealed a great deal of unrecognized trauma in those children, and she would like to know what is the outcome of the treatment. Does the study allow us to say anything about technique?

The specific aims of the research were to explore the impact of early psychotherapeutic treatment as regards three areas: (1) attachment; (2) life stresses experienced: this question arose from epidemiologic research suggesting that children with psychiatric problems experience more negative life events that seem unrelated to their own creation of problems, and a question about whether treatment changed that pattern; (3) how children negotiate relationships and life transitions after treatment.

The hypotheses they began with were based partly on theoretical work and partly on the results of the retrospective study. They hoped to find that the level of adult physical and mental disorders in individuals treated as children were comparable to those of children not treated. They also hoped to find that treated individuals were better at coping with life stresses after adolescence and that personality functioning was more positive and effective, that these individuals were more likely to be securely attached.

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THE VULNERABLE CHILD. . .

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They expected to find some interaction between the type of disorder in childhood (including the presence of Cluster A and Cluster B behaviors) and whether the child had had intensive treatment. The hypothesis was that children who needed intensive treatment by their model and received it would do significantly better than children who need it but got non-intensive treatment. They are hoping to be able to follow 200 adults total, ⅓ in intensive treatment (5x/week) and ⅓ in non-intensive treatment (1-2x/week or less). Realistically, they probably will not be able to reach that figure.

The researchers will randomly select ⅓ of the group of 200 treated adults and will attempt to locate untreated sibs for follow up. The sibs will be close in age and in the same family, with no history of psychiatric problems prior to the treatment of the treated child. They are interested in whether the treated child was in fact more disturbed, how the 2 sibs saw their childhood experience, looking at family issues, etc.

The fourth, control group will consist of another 100 adults referred to the Anna Freud Centre or elsewhere with similar problems and of comparable SES, IQ, etc. (since the Anna Freud Centre children are not typical for London, with IQs averaging 120 and a higher than average SES). These adults will be individuals who have not been treated psychotherapeutically or psychoanalytically.

The study is still in a pilot stage, and in the current data the groups are very unbalanced. So far it has been much easier to trace and win cooperation from people who have been treated, and there are 37 in that group. Altogether the interviews take about 14 hours, with no payment, and some of the individuals located have been reluctant to participate. They have so far only found and studied 16 untreated sibs and 9 individuals referred but untreated.

As the data were examined, it seemed initially that the people treated as children were not doing better than the untreated individuals. However, if a distinction is made between those with good outcome of treatment and those with a poor outcome (premature termination with general agreement that there had not been improvement, as per case records), you see different results in the data. About 2/3 of the cases in this study had a good outcome: this is not the same proportion reported in the chart review, because people with good outcomes were more agreeable to the interview process. The people located and willing to participate tended to bunch at the top and bottom with regard to outcome, with good outcome people willing to talk about their treatment and their lives and with bad outcome people eager to talk about how awful the treatment was. On the whole the individuals with poor outcomes are doing much less well than other groups. People with good outcomes are doing much better, with current functioning essentially similar to that of the sibs.

One interesting aspect of the study is a question about whether people can remember their childhoods accurately, if they do recall these circumstances in the same way reported at the time by therapists in some very comprehensive case notes. Dr. Target summarized the observations about this question to date. When they asked subjects and sibs about their childhood circumstances - care, abuse, neglect, relationships with each of the parents - the correlation between ratings was very, very close.

One very painful aspect of the study concerns the impact of trauma. Some of these children clearly were subjected to substantial abuse of one sort or another which was not recognized at the time of the treatment or, if recognized, was not dealt with. Some of the cases include children reporting actual abuse or a nonabusive parent reporting abuse, and the child was often talked to in terms of fantasy, unconscious wish, etc.

In the retrospective study, it emerged that the most profoundly emotionally disordered children (atypical or borderline children, multiplex developmentally disordered children and children who have experienced trauma) may need modifications of the analytic techniques. Interpretations of conflict (sexual fantasy, impulses, etc.) are less helpful to these children. Some of the adults had appeared definitely borderline as children, with pronounced autistic features, apparently somewhat retarded intellectually and socially very impaired. Some of these had “developmental help” – clearly described in some of the case notes – and these adults on the whole had a very good outcome.

Dr. Miriam Steele, the third presenter, was unable to be present for the workshop, having recently delivered a baby. Her paper, on attachment representations and outcome in adoption of maltreated “hard-to-place” children, was read by Dr. Mary Davis. The report was an overview of another ongoing research project which tries to apply recent advances in developmental psychological research and attachment research to issues in child maltreatment, foster care, and adoptive placements. The study applies techniques in attachment research to both the evaluation of prospective adoptive parents and to evaluation of the hard to place child, both before placement and following through to two years post placement. The hope is to improve the ability to “fit” parents to the needs of the particular child, to increase the likelihood of a successful placement. In addition, the research techniques try to provide a picture of the child’s internal world especially with regard to their perceptions and expectations of parent-child relationships in order to help the adoptive parents and involved professionals to understand and manage the child’s behavior more appropriately.

The centerpiece of this current research uses the Adult Attachment Interview, which is structured entirely around the topic of attachment. Subjects are asked to described their relationships with their parents during childhood and to provide specific memories to support their global impressions. The interviewer asks directly about experiences of rejection, being upset, ill and hurt as well as experiences of loss, abuse, and separation. The subject is asked to offer explanations for the parents’ behavior and to

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describe their current relationships with their parents and the influence they believe their childhood experiences have on their adult personality. The belief is that use of this interview technique will provide an indication of the contribution which an adoptive parent’s social history, and internal construction of this history, makes to the adopted child’s evolving sense of self and others.

The children’s representational worlds are assessed with a “narrative stems” method, by recording verbal and nonverbal responses to the interviewer’s presentation of a series of family conflicts with the help of doll figures, where the child is asked then to “show me and tell me what happens next.” This method has been used in other research and has demonstrated validity as a measure of attachment processes. The plan is to compare administrations of the story-completion task at the time of adoptive placement and the same task one and two years later, to examine the changes in children’s perceptions, expectations and feelings about attachment relationships as they begin, hopefully, to experience more benign parent-child interactions.

It is expected that adoptive parents that show high levels of reflective functioning (the capacity to refer genuinely and accurately to mental states in themselves and others as they describe and evaluate their attachment history) may be best able to appreciate the damaged internal world of the children they adopt. It is also expected that with adoptive parents who have experienced any past loss or trauma, the parents who have the most success with the children in their lives have convincingly mourned their traumatic experiences, and that this will show in the interview data.

The narrative stems method addresses aspects of children’s mental representations of self, others, and relationships based on their experience of their attachment history. It allows the child’s attachment representations to be evidenced in a displaced way which is usually enjoyed and not experienced as threatening. The interviews are videotaped and transcribed, covering both speech and nonverbal narrative as shown with dolls and animals. Ratings of attachment-related representations are then made according to a manual of criteria. The technique provides very vivid illustrations of a child’s attachment representations as well as some of the defenses and coping mechanism which they use to handle experiences of distress.

The Adult Attachment Interview aims at classification of the interview into the secure or one of the insecure groups based on four criteria of coherence: a good fit between memories and evaluations about attachment; a succinct yet complete picture of one’s memories; the provision of relevant details; clarity and orderliness. The interviews are assigned to one of three groups: insecure-dismissing, marked by an interview with a lack of fit between memories and evaluations; insecure-preoccupied, from an interview which is neither succinct nor complete and which contains many irrelevant details, much passive speech, or high current anger; and secure-autonomous, for an interview which fills all or most of the criteria of coherence. In addition, some interviews are classified as unresolved with respect to past trauma or loss, when the speaker refers to loss or trauma in a way that suggests an extreme bereavement reaction or when there are lapses in the monitoring of speech about the loss or trauma (suggesting irrational feelings of guilt or an irrational belief that a dead relative is actually alive). Training in using the 200-page rating manual for rating and classifying AAIs includes a two week training session with extensive tests of interrater agreement.

From the 23 adoptive parents interviewed so far in this study, it is common to find some significant childhood adversity which has served as an organizer for interpreting past relationship experiences and planning current or future social behavior. The social workers who approve these applications to adopt are apparently impressed, as the researchers were, by the resilience of these adults. It is suggested that the AAI could usefully be included as part of the social work agency’s battery of assessment tools, as the AAI has an impressive track record of reliable ability to detect parenting difficulties rooted in painful past experiences, many aspects of which have only an unconscious mental representation split off from and interfering with current emotional and social functioning.

Dr. Tyson commented on the challenge to the foster care system to find foster parents who are able to provide the emotional setting needed for the profoundly damaged children with whom they deal. Any tools that can help with that process would be welcome indeed.

In wrapping up, Dr. Target commented that one theme emerges clearly from the three presentations, which use similar research techniques to look at different aspects of a child’s experience. All of the research tries to find ways involving play and narrative for children to express their inner world. It is the feeling of this research group that these techniques give very rich data that can render measurable issues that are important to child analysis, and can make those issues measurable in a way that is reliable and valid, is related to developmental psychology and developmental psychopathology. This can in turn allow child analysts to make bridges to other disciplines.

Dr. Fonagy commented that it is essential to facilitate any kind of research about analysis. He and other analytic researchers have been accused of trying to destroy analysis from within, by trying to systematize the work. The argument is that since all analysts are researchers (as Freud said), it is unnecessary to do any more. He believes that this is a false argument. Most professions have a cadre of individuals who do research and advance the level of the profession. Without such an effort, we stay in a situation where one can say whatever one wants to without contradiction, without any effort to develop a common set of assumptions, a common methodology, etc. He believes there are three reasons to pursue organized, data-based psychoanalytic research:

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1  We have something to say about children’s minds that no other psychologist or psychotherapist will be able to say. We achieve a level of understanding with patients that is unique and will yield fresh information.

2  The data as it emerges is actually fairly positive, in that the results of psychoanalytic intervention are reasonably good. It is important to identify who we can effectively help and to persuade people in other fields that we can in fact help.

3  There is a lot we do not yet know. There are many unanswered questions about how people function, and it is an exciting time to be working in the field. The experience of being surprised by what we find is rare, but if we cannot allow ourselves to be open to it we will never understand our patients fully. If we only hear what we expect to hear, we are missing something. We must be able to give up the experience of believing we know everything in order to let our patients surprise and teach us.

ACP PANEL PRESENTED AT IACAPAP IN STOCKHOLM

A Summary by
Beatrice Griffin

The Association for Child Psychoanalysis sponsored a panel presentation at the 14th International Congress of the International Association for Child and Adolescent Psychiatry and Allied Professions which was held August 2-6, 1998 in Stockholm, Sweden. The Congress title was “Trauma and Recovery: Care of Children by 21st Century Clinicians.” The ACP program was entitled “The Other Child: Therapeutic Efforts on Behalf of Siblings of Children with Severe and Disabling Congenital Anomalies.” Thomas Barrett (Cleveland) chaired this program. Significant issues included how parental reactions to having a child with a severe disability affect their treatment of their well child and that child’s development. Through two analytic presentations given by Beatrice Griffin (Cleveland) and Robin Turner (St. Louis), the personality development of such children was examined. The presenters paid particular attention to the defenses used in coping with a sibling’s anomaly.

Beatrice Griffin presented her analytic work with a second-born, early latency child who was profoundly affected by the severe, genetically caused mental and physical handicaps of an older sibling. Treatment included work with the mother for whom her first child’s shocking condition became an unmasterable loss. Added to preexisting difficulties, this caused profound interferences in the quantity and quality of her investment in her well child and in the child’s development and relationships. The child internalized the mother’s massive denial, displaced anger, disappointment, low expectations, guilt and blame and suffered from never feeling valued and loved enough as a separate person. The child developed defensive omnipotence; envious, ambivalent relationships; inadequate drive fusion; harsh superego introjects frequently projected; and low frustration tolerance with lack of capacity to bear feeling. These difficulties colored the mostly negative transference and presented obstacles to the capacity to work in treatment, to accept help without feeling done to, and to take in and integrate gains. Dr. Nathaniel Donson (Engleberg, N.J.) was the discussant. The gains seemed limited but silent use of the treatment was postulated.

Robin McCann-Turner presented her analytic work with an adolescent who had a partial self-object boundary confusion prior to the birth of a handicapped sibling. The analysis revealed the causes and the profound effects of the self-object boundary confusion and the traumata which were compounded by the birth of this handicapped sibling. The analysis detailed the defensive use of identification with the victim/handicapped sibling. The patient’s use of these defenses served to defend against murderous wishes toward the aggressor and the victim. Shengold’s concept of “soul murder” and its application to this case were considered. Through intensive analytic work, the patient was able to establish healthy, satisfying relationships and to lead an independent life. Dr. Willem Heuves (Netherlands) was the discussant.

The audience of sixty participants represented the association’s multinational and multidisciplinary membership. The response to the panel was positive and the general discussion underscored the need for greater
The Anna Freud Centre Training in the Psychoanalytic Study and Treatment of Children and Adolescents

Director: Julia Fabricius
Head of Clinical Training: Viviane Green

The Centre offers a 4-year Training Course in child analysis and child psychotherapy to graduates with an honours degree in Psychology or equivalent subjects and some professional experience with children. Personal analysis with an analyst approved by the Training Committee is required. The Course has been substantially reorganized to enable trainees to work part-time to support themselves during the training. (Interest-free loans are sometimes available.) The first (pre-clinical) year of the training can be taken as an MSc in Psychoanalytic Developmental Psychology.

The Course comprises

- A theoretical framework of psychoanalytic and developmental concepts, gained via participation in seminars, workshops, research groups, diagnostic groups and other meetings of the Centre.
- Observation of babies, toddlers, nursery school children, atypical children, disturbed adolescents and adults.
- Supervised clinical work in the psychoanalytic treatment of children of selected age ranges — under-fives, latency and adolescents; also, supervised psychotherapy with children, and supervised work with parents.

The Course is designed for trainees to become qualified in the field of child psychoanalysis and psychotherapy and experienced in diagnostic, consultative and applied work with children and adolescents. It leads to the qualification of Child Psychotherapist and is recognized by the Association of Child Psychotherapists for work in the National Health Service in Britain, and by the Association for Child Psychoanalysis, Inc. Trainees can also register for the Doctorate in Psychotherapy in Child and Adolescent Psychoanalytic Psychotherapy run in conjunction with University College London.

Enquiries and applications should be made to: The Head of Clinical Training, Anna Freud Centre, 21 Maresfield Gardens, London NW3 5FH

University College London
M.Sc. in Theoretical Psychoanalytic Studies (non-clinical)

This one-year full-time (two years part-time) course includes 12 units covering historical and current theoretical developments worldwide, which is taught mainly by members of the British Psycho-Analytical Society. Assessment is through written examination in June and dissertation and viva voce examination in September. The course is offered by the Department of Psychology, in the Psychoanalysis Unit which was directed jointly by Professor Joseph Sandler and Professor Peter Fonagy until Professor Sandler’s death and continues now under the direction of Peter Fonagy. University College is the oldest and largest part of London University, and academically ranks a close third to Oxford and Cambridge among British universities.

A grounding in psychoanalytic theory would enable those who already have professional qualifications to add a thorough knowledge of psychoanalytic ideas, students interested in clinical trainings to complement the prevailing trend towards briefer and highly symptom-focused treatment approaches, and those from other disciplines to add this perspective to their understanding of philosophy, literature, art, history, anthropology, and many other fields. The course has been running for two years, and has established a very international, interdisciplinary feel. The only academic requirement is an honours degree in any subject from a university recognized by UCL. Students are not required to be in any therapy or to have clinical work experience, though many do.

Fees for overseas students are approximately $17,000 for one year, or $8,500 per year part-time. Application forms and further details may be obtained from: Dr. Mary Target, MSc Course Organizer, Subdepartment of Clinical Health Psychology, UCL, Gower St., London WC1E 6BT, UK. 011-44-171 380 7899 – fax 011-44-171 916 8502 - E-mail mary.target@ucl.ac.uk.

Hanna Perkins Center for Child Development
Course in Child Psychoanalysis

The Course in Child Psychoanalysis is for non-medical professionals with postgraduate degrees who are experienced in the care of children and who wish to be trained in the psychoanalytic treatment of children. Those with medical degrees are also welcome to apply. This program has been in operation since 1958.

The curriculum begins with courses in theory and technique and observation of infants and observation of young children at the Hanna Perkins Therapeutic Nursery School and Kindergarten. It then proceeds to the supervised clinical treatment of three children by the psychoanalytic method and one case of a preschooler treated via the parent at Hanna Perkins.

The course is designed so that full time employment may be maintained while taking up to two children in analysis. Candidates are required to have a personal analysis and to plan to stay long enough to complete their clinical work. Applications are accepted at any time for groups which begin in September each year. Partial scholarships may be available.

For a brochure on the Program and further information, write to: Thomas F. Barrett, Ph.D., Director, or Elizabeth Fleming, Assistant Director, Hanna Perkins Center for Child Development, 2084 Cornell Road, Cleveland, Ohio 44106. 216-421-7880
41ST INTERNATIONAL PSYCHOANALYTICAL CONGRESS
JULY 25-30, 1999
SANTIAGO, CHILE

PROGRAM FOR THE IPA-ACP CO-SPONSORED HALF DAY PANEL ON
CHILD PSYCHOANALYSIS

Finding Words: Affect, Behavior and Meaning in the Psychoanalysis of Children

WELCOME Coordinator – Peter Blos, Jr. (Ann Arbor, MI)
INTRODUCTION Moderator* – Martin Silverman (Maplewood, NJ)

CASE I
The Fear of Disappearing: Affects Aroused by Separation as Observed in the Analysis of a Three Year Old Girl
Clinical Presenter - Liliana Pauluan (Santiago)
Formal Discussant – Abigail Golomb (Tel Aviv)
Panel and Audience

CASE II
Clinical Presenter - Denia Barrett+ (Cleveland)

From Spitting to Speaking: Fostering Affect Tolerance Through Words in the Analysis of a Four Year Old Boy
Formal Discussant - Inga Villarreal (Bogotá)
Panel and Audience

GENERAL DISCUSSION Panel and Audience

TOTAL TIME (3 1/2 hours)

* President-elect of the Association for Child Psychoanalysis at the time of the Congress
+ Association for Child Psychoanalysis member

Simultaneous translation into the IPA official four languages will be available for both Panels.
There will be no official break during the Panels.

As has become customary, there will be an evening reception for child analysts and their guests, an occasion which, like the programs themselves, have become a congenial highlight of the Congress. The exact date of the reception will be in our June Newsletter and, by then, will also be available through the Congress information service.

Contact: Peter Blos Jr., M.D., ACP Liaison to the 1999 Congress Program Committee
111 South Fourth Avenue, Ann Arbor, MI 48104 ☎ 313-994-5110
December 12, 1998  
Anna Freud Centre Meeting  
New York City  
On Saturday, December 12, 1998 there will be a one day colloquium sponsored by the Anna Freud Centre and all of the child psychoanalytic programs in NYC. The topic will be "Violence and Sexuality in Borderline Young Men." Participants will include Judith Chused, Rosemary Davies, Julia Fabricius, Phillip Herschenfeld, Leon Hoffman, Eugene Mahon, Jack Novick, Noah Shaw. The conference will take place at NYU Medical Center. Please urge people to come as it promises to be a most interesting day - and all proceeds will go to the Anna Freud Centre. For information please contact Laurie Levinson at 212.744.6653 or Leon Hoffman at 212.249.1163.

December 1998  
Discussion Group at the Meeting of the American Psychoanalytic Association:  
Sponsored by the Ad Hoc Committee on Schools  

Last year Diane Manning and Phyllis Cath organized the first meeting of the Ad Hoc Committee on Schools at the December American Psychoanalytic Association meetings. This meeting underscored the important ways that analysts collaborate with educators and offered us the opportunity to learn from one another. 

We have organized a new discussion group for the December American Psychoanalytic Meetings which will be sponsored by the Ad Hoc Committee on Schools. We hope you will consider joining us. The discussion group is described as follows:

"Applied Psychoanalysis and Education: Consultative, Collaborative and Educative Work with K-12 Teachers"  

This discussion group will be a forum to learn about, discuss, and support the many ways that psychoanalysts are working with educators. Since Anna Freud's time, analysts have collaborated with educators to further primary prevention as well as worked with young students who are developmentally derailed. Analysts may consult with educators about individual children, groups of students in a given class, or with administrators to understand and work with the school as a system. A number of primary prevention, curricular-based programs have been created, designed to promote psychosocial development for all students. Analysts are also involved with encouraging educators to use counter-transferring experiences to aid their empathic and educative efforts. Some analysts are involved with integrating a psychoanalytically informed perspective teacher training in Colleges of Education. Each meeting of this discussion group will present one analyst's work with these areas.

If you have any questions, please feel free to contact  
Jonathan Cohen, Ph.D.  
300 Central Park West, New York, NY 10024-1513  
(212) 877-7328  
(212) 316-2443  
jc273@columbia.edu  
(201) 568-5217  
mndonson@aol.com

NYU Psychoanalytic Institute, New York University Medical Center  

Announces a one day symposium  

LEARNING DISABILITIES IN ADULTS:  
Neuropsychological and Psychodynamic Perspectives  

Date: Saturday, January 30, 1999  
Time: 9:00 a.m. – 5:00 p.m. (registration AM)  
Place: New York University Medical Center  

This meeting is intended for psychoanalysts, psychiatrists, psychologists, social workers and educators. The inevitable interlacing of neuropsychological dysfunction and psychic conflict, evident in adult patients with learning disabilities, will be explored. The psychoanalyses of two adult patients will be reported, followed by formal discussions from multiple perspectives. Questions about how specific neuropsychological difficulties may be elaborated in fantasy and interwoven with the ubiquitous conflicts of psychosexual development, the uses of psychological testing, issues of technique and countertransference, and neuropsychological research will be highlighted. Following the formal presentations, discussion groups will permit participants to explore their particular areas of interest.

Cost: (including lunch)  
$75 (pre-registration by January 8th or $85 on-site)  
Graduate Psychoanalysts, Psychiatrists, Psychologists, Social Workers and Educators  
$30 (pre-registration by January 8th or $40 on-site)  
Students in Psychoanalysis, Psychiatry, Psychology, Social Work and Education and Faculty and Graduates of NYU Psychoanalytic Institute

For further information regarding registration, please contact: Ms. Constance Karver by telephone at (212) 263-6243 or by fax at (212) 263-6417. To discuss any other matters regarding the conference, please contact either Dr. Jules Glenn at (516) 482-6302 or Dr. Arden Rothstein at (212) 496-0808.
IN MEMORIAM

JOSEPH SANDLER

1927-1998

Joseph Sandler, who has died of cancer aged 71, was a stellar figure of international psychoanalysis, a virtuoso clinician and a theoretician of immense originality and unrivalled clarity.

His 10 papers on basic psychoanalytic clinical concepts, in the British Journal of Psychology, and his 12 papers on frames of reference in psychoanalytic psychology in the British Journal of Medical Psychology, all with Alex Holder and Chris Dare, defined the field for psychiatrists and psychologists interested in psychoanalytic ideas. Many young people were led into the field by these papers, monuments of clear thinking and writing.

Sandler led the quiet revolution which psychoanalysis underwent from the 1970s, reformulating classical psychoanalytic ideas, rooted in 19th century biology, in the language of human relationships. He was the author of more than 200 papers and co-authored and edited 44 books. His most recent book, Internal Objects Revisited, written with his wife Anne-Marie Sandler, also a distinguished psychoanalyst, offers an integrating frame of reference bridging the worlds of theory and clinical process. Sandler was also a pioneer of bringing objectivity to psychoanalytic ideas via scientific research.

Born in Capetown, he received his first degree in psychology at 18, his masters by 19, both from the University of Capetown, and his Ph.D. from London University at 23. He then started medical education at University College Hospital. By the age of 25, he was a qualified psychoanalyst of the British Psychoanalytical Society.

In 1957, he was elected fellow of both the Institute of Statisticians and the British Psychological Society, and he became chairman of the society’s medical section in 1952.

He became a research psychologist at the Tavistock Clinic, but his most important contribution came when he led a major initiative to clarify psychoanalytic ideas, under Anna Freud at the Hampstead Clinic, now the Anna Freud Centre.

His teaching career started at the Middlesex Hospital in 1967, then at the Institute of Psychiatry. In 1968, he was appointed to the chair of University.

He was founder and director of the Sigmund Freud Centre at Jerusalem’s Hebrew University, were he was the first to hold the Sigmund Freud professorship, between 1979 and 1984. He returned to England and became the first incumbent of the Freud memorial chair in psychoanalysis at UCL, where he has been emeritus professor since his 1992 retirement. Here, too, he established a special unit for psychoanalytic research and education.

Sandler was a remarkable facilitator of the work of others. He was editor of the British Journal of Medical Psychology and of the International Journal of Psycho-Analysis, and founding editor of the International Review of Psycho-Analysis. During the last three years he was founding editor of the International Journal of Psycho-Analysis website.

Innumerable papers in the literature contain acknowledgements to his commentary in their footnotes. He was president of the International Psychoanalytic Association. He held more than 20 visiting professorships, received honorary doctorates from Sweden’s Lund University and Clark University in the US and was an honorary member of the Association for Psychoanalytic Medicine.

Those who knew him remember one of the smartest and wittiest people they had ever met, with a rich, very dry humor. He became something of an oracle, someone who would be approached to advise on complex administrative and professional issues. He also loved shopping and had an unquenchable appetite for gadgets. While shy in public, he was warm and generous to those who penetrated his impeccable professional armor. He had close and loyal friends all around the world. His family, his wife, three children and seven grandchildren mattered to him most. We will miss him in different ways.

Joseph J. Sandler, psychoanalyst, born January 10, 1927; died October 6, 1998.

Peter Fonagy

Published in The Guardian, October 8, 1998
## Calendar of Events

**November 6-8, 1998**  
First Inter-Regional Conference of the IPA  
Vienna  
**Transference and its Impact on Education**  
Organized in conjunction with the Freud Museum and the Vienna Psychoanalytic Society

**Autumn, 1998**  
The Library of Congress  
**Sigmund Freud: Conflict and Culture**  
*For further information contact*  
Jill Brett  
☎ 202-707-2905

**December 11-20, 1998**  
American Psychoanalytic Association Fall Meeting  
Waldorf-Hotel  
New York City  
**Discussion Group at the December APA Meeting:**  
**Applied Psychoanalysis and Education: Consultative, Collaborative and Educative Work with K-12 Teachers**  
*For further information contact*  
Jonathan Cohen, Ph.D.  
☎ 212-877-7328  
FAX 212-316-2443  
and/or  
Nathaniel Donson, M.D.  
☎ 201-568-5217

**December 12, 1998**  
Anna Freud Centre Meeting  
New York City  
**Violence and Sexuality in Borderline Young Men**  
*For further information contact*  
Laurie Levinson  
☎ 212-744-6653  
Leon Hoffman  
☎ 212-249-1163

**January 30, 1999**  
NYU Psychoanalytic Institute  
New York University Medical Center  
**Learning Disabilities in Adults: Neuropsychological and Psychodynamic Perspectives**  
*For further information contact*  
Ms. Constance Karver  
☎ 212-263-6243  
FAX 212-263-6417

**February 19-21, 1999**  
The First Annual Winter Meeting of the Child and Adolescent Institute at the Aspen Institute  
**Asthma and Depression in a Seven Year Old Girl**  
**Psychoanalytic Psychotherapy of a Severely Disturbed Seven Year Old Boy**  
*For further information contact*  
Jerome Karasic, M.D.  
E-mail hldanish@rof.net

**March 25-28, 1999**  
European Psychoanalytic Federation  
Berlin, GERMANY  
**Love, Hate and Violence: A Contemporary Challenge to Psychoanalysis**

**March 26-28, 1999**  
Association for Child Psychoanalysis  
Annual Scientific Meetings  
Seattle, WA  
Mrs. Nancy Hall  
☎ Fax 201-825-3138  
E-mail childanalysis@compuserve.com

**May 1, 1999**  
Annual Margaret S. Mahler Symposium on Child Development  
Adams Mark Hotel  
Philadelphia, PA  
Ms. Maryann Nevin  
☎ 215-955-8420

**May 7-16, 1999**  
American Psychoanalytic Association 88th Annual Meeting  
Washington, D.C.

**July 25-30, 1999**  
41st International Psycho-Analytical Association Congress  
Santiago CHILE  
**For further information contact**  
International Psychoanalytical Association  
“Broomhills” Woodside Lane  
London N12 8UD ENGLAND  
☎ 011-44-181-446-8324  
FAX 011-44-181-445-4729  
E-mail 100450.1362@compuserve.com

**September 14-18, 1999**  
European Society for Child and Adolescent Psychiatry  
Hamburg, GERMANY

### Web Sites:

- Association for Child Psychoanalysis  
  [http://westnet.com/acp/](http://westnet.com/acp/)  
- International Psycho-Analytical Association  
  [http://www.ipa.org.uk](http://www.ipa.org.uk)  
- European Psychoanalytic Federation  
  [http://www.epf-eu.org](http://www.epf-eu.org)  
- American Psychoanalytic Association  
  [http://www.apsa.org](http://www.apsa.org)

### Non-Member Attendance at ACP Meetings

As indicated in the Minutes of the most recent Executive Committee Meeting (p.23), non-members wishing to attend the Annual ACP Scientific Meeting may do so under the sponsorship of a member. The application form will include a line for identification of the sponsoring member. If the standard $200 attendance fee poses hardship for a non-member, requests for a reduction of fee to the level of a candidate’s fee of $100 may be addressed to the Treasurer of the ACP.

### Non-Member Subscriptions to the Newsletter

As decided at the most recent Executive Committee Meeting (p.24), non-members attending an ACP Scientific Meeting will receive one complimentary copy of the ACP Newsletter. Those non-members wishing to receive future copies of the newsletter may do so at a subscription rate of $10/year ($5/copy). The charge will cover the cost of production and mailing, a cost covered for members through their annual membership dues. See p. 6 for subscription order form.
Roster Update Form for ACP Members

Please check your listing as it appears in your most recent ACP Roster. If any changes or additions are necessary, 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 — E-mail: childanalysis@compuserve.com

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Preferred mailing address for ACP correspondence (circle one): Home Office

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Address Correction Requested To: