Message from the President

Carla Elliot-Neely, PhD

As I think about the state of child psychoanalysis today, I find myself remembering the losses we have sustained this past year as a profession. Elsewhere in this newsletter you will find a list of deceased members, some older and some younger, whose presence we will all miss for their extraordinary contributions to the field and for the fellowship we have enjoyed over the years of ACP meetings we have shared.

This list of those departed heightens my own concern that we as a group do more to include, to mentor, and value our newer members. We have a legacy, which we take seriously, of careful and thoughtful study of the psychological needs of children. As child psychoanalysts it is our commitment to consider the depth, and not just the surface behaviors, of our patients - and I think, as a group, it is our commitment to communicate our findings to the larger culture so that what has been gained in the understanding of development and psychopathology is not lost. As I have said in this column before, not only do we have valuable knowledge to share with newer colleagues, we as a group are enriched and educated by their insights as well.

A case in point: One of our recent Candidate Councilors, Judith Deutsch, reached out in 2006 to ask for an ACP response to the mental health crisis for Middle East children and families affected by the armed conflict between Israel and Lebanon. Following her request the Executive Committee had a very lively and fruitful email discussion about our role as an organization in political issues at large, what ways we might actually be helpful, and how we might address these concerns as a group. I, like many others, am impatient with “just talk and no action” and yet I believe this subject requires very careful thought, particularly when actions are representative of a group and not an individual. Thus, we have now an ad hoc committee led by Judith Deutsch and Don Rosenblitt who will co-chair a meeting at the Annual Meeting open to all who are interested in this issue. I would encourage everyone to attend and to think together about the complicated picture of social violence, asking ourselves what we know about intrapsychic and interactional dynamics which could be usefully applied to lessen the negative impact on children.

This example is meant to highlight one way in which both newer and more senior members of our organization can work together to learn from each other and to create a relevance in the ACP which will stimulate growth both for us as professionals and for those we serve. I want also to encourage every regular member attending the Annual Meeting to seek out a newer member, to engage that member in conversation about issues of psychoanalytic interest, and to make him or her feel welcome.

It has been a pleasure and a privilege to serve as President for the past two years. I value the relationships that have been nourished here and am pleased to say that in my view the ACP continues to be one of the healthiest organizations functioning in our field.

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Newsletter of the Association for Child Psychoanalysis - Spring 2008 www.childanalysis.org
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Grants

Grants from the ACP supporting low-fee analysis of children and adolescents for the calendar year 2008 are available. The grant application can be requested from Tricia Hall at

childanalysis@comcast.net

Mail completed application to:

Tricia Hall
7820 Enchanted Hills Boulevard, #A-233
Rio Rancho, NM 87144

Deadline for Submission of Application:
October 31, 2008

Cynthia Carlson
Chairman, Grants Committee

Newsletter of the Association for Child Psychoanalysis
ISSN 1077-0305

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Submissions:
Submissions are welcome. They should not be longer than 1000 words and have to be e-mailed to the editor as an attached Microsoft Word file (*.doc) or Rich Text Format file (*.rtf). The deadline for submissions for the Fall edition is June 30th. For the Spring edition the deadline is January 31st.
Join us at the upcoming 2008 ACP Annual Meeting, which will take place from May 2-4, 2008, at the Chase Park Plaza Hotel in St. Louis, Missouri. The topic for the meeting is: Defenses: Development, Alterations, and Role in Therapeutic Action. The program will also feature Leon Hoffman, M.D, this year’s Marianne Kris Lecturer, as well as an optional visit to the Day Care Center where analysts from the St. Louis Psychoanalytic Institute consult. This year, there will be a Sunday afternoon extension program on Parent Infant Psychotherapy.
The Chase Park Plaza Hotel, a newly renovated, grand hotel, is in the hub of St. Louis. It has five restaurants as well as a cinema. Forest Park is across the street from the hotel. The St. Louis Art Museum and the Jewel Box Botanical Garden are among the attractions of this 17 acre park.

**Hotel Reservations:**
Please make your hotel reservations now at the:

**Chase Park Plaza Hotel**  
212 North Kings Highway  
St. Louis, Missouri 63108  
Toll Free (US) 877-587-2427  
314-633-3000

The ACP has negotiated a discounted room rate of $169.00 per night for a room with one bed (king or queen, single or double occupancy). Applicable taxes are 14.991%. **The deadline to make your hotel reservation is April 9, 2008.**

**Airport & Shuttle Information:**
The Lambert International Airport is located approximately 9 miles from the Chase Park Plaza Hotel. Ground transportation to the hotel is available via Trans Express by calling 1-800-844-1985. Rates are approximately $16.00 per person one-way. Taxi cab service is also available and is approximately $25.00 one-way from the airport to the hotel. For $2.50 you can also take the Metro-line to the Central Westend Station, which is three blocks from the hotel. The ride takes about 10 minutes.

For additional information about the hotel, go to the website at:  
www.chaseparkplaza.com

On Saturday afternoon May 3 there will be an organized tour to the Missouri Botanical Gardens. These gardens are renowned for their beauty and ACP members will have the opportunity to tour the gardens by tram as well as on foot. There are many fine restaurants in St. Louis and local members are putting together a list for the dining pleasure of registrants of the meeting. Please watch your mail for program and registration materials. This annual meeting promises to be one of the very best and we hope that you will attend.
Denia Barrett received her Master’s Degree in Social Work from Michigan State University. Her work in a community mental health-based infant intervention program led her to pursue child analytic training at the Cleveland Center for Research in Child Development (now known as the Hanna Perkins Center), graduating in 1991. She considers herself fortunate to have treated children and adolescents in four or five times weekly analysis continuously for the past 22 years. In addition to her private practice, she provides treatment to children and parent work through the Hanna Perkins Center. She is a faculty member of the Center’s Child Therapy Course and has been the Editor in Chief of the journal *Child Analysis: Clinical, Theoretical, and Applied* since 1996. Mrs. Barrett considers the Association for Child Psychoanalysis an extremely valued professional home and she has served as co-editor of the Association’s Newsletter from 1998-2004, was councilor for the term 2004-2007, and has served on the Clinical Practice Committee and Awards Committee. She has been a member of the Program Committee since 2000 and has been co-chair for the last two years. Mrs. Barrett considers it crucial for the future of child psychoanalysis that we encourage and preserve the rich heritage of presenting to colleagues and writing about our unique clinical experiences. At the annual meetings of the ACP she has been a discussant, workshop presenter, plenary moderator and plenary presenter, and was author of a paper presented at an IPA-ACP co-sponsored panel on child and adolescent psychoanalysis. Mrs. Barrett has served as Secretary for The Alliance for Psychoanalytic Schools since 2003.

After receiving his doctorate in Clinical Psychology from George Washington University in 1982, Dr. Parks served as a Fellow and then as a Consultant at the Group and Family Therapy Training Program at St. Elizabeth’s Hospital and as a staff member of the Center for Psychological and Learning Services at the American University, both in Washington, DC. From 1996 until 2006, Dr. Parks was Associate Professor of Clinical Psychology at George Washington University where his duties included teaching introductory and advanced courses in psychodynamically oriented psychotherapy with children. During this time, Dr. Parks also served as Director of the Center Clinic, the university’s clinical training facility.

Dr. Parks completed his adult psychoanalytic training (1992) and child and adolescent psychoanalytic training (1993) at the Baltimore Washington Institute for Psychoanalysis. He is certified by the Board of Professional Standards of the American Psychoanalytic Association in both adult and child and adolescent analysis. Currently, Dr. Parks is Chair of the Child and Adolescent Psychoanalytic Training Program and Director of the Child Psychotherapy Training Program at the Baltimore Washington Institute. He is a Child and Adolescent Supervisor and Teaching Psychoanalyst at the Baltimore Washington Institute and Geographic Rule Child and Adolescent Supervisor at the Washington Institute for Psychoanalysis. He is active on both the Executive Council and Program Committee of the Association for Child Psychoanalysis and serves on the Certification Examination Committee of the American Psychoanalytic Association.
Stephanie Smith, an active ACP member since 1982, currently serves as Councilor on the Executive Committee and as ACP Liaison to the International Association for Child and Adolescent Psychiatry and Allied Professions. Her past ACP participation includes Councilor (1995-1998; 2003-2006), the Program, Membership and Nominating Committees, and various liaison activities. She was a plenary speaker on a panel titled, “Working with Parents of Children in Analysis” at the ACP annual meeting, Washington, 1994 and also participated on an ACP panel titled “The Way We Work: Analyzing Traumatized Children,” at the IPA Congress, Rio de Janeiro, 2005. Ms. Smith is a Child, Adolescent and Adult Psychoanalyst in full time private practice in Brookline, Massachusetts. She graduated from the Hampstead Clinic (1979) and from The Boston Psychoanalytic Society and Institute (1996). Ms. Smith is a Lecturer at Harvard Medical School and has been teaching and supervising in the Psychiatry Department at The Cambridge Hospital since 1982. At BPSI, Ms. Smith is a faculty member, a Supervising Child Analyst, Co-Chair, Child Analysis Committee, and Chair, Development Sequence in the adult curriculum. She is also a faculty member at the Psychoanalytic Institute of New England, East. She teaches courses in the adult and child curriculum at both institutes, including “The History of Technique in Child Analysis”. At the American Psychoanalytic Association, she is currently Chair, Committee on Preparedness and Progress, BPSI Councilor to the APsaa Executive Council, and is a member of the Certification Advisory, Research and Development Committee.

Dr. Ascherman is a Training and Supervising Analyst and Supervising Child Analyst with the New Orleans-Birmingham Psychoanalytic Center. In 2006, he was elected to serve as Councilor on the Executive Committee of the ACP. Dr. Ascherman was one of three plenary speakers on Termination with Adolescents at the 2005 ACP annual meeting. This May, he will be the ACP plenary speaker on Working with Defenses. Dr. Ascherman received his medical degree from Case Western Reserve University in 1982. His internship and residency in psychiatry were completed at Georgetown University Hospital. His residency in child and adolescent psychiatry was completed at the Menninger Clinic. He also holds a Masters of Public Health from Johns Hopkins University. Following completion of his residency in child and adolescent psychiatry, Dr. Ascherman remained on staff at the Menninger Clinic and on faculty at the Karl Menninger School of Psychiatry until 1993.

Dr. Ascherman is presently Professor of Psychiatry, Director of the Division of Child and Adolescent Psychiatry, and Director of the Residency in Child and Adolescent Psychiatry at the University of Alabama at Birmingham. He also serves as Director of the Engle School, a therapeutic preschool through high school located within the Division. The Engle School is a member of the Alliance of Psychoanalytic Schools. Dr. Ascherman also serves as the President of the Birmingham Psychoanalytic Study Group and is President of the Board of the Spring Valley School for Learning Disabilities, a private, not for profit school in Birmingham.
Sergio V. Delgado, M.D. trained in Child and Adult Psychiatry at the Menninger Clinic. He also trained in the Topeka Institute of Psychoanalysis, where he became a training and supervising analyst in child and adolescent psychoanalysis. Dr. Delgado is a member of the Committee on Child and Adolescent Analysis of the American Psychoanalytic Association. Dr. Delgado is active as a Clinical Instructor in both child psychoanalysis and psychiatry at the Menninger Clinic and Topeka Institute for Psychoanalysis. He is also very active in community work with pediatricians, which has enhanced the possibility for candidates to be able to have child analytic cases. Dr. Delgado is interested in developing a “film series” at ACP in which current films can be discussed after they are shown to our members during our annual meetings. He currently is in charge of the film series at the Topeka Institute and presented a three day workshop on child and adolescent psychoanalysis, with the use of films, at the International Psychoanalytic Association in Santiago, Chile.

Carl J. Tuss has been a qualified child psychoanalyst about thirty years. He has a M.S.W. from Wayne State University, having specialized in psychiatric social work. He is chairman of the Child Analytic Faculty at Hanna Perkins Center for Child Development. Half of his professional time has been devoted to practicing direct child analysis, with the remainder being devoted to teaching, supervision, community consultation, and a few psychotherapy cases.
Dr. Colman’s analytic training, and particularly his child analytic training, has not only been with children of many different ages, but also with many adults. Dr. Colman received his child analytic training at the Michigan Psychoanalytic Institute. Dr. Colman believes that when one deals with children and adolescents in this kind of work, one comes to think like them in the work, and through analysis one may help them see the connections which are so often missing or hidden in their own thinking. With adults, Dr. Colman finds that his work has become so much more effective when he can see the threads of childhood thinking which emerge in their material, and become able to convey that to them in ways which they can grasp from their childhoods. He feels that this is a particularly gratifying aspect of his professional work with individuals of all ages. Dr. Colman believes that Child and Adolescent Psychoanalysis is not a common procedure in this country. In an age when medications are prescribed so routinely, and are actively sought after by so many in the hope of some sort of instantaneous relief from internal tensions and unbearable feelings, it seems to Dr. Colman that we need as an organization to find ways to both promulgate and make available to a larger population the benefits of Child and Adolescent Analysis, as well as finding ways to help inform parents of the nature of the struggles which their children and youths face and to help them to find ways to think about their children's internal struggles.

Helge Staby Deaton was born and raised in Namibia. After receiving a B.A. and a STD (Senior Teaching Diploma) at the University of Cape Town, she taught for six years at a Namibia high school for black citizens. There her interests slowly shifted from education to communication issues. Ms. Deaton went to train first as counselor in Berlin, Germany, and from there to London for full-time training in child analysis at the Hampstead Therapy Course and Clinic. Subsequently, she and her family lived in Bristol, UK for about six years, where she worked part-time at the Child and Family Guidance Clinic in Bristol and at the In- and Outpatient Clinic for Young People in Cardiff, Wales. She then moved to Princeton for good in 1983. Ms. Deaton obtained an M.S.W. at the Wurzweiler School of Social Work of Yeshiva University NY in 1989. Here she joined IPPNJ (Institute for Psychoanalysis and Psychotherapy of NJ) in 1986 and taught several courses for their training program. Ms. Deaton worked as student counselor for both the Princeton and Rutgers Universities and as part-time therapist for Catholic Charities’ Guidance, Family and Community Services in Trenton. On ending her work as student counselor Ms. Deaton took on consulting services for the Head Start Program in NJ through the NYU School of Education. This work deepened her interest in working with children under five and she updated her knowledge on infant and child developmental research by taking courses at Bank Street College in NY. Ms. Deaton now consults for an inner city daycare nursery in Trenton since 1999. On leaving Hampstead, she has always had a small private practice.
When Dr. Fort first joined the ACP nearly 10 years ago she was still a candidate in the child analytic program at the Washington Psychoanalytic Institute. While she does not remember the exact date of her joining, she has a keen memory of the warmth and openness of the ACP members she met and of the rich and inspiring clinical presentations at the annual meeting. Throughout her continuing involvement with ACP, this initial impression has persisted.

Dr. Fort has participated as a member of the Liaison Committee, as a group discussion leader and as a discussant of one of the workshop papers. The liaison work, with the help of Nat Donson, Brenda Lepisto, Carla Elliott-Neely and a local colleague will, this year, yield a place on the Division 39 spring program. She is a Teaching Analyst at the Washington Psychoanalytic Institute. She is on the curriculum committee at the Institute and on the steering committees of the Washington School of Psychiatry Child and Adolescent Psychotherapy Program and the Washington Psychoanalytic Center Psychotherapy Program. At the winter meeting of the American Psychoanalytic Association Dr. Fort has for the past five years, co-chaired a discussion group featuring presentations by child analysts. She has also presented a number of papers about her child work at meetings in Perugia.

Dr. Fort’s affiliation with ACP has been an important catalyst in consolidating her identity as a child analyst. She would be honored to have the opportunity to serve the organization, help candidates and promote an understanding of child analysis and its use and benefits.

Dr. Kalman Kolansky directs Child and Adolescent Psychiatry Training in the General Psychiatry Program at St. Elizabeth’s Hospital in Washington, DC. For many years he has been a Teaching Analyst in the Baltimore-Washington Psychoanalytic Institute, Assistant Clinical Professor of Psychiatry at Georgetown University School of Medicine, on the Teaching and Supervising Faculty of the Center for Professional Psychology, PsyD Program in Clinical Psychology, at George Washington University, and in private practice of adult and child psychoanalysis and psychiatry in Alexandria, Virginia. He is a graduate of Georgetown University School of Medicine. His psychiatric training was at Downstate Medical Center and Child Psychiatry training at Hahnemann Medical School. He graduated in Adult and Child Psychoanalysis from the Baltimore-Washington Psychoanalytic Institute, where he teaches and for many years has been a member of the Child Psychoanalytic Subcommittee of the Education Committee. Dr. Kolansky is Board Certified in Adult and Child Psychiatry, a Distinguished Life Fellow in the American Psychiatric Association, and recipient of the American Psychoanalytic Association’s Edith Sabshin Teaching Award. In recent years, he received a number of awards from St. Elizabeth’s Hospital Psychiatry Residency Training Program, including Supervisor of the Year in Child Psychiatry and Faculty of the Year. He also received the Vicinial Silver Medal for Teaching at Georgetown University School of Medicine. He has presented many psychiatric and psychoanalytic on aspects of child development, adoption, child psychoanalysis, psychological trauma in children, psychodynamic aspects of film etc., in regional and national meetings.
Dr. Christian Maetzener trained at The New York Psychoanalytic Institute & Society in adult and child analysis and has been certified in both by the American Psychoanalytic Association. Previously, he completed his adult, child and adolescent psychiatric training and a fellowship in public psychiatry at the Albert Einstein College of Medicine in the Bronx. He had joined this program after graduating medical school and earning a doctoral degree in neurology at the University of Zürich, Switzerland, where he grew up. Dr. Maetzener is married and has two children. He currently works in solo private practice. At The New York Psychoanalytic Institute, where he has served in the past as treasurer and as trustee and where he is a member of the child analysis committee, he is a faculty member and currently co-teaches a course on psychoanalytic assessment in the psychoanalytic training program. He supervises adult psychiatry residents and child psychiatry fellows in the department of psychiatry at Albert Einstein College of Medicine and at New York University medical school; he holds the title of clinical assistant professor at both institutions. At the New York Psychoanalytic Institute he is associate supervisor for child and adolescent supervisor and he supervises psychology externs. In his function as independent consultant for Holocaust survivors to the German Consulate in New York, he has been involved in matters related to the increase of retribution payments for survivors. Since the spring of 2004 he has edited the ACP Newsletter.

Irene Wineman Marcus qualified as a teacher from the University of London in order to fulfill the request of the Anna Freud Center to get experience with normal children. She entered training at the AFC in 1977. After completing her full time training in child psychoanalysis in 1981, she worked at the Cassel Hospital in England as a child psychotherapist on the inpatient family unit until 1982. Ms. Wineman Marcus then moved to the United States and became a member of the New York Freudian Society. She worked for 3 years for the Queens Child Guidance Center and did the in-service staff training for the 7 clinics. She also supervised at the Post Graduate Center for Mental Health at that time. In 1993, she completed the training in adult psychoanalysis at the New York Freudian Society. Besides several scholarly articles, she has published two children’s books co-authored with Paul Marcus, “Scary Night Visitors: a story for children with bed-time fears; and “Into the Great Forest”, a story for children away from their parents for the first time.

Ms. Wineman Marcus has been in private practice since 1983 and for the last 3 years has taught child psychopathology in the Child Psychotherapy Course of the New York University Psychoanalytic Institute. She has been a member of the ACP for a number of years and would very much like to continue making more contributions to the ACP by becoming an active member in the Association.
responsiveness appeared, distinct curiosity about the sexual anatomical difference between the sexes emerged in both boys and girls along with increased tactile, and visual curiosity about their own genitals and soon thereafter about their parents.

With the emergence of curiosity about the sexual difference there was a definite divergence between the reactions of most of the 35 boys in their sample, and those of the 35 girls. Galenson and Roiphe believed that the different responses to becoming aware of the sexual difference, usually occurring at about 16 months of age, are important organizing influences and set different pathways for girls and boys from that time onward.

Fundamental to these observations is the premise that the infant’s bodily sensations are externalized on to concrete semi-symbolic representations of the bodily experience. Galenson and Roiphe observed and categorized many forms of externalization of this type in normal infants, beginning at 12 months of age. This “derivative play” as they called it, is remarkable in that the structural properties of the play closely resembled the structural properties invoked during various body experiences, particularly those of the highly charged erotogenic zones. Thus, for example, anal zone characteristics are reflected in games for filling and emptying, or piling and dumping. Or, the body experience of boys would make it more likely for them to use phallic shaped objects in poking and thrusting games than it would be for girls, observations which were documented repeatedly in the research nursery. Galenson stressed that all sensory modalities including visceral, and other body-grounded reactions, as they encompass the sector of drive organization, underlie the development of play and early thought processes, including those of symbol formation.

Influenced by the contributions of Werner and Kaplan (1963), Vygotsky (1963), Piaget, (1924), and above all Susanne Langer (1942), Galenson’s work on symbolism deserves further comment,

(Continued on page 11)
for in this work we get a glimpse of the normal ambiguity and fluidity that occurs in preverbal symbol formation and therefore in early thought processes. We have been surprisingly blind to the temporal dynamics such as qualities of rhythm, force, and balance which might provide the temporal backbone that gives a feeling coherence to early mental life. Galenson’s and Roiphe’s work hints at this in their descriptions of preverbal thought, but these ideas are just now beginning to be more fully understood and explicated in current day developmental research.

Regardless of which criteria are used for defining castration anxiety and the psychosexual stages, looking back over 30 years on these direct infant observations and on the details of the single case studies we are given many excellent descriptions of sequences of play and early patterns of defense and the developmental periods during which they emerged. One important intention of Galenson’s work was to describe to those unfamiliar with this age period the normal and the seemingly more pathological trends of development that occur particularly in the second and third year of life. These descriptions are vividly portrayed so that one can get a glimpse of what play looks like as it becomes more constricted and concrete, or the use of a toy becomes more obligatory in toddlers who are compromised psychologically. Signs of separation anxiety and apparent castration anxiety are detailed in clinical descriptions of boys and girls with histories that include many variations in parental care and traumatic circumstances.

For those children in the very extreme condition, where there has been early trauma and/or a troubled parent-child relationship, the intensity and the early signs of castration reactions sets them apart from the children who can absorb the losses and anxieties inherent in the process of normal development, with a flexibility and tolerance for ambiguity which is lacking in the traumatized and deprived children. These are important and often subtle distinctions that are just beginning to be widely recognized as significant to infant mental health.

After the many advances of the past 30 – 40 years, our clinical sensibilities have been altered. Developmental stages appear to be less discrete and defined as we have come to know more about the variety of feelings and circumstances that surround and accompany a given behavior. Explicit meanings may have to be suspended for a while until we understand more fully how each developmental stage is inevitably shaped by and intermingles with the preceding stage and how accelerations and delays depend on many combinations of influence. Most importantly however, we have learned from these data that by two years of age (at least) we can observe the signs of undue anxiety in children who are likely to have a compromised developmental trajectory.

Dr. Galenson has been a staunch advocate of early clinical intervention with such children and their families for almost a half century during a time when there were very few champions of this view. She directed therapeutic nurseries at The Albert Einstein Medical Center and also at Mt. Sinai and she has endorsed the establishment of parent-child groups such as the Pacella Parent Child Center at New York Psychoanalytic Society & Institute and the many other centers throughout the city and throughout the country. She has also advocated for training programs in educating child and adult practitioners in the observation of preoedipal children (and their parents) in order to further psychoanalytic understanding of the conflicts of early childhood, and the early mechanisms of defense.

It is a psychoanalytic truism that practitioners in the field know well and travel readily the high road to understanding the unconscious and its symbolic representations but we need to give more attention to the brief moment in time in the second and third year of life, when early symbol formation is still a very close reflection of the drive components and their biological connection to the erogenous zones. After all these years Dr. Galenson remains virtually alone in documenting the unfolding of observable sexual interests and their development in very young preoedipal children.

We are far from having all the pieces in place about the mental life of infants and children but this story had a beginning and most importantly a duration which continues to unfold and for which we can thank Dr. Galenson for her remarkable energy, perseverance, and very valuable contributions..
Mali Mann, MD

Dr. Mali Mann, a candidate councilor of the ACP is a child and adult psychiatrist and psychoanalyst in private practice in Palo Alto and San Francisco. She is also a training and supervising analyst in adult at San Francisco Center for Psychoanalysis. She teaches and supervises residents as clinical associate professor at Stanford university, school of medicine, Department of Psychiatry and Behavioral science, Stanford, California.

My research and interest in preschool observation at Stanford University’s day care center came to play an important role in the trips I’ve been taking to Canyon Buena Vista, a small village near Ensenada, Mexico over the last decade.

Since 1993, I’ve been a member of Los Médicos Voladores (The Flying Doctors) a diverse group of medical professionals, aviators, translators and volunteers whose aim is to improve the health and well being of poor people in Mexico and Central America. We provide free health care and education to many indigenous people living in rural villages and in city barrios, where conditions are primitive and medical care is unavailable or too costly.

A trip to Mexico can be a vacation for most people; but for The Flying Doctors, it’s a mission of mercy. We go, as a team, in a small aircraft loaded with physicians, translators, volunteers, medicine and supplies, to provide medical, dental, and psychiatric services. Trips typically depart from Northern California on a Thursday morning, and return on Sunday evening. We clear Mexican customs in Ensenada or Mexicali, and our return trip stops on the US side of the border for customs and fuel for our airplanes.

The orphanage I have visited on a regular basis is located approximately 12 miles south of Chapultepec, the airport serving Ensenada, and can be reached by the local “Microbus”. There were 19 children when I first visited them in 1993. The number has grown and now there are 35 ranging in age from few weeks to 14 years. The children at the orphanage are cared for by a young married couple who themselves were orphans as children. They are devoting their lives to the care of these unfortunate children. In some cases, their parents are dead. In others, they abandoned them when the parents had no money to feed another hungry child or to buy medicine for a sick baby. Some parents think their children are better fed and cared for in the orphanage. They are concerned about their children’s survival in a physical sense, the result of abject poverty.

There’s a makeshift clinic nearby, about 100 meters from the orphanage that The Flying Doctors established in a small church. Our organization has no religious affiliation, but sometimes uses the facilities of churches, unions, farmers’ associations or community organizations to see patients. The clinic is primitive by any standards: a few folding chairs and tables, basic supplies and medicine we bring on our airplane and leave behind when we depart. Our visit is announced sometimes on a local radio program, more often by teenagers going through the streets and shouting, “The Flying Doctors are here!”

Soon whole families are lined up outside, waiting to be seen for various medical conditions. As the word spreads that free medical care is available, some families in the surrounding villages walk up to ten miles, bringing their sick children for treatment in our tiny clinic. Seeing a mother holding a baby in a shawl wrapped around her bosom is a common scene. These children have various medical problems, commonly malnutrition, fever due to upper respiratory infection, and gastrointestinal illness.

During my visits, I see mainly children, and function as a general pediatrician and child psychiatrist at the orphanage clinic. I also work with the staff to help them with their more difficult cases, ranging from behavioral problems, sleep disorders, eating disorders, and attachment issues.

I remember several particularly moving cases. One involved a two-year-old boy whose mother abandoned him at the orphanage two-months prior to my visit. He looked despondent, non-responsive, and angry. No verbal engagement or prompting worked with him. He sat on the stair-
way and pouted for a long time. Trying to play with him, talk to him or give him food did not move him at all. I believe the little boy was in despair and traumatized over his abandonment. Making the nature of his problem understandable to the staff helped the situation to some degree. In that they stopped looking at him as just an oppositional toddler. They were more empathic and changed their approach by giving the extra affection and love he needed.

To this day, I wonder what became of him even though in my visits afterwards he seemed to be doing better and bonded well to the older staff woman. What kind of desperate situation would make a mother abandon her two-year-old son? What will happen to the boy? Would he be comforted through peer contact or his caring surrogate parents and the couple in charge of orphanage?

There were other infants who had been separated from their mothers very early during the first three months of their lives. In some of these cases, a substitute was not available. They were apathetic with tears on their faces as they sat in a corner, dazed and unable to communicate. This reminded me of Rene Spitz’ infant observation that he called “anaclitic depression.”

There was one case of a boy with marasmus as well. The eighteen-month-old boy who looked markedly apathetic would not respond to any external stimulation. It looked as if he had regressed to a neonatal state with defenses against the stimulus barrier.

Our work with the staff at the orphanage presented a challenge for us as well. There were too many children and too few staff. The main female caregiver, Soledad, was overworked and suffered from a chronic kidney problem. Much of our time centered on helping the caregiver provide love and attention to 35 poor children.

This is the condition of poverty in parts of Mexico, and it is substantial. People live in shacks, struggling for survival, yet their resilience is amazing. For us, members of The Flying Doctors, the pleasure of seeing good done--real, immediate results--certainly outweighs the hardships we face in travel and staying over a weekend. Just being there, touching and examining, talking and educating, guiding people with a sense of respect and sharing their pain seems to make them feel better.

I was impressed during each subsequent visit with how much the structure and cleanliness of the orphanage improved since my first trip in the early 1990’s. The children appeared better nourished, and the look of despair on Soledad’s face had disappeared. In fact, there were rays of hopefulness and enthusiasm among the staff. One new staff member in her mid 40’s appeared to be very nurturing and caring for these children. They called her “Mom.”

Although we cannot solve all the problems brought about by poverty, giving these people medical treatment and education lessens their pain. My hope is that small steps taken towards international understanding and care will some day help bring about a healthier world.

From my experience, I have learned that the power of healing has no boundaries.

Join us in St. Louis!
May 2-4, 2008

Newsletter of the Association for Child Psychoanalysis - Spring 2008 www.childanalysis.org
Using the ACP Website

Paul Brinich, PhD

In order to access the ACP web site go to www.childanalysis.org

Once there, you can navigate to any of a variety of locations within our web site. Let’s say that you want to update your office telephone number for the ACP electronic roster. On the ACP Home Page, click on “for ACP members”

This will pop up a login page that asks you for your username (which is the e-mail address we have on file for you; it is case-sensitive) and your password. If you do not remember the e-mail address we have on file for you, please contact Tricia Hall at childanalysis@comcast.net to alert her to your difficulty.

If you know your username but don’t remember your password, you can click on the “here” button just below the “login” button. A new page will open on which you are asked to re-enter your e-mail address; once you’ve entered your e-mail address, click on “send” and a new, computer-generated password will be sent to that e-mail address in just a few minutes.

This new password will be very secure - 24 characters including numbers, symbols, and letters. Don’t worry about typing it! Simply highlight the text of the password in the e-mail message, copy it, and then paste the password into the sign-in page back at http://www.childanalysis.org/members.cfm

Once you have successfully logged in, you will find yourself on a page headed Member’s Section. The first thing you should do is click on “Update your profile”.

Depending upon the settings in your web browser, you may have to scroll to the right in order to see all of your information. Please fill in as many items as you can as this is very helpful when other members search for you. For example, another member may decide to search by the first 3 numbers of your zip code. However, if you have not entered a zip code in the “office” section of the page, your name will not be listed in the results. The fact that you enter information here does not mean that others will see it; you are given an opportunity to decide who sees what further down on the same page.

Toward the bottom of this page you will find two sets of buttons that allow you to choose the information that will be visible when people search the web site roster. The first set of buttons defines the information available to members of the public; the second set of buttons defines the information available to other ACP members.

Finally, pick a new password - one that is easy for you to remember - and enter it at the bottom of the page where it says “New password”. Then re-enter the password where it says “Confirm password.” Now comes the exciting part! Click on “Update”! If all goes well you should get a message that says “Your information has been updated.”

From the Member's Section web page you can

Update your profile
Search the member’s roster
View and print past newsletters
View and print current rosters, in both alphabetic and geographic versions
Search the document archive
You also will find an ACP calendar,
Committee Information and
E-mail Lists

If you have questions about accessing the ACP website, please contact Paul Brinich, at brinich@unc.edu
It was September of 1973 and my first visit to the Hampstead Child Therapy Clinic before beginning my training. I was in my early twenties, had had one full-time job in my life as a child-care worker, and was incredibly anxious about this new venture and how I would measure up in relation to my fellow first-year students. I was sure they would be older and wiser and less anxious than I.

I was ushered in to the Clinic lunchroom – a small utilitarian room on the garden level. There were a few long tables, where people were eating and talking animatedly. My host found me a seat and brought over a tray with soup and some sort of English comfort-food….maybe Shepherds Pie? My problem was this: How to get the soup from the bowl to the spoon to my mouth without my hand shaking so much that the soup would fly in all directions? I hesitated – Then something wonderful happened. Karen Marschke leaned over and introduced herself. I was impressed at once by her warmth and ease of making contact. Karen had a great smile; it was welcoming and inclusive and twinkly. To me she seemed very sophisticated and worldly, she already knew her way around the Clinic, was working with the children in the Blind Nursery and attending meetings with Miss Freud and Mrs. Burlingham. She introduced me to some other fellow students, and soon we were all chatting and sharing stories about ourselves. I observed that my soup bowl was empty... Karen and I became good and close friends. Although we certainly shared our studentship, what I remember best and will miss the most are just all of the good times we spent together. And there were many!

There were road trips to Cornwall and Wales. There was the time that my car got stuck amidst a herd of bleating sheep. There was an almost disaster of the same car with us in it going into a ditch on a mountainside. The car was sort of hanging half-suspended over said ditch. We carefully got out, and collapsed on the ground, laughing hysterically.

The Spring Bank Holiday week-end of 1977 was just before Karen’s “Wednesday Paper.” Although very nervous about having the paper ready, Karen decided (after a certain amount of pressure from me) to come with me up to the Lake District. We wanted to see where Wordsworth had lived and written and to imbibe the atmosphere of the Romantics. What we got instead was rain and more rain – light rain, heavy rain, misty rain. In the end it was hilarious – we were soaked and freezing the whole time, running in and out of tea shops, eating ever more scones with strawberry jam and clotted cream.

Our time in London was full of such escapades – Karen was like a fun older sister. She knew about jazz and she knew jazz musicians – she was an experienced teacher and she regaled us with stories from her Bank Street days. And she was a spectacular cook. An easy and relaxed and naturally elegant cook. Karen’s food always had this interesting combination of being complex and simple at the same time. The tastes were varied and sophisticated, but she made it look easy – no problem. We spent many evenings just hanging out at No. 86 Canfield Gardens with great food, a bottle of wine and funny irreverent conversation about the quirky characters who comprised the Hampstead Clinic staff in the seventies.

Returning to New York was really hard – but to have Karen here – an important link with London – made the adjustment easier. In difficult moments, I could head down to 10th Street. Above all, I think, Karen was a nurturer. It seemed her natural state to be taking care of people. She was utterly non-judgmental and the best listener I
Karen Marschke-Tobier
A Personal Remembrance

(Continued from page 15)

have ever known. When she had her daughter Zoe, she was over the moon with happiness – and I watched with pleasure as I saw her give to Zoe that same zest for life that she had.

Karen and I were students in London together; we returned to New York at the same time; we shared certain professional activities all along the way. But what was most special for me was the Karen who would always be ready to laugh – always be ready to listen – always ready for an adventure – to have fun. The last time I saw Karen was in the hospital. She was very very ill, and seemed to be sleeping. In an attempt at lightness, I remarked that I had certainly seen her looking better. From deep within she found the strength to open her eyes; to look directly at me; and with much difficulty to break into a big smile. That was my friend Karen.

IPA Funds Available To Promote Psychoanalysis

Elias Mallet da Rocha Barros, Chair, Committee on Analytic Practice and Scientific Activities
Peter Blos Jr., Chair, Developing Psychoanalytic Practice and Training Program Committee

Would you welcome IPA funds to help with the costs of a distinguished analyst coming to talk to your Society or group - including costs of interpretation? Would you or your Society, Institute or group like to do something to promote psychoanalysis locally and help increase the number of candidates seeking analytic training? The IPA has funds for such initiatives too. In recent years, the IPA has separately supported both of these aims by giving non-repayable awards to groups of Members and Candidates to address the so-called 'crisis in psychoanalysis' by developing psychoanalytic practice and training and to encourage inter-regional exchanges on clinical issues. In 2008, the inter-regional exchange initiative, called CAPSA has $100,000 available to support similar initiatives. The 'Developing Psychoanalytic Practice' program - DPPT - has over $195,000 to allocate to deserving projects. Applications to both programs can be made by Constituent Organizations, regional bodies, groups of Members or Candidates. Applications for funding in 2008 are now open, though projects can extend into future years. For further details and the CAPSA application form click:


There is no closing date for applications, but since they are determined on a first-come, first-considered basis, and funds are limited, you are advised to submit your application as soon as possible. For further details and the DPPT Resource Document click:


Closing date: 15 April 2008. We look forward to considering your application.

Volume 62 of The Psychoanalytic Study of the Child is dedicated to the 150th anniversary of Sigmund Freud’s birthday. This fascinating volume brings together papers of Freud’s two principal goals: the development of a general psychology and the improvement of clinical theories. It is divided into five sections. In the section ‘Little Hans Revisited’ we find a historical paper by Elisabeth Young-Bruehl where she examines the concepts of child development a century ago. Her contribution is followed by a paper by Harold Blum, who gives an overview of the literature on Little Hans, which has grown since the release of new data about the Graf family by the Sigmund Freud Archives. Jerome Wakefield then examines the case and the new data from the point of view of attachment theory and Joseph Bierman looks at the psychoanalytic process of the treatment. In a further paper, Eugene Halpert elaborates on the material from the point of view of its familial and societal context. Finally, Peter Neubauer takes the view that Freud followed and facilitated the gradual unfolding of Hans’ development.

In the second section “Applied Psychoanalysis”, Isaac Galatzer-Levy and Robert Galatzer-Levy remind us about August Aichhorn’s contributions to the understanding and treatment of children and adolescents who ‘act out’, and give an excellent overview of his contributions. This is followed by a paper on psychoanalytic and educational partnerships by Jonathan Cohen.

The third section deals with the treatment of children of trauma and disruption. It starts off with the Solnit Prize winning paper “Still searching for the Best Interests of the Child” by Alicia Lieberman and William Harris, a paper on theory and practice of treatment with patients who were traumatized between birth and five years. Inge-Martine Pretorius then writes about the analysis of a six year old who suffered trauma as an infant, a treatment where preverbal memories were repeated and recalled through play. Ekaterinbi Strati then writes about the analysis of an eight

year old foster care child with a disrupted attachment history.

In the fourth section “Child Psychoanalytic Technique” we find a paper by Leon Hoffman, where he examines the role of interpretation of defenses against unwelcome affects.

In the final section “Adult Development” Samuel Ritvo writes on creativity and conflicts of aggression based on material gained from the juxtaposition of Kafka’s “Letter to His Father” and The Judgment”. Calvin Colarusso and Guillermo Julio Montero finally examine midlife by exploration the relationships among transience, uncertainty and time limitation.

Members of the ACPs can purchase the Volume at a discount from Yale University Press.

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Deceased Members

We are very sad to have to announce that the following members have passed away since the last edition of the Newsletter:

Jules Glenn, MD - Nashua, NH
Karen Marschke-Tobier, PhD - New York, NY
John McDevitt, MD - New York, NY
Peter Neubauer, MD - New York, NY
Dale Ryan, LCSW - New York, NY
Sydney Clifford Yorke, MD - London, UK

Newsletter of the Association for Child Psychoanalysis - Spring 2008   www.childanalysis.org
The following individuals have been sponsored for membership and have accepted their invitations to join the ACP. We are happy to welcome these new members and look forward to others in the process joining us soon.

### Welcome New Members!

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<tr>
<th>Name</th>
<th>Sponsors</th>
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<tr>
<td>Anita Saunders, PhD, LCSW</td>
<td>Stanley Leiken &amp; Andrea Weiss</td>
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<td>Sylvia Welsh, PhD</td>
<td>Ruth Karush MD &amp; Karen Gilmore, MD</td>
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### Calendar of Events

- **03/13/08 - 03/16/08**
  21th EPF Conference  
  European Psychoanalytical Federation: The Shadow of the Heritage; Vienna, Austria  
  [www.epf-eu.org](http://www.epf-eu.org)
- **04/09/08 - 04/13/08**
  2008 Spring Meeting  
  Division of Psychoanalysis (Division 39)  
  American Psychological Association  
  New York City, NY  
  [www.division39.org](http://www.division39.org)
- **05/02/2008 - 05/04/2008**
  Annual Meeting  
  Association for Child Psychoanalysis  
  St. Louis, MO  
  [www.childanalysis.org](http://www.childanalysis.org)
- **05/03/2008-05/08/2008**
  161st Annual Meeting  
  American Psychiatric Association  
  Our Voice in Action; Washington, DC  
  [www.psych.org](http://www.psych.org)
- **07/27/08-07/28/08**
  9th Intl. Neuropsychoanalytic Congress  
  The Self In Conflict: Neuropsa. Perspectives  
  Montreal Neurological Institute, Canada  
  [www.neuropsa.org](http://www.neuropsa.org)
- **07/29/09-08/01/09**
  46th IPA Congress, Chicago, USA  
  What Are The Similarities And Differences An Clinical Practice Across Different Psa Cultures?  
  [www.ipa.org.uk](http://www.ipa.org.uk)
- **10/27/2008-11/02/2008**
  55th Annual Meeting  
  Am. Academy of Child & Adolescent Psychiatry  
  Chicago, IL  
  [www.aacap.org](http://www.aacap.org)
- **11/07/2008-11/09/2008**
  3rd International Inter-Regional Conference on Clinical Infant, Child & Adolescent Psychoanalysis In Our Changing World  
  Victoria University, Toronto, Canada  
  enerlich@hinckdellcrest.org

### Congratulations to Honored ACP Members!

**Paula Atkeson, Ph.D.** was awarded the 2008 APsaA Edith Sabshin Teaching Award.

**Jill Miller, PhD.** was awarded the 2008 APsaA Distinguished Service Award "with deep appreciation for conducting the landmark research which resulted in Child Focused Psychoanalytic Training becoming an option for all APsaA institutes.
**Guidelines for Sponsors of ACP Membership Applicants**

Please send all information to the Membership Committee Chair via the Executive Secretary Tricia Hall, at childanalysis@comcast.net or: 7820 Enchanted Hills Blvd., #A-233, Rio Rancho, NM 97144 / USA

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<td>Pathway 3: Training</td>
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<td>Ethical Statement:</td>
<td>Did the sponsoree to your knowledge ever contravene the ethical standards of his or her field or profession?</td>
<td>Yes No</td>
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Include a letter describing why you sponsor the individual for membership in the ACP. For Pathway 3 applicants (Training), please describe the following aspects of the sponsoree’s training:

a) a personal analysis - duration, frequency;

b) participation in seminars or independent study of three areas:
   - psychoanalytic principles
   - child psychoanalytic theory and practice
   - child analytic case seminars;

c) supervision by child analysts of child analytic cases.

The ACP is a community of analysts whose work and communication is founded on comparable experience and education. Our ideal for training is for the most intensive possible experience, that is, analytic treatment of children of all ages and both genders at a frequency of four to five times weekly, regularly supervised by a psychoanalyst. The founders of the ACP developed these standards based on their experience that they learned the most about what would help children from immersion in working intensively with children developing at different stages.

You may use the following table as guidance for sponsorship of Pathway 3 sponsoring:

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<th>For Candidate Membership</th>
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Please address:

1 training includes (or will include) all categories of training required for Regular Members

2 nature of training program

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2008 Annual ACP Meeting
May 2 - 4, 2008
St. Louis, MO

Hotel Reservations:
Please make your hotel reservations now at the:
Chase Park Plaza Hotel
212 North Kings Highway
St. Louis, Missouri 63108
Toll Free (US) 877-587-2427
314-633-3000