Our 2013 spring meeting in San Diego was highly productive, with an array of excellent clinical papers. You will find summaries of the proceedings in this Newsletter.

In addition to our Clinical Workshops, Judith Yanof offered an outstanding Plenary session, Ruth Karush presented the esteemed Marianne Kris Lecture and Kerry and Jack Novick presented a fine Extension Division program.

I have been working collaboratively with Stevie Smith, the Chair of our newly formed Education Committee and President-Elect of ACP, to lay groundwork for our continuing development as an organization.

For example, our Practice-building Committee (a subcommittee of our new Education Committee) has formed and its goal is to find new ways of expanding our clinical work and examining resistances on the parts of both potential patients and child analysts.

Our Outreach Committee, another subdivision of the Education Committee, is working to establish ways to work collaboratively with a variety of professionals involved in the psychological treatment of children. There are vast areas of outreach, yet untapped, that will be wonderful resources for child analysts individually and collectively. We will examine ways that we can contribute to the community, learn from them and find mutual enrichment.

Looking forward, we are planning other subcommittees as well: working with students, colleagues and other professionals, in the development of good clinical writing, teaching Ethical Practice to whomever treats children and their parents, and a series of related endeavors.

Beginning slowly, we are developing a methodology for forming committees that will permit us to effectively create a larger structure.

Since so many meetings now take place by phone, we are exploring the possibilities of small study groups taking place in a similar format. The possibility of a group, (or groups) attending to special technical problems in working with children is another area that we are considering.

More regional meetings would be another avenue for keeping alive the enthusiasm with which we return from our annual meetings. Let us know your thoughts about these potential innovations.

Additionally, there has been continuing dis-
A C P Newsletter
The Association for Child Psychoanalysis, Inc.
www.childanalysis.org
A non-profit tax-exempt 501(c3) organization founded in 1965

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Study Groups & CE/CME: VanDyke DeGolia, MD

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Newsletter of the Association for Child Psychoanalysis
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Co-Editors:
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Submissions
Submissions are most welcome. They should not be longer than 1000 words and should be e-mailed to the editor (prezantphd@gmail.com) as an attached Microsoft Word file (*.doc). The deadline for submissions for the Fall edition is June 30th, and for the Spring Edition the deadline is January 31st.

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Newsletter of the Association for Child Psychoanalysis - Fall 2013 www.childanalysis.org
President’s Message, Concluded from Page 1 . . .

Discussion of beginning an ACP listserv. We would like to hear your points of view about both positive elements of this potential new endeavor as well as concerns that you may have about it.

Our overarching mission for ACP will be to address directly the discouragement of many child analysts and invigorate our Association so that we can look forward to a future of working productively as child analysts. We share much with the pioneers of our field, which Paul Brinich discussed so cogently in his Marianne Kris Lecture of 2012. The road ahead is promising.

Our May 2014 meeting, the fiftieth meeting of ACP, will be held at the Fairfax Hotel on Embassy Row in Washington, D.C. Substantive papers have been submitted, and we are discussing them in the Program Committee. This leads us to say with confidence that we are looking forward to a very exciting Program in D.C. and we will share the details with you as they emerge.

Onward.

Anita Schmukler, D.O.

The 2013 ACP Award for Excellence

Following is Anita Schmukler’s presentation of the 2013 ACP Award to Jeri Weiss, President of the Board of the Los Angeles Child Development Center:

It is a great pleasure and an honor to introduce Jeri Weiss, whose dedication, persistence, energy and love have brought the Los Angeles Child Development Center to its current, unique and productive state.

The Center began in 1977, through the efforts of Miriam Williams, who was trained at the Anna Freud Center. Following the principles of the pioneers in our field, Ms. Williams’ goal was to bring psychological treatment to children of disadvantaged families through low cost psychodynamic psychotherapy. She initiated a “clinic without walls,” in which young therapists might help disadvantaged children, get supervision, and build practices.

Nearly twenty-five years ago, in order to reach even more children, the Board of the Los Angeles Child Development Center began a project to expand the use of psychoanalytic knowledge into school settings. The Center moved its work to the campuses of the Culver City Unified School District, where they provided psychological care for K through 12th grade children.

Building upon the success of the Culver City project, in 2005, the Center began to work with the Camino Nuevo Charter Academy. The work with their preschool through 12th grade students was intended to meet the needs of low-income immigrant children and their families. In 2008, the Center was invited to further expand its program to the Accelerated School, a national public, private partnership model for urban char-

Award for Excellence, continued on Page 20 . . .
Dr. Judy Yanof presented a case that focused on enactment, acting out, and resistance. Dr. Leon Hoffman was the moderator, and Dr. Charles Parks was the discussant.

Dr. Hoffman framed the discussion by raising technical issues in the field of child psychoanalysis. In particular, Dr. Hoffman considered the relative role of supportive and directive interventions versus expressive, exploratory, and interpretive interventions in this treatment. He wondered how each type of intervention might have contributed to the child’s progress. Rather than taking a stance about how to intervene, Dr. Hoffman emphasized the importance and challenge of holding onto one’s ability to think analytically.

Dr. Yanof described a child who resisted contact with her and used projection as a major defense. For example, the patient appeared to reject everything Dr. Yanof offered and projected many of her own negative self-views onto Dr. Yanof. Much of the analysis involved the challenges of working with a child who defended against thoughts and feelings with action. The analysis brought up the question of the effectiveness of working in the displacement. The patient’s need to constantly diminish the value of the treatment and analyst created significant emotional and technical challenges for Dr. Yanof. Dr. Yanof used a rich array of technical approaches to flexibly respond to the patient’s and the analyst’s powerful emotional reactions. Dr. Yanof’s case amply illustrated Dr. Hoffman’s point about the importance of thinking analytically when the patient is attempting to take all meaning out of the situation. The clinical material provided a compelling demonstration that interpretations can help a patient become self-reflective. The process of becoming more self-reflective may be as curative as the interpretations themselves.

Dr. Parks’ discussion focused on the importance of being flexible and the many meanings of the term “interpretation.” He also talked about the curative roles of education, self-disclosure, enactment, and work within the displacement. He emphasized the degree to which Dr. Yanof was able to work from Kleinian, contemporary object relations, relational, and conflict-based analytic approaches. Dr. Parks stressed that Dr. Yanof was able to think relationally while maintaining the centrality of the patient’s bodily experience in the patient’s psychological functioning. He noted that while contemporary analytic approaches have different aims, most have the goal of enabling the patient to have more flexibility of mind. He discussed how working from a relational perspective is not mutually exclusive with working with the transference and countertransference. Dr. Parks spoke about the challenges of working with patients who seem to be so split off from their own thoughts and feelings within a session.

Dr. Parks discussed the difference of opinion about the benefits or risks of working intensely with parents during child and/or adolescent analysis. Dr. Parks noted that, in this case, not only was there was no evidence that the parent work had interfered with the analytic process with the patient, but that the parent work was essential to the continuity and effectiveness of the analytic work. He described the analysis and the parent work as “mutually reinforcing.”

Dr. Parks raised the issue of diagnosis in today’s milieu. He emphasized the need to keep the person’s individuality and unconscious “front and center” in terms of understanding the meaning of symptoms. He also noted that, even if there are biological contributions to someone’s difficulties, this might not fundamentally alter the analytic task and certainly does not obviate the benefit of or need for analysis. Dr. Parks called for a balanced approach to thinking about etiology.

Drs. Parks and Hoffman talked about the place of child analysis in today’s mental health
environment, which privileges empirically-based treatments. Both argued for increased and improved approaches to empirical studies of the value of psychoanalysis.

Audience members discussed the ways in which Dr. Yanof facilitated the patient’s ability to engage in the analytic work. One member noted that Dr. Yanof was able to work with the patient’s psychic reality, external reality, and core unconscious fantasy. The importance of play and the difference between “play therapy” and analytic approaches to play was discussed.

One of the noteworthy features of this analysis was the patient’s resistance to discussing her life outside of the analysis, even while the analyst knew about important events in the patient’s life. The audience and panelists discussed the technical challenges involved.

One audience member noted Dr. Yanof’s ability to keep in mind the meaning of the patient’s statements and behaviors even in the face of strong resistances. In addition, this member noted that Dr. Yanof’s skillful work with the parents allowed the treatment to go forward. The discussion was rich and lively, and this led to a vibrant set of breakout group discussions.

Sydney Anderson, Ph.D.

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**ALIENS ARE PEOPLE TOO: VARIATIONS IN USUAL TECHNIQUE IN THE ANALYSIS OF AN UNUSUAL LATENCY-AGED BOY**

In her workshop, Denia Barrett, M.S.W. sensitively and vividly presented a case that highlighted the challenges of working with a child lacking signal anxiety and exhibiting porous boundaries between fantasy and reality.

The patient relied on defenses of fantasied omnipotence that left him vulnerable to overwhelming anxiety and affects. These difficulties required technical adaptations. Ms. Barrett chose to emphasize reality rather than to explore fantasy. This technical intervention was informed by her conviction that the permeable boundaries between the real world and fantasy posed a risk to the boy’s functioning. Ms. Barrett addressed problems of signal anxiety in much the same way, carefully constructing a ‘scaffolding’ before interpretation or exploration – i.e., addressing the defensive denial of realistic dangers.

Gradually, these technical adaptations contributed to the boy’s therapeutic progress. Thus, the final 1½ years of treatment was quite typical of work with a neurotic child. Work done on signal anxiety and drive fusion led to an increase in the amount of neutral energy at his disposal. He showed typical signs of latency, in regard to learning and in age-appropriate sublimations and made valuable progress in affect tolerance and regulation.

In her excellent discussion, Carla Neely, Ph.D. added a great deal to the topic itself. She spoke of Ms. Barrett’s work with the boy being informed by a developmental perspective: “so many of her interventions were typical of work with the pre-latency child whose structural development was not completely constituted”. Although Dr. Neely raised the issue of whether we think of the patient’s difficulty with regulation as genetically loaded or as an ego constriction, she felt that Ms. Barrett approached it ‘principally as an ego constriction developed early on’. Dr. Neely thought that Ms. Barrett’s technical adaptations, informed by her analytic understanding, ‘allowed the boy to make substantial gains in all the areas cited as problematic to his development’ and enlarged his range of ego achievements.

Andrea Weiss, Ph.D.
I Want to Give You a Present

At the ACP Annual Meeting in San Diego, CA one of the workshop papers was presented by Christina Lapides entitled: I Want to Give you a Present: The Analysis of an Over-stimulated Adopted Boy and discussed by Jill Miller. Ms. Lapides showed this boy’s struggle with changing internal representations that affected both his behavior and his sense of self, influenced as they were by environmental intrusions and the child’s fantasies of his adopted mother. She illustrated the analysis through detailed process material and the child’s drawings, as she focused on the implications of this lack of internal stability, especially with regard to the patient’s gender identifications.

The patient’s pathology was closely interwoven with that of his parents. Ms. Lapides was able to help the parents gain some understanding of their contribution and see their son more clearly as separate from themselves, even through difficult periods of disappointments and confusions, and an unfortunate interruption of the work. The patient himself was eager and willing to make use of the therapeutic relationship that was offered at a crucial developmental period prior to the consolidation that accompanies the onset of latency. Ms. Lapides demonstrated the work via the relationship and the developmental steps within the analysis that accounted for this boy’s change from an out-of-control, overly excited boy, to one who established affect tolerance, regulation and impulse control, as he moved toward being a separate object with a mind of his own. As he progressed along this developmental line, he was able to let his analyst in on his frightening fantasies and theories about himself and his life, bring his conflicts over his gender identity and aggression to the fore, and come to some resolution.

Through the brief termination phase, Ms. Lapides kept herself and the frame steady and focused on the sadness and loss, a task made more difficult by the suddenness of the ending. By the end, the patient was able to work through his transference feelings of being an unwanted or defective boy and knew the ending was not a rejection, that neither he nor his analyst wanted him to go, but he had to. Concerns about the lack of consolidation and integration of these changes remained.

The workshop and Ms. Lapides’ skilled and creative work were captivating to the audience, one member describing it as “a master class”. They were also deeply saddened by the tragic interruption of the analysis, although impressed with Ms. Lapides’ even handling. A rich discussion followed.

Jill M. Miller, Ph.D.

The Significance of Enclosed Spaces in the Analysis of a Latency Aged Child

Dr. Sabina Preter described aspects of the inner world of a latency-aged boy as they unfolded in the early and mid-phases of his analytic treatment. The analyst used the metaphor of “enclosed spaces” to describe her deepening understanding of the patient’s working through of his dominant conflicts.

The patient presented with episodic outbursts and chronic oral, excretory and social inhibitions. He demonstrated from the onset conflicts about aggression at an age where his fluid ego was subject to the vicissitudes of his aggressive drive and superego.

Important aspects of the presentation included the recognition of the indication for an...
alytic treatment, the necessity to work with the parents, the roles of the mother and the father in the formation of the masculine identification in young boys, the traumatic impact of the representations of medical trauma in the construction of the self and in the formation of interpersonal relationships. Dr. Preter demonstrated a keen understanding of the child's mind while taking into account the milieu of this child in our modern culture.

Hélène Keable, M.D.

## Becoming A Real Boy

This workshop focused on the technical challenges involved in working with children who are isolated from human contact. How can a child analyst, who relies on the expression of unconscious conflict and on expressions of transference/countertransference, work with a child who does not talk, communicate, play or express fantasies in words or action? Are these children beyond the reach of child analysis? What does a child analyst have to offer such a child or his parents?

The premise of Dr. Holly Johnston’s workshop was that child psychoanalysis does indeed have a lot to offer in such situations. Referring to Anna Freud’s idea of a preparatory phase, the presentation suggested a mode of entry into analytic work that begins with conjoint parent-child work focused on the discovery, emergence, and elaboration of the child’s internal world. Such work can pave the way to more formal analytic treatment. The patient’s use of the analyst as both a real object and a transference object was highlighted.

Dr. Johnston powerfully demonstrated that children who present in robotic, walled off ways have full internal lives despite their external presentation. Dr. Martin Silverman’s discussion used ideas from Freud, Bion, Klein, and Fonagy to explore the reasons that a child might remove themselves so powerfully from human contact as well as ways of understanding what happened in the sessions and intervening time periods.

Some children avoid contact and at times defend against their own longings for contact. They appear “walled off” and can seem unreachable. Do these children go through psychosexual stages and conflicts over separation-individuation? Drs. Johnston and Silverman demonstrated that children who are so detached still have unconscious minds that are constantly evolving, while the progressions and regressions are colored by their psychological constraints, typically called deficits. It is essential that the analytic work take both into account.

Dr. Silverman’s discussion of the paper was especially rich. He talked, using specific examples, about a variety of ways - all analytic - that one might intervene with children who are so initially disconnected. He noted that the various methods are all valuable and are dependent on the particular analyst.

The audience was inspired by Dr. Johnston’s ideas about the ways in which it is possible to gain access to the internal world of children who seem to be unable to think, feel, and communicate. One group member noted the importance of treating people as individuals rather than as disorders or diagnoses.

The importance of the work with parents was a thread throughout the presentation and discussion. The group focused on the strain on parents of having a child who is apparently unresponsive to their overtures, as well as the sensitivity to parents’ anxieties that is required for the continuity of the work.

Sydney Anderson, Ph.D.
The Marianne Kris Lecture

Dr. Ruth K. Karush delivered this year’s ACP Marianne Kris Lecture entitled, Postscripts: Reflections on the Post-Termination Phase. The focus was on the technique of termination of child and adolescent analyses and its subsequent effect on the use that some analytic patients may make of their analysts in the post-termination period.

Dr. Karush reminded the audience that the ending of a child’s analysis can be quite emotional for both the patient and the analyst and, if not handled respectfully, can undo much of what had been accomplished during the treatment. Analytic endings are also quite complicated. Not only are other people such as parents and teachers involved, but there are also the demands of normal life, which must be taken into account when contemplating the termination of a child’s analysis. Various criteria for considering termination were elaborated. Emphasis was placed on the fact that the psychoanalytic relationship is unique among intimate relationships in that its ultimate goal includes separation.

After termination, the analysand mourns the loss of the analyst. It is disturbing that, given the analysand’s vulnerability, many of our common termination practices may undermine the patient’s leave-taking and harm the positive internal image of the analyst and the analytic relationship that was created during the analysis. This is especially true because the child or adolescent patient often does not have the same important role in the decision to terminate that adult patients do.

In the post-termination period of good enough analyses, there may be eruptions of latent transferences, the repetition of earlier trauma, the alteration of the positive image of the analyst and regressive symptomatic relapse. The internal image of the analyst may remain primarily positive or it may change to be predominately disappointing or even persecutory. Dr. Karush proceeded to give a number of clinical vignettes, which illustrated continued work on the part of young patients in the post-termination phase. Some patients had the need to touch base with the analyst. Others returned for a period of more treatment.

Dr. Karush emphasized the need for the analyst to help the child end in a way that fosters the internal relationship and preserves the feelings of loving and being loved. The analyst’s own discomfort with feelings related to loss and disappointment may interfere with his or her participating in the termination in a flexible way. The analytic journey begins with the knowledge that the relationship will end one day. For children, this ending may be a lot sooner than is desirable.

No matter how much preparation is done, the termination of an analysis can be quite disorienting. Hopefully the child will hold on to the positive internalized image of the analyst. Dr. Karush pointed out that the analyst’s availability after termination can be crucial if the termination has set off feelings of abandonment. Post-termination contact with the analyst can solidify a positive internal image of the analyst. Identification with the analyst and the analyzing function of the analyst is probably one of the most mutative aspects of the treatment.

Ruth Karush, M.D.

Co-Editor’s Note

This current issue of the ACP Newsletter will be, for me, the final one as Co-Editor in charge of layout and publishing and printing. It has been something of a labor of love for me, as I have very much enjoyed doing this over the past five years. But, after some major changes in my life, I believe it is time to move on to other matters such as a new marriage, additional grandchildren with my new wife, and travel interests and hobbies. I still practice child analysis actively as well as adult analysis and psychoanalytic psychotherapy.

Dr. Daniel Prezant will continue as Editor of the ACP Newsletter, and Adam Libow, M.D. will be the new Co-Editor in charge of the duties which I am leaving. I will supply him with all of my records for the Newsletters I have published, and of course I will be available for any help and advice I may be able to offer.

Michael Colman, M.D.
Consultation Around Building a Child Analytic Practice: A View from Denver

In the spring of 2012, Drs. Anita Schmukler and Paula Atkeson visited Denver to present lectures and workshops on the subject of their edited volume on Ethical Practice in Child Analysis and Therapy. Both presenters offered material that was engaging, thought provoking, and stimulated much audience participation.

While meeting with us, and hearing of some of our challenges in practice building, Dr. Schmukler felt that she might be able to help us with some of the issues of evaluating and referring child analytic patients. She was willing to provide consultation by conference call to members of our child faculty and to candidates as well. During these meetings, we addressed resistances that arose in recommending child analysis and worked with various issues on the subject of practice building.

The Denver Institute for Psychoanalysis agreed to pay half of her fee for six sessions and the participants in the conference call paid the other half. Three to four faculty members and candidates have participated in the consultation. Partly as a result of the consultation, two of our candidates who were looking for cases were able to find them.

Working with parents and making a referral can be challenging. Dr. Schmukler’s clinical skills, conviction about child analysis, and her abiding interest in helping us was truly inspirational. We appreciated her creative and thoughtful work around making referrals for child analysis. In our conference calls, we valued having a safe space and the comforting presence of “the other” to discuss clinical issues.

Please feel free to contact us, or Dr. Schmukler, if you have any questions or want more information.

Shoshana Shapiro Adler, Ph.D.
Ronnie Shaw, APRN, BC

Dynamic Psychotherapy with Children & Adolescents in Denver

The 2011 site visitors to the Denver Institute for Psychoanalysis suggested that we provide a year of seminars on child and adolescent psychotherapy instead of the two-year child psychoanalytic psychotherapy program that we were offering. They felt we were putting too much time (five hours a week for thirty weeks over two years plus reduced fee supervision) and energy into the two-year program for our limited faculty resources. In addition, the psychoanalytic psychotherapy students complained of being exhausted from the intensive training. We were also disappointed that we only gained one candidate in child analysis through this effort.

Jill Miller, Ph.D. spearheaded efforts to begin the child seminars through meetings with the child faculty and the development of a brochure, which described psychoanalytic process. Shoshana Shapiro Adler, Ph.D. helped Lin Borden, our Institute administrator, publicize the program to various agencies working with children in the Denver metropolitan area.

The seminars are open to all mental health professionals involved in clinical work with children and/or adolescents, including graduates from the psychoanalytic psychotherapy and the analytic programs of the Denver Institute. Child analysts on the faculty of the Denver Institute lead each program, which is designed to give students a taste of psycho-dynamic psychotherapy with children, rather than a comprehensive curriculum.

Cal Narcisi, MD and Ronnie Shaw, APRN, BC were co-leaders of the first eight-week segment of the child seminars with a focus on the process of assessment and listening to parents. Five people attended the program.

Leland Johnston, MD led the second 11-week segment of the child seminar with a focus on listening to our patients and ourselves. Eight people attended this series, which was well received by our students.

Other groups may want to replicate this kind of continuing education program. Feel free to contact us for more information and/or a copy of our brochure that you can adapt to your needs.

Shoshana Shapiro Adler, Ph.D.
Ronnie Shaw, APRN, BC
Writing Workshop Debuts at ACP Annual Meeting

Dr. Arthur Rosenbaum led a writing workshop that featured examples of written case material provided by Dr. Anna Janicki. Drs. Rosenbaum and Janicki explained that the format had been used in workshops presented at other venues. It involved Dr. Janicki presenting segments of material previously reviewed by and discussed with Dr. Rosenbaum. The goal was to enhance clarity of communication and engagement of the reader and/or listener.

The workshop encouraged those in attendance to identify aspects of the presented material that captured their attention and gave a clear picture of both the process and content of various sessions and of the overarching “story” of the case.

The session was well attended and most in the audience engaged in lively discussion that ranged from what helps written case material to be optimally engaging and communicative to a consideration of whether such a forum helps the writer publish.

Tom Barrett, Ph.D.

Save the Date!

On May 2-4, 2014 please join the Association for Child Psychoanalysis, Inc. as it hosts its 2014 Annual Meeting at the Fairfax Hotel at Embassy Row in Washington, DC. This year’s meeting topic is The Contemporary Child Analyst at Work.

The Fairfax at Embassy Row, Washington, D.C. is perfectly situated in Dupont Circle, one of Washington’s most vibrant neighborhoods. Bistros, bars and boutiques line the streets that come together at Dupont Circle, the meeting place of this cosmopolitan neighborhood. The largest concentration of international embassies sits just northwest of the circle, giving the neighborhood an extra dash of global flavor. Arts and entertainment collide with restaurants, shops, galleries and museums. The Dupont Circle neighborhood, which is listed on the National Register of Historic Places, is home to numerous embassies, many of which are located in historic residences.

Hotel Information
Fairfax at Embassy Row
2100 Massachusetts Ave., NW
Washington, DC 20008
Main Hotel Line: (202) 293 - 2100
www.fairfaxhoteldc.com

Room Rate: $229.00 per night for single/double occupancy (plus applicable taxes). The hotel will be taking reservations starting October, 15, 2013 at the discounted ACP group rate.

Watch your email and mail later this year for updates and registration information. We hope you can join us in our nation’s capitol! See photos on Page 11 . . .

ACP Notice for Grant Applications for Low Fee Analysis

The ACP 2013 Grant Application is now available, and the deadline to apply for a grant for low-fee analysis is October 31, 2013. The ACP issues this funding through a supporting institution to be given to a member analyst or member child analytic candidate working with a child or adolescent case that may qualify.

The application is available on the Members Section of the ACP website at (www.childanalysis.org). You are also welcome to obtain a copy by contacting ACP administrator Tricia Hall via email at (childanalysis65@gmail.com) or by phone (505) 301-9174.
Scenes from Washington, D.C., Site of our 2014 Annual Meeting

Above, Fountain in Dupont Circle; Below, clockwise from top left: Part of Embassy Row; Lobby of the Fairfax Hotel; and Spring Blossoms in Washington, D.C.
In Memory of Carol Austad, M.D.

It is with great sadness that we report the death of Carol Austad, M.D. She died on July 4, 2013 from complications due to lymphoma. Carol graduated from the University of Michigan Medical School, and completed her Child and Adult Psychiatry Residencies at the University of Michigan. Adult and Child psychoanalytic training was completed at the Michigan Psychoanalytic Institute. For several years she was a member of the Child Analytic Study Program in the Department of Child Psychiatry at the University of Michigan. She was a faculty member of the Michigan Psychoanalytic Institute and was very active in its child analysis program. Dr. Austad practiced clinically in Ann Arbor, Michigan, throughout her professional career. She was a founding member of Allen Creek Preschool, an award winning preschool in Ann Arbor. Because of the importance she placed on early childhood development, she maintained her involvement at Allen Creek Preschool and served in many different capacities over the years. Most recently, Dr. Austad chaired the Committee on Child and Adolescent Psychoanalysis (COCAP) of the APsaA. In her non-professional life she loved to garden, play with her dog and cat, and to horseback ride, a lifelong interest. Dr. Austad is survived by her husband, Dr. Eric Austad, her daughter, and twin grandchildren. She will be missed by all who knew her, family, friends, colleagues and patients.

Ivan Sherick, Ph.D.

Remembering An Early Local Pioneer in Child Development and a Supporter of Allen Creek Preschool: Miss Cecily Legg

Miss Cecily Legg, age 96, died in April 2012. Born in Yorkshire England, she was the only child of the head groundskeeper of an English estate and his wife, a teacher. Her family moved to the southeast coast of England when she was 8 years old, but she remained steadfastly loyal to the north - often quoting Tennyson: “…bright, fierce, and fickle is the South/ And dark, true, and tender is the North”.

Until the start of WWII, she worked as a nanny to children of English oil company executives, enjoying 3 winters in South Iran, and often accompanied by a pet monkey. She returned to England and served as a nurse during the Blitz of London. Her recall of V-1 and V-2 attacks and the resolve of the English populace remained vivid throughout her life. When the war was over, Anna Freud accepted her for training in Child/Adolescent Psychoanalysis at the Hampstead Clinic. She trained there for 4 years and stayed on as staff for 8 more years before moving to the States - first to Case Western Reserve University, then south to Tulane, and then back north to the University of Michigan.

Miss Legg led an amazing life of adventure, service, and intellectual excellence. She worked with blind children whose sight was claimed by the oxygen therapy needed to save their premature lives. She bicycled around bomb-torn London for her various clinical obligations. When she moved to the United States, she became a valued and beloved member of the clinical psychiatry departments at three of our prominent universities. She was a respected and productive member of the Michigan Psychoanalytic Institute, where she is greatly missed. Her many publications range in subject from Cooperative Play in Young Children” and The Dream Wish, to The Replacement Child and considerations of the Catholic Mass.

Miss Legg remained true to her proper English background to the last. Her many contributions to her patients, her friends, and the psychiatric literature are a fitting memorial to her life of service and her English pluck. A bequest from Miss Legg’s estate will make possible expanded play and nature areas at Allen Creek Preschool, and the resumption of Allen Creek’s Early Childhood Outreach Program. The Allen Creek Preschool would welcome memorial contributions, in Miss Legg’s name.

Drs. Carol and Eric Austad
In Memory of Elizabeth Kathleen Daunton

Elizabeth Daunton, a child analyst trained by Anna Freud, faculty of the Hanna Perkins Center, and devoted member of the Association for Child Psychoanalysis since its inception, died in Cleveland on October 31st, 2012 at the age of 94. Known as “Liz” by her colleagues, Ms. Daunton was a keen analytic thinker, astute teacher, clear writer, and a kind, thoughtful, generous, and humble human being. Her contributions to the field and generations of trainees will long outlive her remarkable life.

Liz was born and raised in Bristol England along with two brothers. She obtained her B.A. and M.A. in History from Somerville College, Oxford University in England. She taught history in a girls’ school for several terms before taking postgraduate work at London University in Psychology, and training as a psychologist at the London Child Guidance Training Center. In 1947, she joined the staff of the West Sussex Child Guidance Clinic, which was among the first clinics to apply psychoanalytic principles to the treatment of children. The clinic was directed by Dr. Kate Friedlander, who was working with Anna Freud on the establishment of the Hampstead training program. At Dr. Friedlander’s suggestion, Liz entered the training program in 1948. After completing the training, she had a part-time staff appointment at the Hampstead Clinic where, among other things, she assisted Liselotte Frankl on a research project comparing children’s diagnostic interviews with their subsequent analytic treatment. She also had a part-time appointment as a psychologist in the Psychiatry Department at Paddington Green Children’s Hospital directed by Dr. Donald Winnicott where she had the opportunity to discuss cases with Dr. Winnicott and observe his work in the outpatient clinic.

Liz came to Cleveland in 1956 at the invitation of Dr. Anny Katan and joined three other Hampstead graduates – Erna Furman, Alice Rolnick and Joanne (Kohler) Benkendorf – to help develop what became the Hanna Perkins Therapeutic Nursery School and Child Analytic Training Program of the Cleveland Center for Research in Child Development. Liz worked with the school until her retirement and was on the Faculty of the Training Program from its inception in 1958 until the time of her death. In addition to ongoing involvement at Hanna Perkins, Ms. Daunton had a position as Associate Professor of Child Therapy in the Department of Child Psychiatry, School of Medicine, Case Western Reserve University and served as a member of the teaching faculty of the Cleveland Psychoanalytic Institute.

Ms. Daunton served on the ACP’s first Board of Directors. At its first meeting in Topeka in 1966, she was a discussant of a paper given by Erna Furman on Treatment via the Mother. In an interview published in Child Analysis (V. 16) Ms. Daunton recalled the very beginnings of the ACP: “Dr. Anny invited me to accompany her to New York to attend a meeting convened by Dr. Marianne Kris to share her proposal to found the Association for Child Psychoanalysis that would include both medical and lay analysts. She had already taken out the necessary papers. This was also a courageous venture and I had the sense that history was being made.”

Throughout her career, Ms. Daunton provided highly skilled, valuable therapeutic services to children in analysis and psychotherapy, and to parents seeking assistance with their children. In connection with the Hanna Perkins School, Ms. Daunton provided indirect treatment for young children through direct work with the parents of these children and consultation with their teachers. Ms. Daunton also provided consultation services to child care givers and courses for preschool teachers. It is from this work that Ms. Daunton developed the expertise and unique ability to combine affective understanding, psychodynamic theory, and therapeutic technique so evident in her teaching and writing.

There are countless students – child analytic candidates, psychiatry residents, social workers,
teachers, and others across the United States and around the world – who are grateful to Ms. Daunton for her role as a teacher and supervisor. She was a clear thinker and perceptive listener. She could astutely perceive the feelings behind the behaviors of young children and the conflicts and concerns of mothers, lucidly articulate the psychodynamic processes at work, and then provide a few simple words that could be extended to a child or mother to enable them to grasp what frustrated them and master the challenges they face.

She was a master at containment, always finding the one most helpful thing to say in the face of challenging situations and she had great respect for the developmental process, conveying her confidence in her patients and students’ ability to own their work. When a child approached her asking if he had an appointment with her, she responded with, “it seems you’re giving the remembering to me.” When a supervisee arrived for his first session, her first words were “How may I help you?”, effectively conveying that he was the one responsible for the case and for getting the help he needed with it. In work with teachers, as in her work with parents, Liz was always sure to empathize first with their frustrations and only after that point out another way to look at things: acknowledging how demanding an aggressive child can be of a teacher’s time and patience before suggesting that “it is sometimes helpful not to take the child’s behavior at its face value, but rather to see it as an attempt to cover up a fear: ‘Perhaps I am not tough enough. I think someone will hurt me.’”

Liz’s respect for defenses came through in her supervision of my first case. She helped me to understand the importance of respecting a child’s ego and to avoid direct interpretations of my patient’s play, interpretations which would interfere with normal developmental progress. Under her guidance I learned, instead, how to focus on the defenses and the affect being defended against at a level where the child’s ego could tolerate and integrate the work.

Ms. Daunton’s writings are equally articulate and helpful, illustrating analytic technique and respect for the ego and the mechanisms of defense through case examples. One example is her article on *Communication and Interpretation in the Opening Phase* originally presented at the 1973 ACP meeting in Ann Arbor and later published in the Journal of Child Psychotherapy [1980]. Ms. Daunton also had a clear understanding of the importance of education and the distinct contributions teachers can make in promoting children’s development, as evident in *The teacher’s contribution to the therapeutic work in the Hanna Perkins School* (Child Analysis, V. 3, 1992).

Ms. Daunton’s work includes contributions to several important research projects at Hanna Perkins - a follow up study of children who attended Hanna Perkins School (The Therapeutic Nursery School, 1969, A. Katan & R. Furman, eds.), a study of Childhood Bereavement, (A Child’s Parent Dies, 1974, E. Furman), the teaching of child development to students of high school age (Helping Young Children Grow, 1989, E. Furman), and a study of children with severe early disturbances (not yet published). From 1990 to 2004 she served as an editor of the journal, Child Analysis: Clinical, Theoretical, and Applied, a publication of the research arm of the Hanna Perkins Center (“Cleveland Center for Research in Child Development”). Many volumes include articles by her and her students that are based on the work in the Hanna Perkins School and Clinic. She also published in the Psychoanalytic Study of the Child and several other scholarly books. In addition, Liz wrote articles for educators addressing how to help children with bussing and integration in the Cleveland Schools, and how to help children on field trips.

Liz had a multitude of other interests and hobbies, including bird watching, bridge playing, listening to classical music, traveling to many countries, attending plays, and reading both classics and new novels. Personal friends and relatives, as well as colleagues and students, remember Liz...
as a delightful conversationalist with a remarkable ability to listen and an unfailing memory. She always sent thank you notes and corresponded regularly with everyone, especially children with whom she was acquainted, throughout their lives. Liz spent her last years at the Judson Retirement Community where she made new friends, was actively involved, and developed a close relationship with Dr. Raymond Glaubinger, another Judson resident.

Ms. Daunton was both realistic and optimistic. She was concerned about the challenges facing child analysis in the current century and did what she could to address them, while maintaining her own pleasure in her work and respect for what she knew to be true. In the same interview referred to above, she was quoted as saying, “I cannot imagine a more satisfying...rewarding and enjoyable profession.” and “When a child shares his inner life with you, it’s a privilege. Seeing integration and forward growth is a great satisfaction, as are all positive changes in the parent/child relationship. I’d add that being able to work with colleagues in the adventure of analytic learning is a satisfaction also.”

We are privileged to have had Liz as a mentor, colleague and friend. We only hope that we use this privilege wisely, be true to what she has given us, empower others as she empowered us, and be authentic in carrying out our lives as she was with hers.

Barbara Streeter

In Memory of Judy Wallerstein, Ph.D.

Judy Wallerstein, Ph.D. died of an unexpected, critical illness on June 18, 2012, only days after she had submitted her last paper for publication. She was 90 years old and left a legacy that has had a powerful impact on the world of psychology, psychoanalysis, the law, and most importantly the lives of many children and their families.

Judy was an internationally recognized researcher, author, and champion of families and children who struggled with the aftermath of divorce. She recognized in the early 1970’s, as the divorce rate rose dramatically, that a generation of children was being affected in ways that no one had seriously studied. She, with her colleague Joan Kelly, began the “California Children of Divorce Study” which followed 60 families and 131 children over a 25 year period. As the world around her wanted to minimize the effect of divorce on children, she courageously presented her data that indicated very clearly the following: that divorce has, in fact, a lasting and profound effect on children; that the age of the child at the time of divorce matters and in what ways that better custody decisions, which protect the development and health of children, can be made by understanding the psychological and cognitive development of the individual child and the psychodynamic forces at work in the family; that the developmental needs of the child change over time and, therefore, that custody arrangements need to be reevaluated periodically; that the role of the step-parent is a very complicated and difficult one; and that fathers often became estranged from their children after divorce.

She became a champion for persuading families and even the courts to take account of these factors. Her initial findings which included intense father hunger in many children led the courts to consider assigning more custody to fathers with the hope that they would stay more invested in their children, especially in instances in which these fathers went on to have second families. However, as she gathered subsequent long-term data, Judy was impressed with the difficulty that shared custody created for many primary caretakers, usually mothers, and the intense struggles that were magnified by the necessity of co-parenting and therefore the price that was being paid by the children. She was unswerving in...
her dedication to viewing the data without prejudice and acknowledged that the very change that her initial data had influenced also had brought with it, especially for the very young child, another set of serious problems to be solved. She ultimately concluded that the security and continuity of the child’s relationship with at least one parent was a more important factor in influencing children’s outcome over the long term than the inter-parental conflict. Only in certain circumstances did shared physical custody work in the best interest of the child.

She proceeded to publish four bestselling books and many articles about children and divorce:

**Surviving the Breakup: How Children and Parents Cope with Divorce** (1980), with Joan Kelly

**Second Chances: Men, Women and Children a Decade After Divorce** (1989), with Sandra Blakeslee

**The Unexpected Legacy of Divorce: A 25-Year Landmark Study** (2000), with Sandra Blakeslee and What About the Kids? Raising Children Before, During and After Divorce (2003) with Sandra Blakeslee

When the dark side of studying broken marriages weighed her down, she turned to studying and publishing a book about the “good marriage” -


Born Judith Hannah Saretsky in New York City on Dec. 27, 1921, Judy experienced a major trauma early in life. Her father, a director of Jewish community centers, died of cancer when she was 8. Judy did not know how grave his illness was and for a long time denied he was dead. “You can trace all this work to my own suffering as a child and how my mother tried to handle the situation,” she told the Baltimore Sun in 1997. “I know the importance of an intact family, about the importance of fathers.”

Judy spent her teenage years in Tel Aviv, where her widowed mother taught English. She was educated at Columbia University and the Topeka Institute for Psychoanalysis. She received her Ph.D. in psychology from Lund University in Sweden in 1978. She was Senior Lecturer Emerita at the School of Social Welfare, University of California, Berkeley, where she was on the faculty from 1966-1992. She also held faculty positions at the School of Law, University of California, Berkeley; the Hebrew University, Jerusalem; and Pahlavi University Medical School in Iran, and lectured at Harvard, Cornell, Stanford, Yale and other major universities throughout the United States and abroad. She was a Fellow at the Rockefeller Foundation Study Center in Bellagio, Italy, in 1992, and at the Center for Advanced Study in the Behavioral Sciences at Stanford, California, in 1980-1981. She served as a consultant for numerous organizations including the Advisory Commission on Family Law to the California Senate Subcommittee on Administration of Justice; the Commission on Law and Mental Health, State Bar of California; and the California Senate Task Force on Family Equity. She served on the editorial boards of many major professional journals and served as well on the executive committee for this Association 1977-1980.

Judy was invited to address the annual meeting of the Chief Justices of the United States on Recent Advances in Child Development and Attachment Theory in July 2000. She delivered hundreds of speeches to leading mental health, legal, medical, and psychiatric organizations, hospitals and universities and appeared on *Oprah*, the *Today* show, *Good Morning America* and other programs.

Some of her honors included the Distinguished Teaching Award from the University of California, the Koshland Award from the San Francisco Foundation, a Resolution of Commendation from the State of California Senate Rules Subcommittee, the Rene Spitz Lectureship from the Denver Psychoanalytic Society, and the Dale
Richmond Award of the American Academy of Pediatrics. She was an honorary member of the American Psychoanalytic Association. Judy Wallerstein was a shining example of the power of one person’s persistent intellect and courage. She was armed with research tools and psychological, psychoanalytic, and sociological sophistication. She was fueled by the need to master her own personal challenges and her commitment to each individual’s potential to improve the world. She made a difference. Judy’s work made evident that the onus is on us as psychoanalysts to use our psychoanalytic understanding in appropriate, applied settings. She is an inspiration. We have lost a treasure!

Phyllis Cath, M.D.

In Memory of Judy Wallerstein, Concluded from Page 16 . . .

Sarah Birss, M.D. and Kimberly Chu, LCSW hosted a Special Evening for Child Analytic Candidates at the San Diego meeting of ACP. Many participants arrived back from a rather windy boat tour with just enough time to change clothes and warm up!

We were fortunate to have the plenary speaker, Judith Yanof, M.D., and the plenary discussant, Charles Parks, Ph.D., join us for a discussion. Over light snacks, candidates had an opportunity to speak informally with these two senior analysts about training and practice in child psychoanalysis.

The discussion focused on the difficulties of finding child analytic patients. Although practice building for the child analyst can be challenging, respect for and a real passion for child analysis can help sustain the search and the work, even when one’s practice includes treatments of less intensity.

Difficulties in getting credit for training cases at specific institutes were explored. Candidates were encouraged to bring these issues to their own institutes, and to become active in bringing such issues to supervisors.

Kimberly Chu reminded candidates that members of ACP are able to apply for financial support of low fee analytic treatment. Grant applications can be accessed on the ACP website.

Kimberly Chu and Sarah Birss have completed their 3-year terms as Candidate Representatives to the Executive Council. The new Candidate Councilors, Adam Libow, NY and Ken Roberson, CA have begun their terms. We look forward to continuing this excellent program for Child Analytic Candidates at our 2014 meeting in Washington, D.C.

Sarah Birss, M.D.
Kimberly Chu, L.C.S.W.

Mahler Symposium, Concluded from Page 18 . . .

allows the patient to become aware of their need to control the analytic relationship. Identifying the same features in other relationships allows for gradual exploration of the transference.

Fluctuating transference at a borderline level along with extreme suicidality and self-destructiveness are other clinical types with their own extreme demands on the therapist. One must interpret openly that while the patient wants relief, he is also under the sway of powerful internal forces that need to be explored. Maintaining limits, boundaries, and safety are essential, along with focusing on the patient’s need to destroy himself. It is a frightening aspect of the transference when the patient attempts to destroy the therapist or his reputation, as a submission to the sadistic murderous internal object and savage suppression of infantile self and aspirations for love.

M. Hossein Etezady, M.D.
Margaret Mahler Symposium

The Wounded Self: Narcissism, Rage and Revenge

Kerry Kelly Novick addressed the history of revenge in literature. She focused on maternal betrayal and the burning drive to reverse wrongs and to make the world feel right. Material from a latency age boy showed how he enacted his conflicts by turning himself into a weapon of destruction. He took revenge on his parents for what he perceived as their impossible demands. The boy had been the target of opposing externalizations by both parents and had identified with each in order to maintain his attachments and to defend against his rage. Antisocial exploitation can be related to feeling entitled to perform vengeful actions.

Initially, Novick verbalized the boy’s transparent wishes for power and domination. He was unlike everyone in his family, met no one’s expectations and disappointed everyone’s hope. From his perspective, this was a form of getting revenge. In sessions he was often disruptive, hostile and offensive. This intensified following a significant improvement. Finally at the end of her rope, the analyst “fired” the boy while the contact with parents continued until the boy asked to return. Two years later he continues to be well engaged in his treatment. His peer relations have improved. He has taken full charge of his schoolwork and is now able to go on overnight school trips. During sessions, he can listen and elaborate on subjects under discussion. Delicate issues of sexuality and gender identity and what he believes to be the impossible task of satisfying both of his parents are beginning to emerge. He now sees that he has choices and values being capable of putting things together.

Daniel M. A. Freeman, M.D. elaborated on Freud’s use of metaphor and how they may frequently be overextended. With ontogenesis, an infant faces gratifying or unsettling surprises. Deflation, rage and need for revenge may ensue. Destabilizing crises may create panic, but then adaptation may be found. In treatment, we help children and adults re-experience critical turning points where they derailed, opening opportunities to discover a way back. Latency is a phase of exploring and re-synthesizing intra-psychic and interpersonal pathways in a novel extra-familial context. Material was presented from a latency age boy who was traumatized as an infant and also of a young woman who was traumatized as a toddler. The impact of the traumas and resulting adaptive defenses were described along with their effects on relationships and the transference. Pre-oedipal conflicts and magical solutions were worked through. As patients reflect, they may see how they have over-used a particular coping technique, overlooking better options. They may refine their choice later from a new perspective.

Otto Kernberg, M.D. focused on the development of transference in narcissistic disorders of various severity and the corresponding technical interventions. The pathological grandiose self includes the activation of an entitled, superior self and a counterpart that is de-valued, paralyzed and inferior. Here dyads are constituted by the relation between the grandiose self and de-valued self-representations. These patients cannot depend on the therapist and distrust, ignore or discard anything new. The therapist feels he is alone in the room. These transferences require lengthy and consistent working through. When symptoms motivate the search for treatment, standard psychoanalysis is generally indicated for patients functioning at a relatively high level. The analyst is expected to be as good but not better than the patient or it would evoke envy and devaluation. Controlling the outsider may relieve feelings of inferiority and humiliation along with fantasies of the analyst’s contemptuous superiority. Gradually conflicts may emerge, particularly aggression, pre-oedipal and oedipal conflicts and the activation of early trauma needing such defenses. These patients will try anything to avoid a humiliating indication of their dependency. Interpreting this constellation...
In Memoriam

We are very sad to announce the following ACP members have passed away:

Carol C. Austad, M.D.            Landrum S. Tucker, Jr., M.D.
Ann Arbor, Michigan            Chapel Hill, North Carolina

Herman S. Belmont, M.D.
Haverford, Pennsylvania

* This updated list is based on notifications received since the last ACP Newsletter (Spring 2013).

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**New Members**

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<tr>
<th>Candidate Members</th>
<th>Sponsors</th>
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<tr>
<td>Sara Fox, MD</td>
<td>Ruth Karush, MD and Leon Hoffman, MD</td>
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<td>Kathryn McCormick, MA, LMFT</td>
<td>Catherine Henderson, PhD and Charles Mangham, MD</td>
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<tr>
<td>Gabriel Ruiz, LCPC, LLC</td>
<td>D. Clifton Wilkerson, MD and Barrie Richmond, MD</td>
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<tr>
<td>Keith Westerfield, PhD</td>
<td>Ruth Karush, MD and Laurie Levinson, PhD</td>
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<td>Elizabeth Wolff, MD</td>
<td>Helene Keable, MD and Noah Shaw, MD</td>
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<th>Regular Members</th>
<th>Sponsors</th>
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<tr>
<td>Monisha Nayar-Akhtar*</td>
<td>Kerry Kelly Novick and Christine Keiffer, PhD</td>
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<tr>
<td>Julio Calderon, MD*</td>
<td>Paula Atkeson, PhD and Silvia Bell, PhD</td>
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<td>Stanley Case, MD*</td>
<td>Kenneth King, MD and Kerry Kelly Novick</td>
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<td>Joanna Goodman, PhD*</td>
<td>Catherine Henderson, PhD and Jack Novick, PhD</td>
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<tr>
<td>Michael Grover, MD*</td>
<td>D. Clifton Wilkerson, MD and Barry Childress, MD</td>
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<tr>
<td>Holly Johnston, PhD*</td>
<td>Adele Kaufman, LCSW and D. Clifton Wilkerson, MD</td>
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<tr>
<td>Margaret Zerba, PhD*</td>
<td>Lorraine Weisman and Ruth Hall</td>
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* Elevation to Regular Member

Please note: These members were invited to join the ACP after the conclusion of the previous six-week Spring comment period March 4 – April 15, 2013. The next comment period will include applications sent in after April 2013 and is scheduled for this winter December 2, 2013 – January 13, 2014.
At our last ACP meeting, Paul Brinich offered a memorable Marianne Kris lecture, in which he detailed the work of bold, innovators in child analysis. Jeri Weiss is an innovator of that calibre. We offer her our profound admiration, respect and thanks for providing a model for all of us.

Congratulations, Jeri!

Anita Schmukler, D.O.