



IARPP 10th Anniversary Conference

THE LEGACY OF STEPHEN MITCHELL
Sustaining Creativity in Our Psychoanalytic Work

Thursday, March 1st 3:45 pm – 5:15 pm PAPER SESSION I

#1: Culture and Immigration: Exploring Relational Trauma

Presenters: Barbara Eisold, PhD, USA and Joel Kanter, MSW, LCSW-C, USA
Discussant: Kadri-Ann Laar, PhD, CANADA
Moderator: Julia Beltsiou, PsyD, USA

Abstract:

Exploring Difference in Psychotherapy with Naturalized and First Generation Chinese Americans,
Barbara Eisold

For me, one of the pleasures of our work occurs when unexpected vistas seem to open up, giving me the opportunity to learn about the world and to widen my clinical perspective. Remaining open to these vistas implies a willingness to re imagine the contours of “psychopathology” in the context of unfamiliar, unusually skewed external pressures. My latest journey of this hopefully “creative” kind has come about because, recently, eight people of Chinese descent (first generation Americans and recent immigrants) contacted me for psychotherapy. Before meeting them, I knew very little about either Chinese culture or modern Chinese history. The latter (I have learned) has been punctuated by a series of horrendous historical events, including the Japanese invasion, the Communist revolution, the Great Leap Forward, and the Cultural Revolution. Work with this group has thus forced me to take a fresh look at the interaction of familiar themes with unfamiliar events. Some of these are explored in the attached paper. These include: (1) the long-term effects of unreconstructed trauma, compounded by unrecognized historical catastrophes (the Cultural Revolution especially), on family relationships: (2) the effects of culturally different, conflicting assumptions (American and Chinese) about the child’s role and achievement on (3) the adult’s sense of identity, especially in regard to life’s goals. (4) The implications, for the therapeutic relationship, of different interpretations (mine and theirs) of racial difference. And finally (5) some issues in regard to technique. Unusually close observation of my own behavior has been crucial, in order to keep the treatment with this group on-going and increasingly psychoanalytic. The question of the slow nature of progress has at times been an issue for them, if not also for me. In general, however, I have found the work to be profoundly moving.

At the conclusion of my presentation, participants will:

- 1) Have greater knowledge about the nature of the conflicts first generation Chinese Americans may experience, in regard to their sense of identity and goals in living.
- 2) Be more familiar with potential counter-transference issues in work with this immigrant group, if not with others as well.



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PAPER SESSION I

#1: Culture and Immigration: Exploring Relational Trauma (continued)

Presenters: Barbara Eisold, PhD, USA and Joel Kanter, MSW, LCSW-C, USA

Discussant: Kadri-Ann Laar, PhD, CANADA

Moderator: Julia Beltsiou, PsyD, USA

Abstract:

The Trauma of Dislocation and the Transitional Participant, Joel Kanter

While the psychoanalytic literature has frequently addressed issues involving separation, loss and attachment, the experience of “dislocation” encompasses much more than these commonplace phenomena. The experience of dislocation is vividly illustrated in the lives of immigrants, but occurs in children in divorce, children in the child welfare system, military personnel and families, persons with severe psychiatric disorders, and the elderly. Extracted from the work of Clare Winnicott with evacuated children in wartime, the concept of the “transitional participant” involves that active participation of a social worker, other professional or lay person who stays actively involved with the life and social network of an individual over time. This presentation will describe this concept and discuss how this approach can be used in psychotherapy and other professional interventions.

Learning objectives:

At the conclusion of my presentation, the participant will be able to identify the common presentations of traumatic dislocation in clinical practice.

At the conclusion of my presentation, the participant will be able to differentiate the role of a psychotherapist in conventional practice from the role of a transitional participant.



Thursday, March 1st

PAPER SESSION I

#2: The Play's The Thing

Presenters: Darlene Ehrenberg, PhD, USA and Robert Grossmark, PhD, USA
Discussant: Stefanie Glennon, PhD, USA
Moderator: Mark Gerald, PhD, USA

Abstract:

On Laughter and Transformation, Darlene Ehrenberg

This paper is the result of challenging an assumption about aging and chronic disease: the long held classical belief that psychic growth and expansiveness has an upper age limit. Mina, a 73year old woman' suffering from severe rheumatoid arthritis, has taught me otherwise. Mina came into treatment expressly because she needed to counter the withering of her body which despite sophisticated medical treatment has been proceeding on its own relentless course. This paper is about working relationally with Mina augmented by principles of neuropsychobiology which acknowledges the interweaving of body and psyche. Mina has been a good teacher illustrative of Mitchell's tenant that one must continuously question their participation in "openness to criticism and self reflection" (Mitchell, 1994, 369).

Educational Objectives

1. The participants will be able to describe psychic changes that are likely to occur as an individual ages.
2. The participant will be able to discuss the relational changes that occur during and after an enactment.

Creativity in Psychoanalytic Process: The Flow of Enactive Engagement, Robert Grossmark

This paper will advance the idea that enactment can be regarded as a contemporary form of free association. Freud saw free association as the key to the psychoanalytic process, and suggested that the analyst not interfere with the flow of associations. I argue that the contemporary, engaged and present relational analyst can allow 'the flow of enactive engagement', and that this process is the engine that can drive a contemporary psychoanalysis. Borrowing from the enactment literature and the work of the River Plate psychoanalysts (Barranger & Barranger) I suggest that both patient and analyst are engaged in a mutual regression that enables the emergence of fantasies of the field of the treatment. The analyst and patient participate in and construct the field, but, like a group-as-a-whole, it is more than the sum of it's parts. The role of the analyst is to hold this process, to be present and to allow it to tell it's own revelatory story; to be unobtrusive to this process while being in it. A brief clinical vignette illustrates the flow of enactive engagement.

Participants will be able to:

1. Describe the concept of 'the flow of enactive engagement' and its relation to the field of treatment.
2. Utilize the concept of the 'flow of enactive engagement' when formulating a conception of the process of a relational treatment, either as a way of describing what has happened or when thinking about how to engage with a patient.



Thursday, March 1st

PAPER SESSION I

#3: Relationality and Embodiment: The Multiple States of Being

Presenters: Andrea Celenza, PhD, USA and Jack Foehl, PhD, USA

Discussant: Karen Hopenwasser, MD, USA

Moderator: Frances Sommer Anderson, PhD

Abstract:

From Binarial Constraints to Gender Multiplicity: Stephen Mitchell's Contributions to Gender and Beyond, Andrea Celenza

Beginning with a charming personal vignette on fielding grounders, Steve Mitchell (1996) described how he derived and mistakenly attributed a valuable life lesson to his father rather than his mother, reflecting his (then) need to shape and protect his paternal identifications along the lines of stereotypic masculine traits. In so doing, he demonstrated the tendency “to creat[e] polarities and longings that contributed to... [the] sense of both gender and sexual orientation and its accompanying desires” (p. 47). In other papers and books (1993, 2000, 2002), Steve was prolific on topics such as multiplicity, ambiguity, and uncertainty. Had he had the chance, it is likely that he would have developed his ideas about gender and sexuality in the direction of overcoming polarities, with an eye toward greater tolerance of uncertainty and ambiguity contextualized within multiple (gendered) selves. This paper is a discussion of these issues, namely transcending (binarial) polarities, gender multiplicity, embodiment and the use of bodily metaphor in clinical process. The overarching purpose of this paper is to theorize and clinically demonstrate how transcending binarial (gendered) constraints, in an attempt to ‘recuperate’ dissociated preodipal selves (Kaplan, 1991; Bassin, 1996; Benjamin, 1998) or reconnect with earlier bisexual identifications (McDougall, 1992; Elise, 2002), results in greater gender mobility (Corbett, 2009), creativity (Aron, 1995) and overall well-being. The attendant issues, challenges and overall conceptualizations of felt-experience (embodiment) will be discussed through the contemporary lens of inclusion, multiplicity and contradictory gender theory (Benjamin, 1995; Goldner, 2002; Dimen, 2003; Harris, 2005). In addition, a useful binary that can be engaged in clinical work, the capacity for receptivity and penetration (in traditional Western language, the feminine and masculine, respectively) is proposed as an exploratory device across genders. Though this binary is not necessarily gendered and can be expressed without referencing oppositional, gendered categories, our patients often employ such terms as they struggle with various affective states and self-experience. Embodied experience easily lends itself to binarial gendered metaphor as these are typically imposed in Western cultures. In clinical practice, we initially join our patients in their binarial (gendered) assumptions with the purpose of transcending such traditional and culturally imposed constraints.

Learning Objectives: At the conclusion of this presentation, the participant will be able to:

- 1) Identify embodied, binarial (gendered) assumptions in a patient's unconscious experience;
- 2) Help patients overcome binarial constraints in ways that liberate patients from constraint and degradation in the construction of self-referents, of which gender is often a foundational organizer.



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#3: Relationality and Embodiment: The Multiple States of Being (continued)

Presenters: Andrea Celenza, PhD, USA and Jack Foehl, PhD, USA

Discussant: Karen Hopenwasser, MD, USA

Moderator: Frances Sommer Anderson, PhD

Abstract:

Relationality: States of Being and Embodied Engagement in Psychoanalysis, Jack Foehl

Toward the end of his life, Stephen Mitchell used the term “relationality” to signify the pervasive embeddedness of our lives in others, and of other’s lives in ours. It was an attempt to bend further beyond dichotomous thinking, beyond the juxtaposition of intra and interpsychic process. Mitchell contributed to the most striking changes in psychoanalysis and psychodynamic psychotherapy: a shift from a focus on knowing, attending to the content of the patient’s mind, to a focus on being, attending to the clinical process as the lived bodily experience of participation in the clinical encounter. But the specific nature of relationality requires further elaboration. First, how do we account for the relative stability and even intransigence of many kinds of participation? Second, how do we understand the stylistic continuity between more conscious and fluid instances of mutual interaction and unconscious instances of enactment? The traditional roots of a contemporary concept, states of being, elaborate the nature of relationality as embodied engagement. Wilhelm Reich (1933) first referred to a patient’s “ways of being,” shifting from the interpretation of patient’s associations to the person associating in particular ways. Reich’s student Helmuth Kaiser (1955) took this further, arguing that content interpretations should be dispensed with altogether in favor of interpretations of an individual’s attitudes, their characteristic ways of engaging that do not fit conscious/unconscious dichotomies. In turn, Kaiser’s student, David Shapiro (2000) further refined this idea to a subtle notion of dynamics of character, where an individual responds not simply to external threat or internal prohibition but to the stylistic emotional and thinking orientations initially organized for safety, but subsequently becoming a self-organizing system.

Using a clinical example, this presentation offers an elaboration of this lineage. A contemporary notion of states of being expands this traditional perspective to include the characteristic modes of self-other participation that develop quite quickly in the analytic situation, capturing particular styles of bodily and affectively engaged mutual involvements. These states become self-other organizing systems that precede verbal articulation and understanding. They characterize the reciprocal participation of analyst and patient, where the analyst’s use of his or her own subjective experience fosters the patient’s active involvement with the analyst such that the patient might locate unrecognized aspects of experience and indeed, create new kinds of experience in their interaction with the analyst.

Learning Objectives: At the conclusion of this presentation, the participant will:

- 1) Discuss Mitchell’s use of relationality in relation to the embeddedness of self with other, its relevance for clinical process and the creation of new experience for both patient and analyst.
- 2) Define states of being in relation to the early work of Reich, Kaiser and Shapiro.



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PAPER SESSION I

#4: Through “Harrowing Dread:”

The Analyst’s Trauma as Inspiration for Creative Investigation

Presenters: Doris Brothers, PhD, USA and Jane Lewis, LCSW, USA

Discussant: Ellen Shumsky, LCSW, USA

Moderator: Hilary Hoge, MD, USA

Abstract:

Stephen Mitchell (1993) helped us to see that “the analyst’s investment in her own therapeutic powers inevitably always functions to help the analyst heal herself.” He also suggested that sometimes hope can only be reached “through an immersion in prolonged and harrowing dread.” This 2-paper panel attempts to show that our efforts to heal from “the harrowing dread” of trauma may also inspire creative efforts to investigate poorly understood aspects of our relational worlds. One paper demonstrates how the author’s experience of Bell’s Palsy led to creative and hope-inspiring encounters with patients and surprising discoveries about the ways in which facial expressivity mitigates existential uncertainty. The other paper reveals how unmourned losses and deaths in the author’s life led her to investigate the intergenerational meanings of hair-pulling. It attempts to show that all research findings reflect the intersecting experiential worlds of the researcher and her research partners. Both of the papers use a relational systems sensibility.

About Face: How an Analyst's Traumatizing Bout of Bell's Palsy Sparked a Creative Process,
Doris Brothers

At the heart of this paper is the author’s experience of having half of her face paralyzed by Bell’s Palsy. She attempts to show how her illness led to creative and hope-inspiring encounters with patients and surprising discoveries about the ways in which facial expressivity mitigates existential uncertainty. She describes how an analyst’s inexpressive face holds the threat of retraumatization for some patients who cannot forecast her responses. She also examines the erasure of a sense of differentiated selfhood in the context of illness.

Bringing a Dialectical-Constructivist Sensibility into “Re”Search on the Relational World of Hair-Pulling, Jane Lewis

This paper represents an inquiry into the meanings and value of research when it is conducted with a dialectical-constructivist sensibility. Its focus on hair-pulling is illustrated through the use of vignettes of two people who pull out their hair as well as the author's own experience. While histories of unmourned losses and deaths were widely found in this study, all meanings were viewed solely as an outgrowth of the intersecting experiential worlds of the author and her seventy-five research partners. This paper also explores the complex ways in which a relational psychoanalytic perspective affects all that emerged.

At the conclusion of this presentation, the participant will be able to describe the ways in which efforts to heal from trauma can inspire creative efforts to investigate poorly understood aspects of our relational worlds; and to explain how a relational systems sensibility affects psychoanalytic research.



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PAPER SESSION I

#5: Neuroscience and Eating Disorders: A Clinical Integration

Presenters: Heather Ferguson, LCSW, USA and Judith Rustin, LCSW, USA

Discussant: Susan Klebanoff, PhD, USA

Moderator: Caryn Sherman-Meyer, LCSW, USA

Abstract:

Neuroscience and Eating Disorders: A Clinical Integration, Judith Rustin

Look But Don't Touch: Integrating the Neuroscientific Perspective in Clinical Practice, Heather Ferguson

These two papers taken together form a unified view integrating neuroscience and eating disorders in clinical practice. The first paper applies aspects of neuroscience to eating disorders and integrates it with mainstream psychoanalytic clinical theory. The second paper applies the ideas in the first with a detailed process report showing the early stages of treatment of a patient battling long standing symptoms of restricting anorexia nervosa. In both papers we argue that the integration of neuroscience into the clinical exchange helps the analyst address and ameliorate the eating disorder symptoms. In the process of addressing the symptoms, the analyst establishes herself as an attuned, understanding presence thereby contributing to the establishment of a deep dyadic relational bond. With this bond in place, as the symptoms of the eating disorder recede, the patient's experience of feeling helped sets the stage for a deeper and more mainstream, psychoanalytic process. In this second stage of treatment, the issues of dysregulated affect and conflict that initiated and underlay the symptoms can be more directly addressed. The case example demonstrates how this integrated approach facilitates therapeutic action.

Objectives

1. The participant will be able to integrate the neurobiological understanding of eating disorder symptoms within a relational psychoanalytic perspective.
2. The participant will be able to describe the Seeking/Reward System of the brain and how this reinforces and maintains destructive behaviors.
3. The participant will understand how restricting, purging, and over-exercising act as drug delivery systems by releasing the endogenous opioid systems of the brain.



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PAPER SESSION I

#6: Relational Themes & Religious Influences

Presenters: Harriet Lutzky, PhD, USA and Alistair Ross, PhD, UK
Discussant: John Sloane, MD, CANADA
Moderator/Interlocutor: Sally Rudoy, MSW, USA

Abstract:

The Early Bond with the Mother as a Prototype of Religion, Harriet Lutzky

In this paper I deal with three issues. First is the psychoanalytic construct of union with the mother in the early bond.. Second is whether such union, or aspects of it, are reflected in religious concepts. Third is whether the experience of union with the mother (in the form of connection with the universe) can be identified with religion itself, as Romain Rolland argued in his correspondence with Freud, or with a particular type of religion, as William James suggested. In considering these issues I draw on psychoanalysis, psychology, anthropology, biblical studies and philosophy.

Educational Objectives

At the conclusion of my presentation, the participant will be able to:

- 1) Consider religion as one possible cultural expression of the early bond with the mother;
- 2) Place the psychoanalytic study of religion in an interdisciplinary context.

Harry Guntrip (1901-1975) – An Early Relational Psychoanalyst?, Alistair Ross

Harry Guntrip is best known for his elaboration and application of Object Relations ideas, drawn from Fairbairn and Winnicott. He is one of the few analysts that have written about his experience in analysis with them both. Yet there is an unknown side to Guntrip as a highly creative thinker and practitioner. This paper draws on unpublished letters from Guntrip with two patients (a husband and wife) that reveal fascinating insights into how he worked relationally. This includes an integration of his first vocation as a Minister of religion. Stephen Mitchell was one of the first influential figures to see Guntrip's relational focus and connection is made between Guntrip's practice and the current relational context.

EDUCATIONAL OBJECTIVES

At the conclusion of my presentation, the participant will be able to:

1. Understand the links between current relational ideas and a significant analytic figure from a previous generation;
2. Recognise the importance of living out relational theory in practice as illustrated by Guntrip and his patients.



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PAPER SESSION I

#7: Relational Psychoanalysis: New Frontiers

Presenters: Robin Grace, MSW, USA and Evelyn Rappoport, PsyD, USA
Discussant: Dennis Debiak, PsyD, USA
Moderator: Cathy Fewer, MSW, USA

Abstract:

“Shrink Rap” on the Air, Mentalizing in the Last Frontier: A New York City Psychotherapist Meets the Frontier, Robin Grace

This paper highlights the author’s approach to expand the process of mentalizing in a rural Alaskan town. Limited resources and a steady flow in cases of trauma, loss, and abuse prompted the question, “What treatment approach would facilitate healing and the promotion of security?” The author illustrates how a unique culture and independent frontier-minded individuals influenced her use of a systems and psycho-educational approach. Psychoanalytic concepts, attachment research, and mentalization became the guiding principles for weekly broadcasts of Shrink Rap, a radio show including ‘relational scenarios’ acted and analyzed by the author and community participants.

Educational Objectives

At the conclusion of my presentation participants will be able to:

1. Recognize the possibilities for expanding psychoanalytic thinking beyond its usual boundaries;
2. Identify creative opportunities (including the use of media) for extending relational analysis to populations who are generally shuffled into the domains of short term cognitive behavioral approaches.

Somatic Experiencing and Psychoanalysis: Expanding the Relational Frontier, Evelyn Rappoport

I offer this presentation in the spirit of Steve Mitchell’s legacy to relational psychoanalysis as a developing, living and expanding process. Recent developments in neurobiology, attachment and trauma research have generated an increasing recognition of the centrality of body experience in the intersubjective relational field. Integrating conceptual and clinical applications of somatic experiencing I demonstrate the use of sensory focused interventions in my work with two long term, analytic patients with whom I highlight the process of accessing inchoate self states on a procedural and somatic level. Intentionally working with the activation of the body and the autonomic nervous system enables me to access the physiology and felt sense experience of distinct self parts which can then be addressed separately. In the process, my patients and I meet on a somato-sensory level and together we experience mutual affect regulation as well as increased self regulatory capacities. I invite my colleagues to consider the theoretical and clinical implications of the meeting between relational analysis and directed somatic work.

At the completion of this presentation participants will be able to

1. Demonstrate an understanding of somatic, physiologically based interventions;
2. Describe and utilize elements of the felt sense experience in relational psychoanalysis.



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PAPER SESSION I

#8: Hidden Adaptive Potentials of Seemingly Pathological States

Presenters: Lynne Layton, PhD, USA and Shoshana Ringel, PhD, USA
Discussant: Aaron Balick, PhD, UK
Moderator: Ilene Philipson, PhD, PhD, USA

Abstract:

A Bend Towards Truth: A Relational Rethinking of Perversion, Lynne Layton

In this paper, I build on Ruth Stein's theory of "perverse pacts" to argue for a relational understanding of perversion. My point of departure is Freud's work on disavowal and the fetish structure, and I argue that the disavowal in question in perversion is the inability to face the truth of relational failures, particularly the truth that one has not been loved or loved well. This inability accounts for what I call the perverse core at the heart of repetition compulsions, the refusal to know what one knows. The fetish structure that results from this disavowal entails a repeated oscillation between two fantasy structures: "I don't need you" and the fantasy of a perfect love. I illustrate with two cases that suggest some differences in how perversion and perverse pacts manifest in treatment.

Educational Objectives:

At the conclusion of my presentation, the participant will be able to:

1. Understand a relational view of perversion that rests on disavowal of relational truths too painful to bear.
2. Use the above understanding to think differently about repetition compulsions and the perverse pacts that sustain them.

On Unrequited Love: Mastery, Submission and Transcendence, Shoshana Ringel

In the following paper, Mitchell's question of whether passionate desire and affectionate love can co-exist is addressed through the lens of a romantic relationship based on mastery and submission. The work of Bach, Benjamin, Bromberg, and Ghent are utilized to illuminate attachment deficits that may lead to the wish for pain and submission. The author examines the dissociative process in which shameful and unwanted aspects of the self are projected onto the other, and explores the possibility of transcending dichotomized self states through mutual surrender.

Objectives

At the conclusion of this presentation, participants will be able to:

1. Understand how attachment history and familial dynamics shape the patient's desire for a relationship based on mastery and submission
2. How patient-analyst interactions can contribute to the integration of dissociated self states and may help the patient move from submission to mutuality and transcendence



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PAPER SESSION I

#9: Conceptualizing Supervision for a Relational Perspective

Presenters: Dana Castellano, PsyD, USA and Jon Sletvold, PsyD, NORWAY
Discussant: Elizabeth Goren, PhD, USA
Moderator: Judy Kaufman, LCSW, USA

Abstract:

Trauma Triangles and Parallel Processes: Geometry and the Supervisor/Trainee/Patient Triad,
Dana Castellano

Relational psychoanalytic literature is filled with discussion regarding how the concept of intersubjectivity has enhanced the space between and within patients and analysts. As the relationship between the dyad expands and contracts, prior traumatic experiences become ripe for reenactment. Several theorists have posited that there is a fluidity between the positions of persecuted, persecutor, and bystander/rescuer. Patients who have been abused may be more likely to project sedimented aspects of this trauma into the analyst. Unconscious motivations may include gaining a sense of empowerment, disavowing feelings of shame and inferiority, or mastering feelings of abandonment or misattunement experienced by a Third who either stood by or was unable to rescue the patient from being abused. Traditionally understood as "identification with the aggressor," a relational view of this pattern understands the implicit relational knowledge that becomes activated when placed in a situation reminiscent of prior experiences of abuse. The vicissitudes of each particular therapy dyad are complex in such cases, but what happens when the analyst is a trainee and the supervisor reenacts the abuse experienced by the patient onto the trainee? Can the analyst/trainee withstand such "identification with the oppressed?" When the enactment extends beyond the dyad and moves into the triad, how can the trainee/analyst move beyond her own feelings of persecution, using this shared experience to create agency for both herself and the patient? As a trainee, she is particularly vulnerable to devaluation, criticism, and being placed in the position of "Other" in terms of her lesser status in the training environment. In my case illustration, the setting was an art institute's counseling center, and the patient a sculptor. Bullying and sadism were projected into the analyst/trainee so that she could share the patient's shame and anger. Resultantly, this regression to a shared intersubjective space of juvenile bullying led the trainee to take risks in the treatment, enraging her supervisor for "breaking the frame." Feeling bullied by both patient and supervisor led the trainee to further enter the subjugated space of the patient, ultimately empowering both to "sculpt" a relationship that moved them out of such constricted roles.

At the conclusion of this presentation, the participant will be able to

1. Describe the ways in which early traumatic experiences may be reenacted within the treatment dyad. Specifically, participants will develop a greater understanding of the sequelae of early childhood sexual abuse on the relational matrix within the dyad.
2. Explain how as a trainee, a supervisee may be hierarchically placed in a subjugated role while training. Therefore, she may experience a greater susceptibility to enacting with the patient the dynamics of perpetrator/victim/rescuer-bystander that often is at the relational core of abuse survivors.



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PAPER SESSION I

#9: Conceptualizing Supervision for a Relational Perspective (continued)

Presenters: Dana Castellano, PsyD, USA and Jon Sletvold, PsyD, NORWAY
Discussant: Elizabeth Goren, PhD, USA
Moderator: Judy Kaufman, LCSW, USA

Abstract:

Supervision, Embodiment and Creativity: Staging the Analytic Interaction, Jon Sletvold

The paper describes and discusses a supervision model developed at the Norwegian Character Analytic Institute over the last decade. In this model the supervisee stages her interaction with the patient. This is done by asking the supervisee first to role-play both herself, second to role-play the patient, and then to move to a third position for reflecting upon the experiences in the two previous positions. The theoretical underpinnings of this approach to supervision, aimed at integrating experiences of self, other and interaction, will be briefly outlined. At the end of the presentation the model will be demonstrated. This will be done by offering one (or more if time allows) of the participants a short supervision on a case of her/his choice.

Educational objectives

At the conclusion of my presentation the participant will have an understanding and image of the supervision model presented. Additionally the participant will have some personal experience of and feeling for possible advantages of this approach to supervision.



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PAPER SESSION I

**#10: Artist/Analyst:
The Interaction of Creative Attitudes in the Work of Dual Professionals**

Presenters: Linda Cummings, MSW, USA; Karen Schwartz, PhD, USA and
David Shaddock, PhD, USA

Moderator/Interlocutor: George Hagman, MSW, USA

Abstract:

Almost from the beginning of psychoanalysis as a profession comparisons have been made between analysis and art. Recently there has been increasing interest in the relationship between artistic and psychotherapeutic practices. Most importantly both professions are viewed as highly creative and specific functions of spontaneity, improvisation and aesthetic experiences seem to be common to each. However, differences have also been recognized, especially regarding the differing goals of each profession: art leading to the creation of an art work, and analysis resulting in the increased welfare and happiness of the patient. This panel proposes to explore the relationship between art and analysis through discussion with practitioners who identify themselves as dual-profession artists and analysts. It is our hope that light can be shed on these questions through the exploration of the day-to-day struggle to succeed at both. To this end the proposed panel consists of artist/analysts who are currently working in both professions and each has been trained in and is currently practicing psychoanalysis or psychoanalytic psychotherapy. The following brief statements are written by each panelist, summarizing their viewpoint which they will elaborate more fully in the panel.

Educational Objectives:

Upon completion participants will be able to understand and make use of creative aspects of their own work as analysts; and to identify aesthetic and creative dimensions of the analytic relationship and make use of these areas for change.



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PAPER SESSION I

**#10: Artist/Analyst:
The Interaction of Creative Attitudes in the Work of Dual Professionals
(continued)**

Presenters: Linda Cummings, MSW, USA; Karen Schwartz, PhD, USA and David Shaddock, PhD, USA
Moderator/Interlocutor: George Hagman, MSW, USA

Abstract:

Looking and Listening: Intersections between the Practice of Photography and Psychoanalysis,
Linda Cummings

From the point of view of my experience as a professional photographer and psychoanalytically trained psychotherapist, I consider aspects of the photographic process to be analogous to psychic operations wherein unconscious material becomes available for conscious use, as in psychoanalysis. What is the photographer's aim; what is he/she looking for? What is the analyst's aim; what is he/she listening for? Is there a similarity between the moment the shutter of the camera clicks in taking a photograph and the moment "something clicks" in treatment? Might photography and psychoanalysis both create frames within which the pleasure and the reality principles safely converge? Both disciplines provide a transitional space for internal conflicts to be externalized, fostering the co-existence of reality, imagination, paradox and play. This paper posits reciprocal interactions and dynamics between photographer, camera and viewer share significant parallels in the co-creation of meaning within an intersubjective field occurring during the treatment process between analyst and patient.

Running Head: On Being An Artist and Analytic Therapist, Karen Schwartz

This paper describes the author's firsthand experience of being both artist and psychotherapist. It is written so as to convey the interplay of the two endeavors in elaborating values and attitudes common to each with respect to self-expression, shared subjectivity, empathy in the service of knowing and communicating, and self-encounter. The valuing of process as key to the elaboration of subjective experience through either form of self-expression and the fundamental intersubjective context in which both unfold are highlighted. The author cites the tension between disciplined versus unconstrained self-expression that she experiences and attempts resolution of through each pursuit.

Educational Objectives:

- 1) At the end of my presentation, the participant will be able to discuss how artistic process can mirror, if not enhance, an analytic therapist's empathic sensing capacity.
- 2) At the end of my presentation, the participant will be able to consider the preoccupation with process, as opposed to content, that is of central concern to the artist and therapist alike.



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PAPER SESSION I

#10: Artist/Analyst: The Interaction of Creative Attitudes in the Work of Dual Professionals (continued)

Presenters: Linda Cummings, MSW, USA; Karen Schwartz, PhD, USA and David Shaddock, PhD, USA

Moderator/Interlocutor: George Hagman, MSW, USA

Abstract:

To Build a New World: Creative and Aesthetic Choices in Psychoanalysis, David Shaddock

This paper examines the role of creativity in the analytic process by comparing the process of writing a poem to the process of decision making in a short clinical vignette. A comparison is made between the artist responds to the flow of his own imagination to the way the analyst responds to the flow of his patient's material in a session. A detailed description of the composition of a single poem is followed by a description of the therapist's response to the oedipally-tinged material presented in a single session by his 57 year old male patient. Special attention is given to the alternation between intention and surrender in both the creative and analytic process as well as to the aesthetic considerations that shape responses to the flow of energy within a poem or an analytic session.

At the end of my presentation the participant will be able to understand the creative nature of the therapist's choice between listening or shaping in response to patient's material; and understand the role aesthetic decisions play in responding to the energy or intensity of the patient's material.

Creative Analysis: Comparing Artistic and Psychoanalytic Processes, George Hagman

This paper discusses the dynamics of creativity in psychoanalytic treatment. It argues that the creative process of the analyst is characterized by specific forms of feeling, thinking and most importantly, relating that lead to the emergence of something new – therapeutic change. While the artist works with form, the scientist with concepts, the analyst works in the medium of the intersubjective field, the infinitely ambiguous constellation of human meanings that makes up the analytic relationship. The paper shows how the model of artistic creativity may be useful in understanding the analytic process. It argues that the creative analyst must be open to the experience of anxiety, as she seeks to be responsive to the patient's unique self-organization and mode of relating. Similar to the creative artist the analyst's self-experience is subject to innumerable disruptions as a result of failures in resonance and the subsequent doubts about the analytic self. This self-state must be resolved and becomes the primary motivation for the analyst's most creative work. In several sections the paper examines 3 phases of the creative process, first as it is manifest in art and then as we see it in the analytic process. Case examples are used by way of illustration and the paper closes with several recommendations to enhance the analytic creativity.

Educational Objective: Participants will learn an innovative model of creativity in analytic practice. They will also hear clinical vignettes illustrating the model, and acquire special skills that will enhance their own creative potential.



IARPP 10th Anniversary Conference

THE LEGACY OF STEPHEN MITCHELL
Sustaining Creativity in Our Psychoanalytic Work

Thursday, March 1st

PAPER SESSION I

**#11: Extending Mitchell's "Delicate Balance" to Transform the
Reparative Quest**

Presenters: Jenny Kaufmann, PhD, USA and Peter Kaufmann, PhD, USA
Discussant: Peter Maduro, PsyD, JD, USA
Moderator: Sarah Mendelsohn, LCSW, USA

Abstract:

*From Conjunctive Impasse to Analytic Process: Transforming Reparative Quests
On Transforming the Reparative Quest*

In *Relational Concepts in Psychoanalysis*, Stephen Mitchell outlined an integrative approach to narcissistic illusions in which he advocated that the therapist appreciate the developmental and defensive aspects of these ways of integrating interpersonal situations. He advised that the therapist practice "a delicate balance" in which he/she both "join the dance" of the patient's narcissistic integration while finding playful ways to call it into question and open up new ways of being and relating. In considering the spectrum of patients who experience "narcissistic" issues, Mitchell did not specifically focus on people who pursue narcissistic illusions in order to buttress their efforts at disavowing the traumatic past. These patients pursue what can be seen as a reparative quest. In pursuing this quest, they are trying to repair their experience of the traumatic past so that they eliminate or expunge any re-evocation of past pain and ensure against its recurrence. Typically, they engage in activities that are specifically intended to undo past trauma and reinforce the dissociation of painful affect associated with this trauma.

In this panel, we propose to extend Mitchell's integrative approach to apply to patients who are engaged in a reparative quest. We want to emphasize how much these patients are organized around the experience of formative trauma and how the therapist's practice of that "delicate balance" between developmental and defensive considerations focuses particularly on facilitating the integration of painful affect and threatening affect states associated with this trauma. In treating these patients, we advocate that the therapist affirm what is developmental in the patient's aspiration yet also address its self-protective functions and welcome the patient's previously disavowed painful or dangerous affect when it is evoked. Here, the therapist's creativity involves not simply joining with the patient in his creation, but imagining what he/she has disavowed and seeing the potential of how he/she can better achieve passionately felt aspiration when he/she has better integrated and mourned the traumatic past.



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PAPER SESSION I

**#11: Extending Mitchell's "Delicate Balance" to Transform the
Reparative Quest**

Presenters: Jenny Kaufmann, PhD, USA and Peter Kaufmann, PhD, USA
Discussant: Peter Maduro, PsyD, JD, USA
Moderator: Janet Kelly, MSW, USA

Abstract:

*From Conjunctive Impasse to Analytic Process: Transforming Reparative Quests
On Transforming the Reparative Quest*

The panel will involve two papers and a discussion. Each paper will present the integrative treatment of a patient who can be seen as pursuing the reparative quest as we define it above. The discussion will take up commonalities and differences in the cases and address the importance of witnessing in facilitating mourning. A paradox implicit in these presentations may be that what is truly new and creative involves recognizing and providing a "holding environment" for what has been so old, unfelt and unintegrated.

Educational Objectives:

At the conclusion of the panel presentation:

1. Members of the panel audience will be able to explain the concept of the reparative quest.
2. Members of the panel audience will be able to describe the differences in the reparative quests that these two patients pursued.
3. Members of the panel audience will be able to explain how clinicians can be "creative" in facilitating the therapeutic transformation of the reparative quest.
4. Members of the panel audience will be able to explain how the presenters' therapeutic approach to the reparative quest reflects an extension and application of Mitchell's "delicate balance".



Thursday, March 1st

PAPER SESSION I

#12: Moving Beyond the Familiar and Secure

Presenters: Nancy VanDerHeide, PhD, PsyD, USA and Karen Wiesbard, PsyD, USA
Discussant: Rebecca Curtis, PhD, USA
Moderator: Julia Davies, PhD, USA

Abstract:

The Analyst's Evolution

Among the many authors who have contributed significantly to creating a psychoanalysis that embraces present-day knowledge and needs, Stephen Mitchell stands out as a model of creativity. Today's psychoanalyst needs the flexibility to keep many diverse psychoanalytic balls in the air and the creativity to manage the ones we drop. This presentation considers the values and assumptions derived from the mushrooming psychoanalytic literature, the paradigmatic changes in thought that ushered them in, and analyst qualities that prove optimal in that context.

Objectives

1. At the end of this presentation, the listener will be able to identify the important theoretical trends in contemporary psychoanalysis.
2. At the end of this presentation, the listener will be able to explain the relevance of implicit forms of knowledge to the therapeutic process.

Leaving Insurance: Risk, Paradox, and Creativity

This paper relates how an ordinary business decision to no longer be a provider with an insurance panel was made rich and complex as it unfolded in the relational matrix that Stephen Mitchell (1988) first described. I elaborate how intersubjectivity became an important component of my clinical work as I introduced aspects of my subjectivity into the treatment, both purposefully and unconsciously. Surprising aspects of hope and dread related to dependency, recognition, and a desire for something new and larger than oneself emerged in the process within myself, my patients, and between us.

Educational Objectives

- 1) At the conclusion of my presentation, the participants will be able to describe what intersubjectivity is, and the processes that lead to its achievement, breakdown and restoration.
- 2) At the conclusion of my presentation, the participants will be able to explain how the analyst's self-interest is an inevitable part of any treatment, and needs to be recognized by both patient and analyst.