

Friday, October 18th
10:45 am – 12:15 pm

Paper Session A

A-1. PART TWO*: Clinical Workshops with Howard Bacal: Enhancing Therapeutic Possibility by Focusing on the Specificity and Uniqueness of Emergent Process in the Psychoanalytic Dyad

***THIS SESSION IS A TWO PART PROGRAM WITH THE FIRST SESSION ON THURSDAY AFTERNOON. ENROLLMENT FOR BOTH IS SUGGESTED BUT OPTIONAL.**

Presenters: Howard Bacal, MD and Rebecca Harrington, DSW

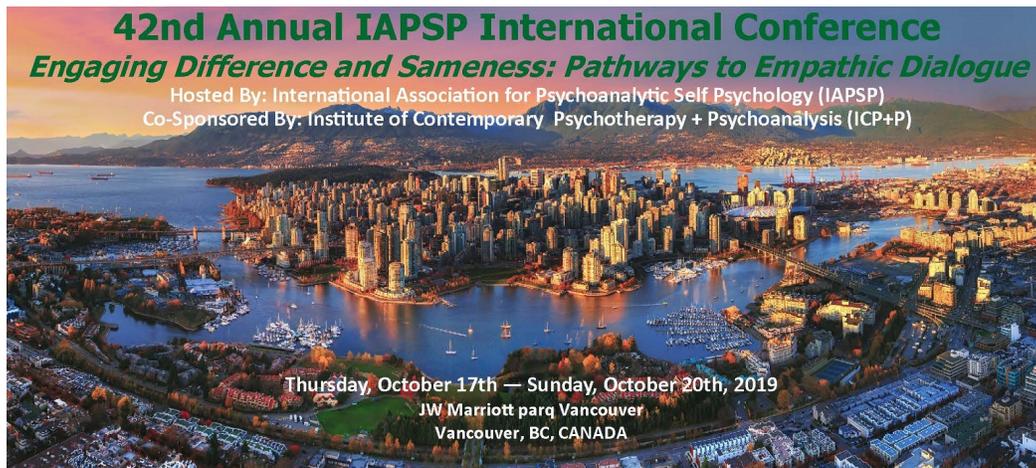
Abstract:

In this second session, registrants will have the opportunity to observe, and interact with, the members of a small working group who will explore how privileging the uniqueness of emergent process in the psychoanalytic dyad enhances therapeutic possibility.

Learning Objectives:

At the conclusion of these workshops, participants will be able to:

1. Describe the particularity of emergent process between themselves and their patients.
2. Respond more effectively to their patients by attending more closely to the specifically reciprocal nature of dyadic process.
3. Utilize their awareness of the capacities and limitations of that particular dyad when offering responses that may regard as optimal for that patient.



Friday, October 18th
10:45 am – 12:15 pm

Paper Session A

A-2. Looking for Love in All the Same Places: Accessibility, Shame, and Digital Collisions

Presenter: Samuel Guzzardi, MSW
Discussant: Marie Hellinger, MSW
Moderator: Katherine Weissbourd, PhD

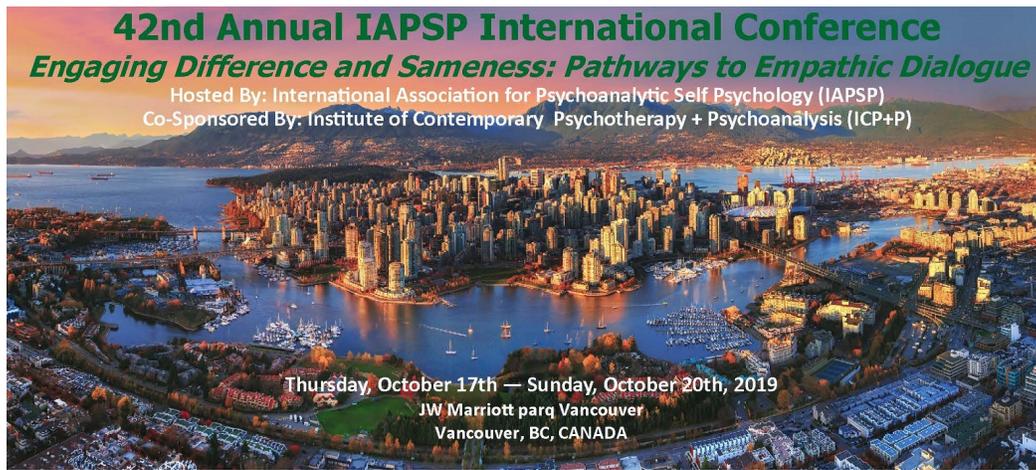
Abstract:

As the digital age presents a bevy of new possibilities for screen-based interaction, analysts are faced with new dilemmas related to sharing digital space with patients. This paper addresses one such dilemma: analytic work with a patient who encountered his analyst's profile on an online dating site. The author describes decentering from feelings of violation and shame and entering into an empathic mode of observation of the patient's experience which, over time, allowed a growth-facilitating twinship transference to emerge and drive the treatment forward. The process through which the author engages in this decentering is detailed, and the working through of the author's feelings of impropriety, anxiety, and shame at having been accessible and "found" are discussed. The paper underscores a need for increased scholarship on how analysts and patients can best work through moments when their digital lives collide.

Learning Objectives:

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

1. Assess the degree to which patients may be engaged in a twinship transference with their therapist, and elaborate on the potential utility of such a transference configuration.
2. Analyze the various dilemmas that are likely to occur when patients and therapists are both members of the same digital communities, and proactively consider how to handle potential therapist/patient digital collisions.
3. Utilize a model wherein sameness, connectedness, and overlap in the lives of patients and therapists are all seen as potential fertile ground for therapeutic growth and transformation.



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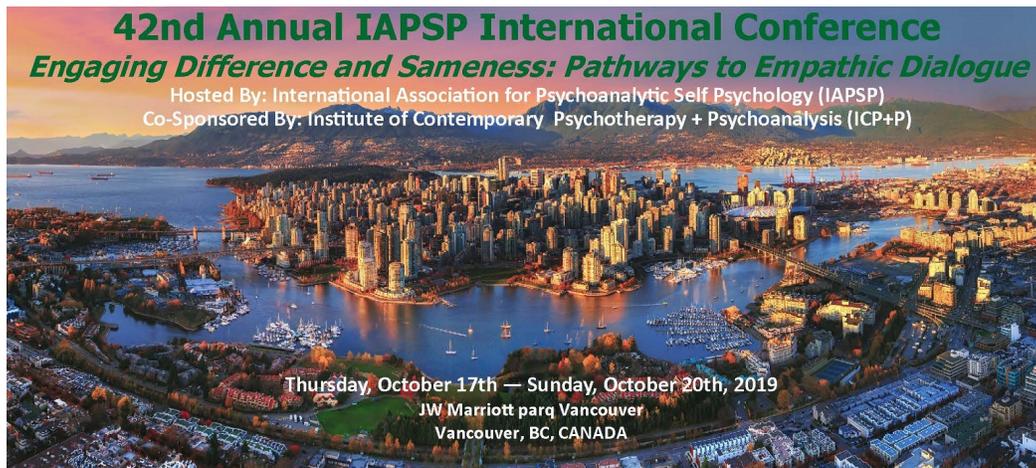
Paper Session A

**A-3. Simulated Selfhood, Authentic Dialogue:
An Intersubjective-Systems Look at Treating Addiction**

Presenter: Darren Haber, MA, MFT
Discussant: Harry Paul, PhD
Moderator: Arthur Gray, PhD

Abstract:

Addiction is notoriously difficult to treat. In this paper, I argue for the efficacy of a relationally analytic approach to treatment, as addictions often operate within malattuned contexts, and provide the fleeting albeit vitalizing or soothing self-restoration often missing from such contexts. Such experiences are almost always derived from unacknowledged relational trauma, within a context that demands Brandchaftian accommodation or aversion of affective authenticity. Addictions are derivative of and in some ways echo relationally traumatic contexts—allowing us, with perseverance, experimentation, and perhaps some luck, to provide a “second chance” for patients’ relational expansiveness. I present a case study that highlights such hard-won understanding via an intersubjective-systems perspective. Here, obstacles arose from both the addicted patient’s compulsive aversions to vulnerability, or any trace of “dependence” on a caregiver (actual or symbolic)—and, just as pertinently, from my own transferentially provoked self-protections. My own introspection revealed a fraught discomfort with the patient’s rigid yet chaotic aversions against vulnerability, and a subtle disapproval of his insistence that reliance on marijuana was completely his mother’s fault. Meanwhile, he and his mother struggled within an enmeshed or mutually enslaving system, which sought the compulsive riddance of vulnerable emotionality, with accompanying demands for validation and recognition from others—including the increasingly beleaguered analyst. Eventually the patient’s family context was seen to mirror the analyst’s childhood, where caregivers had also “hijacked” his authentic selfhood. The difficult but crucial stretching of the analyst’s own reflectivity, and associations to similarities between his archaic world and the patient’s, together with his own experience with addiction and sobriety, led to a dyadic loosening, a reinforcement of the analytic frame, and a deeper understanding of the patient. This freed the patient to self-initiate steps towards expansiveness, easing his compulsive reliance on antidotal self-protections.



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Paper Session A

**A-3. Simulated Selfhood, Authentic Dialogue:
An Intersubjective-Systems Look at Treating Addiction (*Cont.*)**

Presenter: Darren Haber, MA, MFT

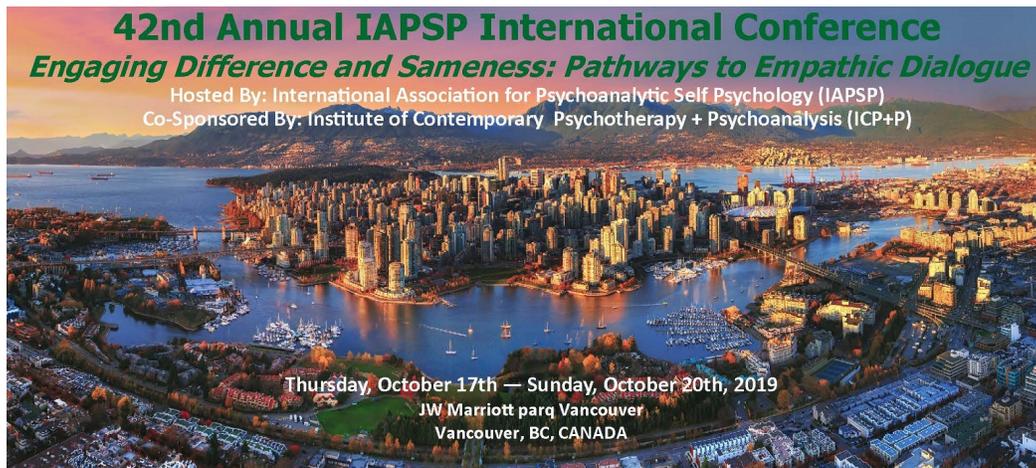
Discussant: Harry Paul, PhD

Moderator: Arthur Gray, PhD

Learning Objectives:

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

1. Describe ways in which addictive processes are derived from or parallel emotional processes within patients' archaic relational systems, leading to a "virtual" selfhood.
2. Discuss ways in which the analyst's understanding his or her own subjective transference, or organization of dyadic process, becomes essential to "loosening" or enhancing authentic dialogue, and clinical creativity.
3. Explain the benefits of a relational analytic theory to treating addictive patients—and what "defines" an analytic process, even when a variety of interventions (such as behavioral or "practical" suggestions) are incorporated into the treatment.



Friday, October 18th
10:45 am – 12:15 pm

Paper Session A

A-4. Deconstructing Racism:
Claudia Rankine's Citizen as a Window into the Experience of Otherness

Presenter: David Shaddock, PhD, MFT

Discussant: Gudrun Prinz, PhD

Moderator: Astrid Davidson, PsyD

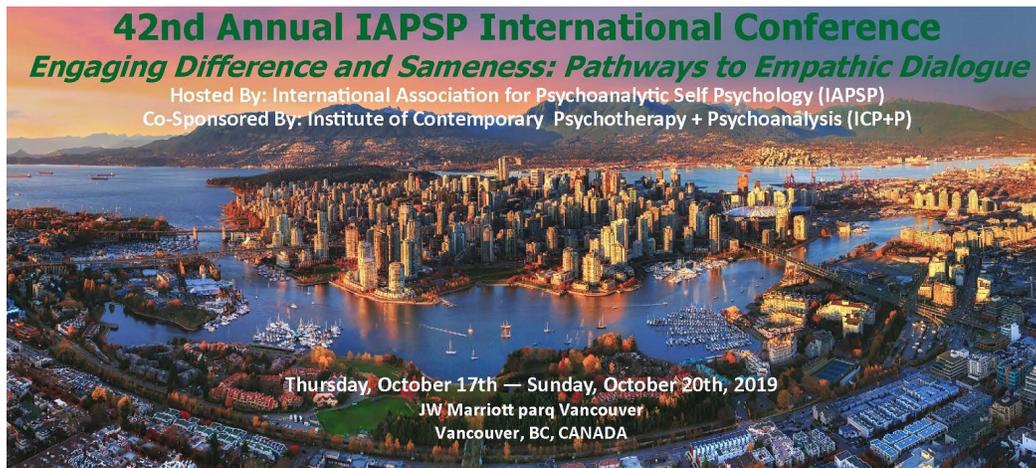
Abstract:

This paper uses a close examination of Claudia Rankine's book length poem Citizen to help clinicians understand and work with the experiences of patients of color who have experienced the aggression of racism. The poem documents many instances of seemingly benign interactions with strangers and colleagues that are actually microaggressions. For example a fellow faculty member saying on the elevator, "You're always going on sabbatical." The poem documents the author's response to these aggressions at the self level: she expands her sense of self to include all oppressed people. As part of this expanded sense of self, the poem presents a confusion of pronouns. Two other healthy responses to racism are documented: the poem's lyricism, and the poem's overwhelming indictment of the genteel and violent ways racism permeates our world. The paper concludes with a case vignette in which the therapist's experience as a Jew and the African American patient's espousal of the views of Louis Farrakhan lead to a crisis and eventually to a profound therapeutic alliance that has lasted many years.

Learning Objectives:

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

1. Identify the microaggressions that people of color endure in their lives.
2. Discuss the elaborations of self experience, including an expanded sense of self, that people of color often develop.
3. Utilize their own subjective experience as a model for working with patients of color.



Friday, October 18th
10:45 am – 12:15 pm

Paper Session A

**A-5. Cushman and Kohut:
Constructing Identities vs. Developing Selves in the Context of Modern American Life**

Presenter: John Riker, PhD
Discussant: Amy Eldridge, PhD, MSW
Moderator: Scott Davis, MD

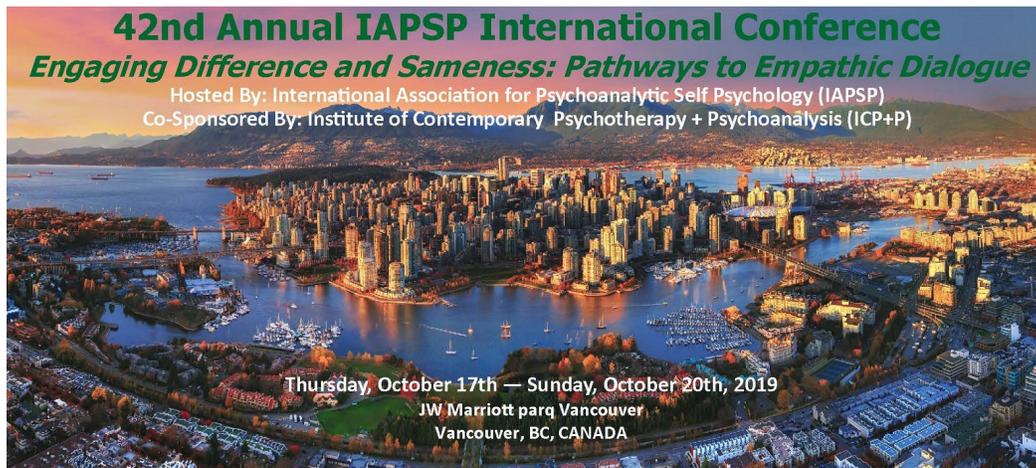
Abstract:

In this paper I address Phillip Cushman's critique of psychoanalytic psychotherapy as being both naïve about how sociopolitical forces generate persons in America and are complicit in reproducing the deficient form of self generated in America, the "masterful, bounded, empty self," a kind of self he finds particularly validated in the theories of Winnicott and Kohut. I show how these critiques are misguided and I provide a different narrative for why psychodynamic therapy arose, one that sees it not as a pawn of sociodiscursive forces, but as an important source of rebellion, one offering an alternative way of being human from the regnant forms dominating modern life. I further show how Kohut's self psychology can ground a robust ethical life and help us negotiate the difficult problem of Difference. In the end, I bring Cushman and Kohut together by seeing Cushman's work as exploring how identities are constructed, while Kohut is articulating a theory of how selves are developed. The crucial conceptual point is to differentiate ego identities from nuclear selves and understand their psychological interdependence. I end by asking how Cushman's theory of the social construction of ego identities might be useful in the clinical setting.

Learning Objectives:

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

1. Explain how the social construction of identities and the psychological development of a core self are different psychological processes that are interconnected.
2. Explain why social constructivism is inconsistent both with itself and with traditional psychoanalytic theory.
3. Explain how and why self psychology can both ground ethics and help negotiate the problem of Difference.



Friday, October 18th
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Paper Session A

A-6. The Complexity (or) Sameness and Difference in Needed Relationship

Presenter: Robert Benedetti, PhD

Discussant: Steven Stern, PsyD

Moderator: Leslie Smith, MSW

Abstract:

Questions such as, “What does the patient need from me? (S. Stern 2017) and “What’s going on around here?” (E. Levenson 1985) may be more or less emphasized depending on one’s approach to the psychoanalytic situation. These questions become even more nuanced when the lives of patient and analyst intersect. Through clinical material from two psychotherapeutic relationships, one during the height of the AIDS crisis in the United States during the early to middle 1990’s and the other ongoing, these crossings or meetings may be viewed through the lens of twinship phenomenon. Whether this sameness is life situation or sexual orientation, professional identification, while potentially vitalizing to the analytic couple, can also be fraught. The first clinical story is one of forced sameness in that during the treatment, both therapist and patient suffered traumatizing losses of partners and family members to AIDS. This devastating mutuality resulted in powerful transference/countertransference dynamics through the loss and survival of each participant. The ways in which both therapist and patient identified with one another and the complexity of the identification that ensued is developed.

The second clinical narrative concerns the challenges present in an analytic relationship currently in its sixth year in which both members of the analytic couple are close in age, mental health professionals, and gay white males who are also cradle/lapsed Catholics. Louis Sander and Steven Stern’s use of “fittedness,” among other clinical/theoretical constructs, will be applied throughout the discussions.

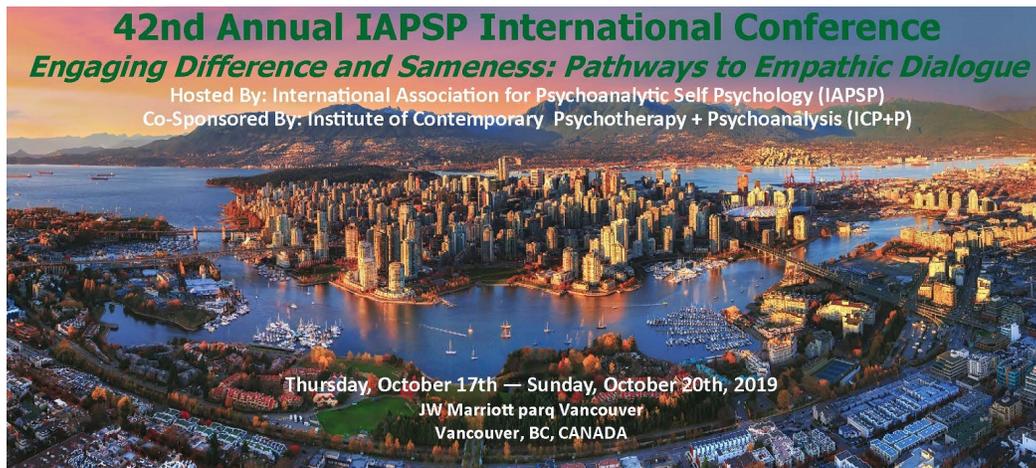
Learning Objectives:

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

1. Describe and discuss the transference/countertransference aspects within the functioning of an analytic couple when twinship dynamics are salient.
2. Explain how sameness can be both vitalizing as well as fraught for an analytic relationship.
3. Describe Steven Stern’s application of Louis Sander’s work on “fittedness” to parental or therapeutic relationships.

Friday, October 18th

Paper Session A



10:45 am – 12:15 pm

A-7. The Subjective Importance of Accommodation and Non-Accommodation: Expanding Brandschaft's Idea of Pathological Accommodation

Presenter: Michael Reison, PhD

Discussant: Shelley Doctors, PhD

Moderator: Joshua Burg, PsyD

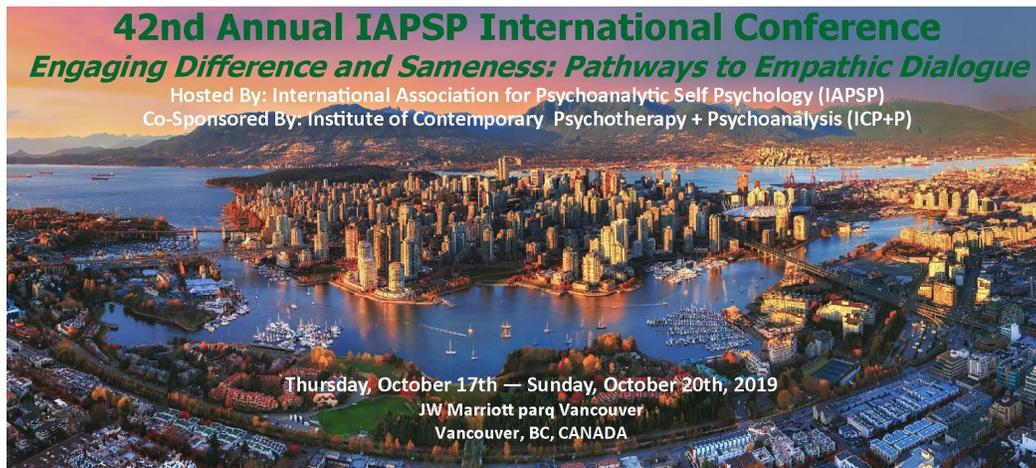
Abstract:

This paper is an expansion of Brandschaft's notion of pathological accommodation. In a pathological accommodation a child is exposed to immutable primary caretakers unable to perceive the child's subjectivity while at the same time demanding that the child meet the needs of the caretakers. As a result, the child abandons much of their desires and striving in order to maintain the needed ties to the caretakers. I am introducing both the idea of pathological non-accommodation and the subjective importance of both accommodation and non-accommodation in their non-pathological forms. In pathological non-accommodation the child attempts a precocious self-sufficiency overplaying their separateness and distinctness at the expense of taking in the emotionally organized help, information, and nurturance they need to thrive in the world. Healthy accommodation and non-accommodation entail having good enough caretakers promoting a child's developing emotionally organized judgments regarding their comforts and discomforts around the vast array of playful and worked-on interactions within the child's emotional surround. Examples of early healthy accommodations are turn taking, imitation, and other forms of learning such as altering frustration. Examples of early healthy non-accommodation are averting one's gaze, crying, displaying displeasure, learning to say "no," and more complex oppositional behavior as development proceeds. A case example will be given of a patient who combines both pathological non-accommodation and pathological accommodation along with the therapeutic work done to "free the spirit from his cell".

Learning Objectives:

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

1. Describe what a non-pathological accommodation is and how to deal with it in the clinical process.
2. Compare the differences between a pathological accommodation and a pathological non-accommodation.
3. Demonstrate how accommodation and non-accommodation are used in normal development and help their patients deal with the differing ways they use accommodation and non-accommodation in productive and non-productive ways.



Friday, October 18th
10:45 am – 12:15 pm

Paper Session A

A-8. Race, Melancholia, and the Fantasy of Whiteness

Presenter: Cherian Verghese, PhD
Discussant: Joshua White, MBBS, MPH, MPM
Moderator: Philip Graham, MBBS, Psych Med

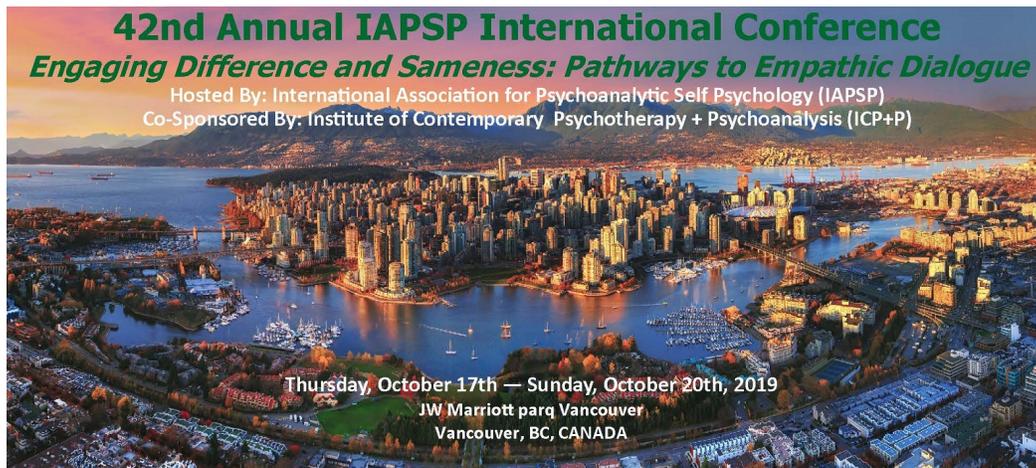
Abstract:

Critical pedagogy teaches us that our knowledge of who we are, and have been, as nations is profoundly influenced by the specific narratives surrounding our collective history. Such narratives enshrine a view of American history that valorizes a White male perspective, where women and people of color exist mostly as supporting casts or are entirely absent, erased. Inculcated in us during our formative years, these narratives are reaffirmed through various social, educational, religious, and mass media exposures. They impact our lives, patients' and therapists', and do so differentially, depending on our individual situatedness, racially, culturally, nationally, and historically. One of our cultural narratives involves Asian Americans who are held up as "model minorities" whose exceptional levels of academic and financial success, highly misattributed and collapsed across disparate subgroups, are often used to justify the continued denigration of African Americans who are then blamed for their own communities' lack of relative success in the US. Given their "honorary White" status, a silencing political strategy, Asian Americans struggle to attain the American dream, "Whiteness," which repeatedly slips through their hands--close but not good enough. Unfortunately, Whites are too often kept unaware of their own roles in this racialized cultural/political process because of the nature of power and privilege. In such a context, the challenge for contemporary psychoanalytic therapists is to recognize our own racialized situatedness, to create a necessary 'cultural third' space, when that has been made difficult, at times even dangerous. Privilege is often conditioned on our complacency, even collusion, unconsciously or otherwise, making it uncomfortable for us to recognize racialized dynamics, including in the therapeutic space. This paper examines some of these racial/cultural/social/political constructs and attempts to identify them within the context of a clinical vignette.

Learning Objectives:

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

1. Identify at least two specific concepts related to cultural/racial dynamics that would be beneficial for therapists/analysts to recognize in themselves.
2. Articulate how at least two of the cultural processes, such as "White privilege," "aversive racism," "racial melancholia," etc. can impede recognizing their own and/ or their patients' situatedness within society
3. Demonstrate the value of critical pedagogy as a model in the teaching and clinical work of psychoanalytic theory and therapy.



Friday, October 18th
10:45 am – 12:15 pm

Paper Session A

A-9. Orange is (Not) the New White: Defensive Grandiosity and the Rise of Trump

Presenter: David Schreiber, MPT, PsyD
Discussant: Ellyn Freedman, PsyD, LCSW
Moderator: Maria Slowiaczek, PhD

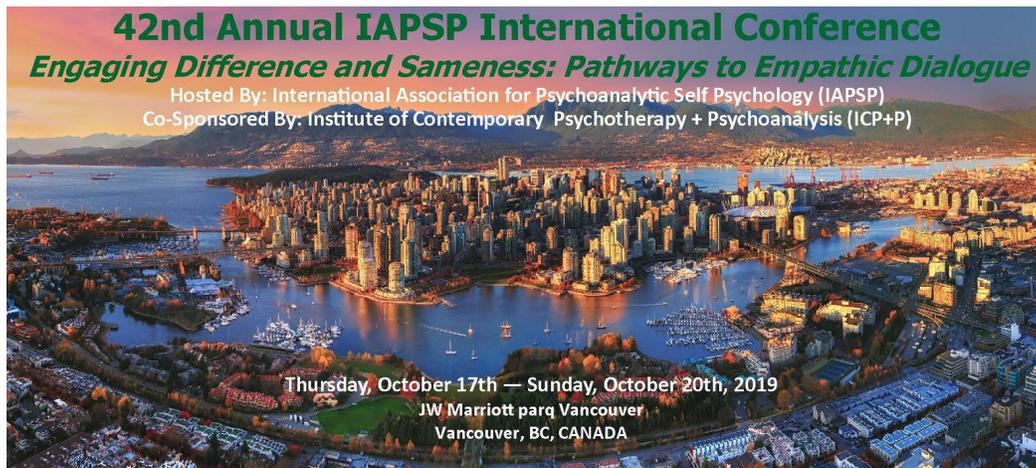
Abstract:

This paper is an unapologetically subjective account of the author's attempts to understand the psychology of the Trump supporter, as well as the interplay between Trump's defensive system and those of his supporters. In this age of relationality and intersubjectivity in psychoanalysis, we as clinicians must ask ourselves how we make our choices about who we treat in our practices, and whether we can treat patients in the absence of empathy.

Learning Objectives:

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

1. List possible societal causes for a rise in the use of grandiosity as a defense.
2. Describe the interplay between an individual's defensive grandiosity and larger groups' displays of similar defenses.
3. Analyze questions clinicians must ask themselves regarding choices in who to take on as patients.



Friday, October 18th
10:45 am – 12:15 pm

Paper Session A

A-10. Immeasurable World- Totalitarianism, Poetic Gesture and Self Psychology

Presenter: Orly Shoshani, MA
Discussant: Valeria Pulcini, MD, PhD
Moderator: Earl Bland, PsyD

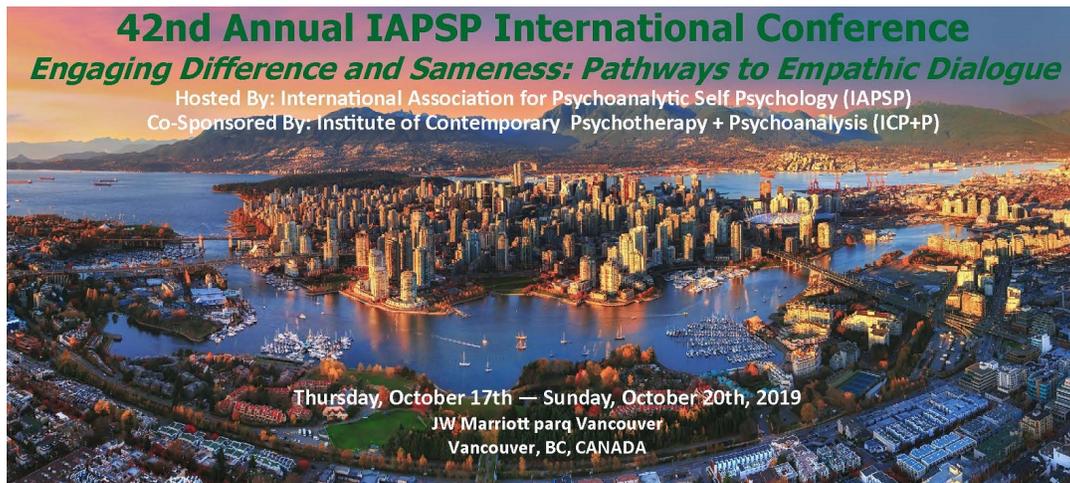
Abstract:

My aim in this lecture is to present the concept of immanentism in order to understand the process of totalitarianism, not only in the governmental sense, but also as a process of closing in on an individual or society namely, possess to oneself fix identities and representations, and to expose the danger it presents to otherness and pluralism because of its ethics, which I refer to as the ethics of the sameness. Contrary to immanentism and totalitarianism, I will also present the poetic gesture and singularity, and suggest that the clinical space is a poetic one, wherein singularity is revealed. I will demonstrate how these principles work in a case study from my clinical work with Hadar, who grew up in the unique community of the kibbutz.

Learning Objectives:

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

1. Explain the phenomenon of immanentism versus the poetic gesture and singularity.
2. Discuss empathy and near-experience-observation through an inter-disciplinary perspective, involving Eastern and Western philosophies.
3. Apply at least one of these concepts to their clinical work.



Saturday, October 19th
10:15 am – 11:45 am

Paper Session B

B-1. Are We All Refugees?

Presenters: Koichi Togashi, PhD, LP and Doris Brothers, PhD

Discussant: Alioscia Boschioli, PhD

Moderator: Michael Williamson, MMed

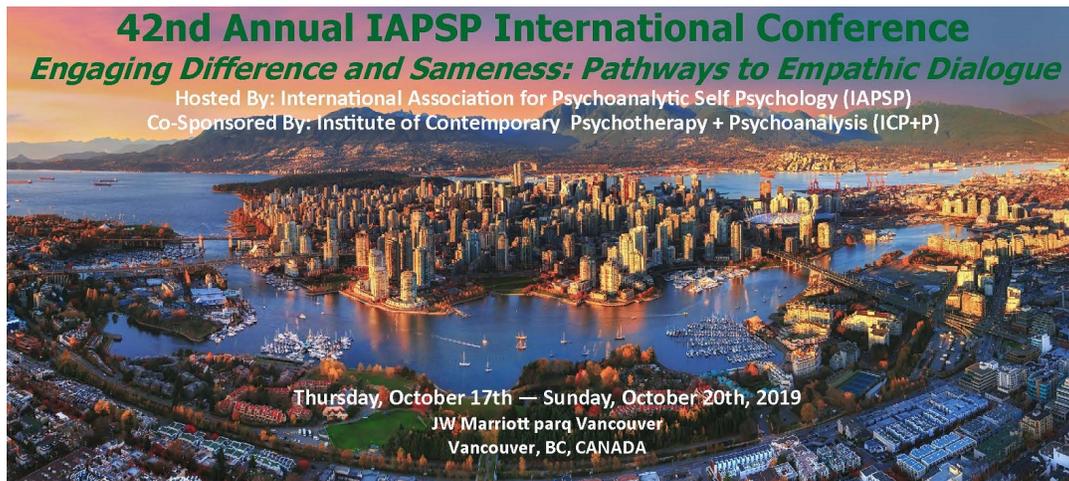
Abstract:

This paper examines the refugee experience as a loss of home. When home is viewed as much more than simply a place but is understood as a concept that signifies how human beings locate themselves among other human beings in the world, the loss of home is seen as almost always traumatic. The paper begins with the psychoanalytic literature on the refugee experience. Then with reference to a study of the refugees of the Fukushima earthquake, tsunami and nuclear reactor explosions, it discusses the societal traumas that drive people out of their homes. It is suggested that all humans share a sense of radical anxiety upon being disconnected from or unstably bonded to home. The paper concludes with an illustrative clinical vignette.

Learning Objectives:

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

1. Describe the societal traumas that drive people from their homes.
2. Explain how home may be understood as more than a place but as standing for the way human beings locate themselves among other humans in the world.
3. Explain how refugees of the Fukushima earthquake, tsunami and nuclear reactor explosions experienced themselves as refugees.



Saturday, October 19th
10:15 am – 11:45 am

Paper Session B

B-2. Interpretation as Carrier of Selfobject Functions: Catalyzing Inborn Potential

Presenter: Richard Geist, EdD

Discussant: Jill Gardner, PhD

Moderator: Franziska DeGeorge, PhD, PsyD

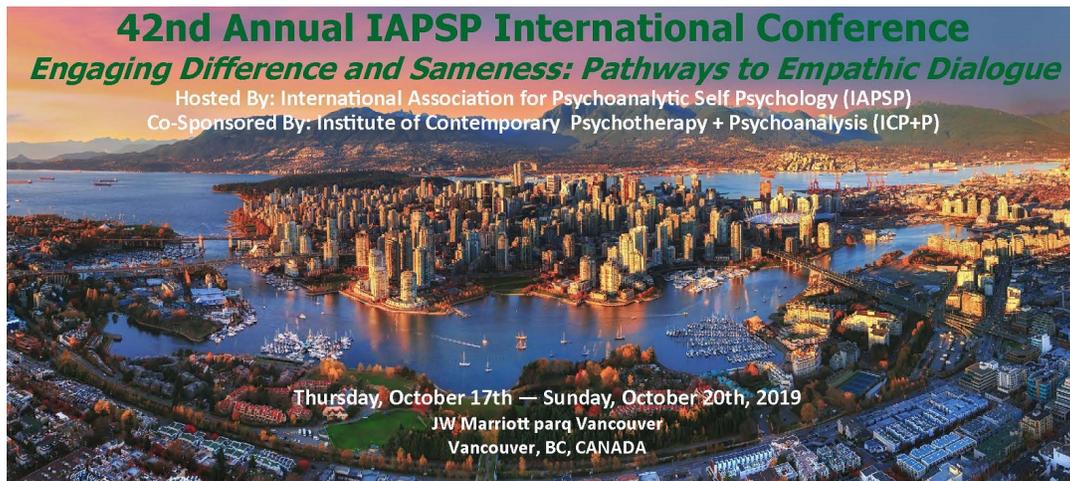
Abstract:

This paper highlights importance of verbally articulated interpretations as uniquely important because inherent in interpretations are selfobject functions. In other words, interpretations are the carriers of selfobject functions, the internalization of which are needed to concurrently strengthen one's sense of self and to modify defensive structures. When an interpretation or genetic reconstruction that carries selfobject functions is experienced as accurate, it can be almost instantly structure building for a patient as long as patient and therapist share a sense of connectedness and permeable boundaries. The paper discusses three verbatim interactions with three different patients that illustrates how interpretations catalyze inborn potentials to become sustained abiding psychological capacities. I then discuss a verbatim interaction with a fourth patient to suggest how we might work with a patient who is not as yet open to interpretative work.

Learning Objectives:

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

1. Describe what is meant by interpretation is the carrier of selfobject functions.
2. Explain a different method of internalization.
3. Utilize the information on interpretation to include selfobject functions in one's interpretative work with patients.



Saturday, October 19th
10:15 am – 11:45 am

Paper Session B

B-3. Narrative as a Mode of Knowing

Presenter: Daniel Goldin, MFT, PsyD
Discussant: Deborrah Dunne, PhD
Moderator: Lester Lenoff, MSW

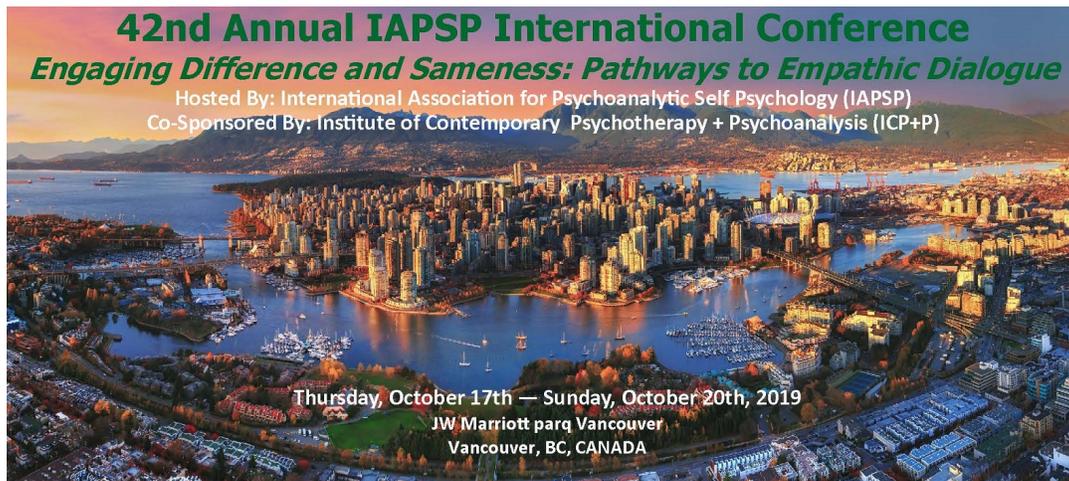
Abstract:

Thinkers over the millennium have detected two styles or modes of knowing, although they have used different words to categorize these modes. Medieval Christian scholastics distinguished between knowing by reason and knowing by faith or revelation. Kohut distinguished between knowing by empirical observation and knowing by empathic immersion. Similarly, the cognitive psychologist Jerome Bruner (1986) proposed two ways of knowing: a paradigmatic mode of knowing and a narrative mode of knowing. The paradigmatic mode we know well from the natural sciences. It involves creating predictive models or laws. The narrative mode concerns itself with the motivated reasons for exceptional occurrences and involves “an immersion in minds and human intentions and the use of the faculty of empathy” (Collingwood, 1946, p. 112). This paper jumps off of Bruner’s distinction between these two ways of knowing and argues that narrative is the preeminent mode in psychoanalysis. In the process, I make a distinction between narrative and empathy. The narrative mode requires empathy but it isn’t the same as empathy. Stories transcend our individual subjectivities by connecting different minds, different places and different times. We put ourselves in the grip of a story in order to know more than we can know when we are not in its grip.

Learning Objectives:

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

1. Distinguish between the faculty and empathy and the mode of narrative.
2. Identify the portal to a story in breaks in what we believe to be canonical in our lives.
3. Analyze the emotional states of patients by tacking back and forth between “inner” and “outer” experience and putting together an integrating story.



Saturday, October 19th
10:15 am – 11:45 am

Paper Session B

B-4. Gasping For Air: Working With a Suicidal Patient

Presenter: Laura D'Angelo, MDiv, LP
Discussant: Carol Levin, MD
Moderator: Catherine Mahoney, PhD

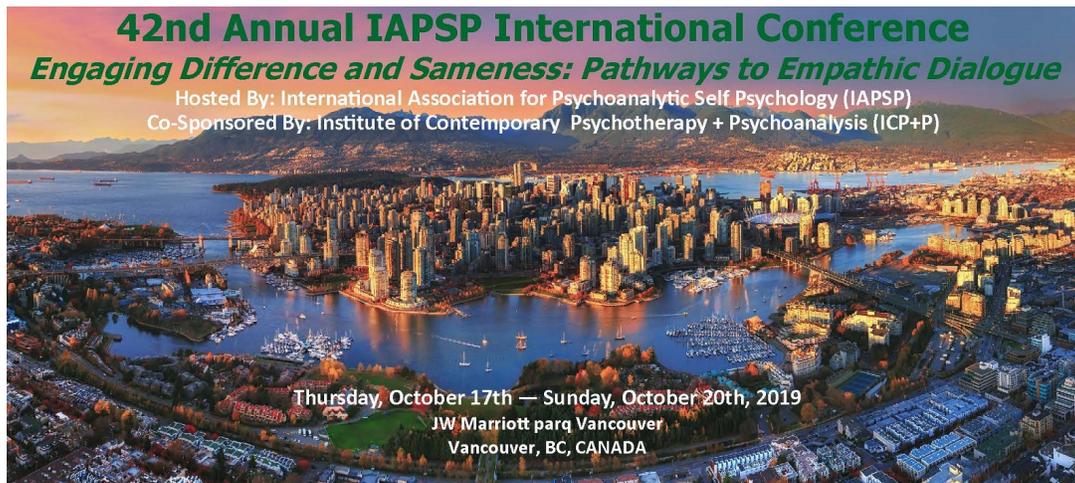
Abstract:

A spike in suicides is an unfolding crisis in our times. According to the Center for Disease Control, the national suicide rate has jumped 33 percent between 1999 and 2017. American suicides are now at their highest point in 50 years. Suicide is the second leading cause of death for Americans under the age of 35. Suicide is a contagion. A person who self-kills puts others at risk for ending their lives too. In this paper, I explore how the specter of suicide shaped the intersubjective field between myself and a death-driven analysand. Immense dread carried by each of us created an emotional storm that had us reliving the suffering of childhood. Finding ourselves in the other contained the seeds for liberation and for a new future.

Learning Objectives:

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

1. Discuss how the leading and trailing edges of patient and analyst are co-determined on an ongoing, figure and ground basis.
2. Explain the value of the analysis of the repetitive transference and the responsiveness of the selfobject experiences for both patient and analyst.
3. Explore the ways that the analyst's self-exploration of the trailing edge can help both the patient and analyst engage the leading edge.



Saturday, October 19th
10:15 am – 11:45 am

Paper Session B

**B-5. Trust and Suspicion or Sameness and Difference?:
Reframing Hermeneutics with the Invisible Other**

Presenter: Cheryl Goldstein, PhD
Discussant: Allison Merrick, PhD
Moderator: Karoline Windhager, BA

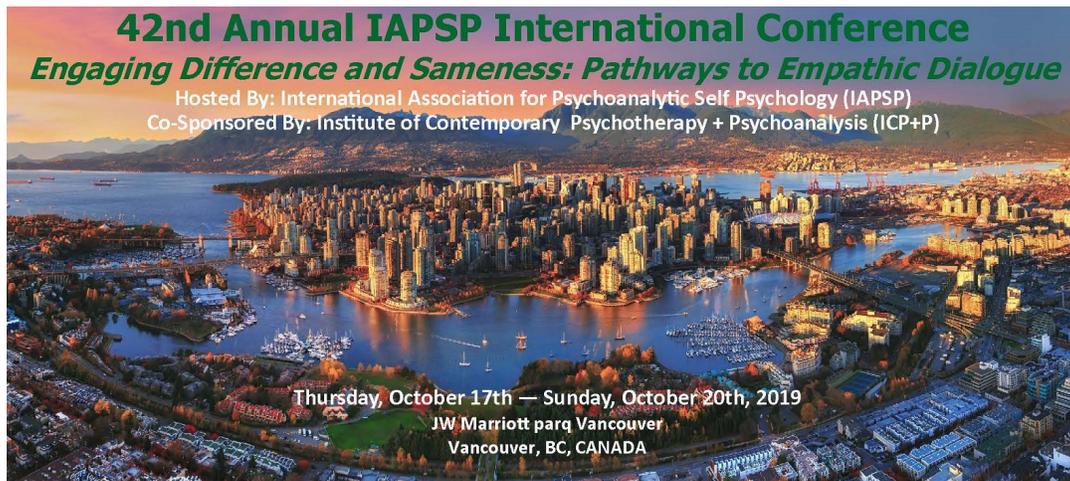
Abstract:

The ideas and beliefs that ground the interpretative process, hermeneutics, reflect both personal and cultural influences. This paper discusses the implicit bias reflected in the construction of a “hermeneutics of suspicion” and a “hermeneutics of trust.” Considering this binary from the position of the “invisible other,” in this case the Jewish analyst, this paper identifies the implicit “othering” that leads to this invisibility, takes up the possibility of reframing the hermeneutic binary as a “hermeneutics of sameness” and a “hermeneutics of difference,” and discusses some clinical cases of such a shift.

Learning Objectives:

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

1. Identify implicit attitudes that may inhere in a hermeneutic approach.
2. Analyze personal hermeneutic influences.
3. Discuss the significance of cultural perspectives in the process of interpretation and making meaning.



Saturday, October 19th
10:15 am – 11:45 am

Paper Session B

B-6. Beyond the Requirement to Care: Finding Analytic Freedom in Working with a Woman Heading into Terrible Life Circumstances

Presenter: Margaret Allan, PsyD

Discussant: Denise Davis, LCSW

Moderator: Liling Lin, LCSW-R

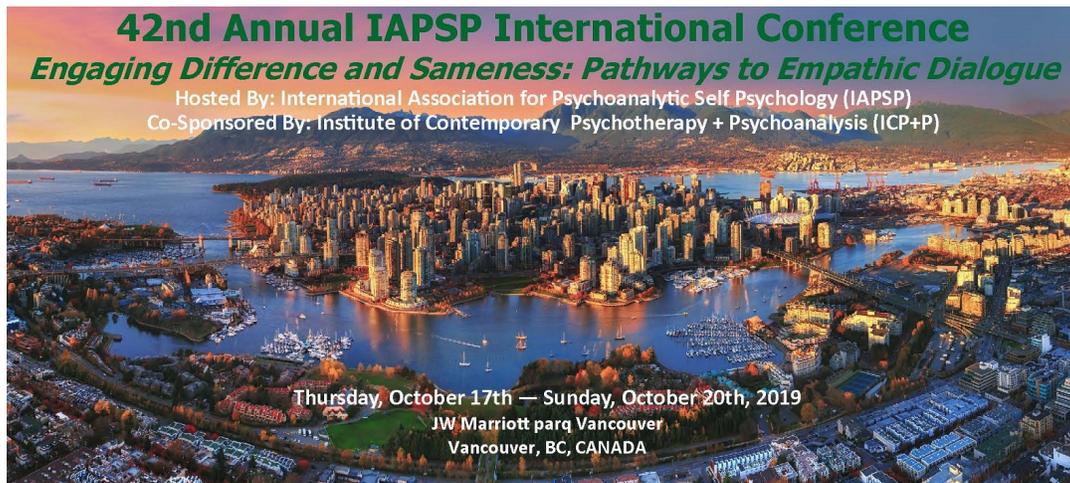
Abstract:

A familiar path for psychoanalysts is as caregivers in our own families of origin. While fluent in the language of care this also can establish certain requirements that deaden our capacities to stay alive within our analytic work and significantly, to be able to engage empathically. This paper explores these relational requirements in terms of an accommodative tilt that the analyst may unconsciously operate from. This attitude of accommodation with our patients is born of early developmental trauma but may appear as a kind of system default and atmosphere in much of our work. I use the case of a woman heading into terrible life circumstances to see the emergence of these trends on the part of the analyst. I explore the implications for the work as a deadening influence but also an unexpected release into freedom for both analyst and patient.

Learning Objectives:

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

1. Identify their own accommodative patterns within the analyst-patient system.
2. Discuss the significance of analytic freedom in the analyst's capacity to engage empathically
3. Describe the constrictions and limitations felt within the analytic system with the concept of analytic freedom in mind.



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Paper Session B

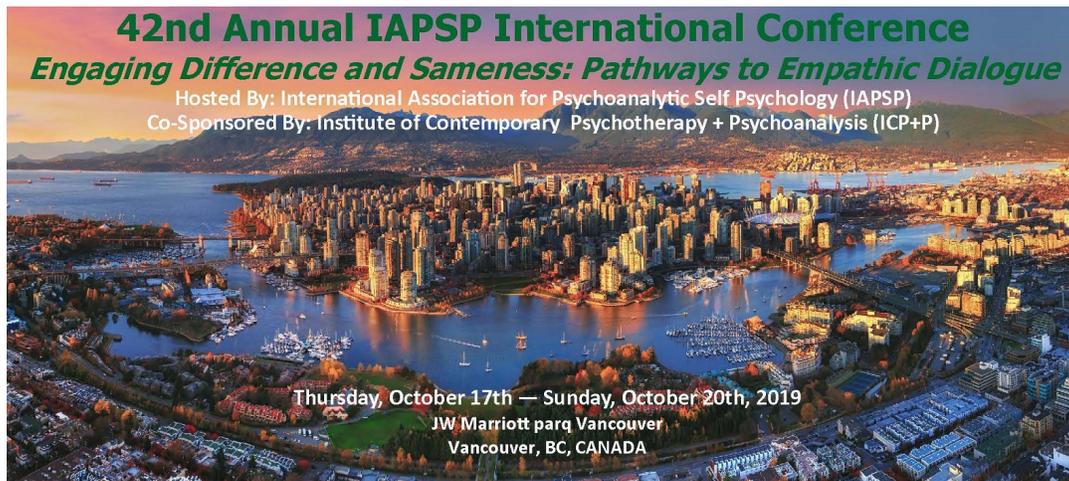
**B-7. Moving Together Along the Spectrum:
Toward an Empathic Dialogue with Autistic Children and Their Families**

Presenter: Daniel Posner, MD
Discussant: Christina Emanuel, MA
Moderator: Paula Kenney, MFT

Abstract:

The following article posits that movement-blindness in the ASD field has historically diminished the relevance of the relationship-seeking core-self (*homo provocans*) in autism by systematically overlooking the particular challenges autistic individuals face expressing—and perceiving-- bids for social interaction. Retrospective home-video micro-analysis shows that pre-autistic infants fail to activate caregivers in early dyadic exchanges, with cascading effects on dyadic function that impedes the developmental process. Contrary to the view of autistics as fundamentally lacking ‘social motivation’ (ref), the innate motive capacity to initiate expressive contact with caregivers-- *homo provocans*—appears intact but motorically “enfeebled.” Bids for interaction by autistic infants, though present from birth, are challenging to discern, and, without intervention, become rarer over the first 3 semesters. Parents are initially more active and directive with the affected child and—in their zeal for connection—do much of the work of sustaining interaction. Eventually, the jazz stops swinging (Trevarthen, 2007), resulting in a characteristic relational disruption that may exacerbate autistic compensations and parental withdrawal.

Drawing on the work of Daniel Stern and the BCPSG, with its emphasis on dynamic vitality forms, affect attunement and the primacy of movement in early development, I propose a unifying developmental-relational framework for clinicians interested in—or already--working with autistic people and their families, one that properly accounts for the differential embodiment of autistics and its impact on implicit (or on-line) social interaction throughout the life-cycle. I begin (section 1) by reviewing evidence that ASDs stem from not from deficits in mentalization or perspective-taking but from a more basic disruption at the level of primary intercorporeality; more specifically, to the expression and perception of intentions-in-movement (i.e. the exchange of dynamic vitality forms) in early development. In this view, deficits in the regulation and timing of movement subsystems dampen inter-personal kinesthetic and affective bodily resonance during early dyadic interactions, reducing the frequency of “moments of meeting” in the first year of life, with “knock on” effects on implicit relational knowing and later cognitive development. In relational terms, autistic infants and adults face challenges with the “intentional unfolding process” and with “moving through and being moved by” the other “in “sustained engagements over time in embodied resonance.” (BPCSG).



Saturday, October 19th
10:15 am – 11:45 am

Paper Session B

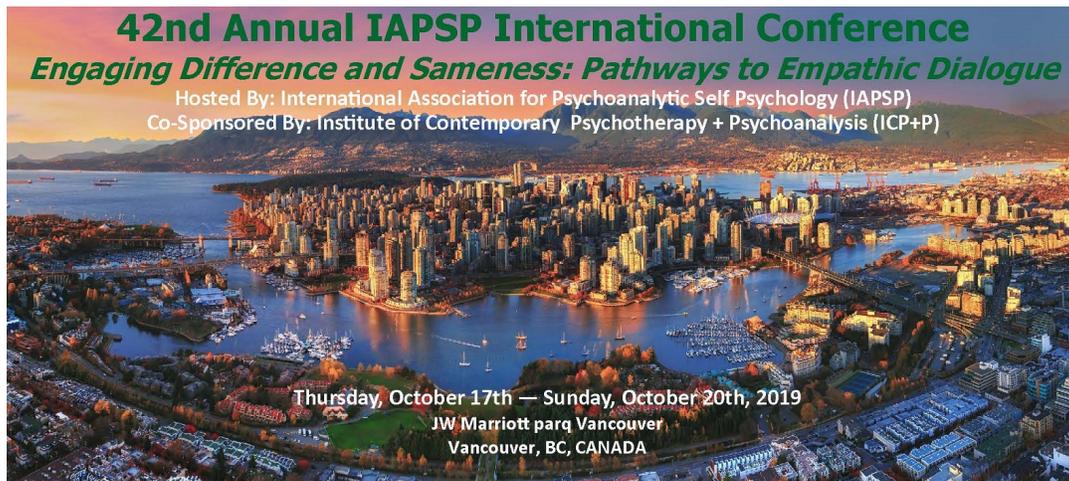
B-7. Moving Together along the Autism Spectrum
Toward an Empathic Dialogue with Autistic Children and Their Families (*Cont.*)

Presenter: Daniel Posner, MD
Discussant: Christina Emanuel, MA
Moderator: Paula Kenney, MFT

Learning Objectives:

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

1. Perturbations in parent-child interaction have therapeutic—rather than etiological--relevance to autistic development
2. Discuss how autistic deficits in implicit know-how are most effectively remediable at the “local level” of implicit interaction; that is, by rhythmic scaffolding of the patient’s naturalistic everyday interactions with objects and people.
3. Discuss how authentic mutual engagement--moving through others and beyond moved by another--requires co-regulation of joint activities (Fogel, 1993) and attentiveness to the micro-world of everyday interactions. It takes two to botch—and repair--a tango.



Saturday, October 19th
10:15 am – 11:45 am

Paper Session B

**B-8. Understanding the Complexities of Dialogue:
A Jewish Analyst Expands her Horizons in Palestine**

Presenter: Jane Lewis, LCSW
Discussant: Naomi Benzer, MA
Moderator: Paolo Stramba-Badiale, PhD

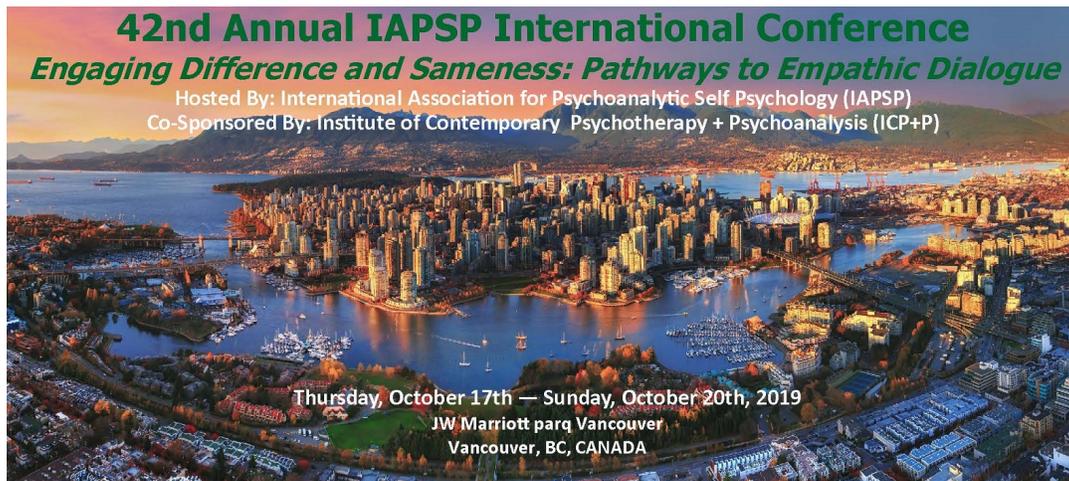
Abstract:

This presentation has aimed to convey through dialogue, much of what this author has learned, understood and witnessed over the past five years that she has been coming to Palestine. She contextualizes her dialogues by describing the horrific sociopolitical surround that the Palestinians endure as well as the unique forms of non-violent resistance they have developed. As she “time travels” in a non-linear fashion, she acknowledges the importance of taking responsibility for her complicity in perpetuating the global ignorance of extreme human rights violations suffered by the Palestinians since 1948 with no sign of cessation. She also describes the difficult process of accepting that while she feels at home in Palestine, she also feels that Israel is her existential home. Ultimately, she points out that the psychoanalytic profession tends to valorize dialogue which may be contraindicated in certain sociopolitical contexts because it promotes the “normalization” of oppression. Therefore, this author contends that within certain sociopolitical contexts, dialogue must wait until there is reparation and true political change.

Learning Objectives:

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

1. Describe the importance of contextualizing dialogues using the sociopolitical surround.
2. Describe the advantages of listening and learning from others.
3. Discuss why dialogue may not be constructive.



Saturday, October 19th
10:15 am – 11:45 am

Paper Session B

**B-9. Meet-the-Author: Breaking the Demon Lover Complex:
Decolonizing the Psyche after Violence and Sexual Assault**

Presenter: Ana Mozol, PhD
Moderator: Jane Jordan, PsyD

Abstract:

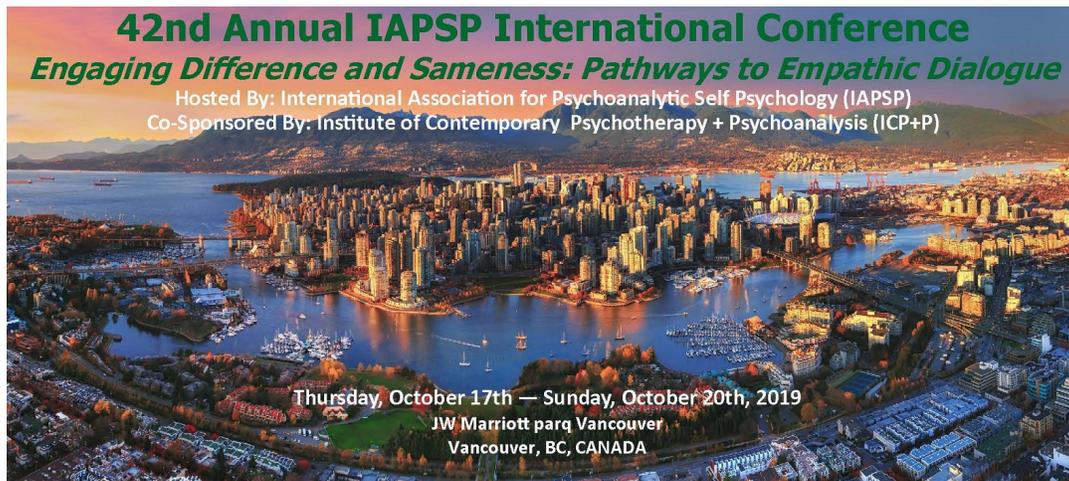
This paper defines the demon lover complex, and then describes the three ways it is constellated in the psyche of a woman. It exposes the powerful effects of the complex at personal, cultural, and archetypal levels of consciousness. Even if a woman has not personally been touched by sexual violence, living in a patriarchal culture will necessarily reflect “the rape of her feminine essence” in her inner world of dreams, fantasies, and romantic attachments. Once the demon lover archetype is activated, it requires enormous effort to reclaim one’s life. Transforming the demon lover and breaking the death-marriage bond may provide the psychic force necessary to sever the pattern of repetition compulsion commonly seen in victims of trauma, break the intergenerational transmission of trauma passed down through the ancestral line, and help uncover more authentic images of the feminine.

The paper outlines the nine stages of breaking the demon lover complex and connects the stages to the individuation journey of women through dreams. Research in the fields of depth psychology, violence, and trauma are referenced at most stages to support the inner psychic movement. The stages are as follows: possession; omnipotent control over the demon lover; breaking the bonds; re-experiencing the trauma; reclaiming the victim—the movement from fantasy to reality, honoring the demon lover; seeing through to the wounded masculine; transformation of the demon lover to the beloved; and initiation/the happy arrival.

Learning Objectives:

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

1. Define the demon lover complex and the ways that it constellates in the psyche.
2. Reflect on the psychological process of breaking the demon lover complex through the nine stages presented.
3. Gain clinical insight into the dynamics of projection and projective identification specific to the trauma of sexual assault.
4. Analyze the connection between Kohut’s concept of the “sexualized self-object experience” and the power of repetition compulsion in the traumatized psyche.



Saturday, October 19th
10:15 am – 11:45 am

Paper Session B

B-10. Social Thirdness: Intersubjective Conceptions of the Experience of Prejudice

Presenter: Joachim Sehrbrock, PhD
Discussant: William Coburn, PhD, PsyD
Moderator: Anna Stothart, PsyD, LMHC

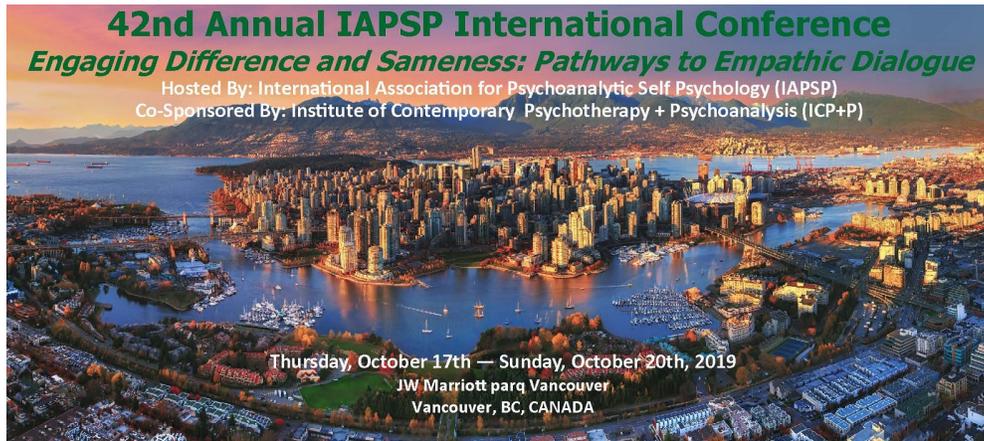
Abstract:

In this time of #MeToo and BlackLivesMatter, clinicians are increasingly challenged to engage with and help their patients navigate the intricacies of socio-political multi-dimensionality and within these the complexities of prejudice. In this paper, I suggest that the intersubjective experience of prejudice is a collapse of thirdness, a collapse of the dialectical recognition of sameness and difference, or self and other. Furthermore, leaning on principles of intersubjectivity and relational psychoanalysis, I also offer a refinement of the concept of thirdness in relation to prejudice by pointing to the need to bring into focus larger socio-political currents and layers of experience that are intricately woven into the fabric of thirdness, thus constituting a social thirdness. Particular emphasis will be placed on understanding the clinical pertinence, as well as collapse and repair of social thirdness in the context of gender and sexuality. I will use several carefully disguised clinical examples to illustrate these ideas and their relevance to psychotherapeutic work.

Learning Objectives:

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

1. Describe intersubjective conceptions of the experience of prejudice of gender and sexuality.
2. Discuss the concept of thirdness and its refinement, social thirdness, in the context of the experience of prejudice.
3. Apply the presented ideas to clinical material.



Sunday, October 20th
8:00 am – 9:30 am

Paper Session C

C-1. Trauma, Contingency and the Psychoanalytic Zero

Presenter: Koichi Togashi, PhD, LP
Discussant: Estelle Shane, PhD
Moderator: Carol Mayhew, PhD, PsyD

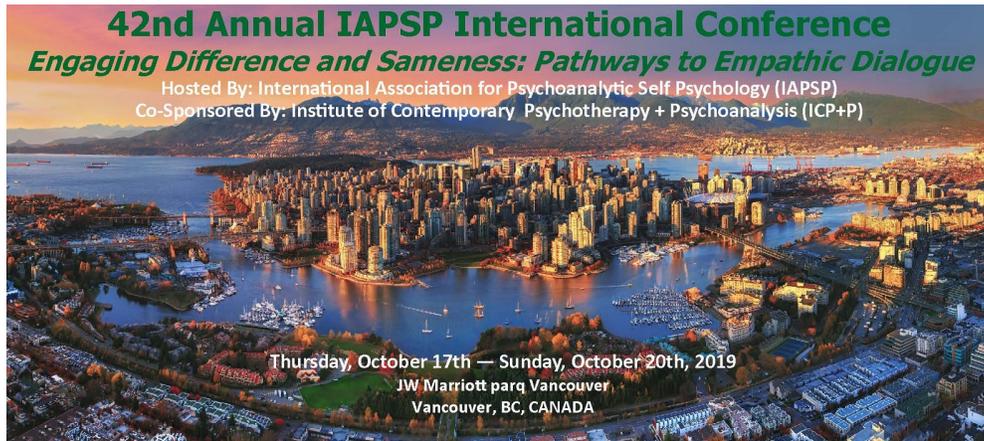
Abstract:

As part of an ongoing effort to contribute to the decolonization of psychoanalysis, this paper begins the examination of suffering and its relation to the experience of being human. The author uses principles drawn from Taoism, a philosophical tradition of Chinese origin, to differentiate between trauma and traumatization. From this vantage point, the former appears as no less than human life itself; the human world that emerges at the touch point between a person and the world that needs to be named. Trauma is neither an experience nor an actual event, but the beginning of the 'human' condition, the artificial "world that results in the neglect of the world qua world" (Møllgaard, 2007, p.17). Trauma creates human experience, but it does not necessarily lead to pathology or mental illness. Traumatization, on the other hand, is a psychological state in which a human mind or community is divided, and which creates mental illnesses in both individuals and communities. A traumatized person or community is preoccupied with division, identifying themselves as either 'us' or 'them,' "victim and victimizer;" and dividing the world into "those who experienced it and those who did not," and "those who were there and those who were not there." The argument is illustrated with interwoven narratives of transgenerational trauma that arose in the psychoanalytic treatment of a traumatized patient whose parents were atom bomb survivors in Hiroshima and Nagasaki. It describes the patient's and analyst's surrender to the nameless universe in which the division between victim and victimizer is a production of contingency.

Learning Objectives:

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

1. Discuss the relationship between trauma, contingency, responsibility and the philosophy of emptiness
2. Explain a dyadic process in which both participants surrender to emptiness
3. Apply this perspective to their therapeutic work with traumatized patients.



Sunday, October 20th
8:00 am – 9:30 am

Paper Session C

C-2. Gender as Perspective: The On-Going Psychoanalytic Privilege of the Penis

Presenter: Virginia Terhaar, PhD
Discussant: Janna Sandmeyer, PhD
Moderator: Karen Martin, MA, LCSW

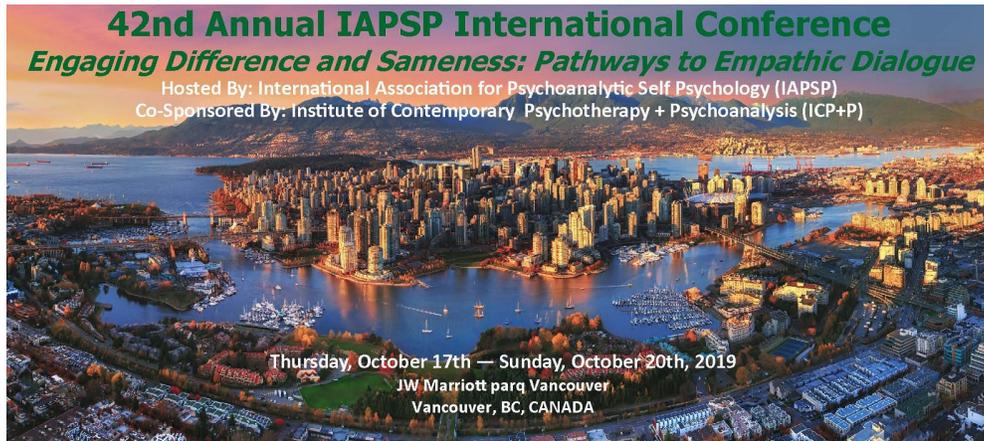
Abstract:

Eons of conscious and unconscious sexism has left psychoanalysis with severe gender bias throughout the development of its theories and practice. The perspective of the masculine gender, with its significant privilege, has gone unrecognized and unanalyzed by the dominant force of masculine theoreticians and practitioners, while feminist critics have been both villainized and marginalized. This paper looks at both context and perspective in theoretical formulation and briefly reviews some key contributions made by women in the field. As women have yet to achieve full theoretical subjectivity, a true intersubjectivity is impossible to achieve with this imbalance. Questions are posed as to why we have been unable to consider a deep analysis of this problem in our own field.

Learning Objectives:

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

1. Assess psychoanalytic theories as historical artefacts, as they relate to gender bias;
2. Describe the inevitability of gender perspective in psychoanalytic theory and practice;
3. Discuss possible reasons for the marginalization of feminist theories in psychoanalysis and how this contributes to maintaining a gendered subject/other construction.



Sunday, October 20th
8:00 am – 9:30 am

Paper Session C

C-3. Metaphors of Agony: The Culture Bond Syndromes of Hyper-independence

Presenter: C. Tyia Grange Isaacson, LCSW, PhD
Discussant: Rosemary Segalla, PhD
Moderator: Marcia Dobson, PhD

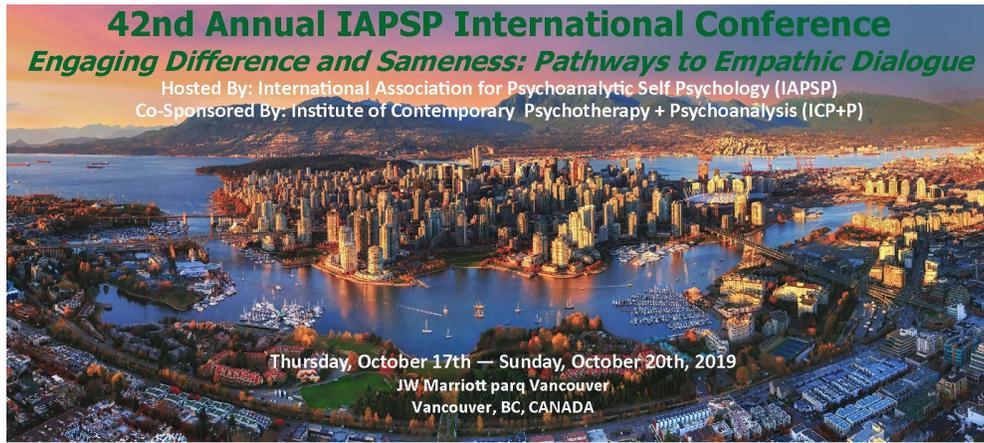
Abstract:

This paper explores the commonalities of culturebound syndromes prevalent in hyper-independent cultures starting with Freud's hysteria and ending with contemporary mass gun violence. Utilizing a complex systems lens, this examination frames distress as suffering that goes beyond pathologizing an individual towards a collective cultural expression of pain. This has been termed unsoothability or a co-created, a multi causal, intersubjective systems phenomenon. Implications for practice are touched upon.

Learning Objectives:

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

1. Define culture-bound syndromes
2. List two features of unsoothability and distinguish unsoothability from inconsolability.
3. Describe a remedy for hyper-independence and apply it to their practice.



Sunday, October 20th
8:00 am – 9:30 am

Paper Session C

C-4. Suffering Together: When Accessing the Analyst's Suffering Serves a Twinship Need

Presenter: Elizabeth Corpt, MSW

Discussant: Sandra Hershberg, MD

Moderator: Jean-Francois Bernard, MPs

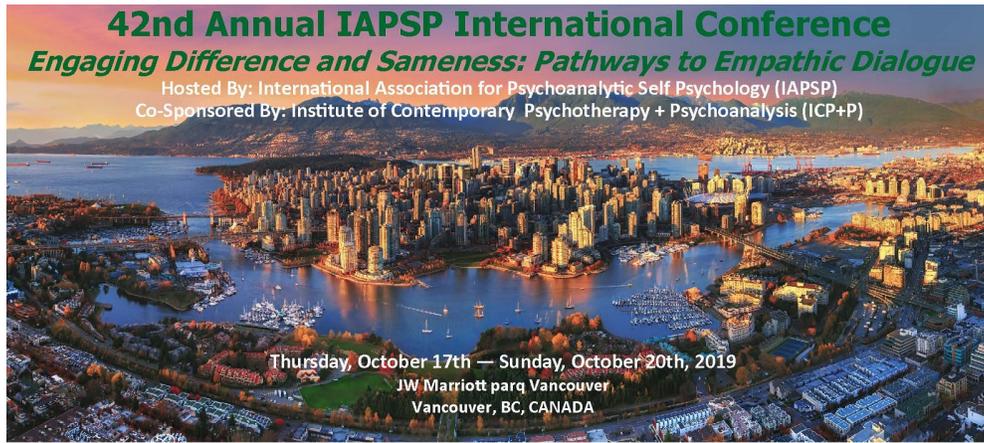
Abstract:

Although the analyst's own wounds and suffering tend to remain silent, in the background, and secondary to the needs of the patient— serving as nutritive emotional compost for empathic resonances - there may be times when a particular patient may need to more directly 'touch' the wound of the analyst - to encounter something real in the person of the analyst in order to access aspects of his own experience. I would suggest that making direct contact with the analyst's suffering can help such a patient transform his own suffering from that of an isolating experience to a felt, shared dilemma of simply being a human among humans, thus providing a needed twinship experience.

Learning Objectives:

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

1. Explain the importance of the analyst's suffering remaining silent.
2. Describe the developmental building blocks of shared suffering.
3. Identify situations in which the sharing of the analyst' suffering can meet twinship needs.



Sunday, October 20th
8:00 am – 9:30 am

Paper Session C

C-5. Revisiting Resistance: The Patient's Effort to Make Therapy Work

Presenter: David Kealy, RSW
Discussant: George Hagman, MSW
Moderator: Lawrence Ballon, MD

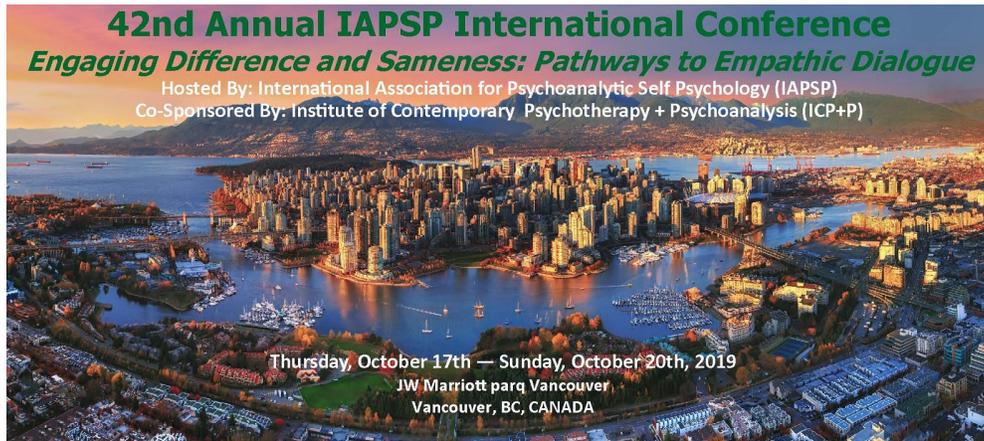
Abstract:

Divisions between schools of psychotherapy may be bridged by opening up conversations about common occurrences and processes in psychotherapy. One such issue is the frequently observed phenomenon referred to as resistance. This presentation will provide a brief overview of the concept of resistance, and review contributions of self psychology to the understanding of resistance in psychotherapy. The presentation will also integrate contributions from control-mastery theory regarding patients' use of apparent resistance to advance their therapies. Clinical case material will be used to illustrate ways in which resistance can be viewed as pro-active therapeutic work through complementary perspectives of self psychological and control mastery theories.

Learning Objectives:

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

1. Analyze resistance phenomena from vantage points that emphasize the patient's objective to achieve therapeutic goals.
2. Describe how the concept of testing can be integrated into self psychological perspectives on the therapeutic process.



Sunday, October 20th
8:00 am – 9:30 am

Paper Session C

C-6. Difference in Desire and Other Sexual Problems: A Self Psychological Approach to Helping Couples Improve their Sexual Connection

Presenter: Carla Leone, PhD
Discussant: Amy Joelson, LCSW
Moderator: Nancy Nigro, MSW

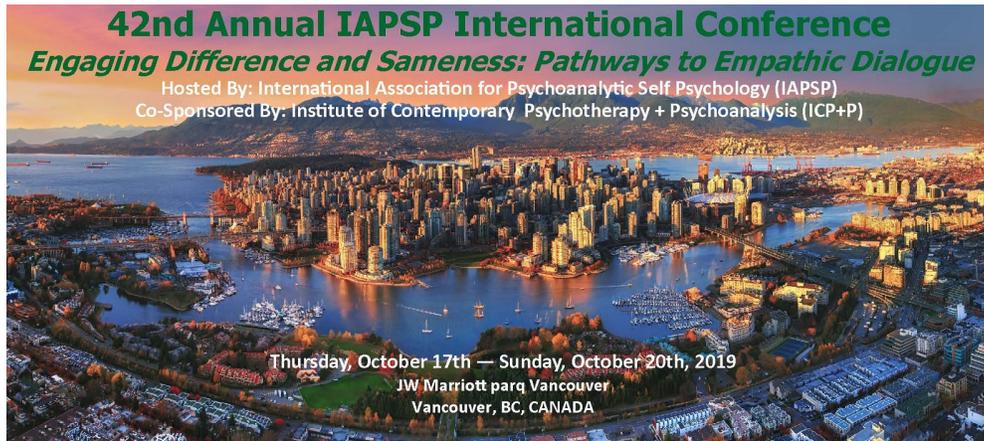
Abstract:

Despite the difficulties the topic of sex can pose for both patients and their therapists, sexual problems are so common in distressed couples that it is crucial that couples therapists feel comfortable and competent in addressing them. Contemporary self psychology and related psychoanalytic theories can help us better understand and respond to couples with sexual difficulties of various kinds, while also helping us better understand ourselves and own reactions to the topic. Toward that end, this paper will present a self psychological view of how sexual behaviors and attitudes develop, and discuss ways problematic ones can be impacted through both implicit and explicit channels in a self psychology-informed couples treatment.

Learning Objectives:

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

1. List three things that influence sexual difficulties in couples.
2. Discuss the impact on the couple relationships of sex being experienced differently by different partners.
3. Describe ways of altering dysfunctional relating around sexuality through the lens of self psychology.



**Sunday, October 20th
8:00 am – 9:30 am**

Paper Session C

C-7. Similarities, Dissimilarities, and Blind Spots in Therapeutic Relations

Presenter: Mor Shechory-Stahl, PhD
Discussant: Joseph Lichtenberg, MD
Moderator: Christina Connell, BA, Dipl TCPP, RP

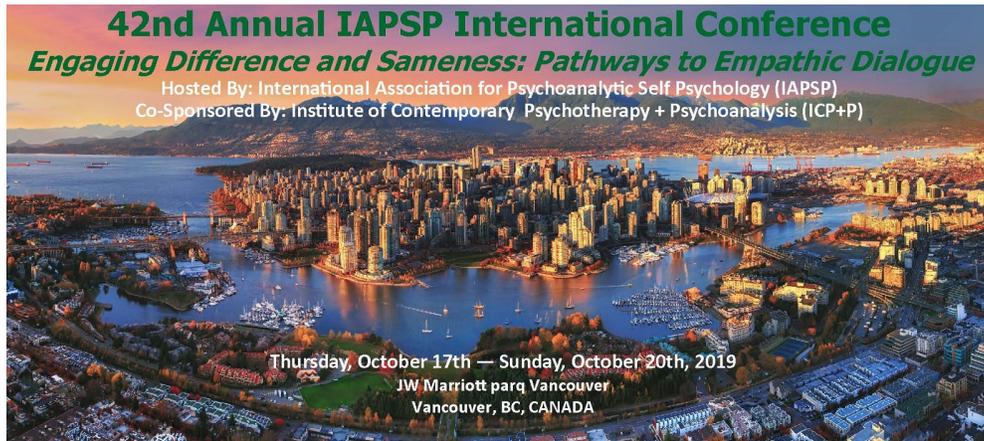
Abstract:

Dimensions of similarity and dissimilarity between therapist and patient are present, in different degrees, in every therapeutic dyad and influence the therapist's subjectivity, her therapeutic stance, and the way therapy proceeds. Similarity and dissimilarity occur in gender, religion, culture, profession, as well in biographical and intrapsychic details. Some elements of these are easily identifiable and known to both subjects in the therapeutic dyad. Other elements are known to only one of the parties and there are elements of difference and similarity between patient and therapist that may go unidentified and are unknown to both. These latter unknown and unconscious zones are the most susceptible to projections, splitting and dissociation. Like yin and yang, similarity and dissimilarity entertain relations of opposition and complementarity. The similarity between therapist and patient may lead to blindness to what is different, strange, separate. The dissimilarity between them may prevent the clinical dyad from seeing similarity. At both ends, there may be enmeshment and lack of separateness between the therapist's self and that of the patient. This presentation includes a case study of psychotherapy between an ArabIsraeli Muslim woman patient and Jewish- Israeli woman therapist inIsrael . The paper shows how cultural strangeness and distance in the political-social-religious context that became linked to similarity in the dissociation resulting from parallel traumas from terrorism led to mutual and shared dissociation and enactment.

Learning Objectives:

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

1. Discuss the influence of the intersubjective similarity and dissimilarity between therapist and patient
2. Identify how what is unconscious and blind may block vital therapeutic processes
3. Discuss the challenge related to a background of hate, trauma and violence between the clinical partners.



Sunday, October 20th
8:00 am – 9:30 am

Paper Session C

C-8. Meet-the-Author: Revisiting Charles B. Strozier’s HEINZ KOHUT, The Making of a Psychoanalyst, upon the occasion of its Hebrew translation’s publication

Presenters: Charles Strozier, PhD and Eldad Iddan, MA

Moderator: Roger Segalla, PhD

Abstract:

This “Meet the Author” session will include Charles B. Strozier, author of his highly praised biography of Heinz Kohut, and Eldad Iddan, the scientific editor of the translation.

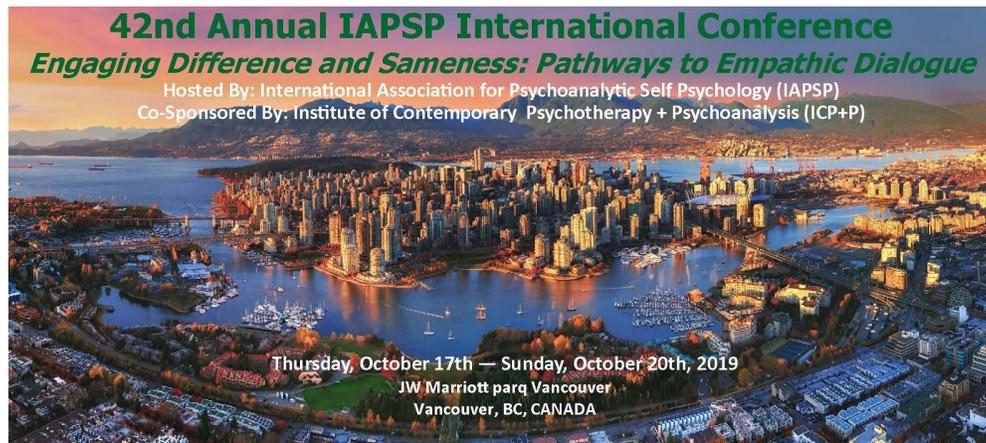
Strozier will begin the session with some introductory comments about Kohut’s life and work and why one wants to understand his life in order to grasp the dynamics of his theory of self psychology.

Iddan will then address the fascinating issue of why Kohut’s life and theory are of such interest to Israelis. Kohut of course struggled with his own sense of identity as a cultured Jewish man-of-the-world and his ambivalence about his Jewish roots. Hebrew is, after all, the ancient language of Kohut's ancestors. Freud was thrilled to learn that his writings have been translated into Hebrew and expressed regret for never having mastered the language himself. How would Kohut react? What is the significance of having Kohut’s biography published in Hebrew? Kohut's profound ambivalence about his Jewishness is one of the themes in the book. His life as a Jewish intellectual in America and his creation of a theory that opens up new avenues for identity and creativity in self-expression are a fascinating paradox and may explain why his life is so interesting and important to understand, along with his theory. As Strozier put it in the book, Kohut sought to change psychoanalytic theory in order to find a place for himself in it.

Learning Objectives:

At the conclusion of this presentation, participants will:

1. Discuss the roots of Kohut's life, his profound understanding of historical process, and the relevance of his thought to our current reality both outside and within the participants’ consulting rooms.
2. Describe Kohut's life as a Jewish intellectual in America and how his creation of a theory opens new avenues for identity and creativity in self-expression.
3. Describe how these factors may explain why his life is so interesting and important to understand, along with his theory.



Sunday, October 20th
8:00 am – 9:30 am

Paper Session C

C-9. In the Shadow of Apartheid: Intergenerational Transmission of Black Parental Trauma as it Emerges in the Analytical Space of Inter-racial Subjectives

Presenter: Zelda Knight, PhD
Discussant: Barry Segal, MBBCh, FRCP(C)
Moderator: Christa Paulinz, MA, MEd

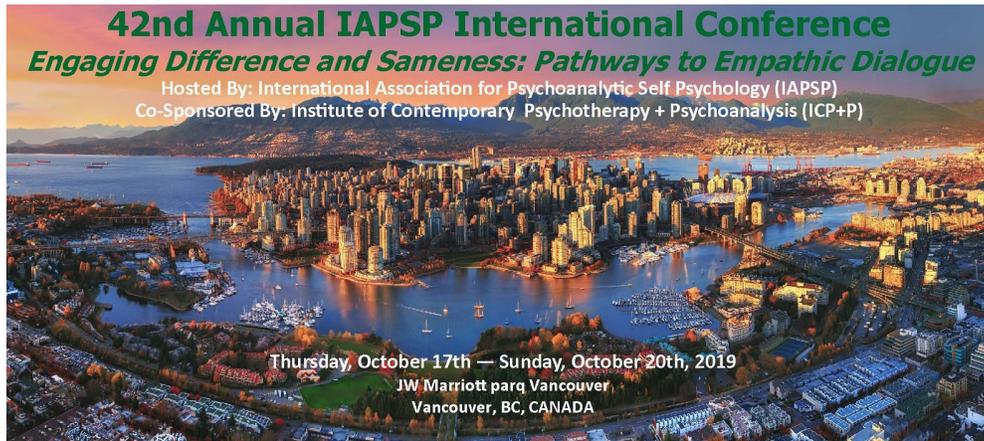
Abstract:

Using the construct of projective identification and integrating it with the body of literature on intergenerational transmission of unsymbolized parental trauma, I describe the case of an adult black South African woman called Sibulelo. It is suggested that Sibulelo has unconsciously identified with her disavowed parents' and grandparents' trauma that they suffered as a result of the system of Apartheid. Such trauma is expressed through her feelings of being dis-located in time and space, as if she is 'living outside' of herself, unplugged from life, and living someone else's life. The paper details the unfolding therapeutic process in relation to the therapist's whiteness in the context of her blackness. This brings into sharp focus an exploration of black-white racialized transference countertransference matrix in the context of intergenerational trauma. It is a reflective paper and opens up my own countertransference, thus foregrounding the notion of therapeutic intersubjectivity. A further contribution to psychoanalytic theory concerns the role of recognition and being seen as a powerful process in facilitating the symbolization of trauma. In addition, the author argues that if there is no interruption of the cycles of intergenerational trauma, and there is no symbolization, it becomes an unconscious 'familial compulsion to repeat'. Moreover, this therapy case highlights the idea that as a traumatized family living within a bruised culture of intergenerational transmission of trauma, such repetition of trauma becomes a 'cultural compulsion to repeat' what has not been spoken or named.

Learning Objectives:

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

1. Describe and understand a clinical case study of intergenerational transmission of parental trauma through projective identification.
2. In the context of intergenerational transmission of trauma, describe the clinical nuances of working with race when the dyad represents a linked history of 'oppressor-oppressed'.



Sunday, October 20th
8:00 am – 9:30 am

Paper Session C

C-10. Candidate and Student Consultation with Shelley Doctors, PhD

Case Presenter: Sally McGregor, MC, LPCC

Moderator: Joshua Burg, PsyD

Abstract:

In line with the conference theme, “Engaging Difference and Sameness: Pathways to Empathic Dialogue,” this live consultation event will demonstrate the ways in which the themes of sameness, difference, and empathic dialogue are embodied within a self psychologically oriented consultation/supervision relationship. The presentation will use case material from a doctoral student’s clinical work to explore how notions of sameness and difference can both foster and hinder a therapeutic process. The consultation will discuss ways in which aspects of sameness and difference can be engaged empathically within treatment, as well as within the consultation relationship. By the end of this presentation, audience members will

Learning Objectives:

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

1. Describe the ways in which themes of sameness and difference impacted the presenting student’s treatment relationship with their patient.
2. Describe ways to approach qualities of sameness and difference from an empathically grounded self psychological perspective within psychotherapy and consultation/supervision relationships.
3. Compare their own understanding of a consultation or supervisory relationship with a developmentally focused self psychologically informed approach.