



Adelphi Society for Psychoanalysis and Psychotherapy

President's Letter Looking Back, Looking Forward

Since childhood, I have always loved the fall and the excitement of the new school year... sharpened pencils, a new teacher, and of course, the wonder and challenge of learning. Being Jewish, with fall came the High Holidays. After many years of following ritual and tradition, fall is the time in which I review the past year, and look forward to the future. And so, I find this an appropriate time to write about my past year as president of Adelphi Society for Psychoanalysis and Psychotherapy and my hopes for its future.

This past year has been one of great learning for me, assessing our membership's needs and planning for how to meet them; what past traditions have needed tweaking and, perhaps most importantly, figuring out how to grow our community. The Society and I have been blessed with a Board that is excited and committed to our growth and viability. In this context, we have added some new membership benefits and worked to make our traditional events more meaningful and memorable.

Our first new benefit was that we added legal advice at a reduced fee to our members. Bruce Hillowe, Ph.D., J.D., a graduate of Adelphi's doctoral program as well as a graduate of our postdoctoral program has entered into an agreement with our membership so that members can enroll for lower cost legal advice. ASPP members can enter into a subscription agreement with Bruce at a cost of \$150 which entitles the subscriber to one hour of legal advice, reduced rates on subsequent hours, and a



**Joyce Bloom, Ph.D.,
President, Adelphi Society for
Psychoanalysis and Psychotherapy**

periodic newsletter from Bruce. This arrangement can be established when members find that they need legal consultation. ASPP membership must be in place at the time one requests the legal consultation. Thanks go out to Matthew Tedeschi, our treasurer and President-Elect and Bruce Hillowe for bringing this membership benefit to us.

Another new membership benefit is our Book Club. The book club was formed to provide a setting in which current popular fiction can be discussed within a psychoanalytic perspective. The book club plans on meeting four times a year, at members' homes, and with a potluck dinner in addition to the discussion. This past year we read and discussed, along with sharing delicious meals, books that varied in range and depth. Thus far we've explored *The Girl with the Dragon Tattoo* by Stieg Larsson, *Room: A Novel* by Emma Donoghue, *The Art of Racing in the Rain* by Garth Stein and on November 6th, we will discuss *Cutting for Stone* by Abraham Verghese. The book club is open to any ASPP member and we would

love to have more members join in our thought provoking discussions.

This past year, the Board worked hard to make our Holiday Party more intimate by having it in a smaller venue. We were pleasantly surprised by the number of members that chose to attend on the day of the event. It became quite a fun and cozy time. Estelle Rapoport's wonderful singing added to the enjoyment. This year in an effort to accommodate our Group Psychotherapy Program, which meets on Sundays, we will be moving our annual party to the end of January, Sunday, January 29th, this will allow us to have a Mid-Winter Party, with the holidays behind us and spring just around the corner.

Our other social event, the End-of-the-Year Party was also a big hit. We changed venues and again had an intimate setting in which people could catch up with each other and also make new acquaintances. It was exciting to see so many candidates, faculty and long-time members there. Michael Zentman was our guest of honor. The speakers were superb in highlighting Michael's professional and personal interests and achievements.

You also may have noticed a slight change in our invitations and flyers for our social events. We now have discounted prices if you RSVP by a specific date, usually a week prior to the event. We've initiated this as a way to bring costs down for our membership by allowing us to better prepare and plan. The incentive of lower prices for early responding benefits all of us. I want to take this opportunity to thank Julie Lehane for composing the flyers for all our social events and book club meetings.

In addition to our social events, this past year ASPP co-sponsored the Colloquia Series arranged by Jack Herskovits, who did a terrific job! Speakers were: Richard Billow, Nancy McWilliams, Danielle Knafo and

Michael O'Loughlin. For this coming year, the Colloquia Series begins with Jonathan Jackson presenting, "On Not Taking Oneself Too Seriously." The other colloquia for this coming year are: "An Integrative Model of Couple Therapy" presented by Bernard Frankel, "The Importance of Shame in Contemporary Psychoanalytic Theory and in Understanding the Quest for Shame" presented by Sue Erikson Bloland, and "Working with Orthodox Jewish Clients" presented by Masha Yaglom. And, here, I want to take the opportunity to thank Jani Klebanow for the hospitality component of the colloquia.

We recently distributed our Membership Directory. And what a learning experience that was! From the feedback received, we learned where we need greater communication to ensure that all addresses and information are correct. I very much appreciated Heather Perrin-Boyle's work, she displayed an indefatigable spirit in editing the Directory and working with our members to ameliorate the problems with distribution. We have learned from these mistakes and look forward to a smoother printing and distribution in February 2012. This will of course require better coordination on our part and quick responses from you when you receive the forms. The Board has determined that in order to reduce costs and duplication, we will now print and distribute the full Directory every 2 years (even-numbered years). New members' contact information on odd-numbered years will be sent out as an Addendum.

As I pondered the dual questions of our membership's needs and of the future viability of ASPP, I realized that there is a reservoir of history and insight which I could tap. In March, I invited all Past Presidents to meet with me and Matthew Tedeschi, Treasurer and now President-Elect. As I said in my letter to these former presidents, "It is often difficult to move forward without a good understanding of our past... There are several questions with which we grapple; the relevance of the Society to today's psychoan-

ASPP Newsletter	
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Editor	Gail Grace, LCSW
Editorial Consultants	Matt Tedeschi, Ph.D.
	Joyce Bloom, Ph.D.
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alytic practitioners, the future viability of the Society, what is it that our members are looking for from ASPP, what we can offer current and future members, and what do you believe made ASPP membership attractive during your tenure as an executive board member. We would appreciate your input on these important issues."

Several past presidents came to the meeting. They showed a generosity of spirit by sharing their experiences as presidents and as members in the Society. They also made a number of suggestions for the future which Matthew and I found very helpful and enlightening. I appreciated both their passion and advice.

The questions we posed to the Past Presidents, I now pose to you. What is it that ASPP can provide for you? How can we keep the Society relevant and viable? Of course, as your representative, I also ask you what it is that you can do for ASPP? Providing feedback to the Board would be a great start. Also, there are several committees that have

waned due to lack of a membership involvement. With more people to tend to the Society's interests, we can accomplish a lot more.

You are reading my comments in our newsletter because of the commitment of long time members who wanted the Newsletter reinstated as well as new members who are also committed to it. I am so pleased that Gail Grace has agreed to edit our re-established newsletter. I look forward to seeing contributions from our membership.

There is another ASPP event that has been missing in the past few years. This is the Retreat Weekend. We are attempting to bring it back, for either March 2012 or in the fall 2012. For this we very much need your help and feedback, we need to know about topics of interest to our members and we need members to work on the committee in order to make this retreat happen. Please contact Matthew Tedeschi or myself about your interest in renewing the Weekend Retreat.

Finally, I want now to publicly thank the entire ASPP Board, including Shelley Haber, secretary and Matthew Tedeschi, treasurer/President-Elect all of whom will help to guide ASPP into the future. As my analytic training has taught me, one needs to learn from the past in order to go forward. To that end, I thank immediate past president, Julie Lehane for her guidance, you were always there with me, to hear my thoughts and feelings and as a great source of support. Also, I have learned that it is easier to take on tasks when you have others to help with the follow-through. I cannot imagine my presidency without the wonderful help and support of Matthew Tedeschi. With Matthew at the helm going forward, I see ASPP's future looking bright!

This past year has been a steep learning curve both for ASPP, as well as for me. I believe both of us have benefited. And, I can't wait to see where ASPP has traveled when I look back next fall. ■

News from the Postgraduate Programs

Mary Beth M. Cresci, Ph.D., ABPP

The 2011-2012 academic year has gotten off to a fine start. We have seven candidates in our first-year class. Five of the candidates are psychologists, one is a social worker, and one is a mental health counselor. They are tackling the first-year courses with enthusiasm.

Two of the first-year candidates are Postdoctoral Fellows. This is a new program for Ph.D.'s or Psy.D.'s in clinical, counseling or school psychology who wish to complete a postdoctoral year of supervised experience for licensure as a psychologist. The Fellows complete two years of the Postgraduate Program in Psychoanalysis and Psychotherapy while teaching in the Derner undergraduate psychology program and seeing patients under supervision through the Postgraduate Psychotherapy Center. This year our Fellows are Dov Finman and Jared Treiber. We will be adding two more Fellows next year so that we will have two Fellows participating in both the first and second years of the Postgraduate Program.

In addition to the first-year class, we have eight candidates taking second-year courses in the psychoanalytic program. This group includes three second-year candidates and five fourth-year candidates.

The Group Program also has a first-year class of nine candidates. Those candidates will be taking courses on alternate Sundays, a new format that should prove challenging but provide for a full immersion in the

group experience. In addition we have a combined second-third year class of five candidates in the Child, Adolescent, and Family Program.

We have several new faculty members joining the Postgraduate Programs staff. Gail Grace, a graduate of the analytic program at the Postgraduate Center for Mental Health and the Psychoanalytic Supervision Training Program at Adelphi, is in her second year teaching the Foundations of Psychoanalysis I course. Jani Klebanow is in her second year teaching the first-year Techniques of Psychoanalysis II course. Shelley Haber, a graduate of SIPP and our Psychoanalytic Supervision Training Program, is teaching the Techniques of Psychoanalysis I course. Teaching in the second year curriculum are Matthew Tedeschi and Mark Sammons. We are also fortunate to have Mary Ellen McMahon from NIP teaching the second-year dream course.

We welcome our new and returning candidates and faculty. We look forward to their participation in both the Postgraduate academic community and in ASPP. ■

Pathological Symbiosis and Its Effects on Boundaries

By Ted Saretsky, Ph.D.

Back in my early twenties I volunteered for a clinical trial at Mt. Sinai Hospital without realizing I was one of the very early participants in an LSD experiment. I took this psychomimetic drug over a period of months

and had quite a number of harrowing experiences, but I also learned some things about ego boundaries that you could never learn from books.

Imagine how, during a particularly regressive moment, you couldn't distinguish between what you thought and what you said. As if this wasn't enough to make me feel naked and vulnerable, what followed further broke down my defenses and tipped me over into a true paranoid process. I could no longer tell the difference between what I said and what the other person said nor could I separate what I said and what the other person said and what the other person thought and vice versa. I imagined I was an apple on a shelf, detached from this terrible turmoil. Reflecting on all of this, what is the nature of identification, introjection, and projective processes when boundaries are so permeable and the inner sense of self is so very chaotic. Can "being an apple" actually feel more stabilizing than feeling so out of control?

This pretty terrifying experience (which I later learned the CIA had a hand in) made me unusually interested in, and sensitive to, confusion of self-other interactions.

To illuminate this issue I will talk about one particular patient of 28 who was hospitalized for a week when he was 12 for a psychotic depressive episode who, until recently, spent most of his time in his pajamas only occasionally taking showers and, most often, looking glazed and dull. The patient lives at home in a dysfunctional orthodox Jewish family with a mother and father who share a terrible marriage. The patient is constantly harangued for not being devout enough and for being a major cause of family stress because of his chronic depression.

The blaming had a great deal of face validity because the patient's pervasive depression became a centerpiece of family conferences accompanied by a great deal of hand wringing, genuine concern and alarm, and constant calls to the psychopharmacologist to

Some of the attendees at the ASPP Open House.



adjust his medication. To confound the situation, a great deal of mind-fucking goes on through of a pattern of highly destructive family secrets. The father is notoriously unsuccessful as a wage earner and a bitter disappointment to his wife. My patient lent his father \$2,000 to cover some bills two years ago but was never repaid. He cannot go to the mother and complain because that will betray the father, unleashing the usual assortment of scathing comments from the mother. It becomes the patient's responsibility to be the go-between to preserve the equilibrium between them by protecting the inadequate father while shielding the mother from feeling an even deeper despair about her marriage. At the same time, the mother told my patient not to tell the father that her boss slipped her an extra \$1,000 to take the family away for Passover holidays.

The irony here is that the patient feels disturbed, depressed and inadequate and yet he is the glue that holds this whole shabby structure together. Since he was a little child, this man has absorbed the caretaking responsibility of his warring parents and wonders why he feels inadequate and overwhelmed by this arrangement.

An important therapeutic strategy was to use powerful metaphors to help the patient see how he weakened his inner boundaries, his internal structures by swallowing and denying the rage that he felt at being exploited. I used the example of the shell game that is used in Manhattan where the naïve spectator is duped and manipulated into believing that the pea is hidden under the wrong walnut. This all began when he was only a child and he was tricked into thinking he was a failed adult. Anybody would feel shitty and feel like a loser under these circumstances. But how could he be such a failure if he was the keeper of the lie. He had been given the power to keep a fragmented family from disintegrating (the father and mother at various times had even said, how can I leave your father, or how can I leave your mother, who is going to take care of you). The mother's terror at the thought of separating from the father and being on her own and the father's paralysis and failure are projected onto the son.

In order to support this distortion of reality, the patient must act dumb and oblivious to the realization that he is being made to be something different than he is. That he should pretend things are normal when everything around him is crazy!

I once told the patient about a Superman story that I had read as a kid and I never forgot. Superman was being taunted by one of his arch villains to lift a statue of a cat outside of an Indian temple. Superman took the challenge, sauntered over to the huge statue, flexed his muscles and then almost had a hernia trying to lift the statue—it's as if one had to lift Asia out of the Pacific.

I told the patient that he reminded me more of Superman in the comic strip than of some miserable, woebegone depressive who was going to need medication the rest of his life. This phase of treatment led us to discuss the patient's emotional numbness and about having to act dumb between the ears as to what was really going on around him. The numbness, detachment and general environment permitted the patient to live with the family lies, distortions and projections that he was subjected to daily. The patient reported that the one time he felt most alive was when he was an EMT ambulance worker and enjoyed engaging in matters of life and death. It made him feel real and whole when he was emotionally connected to the people he was treating. Miraculously, occasionally sex with someone he met on the Internet also made him feel less disturbed.

I told the patient about a 1970's musical, "Jacques Brel is Alive and Well in Paris," the most wistful, saddest collection of songs I have ever heard. My wife and I wore out three recordings and went back to see the show several times. If I ever wanted to get in touch with the deepest feelings of hurt, loss and disappointment, the music was perfect! One day I met an old professor of mine at a performance. He told me that his wife had died 8 months before and he had seen the show 30 times. "It was the only way I could make myself cry," he said. The music had the binding function of telling the professor what was real.

The thick crust of inner-self boundaries that were constructed to neutralize rage and pain is very hard to break through. The patient's

investment in repelling the toxic effects of daily bombardments of denial and projection makes it very difficult for him to easily access how he naturally feels and to have confidence about it.

I want to conclude by saying that the royal road to alleviating depression is not by deadening emotions by medication so the patient can "adjust" and get along, but by the individual actually intensifying, clarifying and owning the tragedy of his own life. The patient's apathetic, confused, and depressed state is an end result of extreme alterations and compromises with the reality of his own emotions, of serving the cause of providing the glue that supports the narcissistic self state of the parents. By reconstituting what belongs to me (I'm mad as hell and depressed for damn good reason) and what belongs to you (either get divorced, kill each other already, or find a way of getting along), the depressed patient can go a long way to finding a safe passage out of the maze of his own chaos.

I shared a common WW II submarine strategy with this patient. When destroyers were circling overhead, threatening to drop depth-charges that would blow up the submarine, the submarine captains would learn to play possum by shooting garbage and oil slicks through the torpedo tubes. These red herrings would serve as decoys, often convincing the ships above that they had hit their intended targets. Then, under cover of night, they would slip away.

Similarly, the patient was willing to play dead, depressed and regressed in order to fend off further inroads of outside forces manipulating him to cross over and join the prevailing toxic family system in the guise of becoming more orthodox and "acting more normal." The patient is now out of his pajamas, is considering dating girls he met on the Internet and is discussing taking a test for a civil service job. ■

Letters to the Editor

Letters to the editors are welcomed.
Please send comments, submissions
and opinions to
gailgrace8733@aol.com.

Musing about Mental Space: A Provision for a Psychoanalytic Dialectic

Carl Bagnini, LCSW, BCD

Therapy begins in the mind of the therapist!
The initial interview is about the three-dimensionality of internal mental space: thinking, feeling and imagining. Transference is a mirror of internal relationships in which mental space is not merely synonymous with the internal world; it is also about the external world and interpersonal communication—hence it is a field. The patient's projective identifications evoke an evasion of other mental spaces in undifferentiated ways while seeking them out in a gradient of normal to pathological influences.

The psychoanalytic dialogue is an encounter with reality.

The analyst/therapist accepts the patient's projected idealized or negated self parts to understand them as the missing needed links to the unprocessed past. Psychoanalytic treatment means two minds in a dramatic encounter, each mind getting closer to the other and remaining apart. Sympathy, empathy, antipathy and apathy typify the pathos of the encounter in mental space. The patient's intolerance of otherness is observed through encounters with patient narcissism and the particularities of childhood that emerge in the transference. The child-base deprivations or traumas are communicated through use of the analyst's internal objects, in the form of phantasies in search of reverie. The search may also produce aggressive and violent attacks on reverie depending on limitations derived from a tortured past. Should reverie become available a transformative potential is possible but this will take time. Why is time needed for a transformative experience? Time has to do with the care and feeding of unconscious derivatives of patient difficulties, functioning in a timeless mess of confusion, love and hate disturbances. Let us consider

the child-based forces at play that require careful listening and tactful interpretive approaches to mental space.

The symbiotic model of early childhood represents mutual parasitism, and the parasitic model is given dramatic force in which one person resides in the mind of the other who is essentially responsible for the course of treatment. Ontological insecurity (the existential fear of helplessness stems from the knowledge of birth and death—that life is temporary) demands that pathos be projected into the mental space of the other due to the inability to contain pathos in one's mind. A nest for pathos takes over the space of the other. Projective identification is the result of unconscious memory, affects, reminiscences and knowledge excluded from consciousness.

The psychoanalytic session consists of art and intuition utilizing transference in a relationship and studying its effects by initially constructing an illusion—patient expectations and idealization of the therapist is where anticipations begin. Rhythm, tempo, and pauses relate to essential differences between the two protagonists. Exchanges have occurred on the phone, in asking for an appointment; we think about the creation of Winnicott's "hallucinated breast" that brings the patient into the first session. A relationship waits to be discovered through body-language, and a vortex (common language) found in time. There has to be a tension and some pathos so that the tension has a value and a reference to lived experience. Every encounter is asymmetrical, falling between the idealized image and solitude—the confrontation with the self as alone and never finding the perfect coupling while attributing its failure to the therapist. In the examination of the first meeting with the patient we have the nervous disorder (symptoms or problems presented) and ideas about the means available to help. At the same time we encounter the primitive patterns of object relations that create discontinuity in the discussion, tempo, and attention the patient gives to the therapist's words. The content of the words is not more important to the patient than the feelings that accompany their usage. The words, gestures and atmosphere configure the analytic setting and when we speak within the transference, not just about it, there is a depth

we bear witness to. Mistakes will occur when dealing with human suffering and when we are involved in tracking the depth and volume of what mental space offers it most always leads to uncertainty. ■

End-of-the-Year Party Address by Michael Zentman

One of my patients is a Rabbi whose God is Freud. He realized this while in the seminary when he was more interested in reading Freud's collected works than reading religious texts. He was routinely criticized for this by his teachers, but never relented. Twenty-five years later, instead of abandoning his God for theirs, he obtained a Doctorate in Ministries and now reads Klein, Fairbairn and Winnicott!

Freud is not my God. But the Adelphi community is definitely my congregation. I've told my own Rabbi, on more than one occasion, that



Honoree Michael Zentman with wife Linda Bergman.

the reason I am not more involved in my Jewish congregation is because I am so invested in my psychoanalytic congregation. He understands because before he became a Rabbi he was in our field: he was a Social Worker.

I owe my introduction to the Adelphi community to my wife Linda. She started as a candidate in the adult program in 1979. I came on board in 1982 after completing training in family therapy. It was one of the best decisions I've made in my life. The years I have spent here learning, teaching, organizing, socializing, and personally growing have been

precious to me. I have developed my most meaningful and intimate relationships in this family-of-choice.

The importance that all of you hold for me reminds me of a patient that I see, a young man in his early 20's, who is extremely cynical and contemptuous of anyone that expresses, what he calls, school spirit: wearing a hat or sweat-shirt with a school logo, speaking fondly of ones alma mater, etc. Out of a desire to better understand his experience, I reflected on my feelings about my undergraduate and graduate school days. I found that I felt nothing in particular. Then I thought about Adelphi and about how attached I feel—how central Adelphi is in my life. But I quickly realized that it was not the school that I am attached to—I don't own an Adelphi hat or T-shirt. But I am deeply attached to the people, past and present, that make up the Adelphi community. And you all inhabit me, personally and professionally. I shared this with my patient and it left him thinking a bit more about his deeply ingrained attitude. Just as an aside: a few sessions later his view of school spirit softened as he also recognized that the depth of feelings, the depth of attachment, is for the people, not the place.

I am truly honored by your recognition tonight but feel strongly that many of my colleagues have earned the same recognition for their hard work and dedication. I also feel that the Adelphi community deserves the greatest recognition for what you have all given to me personally and professionally. ■

Theater Night with ASPP!

ASPP sponsored Theater Event on
Sunday, January 15, 2012 at 3:00 PM

FREUD'S LAST SESSION

New World Theater, 50th Street
(between 8th and 9th Avenues, NYC)

Ticket Price: \$39.50

All are welcome to join the FUN!
After-Theater Rendezvous
at The Glass House Tavern for
food/drinks/talk (Dutch-Treat)

RSVP: Joyce Bloom at
jbloomphd@aol.com or 516-621-3870

Autobiographical Statements from new Candidates

Rebecca Cooper, Ph.D.



I graduated with my d.clin.psych from Edinburgh University in Scotland in 2006. Since then I have worked in Adult Mental Health in primary care and in community mental health teams in Falkirk and Stirling (central Scotland). I am particularly interested in attachment and trauma, and working with women who have a history of CSA.

Megan O'Rourke-Schutta, LMSW



In 2006, after an 8-year career in finance, I decided to embark on my social work career, receiving my Masters from Fordham

University in 2009. While in school I worked and interned at several social service agencies—with children, families, developmentally disabled adults, and people suffering from traumatic brain injuries. After graduation I began working at Daytop Village, where I continue to work today, with adults who have substance abuse issues. My husband and I were married a year ago, and I became the step mother of a beautiful nine-year-old girl. We are currently living in Long Beach but hope to be moving soon.

Celeste Morin, M.S.,

I am currently employed full time as a Professor of Counseling in the Suffolk County Community College Counseling Center. I earned my M.S. in Mental Health Counseling from Long Island University. My initial professional experience was gained at Kings Park Psychiatric Center and its satellite, Outpatient Treatment Programs where I served as a Rehabilitation Counselor, Rehabilitation Supervisor and Treatment Team Leader. I came to SCCC as an Adjunct Professor and later held positions as Director of Student Support Services and Acting Director of Counseling and Special Services before becoming a tenured faculty member. I live in Centerport with my husband and two cats.

From the Editor

I'm pleased to welcome you to the first issue of the *Adelphi Society for Psychoanalysis and Psychotherapy Newsletter* since 2006. As Editor, I'm excited about the opportunity to open the lines of communication between Derner candidates, Adelphi faculty, Society members and presenters—and I look forward to sharing news and information concerning events in our community and issues in our profession.

The ASPP Newsletter welcomes members' contributions. Let me know of your presentations, publications, awards, honors, professional appointments, as well as personal news and significant events. Send your news and notes to Gail Grace, LCSW, 145 Old Mill Road, Manhasset, NY 11030, e-mail to gailgrace8733@aol.com.



Gail Grace, LCSW
Editor

Jason Stewart, Ph.D.



I am a clinical and sport psychologist in Garden City. My work focuses on clients experiencing depression and/or problematic anxiety and those seeking athletic performance enhancement. At times, I integrate acceptance and commitment based approaches into my work. This means I help clients free themselves from struggles to avoid their inner experiences—subsequently, they can focus on living vital and meaningful lives. This work involves having clients develop a sense of what is truly important to them and create lives reflecting this. I am pleased to be a new member of the Adelphi community and look forward to getting to meet the other community members.

At the End-of-the-Year Party



Mary Beth and Robert Cresci



Stephen Hymann and Estelle Rapoport



(From left to right)
Andy Karpf, Gail Grace, Michael Nina,
and Megan O'Rourke-Schutta.



(From left to right) Margo Goodman,
Shelley Haber, and Amira Simha-Alpern
with husband Zvi.



Heather Perrin-Boyle and Libby O'Connor.



Jeanie Schneider and Irene Gillman.



Naomi Mann with her husband.



Graduates of the Psychodynamic School
Psychology Program: Maryann Sullivan,
Christina DaCosta, Christine Flanagan
(back); Maureen O'Donovan, and Camille
Mercogliano (front). Laurie Kalman is
not pictured.

Save the Date...

for our Midwinter Party
on Sunday, January 29th.

Fall Colloquium

Friday, November 11, 2011 at 7:30pm
Jonathan Jackson, Ph.D.

On Not Taking Oneself Too Seriously

This presentation concerns the use of mindfulness in psychoanalytic psychotherapy, its role in potentiating clinical work and its contribution to our widening notions of the self.

ASPP Membership

All future newsletters will be sent and e-mailed to paid ASPP members only. Please submit your dues statement to Matt Tedeschi, Ph.D. at drmjtedeschi@yahoo.com or (631) 261-2085. All statements received by December 31, 2011 will be included in the ASPP Directory.

Friday, January 27, 2012 at 7:30pm
Bernard Frankel

"An Integrative Model of Couple Therapy"

This presentation will focus on principals of assessing couple conflict and applying a "general practitioner" model to working with couples which takes into account the homeostatic setting of the couple life cycle as a measure the couple's "wellness."

Friday, March 23, 2012 at 7:30pm
Sue Erikson Bloland

"The Importance of Shame in Contemporary Psychoanalytic Theory and in Understanding the Quest for Shame"

In this presentation Sue Erikson Bloland, author of the memoir, "In the Shadow of Fame", will discuss the evolution in psychoanalysis

from the early emphasis on guilt to the contemporary view of shame as an even more profound and pervasive cause of emotional distress in everyday life. The essential interrelatedness of shame and the pursuit of fame will also be discussed.

Date TBD:

Masha Yaglom

"Working with Orthodox Jewish Clients"

This presentation will focus on the characteristics of Jewish Orthodox life that frame the internal world of an observant Jew. Spiritual practices, life cycle experiences, family and communal life, and other important aspects of Orthodox life and beliefs will be discussed and analyzed in their application to the formation of conscious and unconscious value system, self, identity, transference, treatment goals and expectations.



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The Derner Institute
Garden City, NY 11530

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