

THE DENVER PSYCHOANALYTIC SOCIETY NEWSLETTER

INSIDE THIS ISSUE:

<i>President's Message</i>	1
<i>Institute Director</i>	3
<i>Of Awards and Photos</i>	6-7
<i>Adolescence & Marijuana Use: A Panel Presentation</i> <i>Reported by R. Lowenstein</i>	8
<i>Salon photos and Information</i>	12-13
<i>Lectures in 2011-2012</i>	14
<i>Continuing Education in 2011</i>	15
<i>Musings of a recent graduate of the CAP PTP</i>	16



Mind matters...

PRESIDENT'S FAREWELL MESSAGE

Dear Members of the Denver Psychoanalytic Society,

Thank you for the opportunity to serve the Society. I have learned much, and enjoyed working with the Chairs of Committees: Robinette Bell, M.D., Colleague Assistance Committee; Margy Stewart, Psy.D., Continuing Education and Fundraising Committees; Diane Dean, RN, CS, Disaster Response and Education Committee; Cheryl Straus-Witty, Ph.D., Ethics Committee; Esther Lowenstein, Psy.D., Membership Committee; Roy Lowenstein, M.D., Newsletter Editor; Shoshana Adler, Ph.D., Preschool Consult Committee; Nancy Bakalar, M.D., Program Committee; Linda Plaut, LCSW, Psychotherapy Outreach Service; Nancy Bell, RN, LCSW, Salon Program Chair, as well as Tom Avery, LCSW and Kevin Udis, Ph.D., Committee on Study Groups, and the Executive Committee: President Elect, Rex McGehee, M.D., Treasurer, Ben Green, M.D., and Secretary, Pat Bernstein, Psy.D., and the members who stepped up to add to the rich programming. I especially want to thank Pat Bernstein, the Secretary of the Society for commuting to Denver from Colorado Springs to work so diligently.

We have had a number of fascinating courses through the Extension Division, a successful Theater Fundraiser, Salons, programs, and joining other Societies of the APsaA, in a heartfelt outreach to the victims of the Haiti disaster. The Pre School Committee has expanded, and we now have a Committee on Study Groups that will soon be helping members to form these groups. Our Reduced Fee Referral service is up and running. And we welcome Esther Lowenstein, the new Chair of the Membership Committee. The Newsletter Editorial Staff, headed by Roy Lowenstein, is adding exciting new features to the publication, including interviews, editorials and other articles of interest. There is always room for more good ideas and I hope that you will get involved with one of the Society committees during the next years.

I want to give a special welcome to our new Society Members: Eric Braden, Ph.D., Kim Conger, MS/MD, Bernie Daina, Ph.D., and Lynne Gillick, Ph.D. .

(Continued from page 1)

There are some new developments at the national level, and I will note some of our projects that are new and some that will go on in development if the new Executive Committee and Program Chairs decide to continue the work in specific areas.

The Humanities Outreach project has developed into a multidisciplinary study group that any interested individual who will make a yearlong commitment can join. Paula Bernstein and Eleanor McNees chair the Humanities Study Group. Whether or not individuals can 'drop in' for one or more meetings in a different multidisciplinary humanities venue has still to be determined. Some of the feedback regarding this project has included requests for a 'drop in' group with more limited reading than was utilized during the pilot phase of the project so that the academic community and members of the Society can enjoy these meetings without the time consuming preparation that reading extensive materials requires.

The goal of obtaining PEP WEB at an affordable cost for the members of the Society is still on the table and our next President, Rex McGehee, will pursue one possibility that we have come to understand as another potential option to try as an organization. Please note that anyone can subscribe to PEP WEB now as an individual or through another organization, but we have been trying to get an affordable membership for our own members. I have been told that one can also join the American Psychological Association as a special member if you are not a psychologist, and then subscribe to PEP WEB. Watch for news about this.

The news that the voting for officers of the Denver Psychoanalytic Society must be done by members of the American Psychoanalytic Association only has been reiterated by the President of the APsaA and this will be attended to in the near future as well.

There are many wonderful reasons to join the APsaA where you may find a project or work shop of your choice in which to participate.

After much discussion at the APsaA Council meeting in June, it was decided that the spring meetings of the APsaA are still going to take place with a shorter meet-

ing in a new format for 2013. The spring meetings have been held in cities around the country and are smaller and more intimate. The January meetings in New York are still very stimulating and if you have not gone to them, I recommend you do so. Any of us will help you negotiate the huge program opportunities that you will find at either meeting. While you may attend as a guest, Special Membership in APsaA is affordable and the meetings are more than worth it.

I want to thank Lin Borden for her tireless and passionate devotion to the Society. We could not provide the level of programs without Lin's help. She has worked for all of the Chairs and the Executive Committee and never let us down.

I wish Rex, the new Executive Committee and the Chairs all the best in the coming years.

Ronnie Shaw



Special Workshop
for **ALL Institute Faculty and Candidates**
(both adult and child/adolescent)

Saturday, OCTOBER 15th

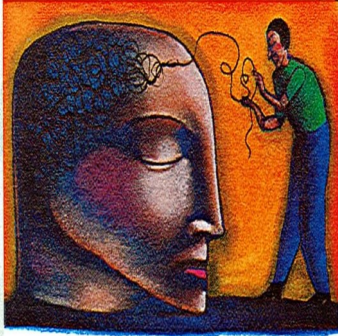
*ETHICAL PRACTICE IN THE ANALYSIS OF
CHILDREN AND ADOLESCENTS*

Paula Atkeson, Ph.D. & Anita Schumkler, D.O. are both Training and Supervising Analysts in child, adolescent and adult. Their new book *Ethical Practice in the Therapy and Analysis of Children and Adolescents* will be released in January 2012, an outgrowth of a study group they co-chaired for many years focusing on problems faced in the supervision of child and adolescent therapy.

8:00—8:30 a.m. Continental Breakfast
8:30-11:30 a.m. Session I
11:30-1:00 p.m. Lunch (on your own)
1:00-4:00 p.m. Session II

Location: at the home of Dr. Shana Adler in Denver.
(Please call the office to RSVP and get the address)

RSVP by October 3, 2011: (303) 724-2666



MESSAGE FROM THE DIRECTOR OF THE DENVER INSTITUTE FOR PSYCHOANALYSIS

The Faculty of the Denver Institute for Psychoanalysis is looking forward to another academic year replete with our usual array of high-quality classes as well as a variety of stimulating visitors and weekend programs. Our candidates training in Adult Psychoanalysis completed their third year in May 2011, demonstrating dramatic growth both in clinical acumen and theoretical knowledge. We offered the first year of the PTP program to ten new students, seven in the Adult program and three in the Child and Adolescent PTP program. Under the leadership of Margy Stewart, they have flourished. The fourth year Analytic Candidates and both Child & Adolescent, and Adult second year PTP students resume their classes in September. This fall we will have one graduate from the Child and Adolescent Analytic Training Program.

The Curriculum Committee, under the guidance of Laura Jensen, continues to develop and deepen our curriculum for this upcoming year. The Colloquium Subcommittee, led by Mark Wolny and Leslie Jordan, has been developing procedures for the Colloquium assessment for the 4th year analytic candidates. In preparation for the colloquium, the candidates will be taking several courses arranged by Drs. Jordan and Jensen. The faculty will have the opportunity to discuss this process at our Annual Meeting.

We are accepting applications for the Analytic and PTP Programs beginning in the fall of 2012. We will be holding an Open House again this year on October 18, 2011 at the home of Dr. Margy Stewart. Barbara Redinger, Chair of Admissions, is preparing for the admissions process. With the newly approved waiver procedures, we will also be considering applicants through this pathway.

The February 2011 retreat offered an exciting program that explored how the clinical material can be understood using the unconscious, through four different theoretical lenses. The attendees agreed that each of the panelists provided a unique and helpful exploration of their theory's perspective on that material.

In conjunction with our work with the Psychodynamic Psychotherapy Track in the University of Colorado Department of Psychiatry Residency Training, our Faculty has donated time as supervisors and teachers in the didactic program. In addition, we are now participating in the development of a

new and augmented Psychotherapy Scholars Track. This program is designed to identify psychiatrists interested in psychotherapy at an early point in their training and offer them additional opportunities to develop as psychodynamic psychotherapists. We shall begin by hosting an informal monthly Scholars Gathering, providing the opportunity for these residents to explore psychodynamic psychotherapy.

The Child and Adolescent Program has organized for our faculty and candidates an Ethics Workshop with visiting child analysts Dr. Anita Schmukler and Dr. Paula Atkeson. This program has received excellent reviews nationally. We extend our thanks to Drs. Jill Miller, Rex McGehee, and Shana Adler for coordinating this workshop.

As analysts, we feel strongly about the value of psychoanalysis to the community. We know that the psychoanalytic therapies are beneficial to both individuals and their families. Additionally, psychoanalytic theories offer an in-depth understanding of many issues that are important to the community. Locally, we have taken on the responsibility of training psychoanalysts and interfacing with the community in our collaboration with the Denver Psychoanalytic Society. Together we have deemed that the best way to meet these different needs is by sharing the responsibilities. DIP has committed to provide the highest quality psychoanalytic education to our students and candidates while the DPS has developed, among many things, innovative continuing education and community outreach programs. The collaboration of our two organizations has been essential for optimizing our shared resources in an effort to enhance the psychoanalytic experience in Denver. I would like to express my deep appreciation to Ronnie Shaw for the energy she has put toward collaboratively addressing our shared needs during the last two years as President of the DPS. I am looking forward to continuing our mutual pursuit of the mission to keep psychoanalytic ideas and training available to others during the next two years, with Dr. Rex McGehee who now is assuming the DPS presidency.

Applications are now being accepted for the fall of 2012
for all of the psychoanalytic
and
psychodynamic psychotherapy programs.

Applications can be downloaded from our website using the "forms" tab. Deadline for submission is March 31, 2012. The Institute office can direct your call for any questions you might have. (303) 724-2666.

THE DENVER INSTITUTE FOR PSYCHOANALYSIS
INVITES YOU TO
OUR FALL OPEN HOUSE



*Learn about our training
programs for licensed
mental health professionals*



Psychoanalytic Training — 4 year programs

- Adult Psychoanalysis
- Child & Adolescent Psychoanalysis
- Adult and Child & Adolescent Psychoanalysis combined

Psychodynamic Psychotherapy (PTP) 2-year programs

- Adult PTP

Enjoy informal conversations and refreshments with psychoanalytic faculty members, graduates of PTP, current psychoanalytic candidates
And PTP students.

At the home of:

Margy Stewart, Psy.D.
1330 E. Louisiana Avenue
Denver, Colorado 80210

Tuesday
October 18, 2011
7:00—9:00 P.M.

To RSVP and get directions, please call the Institute office: (303) 724-2666

*The Denver Institute for Psychoanalysis embraces a policy of nondiscrimination in relation to
Gender, race, religion, national origin, and sexual orientation.*

With a nationwide reputation of excellence,
psychoanalytic education has been offered at
The Denver Institute for Psychoanalysis since 1969.

For more information about the Institute, visit our website:
www.denverpsychoanalytic.org

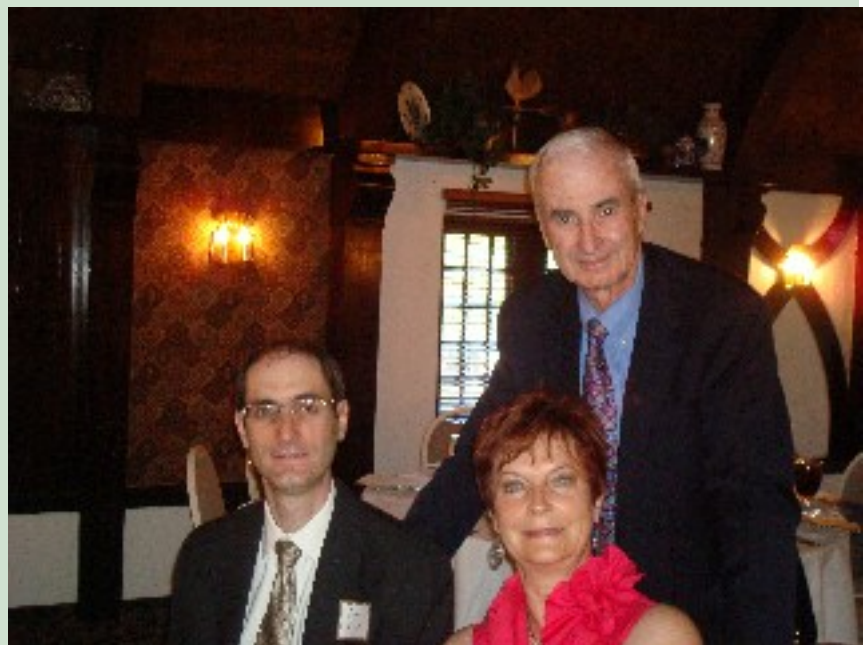


2011 DISTINGUISHED SERVICE AWARDEE

Dr. Mary Ann Levy received the *Distinguished Service Award* from the Denver Psychoanalytic Society in June 2011 due to her commitment to broadening the scope of psychoanalysis through development of the Society, individuals in it, and the Society's involvement in local and national communities. Dr. Levy served the Society through her leadership as President, as chairs of various committees, as an involved member and as an encouraging role model for other members. Perhaps her most memorable effort was her role in involving the Society with community recovery activities after the Columbine tragedy in 1999. She organized members of the Society for training and intervention with victims, and spearheaded a group of these Society volunteers to discuss and record their reactions to providing intervention to victims. From these early morning discussions came a number of articles, printed locally and nationally, describing the responders' own emotional experiences. This involvement in community disaster led to a standing committee in the Society called the Disaster Response and Education Committee. Dr. Levy has given many lectures and participated in formal discussions at Society presentations. She has been involved in many projects and taught continuing education courses. Dr. Levy was instrumental in combining feminist and psychoanalytic ideas and presenting these ideas to our mental health community. Dr. Levy has been a staunch supporter of Society goals and a strong supporter of the achievements of individual Society members. We are grateful for all she has done.



Mary Ann Levy, M.D. is shown below with her son, **Evan**, and husband, **Alan**.



MASTER TEACHER AWARD



Above, **Ruth Fuller, M.D.** is pictured with **Dr. Yale Rosen** at the Awards ceremony earlier this summer during Ruth's 50th reunion at State University of New York, Downstate Medical Center where she received the *William A. Console, M.D. Award in Psychiatry – Master Teacher*

Below, **Ruth** and her son, **Michael**, are shown enjoying one of the many festivities of the weekend.



“Adolescence and Marijuana Use: a Panel Presentation”

With Rex McGehee, M.D., Paula Riggs, M.D., and Leland Johnston, M.D.

May 5, 2011

Reported by Roy Lowenstein, M.D.



For decades I used to regard marijuana as a gateway drug, a probable wrecker of lungs, and a maladaptive waste of time, but compared to the other pharmacological horrors on the street, a relatively benign drug. Then, in the '90s I began hearing of the linkage between heavy marijuana use and psychosis in later life and not-so-later life. I began to caution my teenage patients more strongly against marijuana use. For some unfathomable reason the thought of going crazy some time in the future didn't seem to deter them much. Enter our panel of three experts.

Dr. McGehee had the unenviable task of summarizing the developmental stage of adolescence in fifteen minutes. He did an admirable job in eighteen, reviewing the psychoanalytic theories of adolescence, discussing what is new in our current understanding, and commenting on how we might think of marijuana's influence on adolescent development.

He characterized adolescence as the psychological processes that occur during and around puberty. Freud, in *Three Essays on Sexuality*, saw puberty as transforming infantile sexuality into what Laufer later described as the final sexual organization. The genital zone becomes primary, new sexual aims emerge, and new objects are found outside the family.

Jones noted that adolescent development paralleled infantile development of the child between 2 and 5. Blos would later state that the biological forces of puberty lead to a “regression in the service of development,” first a recapitulation of separation-individuation, management of sexual and aggressive drives, coalescence of self esteem and affect regulation, all reminiscent of the anal phase, and then later, a focus on triadic relationships, genital dominance, and the second edition of the Oedipus—all with a mature body, growing cognitive power, and an expanded view of the greater world.

Anna Freud noted that “every step forward in growth and maturation brings with it not only new gains, but also new problems,” that, in a way, the adolescent, with intermittent regressions, vacillates between ‘sickness and health’ as he or she makes the inexorable move toward adulthood. Stress forces the ego to grow to meet the challenges of ideals and relationships with self and others.

Blos accentuated the importance of individuation, the disentanglement of the youngster's experience from that of the parents. Both the Oedipus and its negative complement fade, as the ego develops its own unique capacities as does the superego, and individual choice of friends and sexual objects eventually lead to new, primary relationships. Conscience-driven striving gradually transform into a sense

of identity based on ideals. External and internal stress can further this development or it can overwhelm the ego and lead to pathology.

Dr. McGehee noted that this discussion was hardly exhaustive and cited, for example, the contributions of Erikson and Klein. He also had to bypass such important issues as the effects of technology on adolescent development. Given the constraints of time, he chose to focus instead on experimental psychology and developmental neuroscience.

Attachment theory, exemplified first by Bowlby and more recently by Fonagy, is useful to understand adolescent development on the basis of a human being's life-long need for the sense of a 'secure base.' This powerful imperative begins in infancy as the need for closeness to its mother, but the need for 'felt security' never wanes during the life cycle. In adolescence that need changes with thrust of puberty, and the subsequent attachment-based anxiety must be resolved by a re-working of attachment styles and seeking new objects to which to attach. Most of the time this translates into turning away from the nuclear family and toward others, ending with a new partner who becomes the primary object of attachment.

Turning to developmental neuroscience, Dr. McGehee cited the work of Kandel, Dimasio, and Schore in the work toward integrating the findings in this rapidly growing field with the insights psychoanalysis. For instance, during adolescence there is a massive 'sculpting' of the brain, a 50% decline in the number of (mostly redundant) synapses, probably precipitated by the fundamental hormonal changes of puberty. It is most pronounced in the prefrontal cortex, the seat of self-regulation and executive function (or, in very broad strokes, important aspects of the ego and superego). He poses the questions: How do these changes manifest themselves in issues of impulse control, self-esteem, object relationships, and the mental illnesses that first appear, or at least make themselves obvious, in adolescence? To what degree, can environment and relationships in particular, interact with these neurological shifts to alter the onset or course of mental illness? Psychoanalysis will benefit as the answers to these and other question come to light.

Dr. McGehee described the treatment of an adolescent who interrupted his analysis for a year to smoke pot. The youngster then returned saying that marijuana interrupted his development and he wanted to "catch up." He sees this experience as emblematic of the major problem with marijuana. It blunts the very anxiety that pushes the adolescent into making necessary internal changes to cope with biological, psychological, and social shifts and develop new adaptive capacities. Avoidance, in other words, trumps growth. Puberty turns the adolescent's deck into "52 pick-up." In doing so, it also provides the youngster with the opportunity to re-shuffle that deck in an adaptive manner leading to adulthood. It is a time of risk. Marijuana can provide temporary sanctuary from the anxiety of sex, aggression and societal pressure, but in doing so it prevents resolution—and diminishes the ego's capacity to succeed in these tasks and mature. When there is pre-existing vulnerability in organization, focus, memory, and initiative, marijuana only exacerbates it, sometimes to the point of psychosis. Even with well-endowed kids, marijuana begins to create a problem that seems to them resolvable only by increased usage.

The awkward question: Can marijuana ever be helpful in an adolescent's development? Yes, says Dr. McGehee, but it's not worth it. Like other self-destructive behavior, it can be used as a tool for separation or rebellion, for push toward autonomy. It can be part of the adolescent's sampling, experiment-

ing with the larger world and how to react to it, how to make independent choices. But the downside is far too great.

Dr. Riggs presented a masterful overview of epidemiology, neuropathology, clinical presentation and treatment of marijuana and other substance use disorders. She was also the bearer of some grim tidings. She began her presentation with some chilling statistics. One half of psychiatric disorders begin before age 15, three quarters before age 24. Sixty to eighty-five percent of adolescents with substance use disorders have comorbid psychiatric disorders. These tend to have poorer treatment outcomes. Growing clinical and research consensus supports a combined, integrated treatment approach, but progress is slowed by systemic barriers and gaps in the research.

After a ten year decline in marijuana usage, there has been an upward “bump” in annual marijuana usage by adolescents, starting between 2007 and 2008, coincident with the quasi-legalization of medical marijuana and subsequent ease of availability ultimately to the younger population. Increased usage has been accompanied by a decreased perception of risk.

Teenagers and young adults use marijuana for anxiety, depression, insomnia, attentional difficulties, to “feel normal,” to cope with the stress of school and social pressures, and to manage physical pain. In reality it exacerbates anxiety and depression, worsens sleep, impairs memory and learning, is associated with onset of psychosis, and impedes development of adaptive coping strategies. The one thing it is effective for is chronic pain. Of note, before the relaxation of medical marijuana laws, anyone who had a legitimate need for medical marijuana was able to obtain it.

It is not just the lay public’s lack of perceived risk that should concern us. In a survey of Colorado Psychiatric Society members conducted April, 2011, 58% of respondents believed that marijuana could be of benefit with psychiatric conditions. Of those who responded positively, 90% thought marijuana effective for chronic pain, 62% for anxiety disorders, 53% for insomnia, 12.5% for depression or bipolar disorder, and, overall, 56% of respondents were in favor of legalization.

Marijuana is not only damaging in the psycho-social sphere. It damages the brain. It destroys neurons, synapses, size and development of the pre-frontal cortex, the seat of executive functioning and decision making. It does the same in the hippocampus, a fundamental component of the temporal lobe’s function as the center of memory. By affecting the ventral striatum, basal ganglia, and amygdale, it predisposes toward anxiety, depression, and psychosis. Cerebellar effects predictably include impaired balance and coordination.

Adolescents are more vulnerable to addictions and marijuana effects. Adolescents who started smoking between 14 and 22, but stopped by 22, had more cognitive problems at age 27 than those who started as adults. Compared to controls and individuals who started smoking marijuana after age 17, those smoking marijuana before age 17 had more deficits in executive function, memory fluency, and learning. Early exposure to cannabinoids renders dopaminergic cells more reactive, which could trigger a psychotic episode in vulnerable individuals. It isn’t clear whether these are schizophreniform psychoses or merely the earlier and more virulent onset of psychotic disorders that ultimately would have expressed themselves anyway. We do know that both are a distortion of normal late postnatal maturation and pruning.

The CB1 receptor plays a critical regulatory role in the development of the prefrontal cortex. Adolescent exposure to THC transiently disturbs the physiological control of the endogenous cannabinoid system over glutamate and GABA release. Distortion of glutamatergic transmission during critical periods may disturb the neurocircuitry in the prefrontal area. As a result marijuana may harm adolescent *experience-dependent* maturation of the prefrontal areas which may lead to psychosis or schizophrenia.

Environment and activities during adolescence guide the selective pruning noted earlier in Dr. McGehee's overview. Unfortunately marijuana use can be one of those activities. Dr. Riggs makes a strong case for using non-pharmacological modalities as the first line treatment for substance use disorders. She points out that involvement in pro-social activities, yoga, and physical exercise (competing reinforcers) decrease drug/alcohol use and maintain abstinence. Individual evidence-based therapy (CBT) appears to be more effective than family-based therapies. It was not clear, in this presentation, how effective would be another evidence-based therapy, psychodynamic therapy, although how therapy is done (i.e. degree of accurate empathy) appears to be the defining factor. Several pharmacological agents, both prescription drugs (e.g. bupropion) and over-the-counter preparations (e.g. n-acetylcysteine) are, or may be, effective, but only when combined with other activities and treatment modalities in a closely coordinated approach.

Dr. Leland Johnston presented two clinical cases that, for issues of confidentiality, will not be detailed here. He demonstrated in a compelling manner how upsurges in marijuana usage correlated temporally with exacerbations of life cycle duration illness.

Certainly the over-arching theme in this panel presentation was that significant marijuana use is far from benign to adolescents. This stage of life is fraught with vulnerability from the neuronal to the psychosocial level, but the perceived risk of marijuana use, even in the psychiatric community, is disturbingly low. Treatment is challenging but not impossible. A combined approach of pro-social activity, individual and family therapy, and possibly pharmacological intervention, used in a coordinated fashion is thus far the most effective treatment model.



PHOTOS FROM OUR FIRST SALON...



Photos by Mark a. Groth



Mind matters...

THE DENVER PSYCHOANALYTIC SOCIETY'S
2011—2012 SALON SERIES



Friday, September 16th at 7:00 p.m.

“What the Horse Whisperer Taught the Psychoanalyst”

With Fred Mimmack, M.D.— Foxfield, Colorado

*More than 30 people attended the
opening Salon.*

Tuesday, October 11th at 7:15 p.m.

*“The Trouble with Reality: The Life Long Developmental Struggle to Come to Grips
with the Limits of our Control”* Presented by David Stevens, Ph.D.

Hosted by Barbara Redinger, Ph.D.

Tuesday, February 21, 2012—7:15 p.m.

“Psychodynamic Psychotherapy with Children” presented by Jill Miller, Ph.D.

Hosted by Drs. Esther and Roy Lowenstein

Tuesday, March 13, 2012—7:15 p.m.

“Marijuana and Adolescent Development” presented by Rex McGehee, M.D.

Hosted by Nancy Bell, LCSW

Tuesday, May 8, 2012—7:15 p.m.

Title to be announced, presented by Mel Singer, LCSW

Hosted by Rhoda Singer, M.D.

**To RSVP and get the addresses, please call (303) 724-2666
We hope you will join us.**

Check our website for more information: www.denverpsychoanalytic.org



SCIENTIFIC LECTURE SERIES—2011 & 2012

— in the BUSHNELL AUDITORIUM, 8th floor of Building 500 (the Eisenhower Floor of the old Fitzsimons Hospital) at 13001 E. 17th Place in Aurora, Colorado on the Anschutz Medical Campus. Visitor Parking is accessible via 19th Avenue on the north side of the building for \$1.00 for the evening. *Please enter the building from the north side, as the front doors are locked.*

The Interpersonal Unconscious

David E. Scharff, M.D. of Chevy Chase, Maryland

Friday Evening, September 23, 2011, 7:30-9:30 p.m.

Brief Social Hour to follow—
(Details on our website)

Ethics in Child Psychotherapy

Paula Atkeson, Ph.D. of Washington, D.C. & Anita Schumler, D.O. of Wynnewood, Pennsylvania

Friday Evening, October 14, 2011, 7:30-9:30 p.m.

Brief Social Hour to follow
(Details on our website.)

The Use of Countertransference in the Analysis of a Silent, Adolescent Boy

Nancy L. Bakalar, M.D. of Lone Tree, Colorado

Friday Evening, November 18, 2011, 7:30-9:30 p.m.

Brief Social Hour to follow
(Details on our website as well as the 2012 lectures planned for you.)

Coming in 2012:

Dr. Hector Lopez of Argentina in February (tentative title: *“Making the Unconscious Conscious”*)

Phillip Freeman, M.D. *“The Illusion of Getting Real and the Reality of Illusion: Constructing and Deconstructing Neurotic, Artistic, and Therapeutic Illusions”* **on March 16, 2012**

Sam Wagonfeld, M.D. *“Understanding Franz Kafka from his stories, diary, and a long letter to his father”*
on April 13, 2012

Panel Presentation on Mortality & Psychoanalysis in May 2012.

As always, please check our website for the latest updates (www.denverpsychoanalytic.org)

CONTINUING EDUCATION—2011

For details and registration forms for these classes, please visit our website:
www.denverpsychoanalytic.org

THROUGH A DIFFERENT LENS: A learning disabilities specialist and a psychoanalyst/psychologist explore challenging childhood disorders

With Mary Smid Newman, M.A. and Shoshana Shapiro Adler, Ph.D.

Dates: 3 Monday evenings—September 26, October 3, 10, 2011

Time: 7:00—8:30 p.m.

Location: 8000 E. Prentice Ave., #B-5, Greenwood Village, CO 80111

Fee: \$ 75.00 for Society members and \$90.00 for non-members.

(Please register by September 12th—to help in our planning.)

ADD - Inattentive ADD - Bipolar Disorder - Common and unique issues in executive functioning for these disorders. Children and adolescents with learning disabilities also may have developmental and emotional challenges. We will discuss educational and psychological interventions and their impact on development. These customized interventions help parents view their challenging children through a different lens. We welcome questions and discussion.

Mary Smid Newman, M.A. is an educational consultant with over twenty-five years of practice specializing in academic instruction and enrichment activities for students who struggle with challenges along the autism spectrum, learning disabilities, non-verbal learning disabilities, gifted learners, and executive function disorders. She has developed a horsemanship/academic program to further enhance focus, sequential planning and balance.

Shoshana Shapiro Adler, Ph.D., a child and adult analyst and licensed psychologist with over 25 years of experience, treats children, adolescents and adults in psychoanalysis and psychotherapy. She chairs the Child and Adolescent Analysis Committee at the Denver Institute for Psychoanalysis and is an Assistant Clinical Professor of psychiatry at the University of Colorado School of Medicine. She has a private practice in the Southeast Denver, DTC area.

THE CLINICAL APPLICATION OF ATTACHMENT THEORY AND MENTALIZATION-BASED TREATMENT

With Tom Avery, LCSW and Ben Green, M.D.

Dates: 4 Tuesday afternoons—Oct. 4, 25, Nov. 15, Dec. 6, 2011

Time: 12:00—1:15 p.m.

Location: Dr. Green's office at 4495 Hale Parkway, Suite 360
(one block north of Rose Hospital)

Fee: \$80.00 for Denver Psychoanalytic Society members; \$95 for non-members.

Tom and Ben will present basic scientific evidence for Attachment Theory with particular emphasis on the application of this theory in the form of mentalization-based treatment techniques. We will utilize primarily the book *Mentalizing in Clinical Practice* by J. Allen, P. Fonagy, A. Bateman, 2008, American Psychiatric Publishing. All participants are cordially requested to purchase this book prior to the first meeting. We will begin each class with a brief summary of the reading and then invite questions and discussion along with the presentation of clinical material.

Tom Avery, LCSW and Ben Green, M.D. are both experienced clinicians and teach in the Denver Institute for Psychoanalysis. Ben is a part of the Clinical Faculty of the Department of Psychiatry—UCD and Tom's appointment is pending.

More classes are being planned for 2012—Please download flyers and registration forms from the website:
www.denverpsychoanalytic.org

THE DENVER INSTITUTE FOR PSYCHOANALYSIS

Musings about the Child and Adolescent Psychodynamic Psychotherapy Training Program (CAP PTP)

Allison Benton-Jones, LCSW - 2010 CAP PTP Graduate

Much like favorite authors have an amazing way of expanding our thoughts about events, history, life situations, and thoughts themselves, so too do the faculty and students of the Denver Institute for Psychoanalysis PTP programs. As long as I can remember, I've always wanted to understand or at least be able to think about why I say what I say to a client at any given moment in time and to what end. Weekly consultation, Classes on Theory, Development, Technique, and Case Conference were a wonderful venue for this endeavor. The program served as both an opportunity to begin helping integrate a vast history of Psychoanalytic knowledge as well as a jumping off place from which to think about more recent developments in Psychoanalytic thought (particularly how the subjective experience of one's biology, physiology, and mind impacts individuals internally and individually as well as within the systems in which they live).

While there was much reading to be done, it was organized in such a way to be manageable. Both the reading and the "hands on" interaction around the reading (including the real life experiences of classmates, teachers, and supervisors) made it not only manageable but invaluable. The readings, discussions and overall holding environment helped me get more comfortable with the uncertainty and differing views this field of work inevitably brings about. Most importantly, it helped me open up more space and occasion for clients to sit with this as well. I have come to appreciate how the ability to persevere in helping further a client's affective understanding of their own experiences can be a far more useful in their change process than how much theory I know or fear I don't know. At the same time, I can fully embrace and utilize the breadth of knowledge the reading material and other clinicians provided/provide as my clients and I seek to make sense and meaning of their experiences both within the therapy and outside of it.

I am truly grateful I participated in this program. Any sacrifices of time were greatly rewarded, and I continue to reap the benefits of expanding my ways of thinking and knowing.



Reduced-Fee Outreach Committee

By Linda Plaut, L.C.S.W., Chairperson

The Reduced-Fee Outreach Program—which oversees a referral service matching Society members willing to provide psychodynamic psychotherapy on a reduced fee basis with people who otherwise would not or could not consider such therapy—is now gaining momentum.

Twenty-six Society members have signed up to be on the Outreach Committee's list of those willing to provide therapy on a sliding fee basis. In the past year we've made 19 referrals.

Before making it available to the general public we wanted to pilot the program with a limited number of groups. We also wanted to have enough therapists volunteering their services so that prospective patients could be promptly matched with a clinician. Therefore, for the past year we've reached out only to graduate students in training to become therapists and to those who attend DPS classes and programs. Brochures have been printed and have been made available to both these groups. Information about the program appears on the Society's website. Presentations about the referral service have been made to students at the Graduate School for Social Work at DU, and we are planning to present to other graduate students.

Now we're ready to consider ways to boost the program:

- We're eager to enlist more Society members who will take patients on a reduced-fee basis.
- We're interested in publicizing the program more widely to prospective patients.

To ensure we don't needlessly frustrate prospective patients, we'd like to sign up more Society members before we start publicizing the program more widely. If you've not yet signed up and wish to do so, and/or if you have suggestions regarding populations to whom we might reach out please contact Linda Plaut at lpplaut@comcast.net or 303-377-0563 x1.

Most of the requests we've had thus far are from people hoping to pay only \$40-50 per session, which, we realize, means the therapist is offering treatment on essentially a pro bono basis, with just enough of a payment from the patient to encourage serious investment in the therapy. Please keep in mind that whenever you're asked to take on a reduced-fee patient, you always have the option of saying that at this time you don't have an opening for such a patient.

Getting this program started has been a long-held goal for many in the Society, and we're excited that the referral service is now gaining some genuine traction. If you have questions or suggestions, please contact any of the members of the committee: Denise Detrick, Margery Fridstein, Linda Plaut and Gabriela Zorzutti.

Services and Activities of the Denver Psychoanalytic Society:

The Outreach Referral Service—a referral service for people who are interested in receiving psychodynamic psychotherapy but are unable to pay full fee. To leave a private message for the Referral Service, please call **(303) 724-5455**.

Colleague Assistance Committee—is available to all Society members if a situation arises they wish to report. Contact the Committee Chair, Robinette Bell at (303) 691-8991.

Newsletter— (past and current issues) available on our website: www.denverpsychoanalytic.org

Continuing Education classes, Scientific Lecture Series, Film Series, Salon Programs, Annual Fundraiser with the DCPA and other special events can be found on our website.

Membership applications can be found on the home page under the “forms” tab.



THE PEAKS FUND

THE FUND FOR PSYCHOANALYTIC EDUCATION AND COMMUNITY SERVICE

Serving the Rocky Mountain Region

The activities of the Denver Institute for Psychoanalysis and the Denver Psychoanalytic Society are partially supported by an Endowment Fund that was created out of bequests left to the Denver Institute for Psychoanalysis and the Denver Psychoanalytic Society. The Endowment has grown over the years, but so have our expenses. In order to meet the growing administrative costs of our programs for training in psychoanalysis and psychoanalytic psychotherapy, continuing education, community education, and pro bono services, the Denver Institute for Psychoanalysis and the Denver Psychoanalytic Society have launched a joint initiative to prevent the Endowment from being eroded and, even more importantly, to promote its growth. Growing the Endowment will ensure that the Institute and Society will be able to perform their missions far into the future.

Donating to PEACS helps preserve a precious legacy. We are able to provide top quality education in psychoanalysis and psychoanalytic psychotherapy, serving adults, adolescents and children. We provide free lectures and low-cost courses to our mental health colleagues and the community at large; consultations to individuals and institutions that may care for you or your loved ones; low-cost psychoanalysis through our Clinic; consultation to preschools, schools and community programs; disaster response training and services.

We are recognized throughout the country as a pre-eminent center for education in psychoanalysis and psychoanalytic psychotherapy, serving Colorado for 40 years. Soon psychoanalytic ideas will be accessible throughout the Rocky Mountain region. Please help us ensure that excellent psychoanalytic education will be ours far into the future, informing all the services we provide for our communities. **(See next page to make your donation.)**

IMPORTANT NOTICE

If you would like to be notified of upcoming events, please email the Institute/Society office to **add or notify us of changes in your email address** so we can keep our e-list current.

Send to
lin.borden@ucdenver.edu

IF YOU HAVE NO COMPUTER ACCESS AND WOULD LIKE A HARD COPY OF THIS NEWSLETTER AND OTHER NOTICES, PLEASE CONTACT THE SOCIETY OFFICE SO WE CAN TRY TO ACCOMMODATE.

(303) 724-2666

For those with computers, please continue to visit our website regularly for the most up-to-date calendar information, flyers, member contact information, application forms, event registration information, and links to other organizations.

www.denverpsychoanalytic.org



THE FUND FOR PSYCHOANALYTIC EDUCATION AND COMMUNITY SERVICE

I want to make my donation to the PEACS Fund.

Enclosed is my check payable to the Denver Institute for Psychoanalysis, PEACS Fund for

\$50 \$75 \$100 \$250 \$500

Other \$ _____

Name _____

Address _____

City _____ State _____ Zip _____

Email _____

Phone _____

This gift is a tribute: in Memory of
 in Honor of

Name _____

Send tribute notification to:

Name _____

Address _____

City _____ State _____ Zip _____

I would like this donation to be anonymous

Send me information about including PEACS in my will.

Please mail to -

The Denver Institute for Psychoanalysis
Mail Stop F478

MIND MATTERS
Denver Psychoanalytic Society
Mail Stop F478
12469 E. 17th Place



Mind matters...

THE DENVER PSYCHOANALYTIC SOCIETY OFFICERS

Rex H. McGehee, M.D., President
Margy Stewart, Psy.D., President Elect
Nancy Bell, RN, LCSW—Treasurer
Pam Haglund, Psy.D.—Secretary

NEWSLETTER STAFF

Editor, Roy Lowenstein, M.D.
Editorial Staff: Tom Avery, LCSW
Nancy Bakalar, M.D.
Linda Plaut, LCSW
Gabriela Zorzutti
Managing Editor, Lin Borden

PLEASE SEND ALL FUTURE MANUSCRIPTS TO:
(February 15 and July 15 deadlines)
Roy Lowenstein, M.D.
(303) 333-2111
Society Office: (303) 724-2666