

VAPS Matters

From the President

Barbara Richmond, MA

It has been a long time since we have had the opportunity to meet in person as a group. I believe the last time we did so was in February of 2020, at a business meeting during which Jacob Rusczek, Chair of the research committee, presented “Psychotherapy Research, Evidence-Based Practice, Psychoanalysis and You.” We listened to Jacob’s thoughtful and insightful presentation, ate Turkish food, and mingled. It all seemed so natural and even routine. That was just days before life changed and we began spending our days in front of a computer speaking with friends, family, and patients through Zoom. Since then, relating through technology has become routine. Circumstances certainly have changed since those early days of the pandemic. However, it is clearly not over, and meeting in person as a large group is not yet feasible. So, how do we remain engaged?

These circumstances call for a re-imagining of engagement in our new, challenging landscape. I believe that VAPS is using its imagination to maintain cohesiveness and vibrancy as a group. We have successfully used online technology with the help of our technical guide Evan Martin to bring us together in thought. At our most recent business meeting in February, we watched three short films hand-picked by the applied committee and had an energetic conversation about them. Our 2020 Scientific Meeting and Pre-Conference with Norka Malberg, PsyD and discussant Mark Dangerfield, PhD brought us into the world of child’s play, attachment theory and mentalization. In May our Ethics Conference presenter Anton Hart, PhD introduced an ethical stance he calls radical openness, a stance based on receptivity and inquiry into what emerges in the therapeutic dialogue. We read Elena Ferrante’s Neapolitan novels together in the spring with the applied committee, and then discussed them in a broader context with Christine Maksimowicz, who has a Ph.D. in English, and Stacey Novak, a clinical psychologist and psychoanalyst. We are moving full steam ahead and that I hope gives us all hope and enthusiasm for the future.

If there is anyone who can bring us together in our pursuit of psychoanalytic knowledge, I believe it is Nancy McWilliams, PhD, who will be our presenter at the fall Scientific Meeting on Saturday, November 6. Dr.

McWilliams’ profound and accessible work has done so much to nourish the health of psychoanalysis. She has recently published a book on psychoanalytic supervision and will speak on this important topic, which impacts most of us, whether we are the supervisor or the supervisee. Dr. McWilliams will emphasize foundational processes, including how to help therapists monitor certain vital signs of overall progress in their patients and how to welcome and make supervisory use of individual differences between therapist and mentor.

Michael Garrett, M.D., and Dr. McWilliams will also present a Pre-Conference Seminar on

Friday, November 5, titled “Helping Patients with Paranoid Dynamics, Including Paranoid Psychosis.” Dr. McWilliams will review theory and research on paranoia and will make related recommendations for therapists working with paranoid patients. Dr. Garrett will review clinical and empirical work on psychotherapy with patients experiencing paranoid psychoses, emphasizing the integration of CBT techniques with psychodynamic understanding. I look forward to seeing you at these exciting events.

I cannot emphasize enough how important VAPS members are to the health and vibrancy of this organization. For a year or so now, we have not had a working membership and outreach committee as members who had diligently and successfully taken on these tasks needed to leave these

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duties to fulfill other obligations. As a result, some of you, especially new members, may have felt a lack of welcome and outreach from our organization. So, I am very happy to announce that we have a wonderful new membership and outreach committee chair, as well as new committee members to support her in this role. Pamela Nauda Clark, herself a new VAPS member, will chair this committee. Pamela is joined by Irene Sharp, currently a VAPS member-at-large, Elizabeth Goldstein, chair of the applied committee, and me, as her veteran committee members. Pamela has a private practice in Burlington and recently graduated from the St. Michael's Clinical Psychology graduate program following years of a successful life coaching career. While Pam is new to the VAPS community, she is also enthusiastic about get-

ting to know our membership. Please join me in welcoming Pamela aboard.

I look forward to the day when we can finally meet in person as a group, when sitting next to each other at a conference, eating good food, and mingling will once again become routine. Until then, let's try to stay in touch. I am extremely thankful to our membership and especially our executive committee members in their efforts to re-imagine engagement under challenging circumstances. Let's keep going! I hope to see you in November over Zoom at our pre-conference and annual scientific meeting with Dr. Nancy McWilliams and Dr. Michael Garrett. I believe these events offer an opportunity to engage, learn and enjoy each other's company.

An Interview with Nancy McWilliams, PhD, VAPS 2021 Scientific Meeting Speaker: Psychoanalytic Supervision

Jean Pieniadz, PhD

We are honored to welcome Dr. Nancy McWilliams as the presenter at this year's VAPS Scientific Meeting on November 6, when she will discuss aspects of Psychoanalytic Supervision, her newest book, to be published in the fall of 2021 with Guilford Press. (Dr. McWilliams will also be co-presenting at a pre-conference workshop on the afternoon of Friday, November 5th: see "Save the Date for VAPS Events" in this newsletter for complete information.) Dr. McWilliams teaches at Rutgers University's Graduate School of Applied & Professional Psychology and is author of, among others, Psychoanalytic Diagnosis (1994; rev. ed. 2011), Psychoanalytic Case Formulation (1999), Psychoanalytic Psychotherapy (2004), and the forthcoming Psychoanalytic Supervision (2021).



An outline of the book is offered here, followed by an interview with Dr. McWilliams.

Psychoanalytic Supervision is comprised of ten chapters and aims to fill a relative void in the psychoanalytic literature on the case consultation process, and attends to the important role of the psychoanalytic supervisor in the education of analysts. Dr. McWilliams points out the many tasks of analysis itself, and the essential role of psychoanalytic supervisors in helping the supervised analyst to hold the many narcissistic challenges that attend the learning

process, and states "...any learning—but especially the new knowledge one has to absorb as a therapist—is hard on self-esteem" (p.10). She comments on possible developmental lines for analysts, including one that moves from a focus on principles to a focus on the consequences of one's approach(es).

Dr. McWilliams guides the reader through a history of psychoanalytic supervision, beginning with Freud, and the comparison of the Budapest and Berlin schools of thought on training, supervision, and consultation (see, also, for a brief introduction to these two models, VAPS Newsletter, 2002)—sometimes called the "teach vs. treat" debate. She has expanded these considerations to include another controversy in supervision: the teaching of skills versus supporting supervisee/consultee maturation. Early in the book, Dr. McWilliams presents the construct of supervisory alliance (an "intimate education," as she says), and revisits its many manifestations throughout the book.

Psychoanalytic Supervision reprises some of Dr. McWilliams' earlier work on what constitutes mental health (Lingiardi & McWilliams, 2017, e.g.), and the ways analytic supervisors can help their supervisees monitor progress in these ten domains (e.g., attachment security, mentalization ability, affect regulation), which are often not in the language of the patient's self-depictions at the outset of analysis. Mentoring in psychoanalysis means helping the learner go beyond symptom reduction, to appreciating the origins and import of such symptoms as they interlock and relate to different areas of mental functioning.

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In a chapter on group supervision, Dr. McWilliams notes the advantages of obtaining consultation in the group setting: multiple perspectives and identifications, mitigation of clinical loneliness and isolation, and observing different models for giving feedback to others. She also notes the advantages for the supervisor of a supervision group, including the stimulation that comes from the pooling of knowledge, and the trimming of supervisor idealizations.

Many vignettes are used to illustrate aspects of ethical dilemmas in supervision of clinical work of others, as well as in complications arising in the context of psychoanalytic institutes. Dr. McWilliams reminds the reader of the responsibility of our profession toward the larger community and society (the reason for ethical “codes”), and the ways in which the need for ethical reasoning and responsibility play themselves out with individual patients. These manifestations include patients’ presses upon the analyst for advocacy, gatekeeping, evaluation, and other matters involving the analytic frame. The consideration of ethical, especially boundary, issues in analytic institutes may be of particular interest to VAPS members, given the size of our community, and the many ways members and candidates in our small institutes must navigate and negotiate many overlapping roles and relationships.

The continuity and integrity of Nancy McWilliams’ thinking and writings on psychoanalytic understanding of personality especially shine through in her chapter called “Individual Differences and Specific Supervisory Challenges.” In this chapter, she comments on the alignments of various psychologies of supervisors with those of supervisees, and the ways in which these alignments make for advantages and difficulties in the supervisory alliance. Here, she also addresses differences between supervisor and supervisee in gender, race and ethnicity, ability, class, spiritual, and political differences (to name a few), and ways in which these differences can be faced with openness and respect.

Finally, a chapter I personally feel should be required reading for any early career professional, or candidate in an analytic institute (and perhaps, in any graduate program which “trains” therapists), is entitled “Getting the Most Out of Supervision.” It is written with the therapist in supervision in mind, and offers a helpful framework for approaching and utilizing one’s supervision so as to develop one’s own “internal supervisor” and individual clinical authority, using the containing relationship with a supervisor and the supervisor’s theoretical and clinical reasoning.

In the interview below, Dr. Jean Pieniadz interviews Dr. McWilliams about her new book (July 1, 2021).

Did you learn/discover/articulate anything new about yourself, or supervision, while writing this book? Anything surprise you?

I think when I do anything that’s a sustained intellectual pursuit, I’m surprised repeatedly. I guess I was surprised to learn--because I reviewed the research on supervision as much as I could--the degree to which supervisees report not

being fully honest with their supervisors, even in their analytic programs, where you’d think they’d be more likely to appreciate the value of honest communication, and the truth. This speaks to how vulnerable self-esteem can be, even at the highest levels of training.

I found, too, the opposite of that: the normalization of countertransference has created a change in supervisees’ expectations; they expect and want to talk about their emotional reactions to patients. They’re not defensive about how they feel. This is a big change from my experience when I was trained. So, it was a surprise to see both of these things to be true: Where they’re both more self-protective (in some ways) and less self-protective (in other ways) than candidates used to be.

In one of your chapters, you consider the many “vexed issues” regarding supervision in institutes, and you state that you suspect that “supervisory complications in analytic communities are inversely proportional to role overlap” in those communities (which you say, by the way, is “a testable hypothesis”). Can you say more about your thoughts on this matter, to give readers of this newsletter a taste of how you address this in your book?

Mostly how I address this is with anecdotes and instances of areas where supervision gets complicated from both the supervisor and the supervisee’s position. Let’s say you’re having a public political fight with another analyst in your institute. One of you is a supervisor, and the other is a dean, or chair of an important committee, or teacher of the candidate. Or the candidate’s analyst. It gets hard to not act out competition, hard for the candidate to deal with this sense that the “parents are fighting.” My hypothesis is partly based on my experience teaching for NIP (National Institute for the Psychotherapies). It has some of those dynamics, but it’s not a small local institute where everybody knows everybody. Students at NIP were able to be more fully themselves in classes. I don’t think it’s a difference in maturity, or readiness to study, or clinical skill, because there are really fine candidates in other institutes—it has to be an institutional issue. At NIP, you can critique someone you read, for example, without having to keep in mind: “OMG, that’s Sarah’s analyst.” When that’s the case, we feel we can’t be too directly critical. I don’t think these problems are insurmountable; they just create headaches. And they require a level of maturity and scrupulosity for people who already spend all day being their best selves! Exhausting.

Throughout your book, you cite as much research as you can on supervision, while pointing out the many areas that could use much more research. If you could wave a magic “grant”/funding wand, what research projects would you prioritize when it comes to what we don’t know about supervision?

Much more about candidates’ experience, and supervisees’ experience of the psychology of supervision. The research is still somewhat heavy on the viewpoint of the supervisors. It’s a top-down pedagogical viewpoint, with outcome measures that are somewhat limited to that. I

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would like to see a lot more research on what it's like for supervisees, and what would be most valuable to them. I would love a study of supervisees who had short-term psychodynamic training experiences, comparing them to those who had experience of working with patients over a 3-4 year period. How confident, and what sense of professional competence would these people have, based on those 2 modes of treatment. I hear from my students that they feel more confident after the latter, but this can be researched.

Training programs are under tremendous pressure to produce "evidence-based" information, but what about experience-based psychodynamic treatment information, with real people? I'm sure people can be trained to a level of competence in those short-term approaches, but students who are able to see character change, shifts in attachment styles, increased sense of agency, greater affect tolerance, capacity to mentalize and so forth-- change in those types of deeper structures-- would feel safer and more competent in their professional approaches than those who are trained in short-term symptom-reduction approaches. I'd love to see an ambitious study that compares those. We keep studying things from a top-down perspective. Is that really turning out better therapists? I don't think so. My students tell me they appreciate what they learn through long-term experiences with patients. All of this hasn't been empirically tested, and it could be. We'd have to have clinicians more involved in the research process, as well, to reflect the real experience of therapy. SEPI (The Society for the Exploration of Psychotherapy Integration) talks about "empirical imperialism," and they advocate "practice-based research" over "research-based practice."

I have to give a shout-out to John Norcross, who has been indefatigable in defending psychotherapies of depth—and he's not an analyst, more a humanistic therapist. He and Paul Wachtel did a wonderful critique of APA guidelines for working with trauma survivors—which are a disaster. Those guidelines were based not on clinical experience but mostly on empirical work, including some studies that excluded more than 50% of potential traumatized subjects—because they had comorbidities. Try to find a trauma patient without a comorbidity! Real patients are excluded. And many contemporary academics lack a feel for what clinical practice is really like. There are powerful pressures from government regulating bodies, insurance company cost-savers, drug companies, and academia (e.g., tenure and promotion incentives based on CVs with long lists of short-term studies rather than deep engagement with complexity) that can have a corrupting effect on what research is done and how it is designed.

You mention, in Chapter 7 (Supervision in Psychoanalytic Institutes, p. 137) that early in their careers, analytic candidates identify primarily with one theoretical orientation, and only gradually assimilate other perspectives into that. Are you thinking that as analysts mature, they take a more trans-theoretical or multi-theoretical perspective on clinical work? Or that they are more relaxed in their theoretical attachment(s)? (i.e., do you see it as a

more mature clinical stance to hold a theoretical plurality?)

Not necessarily. They may find, in their own tradition, elements of other traditions imported into theirs because of the limitations of their tradition, and then they incorporate those imports. For example, in Self Psychology, as it developed as a theoretical orientation, and people struggled with new clinical problems, Kohut's words seemed insufficient to help them with more difficult issues. So, some people in the tradition adapted ideas from elsewhere and expanded the concept of self-object transferences to include more antagonistic transference experiences. So, some people stay with their particular orientation, and expand it. Some of us draw from many different theories, because different patients make different theorists "look good."

There is a remarkable chapter in your book which considers the benefits and challenges of various "matches" between supervisors and supervisees on dimensions of personal psychology/personality organizations. After writing that chapter, do you have thoughts about how this system of thinking could be incorporated into supervisor training programs? Would it be desirable or possible to "assess" these dimensions prior to supervisor-supervisee matches being made—or would you want people to use these ideas to support their work as they go (i.e., no prior "assessment")?

Much more the latter—I'm very leery of assessing people and then assigning them. I like giving a lot of power to candidates to choose supervisors, and then they'll run into these dimensions naturally. I mention (in the book) that I think it's a petty crime of psychoanalysts to characterize candidates according to personality "diagnoses"—it's better to speak of behaviors when describing students' work. More like: "I'm leery of Michael's disclosing so much to his patients, and possibly shutting down their opportunities to speak for themselves more," versus "I'm worried about Michael's narcissism." Too many of us engage in this latter practice promiscuously. It's too othering. It's important to remember that psychological dynamics are NOT the same as pathology—we've all got psychodynamics. But they're so often used to objectify others, and support the superiority of people in power—we have to be cautious about anything that comes straight from power. Remember the old "Use I-statements?" Like you could say: "I find myself feeling defensive with this candidate." This is critically different from labeling the pathology or inferred dynamics of the other.

Finally, can you pick a t-shirt you'd wear--at least to paint the house, or to garden-- out of a few of the great one-liners from your book (e.g., "Weeping Odysseus was no wimp," "The third ear--not the tin ear," "Tell perfectionism to take a hike," "Learn first from a partisan," "Honorary member of the tribe of the solitary")?

Oh! (*laughter*) Definitely "The third ear—not the tin ear"! Theodor Reik trained the supervisor of one of my supervisors. [Editor's note: Theodor Reik wrote *Listening*

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with the Third Ear.] I went to him in 1969—he died later that year—because I wanted to meet someone close to Freud. He told me if I wanted to be in the field, I should enter psychoanalysis. I would’ve loved to have him as my analyst, I thought, but even at the young age of 22, I knew this much: I lost my mother young, and he was elderly, and I didn’t want an analyst who’d die soon. So, he got me connected with his institute clinic, where I was assigned an analyst who was a great match for me. I had barely enough money to afford a senior person. But the institute where I trained was very egalitarian, respectful of different positions...It was in the early 1970s. I was assigned Klein, Ferenczi, Freud...

He was an interesting man, Reik, because he differed significantly from Freud, and Freud never excommunicated him. Evidently, he didn’t feel the threat of being supplanted by Reik. Same with Ferenczi. People say that Freud got rid of people who disagreed with him, but that wasn’t true of everyone who disagreed with him. He did that with Jung, Rank, Adler, but not some others, including some important women. Now, here I’m defending Freud, maybe the greatest

mind of our time, but anyway.... Reik saw me one time. I thought I’d ask him what Vienna was like in the old days, but he approached our meeting as an intake interview, and perhaps unconsciously, it was. I liked his writing partly because he was the first person I read who talked about female psychology as being important in its own right, framing it not just as a deviation from male psychology. Psychoanalytic intuition, the third ear, is so important, and it reminds us that academic research is not the only thing that should influence psychoanalysis: the humanities, the social sciences, the arts, these are to be valued in the field as well.

At the VAPS Scientific Meeting program Dr. McWilliams will emphasize foundational processes, including how to help therapists monitor certain vital signs of overall progress in their patients and how to welcome and make supervisory use of individual differences between therapist and mentor. Please visit our website to register.

Jean Pieniadz, PhD is a psychoanalyst in private practice at Mansfield Psychotherapy Associates in Burlington, VT.



Save the Date!

VAPS EVENTS

Friday, November 5, 2021

*VAPS Pre-Conference Seminar with
Nancy McWilliams, PhD and Michael Garrett, MD*

“Helping Patients with Paranoid Dynamics, Including Paranoid Psychoses”

1:00pm to 5:00pm

In this pre-conference seminar, Dr. McWilliams will review theory and research on paranoia and will make related recommendations for therapists working with paranoid patients. Dr. Garrett will discuss clinical and empirical work on psychotherapy with patients experiencing paranoid psychoses, emphasizing the integration of CBT techniques with psychodynamic understanding. This venue will be presented as a Zoom seminar and is approved for 3 CEUs.

Saturday, November 6, 2021

*VAPS Annual Scientific Meeting with
Nancy McWilliams, PhD*

“On Clinical Supervision and Consultation: Psychological ‘Vital Signs’ and Individuality in Supervisory Relationships”

9:00am to 5:00pm

This program will emphasize more foundational processes, including how to help therapists monitor certain vital signs of overall progress in their patients and how to welcome and make supervisory use of individual differences between therapist and mentor. The conference will be presented as a Zoom seminar and has been approved for 6 CEUs.

Further details and registration are available online at: www.vapsvt.org.

Discounts Available for Pre-Conference Seminar and Scientific Meeting

By Devon Jersild, PhD

VAPS is pleased to offer reduced fees to the Pre-Conference Seminar and the Scientific Meeting to mental health clinicians whose primary employment is with a Vermont Designated or Specialized Service agency. The cost will be \$25 for the half-day seminar (“Working with Paranoia: Helping Patients with Paranoid Dynamics, Including Paranoid Psychoses,” and \$75 for the full-day Scientific Meeting (“On Clinical Supervision and Consultation: Psychological ‘Vital Signs’ and Individuality in Supervisory Relationships”). There will be a limit of ten scholarships for the full-day meeting, and these will be assigned on a first-come, first-served basis. (We don’t expect to limit the number of scholarships to the pre-conference seminar.)

This outreach is in keeping with our mission of promoting psychoanalysis, and also with the spirit of our speakers, Drs. Michael Garrett and Nancy McWilliams, who have each worked very hard to demonstrate the richness of psychoanalytic ideas and technique and their relevance, as Nancy McWilliams has written, “to the deeply distressed, to people with crushing reality challenges, to minorities, addicts, the poor, and others” (Psychoanalytic Diagnosis, p. 1).

Our executive and education committees will be reaching out to community mental health agency directors to help us spread the word. For inquiries, and details of the DA/SSA registration process, email Devon Jersild at jersild@protomail.com.

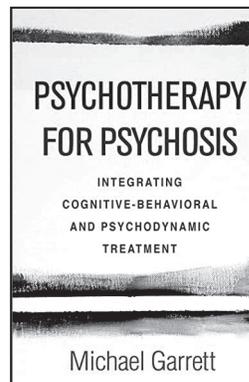


An Indispensable Guide to Working with Psychotic Patients By Jacob Rusczek, PhD

On Friday, November 5, 2021, Dr. Michael Garrett and Dr. Nancy McWilliams will present a pre-conference zoom seminar entitled “Helping Patients with Paranoid Dynamics, Including Paranoid Psychoses” from 1:00 to 5:00 p.m.

Dr. McWilliams will review theory and research on paranoia and will make related recommendations for therapists working with paranoid patients. Dr. Garrett will discuss clinical and empirical work on psychotherapy with patients experiencing paranoid psychoses, emphasizing the integration of CBT techniques with psychodynamic understanding.

We are pleased to present VAPS member Jake Rusczek’s review of the new book by Dr. Garrett, *Psychotherapy for Psychosis: Integrating Cognitive Behavioral and Psychodynamic Treatment*. Consider giving it a read before our Scientific Meeting!



I’ve held the assumptions that psychosis, by its very nature, is difficult to understand, difficult to capture in language, and difficult to treat with psychotherapy. It was with such apprehensions that I began *Psychotherapy for Psychosis: Integrating Cognitive Behavioral and Psychodynamic Treatment* by Michael Garrett, M.D.—a psychoanalyst who later sought CBT training to expand his repertoire. He utilizes

biological, phenomenological, and psychodynamic perspectives to show that psychosis “transforms the contours of consciousness” (p. 47) in ways that are, in fact, describable and comprehensible. For instance, “In an altered contour of consciousness where mental boundaries break down, the psyche shifts away from figurative, symbolic forms of thinking toward a *perceptualized*, concrete, image-based, literal way of thinking” (p. 48). The hypersalience of external stimuli and a diminished sense of self combine with object-related fantasies

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to generate psychotic experiences, which Garrett thinks of as *autobiographical plays which are staged in the real world*.

Garrett offers a treatment model that combines CBT and psychoanalysis. He proposes that the CBTP (cognitive behavioral therapy for psychosis) is well suited for challenging psychotic beliefs and strengthening the observing ego. Initially, a psychotic patient will experience themselves as a helpless victim of external forces—an outlook which is not conducive to psychotherapy or change in general. When such beliefs are weakened via CBTP interventions, patients become freer to entertain the possibility that their voices, delusions, and other hallucinations are self-generated—that they may in fact be the director of the play they feel trapped in. This shift sets the stage for psychodynamic work, in which the personal meanings of psychotic experience can be identified and understood.

What does using CBT to challenge delusional beliefs entail? Those of us who hold negative images of CBT might imagine a rationalistic and authoritarian approach, devoid of attunement and tact. Fear not—Garrett describes a gentle, exploratory process that introduces rigidly held beliefs to alternative lines of thinking and empathic psychoeducation. This phase of treatment involves thoroughly investigating the “evidentiary chain” that underlies psychotic beliefs and scrutinizing it to the degree that the patient can tolerate at any given point. The goal is to get the patient interested and involved in a process of examination and to raise doubts. He advises not rushing the process and not thinking in binary terms of “real” and “not real.” The goal isn’t to make the patient renounce their psychotic beliefs, but rather to generate enough uncertainty that alternative explanations become plausible to them. Here’s a sample of the kind of language he would use during this phase: “I can understand how you came to the conclusion you did [the delusion], but now that we have examined the evidence, it seems that what you first believed may not be a total explanation. Some of the evidence goes against your first belief. It is important for you that we get this right. We need to take whatever time we need to think this through. Let’s see if there are alternative explanations?”

Once a patient is willing to entertain alternative explanations for their psychotic experiences, the stage is set for the psychodynamic dimension of the therapy. Psychodynamic interpretations about the symbolic nature of the patient’s play are the “alternative explanations” that Garrett has in mind. Interpretations facilitate the process of differentiating and integrating that which has been split off and projected into the external world. In other words, patients are invited to discover and own increasingly more of their own minds. As a successful treatment moves further into this phase, it should increasingly resemble psychotherapy with non-psychotic people.

Garrett does an excellent job of keeping both the overarching concepts and the fine details of clinical reality in focus throughout the book. He provides a robust review and integration of various perspectives on the nature of psychosis and outlines a full treatment model, while managing to illustrate concepts with vignettes and examples of the specific language he would use in session. He also provides several case studies. All of the above is written with exceptional clarity. I consider this book an indispensable guide to anyone who works with psychotic patients—and to anyone considering it.

Now for one final endorsement: this book was surprisingly relevant to psychotherapy with non-psychotic patients! Everyone’s psychic landscape influences their perceptions, just not as vividly in the case of non-psychotic people. Since psychosis makes what is typically a subtle process overt, studying work with psychotic patients is an opportune chance to explore the way fantasy shapes reality for all our patients and learn how to work productively at that interface.

Garrett, Michael. *Psychotherapy for Psychosis: Integrating Cognitive-Behavioral and Psychodynamic Treatment*. New York: The Guilford Press, 2019.

Jacob practices in Montpelier and teaches Introduction to Clinical Intervention at the Saint Michael’s College clinical psychology master’s program. He completed advanced training at the Vermont Institute for the Psychotherapies in 2017 and chairs the VAPS research committee.



SPOTLIGHT ON VAPS MEMBERS

Interview with Pamela Nauda Clark, MA

Phoebe Lewis

We are excited to welcome you as the new Membership and Outreach Chair, and I understand you'll also be working on the website as part of the Social Media Committee. How did you get involved with these committees?

I graduated in May from Saint Michael's College and joined VAPS on the recommendation of a professor. I was speaking with Elizabeth Golstein and Barbara Richmond (VAPS President) and it just happened very quickly! I'm excited to jump in and be part of this organization particularly because I'm going right into private practice. It will be great to have a community.

Congratulations on graduating! I can imagine it's a transition to go from having classmates to working in a private practice.

Thank you! In my career prior to this, I was primarily self-employed, so I'm used to being solo professionally. I do miss discussions and learning with my classmates and instructors! **I understand that your work before attending St. Michael's College was in life coaching and working primarily with women?**

Yes. My whole trajectory may appear convoluted, but in retrospect I see it as an evolutionary path that's all connected. I started out in elementary education as a 5th grade teacher (way back in 1993!) which gave me a solid lens on childhood development, and insight into the socialization that happens in our culture in schools. Observing and experiencing some unquestioned practices that I believe were detrimental to a healthy sense of self overruled what I believed was positive about the system and led me to homeschool my own kids. In the process, I found myself questioning my own unconscious socialization. That was a huge component to my path to therapy.

In the next phase, I worked with people on their home interiors. I don't want to call it interior design work because it was more about "using what you have." Everything collected in a home is a symbolic expression of something within a person/couple/family. Instead of starting with a blank slate and designing a model home, we'd look at everything already contained in the space and consider what it meant to them. What to showcase, how to arrange it in a way that changed the way they lived in their homes, in a way that also helped them accept who they were as people. This was a really interesting flip-flop to my current work- rather than looking at the inside and how it is expressed on the outside, we looked at how the outside can express the inside.

From there I got into life coaching with a focus on relationship issues as a gateway to individual, internal work. Coaching gave me an introduction to examining belief systems and thinking patterns and how our defenses and unconscious desires and fears are revealed through relationships. During



this time I also became a certified yoga teacher and trained in trauma-informed yoga which gave me an understanding about how trauma is held in the body. This was also alongside yoga philosophy, which examines how all systems are related - mental, emotional, physical, spiritual - and how symptoms are not random or isolated. Everything we experience is connected. I think that all of that combined led me then to seek out a graduate program that was psychodynamically oriented. **Can you speak more to your interest in psychodynamic work?**

Primarily, my interest evolved from my own therapy. It's also true that my lifelong view has been that there are no reactions or dreams or "symptoms" that arise out of nowhere, but instead have roots beyond our conscious awareness. So I think that a psychodynamic orientation was just a natural fit. I also believe that mothering is an enormous opportunity for psychological growth and that my experience of having and raising children and noticing intergenerational patterns- and my own patterns, trying to be a conscious parent, and beginning to notice how even so, I was mostly an unconscious parent- disturbed me and also ignited a deeper curiosity.

While at St Michael's, I focused my major paper on the developmental stage of midlife / menopause, examining the individual and social roots of physical and emotional symptoms that arise for women during this transition. I considered a psychodynamic and existential approach to menopause vs. what we have culturally medicalized. I thought that it would be my focus professionally, but in working with college students in my internship at Champlain College last year, I realized that it's really the developmental transition itself that is fascinating to me. There's a lot of overlap in developmental stages, in that one informs the other. I find it fascinating to overlay lifespan development as a lens in addition to the wealth of unconscious information found in formative experiences, symbolic meaning, and existential concerns.

Phoebe Lewis is a second year graduate student in clinical psychology at Antioch University New England.

COMMUNITY POSTINGS

Allied Groups

Psychoanalytic Education in Vermont

The Vermont Psychoanalytic Study Group (VPSG)

invites you to our

4th Sunday Soirée with: Salman Akhtar, MD

October 17, 2021

An online event

Words, Wordlessness, and Beyond

Listening to Silence: From Hesitation to Insight

1:30pm – 3:30pm

Listening to Poetry: From Delight to Wisdom

4:00pm – 6:00pm

Cost of the full event: (1:30pm-6pm) \$100.00

Full time undergraduate, graduate students and VPSG

Student Members: \$80.00

The late afternoon (4-6pm) will be of special interest to poets, writers, readers, philosophers, thinkers, and other non-clinicians. Late afternoon event: \$50 (Clinicians must register for the full event). 4 CEU's are under application. Visit our website: www.vermontpsychoanalytic.org

The Vermont Psychoanalytic Study Group

One-Year Psychoanalytic Seminar Series, 2021-2022

By Zoom: 7:00pm – 8:30pm

Classic Papers

Thursdays: October 14, 28; November 11; December 9

Deconstructing and Reconstructing the Concept of Enactment: What Can Be Going on in the Consulting Room

Thursdays: January 6, 20; February 3

Psychoanalytic Education in Vermont

The Vermont Psychoanalytic Study Group (VPSG)

invites you to our

4th Sunday Soirée with: Salman Akhtar, MD

October 17, 2021

An online event

Words, Wordlessness, and Beyond

Listening to Silence: From Hesitation to Insight

1:30pm – 3:30pm

Listening to Poetry: From Delight to Wisdom

4:00pm – 6:00pm

Cost of the full event: (1:30pm-6pm) \$100.00

Full time undergraduate, graduate students and VPSG

Student Members: \$80.00

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What Happens in Psychoanalysis: A Preliminary Review of Basic Psychoanalytic Theories and Practice

Thursdays: February 10, 24; March 10

Time, Sexuality, and Ethics: Encountering the Actual Unconscious and Psychoanalysis Through the Work of Dominique Scarfone

Wednesdays: March 9, 23; April 13

Factors in Psychoanalytic Work

Thursdays: April 28; May 12, 26

Contact Mika Barker Hart with questions: mikavt@gmail.com

The Vermont Institute for the Psychotherapies (VIP) is pleased to announce the graduation of our most recent group who completed a two-year post-graduate program in the psychoanalytic psychotherapies this past June. We will be accepting applications starting January 2022 for our next class which will begin in the Fall 2022. To apply or for more information please visit our website, www.vipvt.org, or contact Alice Silverman via email at alicehersheysilverman@gmail.com.

Please check back in at our website over the next year as well for possible new reading groups or salons that may be offered.

National and International Events

Boston Psychoanalytic Society and Institute – North (BPSI North)

Online courses - bpsi.org/calendar-2

Applying Systems Psychodynamics: Enhancing Organizational Diagnosis

Wednesdays, October 13, 20, 27; November 3, 17; December 1, 8, 15, 2021

7:00pm – 8:30pm

Continued on next page.

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A Quick Course on Developmental Psychoanalysis

Mondays, October 18, 25; November 1, 8, 2021

6:00pm – 7:30pm

Building a Private Practice: Session A

Tuesdays, November 9, 16, 23, 30 2021

7:30pm – 9:00pm

An Introduction to Psychoanalytic Trauma Theory

Mondays, December 6, 13, 20, 2021; January 3, 2022

7:30pm – 9:00pm

Identifying and Treating Pathological Narcissism

Tuesdays, December 7, 14, 21, 2021;

January 4, 11, 18, 25,

2022; February 15, 22, 2022

7:30pm – 9:00pm

Friday October 1, 2021 – Sunday, October 3, 2021

International Psychotherapy Institute Weekend Conference

“Psychological Resilience and Vulnerability: Managing Racism Among Black Family Members- Considerations in Psychotherapy”

Beverley Greene, PhD, ABPP and Kirkland Vaughans, PhD

Offered as a live, online zoom video conference

theipi.org/clinical-training/october-2021-weekend/

Friday, October 22, 2021 – Saturday, October 23, 2021

Co-sponsored meeting of the Contemporary Freudian Society, the Washington Baltimore Center for Psychoanalysis, and the Washington School of Psychiatry

“Awakening to the Existential Threat of Environmental Collapse”

Offered as a live, online zoom video conference

contemporaryfreudiansociety.org/event/harold-searles-memorial-conference/

Saturday, October 23, 2021 – Sunday, October 24, 2022

The International Association for Relational Psychoanalysis and Psychotherapy (IARPP) Conference

Save the Date for this Online Symposium

iarpp.net/events-hub-page/upcoming-conference/

Friday November 5, 2021 – Sunday, November 7, 2021

International Psychotherapy Institute Weekend Conference

“The Relational Foundations of Mentalization in Parent and Child Psychotherapy”

Arietta Slade, PhD

Offered as a live, online zoom video conference

theipi.org/clinical-training/november-2021-weekend/

Sunday, November 14, 2021

Co-sponsored meeting of the Washington Baltimore Center for Psychoanalysis, the Contemporary Freudian Society and the International Psychoanalytic Association’s Committee on Women and Psychoanalysis (COWAP)

“Psychoanalytic Understanding of Poverty: The Importance of Context”

Offered as a live, online zoom video conference

contemporaryfreudiansociety.org/event/psychoanalytic-understanding-of-poverty-the-importance-of-context

Friday February 4, 2022 – Sunday, February 6, 2022

International Psychotherapy Institute Weekend Conference

“Adolescence: An Underappreciated Developmental and Treatment Opportunity”

Jack Novick, PhD and Kerry Novick, PhD

Offered as a live, online zoom video conference

theipi.org/clinical-training/february-2022-weekend/

Wednesday, March 30, 2022 – Saturday, April 2, 2022

Division of Psychoanalysis: 41st Annual Spring Meeting

“Trauma and (Trans)cedence”

Chicago Marriott Downtown

Chicago, Illinois

division39springmeeting.net/

Friday April 22, 2022 – Sunday, April 24, 2022

International Psychotherapy Institute Weekend Conference

“Psychodynamic Synergy Paradigm: The Marriage of Multiple Theories and Techniques”

Martha Stark, MD

Offered as a live, online zoom video conference

theipi.org/clinical-training/april-2022-weekend/

Thursday, October 20, 2022 – Sunday, October 23, 2022

43rd International Association for Psychoanalytic Self Psychology (IAPSP) Annual International Conference

“Freedom and Transformation: Opportunities and Challenges”

Washington, DC

iapsp.org/43rd-annual-conference-in-washington/

Guidelines for Newsletter Submissions

Guidelines to the Newsletter should be 350 - 1000 words (if you wish to go longer, please contact the newsletter editor). When articles include references, the references should be in Chicago Manual of Style. Please email your submission in an attached Word file to the acting newsletter editor Phoebe Lewis (phoebeklewis@gmail.com), and include a one-sentence bio. All materials are subject to editing at the discretion of the editor. Deadlines for submission are February 15 and August 15 unless otherwise announced on the VAPS website. Newsletter issues will appear 4-6 weeks after the deadlines.

The VAPS newsletter is the official publication of the Vermont Association for Psychoanalytic Studies (VAPS).

It is published biannually.

VAPS is a local chapter of the American Psychological Association, Division 39: Society for Psychoanalysis and Psychoanalytic Psychology

The views and opinions expressed herein are those of their authors and unless otherwise noted do not necessarily represent the policies or positions of VAPS, Inc. or the American Psychological Association, Division 39.

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VAPS Newsletter
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