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The hard choices that lie ahead

By *Malcolm Allen*

THE WAVE OF psychotherapy service closures and reorganisations that has been sweeping the country, recently illustrated by *The Guardian's* portrayal of the plight of Camden Psychotherapy Unit (28 June), poses two stark questions.

First, what, if anything, can now be done to limit the present damage? But then, just as importantly, what now needs to be done to make sure that psychoanalytically-informed services can survive and thrive in the future?

The erosion of services has revealed the weakness of all the main psychotherapy and counselling professional bodies, including the BPC, not just to resist the trend (a Herculean task), but even to create some ripples around this issue. The professional bodies are all equally concerned about what has been happening; yet there has been a profound failure of collective action. The default instinct – tragically – has been to worry about securing our own organisational positions first and the common cause second.

But what has the BPC been doing? First, we are building as detailed a picture as we can of the changes to service provision, using a range of resources. We are working with the Royal College of Psychiatrists' National Audit of Psychological Therapies which will soon provide the most detailed overview to date on these services in the UK.

We are also working with the Association of Psychoanalytic Psychotherapy in the NHS (APP in the NHS) on a survey to find out what is happening within such services. We will be mapping all this information against the emerging commissioning structure in the NHS, and identifying the key decision-makers for mental health and psychotherapy services within these structures. We will be developing over the coming months a focused strategy for influencing

these decision-makers in favour of psychoanalytically-informed services.

Our best bet for significantly influencing the present situation is through an alliance with partner organisations, especially the mental health charities. We are working with the We Need to Talk Coalition, led by Mind, on a proposal we have made to bring together information on the overall impact of service reorganisation and bring it to the government's attention. We believe that what is happening stands to undermine its commitment in the recent mental health strategy, one that we all share, to building a parity of esteem between mental health and physical health provision.

But what about the future? It is hard not to play here the sort of counterfactual game so beloved by media historians. Would we be facing the same level of loss if the psychoanalytic community had wholeheartedly embraced the value of outcome measures and evaluation thirty or forty years ago? What if we had built up an incontestable body of scientific evidence that psychoanalytic psychotherapy works? What if our psychotherapy services had developed sophisticated outcome measures that demonstrated our results were in line with that scientific evidence? Might we have been in a significantly stronger position than we are now?

The point here is not to indulge in self-regret for the failures of the past – though these need to be properly understood – but to make sure that we now put in place solid building blocks for the future – above all not to shrink from the hard choices that need to be made.

There are compelling reasons to retain a positive outlook for psychoanalytically-informed work in the future. At the recent International Neuropsychoanalytic Congress in Berlin over 400 people – including large numbers of young neuroscientists, clinical psychologists

and researchers – were intently engaging with the latest findings presented by leading world neuroscientists (Damasio, Panksepp, Craig, Gallese) that together powerfully point to a psychodynamic model of the mind. There was a palpable sense of excitement as the reality of this proposition began to take hold within the conference, and which will be developed over the coming months – there is no doubt a tipping point has been reached in this project.

Just before this, leading economists including the Governor of the Bank of England joined with others in an enthralling discussion at the launch of David Tuckett's major new book *Minding the Markets*. Inside this issue, Tuckett offers a summary of his ideas about how psychoanalytic insights can aid an understanding of how economies work.

‘We can begin to make out what a revitalised psychoanalytic project starts to look like.’

Kids Company's No Bullshit conference also reported on inside included major contributions from psychoanalytic practitioners. In these and other initiatives, we can begin to make out what a revitalised psychoanalytic project starts to look like, defined above all else by its openness to engage with other disciplines.

The last *New Associations* spoke of the urgent need for realignment to begin to overcome the debilitating fragmentation of the psychoanalytic community. Discussions have progressed between the BPC and the Association of Child Psychotherapists (ACP) to this end and similar discussions are beginning with the APP in the NHS.

In the last two months, we have lost two psychoanalytic titans, Hanna Segal in the UK, and Leo Rangell in the US. They had important things in common apart from the immense contributions they each made to the development of psychoanalytic thought. They both emphasised the equal importance of science and humanity

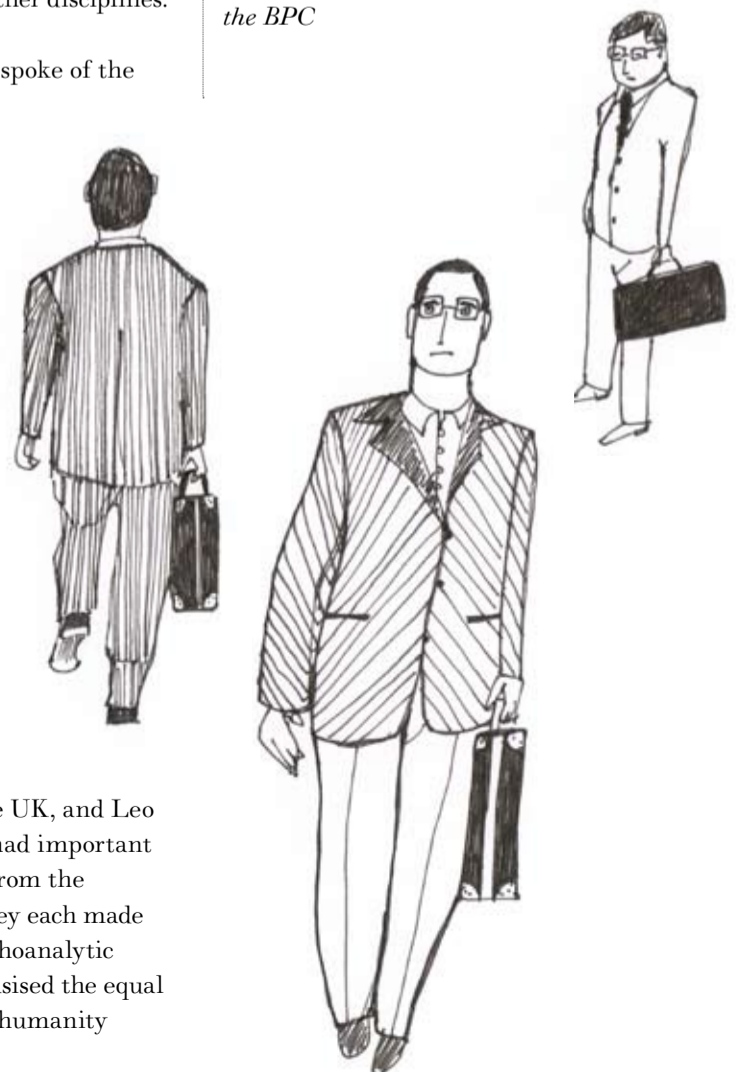
within clinical practice. In an interview with *The Guardian* in 2008, Hanna Segal said: ‘for those of us who believe in some human values, it is terribly important that we just keep this little fire burning. It is about trusting your judgement, and the power of love.’

Leo Rangell wrote: ‘The scientific attitude of psychoanalysis is carried to the patient by a caring human. The capacity to achieve the proper blend between the two is one of the most difficult but necessary goals for training to impart.’

They both too had a talent for writing perceptively on public affairs. Segal wrote passionately about nuclear war (including her legendary 1985 essay ‘Silence is the real crime’), 9/11 and the invasion of Iraq. Rangell's book on the Watergate affair with his concept of the ‘compromise of integrity’ has a particular poignancy in the light of recent events in the UK. He was a regular contributor to the *Huffington Post*; his last piece on the Tucson shooting, written 4 months before his death at 97, pays tribute to Obama's ‘cool’ (‘Not cold, but with his emotions controlled in public. Not completely.’).

At its best, psychoanalysis is the place where objective and uncorrupted science, humanity, creative insight and an ambition for social justice meet. Are we ready for the tough choices that are now needed to ensure this unique human endeavour can hold its own in the years to come? ■

Malcolm Allen is CEO of the BPC



The legacy of Jung

By Warren Colman, Helen Morgan and Jan Wiener

6 June marked the 50th anniversary of the death of Carl Gustav Jung (1907-1961). To commemorate his legacy, three Jungian analysts, registrants of the BPC and members of the IAAP, have written this collaborative piece. Besides their work as clinicians, each author holds linking roles within the profession, and the following thoughts come from their combined understanding of the legacy we have inherited, as well as how it is perceived from outside the Jungian community.

THE JUNGIAN community, both within the UK and internationally, is thriving and vibrant. Today there are over 3,000 Jungian analysts throughout the world and 53 societies who are members of the International Association of Analytical Psychology (IAAP). Jung's original ideas continue to be developed and expanded to form a robust, lively and growing tradition of theoretical and clinical concepts.

Despite this, Jung remains ignored and unattributed within post-Freudian and post-Kleinian thinking. Rarely, if at all, does Jung himself or other post-Jungian writers appear on the reading lists of psychoanalytic training; although the *Journal of Analytical Psychology* in 2009 became the first Jungian journal to be included on PEP-Web. Besides noting that this absence is rather extraordinary, we believe that this has been, and continues to be, a considerable loss for psychoanalysis. Jung's thinking on the analytic relationship and his openness to influences outside of the analytic community are of considerable value and anticipated many developments within psychoanalytic work.

During his years working as a psychiatrist with Bleuler at the B rgholzi Psychiatric Hospital in Zurich, Jung developed his theory of complexes which he applied in his study of the psychogenesis of dementia praecox (later to be called schizophrenia), to show how delusional formations had an underlying reasoning that could be understood. Whilst strongly influenced by his relationship with Freud, his experience of working directly with psychotic patients and his own personal explorations led him to the conviction that the psyche, as well as including repressed personal material, also included the unrepressed or collective unconscious of what was not yet known. This led him to develop a teleological approach to the unconscious, valuing meaning and purpose over causality. For

example, unconscious communications such as dreams might be understood as 'compensating' for one-sided conscious attitudes, rather than being merely defensive compromise formations derived from instinctual wishes. He anticipated the modern view of dreams as indicating the psychic state of the dreamer. He also insisted on a more extensive view of the libido than Freud's.

Jung's interest in the collective aspects of the unconscious meant he was drawn beyond the limitations of the Western, bourgeois frame of early twentieth-century European psychology towards other disciplines and other cultures and systems of belief. His range of interests was astonishingly broad, and he drew on many different disciplines in formulating his theories – anthropology, philosophy, sociology, theology, mythology and comparative religion, physics and biology. He tended to use these as part of his own creative palette so was not always accurate – indeed, his writing can sometimes seem muddled and contradictory. Nevertheless, Jung's contradictions are always interesting, and have often proved to be a stimulus to the creativity of those who followed him: working at the unresolved difficulties in his thinking opens up new avenues. Many of the issues he struggled with touch on the great unsolved (and probably insoluble) problems of science, religion and philosophy such as the nature of the self, the existence of God, the relation between mind and matter, nature and nurture and the relation between the individual and the collective, conceived in both biological and sociological terms.

His openness remains of central value as a legacy for modern-day Jungians. Like all traditions, this contains within it its own shadow and can, at its worst, lead to trainings with loose boundaries and undisciplined ways of thinking. However, at its best, it can facilitate the development and encouragement of clinicians who are able to hold and work with the material of the repressed, malign and defensive aspects of the psyche as they appear in the transference, as well as allowing the expression of the creative psyche and the individuation of the self.

Jung realised the central importance of the analytic relationship and the significance of the transference as the precursor of something that is about to become conscious. He had a sharp, intuitive understanding of the

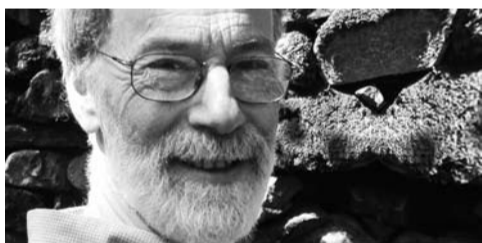
conscious and unconscious effects two people have on one another. He knew in his bones about transference and countertransference, the archetypal nature of unconscious processes alive between patient and analyst, the emotional impact of analysis and its potential for making meaning. As he says in an oft-quoted remark:

For two personalities to meet is like mixing two different chemical substances: if there is any combination at all, both are transformed... You can exert no influence if you are not susceptible to influence. (Jung, C.G. (1929) *Problems of Modern Psychotherapy: Collected Works Vol. 16*. London: Routledge, para 163).

'Jung's openness remains of central value as a legacy for modern-day Jungians.'

Jung's legacy provides an arena for continuing thought and research, as evidenced in the continuing flow of scholarly papers in the *Journal of Analytical Psychology*. This range of interest also influences Jungian clinical practice: Jung maintained that the fundamental problems for many patients are religious ones (in the broad sense), so Jungian analysts are often willing to engage more directly with existential issues of meaning and purpose and do recognise the importance of spiritual experience in people's lives.

Over the past decade or so, many of Jung's fundamental concepts such as archetypes have undergone a major re-evaluation. The common thread of this work is the reformulation of archetype theory in terms of emergence, influenced by current scientific developments involving the study of complex non-linear systems having properties of spontaneous self-organisation. Archetypes are now understood not as pre-existing 'blueprints' but as spontaneously emerging regularities of affective relationships and phases of psychological development. Linked to this is a growing interest in developmental psychology, attachment theory and relevant trends in neuroscience such as mirror neurons and the functioning of the 'default network'.



Warren Colman



Helen Morgan



Jan Wiener

Jung’s spirit of openness and adventurousness has also provided the seedbed for new developments within the international Jungian community. The IAAP has been keen to offer professional and financial support to doctors, psychiatrists, psychologists and other professionals with an interest in Jungian and post-Jungian thought but who live in cities or countries where there are no qualified analysts, and no long-standing societies with well worked out programmes of training. The challenge for the IAAP, in offering culturally relevant and flexible teaching and training programmes where qualified analysts travel to these regions to teach, supervise and offer ‘shuttle’ analysis, has been substantial. However, interest in these projects within existing Jungian societies has been considerable and, because of this, the number of projects in place has grown rapidly.

From small beginnings there are now 22 Developing Groups in Analytical Psychology around the world, including Russia, Kazakhstan, Bulgaria, Estonia, Poland, China, India and areas of South America. Some individuals within these Developing Groups have sought opportunities for a full individual IAAP clinical training within their own cultures, leading to international recognition as a Jungian analyst. The IAAP has responded to this need by setting up an Education Committee with formal structures and training requirements so that suitably qualified individuals can train to an internationally recognised level on what has come to be known as the ‘router programme’.

Several members of the SAP and BAP, along with some from other Jungian societies in London, have been privileged for the past fifteen years to teach, supervise and provide shuttle analysis to analytic trainees (‘routers’) in St. Petersburg and Moscow. The project recently came to an end with more than thirty qualified analysts in Russia, and a newly established society of their own. Only now can a process of careful evaluation begin to assess whether or not this project has been successful, and whether the belief systems underlying our own models of training are sufficiently adaptable to different cultures. This is work in progress, and hopefully other SAP and BAP members working in countries such as Poland, Estonia, Serbia, Slovenia and the Czech Republic will contribute to an ongoing process of evaluation from their own experiences and those of their candidates.

Endpoint

As with psychoanalysis, Jung’s ‘analytical psychology’ has evolved into several different approaches. For some decades now, the SAP and the Jungian Section of the BAP have been at the forefront of what is generally known as the ‘Developmental School’. Following the pioneering work of Michael Fordham, there is a commitment to clinical and theoretical investigation of infantile mental states as they affect both development and failures to symbolise. This work has led to a rapprochement with psychoanalysis and, partly because this has been a rather one-sided affair, it means that Jungians within the BPC

span at least two worlds and speak at least two languages: one world is that offered by object relations theory, with its unique insights into intrapsychic processes, and the use of reductive analysis; the other, Jung’s more intersubjective perspective, with its teleological view of unconscious processes within a potentially creative psyche.

‘Jungians within the BPC span at least two worlds and speak at least two languages.’

Living in two worlds is not easy and, as is always the case with interpretation, there is a danger that something is lost in translation. However, by staying bi-lingual and holding the tension of the opposites, there is the possibility of finding and playing in the spaces between thoughts and images held within a vivid and living repertoire of theoretical concepts ■

Warren Colman is a training analyst of the Society of Analytical Psychology and the Editor-in-Chief of the Journal of Analytical Psychology.

Helen Morgan is a training analyst of the Jungian Analytic section of the British Association of Psychotherapists, a past chair of the BAP and current chair of the BPC Future Strategies Working Group.

Jan Wiener is a training analyst of the Society of Analytical Psychology and the British Association of Psychotherapists. She is Vice President of the International Association of Analytical Psychology.

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PIPES and personality disorder

By Nick Benefield

PERSONALITY difficulties, their developmental nature, and their often pervasive and enduring impact are at the heart of the different but closely related tasks of mental health, social care, substance misuse and criminal justice services. The relationship between professional intervention and lives in crisis will always be complex and often problematic. Political vision, policy formulation and practice development have not always achieved a coherent approach to the relationship between the presenting problem and the dynamic nature of psychosocial life. There is nothing new in this – I suspect it will always be thus as, in seeking answers to complex problems, we are confronting the unending desire for uncomplicated solutions. However, there is common cause here, shared between psychotherapeutic work and political objectives, to improve outcomes for individuals that pose a challenge to supportive intervention. This is particularly the case in offender populations where the prevalence of personality disorder (PD) is high.

The National Personality Disorder Programme (DSPD) began with a focus on the most severe and complex end of the spectrum of personality difficulties – those offenders who pose the highest risk of harm to others. The programme was an initiative to begin the difficult task of mobilising practice and research expertise to answer the question, ‘What might we do different or better to improve the psychological health of offenders, and protect the public from those whose risk can be functionally linked to their personality disorder?’

There was no strong evidence to guide interventions for those with the most complex needs to reduce risk and improve public protection. The approach taken was to use the best available knowledge to encourage a range of psychological models and novel and innovative programmes of investigation into what works. Treatment of this population, primarily men but also a small cohort of women, has proved challenging, and whilst it has produced much practical learning there is as yet no substantively clearer evidence. In terms of the complex nature of the problems involved this should be no surprise.

Four major issues remain central to the next phase of development.

1. Personality Disorder as a diagnosis is troubled and troublesome. For many, the arrival at a diagnosis is seen as a solution in itself. In reality, a diagnosis of PD offers only a starting point and even then can create a straitjacket to formulation and a treatment/intervention. An intervention plan, based on a well-researched life narrative, contextualised to the environment, is essential for effective engagement with those with poor experience of help.

‘Personality disorder as a diagnosis is troubled and troublesome.’

2. Lack of therapeutic optimism represents the legacy of medical psychiatry and historical prejudice towards those diagnosed with PD. It also reflects that many professional groups working in this field are not adequately trained, experienced and supported to work effectively and safely with complex psychological disorders of this nature.

3. Evidence on efficacy remains elusive and incomplete. The level of good quality international evidence is just too weak and the need for stronger evidence must be seen as a long term goal.

4. The primacy of relational working is still seen as too messy and imprecise an input in a world of tightening specification and a pressure to do only what can be counted. Like Foster Wallace’s ‘water’ anecdote, the significance of the environment in this context is often not recognised.

This final point, to recognise that the dynamic nature of relational work *as environment* is at the heart of a common cause shared by psychotherapy, social, health and criminal justice care. It has simply been ignored for too long. To ‘do environment better’ must now take centre stage. The quality of inter-relational work needed is inseparably linked to the professional capability of the practitioner, their personal attributes and life experience.

Establishing environments (settings) where the psychological can be modelled,

be learnt and flourish is paramount to support the development of specific psychological treatment interventions that will come from a sustained research into effectiveness.

One example to test this hypothesis is the development in criminal justice settings of an environmental model of living, management and care known as Psychologically Informed Planned Environments – PIPES. Related directly to Donald Winnicott’s conceptualisation of the ‘good enough’, these enabling and facilitating environments aim to support emotional and character development. Whilst not treatments in themselves, they provide support to sustain and reinforce the insight and learning gained from specific treatment interventions.

The hypothesis that underpins the concept of a PIPE is:
If the environment through which offenders/patients progress is considered holistically as a setting in which organisation, behaviour, decisions, actions and culture can be informed and planned on the basis of psychological thinking, it will create better social conditions for relating and will improve psychosocial outcomes by supporting post-treatment interventions. It will support intra-psychic stability, and emotional and social development.

Psychologically Informed
Requires that the training, skills and experience of staff groups, and their way of thinking about the meaning of behaviour and relationships, is focused on understanding of the interactive nature of emotional and psychological life in which the individual, the other person, and the group all play a part. Attention to all aspects of relational exchange is crucial.

Planned Environment
‘The environment’ includes all the external conditions, covering both individual and social relations, which we are required to adapt to or manage. This can be more or less supportive of positive emotional management of ourselves and others. In the context of institutional or group life we can plan how the environment operates so that it facilitates learning and growth, rather than reinforces emotionally destructive behaviours.

In the context of a pathway of treatment and rehabilitation, enabling environments will provide the following features:

- consistent and reliable relationships: *to support the principle of secure attachment in people for whom this capacity is generally fragile.*
- support for managing the appropriate development of psychosocial skills: *to sustain new consciousness of emotional and cognitive learning.*
- reflective interactions and responses: *to enable the emotional and psychological processing of experience.*

- protection from unreasonable levels of impingement: *to protect against prolonged or high levels of anxiety beyond the capacity of the individual to manage.*
- facilitation of the capacity for reflection: *thinking and action as opposed to feeling and reaction.*
- living arrangements and activities: *that are supportive of individual wellbeing and pro-social living.*
- Non-institutional structures and expectations: *to support thinking and emotional management in patients/offenders and the staff groups.*
- a setting in which actions are informed by conscious psychological thought in planning and acting in the environment: *thereby establishing ‘smoother’ management of psychological/emotional life.*
- support for challenge to any lack of ‘fit’ between contextual realities and therapeutic need: *to support reality testing and acknowledgement of the limitations of institutional living.*
- conscious, active and authoritative leadership: *to protect the boundary from the disruptive impingement of the conditions for psychological thinking.*

Whilst these environmental conditions are comprehensive, only a ‘good enough’ situation is required to create the experience that the environment (relationship with staff and the setting) is facilitative and enabling rather than lacking in emotional understanding, or is being actively destructive. In effect, what is sought is a sense of good enough ‘fit’ between the person and their world.

‘These environments aim to support emotional and character development.’

There is nothing new here other than the mobilisation and location of the right skill in the right place. With public sector financial pressures, the criminal justice system is under particular economic constraint. The role the NHS can have in supporting these vital areas of work needs a shared strategy by health and criminal justice services to provide the conditions necessary for individual and social change. The essential role psychotherapy must play in developing and supporting these conditions is now more important than ever ■

Nick Benefield is Head of National Personality Disorder Programme, Care Pathways Branch, Mental Health Division, in the Social Care, Local Government and Care Partnerships Directorate of the Department of Health

Frequency of sessions: an arbitrary criterion?

By Jeremy Holmes

WHEN IT COMES to frequency, the standard classification, and with it professional psychoanalytic status, runs as follows:

- 4+ sessions a week: psychoanalysis (gold standard)
- 3 sessions a week: psychoanalytic psychotherapy ('good-enough')
- 1-2 sessions per week: psychodynamic psychotherapy ('low intensity' ')

Classifications ideally should, as Plato put it, 'cut nature at the joints'. Those that don't have their uses, but are essentially arbitrary and may reflect vested interests rather than fundamental differences. The key features of psychoanalysis remain contested (Tuckett 2011), but most would agree that they include working with transference and making interpretations rather than suggestions and encouragement. In psychoanalysis, frequency of sessions is therefore an arbitrary criterion in that there is nothing intrinsic to frequency that makes it quintessentially 'psychoanalytic'. Five times a week therapies may function mainly as supportive, while once-weekly therapy can be transference, interpretive, and 'mutative'. In complex cases, duration of therapy correlates with better outcomes than briefer therapies, but this reflects length of therapy over time, not session frequency (Leichsenring & Rabung 2011).

An argument and its resolution

During the course of a heated discussion with a group of metropolitan-based psychoanalysts about session frequency, I vigorously defended the above views, arguing that what counted as 'high' or 'low' intensity depended on how frequency is calibrated, and that in psychoanalytically-deprived areas money-shortage and distance mean that twice weekly can seem like a great deal. One interlocutor then felicitously moved the debate on from fractious rivalry with the suggestion that a differentiating feature of low intensity therapy is the greater salience of loss, and that this may present special difficulties for both client and analyst. A theoretical rather than an arbitrary aspect of session frequency had come to the fore, making the

conversation immediately more focused and collaborative.

Fortnightly

I was reminded of this in the following fictionalised clinical example.

Adam had been admitted to hospital several times with cannabis-induced psychosis. An impecunious session musician, he could afford no more than fortnightly sessions, and negotiated time-limited therapy of 50 sessions spread over two years. After a year of treatment things were going well: he had married his partner, and they were excitedly expecting their first child. Adam remained however also wedded to his cannabis, but had moved from oscillating between abstinence and binges, to seeing that low-level regular use was probably his most realistic hope, thereby liberating himself from a simplistic equation of abstinence with 'good', and smoking with 'evil'. During one session, he spoke of how he, his brothers and their friends, other sons of servicemen fathers, were all cannabis-smokers, and how he had gained comfort from knowing there was always resin in his pocket should he need it.

As he spoke I found myself unaccountably thinking about what it would be like to work five times a week with Adam. Following the principle that free associative thoughts that arise in therapists' minds should be put to interpretative use, I linked this thought with (a) Adam's 'absent' parents in childhood (the eldest of five children, at 15 months he had 'lost' his mother when the next baby arrived, while his father, like other service fathers, was away for long stretches); (b) a recent break (leaving a month's gap between sessions); and (c) the impending birth which meant that Adam was about to 'lose' exclusive closeness with his wife.

Trying to pull this together, I said: 'So cannabis is a "pocket parent", tiding you over the absences throughout your life, including now,' adding: 'you know that if you were in "proper" psychoanalysis you would be coming five times a week. I wonder what that would feel like?' Adam replied with the hope that when his wife had the baby she would in time have a new focus, freeing him, once they had settled into their new life pattern, to pursue his work as a musician; and that the gaps between sessions, while difficult at times, also gave him a sense of resilient independence.

Reaction-formation to the trauma of his mother's too-frequent pregnancies were clear in this glass-half-full response, as was his yearning for but fear of intimacy. Nevertheless this vignette underlines how it is not so much the concrete arrangements of therapy (session frequency) that matters, as their psychic meaning; that resilience is to be valued as well as regression; and that, as with a 'rest' in music, absence may be as important to the therapeutic process as the sessions themselves.

The double session

This leads to a practice I have recently developed: the double session. In my semi-retired state, I see clients on only one day per week. Many come from far away and in my rural area public transport is non-existent. Four hours' driving for a 50 minute session is a big investment of time and fuel. I have therefore experimented with offering these distant clients two back-to-back sessions, weekly or fortnightly, punctuated by a ten-minute interval. At first I was worried that we would run out of things to talk about, and that client and/or I would become fatigued. In fact it appears to work well. There is less feeling of rush than is sometimes the case with once-weekly meetings. The pause after session one enables client and therapist to retreat into themselves for a moment, and fosters a reflexive, mentalising perspective. In session two we can think about what was talked about in the previous hour, just as one might with previous day's session

in conventional analysis, thereby still 'dreaming the session'.

Thus, despite an unconventional arrangement, psychoanalytic culture is maintained. It suggests too that sufficient frequency does indeed have a theoretical basis in that it brings loss, and rupture and repair, within the 'area of omnipotence'.

Conclusion

Innovative approaches to delivering psychoanalytically informed therapy are major issues for organisations such as BPC. Skype supervision and therapy, and/or 'shuttle analysis', are the rule where analytic expertise is in short supply, and where geography or level of economic development require it.

I have suggested: (a) that there can be therapeutic congruence between 'low intensity' therapy and client need, and, if appropriately interpreted this can be mutative, not necessarily collusive or second-best; (b) a double session at weekly or fortnightly intervals can efficiently replicate some of the intrinsic as opposed to arbitrary features of more intense psychoanalytic therapy.

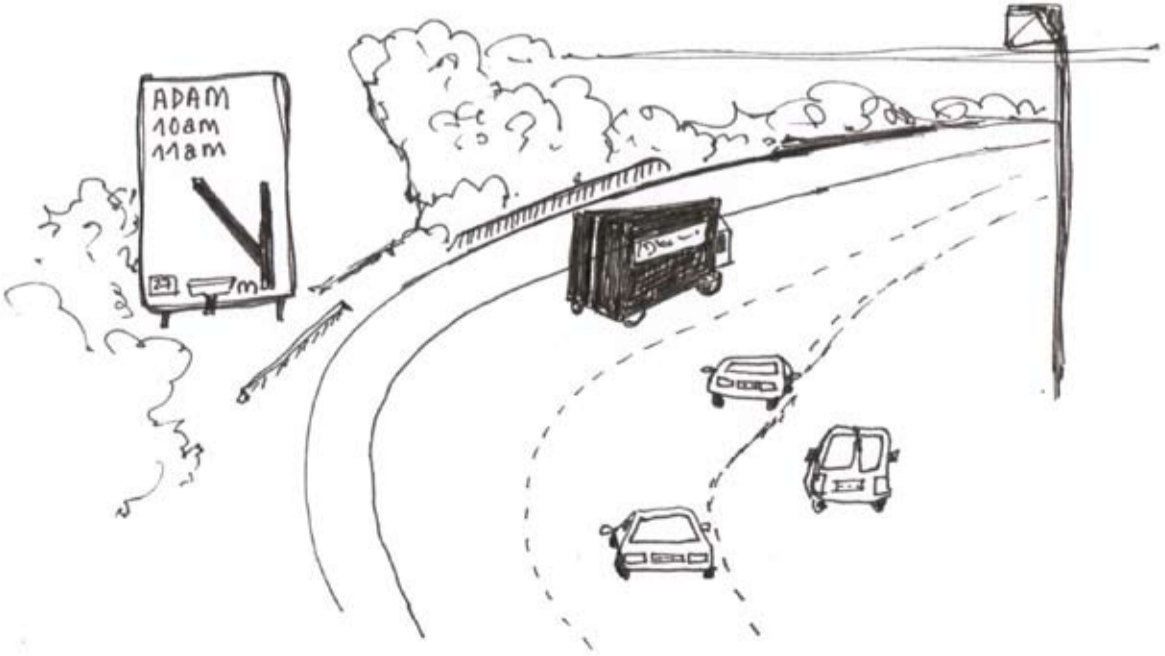
Jeremy Holmes, MD is a BAP member, and Visiting Professor of Psychotherapy at the University of Exeter. His latest book is Exploring In Security: Towards an Attachment-informed Psychoanalytic Psychotherapy (Routledge 2009).

1. Note that in body-derived metaphors, 'low' typically denotes inferiority, 'high' superiority; but note too that if to be depressed is to be 'low' in mood, the Kleinian 'depressive position' as a mark of psychological health runs counter to this.

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Where love and science meet

By Janice Cormie

Children's charity Kids Company hosted an intriguing conference, 'No Bullshit: What Still Matters to Every Child', on 28 June.

THE CHARISMATIC and always colourful Camila Batmanghelidjh issued a call to arms to the assembled care workers, teachers and child therapists. Poverty and maltreatment of children, she said, are due to a lack of imagination. Politicians are not malicious; they simply don't think about vulnerable children. And it is important for everyone to work together – a recurring theme in the psychotherapy field, we at *New Associations* are finding, and one reflected her declaration that 'the work of love and the work of science are about to meet.'

The first of the impressive roster of speakers to take up this challenge was Ian Goodyer (Cambridge), who predicted that the structure and function of the mind will be revealed within the next twenty years, altering the paradigm of how we think about the psychology of mind. Goodyear, part of the mental health and neuroscience network (Cambridge and UCL), compressed several years' worth of findings on the neurobiology of mood and antisocial behaviour in adolescents into form suitable for an audience doing its best to wrap its collective and partly non-scientific head around this wealth of information.

After a brief look at the psychopathology of violence, he described the neural maturation gap, the period during adolescence during which the frontal brain development has yet to catch up with the limbic system – the period when most mental illnesses are seen to emerge. Other recent work on functional brain networks uses computation models to map changes in brain networks, for instance in adolescents diagnosed with schizophrenia.

Eamon McCrory, of UCL and the Anna Freud Centre, followed up with a quick look at neurobiology and the genetics of childhood maltreatment. He brought the case of 'Tom', one of two brothers sharing a background of parental substance abuse, domestic violence, and foster placements. Tom had developed conduct disorder in adolescence, whilst his brother had managed a more normal life trajectory. How do environmental factors influence genetics and neurocognitive factors?

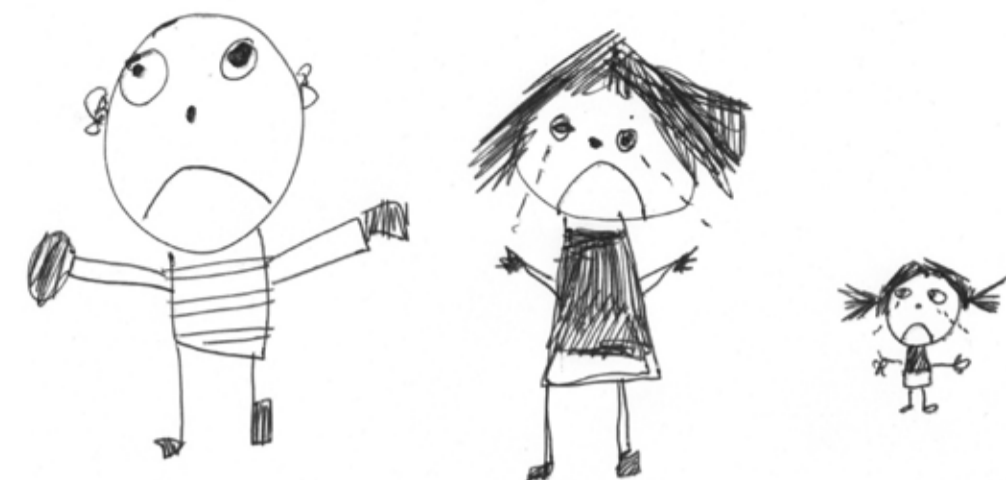
Studies suggest that maltreatment leads to a series of neurocognitive changes that are adaptive in the short term, but are ultimately maladaptive, increasing the risk of later mental health problems. Also, biological differences mean that different children will respond in different ways. There are no particular genes for mental health disorders, but there are genetic variants. Consider the serotonin transporter gene, associated with depression. In combination with a risk environment of maltreatment, a 'risk genotype' leads to a greater likelihood of developing depression symptoms. (On a more optimistic note, it has also been found that regular contact with a trusted adult moderates this effect.) So Tom may have carried the genetic variants (polymorphisms) that put him at greater risk of a poor outcome

McCrory also sketched out findings that abused children more readily recognise angry faces, and become hypervigilant – a constant scanning for threats that diverts brain resources from other areas, such as being able to concentrate on tasks. Other studies point to structural differences in specific areas of the brain in women who have experienced sexual abuse, depending on the age at which abuse occurred.

He added that more work needs to be done on resilience and recovery. Future research, he hopes, will help identify neural markers of resilience.

'More work needs to be done on resilience and recovery.'

Pasco Fearon, also from UCL, reported on the collaboration with Kids Company, which now has its own neuroscience lab on the premises. He confessed to a sense of being on the cusp of 'an exciting period informed by neuroscience'. Researchers are beginning now to map out attachment in these terms. He outlined the different patterns of attachment (secure, avoidant, resistant, disorganised, disinhibited) and highlighted disorganised



attachment, which risks the worst developmental outcomes. He suggested two possible intervention strategies: the psychotherapeutic model, which would involve working with parents' attachment histories and with the relationship (e.g. parent-infant psychotherapy); and using supportive networks, home visiting, and sensitivity-based interventions such as video feedback. In any case, Fearon said, early intervention is vital to improve the quality of attachments.

'An exciting period informed by neuroscience.'

The Tavistock's Alessandra Lemma ended the scientific part of the morning, dealing with mentalizing trauma. She recommended bringing a psychoanalytic perspective to any work which entails being in a relationship with someone needing help. A trauma, she said, is an attack on our attachments; it is experienced as a breach in the quality and felt security of them. Trauma also undermines the psychically integrating function of narrative, with a breakdown in the capacity to reflect on and represent lived experience.

She offered some suggestions for working with sufferers of trauma, including placing less emphasis on techniques and more on the way of thinking about the therapeutic process and the therapist's stance; adopting a mentalizing stance, focusing on the patient's mind rather than on the event; developing a narrative about the trauma, giving it conscious and unconscious meanings; and working with the past in the present, helping the patient develop a perspective on the past by resolving current experience.

The audience members were then handed a West African drum each, and led through a revivifying lesson in bass and tone drum techniques which put a new spin on the concept of 'working through'. The effect on 300 or so social workers and therapists of sustained drumming more or less in sync gave physical expression to the sense, pervading the conference, of

the energy and potential of young people; a theme vigorously and movingly explored in a performance by Chickenshed Theatre. 'Crime of the Century', inspired by the real-life murder of a child in 2008, portrayed the circumstances around adolescents' descent into youth gangs and knife crime.

It was a hard act for the Tavistock's Frank Lowe to follow, but he brought the audience's attention back to the legacy of maltreatment in adult life. Children do not simply grow out of maltreatment, he reminded us. The degree of its impact on adult life is influenced by protective factors, such as good-enough care, secure attachment, even class. But the legacy of maltreatment is more common than is assumed. Defence mechanisms may emerge only later in life; it can produce self-sabotage or relationship problems; and the legacy may persist across generations. Maltreatment by primary carers during the early years leads to an impaired sense of autonomy, a stultified development of self, and of cognitive, emotional and relationship capacities. Lowe's case examples illustrated the frustrations and difficulties for clinicians in working through trauma with their patient, and he emphasised the importance of giving them personal and professional support.

The rest of the day was packed with personal stories and breakout sessions covering aggression, resistance to learning, and problems of trust. After several heartfelt numbers by singer-songwriter Judith Owen, someone who has successfully turned her depression into creativity, Camila resumed the podium. She closed the day with the acknowledgement that the basic act of respect and care for the patient is the gift that practitioners have: their compassionate witnessing presence. They communicate to the child that their 'credit rating' ('respect') is not in the balance. The vision, Camila said, is of a community of carers to restore respect and dignity, not only through caring, but through demanding political change ■

Janice Cormie, the BPC's head of services, is not normally known for drumming.

Building a child psychotherapy community

By Beverley Tydeman

MOST OF THE psychotherapy and counselling professional bodies, who had been preparing for statutory regulation with the Health Professions Council (HPC), are now thinking about the way forward, given that this national framework for regulation has been shelved.

As Chair of the Association of Child Psychotherapists (ACP) for the last three years, the experience of working with the other professional bodies towards HPC regulation has led me to think about how, as a small profession of 858 members, we can best position ourselves in the current landscape of child and adolescent mental health, as well as in relation to other psychotherapy bodies. It seems to me at this point that the ACP cannot operate in isolation and we need to link up, primarily, in order to deal with representation to government.

Our aim seems to follow one of the strategies that the BPC has in mind, i.e. to become an umbrella organisation that represents all psychoanalytically trained professionals. We have been in preliminary talks about a closer association with the BPC, and at this point it may be helpful to give some background to our organisation.

As a regulatory body our principal aims are to monitor, develop and protect training standards; maintain standards and ethics within the profession; maintain the continuing professional and clinical development of our members; increase children and young people’s access to psychotherapy within public services, particularly the NHS, schools, hospitals, the third sector, as well as independent practice; and inform the public and other professions about the role of child psychotherapy in child and adolescent mental health.

The ACP Training Council sets standards for the professional training through quality enhancement and accreditation of the different training schools: the Birmingham Trust for Psychoanalytic Psychotherapy, the British Association of Psychotherapists, the Northern School of Child and Adolescent Psychotherapy, the Scottish Institute of Human Relations, and the Tavistock and Portman NHS

Foundation Trust. Training used to be offered by the Anna Freud Centre but their last graduates completed their training around 2009.

The ACP supports academic and professional development through its annual conference, scientific programme, journal, bulletin/website, special interest groups, and research committee, providing various forums for members to join and meet and exchange ideas. This also involves a network of regional advisors, so that members across the country can get together locally to feel linked up. More recently, we have been thinking about how we project our image in the modern mental health world and communicate with those we need to influence.

Some brief history

During the 1920s, Melanie Klein and Anna Freud began to explore how Freud’s discoveries with adult patients could be extended to help troubled children and promote their development. Around the same time, the child guidance movement was gaining ground in the UK, although there was no specific child-focused training for the professionals doing this work.

The Provisional Association of Child Psychotherapists (Non-Medical) was created in 1949, and in 1951 it became the Association of Child Psychotherapists, with *non-medical* being later dropped in 1972. A new profession had been established, with its own professional body, training council and rules, providing an organisational umbrella for the different training schools.

In 1974, professions allied to medicine were offered the choice of joining the NHS or the education services. The ACP chose the NHS. In the mid-1990s, child and adolescent psychotherapists were recognised as core members of Child and Adolescent Mental Health Services (CAMHS).

In its early days the ACP could best have been described a family organisation, with many members knowing each other by sight if not personally, and the ACP secretary working from home. The *Bulletin* first appeared in published form in May 1991, while the *Journal of Child Psychotherapy*, started in 1963 and produced in-house, was moved

to Routledge in 1994. By 1995, the Association had moved to its present location in West Heath Road, London, and employed a full-time secretary.

Child psychotherapy

Individual long-term or intensive work is only a tiny fraction of the work load of the modern child psychotherapist in a CAMHS team. We also apply our framework of thinking to work with parents, families and carers and to training and supporting other professionals who work with children, young people, parents and families to ensure a deeper understanding of the child’s perspective.

In our relationship-based work, when there is more than one person in the room, the configuration of treatment includes interventions that will best serve the children’s mental health – a goal that involves a constant effort to balance the parent’s and the children’s needs, because parents cannot listen to their child when they themselves feel in urgent need of being listened to.

‘Our Big Society prefers a happiness and well-being agenda.’

Child psychotherapists also offer school and hospital-based assessment and therapeutic services, including within neo-natal units, or child neuro-developmental teams. A more recent area of specialist work is assessments for the family courts, usually seen as the territory of child psychiatry or psychology, but now increasingly including child psychotherapists who are proficient in assessing the interactions and attachment relationships between infants, children and their parents.

Reality matters

Many of us are worried about cost improvements and service redesign in the NHS, where in several localities around the country CAMHS services have had their funding cut and jobs, particularly when senior people retire or resign, are deleted. We are also concerned about the funding budget for training child psychotherapists, and are expecting the trend of some decline in the number of funded posts for trainees to continue.

This leaves our profession very concerned about its future in public service, given the current drive for throughput, outcomes and reducing costs by commissioning workers offering children’s IAPT. Those who work alongside us know that we are not one-trick ponies, that we are solidly reliable, courageous colleagues, who are research-orientated, but not overly impressed with purely NICE-approved treatment approaches.

We have to justify our service activity and increase our face-to-face contacts. Where is the culture of meaningful emotional contact with the people we see? The pressures we are under work against creating relationships that have some depth of understanding and meaning, and can be seen as being in the service of defensive practice against risk.

Within our clinics we take on the cases that no-one else wants – those who have exhausted everyone else – but we are tasked with containing those hard cases that leave a residue within any worker who has the courage to work in-depth, making emotional contact with real mental anguish, vulnerability, sadness, despair – intolerable states of mind that our Big Society disowns. Why? Because it prefers a happiness and well-being agenda, where any family difficulty can be quickly assessed and ‘signposted’ to six sessions – that should do it!

Future strategy

In the face of this, as a profession whose future feels under threat, we are turning to other professional bodies with like-minded views. What we recognise is that there is a lot of work to do in redefining ourselves and presenting what we do in ways that truly reflect our breadth and depth of training and our core values.

We have not been active enough in developing our public relations, having more public events and linking up with other bodies through joint conferences. As well as forging a link with other psychoanalytic bodies, we need to develop a ‘child psychotherapy community’ with others trained specifically in working with children and adolescents, and we continue our dialogue with the Child Faculty of the UKCP. As a small profession there is a limit to the energy and resources of our members who give their time, most often after the day job, working well into the night and over weekends.

A new, closer association with the BPC makes a lot of sense, particularly as far as representation to government is concerned. At our recent AGM our members were overwhelmingly in favour of exploring this further. However, it is complicated, in that we are ourselves a long-standing self-regulating body, hence, not like the other member institutions of the BPC.

We are not ‘up for’ any kind of ‘merger’ or merely becoming a child section member. We need to maintain our own regulatory function and ‘brand’ and find a way of possibly sharing some overlapping functions, such as CPD procedures, shared conferences, EFPP membership.

We have the mandate from our members to take this further and will need to use our creativity to find some organisational means of accommodating our joint aims ■

Beverley Tydeman is Chair of the ACP
www.childpsychotherapy.org.uk

Minding the markets

By David Tuckett

Can psychoanalysis, as an interdisciplinary science, help to produce understanding and better policy to create a more sustainable financial system and, if so, which ideas are useful?

THE CATASTROPHIC financial events of 2008 and their ongoing consequences will be felt for years and years. Greed, corruption, trade imbalances and regulatory mistakes are all frequently cited as causes. But they do not create behaviour on their own. Rather, at the heart of the crisis was a failure to understand and organise markets in a way that adequately controls the human behaviour financial trading unleashes. What happened in 2008 and the period before required many judgements made by many human beings who were subject to human psychology.

The understanding we have developed about unconscious phantasy, the states of mind I call divided and integrated (but which in the psychoanalytical literature are those of the depressive and paranoid-schizoid positions) mourning and working through as well as the ideas about group thinking that Bion captured with his notion of a basic assumption group, if elaborated and substantiated in a rigorous way, have an enormously important and exciting potential.

As an illustration, I conducted an interview study with 52 money managers investing \$500 billion in global markets. These are the people who decide what to do with ordinary people's savings and pension contributions so that they grow appropriately for when they are wanted, or who manage the assets of very wealthy individuals, foundations, states and local authorities, etc. They can buy, sell or hold all kinds of securities. In their interviews they told me in detail about examples of their daily work.

Such interviews can't reliably tell us why each person decided what they did. But interviews can be used to describe the context in which decisions are made, and allow some reflection on the implications. I found two features of the context in which financial decisions are made by professionals quite striking: they are characterised by uncertainty and information and ambiguity, on the one hand, and by the expectation everyone can be exceptional on the other.

Uncertainty and information ambiguity are built into the nature of financial

assets, which means markets in them are in at least three respects very different to those for other goods and services:

1. Their value is uncertain, changing and inherently volatile. *This fact engages twin emotions in all those who form what is a dependent relationship to assets – those of great potential excitement about gain and anxiety about loss.*

2. They are abstract entities and working out their value depends on future expectations and assumptions. *This fact means that there are significant limits to how far it is possible to value assets and to respond to news and price changes simply by calculation of subjective probabilities. Emotions and judgments (guesses about the future) are involved at every turn. Price change also tends to function as a signal of 'something uncertain happening', generating distrust and the suspicion that others might know more. Distrust is marked given the inherent information asymmetries involved.*

3. Performance in trading them is hard to evaluate. When was success skill, and when was it luck? What behaviour gets rewarded? What does not? *These facts mean that there is continual anxiety in the agency relationships between managers and their clients (and superiors) and ongoing scope for considerable confusion about how well any one is really doing, which creates feedback, time-experience and learning issues, as well as much emotion.*

‘Nearly all the agents in the market are telling stories.’

The context of exceptionality is also important because managers are mostly employed (indirectly by us or our pension providers) on the understanding they should be and can be so, which means that they must continuously seek exceptional opportunities. To do this they need repeatedly to make the claim they are at some form of information advantage, with the consequence that they are continually concerned the opposite may be the case.

The context just described makes it clear



they have a very interesting, challenging and inherently emotionally conflicting job. There are very rarely any obvious answers, and every time they think they are at an information advantage it could turn out they are at a disadvantage. Conflicts – and specifically those between the risk of reward and the risk of loss and ambivalence about trusting others – are endemic and urgent. The implications of all this for thinking about financial markets are, I believe, far-reaching.

‘There is continual anxiety in the agency relationships between managers and their clients.’

In the decision-making context professional investors find themselves, it is rarely obvious what they should do. The standard economic mantra, that they should consistently maximise utility by building a portfolio to optimise risk and reward under constraints and using probability theory, doesn't get them far. It is usually logically impossible to make the necessary commitment to action to purchase financial assets – which involves you and your clients making yourselves dependent and potentially vulnerable on what is an imagined future relationship – on probabilistic reasoning alone. Neither, with its contrast between rational and irrational behaviour, does standard behavioural economics help very much. All this does not mean you make decisions irrationally – far from it. *To get the conviction to act you develop the best reasons you can, and support them by telling to yourselves and to others 'convincing' stories you believe to be true about the underlying fundamentals of what is going on.* I actually analysed over two hundred stories told to me to understand something of their common and crucial features.

For example, one interviewee given the pseudonym George Monroe described

buying stock in a company I called *My Utility*. Its dynamic management team had acquired other companies and was considered by Monroe to have exceptional ability. His theory about the facts at his disposal was that although the way their accounts were presented had some complications which were hard to see through, this new management would cut costs and made the acquisitions work. If true, his calculations suggested the stock was under-priced: 'There was a valuation discrepancy between this company and most of the other peers because the business model was a little bit different.' They had a training business and a small marketing business, which some investors judged might be more volatile, and therefore less predictable and therefore deserving of a lower multiple. 'My argument was this management team was very good' and that once they had brought in changes the shares would rise along with future expectations.

In fact, on close inspection we can see that nearly all the various agents in the market are telling stories to themselves and others – to manage the meaning and emotional conflicts in the situation and to create enough belief in their analysis to allow them to commit or to get others to do so despite ambivalence.

A great deal of academic work over several disciplines has elaborated how stories, narratives, are uniquely suited to this task, as they are the mechanism human evolution has developed to create a sense of belief, trust, coherence, meaning and truth in situations where data is incomplete and outcomes far from certain. We tell stories to give meaning to what we do. And as psychoanalysts we think these stories are based on unconscious phantasy.

Most significantly, if we agree future valuations are stories supporting rationales, then in a sense we need to think of financial markets differently. They might usefully be conceived as the best device we have for arbitrating the truth of the available stories about the underlying fundamentals at any one time. Moreover, the stories which are 'felt' to be most plausible change according to

News

Hanna Segal

The psychoanalytic world has sustained a great loss in the death of Hanna Segal on 5 July.

Hanna Segal, born in Poland in 1918, was one of the most distinguished psychoanalysts of our time. Before the second world war she moved with her family to France, but in 1940 they had to flee the German occupation to England. There she completed her medical studies and, having discovered the work of Sigmund Freud, went on to train in psychoanalysis. Her analysis and supervision with Melanie Klein was to greatly shape her own thinking, and led to her highly influential *Introduction to the Work of Melanie Klein* (1964).

As Daniel Pick has written: ‘Over the last fifty years, Segal’s many papers, essays and books have explored the nature of her own psychoanalytic experience and made important conceptual contributions, for instance regarding the nature of

unconscious phantasy, the clinical relevance of the death instinct, and the psychic consequences of the capacity (or lack of it) to use symbols. She has investigated the wider applications of psychoanalytic ideas in diverse fields, notably aesthetics, politics and literature. In the 1980s she was a leading figure amongst a group of British psychoanalysts who sought not only to think critically about the mad ‘logic’ of nuclear war but also to speak out and protest.”¹

To the delight of many of her colleagues, Hanna was invited to appear on *Desert Island Discs* in 2006. Her choices included Edith Piaf’s ‘Les Blouses Blanches’, Paul Robeson’s ‘Ol’ Man River,’ and the second movement of Mozart’s String Quartet in C Minor ■

1. Daniel Pick, Lyndal Roper, Hanna Segal, ‘Psychoanalysis, Dreams, History: An Interview with Hanna Segal’. *History Workshop Journal*, No. 49 (Spring, 2000), pp. 161-170

Minding the markets

a variety of factors, which are strongly influenced by the cognitive and emotional processes that cause stories to be treated as if they were true. Which stories are ‘felt’ to be true can change much quicker than underlying fundamentals – perhaps explaining why markets are much more unstable than the fundamentals would suggest.

Because they are markets in stories, financial markets can then rather easily be viewed as at risk from several phenomena about which psychoanalysis has a great deal to say:

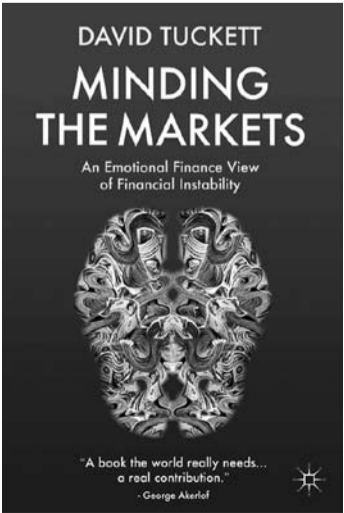
- 1. Myths of exceptionality (for example about the *phantastic* objects of the kinds pursued in bubbles)
- 2. *Divided states of mind* (Splitting the natural anxiety about loss away from excitement about gain, causing a lack of balance)
- 3. *Groupfeel* (making decisions based on wanting to feel comfortable with what others are doing rather than thinking for oneself).

These three factors can predispose financial markets to serious instability of the kind we witnessed in recent times. Moreover, they mean that capital markets may not do very well in allocating capital to the most productive sectors not in looking after savings – which are meant to be their two functions. The three factors also create unstable feedback effects which influence the way

the market is organised– for example by making the pursuit of exceptionality seem more ordinary than it is. More awareness of how markets are dominated by stories, and discussion of the underlying issues, may offer some scope to build protection. If this is so, then the core concepts of psychoanalysis I have mentioned need to be much more widely understood, developed and used. There are signs that this might happen ■

David Tuckett’s new book Minding the Markets: An Emotional Finance View of Financial Instability *was recently published by Palgrave Macmillan. In it he elaborates the ideas in this article and discusses relevant policies to make markets safer.*

<http://www.palgrave.com/products/title.aspx?pid=507522>



Shaping our Future

The BPC Trainees’ Association annual conference on 7 May, ‘Shaping our Future: Trainees and the BPC’, looked at the current work of the BPC’s Future Strategies working group (see Issue 4 of *New Associations*).

More than twenty students from different training organisations came together to hear from Julian Lousada, Chair of the BPC, and Helen Morgan and Alexa Walker, Chair and Vice Chair of the working group, who gave the context to the work of the group and summarised the proposals being made. The event was an opportunity to find out directly about the proposals as well as to discuss the future of our profession in decades to come.

The conference paid particular attention to the task of redefining and realigning the profession, including an attempt to draft a definition for the wider psychoanalytic / psychodynamic professional community The current definition based on little more than frequency is inadequate, and the aim is to replace it with one which provides an intellectual and clinical basis for our collective identity. A draft presented at the conference included reference to the central role of the unconscious, psychic damage and the place of infancy, the use of the transference, and therapy as psychic exploration rather than the development of ‘strategies’.

This question of whether and how to clarify the profession that the BPC seeks to represent and build across the UK (not just London!) is one which will be further discussed at the Strategy Conference in October. Three representatives from each of the twelve BPC member institutions will come together to consider proposals being made by the working group. The Trainees’ Association has also been invited to send three representatives, with the same voting rights as other delegates. We would like to hear from any trainees willing to take on this role (contact either Lee Smith at smith-lee36@sky.com or Liz Ford at lizzieford@talk21.com).

Other key questions included whether, and the extent to which, the BPC should open up its membership to new member institutions that focus exclusively on trainings that are at a frequency of less than three times a week, but whose ethos falls within the agreed theoretical formulation. The relationship between the BPC and its member institutions was discussed, including any future role it might play in regulating the profession. Finally, we discussed the implications of the BPC becoming an organisation based on individual membership, rather than an organisation of organisations. The change from a membership of a dozen organisations to over a thousand individuals would have consequences not just for the role of the BPC, and its relations with the different training

organisations, but also potentially for our relationship with our own organisations.

If you want to participate in the debate, please go to the online Trainees’ area of the BPC’s website. Contact the BPC office (mail@psychoanalytic-council.org) if you need your login details ■

Coming soon: A Dangerous Method

David Cronenburg’s much-anticipated film about the relationship between Jung and Freud will open in cinemas across the UK and Ireland on Friday, 10 February 2012.

Based on actual events, *A Dangerous Method* takes a glimpse into the turbulent relationships between Carl Jung (Michael Fassbender: *IngLOURIOUS BASTERDS*, *X-MEN: FIRST CLASS*), Sigmund Freud (Viggo Mortensen: *EASTERN PROMISES*, *A HISTORY OF VIOLENCE*, *LORD OF THE RINGS* trilogy) and Sabina Spielrein (Keira Knightley: *NEVER LET ME GO*, *ATONEMENT*, *PRIDE AND PREJUDICE*), the ‘troubled but beautiful young woman’ who comes between them. Into the mix comes patient Otto Gross (Vincent Cassel: *BLACK SWAN*, *MESRINE*), determined to push the boundaries.

In this exploration of sensuality, ambition and deceit set the scene for the pivotal moment when Jung, Freud and Sabina come together and split apart, forever changing the face of modern thought ■

View the trailer at <http://adangerousmethod-themovie.com/>



From economics to psychoanalysis and back

By Anca Carrington

WHEN I DECIDED to leave my career in economics to train in psychoanalytic psychotherapy, I little knew how my relationship with economics would continue to develop. We were not on speaking terms for a while, with all my economics and statistics books relegated to the loft, as I made room for Freud, then Klein, then Bion.

The exploration in analysis of my feelings about this change combined with external circumstances to help me reintegrate, gradually, the old with the new. The temporarily ostracised books began to descend and find their own place in the study, and in my mind, as they helped me think about my professional journey in preparation for a presentation I gave at the 'Psychoanalysis, money and the economy' conference last year, organised by the Freud Museum and Birkbeck.¹

It seems that unfinished business remains, as I return to thinking about economics and psychoanalysis and the way in which they can and do illuminate – and indeed obscure – each other.

The magnitude and speed of the recent changes in the global economy are such that it is virtually impossible to escape the need to recognise that economics matters to us all and that we all are part of 'the economy'. The often-cited laws of supply and demand quietly carry us along in a complex web of interdependence, in good times as well as in bad.

These relatively recent changes have had an impact on the profession of psychotherapy – training and practice alike. When I refer to training I have in mind both the training institutions (supply) and trainees (demand), and by practice I mean both therapists working in the NHS and privately (supply), as well as patients (demand).

Economics textbooks tend to start with an explanation of how supply and demand interact to achieve and sustain equilibrium. The idea is that, for any good or service, there is one combination of quantity and price that satisfies both sides at the same time. It is not for another

few good chapters that one learns about the reality of how unstable and volatile this outcome is. In a sense, equilibrium is to market changes what 'normality' is to pathology. Understanding one helps with comprehending the other, but that is little guarantee that equilibrium (or normality) becomes available as a result.

'Economics matters to us all and we all are part of "the economy".'

Training providers find themselves in a tense market place, expected to balance professional values with budgetary realities. More trainees mean more income, but there is always the consideration of quality. These willing apprentices are, after all, paying customers entitled to value for money; but what is paid for is the opportunity to learn, not learning itself. The kind of knowledge Bion denoted by K is a complicated affair, within, around and beyond the boundaries of the curriculum.

I recently took part as a student member of the panel considering the revalidation of a well-established Tavistock course.² One of the questions was whether the course prepared me well for future employment. Given the pressures under which the NHS finds itself, I do not think that it will be easy to find a job at the end of my training. The uncertainty is high, and real. Nevertheless, my answer was 'Yes', because what I feel that I am gaining from my training is more solid and longer-lasting than a set of skills in which a potential employer might be interested. When I think of my training I do not only have in mind lectures, supervision and tutorials, but most of all the experiences of being a patient and of being with a patient, two separate but deeply interconnected journeys of discovery. Through this thoughtful mix of clinical experience and careful theoretical explorations, the training gives me a way to think, to reflect, to understand and to contain the feelings that emerge

when all these are not possible. This is an anchor onto a set of values and a grounding that will stand me in good stead through the current economic crisis and beyond, through the ups and downs of the economic cycle, and of my life. In other words, what I feel I am gaining is a thoughtful way of recognising and maintaining professional – and human – integrity, in good times and bad.

The reality of the market-place is impacting with similar force upon practitioners. NHS psychotherapists are closer to the pressures inherent to public funding: accountability, value for money, transparency and efficiency; all of this while trying to maintain a fundamental psychoanalytic stance. In this context change has more the quality of imminent threat rather than of random change, because of a degree of buffering that longer-term contracts and commissioning provide. Psychotherapists working in private practice are more vulnerable to, and possibly more aware of, the short-term fluctuations created by existing patients deciding to stop therapy, or by potential patients unable to start in the first place. And many experience both sets of pressures.

'Patients will respond differently to the changing market conditions.'

Some will feel inspired to innovate and diversify; others might find themselves in danger of compromising. In either case, the mast to which they can tie themselves, like Odysseus, is that of the core values of truthfulness and meaning, tolerance and reflection that define our work.

On the demand side, patients will respond differently to the changing market conditions, seeking more therapy if they regard this as a necessity, or less of it if they regard it as a luxury at a time of hardship.

'The markets' have become the current-

day version of the omnipotent and moody Olympian gods, with policy changes the new anxious offerings mere mortals can make. After every economic policy announcement, experts wait with bated breath to find out how the markets will respond: Will they be appeased or enraged? For how long? What else will they demand? Or when? For instance, Radio 4's *Today* programme always manages to find an economist who thinks that the interest rate should and will change, and one who believes, or at least argues, the opposite. Which makes for early morning entertainment, but also shows the limits of our understanding in this area. If one single mind (one's own!) can be so difficult to comprehend and predict, how much higher is the challenge when faced with an aggregate of a large number of equally complicated minds?

As David Tuckett shows in his new book (see page 8), misunderstandings and misrepresentations in the financial domain have been very costly to us all. It is important to recognise the extent to which this is not due to a lack of thinking, but is rather the outcome of too much thinking, too technical and localised, based more on knowledge about things (or –K in Bion's language) rather than on truthful understanding.

I am reminded of a caution from Clive Granger, winner of the Nobel Prize in Economics in 2003 for his work on analysing economic data over time. In an earlier lecture he drew attention to the flurry of sophisticated mathematical developments relentlessly pursued in economics. He illustrated this graphically as above and commented on how busy we are refining things 'over here' (E, for error); but what if the truth (T) is 'over there'?

The experience of being caught up in the ongoing global economic turmoil, to me, can be metaphorically compared to experiencing an earthquake: everything ceases to be stable and reliable, a roof over one's head turns suddenly from something that offers protection into something that at any time may collapse and kill. The reliability and dependability with which financial institutions have been



Letters to the Editor

Response to NHS special, Issue 5

I recently went to my local hospital for a consultation about a forthcoming operation for a physical health matter. When I queried the lack of long term results that NICE guidelines had flagged up about this procedure, my surgeon replied that long-term follow-up research in the NHS is very expensive to conduct, and it is therefore very difficult to satisfy these sorts of NICE requirements for empirical evidence on an ongoing long-term basis. He was able to tell me, however, about his own quite successful ‘practice based’ results from his cutting edge work in this field over a good number of years. This dilemma on a personal level had a familiar and emotional resonance for me, in terms of the rather narrow stance that I feel that NICE is taking regarding what constitutes ‘appropriate’ research methodologies in its production of guidelines for mental health talking treatments.

The current crisis facing the survival of psychological therapies within the NHS is directly impacted upon by the problem of traditional medical research paradigms for short-term CBT and manualised therapies, not easily lending themselves to the relationship-based approach and individualised technique that psychoanalytic psychotherapy requires. NICE deals only with ‘measurable results of specific interventions’, which leaves much of what psychotherapy can do outside of this framework of evaluation. UKCP have commissioned an excellent analysis of the impact of NICE on the provision of psychotherapy

in the UK (*NICE under scrutiny*, 2011¹). I recommend that all interested BPC registrants get hold of a copy and read it. I hope that the BPC will link up with the UKCP around the robust stance that they are taking to the current crisis by undertaking just this sort of scrutiny of NICE, and by engaging their practitioners in the debate about the need for ‘counter’ political narratives to those that currently shaping the provision of services.

I mention all this because I work as an Adult Psychotherapist in the borough of Richmond within the South West London and St George’s Trust, where ‘efficiency measures’ combined with ‘restructuring’ of mental health services have resulted in a plan to terminate all medium- and long-term individual and group psychotherapy provision within the Trust. The closure of my department will mean the loss of three part time Adult Psychotherapists, who may or may not be offered redeployment elsewhere. Other psychotherapy services across the Trust stand to lose many more such posts. The alternative structure for new services within our Trust is not at all clear, but it is based on a planned increase and expansion of IAPT services, and the creation of specialist PD teams in each borough for severely borderline patients, utilising MBT and DBT models of treatment.

This would all be fine, were it not for the fact that whole other rafts of ‘severe and complex’ patients, including those for whom NICE guidelines state that choice should be available, i.e. those who do not suit CBT or need longer term treatments

and who fall outside of the remit of primary and secondary care, will not be provided with anything. The answer to any challenge to this from the clinical coalface is that, in the context of the need for efficiency savings, hospital bed closures are the priority in terms of cash savings (hence the intensive PD treatment teams), and only NICE-based talking treatments will be provided for all other diagnostic groupings. The concern is that many NHS Trusts are set to ‘lock’ patients in to particular manualised treatments, thereby closing the space for dialogue between practitioners of different forms of research, relevant to the different models of psychotherapy, that would then allow a wider choice of therapies to be available within the public sector.

I hear the voices at BPC executive level advocating that we all stay involved, and try to keep psychoanalytic psychotherapy relevant in today’s market place, and of course that is what many of us at the frontline of services want, but the realities are that this will become increasingly difficult to do from ‘within’ the public sector if redundancies are the order of the day, and if we do not take up a more politically active stance on all levels. My plea is for all those involved in the promotion of and accreditation of NICE-backed psychodynamically rooted models, such as DIT and IPT, to be cognizant of the fact that manualised short-term therapies will not help considerably more disturbed and psychologically distressed patients, and our thoughts and energies must urgently stay focussed on retaining provision for these groups too ■

Anne Jennings
Complex Cases Service
Richmond Psychotherapy Department
South West London and St George’s Trust
anne.jennings@swlstg-tr.nhs.uk

What future for trainees?

Dear Colleagues,

I am now coming to the end of my sixth year of training as a child and adolescent psychotherapist at the BAP. I am the only trainee without a fully funded NHS post. I have completed two thirds of my training within my role as Clinical Nurse Specialist in CAMHS at Basingstoke. In July 2009 I resigned, as I found it impossible to manage a full time nursing role and an intensive training and so, with my progress advisor and head of training, I arranged to start an honorary placement.

Unfortunately for me this fell through as the psychotherapist moved. Since then we have continued to be in negotiation with two other CAMHS services; one was almost secured a year ago but was blocked because of redesign of the service. Other senior psychotherapists have not been able to offer me a placement because of pressures within their service even though I come with a great deal of experience and free!

There is one last hope, but we are quickly moving to the end of another academic year and the CAMHS services do not seem flexible enough to accommodate a highly motivated, experienced and skilled trainee who could see children adolescents and their families who have been on the waiting list too long ■

Angie Austin
Child and Adolescent Psychotherapist
in Training and Nurse Practitioner in Primary Care

From economics to psychoanalysis and back

associated – as a walk among the heavy City buildings conveys – have been shown to have little weight other than that with which we have collectively invested them.

Earthquakes are felt to last longer than they actually do, and their impact and consequences are very difficult to appreciate while everything is shaking. What sees us through the geological experience of this sudden disappearance of any safe space is the ability to turn towards the solid structures within.

What I am advocating is a moment of pause and reflection; a step back, a reflection on the appeal of radical solutions in difficult times. Earthquakes come about because something in the deepest layers of the earth is not quite right. Likewise, I believe, with the current economic crisis. Uncertainty is all around us and, most of all, within

us. Making sense of one can, I believe, illuminate the other, and psychoanalysis is best placed to tolerate and explore this reality ■

After nine years of university lecturing and research in economics, Anca Carrington joined the civil service – first as senior methodologist in spatial analysis at the Office for National Statistics, then as economist at HM Treasury. She is currently a trainee psychotherapist in the Adult Department at the Tavistock Centre.

Notes

- 1. A paper based on that presentation is due to appear in the June 2011 issue of the *European Journal of Psychotherapy and Counselling*.
- 2. Known more widely as D58 than as the PGDip/MA Foundations of Psychodynamic Psychotherapy

1. Guy, A., Thomas, R., Stephenson, S. and Loewenthal, D. *NICE under scrutiny: the impact of the National Institute for Health and Clinical Excellence guidelines on the provision of psychotherapy in the UK*. UKCP Research Unit, Research Centre for Therapeutic Education, Roehampton University, June 2011



Does the UK need the EFPP?

By Miranda Feuchtwang

Do we need an identity as European psychoanalytic psychotherapists, and to be part of an international community?

SADLY I THINK we have to admit that the British unconscious does not believe in our European identity. Our belief in our national identity and our old unconscious enmity with our continental neighbours dies hard. What was once a mere stretch of water traversed by scholars who spoke Latin, Greek and Hebrew and who were in full communication with one another now divides us. We leave our island to cross the so-called English Channel for holidays, culture, good food, landscape, where the romantic and enlightenment notion of the Grand Tour lingers in our minds. We may recall that Freud was first and foremost a European, his ideas forged in the enlightenment history of Europe, and that psychoanalysis is essentially a European discovery; we in our profession know that psychoanalysis has no boundaries, but we may forget that in Europe we have colleagues who speak the same psychoanalytic language, and who confront the same problems.

Over the last two decades our mindset may have shifted to become somewhat more integrated in our identity as Europeans, and even as European psychoanalytic psychotherapists. But ironically this identity, and the EFPP's role in creating it, is only apparent when psychotherapists meet at EFPP conferences; it is less evident in the UK where it all began, and the UK may be largely unaware of its pioneering role in creating the EFPP.

Would it work, we wondered?

The EFPP was founded by Brian Martindale in March 1991, on a day of immense cold and snow. That February London had been bombed by the IRA, so our colleagues from abroad were somewhat wary of travelling to London less than a month later. But enough of them braved the cold and the threat of terrorist attack and gathered at Regents College to vote on a constitution for a new organisation, the EFPP. Its stated mission – as with the APP, to which it was most clearly aligned in the UK – was to promote and develop psychoanalytic psychotherapy in the public sector; to make links in and between countries where this was already established, but also in countries where it was still quite thin on the ground; and to develop common high quality training standards, on a par with those already in operation in the UK.

Brian, with his characteristic enthusiasm and inexhaustible energy, had invited Lydia Tischler and myself, as child psychotherapists, and Janet Boakes, a group analyst, to prepare the ground by making contact with our colleagues in Europe. This was no mean feat when most of us were barely computer literate in those pre-internet days. Lydia was indefatigable in her persistent wooing of child therapists across Europe, and Brian through the APP created the contacts with the adult psychotherapists. Would it work, we wondered? Would everyone turn up? Would they agree to commit themselves and their countries' national organisations to the formation of this new self-authorised organisation?

The long discussions ended in triumph thanks to the inspired chairing of Anton Obholzer. By the end of the day the provisional constitution was agreed, and an elected Executive Committee was in place with Brian Martindale as the first Chair. To celebrate, everyone was invited to a drink at the Freud Museum, and the wrong kind of snow and London traffic meant a heroic journey from Regents College to Maresfield Gardens for the delegates of the newly fledged organisation. Such was the birth of the EFPP.

‘Freud was foremost a European, his ideas forged in the enlightenment history of Europe.’

Now twenty years old, the EFPP has over thirty member countries with delegates in four sections, for Adult, Child and Adolescent, Group and latterly for Couple and Family psychoanalytic psychotherapy. The Executive Committee is composed of nine members, two elected by each section and a Chair elected by the general assembly of the delegates. Each member country can send up to two delegates for each section.

One of many achievements has been the development of scientific life throughout Europe, in the conferences hosted by different countries and run in

conjunction with the EFPP, offering a rich environment for exchange. Participants who have met over the years form working relationships and friendships that endure. Conferences have been held all over Europe, in Amsterdam, Athens, Barcelona, Berlin, Caen, Cologne, Copenhagen, Cyprus, de Haan, Dresden, Lisbon, Rome, and Stockholm and more recently in Prague and Florence. The UK hosted a millennium conference for all three sections in Oxford in 2000. Now the plan is for the UK, possibly in conjunction with the BPC, to host the first conference for all four sections in 2014.

For this year and next, however, an Adult and Child and Adolescent combined conference on the theme of Siblings will be held in Krakow, Poland this October. Two British speakers, Jeanne Magagna and Angela Joyce, and Franz Wellendorf from Germany will give plenary papers. A Group and Couple and Family combined conference will be held in Athens in May 2012. Information about both conferences is on the website.

‘Do we need to look beyond our shores for our scientific development?’

Perhaps the greatest achievement of the delegates of the EFPP is that they have created, in their own countries, networks and organisations for training where none had previously existed; or they have been able to bring together several previously existing training organisations to create an EFPP Institute as an umbrella for these organisations. This is the case for example in Italy, in Finland, and in Switzerland. The BPC came into being shortly after the formation of the EFPP, and fulfils this function for us in the UK. In other countries where previously there was no organised training specifically for children, this has come into being too. Denmark and the Czech Republic are examples. New countries have joined as full or associate members from East and Central Europe: Estonia, Georgia, Kazakhstan, Latvia, Lithuania, Romania, Russia, Serbia, Ukraine and Turkey. The EFPP has run summer schools in some of these countries to aid their development.

The EFPP is above all pragmatic in its approach and, rather than impose unattainable conditions, we have wanted to include countries which are at the beginning of their development in psychotherapy. The four sections have clarified the minimum standards for membership. This was to recognise in the adult section, for instance, that although three and four times a week intensive trainings are offered by many countries, such as Italy, France, Germany, Switzerland and the UK, this is not an option for several other countries. In this the EFPP has been a pioneer

in wanting to protect standards and a rigorous psychoanalytic outlook, but also in acknowledging that the training of mental health professionals has to be more realistic and sensitive to what is possible. Of course this has been perceived as lowering the intensity of training, which engendered considerable controversy in the general meetings of the EFPP in recent years; but the good sense of working parties composed of delegates from different European countries, including the UK, has prevailed.

An international identity

So what use is membership of the EFPP to a country like the UK, which has a wealth of long established trainings accredited by the BPC and the ACP? We already have a richly developed scientific life. Does psychoanalytic psychotherapy in the UK need the EFPP? Do we need to look beyond our shores for our scientific development? I think it is essential, in fact, to have an international identity as psychoanalytic psychotherapists and to be part of an international community. Of course all of us have developed within the frame of psychoanalysis, and many IPA psychoanalysts come to our conferences and give keynote papers, and their participation is welcome. Several psychoanalysts are members of the Executive Committee and have been our past Chairs. But the primary task of the EFPP is to develop an international organisation and a platform for psychoanalytic psychotherapy. Psychoanalysis has its own international organisation in the IPA. The EFPP's task is different. It is to promote the practice of psychoanalytic psychotherapy by the core professions in the public sector, in clinics, in health centres, in hospitals; its task is to promote the good mental health of adults, children and couples and families throughout Europe.

Anne-Marie Schloesser (Germany) was elected Chair of the EFPP at the biannual general meeting in Belgium on March 11. She brings a strong commitment to taking the EFPP forward in its aims and objectives to further the development of psychoanalytic psychotherapy in the public sector in Europe, and to meet the challenges it faces in the current political and economic climate.

All of you who are members of the APP, the BPC or the ACP are members of the UK national membership organisations of the EFPP. Please visit the website, get in touch with your delegates, Miranda Feuchtwang, Hansjoerg Messner and Cathy Troupp, and send us your comments and criticisms, friendly or otherwise. You will also find a link on the website to contact the Chair and the other members of the Executive ■

Miranda Feuchtwang is a delegate to the EFPP, and EFPP adult coordinator and Vice Chair

www.efpp.org

25 years of the Freud Museum

By Carol Seigel

This year the Freud Museum London celebrates its 25th anniversary.

THE MUSEUM was founded at the request of Anna Freud, who wanted to see 20 Maresfield Gardens become a museum after her death to commemorate her famous father. The Freud family moved here in October 1938, after their flight from Nazi-occupied Austria, and although Sigmund died here the following year, Anna remained in the house until she passed away in 1982.

The house was significantly restored and opened in July 1986. The opening was a splendid affair, attended by many of the great and good in the analytic and wider community, and with opening honours performed by Princess Alexandra. The Museum features all the furniture and collections brought by the Freuds from Vienna, including over two thousand antiquities, Freud's personal library, his desk, desk chair and iconic couch. In the intervening 25 years the Museum has built a strong reputation in the UK and overseas, not only for its displays and collections, but also for its education, conference and events programme and innovative contemporary art exhibitions, featuring artists such as Sophie Calle, Susan Hiller and Mat Collishaw. It has also been a centre for research and scholarship.

The Museum has hosted conferences on a wide range of topics, including the first major conference on psychoanalysis

and ecology in 1992. Jacques Derrida gave a three and a half hour paper at the conference 'Memory and Archives' in 1994, while Edward Said delivered a Freud Memorial Lecture at the School of Oriental and African Studies, entitled 'Freud and the Non-European' in 2001. Freud Museum objects have been loaned to exhibitions in Japan, Australia, Mexico and Brazil, and its first international exhibition toured the United States. The Freud Museum has played host to numerous writers and novelists, talking about their work.

Hundreds of school groups visit the Museum each year, mostly A-level or university students studying psychology. In groundbreaking outreach work in 2008, the Freud Museum teamed up with an armed forces mental health charity, Combat Stress, and South Camden Community School, to work on 'The Archaeology of Conflict – Unearthing the Psychological?' The project aimed to develop a better knowledge and understanding for young people of the psychological impact of conflict, using Freud's theories as the basis for a set of interviews carried out by psychology students with veterans from Korea to Bosnia.

In June this year the museum held a party to celebrate its 25 years, with more than 200 people overflowing into the beautiful garden to hear speeches by past

Director Michael Molnar, myself as current Director, the Austrian ambassador Dr Emil Brix, writer Esther Freud, and a poem specially written by poet Ruth Padel. Ruth later said: 'I wrote it because I was at a conference at the museum which was so inspiring I had to write it then and there!'

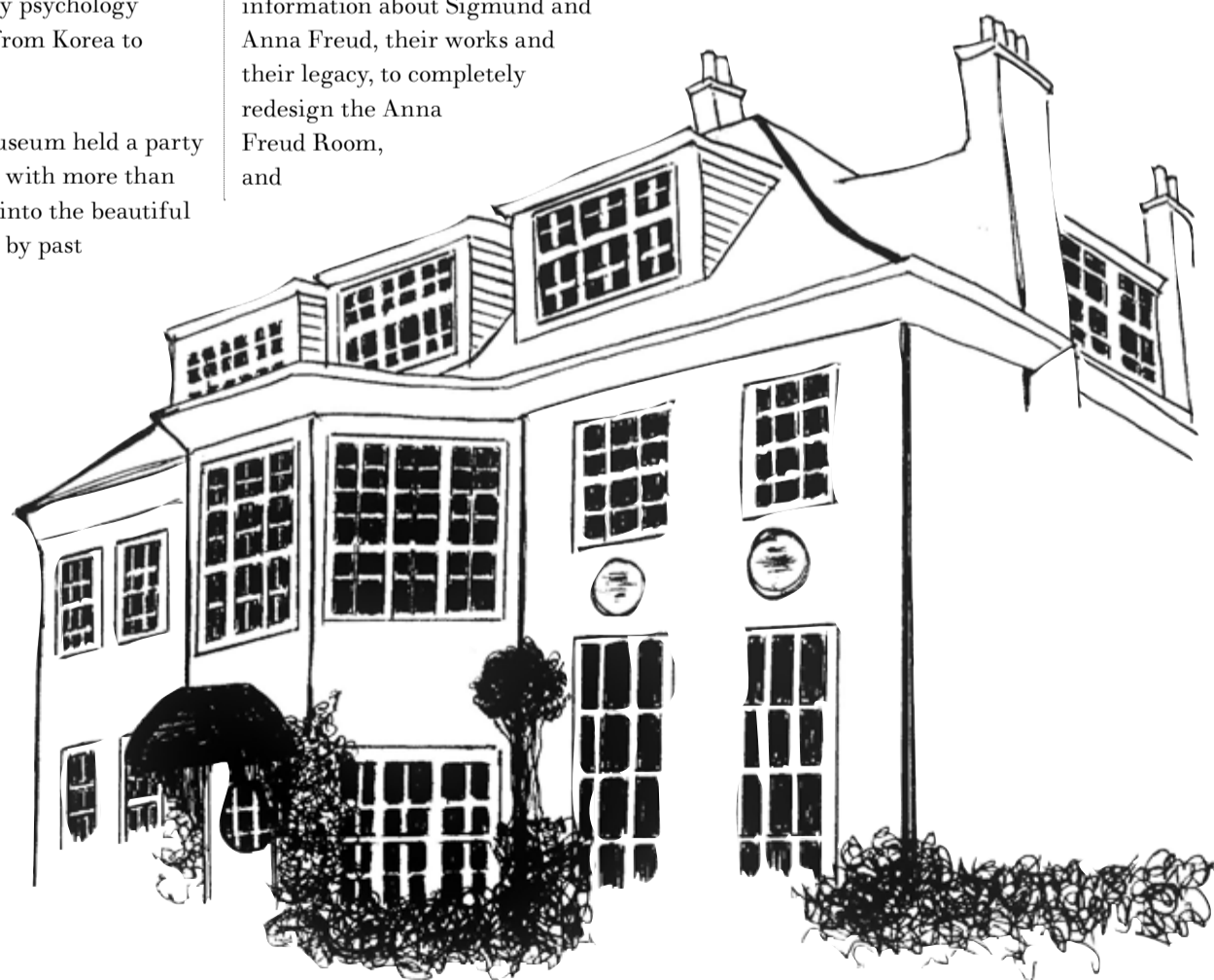
'The museum world and visitor expectations have moved on a great deal.'

So why is the Museum now planning an extensive programme of change? Both the museum world and visitor expectations have moved on a great deal since the 1980s, and we are increasingly aware that despite success in many areas, the Museum is not meeting its full potential. Trustees and staff have ambitious plans to develop the Museum – to extend the displays and broaden the interpretation, to provide a greater depth of information about Sigmund and Anna Freud, their works and their legacy, to completely redesign the Anna Freud Room, and

to extend facilities for visitors, events, education, research and private hire. The Museum needs too to be financially sustainable. It is an independently funded charity, in receipt of no government funding. It receives a generous annual grant from the New-Land Foundation in the US, but has to raise the remaining two thirds of its income. In order to finance this wide ranging programme of change, and to place it on a more sustainable financial footing, the Museum is launching a substantial fundraising drive.

The exciting vision for the future is that the Museum becomes a place to engage with the contemporary legacy of Sigmund and Anna Freud, to make it a lively place of discussion, research, debate and enquiry, while maintaining its unique and special character as the Freud family home ■

Carol Seigel
Director, Freud Museum London
www.freud.org.uk



Diary

JULY

27 July 2011
CAFÉ PSYCHOLOGIQUE
Seven Artspace, Leeds LS7 3PD
info@sevenleeds.co.uk,
www.sevenleeds.co.uk

28 July 2011
FREUD MUSEUM 25TH ANNIVERSARY
Freud Museum, 20 Maresfield Gardens,
London NW3
Open Day
Contact: 020 7435 2002,
eventsandmedia@freud.org.uk

AUGUST

3-6 August 2011
IPA CONGRESS: SEXUALITY, DREAMS AND THE UNCONSCIOUS
World Trade Center, Mexico City
Speakers include Ilse Grubrich-Simitis,
Andrea Sabbadini, Theodore Jacobs,
Peter Fonagy
www.ipacongress.org/congress/

24-28 August 2011
WORLD CONGRESS FOR PSYCHOTHERAPY
Sydney Convention & Exhibition Centre
Speakers include Mary Target and others
www.wcp2011.org

29 August-2 September 2011
EUROPEAN SYMPOSIUM IN GROUP ANALYSIS
Goldsmiths College, University of London
Speakers: E. James Anthony, Albie Sachs,
Gwen Adshead, Robi Friedman,
Elisabeth Rohr, Molyn Leszc,
Bryan Boswood, Margit G. Jorgensen
www.confer.uk.com

SEPTEMBER

11-14 September 2011
IDENTITY, AUTHORITY AND TASK IN AN UNCERTAIN CONTEXT
NSCAP, Bevan House, 34–36 Springwell
Road, Leeds LS12
Group relations conference
Contact: 0113 305 8750,
amy.crawshaw@nhs.net

15 September 2011
THE NEW SEX: FEMINISM AND THE DIFFERENCE IT HAS MADE
TCCR, 70 Warren Street, London W1T
Speakers: Brett Kahr, Rebecca Asher,
Robert Rowland Smith, Natasha Walter
Contact: Becky Walker 020 7380 1965,
bwalker@tccr.org.uk

24 September 2011
PHILOSOPHY AND PSYCHOANALYSIS: THINKING ABOUT PROJECTIVE IDENTIFICATION
Institute of Psychoanalysis, 112a Shirland
Road, London W9
Speakers: Priscilla Roth, Louise Braddock,
Michael Lacewing
Contact: 020 7563 5017,
ann.glynn@iopa.org.uk

24 September 2011
‘WHERE THE WILD WINDS BLOW’: WORKING WITH DIFFERENCE
St Pauls Church, Blandford Road, St Albans
Speakers: Diana Bass, Linda Brown,
Loraine McSherry, Lynda Norton,
Jeri Ontiskansky, Elizabeth Richardson,
Susan Wax
Contact: BAP, 020 8452 9823,
external@bap-psychotherapy.org

24 September 2011
MOMENTS OF EMBODIMENT
Friends Meeting House,
91-93 Hartington Grove, Cambridge
Speaker: Judith Woodhead
Contact: 020 7435 7696,
clericalofficer@thesap.org.uk

24 September 2011
CONTAINING THE DISTURBING PATIENT WITHIN A PSYCHOANALYTIC SETTING
John McIntyre Centre, University of
Edinburgh
Speakers include Tammy Fransman,
Donald Campbell, Joan Hermann,
John Shemilt
Contact: SIHR, 0131 454 3240,
edinburgh@sihr.org.uk

OCTOBER

1 October 2011
OFFENCES AND DEFENCES: STAFF DISTRESS AND ORGANISATIONAL DEFENCES IN SECURE HOSPITALS
LCP, 32 Leighton Road, London NW5
Speaker: Gwen Adshead
Contact: 020 7482 2002

1 October 2011
FACING SEXUALITY: WORKING PSYCHO-ANALYTICALLY WITH THE SEXUAL FANTASIES, DESIRES AND FEARS OF OUR PATIENTS
Marino Institute, Drumcondra, Dublin 9
Speaker: Brett Kahr
www.confer.uk.com/sexuality_prg.html

8 October 2011
WRESTLING WITH WINNICOTT: HATE IN THE COUNTERTRANSFERENCE
Saffron Walden, Essex
Speaker: Jan Harvie-Clark
Contact: timfox.gamages@dsl.pipex.com

8 October 2011
LIVING WITH THE WOUND: A CONFERENCE FOR CLERGY
Friends Meeting House, 43 St. Giles,
Oxford
Speakers: Chris MacKenna, Jane Leach
Contact: 020 7435 7696,
clericalofficer@thesap.org.uk

14-16 October 2011
EFPP COMBINED CONFERENCE
Krakow, Poland
Speakers include Angela Joyce,
Jeanne Magagna, Franz Wellendorf
www.efppconference2011cracow.pl

15 October 2011
MUSIC AND PSYCHOANALYSIS
Institute of Psychoanalysis, 112a Shirland
Road, London W9
Speakers: Francis Grier,
Richard Rusbridger, David Black
Contact: 020 7563 5017,
ann.glynn@iopa.org.uk

22 October 2011
JUNG AND ALCHEMY
SAP, 1 Daleham Gardens, NW3 5BY
Speaker: Bob Withers
Contact: 020 7435 7696,
clericalofficer@thesap.org.uk

28 October 2011
ABOUT MEMORY, INTERPRETATION AND OBJECT RELATION IN TODAY’S PSYCHOANALYSIS
Institute of Psychoanalysis,
112a Shirland Road, London W9
Speaker: Cesar Botella
Contact: 020 7563 5000,
Marjory.Goodall@iopa.org.uk

28 October 2011
CHILDHOOD DISORDERS: NEUROSCIENCE & INTERVENTION CONFERENCE
Friends House, 173 Euston Road,
London NW1
Speakers: Mike Crowley, Uta Frith,
Frances Gardner, Linda Mayes, Eamon
McCrory, Kevin Pelphrey, Mary Target,
David Trickey and Essi Viding
www.annafreud.org

NOVEMBER

3-6 November 2011
6TH EUROPEAN PSYCHOANALYTIC FILM FESTIVAL
BAFTA, 195 Piccadilly, London W1
Border-crossing: migration across national
and mental states
www.psychanalysis.org.uk/epff6/

4 November 2011
TROUBLING PATIENTS IN TROUBLED TIMES
Royal College of General Practitioners,
1 Bow Churchyard, London EC4M
Hosted by the APP Primary Care section,
Balint Society and RCGP
Contact: Debbie Board 020 7173 6074,
dboard@rcgp.org.uk

4 November 2011
AFFAIRS: THE IMPACT ON THE COUPLE RELATIONSHIP
TCCR, 70 Warren Street, London W1T
Speaker: Jenny Riddell
Contact: Joanna Bending 020 7380 1970,
jbending@tccr.org.uk

5 November 2011
LOVE AND MELANCHOLIA IN THE ANALYSIS OF WOMEN
Mansion House, Canynge Road, Clifton,
Bristol BS8 3LJ
Speaker: Rosine Jozef Perelberg
Contact: Severnside Institute for
Psychotherapy,
administrator@sipspsychotherapy.org

5 November 2011
BORDERLINE PERSONALITY DISORDER: THE PATIENT, THE THERAPIST AND THE THERAPY
WPF, 23 Magdalen Street, London SE1
Workshop Leader: Duncan Kegerreis
Contact: 020 7378 2054,
mayra.angulo@wpf.org.uk

11-12 November 2011
THE RED BOOK TWO YEARS ON
13-15 Arundel Street, London WC2R
Speakers: Paul Bishop, Christian Gaillard,
Sonu Shamdasani, Murray Stein,
George Bright, Catherine Bygott,
Penny Culliford, Chris MacKenna
Contact: 020 7435 7696,
claire@thesap.org.uk

12 November 2011
‘COULD IT BE MAGIC’: IDENTIFYING THE DYNAMICS OF CHANGE IN COUPLE THERAPY
TCCR, 70 Warren Street, London W1T
Speakers: David Hewison, Mary Morgan
Contact: Matt Williams 020 7380 1975,
mwilliams@tccr.org.uk

12 November 2011
INTERNET PORNOGRAPHY: WORKING WITH CLIENT PREOCCUPATION
WPF, 23 Magdalen Street, London SE1
Workshop Leader: Jenny Riddell
Contact: 020 7378 2054,
mayra.angulo@wpf.org

19 November 2011
BAP ANNUAL CONFERENCE: THE UNSPEAKABLE AND THE UNBEARABLE
BAP, 37 Mapesbury Road, London NW2
Speakers include Jean Knox,
Julian Lousada, Janine Sternberg,
Joscelyn Richards
Contact: 020 8452 9823,
admin@bap-psychotherapy.org

22 November 2011
JUNG AND ALCHEMY
SAP, 1 Daleham Gardens, London NW3
Speaker: Bob Withers
Contact: 020 7435 7696,
clericalofficer@thesap.org.uk

24-25 November 2011
PSYCHOLOGICAL THERAPIES IN THE NHS
Savoy Place, London
Contact: 020 8541 1399,
www.healthcare-events.co.uk

26 November 2011
WORKING WITH LOSS AND BEREAVEMENT
WPF, 23 Magdalen Street, London SE1
Leaders: Lynsey Hotchkies, Neil Hudson
Contact: 020 7378 2054,
mayra.angulo@wpf.org.uk

30 November - 1 December 2011
HSJ MENTAL HEALTH CONGRESS
Dexter House, London EC3N
www.mentalhealthcongress.com

DECEMBER

3 December 2011
UNDERSTANDING AND WORKING WITH ABUSE IN COUPLE RELATIONSHIPS
TCCR, 70 Warren Street, London W1T
Speakers: Judith Siegel, Christopher
Clulow, Damian McCann
Contact: Joanna Bending 020 7380 1970,
jbending@tccr.org.uk

3 December 2011
WINNING AT ALL COSTS: A PSYCHOLOGICAL EXPORATION OF SPORTING GREATNESS
SAP, 1 Daleham Gardens, London NW3
Speaker: Ian Williamson
Contact: 020 7435 7696

Preview

THE EUROPEAN PSYCHOANALYTIC FILM FESTIVAL

The Sixth European Psychoanalytic Film Festival (epff6). Organised by the Institute of Psychoanalysis under the Honorary Presidency of Bernardo Bertolucci. BAFTA, London, 3 to 6 November 2011.

Cinema and psychoanalysis have much in common besides enjoying simultaneous origins at the end of the nineteenth century. (It was in the same year, 1895, that the first films were shown by the Lumière brothers in Paris, and the first psychoanalytic book, Freud and Breuer’s *Studies on Hysteria*, was published in Vienna.) Within their parallel histories the two disciplines, as well as sharing central roles in contemporary culture, a common focus on narratives and a fascination with dreams, have developed linguistic analogies (think of the concept of projection) – in Glen Gabbard’s words, ‘to a large extent, film speaks the language of the unconscious.’¹

While a ‘psychoanalytic cinema’ as a discrete genre does not exist, some films are particularly suitable for a psychoanalytic reading, and are in turn more likely to provide therapists with observations and insights useful in their clinical work. These films fall into three broad categories:

- a.** those whose characters are portrayed in an explicitly psychological way, with an emphasis on a detailed study of their inner world and personality. These characters are represented in their ambivalent or conflictual aspects, with their past history taken into account, their unconscious motivations explored, and generalisations of the ‘goodies-and-baddies’ kind avoided;
- b.** those which deal with themes also familiar to analytic enquiry, such as crises in subjectivity related to developmental stages or acute existential and moral dilemmas, conflictual interpersonal constellations, and various mental pathologies (neurotic or narcissistic disturbances, sexual perversions and gender confusion, alcoholism and drug addiction, psychotic disintegration, etc.);

c. those which, having analysts and/or their patients as main characters, attempt to represent (but sometimes end up misrepresenting) psychoanalysis itself. In these films our profession is often presented in the dramatically effective, but inaccurate, version of the therapist being engaged in the cathartic recovery of repressed traumas for the explanation of current events, with much use of flashbacks as the filmic device equivalent to memory. Freud may have been right, then, when he replied to Karl Abraham, who had invited him to collaborate on a film project:

‘I do not believe that satisfactory plastic representation of our abstractions is at all possible.’²

Analysts interested in cinema at first limited themselves to applying to film the concepts from their clinical work – such as, depending on their theoretical orientation, the Oedipus complex, castration anxiety, archetypes, the death drive, the symbolic order, the paranoid-schizoid position, etc. Today analysts continue to enrich film theory and to provide original and often controversial interpretations of individual movies. Sometimes they also engage in the study of a film’s structure and technical features, or of its aesthetic and historical significance; at other times they research such cultural fields as spectatorship reception.

‘Film speaks the language of the unconscious.’

The publication of books, monographs and essays on various aspects of the relationship between psychoanalysis and cinema, as well as increasingly frequent professional events focusing on dialogue between psychoanalysts and filmmakers, attest to the importance of such cross-fertilising interchanges.

One of the main events of this kind is the European Psychoanalytic Film Festival (*epff*) which, from its beginnings in 2001 and biennially since, the Institute of Psychoanalysis has entrusted me with directing. Organised by a committee in London and by a team of consultants in Europe, *epff* takes place over four days at BAFTA in London and has been regularly attended by some 300 delegates from over twenty countries.

Calling *epff* a ‘Film Festival’ must be understood as shorthand for what, to all intents and purposes, is a combination of festival and conference – we settled for the term ‘Festival’ to emphasise its festive aspect, and the word ‘European’ refers to our choice to limit the scope of the event to a vast and varied geographical area with a long-standing tradition of producing films which lend themselves to a psychoanalytic discourse. It is also an attempt to make available to our audiences movies often excluded from a distribution to a large extent dominated by North American



La Forteresse (2008)

commercial interests. European countries represented so far include not just the major producers, such as France, Russia, Italy or Germany, but also Finland, Croatia, Switzerland, Poland, Estonia, Portugal, Greece and many more.

The *epff* programme consists of screenings of features, shorts and documentaries selected around a theme. The films are discussed by analysts and filmmakers and there are lectures, panels and workshops, always with lively audience participation. Many well-known European filmmakers (including several winners of Academy or other major international awards) have taken part, discussing their work with prominent psychoanalysts and film scholars. Two books have also been published which bring together the main articles to have emerged from the Festival.

This year’s Festival, which takes place from 3 to 6 November under the title Border-Crossing: Migration across National and Mental States, will screen films from ten different European countries, many of which have never been shown before in the UK. Each film focuses on the geographical and psychological border space where transitions occur and where changes – subtle and slow, or more often traumatic – can take place.

Films will include the award-winning *Buick Riviera* (dir. Goran Rusinovic, Croatia, 2008), which will be discussed by a panel including one of the film’s leading actors, Leon Lucev, and *The Reverse* (Poland, 2009), an intriguing drama from director Borys Lankosz which has won multiple awards worldwide, and which will be discussed by Lankosz himself and renowned academic, critic and broadcaster Ian Christie.

There are also documentaries including the acclaimed *La Forteresse* (Switzerland, 2008), which follows daily life at a centre for asylum seekers. Its director Fernand Melgar will be on the discussion panel.

The Festival will be introduced by three experts on migration (a social

Mine Own Executioner (1947)



geographer, a psychoanalyst and a film scholar), the screening of a silent movie with live accompaniment by Harry the Piano and a reading of unpublished poems on migration by Ruth Padel, and will also feature a lecture on exiled European filmmakers by film historian Catherine Portuges.

In addition, various social and cultural events run in conjunction with the Festival; this year they include a reception at the Romanian Cultural Institute and tours of the Freud Museum.

epff belongs to an informal network of encounters between moviemakers, film scholars and psychoanalysts now taking place in many countries. In Britain the Institute of Psychoanalysis has for the past ten years run a programme of film screenings and discussions on a variety of analytically relevant themes.

‘Critical reflection on movies can enrich our knowledge of the human condition.’

Psychoanalysts are increasingly showing an interest not only in offering original approaches to film studies, but also in valuing the contributions that films can offer them. What the critical reflection on movies can do for us analysts is to enrich our knowledge of the human condition in its normal and psychopathological manifestations, sometimes usefully reminding us of how unclear the boundaries between the two can be ■

Andrea Sabbadini

epff6: Border-Crossing: Migration Across National and Mental States runs from 3-6 November 2011 at BAFTA, London. For the full programme and booking information, plus details of other Institute film events, visit www.beyondthecouch.org.uk or email ann.glynn@iopa.org.uk

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TCCR Autumn Conference 2011 'Could It Be Magic?'

Identifying the dynamics of change in Couple Therapy –
What really makes the difference?

Date: Saturday 12th November 2011 **Time:** 9:30am-4:30pm



AFFAIRS – the impact on the couple relationship

This one day workshop is aimed at practitioners working with individuals, couples or families. It will focus on the impact of an affair on the intimate adult couple relationship and the therapeutic work.

Date: Friday 4 November 2011 **Time:** 10.00-4.00



Certificate in Psychosexual Studies: Understanding the Sexual Relationship

The course focuses on thinking about couples and sex and applying this understanding to participants' work. It is useful for GPs, sexual health workers and other healthcare professionals as well as counsellors, psychotherapists, health visitors and midwives.

Dates: Sept 2011 – April 2012, two terms of four Saturdays each.

Time: 10.00am-4.00pm



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The Society of Analytical Psychology
London

SUPERVISION COURSE 2011/12

The SAP is a member institution of the British Psychoanalytic Council. This training course in psychodynamic supervision with a Jungian emphasis leads to a two tier award - either to the SAP Certificate in Supervision or, with the addition of a written paper, to the SAP Diploma in Supervision which satisfies the requirements for membership of the British Association for Psychoanalytic and Psychodynamic Supervision. The course is in two strands:

- **Theory and Practice of Supervision:** 10 monthly Saturday workshops, 9:30 - 3pm at The SAP. These include presentations by senior SAP analysts, including contributors and editors of three leading books in the field.
Dates: 8 Oct, 12 Nov, 10 Dec, 14 Jan, 18 Feb, 17 March, 14 April, 12 May, 9 June and 14 July.
- **Supervision of Supervision:** in weekly groups led by senior SAP analysts. Group times and locations: Mondays 10 - 11:30am with Christine Driver at 71 Umfreville Rd, N4 1RZ **or** Tuesdays 3:20 - 4:50pm with Jan Wiener at The SAP, 1 Daleham Gardens, NW3 5BY **or** Tuesdays 3 - 4:30pm with Catherine Crowther at 50 Leconfield Rd, N5 2SN. Additional groups may be arranged in West or Southwest London, Oxford, Cambridge, Surrey, Sussex, North Derbyshire or Rutland. Groups offer the optimal training experience but supervision in pairs or individual supervision may be arranged when this is not possible.

Applicants should normally have 3 years' clinical experience post-qualification, be registered with BPC or UKCP or accredited with BACP, and are expected to be working as supervisors by the start of the course. A psychodynamic training and substantial experience of psychodynamic therapy/analysis are required.

Fees: £1325 for the course + £900 for supervision of supervision.

Application forms and further information: online at www.thesap.org.uk or from the Training Administrator, The SAP, 1 Daleham Gardens, London NW3 5BY. Tel: **020 7435 7696** Email: Claire Hazelwood claire@thesap.org.uk. For information or discussion please contact Course Co-ordinator Miranda Alcock, 01932 400056 or 07766 707 413.

Psychoanalysis and homosexuality: moving on

A one-day conference co-hosted by
The Anna Freud Centre
Association for Psychoanalytic Psychotherapy in the NHS
British Psychoanalytic Council
Tavistock and Portman NHS Foundation Trust
Tavistock Centre for Couple Relationships

Saturday 21 January 2012

Resource Centre, Holloway Road, London N7

Organising committee: Malcolm Allen, Jeremy Clarke, Alessandra Lemma, Leeza Hertzmann, Trudy Klauber, David Morgan, Mary Target

Speakers and details to be announced on the BPC website:
www.psychoanalytic-council.org



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Contribute to New Associations
We welcome your ideas for articles, reviews, and letters to the editor. In particular we are looking for reviews of cultural events, books and films with psychoanalytic interest. If you would like to propose a topic for a longer article (up to 1200 words) please contact Janice Cormie: janice@psychoanalytic-council.org

Deadlines: The next issue of *New Associations* will be published in October 2011. The deadline for article proposals is 26 August 2011. Contributions and letters to the Editor should reach us no later than 16 September 2011.

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