



## **Psychotherapy E-Newsletter** Spring 2018

*Dear Colleagues,*

*Registration for the upcoming 107<sup>th</sup> Annual Meeting in Chicago is now open. In the Psychotherapist Associates Update below, by Margo Goldman, M.D. and myself, you'll find information on special PA programming and recent activities by our committee.*

*Furthermore, we present articles by Margaret Tuttle, M.D., and Jonathan Kersun, M.D., on their experiences at the 2018 National Meeting. Linda Michaels, a Psy.D., informs us about activities initiated by the Psychotherapy Action Network, which she co-chairs. Michele Press, M.D., shares some insights on confidentiality and psychoanalytic writing. Jonathan Kersun, M.D., also writes about our special PA program, the Business of Practice Workshop at the 2018 National Meeting. Lastly, I report on the panel on the first manualized psychoanalytic approach showing efficacy for an Axis I disorder, namely Panic Focused Psychodynamic Psychotherapy.*

*We hope that this newsletter gives you a sense of the rich programming and discourse APsaA has to offer, and we hope to see you in Chicago.*

*Simone Hoermann, Ph.D.  
Editor, Psychotherapist Associates E-Newsletter  
Co-Chair, Psychotherapist Associates Committee*

### ***What you'll find in this issue:***

- ***Psychotherapist Associates Update from Co-Chairs Margo Goldman, M.D. and Simone Hoermann, Ph.D.***
- ***Brief reports on APsaA's 2018 National Meeting in February***
- ***Thoughts from 2 PAs on their experience at the 2018 National Meeting***
- ***Information on the Psychotherapy Action Network***
- ***Information on the upcoming 107<sup>th</sup> Annual Meeting***
- ***Call for newsletter contributions***

## ***Psychotherapist Associates Committee Update***

As we prepare for the 107<sup>th</sup> Annual Meeting (June 22-24) in Chicago, we are updating you about the Psychotherapist Associates Committee and providing information about the upcoming Meeting. We are very excited about the Psychotherapy and PA- sponsored scientific programs and our 3rd annual networking lunch in June, listed below. *Advance registration opened Tuesday April 10<sup>th</sup> and closes May 22<sup>nd</sup>.*

*Special programming for Psychotherapist Associates in June:* Be sure to look for the "Psychotherapist Associates Present" Discussion Group (Saturday 6/23, 2PM), the Psychotherapy Department's "Psychoanalysis and Psychotherapy" Discussion Group (Friday 6/22, 1:30PM) and the Two-Day Clinical Workshop, "Psychoanalytic Psychotherapy" (Friday 6/22, 3:45PM and Saturday 6/23, 2PM) Click [here](#) for more information.

The PA Presents Discussion Group, is going to be *"For Whom Did You Vote? The Effect of Politics on Transference and Countertransference."* We are thrilled APsaA's past-president Dr. Prudence Gourguechon is our discussant due to her expertise about the interplay between politics and psychoanalytic psychotherapy. Dr. Holly Passi's case presentation promises to stimulate discussion about the impact of one's political beliefs on treatment.

We also provided a broader list of sessions relevant to psychotherapists, available on the **Psychoanalytic Psychotherapy Track** page of the Meeting section of the APsaA website. Click [here](#) to access the sessions geared for psychotherapists.

*We have again organized an informal networking lunch for psychotherapists attending the meetings:* Please join us for the Psychotherapy Department's Dutch Treat Lunch at 12PM, Friday 6/22 at the Cliff Dweller's Club on Michigan Avenue. Make sure to check out the [flyer](#) for details and RSVP if you plan to attend. Space will be limited, so act quickly!

*2018 National Meeting (February), New York City:* The meeting was "kicked off" Tuesday evening by a very successful 3<sup>rd</sup> annual Psychotherapy Department Dine Around at Emporium Brasil. See related newsletter article for details.

February's conference offered a rich and stimulating program. We received positive feedback about the PA Presents Discussion Group "What Shapes the Therapist Shapes the Therapy." Dr. Robin Deutsch provided and facilitated an engaging discussion of Dr. Randall Richardson's challenging, fascinating case. Thank you both for your contribution. Immediately following the D.G., a number of psychotherapist attendees gathered informally for lunch; this provided an additional opportunity to get to know other therapists midway during the Meeting. Based on the enthusiasm about the lunch, we will reprise this get together next winter at the 2019 National Meeting.

The Committee Sponsored "Business of Practice Workshop: Negotiating Treatment Frequency", featured Dr. Rachel Gross as presenter and Past President Dr. Mark Smaller as discussant. The well-attended program generated an enthusiastic and informative exchange of ideas. Co-Chairs, Drs. Michael Groat and Jonathan Kersun, are actively planning for next winter's workshop: Initiating psychoanalytically oriented treatment.

Many of us attended a wide range of scientific sessions, some of which are highlighted in this newsletter.

*Updates on PA committee structure and activities:* The PA Committee is still actively engaged in program-planning, newsletter writing and editing, event planning, networking and outreach. We enjoy representation from a wide range of geographic locales and professional backgrounds. Since our last update, we re-organized the leadership roles and added committee members in an effort to broaden our reach and distribute the workload.

We are delighted to report Simone Hoermann, Ph.D., and Margo Goldman, M.D., will equally chair the PA Committee's leadership as Co-Chairs. We also added three more people to the Committee: Bruce Gainsely, M.D., a psychiatrist and longstanding PA from California; Linda Michaels, Psy.D., a psychologist from Illinois and co-founder/co-chair of the Psychotherapy Action Network (see related newsletter article); Michael Groat, Ph.D. from North Carolina.

Margo will continue to co-chair the PA Presents Discussion Group with Dr. Petra Pilgrim. Petra will keep meeting with Dr. Jeffrey Waxman's Committee on Psychoanalysis in the Community to discuss ideas for collaborating. One option may be to have one of his committee members as a discussant at a future PA-sponsored scientific session. Petra also contacted Dr. David Scharff of the International Psychotherapy Institute (IPI) about outreach for new PA's and potential DG presenters.

Welcome to new committee members and thank you to "veteran" members – we look forward to working together to engage present and future psychodynamic therapists and bolster psychoanalytic psychotherapy.

*We have one final reminder.* Talk to your psychotherapist friends and colleagues about the tremendous benefits of PA status and meeting attendance. Be sure to peruse the APsA website for information about our work, advanced psychoanalytic psychotherapy training programs, the PA Directory and June's Annual Meeting.

*Please remember to share these links with your colleagues, students or supervisees to help us expand our reach.*

We look forward to connecting with you either before or at the Chicago Meetings. Please do not hesitate to contact us if you have additional questions or suggestions.

Warm regards,  
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Co-Chairs, Psychotherapist Associates Committee

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## **Experiences from Psychotherapist Associates at the 2018 National Meeting**

### ***Psychotherapist Associates are Important!***

I am a psychiatrist who sees general and urgent care psychiatry patients in an outpatient clinic at a large hospital. The nature of my job requires that most of my appointments be focused on diagnosis and medication management. Typically, I see patients for 25 minutes every 2-3 months. Yet, I have a deep interest in understanding what motivates my patients,

what troubles them, and why. This is what drew me to psychiatry. When I attend an APsaA National Meeting, I feel I am among kindred spirits, and I leave feeling refreshed and enriched.

Because of Psychotherapist Associates, I feel welcome in APsaA, even though I am not a psychoanalyst. I have a strong wish to incorporate psychoanalytic and psychodynamic ideas into my work with patients. I take advantage of opportunities to learn as much as I can from talks, workshops, and conferences, and colleagues.

This year, I learned from colleagues about the rich history of psychoanalysis, the unique heritage of each Institute, and the historically grueling training process. I began to feel like an “outsider” at a psychoanalytic conference. That is, until I went to the DPE Research Education Dialogue: Critical Thinking and Research in Psychoanalytic Education. This was an inspiring session where speakers including Linda Goodman, Ph.D., Otto Kernberg, M.D., and Andrew Gerber, M.D., Ph.D., addressed the future of psychoanalysis and APsaA. One theme was the idea that critical thinking and research can strengthen and enrich psychoanalytic education. They felt this would improve not only education, but also contribute to improving the standing of psychoanalysis as a discipline in society. They went on to talk about the importance of allowing psychoanalysis to evolve and adapt to the needs of modern society. In fact, Dr. Kernberg identified welcoming psychoanalytically-oriented psychotherapists into APsaA as the “number one” thing APsaA could do for the profession. He said this is the easiest, quickest, and most important thing to do. This is exactly what Psychotherapist Associates does!

I was delighted to see Harriet Wolfe, M.D., President of APsaA, at our Psychotherapist Associates Networking Event on Friday evening. This also felt very welcoming, acknowledging that we are truly part of APsaA, even if we are not psychoanalysts.

Finally, I want to mention the APsaA promotional video developed by APsaA’s Committee on Public Information that was recently sent out to the membership. Here is the link: [youtu.be/NQCfUacxaeI](https://youtu.be/NQCfUacxaeI). It explains psychoanalysis in layman’s terms, giving an analogy to gardening, where people are like plants, nourished by the sun, battered by the wind, supported by roots, sometimes with disease that originates in the roots. There is also a blog post that uses the theme of the video: [Psychoanalysis Gets to the Root of the Problem](#). This video and this post are consistent with what I learned as psychodynamic therapy during residency. This is a type of therapy that I do, in fact, practice with some of my patients.

I am grateful to be included in the APsaA community!

By Margaret C. Tuttle, M.D.  
Psychiatrist, Massachusetts General Hospital  
Instructor in Psychiatry, Harvard Medical School

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## **Psychotherapist Associates Dine-Around**

What could be better than an experience that leaves one fully satisfied –in body and in mind -- and wanting more? Such was the Psychotherapist Associates sponsored Dine-Around on Tuesday February 13th at The American Psychoanalytic Association’s 2018 National Meeting. After the group of approximately 20 gathered in the lobby of The New York Hilton,

we set off for a leisurely walk through the bustling, energy-filled streets of Manhattan to our venue.

Already on the walk to the restaurant, I chatted with a new colleague from Los Angeles and we had a fascinating conversation about his work. Then we arrived at the restaurant, a warm and welcoming retreat from the frenetic experience of the New York streets. Three long tables were set for us toward the rear of the dining room. We all settled in for the evening meal. While most of the group were new to each other, conversation was easy. Our common work made for ready, interesting, and engaging talk.

A psychiatrist from Kansas sat across from me. It was fun to chat about our mutual experiences of Philadelphia, where my new colleague and I both got our start. A colleague of mine, a Temple University psychiatry resident who took me up on an offer to check out the conference, sat next to me. It was such a pleasure to talk with her outside of work and to hear about her experiences at Temple where we both work. It was good to connect with people I knew and to also meet new colleagues.

To me, a good evening can often be marked when the meal is ALMOST forgotten. In such instances, one is so engaged in conversation and fun that the meal is secondary. The food was good. I think I had fish. But the fun was great, and that is what I'll remember.

Jonathan Kersun, M.D.  
Member, APsaA Psychotherapist Associates Committee  
Assistant Professor  
Department of Psychiatry and Behavioral Sciences  
Lewis Katz School of Medicine at Temple University

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### ***Reports from the 2018 National Meeting – Programming***

#### **Business of Practice Workshop: “Deepening the Treatment: How to Engage Patients to Come More Frequently.”**

Psychotherapist Associates held another successful Business of Practice workshop at this year's 2018 National Meeting. In an effort to keep the session content practical and engaging, we decided that the topic this year would be “Deepening the Treatment: How to Engage Patients to Come More Frequently.”

Rachel Gross, M.D. served as the presenter. Dr. Gross is a psychoanalytic candidate from Philadelphia's Psychoanalytic Center of Philadelphia. Trained as a neurologist, she found herself wanting to know more about her patients, beyond the neurological symptoms, so she now works as a psychotherapist and an analytic candidate. Mark Smaller, Ph.D. served as the discussant for the workshop. Dr. Smaller, the immediate Past President of the American Psychoanalytic Association, brought a cheerful, seasoned, and wise practicality to the discussion.

Dr. Gross presented on issues around increasing treatment from once a week to twice a week to three times a week. Dr. Gross' presentation was superb, as she demonstrated herself to be a smart, loving, and committed analyst, working deeply in the transference. Along with Dr. Smaller's helpful insights, the discussion brought the material to life. Dr. Michael Groat, my co-leader, and I sat quietly as the session took on its own shape and direction, much like a meaningful psychotherapy session.

The packed room was fully engaged and enlivened by the presentation and discussion. To my great delight, it appeared that the objectives of the workshop were abundantly satisfied. The consensus during the discussion seemed to be that increased frequency can greatly enable the work of treatment as well as intensify a sense of aliveness between the therapist and patient. Just as the room was filled with engagement, it is through personal engagement with treatment that self-curiosity intensifies with the natural outcome of this self-curiosity being treatment of increased frequency.

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Member, APsaA Psychotherapist Associates Committee  
Assistant Professor  
Department of Psychiatry and Behavioral Sciences  
Lewis Katz School of Medicine at Temple University

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## **DG# 6: Presenting Clinical Material While Maintaining Confidentiality**

The Committee on Confidentiality of the American Psychoanalytic Association convenes an annual Discussion Group during the winter meeting. This year, Lewis Aron, Ph.D., led the discussion based on his comprehensive paper, “**Ethical Considerations in Psychoanalytic Writing Revisited.**” (2016) This paper is an update to his earlier 2000 survey. Aron’s paper and the Discussion Group were set against the backdrop of an internet-centered world where information is widely available. What are the downstream effects after publication of clinical material in the 21<sup>st</sup> century? For example, even an invitation to present one’s work to a closed group of mental health professionals in another state might result in a revealing blurb on an Institute’s website, accessible to anyone who might google that presenting therapist’s name.

So, what are the issues here? First, do clinicians seek permission from patients before they publish clinical information? How do they secure the permission? Do they use established procedures of informed consent that are derived from research? Or do they disguise and/or anonymize the material? Or do they do some version of both? There is no consensus on what clinicians should do. This was demonstrated in the Discussion group where participants fell loosely into two groups. One group favored informed consent; the other group favored giving the clinician discretion as to whether to disguise material or get consent. Both groups cite ethical considerations; both groups concern themselves with the impact on the patient.

The International Committee of Medical Journal Editors requires informed consent. However, the policies of psychoanalytical journal editors are less rigorous; those editors ask that clinicians use their best judgment, keeping confidentiality concerns uppermost in their decisions.

How do you ask for informed consent? With our understanding of unconscious processes, does one take a yes to mean just that, yes? What if consent is revoked right before publication? What if the patient requests to make edits? What if the patient is no longer in treatment? What if the patient reads the clinical material years later and has a reaction to it? Who is paying for the session when it involves a request that most clearly benefits the therapist/author who achieves recognition and prestige from publishing?

There is a real risk that few will publish clinical material if the requirement is to get informed consent, with consequential loss to the literature and to theory-building and technique.

Participants left the meeting pondering the question: How do we work through the breaks in the guarantee to our patients that the clinical situation is a private sanctuary?

**Reference: Aron, Lewis.** (2016) Ethical Considerations in Psychoanalytic Writing Revisited. *Psychoanalytic Perspectives*, 13(3):267-290.

Michele Press, MD  
Member, APsaA Committee on Confidentiality  
President and Training and Supervising Analyst, New York Psychoanalytic Society and Institute

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### **Science Department Session 1: Panic Focused Psychodynamic Psychotherapy (PFPP) - Extended Range: Developing an Evidence Base for Psychoanalytic Psychotherapy in Contemporary Science**

Charles Fisher, M.D., chaired this panel in which Barbara Milrod, M.D., and Fredric Busch, M.D., presented their work on a brief psychoanalytic psychotherapy approach for Panic Disorder. Of note, this is the first manualized psychoanalytic approach showing efficacy for an Axis I disorder.

Dr. Fredric Busch described the clinical principles of this 24-session approach. The basic idea is that panic and anxiety symptoms are expressions of unconscious conflicts and fantasies and that there are identifiable, psychologically meaningful stressors preceding panic attacks. The treatment can be divided into roughly three phases but is not a rigid cookbook-like approach. The initial sessions are focused on helping the patient to articulate psychological meanings of panic symptoms and stressors in the current life context. Significant life events that lead to panic attacks are discussed and developmental history is taken. The psychological meaning of the symptoms is explored. Some of the predominant themes tend to be conflicts around anger, guilt, and ambivalent feelings toward close attachment figures, as well as insecure attachment, separation and self-punishment. Therapists are very active in this treatment approach, engaging patients' curiosity about themselves, fostering mentalization, and addressing emergence of conflict and the nature of the transference.

Dr. Barbara Milrod presented background information and research on PFPP, emphasizing the importance of conducting research and efficacy testing for the survival of psychoanalytic approaches. She presented an open clinical trial at Weill Cornell Medical College funded by APsaA of 21 subjects showing that patients were very symptomatic at the beginning of treatment. They improved after receiving PFPP and stayed better at 6 month follow up.

In a NIMH funded randomized controlled trial of PFPP in comparison with applied relaxation training (ART) of 49 subjects, about three quarters of subjects treated with PFPP met "response" criteria for panic disorder, compared to only 39% treated with ART. An advantage of Panic Focused Psychodynamic Psychotherapy over CBT and ART is that it is a flexible, homework-free approach that can also address co-morbidities and does not include exposure. In other words, PFPP focuses on attachment rather than exposure and response-prevention.

Dr. Milrod and her research group, including co-PIs Jacques Barber, Ph.D. and Dianne Chambless, Ph.D., at the University of Pennsylvania, next conducted a two site RCT of PFPP in comparison with CBT and ART in a 2:2:1 ratio. This study was also funded by the

NIMH. While across the two sites, significant differences were not observed between the three treatments, there was a site by treatment difference such that at Cornell, CBT and PFPP outperformed ART, however at the Penn site, ART and CBT outperformed PFPP. Longitudinal analysis of treatment “responders” over the ensuing 12 months demonstrated that patients in all three conditions who met “response” criteria tended to remain well after 1 year without intervening treatment, which is excellent news. A number of more detailed process/outcome studies are currently being conducted to better understand the differences between sites better. PFPP was the first psychodynamic approach to meet evidence-based criteria. It is still being tested at 8 sites in Sweden and has been disseminated to several public health settings in Europe.

The audience was very engaged during the discussion section, raising questions about research results, long-term follow up data, and therapeutic technique. A topic of special interest was comparison of different treatment approaches such as psychoanalysis, cognitive behavioral therapy, and PFPP. A recording of this panel is available through the [APsaA website](#).

*Thanks to Dr. Barbara Milrod for help with this article.*

Simone Hoermann, Ph.D.  
Co-Chair, Psychotherapist Associates Committee

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## ***In Other News***

### **The Psychotherapy Action Network**

As an APsaA Psychotherapist Associate, you might be interested in learning about the activities of The Psychotherapy Action Network (PsiAN). This organization, which is separate from and independent of APsaA, was formed a year ago in order to organize, formulate initiatives and collectively advocate for teaching, research, policy and practice in which self-understanding, individual growth and the therapeutic relationship are valued as key elements of successful treatment. The clinician-members of PsiAN strive both to modify symptoms *and* to transform lives by enabling long-lasting emotional change. Both patients and clinicians have experienced the value and power of psychodynamic treatment, yet the extensive evidence base for psychodynamic therapy – including its true cost-effectiveness – has not been as widely recognized or publicized as the research on structured, time-limited, manualized treatment protocols.

To begin to shift the current mental health narrative, PsiAN organized a multidisciplinary conference in Chicago in 2017, which was sponsored by the Chicago Center for Psychoanalysis. We featured speakers who addressed the multiple threats to psychodynamic psychotherapy and psychoanalysis. Politicians and policy-makers, clinicians, researchers and theorists came together to assess our current mental health landscape and to explore strategies for advancement. Our opening keynoters, Jonathan Shedler, Ph.D. and Robert Whitaker, set the tone for a vital gathering devoted to highlighting the challenges to current psychology practice, such as the over-reliance on medications and short-term manualized treatments, reflecting the power of the pharmaceutical and insurance industries. Bert Karon, Ph.D., Todd Essig, Ph.D., Allan Scholom, Ph.D., Oksana Yakushko, Ph.D., Meiram Bendat, Ph.D., J.D., and others vividly put forth these issues, but also galvanized the attendees to act, thus marking the birth of the Psychotherapy Action Network.



With my Co-Chairs, Nancy Burke, Ph.D., Janice Muhr, Ph.D., and with broad geographic representation on our Steering Committee, PsiAN is creating a nationwide network of individuals and professional organizations ready to advocate for psychodynamic treatment. We aim to act not merely as an agent ourselves, but also as a catalyst, connecting like-minded individuals and groups around the country who are already doing the work – practicing, teaching, researching and advocating for psychodynamic psychotherapy. Some of the formal endorsements we have received include the Chicago Psychoanalytic Institute, the Chicago Center for Psychoanalysis, the NYU Postdoctoral Program in Psychotherapy and Psychoanalysis, Division 39 (Psychoanalysis) of the American Psychological Association, the International Society for Psychological and Social Approaches to Psychosis (ISPS-US), Next Steps, and the Coalition for Psychotherapy Parity, led by APsaA's own Susan Lazar, M.D.

Our initiatives include both local and national efforts. In one of our current campaigns, we have partnered with other clinicians and organizations to protest the American Psychological Association's Guideline project, and specifically its first guideline for treating PTSD. This guideline endorses a limited set of manualized treatments for PTSD, relying only on evidence from RCTs while dismissing evidence supporting other treatments, such as talk therapy, and even dismissing evidence of high attrition rates, low generalizability, and low treatment-success rates associated with the endorsed protocols. The PTSD guideline is the first of many that the APA is publishing, and these guidelines will potentially be used by insurance companies and other stakeholders to limit patients' access to insurance coverage for psychodynamic therapy.

Another PsiAN project focuses on a new Illinois mandate that all school-aged children undergo mental health screenings. We have assembled a team to outline concerns about such broad screenings, as well as to develop materials to share information with parents, pediatricians and educators about alternatives to diagnose-and-medicate interventions. We also use our collective voice to advocate for psychodynamic psychotherapy at the Illinois Mental Health Summit, which meets regularly to develop positions on proposed legislation, and have pressed other states to do likewise. We are promoting the alternative guideline for psychotherapy and mental health parity offered by the Coalition for Psychotherapy Parity to our affiliated groups. In addition, we are meeting with politicians to advocate for support for psychotherapy in mental health legislation, partnering with organizations addressing such psychotherapy-relevant issues as homelessness and gun control, and speaking out against research and education bias.

During APsaA's annual meeting in February, PsiAN leadership met with various APsaA components, including the Psychotherapist Associates. As a Psychotherapist Associate (PA) member, I was invited to join the PA Committee. We envision a mutually enriching relationship between APsaA and PsiAN, through which we can address some of the biases that may get in the way of psychoanalytically-oriented practitioners having a strong presence in research, practice and teaching agendas, and through which we can bolster psychodynamic psychotherapy as a treatment modality.

If you would like to join our listserv, learn more about PsiAN's work, or are interested in getting involved, please feel free to contact me or visit our website, <https://psian.org/>.

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**107<sup>th</sup> Annual Meeting**  
**Register Today!**  
**Advance registration closes May 22nd**



**Look out for our special programming:**

- The [Psychotherapy Department's](#) "Psychoanalysis and Psychotherapy" Discussion Group (Friday 6/22, 1:30PM)
- The ["Psychotherapist Associates Present"](#) Discussion Group (Saturday 6/23, 2PM)
- The [Two-Day Clinical Workshop](#), "Psychoanalytic Psychotherapy" (Friday 6/22, 3:45PM and Saturday 6/23, 2PM)

**Don't Miss the Fun Social Events at the  
107<sup>th</sup> Annual Meeting**

Peruse the [Preliminary Program](#) for ALL of the details

**The Psychotherapy Networking Lunch**  
12PM, Friday 6/22 at the Cliff Dweller's Club  
Click [here](#) for details

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*Are you interested in contributing to the next Newsletter?*

Are you interested in writing a summary of one of the panels, symposia, discussion groups, or workshops at APsaA's 107<sup>th</sup> Annual Meeting? Do you have any other contributions in mind that you think might be of interest to fellow Psychotherapist Associates, such as articles about books or movies, talks, or research reports?

**Please contact Simone Hoermann, Ph.D., Editor, [sh@simonehoermann.com](mailto:sh@simonehoermann.com) with suggestions, inquiries, or regarding contributions to the Psychotherapy E-Newsletter.**

**Information:** Please click on the link for information on joining APsaA's [Psychotherapist Associates](#). Benefits include a discounted meeting fee. Or contact **APsaA's Membership Services Assistant, Bronwyn Zevallos** ([membadmin@apsa.org](mailto:membadmin@apsa.org)) to receive a brochure.

You are currently on APsaA's list to receive the *Psychotherapy E-newsletter*. If you do not wish to receive future issues, please let us know by sending an email containing your name to **APsaA's Manager of Membership Services, Debbie Steinke Wardell** ([dsteinke@apsa.org](mailto:dsteinke@apsa.org)), and we will remove you from our e-newsletter distribution list.

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