

The Toronto Institute for  
Contemporary Psychoanalysis

A stack of five 3D cubes of different colors: light red, light purple, light green, light red, and light blue. The cubes are stacked in a slightly offset, staggered manner, with each cube partially overlapping the one below it.

**CANDIDATES'  
HANDBOOK**

2008 – 09

## **EDUCATIONAL PHILOSOPHY**

The Toronto Institute for Contemporary Psychoanalysis endeavours to strike a balance between professional training and scholarly education. The curriculum promotes these dual goals through seminars designed to integrate theory and practice. Our aim is to foster the ability to think critically about several major points of view (e.g. classical psychoanalysis, ego psychology, Kleinian analysis, British Object Relations, self psychology, relational psychoanalysis), and to formulate clinical material from a variety of viewpoints. In order to accomplish these goals, the curriculum reflects a comparative/ integrative perspective. We contrast theoretical positions, endeavouring to synthesize them where possible, and to understand what might make such integration difficult or impossible. In this process, we attend also to the historical context in which the theory developed, the scientific/philosophical assumptions inherent in it and, where relevant, the personality of the theorist. A book describing this perspective, *Comparative-Integrative Psychoanalysis* (New York: The Analytic Press, 2007), was published by the TICP President, Dr. Brent Willock.

## **HISTORY**

In the early 1980's, a group of clinicians and academicians passionately interested in psychoanalysis assembled in Toronto to discuss what might be done to contribute to the development of psychoanalysis in Ontario. That forum led to the creation of a Psychoanalytic Section within the *Ontario Psychological Association* in 1985. In monthly scientific meetings, stimulating presentations were made by senior analysts with international reputations (e.g., Prof. Morris Eagle, Dr. Paul Lerner, Prof. Otto Weininger), by other academics deeply involved in the field (e.g., Professors Phyllis Grosskurth and Paul Roazen), and by graduate students conducting dissertation research on psychoanalytic topics. Long-term study groups were established (Freud, Object relations theory, Lacan). Eminent psychoanalytic contributors were brought to Toronto to conduct full-day workshops open to anyone in the field. These events attracted large, multidisciplinary audiences from all over the province. These activities did much to stimulate psychoanalytic thinking and interest in our city and beyond. As this association grew, the founding members decided it would be beneficial to formalize an affiliation with a body to which many already belonged, namely the Division of Psychoanalysis of the *American Psychological Association* (Division 39). The Division was widely regarded as one of the largest, most exciting, creative, important psychoanalytic organizations in the world. In the relatively short time it had been in existence, it had made an enormous contribution to revitalizing psychoanalysis in

North America. It also facilitated training opportunities for some previously excluded professional groups. In 1991, *The Ontario Society for Contemporary Psychoanalysis* became the first Canadian Chapter of the Division of Psychoanalysis.

A Workshop Series, co-sponsored by the Psychoanalytic Section and *The Ontario Society for Contemporary Psychoanalysis*, exposed our community to such prominent figures as Professors Sidney Blatt and Irene Fast, Drs. Stephen Mitchell and James Fosshage. Sensing the enthusiasm, commitment and energy of our group, some of these individuals encouraged us to develop an institute to expand opportunities for analytic training. Labour to form the Institute began in 1989. Support, advice, and encouragement were provided by the Division of Psychoanalysis. Eminent individuals in analytic education, research, and scholarship generously agreed to serve on our International Advisory Board.

From the beginning, the professional community manifested strong interest in the innovative program of studies offered by the *Toronto Institute for Contemporary Psychoanalysis*. The first class of candidates was admitted in September 1992. At the same time, the Institute joined the International Federation for Psychoanalytic Education. A new group of students has been admitted, as planned, every two years since that time. Candidates have backgrounds in psychiatry, psychology, social work, and a variety of other academic disciplines. They commute from within Toronto and other cities in Ontario (e.g., London, Kingston, Ottawa) and the United States (e.g., Buffalo, Rochester). A few candidates have relocated from much further away in order to participate.

Our multidisciplinary association has developed rapidly. In 1996, the *Toronto Society for Contemporary Psychoanalysis* was established. Its mandate was to sponsor monthly scientific meetings and study groups to encourage scholarship, scientific productivity, continuing education, and professional affiliation. Society meetings are open to faculty, graduates, candidates, members of the Advisory Board, and individuals who apply for and are approved as Guests of the Society.

We collaborate with institutes outside Canada that share our interest in comparative analysis. The Massachusetts Institute for Psychoanalysis (MIP) in Boston, with whom we have a close working relationship, exemplifies a group with an approach similar to ours. In 2002 many of our candidates and faculty went to Boston for a long weekend to participate in MIP seminars and attend their Annual Symposium. In 2003, candidates and faculty from MIP came to Toronto to participate in a conference we co-sponsored with the International Association for Relational Psychoanalysis and Psychotherapy. Since these initial exchanges, this cross-fertilization has continued on both formal and informal bases.

The psychoanalytic societies of New York University's Postdoctoral Program in Psychoanalysis and Psychotherapy, the William Alanson White Psychoanalytic Institute, and Adelphi University's Postdoctoral Program in Psychoanalysis and Psychotherapy, having learned of our innovative activities, proposed joining us to co-sponsor an international conference in the Toronto area. This exciting venture, focusing on what is taboo in psychoanalysis (thoughts and actions), took place at Niagara-on-the-Lake in July 2000, and was a resounding success. Karnac Press' New Developments in Psychoanalysis book series is publishing a book including many of the papers from that symposium. Dr. Brent Willock (TICP) is Editor-in-Chief. Prof. Rebecca Curtis (Adelphi) and Dr. Lori Bohm (William Alanson White) are Co-Editors.

The synergy between these four psychoanalytic societies was such that we now assemble for symposia on a regular basis. Our second Joint International Conference was held in July 2002 at Trinity College, Dublin, co-sponsored with the Irish Psychoanalytic Forum. Once again, the high level of scholarship resulted in a second book, published by Routledge (London, 2007) entitled *On Deaths and Endings: Psychoanalysts' Reflections on Finality, Transformations, New Beginnings*. We think of this publishing venture as our Joint International Conference Book Series. Our 2005 conference took place in Cape Town, South Africa. The theme was *Power and Its Discontents*. This symposium will lead to a book on the theme of psychoanalytic psychology in South Africa. In 2008 the Joint International Conference returned to Canada, this time in Vancouver, where the focus was on the important topic of Loneliness and Yearnings.

In 2005 we began publishing The Bulletin of the Toronto Society for Contemporary Psychoanalysis. Edited by Dr. Scott Bishop, this publication can be accessed for on-line reading or can be downloaded from our website ([www.ticp.on.ca](http://www.ticp.on.ca)).

In 1999, the TICP became a Founding Member of the Association of Autonomous Psychoanalytic Institutes. AAPI has grown rapidly and now has member institutes throughout the United States (e.g., New York, Los Angeles, Ann Arbor, Kansas City, Minneapolis, Washington, D.C.) and in Europe (e.g., Rome, Vienna).

Our Founding Mentor, Dr. Stephen Mitchell, died unexpectedly in December 2000. His passing was a great shock and loss. To honour his memory, we established an Annual Stephen Mitchell Memorial Lecture. The first such lecture was given by his close friend, Dr. Lewis Aron, in 2002. Stephen was to have been first President of the International Association for Relational Psychoanalysis and Psychotherapy. Dr. Aron accepted that responsibility and IARPP's first conference was held in memory of Stephen in New York City, January 2000. Dr. Hazel Ipp, Vice-President of TICP, and a close colleague of Stephen's, has served on IARPP's Board of Directors for many years and is currently its President.

In June 2004 our increasing international contacts culminated in our co-sponsoring an exciting symposium in Sicily with the Istituto di Specializzazione in Psicologia

Psicoanalitica del Sé e Psicoanalisi Relazione (Rome and Milan), the Massachusetts Institute for Psychoanalysis, the Contemporary Institute for Psychoanalysis [Los Angeles], and the Institute for the Psychoanalytic Study of Subjectivity [New York]. The theme was *Dionisus' Ear: Trauma, Tragedy and Psychoanalytic Listening*. The symposium was distinctive not only because it took place in the beautiful, historic, seaside town of Siracusa, but also due to its organization around our shared experience of two powerful, classical Greek tragedies, Euripides' *Medea* and Sophocles' *Oedipus Rex* which were performed in the ancient outdoor amphitheater during the week we were in Siracusa. Dr. Hazel Ipp served on the organizing committee and discussed a paper while Drs. Judith Levene, Gail White, Alan Kindler, Gary Taerk, Bruce Herzog, and Brent Willock were active presenters, discussants, and panel chairs.

Looking back, we are pleased with how much has been accomplished in a relatively short chronological span. The time was obviously ripe for some exciting new developments on the Canadian psychoanalytic scene. We are happy to have been able to contribute to that evolution. Prodigious efforts by many, encouraged by generous support from others, have born wonderful fruit. The Toronto Institute and Society for Contemporary Psychoanalysis is now securely established as a major contributor to the discipline in Canada and, increasingly, on the international level, as a growing number of our faculty and graduates present their work at international conferences, publish innovative ideas in journals and books, and assume positions of responsibility in international organizations. The future of the Institute and Society promises to be at least as exciting as have been the years leading up to this moment.

B. Willock, Ph.D.  
President, TICP

Summer 2008

## **Founding Board Members**

Toronto Institute for Contemporary Psychoanalysis

Art Caspary, Ph.D.  
Hazel Ipp, Ph.D.  
Judi Kobrick, Ph.D.

Nira Kolers, Ph.D.  
John Munn, Ph.D.  
Brent Willock, Ph.D.



## **INSTITUTE**

**Suzanne Pearen, B.A., C.HRM**

TICP Administrative Coordinator

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Brampton, ON. L6X 4M5  
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Fax: 416-288-8060  
Email: [suzanne\\_pearen@rogers.com](mailto:suzanne_pearen@rogers.com)

## **SOCIETY**

**Neomi Offman, B.A.**

TSCP Administrative Coordinator

TICP Accounts

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Email: [neomio@rogers.com](mailto:neomio@rogers.com)

**Please visit our Web Site at [www.ticp.on.ca](http://www.ticp.on.ca)**

Toronto Institute for Contemporary Psychoanalysis

**EXECUTIVE COMMITTEE**

Brent Willock, Ph.D., C.Psych.	President
Hazel Ipp, Ph.D., C.Psych.	Vice-President, and Chair, Admissions Committee
Scott Bishop, Ph.D., C.Psych.	Treasurer Chair, Promotions & Community Outreach (TSCP), and Co-Chair, Scientific Program (TSCP)
Nira Kolers, Ph.D., C.Psych.	Secretary
Gary Taerk, M.D., F.R.C.P.(C)	Coordinator, Fellowship Program
Judi Kobrick, Ph.D., C.Psych.	Chair, Candidate Progress Committee
Ann Baraowski, Ph.D.	Chair, Curriculum Development Committee
Sam Izenberg, M.D., F.R.C.P.(C)	Chair, Ethics Committee (TSCP)
Gary Rodin, M.D., F.R.C.P.(C)	Co-Chair, Scientific Program (TSCP), and Coordinator, Scientific Papers
Sarah Turnbull, Ph.D., C.Psych.	Chair, Society Development (TSCP)

## Standing Committees

### **Admissions Committee**

Hazel Ipp, Ph.D., Chair  
Judi Kobrick, Ph.D.

Gary Rodin, M.D.  
Nira Kolers, Ph.D.

### **Curriculum Development Committee**

Ann Baranowski, Ph.D., Chair  
Art Caspary, Ph.D.  
Sarah Turnbull, Ph.D.

Taras Babiak, M.D.  
Karl Loszak, M.D.

### **Candidate Progress Committee**

Judi Kobrick, Ph.D., Chair  
Ann Baranowski, Ph.D.  
Karl Loszak, M.D.

Taras Babiak, M.D.  
Kadri-Ann Laar, Ph.D.

### **Ethics Committee (TSCP)**

Sam Izenberg, M.D., Chair  
John Keller, M.D.

Michelle Flax, Ph.D.  
Karl Loszak, M.D.

### **Scientific Program (TSCP)**

Gary Rodin, M.D., Co-Chair  
Brent Willock, Ph.D.  
Judi Kobrick, Ph.D.

Scott Bishop, Ph.D., Co-Chair  
Hazel Ipp, Ph.D.

### **Promotions and Community Outreach (TSCP)**

Scott Bishop, Ph.D, Chair  
Kate Harper, MA

Stephanie Bot, Psy.D.

### **Society Development (TSCP)**

Sarah Turnbull, Ph.D, President  
Frances Newman, Ph.D, Secretary

Keith Haartman Ph.D, Vice President  
Nira Kolers, Ph.D, Member at Large

## Affiliations

### **Joint International Conference Committee**

Brent Willock, Ph.D. (TICP representative)

### **MIP/TICP Liaison**

Hazel Ipp, Ph.D. (TICP representative)

### **AAPI (Association for Autonomous Psychoanalytic Institutes)**

Bruce Herzog, M.D. and J. Gail White, Ph.D (TICP representatives)

## REFERRAL SERVICE

Kadri-Ann Laar Ph.D., Naomi Stein MA, Coordinators

The aim of the Referral Service is to match candidates with individuals seeking psychoanalysis or psychoanalytic therapy. These individuals may not otherwise be able to afford the higher fees or longer waiting lists of established analysts. Fees are determined by therapist and patient. Therapy is provided by TICP candidates who have attained a broad range of clinical and academic qualifications. Candidates are in ongoing supervision with senior analysts.

If you are interested in participating in the Referral Service, complete and return a “Clinical Service Application Form” (which may be obtained from the Administrative Coordinator).

For further information, please contact the Referral Service Coordinators: Kadri Ann Laar (laarka@sympatico.ca), or Naomi Stein [knowme@idirect.ca].

## “The Bulletin”

*The Bulletin* is a TSCP publication available to members on-line ([www.ticp.on.ca](http://www.ticp.on.ca)) You will need Acrobat Reader to view the newsletter in its PDF format. Contributions and suggested submissions should be made to Dr. Bishop at scott.bishop@utoronto.ca.

## **TSCP Study Groups, 2008-09**

<b>GROUP</b>	<b>LEADER</b>	<b>TIME/LOCATION</b>
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<b>Relational Psychoanalysis</b>	Hazel Ipp [hazeli@rogers.com]	8:00 PM, 49 Shaftesbury Ave.
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<b>Neuropsychanalysis</b> month,	Scott Bishop	7:00 pm, last Thurs of ea HincksDellcrest Centre 2 <sup>nd</sup> floor conference room
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The Neuropsychanalysis Study Group is concerned with the interface between neuroscience and psychoanalysis. A primary goal of the group is to provide exposure to, and critical examination of, how developments in the cognitive and neurosciences can enhance psychoanalytic theory and clinical practice, and conversely, how psychoanalytic theorizing can enrich the neurological sciences. The group is coordinated and chaired by Dr. Scott Bishop. The focus is on developments in affective neuroscience beginning with the work of Allan Shore. If interested in joining the group, contact Scott at 416-929-2968 or scott.bishop@bellnet.ca, but please note that membership is closed at 10 participants.

<b>Religion and Spirituality</b>	Dan Merkur	7:30 /8:00 (TBD) third Tues of each month 360 Bloor St West, Suite 202
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The focus of the Religion & Spirituality group is the clinical significance of religion. It is seldom appreciated that religion has a rare, if not a unique, clinical position. Morbid formations or distortions of religion tend to be impervious to interventions that are successful in the treatment of neurotic aspects of love and work. Why can we not ameliorate people's faith, as we can their love and industry? What is it about religion that eludes the reach of therapy? Conversely, as Theodor Reik challenged analysts in 1929, "What protects and fortifies...repression more powerfully than religion, and the moral tradition so intimately bound up with it?" The traditional clinical strategies of dismissing religion out of hand, and discouraging discussions by maintaining silence on the topic, denied the clinical problem and made no progress with it.

The challenge of developing effective interventions remains. Speaking at a conference in July 2007, Ana-Maria Rizzuto, author of *The Birth of the Living God*, remarked: "I believe that even today psychoanalysts whose own religious experiences were not analyzed and who did not have a course about the psychodynamics of religious experiences at their institute are not prepared or inclined to attend to the religious aspects of their patient's experience." If interested in joining the group, contact Dan at 416-929-1259 or dan\_merkur@yahoo.ca

## FACULTY

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Taras Babiak, M.D.  
Clarissa Barton, M.B.  
Graham Berman, M.D.  
Scott Bishop, Ph.D.  
Stephanie Bot, Psy.D.  
Rukhsana Bukhari, M.D.  
Donald Carveth, Ph.D.  
Art Caspary, Ph.D.  
David Dorenbaum, M.D.  
Paul Finnegan, M.D.  
Michelle Flax, Ph.D.  
Douglas Frayn, M.D.  
Ian Graham, M.D.  
Keith Haartman, Ph.D.  
Janice Halpern, M.D.  
Ed Hanna, Ph.D.  
Sheldon Heath, M.D.  
Bruce Herzog, M.D.  
Marsha Hewitt, Ph.D.  
Hazel Ipp, Ph.D.  
Sam Izenberg, M.D.  
Alan Kindler, MBBS

Judi Kobrick, Ph.D.  
Kadri-Ann Laar, Ph.D.  
Judith Levene, Ph.D.  
Joshua Levy, Ph.D.  
Ellen Lewinberg, MSW  
Rafael Lopez-Corvo, M.D.  
Karl Loszak, M.D.  
Elliott Markson, M.D.  
Frances Newman, Ph.D.  
Sandra Palef, Ph.D.  
Felisa Rochwerger, M.D.  
Gary Rodin, M.D.  
Ron Ruskin, M.D.  
Gary Taerk, M.D.  
Alex Tarnopolsky, M.D.  
Graeme Taylor, M.D.  
Daniel Traub-Werner, M.D.  
J. Gail White, Ph.D.  
Brent Willock, Ph.D.  
Jean-Victor Wittenberg, M.D.  
Gordon Yanchyshyn, M.D.

## VISITING FACULTY

### Weekend Workshops

- 1992        Jay Greenberg Ph.D.
- 1993        Sidney Blatt Ph.D (Connecticut);  
John Gedo MD;  
Stephen A. Mitchell Ph.D (New York)
- 1994        Mar: Otto F. Kernberg MD (New York);  
Jun: William W. Meissner MD (Boston);  
Sep: James Fosshage Ph.D (NY) and Joshua Levy Ph.D. (Toronto);
- 1995        Mar: Fred Pine Ph.D (New York);  
Jun: David Scharff MD (Maryland);  
Sep: Joseph D. Lichtenberg MD (Washington DC)
- 1996        Mar: Irwin Z. Hoffman Ph.D (Chicago);  
Sep: James Grotstein Ph.D (Los Angeles);  
Nov: Frank M. Lachmann Ph.D (New York)
- 1997        Mar: Adam Phillips (London);  
Jun: Jessica Benjamin Ph.D (New York);  
Sep: Stephen Mitchell Ph.D. (New York)
- 1998        Feb: Sidney J. Blatt Ph.D (Yale U);  
May: Lewis Aron Ph.D (New York);  
Oct: Adrienne Harris Ph.D (New York)
- 1999        Mar: Irene Fast Ph.D (Michigan);  
Sep: Peter Fonagy Ph.D (London)
- 2000        Jan: Jody Messler Davies Ph.D (New York);  
May: Charles Spezzano Ph.D (Los Angeles);  
Sep: Stephen Mitchell Ph.D (New York)
- 2001        Jan: Roy Schafer Ph.D. and Rita Frankiel Ph.D (New York);  
May: Stuart A. Pizer Ph.D, and Barbra Pizer Ed.D (Mass.);  
Sep: Philip M. Bromberg Ph.D. (New York)
- 2002        Feb: James S. Grotstein Ph.D (Los Angeles);  
May: Adam Phillips MA (London);  
Sep: Glen O. Gabbard Ph.D. (Kansas);  
Sep: Malcolm Owen Slavin Ph.D (Massachusetts);  
Nov: Lewis Aron Ph.D (New York);

## **Weekend Workshops, Continued**

- 2003      May: Howard S. Bacal MD (Los Angeles),  
            Jun: Jonathan H. Slavin Ph.D.,  
            Sep: Donnel B. Stern Ph.D (New York),  
            Dec: Irwin Hoffman Ph.D. [Chicago];
- 2004      Jun: Virginia Goldner Ph.D (New York),  
            Sep: Muriel Dimen Ph.D (New York);
- 2005      Feb: Andrew Samuels D.H.L. (London),  
            May: Barbra Pizer Ph.D. (Boston),  
            Sep: Susi Orbach Ph.D. (London),  
            Oct: Gianni Nebbiosi Ph.D., Susi Federici Nebbiosi Ph.D (Rome);
- 2006      May: Jessica Stern [Harvard],  
            Sep: Jessica Benjamin Ph.D (New York);
- 2007      Jan: Ken Corbett Ph.D. (New York),  
            Jun: Mary Target Ph.D (London),  
            Sep: Jody Messler Davies Ph.D (New York);
- 2008      Feb: Jeanne Wolff Bernstein Ph.D. (Berkeley),  
            Jun: Paul Lippman Ph.D., Joshua Levy, Sarah Freke (Toronto),  
            Oct: Anthony Bass Ph.D. (New York);
- 2009      Jan: Stephen Cooper Ph.D. (Boston),  
            May: Stephen Seligman DMH (San Francisco)  
            Sep: Charles Spezzano

## **Stephen Mitchell Memorial Lectures**

- I:        November 2002: “A Day with Lewis Aron” (New York)
- II:       December 2003: “Dialectical Constructivism: New Frontiers of a  
            Relational Perspective on the Psychoanalytic Process”  
            Irwin Hoffman, Ph.D. (Chicago)
- III:      October 2005: “A Contemporary Reconceptualization of the Concepts of  
            Merger and Symbiosis”, Gianni Nebbiosi (Rome)  
            “Bion after Mitchell: Theoretical and Clinical Significance of the Concept  
            of Common Sense in Bion’s Work”, Susi Federici Nebbiosi (Rome)
- IV:      September 2006: “Working with the Intersubjective Third”  
            Jessica Benjamin, Ph.D. (New York)

V: September 2007: “From Oedipus Complex to Oedipal Complexity: Reconfiguring (Pardon the Expression) the Negative Oedipus Complex and the Disowned Erotics of Disowned Sexualities”  
Jody Messler Davies, Ph.D (New York)

VI: October 2008: “Analytic Love and the Dialogue of Unconsciousness”  
Anthony Bass, Ph.D. (New York)

### **Spring Panels**

May 2005: First Annual Symposium:  
“Into the Fray: Implicit and Explicit Influences of the Analyst’s Subjectivity”.  
Barbra Pizer Ph.D. (Boston)

Discussants: Darlene Ehrenberg Ph.D. (New York), Stephen Seligman DMH (San Francisco), Stuart Pizer Ph.D. (Boston), and Gary Rodin MD (Toronto)

May 2006: Second Annual Symposium:  
“Psychology of Terrorism: Psychoanalytic and Social Perspectives”  
Jessica Stern [Harvard]; Neil Altman [New York U]; and Sue Grand [NYU]

June 2007: Third Annual Symposium:  
“From the Cradle to the Grave: Psychoanalytic Implications of Attachment Theory Through the Life Cycle”. Mary Target Ph.D (London)  
Jean Wittenberg MD (Toronto), Gary Rodin MD (Toronto)

June 2008: Fourth Annual Symposium: “Dreams”  
Paul Lippman (New York), Joshua Levy and Sarah Freke (Toronto)

May 2009: Fifth Annual Symposium: Stephen Seligman [San Francisco], et al

### **Joint International Conferences**

- First: June 2000, Niagara-on-the-Lake, ON. Canada:  
“Taboo or Not Taboo? Forbidden Thoughts, Forbidden Acts”
- Second: July 2002, Dublin, Ireland:  
“Deaths and Endings: Finality, Transformations, New Beginnings”
- Third: August 2005, Cape Town, South Africa:  
“Power and its Discontents”
- Fourth: Fall 2008, Vancouver, BC. Canada:  
“Loneliness and Yearnings”

### **Other**

Two-Day Conference, ROM in Toronto, January 2003: TICP & IARPP:  
“Evolving Perspectives on Therapeutic Impasse: Relational Analysts at Work”

Week-long Conference, Sicily, June 2004: ISIPSE, MIP, TICP, IPSS:  
“Dionisus’ Ear: Trauma, Tragedy and Psychoanalytic Listening”

## **PERSONAL ANALYSIS**

All candidates, regardless of training stream, are required to be in a personal therapeutic analysis, usually conducted by a faculty member of the TICP. Frequency required is a minimal three (3) times weekly (four is preferable). It is recommended that candidates remain in analysis until the successful completion of a major portion of their supervised clinical work or, for academic stream candidates, this would be for a major portion of the time attending seminars, i.e. at least two years. Any expenses involved are not covered by the tuition fee and are the candidate's responsibility.

## **Academic Stream Candidates**

Some individuals (e.g., professors in literature, philosophy, sociology) may wish to learn more about psychoanalysis in order to enrich their academic research, teaching and writing. However, they may not be interested in full clinical training. These individuals are eligible to apply to attend the four-year seminar series without having to carry any (or all) of the supervised clinical cases.

Any candidate admitted to the comprehensive (academic and clinical) training program who might for some reason wish to switch to the academic stream must write to the Chair of the Candidate Progress Committee to have that request considered by the CPC and Executive Committees. Any candidate admitted to the academic stream who subsequently wishes to undertake clinical training must reapply to the Admissions Committee for consideration of this request to become a clinical candidate. These tracks have completely separate admission criteria.

## **Unregulated Health Professionals**

Candidates who are not members of a regulated health profession must receive ongoing supervision on their psychotherapy cases from a supervisor approved by the TICP Candidate Progress Committee (psychoanalyst with supervision experience and at least five years clinical experience as a psychoanalyst) until they have graduated from the Institute. Supervision would usually be one hour weekly, but must be at least once per month.

## **Restrictions: Regulated Health Professions Act**

For TICP/TSCP **members who maintain clinical practices in psychotherapy and/or psychoanalysis, and who are not members of a regulated health profession and associated College**, this information pertains to use of the term “doctor” as you represent yourself as a clinician to patients or the public at large.

The **Regulated Health Professions Act** states:

**33. (1) Except as allowed in the regulations under this Act, no person shall use the title “doctor”, a variation or abbreviation or an equivalent in another language, in the course of providing or offering to provide, in Ontario, health care to individuals. 1991, c. 18, s. 33 (1).**

Thus the **term or title of “doctor” is restricted under Ontario Law** and there can be serious legal consequences in the event that a patient or other member of the public (including another health professional) makes a complaint to one of the Colleges. [Please be aware that the legislation applies only to the **use of the term “doctor” in your role as a clinician**. An academic with a doctorate (Ph.D) is permitted to use the term “doctor” in his/her role as an academic (i.e., professor or scientist/ scholar) but **not** in his /her role as a clinician.

The legislation dictates that **only members of the following Colleges are legally permitted to use the term “doctor”**:

- a) the College of Chiropractors of Ontario;
- b) the College of Optometrists of Ontario;
- c) the College of Physicians and Surgeons of Ontario;
- d) the College of Psychologists of Ontario; or
- e) the Royal College of Dental Surgeons of Ontario.

Thus, at this time, under the **Regulated Health Professions Act** only members of these Colleges are permitted to use the term ‘doctor’ in their clinical practices. Also be aware that psychotherapy will soon become a controlled act in Ontario, and that only members of certain relevant Colleges (including the new College of Psychotherapists) will be permitted to deliver psychotherapy in this Province. Note as well **that the act of making and/or communicating a diagnosis is a controlled act**, and that even making an informal statement is prohibited unless you are a member of one of the identified Colleges. Restrictions also apply to terms such as ‘psychologist’, ‘psychological assessment’, ‘psychiatrist’, ‘psychiatric assessment’, etc.

For details, see the **Regulated Health Professions Act** (1991) Chapter 18, at: [http://www.e-laws.gov.on.ca/html/statutes/english/elaws\\_statutes\\_91r18\\_e.htm](http://www.e-laws.gov.on.ca/html/statutes/english/elaws_statutes_91r18_e.htm).

**See “Prohibitions”, Controlled Acts (section 27)**

**See “Restriction of title Doctor” (section 33)**

Updated January 2009

## **The Curriculum**

The first year provides an introduction to the philosophy of our Institute and an overview of several psychoanalytic perspectives (Freudian, Kleinian, British Object Relations, Self Psychology, Relational Psychoanalysis). Toward the end of the year, several evenings are devoted to examining cases from multiple points of view. Other sessions help to prepare candidates for beginning their first control case.

In the second, third, and fourth years, various topics are studied from multiple perspectives. Much time is also devoted to continuous case presentations. In the fourth year, there may be some space for elective courses determined conjointly by the candidates and the Curriculum Committee.

Instructors are urged to: present their material as much as possible from a comparative-integrative perspective; situate their topic in relation to current debates in the area; assist candidates in developing the capacity to think critically about theory and clinical material; introduce clinical material to illustrate theoretical concepts; develop candidates' capacity for clinical formulation and intervention. We recommend one or two articles or book chapters (no more than 50 pages of required reading) per class/ seminar (i.e., 100 pages or less per full evening).

See end of Handbook for schedules /curricula for the most recent four-years.

### **A Note about Continuous Case Seminars**

For Continuous Case Seminars, the Class Rep should discuss with his or her classmates in advance who will be able/willing to bring case material for discussion at each of the continuous case seminars (except where noted on the schedule that the instructor will be using his or her own material). That candidate should then contact the instructor to check how the instructor would want the particular presentations to proceed, whether the teacher wants any material in advance, and so forth.

Typically, on the first evening, the candidate presenting will provide some background to the case (developmental history, presenting problems, etc.) and then may move into a recent session or two of the process notes. On subsequent evenings, the candidate should be prepared to present an additional couple of sessions of process notes for discussion.

## **ACADEMIC WORK**

The academic component of the training consists of four years of weekly seminars. There are three hours of seminar time each week (excluding holidays) over approximately 30 weeks, for a total of about 90 hours a year. Classes are held on Monday evenings from 7:00 to 10:00 p.m., at the Ontario Studies in Education (OISE), Bloor Street East, University of Toronto.

It is recommended that candidates subscribe to **PEP** (Psychoanalytic Electronic Publishing) [see [www.pep-web.org](http://www.pep-web.org)] in order to access papers the teacher or administrative office is unable to provide. If you are a member of Division 39 (American Psychological Association, Division of Psychoanalysis), the best way to subscribe to PEP is via that membership. Since the TICP has a longstanding relationship with the Division of Psychoanalysis, you can join Division 39 inexpensively as an International Affiliate. You will receive an excellent journal, *Psychoanalytic Psychology*, a newsletter full of book reviews and articles, discounts on their annual spring conference, and inexpensive access to PEP. The latter is useful not only for your course work but for accessing an enormous quantity of the psychoanalytic literature, including all 24 volumes of Freud's writings. For information, or to join, go to [www.division39.org](http://www.division39.org).

On occasion candidates may be required to purchase a book. The TICP uses Caversham Booksellers, at 95 Harbord Street (near Spadina), and books may be ordered on-line, at [www.cavershambooksellers.com](http://www.cavershambooksellers.com). A number of more commonly assigned volumes are listed on their site under "reading lists", "TICP Texts". The telephone number for Caversham is 416-944-0962.

There are also three, two-day **Workshops** each year with visiting faculty (approximately 25 additional hours per year). Attendance at these Saturday/Sunday Workshops is mandatory. Any candidate unable to attend a complete Workshop must contact the Chair of the Candidate Progress Committee (CPC) at least one week in advance to arrange to make up this portion of the curriculum, otherwise credit will not be given. In lieu of full attendance at a Weekend Workshop, the candidate will be required to make up the missed Workshop by attending a Workshop following the fourth year of seminars, at his/her own expense.

Academic years are divided into two semesters: September to the end of January, and February to mid-June. Candidates may not be absent for more than two classes per semester, i.e., four per academic year. (If a candidate cannot avoid missing a class, he/she must notify the instructor in advance.) Should absences exceed this amount, credit will not be given until the instruction has been made up via arrangements with and approval by the Chair of the CPC, which may be an arrangement with the instructor or, on approval, the candidate may submit to the Chair of the CPC a paper related to the topic of the seminars missed. Attendance is taken by instructors and monitored by the CPC.

## **CLINICAL REQUIREMENTS**

For more details, please refer to “Guidelines for Supervised Clinical Cases”.

After six months of the first academic year have been completed, the Candidate Progress Committee (CPC) will determine which, and notify those, candidates who are approved to begin their first supervised case. Supervision must be face-to-face, with an approved supervisor (i.e., an analyst with a minimum of five years supervisory experience, at least five years clinical experience as a psychoanalyst, who is a member in good standing of the Toronto Society for Contemporary Psychoanalysis [TSCP]. Supervisors who are unregulated health professionals must have at least 10 years of clinical experience). Candidates must inform the CPC Chair of their proposed supervisor on each control case; the supervisor must be approved by the CPC prior to commencement of treatment and supervision of the case. The patient must be discussed with and approved by the selected supervisor. For the first control case, a list of approved supervisors is available; for the second and third cases there is a different additional list of approved supervisors. Please note these lists can change. Supervision sessions must be held at least once a week, one hour per session, for each patient in treatment. Supervision fees are arranged between candidate and supervisor, and are not included in the annual tuition fee. Evaluation reports are completed and discussed by the candidate and by the supervisor with respect to the supervisory experience. Supervisors are required to read and sign candidates’ required case reports prior to their submission.

Each of the three required control cases must be seen in treatment at least three times a week, although four is recommended. **Case one** requires a minimum of 80 hours (once per week) of supervision; **cases two and three** require a minimum of 40 hours (once per week) each of supervision. The CPC notifies candidates in writing when it is deemed appropriate for the second and third cases to begin. Training cases must include both male and female patients. Each case must be supervised by a different, approved supervisor. The supervisor must inform the CPC in writing when the requirement for supervision hours is completed. The CPC will then evaluate the supervisor’s recommendation and provide final approval to the candidate.

*Candidates may not identify themselves as psychoanalysts until after graduation.*

## Written reports

(For a detailed description of issues pertaining to case reports, refer to the “Guidelines for Case Reports”.) Case reports are due twice a year, November 1 and May 1 respectively, for all cases (regardless of duration of treatment to date), as well as for any patient who terminated treatment prematurely. Two typewritten, double-spaced copies of the report (2000 to 2500 words) must be submitted to the Administrative Coordinator. To maintain confidentiality, patients must be identified by initials only (no names), and no other identifying information should be contained in the report. The following areas need to be addressed in case reports: 1) Identifying Data, 2) Summary of History and Mental Status, 3) Course of Analysis, and 4) Formulation (see Guidelines for Case Reports for a description of issues to be addressed in each area).

Reports are sent to Readers assigned by the CPC. The readers’ evaluations are returned to the Administrative Coordinator. Ultimately a copy is forwarded to the candidate and his/her supervisor. Where possible, the same reader follows the case from the beginning of supervision to completion of the required number of supervisory hours and reports. The CPC reviews all case reports, supervisors’ and readers’ reports, and teachers’ evaluations.

## **MOCOMP (Maintenance of Certification of Medical Practice) Credits**

The TICP qualifies for **Section 4 CME (Continuing Medical Education) credits for physicians**. Thus, *each hour* spent in class, in supervision, at Weekend Workshops, or at Scientific Meetings is rated as **1 credit an hour**, with no maximum in the five-year period. It is the responsibility of each physician to keep track of the credits he/she earns, and submit them to the Royal College of Physicians and Surgeons at year-end. On completion of the training, you are required to document the objectives of the traineeship and the impact it has made on your practice. The TICP maintains attendance sheets, documents that the components of the Program are completed, and provides a certificate confirming completion of the Program.

### **CRITERIA FOR SUPERVISORS**

1. Supervisor must be a member in good standing with TICP.
2. Supervisor must have at least five years of experience as a psychoanalyst (post training) and at least ten years of clinical experience.
3. Supervisor must have at least five years of psychoanalytic supervisory experience or equivalent and/or a strong clinical psychoanalytic practice.
4. Supervisor must be approved by the Candidate Progress Committee and their credentials reviewed by a subcommittee of the CPC.

## GUIDELINES FOR SUPERVISED CLINICAL CASES

### Supervision

Candidates are advised to undertake treatment of a suitable patient in discussion with and approval by the selected approved supervisor. Training cases must be seen a minimum of three times weekly (although four is preferable). The first case requires a minimum 80 hours (once per week) of supervision. Candidates will be advised, following submission of the initial case reports and review by the Candidate Progress Committee (with input from a reader and the supervisor), when they are permitted to begin a second case. Following at least one satisfactory case report on the second patient, candidates will be advised when they are permitted to begin the third case. The second and third cases require a minimum of 40 hours (once per week) of supervision each. The three cases will include both genders. Face-to-face supervision is expected.

### Selecting a Supervisor

Training cases must be supervised by a psychoanalyst who has supervisory experience and at least five years clinical experience as a psychoanalyst, and who is a member of the Toronto Society for Contemporary Psychoanalysis [TSCP]. Candidates must inform the CPC Chair of the proposed supervisor on each control case; the supervisor must be approved by the CPC prior to commencement of treatment and supervision of the case. A different approved supervisor is required for each of the three cases. The candidate carries out treatment of the case, and attends once weekly sessions with his/her supervisor, where detailed process notes of the progress of the case are discussed. The supervisor submits evaluation reports of the candidate's clinical work on each occasion that the candidate submits a case report. Case reports are to be reviewed by the supervisor prior to submission.

### Case Reports

Candidates are required to submit reports for all cases in progress, regardless of duration of treatment to date (and/or on patients who terminated prematurely), by November 1 and May 1 respectively. Case reports, supervisors' reports, and readers' evaluations are reviewed by the Candidate Progress Committee. Reader's evaluations are subsequently forwarded to the candidate and supervisor. Where possible, the same reader follows the case from the beginning of supervision to completion of the required supervisory hours. Case reports must be submitted by the due date to receive consideration. Extensions will only be given under exceptional circumstances, on approval by the CPC, and then limited to one month maximum. Failure to submit case reports on time will result inevitably in the extension of the supervisory period, in case reports not being considered until the next due date, and the recommendation to begin a new case will be delayed until the late case report has been considered.

### Premature Termination

The first case must be seen for a minimum of 80 hours (once a week) of supervision. Should this patient terminate treatment prematurely, a new case (approved by the supervisor) may be with the same supervisor. The circumstances regarding termination of the original case need to be reported and explained to the Candidate Progress Committee by the candidate and supervisor prior to undertaking and gaining approval to start another case. Should the candidate wish to consider the first case for partial requirements for a third case at a later date, this will need to be discussed with the supervisor and the Candidate Progress Committee. Second and third cases require a minimum of 40 hours of supervision each. There will also be consideration of personal and extenuating circumstances that may not have been anticipated, which need to be discussed initially with the Chair of the Candidate Progress Committee and, if necessary, with the Executive Committee of TICP.

## GUIDELINES FOR CASE REPORTS

### General Information

Candidates who have started training cases are required to submit case reports on their work at 6-month intervals, due November 1 and May 1 respectively. Reports are expected on each control case, regardless of the duration of treatment to date. A report is also required on any patient who prematurely terminated treatment. Two copies of each case report are required. They should be typewritten, double-spaced, 2,000 to 2,500 words. Reports must be discussed with and initialled by the case supervisor prior to submission to the Candidate Progress Committee (CPC). The CPC will assign a reader who will follow the case. To identify your case, use the patient's initials only. Other identifying data within the report may be altered to protect the patient's identity. The case report should reflect a clinical and conceptual understanding of the analytic process and experience of the case to date. The report provides a forum for discussion with the supervisor as well as enabling the reader to make useful and relevant comments, perhaps providing a different perspective for understanding. The actual form of the report is left to the candidate. The following features should be incorporated in whatever format the candidate chooses:

1. Identifying Data:  
Identifying data should include not only the patient's data, but also the case number, the date that analysis began, total hours of treatment to date, supervisor's name, date supervision began, and number of supervision hours at the time of the current report.
2. Summary of History and Mental Status:  
A summary of the history and mental status of the patient, with diagnosis if possible, and assessment of suitability for psychoanalysis should be included (i.e., motivation, psychological-mindedness, present life situation, intelligence, ego strength and defenses, transferences, object relations and capabilities, reality testing, impulse control, etc.).
3. Course of Analysis:  
The course of the analysis consists of a description of the treatment to date, including representative verbatim excerpts, dreams, behaviour in the sessions, etc. Reports subsequent to the first report need not repeat material from earlier reports, and should focus on the analytic process, transference developments, any changes that have occurred, revised diagnosis and the like. These descriptions should be the basis of the formulations and theoretical discussion.
4. Formulation:  
The formulation should offer a psychodynamic and genetic explanation of the patient's presenting symptoms and especially the nature of the analytic process. The nature of the transference, object relations, resistances, defenses, dominant conflicts, and developmental deficits are some of the factors to be taken into account in constructing a formulation. The formulation should be close to the clinical material, but it should also allow for a prognosis and some consideration of the likely course of the analysis. Comments on the nature of countertransference feelings, the impact of the therapeutic work, and any efforts undertaken to resolve it may be presented.

### Role of the Candidate Progress Committee

Case reports are read by teaching, supervising or committee members of the TICP. Readers' comments are sent to the candidate and the case supervisor. The same reader follows the case from the beginning of supervision to the point at which the candidate has satisfactorily completed supervision of that case. Candidates may contact their readers for discussion of the comments. The Candidate Progress Committee will review both the supervisor's reports and the reader's evaluations to assist in following ongoing cases to their completion and in making recommendations for beginning subsequent cases.

# SCIENTIFIC PAPERS

1. Successful completion of a **scientific paper is a requirement for graduation** for all candidates (i.e. “academic” and comprehensive streams). The educational objectives of this requirement are to develop competence in: 1) surveying and critiquing the literature; 2) integrating clinical and theoretical material; 3) communicating one’s work and thinking to one’s peers. Candidates are encouraged to submit the paper at least 12 months before their expected graduation date.
2. Papers are to be **scholarly or scientific** in form, suitable for submission to a peer-reviewed psychoanalytic journal. Although it is not necessary for the paper to actually be submitted to and accepted by such a journal, it is our hope that some will be. Some of these papers will be chosen for presentation at scientific meetings of the TSCP.
3. Topics may be in the areas of theoretical, clinical, or applied psychoanalysis (or any combination of these).
4. The scientific paper should be approximately 20 typed, double-spaced, numbered pages (**approx. 5,000 words**), including a summary, notes if any, and reference list.
5. It must **include a summary or abstract of between 150 to 250 words** offering a precis of the paper that would enable a prospective reader to grasp the chief points the writer wishes to communicate.
6. **Two (2) hard copies of the paper, and an Email attachment of the paper (preferably in ‘Word’), are to be submitted to the TICP Administrative Coordinator.**
7. Style and format of the paper should conform to the conventions of the American Psychological Association, the International Journal of Psychoanalysis, or the Canadian Journal of Psychoanalysis.
8. Faculty members are available to be consulted by candidates in the preparation of their papers. We encourage those who feel the need for the help of a mentor in fulfilling this requirement to consult one. Fees for such consultation are to be arranged between the candidate and the faculty member. The Scientific Papers Coordinator may be consulted regarding suitable potential mentors.
9. Readers will be assigned by the Scientific Papers Coordinator. Evaluation will be on a Pass/Fail basis. As successful completion is a condition of graduation from TICP, failed papers must be rewritten and resubmitted until a passing grade is received or until an alternative paper has been accepted.

# EVALUATIONS

## Academic Seminars:

As part of the obligation to the training program, *all candidates are required to complete evaluation forms with respect to all instructors and courses.* These evaluations are mandatory; they are to be completed by each candidate in the class individually, and collected by the Class Rep, who will then return the evaluations to the Administrative Coordinator within one week of the end of the seminar/ series. Ultimately these commentaries are condensed into a “Seminar Evaluation Feedback Summary” which is forwarded to the faculty member concerned. Candidate comments remain anonymous. A copy of the Summary form is also provided to the Chair of the Curriculum Committee.

Instructors submit evaluation /comments on candidates, individually and as a group. These reports are returned to the Administrative Coordinator, and subsequently forwarded to the Chair of the Candidate Progress Committee.

Any consistently identified problem areas will be discussed by the Curriculum Committee or the Candidate Progress Committee, as appropriate, and ultimately reviewed by the Executive Committee. Where necessary, the individual will be contacted by the appropriate member of the Executive for discussion and resolution of the particular area of concern.

## Clinical Cases:

In November and May of each academic year, candidates are required to submit an evaluation report of their supervisor/supervision experience. The evaluation form must be signed by the supervisor. Evaluations are also sent to supervisors to be completed on their supervisees. The supervisee must sign this evaluation.

Supervision Evaluations are to be returned to the Administrative Coordinator, when possible attached to the Case Report(s) being submitted for that report period. The evaluations are subsequently forwarded to the Chair of the Candidate Progress Committee.

If a problem area is identified, the Candidate Progress Committee will contact the individual involved and, when deemed necessary, discuss the situation with the Executive Committee.

## **COMMUNICATION**

### E-MAIL:

The vast majority of communications from the office to members of the TICP/TSCP is via Email, for example reading lists for seminars, notices of committee meetings and study groups, reminders of events, changes to scheduling, etc. It is your responsibility to check your Email messages regularly. If you do not currently have an Email address, you are strongly encouraged to think of this as part of your 'required materials' at TICP, and to arrange for an Email address.

### CURRICULUM COMMITTEE /CLASS REPRESENTATIVE

Each year, each class appoints a candidate to act as *Class Representative to the Curriculum Committee*. This representative is the liaison between the class and the Curriculum Committee and participates in curriculum development. The representative is responsible for ensuring completion of the course/teacher evaluations, collecting these from the candidates at the end of each seminar series, and returning them to the Administrative Coordinator. Weekend Workshop Evaluation Forms are provided to the Curriculum Rep at the time of the event, for distribution to the candidates, who are individually responsible for completing the evaluation and returning it to the Chair of the Candidate Progress Committee. The Representative ensures that reading lists and articles sent to him/her are distributed to each class member. (This task can be delegated and shared with other members of the class.) The Curriculum Representative sits on the committee for a minimum of one year.

### CANDIDATE LIAISON TO THE EXECUTIVE COMMITTEE

Each year, each class should also appoint a candidate who will act as *Liaison to the Executive Committee*. (This person can be the same as the Representative described above.) The liaison person may arrange to meet with a member of the Executive Committee when there is an issue to be discussed. In addition, the Executive may request that the liaison/representative attend a meeting when there is an issue that needs to be addressed. The Liaison to the Executive holds this appointment for a minimum of one year.

### FACULTY /CANDIDATE LIAISON

A Faculty member *may* be appointed by the Board of Directors to act as the Faculty/Candidate Liaison for all the candidates as a group. This individual would not necessarily be a member of the Executive Committee. Alternatively, meetings between the entire Executive Committee and the candidates can be arranged from time to time to discuss issues that may arise. At minimum, one such meeting is scheduled at the end of each academic year.

## CANDIDATE ADVISORS

The Candidate Progress Committee assigns an advisor to each candidate. Advisors are members of the CPC. This makes it possible for each candidate to have direct access to a member of the committee from start to finish off his/her training, ensuring consistency and continuity of communication between candidate and committee. The committee member, or advisor, will:

- \* Act as reader on at least one of the candidate's cases,
- \* Maintain a record of the candidate's progress through the program,
- \* Provide liaison between candidate and the CPC with respect to satisfactory completion of requirements,
- \* Act as advisor for the candidate in cases of dispute with other TICP members.

## **FEES**

The TUITION FEE in 2008-09 is \$3,500.00 for **Years I and III** (active) candidates. This includes participation at all Weekend Workshops and Scientific Meetings. Fees for active candidates may be paid in full (i.e., one cheque), or in two post-dated cheques dated September 10 and January 15. **Post-academic candidates** (who have completed the four years of seminars) pay a tuition fee of \$300.00, which includes participation in the Scientific Program (Weekend Workshops *not* included). Candidate status cannot be retained for academic or post-academic candidates who do not remit fees by the stated deadline. Any fees submitted after the deadline date must be approved by the CPC Chair before that deadline and should include a \$50.00 late payment fee.

Cheques should be made payable to the "TICP" and mailed to: **Neomi Offman**, TICP Accounts, 59 Jonathan Gate, Thornhill, ON. L4J 5J8.

Withdrawing candidates will receive a full refund minus \$700 (cost of the initial 6 weeks of class) and an administration fee of \$100 if notice is received within the first 6 weeks of the fall term. This may be reviewed on a case by case basis if withdrawal is due to a health issue or an unforeseen and serious event.

SUPERVISION COSTS are not covered by the tuition fee. Candidates are required to make private, separate arrangements with their supervisors for the cost of supervision sessions with respect to training cases.

## **GRADUATION**

Upon completion of all academic and clinical requirements, the Candidate Progress Committee will take into consideration reports from instructors, clinical supervisors, and external readers, in order to determine whether the

candidate has successfully fulfilled all requirements of training. Successful candidates will be recommended to the Executive Committee. Candidates will then be notified in writing. Diplomas are awarded to graduates at a ceremony usually following the first Saturday Workshop in September. Graduates may identify themselves as psychoanalysts.

## LIBRARY MATERIALS

### CENTRE FOR ADDICTION AND MENTAL HEALTH

- \* The Library is located at CAM-H, at the (former) Addiction Research Foundation (ARF) site, **33 Russell Street, on the 2<sup>nd</sup> floor in the “research tower”**. Use Spadina entrance (or entrance off Russell Street).
- \* LIBRARY is **open to anyone**. There is **NO membership fee**.
- \* **To join**, simply go to the Library and complete an application form. It will take about one week to process, after which time you will receive a Library Membership Card in the mail.
- \* Membership permits **on-site access to books and journals** as well as borrowing privileges (three books per person). Journals cannot be signed out, but articles can be photocopied there, and some on-line journals can be accessed at [www.camh.net](http://www.camh.net), click ‘library’ at bottom of page.
- \* The borrowing period **for books is four weeks**. You may renew by phone.
- \* A photocopier is available on-site. **Copying charge is 10-cents per page**.
- \* Hours of operation: **8:30 am to 5:30 pm Monday through Friday; and 11:00 am to 4:00 pm Saturdays**. (From November through the end of May the Library is open on Wednesday evenings till 7:00 p.m.)
- \* Telephone number: **416-535-8501, Ext. 6991**.

- \* The **TICP /TSCP Library** is comprised primarily of donated books and journals, largely from the estates of Otto Weininger and Roger Spalding. The library is available to Institute and Society Members. It is housed at the office of Dr. Stephanie Bot, 1504 Yonge Street, 3<sup>rd</sup> floor (just north of St. Clair). Call Stephanie at 416-485-5243, X222, for entry code and times the office is open.
- \* There are hundreds of photocopied papers on file in the Office. To see if an article you need is available, contact the Administrative Coordinator at [suzanne\\_pearen@rogers.com](mailto:suzanne_pearen@rogers.com) .

# CODE OF ETHICS

of the

## Toronto Institute and Society for Contemporary Psychoanalysis

### 1) Preamble

These principles have been designed to guide Members of the Toronto Society for Contemporary Psychoanalysis, and Candidates and Faculty of the Toronto Institute for Contemporary Psychoanalysis, in establishing ethical standards of practice in their professional relationships with analysands, colleagues, and the public at large.

The overarching principle of professional psychoanalytic practice is to maintain the integrity of the profession, and of the therapeutic relationship. The primary professional responsibility of the analyst is to the analysand, and to conducting the analysis in an ethical manner.

It is understood that the following guidelines cannot cover all the specific areas of potential misconduct that may arise. The Ethics Committee will examine all cases of alleged misconduct on an individual basis. An analyst who fails to maintain the standards of ethical practice may be subject to a disciplinary hearing, in which case the most serious penalty is revocation of membership in the Society and/or the Institute. Analysts who are members of other professions are, of course, subject to the Laws of those Professional Societies. However, the ethical principles outlined here, though they may differ from those Societies, will take precedence in cases of alleged misconduct brought to the Committee.

The analyst should strive, at all times, to conduct him/herself in a manner that is respectful of the analysand, the ethical standards of the profession, and of the special therapeutic nature of the analytic process.

### 2) Guiding Principles

#### 2.1 Respect for the Dignity of Persons

Faculty, Candidates and Members of the T.I.C.P. are expected to treat patients and their families, candidates and colleagues with respect and care. The treatment relationship is founded upon trust and informed consent. The psychoanalyst must maintain the confidentiality and privacy of the patient at all times. A psychoanalyst may not reveal present or former patient confidences without permission.

#### 2.2 Integrity in Relationships

The psychoanalyst should deal honestly and forthrightly with patients, candidates, and colleagues. The psychoanalyst should engage in an active process of self-monitoring in pursuit of truthful therapeutic and professional exchanges.

## 2.3 Responsible Caring

### 2.3.1 Exploitation

The sensitivity of the analyst-patient relationship requires that the psychoanalyst scrupulously avoid any and all forms of exploitation of patients and their families, and limit as much as possible the intrusion of self-interest.

### 2.3.2 Conflict of interest.

The psychoanalyst should attempt to avoid conflict of interest situations as such situations may interfere with his/her determinations regarding what might be in the best interests of the patient.

### 2.3.3 Limits of competence.

The psychoanalyst should be aware of the limits of his or her competence, and avail him/herself of appropriate resources when necessary.

## 2.4 Responsibility to Society

Psychoanalysts within the Society of Contemporary Psychoanalysis are bound by the present ethical code in order to protect the public. A psychoanalyst is also bound by the code of ethics and standards of the regulatory body of which he or she is a member. A psychoanalyst has the same responsibility as any other citizen or resident of Canada and should act in accordance with its laws.

## 3) **Specific Principles**

### 3.1 Specific Principles for Both TICP and TSCP

#### 3.1.1 Selection of analysands.

The analyst is free to choose whom he/she will work with as an analysand. The selection of an analysand should be based on the clinical assessment, and the determination that analytic treatment is in the best interests of the analysand.

#### 3.1.2 The “therapeutic contract”.

As part of the recommendation of this particular form of treatment, contractual matters, such as method and rate of payment, scheduling, and so forth, should be discussed in a forthright and clear manner. Changes in the contractual agreement should be made in a manner that allows time for the analysands to raise questions and to engage in a discussion of the changes.

#### 3.1.3 Confidentiality.

Confidentiality is a strict cornerstone of analytic process. Except in cases where specifically required to by Law, the analyst must make every effort to protect the private, personal communications that are received in the analysis. Specifically, in situations in which the analyst discusses a case with colleagues, for professional advancement, such as at meetings, in written or journal communication, and so forth, every effort must be made to protect the identity of the analysand. This would also apply to an analyst who finds him/herself in the position of receiving such a communication; in such a situation it is

his/her responsibility to protect confidentiality by breaking off the communication. It is the responsibility of Members to co-operate fully with the Ethics Committee, and to keep matters before the Committee confidential.

#### 3.1.4 Boundary violations.

Analysts should not engage in any form of sexually intimate relationship with analysands, nor physically nor verbally abuse them. Analysts should not engage in any activity through which they might profit financially because of their relationship with an analysand.

#### 3.1.5 Misrepresentations and scope of expertise.

Members and candidates must neither misrepresent their own academic and/or professional training and/or experience, nor their professional affiliations. They shall not diagnose, prescribe for, treat, or advise on problems outside the boundaries of their own competence.

#### 3.1.6 Duty to report unethical behaviour.

Should a Member of the Society or Institute become aware that another Member is engaged in inappropriate sexual conduct with an analysand or supervisee, that Member should bring this information forward to the Ethics Committee.

### 3.2 Specific Principles for TSCP

#### 3.2.1 General conduct.

Members shall behave in ways in public that do not reflect disgracefully on the practice of psychoanalysis or its practitioners, nor on the TSCP as an organization.

#### 3.2.2 Relationship of members to one another.

Members shall treat each other with proper respect and dignity.

### 3.3 Specific Principles for TICP

#### 3.3.1 Seminar leaders.

Seminar leaders and candidates shall refrain from using clinical examples or material whose subject may be identifiable to any of the members of the class. Candidates shall inform the seminar leader if they recognize the subject of a case report and excuse themselves from the class.

#### 3.3.2 Supervisors.

Supervisors shall not engage in any behaviour vis a vis candidates which could reasonably be seen as exploitative of the supervisee or supervisory relationship.

### 3.3.3 Readers of case reports.

Readers of case reports shall excuse themselves from participation in reading any reports where the analysand is known to them in any social way, directly or indirectly. If a reader has or has had a therapeutic relationship with the candidate, the reader will either excuse himself/herself from this role, or will arrange to seek the candidate's agreement that he/she act as reader.

## **4) Implementing Procedures**

### **4.1 Jurisdiction of TSCP/TICP**

The TSCP/TICP undertakes to respond to ethical complaints and inquiries regarding its members and itself, using the written Code of Ethics as a basis for addressing these complaints and inquiries.

### **4.2 TSCP/TICP Procedures in General**

These "Ethics Procedures" contain the basic rules for the TSCP/TICP's application and interpretation of the above Guiding Principles. Under its constitution, the TSCP/TICP exercises discretion in deciding whether and how to address ethical concerns. In some cases the Ethics Committee may determine that it does not have sufficient resources or ability to respond adequately. The Ethics Committee may refer the complainant to the appropriate professional or governmental regulatory agency. The Ethics Committee may subsequently respond according to the findings and conclusions of the body which has evaluated the complaint.

### **4.3 General Rules**

#### **4.3.1 Inquiries Distinguished from Formal Complaints.**

Requests for TSCP/TICP consideration of ethical concerns fall into two general categories. An Inquiry seeks the interpretation of one or more Principles, without making a formal allegation that the Principles have been breached. A Complaint challenges the professional action or inaction of a TSCP/TICP Candidate, a TSCP/TICP Member, a TSCP/TICP Faculty Member, a TSCP/TICP Committee or the TSCP/TICP.

#### **4.3.2 Filing an Inquiry.**

An inquiry should be directed, in writing, to the Chairperson of the Ethics Committee.

#### **4.3.3 Filing a Formal Complaint.**

A complaint must be addressed in writing, by registered mail or courier delivery service, to the Chairperson of the Ethics Committee, and signed by the person(s) responsible for its initiation. A complaint must contain a clear account of the nature of the complaint, including the name of the accused person(s), a detailed description of what is alleged to have happened and why the complainant considers it a breach of the Principles of Ethics. A complaint must be accompanied by the following signed statement:  
"I have read the Code of Ethics of the TSCP/TICP. I agree to the use of the procedures described in these documents in the investigation of the charge I have made against Dr./Mr./Ms./Mrs. \_\_\_\_\_ and request that appropriate action be taken. I hereby give permission for a copy of my complaint to be given to Dr./Mr./Ms./Mrs. \_\_\_\_\_ and to such other persons as you and the Ethics Committee may deem necessary."

#### 4.3.4 Ethics Committee.

The TSCP/TICP Ethics Committee receives and reviews ethical inquiries and complaints and, if deemed necessary, issues recommendations to the TSCP/TICP Executive.

#### 4.3.5 Conflict of Interest.

Any TSCP/TICP member with a conflict of interest – family, professional or economic – vis a vis an ethics inquiry or complaint shall promptly disclose the conflict (in writing) to the TSCP/TICP Ethics Committee Chairperson (or designate) and decline to participate in the TSCP/TICP's review of or action on the matter.

#### 4.3.6 Notification of Professional Association or Appropriate Legal Authorities.

In cases where the nature of the complaint warrants, or where mandated by law, the Ethics Committee, in consultation with the TSCP/TICP Executive, and with legal counsel where deemed necessary, shall notify the appropriate professional association or legal authorities.

#### 4.3.7 Notification of Membership.

The TSCP/TICP shall notify its membership promptly (within 30 days) if, on ethical grounds, it expels or suspends any member or if a member resigns while an ethics-based complaint was pending against the member. This information, including the member's name, shall be communicated by mail to TSCP/TICP members.

#### 4.3.8 Confidentiality.

All complaints to the TSCP/TICP which allege wrongdoing by any individual shall be processed by the TSCP/TICP in confidence. Confidentiality shall be determined by the TSCP/TICP in light of the requirements of these Procedures.

#### 4.3.9 Expedition.

All communications and actions covered by these Procedures shall be undertaken with reasonable expedition, under the circumstances. The Ethics Committee shall, when necessary, specify time limits in light of the facts of a particular inquiry or complaint.

### 4.4 Procedures for Handling a Complaint

#### 4.4.1 Receipt and Acknowledgement.

Upon receiving a complaint meeting the criteria specified above, the TSCP/TICP will forward the original complaint to the Chair of the Ethics Committee. The Chair of the Ethics Committee will:

- a) acknowledge receipt of the complaint to the complainant in writing.
- b) convene a meeting with the members of the Ethics Committee to discuss the complaint.
- c) inform the named member in writing, including the name of the complainant and the nature of the complaint.

#### 4.4.2 Ethics Committee Process.

In considering the complaint, the Ethics Committee will act as follows:

- a) The Ethics Committee will conduct an initial assessment of a complaint. All records and identifying information will be held in strictest confidence. Correspondence should be secure and in writing. Electronic communications with regard to the complaint shall not be employed to further ensure confidentiality.
- b) If the decision is that the complaint does not merit further investigation, the Committee (via the Chair) will communicate this decision to the complainant and the named member in writing.
- c) If the complaint is judged to warrant further investigation, the named member shall be provided a reasonable opportunity to respond.
- d) Relevant facts shall be gathered as expeditiously and cost-effectively as possible, within authorized budgetary limits. Specific questions or matters may be delegated to one or more fact-finders or subcommittees. The Committee may seek legal counsel if this is deemed to be necessary. In situations where the elements of the case are beyond the scope of the Committee to investigate, the complainant may be informed that other agencies might better serve this purpose.

(4.4.2)

- e) The Ethics Committee will meet to consider the assembled information to assess whether a hearing with the named member is required, or whether a decision can be rendered at this point.
- f) If the Ethics Committee determines that a hearing is warranted, the named member and the complainant will be informed in writing. At least 30 days notice of a hearing must be given. The purpose of the hearing is to discuss the concerns of the Ethics Committee with the named member and to assist the Ethics Committee in coming to conclusions as to the disposition of the complaint.

The hearing panel will comprise at least three members of the Ethics Committee. The hearing panel will designate one member to chair the proceedings. In the event that a member of the hearing panel has a conflict of interest, the Chair of the Ethics Committee shall designate an alternate. A hearing may require more than one sitting.

- g) If the member resigns after the initiation of the complaint process, the process will proceed to its completion.

## 4.5 Ethics Committee Action on a Complaint

### 4.5.1 Ethics Committee Recommendations.

Once the Ethics Committee has satisfied itself that all reasonable effort has been made to obtain the relevant facts regarding the case, it will deliberate the merits of the allegations.

The following actions may be recommended to the Executive Committee following these deliberations:

a) Exoneration of the Member.

The member is found not to have engaged in any unethical conduct. All records relating to the case shall be destroyed within 30 days of this finding.

b) Dismissal of Complaint without Prejudice

This decision allows for subsequent examination of the Complaint, when a decision cannot be made because of insufficient evidence.

c) A Caution

The Member may be Cautioned when there is sufficient concern by the Committee about the Member's behavior.

d) Suspension

The Member is temporarily suspended from the TSCP/TICP for a specified period of time, pending resolution of any concerns that led to the complaint. It is the obligation of the Ethics Committee to re-examine annually all current cases of Suspension. The Referral Service shall be notified in writing of any Suspensions.

(4.5.1)

e) Permanent Expulsion from the TSCP/TICP.

In the event of an Expulsion, a letter shall be sent to all Members and Candidates announcing that "The Ethics Committee of the TSCP/TICP has recommended that X be excluded from membership and participation in the Society and Institute. The Executive Committee has decided to accept this recommendation".

### 4.5.2 Appeals.

The Complainant or the Member may appeal any Disposition by the Executive, or any Finding by the Ethics Committee. An appeal must be made in writing, directly to the Executive Committee, which may dismiss the appeal as lacking merit, or take appropriate action to investigate the issue further. The Executive shall inform the Ethics Committee of any appeals, and of its decisions regarding them.

## Toronto Institute for Contemporary Psychoanalysis

### **FIRST YEAR CURRICULUM 2008-2009**

Prior to the first actual class is an evening of Welcome/Orientation, with key Institute members (such as Committee Heads who sit on the Board of Directors) in attendance. This meeting provides an opportunity for new candidates to obtain a greater feel for how the complete program will unfold, to meet fellow candidates and some Board members, and to ask any questions or express any concerns. After the Orientation Evening, the course schedule proper begins with an Introduction to the comparative-integrative point of view and a discussion of the Institute's overall philosophy. Following is a series of modules providing grounding in several theoretical models. These seminars aim to familiarize you with the different approaches of these schools of thought to such key dimensions as Development; Nature of Relatedness; Model of the mind; Psychopathology & Character Formation; Treatment.

The first formal seminar series, The Freudian Framework, traces the development of Freud's model from its inception (classical psychoanalysis) through the refinements of ego psychology right up to contemporary Freudian practice. This module is followed by Object Relations Theory, which begins with some discussion of the origins of this concept in the early work of Freud and his coworkers. It explores the work of Melanie Klein and her followers, such as Wilfred Bion. This module ends with a discussion of what is known as the school of British Object Relations Theory (aka the Independent or Middle Group). The third module is on Self Psychology. It traces the development of this school of thought from the seminal work of Heinz Kohut up to today. The fourth module, Relational Psychoanalysis, is the most recent development in the field. Relational Psychoanalysis represents a blend of schools of thought such as object relations theory and interpersonal psychoanalysis (Harry Stack Sullivan, Clara Thompson, Erich Fromm, Edgar Levenson, etc). This perspective encompasses a diverse group of thinkers, some of whom draw deeply from other traditions such as classical psychoanalysis and the Klein/Bion development.

After exposure to the above perspectives, the year ends with a section called Pulling It All Together. This group of seminars begins with a discussion of Freud's famous case, the Wolf Man. Several faculty members will be present that night to consider the case from different perspectives. After the Wolf Man, we turn our attention to contemporary case material published by one of our founding members, Dr. Hazel Ipp. That material will be discussed from diverse perspectives by several faculty members.

The final session is the Year End Review/Social. This evening provides an opportunity to reflect on how the past year has been, identify strengths and weaknesses in the program, discuss ways of rectifying any problems, and also have a pleasant social evening to wrap up the academic year.

**Prior to commencement of classes, we strongly recommend candidates read:** Mitchell, Stephen A. & Black, Margaret J. (1995) *Freud and Beyond: A History of Modern Psychoanalytic Thought*. New York: Basic Books).

## YEAR ONE, 2008-09

### INTRODUCTION TO THE PROGRAM

Orientation Evening /Welcome	<b>Executive Committee</b>
Introduction to the Comparative-Integrative Point of View	<b>Brent Willock</b>
Introduction to Ethics	<b>Sam Izenberg/Karl Loszak</b>

### THE FREUDIAN FRAMEWORK

#### DEVELOPMENTAL MODEL & THE NATURE OF RELATEDNESS **Gail White** 1.

- Instincts & Psychosexual Phases (oral, anal, phallic-oedipal, latency, adolescence; the nature of aggression)
2. Autoeroticism, Narcissism, Object Relations, Object Constancy
  3. Sequence of Early Danger Situations
  4. Emergence of Ego & Superego from Id/Undifferentiated Matrix

#### **Weekend Workshops** with Visiting Faculty **Anthony Bass, Ph.D.**

#### PSYCHOPATHOLOGY/CHARACTER FORMATION

Affect-Trauma Model (Seduction?)	<b>Marsha Hewitt</b>
Symptom Formation – Compromise	<b>Marsha Hewitt</b>

#### **Marsha Hewitt** (seminar 1); **Gail White** (seminar 2)

1. Changing Conceptualization of Anxiety
2. Inversion, Perversion, Sadism, Masochism, Fetish
3. Mourning & Melancholia

#### **Marsha Hewitt** (seminar 1); **Art Caspary** (seminar 2)

Hysteria, Obsessive-Compulsive Neurosis, Paranoia, Psychosis

#### MODEL OF THE MIND

**Art Caspary**

1. Shift from Topographic to Structural Model
2. Two Principles of Mental Functioning; Magical Thinking; Omnipotence
3. Defense Mechanisms – Repression, Unconscious, Anna Freud's contributions
4. Ego Functions
5. Dreams

#### TREATMENT MODEL

**Art Caspary**

1. Hypnosis/suggestion/catharsis, Free Association, the Couch
2. Transference, Countertransference
3. Resistance
4. Clinical Use of Dreams

#### CONTEMPORARY FREUDIANS

**Marsha Hewitt/ Brent Willock**

## OBJECT RELATIONS

The aim of this module is to show the contributions of several significant theorists in this tradition and to incorporate their ideas as much as possible into the five-point framework (development, nature of relatedness, model of mind, psychopathology/character formation, treatment model).

### **OVERVIEW and SOME TRANSITIONAL FIGURES**

Overview	<b>Brent Willock</b>
Abraham	<b>Brent Willock</b>
Ferenczi	<b>Judi Kobrick</b>

**KLEINIAN-BIONIAN PERSPECTIVE**      **Don Carveth, Keith Haartman, Kadri-Ann Laar**

**Weekend Workshops** with Visiting Faculty **Stephen Cooper, Ph.D.**

### **INTERLUDE: BEGINNING ONE'S FIRST PSYCHOANALYTIC CASE**

First Control Case      **Clarissa Barton**

(Issues related to beginning one's first case, e.g., converting psychotherapy into psychoanalysis, the couch, free association, the frame, and other practical matters.)

### **BRITISH OBJECT RELATIONS THEORY**

Suttie	<b>Gordon Yanchyshyn</b>
Fairbairn	<b>Gordon Yanchyshyn</b>
Guntrip	<b>Brent Willock</b>
Balint	<b>Brent Willock</b>
Winnicott	<b>Art Caspary</b>

## SELF PSYCHOLOGY

Developmental Model & Model of Relatedness      **Sam Izenberg**  
Model of the Mind: Shift from psychology of narcissism to psychology of the self.  
Psychopathology & Character Formation: Place of neurosis in self psychology, character styles.

Treatment Model: Empathic vantage point, optimal frustration/responsiveness, aggression, the notion of cure, intersubjectivity as an outgrowth of self psychology and its clinical applications.  
Motivational Theory      **Judith Levene**

## RELATIONAL PSYCHOANALYSIS

Relational Theory in broad terms is a contemporary outgrowth of the Sullivanian interpersonal school and British Object Relations theory. This course provides an introduction to some major Relational theorists.      **Hazel Ipp and Gary Rodin**

Intensive Weekend – Affect Regulation Symposium with **Stephen Seligman** et al.

## PULLING IT ALL TOGETHER

Classic Case Discussed from Diverse Perspectives (Freud's Wolf Man)

**Ron Ruskin**, (Freudian); **Keith Haartman** (Klein-Bion); **Paul Finnegan** (Fairbairn/  
British Object Relations); **Judi Levene** (Self Psychological); **Gary Taerk** (Relational).

Contemporary Case Discussed from Diverse Perspectives

**Brent Willock** (Freud/Abraham); **Keith Haartman** (Klein/Bion); **Paul Finnegan**  
(Fairbairn/ British Object Relations); **Bruce Herzog** (Self Psychology); **Stephanie Bot**  
(Relational).

Year-End Review/Social with both Candidate classes, Executive and Curriculum Committees.

## **SECOND YEAR, 2007-2008**

Year two is divided into two sections. During the first seminar each evening for thirteen weeks, the topic is Affects and Relational Development. In keeping with the Institute's comparative-integrative philosophy, this important theme is explored from diverse perspectives, and encompasses recent research on infancy and attachment. Toward the latter half of the year, the focus shifts to the more directly clinical topic, Transference/ Countertransference / Intersubjectivity/Interaction.

Throughout the year, the emphasis in the second seminar each evening usually is strongly clinical. This series starts with five nights' exploration of technique conducted by faculty representing different perspectives, followed by a panel during which all five faculty are present to discuss questions that have been stimulated during the preceding five evenings.

Four seminars on Ethics are followed by continuous case presentations. In the first one, a faculty member presents his/her clinical work. After that series, candidates present their work for about four weeks at a time. Usually in the first class the candidate gives a brief history of the presenting problems and of the analysand's family/developmental history. This introduction might take 10 or 15 minutes, after which the candidate presents process notes from a couple of sessions. It is understood that cases are being supervised elsewhere, so the purpose of these seminars is not supervision but rather to examine the material from different points of view, in different styles, and to increase candidates' familiarity with both clinical material and process.

### AFFECTS AND RELATIONAL DEVELOPMENT

Introduction

**Michelle Flax**

An overview to help candidates grasp the context for the various discussions. Salient concepts are defined and explored; major debates in the area identified. Beginning weeks look at the development of affect, mentalization, affect regulation, and relational/ communicative aspect of affects, followed by a focus on how affect has been thought about in psychoanalysis. The course culminates with an intense focus on the clinical application of these ideas, including a case discussed by three instructors.

**Technique from Five Perspectives**

Technique 1: Freudian

**Ron Ruskin**

The seminar leader discusses technique from a particular perspective, usually using an exemplary case from a particular framework's literature to illustrate the distinctive features characterizing that school's views on clinical intervention. On the sixth evening, all five faculty are present to discuss questions that arise from the class.

Weekend Workshops with **Dr. Jodie Messler Davies**

**Development and Regulation of Affect**

Infant Research

**Art Caspary**

Affect Communication Systems

Technique 2: Kleinian

**Alex Tarnopolsky**

Technique 3: Self Psychology

**Alan Kindler**

Mentalization, Self-Reflective Function, Affect Regulation **Art Caspary**

Technique 4: British Object Relations

**Clarissa Barton**

Attachment Theory, Childhood

**Art Caspary**

Technique 5: Relational Psychoanalysis

**Hazel Ipp**

Adult Attachment

**Art Caspary**

Technique: Comparative-Integrative Approach:

**Panel** with all faculty

**Affect in Different Theoretical Systems**

Freud and Affect

**Michelle Flax**

Ethics

**Sam Izenberg/ Karl Loszak**

Object Relations and Affect

**Michelle Flax**

Self Psychology and Affect

**Judith Levene**

Relational Theorists and Affect

**Judith Levene**

French Analysts and Affect

**Gail White**

Continuous Case

**Frances Newman**

**Working with Affect**

Key Premises underlying how analysts talk and work with affect **Michelle Flax**

Case Illustrating Affect and Relational Development from Multiple Perspectives:

**Gail White, Art Caspary, Judith Levene**

**TRANSFERENCE /COUNTERTRANSFERENCE: INTERSUBJECTIVITY /INTERACTION**

Transference

**Sam Izenberg/ Judi Kobrick**

Continuous Case B

**Alan Kindler**

Weekend Workshops with **Dr. Jeanne Wolff Bernstein**

Countertransference  
Continuous Case C

**Gary Taerk**  
**Clarissa Barton**

Intersubjectivity and Interaction  
Continuous Case D

**Judith Levene and Hazel Ipp**  
**Gordon Yanchyshyn**

**Weekend Panel** on Dreams & Sunday Workshop with **Drs. Edgar Levenson** and **Joshua Levy**

Year End Review and Social

## **THIRD YEAR, 2008-2009**

This year continues in a similar format to year two, beginning with an evening devoted to Psychoanalytic Diagnostics. The second evening focuses on a case (Dora) viewed from multiple perspectives as part of our ongoing effort to foster comparative-integrative thinking. Then several major topics are explored (Therapeutic Action & Impasse; Trauma & Dissociation; Psyche & Soma; Neuropsychoanalysis; Dreams) from diverse perspectives in an effort to continue striving to refine our comparative and integrative skills.

### **Introductory Seminars**

Psychoanalytic Diagnostics (e.g., structural diagnosis, controversies about the Psychodynamic Diagnostic Manual, etc.)

**Art Caspary**

Freud's Dora: A Case from Multiple Perspectives

**Art Caspary** (Freudian); **Scott Bishop** (Self Psychology); **Gail White** (French Freudian); **Paul Finnegan** (Fairbairn); and **Kadri-Ann Laar** (Kleinian).

### **Therapeutic Action and Impasse — Multiple Perspectives**

Freudian Perspective (e.g., Analysis of the Transference; Remembering, Repeating & Working Through)

**Art Caspary**

Continuous Case

**Brent Willock**

**Weekend Workshops** with Visiting Faculty **Anthony Bass, Ph.D.**

Strachey, Loewald  
Klein/ Bion  
Self Psychological Perspective  
Relational Perspective

**Art Caspary**  
**Don Carveth**  
**Taras Babiak**  
**Gary Taerk**

Non-Interpretive Mechanisms in Psychoanalysis  
Continuous Case

**Gary Taerk**  
**Gary Rodin**

### **Trauma & Dissociation**

**Hazel Ipp/ Judi Kobrick**

**Psyche & Soma**

**Graeme Taylor**

Continuous Case

**Gary Taerk**

**Weekend Workshops with Visiting Faculty Stephen Cooper, Ph.D.**

**Neuroscience and Psychoanalysis** (Clinical Focus)

**Graeme Taylor**

Continuous Case

**Hazel Ipp**

**Dreams**

**Brent Willock**

Continuous Case

**Judi Kobrick**

**Intensive Weekend – Affect Regulation Symposium with Stephen Seligman et al.**

**Loewald**

**Gordon Yanchyshyn**

Continuous Case

**Art Caspary**

Year-End Review and Social

**FOURTH YEAR, 2007-2008**

While introducing new ideas, year four seminars are also intended to facilitate some sense of synthesis. This desire for integration entails reflecting back on what has been learned in previous years. To foster this process, we consider the history of certain key concepts (e.g., gender, the unconscious, aggression), culminating in discussion of current versions and controversies pertaining to these topics. Some time is also devoted to examining the empirical literature concerning treatment outcomes and, in conjunction with that subject, to work at understanding psychoanalytic failures, prolonged blockages, and other special difficulties.

**Contemporary Approaches to Gender and Sexuality**

Contemporary Approaches to Gender and Sexuality  
**Hewitt**

**Judi Kobrick & Marsha**

Continuous Case

**Rex Kay**

**Weekend Workshops with Dr. Jodie Davies**

Continuous Case

**Felisa Rochwerger**

**The Unconscious - Multiple Perspectives**

Freudian Unconscious  
Relational Unconscious  
Procedural Memory Unconscious  
Kleinian Unconscious

**Gail White**  
**Gary Taerk**  
**Bruce Herzog**  
**Brent Willock**

Continuous Case  
Self-psychological Unconscious

**Sandra Palef**  
**Sandra Palef**

### **Aggression - Multiple Perspectives**

Classical/ Ego Psychology  
Klein/Bion  
British Object Relations

**Marsha Hewitt**  
**Don Carveth**  
**Art Caspary**

Continuous Case  
Comparing self-psychological and relational approaches  
Transforming Aggression: Manifestations of Aggression in Childhood

**Bruce Herzog**  
**Gary Taerk**  
**Brent Willock**

### **Weekend Workshops with Dr. Jeanne Wolff Bernstein**

Aggression: Perpetrators

**Marsha Hewitt**

### **SPECIAL TOPICS**

**Loewald**  
Continuous Case  
**Neo-Kleinian Thought**  
**Neuroscience and Psychoanalysis**  
Continuous Case  
**Termination and Other Endings**

**Gordon Yanchyshyn**  
**Graham Berman**  
**Don Carveth**  
**Graeme Taylor**  
**Sam Izenberg**  
**Karl Loszak**

**Weekend Panel on Dreams & Sunday Workshop with Drs. Edgar Levenson and Joshua Levy**

Year End Review and Social.