

LOS ANGELES PSYCHOANALYTIC SOCIETY

SPECIAL BUSINESS MEETING

Time: Thursday, May 21, 1964, 8:00 p.m.

Place: 344 North Bedford Drive, Beverly Hills

Minutes of the Meeting

The meeting was called to order at 8:10 p.m.

1. The minutes of the meeting of March 26, 1964, with the following revisions, were accepted upon the motion of Dr. Brunswick, S/Dr. Vatz. Dr. Williams noted that on page two, referring to the Child Analysis Study Group, the minutes should be changed to "had" rather than "have been temporarily discontinued." Dr. Sperling noted that on page three instead of "Dr. Sperling recommended" it should read "Dr. Sperling brought up for consideration a proposal of the Arrangements Committee..."
2. Report of the Executive Councilor to the American Psychoanalytic Association - Dr. Futterman:
 - a. See report on file. Also a more detailed report will be filed for reference purposes. Dr. Futterman noted in particular that Drs. Grotstein and Mott were elected to membership in The American. (Brief ovation.)
 - b. Supplementary report of the Alternate Councilor, Dr. Rollman-Branch, was read and is on file.
3. Announcements:
 - a. Membership Committee - Dr. Tausend, Chairman:

Drs. Call, Edelmann and Orfirer have completed their training and the members will be notified in writing of their application for membership, to be voted upon at the next meeting.
 - b. Dr. Sperling noted with regret that Mrs. Ermalene Yerkes suffered a fracture of the right wrist, and asked the members to keep their secretarial requests to a minimum because of the necessary limitation in the office. Additional help will be obtained as soon as possible.

I (Conclusions)

How to proceed — Kennedy — Let's get on, let's make a start —

A. Should we commission a committee to

bring about change — A New Era Committee? —

1. This Com. will first bring us a re-statement of principles (gather which can take into account what we discussed tonight — for the approval of the members then await the next commission)

2. Or — it could adopt its own concept of what changes are necessary, make a statement to that effect, begin the study of a constitutional 'by-law' change (like a constitutional convention) to bring changes about, and also help make those non-constitutional recommendations which

are deemed important — Such a commission requires broad powers to recommend changes, involving the constitution & should be commissioned by both — & also, to report to the membership at frequent intervals.

3. Problem: How to pull together — if possible — some very opposing tendencies, or perhaps basic nature — is allowing a split again — that we don't want — & still to account for varying viewpoints — or at least to allow their expression — a broad view-point can allow for serious viewpoints in to account a scientific or professional attitude

So — Com should be constructive, activists & thinkers & not only those who are against

- c. Dr. Pastron requested that the members bring to the attention of their wives the announcement regarding the meeting of the Women's Auxiliary.
- d. The Baltimore Psychoanalytic Association announces the Robert T. Morse Memorial Fund to commemorate their deceased colleague. Those wishing to contribute in his memory may do so; please see the notice on the bulletin board.
- e. Dr. George Schnack has written us regarding the seventh Western Divisional Meeting of the American Psychiatric Association in Hawaii, August 28 to September 9, 1965, and has invited the West Coast Societies to hold complementary meetings if they so desire.
- f. All members wishing to make application for membership in The American should note that the deadline for consideration at the Winter meeting is June 1.

4. Report of the Committee on the Study of Psychoanalytic Practice - Dr. Horowitz:

The report had been circulated and Dr. Sperling initiated the discussion by noting that at the time he took office, he was aware of the dissatisfaction of many of the members regarding practice and resolved to pursue this matter. The Committee had not yet made any detailed investigation and this was needed to study the facts and possible causes. The Committee did not function too extensively the first year, but this past year has been very active, undertaking a study upon which this report is based.

Dr. Horowitz wished to thank those members who cooperated in the study and commented upon the report, as well as the hard-working members of the Committee. The Committee has attempted to identify some of the problems and it is now up to the members to pursue and institute further procedures and actions.

Dr. Van der Heide expressed his appreciation of the Committee's approach to the study and its report. He hoped this significant report will be cautiously and appropriately used. The problems presented are part of a nation-wide phenomenon, involving certain disappointments with psychoanalytic practice and disillusionment with psychoanalysis itself on the part of some of its practitioners. Psychoanalysis has had problems and still does. There are three parts to the report: practice, the image of psychoanalysis and analysts, and training.

Dr. Gitelson's recent address at The American is germane to these problems. He referred to those oversold aspects of psychoanalysis in America, as if it were to replace psychiatry, which it has not,

of course. Dr. Gitelson noted that psychoanalysis is more a basic science than is psychiatry itself. Psychoanalysts feel to some extent that they have lost their identity, feeling remote from their medical training and the loss of the respect of their colleagues. Psychoanalytic training is not a vocational course, guaranteeing full employment. This report deals with existential and identity problems, and even parricidal trends.

Dr. Horowitz remarked that many of the members apparently have a very parochial view of the problem and have not regarded it as a national one.

Dr. Rangell commented that similar information study groups are in existence at all levels nationally. While some have questioned whether the national organization should be involved in these problems, the Committee of The American has felt that they are rampant difficulties and must be dealt with nationally as well as locally. The bulk of this report opens up these same problems. After the war, psychoanalysis had a heyday, and now there is a swing back, but it is not sufficient to just await the swings. Some of the problems, of course, are due to local ecology, age and so on. The Philadelphia group set up a Ways and Means Committee three years ago, as did Baltimore and other groups. In general, the Institutes have been regarded as the chief place of intellectual outlet; the Societies more peripheral. The scientific meetings have been poorly attended, with the same faces at the podium. There were changes this year, according to this Philadelphia study, and now, after three years, they report distinct improvement with a healthy scientific organization and recent progress.

He went on to say that the first step is the elucidation of the difficulties and this requires recognition and a united effort to overcome the difficulties. Good communication is necessary and the work must be done at the local level, not by an edict from above. There should be mutual exchange with other Societies, and we already note some improvement in such exchanges, such as we are presently experiencing. There is relief of guilt in discovering the generality of the concerns. This report is a great start, and it should be furthered in a constructive and analytic way.

Dr. Ekstein raised a question regarding the methodology of the report, formulation of the questions, and difficulty in being optimistic as the interviewing was being conducted. He was troubled by the term "public image," and its implications of unreality. The concept of a public image derives from modern politics, and people who are committed to psychoanalysis are not, and need not be, concerned with a "public image". Psychoanalytic pioneers were not concerned because it was the cause that was important. We become concerned with image when we are unsure of

ourselves: He who wishes to risk, will not be concerned with his image. Communication alone is not sufficient; we need to communicate for a purpose; we need to know who will work, where, teach whom, who will participate, in what fashion. We ought to discuss what we shall do for, with and about psychoanalysis. We should be concerned not with public image but with public works.

Dr. Sarlin notes that psychoanalysis suggests that we try to understand human affairs before passing judgment. Our conduct will not be unaffected by understanding, but to comprehend is not necessarily to pardon. Referring to the question of the public image, Dr. Horowitz noted that some are concerned with what we have done to destroy our good image, and that the consensus seems to be that we are not as well thought of as we once were.

Dr. Futterman commented upon Dr. Gitelson's talk and Dr. Ekstein's ideas about analysis, noting that he had some difficulty in putting these two images together. Gitelson sees analysis as concentrated in the office practice, that any extension beyond the office and thorough orthodox psychoanalysis belongs rather to psychiatry. Ekstein sees psychoanalysis in a more extended form and doesn't lose his self-image as an orthodox analyst because he does these other things. Gitelson has the idea of a selected prophet as his self-image, but he is fighting the battle of Chicago and our problem is a different one, that is, the realm of psychoanalysis within our own Society.

Dr. Walsh compared the difficulties with those of developmental stages of individuals, and the need for revivification and updating. He referred to overt and covert leadership aspects of the situation, and the relationship to our need to remind ourselves of standards which we may have lost sight of. If we remain fixed and rigid, there is no progress. He hoped we might broaden our horizons through communication and increase our scientific productivity, both of which have been adversely affected. There is a need for sympathetic interest and help among us all.

Dr. Greenson commented on the clinical findings of the report regarding the changes in the nature of practice. Since World War II, there have been changes in the patients we have seen; fewer symptom neuroses and a greater number of character disorders and borderline cases. Apparently this has been the case in England for some time. This change raises certain questions regarding practice and training. Previously we felt that analysts were the only ones equipped to handle symptom neuroses; now a larger number and more diffuse group of practitioners feel that they can do so. The patients, too, are more sophisticated and want shorter treatment than for symptom neuroses. There are many people they can go to toward this end. This is part of what has changed in practice. Also, few analysts will go into new communities and do the groundwork of establishing a practice there. He wonders as to what other factors may be involved in these apparent changes.

Dr. Bird commented on the geographical location of analysts and the large untapped areas of possible analytic patients, but stated this is an area in which the Society can do little except express opinions since we are all well-established by the time we become Society members. In some areas, training has been arranged so that candidates may come from a distance, or may be encouraged to settle in outlying areas early. This is something the Training School should seriously consider in its relationship with candidates.

Dr. Hayman commented that it is easy to get improvements with psychoanalysis, but difficult to get a cure. It is easy to be critical of other analysts and their results. Freud and others have indicated some of the reasons for difficulty in bringing about character change. Dr. Hayman discussed some of the possible factors of physiologic and organic nature in structuralization of psychic process. We should keep in touch with such developments and encourage a multi-disciplinary approach.

Dr. Lawrence Friedman was encouraged by the good general discussion, which is required prior to more detailed discussion, but would like to ask some questions leading toward the latter. Dr. Gitelson was referring in his talk not to analysts as practitioners, but rather to psychoanalysis as a science. It is appropriate to look upon psychoanalysis as a basic science, and psychotherapy as a branch of medicine and not confuse them; otherwise, we promise too much and deliver too little. The problems we face are universal, not merely local. One considerable change is that people today, who are dissatisfied do not leave psychoanalysis but stay within it; that is, those who are trained in the field remain in the field. This makes for different outcomes than were previously the case. He requested clarification as to some of the figures and references in the report.

Dr. Horowitz clarified that the figures referred to the numbers of responses.

Dr. Friedman went on then with the preceding question, as to whether psychoanalysis fulfilled the expectations of the members. One should first inquire as to what these expectations were, because they are so often unrealistic. Many candidates hope that analysis will improve their capacity for doing therapy, and in this they must often be disappointed. He commented upon the drop in the number of applicants which is proportionately greater in our Institute than generally, and indicated some of his thoughts as to the causes. The requirement of a three-year residency prior to candidacy raised great obstacles. He also raised questions regarding the difference between training analysis and therapeutic analysis.

Dr. Brandchaft thanked the Committee for opening up these problems of significance to us all. Although Dr. Ekstein does not feel we

should be concerned with a public image, Dr. Brandchaft felt that we should inform ourselves as to what the informed public feels about us and on what basis. He did not think our future will depend on our participation in clinics, community activities, etc., although they will do much for us. Where we are inadequate, and where our image counts, is in our work in the office. We should do this better than we are doing it. Perhaps all would go much better if we were satisfied with the work we do -- its character, consistency and effectiveness. Our experience parallels that of our patients -- we are going through as individuals, and as a group, similar experiences. We approach psychoanalysis with fear and misgiving, followed by a period of omnipotence and enthusiasm, a manic defense. By denial, adherence to doctrine and self-infusion as to righteousness of cause and possession of revealed truth, we proceed then to disillusionment, depression, and an attempt to attribute our difficulties to various causes -- to Training Analysts, patient, and so on.

This too will pass. Our patients do not choose what they present to us; they are what they are. Training has done what it can for us, and that is a great deal. This period will be surmounted by sober appraisal of ourselves and our technique. We must face our own limitations as to what we can and cannot do and evaluate the body of knowledge we have as to what to retain and what to improve upon. We must examine without prejudice and make ourselves available to whatever knowledge will extend our range of help and effectiveness.

Dr. Rosow considered the most important issue presented here not a matter of image, nor of why our practice has changed, nor because our patients are infantile in their attitudes, but rather the aspect of morale and atmosphere as exemplified by this report itself. Secrecy, insularity, skepticism, lack of cohesiveness, etc., are the issues. Why do we have this poor morale? Why is there a fear of discussing issues, unorthodoxy, etc? It is toward this that we must direct ourselves.

Dr. Van der Heide urged the Committee to settle down to the questions that they have cut out for themselves and us. We should come to the particular points raised by this Committee. He indicated that when we use the term "public image," we are not referring to a pose, but rather to what we believe and practice and sometimes see being abused, smeared and damaged at times -- not to ourselves, but to the public at large.

Dr. Berenson requested clarification of the point under Part II, 5d, referring to the lack of unity and cohesiveness. What are the facts that have led to this conclusion? Dr. Horowitz indicated that this was a conclusion derived from the questionnaire and interviews as reflected by the Committee members. Dr. Berenson pursued this matter, feeling that this very fear of expression is reflected in this part of the report and wished to have the issue brought out in the open as to just what the statements have been and the facts underlying them. Dr. Horowitz replied that the

Committee had attempted to give a fair representation of the material, but that there is a problem of confidentiality so far as the material of the respondents is concerned. The views presented in the report are quite representative and have been repetitiously presented in the data.

Dr. Brunswick noted that the discussion had to be general because the report is general, but that we need details to really lead to effective action. This can be done and still preserve the confidentiality.

Dr. Rosengarten commented upon the restrictive and constricted attitudes, even reflected in the Committee itself. For example, the data in the report regarding training was considered by some to be appropriate for presentation to the Curriculum Committee and Education Committee, yet objections were raised that those were Institute functions. We are members of both and there should not be this restriction upon our own efforts.

Dr. Sarlin presented the statement which he made before the Committee on Institutes and which he felt was germane to the matter at hand.

My Analytic Credo

"Opposition is not yet emnity but is frequently misused to make an opening for it." (Sigmund Freud)

"It is possible to disagree without becoming disagreeable."
(Lyndon B. Johnson)

I cannot believe that the goal of psychoanalysis is so restricted and limited that we need be content with the mere removal of the discomfort associated with infantile, narcissistic behavior. I am not so pessimistic regarding the possibilities of psychoanalysis that we must excuse, condone or tolerate the manifestations of unresolved pregenital conflicts merely because they have become ego-syntonic and are no longer guilt laden. To become free of guilt or anxiety when fear of conscience is appropriate and rational is no indication of the successful completion of analysis.

If psychoanalysis is losing favor in the public eye (including psychiatric residents) it is not only because of "resistance" but also because we as analysts have not made our primary goals and objectives sufficiently clear both by precept and example. Unresolved infantile envy and competitiveness among analysts has led to destructive, hostile attempts to stifle and stultify genuine creative thought and effort. Analysts themselves, as human beings have not always been appropriate examples for acceptable healthy identifications. Sometimes the struggle against identification is rationally justifiable.

The great heritage which Freud left psychoanalysis must not be debased by limitation to the understanding and tolerance of intolerable behavior which should be criticized whenever it is rationally vulnerable to such criticism. It is the primary responsibility of psychoanalysis to establish the criteria for that mature behavior which results from the appropriate socialization of the instinctual drives. In the last analysis, psychosexual maturity has meaning only in terms of man's relationship to his fellow men. This is our opportunity! This is our obligation! This is our challenge!"

Dr. Barnard raised the possibility of instituting on-going small discussion groups to pursue these ideas, and Dr. Leavitt concurred, indicating the experience of the Baltimore group which had divided the entire membership into small study groups with reported effectiveness and considerable influence upon the general atmosphere of the group.

In response to a question from Dr. Van Dam, Dr. Rosengarten elaborated that in the interviews those who had been in re-analysis urged that this be undertaken with someone other than a Training Analyst.

Dr. Hayman regretted the low percentage of response to the questionnaire and felt that further study might improve the validity of data and conclusions.

Dr. Horowitz replied that there was no pretense as to statistical validity, but rather that the data was indicative of certain trends. He felt there was more interest in discussion than refining the statistics further.

Dr. Rangell felt that we were not interested in methodology particularly, but in examining ourselves. We are amateurish in our understanding of group dynamics as opposed to individual psychology. Drs. Rosow, Sarlin and others point to the heart of the matter -- the atmosphere, not the patients. The pertinent matter is to deal with the stifling atmosphere and creative restraint, and open up discussion without coercion. He favored the idea of small groups; rather than specifics and goals now we need on-going discussion and elucidation. We must be slow and consistent to be constructive.

Dr. Malin referred to at least one such local study group which has been carrying on continued discussions around these problems. When we graduate and become members, we must come to a new orientation and adjustment with ourselves. The atmosphere that exists today tends to drive the individual away, rather than to bring him in to participate constructively within the organizational framework. Some individuals need further stimulation but do not find it adequately in the Society and tend to look elsewhere. We must wonder why such study groups have tended to arise outside

Berman
concludes & statement that honesty
& clarity honesty is essential -

Rangell -
says each one is writing on a
microscopic piece of the whole people -
it feels we can't wait to talk / ourselves -
but we are diagnosing a chronic group depression -
encourage brief remarks -

Paula
He makes his complaint next - He needs later -
a statement - it's against authority - I can hear it!
He recommends that "training analysts" should be restricted
to "training analysts" - & then adds to the
elaboration that we develop mental attitudes.

Van der Kooie
the by-ways / mistake - "to have basic
training / trust - but this is not an historical
society - it is & mind be a school for the
training of physicians in the psychiatric
problem by techniques i.e. knowledge (person)

the framework of the Society. Our work is its own satisfaction, but we are not properly set up to find this satisfaction within the organization of the Society. That is why individuals have tended to look elsewhere.

Dr. Sperling agreed that the atmosphere has not been consistently encouraging but efforts have been made to do something about it, for example, by presentation of panels at Society meetings, encouragement of younger members to present, encouragement of post-graduate study groups, etc. The response to the latter has not been as great as we might wish. Perhaps this function can only occur successfully in small spontaneous groups.

Dr. Horowitz reminded the members that the Committee did not make any specific recommendations so as not to abort the discussions. They felt that such action would be premature and presumptuous.

Dr. Futterman urged that the report be kept confidential within the membership. He then moved that the report of the Committee be accepted and the Committee be instructed to study the matter further and come up with general recommendations.

Dr. Brandchaft seconded the motion with the amendment, accepted by Dr. Futterman, that the Committee be placed on a continuing basis and enlarged to include others who might be interested, and to solicit the opinions of the membership as to how best to proceed toward the general recommendations.

Dr. Van der Heide was disappointed that the report was treated in such an incomplete fashion and that the Committee is to be asked to come up with recommendations which it has carefully avoided. We are not in a position, he said, to ask the Committee to make recommendations at this time.

Dr. Brandchaft clarified that his amendment was intended to lead to recommendations as to how to proceed toward further study, not definitive solutions.

Dr. Rangell was against the motion and felt that it was premature, that excessive zeal might lead to a motion which is restrictive. It would be best to leave it open without a firm directive.

Dr. Leavitt also spoke against the motion, and indicated that many of the problems raised were not restricted to the field of practice and overlapped with at least one other Committee studying the same general problem; that these areas of overlapping function should also be clarified in the course of further investigation.

Dr. Horowitz agreed with the speakers against the motion and, as co-chairman of the Committee, felt disinclined to pursue recommendations at this time. Several members expressed the opinion that the Committee should encourage members to talk with the Committee and express themselves at length.

From Monday

The change are necessary in training -
To train concept of deal with the
problem they will encounter - (a great advantage)

Don

"Don enough best deal what the concept is"
It illustrates that we learn how to do concentration,
e.g. | But the emphasis about per training "best deal"
is attitude to "mentally analyzed" best deal.

Advertise "preparation" for per - 15
only amount of work to boxed message -
the name - make the change -

Business

The spirit of a change in which business
is a positive business - in which
change that is in the degree, but to make
accepted as a business adjustment (peak -)
depression in the market peak -

It is called the "business" market name -

The other show - but in such a way as to prevent
for a time as though he is preparing one get best
for an idea one - had the game as he talks

Dr. Futterman further remarked that his motion was not an impulsive decision; that he was aware that other members of the Committee felt differently than he about it. After several years of this Committee functioning, the issues tend to get lost. He thought the Committee might be able to come up with four or five recommendations which could be pursued further.

Dr. Bird felt that the Committee members could not give suggestions at this time. He encouraged the development of group discussions at further meetings and mutual exchange of ideas and general elaboration without specific action at this time.

Dr. Sarlin added that we would do well to await the report of the Committee on Institutes.

After further discussion, during which Dr. Brandchaft removed his second, Dr. Gilman seconded the original motion, which was then defeated upon vote.

Dr. Bird moved that the Society direct the President to call another meeting of the membership in four to six weeks to pursue this issue further. S/Dr. Gilman. After Dr. Sperling clarified that this meeting would have to follow the Annual Business Meeting because of the press of other business, the motion was passed.

The meeting was adjourned at 10:40 p.m.

Maimon Leavitt, M.D.
Secretary

ML: jh

What "Moral" are Regenerating Among us?

Greenow - letter & no appearance

1. Rigidification of Education form. - So - he learned limited forms on con, but retains same method of Theory to Analysis - & permanent status as to points -

~~X/10~~
~~X/10~~ Larry Friedman
"when & what" -

Issues & solutions:

1. Freedom to express criticism first - but must lead to constructive action - So - his advocating a structural change - it will miss or cover the real problem - (the: that is ok, if those changes result from a deep change in concept of functions - but, until these basic functional changes are understood structural changes of meaningful nature are not possible - efficiency, in other words, cannot be the main factor - Major change necessary -)

I agree that changes are necessary - but we can't know how to change until we know how we want to function - Because the structure does represent a body of theory of how some body (bodies) want to function - perhaps of some good persons in past, somewhere)