

THE CORE PROGRAM

FOR CLINICAL PSYCHOANALYTIC TRAINING

BULLETIN OF INFORMATION

Seattle Psychoanalytic Society and Institute

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Date of Publication: January 2007

BULLETIN OF INFORMATION

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Intermediate Clinical Associate (approval to conduct supervised psychoanalysis)

Follows completion of the first trimester and recommendation by Progression Committee.

Application for Training in Child/Adolescent Psychotherapy

May be submitted at any time during or after completing the Adult Training program.

Supervised Analysis

Initial, semi-annual, and final reports on supervised analysis submitted by Clinical Associate. Semi-annual evaluations by supervisors. Supervised analysis of these cases continues until graduation.

Senior Clinical Associate

Authorization to conduct unsupervised analysis granted by Progression Committee. Attendance at Clinical Conferences continues until graduation. Eligible to teach in Continuing Education Division, and as co-instructor in core program.

Graduation

The Progression Committee recommends graduation for those who have completed all requirements of SPSI. Eligible for membership in the American Psychoanalytic Association.

POST-GRADUATE PHASE

Certification in Psychoanalysis

Eligible upon graduation. Application is evaluated and approved by the American Psychoanalytic Association.

SPSI Faculty

Eligible after graduation to teach in Core Program and the Continuing Education Division.

Professional Activities in addition to clinical practice

Faculty of SPSI, Membership on committees of SPSI, training analyst appointment; research into psychoanalytic theory and practice; presentation and publication of psychoanalytic articles; participation in study groups, symposia, etc. locally, nationally (APsA) and Internationally (IPA).

Library Facilities

The Edith Buxbaum Library, housed at the Seattle Psychoanalytic Society & Institute, is available to clinical associates, faculty, contributing members of the SPSI and other interested persons in the community.

Outline of a Career in Psychoanalysis

INITIAL PHASE

Inquiry

SPSI Administrator sends Bulletin of Information and application form.

Application

Application reviewed by Admissions Committee Chair and forwarded to Admissions Committee.

Selection

Interviews by four or more analysts. Review by Admissions Committee resulting in decision.

Acceptance as Clinical Associate

Letter to applicant from Admissions Committee Chairperson and Director. Notification to the American Psychoanalytic Association (APsAA).

Personal Analysis

Analysis (4-5 sessions weekly) with a training analyst should begin at least six months before starting the didactic program.

TRAINING PHASE

Beginning Clinical Associate (1st year of 4-year curriculum)

Seminar courses pertaining to psychoanalytic theory, process, psychopathology, human development and clinical practice. Twice yearly review by the Progression Committee. May begin child analytic training now.

History and General Information

Psychoanalysis is both a treatment method, which addresses human psychological functioning, and a research method for studying the human mind. It aims at full exploration and understanding of how the human mind operates. In practice, this involves close attention to an individual's feelings and thoughts, both conscious and unconscious, including their origins and how the individual manages them. Psychoanalysis offers the possibility of self-understanding, emotional growth, and lasting change.

The Seattle Psychoanalytic Training Center was established in 1946, sponsored by the San Francisco Psychoanalytic Institute. Status as an independent Institute of the American Psychoanalytic Association was achieved in 1964. Currently, the Seattle Psychoanalytic Society & Institute (SPSI) is one of 35 educational Institutes accredited by the American Psychoanalytic Association. Standards established by the American Psychoanalytic Association direct the policies of SPSI as they relate to eligibility for training, the minimum requirements for graduation and prerequisites for certification in psychoanalysis.

These principles and standards for psychoanalytic education in this country were first established by the American Psychoanalytic Association in 1938. This was to ensure consistency as well as high quality of psychoanalytic education among all constituent Institutes. These principles and standards, which are continually revised and updated, provide a uniform baseline for psychoanalytic education and clinical training among all constituent Institutes of the American Psychoanalytic Association.

The primary mission of SPSI is to provide the highest possible quality of psychoanalytic education and clinical training. The most important goals of this education are to develop an individual's clinical competence and identity as a psychoanalyst. A psychoanalytic identity requires an openness and a spirit of inquiry toward understanding the full complexity of the human mind, together with intellectual curiosity about psychoanalytic methods and knowledge. A psychoanalytic identity also includes a deep commitment to continuing study and development as an analyst and to the welfare of patients.

SPSI offers two core academic programs: training in Adult Psychoanalysis and in Child/Adolescent Psychoanalysis. The Continuing Education Division of SPSI provides seminars and courses for mental health professionals, academicians, and interested members of the community at large. The SPSI Psychoanalytic Referral Service offers reduced fee analyses for adults and children.

The Institute provides facilities for its programs, including classroom space and library resources, as well as administrative services.

Policies regarding application and fees are described in the program sections of the Bulletin of Information.

SPSI is a not-for-profit corporation governed by a Board of Directors. All matters pertaining to psychoanalytic training are the responsibility of the Faculty.

Admission Policies and Procedures

A fundamental requirement for psychoanalytic education and clinical training is an established identity as a professional whose conduct assures a firm and enduring commitment to responsible and ethical patient care. It is the official position of the American Psychoanalytic Association and of SPSI that an applicant is never excluded on the basis of age, sexual orientation, religious affiliation, racial or ethnic background.

Selection for psychoanalytic education and clinical training is based on an applicant's suitability, eligibility, and readiness.

A. Suitability

An assessment of suitability is based on an applicant's possession of certain character traits and ethical values necessary for every psychoanalyst. An applicant should present to a reasonable extent evidence of integrity, maturity, flexibility, and strength of character. In addition, the applicant should demonstrate a capacity for self-observation, self-monitoring, and the ability to maintain appropriate interpersonal boundaries.

Governance of the Institute

The Seattle Psychoanalytic Society & Institute, a not-for-profit corporation, is governed by a Board of Directors.

Board of Directors

Donald Schimmel, Ph.D., President
Lawrence Schwartz, M.D., Secretary
Deehan Wyman, Treasurer

- Martin Bullard, MSW
- Andrea Furedy
- Kenneth King, M.D.
- Ronald W. Levin, M.D.
- Francie Rutherford, M.C.
- Donald Schimmel, Ph.D.
- Lawrence Schwartz, M.D.
- Jil Spitzer-Fox, M.A.
- Joan Ullman, Ph.D.
- Deehan Wyman

Tuition and Fee Policy

Tuition fees for SPSI courses and seminars are due and payable before the first day of each trimester. Tuition is based on the total curriculum rather than on the number of classroom hours during each semester. For Continuing Education programs, tuition is payable before the first day of the semester of a course offering or a date set before a symposia. At present there is a student loan program. Details are available from the SPSI office. Generally, it is not possible to audit seminars.

The Seattle Psychoanalytic Society & Institute reserves the right to withdraw courses at any time, to change curriculum requirements, to change tuition and fee schedules, and to change the rules and calendars regulating participation, upon notice to affected parties.

Withdrawal Policy

Core curriculum participants whose withdrawal from a course or courses is accepted by the Progression Committee will be refunded tuition on a pro-rated basis.

The Continuing Education Division also offers two different certificate programs:

1) Certificate in Advanced Psychotherapy Program (CAPP)

The focus of this curriculum is on the principles and process of psychoanalytic psychotherapy with adults. Each didactic course uses the therapeutic process as a framework allowing students to acquire a deeper understanding of their patients and of their clinical situation. Students read and discuss selected papers from the psychoanalytic literature in a seminar format and participate in regular clinical conferences.

2) Child Psychotherapy Program (CPP)

This program aims toward clinical expertise integrated with theoretical knowledge and personal growth. To accomplish these goals, the CPP has three basic components: a curriculum of didactic seminars and case conferences; supervised practice; and a personal psychoanalytic or psychotherapeutic experience. The goal of the program is to facilitate a supportive environment in which a student can learn and grow as a child therapist.

The Psychoanalytic Referral Service

The Psychoanalytic Referral Service was established to assist Clinical Associates with their psychoanalytic training and to provide a service to the community by offering reduced fee analysis to selected patients. Patients seeking treatment through the referral service are referred to Clinical Associates for evaluation. The referral service does not monitor or otherwise participate in the treatment of patients. Treatment fees are a matter of private arrangement between patient and analyst, based on what the patient can reasonably afford. During the time the Associate is in training, the analysis is under supervision. Those interested in being considered as possible patients may contact the SPSI office for information.

B. Eligibility

Eligibility for psychoanalytic education and clinical training is based on prior education, clinical training, clinical competence, and aptitude for learning psychoanalytic methodology. Eligibility can be achieved through a variety of pathways.

1. Doctors of Medicine or Osteopathic Medicine who have graduated from an accredited medical school or osteopathic medical school, and have completed at least one year of a psychiatry residency program. Physicians are required to have completed three years of psychiatric residency before graduation from the Institute.
2. Mental health professionals who have completed a doctoral level degree from an accredited mental health clinical program and are licensed in the jurisdiction in which they practice, or whose is covered by state licensure or registration.
3. Mental health professionals who have graduated from an accredited mental health degree program with a master's degree that is generally recognized as the highest clinical degree within their mental health discipline. These individuals must also have completed at least two additional post degree years of didactic and clinical training and must have established their excellence and experience as clinicians. They must be practicing under a state license or registration.

C. Waiver of Eligibility Requirements:

Under certain circumstances, when applicants for clinical training do not meet the above eligibility requirements, the Institute can apply to the Board of Professional Standards of the American Psychoanalytic Association for a waiver of the usual eligibility requirements.

Such a waiver may apply to:

1. Individuals whose mental health graduate degree is not at the highest educational level generally obtained to practice clinically within their profession but who nevertheless have satisfactorily completed the prerequisites as well as sufficient additional didactic and clinical education.
2. Individuals who do possess the highest clinical degree obtained within their profession, but whose didactic and clinical education is marginal.
3. Individuals who have satisfactorily completed the degree of Doctor of Medicine or Doctor of Osteopathic Medicine, but who are not planning to complete a residency training program in psychiatry.
4. Individuals who do not possess the highest recognized clinical degree but who are in the later stages of completing the expected educational and clinical prerequisites such as a medical student or Ph.D. candidate.
5. Individuals who for some other reason appear to the Institute to be suitable but are not automatically eligible by the formal criteria.

Upon beginning formal class work, students are designated as Clinical Associates (CA's) or Academic Associates (AA's). (See page 9 of this Bulletin for a description of the Academic Training Program.)

A Clinical Associate may expect a term of no less than four years for the completion of clinical psychoanalytic training. Graduates of the core program are eligible to apply for certification in psychoanalysis and active membership in the American Psychoanalytic Association.

Child Analysis Faculty

- Catherine Henderson, Ph.D, Chair
- Robert J. Campbell, M.D.
- Judith Chused, M.D. ⁽¹⁾⁽⁴⁾
- Ann De Lancey, Ph.D.
- Catherine Henderson, Ph.D. ⁽¹⁾
- Sheri Hunt, M.D.
- Kenneth R. King, M.D. ⁽¹⁾
- Nels Magelssen, Psy.D.
- Charles A. Mangham, M.D. ⁽¹⁾
- Frances Millican, M.D. ⁽¹⁾
- Donald Schimmel, Ph.D.
- Werner Schimmelbusch, M.D.
- Phyllis Tyson, Ph.D. ⁽¹⁾
- Robert Tyson, M.D. ⁽¹⁾

(1) Training and Supervising Child Analyst

(2) Associate Supervising Child Analyst

(3) Retired

(4) Geographic Rule Supervising Child Analyst

(5) Associate Supervising Child Analyst

The Continuing Education Division

The concepts derived from psychoanalytic theory and practice have application in many areas of human endeavor. SPSI provides seminars on topics of interest to mental health professionals as well as to individuals from the fields of art, literature, business, etc. Seminars, workshops, lectures, and symposia are offered. Instructors include SPSI faculty members and Clinical Associates, as well as prominent psychoanalysts from this country and abroad. Offerings provide unique opportunities for continuing education and enhancement of creativity and work.

Continuing Education credits for psychiatry, psychology, nursing, social work, etc. are available through attendance at the various educational events sponsored by SPSI.

problems are such that they require an essentially supportive or educational approach generally do not contribute sufficiently to the Associate's ability to develop and maintain a psychoanalytic process.

Written case reports on ongoing analyses are useful tools to help the Associate conceptualize and report on the analytic process and to prepare for future certification in child and adolescent analysis. Reporting follows the same protocol as described for supervision of adult psychoanalysis.

Grants for Low Fee Analyses

The Edith Buxbaum Foundation offers grants to individuals treating children or adolescents at a reduced fee. The Association for Child Psychoanalysis also offers assistance to Clinical Associates seeing children and adolescents in analysis through grants made to SPSI.

Progression and Graduation in Child Psychoanalysis

The child analytic faculty regularly evaluates the progress of child psychoanalytic Clinical Associates and provides counsel and assistance toward meeting the requirements for graduation. The quality of the Associate's work is the central determinant of readiness for graduation. Most important is the Associate's demonstrated capacity to independently carry out competent psychoanalysis of children and adolescents. Further details regarding child analytic training, progression and graduation may be found in the division of child and adolescence handbook.

Admission Procedure

Individuals considering making application for child psychoanalytic training should consult with the chair of the child division. Two members of the faculty interview applicants. One person reviews the adult progression file. The child faculty serves as the admissions committee.

Applications for psychoanalytic training are available from the SPSI office and are accepted for consideration throughout the year. A \$200 fee is required for application. After the application is received, a series of interviews with the applicant is conducted by the Admissions Committee. Decisions regarding application are made by the Admissions Committee. Current tuition and fee schedules are available from the SPSI office.

New classes usually begin every two years. Those accepted for training may wait a year or more before beginning formal class work.

The Core Program for Adult Psychoanalytic Training

Psychoanalytic education and clinical training aims toward scholarly achievement, personal growth, and the development of psychoanalytic clinical expertise. To accomplish these goals, psychoanalytic education has three basic components:

- a. Personal analysis: referred to as "training analysis," with a SPSI training analyst as designated by the American Psychoanalytic Association.
- b. A core didactic curriculum: four or more years of seminars and case conferences.
- c. Supervised practice of psychoanalysis.

The effective integration of these three elements is a fundamental aim of the psychoanalytic educational process and has come to be known as the tripartite system. Simultaneous immersion in all three elements is essential and required.¹

¹ Exceptions require waiver from the Board on Professional Standards of the APsaA.

The Training Analysis

Basic to psychoanalytic training is personal psychoanalysis with a training analyst. A training analysis aims to help the Associate achieve a high degree of character stability, openness, flexibility, and maturity. It is essential that the Associate develop the capacities for self-observation, self-reflection, and ultimately, ongoing self-analysis, which are necessary for the capacity to maintain a basic psychoanalytic stance, including a creative openness to what the analyst learns and experiences. These achievements are essential if the future analyst is to be sufficiently free of those psychological vulnerabilities and character traits that may interfere with psychoanalytic work. Therapeutic psychoanalysis prior to psychoanalytic training does not waive the requirement for training analysis. Upon acceptance, students may choose an analyst from a list of SPSI training analysts eligible to accept a new training analysis. Fees are arranged with the analyst.

Newly accepted students are expected to begin training analysis at least six months prior to beginning didactic courses. If the training analysis is not begun within one year of acceptance, the Progression Committee may reconsider the person's eligibility to proceed with training.

The Didactic Core Curriculum

The curriculum is designed to be integrated with an ongoing training analysis and supervised clinical work. The purpose of this integration is to enable the Associate to understand the empirical basis of theoretical formulations and to develop skill in the conceptualization of case material.

Classes for the core program are scheduled on Friday afternoons during three trimesters from September to June. An average trimester includes three 90-minute seminars each week. In addition there may be elective courses, tutorials, independent study, etc.

A Clinical Associate is expected to complete all assigned courses, and to participate in clinical seminars until graduation.

Experience has shown that the attainment of clinical competence derives from immersion in the clinical situation. Because analytic work with children and adolescents will contribute to the Associate's technique with adults, the program encourages all Associates to analyze one child or adolescent patient as one of the three required core program cases. The Associate in child and adolescent analysis is required to analyze at least three, preferably more, children and adolescents. At least one boy, one girl and one adolescent should be analyzed. Ideally, these analyses will include children in prelatency, latency, and during some phase of psychological adolescence². An acceptable distribution could be one adolescent case and two latency cases, or one adolescent case and two prelatency cases, if at least one of these progresses into latency during the analysis.

Supervision of child and adolescent cases is conducted by Child and Adolescent Supervising Analysts as designated by SPSI. The Associate should have at least two, preferably three different accredited supervising child/adolescent analysts.

Supervision should be on a weekly basis for a substantial period of the supervision. Each case should receive at least fifty (50) hours of supervision to count toward graduation. One child or adolescent case should be supervised for at least two years, and it is recommended that one child case be supervised through termination. It is further recommended that the Associate receive regular supervision until there are indications of an ability to work independently. At a minimum, the Associate should have one hundred and fifty (150) hours of supervision in child and adolescent psychoanalysis.

A period of significant psychoanalytic process is required for a case to qualify as one of the three required cases. Children who ward off analytic work and never enter an analytic process, children whose environmental supports are insufficient to allow exploratory approaches, or children whose developmental

² Adolescence is usually understood as encompassing the second decade of life. However, there can be wide chronological variation in what constitutes a suitable adolescent case, because psychology often varies from chronology. In some cases, adolescence can occur as early as the beginning of the second decade or it may extend into the early 20's if the analysis's problems are substantially related to some aspect of adolescent development.

The centerpiece of child analytic training is the child analytic continuous case conference. All child Clinical Associates participate in this case conference from the time of admission into child analytic training until graduation. A supervising child analyst, possibly in conjunction with other faculty, will lead the child analytic case conference.

The Child Analytic Study Group is another forum for inquiry into various clinical issues relevant to psychoanalytic treatment of children and adolescents. This group meets on the first and third Friday of each month, and is open to all SPSI faculty, all child analytic Clinical Associates, and all graduates of the Child Psychotherapy Program.

The Supervised Practice of Psychoanalysis with Children and Adolescents

Through the supervisory relationship, the Associate develops the skills needed to treat adults, children, and adolescents with psychoanalysis. A combined training in child, adolescent, and adult analysis allows for an optimal integration of developmental understanding into the clinical approach. Competence in the analysis of children and adolescents includes expertise in evaluating the indications for psychoanalytic treatment. Therefore supervision of evaluations as well as of treatment is an essential part of child and adolescent training.

Children and adolescent patients in supervised psychoanalysis should be seen at a recommended frequency of five times per week with a minimum of four times per week, on separate days, through termination, except when unusual circumstances necessitate temporary interruptions or changes in frequency. This intensity of treatment allows for the establishment of a strong therapeutic relationship that sustains the child or adolescent as he or she explores difficult conflicts and anxiety. It provides a stable relationship base for the psychoanalytic process, which involves exploring, interpreting, and working through resistance, transference, dreams, fantasies, affects, and other phenomena.

Most of the classes fall under one of four Divisions: Theory, Human Development, Psychoanalytic Process, and Psychopathology. Please refer to the following pages for detailed descriptions of these courses.

In addition to the Division courses, there are seminars, which do not fall neatly into one of these categories. In the first Year's curriculum there is a seminar on Freud and the history of psychoanalysis which addresses Freud's life and times and the origins of psychoanalysis. A second course addresses the later contributions of S. Freud and Anna Freud. In addition, there is a course on ethics and on how other disciplines contribute to the validation of psychoanalytic theory. During the 4th year, there is an 11-week course on writing for certification and publication. There is also a trimester devoted to an elective of interest to clinical associates and a faculty member.

Clinical Conferences

In addition to the didactic courses, Clinical Associates attend continuous case conferences until graduation. These are held throughout the academic year with rotation of instructors and students each trimester. The conference considers the weekly progress throughout the trimester of a single psychoanalytic case, which is presented by a Clinical Associate. Students also rotate regularly to attend the child/adult integrated case conference, which is led by a child analyst and discusses a child analytic case. All continuous case conferences are led by training analysts.

The Supervised Practice of Psychoanalysis

Through the supervisory relationship, the Associate acquires the skills needed to use the psychoanalytic method successfully. These include use of the couch and the free-associative method. It also involves a commitment to meet with the patient at least four times per week on separate days through termination, except when unusual considerations necessitate temporary interruption or changes in frequency.

The Associate is expected to continue personal psychoanalysis throughout a significant period of supervised clinical work. The tripartite educational process for psychoanalysis is based on the experience that both training analysis and supervised clinical work benefit when concurrent. For example, unconscious conflicts and intense affects can be stimulated in the analyst by some of the unique aspects of psychoanalytic treatment.

Therefore, even experienced psychotherapists may find the psychoanalytic situation emotionally challenging. It is in the context of the training analysis that the Associate has the opportunity to reflect upon and learn from his or her experience as an analyst.

Candidates are not authorized to conduct unsupervised psychoanalysis until such authorization is granted by the Progression Committee.

All Clinical Associates are required to treat at least one case at a reduced fee.

A Clinical Associate who has completed the didactic curriculum and has demonstrated satisfactory work with three control cases may be advanced to "Senior Clinical Associate" status by the Progression Committee. Supervision is not required thereafter on new analytic cases.

An important part of psychoanalytic education is the Associate's developing the ability to conceptualize and to write about the psychoanalytic process and about the clinical and theoretical issues specific to each individual case. This is achieved through semi-annual written clinical summaries on each control case in treatment. Tutorial assistance is available on request from faculty members, and a case-writing course is included in the curriculum.

Any modification in an Associate's participation in the program is subject to the approval of the Progression Committee.

Personal Psychoanalysis

There are special challenges unique to child analysis, beyond those routinely encountered in analytic work with adults. Children press for gratification or encourage boundary violations in ways that differ from the adult patient and that may sometimes be difficult to resist. Because of this, the analysis of children often arouses unconscious conflicts within the analyst in unexpected, unpredictable, and unsettling ways. Working with parents of children also presents many countertransference challenges. It is therefore highly desirable for the Associate to continue or resume personal psychoanalysis during training in child psychoanalysis. If child training begins after the termination of the personal analysis, it is recommended that the Associate resume personal analysis during supervised clinical work with children.

Curriculum for Child and Adolescent Psychoanalysis

The child and adolescent program involves an integrated curriculum of study designed to impart a comprehensive understanding of the fundamentals of theory and practice and their interrelationship. The didactic seminars involve a four-year revolving sequence. This sequence includes one year devoted to the introduction to child and adolescent technique including developing cases, working with parents, transference and countertransference, etc.; and one year each devoted to child analytic technique, psychopathology, and developmental issues of, respectively, prelatency, latency, and adolescent patients. Other didactic seminars will be offered in response to the needs of Clinical Associates in the child program. We encourage Clinical Associates to continue in didactic seminars after the completion of this sequence until graduation.

Child curriculum Clinical Associates participate in the child-adult integrated continuous case conference for one trimester of each academic year. These case conferences include Clinical and Academic Associates in both the adult and child programs.

Selection for Education and Clinical Training in Child and Adolescent Psychoanalysis

An applicant for admission to child and adolescent psychoanalytic education and clinical training shall be either an active Associate in, or a graduate of, an accredited Institute of the American Psychoanalytic Association. Associates are encouraged to begin their education in child psychoanalysis during their adult training. It is highly desirable for the Associate to continue or resume personal analysis during some or all of the child/adolescent supervised case experience; this is one reason that Associates should begin child training as early as possible.

Eligibility for education and clinical training in child and adolescent psychoanalysis is based in part on prior experience with children and adolescents. The Associate should have considerable experience with both normal children and adolescents and those requiring diagnosis and treatment of pathological conditions. An applicant without clinical experience with children (e.g., a residency in child psychiatry or psychology) may consult with the chair of the Division of Child and Adolescent Analysis regarding sufficient and suitable comparable experience or a preparatory program to acquire the necessary experience in working with children. The Child Division Faculty may recommend some additional experiences prior to full admission to the program.

Components of Child and Adolescent Psychoanalytic Education and Clinical Training

Child/adolescent Clinical Associates are accepted into training with the expectation that they will be motivated to become the best possible child and adolescent analysts and with the hope that they will want to continue their education beyond the minimum requirements. As in the adult program, psychoanalytic education and clinical training in child and adolescent analysis is based on the tripartite model. It includes the personal analysis, a didactic curriculum, and supervised clinical work.

Progression

After each trimester, Instructors and supervisors submit evaluations of each Associate's work. Reports are reviewed by the Progression Committee, which then makes recommendations and decisions relating to the Associate's progress through the program. The Progression Committee may suspend or terminate an Associate's training in case of failure to meet standards for reasonable progress toward graduation, or for violations of ethical precepts for the practice of psychoanalysis. When termination or suspension of training occurs, conditions, if any, for readmission are stipulated by the Progression Committee.

Further information regarding details of the training program is supplied in the form of an Associates' Handbook.

The Academic Training Program

The Academic Training Program offers educational opportunities for a limited number of individuals from non-clinical fields who wish to engage in the intensive study of psychoanalysis in order to enhance their teaching, research or other activities in their professions.

Academic Associates (AA's) have the opportunity to bring their knowledge and expertise into the training for the mutual benefit of the Clinical Associates (CA's) and Academic Associates, as well as for the Institute as a whole.

Applicants should have or anticipate receiving within one year of planned entrance into the program, the highest academic degree usually awarded in their field of specialization.

The training, which is guided by a mentor designated by the Academic Training Program Committee, includes all the activities expected of the Clinical Associates in the Core Program, except supervised psychoanalysis. Thus, Academic Associates are expected to attend and participate in all the clinical and theoretical seminars. However, the program can be altered to meet the unique needs and talents of each scholar in the

Academic Program. Participants may choose to undertake independent study projects under the supervision of SPSI faculty. AA's may participate in all SPSI activities that are open to CA's, including scientific meetings and organizational committees.

Personal psychoanalysis or psychoanalytic psychotherapy with a clinical SPSI faculty member during the period of training is strongly recommended. The SPSI Faculty will consider the applicant's financial circumstances when establishing fees for analysis or therapy.

The full program normally takes four (academic) years, and the Associate's progress is evaluated by the Academic Training Program Committee at least annually. To receive a graduation certificate, AA's must complete the full four-year program and a thesis (or its equivalent as established by the Academic Training Program Committee in consultation with the AA). The thesis is to be submitted in written form and presented to SPSI members.

Tuition fees for Academic Associates are the same as for Clinical Associates.

To be considered for this program, applicants should submit the following information:

1. Professional resume or curriculum vitae, including a list of applicant's publications or manuscripts (if any).
2. A brief (five-page maximum) narrative that addresses the relevance of psychoanalysis to the applicant's professional or scholarly endeavors, and includes at least some autobiographical information.
3. Three letters of reference from individuals familiar with the applicant's professional and/or scholarly work.
4. Optional: Reprints of applicant's representative publications, portfolio or other evidence of professional accomplishments (reprints and other items will be returned).

Child Psychoanalytic Training

The observation and understanding of child development is basic to all study in psychoanalysis. Combined education and clinical training in both child and adult analysis enhances understanding of human psychological development and functioning, and of the clinical situation. Psychoanalysis of children, adolescents, and adults share in common the aims of alleviating emotional suffering, improving one's functioning, increasing the capacity for pleasure and growth, and expanding self-knowledge. In addition, child psychoanalysis aims at restoring the progression of normal development.

Clinical training in child and adolescent psychoanalysis aims to equip Associates with the clinical skills necessary to treat children and adolescents analytically and to work as needed with their parents. It includes understanding clinical material within the context of a child's evolving development, modes of communication, and relationships. It also includes learning specific clinical techniques, such as how to help the child move from play to verbalization, how to understand and interpret the child's transference, conflicts and defenses, and how to understand the child's use of the analyst as an auxiliary ego or superego. In addition, child and adolescent clinical training helps the candidate to distinguish between conflicts specific to a developmental phase, versus those that may endure and interfere with progressive development.

All Associates benefit from exposure to the program in child analysis and may participate in various opportunities within the program by special arrangement with the child analytic faculty. The child division encourages core curriculum clinical associates to treat a child or adolescent as one of their required three analytic control cases. The child analytic faculty provides instruction in the human development seminars of the Core Curriculum and teaches the integration of developmental theory and clinical technique. In addition, the core curriculum includes child analytic concepts and techniques in most of the process and psychopathology seminars.

- Kaplan, M.D., Barnett M.
- Kaplan, MSW, Jonna
- King, M.D., Kenneth R. (1,2)
- Kusché, Ph.D., Carol A.
- Lee, M.D., Terri
- Levin, M.D., Ronald W. (1)
- Lipscomb, M.D, Ph.D., Patricia (1)
- Magelssen, Psy.D., Nels
- Mandel, M.D., Michael R.
- Mangham, M.D., Charles A. (1,2)
- McDonald, MSW, Linda
- Metzger, MSW, LICSW, Jacqui
- Miller, Ph.D., Michael L. (1)
- Millican, M.D., Frances (2)
- Nunn, M.D., Robert R. (4)
- Okimoto, M.D., Joseph
- Olson, M.D., John C.
- Pearson, M.D., Michael
- Prosser, Ph.D., Robert,
- Radant, Ph.D., Susan (1)
- Raney, M.D., James (1,4)
- Raycraft, M.D., Stephen
- Rice, M.D., Damaris (4)
- Rising, M.D., Doane
- Romero, M.D., Oscar (1)
- Ross, M.D., Donald J. (1)
- Rutherford, M.C., Francie
- Schimmel, Ph.D., Donald
- Schimmelbusch, M.D., Werner (1)
- Schorr, M.D., Nina
- Schneider, M.D., Danielle
- Schwartz, M.D., Lawrence (1)
- Shwetz, M.D., Mary
- Sodergren, MSW, Susan
- Spain, Ph.D., David
- Stoker, M.S., Melissa
- Tyson, Ph.D., Phyllis (1,2)
- Tyson, M.D., Robert (1,2)
- Walker, M.D., Sandra
- Wilt, M.D., Frances

- (1) Training and Supervising Child Analyst
- (2) Child Analysis Supervising Analyst
- (3) Child Analysis Associate Supervising Analyst
- (4) Retired

To determine whether there is a mutual fit between the applicant and the institute, at least two interviews will be scheduled with members of the SPSI faculty. On the basis of all these materials, and any other information that may be requested, the Academic Training Program Committee shall make the final decision on whether to admit the applicant, and will inform him/her of its decision.

Although applications are accepted at any time, the Academic Training Program Committee strongly recommends that Academic Associates begin training at the same time as a beginning class of Clinical Associates.

Clinical Training Opportunity for Academic Associates

While participating in the academic program, some Academic Associates become interested in undertaking full clinical psychoanalytic training. For further information regarding the requirements for this transition, please contact the Director of SPSI. In most cases, SPSI must apply to the American Psychoanalytic Association (APsaA) for a waiver on the Associate's behalf.

Details of the waiver application procedure may be obtained from the brochure published by the American Psychoanalytic Association.

An Overview of SPSI's Core Curriculum

YEAR 1	1st trimester	2 nd trimester	3 rd trimester
Theory	Origins of psa and Freud's legacy including evolving ethics of psa (14 wks)	The legacy of later Freud & Anna Freud (14 wks)	Ethics (3wks) Validation of psa. viewpoint by other disciplines (2 wks)
Process	Evaluation for psa, writing case formulation, facilitating psa atmosphere, transition to psa proper, opening phase	Transference, counter-trans., resistance, working through, dreams, major clin. theoretical perspectives	
Psychopathology			Psa understanding of major emotional disorders, including affect dysregulation and its psychobiology – Part I: early dev. disturbances leading to PTSD of infancy, schizophrenias, addictions, borderline states, paraphilias, sociopathy, and psychobiology thereof
Clinical	Clinical Case conference (1 st year class only)	Cont. case conference	Cont. case conference
YEAR 2	1st trimester	2 nd trimester	3 rd trimester
Human Development	0 to 18 mo, including gender identity dev., alternates with infant obs. Every other week		
Theory	Ego psychology, post Freudians, Amer. obj. rels.		
Process		middle phase	
Psychopathology			Psa. understanding of major emotional disorders, etc. – PART II: dev. disturbances leading to major mood disorders and characterpathology
Clinical	Cont. case conference	Cont. case conference	Cont. case conference
YEAR 3	1st trimester	2 nd trimester	3 rd trimester
Human Development	18 mo to 7 years, including gender identity dev.	Latency, including gender identity dev.	
Theory	Interpersonal and self psychological theories	Relational and intersubjective theories	
Psychopathology			Psa. understanding of major emotional disorders, etc. – PART III: dysthymic disorders and pathology stemming from oedipal and post oedipal phase problems including dysthymia and anxiety
Process			Problems encountered in psa. including ethical ones
Clinical	Cont. case conference	Cont. case conference	Cont. case conference
YEAR 4	1st trimester	2 nd trimester	3 rd trimester
Theory	British obj. rels.	Writing for certification and publication	
Process		Later middle phase and resistance to entering termination	Termination proper
Elective			Elective
Clinical	Cont. case conference	Cont. case conference	Cont. case conference
Human Development	Adolescence to young adulthood, including gender identity development		

Coordinating Committee

- Werner Schimmelbusch, M.D. - SPSI Director and Chairman, Education Committee
- Michael Miller, Ph.D., Faculty Chair
- Robert Prosser, Ph.D. - Faculty Chair Elect
- Don Schimmel, Ph.D., Board President
- Dee Wyman, Board Treasurer
- Lora Reif, Ph.D. – Chair, CAAO (Clinical and Academic Associate's Organization)

THE FACULTY

Werner Schimmelbusch, M.D. (1)
Director, Seattle Psychoanalytic Society & Institute
Chairman, Education Committee

- Allison, M.D., George H. (1)
- Anderson, M.D., Maxine (1)
- Bassen, M.D., Cecile (1)
- Bergman, M.D., Robert L. (1)
- Buell, MSSW, Lynn
- Bullard, MSW, Martin
- Campbell, M.D., Robert J.
- Case, M.S.W., Ph.D., Stan
- Chivers, M.D., Norman (1,4)
- Cömert, Ph.D., Piyale
- Connell, M.D., Sandra (1)
- De Lancey, Ph.D., Ann (1)
- Dickinson, M.D., R. Hugh (1,4)
- Eddy, M.D., Roger C. (1,4)
- Engelberg, M.D., S. J.
- Friedman, D.O., Michael
- Furedy, M.D., Ronald (1)
- Grenell, Ph.D., Gary
- Grise-Crismani, MSW, Diane
- Grubb, M.D., Donald
- Gundle, M.D., Michael (1)
- Hacker, Ph.D., Tony
- Henderson, Ph.D., Catherine (1,2)
- Hoedemaker, M.D., Frederick (1,4)
- Horton, M.D., John M.
- Janes, M.D., Robert G. (1)
- Kahan, Ph.D., Lisa

The first year course begins the study of major emotional disorders. These include early developmental disturbances leading to infant posttraumatic stress disorder, schizophrenia, addictions, borderline states, paraphilias, and sociopathy.

The second year course continues the study of the major emotional disturbances, covering major mood disorders and character pathology.

The third year course addresses those pathologies that stem from oedipal and post-oedipal phase problems including dysthymia and anxiety disorders.

Electives

Elective Courses and Study Groups are made available for the following purposes:

- Offer additional content on psychoanalysis;
- Experiment with new content or teaching methods;
- Encourage development of research skills related to psychoanalytic work.

The Faculty

Faculty members who teach in the Core Program for psychoanalytic training or in the Continuing Education Division are selected on the basis of their academic and post-graduate training credentials as well as teaching ability. Instructors in the Core Program are required to be graduates of an accredited psychoanalytic institute. Senior clinical associates as well as other qualified individuals may serve as co-instructors.

The Faculty as a whole constitutes the educational policy making body of SPSI. All SPSI committees (except those of the Board of Trustees) are responsible to the Faculty. SPSI leadership positions, including director, faculty chair and all committee chairs, are elected by the Faculty.

Core Curriculum

Years 1 - 4

Theory

The theory track of the curriculum provides a thorough working knowledge of psychoanalytic theory, from its foundation--the work of Sigmund Freud--to the present. Analytic theory is presented historically, as it developed.

The first year is devoted to the work of Sigmund Freud and Anna Freud, until the 1940s. Some correlations with recent developments in the neuro-sciences will also be presented, along with an introduction to psychoanalytic ethics.

In the second year the several theoretical strands that were developed mainly in the U.S. will be studied. These include ego psychology and American object relations theory. By the end of the second year, the Associate should have an understanding of the fundamentals of psychoanalytic theory sufficient to enable an appreciation and increasingly self-guided study of the range and multiplicity of new theories that have appeared during the last few decades.

In the third and fourth years, the Associate will study contemporary analytic theories and the integration of recent ideas with the historical foundations of psychoanalysis. One trimester in the third year will be devoted to the study of contemporary analytic ideas, including the relational, intersubjective and two-person psychological points of view.

In the fourth year, British object relations theory and self psychology will be covered.

Human Development

In Year 2, the didactic course, *Human Development I*, will consider key aspects of early infant development (pregnancy through 18 months), recent research, and attachment theory. This course will alternate throughout the academic year with a discussion group based on weekly infant observations by Clinical Associates. Each Clinical Associate will observe a mother or the primary care giver

and infant of his or her choice from birth through the infant's first birthday. The observation occurs in the family's home for 45-50 minutes each week. Clinical Associates will write a weekly narrative of his or her observations and complete the *Massey-Campbell Scale of Mother-Infant Attachment Indicators During Stress*. A senior faculty member may accompany the Clinical Associate on at least one home visit. A final paper incorporating the Clinical Associate's understanding of the infant observations, the attachment scale and counter-transference reactions will be due several weeks prior to the end of the course.

During Year 3, there will be three 11-week courses covering human development from 18 months to young adulthood. The first trimester, *Human Development II* will consider development from 18 months to year 6; the pre-Oedipal and the Oedipal phases. The pre-Oedipal issues will include concepts of mentalization, anality, aggression, play, object and self-constancy, gender, the influence of the father or other in character development, separation individuation, and the development of autonomy. The Oedipal issues include phallic drives, psychic structure formation, sexual identity, triadic object relations, and contemporary views of sexual and gender development. This seminar may include child observations and reports.

Human Development III, a seminar on latency (approximately 6-12 years) and adolescence (12-20 years), begins in the second trimester of Year 3. This seminar will address concepts of psychosexual development, gender development, heightened ego defenses against Oedipal and pre-Oedipal urges, and cognitive and structural characteristics of latency functioning. During the adolescent component, Associates study the concepts of object removal, formal operational thinking, identity consolidation and special issues in psychoanalytic treatment of adolescents.

Process

The practical techniques needed for conducting psychoanalytic treatment will be studied comprehensively in the process track of the curriculum, from the evaluation of suitability for analysis through the complexities of termination.

In the first two years, the application of the fundamental concepts of analysis to the treatment situation, especially transference and resistance, will be studied and discussed. A variety of related topics will also be considered, including timing of interpretations and other interventions, counter-transference, working through, the therapeutic alliance, the use of dreams, and the therapeutic approach to time and money issues. The evolution of analytic thinking about process will be discussed in order to place contemporary thinking and practices into an historical context.

The first and second year courses will be directed towards helping Clinical Associates with their early supervised cases, since conducting psychoanalysis is essential to learning psychoanalytic process. In the second half of the curriculum, more advanced topics will be studied. Ethical and other problems that may be encountered will be discussed. The process of termination, including the transition from middle phase to termination, will be emphasized in the fourth year.

Psychopathology

The curriculum includes a course in psychopathology in each of the first three years of the core program.

The psychopathology courses are planned to coordinate with both the Theory and Human Development courses.

Psychopathology is the conceptual link between the more abstract aspects of theory/metapsychology and the immediate psychoanalytic process phenomena such as transference and counter-transference. Psychopathology is drawn from several paradigms to assess and categorize clinical phenomena. Traditionally, psychoanalytic education emphasized the trauma/strain model versus conflict and fixation as the psychopathological conceptual divide. Current models that compete with and expand upon that system include trauma/conflict as coexisting spectrum paradigms, neurobiological correlates to metapsychology, and psychiatric descriptive approaches, e.g., DSM IV-R.

The goal of the core program psychopathology courses at SPSI is to understand the connection of theory to clinical technique. Through the study of various useful paradigms, the clinical assessment and diagnosis of emotional disturbances can be understood and applied by the psychoanalyst conducting treatment.