Free Associations

A Newsletter for the PSP Community

...dedicated to excellence in learning, teaching and application of psychoanalytic knowledge

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NOTABLE QUOTE: "The most exciting breakthroughs of the 21st century will not occur because of technology but because of an expanding concept of what it means to be human."

--John Naisbitt, *Megatrends* (1982)

OUTSIDE NEWS & VIEWS

Nature and Nurture: Now the Purview of Neuroscience

In 1977, George Engel, at the University of Rochester, published a paper that articulated the biopsychosocial model of disease, which stressed an integrated approach to human behavior and disease. Each system – the biological, psychological and social – played a role in the progression of the disease state. The observation that a significant percentage of identical twins are discordant for schizophrenia is one example of the type of data that support the understanding that there are many significant interactions between the genome and the environment. Studies have also demonstrated that many factors – including activity, stress, drug exposure and environmental toxins – can regulate the expression of genes and the development and functioning of the brain.

THE THERAPIST'S THESAURUS

Modeling. A form of social learning based on imitation of observed behavior.

Panphobia. Overwhelming fear of everything.

Visual agnosia. Inability to recognize objects or persons.

Witzelsucht. A tendency to joke and make puns along with inappropriate sense of humor. Seen in orbitofrontal cortex injuries.

Derailment. Gradual or sudden deviation in train of thought without blocking; sometimes used synonymously with loosing of association.

Happy New Year

GENERAL PSYCHOANALYTIC CORE COMPETENCY EXPLAINED

Conduct a global patient assessment.

Global assessment includes: personal history, symptoms, mental status, and readiness for treatment, as well as assessment of appearance, demeanor, suicidality, and homicidality.

You should have knowledge of the scientific and theoretical basis of various models from medicine, psychology, sociology, religious studies, and other disciplines along with appropriate applications of those models. As part of this competency, you should be able to access psychoanalytic-related literature from multiple sources. Also included is an attitude of openness to information that may differ from personally held views.

FROM A CLINICAL SUPERVISOR'S NOTEBOOK:

A Case Study – Why We Need Supervision

A student analyst was so rewarded emotionally by his work with a particular patient that he went out of his way to meet with her when she needed him and to schedule additional office hours when he would not normally be in the office. The patient responded with gratitude, which enhanced the self-esteem of the analyst who was conscientious and overly responsible for this patient. It was only through supervision that he began to understand how his need for recognition fueled the overly accommodating stance; how his objectivity about the psychotherapeutic process had been compromised; and how this cultivated an unhealthy dependency in the patient.

TRUE, WE DON'T CURE, BUT...

In contrast to the biomedical model's goal to cure with symptom relief treatment, the goal of psychoanalytic interventions is healing. The word *heal* comes from an old Anglo-Saxon word *haelen*, which means

"to become whole, body, mind, and spirit within oneself" but it can also be defined in a broader context as being in the "right relationship" with oneself, others, and our world. We look to enhance our ability to

hear the meaning of the symptoms as we listen to the patient as well as access the person's emotion in order to facilitate the treatment process.

WHAT'S THE CURRENT THINKING? [Journal-Surfing] – Psychoanalysis and Neuroscience

Neuroscience is partnering with **psychoanalysis** in the best sense of the word, namely, supporting some aspects of psychoanalytic thinking while challenging others. This dialogue needs to continue because, where trauma is concerned,

neither side is privy to the whole picture. Current congruence, dissonance, and considerations for technique are explored.

-from Ahlskog, G. (2020). Neuroscientific advances in the treatment of trauma. *Psychoanalytic Review*, 107(3), 229–241