

# **Colonising the Heart: shame and the regulatory project**

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“May you live in interesting times”, says the ancient Chinese curse. For psychotherapists and counsellors of all persuasions the ideological frenzy surrounding the issue of regulation has made the past twenty years interesting times indeed. Whether individual practitioners feel blest or cursed to find themselves caught up in this whirlwind says a good deal about their philosophy of life, their temperament and their understanding of the nature and aims of therapy. My own view is that the drive for state regulation has been a disaster for psychoanalytic psychotherapy. (In this chapter the terms ‘psychoanalysis’ and ‘psychoanalytic psychotherapies’ refer to all the schools of psychoanalysis, analytical psychology and existential analysis.)

The ever-shifting, treacherous and creative development of psychoanalytic organisations and movements is fascinating. Like tubular plants psychotherapy organisations tend to divide and propagate. Some people deplore this tendency toward schism and ask why psychotherapists cannot behave in a more mature and rational manner. Others point to the plastic nature of the psyche, arguing that it will provide phenomena to support any theory we care to articulate; as a consequence, all theories have some aura of psychic validity. Or perhaps it is as Bokay contends: “The fierce fights within the movement are therefore

part of the essential character of psychoanalysis and the necessary means of articulating its radical content.” (Vida, 2002, p. 13)

In the face of this protean force Hogan argues that we should encourage a proliferation of professional associations.

Because of the lack of consensus of standards of practice, methods of training, and methods of selection, however, it will be crucial to create a situation in which many such organisations coexist, each advocating different methods and theories for the training and certification of therapists.” (Hogan, 1979, p. 74)

As Shamdasani observes, “the problem is that there is no consensus as to the nature of psychotherapy”. (Shamdasani, 1999, p. 64) It seems to me that it is precisely the acceptance of difference and multiplicity that will protect the public, not the imposition of “one size fits all” regulatory clothing to cover our nakedness.

While organising psychotherapists can be like herding cats, many psychotherapists and counsellors have embraced the cause of state regulation and contributed thousands of hours of voluntary labour to achieving this goal. Statutory regulation has been presented as a good and a necessity. Appeals are made to individuals’ idealism, to their public spiritedness and to their insecurity. The primary channel of the push for statutory regulation of psychotherapists has been the United Kingdom Council for Psychotherapy (UKCP). The argument is made that because the UKCP structure recognises different modalities of psychotherapy, Hogan’s concerns about the coexistence of organisations, methods and theories have been addressed. It is hoped that this multi-modality model will provide the template for the statutory regulatory body when it eventually emerges.

However, what appears to be happening is an ironing out of differences between courses

and organisations and a push to define a set of core skills and values for all modalities of psychotherapy.

In 1968 the House of Commons held debates about Scientology and its claim to be “the most advanced... method of psychotherapy and self-improvement ever discovered”. As a result of these deliberations, the Foster Report in 1971 urged “that psychotherapy should be organised as a restricted profession open only to those who undergo an appropriate training and are willing to adhere to a proper code of ethics”. In 1978 the Sieghart Report repeated the call for the guarantee of competence through approved training courses. Behavioural psychotherapists responded that there was no evidence of substantial harm by unqualified psychotherapists. A private members bill based on the Sieghart Report failed at the second reading in 1981. This led to the convening of the Rugby conferences which gave birth to the UKCP. (Greenberg, 1999, p. 65)

Some are impatient with attempts to enlarge the debate about the statutory regulation of psychotherapy. In 1999, Ann Casement, the then chair of UKCP, wrote an article, “from the perspective of the profession moving towards being regulated by law... [not from] a hypothetical standpoint which takes into account all the pros and cons of statutory registration.” (Casement, 1999, p. 66) This is consistent with the often repeated claims that those who question statutory regulation are either selfish, badly informed or naïve. Or as O’Carroll says, “We live in a time where big Government is the order of the day. To those who think otherwise what else can one say except that it is time to grow up?” (O’Carroll, 2002, p. 9) The assumption is that accepting the current “order of the day” is

synonymous with “growing up”. To my knowledge, however, the proponents of statutory regulation have not produced any substantial arguments in response to Hogan’s 1979 research in the US or to the work of Mowbray (1995) and of House and Totton (1997) in the UK.

In what follows I will discuss possible motives for the participation of psychoanalytic psychotherapists in the UKCP and its drive for regulation. I will reflect on some of the consequences of this involvement and ask whether the damage to the field is permanent. I hope to raise some “hypothetical standpoints” which will contribute to a debate that is still open.

The primary reason given for the statutory regulation of psychotherapy is the defence of the public. The view is that untrained, unethical and unqualified psychotherapists (“charlatans”) are a danger to society and are bringing the profession into disrepute.

There is in the view of many an urgent need to curb the immoral practitioner, provide proper training for any who would join the profession and reassure the public that it is safe to see a psychotherapist. In my view the allegation that psychotherapy in Britain is especially dangerous to the public has never been proven. There are no statistics that show that there is an epidemic of dangerous psychotherapists plaguing Britain. One statistic that has often been quoted in UKCP meetings is that 10% of all professionals abuse their clients, regardless of whether their professions are regulated or not.

Regulation, voluntary or statutory, of itself makes no demonstrable difference to incidence of bad practice. But the case for providing a clear, accessible route for clients to

complain about bad practice has been hopelessly complicated by linking training and regulation. One of the points I will be making is that basing statutory registration on training is actually detrimental to the interests of the public and damaging to psychotherapy.

I want to focus in this chapter on three problematics that might drive psychoanalytic psychotherapists to seek the approval of and control by the state: the postcolonial situation in Britain; shame and failure in psychotherapy; and, the linkage between training and regulation.

### **The postcolonial situation**

The wave of regulation that has overtaken Britain in the past 15 years is often attributed to transatlantic influence from the US or to interference from Brussels. Management-speak with its focus on targets and outcomes has taken hold in government, education, the health service, etc. as well as in business. Every enterprise is expected to have a mission statement. In the interests of accountability and transparency public institutions seem to be trapped in an exhausting cycle of restructuring. In the 2002 Reith Lectures, Onora O'Neill questioned the premise of much of this regulation culture. She asked about the role of trust in securing social bonds suggesting that the culture of accountability actually damages trust rather than supporting it. Inappropriate tinkering can cause deep distress to the fragile ecology of a psychotherapy organisation. For example, it takes anywhere from 4 and 10 years to complete a psychoanalytic training. How can the

trainees be properly held throughout that process if members of the training committee are expected to be rotated every three years?

A different perspective on this phenomena is afforded if we see it as an aspect of postcolonialism. For centuries Britain looked out across the seas. It invested its imagination in putting order into the world, civilising the savage, saving the heathen and controlling the chaos of ignorance. The British genius for bureaucracy resulted in productive, well managed colonial economies and populations. Thousands of British men and women went overseas to build the empire. This energy and moral fervour has now been focused on the homeland. The proposed state regulation of psychotherapy can be read as part of a project of self-colonisation.

The rhetoric of empire building is echoed in the argument for regulation. Two scare tactics are usually employed. One is to warn about the danger of charlatans and the other is to say that state regulation is inevitable and that it is best to make terms as quickly as possible.

The charlatans need to be contained (civilised). The decent professionals who are impelled to save the public from the unqualified now take up the white man's burden. At the end of the day 'unqualified' usually means 'not qualified by a group that I accept as legitimate'. As animists need to be rescued by Christians, the 'unqualified' need to be enlightened by the 'qualified'. The British Psychoanalytical Society withdrew from the UKCP and set up the British Confederation of Psychotherapists (BCP), because as the

descendants of Freud they believed that they should have a permanent seat and a veto on the UKCP Governing Board. They were the carriers of the mana of “pure gold” by which all others would be measured. They wanted to occupy the place of the metropolitan centre in relation to its colonial dependents. They did not want their own training procedures to be inspected by the “inferior” therapists on UKCP committees. This demonstrates Panikkar’s view that “colonialism is not just political or economic domination but, more broadly, a belief in monoculturalism, the unquestioned validity and superiority of a single culture”. (Prabhu, 1994, p. 1)

A steady trickle of organisations has followed the lead of the British Psychoanalytical Society and left the UKCP for the BCP. Some of them have been coerced by the truly bizarre ban on dual membership, which states that an organisation which is a member of the BCP cannot also be a member of the UKCP. The legality of this position has never been tested in a court of law as far as I know. The psychoanalytic organisations left behind in the UKCP have sometimes been characterised as marginal to psychoanalysis in the UK or have felt themselves to be stranded on the margins of the empire. Some of these organisations are now hoping to break the stranglehold of the centre through the creation of the Psychoanalytic Consortium. In part, this represents a sort of revolt of the natives, because these organisations are largely populated by former patients and supervisees of BCP therapists.

The role of the BCP in the negotiations about statutory regulation exposes the fact that, when it comes down to it, in the UK the influence of class easily overrides principles of

transparency or accountability. BCP organisations have had disproportionate representation at discussions with members of parliament and ministers. No doubt the member of parliament who organised the meetings felt that he was following the natural order of things. As urgent and momentous as the BCP/UKCP conflict appears in London, in other parts of the country it has little or no meaning. For example, there are no BCP therapists between Manchester and Glasgow and only a hand full of UKCP registered psychoanalytic psychotherapists.

In any colonial situation there were some who argued that because there was no defence against the coloniser it was prudent to make as good a compromise as one could with them. Why sacrifice oneself in fruitless resistance? This attitude is very widespread in the psychotherapy profession. I suspect that in the end this will be the view that prevails. However this will not be a surrender to superior firepower or economic power but to a force projected from our own minds. There is no organised assault from the EU or the UK government on British psychotherapists. Shamdasani describes it as “voluntary confinement”. While taking the attitude that one will live to fight another day might be wise in the face of overwhelming military odds, is it the best attitude to have when facing an ideological epidemic? What is required is a consistent and persistent return to first principles whenever the issue arises. In other words, firstly, that no conclusive case has been made that psychotherapy constitutes a clear and present danger to the public and secondly, that no case has been made that the linkage of training and regulation secures the public good or the good of psychotherapy. While many therapist moan about the direction in which the profession is moving, in my experience, few have the heart for the

intellectual guerilla warfare that is necessary to challenge the assumptions of the regulation lobby.

Some would take the attitude that “the cream rises to the top”. In other words, it does not matter what form of organisation psychotherapy adopts since the best people and ideas will always succeed. But it seems to me that different organisational structures reflect and foster different forms of relationship and consciousness. Not every environment is a facilitating one for all people or ideas. Organisations can distort development. One is privileged indeed to find oneself in an environment that helps one to flourish. I have often felt that as a self-employed psychotherapist, I have more in common with the family that runs the corner shop than I do with someone in an academic or NHS post. Spivak, the postcolonial theorist, writes, “The small peasant proprietors are therefore incapable of making their class interest valid in their proper name, whether through a parliament or through a convention.” I think that feelings of disenfranchisement and invisibility are felt by many in private practice who find their identity as psychotherapists is neither valued nor understood in the current regulatory environment. There is a sense of being irrelevant in the drama that is unfolding and that there is no obvious way of channeling one’s concerns and anxieties. One may find oneself driven out of the forest of private practice, blinking and bewildered and waving a white flag, into the bright glare of so-called efficiency and transparency.

The colonial situation can be characterised by epistemic violence. There is violence in the culture of regulation as well. Many psychoanalytic psychotherapists feel that their

understanding of the psyche and the analytic process is completely marginalised by an alien language of therapeutic objectives, the expectation of written contracts with clients and the use of videotaping in training. In 1835 Macaulay in his 'Minute on Indian education', advocated the creation of

a class of persons, Indian in blood and colour, but English in taste, in opinions, in morals, and in intellect. To that class we may leave it to refine the vernacular dialects of the country, to enrich those dialects with terms of science borrowed from the Western nomenclature, and to render them by degrees fit vehicles for conveying knowledge to the great mass of the population." (Spivak, 1993, p. 77)

Often the type of language proposed by those developing frameworks for the regulation of psychotherapy and counselling feels like a slippery slope that will create "psychoanalytic" therapists who work without the concepts of transference or the unconscious. The radical concepts of psychoanalysis will be replaced by banal platitudes.

According to Spivak,

The education of colonial subjects complements their production in law. One effect of establishing a version of the British system was the development of an uneasy separation between disciplinary formation in Sanskrit studies and the native, now alternative, tradition of Sanskrit 'high culture'. Within the former, the cultural explanations generated by authoritative scholars matched the epistemic violence of the legal project." (Ibid, p. 77)

Is the flattening out of the contours on the map of British psychotherapy going to leave psychoanalytic practitioners as purveyors of a 'high' therapeutic culture, who are unable to get referrals in the real world of NHS hegemony over psychotherapy? Will psychoanalysis disappear finally as a clinical practice and become a branch of the humanities?

## **Shame and failure in analysis**

As their practices whither and trainings contract, perhaps psychoanalytic practitioners will experience the shame of the colonised who could not protect their land. But this would only be an additional sting of shame to that which exists already in the world of psychoanalysis, because, I contend, the practice of psychoanalysis is inherently shameful. This shame of the psychotherapist is not just personal; related to his or her family history and psychopathology. It is a core element of psychoanalytic vocation. Pattison writes:

Shame itself is an entrance to the self. It is the affect of indignity, of defeat, or transgression, of inferiority, and of alienation. No other affect is closer to the experienced self. None is more central to the sense of identity. Shame is felt as an inner torment, a sickness of the soul. It is the most poignant experience of the self by the self, whether felt in the humiliation of cowardice, or in the sense of failure to cope successfully with a challenge. Shame is a wound felt from the inside, dividing us both from ourselves and from one another. (Pattison, 2000, p. 1)

The psychoanalytic setting is uniquely suited to the containment and exploration of feelings of shame and failure. This can seem something of a miracle to a client who has felt that they had to bear such feelings on their own. In the public mind this association between analysis and shame can provoke derision and contempt. The therapist is left to manage the intensity of the client's feelings, the suspicion of the public and his/her own shame about being a psychotherapist. Only a therapist who is reconciled to his/her own shame can tolerate the hours and years of uselessness without retaliating against clients with aggressive interpretations or seeking special respect and status in public.

At a recent meeting of the Psychoanalytic and Psychodynamic Section of the UKCP, a very well qualified analyst argued for a further measure of regulation so that “they will respect us”. Who “they” are was not clear. When “they” would be satisfied with “us” is anybody’s guess. Here was someone who has trained at one of the most prestigious psychoanalytic organisations in the world who nevertheless feels that more must be done to secure adequate prestige.

Analytic practice might be conceived as a process of distinguishing the unknown from the unknowable. This takes time and relies heavily on hindsight. The discipline of passionate unknowing is deeply at odds with the culture of enterprise and achievement, with its projected, quantifiable targets. There is often an awkward moment in an initial session when the client asks, “Can you help me?” or “How long will it take?” The reply, “I don’t know”, is sometimes heard as a shocking and irresponsible response. Many people no doubt conclude that the therapist who invites them to spend time and money on a process which has no definite objectives is much too mad to be of use to them. Other clients, however, far from being scandalised, instinctively embrace the freedom of the analytic space.

Psychoanalytic practice is also at odds with the feeling that nothing matters. It confronts nihilism by accepting it as inevitable. A therapist who *really does not know* will terrify the nihilist who often occupies a very secure position of ironic knowingness. Some people see the therapist’s role as one of drawing the client back from the abyss to the security of psychological and social structures. Others recognise the importance of

accepting the client as someone horrified by the abysmal human condition. The psychoanalytic psychotherapist can never finally “arrive”. There is an element of shame in having no stable epistemological ground under one’s feet.

The issue of shame also arises in the relationship between the UKCP and the BCP. Many people have the perception that quality therapists and trainings are in the BCP. UKCP psychoanalytic psychotherapists and trainings are often considered lightweight. Joining the BCP can be a way of boosting one’s self-esteem as a therapist. BCP registration is a move out of the “small peasant proprietor” class into the upper middle class.

Psychoanalytic culture with its secrecy, incestuousness and rigid caste relationships breeds shame. It can come as a shock to realise that many of the seminal writers in psychoanalysis have engaged in boundary violations that would be considered unacceptable under most codes of ethics, let alone at the bar of public opinion. Perhaps psychoanalytic knowledge is by nature the fruit of transgression. Trainee psychotherapists are gradually initiated into the oral tradition of psychoanalysis that includes stories about the sins of the analytic parents: Freud, Jung, Ferenczi, Klein, Winnicott, Laing, et al. One feels driven to the uncomfortable conclusion that the most creative spirits in psychoanalysis have also been the most prolific boundary breakers. To become a psychoanalytic psychotherapist is to become the carrier of a share of the burden of shame incubated by the family secrets of one’s own organisation and of the wider psychoanalytic family. In Pattison’s words:

A shame-bound family is a group of people, all of whom feel alone together. To the individuals in the family, shame feels unique and lonely... The shame that feels so peculiar to the self paradoxically is a product not of the individual... but of the system. Within the family secrecy is rampant and relationships are thin and brittle. (Pattison, 2000, p. 106)

One response to this painful legacy of social, epistemological and psychic failure is to inflate the prophylactic virtues of training.

### **Training and regulation**

In her discussion of developments in the education system in India in the 18<sup>th</sup> and 19<sup>th</sup> centuries, Spivak observes that “the education of colonial subjects compliments their production in law”. We could paraphrase this for our own circumstances as, “the regulated education of psychotherapists compliments the production in law of the psychotherapy profession”. There is a very deep assumption that to be a proper profession, psychotherapists need to be educated in the proper manner. Many people seem to take it as self-evident that training makes a practitioner ‘safer’. The research done in the US by Hogan points to the opposite conclusion. In the American states with the highest training threshold for registration there was the highest number of complaints about practitioners. In the states where the threshold for registration was low there were few complaints by the public.

In addition to not protecting the public, licensing in the US tends to have negative side-effects. Irrelevant and higher than necessary entry requirements restrict the number of persons able to enter the professions... licensing inhibits important innovations in professional practice, training, education, and organisation of services...since psychotherapy is such an ill-defined field, since reliable and valid

standards do not exist to determine whether practitioners are competent, since not enough is known about how to train practitioners effectively, and since methods of measuring competence and selecting practitioners have not been agreed upon, restrictive licensing laws are inadvisable. (Hogan, 1999, p. 72)

The approach to statutory regulation adopted by the UKCP presupposes that training produces safer therapists. Certain types of training regimes and organisations will in effect take on the force of law if they are accredited by the state. For example, the practice of seeing two training patients supervised by two supervisors arose in particular circumstances. While that may be a good way to train, it is not necessarily the only way to train or even the best way to train in all situations. At the Association of Independent Psychotherapists we have done away with the category of “training patients” altogether, and focus instead on the capacity of the trainee to work with a variety of clients at the duration and frequency that is appropriate to them, which after all is how real life practice works.

The fact that psychoanalytic training takes such a long time contributes to the slow pace of change in psychoanalytic institutions. Trainings need to be free to adapt to a fluid, often hostile, environment, and to not be constrained by state mandated structures. However, linking training and regulation might be in the interests of established organisations, as they will be able to freeze out new organisations and trainings.

At the moment there is no such thing as ‘psychotherapy’. Psychotherapy as a profession is something some people are trying to construct with greater or lesser degrees of self-consciousness. I remember vividly the first UKCP AGM I attended where we were put

into groups to discuss a definition of psychotherapy. There was no consensus on theory or practice in our group of psychoanalytic psychotherapists, Jungian analysts, hypnotherapists, Gestalt therapists, transpersonal psychotherapists, person-centred therapists, cognitive-behavioural therapists, etc. Although some within the psychoanalytic field, maintain that a common core of psychological facts is now established, I am deeply suspicious of this attitude. To give this alleged common core of facts the imprimatur of law would be a dangerous political mistake.

Some BCP organisations which left the UKCP in part to avoid intrusive regulation are doing quite well. They have the energy and resources to organise conferences, public outreach programmes and very attractive websites. Smaller organisations that stayed with the UKCP, either out of conviction or fear, are struggling. Membership of UKCP carries financial and manpower demands that are hard to bear.

It is a disservice to the public to perpetuate the idea that in the field of psychotherapy there is a self-evident connection between training and safety. The best protection for the public is a frank, humble and good-natured admission of the limitations of our knowledge about the psyche. If there must be regulation it should be as simple as possible: a register that any practitioner can sign up to that will provide an easily identifiable body to deal with complaints. After all it does not really matter to a client what qualifications the therapist they are complaining against has or does not have as long as their complaint is dealt with swiftly and fairly. This would relieve psychotherapy education of the

repressive burden of regulation and leave it free to explore fresh ways of articulating the role of psyche in our lives.

## **Conclusion**

Psychoanalytic psychotherapy is tied in knots. The field is rife with suspicion, contempt and hatred. Some therapists feel inferior, while others have inflated views of their own potency. There is a shortage of trainees and patients. It is doubtful that the UKCP has the capacity or the will to provide the support and leadership that those psychoanalytic organisations that have remained within the fold urgently require. The emergence of the Psychoanalytic Consortium is one manifestation of the frustration of these organisations and their urgent need to breath some fresh air outside the stiffling, hothouse atmosphere of the regulation debate.

It is ironic that while the Church of England is moving rapidly toward disestablishment, psychotherapy, may become the new established religion in its stead. Will psychotherapists and counsellors become the bearers of the collective myth of meaning for the next era? And as such will they require and deserve the imprimatur of the state?

If the perspectives offered in this chapter seems “interesting”, but too exotic to be of relevance to the serious deliberations about regulation, it is worth reflecting on the following comments of Robin Cooper, a senior aide to Tony Blair:

What is needed is a new kind of imperialism. The opportunities, perhaps even the need for colonisation, is as great as it ever was in the 19<sup>th</sup> century. The weak still need the strong and the strong still need an orderly world. A world in which the efficient and well-governed export stability and liberty, and which is open for investment and growth, seems eminently desirable. (*Daily Mirror*, March 28, 2002)

These words from the heart of the British establishment have an echo in the anxieties and ambitions of Britain's psychoanalytic psychotherapists. The *Mirror* article, in which they appear, observes that, "His comments will anger MPs who think Labour is keener on matters abroad than problems at home." One thing we can learn, however, from developments within the rather circumscribed world of psychotherapy is that "home" has become "abroad" and the process of self-colonisation is well underway.

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