



Tampa Bay Institute for Psychoanalytic Studies, Inc

3404 62nd Street East, Bradenton, FL

813-908-5080

TBIPS Newsletter

Vol. XVI, Issue II. Summer 2024



Volume XVI, Issue II,
Summer 2024

Greetings from the President

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Dear Reader:

It's going to be another hot, hot summer with global warming in full swing and only intensifying. This seems to include our political landscape as well. Parents I advise complain that their children are more interested, almost obsessively so, in interacting with their devices (cell phones, i-pads, etc.) than they are with interacting with friends and family in the actual, not virtual, presence. A luddite myself, I cannot even text for I do not yet own a cell phone. I find solace in the quiet, cool, dimly lit by day (that is, by natural lighting) of my consulting room with the one to one intimacy and presence of another human being, ironically, meeting by Zoom.

Apropos, the Tampa Bay Institute for Psychoanalytic Studies looks forward to Fall classes: Repetitive Painful States; Hate, Envy, and Destruction in the Clinical Situation; and the staple of every semester, Continuing Clinical Case conference. We recently finished a very interesting semester which included a course on Gender (see page for some notes); on Trauma; and Practical Analytic Subjectivity II, an experiential group for candidates and students facing our challenging clinical work. And we are so pleased to have more recent graduates join our faculty.

Stay cool; stay connected,

Lycia Alexander-Guerra, MD
President, TBIPS
941-741-8949 and 813-908-5080

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Training in Psychoanalysis and Psychotherapy

TBIPS embraces pluralism and emphasizes a comprehensive contemporary view of psychoanalysis and features a multi-cultural and theoretically diverse faculty, including, but not limited to, expertise in Intersubjectivity, Relational, and Self Psychology.

The TBIPS training program represents the most current, up-to-date theories in psychoanalytic thought. TBIPS embraces *pluralism* and emphasizes a *comprehensive* contemporary view of psychoanalysis within the context of a mutually shared and respectfully open paradigm between faculty and candidates. We offer a multi-cultural and theoretically diverse faculty, including, but not limited to, expertise in Intersub-

jectivity, Relational, and Self Psychology, whose teaching style is student focused with the goal of offering the opportunity for dialogue between varying schools of thought and to engage and encourage candidates to think *critically* about psychoanalytic concepts.

Inquiries Welcome. To Apply:

Contact Lycia Alexander-Guerra at 13919 Carrollwood Village Run, Tampa, 33618 or 813-908-5080; or go to Tampapsychoanalytic.org "Home"

Seminars may be taken individually or as part of certificate programs in psychoanalytic psychotherapy or psychoanalysis

We are always seeking additional faculty to volunteer teach and/or design TBIPS courses. Contact Dr. Alexander-Guerra at tbinstitutepsastudies@gmail.com to join us in this exciting endeavor.

TBIPS CURRICULUM

TBIPS recognizes that, because many people come to us suffering from the Trauma of childhood abuse and/or other horrific events or from the relational trauma of chronic mis-attunement and misrecognition, our curriculum must weave into it a deep understanding of child development, attachment, and the effects of trauma. Semesters currently run 16 weeks long. Courses are open to individual students as well as to candidates seeking full psychoanalytic training. TBIPS invites candidates to frequently update the syllabi.

Semester I	FIRST YEAR	Semester II
Intro to Psychoanalytic Concepts I Practical Analytic Subjectivity I Continuing Clinical Case		Intro to Psychoanalytic Concepts II Development Continuing Clinical Case
SECOND YEAR		
Relational Concepts I Developmental Issues: Narcissism and Shame Continuing Clinical Case		Relational Concepts II Developmental Issues: Attachment Continuing Clinical Case
THIRD YEAR		
Repetitive Painful States Group or Couples Therapy Continuing Clinical Case		Practical Analytic Subjectivity II Trauma (8 weeks) and Gender (8 weeks) Continuing Clinical Case
FOURTH YEAR		
Psychosoma Hate, Envy, and Destruction in the Clinical Encounter Continuing Clinical Case		Focus on Psychoanalytic Contributors and Topics* Electives (candidates design) Continuing Clinical Case

* courses which focus on specific theorists such as Winnicott, Ferenczi, Jung, and topics such as spirituality, racism, and intersubjectivity.

REGISTRATION FORM



3404 62nd St East, Bradenton, FL 34208 813-908-5080

www.tampapsychoanalytic.net

Registration Fall Semester 2024

**All Courses meet by Zoom on Wednesday mornings for 16 weeks:
Sep 18, 25; Oct 2, 9, 16, 23, 30; Nov 6, 13, 20; Dec 4, 11, 18, 2024; Jan 8, 15, 22, 2025.**

Deadline for registration: Aug 7, 2024

Fee: \$300 for a single course; \$250 per course if enrolled in 2 or more courses.

Psychosoma Wednesdays 8:00am-9:15pm.
Sep 18, 25; Oct 2, 9, 16, 23, 30; Nov 6, 13, 20; Dec 4, 11, 18, 2024; Jan 8, 15, 22, 2025.

This course explores the interconnectedness between mind-body expression of psychological life from a contemporary perspective. When symbolization of experience and affect fails (e.g. trauma vitiating the hippocampal function), the body can express experience in 'body memory' in the procedural, sensorial, and affective encoding of experience (e.g. by the amygdala). Using body and other implicit communications as salient material for analysis, and negotiating ways to bring these communications into the relational and narrative realms will be discussed.

Hate, Envy, and Destruction in the Clinical Encounter Wednesdays 9:30am-10:45am.
Sep 18, 25; Oct 2, 9, 16, 23, 30; Nov 6, 13, 20; Dec 4, 11, 18, 2024; Jan 8, 15, 22, 2025.

This course will continue to explore the effects of relational traumas, insecure attachments, and their sequelae, and their manifestations as created in the therapeutic situation. The recognition, welcoming in, naming, and the living through together of difficult affects, as well as understanding their origins, serves to strengthen the relationship and the self, both necessary components of mutative treatments.

Clinical Case Conference Wednesdays 11:30am-12:15pm.
Sep 18, 25; Oct 2, 9, 16, 23, 30; Nov 6, 13, 20; Dec 4, 11, 18, 2024; Jan 8, 15, 22, 2025.

This course is designed to support the clinician's work and offers opportunities to integrate clinical material with psychoanalytic concepts, including ethics, and ways to deepen the psychoanalytic process with a focus on the therapist's self-reflection, the clinical relationship, and ways to facilitate what is mutative for the patient. Attendees are encouraged to present case material.

TBIPS Fall 2024 REGISTRATION FORM

Fee: \$300 for a single course; \$250 if enrolled in 2 or more courses.

_____ **Psychosoma** (16 weeks) Wednesdays 8:00-am-9:15am Sept 18- Jan 22

_____ **Hate, Envy, and Destruction** (16 weeks) Wednesdays 9:30-am-10:45am Sept 18- Jan 22

_____ **Clinical Case Conference** (16 weeks) Wednesdays 11:00am-12:15pm Sept 18- Jan 22

_____ **PEP subscription** \$50 (one year Aug 2024-July 2025) required of all students

_____ **Late fee** \$50 if received after (Aug 7) deadline

_____ **Total** Payment Enclosed, including PEP subscription (and late fee, if applicable)

(one course: \$300; two courses: \$500; three courses: \$750).

(refund policy: 85% 7 days before classes begin)

Must Include this page with Payment.

Registration deadline is August 7, 2024. Deadline is for all application material and CV (new students), registration form, and payment. Note: we cannot provide papers through a subscription to PEP (psychoanalytic electronic publishing) unless paid by deadline.

Name _____ Degree _____

License # _____ State _____ Country _____

Address _____ City _____

State _____ Country _____ Zip _____

Email address _____

Email form (and CV if first time registrant) to tbinstitutepsastudies@gmail.com with payment by bank transfer or by Paypal, or mail by post with check to TBIPS, Inc 3404 62nd St East, Bradenton, FL 34208.

A Few Notes on Gender

The candidates of the Tampa Bay Institute for Psychoanalytic Studies (TBIPS) recently enjoyed the third year course on Gender, a valuable, but often neglected, part of a psychoanalytic curriculum. It is an exciting, if not unfamiliar, topic for many students, some of whom have not thought much about the difference between sex and gender or about how each of us expresses ascribed qualities of the feminine and the masculine.

Sex is a biological category based on anatomy (genitalia), chemistry (hormone quantity), and chromosomes. You may know that one in 10,000 people are born with ambiguous genitalia (intersexed) and many intersexed persons want respect for their innate variation without shame or imposed surgery.

Gender is a person's internal sense of how they identify, for example, as female, male, or non-binary. Gender is not based on anatomical sex; For 'cis' people, sex and internal sense of gender match; For transpeople, their internal sense of gender and anatomy are not a match. Gender is not to be confused with object choice (hetero- or homo- or bisexual).

The TBIPS course on Gender emphasizes and reiterates that gender is fluid, socially constructed, non-binary, and not reified. It is porous and insubstantial, fluctuating and sometimes dissolving. In exploring gender fluidity, gender expression, development, and its cultural construction we read such iconic papers as Butler's *Melancholy Gender* and Harris' *Gender as Contradiction*, as well as Benjamin's paper on *Sameness and Difference*.

An interesting exercise in one class meeting was to compare and contrast Butler's and Jay's papers on gender melancholia. Developmentally, toddlers can experience, in the practicing (Mahler) subphase, an all-inclusive identification, for example, identification with a nurturing caregiver and one with an exciting, more absent/out in the world caregiver [identification often with the socially ascribed maternal and paternal roles, respectively]. These identifications allow the toddler a kind of bi-gender, where they can be and have it all. Later, in rapprochement (Mahler), a child usually gives up one gender identification and must, consequently, mourn what is lost (the other gender), just as in later, end of Oedipal (Freud) phase, the child might have to give up (loss of) the same-sex love object. Butler tells us this loss of the homoerotic leads to gender melancholy, melancholy because what is lost (homosexual love) must be disavowed and thus cannot be mourned. Heteronormative society demands this disavowal, and demands conformity to anatomy, that is, to identification of gender with anatomy and to heterosexual object choice, putting gender variance and LGBTQ citizens in conflict with norms.

Jay (2007a) adds to Butler's work in two ways. First, she differentiates loss from foreclosure, and then she explicates how the developmental experience in regard to object choice can be different for boys and girls. The first love object for both, in a world where women are usually still the primary caregiver, is the mother. The little girl, to become heterosexual, as demanded by culture, must lose her same-sex love object. The little boy, however, was born into a culture where from the start same-sex love objects were proscribed; thus, he did not lose it, but had it foreclosed from the beginning.

Jay says that this foreclosure of homosexual longings for heterosexual boys leads to obsessive-compulsive anxieties because the heterosexual boy must split his conscious heterosexuality from his unconscious attachment to the same sex love object and, subsequently, must be ever vigilant, anxiously policing lest his unconscious homoerotic longings surface. For the boy, then, heterosexual masculinity is precarious, threatened by potential eruption of homosexual longings.

For heterosexual little girls, writes Jay, there is the dilemma of identification with the mother to obtain 'femininity' while, at the same time, this identification – in a world where women are treated as second class citizens (every culture) -- means a girl has to give up some of her subjectivity and agency in order to be 'feminine.' (continued next page)

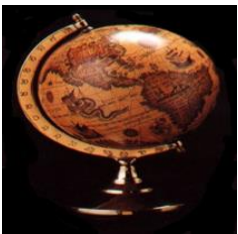
Jay also notes (as Freud did) that ambivalence is a necessary condition of melancholia, a condition that Butler either took for granted or failed to emphasize. Girls tend to be melancholic as the result of the loss and disavowal of their same sex erotic attachment. (Jay thinks this helps, in part, to explain why women outnumber men in suffering with depression). While not conflating melancholia with depression, Jay (2007b) nevertheless bulwarks her inclusion of ambivalence as a necessary component of melancholia with research that shows attachment styles with low ambivalence (secure and dismissing in adulthood) have low correlation with depression, while attachment styles with high ambivalence (ambivalent-resistant and disorganized) have a high correlation with depression.

Butler, J. (1995) Melancholy gender—Refused identification. *Psa. Dial.* 5:165-180.

Jay, M. (2007a) Melancholy femininity and obsessive-compulsive masculinity: Sex differences in melancholy gender, *Studies in Gender and Sexuality*, 8 (2): 115-135.

Jay, M. (2007b). Individual Differences in Melancholy Gender Among Women: Does Ambivalence Matter?. *J. Amer. Psychoanal. Assn.*, 55(4):1279-1320.

[For additional exciting courses, check out our Fall 2024 line up which includes Hate, Envy, and Destructiveness in the Clinical Situation.]



Tampa Bay Psychoanalytic Society (TBPS)

SPEAKER PROGRAM MEETINGS

TBIPS students, candidate, and faculty, and the Tampa Bay professional mental health community are fortunate to have the local Tampa Bay Psychoanalytic Society (TBPS) to bring interesting speakers to share their expertise. Now that TBPS has gone virtual it is able to offer its many excellent presentations to a wider audience,

TBPS 2024-2025 Speaker Program Schedule

September 15, 2024 (Sunday) Andrew Klafter

October 19, 2024 Charles Levin

November 16, 2024 Sandra Hershberg

January 18, 2025 Allannah Furlong

February 22, 2025 (afternoon) Timothy Ray

March 22, 2025 TBA

May 3, 2025 Nancy McWilliams

2023-24 TBPS Speaker Program Summary

Here are just a couple of brief summaries of the thought-provoking presentations from two of last year's program: (see next page)

One of the wonderful speakers at the local psychoanalytic society included **Kathryn Zerbe** who spoke about the repercussions of keeping secrets. She writes “The impact and complex nature of keeping secrets deserves greater scrutiny within psychoanalysis. While the capacity to keep a secret is a developmental achievement that furthers conscious choice and healthy boundary setting between self and others, an individual's need for privacy must be distinguished from untoward costs of collusion and concealment.”

Most of us are familiar with the toll keeping secrets about childhood abuse, alcoholism in a parent, adultery, and more, takes on our patients – the shame engendered, the dissociation required, the energy consumed, the vitiation of honesty and authenticity – but Zerbe reminded us that we as professionals, required to keep secrets, as are clergy, doctors, lawyers, etc, also bear a burden in secret keeping. What do we do with so much that we keep in our heads and about which we are not allowed to speak?

Secret keeping has been shown to have negative effects of increasing cortisol and inflammation in the body; increasing blood pressure; affecting sleep; causing anxiety; and distancing us from family and friends. It also affects our cognition, apparently by spending mental energy on thinking about the secrets being kept and because of the nuisance of it. Zerbe recommended we mind our health to counteract these effects as well as to empower ourselves in order to better keep the myriad of secrets demanded by our profession.

“Psychoanalysts who keep in conscious awareness both the adaptive value and the potential costs of maintaining the confidences of others over the course of a career are better positioned to assist their patients and themselves in rendering essential self-care.” See her paper:

Zerbe, K. J. (2019) The Secret Life of Secrets: Deleterious Psychosomatic Effects on Patient and Analyst. *Journal of the American Psychoanalytic Association* 67:185-214

Another wonderful speaker was **Robert Grossmark** who presented his very recently published paper *The Untelling*. He mused upon how psychoanalytic theorists consider time. For example, Freud and Breuer noted Anna O's *frozen* memories. Freud said that the unconscious is *timeless*. Winnicott posited that an infant, and later the adult, live in fear of a *future* breakdown that has *already occurred in the past*. The trauma [breakdown of the mother-infant tie] cannot be processed by the infant and as such the experience is foreclosed.

Grossmark stated that traumatized patients are imprisoned in *atemporality*; they have no past and as such cannot mourn. Trauma freezes time; we can't have a present or a future until we have a past. Scarfone calls this the Unpast; and the analytic process instantiates and constructs a past. For Grossmark, the patient's symptoms are an attempt to find an Other with whom the untranslatable can be translated, and it is the analyst's compassion that co-creates time and a past with the patient. [Winnicott wrote that it is the mother who, by her sequencing and narrative of experience, introduces time to the infant.]

Enactments are narration in action, both an untelling, and simultaneously narrating that which had remained untold and locked in repetitions. Scarfone says that repetition of the past only seems to be in the present for if it were in the present it would soon become past and thus would not return again. Grossmark instead says this unpast (neither present nor past) takes place in an atemporal present which cannot be let go. Scarfone also says that when we elaborate on our past we rewrite our subjective story. Einstein thought that, had we not invented time, then everything would happen at once. Grossmark puts it this way: “It is via this untelling/un-telling that subjectivity finds freedom to grow and most significantly, time and the past are constructed such that the patient is free to live in an ongoing present.”

Grossmark, R. (2024) *The Untelling*. *Psychoanalytic Dialogues* 34:3-19.

Winnicott, C. (1980) Fear of Breakdown: A Clinical Example. *International Journal of Psychoanalysis* 61:351-357.

Become part of the healing.

To volunteer as a clinician- psychotherapist through Veterans' Family Initiative, please call 813-908-5080.

To make a financial donation to help cover administrative costs, send your check tax-deductible contribution to:

T-BIPS; memo: VFI, and mail to: VFI, c/o TBIPS, 13919 Carrollwood Village Run, Tampa, FL, 33618- 2401

VETERANS' FAMILY INITIATIVE (VFI):



An Outreach Program of TBIPS

The mission of VFI arose from the need to help address with family members of veterans some of the difficulties with re-connecting as a family after separations and long absences, and in dealing with possible disabilities or illness of the veterans.

VFI (Veterans' Family Initiative) is one of the community outreach programs of T-BIPS (Tampa Bay Institute for Psychoanalytic Studies). This pro bono/ low fee program was established to serve family members (spouses and children) of veterans who served in Afghanistan or Iraq by offering low to no cost mental health psychotherapy services. Volunteers are licensed psychologists, mental health counselors, social workers, and psychiatrists like you from the Tampa Bay area who have volunteered their time to talk with veterans' spouses, children, couples, or family.

Volunteers provide psychotherapeutic services to family members who are interested in talking to a mental health professional and who are not already in therapy. The mental health clinician meets with a spouse, child, adolescent, couple, or family, on a weekly basis for little or no fee. All particulars are negotiated by you and the patient.

Volunteers do not work for or act on behalf of TBIPS, and TBIPS is not responsible for overseeing your work or its outcome. TBIPS' limited role is to connect potential patients with volunteers, and to coordinate and support the independent clinicians (by arranging peer consultation groups) who have so generously offered their services for the benefit of veterans' families.

As it will be helpful in the development of this program to learn what services families find most useful, VFI asks the volunteer therapist to report to VFI demographics (such as a child's age or that a spouse was seen). No names or other confidential information will be reported.

Treatment is strictly confidential, except as required by law to report elder or child abuse, domestic violence or any imminent danger to patients or others.

Mobius Strip Logo



Ehrenberg wrote that the analytic dialogue, including intersubjective experience, where transference is not separate from countertransference, requires “something like turning our experience ‘inside out’—opening ... the ‘internal boundary’ of the relationship and explicating our experience from inside. “

TBIPS chose as its logo the mobius strip (a common symbol for the interconnectedness of things and for infinity) because its inside and outside are inextricably connected. Just as the inside and outside worlds of human experience are contextualized in one another, the past always contextualized in the present, the present in the past, and foreground experience always embedded in background relationship and meaning, so, too, the analytic dialogue has no ‘inside’ and no ‘outside.’

TBIPS offers:

TRAINING Psychoanalytic courses and certificate programs offered.

DISCUSSION GROUPS for the latest literature in the field of psychoanalysis:

Relational Psychoanalysis Study Group: Relational literature, relational intersubjectivity, Object Relations, Attachment theory, Infant research, and many others discussed on the second and fourth Fridays of the month, September through June. **Self Psychological and Self-Intersubjective Psychoanalysis Study Group:** Colleagues discuss the latest articles in Self psychology and self (Systems theory) Inter- subjectivity on the first and third Fridays of every month, September through June.

SERVICE

Veterans Family Initiative (VFI): Inspired by the American Psychoanalytic Association’s SOFAR program, VFI offers pro bono or very low fee treatment to families of veterans of the Afghani and Iraqi conflicts. We have over a dozen dedicated and generous mental health clinicians around Tampa Bay from amongst our ranks who volunteer. You may volunteer, too.

THE ARTS bringing a psychoanalytic perspective to the arts and to issues of human experience.

Film Series: TBIPS proudly co-sponsored community outreach Film Series: 2008-09: *Women in Crisis*;
2009-10: *Fear of Difference: Diversity of the Holocaust Experience and 2010-2011: Developing Passions: On Sex, Relationships and Happiness* 2013-14: *Children and Trauma*
2014-15: *“The Return of the Repressed” Horror films*
2015-16: *“On Aging”*

Theater: Group outings to performances of interest, followed by dinner and discussion.

