

Crossing the Great Divide: Psychoanalysis in Colorado

Hubert H. Thomason, Jr.

Life-giving. Life-taking. Grand, generative, healing yet inert, cold and uncaring. Our mountains, the great Rocky Mountains, form the visual backdrop for our lives as we love and work. They are also the metaphor expressing our triumphs and struggles. Elemental like our drives. Complex and relational like our selves. Evocative like our memories. Psychoanalysis is alive in this place.

The story of psychoanalysis in Denver goes back almost seventy years. In 1923 the Colorado Psychopathic Hospital was built and served to attract practitioners of the day, who presumably brought with them at least snippets of the psychoanalytic theory and practice then spreading through the country. By the early 1930s, Denver's population hovered around 330,000 (it is now approaching two million), and the first bona fide psychoanalyst had arrived, the Swiss-trained John Benjamin.

The Denver Psychoanalytic Institute was founded in 1969 and accredited in 1972. Before that, candidates commuted to Chicago every other weekend for classes and supervision. The Chicago Institute was a veritable melting pot then, with candidates in attendance from Denver, Cincinnati, Chicago, and St. Louis. The disruption of personal and professional lives was balanced by the stimulation offered in that environment. The first candidate class at the Denver Institute consisted of Robert Emde, John Kelly, Paul Levine, David Metcalf, George Mizner, and Samuel Wagonfeld.

In Denver as elsewhere, the years following World War II witnessed an explosion of interest in psychoanalysis, a period of unrestrained growth fueled in part by the availability of third-party payment. Perhaps inevitably, attempts were made to control this expansion through organizational structures and a certain exclusivity. As competing theories and personalities clashed, a spirit of perfectionism set in. Psychiatric residents interested in psychoanalytic theory were of course encouraged to seek a personal analysis, and referral patterns were established to take advantage of insurance benefits that would underwrite their treatment. But few could gain entry into the Institute for training, and those who succeeded had difficulty graduating. This overzealousness and psychoanalytic nitpicking not only discouraged potential analysts but angered other mental health professionals in the Denver community, many of whom went on to achieve local prominence.

With the sudden drying up of insurance benefits for psychoanalysis, the unraveling of the old "system" created great anxiety among many mature analysts still far from retirement. It soon

became common to hear of analysts who once had full psychoanalytic practices applying for jobs with mental health centers, carrying beepers, and taking potential referral sources out to lunch. Although a psychopharmacology crash course was organized to bring analysts up to speed, local psychologists set up a competing psychoanalytic training program. In the Denver Institute, candidates organized a supervisor feedback process which attempted to identify strengths and weaknesses, as a result of which some training and supervising analysts were badly bruised. On top of all this came the increasingly raucous debate over the training of nonmedical candidates, the now-famous lawsuit brought by psychologists, the thorny issue of delinking certification from full membership in The American, and the growing managed care movement, which has made plain its contempt for psychoanalysis. The general atmosphere was nothing short of desperate. After a period of introspection, a new spirit of openness and cooperation prevailed, supplanting the bitterness of the "bad old days."

But just as the psychoanalytic house was being put in order, complications were emerging in the larger psychiatric community. Prominent psychiatrists in Denver (and elsewhere) now openly encourage colleagues to avoid mentioning psychoanalysis in the same breath with psychotherapy, fearing a contamination that may lessen the chances of third-party payment for psychotherapy in the coming national health care plan. The irony is that here in Denver the psychoanalytic community has pulled together around a common goal of providing the best possible training, supervision, and treatment. Political infighting is notably reduced, and discrimination against non-M.D.s has all but ended. Enrollment at the Denver Institute is up, a child analytic training program has been added, and analysts are volunteering selflessly of their time and energies to keep their first love alive.

Many challenges and uncertainties lie ahead for all of us. In Denver we believe our commitment to excellence will enable us to promulgate psychoanalysis as the uniquely respectful and humane treatment we know it to be. We acknowledge the pressing need to define more clearly what psychoanalysis is and is not, and for whom it is an appropriate treatment. We also know we must participate constructively in efforts



The first Broadmoor retreat, 1968: (first row, l-r) Janice Norton Kaufman, Louis B. Shapiro, Brandt Steele, Eleanor Steele; (back row, l-r) Jose Barchillon, Larry Hall, Herb Gaskill, "Gab" Blum



First graduating class, Denver Institute for Psychoanalysis, 1968: (l-r) Dave Metcalf, John Kelly, Bob Emde, George Mizner, Sam Wagonfeld, Paul Levine

to control health care costs while simultaneously insisting on an immediate end to discrimination against those who suffer from mental and emotional illness. This discrimination is a shameful feature of the current health care system.

The contributions that follow tell the Colorado story in greater detail. As you read, you will feel the energy, the enthusiasm, and the renewed hope now springing up among us. You may even begin to appreciate how, for us, the enduring power of our majestic mountains inspires us in these difficult times of change.

TAP

Tales of the Old West: The Early Days in Denver

Laurence B. Hall

In 1938, institutes approved by The American existed only in Boston, New York, Baltimore, Washington, and Chicago. When John Benjamin and his wife Hertha moved to a small ranch some twenty miles west of Denver, it was for a reason that brought other distinguished Coloradans to the area: tuberculosis. John had pursued his medical training in Switzerland, but the disease interrupted his studies and he was required to undergo many months of the "balcony treatment."

Benjamin did not open a practice but instead worked the ranch. Only later did he become affiliated with the University of Colorado Medical School. His first association there was with the Department of Pediatrics, where Alfred Washburn was involved with long-term developmental follow-up studies of children. Only later, particularly with the arrival of Herb Gaskill in 1953, did Benjamin become more actively involved in the Department of Psychiatry. Later he became the third president of the Denver Society.

By the end of the 1940s there were still only eleven institutes credentialed by The American, seven of them in the Northeast corridor and one each in Chicago, Topeka, Los Angeles, and San Francisco. Psychoanalysis seemed to be developing in the biggest cities, where the intellectual ferment and medical schools provided a natural lodging place for psychoanalysts fleeing Europe. Even Topeka, which owed so much to the brilliance and dedication of the Menningers, traced its lineage to Chicago.

By the end of the war Denver, "Queen City of the Plains," with a population of less than 350,000, would have seemed a long way from becoming a center of psychoanalysis. Servicemen who had been stationed there saw an attractive city with easy access to the Rockies and resolved to give it a closer look. Nonetheless, it was still a frontier town, probably more famous for its stock show than for its medical school.

It is perhaps a little surprising, then, that the Department of Psychiatry should have attracted the national attention it did. However, psychiatry was taught in all four years of the medical school curriculum, and an energetic liaison program linked psychiatry to the other services. Post-graduate training in psychiatry was deemed good enough to receive funding from the Commonwealth Foundation, which provided stipends for such Fellows in Psychiatry as John Romano, Jack Ewald, Henry Brosin, and Bob Felix. Colorado Psychopathic Hospital had been established on the medical school campus for the study and treatment of patients with mental illness and for clinical teaching.

All of this was presided over by Franklin Ebaugh, who had trained at Johns Hopkins in the

"psychobiology" of Adolf Meyer. Although outpatient treatment of mental patients had not yet been established in the mid-forties, Sam Kennison, who attended the medical school in those days, recalls hearing references to psychotherapy from Ebaugh, the principal ingredients of which were explanation and reassurance.

Another token of Ebaugh's willingness to go along with the new fad, about which he was always ambivalent, was his invitation to Elizabeth Goldner to join the department and provide analysis for some of the residents. Goldner, a European analyzed in Switzerland, had immigrated with her husband to Chicago, where she studied at the Institute. She worked in Denver for two or three years during the forties and analyzed some members of Ebaugh's staff. Later she and her husband moved to New York, where she became a training analyst at the New York Institute.

Jules Coleman represented the new wave of psychiatrists whose early exposure to Freud as undergraduates was augmented by psychiatric military experience and the teaching of a psychoanalytically oriented psychiatry. While stationed in Atlanta during the war, Coleman was exposed to the teaching of Moe Kaufman, an experience which led him eventually to the New York Institute, where he received the bulk of his training. He then went on to the University of Colorado Medical Center to complete his clinical work in the years 1946-1950. There he analyzed two patients, taking the train twice a month to Topeka to trade a day's work at the Winter General Hospital, teaching in the Menninger program, in exchange for supervision.

Despite Ebaugh's contributions to the psychiatric curriculum, there was still no move to establish outpatient programs. Happily, Coleman recalls, Ebaugh "let us do anything we wanted," so an all-purpose psychiatric clinic was soon set up for treating both children and adults. This was the first step toward the nationwide establishment of outpatient psychiatric clinics for children—clinics where new ideas about development and psychopathology could be directed to the most common emotional problems of children and adolescents. These ideas found their way also into medical school teaching, and Coleman was able to develop a course for medical students in which the child's normal psychological development was correlated with the most frequently seen clinical conditions. New therapeutic



Elizabeth Goldner

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The Chicago Shuttle

From the late 1950s to the early 1970s, aspiring psychoanalysts from the Denver area who wanted analytic training, but wished neither to move nor simply to wait for the launching of the Denver Institute, had the option of commuting to Chicago for training. About ten local psychiatrists and two psychologists availed themselves of the option. The program at the Chicago Institute was set up to accommodate commuting candidates from Cincinnati and St. Louis, as well as Denver. It was a five-year curriculum, and courses met Fridays and Saturdays every other week, eighteen times yearly, for a total of ninety commuter trips for a five-year graduate. For those who did not graduate in five years, the commuting continued on a less frequent basis until graduation. As might be expected, the candidates became as skilled and adept as travelers as they did as analysts. In fact, it was not at all unusual for a candidate, somewhere about the third or fourth year of training, to receive a small but elegant plaque from United Airlines proclaiming him or her a proud member of the 100,000 Mile Club.

Some case supervision was done in Chicago, but some could also be arranged in Denver, where several analysts had been granted training and supervising analyst status at Chicago on a Geographic Rule basis. Thus, it was not only candidates, but faculty as well, who were plying the air lanes between Denver and Chicago in those years—candidates for the psychoanalytic education, faculty to gain experience in teaching and institute administration, and to qualify as training and supervising analysts.

The last commuter class began training in 1967 and graduated in 1972. Since the Denver Institute began functioning as a provisional institute in 1969, this last group of commuters was used to "test market" certain courses being prepared for use in Denver; the group served also as case presenters to the early clinical conferences as the Denver Institute began its program. When these last commuting candidates graduated from Chicago, a fairly easy and informal transition to junior faculty status was accomplished, perhaps facilitated by these earlier experiences as collaborators.

Jacob G. Jacobson

René Spitz in the Mile-High City

Robert N. Emde

René Spitz came to Denver in 1956 and except for a five-year stint in Geneva during the mid-sixties, spent his remaining years here. Born in Vienna in 1887, he died in Denver in 1974. After a long career spent analyzing, teaching, and doing research, he had come to Denver, so he told us, to "retire" (we often joked about that) and to help Herb Gaskill and others found a psychoanalytic institute in the mountainous west. René was an expressive and passionate man, dedicated to psychoanalysis. His curiosity was so far-reaching that many of us had the impression that in his later years he metabolized new ideas even more enthusiastically than food—and his epicurean pleasures were legendary. Reflecting on René's contributions, I am struck with the extent to which his attitudes and ways were internalized by those of us for whom he was a special mentor. These intangibles, so internalized, became values for our early psychoanalytic community.

As a psychoanalytic mentor, René showed an enthusiasm for psychoanalytic work, especially in integrating new ideas, that was pervasive. No one who was present will ever forget René during Society meetings or psychiatric grand rounds, sitting up front with the latest recording device or camera, capturing words and slides for later study. When the Denver Institute began classes, I was fortunate to be in the first cohort of trainees to attend his seminars. He spoke of the identity that formed the backdrop for his clinical decision making: "First, I am a human being; second, I am a doctor; third, I am a psychiatrist; fourth, I am a psychoanalyst." While he was disciplined about technique and acknowledged the importance of maintaining the analytic situation, it may surprise readers to know that he was not an archaeologist, reconstructing the past, but rather a practical analyst who believed in maximizing the analyst's activity. The function of a good interpretation, he taught, "was to guide a patient to the next step."

In his published work on transference and countertransference, he emphasized developmental principles in the psychoanalytic situation that had their roots in mother-child interactions. But for Spitz, discussions of early development in analytic process had to do not so much with a reconstructed past as with early modes of functioning. He emphasized the element of dialogue in the analytic relationship, and its intrapsychic reverberations. Spitz's notion of the "diatrophic attitude" was analogous to healthy early caregiving, when exercised by the analyst, the attitude was conducive to the formation of a working alliance. Spitz's seminars often put explicit emphasis on the processes of precise interpretation, but always in the background was the importance of the analyst's emotional communication and use of empathy.

René was purportedly the first didactic analyst of Freud. His personal analysis took

place in 1910–1911. He told us that he announced to Freud, after Ferenczi had introduced him, that "if analysis works so well on neurotics, why should it not be even more valuable for a normal person like I am?" He provided a vivid historical link to those early days in Vienna and frequently offered vignettes illustrating Freud's curiosity, humane way of working, and profound dedication.

René Spitz as research mentor was no less expressive. In the two years before he left for his interlude in Geneva, I had the great fortune to have him as research supervisor for our nursery observations. Following his return from Geneva and throughout his remaining five years, René was an active participant in our newly formed Developmental Psychobiology Research Group, showing himself an eager student of new ideas in neurobiology, pediatrics, animal behavior, child development, and psychopathology. He continually reformulated his ideas, taking new knowledge into account, and often provided dramatic discussions in our seminars. He often quoted his friend of later life, Konrad Lorenz, saying that "any scientist worth his salt should discard a favorite hypothesis before breakfast." He talked a lot about his ideas concerning affective commu-

nication and developmental transitions, and spoke often of his enthusiasm for observing development and participating in "new beginnings."

It is remarkable that when he first began observing infants and mothers and publishing his research, René was already in his late forties. His career showed the extent to which research and development are possible at mid-life and even later. A notable instance comes to mind in which Spitz took a creative turn that was to prove pivotal. He revised his idea that psychological development is an uninterrupted process, and this revision led him to his major theory concerning transformations in development. Set forth in *A Genetic Field Theory of Ego Formation* in 1959, this theory became the basis of my laboratory's research program for a decade. In his final days he told me how he wanted his "last words" to be remembered. It seems fitting to mention them here: "Survival, adaptation, evolution." TAP



René Spitz

Denver's Viennese Connection

Earlene Dal Pozzo

By the time Gretl Hitchman was born in Vienna in 1914, her father, Eduard Hitschmann (the name was later anglicized), had already become a productive contributor to the young field of psychoanalysis. She remembers from early childhood the gradual transformation of her father's consulting rooms—in the Old World tradition, they adjoined the family residence—from those of a successful internist to those of a pioneering psychoanalyst. A couch and Persian rugs appeared. The lights were dimmed and the doors closed, lending an air of secrecy and exclusion. Her father's meetings and social occasions brought her near those central to this new science. When Gretl Hitchman describes Freud's kindness, Ferenczi's loud voice and laughter that carried through the house, Richard Sterba's friendliness when he arrived for his analytic hour, or the special table settings for entertaining the Hartmanns, it is with a richness of detail that brings the era alive.

In 1932 at the age of 18, Gretl entered medical school at the University of Vienna, where her father's work was met with skepticism and at times ridicule. Six years later, the Anschluss brought her studies to an abrupt halt. On March

13, 1938, Gretl left her post as a psychiatrist-in-training at the psychiatric clinic of the University of Vienna Hospital, made her way home through fighting in the streets, and informed her parents that she was leaving for England with the intention of immigrating to the United States. Later that day she boarded a train for Basel, alone, and at the age of 23 left Vienna. Gretl Hitchman arrived in New York City in November of that year. There she completed her psychiatric residency and received psychoanalytic training at the New York Institute, with special emphasis in child analysis. In 1941 she married fellow analyst Sydney Margolin. In 1955 they moved their young family to Denver, where she became affiliated with the University of Colorado Medical School and the Division of Child Psychiatry, from which she ventured enthusiastically into the community and the schools to meet the children where they were. Often these children were the disadvantaged ones who might otherwise never have dreamed of receiving her help, as she kept alive in the shadow of the Rockies the pioneering, humanitarian legacy of those early days in Vienna.

TAP

Three Perspectives on Denver's Dark Ages

A Senior Analyst: I. Gene Schwarz

I first came to Denver in 1970. About six months before I actually moved, I began to receive phone calls from people interested in starting analysis. It seemed there were not enough analysts to go around in Colorado, and indeed there was a surplus of patients just waiting to get started. When I arrived in June, my practice was full. It was simply a matter of meeting those who had contacted me and deciding whether analysis was the treatment of choice, and whether there was a good match between us.

It seemed analysis was in its heyday, and all the senior analysts had full schedules. The mental health professionals who sought analysis felt that to be an analyst was the pinnacle of success. Psychoanalysts had a great deal of prestige, occupied key positions in the Department of Psychiatry, and were considered the best trained and most qualified clinicians. It was an exciting time in the Denver Institute, where everyone talked, breathed, and lived psychoanalysis.

Eventually, though, things began to change. While I became very fond of individuals in our group, I became increasingly uncomfortable with some of the things I was hearing and found myself a part of. Unfortunately, I remained silent far too long. I remember Selection Committee meetings in which remarks like "he will be just an able-bodied seaman," or "an average or slightly below average analyst," were made. This of course implied that we were all superior and above average. I felt increasingly alienated from this kind of arrogance, while at the same time I was becoming

more attached to individual analysts who were my close friends. I can remember Selection Committee meetings where the criteria used to evaluate an applicant were so unrealistic that I thought I would never have been accepted at this institute. Rifts and divisiveness also began to emerge among the faculty, and these were often displaced onto candidates. I can remember arguments over whether oedipal or preoedipal material was more important. In retrospect, though, I think these theoretical disagreements were manifestations of the personality quirks, and sometimes the outright "craziness," of some of our faculty members, and had rather little to do with the theory and practice of psychoanalysis.

Eventually we came to be seen, accurately I am sorry to say, as a group of narcissists often dismissed with the quip, "No one is good enough to get in or get out." All this came to a head in the late 1970s and early 1980s. We seemed suddenly to be faced with no applicants and no new graduates, and I think that some of us began to realize that we were witnessing the demise of the Institute. The younger members of the faculty began to speak up, and several senior members began to catch on. I well remember Herb Gaskill's comments at one faculty meeting. That perhaps was the turning point, enabling us to take a hard look at how we were behaving.

We began at that point to try to turn things around and undo the reputation we had earned, but by then psychologists had formed a new institute in Denver and the economics of psychiatric care delivery started to hit home. As analytic

practices dwindled, few analysts could boast the waiting lists we had once been accustomed to.

The psychologists' lawsuit against The American hastened changes in admissions requirements, and soon we were accepting nonmedical candidates in greater numbers. I was pleased that Denver took a leading role in this, both by endorsing the change and by the fact that Herb Gaskill's advisory committee to Board and Council had offered a viable proposal effecting it. Our institute also started to reach out to the local community, however belatedly, and found to our relief that it was not *too* late. Today we offer the best training in Denver, both for those who want to become analysts and—a new program—for those who want to improve their skills in psychotherapy. The two programs, psychoanalytic training and psychotherapy training, complement each other well, and allow us a responsiveness to the needs of mental health professionals in the community, so necessary if we are to remain viable.

A 1981 Graduate: Mary Ann Levy

In September 1975, having undergone the ritualized "double interview" (once for acceptance, then again two years later for readiness to matriculate), I began my analytic training at the Denver Institute. My class consisted of four eager and competent psychiatrists with many years of clinical and teaching experience behind them. Our initial enthusiasm for classes was quickly dampened, however, by rumors that people, for reasons that were unclear, were not graduating and that talented friends and colleagues were being rejected

Psychoanalysis in a Small City

I had completed most of my analytic training in San Francisco by 1979, but was having difficulty finding control cases. Dismayed by a survey indicating that Bay Area graduate analysts were seeing, on average, fewer than two cases, but determined nonetheless to practice psychoanalysis, I decided to move to Colorado Springs.

I had friends there, and its proximity to Denver allowed me to complete my training at the Denver Institute. No one was then practicing analysis in Colorado Springs, or ever had, so far as I could determine. Its reputation as a military center with conservative social and political views was daunting. Yet its population of a quarter million included substantial groups of educated, prosperous individuals and several small college communities. The low cost of living, with little pressure on patients to "keep up with the Joneses," made analytic fees more affordable. Unlike the situation in San Francisco, where sophisticated people felt they knew all about psychoanalysis and often rejected it out of hand, in this small city I could

work where the community's view of my profession would derive more from the work I did.

I have now practiced in Colorado Springs for thirteen years. Though I miss San Francisco, especially in the thin cultural climate here, I have not regretted the move. I have been able, as was my wish, to practice psychoanalysis and have gained valuable analytic experience. Three other local therapists have now sought analytic training and are beginning to practice here.

My affiliation with the Denver Institute has been essential, but it was clearly important to have had a well-developed local identity as a psychoanalyst while building a practice outside of an analytic center. My practice has grown as a result of confidently engaging a handful of therapists and analysts despite the community's overall disinterest in psychoanalysis, a disinterest based more on benign ignorance than is San Francisco's seemingly sophisticated dismissal. Still, it took three years to find my fourth control case.

I have been much more active in teaching,

writing, and planning programs than I had been in San Francisco, in part perhaps to consolidate an analytic identity. For me, as for my analysts, there are fewer cultural and social stimuli here to distract from the pursuit of analysis, and there has been ample time for recreation and writing.

I had once worried that my professional anonymity would be more difficult to maintain in a city of this size, but I have encountered fewer problems than existed in San Francisco. Here a "live and let live" attitude offers little support but ample independence.

That attitude will now be tested, as Colorado Springs has been billed recently as the "evangelical capital of the United States," with over fifty right wing religious groups migrating here from Southern California. Small cities like this are much more vulnerable to marked social changes than are larger metropolitan areas. It remains to be seen how this development will affect the climate for psychoanalysis.

Gerald S. Stein

for training. We became increasingly aware of a subtle attitude of blame that crept into the supervision whenever our cases were going badly. We were made to feel that we were mishandling the analyses and were told directly that "countertransference problems" were causing our difficulty. Never did it seem that the case might be inappropriate for analysis or that some modification of technique might be necessary.

I had a powerful experience with my first case, a woman who presented a history of multiple early trauma—including a clitorectomy "for excessive masturbation"—which led me to realize that a traditional Freudian analysis and precise interpretation of conflict did not seem to be helping her. As I struggled to find what *was* helpful, I discovered that my experience as a child psychiatrist and mother was most useful in understanding my patient's developmental dilemmas. But when I chose to help this patient regulate her disturbing affect instead of providing a correct interpretation, which in any case would not penetrate her narcissistic defenses, I was told to stop behaving "like a social worker."

Correct interpretation was exalted above all other analytic tools as "the cause of meaningful change." All of my patients seemed to have suffered significant early parental loss, trauma, or abusive or narcissistic injury, which rendered such a simplistic notion relatively useless. I found much of my analytic work focusing on developing a treatment alliance, trying to understand how these early traumas impaired my patients' ability to trust or work with me, and conveying to them how their lives were currently affected by these issues. Some of my teachers and supervisors were supportive of my work, but often I felt that I was not *really* doing analysis, even though my four cases showed growth and change and went on to successful termination.

As some of my classmates began to have problems with cases, one by one they began to disappear from the program. Over the course of six years as a candidate, I joined many advanced classes only to experience once again the surprising and unexplained disappearance of fellow students. Hushed whispers after the fact suggested that candidates had been asked to leave. At times it felt as though I were in a surrealistic movie where people vanished and it was "poor form" to ask why. The implied fantasy that traditional psychoanalysis could help all patients, with no adaptation to specific developmental needs or ego distortions, set an impossible and unrealistic standard for us as candidates.

The faculty itself represented another major obstacle to learning. One teacher was known to call candidates "idiots" whenever they voiced dissent. Another was frequently aggressive and personally attacking. Still another was noticeably confused. Having a faculty that was at times attacking, intrusive, or oblivious was difficult. What was absolutely confounding and disastrous was that a conspiracy of silence, an epidemic of denial, and a cult of elder worship had set in.

There was no acknowledgment by the faculty of these lapses, and no willingness to confront the perpetrators. Teachers seemed oblivious to the possibility that such dysfunctional behavior might have an impact on candidates. As a result, the anxiety level in the classroom often ran high, despite the presence of empathic teachers and supervisors who in individual situations seemed supportive.

It was with great relief, then, that in 1981 I found myself able to graduate. Still, I was aware of an ambivalent response in myself to having completed my training. I was angry that the training had seemed unnecessarily painful and that my enthusiasm had dwindled greatly. Out of my original class, only two of us completed training. Other classes showed an even greater "disappearance" rate, a later class graduating only one of six original candidates.

In 1982, when I attended my first faculty retreat at the Broadmoor Hotel in Colorado

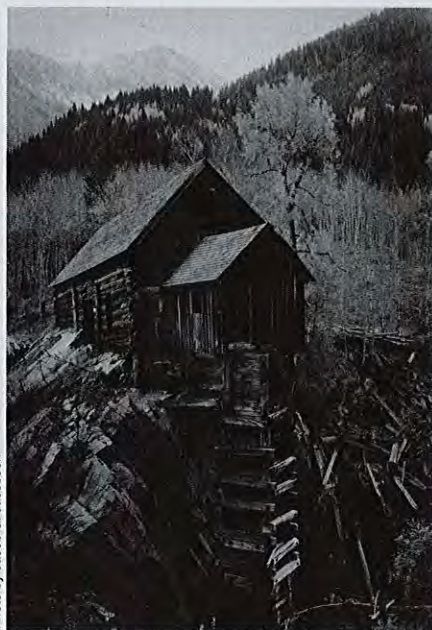


Photo by Jacob G. Jacobson

Dead Horse Mill, Marble, Colorado

Springs, I realized I had grave doubts about joining this group. As attention focused on once again polishing already brilliant classes, several of us spoke up about problems in the Institute that were being ignored. I shared my sense that while many of my teachers and supervisors were warm and caring people individually, as a group they seemed insensitive, perfectionistic, and cruel, creating an illusion that only the most talented could become analysts. At that point, a significant shift occurred in the discussion. Many were able to talk about personal doubts concerning the atmosphere at the Institute and what it conveyed to candidates. During this retreat and at succeeding ones, the faculty was able to look at these unrealistic standards and appreciate why the reputation of the Denver Institute had become tarnished in a community that was critical of elitism and that had seen many of its psychi-

atric leaders treated badly. Soon changes began to occur, including a painful look at the supervisory process that to many had been so hurtful.

Eventually, a collegial sharing of ideas with talented candidates became the standard for supervision. It may be asked why the Denver Institute had to experience such a difficult period. Perhaps the deepening of our understanding of narcissistic and self issues, and of how severe trauma alters personality development, has helped all of us to appreciate the importance of a positive and supportive learning environment.

A 1992 Graduate: David Stevens

I had the good fortune to train at the Denver Institute at a time when it was well into the process of reinventing itself. I began my training in 1988 as a member of a candidate class that was one of the first to reflect the new demographics ushered in by the Gaskill amendment. We were three: a child psychiatrist, a clinical nurse specialist, and myself, a psychologist. As an applicant, I had been aware that the Institute was in the midst of a significant change in character. Apparently, a perfectionistic set of attitudes toward theory, technique, and training was rapidly yielding to a new ethic of open-mindedness.

I was initially fearful that behind the new open-mindedness might lurk a veiled resentment at having felt forced by the Division 39 lawsuit to open training to nonmedical candidates. Yet, hard as I looked, I could detect not a single instance of resentment, elitism, or narrow-mindedness. Instead, a genuinely welcoming and accepting attitude prevailed, greatly enriching the training experience. We felt free to be ourselves.

This positive learning environment, however, may have been purchased at a cost. First, at its extreme the ethic of open-mindedness seemed to translate into a subtle group prohibition against clarifying the ways in which we might disagree with one another. At times, I think, we chose to maintain a warm sense of group consensus when vigorous debate or clear disagreement might have done more to help us formulate our thoughts.

There were also some complications associated with being taught by teachers and supervisors who had experienced tyranny in the name of Freud. It seemed difficult to get anything but a perfunctory nod in his direction. Freud seemed so identified with the "period of oppression" that it was difficult to discuss him with the open-mindedness and respect accorded other authors.

Finally, I have wondered if being trained by teachers who felt tyrannized in their own training may have complicated for their students the amorphous process of consolidating an analytic identity. Many recent graduates seem to be struggling to establish a healthy sense of themselves as psychoanalysts, one not built on the toxic foundation of elitism. Could part of our problem be that we have had as role models teachers and supervisors who, as a necessary part of their own liberation, needed strongly to disidentify with those who had taught them?

TAP

Denver Society, Like the Mountains, Goes Up, Down, and Up Again

Gary C. Martin

The Denver Psychoanalytic Society, established in 1962, has a rich history. Over the years, membership has grown as analysts relocated here and as the Denver Institute began to produce graduates in 1974. The reputation of psychoanalysis as a treatment modality grew within the University of Colorado Department of Psychiatry under the leadership of the recently deceased Herbert S. Gaskill, and was reflected in a high level of interest within the general mental health community. Scientific programs and Extension Division courses offered by the Society were routinely well attended.

However, during the 1970s and early 1980s an unrecognized tendency toward elitism and perfectionistic training expectations, coupled with an inattentiveness to the conflicts they engendered in many analyses and training analyses, served to dampen this enthusiasm. Disaffection among former patients, rejected applicants for training, and even some graduates peaked at a most inopportune time, just as an economic downturn hit Denver in the late eighties and managed care began to reduce the mental health benefits available through insurance programs. This combination of factors significantly decreased the local interest in psychoanalytic treatment, meetings, and training.

Not surprisingly, Herb Gaskill and other senior analysts, listening to the complaints of trainees and former patients, diagnosed the problem and actively set about to correct it. The situation was not peculiar to Denver, or even to psychoanalysis. Mid-course corrections are perhaps inevitable for every growing institution. Recovering from the experience, however, has required the thoughtful



Long's Peak from north, Rocky Mountain National Park, Colorado, 1942. Photo by Ansel Adams.

and patient expenditure of considerable energy by our membership. In addition to expanding the repertoire of psychoanalytic technique, we have repaired old bridges and built new ones by working collaboratively with other disciplines and cosponsoring programs with other professional societies. The Denver Society now cosponsors two training programs with the Denver Institute for Psychoanalysis—the Advanced Psychotherapy Seminars and the Psychodynamic Psychotherapies Program. Members of the Society, under the direction of the Extension Division, teach courses on topics of interest to mental health practitioners and others, and new courses are being developed on Counseling Skills for the Family Practitioner, Management of Aggression in the Practice of Law, and the Application of Psychoanalytic Principles to Play Therapy.

We have learned the hard way that good offerings go nowhere without proper communica-

tion. We have therefore upgraded our newsletter and made it available to as many interested parties as possible. Along with the usual reports of scientific meetings, we present feature interviews with well-known psychoanalysts, reports on other meetings of interest, and book reviews. (TAP readers interested in being on the mailing list are encouraged to contact the Society office for a subscription.) Efforts such as these require considerable work by talented and committed individuals with good interpersonal skills.

In an effort to infuse the Society with new ideas and enthusiasm, we have reorganized our membership structure to increase and enrich our ranks. Although active membership is restricted to graduates of institutes approved by The American, associate membership will soon be available to graduates of other formal analytic training programs. Practitioners with some analytic training, or who consider themselves analytically informed, will be eligible to become special members, while candidates in any formally organized analytic training program can join as affiliate members.

We feel we are beginning to emerge, humbler and wiser, from a painful but growth-promoting experience. Increased public interest in the importance of childhood developmental experiences, particularly as they relate to trauma, is helping in this rebuilding process. The recent formation of another psychoanalytic training center and society here in Denver, under the auspices of Section 39 of the American Psychological Association, has helped revive the local enthusiasm for psychoanalysis. We feel the competition between the two facilities is a healthy incentive for both.

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Tales of Old West

(Continued from page 2)

approaches were also presented. Cotter Hirschberg, who later became a training analyst at Topeka and helped to develop the child analytic program there, worked closely with Coleman in these tasks. Extension programs, both educational and clinical, were carried on in connection with the National Jewish Hospital a few blocks away, and at Fitzsimons Army Hospital a few miles further off. In addition, the provision of diagnostic and consultative services to the Denver public school system opened up increased opportunities for the supervised teaching of psychiatric residents, psychologists, and social workers.

By the late 1940s, Colorado was beginning to join other parts of the country in establishing the American Association of Psychiatric Clinics for Children, of which Coleman became the second

president. The organization quickly became a standard-setter in child psychiatry, in both practice and training. In 1950 Coleman left Denver for New Haven, just as Jule Eisenbud, another graduate of the New York Institute, decided to move west. Eisenbud had received an invitation from Ebaugh to join the staff and analyze residents, but chose instead to establish a private analytic practice. He did join the clinical faculty, however, and for many years conducted a weekly case conference.

Eisenbud recalls that most of his early analytic patients were physicians. Although there was a great deal of general interest in psychoanalysis in Denver at the time, he notes that there were two competing attitudes, not entirely dissimilar except in their estimation of the new therapy's value: some tended to see it as a quick, magical solution, whereas others dismissed it as mystical nonsense. Also in the late forties, Alan Hurst, father of David

Hurst, currently director of the Denver Institute and secretary of The American, moved to Denver to become Medical Director of the National Jewish Hospital, where he worked closely with both Coleman and Benjamin. Hurst credits his own early association with Eisenbud as an important factor in his development.

Another figure from that period is Arnold Eisendorfer, who was born in Denver and attended the University of Colorado School of Medicine. During his psychiatric studies there, he became acquainted with psychoanalysis and was advised that he should go east to be analyzed, which he did, eventually becoming a distinguished member of the New York Society and Institute. In addition to Eisendorfer, Coleman, and Eisenbud, New York had other ties to Colorado. Mary O'Neil Hawkins was born in Denver, and Bernard Pacella attended the University of Colorado Medical School.

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At the Denver Institute, Innovation Turns Things Around

David M. Hurst

For three years we had failed to start a class. Morale was dragging. Faculty had to pay dues to keep the Institute open and staffed. Then the Curriculum Committee, sparked by some members who were recent graduates, had an idea: if people would not commit to a full course of analytic training, maybe they would to a two-year program in psychotherapy. This program would differ from the Advanced Psychotherapy Seminars already offered by the Society in that it would (1) offer students advanced standing should they decide to apply for full analytic training; (2) place them in the same theory, development, and psychopathology courses as analytic candidates, thus acknowledging the importance of a psychotherapist's understanding of these subjects; (3) require only fifty hours of psychotherapy supervision and not require an individual psychoanalysis, thus markedly diminishing the initial cost of training; (4) provide an advisor for each student, in the hope that a mentoring relationship might develop; and (5) present a Certificate of Completion at graduation and involve graduates in an ongoing way in the Denver Society.

We sent out announcements and very soon had to close the class at nine. The reason? In addition to our nine psychotherapy students, we were approached by a number of fine applicants for full analytic training, leading to the acceptance of twelve candidates—a social worker subsequently waived by CNMCT, five doctors of psychology, and six psychiatrists. Accustomed as we were to starting a class of three or four every year, at least before the three-year drought, a class of twenty-one seemed a veritable flood. We

were excited, because we knew most of these candidates well. They were as fine a group as we could imagine, and frankly, though it was hard to explain this renaissance, we dared not ask too many questions about it. Our renewed vitality, the applicants' sense that we were enthusiastic about training them, and our exciting child analysis program all probably played a role; at least some of these people seemed influenced in their decision to apply by the quality of others being accepted.

Lacking sufficient faculty to divide the group, we were committed to experimenting with mixed classes, theory and development being taught as large lecture courses. Faculty unaccustomed to giving lectures had to prepare differently, and it was hard work. In the end, students and faculty agreed it had been a successful year, though the debate over mixing psychotherapy and psychoanalytic candidates continues.

Early in that experimental year (1992–1993) we decided not to start a new class the following year. Instead we would concentrate our energies on offering the best we could to the large class already enrolled. After extensive consultation with all parties, we have made changes and adjustments, including more time during which candidates and psychotherapy students are taught in separate classes. This seemed a necessary step as their educational goals became increasingly differentiated, and as they developed separate group processes. Some of the psychotherapy students have begun to express the wish to go on to full analytic training after next year; others are asking to continue their studies with us in some other form.

Not everyone at the Institute agrees with all the changes, but we are proud that dissenters feel

increasingly able to speak out and that their ideas are welcomed and respected.

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Memories of the Institute

The atmosphere was heady. I can still recall the enthusiasm of those early days. We were a tight little group, and the first class of candidates were waiting for us to get together so they could begin their classes. All of them were fairly advanced in years and in experience; I don't imagine there will be a first class like that ever again. I had been happy to come to Denver, where things seemed free and uncomplicated. Although in time we had our own problems, in the early days no difficulty seemed insurmountable and no way of going at things seemed improbable on the face of it. The meetings of our little curriculum committee on Saturdays, going up to ski at Loveland or some such place, were full of ideas about how to make things better. My memory may falsify things in the glow of reminiscence, but I don't remember any political discussions of how to manage so-and-so or keep so-and-so from getting out of hand or how to keep the bad guys from taking over. I don't think there were any bad guys in the early days. As I recall, the version of psychoanalysis that we taught had a strong developmental cast, and that leaning may have been taken from Spitz.

A spirit of openness also characterized the way we went about appointing training analysts. We wanted to avoid the mysterious "tapping" process, and so the Appointments Committee, of which I was a member for a while, reviewed everyone who might be eligible. We thought of it not just as an honor, or a jump in status, but as work that had to be done. I think the committee did its work very well, inquiring of people what they wanted to do and then taking on the delicate task of inquiring into their intentions, how they felt about what they were doing, and what they felt we ought to be doing next. I recall Joan Fleming meeting with us and saying she probably shouldn't take any more training cases but would like to continue doing supervision. In this way we handled, on a very individual basis, what other institutes either do not handle at all or mishandle simply by having inappropriately uniform policies.

Herbert Schlesinger

A Difficult Birth for Child Analysis

The path leading to child analysis at the Denver Institute has been both interesting and tortuous. Although the faculty included, from early on, great figures in child development and research, such as René Spitz and John Benjamin, and two distinguished child analysts, Gaston E. Blum and Dane G. Prugh, the Institute did not develop a child analytic program for almost twenty years. Local conditions included opposition to child analysis on "scientific grounds" and the personal prejudices of various senior administrators. As a result, attempts over many years to attract child analysts from other centers met with little success. Finally, the stalemate was broken by two developments. First was the prodding of *The American*; Denver was one of only two or three institutes without a child program. It was clear that an important area of analytic data and research was being ignored. Second, Denver was beginning to experience the decline in applicants that had already been felt nationwide. The demand for child analytic training was seen as a way to attract a new group of people dedicated to psychoanalysis.

Under the leadership of Jacob G. Jacobson and especially Gene Schwarz, local and national requirements for the program were met. Sam Wagonfeld became the resident child analyst, having completed his training after several years of biweekly trips to San Francisco. He was also named director of the fledgling program. Visiting faculty included Roy Aruffo from Houston and Phyllis and Robert Tyson from San Diego. All gave generously of their time and energy. In 1988, the first class was started. In near record time three child candidates were graduated, with many more to come, thereby ensuring the program's self-sufficiency as it develops its own child faculty.

Samuel Wagonfeld

A Tribute to Herb Gaskill

Richard C. Simons

On May 10, 1993, Herbert S. Gaskill died at the age of 84. He chaired the Department of Psychiatry at the University of Colorado School of Medicine from 1953 to 1973, was vice-president of the American Psychiatric Association from 1970 to 1971, was director of the Denver Institute for Psychoanalysis from 1972 to 1975 and again from 1981 to 1984, and was president of The American from 1976 to 1977. But the man who held these impressive public positions was an intensely private person whose bedrock honesty, integrity, and genuine humility were an inspiration to everyone who ever knew him. I had that privilege, especially from 1981 to 1984, when I served as his associate director at the Denver Institute. As chair of the Department of Psychiatry, he had poured his energies and resources into establishing the Institute. Then, at the age of 72, he accepted a second term as director to lead us out of an organizational impasse created by an illusory search for perfection in our candidates, coupled with an equally relentless denial of our own imperfections as a faculty. Herb's favorite quotation was from Voltaire: "The best is the enemy of the good." Aim for the best or the perfect in the future, and you disregard the good in the present.

You also discard the humility necessary to grow and learn from your students, your patients, and your colleagues. How many institute directors have attended a class not as a co-teacher, but as a student? How many supervising analysts have welcomed an evaluation from their supervisees, even when that feedback was at times critical and painful? How many training analysts are still open to new technical approaches and new theoretical concepts at the age of 84? How many legendary leaders of American medicine and psychiatry have had the vision to recognize the importance of providing analytic training within The American to qualified nonmedical mental health clinicians?

By the end of his long life, Herb Gaskill had achieved wisdom—not easily, not quickly, not through dazzling precocity or virtuosity, but slowly, painfully, and at times despairingly. Aeschylus captured the process in these profound words: "In our sleep, pain that cannot forget falls drop by drop upon the heart. And in our despair—against our will—comes wisdom—through the awful grace of God." What Herb Gaskill taught all of us is that this is probably the only way that wisdom can ever be attained—through grief and heartache and loss—especially the loss of our idealizations and our illusions of perfectibility.

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May 14, 1994

The Boston Psychoanalytic Society and Institute is pleased to announce a Symposium

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