Syllabus for PYC7120-A
Advanced Seminar: Evidence-Based Psychoanalytic Practice
Spring Term 2017 (1/9/17 – 5/1/17) for Monday classes
Course meets Monday 8:45-11:30

Course Description from AUNE Catalogue
This course explores psychoanalytic social and clinical conceptualization and action from the perspective of the department’s definition of evidence-based practice. The course begins with an overview of how evidence is constituted both consciously as well as unconsciously (social/political/historical/epistemological/ontological/personal) and, most importantly, how evidence is used. The class places at its center of interest psychoanalytic practice as social, biological, personal action; while holding particular factors as both consciously as well as unconsciously foundational: genetics, drives, power, culture, history, race, gender, sexuality, ethnicity, fantasy, and geographic location. The course topics include: clinical process, race and ethnicity, culture, countertransference, self and intersubjective psychology, infant research, cognitive neuroscience, love, mentalization, gender, aggression/anger/hate/rage, sex and erotic clinical experience, addictions, attachment, termination, endings and death.

Additional Course Information
From the Handbook, with additions in bold: We define Evidence-Based Psychoanalytic Practice (EBP) as an evidence-informed process of decision-making for the purpose of promoting the mental and social health of individuals and communities. The EBPP process integrates the best available local evidence and empirical research and scholarship, with practitioners’ skills and expertise and the cultural and economic conditions, needs, values, and preferences of clients who are served and affected (Council of Training in Evidence-Based Behavioral Practice, 2008). There are multiple types of evidence that support decision-making in psychoanalytic practice: clinical observation and practice based evidence, qualitative research, systematic case studies, single-case designs, epidemiological and ethnographic research, process-outcome studies, randomized clinical trials, studies of interventions as they are delivered in naturalistic settings (effectiveness research), basic psychological and health science, and meta-analyses.
(APA, 2006). Experimental studies are read critically with regard to treatment contexts and settings, the constitution of experimental and control groups, methodology, threats to validity, and effect sizes (Wampold & Bhati, 2004). When used for making **clinical and social action** decisions, we ask whether the study’s methods and findings justify causal explanations, particularly as applied in a local context (Shedler, 2015). In evaluating the evidence used in clinical decision-making, we pay particular attention to issues related to social justice and cultural relevance, and we view **psychoanalytic** evidence as ecologically or systemically embedded as well as historical, and evaluate it accordingly (APA Task Force for Multicultural Guidelines, 2017).

We apply EBP decision-making through:

- Systematic acquisition and use of local, practice-based evidence to inform practice
- Critical analysis of scholarly evidence, including its source, methodology, and data analysis, and, subsequently, asking important relevant questions
- Acquiring evidence of best available research and scholarship
- Appraising whether the evidence fits clients and groups in their specific social, cultural, historical, and economic contexts
- Utilization of assessment procedures that are context-specific in their validity for local populations
- Assessing in an unbiased manner their own level of expertise to implement interventions
- Decision-making with collaborators and supervisors
- Applying a wide-range of clinical theories
- Implementing interventions supported by evidence
- Evaluating, Disseminating, and Following-Up for quality improvement, change analysis, and practice adjustment.

**References**


Primary Competencies

Intervention

Individual and Cultural Diversity

Discipline-Specific Knowledge: Social, Developmental, Cognitive, Affective

Research

Secondary Competencies

Professional Attitudes and Behaviors

Communication and Interpersonal Skills

Student Learning Outcomes

1. Student will be able to apply critical evidence-based process to professional work
2. Student will be able to apply a variety of theoretical frameworks in clinical settings
3. Student will be able to consider ethical issues psychoanalytically
4. Student will be able to centralize cultural/historical/racial/ethnic factors in conceptualization
5. Student will be able to enrich their understanding and use of self in relationship/context

Evaluation of Learning Outcomes:

This course is a final semester, 4th year seminar. Developmentally, students will be expected to be active participants in all elements of their learning and classroom engagement. The learning outcomes will be assessed as they are evinced in classroom clinical, theoretical, and applied discussion.

Students will write about their learning in the course and how the course materials have influenced their clinical considerations and actions. The writing will not be constrained by expectations about page numbers, formatting, style, or directives regarding content. The students will also be asked to evaluate their own learning, and to use this opportunity to consider the course in the context of the previous 4 years of doctoral training. There is no due date for this written work, as long as it takes place during the dates that mark the start and finish of the semester.

Prerequisite Readings (to be read in their entirety prior to the first day of class):


**Required Text:**


**Required Readings:**


Shedler, J. (2006). *That was then, this is now: An introduction to contemporary psychodynamic therapy.* Retrieved from [http://www.jonathanshedler.com/PDFs/Shedler%20(2006)%20That%20was%20then,%20this%20is%20now%20R9.pdf](http://www.jonathanshedler.com/PDFs/Shedler%20(2006)%20That%20was%20then,%20this%20is%20now%20R9.pdf)


Solms, M., Panksepp, J. (2012). The “id” knows more than the “ego” admits: Neuropsychoanalytic and primal consciousness perspectives on the interface between affective and cognitive neuroscience. *Brain Sciences, 2*, 147-175. ISSN: 2076-3425


**Recommended Readings:**


Schedule of Topics and Assignments

Week 1 (Jan 9). EVIDENCE-BASED PSYCHOANALYTIC PRACTICE

Efficacy studies, evidence as defined by APA, psychoanalytic discussions of “fact” (Freud and “Tally argument” and its critics, cognitive process research, psychotherapy process research, Kleinian and International Journal of Psychoanalysis discussions of “facts”). Antioch’s definition of EBP as a “process” for clinical thinking”: Local Clinical Scientist

Assigned Readings:
- Shedler, J. (2006). That was then, this is now: An introduction to contemporary Psychodynamic therapy. Retrieved from http://www.jonathanshedler.com/PDFs/Shedler%20(2006)%20That%20was%20then.%20this%20is%20now%20R9.pdf
- Shedler, J. (2015). Where is the evidence for “evidence-based” therapy? The Journal of Psychological Therapies in Primary Care, 4, 47-59. ISSN: 2049-8578

Week 2 (Jan 23). PSYCHOANALYTIC PSYCHOTHERAPY AS DONE BY THERAPISTS

How do you know it is a psychoanalytic therapy? It must have defining characteristics, boundaries, rules, principles, right? Analytic attitude (Schafer). Freud’s “recommendations” as a stance establishing a culture and approach rather than edicts for proper conduct. How do you start a therapy, set a frame, establish and structure a process?

Assigned readings:
Week 3 (Jan 30). THERAPY AND NONTHERAPY

Working with patients that can play and patients that need a setting in which to begin to play. Therapist challenges and opportunities for learning and growth (professional and personal).

Assigned readings:

Week 4 (Feb 6). THERAPISTS ARE PEOPLE TOO

What is it like being a psychoanalytic psychotherapist, particularly while running your own business (independent practice). This is a completely hackneyed analogy, but here it goes: the oxygen mask goes on you first or else no one survives. How doing therapy is therapeutic for the therapist, or not.

Assigned readings:

Week 5 (Feb 13). CULTURAL COMPETENCE: PSYCHOANALYTICALLY SPEAKING

Examining our assumptions, biases, racism, and deep unconscious world regarding cultural transmission and fantasy meanings. How we might work with racial and ethnic difference. Engaging in dialectics of difference. Race in America: Jamestown is not Ellis Island. Where you come from matters (Freud: Moses and Monotheism). Historical unconscious: Lamark of sorts

Assigned readings:


**Week 6 (Feb 20). SELF EXPERIENCING AND COUNTERTRANSFERENCE**

The experiences of the therapist in relationship with the patient. Unconscious communication and the communication of the unconscious. Groups and unconscious processing. Contemporary cognitive neuroscience and countertransference. Clinical cases.

**Assigned readings:**


**Week 7 (Feb 27). SELF PSYCHOLOGY AND INTERSUBJECTIVE THEORY**

Mirroring, grandiosity, merger, idealization, selfobject needs and experiences, 1 ½ person psychology, relationship between infant research and varieties of self psychologies. Self psychology in the history of psychoanalysis. Disorders of the self. Anger and rage.

**Assigned readings:**

Week 8 (Mar 13). AMERICAN RELATIONAL THEORY

The “Boomers” take the theory reins. Interpersonal school with object relations, as well as infant research leads to a bright light on the dynamics of relationships, and also leaves a shadow for other forms of psychoanalysis (Grotstein). Psychoanalysis that is helpful for psychotherapists. Enactments. Dissociation vs Repression theories.

Assigned readings:

Week 9 (Mar 20). INFANT RESEARCH AND CHILD AND ADULT TREATMENT

The forms, patterns, timing, space, and temporality of interaction move into the area previously (pre)occupied by meaning and content. Increased attention to process and the other-than-verbal realms of experience, and how chicken and egg arguments are useless and ultimately uninteresting (lead nowhere) regarding content and form.

Assigned readings:

Week 10 (Mar 27). GENDER

Gender as performance and gender as essential to self. Gender and sexual orientation in the therapy setting. Feminism and psychoanalysis (Kristeva, Miller, Benjamin, Harris). What does woman/man want? What does woman/man need? Sexual minorities. They.

Assigned readings:
voices oral history and online archive project. New York, NY.


Week 11 (Apr 3). SEX AND SEXUALITY AND EROTIC FEELINGS AND EXPERIENCES IN THERAPY

Drives and driven, instincts and instinctualizations, Love and sex and sex and power and most everything else. You can *never* get what you want (Lacan and Rolling Stones), but if you try sometimes, you might get what you need.

Assigned readings:


Week 12 (Apr 10). AGGRESSION, RAGE, ANGER, AND HATE

Negative transference and negative therapeutic reaction. Rage and anger as different categories, not points on a continuum. Ruthlessness and assertiveness, and destructiveness and hate.

Assigned readings:


· TBA

Week 13 (Apr 17). COGNITIVE AND NEUROPSYCHOANALYSIS.

The return of the repressed: there is where it all started. Brain and mind. Lateralization theory. Mirror neurons. Limbic system.

Assigned readings:

· Bucci, W. (2011). The role of subjectivity and intersubjectivity in the reconstruction of dissociated schemas; converging perspectives from psychoanalysis, cognitive science and affective neuroscience. *Psychoanalytic Psychology, 28*(2), 247-266. ISSN:0736-9735


Solms, M., Panksepp, J. (2012). The “id” knows more than the “ego” admits: Neuropsychoanalytic and primal consciousness perspectives on the interface between affective and cognitive neuroscience. *Brain Sciences, 2*, 147-175. ISSN: 2076-3425


**Week 14 (Apr 24). ADDICTION: MISSING EXPERIENCES AND EXPERIENCES THAT ARE MISSING**


**Assigned readings:**


**Week 15 (May 1). TERMINATION, RETELLING A LIFE, DEATH**

Limitations and endings. Working with termination. Illness and death. The end of the hour. The end of formal education. The end of this class. Good-bye.

**Assigned readings:**


**Student Academic Support Services**

**Support for Research & Audiovisual Services:**
The AUNE Library offers research support, both face-to-face and long-distance via telephone, email, Gchat, and Skype. Your librarian, Rachel Sperling, is available weekdays 9-4:30 and by appointment to discuss topics, research strategies, citation management, and more. For more information about the AUNE Library, visit our website: [http://www.antiochne.edu/library/](http://www.antiochne.edu/library/)
In addition to books, DVDs, and journals, the library has a large collection of audiovisual equipment available for checkout. For a complete list of AV equipment and borrowing guidelines, visit this page: http://www.antiochne.edu/library/audiovisual-services/

Any research materials that the library does not own can be requested through our excellent Interlibrary Loan service: https://antioch.illiad.oclc.org/illiad/logon.html

Support for Writing and Presentations:
The AUNE Writing Center, located in the library, offers free peer support for all parts of the writing process, including brainstorming and starting an assignment; organizing and structuring a draft; revising at the paragraph and sentence level; polishing near-final work; integrating your sources, and more. The AUNE Writing Center also supports Power Points, Prezis, Resumes, Cover Letters, and CVs.

● Support at the AUNE Writing Center is available in via face-to-face, phone, or Skype sessions. You can see our schedule, make appointments, and access resources at the Writing Center website, http://www.antiochne.edu/writingcenter/.

● For written feedback on writing, you can submit your work to the Virtual Writing Center, which operates out of Antioch Seattle and is available to all AU students. You can submit a paper to the VWC at http://www.antioch.edu/vwc/ and you will receive a response in 24-48 hours.

Support for Students with Disabilities:
Office of Student Disability Services
Antioch University is committed to providing reasonable accommodations to qualified students with disabilities in accordance with Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 2008. Students with disabilities may contact the Disability Support Services office to initiate the process and request accommodations that will enable them to have an equal opportunity to benefit from and participate in the institution’s programs and services. Students are encouraged to do this as early in the semester as possible, since reasonable accommodations are not retroactive. The Disability Support Services office is available to address questions regarding reasonable accommodations at any point in the semester.

For more information, please contact Fran Ziperstein, Director of Student Disability Services at fziperstein@antioch.edu or leave a message at 603 283-2438. The Office for Student Disability Services is located across from conference room 1C.

Antioch University Policies: Antioch University is committed to building a vibrant and inclusive educational environment that promotes learning and the free exchange of ideas. Our academic and learning communities are based upon the expectation that their members uphold the shared goal of academic excellence through honesty, integrity, and pride in one’s own academic efforts and respectful treatment of the academic efforts of others. All students are expected to comply with
Antioch University policies, including the Title IX Sexual Harassment and Sexual Violence Policy and the Student Conduct Policy. To access academic, student, and other university policies available online: http://aura.antioch.edu/au_policies