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Upcoming Luncheon Meetings



Date: March 5, 2010

Topic: When the Marriage Can't be Saved: Guiding Your Clients Toward a Better Divorce

Speakers: Mary Ann Aronsohn, LMFT and Sam Alibrando, Ph.D.

Date: April 2, 2010

Topic: Psychologically Speaking - How Therapists Can Help Clients Meet Their Emotional Needs

Speaker: Rich Beyer, PhD

PLEASE RSVP NO LATER THAN THE FIRST MONDAY OF THE MONTH TO YOUR INTERNET EVITE, OR TO THE SGVPA VOICE MAIL (626)583-3215. CE credits available for psychologists, LCSWs and MFTs

Monthly luncheons are held on the first Friday of the month at the University Club,
175 N. Oakland Avenue, Pasadena, from 12:00 to 1:45 p.m.

Members Costs:

Luncheon, Service, and Parking Privileges...\$22

CE credits...\$20

Audit...\$10

Non-Member Costs

Luncheon, Service, and Parking Privileges...\$27

CE credits...\$25

Audit...\$15

Please note: Unclaimed lunch reservations will be billed to the individual--So please claim them!

PRESIDENT'S MESSAGE



Dear Colleagues,

As the year gets underway, I continue to find myself thinking of transitions. Lyrics from Bob Dylan's song, *The Times They Are A Changin'*, (reproduced at the end of this message) have recently become background music to my cognitive processes in thinking about the present times.

Written during the turbulent Civil Rights Movement, the song's message is to pay attention to what is happening around us and become part of the process of change.

Economic fluctuation is often both a harbinger of social change and a symptom. Gay Civil Rights is one prominent issue of social equality. Quality affordable healthcare with mental health parity is another. It can help us change when we understand the process and the choices. Advocacy is about guiding the decisions that create change. I hope you enjoy this issue and take advantage of changing times to stretch yourself in productive and growth oriented ways that increase your professional opportunities and help you meet the needs of your clients.

This issue of *Analyze This!* addresses the politics of Psychology, and why each of us needs to pay attention to what is going on in our profession as a result of social change, and to become active to guide the direction of change. Dr. Sallie Hildebrandt, CPA President Elect shows us how advocacy helps inform and challenge legislators who regulate how psychologists practice in

(continued on page 2)

President's Message
(continued from page 1)

California. She helps us comprehend how our connection to CPA is vital to our practices here in the San Gabriel Valley. In his article on "Clinical Psychopharmacology and the Advance of Medical Psychology," Dr. Keith Valone highlights the benefits to psychologists in embracing this impending change. As part of his series on family law, Mark Baer, Esq. reminds us that an adversarial stance of winning at any price is not often a win at all and cooperation is more productive in the long run. Dr. Enrico Gnaulati's piece on rediscovering the healing power of basic human virtues as an agent of connection and change reminds many of us why we became psychologists in the first place.

"Come gather 'round people wherever you roam and
admit that the waters around you have grown and accept it that
soon you'll be drenched to the bone.
If your time to you is worth savin', then you better start swimmin'
or you'll sink like a stone
for the times they are a changin'Bob Dylan, 1963

Respectfully,
Linda Tyrrell, PsyD
President

"TIDBITS" FROM CPA



By Stephanie Law, PsyD,
Membership Chair,
Rep to CPA & LACPA

As your representative to the California Psychological Association (CPA) Board of Directors, I recently received the distinct privilege of attending a CPA board meeting on a Saturday...for seven hours....did I mention it was a Saturday?

All jokes and humor aside, here is the latest and greatest on what's happening in CPA, and a reminder to become a member if you are not already.

- The CPA website has a link listing job opportunities!
- If you order your books through the Amazon.com link on www.cpapsych.org, it generates income for CPA!
- CPA has a new link for Therapysites.com, a web service that can help you design your very own website. This also generates income for CPA.
- The CPA Annual Convention is April 15th – 18th in Costa Mesa ! Don't miss this opportunity for great lectures, CE credit, and networking with psychologists from the whole state.
- CPA has joined the latest rage and now has a FACEBOOK page!

Your dedicated CPA Board Rep. may be reached at Stephanie@drstephanielaw.com.

Why Advocacy is Important

By Sallie Hildebrandt, Ph.D.
2010 CPA President Elect



A majority of CPA members report that they join CPA because of CPA's advocacy efforts. Most people do not realize that Psychology is a regulated profession. The California legislature actually determines Psychology's scope of practice by passing laws which determine how we practice, and these laws are then enforced by the Board of Psychology (BOP).

Because of the advocacy in which CPA members and staff engaged, California psychologists have the widest scope of practice, with the exception of prescriptive authority, among psychologists in the U.S. Even there, as Dr. Steve Tulkin of Alliant University noted in the Spring 2009 *Independent Practitioner*, California psychologists may discuss medications with patients (not so in some other states); we can recommend specific medications; we can discuss medications with patients' physicians; and we can/must monitor patients' progress, including any changes due to medications (p. 102).

In addition, for years, CPA has lobbied not to have more mandated continuing educational coursework. CPA has fought to protect psychologists' licenses by not having new licensees who were poorly trained or whose scope of practice encroached on Psychology's. Over the last two years, GAC leaders and CPA GA staff worked very hard to shape the scope of practice and training requirements for Licensed Professional Counselors. We are working equally as hard on wording for licensed Alcohol and Drug Counselors.

CPA continues to work for parity for psychologists (within our scope of practice) with psychiatrists. Such has entailed a battle of close to 25 years and includes the CAPP V. Rank lawsuit, numerous pieces of legislation, and now working closely with Psychology Shield to effect change with state regulatory agencies. Psychiatry continues to threaten a lawsuit.

CPA Steering Committee recommended opposition to Proposition 8 and support of the APA Amicus Brief in favor of Gay Marriage. We were active in our support of now Congresswoman Judy Chu's election to the U.S. House of Representatives.

CPA continues to lobby to have psychology included in the Medical Optional Benefits in the face of overwhelmingly destructive budget cuts. These cuts were also used as a *raison d'être* to eliminate the BOP last year. CPA effectively countered this move and saved the BOP!

In 2008 the CPA Bill SB 822 to grant immunity to supervising psychologists signed into law. The bill was authored by Senator Sam Aanestad. It will grant immunity to supervisors of graduate students who communicate relevant information to the graduate program about a student's performance in order to ensure that supervisors working in public service programs as well as independent practitioners who supervise students in training can provide honest, straightforward evaluative information about the student being supervised.

This year CPA (with the input of Division VIII, Neuropsychology) is sponsoring a bill authored by psychologist and Senator Leland Yee – SB 880. This bill would require a person under 18 years of age to wear a properly fitted and fastened snow sport helmet while operating snow skis or a snowboard, or while riding upon a seat or other device that is attached to the snow skis or a snowboard. For additional information go to http://www.leginfo.ca.gov/pub/09-10/bill/sen/sb_08510900/sb_880_bill_20100112_introduced.html

As you can see, CPA protects you and your license. It lobbies for you to practice to the full extent of your license, and it protects your patients as well.

Dr. Hildebrandt can be reached at (858) 453-1800

Getting to Know Your Colleagues in SGVPA

Dr Linda Tyrrell

By Sheree Bailey, MA



It is easy to understand why Linda Tyrrell, SGVPA's new president, is primarily a family systems psychologist. Linda is the second of eight girls born to Catholic parents and grew up near Boston. Linda recalled that her roles and responsibilities within such a large family were clearly defined. "Growing up as one of the oldest in a large family was much like group process. You had to be independent, responsible, cooperative and to consider the collective need." She adds, now they are all grown, "I have a built-in support system of seven amazing, accomplished women."

Linda practices privately in Pasadena, where she specializes in working with children, adolescents, individuals and families, and uses family systems theory as her primary model. She has worked extensively with young people, in middle school, high school college settings, as well as having worked with San Gabriel Valley gang, probation and delinquent youth. Now an instructor at the California School of Professional Psychology at Alliant University in Los Angeles, she recalls studying there herself. She completed her PsyD at CSPP in 2001. Linda currently teaches Psychology ethics, law, and professional development.

Linda joined SGVPA in 2006, and quickly became active by joining several committees. As the Chapter's new President, she is aiming to make SGVPA more visible in the San Gabriel Valley community. She is especially eager to begin a branch of the Soldiers Project, an organization that enlists therapists to provide pro-bono psychotherapy to service personnel who have returned from Iraq and Afghanistan and their families.

"There is a stigma against using mental health services in the military, and many who need help go without until they leave military service. The VA is overwhelmed with the mental health needs of returning soldiers," Linda said. "SGVPA members would do a great service to our community if they were to become involved in this project, and they also stand to gain a great deal of professional growth and personal satisfaction."

Linda was married to an officer in the Army Reserves who was called up for nine months to investigate war crimes during Operation Desert Storm, in the early 90s. She learned firsthand what it was like to have a family member at war, to live with the fear that he would not return, to experience the upheaval of the family's ordinary life with no definite end date, and to do all this outside of a supportive military environment.

"War has a traumatic impact that is often irreversible and destructive to family cohesion. Soldiers need help coping with what they experienced and their return to ordinary life and family members need help coping with fear, loss and disruption of family life," Linda explained.

Another priority is fostering more awareness and action among SGVPA members in the politics of Psychology. As Governmental Affairs Chair for several years, she has become passionate about the importance of working to advance our professional goals at both state and national levels. She also plans to direct her attention to improving the SGVPA website, and developing a Speakers Bureau. "I have lots of ideas, and I'm so excited to be in a position to, hopefully, make a positive difference," she enthuses.

Linda, who is the mother of two adult sons, finished her doctorate at age 51. She credits her sons, who both went to Harvard University, as a large part of her inspiration in pursuing her doctoral studies. She was providing therapy at the masters degree level and began accruing post graduate certificates in child and adolescent psychology and trauma at Boston University, School of Social Work and took several courses as a non-matriculating student at the Massachusetts School of Professional Psychology.

"Even though I was from the Boston area, I never even thought to apply to Harvard, and never expected my children to go there," Linda recalled. "I realized as I walked around campus with them that I had to pursue my dreams as an example for them and that I had to act fast just in case they started to think they were smarter than their mother."

Dr. Linda Tyrrell can be reached at DrLindaTyrrell@mac.com

Obsessive Ruminations

Professional Psychology and The Seduction of Passivity

By Alan Karbelnig, PhD



Bolstered by Soren Kirkegaard's lament that "ours is a paltry age because it lacks passion," Dr. Alan Karbelnig writes this regular column to provoke thoughtful reaction from his SGVPA colleagues. He practices psychoanalytic psychotherapy and forensic psychology in South Pasadena.

By devoting this issue of *Analyze This* to politics, the editors advocate passionate action over quiet passivity. To become involved in an organization, to take a stand, to write or to speak out – these all constitute outward activity of some sort. In contrast, professional psychology tends to be an unusually passive vocation, rendering its practitioners' participation in political activities unusual or even rare, and for several distinct reasons.

Regardless of whether practicing psychological assessment, psychotherapy, or some other professional activity, we psychologists tend to work in isolation. We may practice in a suite of colleagues, but our days are passed working individually with our patients. Unlike our medical colleagues, we have few routine consultations with our peers. By virtue of the extreme sensitivity of our work, we share little if anything of the details of what we do with our family and friends. In essence, we work alone. And as our colleague Rico Gnaulati pointed out, our work requires extreme concentration and focus. Arguably unlike any other professional, even surgeons or anesthesiologists, we cannot leave the room during a session, even to make a telephone call or use the rest room.

Also, since we are working towards helping others in virtually any aspect of our work, we can rightfully feel that we are contributing to society in some fashion. While legitimate on one level, this is a rationalization on another. We may rely on this form of giving to avoid other forms of philanthropy. Why serve humanity in a broader sense when each and every day involves care for others?

Finally, the work is tiring. Except perhaps for those psychologists who solely perform assessments, psychotherapy is extremely intimate, satisfying some needs and exhausting others. Some of us err (somewhat cheaply) by obtaining our needs for closeness through our work; this allows us to remain in an invulnerable position while enjoying high levels of interpersonal intimacy. Ironically, the very personal nature of the work is likely the most exhausting element of it. We often feel intensely fatigued

by the end of the day or the end of the week. Who can blame us for eschewing political action and instead taking refuge in hiking, theater, reading or other non-political pursuits during our precious free time?

Despite these basic truths of the isolated, helpful, and intimate nature of our work, we psychologists are nested in an unavoidable, larger social context. Starting from within the field itself, we are under attack by insurance companies who would like to reduce or eliminate reimbursements for our services; we are surrounded by a mass media that typically misunderstands what we do; we struggle with a portion of medicine and of course the massive pharmaceutical industry which derogate our work and push "medicines" for help with any kind of mental pain.

If the circle opens even just a bit wider, well, then we face real horror: Haiti, the Middle East, Somalia, global economic recession, hunger within our own borders, and oh so much more. (A recent Gallup survey revealed that one in four Americans has trouble providing food for themselves and their families).

In the final analysis then, and despite our good works, we should really escape from our offices and do something more for the society and the planet. Our Ethics Code suggests it, but even more powerful universal ethical principles demand it. We are blessed with involvement in a wonderful profession: How many offer an ability to help others in such an intimate way? But the limited populations we serve just don't make enough of a difference; we have skills that could have much broader impact, and for that the world awaits. So, whatever means works for you – volunteering, leading, writing, or shouting, please make sure that – in consonance with the theme of this issue – you venture away from your offices and share your talents with the wider world.

The Ordinariness of Good Psychotherapy

By Enrico Gnaulati, PhD



In the frenzy to establish and distinguish ourselves as psychotherapists, whether it be acquiring a specialty in working with a newly-minted psychological condition, or becoming more fastidious practitioners of our chosen therapeutic paradigm, we overlook the essential ordinariness of what constitutes good psychotherapy.

Often, it is out of a sense of real responsibility to the client that our own need to be clever is overridden, and we return to time-honored human virtues such as forbearance, sensitivity, tact, even-mindedness, honesty, and courage in our approach. There is the nagging suspicion that perhaps our own need to be clever arises from the client's repetitiousness, as if change could and should happen faster, and could be catalyzed by a more sophisticated interpretation, or skillful application of technique. Taking clients at their word, truly entering and residing in the manifest content of their narratives, the warp and woof of their everyday lives, and *what they feel actually matters*, requires that we give ourselves over to the ordinary. Sometimes our need to be clever is rooted in our own discomfort with doing just that, and our interpretations and interventions become disguised ways of coaxing the client to talk about *what should actually matter*, to justify the potency of our education and training, or to simply to stave off boredom.

Much of the salutary relational unlearning and re-learning that occurs in effective therapy remains implicit, embedded in moment-to-moment client-therapist interactions, in the form of mutually coordinated eye contact, speech prosody, voice cadence, and other rudimentary forms of human interaction. A smile, a sincere frown, or merely the therapist's calm countenance at the right moment, when the client expected disapproval, can have liberating effects, no matter how imperceptible. Contrary to the Freudian dictum, not all experiences have to be made conscious in order for them to have transformative effects. Robust fees can rightfully be charged for simply knowing when to be mindfully present, rather than being a masterful decoder of meaning.

So what are we offering to clients when we offer psychotherapy? And, if good psychotherapy is a more concentrated and specialized form of actual human relating, rather than something categorically different, ought we to even use words like treatment, intervention, and technique?

When we draw from our own humanity to help clients, desiring to act naturally, valuing transparency over mystification, common speech over clinical jargon, tact over tactics, and an awareness of mutual influence, many thorny ethical and professional issues arise. What separates psychotherapy from a form of therapeutic companionship? For that matter, under these conditions how are we to define professionalism? Appropriate training and education? The role of clinical theory and technique? Arguably, somehow the line between implementing a technique and being a real person in the room has to be a permeable one, and acting authentically professional, as well as professionally authentic, an achievable way of being.

Likewise, a life of depth and dimensionality surely improves the relational goodness-of-fit that a therapist might have with an array of clients, across a variety of problems in living. It is probably more true than untrue that our clients covertly scan our faces for physiognomic signs of similarity between the life we have lived and live, and the life they desire to live. And yet, graduate schools are rightly not in the business of prescribing lifestyles, and it would be unthinkable of a supervisor to advise a beginning therapist to go out and get his or her heart broken, or to break someone else's heart.

Lastly, rather than mimic the field of medicine and hotly pursue cutting-edge techniques and technology for his or her professional advancement, arguably the diligent therapist needs to assume greater stewardship for his or her own self-care out of the office in ways that allow for finessing his or her humanness in the office with clients. Maybe the (currently outdated) acronym "c.e.u" should also stand for Continue Emphasizing the Uplifting in your outside life pursuits!

Dr. Gnaulati can be reached at enrico@гнаulati.net

Clinical Psychopharmacology and the Advancement of Medical Psychology

By Keith Valone, PhD, PsyD



Obtaining prescription privileges for psychologists is a top priority for Psychology as a profession. Strong advocacy by Division V of CPA, Division 55 of APA, and the advent of Medical Psychology as a prescribing psychology specialty in Louisiana, New Mexico, Guam, and the United States Defense Department, all have given momentum to this paradigm change for our profession. Several psychologists in California are working hard to bring Psychology prescription privileges to our state.

Some of us have received additional training in clinical psychopharmacology in anticipation of this change. In a few months a colleague in my group practice and I will complete the Postdoctoral Master of Science in Clinical Psychopharmacology offered by CSPP. Another classmate from Pasadena will graduate with us, and another colleague in my group practice has already graduated from this program. In all, at least four clinical psychologists that I know of who are practicing in Pasadena will have completed their M.S. in clinical psychopharmacology by this summer.

Those of us who have undergone this training have found immediate application to our practices, even though we do not yet have prescription privileges. I am myself a clinical psychologist and a psychoanalyst. Acquiring a specialty in clinical psychopharmacology has helped me to better communicate with prescribers who collaborate with me on my own patients. I am also better able to help patients understand the medications that they are taking, identify and explain the side effects of these medications, encourage medication compliance, and at times help the patient to have a dialogue with the prescriber to consider switching to an alternate medication, adding or going off of a medication, changing doses, or altering the time of day or frequency of dose. From a psychoanalytic perspective, it has been very helpful to better understand the mechanism of action of medications that a patient is taking while simultaneously addressing the patient's transference reactions to these same medications.

Should a new specialty of Medical Psychology emerge in California at some future date, those who choose not to acquire the additional training to prescribe would have the option to consult with a psychologist colleague to prescribe for their patient should they wish to do so. There may be situations where having a psychologist prescribing as a consultant may be very helpful to another psychologist, given the common background and training of our profession. In other cases, a psychiatric consult will always be preferable given the patient's need for clinical care that requires advanced medical training and judgment.

I hope that briefly sharing about my experiences in becoming a specialist in clinical psychopharmacology has helped to make the movement toward prescribing privileges for psychology less abstract and more tangible. It is my hope that all psychologists will support the goal of obtaining prescription privileges for psychologists, regardless of whether they plan to prescribe themselves.

Dr. Keith Valone can be contacted at valone@thearroyos.com, or you may visit www.thearroyos.com for more information.

Psychology and Family Law

By Mark Baer, Esq.



Many people hold the unfortunate belief that when they become involved in a lawsuit—including divorce—they need to find a lawyer who is a “fighter,” or “pit bull” (i.e., like the dog bred specifically to fight other dogs). Since legal disputes are adversarial by nature, the logic seems to be that an aggressive attorney will more successfully advance one’s interests in court. By logical extension, a lawyer who is not ruthlessly aggressive would be a suboptimal choice.

However, I would like to point out that strong, proactive, and even aggressive representation does not necessarily equate with the “pit bull model.” Attorneys classified as pit bulls often tend to be belligerent, argumentative, and eager to fight. What the public does not realize is that highly contentious individuals (attorneys included) usually place self-interest above all else. It should be obvious that always looking for more points to fight over, and even taking unreasonable positions on behalf of their clients, generates significantly more money in fees for the lawyer who charges on an hourly basis. Moreover, such attorneys tend to derive a great deal of pleasure from the fight *in and of itself*. In fact, many attorneys enter the field precisely because they enjoy argumentative confrontation, and tend to be disagreeable and difficult people in general.

These attorneys thus tend to delay the resolution of a case, file motions that make no sense from a cost/benefit analysis, and often cause the other side to need to file motions, or incur significant legal fees and costs because their client is refusing to disclose required information and/or is hiding marital assets. (In my many years in the field, I have noticed that difficult and combative clients tend to retain difficult, combative counsel, while reasonable and cooperative clients usually retain more reasonable representation.)

“Pit bull attorneys” are not concerned with resolving a case in a fair and equitable manner, despite the fact that the family law court is considered a court of equity, or fairness. Instead, these attorneys take advantage of the flaws and imperfections in the legal system to make the case for the other side so costly that they either cannot or will not continue to fight for that to which they are otherwise legally entitled. Such attorneys are focused on “winning,” no matter what the cost, irrespective of right and wrong, and in total disregard of equity.

In truth, the very concept of “winning” in court is somewhat subject to interpretation. For example, if a particular attorney “wins” a client \$30,000 in a case that more qualified attorneys would have potentially “won” \$300,000, is that considered a “win?” The attorney did “win”—insofar as the opposing side ultimately lost the case. However, wasn’t a more appropriate resolution lost? Then again, what if an aggressive attorney causes both sides to incur legal fees in the sum of \$30,000, and yet ultimately “wins” only \$5,000 for his/her client. Should that be considered a “win?” And if so, for whom?

From my perspective, neither of these situations can be considered to be a true victory for the client. While ruthless and combative attorneys, and other such people, would argue that a “win” is a “win,” this point of view assumes that the *only* thing that really matters is that the other side is defeated. Unless I am missing something, the true “winner” in such situations is *the attorney*. While some may argue that the client “won” his or her debate as a matter of principle, and that the toll it may take on both sides is irrelevant, I contend that the cost (both financial and emotional) of fighting with this notion as a guiding force is often just not worth it. If clients realized the extreme emotional and financial toll in advance of pursuing such principles, many would not do so. This is especially true if the vindictive emotions that fuel such legal wrangling could otherwise be diffused through the use of psychologists and other such mental health care professionals.

I have noted that disagreeable, contentious clients tend to seek out similarly oriented attorneys. Interestingly enough, I’ve seen that such individuals tend to relate well with each other—at least at first. Meanwhile, a client who tends to be more cooperative might retain an attorney who is more antagonistic toward others and vice versa, but such relationships do not tend to last. Ultimately, the difficult client and difficult attorney will not be able to treat each other any differently than they treat anyone else. Furthermore, the more reasonable client very often parts way with his or her overly aggressive attorney before long. These sorts of mismatching are why clients might go through several different attorneys in course of a single particular legal proceeding.

I have previously written about the supreme importance of trust, mutual respect, and good communication between a client and his or her attorney in order to have both a successful working relationship, and a positive outcome in legal proceedings. Here again, I must point out that “pit bull attorneys” and their clients can rarely, if ever, maintain these crucial aspects of the relationship.

Mark Baer, Esq. can be reached at (626) 389-8929 or by email at Mark@markbaeresq.com



Calling All Movie Buffs!

SGVPA Film Night Is Back!

Join your fellow SGVPA cinephiles every month on a Friday nights for a light dinner, as we screen an excellent film chosen for your enjoyment and psychoanalyzing pleasure. A discussion of each film will follow.

Date: Friday, March 26

Location: Home of Dr. Suzanne Lake

Feature Film: *CAPOTE*

Directed by Bennett Miller

Starring Philip Seymour Hoffman, Catherine Keener, Clifton Collins, Jr.,
and Chris Cooper
(2005)

Synopsis: Philip Seymour Hoffman stars as writer Truman Capote, researching the “non-fiction novel,” *In Cold Blood*, that created a literary genre, and made him an international celebrity. Capote and his best friend, fellow author Harper Lee, travel from sophisticated New York City to investigate the shockingly brutal murder of a simple Kansas farm family by a pair of drifters. In the course of befriending the murderers, as well as the townspeople, Capote metaphorically sells his soul, and is transformed forever in the process.

Nominated for Best Actor, Best Screenplay, Best Director, and Best Supporting Actress, with Hoffman taking home the Oscar for Best Actor

Dr. Suzanne Lake will present a brief character analysis, and lead a discussion following the film.

To attend, please RSVP to Philip Spradling at spradlingp@sbcglobal.net for the address.

Please plan to arrive about 6:00 p.m.,

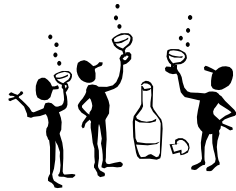


Screening begins at 7:00 p.m. SHARP.



See you at the movies!

SGVPA
Early Career Professionals
Happy Hour!



March 19th, Friday night 6pm - 9pm (come anytime)

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All SGVPA Members are Welcome!



Please RSVP to:
Colleen Warnesky, PsyD at drwarnesky@yahoo.com
or Deborah Peters, PhD at drdebpeters@gmail.com

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focuses on the unconscious core of the personality and explores the infantile anxieties and defenses that shape behavior and relations with the self and others. The elemental contributions of Freud, Klein and Bion structure the foundation of PCC's British Object Relations approach. Emphasis on analysis of primitive mental states is supported by year-long intensive courses in the Tavistock method of Infant Observation, in the original work of Freud, Klein's major papers and in the contemporary Kleinian and Object Relations developments. Bion's theories of thinking form a focal center of study.

CORE PROGRAM IN ADULT PSYCHOANALYSIS

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- Additional Certification Program
- Second Year of Infant Observation
- Origins of Primitive Mental States

PSYCHOANALYTIC PSYCHOTHERAPY PROGRAMS

- One year Adult or Child Focus
- Didactic Courses and Case Conferences
- Certificate of Completion Provided

OPEN HOUSE

SUNDAY, MARCH 21, 2010
11:00 AM - 2:00 PM
BRUNCH: 11:00 AM—12:00 PM
PRESENTATION: 12:00 PM

SPEAKERS:

Jennifer Langham, Ph.D.
Vladimir Lipovetsky, M.D.

**“Why Psychoanalysis? Why PCC?
Two Personal Journeys to
Psychoanalytic Training”**

CONTACT PCC OFFICE FOR INFORMATION

Continuing Education Courses, Extension Programs, Annual Melanie Klein and Frances Tustin Memorial Lectureships, James Grotstein, Primitive Mental States, and Infant Observation Conferences. For upcoming events visit our Website at www.psycc.org

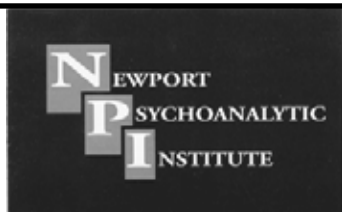
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PSYCHOANALYTIC CENTER OF CALIFORNIA

11110 Ohio Avenue, Suite 106
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PHONE: 310.478.4347
www.psycc.org

A Component Society of the International Psychoanalytical Association



is committed to the integrative study of diverse psychoanalytic theories in an open, dynamic atmosphere that fosters independent thinking and clinical excellence.

NPI offers the following training programs in Psychoanalysis at both Tustin and Pasadena Campuses:

- Doctor of Philosophy in Psychoanalysis (Ph.D.)
- Doctor of Psychology in Psychoanalysis (Psy.D.)
- Certificate in Psychoanalysis
- Two Year Certificate in Psychodynamic Psychotherapy

Tustin Campus and Administrative Office:

250 W. Main Street, Suite 202
Tustin, CA 92750
714.505.9080

Pasadena Campus:

911 E. Colorado Blvd., Suite 200
Pasadena, CA 91106
626.796.2776

admin@npi.edu www.npi.edu

Member of the Association for Autonomous Psychoanalytic Institutes (AAPI)

Annual Open House

Pasadena Campus:

Friday, April 23, 2010

3:00 – 5:30 PM

Tustin Campus:

Friday, April 16, 2010

9:30 AM- 12 Noon

Please join us for an engaging case presentation to be discussed from a variety of psychoanalytic perspectives

2.0 hours of Continuing Education Credit

MFTs and LCSWs: CEUs provided by California BBS Provider #PCE97.

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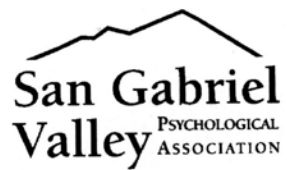
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**c/o Suzanne Lake, PsyD, Past President
2810 E. Del Mar Blvd., Suite 10A
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You are cordially invited to

Rose City Center's Third Annual Fundraiser

Guest Speaker Elyn Saks

Bestselling Author of *The Center Cannot Hold:
My Journey through Madness*

Thursday, May 6th at 6:30 PM

The Rococo Room, 64 W. Union Street, Old Pasadena

\$100 donation per person (includes dinner)*

RSVP by April 23 to rosecitytherapists@gmail.com or 626-793-8609

Dr. Saks will be available to sign books at the event.



Elyn Saks is a USC law professor, adjunct professor of psychiatry at UC San Diego, and research clinical associate at the New Center for Psychoanalysis. In 2009, she was awarded the MacArthur Foundation's Genius Grant. Her candid and insightful memoir *The Center Cannot Hold* describes her lifelong personal struggle with mental illness.

Rose City Center

A California licensed psychology clinic

595 E. Colorado Blvd., Suite 303

Pasadena, CA 91101

Phone: 626-793-8609

www.rosecitycenter.org

**Proceeds benefit Rose City Center, a 501c3 nonprofit organization whose mission is to provide affordable in-depth psychotherapy to low-income adults and adolescents, and to train pre-doctoral and postdoctoral clinicians.*