2014-15 Monthly Meetings

Sep. 17, 2014 Shame, Relevant Neurobiology, and Treatment Implications
Arlene Montgomery, PhD, LCSW 1.5 CE/CMEs (Clinical)

Oct. 1, 2014 Dirty Rotten Shame
Michael Uebel, PhD, LCSW 1.5 CE/CMEs (Ethics)

Nov. 5, 2014 Paradise Lost: Shame, Differentiation and Oedipal Defeat
Marianna Adler, PhD 1.5 CE/CMEs (Clinical)

Dec. 3, 2014 ANNUAL BUSINESS MEETING

Jan. 7, 2015 The Therapist’s Use of Self-Disclosure in the Face of Client Vulnerability
Elayne Lansford, PhD 1.5 CE/CMEs (Clinical)

Feb. 4, 2015 The Metamorphosis of Walter White in Breaking Bad: A Case Study of the Psychodynamics of Shame
Richard Michael, PhD 1.5 CE/CMEs (Applied Clinical)

Mar. 4, 2015 The Story of the Hero From WWII to “The Lego Movie”: Defensive Construction Against Shame and Vulnerability or Path to Growth
Marsha D. McCary, PhD 1.5 CE/CMEs (Applied Clinical)

Apr. 1, 2015 Male Shame and Its Therapeutic Implications
Zane Dodd, PhD 1.5 CE/CMEs (Cultural Diversity)

May 6, 2015 Hunger: A Psychological Response to Shame
Mary B. Burke, LCSW        1.5 CE/CMEs (Clinical)
Shame, Relevant Neurobiology, and Treatment Implications

Arlene Montgomery, PhD, LCSW 1.5 CE/CMEs (Clinical)

The neurophysiological distinctions between shame and guilt are described as they relate to explicit and implicit memory in the brain. Discussed are the arousal dimensions of a person’s internal state as the brain copes with the shame experience in both normative socialization processes and unrepaired shame which may lead to compromised and unconscious affect regulation strategies. Relational trauma resulting from unrepaired shame experiences may emerge via projective identification in the transference-countertransference enactment(s) within the therapeutic alliance. Selected mental conditions’ particular vulnerability to shame experiences are described, such as addiction, and two disordered personality organizations, narcissistic and borderline. Dialogues from published works are utilized as examples throughout the paper.

Arlene Montgomery, Ph.D., LCSW has taught clinical courses since 1993 at The University of Texas at Austin and Smith College School for Social Work. She has made numerous presentations on various clinical topics; supervision issues regarding counter-transference; keeping therapeutic alliance in short-term therapy; and neurobiological findings relevant to the therapeutic alliance, treatment considerations and ethical considerations. She also has a private practice with a focus on clients affected by trauma and is a clinical supervisor for Licensed Masters Social Workers fulfilling their requirements for the Licensed Clinical Social Worker licensure. She has been the Director of Social Services at Child and Family Service, the Settlement Club Home, and Meridell Achievement Center. In 2013, she authored Neurobiology Essentials for Clinicians: What Every Therapist Needs to Know.

Learning Objectives: At the end of the presentation, participants will be able to:

- Clarify differences between shame and guilt with selected clinical implications
- Identify predictable neurophysiological arousal manifest in the shame experience as previous traumatic shaming experiences are expressed in the treatment relationship

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Oct. 1, 2014  Dirty Rotten Shame

Michael Uebel, PhD, LCSW  1.5 CE/CMEs (Ethics)

Approaching the human condition of shame from a largely ethical point of view, this paper traces the problems involving the relationship between shame and the ego, and between shame and the Other. There can be no question that shame is located in the most private and secret regions of the subject, since the private arena resides at the very heart of a subject’s identity. Any critical or clinical approach to shame depends upon attending to its ethical nature, to, for example, the private vicissitudes of narcissism and masochism that appear to be intimately bound up with the shame experience. Our goal will be the exploration of moral and philosophical theories of shame underpinning our psychoanalytic appreciation and treatment of this most basic human experience, one that, as we shall see, has both positive and negative valences.

Michael Uebel, PhD, LCSW is a psychotherapist at the Veterans Health Administration clinic in Austin, and also has a private practice. In addition, he is a Lecturer and Research Associate at the School of Social Work at the University of Texas at Austin. He also is Director of Contemplative Studies at the Austin branch of the Interdependence Project, which he co-founded. (IDP-A is a branch of the New York city-based nonprofit organization dedicated to fostering the intersection of the arts, activism, and contemplative traditions.) Dr. Uebel has been a candidate and instructor at the Austin Center for Relational Psychoanalysis and Psychotherapy. Prior to becoming a psychotherapist, he taught literature and critical theory at several universities. As the author and/or editor of three books and the author of over 40 journal essays and encyclopedia articles, he has applied psychological insights to the historical intersections of social, personal, and imaginative phenomena. Finally, he lectures nationally and internationally on issues concerning social history, mental health, and the challenges of humanism.

Learning Objectives: At the end of the presentation, participants will be able to:

• Summarize the conceptual ground upon which shame theory in psychoanalysis is built
• Discuss the ethical frames of reference for understanding shame in relation to self and other

References
The first part of this presentation introduces the topic of shame as discussed in the clinical literature. Dr. Adler asserts that the Biblical story of Genesis, as portrayed by John Milton in *Paradise Lost*, locates the experience of shame as intrinsic to the process of separation and individuation that inaugurates human history. The process is repeated in the socialization of the child into the human community through the internalization of shared values and ideals. Bearable shame, or non-traumatic shame normally experienced in the process of socialization, is differentiated from shame that threatens humiliation and abandonment by the Other. This latter sort of shame gives rise to a state of inner torment which Milton portrays with such power. The second part of the presentation looks at clinical material with attention to unconscious shame and the defenses that are deployed to keep the experience of shame out of awareness.

**Marianna Adler, PhD** is a psychologist and psychoanalyst in private practice in Austin. She is a Supervising and Training analyst with the Center for Psychoanalytic Studies. On the faculty since 2004, she taught psychotherapy students and analytic candidates in Houston and currently teaches in the CFPS Fellowship training program here in Austin. Dr. Adler served as President of ASPP in 2005 and was Chair of Education and Training for ASPP in 2004. She has previously presented papers at ASPP as well as at the Houston Psychoanalytic Society on such subjects as the work of Lacan and French psychoanalysis, mourning and termination, creative inhibitions and the work of Bion. Her paper, “The Blank Page: Creative Imagination and its Inhibitions,” was published in the *Canadian Journal of Psychoanalysis* in 2008. Another of her papers, “Bion and the Analytic Mind” appeared as the lead article in the Round Robin newsletter of Section I (Psychologist-Psychoanalyst Practitioners), Division 39, in 2010. Dr. Adler sees patients for psychoanalysis and psychotherapy and is available for supervision and consultation.

**Learning Objectives:** At the end of the presentation, participants will be able to:
- Identify defenses commonly used to avoid shame
- Identify developmental experiences that can lead to shame states in adult patients

**References**
Jan. 7, 2015  The Therapist’s Use of Self-Disclosure in the Face of Client Vulnerability

Elayne Lansford, PhD  1.5 CE/CMEs (Clinical)

Historically, in psychoanalytic thought, there has been a tendency to see therapist self-disclosure as problematic, crossing boundaries and/or destroying neutrality. However, there are some situations in which therapist self-disclosure is a very powerful tool in healing, especially when a client is in a state of vulnerability or shame. This presentation will address the issue of therapist self-disclosure, looking at the theoretical and research literature on what works and does not work, in the hope that all of us will ultimately have more clarity on how to use self-disclosure in a therapeutic manner. The use of self-disclosure in the treatment of chronic illness will be addressed in many of the case examples.

Elayne Lansford, PhD is a clinical psychologist in private practice in Austin. She received her PhD from the University of Michigan at Ann Arbor in 1982. She did two years of postdoctoral work at the University of Texas Health Science Center in San Antonio. She was an adjunct professor there and at Trinity University in San Antonio. Upon coming to Austin in 1984, she worked for eight years at Austin Regional Clinic, a multi-specialty medical clinic. She has been an adjunct professor at UT-Austin for 29 years, teaching and supervising clinical psychology students, and has been in private practice in Austin for 21 years. She has been a longtime member of the San Francisco Psychotherapy Research Group, and is a regular teacher and presenter at their international conferences. She is a generalist in psychology, working with many types of persons, especially those with depression and bipolar disorders, trauma, marital and interpersonal issues, and chronic illness.

Learning Objectives: At the end of the presentation, participants will be able to:
  - State two reasons why therapist self-disclosure can be helpful when clients are in an emotionally vulnerable state
  - Identify a type of situation where therapist self-disclosure would not be helpful to a client

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Feb. 4, 2015  The Metamorphosis of Walter White in *Breaking Bad:* A Case Study of the Psychodynamics of Shame

Richard Michael, PhD  1.5 CE/CMEs (Applied Clinical)

The popular TV series *Breaking Bad* chronicles the character of Walter White as he transitions from mild-mannered high school teacher into a ruthless kingpin of the methamphetamine trade. Most popular analyses depict the devolution of his behavior over the course of the series as a perplexing descent into psychopathy or as a troubling study in the corruptive lure of power and the ultimate triumph of evil. This presentation will view the development of Walt’s character from the perspective of a psychoanalytic understanding of the operation and vicissitudes of shame as a central feature of his personality structure. Vignettes will be used to illustrate the clinical operation of shame dynamics, and a theoretical context will be provided to support this formulation.

**Richard Michael, PhD** is a Training and Supervising Psychoanalyst at the Center for Psychoanalytic Studies-Houston/Austin, where he is also Chair of the Curriculum Committee. He began his psychoanalytic training at the Boston Psychoanalytic Institute and graduated from the Houston-Galveston Psychoanalytic Institute. In the Boston area, he held clinical, administrative, and supervisory positions at a number of public and private inpatient and outpatient facilities. Before moving to Austin, he had a private practice in Newton, Massachusetts and for years consulted to the staffs of several residential programs for chronically mentally ill patients. Dr. Michael currently maintains a private practice in Austin, providing psychoanalysis; individual, group, and couple psychotherapy; and clinical supervision. He has presented or chaired professional programs for local and national psychoanalytic organizations.

**Learning Objectives:** At the end of the presentation, participants will be able to:

- Identify the psychodynamic operation of shame (as distinct from that of guilt) as it presents clinically
- Apply a theoretical formulation of the operation of shame dynamics in understanding the behavior of a fictional character (Walt) as a case example

**References**


The story of the hero affects our cultural and psychological development. Dr. McCary will use material from World War II, Vietnam, Texas culture, and current movies to enhance our understanding of the uses of the heroic. She will illustrate multiple uses of the hero narrative. One use can lead to a defensive, hypermanic construction that needs an enemy to maintain an identity and avoid feelings of shame or vulnerability. Another use leads to a more complex identity formation, which fosters integrative growth. Kleinian concepts of the paranoid-schizoid position and depressive position help to foster understanding of the dynamics, along with Bion’s concept of group dynamics.

Marsha D. McCary, PhD is a psychoanalytically-oriented clinical psychologist who has a private practice working with adults in individual and couples therapy and providing clinical consultation and supervision. She was trained in British Object Relations, Couples and Family Track, at the Washington, DC School of Psychiatry. Her previous positions include Adjunct Assistant Professor, Department of Psychology, University of Texas at Austin, 1988-2002; Consulting Psychologist, Faulkner Center Substance Abuse Treatment Center, 1988-1993; and psychologist member of the Austin-Travis County Mental Health Policy Advisory Committee, 1988-1991. Dr. McCary is a past president of the Capital Area Psychological Association and a founding member and past president of the Austin Society for Psychoanalytic Psychology. She is a past treasurer of Division 39 (Division of Psychoanalysis) of the American Psychological Association, and still serves on the Division’s Board of Directors. She currently represents Division 39 on the Council of Representatives of the American Psychological Association. In April 2014, she received the Division 39 Leadership Award.

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April 1, 2015  Art as a Healing Transitional Space

Zane Dodd, PhD  1.5 CE/CME/CEUs (Clinical)

This presentation will examine the use of art and creativity to allow a more complete experience and expression of traumatic shame. Various pieces of art over the course of a 3 year treatment will be used to demonstrate the increasing capacity for representation and tolerance of shame states. The increased ability to be aware of these shames states should lead to greater acceptance and integration of the self. The tension between the desire to be seen and not seen as experienced in therapy and expressed in art will be explored. The presentation will consist of lecture (not read from a paper) and slide show.

Zane Dodd, PhD is a licensed psychologist who has a private practice in Southlake, Texas. He received his doctoral degree in counseling psychology from the University of North Texas after completing his predoctoral internship at the Institute for Living in Hartford, Connecticut. He became involved with the Dallas Society for Psychoanalytic Psychology (DSPP) as secretary upon his return and is currently the president of DSPP. His interest in psychoanalytic theory began while working with patients who had experienced significant relational/developmental trauma. Psychoanalytic theory provided the most comprehensive understanding of the complex ways in which such trauma impacted the development of character structure and related symptoms. Dr. Dodd has worked in inpatient hospitals, intensive outpatient hospitals, community clinics, university counseling centers, and now private practice.

Learning Objectives: At the end of the presentation, participants will be able to:

• Discuss the relationship between shame and dissociative self-states.

• Describe how creative work by patients has the ability to provide a transitional and play space that allows for greater access to shame states.

References:


May 6, 2015  Hunger: A Psychological Response to Shame  
Mary B. Burke, LCSW  1.5 CE/CMEs (Clinical)

This presentation will explore the nature of shame, focusing on its archetypal character in human experience. The emergence of “hunger” (in literal and psychological senses) is considered as a response to that experience. We will look at the inner state that provokes the response, the various forms that hunger takes, and the impact of dealing consciously and unconsciously with hungry demands.

Mary B. Burke, LCSW, is a Diplomate Jungian Analyst and has been in private practice for 15 years here in Austin. She is active in the training program for the Inter-Regional Society of Jungian Analysts as a teacher and Training Coordinator for Texas, and as a member of the Admissions and Review Committees having oversight of trainees. Ms. Burke also worked for several years at the University of Texas Mental Health and Counseling Center prior to opening her private practice. She has lectured on general topics and has lectured and led workshops based on her thesis entitled *Greed: Hunger and Individuation*.

**Learning Objectives:** At the end of the presentation, participants will be able to:

- Describe Jung’s theory of archetypes and the collective unconscious (objective psyche), particularly focused on shame
- Describe how psychological hunger arises as a human response to the experience of shame

**References**


CME/CE CREDITS: 1.5 per meeting

CME: These activities have been planned and implemented in accordance with the Essential Areas and policies of the Accreditation Council for Continuing Medical Education through the joint sponsorship of the American Psychoanalytic Association and the Center for Psychoanalytic Studies. APsaA is accredited by the ACCME to provide continuing medical education for physicians. APsaA designates these live activities for a maximum of 12 AMA PRA Category I credits. Physicians should claim only the credit commensurate with the extent of their participation in the activity. IMPORTANT DISCLOSURE: None of the planners or the presenter of this CME program have any relevant financial relationships or conflicts of interest to disclose.

CEs: This program, when attended in its entirety is available for 1.5 continuing education credits per session. Division 39 is approved by the American Psychological Association to sponsor continuing education for psychologists. Division 39 maintains responsibility for this program and its content. Participants must attend 100% of the program in order to receive a Certificate of Attendance. Division 39 is committed to accessibility and non-discrimination in its continuing education activities. Division 39 is also committed to conducting all activities in conformity with the American Psychological Association’s Ethical Principles for Psychologists. Participants are asked to be aware of the need for privacy and confidentiality throughout the program. If program content becomes stressful, participants are encouraged to process these feelings during discussion periods. If participants have special needs, we will attempt to accommodate them. Please address questions, concerns and any complaints to JoAnn Ponder at (512) 496-8244. There is no commercial support for this program nor are there any relationships between the CE Sponsor, presenting organization, presenter, program content, research, grants, or other funding that could reasonably be construed as conflicts of interest. During the program, the presenter will discuss the validity and utility of the content and associated materials, the basis of such statements about validity/utility, and the limitations of and risks (severe and most common) associated with the content, if any.

ASPP is approved by (1) the Texas State Board of Examiners of Professional Counselors (Provider # 1138) to provide continuing education for licensed professional counselors in Texas and (2) the Texas State Board of Social Workers Examiners (Provider # 5501) to provide continuing education for social workers.
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