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FOCUS

Psychoanalysis in the United States: a new challenge

Fredric T. Perlman presents the current threat to psychoanalysis in the USA, and strategies to overcome it.

Psychoanalysts in the American Psychoanalytic Association (APsaA) and the Confederation of Independent Psychoanalytic Societies (IPS) are working together to confront a developing crisis that threatens the future of psychoanalysis in the US. A small group of practitioners, identifying themselves as psychoanalysts, has mounted a vigorous campaign to promote the enactment of licensing laws that would establish psychoanalysis as an autonomous profession. They have succeeded in Vermont, New Jersey and New York. Unfortunately, the profession these laws create bears little resemblance to psychoanalysis as we have known it.

We are pressing the IPA to produce a new practice credential to help us differentiate our professional community from the community of 'psychoanalysts' created by the new laws. Here, I outline these events, describe the new laws, assess the threat they pose and sketch the main elements of our response.

Psychoanalysis in the United States

Psychoanalysis in the US is performed by practitioners from diverse backgrounds in multiple and overlapping professional associations. It was not always so. Psychoanalysis developed in the US as a medical practice, regulated by the APsaA, which until recently restricted training to physicians (Wallerstein, 1998). APsaA's orthodoxies eventuated in the proliferation of alternative institutes, many of which were also prone to orthodoxies and splits (Eckardt, 1979). There are now about 75 psychoanalytic training institutes in the New York area alone, only five of which are IPA institutes. Of the remainder, some offer training programmes similar to those of IPA institutes, but none maintains a four session per week frequency requirement for training analysis and control cases. This pattern is also evident elsewhere in the US.

This diversity of analytic training is paralleled by a growing diversity in the professional backgrounds of American psychoanalysts. In the early days, virtually all analysts were physicians. When social workers and psychologists formed their own training institutes, they restricted training to licensed mental health professionals. Then a number of small institutes began offering analytic training to applicants with no

professional background in mental health. In the late 1980s, APsaA also opened enrolment to applicants from outside the mental health professions, as did some IPA and mainstream institutes. These analysts now comprise a very small percentage of IPA and mainstream groups, but a very large percentage of the non-traditional groups.

In this report, I differentiate three groups of institutes: 'IPA institutes' (APsaA and IPS institutes), 'mainstream' institutes (whose training programmes are similar to those of IPA institutes but require only three sessions per week for training analysis and control cases); and 'non-traditional' institutes (offering training in Jungian, Adlerian or Modern Psychoanalytic schools of thought, most of which maintain no frequency requirements).

Most institutes established outside APsaA formed their own psychoanalytic societies, some of which joined with others to establish professional associations, for example, the American Academy of Psychoanalysts (AAP), a medical group formed by physicians of the culturally oriented Horney and Sullivan schools. Adlerian, Jungian, Modern Psychoanalytic, Relational and Self-psychological groups also formed their own national and international professional associations. Psychologists and social workers formed their own national psychoanalytic organizations, Division 39 (Div. 39) of the American Psychological Association and the National Membership Committee on Psychoanalysis (NMCOP) of the National Federation of Clinical Social Work Societies. While most of these organizations sought to promote their own institutional, academic and scientific agendas, one association formed to advance a more radical set of goals.

The National Association for the Advancement of Psychoanalysis
The National Association for the Advancement of Psychoanalysis (NAAP) was founded in 1972 by twenty psychoanalytic groups that sought to create a single professional association strong enough to promote their interests as 'psychoanalysts'. The founding institutes comprised mostly 'non-traditional' institutes. None were affiliated with the IPA, APsaA or any mainstream group. A large proportion of their members had no credentials as mental health professionals except for their analytic training. NAAP's agenda was to fortify and enhance its members' social authority and recognition as psychoanalysts, and to secure licensing laws for its members.

NAAP's primary mission was to establish psychoanalysis as a separate profession, with its own professional credentials and licensing. It established minimum standards for training and certification, and created the American Board for Accreditation in Psychoanalysis (ABAP) to accredit training institutes and to certify practitioners meeting their criteria

as 'psychoanalysts'. The minimum requirements for ABAP certification in psychoanalysis include a master's degree in any discipline, 300 hours of personal analysis, 150 hours of supervision, 300 hours of clinical experience and 36 credit hours of coursework. ABAP set no frequency requirements for training or control analysis, and no qualifications beyond certification and five years' experience for training and control analysts (NAAP, 2002).

In the early 1980s, NAAP attempted to establish itself as the sole accrediting organization for psychoanalysis in the US, applying for this status to the Federal Education Department as well as to the quasi-governmental Council on Postsecondary Accreditation and its successor organization, the Commission on the Recognition of Postsecondary Accreditation. This prompted the IPA and mainstream groups to form the Psychoanalytic Consortium, a coalition comprised of APsAA, the AAP, Div. 39 and NMCOP. The Consortium mounted an effective opposition, and NAAP abandoned this effort in 1995 (Basseches, 1995).

Unable to achieve its goals on the national level, NAAP persisted in a second strategy, aimed at securing state licenses for ABAP-certified psychoanalysts. In the US, all professional licensing is a function of state governments, each of which develops its own licensing laws for each profession. NAAP began lobbying in individual states and in 1993 the state of Vermont enacted legislation establishing the first state certification for psychoanalysts. The Vermont law set two requirements: a master's degree (or equivalent) in any field of study, and a certificate or doctoral degree in psychoanalysis from a psychoanalytic institute accredited by a national psychoanalytic association, such as ABAP. The Vermont law restricts the practice of psychoanalysis to 'certified psychoanalysts' and to similarly trained psychoanalysts who are otherwise licensed in 'exempt' professions (medicine, osteopathy, social work, psychology, mental health counselling, and family and marital therapy).

In July 2000, a second law for psychoanalysts was enacted in New Jersey. The New Jersey law, which will be implemented in summer 2004, follows the Vermont statute in key respects. It establishes a protected title ('state certified psychoanalyst') with eligibility requirements similar to the Vermont standards, that is, with no educational requirements beyond those set by ABAP. The New Jersey law, however, does require a state-administered examination in psychoanalysis in order to be certified. In this respect the New Jersey law is more stringent than the Vermont law. In New Jersey, however, state certification is purely optional. Uncertified individuals may practise psychoanalysis in New Jersey as long as they make no claim to be 'state certified'. Hence, the New

Jersey law provides an official credential, but imposes no restrictions on those who do not hold it.

In 2003 a more restrictive 'licensing' law was enacted in New York, the second most populous state in the nation. The law goes into effect in January 2005. Like the earlier laws, the New York law requires a master's degree in any field of study and a certificate from an approved psychoanalytic institute. The law does not require that the institute be accredited by a psychoanalytic association, but specifies that psychoanalytic training shall 'include coursework substantially equivalent to coursework required for a master's degree in a health or mental health field'. The law follows the ABAP model in its supervision, personal analysis and (lack of) frequency requirements, and requires no special qualifications for training and control analysts. It also requires that applicants pass a state-administered examination (as in New Jersey), and that applicants must have at least 1,500 hours of 'supervised clinical experience', satisfactory to the state regulatory body (but not necessarily in psychoanalysis or under institute aegis) in order to be eligible for the licence.

The New York law restricts the practice of psychoanalysis to 'licensed psychoanalysts' and practitioners licensed in 'exempt' professions (social work, psychology, medicine and nursing). It also includes a provision prohibiting 'licensed psychoanalysts' from treating serious mental illnesses without medical oversight. Section 8407 of the law reads:

For the purposes of this section 'serious mental illness' means schizophrenia, schizoaffective disorder, bipolar disorder, major depressive disorder, panic disorder, obsessive-compulsive disorder, attention-deficit hyperactivity disorder and autism.

Although the law imposes no new regulations upon psychoanalysts in the exempt professions, it alters the terminology of how professionals may represent themselves. Only practitioners licensed under the new law may represent themselves as 'licensed psychoanalysts'. Psychoanalysts in exempted professions may identify themselves as 'psychoanalysts' but are prohibited from representing themselves as 'licensed psychoanalysts' unless they obtain the new licence and become subject to its restrictions. Obviously, few psychoanalysts in exempted professions would even consider such a step.

Despite the restrictions, the new laws will have value to those analysts who are otherwise unlicensed. The new laws will grant these practitioners a licence, with all the traditional benefits of licensing, including the possibility that their

services will be covered by insurance companies. However, the value of the licence will be limited by the minimal character of the standards it sets and, in New York, by the restrictions it imposes on practice. This must concern us if we wish to support our IPA colleagues who will need to obtain these licences. However, our larger concern must be for our profession as a whole. The new laws pose a significant danger to psychoanalysis as we know it. In order to assess this, I set the matter in a sociological context.

Psychoanalysis and the professions

Sociologists employ the term 'profession' to denote an occupational group with specific characteristics: the possession of specialized skills based upon an abstract knowledge base, a high degree of internal organization, high standards for competence and ethical conduct, the organizational means to enforce its standards, and a high measure of social authority within the wider community, typically formalized by licensing laws and a protected title (Jackson, 1970).

A profession develops when an occupational group possesses a specialized function based upon esoteric knowledge. A prospective client cannot measure a practitioner's competence, assess the suitability of a proposed professional service, or even judge the skill with which it has been performed. Hence the norm of 'caveat emptor' ('let the buyer beware') cannot apply. Both the prospective client and the practitioner therefore need an institutional structure that will enable the client to trust the practitioner's claims to competence and ethical conduct. Professionalization fulfils this need by situating the transaction between practitioner and client within a wider set of collective arrangements developed between the profession and the society as a whole.

These arrangements form a 'corporate bargain' (Goode, 1969) between the occupational group and the society. The profession establishes educational standards and admission requirements, standards for practice and a code of professional ethics, and guarantees to police its own membership to ensure that its members meet these standards. The profession as a whole certifies its members to the public so that the public can identify them by reference to their professional credentials. The containing community reciprocates by granting the profession a legal monopoly through licensing laws. Professions typically protect and promote their social standing and legal privileges by enforcing adherence to stricter educational and ethical regulations than those required by licensing laws.

The establishment and maintenance of this 'corporate bargain' is the essence of professional status. Professional status is fundamentally a collective rather than an individual status. The individual professional can only thrive when the profession thrives, and the profession can only thrive when it fulfils its collective responsibilities with regard to training, competence and conduct, and is able to effectively identify its members to the public.

And herein lies our problem.

The new laws undermine our capacity to exercise our responsibilities as a profession. They change the meaning of the title 'psychoanalyst' by conferring it upon an occupational group which is outside our professional community and over whom we have no regulatory authority. By conferring the title 'psychoanalyst' on practitioners whose training is dramatically dissimilar from our own, whose practices and theories we may not recognize as psychoanalytic in character, and whose clinical capabilities are apt to be very different from ours, the new laws create a confusion of professional identities that threatens the 'corporate bargain'. We can neither establish nor enforce any standards for the new profession of 'psychoanalysis'. Moreover, we have no reliable means to enable the public to differentiate us from those who share our title but not our training, skills and standards.

In New York State, where there are nearly 900 analysts trained in IPA institutes, this problem will be compounded by the fact that practitioners who meet the least exacting requirements for licensure will be entitled to represent themselves as 'licensed psychoanalysts', while practitioners with far more training and experience will only be permitted to identify themselves as 'psychoanalysts'.

This confusion poses a danger to the public as well. Prospective patients, drawn to psychoanalysis by the social authority and prestige of our profession, may think they are consulting us when they are actually calling upon an entirely different group. And prospective patients who know little about psychoanalysis, may view an 'official' state licence as an assurance of competence, inspiring a level of trust that may not be warranted. Some may question our credentials when they discover that we are only 'psychoanalysts' while others are 'state-certified' or 'licensed psychoanalysts'. The newly licensed psychoanalysts will surely benefit from our reputation as a profession, established over a century of development, but how will we be affected by the reputations they establish? We are inextricably tangled up in each others' fates, unless we differentiate ourselves.

Freud understood that it was necessary to establish adequate standards for training and practice, and to differentiate trained psychoanalysts from others (Freud, 1910, pp. 226-7, 1914, p. 43). Unfortunately, American psychoanalysts tended to identify with their respective disciplines rather than with psychoanalysis as a separate profession. Hence, while we developed many of the attributes of a profession, we did not seek licensure as psychoanalysts. This left us vulnerable.

A plan for action

American psychoanalysts are slowly responding to the new conditions. The Psychoanalytic Consortium has agreed to establish minimum standards for psychoanalytic training based on the training policies of mainstream institutes (three sessions per week frequency requirement) and has formed an independent organization called the Accreditation Council for Psychoanalytic Education (ACPE) to accredit psychoanalytic institutes. APsaA will maintain its own higher standards, but it has supported ACPE criteria in order to establish minimum national standards that will be upheld by the majority of psychoanalytic groups in the US.

American IPA institutes have also responded. IPS and APsaA have both formed committees to address these issues, and have recently formed a Joint Committee on Licensing and Credentialing. These committees are pursuing a broad two-track strategy.

The first track is legislative in character. We are developing plans to work on a state-by-state basis to promote better legislation in unaffected states, while seeking to modify the impact of enacted laws by influencing the regulations developed by the state boards, which are responsible for implementing them.

The second track is a credentialing track, aimed at enabling the public to differentiate IPA analysts from other analysts. We have proposed that the IPA develop a new credential for IPA analysts. The IPA was initially formed to promote this differentiation (Freud 1910, pp. 226-7, 1914, p. 43) and is still the body that is best able to fulfil it. We believe that an international credential issued by the IPA would be distinctive and authoritative, representing the highest standards for psychoanalytic practice in the world and supported by the oldest and largest psychoanalytic community in the world.

The proposed IPA credential would help us to restore a meaningful 'corporate bargain' with the larger society. It would help us to better identify ourselves to the public and to communicate the character of our professional training and

expertise, while enabling the public to differentiate us from other practitioners sharing our title. This would protect both ourselves and the public, and enhance our efforts to secure more realistic and responsible licensing laws in the future.

Appendix: Three state laws

New Jersey Psychoanalysts State Certification Act. New Jersey law, Title 45, Chapter 14BB.

New York State Education Law, Title VIII, Article 163.

Vermont State Statutes. Title 26, Chapter 77.

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