

Learning objectives for supervisory evaluation - At each phase of training, candidates will be able to do the following with a patient in psychoanalysis:

	1 ST YEAR	MID-LEVEL	SENIOR
I. ASSESSMENT/ DIAGNOSIS/ TREATMENT PLANNING	<ul style="list-style-type: none"> • Begin to evaluate patients for psychoanalysis with attention to diagnosis and indications/ suitability criteria for this treatment. Discuss treatment plans with patients. • With help of supervisor, identify psychotherapy patients for whom psychoanalysis is the treatment of choice and discuss this option with them • Assess potential analysands for major psychopathology (e.g. depression, anxiety, eating disorders, substance use disorder) and (when applicable) discuss treatment options including combination treatment with medication 	<ul style="list-style-type: none"> • Show increased ability to make characterological/ structural diagnoses. Evaluate suitability for psychoanalysis, resistance to treatment and motivation. • Show increased comfort and ability in identifying psychotherapy patients for psychoanalysis, discussing psychoanalysis as a potential treatment, and converting patients to psychoanalysis • Continue to assess potential analysands for Axis I pathology and discuss treatment options • With supervisor's help, conduct ongoing assessment of Axis I pathology and suitability for psychoanalysis during an analysis and modify treatment plan as appropriate. 	<ul style="list-style-type: none"> • Independently assess patients for psychoanalysis, making accurate characterological/structural diagnoses and evaluating suitability. • Independently identify private patients for psychoanalysis, confidently discuss psychoanalysis as a potential treatment and convert patients to psychoanalysis • Independently assess potential analysands for Axis I pathology and confidently discuss treatment options • Conduct ongoing assessment of major psychopathology and suitability for psychoanalysis during an analysis and modify treatment plan as appropriate.
II. ESTABLISHING TREATMENT/ WORKING ALLIANCE	<ul style="list-style-type: none"> • Understand the concept and importance of the psychoanalytic frame • Establish the frame of the analysis (fees, time, couch) and notice resistances to the frame • Begin to establish a working alliance, and discuss this in supervision • Understand the concept of technical neutrality and discuss this in supervision 	<ul style="list-style-type: none"> • Establish and/or maintain the frame of the analysis and confront/interpret resistances to it and identify problems • Establish and maintain a working alliance and recognize when one is present • Begin to develop a psychoanalytic stance/attitude that includes free floating attention, technical neutrality, and abstinence 	<ul style="list-style-type: none"> • Independently maintain the frame of the analysis and confront/interpret resistances to it • Independently maintain the working alliance and interpret resistance to it • Consistently and independently maintain a psychoanalytic stance (as in mid-level)
III. EMPATHY/ ANALYTIC LISTENING	<ul style="list-style-type: none"> • Begin to develop a "psychoanalytic stance" including the capacity for psychoanalytic listening and for choosing interventions that facilitate deepening of the psychoanalytic process • Begin to assess and follow the patient's affect during sessions • Begin to assess the intrapsychic level at which a patient is working, what a patient will be ready/able to hear, and what is likely to deepen the material • Begin to listen for/recognize dominant unconscious themes in a session • Begin to convey understanding via psychoanalytic interventions • Begin to think flexibly/imaginatively while listening to patients 	<ul style="list-style-type: none"> • Demonstrate increased capacity for psychoanalytic listening and for choosing interventions that facilitate deepening of the psychoanalytic process • Demonstrate increased ability to assess and follow the patient's affect during sessions • Demonstrate increased ability to assess the intrapsychic level at which a patient is working, what a patient will be ready/able to hear, and what is likely to deepen the material • Demonstrate increased ability to listen for and recognize unconscious themes in a session • Demonstrated increased ability to convey understanding via psychoanalytic interventions • Demonstrate increased ability for flexible, imaginative thinking while listening to patients. 	<ul style="list-style-type: none"> • Consistently maintain a psychoanalytic stance. • Consistently and accurately assess and follow the patient's affect during sessions • Consistently and accurately assess the level at which a patient is working, what a patient will be ready/able to hear, and what is likely to deepen the material • Consistently and accurately recognize unconscious themes in a session • Consistently convey understanding via psychoanalytic interventions • Consistently think flexibly and imaginatively while listening to patients

<p>IV. TECHNIQUE</p>	<ul style="list-style-type: none"> • Recognize the following while reviewing material in supervision: <ol style="list-style-type: none"> 1. Free association 2. Unconscious fantasy 3. Dominant resistances 4. Dominant transferences 5. Dominant countertransferences 6. Moments in the process when the patient's understanding or associations deepen in response to analytic intervention/interaction 7. Shifts in defensive structure and object relationships in response to analytic interventions (therapeutic action) • Begin to understand the concepts of technical neutrality and abstinence 	<ul style="list-style-type: none"> • Begin to recognize 1-7 independently • Increasingly make tactful, well-timed interventions that reflect the patient's current level of understanding, demonstrate technical neutrality and abstinence, and are likely to deepen the material • With supervisor's help, use recognition of countertransference to identify blind spots and adjust technique • Understand confrontation, clarification, and interpretation and their applications • Facilitate free association and begin to learn dream interpretation • With supervisor's help, begin to recognize working through • Construct and make interpretations that address resistance, dreams and transference – at least some of which link material to genetic antecedents • Begin to understand the concept of genetic reconstruction and discuss possible hypotheses in supervision • With supervisor's help, begin to recognize enactments • (When applicable) Recognize the transference ramifications of combined treatment with psychoanalysis and medication and make appropriate assessments and treatment recommendations 	<ul style="list-style-type: none"> • Independently recognize 1-7 • Independently recognize countertransference through self-analysis during and after sessions and use to address blind spots and adjust technique • Apply confrontation, clarification and interpretation in an appropriate way • Confidently conduct dream interpretation and facilitate free association and association to unconscious fantasy • Consistently make tactful, well-timed interventions that the patient's current level of understanding and that are likely to deepen the material • Independently recognize working through • Independently construct and make interpretations (as in mid-level) • Use genetic reconstruction in the treatment when applicable • Independently recognize enactments • (When applicable) Independently conduct ongoing combined treatment, with ongoing assessment of major psychopathology and attention to related transference/ countertransference • (When applicable) Recognize characteristics of the treatment that indicate readiness for termination and begin to discuss termination with the patient
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<p>V. FORMULATION/ WRITING</p>	<ul style="list-style-type: none"> • Write evaluations of patients with attention to analyzability, diagnosis, psychodynamic formulations and treatment recommendations. 	<ul style="list-style-type: none"> • Construct a beginning formulation that addresses psychopathology, character structure, movement in the case, unconscious fantasy, resistances and transference/countertransference paradigms • Begin to recognize the elements of the case that indicates the phase of the case • Write an annual review that includes all important elements (as above) and demonstrates ability to write vividly about microprocess 	<ul style="list-style-type: none"> • Construct a comprehensive formulation of the macroprocess that addresses all previously mentioned elements, as well as enactments and structural change, and that puts the movement of the case in a theoretical framework and hypothesizes about therapeutic action • Independently understand the phase of the case • Write an annual review of the case that includes description of the micro and macroprocess and an evolving understanding of the arc of the analysis
<p>VI. SUPERVISION</p>	<ul style="list-style-type: none"> • Use supervision to discuss patient evaluations, diagnoses, treatment plans, and countertransference. Develop the flexibility to apply what is discussed in supervision to clinical situations. 	<ul style="list-style-type: none"> • As before – plus use of supervision to discuss modes of formulating the case • Demonstrate an evolving relationship with the supervisor in which candidate is increasingly able to develop ideas independently and to use supervisor for discussion rather than direction 	<ul style="list-style-type: none"> • As before – plus use of supervision to construct a view of the macroprocess • Predominantly use supervision for discussion rather than direction