



AAPDPP

The American Academy of Psychodynamic Psychiatry and Psychoanalysis

CALL FOR PAPERS

64rd Annual Meeting
Thursday, April 23 – Saturday, April 25, 2020
Philadelphia, Pennsylvania

Psychodynamic Psychiatry and Relationships

Program Co-Chairs: **David L. Lopez, MD and Jessica Eisenberg, MD**
Chair of the Scientific Program Committee: **Joseph R. Silvio, MD**
CME Committee Chair: **Silvia W. Olarte, MD**

The members of the *American Academy of Psychodynamic Psychiatry and Psychoanalysis* understand Psychodynamic Psychiatry as a discipline that has emerged from a fusion of psychoanalytic and extra-psychoanalytic psychology, neuroscience, and academic psychiatry” (Psychodynamic Psychiatry 41(4) 511-512 2013).

Whether we are describing interactions between mother and infant, parent and child, teenager and group, adult and group, or romantic and sexual partners, most psychodynamic phenomena occur in the context of relationships. It has been the purview of psychodynamic clinicians to develop a wide array of observations and conclusions that derive from relationships. Relationships and psychodynamics are the focus of this meeting.

Transference, countertransference, and the therapeutic relationship as a whole are considered manifestations and reflections of relationships that occurred early in life. The theoretical understanding and clinical proficiency that students of psychodynamics can attain in this meeting will enhance their ability to engage patients, understand their immediate and historical psychosocial reactions, help patients navigate complex life events, as well as care for patients with long standing mental illness.

The ***American Academy of Psychodynamic Psychiatry and Psychoanalysis*** is the APA affiliate society that provides this forum for psychiatrists and collaborates with social workers, teachers, and psychologists. The Academy is also a member society of the World Psychiatric Association. Our annual meetings provide an opportunity to interact in a collegial and enriching relaxed environment. There will be many opportunities for discussions since our presentations always leave ample time for audience participation. This meeting will also provide multiple opportunities to meet and socialize with experts in psychodynamic psychiatry.

Philadelphia is the birthplace or home of some of the finest leaders and thinkers in American history, and is also the city that fostered development of the ideas that constitute the foundation of our system of governance. In the mid-twentieth century Philadelphia became the bastion of many of the seminal developers of psychiatry and psychoanalysis. Our Academy now has the opportunity to provide an engaging and interesting gathering in this superb cultural and academic setting.

The AAPDPP leadership, its program committee, and the co-chairs of this 64rd Annual Meeting in Philadelphia, **April 23 – April 25, 2020**, wish to invite you to help us elucidate how daily work with patients is framed, informed, and inspired by Psychodynamic Psychiatry and relationships.



The Program Committee will review proposals for:

- Panels
- Paper Sessions
- Symposia
- Workshops

Please note that under the system of accreditation designed by the Accreditation Council for Continuing Medical Education (ACCME), the purpose of CME is to improve physician competence, physician performance, or patient outcomes. This is accomplished by identifying gaps in physicians' competence, skills, or performance, and offering medical education to overcome those gaps.

Gap #1: Improving treatment of patients by:

Attaining sufficient knowledge of psychodynamic principles and the ability to apply this knowledge; and enhancing the ability to integrate dynamic principles, psychopharmacology, and neuroscience in clinical practice

Needs derived from the gap above:

To learn about development of therapeutic alliances; transference and counter-transference; the handling of challenging situations; and practical applications of psychoanalytic theories; and to learn about complex pathologies, neuroscientific advances, pharmacologic treatments, and medical conditions and their implications / ramifications for psychodynamic psychotherapy

Gap #2: Enhancing training of residents and early career psychiatrists.

Needs derived from this gap:

To learn new ways of engaging residents and training them in the complex theories and techniques of psychodynamic psychotherapy; and to foster learning of complex theories and techniques of psychodynamic psychotherapy by early career psychiatrists

When completing the abstract form, you will be asked to indicate which of these gaps your submission addresses. All presentations must address at least one of the specified needs.

Submissions must include objectives for improving knowledge, skills, or performance in at least one of the following areas:

1. **Service**, e.g. treatment of individual patients, development of service delivery systems and enhancement of consulting skills;
2. **Teaching**, including new methods of training psychodynamic psychiatrists and clarification of the functions of a psychodynamic psychiatrist;
3. **Research**, gaining access to new scientific data as well as improved data in areas that form the basis for practice of the discipline.

Submitters must ensure that materials do not violate confidentiality, privacy, or copyright. All necessary IRB approvals must be obtained.

**Online abstract submission will be available in early June.
Watch your email or the AAPDPP website (www.AAPDPP.org) for instructions.**

Deadline for abstract submissions is Midnight on September 15, 2019.

. For further information, please call the Academy Office at 888-691-8281.

TYPES OF PRESENTATIONS

The Academy expects the results of its CME program to be improvement in competence or performance. Definitions: “Competence” refers to knowing how to do something. “Performance” is what a psychiatrist would do in practice if given the opportunity.

- **Panel:** Presentations by 2-4 individuals on a single theme with a discussant.
- **Symposium:** Similar to panel but usually with additional speakers and a longer time frame.
- **Workshop:** Presentation on a single theme with 50% or more audience participation and discussion.
- **Paper Session:** Presentations of written papers by 2-4 presenters with a discussant, grouped by topic but not necessarily closely related in content.

Submissions that do not include signed financial disclosure forms from all presenters are not considered complete and will not be submitted to the Program Committee. Email submissions will be acknowledged by return email. If an email acknowledgement is not received, **DO NOT ASSUME** the submission has been received.

GUIDELINES AND INSTRUCTIONS FOR ABSTRACT SUBMISSION

LCD AND POWERPOINT. Primary author/presenters are responsible for loading all participants' presentation on one medium (e.g. disk) or computer. Any time lost in “booting up” the computer and program will be taken out of the time allotted for your presentation. **PRESENTERS ARE RESPONSIBLE FOR BRINGING THEIR OWN COMPUTERS. COMPUTERS WILL NOT BE PROVIDED BY THE ACADEMY.**

SLIDES AND OTHER AUDIOVISUAL AIDS. In order for the audience to be able to read your slides from any point in the meeting room, **there should be no more than 8 lines of text per slide.** Please avoid the use of long paragraphs or lists.

VIDEO. Please be sure that the audio and visual content are clear. All projectors at the meeting are equipped for sound for your computer. Professional editing of audiovisual materials is recommended. **No video allowed for scientific papers as they are expected to be publishable papers.**

DURATION OF PRESENTATIONS. You must time your presentation BEFORE delivery. The moderator will adhere to the time allotted for your presentation. Rule-of-Thumb: Allow two (2) minutes per double-spaced page, and then cut your paper by one page for good measure.

RECORDING OF PRESENTATIONS. All sessions will be recorded by a professional recording firm. The tapes will be sold during and after the meeting.

PUBLICATION OF PAPERS. The Academy's journal, *Psychodynamic Psychiatry*, has the right of first refusal on all papers accepted for the Annual Meeting. Scholarly content; style and format; appropriate research design and statistics; clear tables and figures; complete and accurate referencing (preferably in the *Journal* format); etc. are important.

RETURN OF MATERIALS. No manuscripts, abstracts or other materials submitted will be returned.

QUESTIONS AND ANSWERS. Questions should be multiple choice. Do not use combination answers such as “a and b are correct” or questions that ask for the only incorrect response. No true/false questions. Be sure to include answers to the questions.

REFERENCES. All references should conform to the style of the Psychodynamic Psychiatry.

Abstracts that do not contain complete information or that do not conform to the requirements herein will be returned to the authors. The Program Committee reserves the right to make minor editing changes for clarification without consulting with the author.

FINANCIAL DISCLOSURES

It is the policy of the American Academy of Psychodynamic Psychiatry and Psychoanalysis (AAPDPP) to insure balance, independence, objectivity, and scientific rigor in all its individually sponsored or jointly sponsored educational programs. In order to comply with the ACCME’s Updated Standards for Commercial Support, the AAPDPP requires that anyone who is in a position to control the content of an educational activity discloses all relevant financial relationships with any commercial interest pertaining to the content of the presentation. Should it be determined that a conflict of interest exists as a result of a financial relationship of a planner of the CME activity, the planner must recuse himself or herself from the planning for that activity or relevant portion of that activity. Should it be determined that a conflict of interest exists as a result of a financial relationship of a proposed presenter at a CME activity, the proposed presenter and the Education Committee must agree on a method to resolve the conflict. Refusal to disclose a conflict or the inability to resolve an identified conflict precludes participation in the CME activity.

CONTENT VALIDITY

Recommendations involving clinical medicine in a CME activity must be based on evidence that is accepted within the profession of medicine as adequate justification for their indications and contraindications in the care of patients. All scientific research referred to, reported or used in CME in support or justification of a patient care recommendation must conform to the generally accepted standards of experimental design, data collection and analysis.