

PSYCHOANALYSIS IN CHINA

Edited by
David E. Scharff and Sverre Varvin



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ABOUT THE EDITORS AND CONTRIBUTORS

(Editors' note: All Chinese names are listed with family name first, even when the contributor lives in the West or in Taiwan, where family names are usually listed second in the English-language tradition. Alphabetisation is by family name.)

Chen Jue, MD, PhD. Chief psychiatrist, registered clinical psychologist, and registered psychotherapy supervisor, Chinese Psychological Society; chief, Psychosomatic Unit and vice-director, Department of Clinical Psychology of Shanghai Mental Health Center; board member, Chinese Psychoanalysis Committee; board, Family Therapy Group, Psychological Counseling and Psychotherapy Committee. Member, Consortium of Institutes on Family, Asian Region; member of American Group Psychotherapy Association. Editorial boards, *International Journal of Eating Disorders* and *Journal of Eating Disorders, Psychoanalysis and Psychotherapy in China*.

Irmgard Dettbarn, PhD. Psychologist, private practice in psychoanalysis, Berlin, Germany. Member of the German Psychoanalytical Association/IPA. Interim training analyst in Beijing 2007–2013. Former president: Berliner Berufsverband Psychologischer Psychoanalytiker (BBPP). Lecturer Karl-Abraham-Institut-Berlin. Child and adult analyst Zürich/Switzerland. Lecturer Université de Nancy/France. Clinical psychologist, Shalvata Mental Health Center, Tel Aviv University/Israel. Lecturer Kindergartenteacherseminar, Berlin. Teacher, secondary school, Berlin. Special interest: Ethnopschoanalysis. Field-stay in a nomad-society, the Himba Tribe Kaokoland/Namibia.

Lana Fishkin, MD. Psychiatrist and psychoanalyst in private practice in Philadelphia, PA. She is on the faculty of the Psychoanalytic Center of Philadelphia. She is a clinical assistant professor

of psychiatry at Thomas Jefferson University. She is on the board of directors of CAPA, the China American Psychoanalytic Alliance and the director of the CAPA Treatment Program, which arranges low fee Skype psychoanalysis and psychotherapy for its students in psychodynamic psychotherapy training.

Ralph Fishkin, DO. Secretary, American Psychoanalytic Association and previously councilor-at-large of the APA for several terms. Ralph is a director of CAPA, the China American Psychoanalytic Alliance, and teaches in its programme. He is a faculty member and past president of the Psychoanalytic Center of Philadelphia, and clinical associate professor of psychiatry at Thomas Jefferson University. He is the author of over twenty psychiatric and psychoanalytic publications, and practises in Philadelphia.

Gao Jun, PhD. Assistant professor, Department of Psychology, School of Social Development and Social Policy, Fudan University and a licensed psychotherapist of Chinese Psychological Society. She received her PhD degree in clinical psychology from the Department of Psychology, Peking University in 2010. She began training in psychodynamic therapy in 2006.

Alf Gerlach, MD. Sociologist and training analyst, Mainz (DPV) and Saarbruecken (DPG) psychoanalytic institutes; chair, German Society for Psychoanalysis, Psychotherapy, Psychosomatics and Depth Psychology (DGPT) 2001–2003. President, German–Chinese Academy for Psychotherapy. Member and former chair, China Committee, International Psychoanalytical Association. Head, Psychoanalytic Psychotherapy Training Program, Shanghai Mental Health Center. Books in German on ethnopsychanalysis, and with M. Elzer, *Psychoanalytic Psychotherapy. A Handbook*, (2013) and with S. Varvin and M. T. Hooke, *Psychoanalysis in Asia. China, India, Japan, South Korea, Taiwan* (2013).

Siri Erika Gullestad. Professor of clinical psychology, Department of Psychology, University of Oslo, Norway, where she is the leader of clinic for dynamic psychotherapy. She is a training and supervising analyst, International Psychoanalytical Association; former president, Norwegian Psychoanalytic Society, and former head of Department of Psychology in Oslo. Author of numerous books and articles on psychoanalysis.

Antje Haag, MD. Psychoanalyst (IPA); former vice-director of the Department of Psychosomatic Medicine and Psychotherapy, University of Hamburg. Taught psychoanalytically oriented psychotherapy in the People's Republic of China from 1988–2007. She received the “Silver Magnolia Award” of the City of Shanghai in 2007. Published the book *Versuch über die Seele Chinas—Eindrücke einer Psychoanalytikerin* in 2011.

Mette Halskov Hansen. Professor in China Studies, University of Oslo. She has mainly published in the fields of ethnic relations, internal migration, and colonisation, and, most recently, education and processes of individualisation in Chinese society. Co-edited *iChina: The Rise of the Individual in Modern China* (NIAS Press 2010). Her forthcoming book is about individualisation in Chinese state schools.

Huang Hsuan-Ying, MD, PhD. Post-doctoral fellow, Australian Centre on China in the World, Australian National University. He received his MD and psychiatric training at National Taiwan University and later studied medical anthropology at Harvard University. His research examines urban China's recent "psycho-boom," or the rise of western psychotherapy, with an emphasis on its broadly conceived psychoanalytic branch.

Li Ming, MD. Instructor of psychology and counselling, School of Humanities and Social Sciences, Beijing Forestry University. Graduate of Beijing University of Chinese Medicine, specialising in oriental psychology and psychoanalytic therapy. Member, China American Psychoanalytic Alliance (CAPA) and San Diego Psychoanalytic Society and Institute. Has published extensively on psychology, environmental sustainability, and mental health. Visiting Scholar, Yale University, 2011. Supervisor, China Central Government Personnel Mental Health Service Center.

Li Yawen, PhD. Attending physician, Beijing Anding Hospital of Capital Medical University in Beijing. Advanced IPA psychoanalytic candidate.

Lin Tao, MD. Qualified psychoanalyst and direct member, International Psychoanalytical Association. Associate chief psychiatrist, Anding Hospital, Beijing. Member, China Committee of IPA. Member, IPA Work Group on Couple and Family Psychoanalysis. Guest member, British Psychoanalytical Society. Standing member, Psychoanalytic Committee of the Chinese Association for Mental Health.

Liu Yiling. IPA psychoanalyst, Beijing. Studied in Sino-Norway psychoanalytic psychotherapy training programme for eight years before IPA training. Worked in Psychological Counseling Center in Beijing Institute of Technology for ten years, and was a volunteer counsellor in *China Youth Daily* for six years. Took part in the 46th and 47th Congresses of IPA, presented a paper at the first IPA centenary conference in Beijing in 2010, and another at Mexico IPA Congress in 2011.

Pang Cuiming, PhD in media studies (2011). Associate professor in China Studies, University of Oslo. She has written about internet politics and culture in China, and is currently writing a monograph on the emergence of internet communities in China.

Tomas Plänklers, PhD. Member, Sigmund Freud Institute, Frankfurt/Main (Research Institute for Psychoanalysis and its Application); private practice. Since 2000 teaching psychoanalytic psychotherapy and psychoanalysis in China; consultant member, IPA China Committee. Main scientific work in the fields of clinical and social psychoanalysis. Editor and author of many clinical and social-psychological publications, including books on the psychological consequences of Russian and East German totalitarianism. Most recently edited *Landscapes of the Chinese Soul: The Enduring Presence of the Cultural Revolution (1966–1976)* (German edition 2010, English edition 2013.)

Qi Wei, MD. Finished psychiatric residency at Shanghai Mental Health Center in 2012. Master's Degree in Psychology, Teacher's College, Columbia University, research assistant, Columbia University's Mailman School of Public Health and NYU Langone Medical Center.

Author, article on “Psychoanalysis in China” in the *International Journal of Applied Psychoanalytic Studies* (2011).

Qiu Jianyin, MD, PhD. Consultant psychiatrist. Secretary-general and standing committee member, Women’s Mental Health Association of the Chinese Society of Psychiatry; secretary-general and standing committee member, Psychoanalytic Committee of the Chinese Mental Health Association; standing committee member, Psychological Counseling and Psychotherapy Committee, Chinese Mental Health Association; standing committee member, Shanghai Mental Health Association; young committee member, Chinese Psychosomatic Association; committee member, Shanghai Association of Behavioral Medicine. Book Review co-editor, *Psychoanalysis and Psychotherapy in China*.

Rainer Rehberger, MD. Doctor in psychotherapy and internal medicine, psychoanalyst, group analyst. Numerous publications on psychosomatics, the psychology of second generation victims and perpetrators/culprits of the Shoah, Fairbairn’s object relations, psychoanalysis of compulsive disorders. Books include *Abandonment, Panic and Separation Anxiety* (1999); *The Fear of Grieving* (2004); *Hoarders—Addiction and Compulsion* (2007); *Self-Help for Hoarders—Understanding the Causes—Daring to Change* (2013). Co-editor, German editions of *The Self and Inner Object Relations* by W. R. D. Fairbairn, and *Development of the Self* by J. D. Sutherland.

Bent Rosenbaum, MDsci. Specialist in psychiatry; professor, Department of Psychology, University of Copenhagen. President, Danish Psychiatric Society (1998–2000). Training analyst and former president (2004–2011), Danish Psychoanalytic Society. Research interests: psychoanalytic psychotherapy of psychosis, psychoanalysis, general and developmental psychopathology, trauma, suicide prevention, communication, and semiotics. Chair, IPA New Groups Committee for Europe 2009–2013.

José Saporta, MD. Faculty, Center for Psychodynamic Treatment and Research, Massachusetts General Hospital, Harvard Medical School; clinical instructor in psychiatry, Harvard Medical School; faculty, Advanced Training Program in Psychoanalytic Psychotherapy, Boston Psychoanalytic Society and Institute. Co-Book Review Editor, *Psychoanalysis and Psychotherapy in China*. Has taught and supervised psychotherapy in China and presented papers at psychoanalytic conferences in Beijing and Shanghai. Presented plenary paper at the 4th International Conference on multi-cultural discourse, Zhejiang University, Hangzhou, 2013.

David E. Scharff, MD. Co-founder, board chair, former director, and supervising analyst, International Psychotherapy Institute, Chevy Chase, Maryland. Clinical professor, Georgetown University Medical School and the Uniformed Services University of the Health Sciences. Teaching analyst, Washington Psychoanalytic Center. Chair, IPA’s Work Group on Family and Couple Psychoanalysis. Course director, Continuous Training Program in Couple, Family and Child Therapy, Beijing Mental Health Association. Editor, the journal *Psychoanalysis and Psychotherapy in China*. Author and editor of thirty books and numerous articles, many with Jill Savege Scharff, including *The Interpersonal Unconscious* (2011) and *Psychoanalytic Couple Therapy* (2014).

Jill Savege Scharff, MD. Co-founder, International Psychotherapy Institute (IPI) and founding chair, International Institute for Psychoanalytic Training at IPI. Teaching analyst, Washington Center for Psychoanalysis; Clinical Professor of Psychiatry, Georgetown University. Author and editor of many books, including *Projective and Introjective Identification and the Use of the Therapist's Self* (1992), *The Interpersonal Unconscious* (2011), *Psychoanalysis Online* (2013), and *Psychoanalytic Couple Therapy* (2014). Private practice with adults, children, couples, and families in Chevy Chase, Maryland.

Caroline M. Sehon, MD. Faculty, International Institute for Psychoanalytic Training, International Psychotherapy Institute, Chevy Chase, Maryland; teaching and supervising faculty, and chair, Metro Program of the International Psychotherapy Institute; clinical associate professor of psychiatry, Georgetown University, Washington, DC and Clinical Assistant Professor of Psychiatry, Uniformed Services University of the Health Sciences, Bethesda, Maryland. Private practice with adults, children, couples, and families in Bethesda, Maryland. Member, American and International Psychoanalytical Associations.

Shi Qijia, MD. University professor and chief, Wuhan Institute for Mental Health. President, Hubei Province Association for Psychotherapy. Vice president, Chinese Psychoanalysis Association; neurologist; psychotherapist. Research in trauma (PTSD), supervision, dynamic psychotherapy and borderline personality disorder. Editor, *Chinese Psychological Treatment Dialogues*.

Elise Snyder, MD. Founder and president, China American Psychoanalytic Alliance (CAPA); past president, American College of Psychoanalysts; board of directors, American Psychoanalytic Association; board of directors, Accreditation Council for Psychoanalytic Education; associate clinical professor of psychiatry, Yale University School of Medicine; visiting professor Sichuan University; recipient American Society Psychoanalytic Physicians Freud Prize; and recipient American Academy of Psychoanalysis and Dynamic Psychiatry President's Prize.

Teng Hui-Wen, MD, MA in medicine and humanity. Psychiatrist and psychoanalytic psychotherapist in private practice; lecturer, Taipei Medical University. She researches and lectures on individual and couple psychotherapy, culture, and feminism in Taiwan.

Sverre Varvin, MD, DPhil. Training and supervising analyst, Norwegian Psychoanalytic Society. Professor, Oslo and Akershus University College of Applied Sciences (OAUC), Faculty of Health Sciences, Department of Nursing, University of Oslo. Research areas: trauma and treatment of traumatised patients, treatment process, traumatic dreams, and psychoanalytic training. Chair, IPA China Committee. Has worked for more than twelve years in China with psychotherapy and psychoanalytic training programmes.

Wang Zhiyan. Psychotherapist, counsellor, and masters in clinical psychology, Peking University, Beijing, China. Chinese–Norwegian psychodynamic therapy training programme 2005–2008. Therapist, Student Counseling Center, Peking University, 2005–2007. Currently working for an institute providing employee mental health services.

Janine Wanlass, PhD. Director the International Psychotherapy Institute, Chevy Chase, Maryland. Psychologist and psychoanalyst in Salt Lake City, Utah, treating children, adolescents, adults, couples, and families. Graduate, the International Institute of Psychoanalytic Training at the International Psychotherapy Institute. Professor of psychology and counselling, and former director, masters in professional counselling programme, Westminster College. She has taught family and couple therapy and supervised clinicians in China since 2011.

Xiao Zeping, MD, PhD. Deputy director, Shanghai Health Bureau; chief psychiatrist and professor of psychiatry, the Medical School of Shanghai Jiao Tong University. Vice-president, the Pacific Rim College of Psychiatrists; chairman, the Chinese Psychiatric Hospital Association; chairman, Psychoanalysis Committee of the Chinese Mental Health Association; board member of the International Federation for Psychotherapy, the Chinese Psychiatry Society, and the Chinese Neuroscience Society's psychiatric division.

Xu Yong, MD. Studied Medicine at Shanghai Medical School, Fudan University. He specialised in psychiatry, psychosomatic medicine, and psychodynamic individual and group psychotherapy. Deputy director, Department of Training and Education, Shanghai Mental Health Center; faculty member, Department of Psychiatry, Shanghai Jiao Tong University School of Medicine; board member, Psychoanalytic Committee of the Chinese Mental Health Association, and board member, International Association of Group Psychotherapy and Group Processes.

Yang Yunping, MD, PhD. Professor, Beijing Anding Hospital, affiliated with Capital Medical University. Practice of psychoanalytic psychotherapy for mentally disordered patients. IPA Candidate in Psychoanalysis. She also engages in improving psychoanalytic psychotherapy training programs and the IPA candidates' training programme in Beijing in co-operation with Prof. Sverre Varvin and analysts from the Norwegian and Danish Psychoanalytic Societies, and has co-operated with the IPA's China Committee.

Anders Zachrisson, Fil. Lic. Associate professor, Psychological Department, University of Oslo. Member and former president, Norwegian Psychoanalytic Society. Training and child psychoanalyst. Part-time private practice. Teacher in the Chinese–Norwegian psychoanalytic psychotherapy training programmes since 2007. Member, Collegium of the Psychoanalytic Institute of Eastern Europe's Child and Adolescent School, since 2003. Papers in *International Journal of Psychoanalysis*, *International Forum of Psychoanalysis*, *The Scandinavian Psychoanalytic Review*, and other journals.

Zhong Jie, PhD. Psychology Department of Peking University. Advanced candidate, International Psychoanalytical Association's Chinese psychoanalytic training programme in Beijing.

INTRODUCTION

David E. Scharff and Sverre Varvin

Psychoanalysis has been known in China since at least 1927, when it was introduced in a small way. There was little clinical development at first, and what familiarity that did exist was later attacked and eradicated along with all things western in the period of Mao's dominance of all national policy including cultural matters. However, since the opening up of China that began with his death and that accelerated in the 1980s, psychoanalysis, along with other forms of psychotherapy, has been re-introduced and met with growing interest. This is not to say that analytic therapies have begun to dominate mental health thinking. In some ways, as is often true in the West, they reach readier acceptance in the academies than in the clinical world. Nevertheless, as China is having to grow mental health treatments from scratch, psychoanalysis is well in the mix, and by some accounts is becoming the most prevalent form of psychotherapy. And as in the West, a group of therapists is emerging from several disciplines that finds its ideas and methods intriguing.

It was in the 1980s that psychoanalysts from Germany first began to make systematic efforts to offer substantive training to the Chinese. This early effort combined offerings of behavioural therapies, systems family therapy, and psychoanalysis into seminars that were mainly located in Shanghai but also drew nationally from all over China. Later, a group from the Norwegian Psychoanalytic Society organised training programmes in Beijing and Wuhan specifically on psychoanalytic psychotherapy. Several senior psychiatrists and mental health professionals travelled abroad for extended periods of time, most notably to Germany, where they received a warm welcome and were often able to obtain personal treatment along with their education.

As the trainings gradually evolved to offer more specialisation, Chinese colleagues developed areas of interest, and many have chosen to focus on analytic ideas and methods. Some of the most influential mental health centres, for instance Shanghai Mental Health Center, the Wuhan Hospital for Psychotherapy, and Beijing's Anding Hospital, have developed internal training

programmes, sent trainees to external programmes, welcomed western teachers, and helped to organise several national congresses on psychotherapy and psychoanalysis. Many western colleagues have come to China to teach and offer supervision in these programmes, and new programmes like those offered by the China American Psychoanalytic Alliance (CAPA) or on psychoanalytic couple therapy in Beijing, offered by the International Psychotherapy Institute in Washington, DC, have expanded capacity and enhanced training.

But it turns out that offering training in these dedicated ways is a beginning that meets the complications of the large underlying cultural differences between East and West, and specifically between China with its more than 2500 years of rich cultural history, and the culture of the West with its roots in the Judeo-Christian tradition and the Greco-Roman heritage. Perhaps in the early days these differences were obscured by eagerness on both sides to teach and to learn. We had a rich tradition, “empirically tested” in the West; the Chinese had pressing and emerging needs and no developed means of thinking that could underpin a new mental health effort. The West had the means (not just analysis), and the East had the need.

Of course it turns out not to be such a simple encounter. The introduction of analytic thinking and methods has stirred great and growing interest, but caveats emerge, the most interesting of which involve these underlying cultural differences. In our experience, these differences impede the simplistic mentality that “we have the methods and they the need”. There are much more interesting differences than that. Yes, the Chinese need to develop an effective mental health system, and to train clinicians for their extraordinarily large population with its pressing needs. The rapidity of their progress in doing so is impressive. They have taken advantage of the ways western societies have used treatments, hospitals, and pharmacology. They have begun also to invest in psychoanalysis as a major way of understanding and offering treatment. Not all mental health professionals accept analysis of course. Some of the contributions in this book document an inherent scepticism among psychiatrists and others that should not surprise us. But among a significant minority of providers, there is strong and resilient interest.

Precisely because there is such pressing practical need, there is a sense of urgency about training. There is pressure to introduce concepts, teach new ways of thinking, offer supervision, and begin to develop a future generation of indigenous Chinese analytic teachers. There begin to be articles, journals, and books in Chinese—both as translations of western texts, and increasingly as contributions by Chinese colleagues. While a new journal, *Psychoanalysis and Psychotherapy in China*, devoted to publishing such articles will be launched by Karnac soon after the publication of this book, so far there has been only a scattering of articles in the literature on this great cultural encounter that now seems to have an importance beyond the practicality of treatment methods that are new to China. For instance, a recent slender volume by Christopher Bollas, *China on the Mind* (2013), draws a vivid picture of the different starting places for the deep structure of Chinese philosophical assumptions, and therefore of Chinese morality, that come into play throughout the mental and moral life of individuals. Tracing differences in western and eastern thought, Bollas contends that Chinese thinkers, in stressing adherence to family and group, and in arguing against individual autonomy, advised developing ways of being rather than doing. In contrast, the dominant western ethic supports the emergence of the individual from the group, stresses more oedipal aspects of development, and proposes weighing

doing over being. Bollas believes each structure assumes the other in a silent, unvoiced way, but emphasises these differences greatly.

Additionally, the amount of national and personal trauma in the last 150 years of Chinese history, and most especially in the last eighty to ninety years, culminating in the largest famine in human history during the Great Leap Forward of 1958–1962, and the systematic destruction of wealth, leadership, culture, and knowledge during the Cultural Revolution from 1966–1976, has left a legacy of trauma that is largely unaddressed inside China, and that has been only recently addressed in the West. (See, for instance, Tomas Plänkers' *Landscapes of the Chinese Soul: The Enduring Presence of the Cultural Revolution (1966–1976)* (2013), and Chapter Three, Frank Dikötter's *Mao's Great Famine*, (2010), and Yang Jisheng's *Tombstone: The Great Chinese Famine 1958–1962* (2012).)

Other contributions have confirmed what we also hear about China today: that traditional values, family organisation, and patterns of living have changed radically in the last thirty years. There have been rapid shifts in the shape of the family under the one-child policy (which is under revision as this book goes to press); internal migration as economic factors have changed radically; reactions to the “opening up” of education, business, employment, and travel abroad. So on top of the deep structural philosophical differences, Chinese culture is changing radically with the extremely rapid modernisation. This affects patterns of family structure, family loyalty, and social orientation deeply. (See, for instance, Kleinman et al., *Deep China* (2011), and Hansen and Svarverud, *iChina: the Rise of the Individual in Modern Chinese Society* (2010).)

Inside China today, there is great hope, but there is also a sense of an uncertain future that is, perhaps, not surprising in a time of such great change. Gerard Lemos's *The End of the Chinese Dream* (2012) and demographic studies by such scholars as Nicholas Eberstadt of the American Heritage Foundation (2007, 2013, and personal communication, 2012) who have looked at the problems of an aging population without enough young people to support the elders, the lack of effective social security, and unstable internal migration to cities, underscore the widespread difficulties that face China as a nation and that therefore weigh, in varying degrees, on Chinese individuals. There is pressure to achieve in employment, pressure on the family—and pressure on individuals from every walk of life.

All these factors affect the encounter between western psychoanalysis and Chinese culture whenever an analyst or psychotherapist assesses or treats patients in China, whether the therapist is Chinese or western. In constructing this book, and in inviting contributors from China and the West, we have felt that this sort of difference is crucial to the encounter to which we and our colleagues are devoted. Therefore we have attempted to include considerations of all these matters, because, unlike our experience when we work in a culture in which we also live and breathe, we cannot take them for granted. We have taken pains to include chapters on the philosophical structure of Chinese thought, problems in training, and issues in the encounter between Chinese psychotherapy students and their western teachers—and between Chinese analytic therapists and their own patients. In doing so, we have tried, within the limitations of a single volume, to cover the waterfront of concerns that have come to our attention during our own encounters with China and our Chinese colleagues and students. We have done this by inviting many Chinese colleagues to contribute to the volume, and hope that we have, in this way, made a unique contribution to our continuing efforts.

The book is constructed in four sections. The chapters of Part I examine issues in Chinese culture and history that form a crucial background to mental health programmes, training, and intervention. We begin with a research paper by Mette Halskov Hansen and Cuiming Pang that examines the changing face of collective, family, and individual identity in rural Chinese youth. While it is imprecise to extrapolate in a straight line to urban youth, the implications for all of China are nevertheless clear. Antje Haag has had extensive experience teaching psychotherapy in China, being one of the first westerners to immerse herself in this process. Her paper gives her more impressionistic sense of changes in the Chinese self as she taught psychotherapy over many years. Then Thomas Plänkens, probably the foremost psychoanalytic researcher on Chinese trauma, extrapolates from his research to think about the widespread effect of trauma on Chinese and Chinese individuals. Hsuan-Yang Huang, a Taiwanese-trained psychiatrist and Harvard anthropology PhD, writes about the transformation of popular religion in modern China as a background for psychoanalytic work. Lin Tao, a Beijing-trained psychiatrist who is the first graduate of the IPA's psychoanalytic training in Beijing, and who has also studied for several years at the Tavistock Centre in London, writes about the relevance of understanding Buddhism and Taoism for analytic practice. Li Ming, an academic psychologist in China who also spent a year at Yale, helps us to understand the application of the principles of Yin and Yang to mental health practice. José Saporta gives us a deeply philosophical piece on the meeting of psychoanalytic and Chinese cultures, and this is augmented by Sverre Varvin's discussion of his chapter. Elise Snyder, founder of the China American Psychoanalytic Alliance, discusses her quite different view of cross-cultural issues, holding that the cultural differences have relatively little impact on our work in teaching psychoanalytic theory and technique in China. Alf Gerlach contributes a unique ethno-psychoanalytic research chapter on the vivid forms castration fears play in some ethnic Chinese subcultures. David Scharff concludes this section with a primer on modern China that summarises a number of currents in modern Chinese history and society that affect many of the students and patients we encounter.

Part II deals with the specific development of psychoanalysis and psychotherapy in China. Sverre Varvin and Bent Rosenbaum offer a conceptual piece on differences in behaviour and ways of thinking that influence the introduction of psychoanalytic therapies. Yang Yunping, professor at Anding Psychiatric Hospital in Beijing and a major force for the development of psychoanalysis, talks about poverty, deprivation, and resilience and their effects on individual development. Zhong Jie, a psychologist at Peking University and an advanced psychoanalytic candidate, describes the problems with the way psychotherapy introduces conflict to patients. Shi Qijia, chief of Wuhan Institute for Mental Health, and a major figure in Chinese psychoanalytic development, describes his view of the development of psychoanalysis. Wang Zhiyan and Anders Zachrisson describe their experience with teaching about transference and countertransference in China. The section closes with a highly imaginative integration, as Irmgard Dettbarn from Germany, the first IPA analyst to offer training analyses in China, fashions a myth from Chinese and western sources that is then discussed analytically by Rainer Rehberger and Sverre Varvin.

Part III details issues in forming training programmes and offering training in China. Sverre Varvin of Norway and Alf Gerlach from Germany describe the early years of psychotherapy and psychoanalytic training in China. Xu Yong and his colleagues from the Shanghai Mental

Health Center describe the pioneering efforts there. Ralph and Lana Fishkin describe the ground-breaking programmes offered by the China American Psychoanalytic Alliance. Alf Gerlach describes the expansion of the Sino-German programme into the teaching of group psychotherapy. Li Yawen, another of the advanced IPA candidates in Beijing, offers a research paper on the attitudes and degree of training among professionals in Chinese psychotherapy. Siri Erika Gullestad discusses her experience offering psychotherapy supervision to Chinese trainees. This is followed by two papers by Chinese students: Gao Jun, a recent PhD at Peking University in Beijing, now assistant professor at Fudan University in Shanghai and leading translator for Chinese psychotherapy training, gives her experience, and Qi Wei gives her experience as a medical student and psychiatry resident in Shanghai. Liu Yiling, another recent IPA analytic graduate in Beijing, offers a paper on how she now sees and teaches, psychoanalytic and psychotherapeutic assessment and early treatment. The section closes with Caroline Sehon's description of her experiences offering consultation and teaching psychoanalytic assessment in a setting that had not had the benefit of these training programmes.

Part IV is quite different. It consists of four chapters focussing on Chinese couples in assessment and treatment, three couples from the mainland and one from Taiwan. Jill Savege Scharff and David Scharff open with a description of assessment and brief therapy with a couple that illustrates cultural differences both within China and between China and the United States. Shi Qijia and David Scharff discuss cultural factors and the use of the concept of projective identification in understanding a couple that Dr Shi assessed. Janine Wanlass describes another couple that she saw for assessment and brief therapy together with David Scharff. The final chapter by Teng Hui-Wen, a Taiwanese psychiatrist with Jungian analytic training and with training at the Tavistock Clinic in London, vividly illustrates a couple therapy in which cultural difference set up almost impossible conflict.

We close with a brief epilogue by the editors about our experience and lessons we have drawn from our own study.

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