

Psychoanalysis and the Argyle Institute

steven rosenbloom

I have been asked to describe the influence and practice of psychoanalysis as it applies to the Argyle Institute of Human Relations, an Anglophone non-profit organisation largely dedicated to the Post-Masters training of mental health professionals in Marital and Family Therapy and Individual Psychoanalytically Oriented Psychotherapy. My major qualification for this is that I am a psychoanalyst who up until last year was the Director of the Individual Psychotherapy Programme (IPTP) from 1993 to 1999. In order to adequately appreciate the psychoanalytic influences at the Argyle, it is important to understand the history which preceded the formation of the Argyle Institute of Human Relations in 1985.

History of the Argyle Institute

The Argyle Institute is the offshot of the Montreal Mental Hygiene Institute (MHI) founded in 1919 to serve the mental health needs of the population of Montreal as a voluntary non-profit social agency. Its aims were to search out those areas where mental health needs were not adequately serviced and to work with local agencies in order to fulfil the mandate. Part of its role was to set up demonstration projects in these unserved areas with the hope that the appropriate municipal or provincial government agency would ultimately provide the funds to keep the projects going. The Mental Hygiene Institute played a dominant role in forming and spinning off two independent agencies, the Family Life Education Council and the Marriage Counselling Center. After the legislation of Medicare in Quebec, the MHI fell under the umbrella of the Montreal General Hospital and remained so until around 1980. Prominent among the staff of the MHI were Dr. Alastair Macleod, a Training Analyst at the Canadian Institute of Psychoanalysis and Dr. Cyrill Cahill, a psychiatrist affiliated with the Montreal General Hospital. In 1982 staff members of the MHI feeling that there still existed a void in serving the mental health needs of the Montreal community, decided to form an organisation similar to the MHI which would be called the Argyle Institute of Human Relations. By now a number of staff members of the MHI, including Oscar Grossman and Andrea McElhone, with the encouragement of Dr. Macleod had begun to undertake psychoanalytic training at the Canadian Institute of Psychoanalysis. Together with other psychoanalyst colleagues and former members of the MHI, they helped in the formation of the Argyle, which received its charter as a non-profit agency in 1985. One of the leading lights in the new

organisation was Leticia Cox who undertook, during this period, to create a Marital and Family Therapy Training Programme (MFT) which since then has gone on to receive international accreditation from the American Association of Marital and Family Therapists (AAMFT) and remains an important underpinning of education service offered at the Argyle. The MFT programme, which is a Post-Masters undertaking, has served as a template for the IPTP programme, which I directed from 1993 to 1999. Slowly but surely, the Argyle Institute became a place where clients could receive low fee therapy on a sliding fee scale, which to this day distinguishes it as a unique resource to the Montreal anglophone community. In 1985 the Argyle Board asked Dr. Allen Surkis, chief psychologist at the Montreal General Hospital, to look into the creation of an Individual Psychotherapy Programme at the Argyle. In 1986 Leticia Cox asked me to join the Board of Governors and suggested that I might want to participate in the Individual Psychotherapy Program.

Psychoanalysis and the IPTP at the Argyle

Between 1986 and 1993, the IPTP at the Argyle was a programme featuring a hybrid of different orientations. Some staff members were psychoanalysts; others were staff members of the Marital and Family Therapy programme who had some training in psychoanalytic psychotherapy. Much was accomplished in these formative years. In 1993, the Argyle Board asked me to take over the IPTP with the idea that I would give it a more psychoanalytic focus. At this point the IPTP, along with its pre-existing faculty, became an interesting opportunity for many young psychoanalytic candidates who were finishing their training at the Canadian Institute of Psychoanalysis. In addition to analysts such as Oscar Grossman, Carmela Mindel, Andrea McElhone, and Charles Levin, who had already been involved in the programme earlier, the IPTP began to attract some of the “best and brightest” of newly emerging psychoanalytically oriented psychologists and psychoanalysts. At the present time, our Core Staff and Supervisors are made up of 16 psychoanalytically oriented therapists. In 1993, a 3-year Post Masters curriculum was created in psychoanalytic psychotherapy and we began to receive relatively large numbers of applicants to our training programme. The IPTP offers the student access to clients as part of their training. Each student must see an average of 5 clients per week and receive Individual or Group Supervision for every client referred by the Argyle. At present the Argyle receives on average 700 referrals for psychotherapy a year, many of whom are seen by the students of our programme on a sliding scale according to the economic situation of each client.

Over the years of my Directorship, our staff has become much more insistent upon the requirement that IPTP students themselves should be in intensive psychoanalytic psychotherapy prior to applying for and during the entire period of their training. The Argyle students are presently required to be in at least twice weekly psychoanalytically oriented psychotherapy one year prior to entering the programme. Each student must accumulate 500 clinical hours over the 3-year training period in order to graduate, and each student is required to have

supervision by 3 different supervisors in individual supervision over the same period. An outgrowth of the IPT is the creation of an Assessment Seminar at the Argyle, where staff members instruct students in assessing patients, with a considerable focus on psychodynamic criteria. As well, we are in the process of creating a set of seminars of different psychoanalytic theories, which is designed for mental health professionals and graduates of our programmes. In 1999 I stepped down from the Directorship and handed the reins to my friend and colleague Carmela Mindel, who is running a tight ship for our programme. The IPTP is not without problems. The diminishing anglophone population, competition from other psychotherapy programs and the like make psychotherapy training a competitive arena. There is little doubt that the market for psychoanalytically trained therapists is shrinking. Being a Training Analyst myself, I see the difficulty that candidates at the Canadian Institute of Psychoanalysis have in getting good control cases, which must in part be due to the increased popularity of short-term psychotherapies and cognitive therapies. This does not reflect itself at the Argyle where patients are seen in long-term 1 or 2 weekly psychoanalytic psychotherapies. I personally believe that a programme such as the IPTP, based upon sound psychoanalytic principals, staffed by top-flight professionals, and having stringent admission criteria will ultimately win out in this environment.

N.B. The above article reflects my own personal views and understanding of Argyle history and is not meant to represent the Argyle as an organization.

steven rosenbloom
2104, de vendôme
montréal, qc h4a 3m5