



“Let’s Get Together and ...”: Starting and Continuing Allen Creek, a Psychoanalytic School

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ABSTRACT

In this paper, the authors describe the long tradition of psychoanalysts and educators working together for the benefit of children and families. They recount the inception and evolution of one nonprofit psychoanalytic school, Allen Creek Preschool in Ann Arbor, Michigan, in terms of the conceptual and practical underpinnings their group brought together. Stories of work by psychoanalyst “family consultants,” teachers, parents, and children illustrate the partnerships formed and the impact on all concerned in building emotional muscle and mastering developmental transitions and transformations.

KEYWORDS

Psychoanalytic school; emotional muscle; therapeutic alliance; parent work; social entrepreneurship

It sounds spontaneous, like a Hollywood musical from the 1930s or 1940s, but, in fact, the decision to start the psychoanalytic school that became Allen Creek Preschool in Ann Arbor, Michigan, built on a long tradition of analysts working with educators and drew on important psychoanalytic theoretical and clinical concepts. In the 1970s, the largest group of Hampstead Clinic graduates in the United States was living in Ann Arbor. As such, we all shared knowledge and experience, as well as inspiration, from Anna Freud and her colleagues.

We have written before about the strand of altruism that informed the work of the early days in Vienna and became a powerful force and legacy for child analysts all over the world (J. Novick and Novick 2012). In 1918, after World War I, Freud had presented a challenge to his psychoanalytic colleagues—to open institutions or outpatient clinics where treatment would be free. The small group of psychoanalysts rose to the challenge and, during the interwar years, a dozen or so free clinics were opened in seven countries and ten cities from London to Zagreb (Danto 1998, 1999). Psychoanalysts during that era felt part of a larger social sea change, a wave of radical ideas that expressed social liberalism in art, science, culture, and politics. Child psychoanalysts, only beginning to define themselves as such, played a major role in these developments.

The Kinderseminar attended by Anna Freud, Willi Hoffer, Sigfried Bernfeld, and August Aichorn actively generated important ideas about how psychoanalysis would support and be useful in schools, as well as in programs for disadvantaged and refugee children. They not only talked and thought about it, but also implemented, through school consultations, public and professional lectures, and by starting their own experimental “progressive” school in Eva Rosenfeld’s back garden, the “Burlingham-Rosenfeld School” or “Matchbox School,” as it was sometimes called because of its diminutive size. By the

early 1920s Bernfeld, Hoffer, Aichorn, and Anna Freud were organizing groups to explore the possibility of preventing neurosis through proper parental education and the applications of psychoanalysis to formal educational settings (Rosenblitt 2005). Cohler (2008) detailed the history of the Kinderseminar, tracing the seminal ideas that persisted in later efforts by these founders and their students and colleagues.

By 1937, Anna Freud and Dorothy Burlingham founded the Jackson Nurseries in Vienna to support the emotional health of deprived children under three. This led to London's Hampstead War Nurseries, which they started in 1940. Immediately following the war, Anna Freud organized residential homes for concentration camp children, the amazing results of which are detailed in Moskowitz's (1983) wonderful book *Love Despite Hate*.

The experience of the War Nurseries led to the establishment of the Hampstead Clinic and Training, with its cluster of services, including the free or low-cost therapeutic clinic for children and adolescents, services for parents, the Well-Baby Clinic, the Nursery for blind children, the Nursery School, the Borderline study group, and many more over the years.

As graduates of the Hampstead training dispersed around the world, they carried with them this tradition of service and devotion to social amelioration, the application of child analytic knowledge to any arena that affects children's lives. None of this work was done for riches, academic advancement, research grants, or professional status; that's why we have called the spectrum of creative applications "altruistic analysis." Danto remarked that the adult analysts, in the main, did not import the altruistic strand when they came to the United States, but the child analysts did and continue to do so.

That brings us back to Ann Arbor, Michigan, in the 1970s, where several of us were doing regular consultations to preschools, schools, and day care centers. Cecily Legg, Ivan Sherick, and Jack and Kerry Novick were soon joined by other colleagues and students in a monthly study group. We worked together for many years, sharing successes, tribulations, insights, and achievements in the many different settings we served. This coincided with our participation in the start of a child analytic training at the Michigan Psychoanalytic Institute and the formation of a low-cost clinic, the Arbor Clinic, for children and adults in the community.

The study group's involvement with schools of all kinds was usually structured as weekly visits from a regular consultant, building relationships over time with directors and teachers; sometimes it took the form of intermittent in-service workshops for teachers or day care providers, or talks for parents. This was rewarding and we saw many improvements in the schools we worked with. We articulated what we were doing in a model called the Graduated Intervention Program (GrIP), a series of offerings ranging from general developmental education, through steps of increasing focus and specificity for particular children, to eventual referral for evaluation and potential treatment.¹

We began to see, however, that the consultation model contributed to perpetuating the idea that psychoanalysis is only about pathology, that analysts are only there to troubleshoot problems, and their very presence can be a constant reminder of the shortcomings or failures or limitations of teachers and parents. We have come to think that a fundamental aspect of collaborative work with schools is the idea that psychoanalysis is a general psychology; that is, that the basic ideas apply to everyone. This is in contrast to theories and models that deal only with pathology, or derive concepts of normality from descriptions of pathological functioning. This realization proved to be crucial in relation

to our approach to schools, and, as we will see, informed the shaping of the school Allen Creek came to be.²

A different way to describe this basic stance is in terms of metapsychology, what Anna Freud (1966) called the “language of psychoanalysis” (70). By metapsychology she meant a multidimensional approach to all psychological events, issues, or the understanding of any particular person. In regard to a psychoanalytic school, a metapsychological approach emphasizes the complexity of each child, each dimension providing a particular lens for highlighting certain features of a child’s life and personality.

Another issue that arose in the context of school consultations was that we were at the mercy of any school’s particular director, board, parent body, or philosophy. If a new director was hired, the work of years toward build a trusting consultative and collaborative relationship could be jettisoned overnight. If a school decided they wanted to brand themselves as a specific kind of school with a labeled curriculum, there might be no room in the new approach for the analytic consultant. As the group worked through a number of such setbacks, someone made the fateful remark, “If we had our own school, we wouldn’t be subject to such changes! We could create our own structure and culture.”

A group of twelve colleagues and community leaders (a pediatric ophthalmologist, a dentist, a financial planner, three educators, therapists, and analysts) began meeting monthly for a Sunday breakfast to talk about what we might want our own school to be, what it could look like, how it would be structured and staffed, and who the students would be. At some point we felt ready to move forward, so, in the summer of 1994, we each contributed \$50 and applied for incorporation as a nonprofit. We applied to the Internal Revenue Service for tax exemption as a nonprofit educational institution, which we received. We were ready to go.

We still had to define our specific goals and think through how we would get students and so forth. At that point, modeling ourselves on schools we admired, like the Hanna Perkins Center in Cleveland and the then-new Lucy Daniels School in North Carolina, we were imagining a therapeutic preschool, as we knew from clinical and consultative experience how many preschoolers (generally one in four) struggled to be emotionally ready for kindergarten entry.

As we thought about our own community, however, we realized that there were at least two substantive obstacles to creating a viable therapeutic school. One was the antipsychoanalytic attitude so prevalent in the local psychiatry department, formerly staffed almost exclusively by psychoanalysts, but at that time wholly given over to biological psychiatry; the psychology department was similarly negative about psychoanalytic ideas, caught up in the wave of short-term behavioral treatment modalities. University departments are very influential in a college town. The second obstacle was the psychological reluctance of parents to face the reality of difficulties in very young children.

This was a crucial moment in the evolution of Allen Creek Preschool. We made the watershed decision to be defined by our psychoanalytic approach, not by our target population. We would offer our programs to any child and family who could make good use of them.

Thus Allen Creek became an “ordinary” preschool, open to the whole community. We articulated our assumptions that, in a psychoanalytic school, the child’s inner life is given as much attention as external factors; the school sees children as part of a family in a dynamic process of development; the school gives attention to the developmental needs of

parents. We then drew on a fundamental psychoanalytic idea to further conceptualize our approach.

From our psychoanalytic base we think about collaborative relationships in terms of the therapeutic or working alliance. This is an idea derived from an early remark of Freud (1913), when he described the importance of what he called the “therapeutic pact.” This was a radical departure from the traditional authoritarian medical model of treatment that was prevalent at the time. We have written about the working alliance in clinical settings, and suggest that it has useful application to the multiple relationships that are part of any school setting, where teachers relate to children, parents, and analysts; parents relate to all the others; children negotiate multiple levels of interaction; and involved analysts do the same.

Clinical experience also teaches us that a working alliance does not happen by itself. It has to be built over time, through the efforts of all parties, requiring continued work to maintain it, as there are always obstacles that arise from multiple sources (Novick and Novick 1998). Large-scale research has demonstrated repeatedly that the alliance is the best predictor of treatment outcome (Karon 1989). Similarly, child development studies over the years have demonstrated unequivocally that optimal child development depends on the relationship context provided by parents. It’s not just any relationship, though—it has to be one that can be characterized as a warm, positive working collaboration between parents and child, not abusive, or authoritarian, or adversarial (Maccoby and Martin 1983).

We know that parents and teachers have often struggled with anxious or adversarial transferences to each other—think of the anxieties in both parties around school conferences. From our child analytic focus on concurrent parent work in treatment of children and adolescents, we have also learned about the complexities of analysts’ attitudes to parents. Transference is a major obstacle to the development of an effective working alliance (K. K. Novick and Novick 2005).

So how does this apply to the psychoanalytic school setting? The running of Allen Creek was guided by the idea of creating a positive alliance among all members of the school community and operationalizing the multiple collaborative relationships. At Allen Creek we set out to ensure that there would be enough time for discussion, mutual learning, support, and working through. In practical terms, this means that teachers are paid for meeting time that equals their classroom time. Family consultants, as we came to call the volunteer analysts who work at the school, observe weekly in the classroom, meet weekly with the classroom teacher team, and attend an all-staff meeting weekly. Teachers have weekly meetings to discuss a range of educational issues, as well as a monthly seminar with an analyst on relevant concepts. Parents from each class meet twice a month in the evening as a group with their family consultants; then family consultants meet to debrief and discuss technique after each parent group evening. Parents and teachers have ongoing two-way communication informally at dropoff and pickup, through e-mail newsletters in each class, and formally in twice-yearly conferences.

This describes how the school worked once it was established and had students in each class, but the beginnings were humbler than that. We thought to start out with a parent-toddler class, building on what we had learned from Erna Furman and her colleagues at Hanna Perkins, with the idea that we would add a class each year as the original children grew. So we advertised for parent-child pairs with children eighteen months to three years old, putting leaflets in pediatricians’ offices, supermarkets, and school bulletin boards—any place we could think of.

What actually arrived was a group of six eleven-month-olds, some still crawling, others barely toddling, and their eager mothers. Through the intervention of a friend of one of our board members, we were able to rent a church school classroom to use during the week. There we devised a curriculum and activities for the group. Kerry Novick was the first teacher, leaning heavily on advice and assistance from Ramelle Alexander, director of one of our long-term school consultation settings and a founding board member. Each set of parents had a volunteer family consultant who met with them weekly to talk about child development and parenting.

As we worked in the group of family consultants to devise techniques suitable to our task, we had to simultaneously figure out how to make the practical aspects of running the program work. The board had made a fundamental decision that no family should ever be turned away for financial reasons, which meant that funds for scholarships had to be raised. We also were invested in the research potential of the detailed work we were engaged in with young children and their families. We needed to hire professional teachers rather than relying on the efforts of volunteer psychoanalysts to run the classrooms. We were about to have three classes (junior toddlers, senior toddlers, and our first preschool class) and we had no premises. Without a space, how could we have a program? Without a program we could not obtain funding from outside sources, but we could not sustain a program without such funding.

This classic bind of trying to run a grassroots nonprofit without an angel, a big funder to sustain the initial efforts, pushed us to be creative about how to break through the impasse. Jack Novick came up with the idea of forming a limited liability real estate corporation, the purpose of which would be to find or build a suitable property for the school. This was well before the general burgeoning of what has come to be called social entrepreneurship. Allen Creek would be the tenant, paying no rent for the first few years, but eventually the shareholders might benefit from the rental revenue. Thus was born For Kids, LLC. Family and friends invested and we were able to raise enough capital to buy land and secure construction loans from a local bank to build our schoolhouse. Allen Creek began paying rent within eighteen months and, over subsequent years, Allen Creek was able to raise funds to buy out For Kids. Now the school owns its own building, free and clear.

Although Allen Creek did not start with the help of a major donor, we were well enough known in the community after ten years, and had served enough families that an endowment fund could be established. After many years of living hand-to-mouth financially, this fund, currently at over \$1.5 million, supplies an income margin that helps to keep the school in the black, and able to continue the tradition of generous scholarship support to about a quarter of the school's families. Enrollment is stable at fifty to sixty families, with classes offered most years for parent–infant, parent–toddler, and preschool through Early 5s.

Another big shift occurred in response to both the pressure of numbers and our experience of varying effectiveness in offering an individual family consultant to each family. We originally started out with individual family consultant meetings for each set of parents weekly, but later shifted the predominant intervention to regular group meetings for parents from each class with pairs of family consultants on two evenings a month. There have been many technical considerations and insights as we have tracked this

experiment in parent education and intervention. Many ideas about parent development have emerged in the work.

We have been fascinated to discover how powerful the group situation can be and what deep change is possible in the context. Parents' capacity to trust and help each other has been moving and constructive. So far it appears to be diagnostic of more severe parental disturbance, necessitating referral, when parents cannot use the group to change to some extent. We have also been learning about child and parental development at an unprecedented level of detail. This has been inspiring and motivating for us, generating enthusiasm and curiosity.

We were uncertain at first whether or how to structure the groups, but felt that it was not appropriate to handle them like therapeutic groups, which involve completely different goals and techniques. Then we realized that we had something at hand that we could try out. In the first two years of Allen Creek, as part of our program evaluation effort, we did extensive year-end interviews with parents to find out what they felt they had learned, how their children had changed, and so forth. As we looked at the mass of descriptive data that covered many areas, we found it fell into an account of how parents dealt with their children in each part of the day. This turned into what we now call the Day Description, a series of vignettes collected at the beginning and end of the year, which covers waking in the morning, meals, leaving the house, free time, naps, bath, diapering and toileting, bedtime, and through the night. The Day Description became the raw data for Allen Creek's International Psychoanalytic Association (IPA)-sponsored research, the development of the Allen Creek Parenting Scale. This is a topic for a different report, but we found we could reliably track parental change, an important element for eventual psychoanalytic preschool outcome research.³

Despite the understandable reluctance, or resistance, that psychoanalysts feel to conducting interactions according to an interview schedule, we know that parents are comfortable, even eager, to talk about exactly these things with each other and with pediatricians and other professionals. So we piloted the use of the Day Description as a specific technique of structuring the first parent group meetings at the beginning of the year. We introduced talking about a day in each family's life as a good way for us to get to know each other and as a jumping-off point for learning about the range of behaviors and asking questions. At the end of the school year, we explicitly revisited the day, as a way of looking back at what has changed and what has not.

There has been a relaxed and enthusiastic response from parents in the groups. Shared responsibility for protecting the safety and privacy of the groups is stressed both in parent orientation and in the first meeting. We were astonished at the comfortable intimacy parents established with each other. By late winter each year parents have spontaneously begun talking about difficult events in their family histories and the links between their childrearing and their own histories, with visible achievement of insight and change. Analysts working in Allen Creek parent groups as family consultants use a very wide range of interventions. There is a fascinating complexity of the issues accessible by partnership among parents, teachers, and family consultants.

At an evening parent group meeting in the middle of winter a mother of a nearly four-year-old girl shared her dilemma. She asked what everyone thought about kids showering with their parents; her husband was enthusiastic—she wondered if she was being prudish to disagree. The two analysts in the room were momentarily taken aback: How could they

address this question without risking offense? Another parent stepped into the breach, saying in a matter-of-fact, humorous tone, “Gosh, just think of where her face is when they’re in the shower. Isn’t that a bit much for her?” Everyone laughed, and one of the dads said, “But seriously, I think your discomfort is a useful signal. You’ve always been pretty tuned in to your daughter’s feelings.” Then the family consultants added some thoughts about the developmental stage the kids in the class were in and addressed thinking about modulating situations that might evoke overwhelming excitement or shutting down of feelings.

Throughout this time, consultation to other schools and centers continued, now under the umbrella of Allen Creek. The Early Childhood Outreach project continued for a further dozen years, at its peak reaching populations of several thousand in the county. A grant-funded program of regular workshops for teachers and care providers, the Early Childhood Training Initiative, ran for several years, with goals of teachers understanding that children’s behavior has meaning, that meanings are signaled in behavior and feelings. When those ideas are absorbed, teachers found they experienced increased classroom effectiveness in helping children modulate their own feelings and behaviors.

Looking back over Allen Creek’s first twenty years, it is clear that the model can work, with children, families, and teachers reaping many benefits. It is, however, also important to examine what happens to analysts when we engage in such work. In concrete terms, why would an analyst want to volunteer in a preschool as a family consultant, a teacher, a board member, or an administrator? We noted earlier the altruistic motives of the first child analysts. This was continued by further generations of child analysts such as Moses Laufer, Fritz Redl, Erna and Robert Furman, Rudolf Ekstein, Miriam Meadows, Bruno Bettelheim, Al Solnit, Sam Ritvo, and many others who inspired us. Beyond the inspiration of earlier generations, however, there are substantive clinical and theoretical benefits to working in preschools.

Speaking personally, we know that work with “normal” parents and their children significantly altered our clinical work with patients of all ages. Allen Creek Preschool is not defined as a therapeutic setting, and therefore families do not necessarily enroll because they have acknowledged a specific problem in their child’s development. Thus, in addition to the usual narcissistic vulnerability of any parent, we have had to face the reality that our parents did not expect or want to be told that there is anything “wrong.” We have gained new respect for the exquisite sensitivity of parents to the slightest hint of criticism. Under these conditions, we worked very hard to develop clear, straightforward language and techniques for addressing issues of development, either ordinary bumps in the path or extraordinary difficulties caused by circumstance or pathology.

Working with parents in this setting has pushed us to find ways to meet parents wherever they are in their own development, at whatever level of insight they have achieved. We have understood this in terms of speaking to each parent’s strengths, discerning and nurturing their “emotional muscles,” looking for the wish in every parent to do the job well, to feel good about their child and themselves (K. K. Novick and Novick 2010, 2011).

In our practices, individuals and families come with self-identified difficulties and distress, but they are no less vulnerable and easily wounded and angered by feeling judged, scrutinized, or criticized than the preschool families. The tact we developed at the preschool generalizes to much greater self-monitoring with patients about tone and

vocabulary, as well as attention, internal as well as explicit, to patients' use of their ego skills and strengths in their attempts to resolve conflicts.

We now increasingly see even the most pathological symptoms, beliefs, and behaviors as respectable efforts to solve a problem. From that point of departure, we and the patient can look together at the results, at the utility and cost-effectiveness of the solution, at the feelings and consequences that ensue. The effect of this perspective on our clinical technique shows in a shift in the order in which we take things up. We now tend to think, look, and talk first about what the patient might have been trying to accomplish, what needs he was trying to meet, what strengths he coopted in the attempt. This approach seems to protect against slipping into a critical, sadistic, or authoritarian position—patients react less defensively and masochistically—and the functioning and status of the therapeutic alliance is easier to monitor. It is what we have come to call an “open-system” approach (K. K. Novick and Novick 2003).

Theoretical understanding is affected as well. These clinical experiences led us to rediscover the strand in the writings of Freud and others that looks at development as a two-track process. As we were faced daily with the minutiae of development in the preschool setting, seeing a constant interplay of choice points between different solutions to developmental conflicts, it seemed increasingly untenable to think that later pathological manifestations reflect something normal in infancy or early childhood. Rather, we saw a variety of developmental patterns: There are continuities of pathological solutions to conflict; there are remarkable discontinuities, in which parent–child pairs can be helped to make very different choices; there are difficulties that arise newly, and are addressed either adaptively or pathologically, depending on many overdetermined variables. These perceptions and experiences became central ingredients in the development of our two-system model of self-regulation (J. Novick and Novick 2000, 2001, 2004, 2016; K. K. Novick and Novick 2003).

There were not enough trikes for every one of the four-year-olds to ride at once, and the children were pushing ahead of each other to get outside for a first turn. The teachers discussed the problem with the children and they all came up with a plan. Before outside time each day, the teachers offered a handful of paper strips for the children to choose from. Half of them said “bike” and the other half said “wait.” One day Ted, whose feelings were often fragile, drew a “wait” slip. He struggled not to cry. The family consultant visiting that day remarked to Ted, “It takes stronger muscles to wait than even to ride the bike.” Ted swelled with pride. The family consultant then wondered out loud if those bikes needed a gas station. Ted set himself up at the side of the bike path; all the bikes stopped to refuel, paid for their gas, and proceeded. Ted was happy and busy until his turn came and another child took his place as the gas station attendant. The next time Ted picked a “wait” slip he spontaneously started the gas station game with great pleasure.

From our first reading of Freud's description of the sequence of basic anxieties, we understood that helplessness and separation are crucial developmental issues, so we fully expected to find at the preschool that we would be looking at separation issues and defenses against helplessness in both parents and children, and directing our program design to addressing separation as an opportunity for mastery and growth in families. Indeed, that was true. What we did not expect was the infinite number of permutations and variations on the theme, the extraordinary variety of forms of separation phenomena that we would encounter, the way in which aspects of separation pervade other areas of development and define each subphase and transition. Added to this is the realization that

helplessness and separation are at least as complex for parents as for children, if not more so.

Nellie's mother, Nan, cried in the hallway outside the preschool classroom door. "I just can't understand why she would prefer to be with ten other children in school when she could have me all to herself." Discussion with teachers and in the parent group reminded her that Nellie was enjoying school because of the solid foundation of security her mother had provided. Through her tears, Nan acknowledged that Nellie did not seem to love her less; maybe they could both enjoy her big-girl capacity to stay at school on her own.

Our newly heightened awareness of subtleties of separation phenomena has affected our reading of and reactions to patients' experience of the myriad separations that are built into the analytic situation. Transference, counterreactive, and countertransference manifestations around such times have to be looked at in more detail and with greater appreciation of their complexity. Seeing the parental side of these issues at the preschool has enhanced our understanding of patients' parents' part in the formation of characteristic ways of responding to separation and equivalent issues of loss and abandonment. This in turn helps enrich our experience of how these play out in the transference, as we work through it together with patients.

In terms of theory, we have had to rethink traditional formulations about the toddler years and the end of adolescence in particular. Separation pops up throughout development, not just in childhood, but on through adulthood. It is an ongoing developmental task; when we focus on nodal points, it might help us to look at the formal elements in the mastery of the separation issues at each phase of development, in the light of the specific phase characteristics and ego development available. Issues of separation and separateness are pervasive at all times, though; we came to see that optimal development includes transformation at all phases.

We did not set out with the idea that Allen Creek would be a source of patients; indeed, many in the community had to be repeatedly reassured that this was not the underground agenda of the school. As the years went by, however, and some parents asked for help in dealing with issues with their children that were beyond the scope of intervention in the school setting, successful referrals were made. Effective analytic treatment by candidates and colleagues led to a growing and spreading network, with Allen Creek parents referring friends and family members for psychoanalytic treatment. Allen Creek offered a new face for psychoanalysis in the town and surrounding areas.

We've described some of the cross-fertilization between psychoanalytic concepts and experiences in the school. Perhaps an example of this interaction in practice will help to bring this alive, as we describe an experience that we think is probably shared by many schools when a transition approaches, whether it's the move from middle school to high school, high schoolers going to college, or college students leaving the extended dependency and irresponsibility often fostered by university. In our case, it was the move from preschool to kindergarten. We hope to show the benefits of a positive working alliance among all members of the school community and the complex emotional muscles brought into play by teachers, parents, children, and family consultants.

We began to see a pattern emerge annually in the winter of the four-year-old year, where parents sounded dissatisfied, and were demanding more of teachers and the school. Teachers felt rather beleaguered and resentful, as if they could never do enough. The children sometimes seemed anxious, or more often got out of control, beyond the

expectable rowdiness of four-year-olds. As we began to think about the dynamics of what might be happening, the analysts talked with the teachers about the concept of defenses, specifically in this case about externalization of blame. Our sense was that parents were worried that they had not adequately prepared their young children to face the big world beyond preschool and were dealing with that feeling by blaming the teachers. A second element to put into the mix was the impact of separation on all parties. We know in general and, more specifically from the study of termination in treatment, that there are many unconscious equations of loss and change with rejection, abandonment, or death, to name but a few (J. Novick and Novick 2006). The teachers felt immediately relieved; these ideas rang true and freed us to think of constructive ways to address these parental anxieties.

With all this in mind, we begin at Allen Creek in the fall and winter of the last year, when parents are already talking about where to go for big school, reminding them that their children still have a whole year of growing and experiencing ahead. Parents' job is to anticipate and plan, but the next school year is far away for the children. Such conversation includes implicitly and sometimes explicitly the acknowledgment again that it is painful to realize that one's kids have a different experience from oneself. The advice is to offer their children pleasure in the present, and resist the temptation to short-circuit the complex feelings around goodbyes, especially sadness, by talking up the next year enthusiastically. There will be plenty of time for realistic preparation around the new school.

With the children, teachers in the senior preschool and fives class begin in the spring to plan several different projects. They work on sorting photographs and other documentation of the year's work, generating displays, books, albums, and so forth. This also offers many informal opportunities for reminiscing and often leads to revisiting materials or games. Children bring baby, toddler, and current photos of themselves to school and talk about continuity and change. One class painted pictures of their memories of their first day at Allen Creek and wrote stories underneath about then and now.

As parents help in these efforts, they shift from their anxieties about the future to consolidation of the gains of the preschool years. This is all talked about in parent groups, where parents often associate to transitions in their own childhoods. This work in the classroom and in the parent groups fosters integration of various emotional muscles in the service of greater capacity for self-reflection, which will be a lifelong asset to grownups and children. Just as during the termination phase of treatment, this last six months of preschool becomes a substantive, rich growth experience for everyone.

This example shows us the relevance of using psychoanalytic thinking about termination in relation to issues in the preschool itself. A broader application includes the work we have done on the pretermination phase of treatment, where one of the things we look at with patients is whether they have expanded their resources in significant relationships beyond treatment. Do they have other people who will be there to meet basic human needs to be listened to, understood, and validated? Or are they still focused solely and dependent on the analyst? This has to be addressed in preparation for being able to do the hard work of termination and living life beyond treatment. This holds as much for the analyst as for the patient.

The same is true for psychoanalytic institutions, which sadly have a bad track record for continued existence beyond the era of the founders. For us the most poignant example is the Hampstead Clinic (Anna Freud Centre), where plans for succession to Anna Freud

were neglected and the character and identity of the institution could not be maintained. At Allen Creek, with the leadership of our second board president, Judith Sherick, a distinguished educator, our board structure was professionalized; a school administrator was later hired and a lead teacher identified. Over subsequent administrations, finances have been stabilized, orderly terms for board members established, and recruitment of new board members from a wider mix in the community has become the norm. According to the bylaws, the board vice president and some members must always be psychoanalysts, which preserves the essential nature of the school. At the same time, the teachers have expanded their horizons to integrate many curricular aspects drawn from the Reggio Emilia tradition, which our studies have demonstrated is very compatible with our psychoanalytic developmental approach. All this was like the pretermination phase in treatment, a time to prepare for a “good goodbye,” and trust that the new generation can carry on with the work of the founders.

Another resource for support and longevity has been to look beyond our one little school to the wider community of colleagues interested in integrating psychoanalysis and education. From the 1970s on, there was a self-selected group of people who regularly met together at the annual meetings of the Association for Child Psychoanalysis. For a dozen years, we shared experiences, talked about techniques and ideas to borrow in our different locales, commiserated over setbacks and resistances, debated the virtues of different models of interface between analysts and educators, between child and adult analysts, and between analysts and social agencies; the various venues where we might be of service, and so forth. Eventually we generated an e-mail newsletter, the Round Robin, realizing that we needed more frequent contact if our several endeavors were to grow and flourish.

Ultimately these efforts culminated in the formation of a new nonprofit, the Alliance for Psychoanalytic Schools (APS), organized to provide support to existing psychoanalytic schools and those in various stages of development, as well as to provide a forum for individuals interested in promoting the interface of education and psychoanalysis. The first members were the Hanna Perkins School, the Lucy Daniels School, Allen Creek Preschool, and the Harris School in Houston, which later became the New School in the Heights. Since those early days, organizational membership has grown to nine schools, and there are a number of individual members. The APS maintained a regular discussion group for twelve years at the annual meetings of the American Psychoanalytic Association, and offers information and links on its Web site at psychoanalyticschools.org. The APS, too, has a new generation of leaders to carry it forward.

Starting and continuing a preschool (or any school) is a challenging endeavor, but we hope that telling the story of the beginning and continuing growth of Allen Creek Preschool might inspire others to work in or even start a psychoanalytic school. As we write this account, the young people from our first very junior toddler class are in their last year of college. Our impulse to get together with many others and make a school has led to a good outcome and we look forward to the happy and fruitful continuation of Allen Creek.

2. We are often asked how the school came to be named Allen Creek. It was Joan Blos, one of our founding group, who suggested we find a name that would not be so specific to Ann Arbor that it would put off people from surrounding areas, but that would relate to a feature that Ann Arbor people knew about and could feel was their own! Allen Creek, named for one of the founders of the town, runs through Ann Arbor and is familiar to locals. We also enjoyed the imagery of the creek, which resonated with ideas of development and the free flow of good functioning.
3. Interested readers can contact Kerry Kelly Novick at kerrynovick@gmail.com for a copy of the write-up from this research.

Notes on contributors

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