## QUALIFICATION AS A PSYCHOANALYST AS AN ASSET AS WELL AS A HINDRANCE FOR THE FUTURE GROUP ANALYST

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Psychoanalytic theory and practice rest on the psychoanalytic situation. Freud's theory inevitably grew in the scientific climate of his period but his discoveries stand the test of time. As a method of <u>research into the origins</u> of the neuroses and of a part of human behaviour in general, psychoanalysis is unsurpassed.

The most important of these discoveries for us are:

- 1) <u>Infantile sexuality</u> and the power of (self-) <u>destructive forces</u>;
- 2) Oedipal and pre-oedipal conflicts, which reach consciousness only in disguised and distorted form; unconscious resistances and defence mechanisms, e.g. symbolic expression, displacement, transference, projection and introjection, splitting and identification; (main source: <u>Interpretation of Dreams</u>);
- 3) <u>The structural model</u>, particularly the operation of an <u>unconscious Ego and Superego</u>.

Group-analytic Method and Theory rest on the group-analytic situation. It demands a new orientation, which is also in line with present day theoretical concepts in general. It is the <u>best method of research</u> into the conditions and <u>nature of psychotherapeutic processes</u> and of <u>change in human behavior</u>.

From the beginning, the new factors coming into operation when one treats people in a group have been separated out as "group-specific" factors. From this emerged eventually the concept of the group as the basis, as the matrix, of all mental processes.

This leads to the "Network Theory" of Neuroses, that is to say to the insight that disturbances in the individual's equilibrium are the result of conflicting forces operating in the shared, interactional context of his intimate relationships. Restoration and intensification of communication in its most comprehensive sense becomes the central therapeutic agency. In this context everything is considered as communication, not merely what is said, or otherwise shown, but symptoms, illnesses, accidents, behaviour in- and outside the group, changes and reactions in the intimate network, the "plexus", of the patient, in short everything which registers within the therapeutic ("T") situation in whatever way.

These new insights throw, retrospectively, a new light also on psychoanalytic concepts. The simplest model for this is our consideration of the original family-network as a whole as the source of each individual's development, which led to "family therapy". The genesis of the Ego and the Self become intelligible. The nuclear Ego, the Self, is in fact a precipitate of the family-dynamic constellation, which in its turn reflects the total socio-cultural system prevailing. Some of this links up with modern ego psychology in psychoanalysis.

In view of our main theme at the present occasion we will leave these more general considerations here and turn to questions concerning psychotherapy.

Psychoanalysis as a therapy had as its aim —maintained by Freud to the end of his life-the uncovering and working through of the childhood neurosis. In this process it encountered the phenomenon of Transference and Repetition. The problems arising from this have not yet been solved satisfactorily. This considerably limits the value of psychoanalysis, in its pure form, as a therapy. Psychoanalyses have been extended in time. The analysis of the transference neurosis is more and more the central preoccupation. There seems to me a danger that the Neurosis swallows up the Analysis. In theory the dissolution of the Transference is the aim; in practice this does not often occur ideally, to put it mildly. In my opinion Transference has an almost magical power, perhaps related to hypnotic suggestion. It can be understood as the result of the most primitive, early (possibly even prenatal) relationship of the infant to the mother, which seems to be inevitably revived by the classical psychoanalytic situation. I must in this respect disagree with Miss Anna Freud who called this form of recapitulation in psychoanalysis "a myth" and who considers that this rests on an unconscious need on the part of the analyst.

However, as a method of training for the future psychoanalyst, psychotherapist and group analyst, psychoanalysis remains invaluable.

<u>In group-analytic psychotherapy</u> the individual is seen and treated as a whole. This can only happen because he is not related to only one person, the analyst, but to a number of others, with whom he shares the therapeutic situation, but who are otherwise unconnected with him. As stated, the main medium of therapeutic processes is <u>communication</u>, <u>shareable</u> after decodification (analysis) of all observable phenomena. "Free Association" is replaced by "Free-floating Discussion".

The most decisive therapeutic process has been termed by me "ego-training and – analysis in action" in which the group is an active agent. It will be understood that what I have in mind is the unconscious ego and superego in dynamic interaction with the others'. The therapist, while retaining an "analytic attitude", modeled on that which is characteristic in relation to all transferencial manifestations, acts as administrator, catalyst and guide. There is here a decisive step involved: instead of the relationship between the therapist and patient being seen as Transference-Countertransference in their interaction, the <u>relationship</u> itself becomes the centre of consideration. In the group situation the interrelationship of all concerned takes this place. This particular network of interacting processes is essential for the concept of the "<u>Matrix</u>".

The experience as a patient in a well-conducted group-analytic group is an important part of the therapist's training. For full appreciation of all this, I must refer to my writings. Of special importance are the concepts of "mirror reactions", matrix", transpersonal communication on multiple levels", the combination and integration of supportive, constructive and analytic factors. While all the processes known from psychoanalysis operate – as modified by the group situation – the ego itself is regenerated, as it is confronted with the conditions prevailing in its genesis. The same is true for the superego. This fully explains the change in depth, which can be observed, and its lasting nature.

The transformation of the transference-neurosis in the group situation has been very lucidly described by Dr. Rita Leal (Transference Neurosis in Group-Analytic treatment, G.A.I.P.A.C. Vol. 1 pp, 101-109). I see, in addition, an equivalent of transference in a group in the need for the individual to restore his family situation, but he then finds

himself confronted with different responses and <u>has</u> to change his behaviour and attitude as well as his values. This is important, because we do <u>not</u> get stuck in the working through of the family situation. Exposure to this new and unprecedented relationship transforms the individual.

Now we come to our main topic for discussion:

What does the trained psychoanalyst bring with him?

## I. by way of assets:

- a) the basic knowledge of psychoanalysis and its principles, familiarity with primitive (primary process) thinking;
- b) his own experience as an analysand;
- c) the "analytic attitude";
- d) the understanding of the patient's reactions in the light of the therapeutic situation and of his responses, especially in terms of Transference and Countertransference.

## II. by way of resistances:

- a) those arising from confrontation with any new situation;
- b) fascination with the concept of transference and other psychoanalytic concepts which are seen as absolute; unnoticed introduction of specific "values" into observation by psychoanalytic terminology and "interpretation", e.g. identification, projection, etc. etc. These are seen as isolated processes instead of interacting, transpersonal ones;
- c) preoccupation with his particular brand of emphasis, especially that of his own analyst;
- d) overemphasis on the psychoanalyst's way of interpretation underestimation of the group context; too much emphasis on the individual as an isolated being;
- c) quasi-religious adherence to all the above.

## Typical defences of the psychoanalyst in relation to group psychotherapy

Approximation to psychoanalytic situation with which he is familiar.

This can be done in various ways, e.g.

- i. Group analysis is the psychoanalysis of the individual members in a group. This is often combined with "preparation" of previous or concomitant individual treatment.
- ii. Extension of number of meetings, 3, 4, 5 per week. This approximates the psychodynamics in the direction of psychoanalysis.
- iii. Reduction of number of patients, to say, five, to the same effect.
- iv. "The Group is one Patient". This restores the one-to-one situation with its built-in inequality.

There is no need for these resistances and defences. If they can instead, be genuinely overcome and the partisan, emotionally held, almost religious convictions give way to a truly scientific attitude, a total integration can be achieved. This is especially true with what now begins to be understood as "psychoanalytical psychotherapy". In this connection, the term psychotherapy is used as fully equivalent in quality to psychoanalysis and not as an inferior or cheaper method as used to be the case. It was in the same sense that I called my own method "group-analytic psychotherapy" and not group psychoanalysis. Classical psychoanalysis should perhaps better be seen and understood in the conceptual framework of Freud's own time.

S. H. Foulkes, M.D., F.R.C.Psych. 7 Linnell Close London NW11 7LN