

# GROUP PSYCHOTHERAPY: FRAME OF REFERENCE FOR TRAINING<sup>1</sup>

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## Summary

The International Congress of Medical Psychotherapy in 1979 gives the group psychotherapies a place on equal footing with other forms of psychotherapy. This paper follows first the evolution of the group psychotherapies as a frame of reference in therapy to than go on to the subject of training in this ambit. There are many forms of group psychotherapy which emerge from different models of the human being and different philosophies. ¿Should group psychotherapists be trained in all these techniques? The author does not think so. He thinks that there is a place for many different forms of training and practice, and that experience and investigation will help us find an adequate fit between treatment and the needs of the patients as well as training and the personality and capacity of the future professional. The paper centers particularly on analytic group psychotherapies, their process of separation/individuation from the “paternal matrix” of psychoanalysis and their specific characteristics as a frame of reference in the training of professionals.

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This is an important event; group psychotherapy is given equal status with other forms of psychotherapy in a Congress devoted to training and research. Training in psychoanalysis has a long history and the many psychoanalytic training institutes belong to the powerful and well integrated International Psychoanalytical Association which holds regular and frequent conferences devoted to training at which the curricula, the problems of the training analysis and of supervision can be discussed. Psychoanalytic institutes share a devotion to Freud's genius, to his discoveries in theory and technique and the rich diversity of contemporary psychoanalysis attests to its vigorous growth.

What is the situation regarding training in group psychotherapy? Its history is shorter, for modern group psychotherapy could reasonably be said to have begun in the early 1920s with the experiments of Trigant Burrow and his analytically informed discussion groups, at the same time as Moreno was beginning to develop psycho dramatic techniques. In the 1930's several significant parents of group psychotherapy emerged — Schilder, Foulkes, Wolf & Schwartz, Slavson and as with Freud, apprentices gathered around them. This process was accelerated and intensified by the Second World War where group techniques were tried out on a large scale in military psychiatry and found to be successful. Foulkes, Bion and Maxwell Jones were particularly significant figures in that epoch. At the same time Kurt Lewin uncovered the field of group dynamics and began to demonstrate the power of group processes in maintaining and in changing individual attitudes. In fact training in group dynamics was organised earlier than in group psychotherapy, probably because it could be seen as a new field of activity within social science whereas group psychotherapy has been, and still is, going through a slow process of separation and individuation from its parental matrix of psychoanalysis, if I may use such a mixed metaphor.

Before turning to consider the praxis of training in group psychotherapy I would like you to consider the evolution of group psychotherapy as a frame for therapy. Why did it follow psychoanalysis at this interval of some thirty to forty years and not develop coincidentally with it; how have the divergent schools of group psychotherapy grown up; and is there a possibility that they may join together in one large training organisation, and is that desirable?

It is significant that group psychotherapy in the form of group analysis, that is forms of group psychotherapy strongly influenced by psychoanalysis and conducted by persons with psychoanalytic training and experience appeared in the 1930s, for by then there was enough understanding of transference and counter-transference phenomena to show that psychoanalysis was a process carried out through the medium of the relationship. The first phase of psychoanalytic theory, based on the early instinct theories, was then giving way to an increasing appreciation of the importance of object relationships and of ego psychology. Indeed it is not sufficiently appreciated that Trigant Burrow, the founder of group analysis, was one of the first psychoanalysts to point out the great importance of early primary identification of the infant with his mother, thus bringing the earliest periods of psychic life into the sphere of psychoanalysis, of object relations and of the transference. The instinct theories were not applicable to group phenomena; internalised object relationships in the form of the super ego and ego ideal projected onto the central group figure, the leader, thereby forging the common bond of group membership; this was the crucial step in psychoanalytic theory made by Freud<sup>i</sup> and which opened the way for a psychoanalytic group psychology. Group psychotherapy has been able to incorporate the findings of the object relationship aspect of psychoanalysis into its own theories and practice. Together with this we have seen the gradual shift in psychoanalytic theory from the model of mental apparatus as a mechanism fuelled by the instinctual drives, to a model of a psychodynamic system maintained in a state of dynamic equilibrium by complex ongoing processes of communication and relationships;<sup>ii</sup> this model is much easier to integrate with group processes and group psychotherapy.

At the same time as psychoanalytic theories were moving towards object relationships, social psychologists began the dynamic study of group processes. Group morale, leadership, membership, the nature of relationships within groups, of intra and inter-group conflict, of group development, of negotiations and of attitude changes, came under scrutiny. The term we are using this week, the “frame of reference” itself was intensely studied by Sherif<sup>iii</sup> and his co-workers who showed how much individuals seek “anchorage points” in order to maintain their attitudes against a changing context of social opinions and of group pressures and how powerfully and unconsciously these pressures affect us. The gestalt psychologists showed us the dynamics of the process of perception, how the same stimuli may be perceived in greatly *differing* forms according to whether the percept is of figure or of ground. Many of these findings from social psychology and Gestalt psychology become part of the frame of reference of group psychotherapy, for instance as figure in the practice of gestalt therapy in groups, as ground in the group analytic psychotherapy of S. H. Foulkes of which I shall speak later. Some knowledge of these processes should form part of any comprehensive training in group psychotherapy.

Another major input to the theoretical model of group psychotherapy, I suggest, comes from that area of social psychology concerned with self theory. The fundamental, indeed colossal, powers of social processes involving the self image; the penetration of social forces to the very core of being; the great powers of social forces to define and to redefine the self concept and the relationship of self of others; these findings also need to be incorporated into the frame of reference of group psychotherapy. The seminal figures here are William James, Cooley and above all George Herbert Mead<sup>iv</sup> whose work is the foundation of the Symbolic Interactionist School of social psychology. Just two quotations from the extensive literature will, I hope, show the force and relevance of this work. First from Mead himself: *“The behaviour of an individual can be understood only in terms of the whole social group of which he is a member, for it is this larger group that provides the context for individual acts”*. The second: *“It is not just that people are present around us that make our acts social: much more important are the people who are present within us. Other people are present within us through symbolic representation”*.<sup>v</sup> From this branch of social psychology we have learnt of the fundamental importance of groups in the processes of socialization, that we become human in the human context through the effects of primary groups, face to face groups of family and of childhood and through the reference groups of later life. We can see how the therapy group gains much of its power as change situation through becoming another primary and reference group. Understanding these social forces helps to balance views derived from individual psychodynamics and thereby to provide a more coherent view of the forces that work in group psychotherapy.

So far I have sketched out some areas of theory that I myself consider essential to include in the frame of reference of group psychotherapy. They derive from psychoanalysis, particularly in the area of object relations theory; from social psychology, particularly from studies of socialisation, of social forces that mould the personality from birth onwards; from Gestalt psychology with its study of the dynamics of the figure ground relationship; from group dynamics derived largely from Lewinian field theory. There is a common factor here: a new scientific paradigm in which we see systems as a whole, the system of which the individual is a component part. To understand how a system works we have to see the relationships between these component parts. Taking the system rather than the individual as the carrier of the action is common to the natural and to the social and psychological sciences. *“The need to treat the group of individuals who are connected by numerous strong and complex interactions —not an isolated individual acted upon by a single force— provides the motive both for a psychological group theory as well as for a physical system theory”*.<sup>vi</sup> When we use the framework of systems rather than individuals we can then see individual psychotherapy operating as a relatively closed “private” system and group psychotherapy as a more open “public” system.<sup>vii</sup>

Let us now look at the principal schools of analytic group psychotherapy and see to what extent they have included these factors in their theoretical models and in their practice. The three schools<sup>viii</sup> of analytic group psychotherapy are:

1. Psychoanalysis in the group —the schools of Slavson, of Wolf & Schwartz, the predominant American schools.
2. Psychoanalysis of the group, associated with the work of Bion and Ezriel, often known as the Tavistock School.
3. Psychoanalysis by the group, associated with the group analytic viewpoint of S. H. Foulkes.<sup>ix x</sup>

The frame of reference for the first approach, psychoanalysis in the group deliberately discounted the findings of group dynamics and of social psychology and tried to bring as much of classical psychoanalytic theory and technique into group psychotherapy as seemed possible. The second, psychoanalysis of the group, treated the group as if it were one individual locked into a transference battle with the omnipotent parent figure of the analyst. The third, psychoanalysis by the group, the model of S. H. Foulkes, does have a frame of reference that rests quite fully on the areas of theory that I have outlined above and it is this theory that forms the basis of the training that we offer at the Institute of Group Analysis, London, one of the first organisations that has presented a full training in Group Psychotherapy. Foulkes' definition is that *"Group analytic psychotherapy is a form of psychoanalytic therapy which takes as its frame of reference the group as a whole, like all psychoanalytic therapy it puts the individual into the centre of its attention"*. We shall here draw a lightning sketch of group analytic theory which attempts to integrate individual and social psychology. It is based upon the following propositions:

- That the essence of the individual is social, as he develops only in a social context and is defined as a person by this context. The individual is a nodal point in the social network.
  - Neurosis and psychological disturbances in general have their origin in disturbed social relationships.
  - These disturbed relationships develop from the unconscious forces of love and of hate that affect the relationships of the individual and of his social network. He now becomes a nodal point of disturbance. The neurotic position in its very nature is highly individualistic. It is group disruptive in essence for it is genetically the result of an incompatibility between the individual and his original group. It is at the same time an expression of destructive and aggressive tendencies.
4. The resolution of the individual's conflict is possible in a social network, either that of the group in which the disturbance arises, e.g. the family or in a therapeutic group:
    - The symptom or disturbance will be reactivated in the group. It will be located in the communicative processes and relationships patterns and appear as a characteristic disturbance of these. The symptom will be translatable into communicational processes. The person's inner world is actualized in the group context.
    - The healing properties of the group situation lie in the uncovering of the interpersonal disturbances and their resolutions in the relationships context of the group. New modes of relating are available once the old patterns have been recognised, analysed and transcended.

- As each member of the group represents a deviation from the norm of the community to which all members belong, collectively they are the norm from which each one is a deviant.
- The therapist's role is predominantly to be of service to the group as a whole. He is able to identify processes which obstruct free communication and fuller understanding between its members. With his help, the group as a whole, and consequently its individual members will develop and mature.

It is not possible to discuss further the technique of group analytic psychotherapy now. What I wish to emphasize is that technique and theory go together. The technique is analytic, takes full account of the unconscious processes of the group, such as transferences and counter-transference phenomena. The group conductor is also the "first servant" of the group. His great authority and exalted position, based upon the transference, is used to enable the group to overcome anxieties and resistances. As the authority of the group increases so his diminishes. It is not needed when the members become more able to understand and to deal with their own difficulties. The technique is firm but gentle, facilitating self disclosure and communicative flow.

This basic group analytic technique, which encourages and facilitates all those present in the group to face and to analyse their relationships and to understand the group situation in depth, is a powerful tool for the treatment of neurotic personality disorders. Further, it can be used flexibly in a great variety of settings: in the family group, the children's group, with adolescents and with marital problems. It can be used by social workers in their work settings, by hospital staff in a therapeutic milieu and in therapeutic community, in training groups and in staff groups. It can be used at different depths and levels. I would now like to illustrate this by reference to our training programme in London.

For several years we have offered a 1 year foundation course in group psychotherapy. The participants, who usually number over 100 per year, come for one afternoon a week which is divided into 3 semesters of ten sessions. For all those 3 semesters they participate in their own group experiences, in groups which number between 12 and 15 members, meeting for 1 1/2 hours in a classic group situation. Here the leader's role is primarily interpretive and group facilitative. For two terms they attend lectures on basic group analytic theory and practice, interspersed with seminars for discussions. For their final term they participate in a large group experience together with the group leaders. The impact of this one year introductory course on the personality of the participants is often considerable. It is quite remarkable how much can be revealed and worked through in this time and how the group processes develop. The participants come from a wide range of professions: psychiatry, psychology, psychiatric nursing, social work, marriage guidance councillors, probation officers, social scientists, administrators, family doctors and public health workers. You can imagine the confusion of tongues there is to begin with and the personal and professional suspicions, rivalries and hostilities that appear and the relief when these can be translated in group process events and understood in this new context. In particular the large group has a dramatic impact as a new form of social organisation gradually emerges from the initial frightening chaos, a chaos which puts the participants closely in touch with feelings of loss of identity, with fears and defences against disintegration, an experience which for some of them comes close to psychosis.

This 1 year course is not a professional qualification; the students have gained a basic theoretical and personal experience of analytic group therapy which for most of them is enough to help them in their work and personal development. Following this 1 year introduction, many will want to go further. Of these some 10 to 20 persons per year will be selected after careful personal assessment to take part in the 3 year qualifying course. The basis of this is personal therapy in a twice weekly therapy group, a straightforward therapy group which the student joins with people who come to the groups as patients,

for personal help. The group experience lasts the full three years of training and indeed may be longer for some. The theoretical training occupies 2 years on a part time basis. The syllabus concentrates on personality development and psychopathology; on group dynamics and processes; group analytic theory and practice in general and special settings such as work with addictive patients and with social deviants; research issue and approaches; work with staff groups and with psychiatric and social institutions. The student's own therapeutic work is carefully supervised.

This training has evolved over the past 8 to 10 years and the graduates now number approximately 60. They work in a great variety of settings and their contribution is, we believe, valuable and well appreciated. Some may choose to go on to a full training in one of the forms of individual psychotherapy and occasionally a lone brave traveller makes the journey in the other direction and a trained psychoanalyst or analytic psychologist will train in group analysis. Those that do have found the experience enriching.

We have tried to create a frame of reference for training that stands on its own feet. In this the students own therapy stands paramount. Personal insight and change are aimed at.

Now what of the other forms of therapy that use group format: action methods such as psychodrama, gestalt therapy, transactional analysis. We do not include these at present in our training, apart from optional weekends and short term workshops, which our own graduates who are also trained in these other methods may occasionally offer. The reason for this is that we value the group analytic situation in itself and know that a long, slow process of change and of working through must take place, all this can be disturbed and diverted by exposure to a variety of group methods. I am not claiming that this group analytic method is superior to all others. I am presenting it as a frame of reference for training that is consistent in theory and in practice, which is based on a social psychology which also takes full account of the findings of individual psychology but which sets them in the wider social perspective.

The trainee's own therapy: the personal experience of psychotherapy as the foundation of a professional training is widely accepted in the training of individual psychotherapists. It is probably universal in the psychoanalytically oriented programmes and the same considerations apply in groups as in individual psychotherapy. The trainee needs his own experience in the group situation, not simply to be able to appreciate the situation of his patients; he needs it for his own personal therapy. He will discover, we hope, that there is much that he takes for granted in his personality and modes of interaction that will need to be understood in depth and to be worked through and altered. Many group therapy training programmes limit the student's experience to self experiential groups composed entirely of students and which are time limited. We however have always insisted upon a full group experience for our trainees. They join a therapeutic group, an ordinary patient group that meets twice a week, and they are expected to stay in it for the duration of the training, some three years. This experience is the foundation stone of the training, added to later by close supervision of the trainees own group work. Personal therapy and good supervision are a most important part of the training and give the experiential basis to which theory can be related. The internalisation of this experience builds up the trainee's frame of reference of the group situation and of group processes. Many of our trainees have had personal individual psychotherapy before joining the training programme and indeed some have had analytic training; they have come to appreciate the insight, the experience, the challenges and benefits of their group therapy.

The question can be asked, is the training group analysis necessary but insufficient? Should a trainee have individual psychotherapy as well? From our experience this does not seem necessary for the majority of our trainees in regard to their work as psychotherapists: some students go on to

undertake a formal psychoanalytic training in order to equip them for more intensive individual work as well.

We must now consider what are the advantages and disadvantages of psychoanalytic training for group therapists<sup>vi</sup>. The disadvantages are that the psychoanalytic training alone, without a group experience does not prepare the therapist for the group situation where he has to give up his accustomed privileged and protected role. The group therapist is far more exposed and subject to social forces which are not part of the dyadic situation. The group therapist has to rove into social space more, he has to learn to facilitate group processes and not to restrict his role solely to that of the expert interpreter. He has to learn to act, to respond, as well as to analyse. His frame of reference must be the group situation and it is personal experience and his theoretical training which will develop this capacity in him. He listens to the range, the scope, the form of communication within the group. His concern is to extend, widen and deepen the range of communication so that more understanding and more information is made available to the group members. The therapist's interpretations are an important part of this process but if he sees his role solely as that of interpreter he is transposing, indeed imposing on to the group situation an inappropriate model which may lead to a collusion with the group to a fixation or dependency situation. The essence of the group analytic situation is the discovery by the patients that they indeed have the capacity to solve many of their own problems.

In the time that remains I wish to turn from the practice of training to the theory of therapy. I believe that there are many indications that the theoretical models of change in individual psychotherapy and in group analytic psychotherapy are converging. Broadly speaking within psychoanalysis three different factors<sup>xii xiii</sup> have emerged as the major components underlying the theory of treatment. These factors are those of understanding (insight), attachment (transference) and of integration (reorganisation of the ego on a higher level of functioning). At one time only attachment, transference, was considered to be in the area of social relationship of a 'two body' psychology. Understanding and integration were still placed in the context of a 'one body' psychology, the mind of the isolated individual. Psychoanalytic theory has begun to recognise that all three factors: understanding, attachment and integration take effect in the social relationships of patient and therapist, a group of two. Clearly these same factors apply also to the small therapeutic group. We should add to the fact of understanding and insight the concept of "outsight"<sup>xiv</sup> which describes that particular form of insight that is available to persons in the group situation where people can learn about themselves in many different ways. In the group persons learn to see themselves as they are seen by others, a process which Foulkes was the first to call mirroring. The literature of individual psychotherapy pays increasing attention to this concept of mirroring, both in terms of infantile development and as particular forms of transference relationships especially in the area of narcissism.<sup>xv</sup>

This brings me to the second point of convergence between psychoanalysis and group analytic psychotherapy. The concept of the self has never been an easy one to deal with in psychoanalytic theory, for self is clearly a social construct. It is the outcome of interpersonal processes to which the child has been exposed from the moment of birth. As psychoanalysis develops a coherent theory of self,<sup>xvi</sup> so the two conceptual frameworks move closer together. The aim of therapy can be seen as the re-definition of self<sup>xvii</sup> through transactions with the other, the analyst who becomes the representative of the internalised other or others through the transference situation. The same process occurs in the group as the others in the group become the targets of externalisation of the inner world. One of the significant differences between individual and group psychotherapy lies in the response of the other upon whom these projections have been made. In the group situation the response of the other members of the group is an active one and is not confined to a projection in the group situation. Firstly, the projection is recognised and identified as belonging to the patient. Recognition and working through of transference projections unblocks the way to a new form of relationship which the patients can have

with each other, with the therapist and with the group as a whole. These new forms of relationship are more mature and derive from the open system of the group and do not represent a repetition of the closed system of the transference neuroses.

The second point of convergence lies within the realm of self theory. Psychoanalytic observations and reconstructions of personality development all point towards the emergence of self from the undifferentiated matrix of the mother child relationship<sup>xviii xix xx</sup> which is itself immersed in the cultural context of the family. The process of therapy, particularly with those disorders which seem to have arisen very early in life, must therefore involve the recreation of such early matrix experiences. It is in this respect that group analytic theory has been in advance of psychoanalytic theory in that the matrix of the group process was emphasized by Foulkes from the beginning of his work. Through participation in the group process the individuals experience significant changes in the boundaries of self; the participant in the group has experiences that relate his sense of "me-ness" in the context of group membership that brings about a sense of "we-ness".<sup>xxi</sup> Psychological growth seems to take place as a result of processes that involve these two poles of the self, the self as a locus of experience and the self as encompassed within a larger entity, the surrounding group, just as in infancy the child experienced itself as emerging from the encompassing entity of the maternal matrix. Again time does not allow me to illustrate the concept with clinical material nor to refer to the literature in which these theories have been ably expounded.<sup>xxii xxiii</sup>

Let me return, finally, to the subject of this address "Group psychotherapy; a frame of reference for training." Compared with psychoanalysis, with behaviour therapy and client centred therapy, group psychotherapy is more heterogeneous. There are many forms of group psychotherapy; behavioural group therapy and client centred group therapy have their own forms of training. Should group psychotherapists train in all these techniques? I do not think so. These techniques arise from different models of man, from different philosophies and in our field, as in the field of individual psychotherapy we have room for many different forms of training and practice. Research and experience may help us to be more selective in matching treatment to needs as well as training to personality and ability.

Only a few years ago persons seeking systematic training in group psychotherapy would look in vain and the sparse literature reflected this state of affairs.<sup>xxiv xxv xxvi</sup>

Yalom's synthesis of the clinical and research literature, the Fenichel of group psychotherapy, gave a splendid and comprehensive perspective over the whole field and heralded a new era. Since then many training programmes have been started and the process of individuation-separation from individual psychotherapy which I referred to earlier has accelerated.

The psychological birth of group psychotherapy was in the 1930's; our practising sub-phase was in the 40's and 50's; I hope that we have been through the rapprochement phase, painful to both partners, in the 1960's and early 70's and that now, almost into 1980, marked by the organisation of this Congress and with our own training programmes and institutes we are well on the way to that form of maturity where we become centres of our own initiative, autonomy and integrity. Having written this concluding sentence I then realised that its terminology was borrowed from psychoanalysis, from Margaret Mahler and from Heinz Kohut. So perhaps we are not as separate after all. But on further reflection I realised that both these great figures have been concerned with the crucial significance of the social relationships and are very sensitive to group processes. So perhaps we do not have to part company after all.



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- i Freud, S. *Group Psychology and the Analysis of the Ego*. Standard edition. Vol. 18. Hogarth Press. 1957
- ii Yankelovich, D., Barrett, W. (1911) *Ego and Instinct*. Vintage Books
- iii Sherif, M., Cantril, M., (1947) *The Psychology of Ego-Involvements*. J. Wiley
- iv Mead, G.H., *Mind, Self and Society*. University of Chicago 1962.
- v Schellenberg, J.A., (1978) *Masters of Social Psychology*. Oxford University Press, N.Y.
- vi Durkin, H. (in press) *Some Contributions of General Systems Theory to Psychoanalytic Group Psychotherapy*, in: *The Evolution of Group Analysis*. Ed. Pines, M. Routledge, Kegan Paul. London.
- vii Hutten, E. (in press) *Meaning and Information in Group Process*, in: *The Evolution of Group Analysis*. Ed. Pines, M. Routledge, Kegan Paul. London.
- viii Pattison, E.M. (1973) *Social System Psychotherapy*. *American J. of Psychotherapy* 27.
- ix Astrachan, B. (1970) *Towards a Social Systems Model of Therapeutic Groups* *Social Psychiatry*, 52.
- x Foulkes, S. H. (1975) *Group Analytic Psychotherapy. Method & Principles*. Gordon and Breach. London.  
Foulkes, S.H. (1948) *Introduction to Group Analytic Psychotherapy*. Heinemann. p. 0. Foulkes. S.H., *Ibid.* p. 29-30.  
Foulkes, S.H. (1964) *Therapeutic Group Analysis*. George Allen & Unwin. p39.
- xi Pines, M. (1978) *An Introduction to the Work of S. H. Foulkes*, in: *Group Therapy 1978*. Ed. Wolberg, L.R., Aronson, M.L. Stratton Intercontinental, N.Y.  
Pines, M. (in press) *The Fundamentals of Group Analytic Therapy*. in: *The Evolution of Group Analysis*. Ed. Pines, M., Routledge, Kegan Paul, London.
- xii Foulkes, S. H. (1975) *Qualification as a Psychoanalyst as an Asset as well as a Hindrance for the Future Group Analyst*. *Group Analysis* 8, 180-132.
- xiii Friedman, L. (1976) *Trends in the Psychoanalytic Theory of Treatment*. *Psychoanalytic Quarterly*. 524-551.
- xiv Langs, R. (1976) *The Therapeutic Interaction. The Framework and Deviations in Technique*. Ch. 16. Jason Aronson, N.Y.
- xv de Mare, P.R. (1971) *Group Analytic Principles in Natural and Stranger Groups*. *Group Analysis* 10.1.  
Kohut, H. (1971) *The Analysis of the Self*. Hogarth Press. London.
- xvi Kohut, H. (1977) *The Restoration of the Self*. Intl.Univ. Press. N.Y.
- xvii Klein, G.S. (1976) *Psychoanalytic Theory*. Intl. Univ. Press N.Y.
- xviii Cox, M. (1973) *Group Psychotherapy as a Redefining Process*. *Intl. J. Group Psychotherapy*, 23, 446-473.
- xix Leowald, M. (1973) *On Internalisation*. *Intl. J. of Psychoanalysis*, 54.
- xx Lichtenstein, H. (1977) *The Dilemma of Human Identity*. Jason Aronson. N.Y.
- xxi. See footnote 16.
- xxii See footnote 16, 17, 19 and Mahler, M., Fine, F., Bergman, A., *The Psychological Birth of the Human Infant*. Hutchinson, 1975.
- xxiii Stein, A. (1963) *The Training of the Group Psychotherapist* in: *Group Psychotherapy and Group Function*. Ed. Rosenbaum, M., Berger, M., Basic Books, N.Y.
- xxiv Roman, M., Porter, K., (1978) *Combining Experiential and Didactic Aspects in a New Group Therapy Training Approach*. *International J. of Group Psychotherapy*. 28.3. 371-388.
- xxv Sadock, H.J., Kaplan, H. (1973) *Training and Standards in Group Psychotherapy* In *Comprehensive Group Psychotherapy*. Ed. Kaplan, H. Sadock, H. J.. Williams and Wilkins.
- xxvi Yalom, I. D. (1915) *The Theory and Practice of Group Psychotherapy*. Basic Books, N.Y.