#### TRAINING GROUP CLINICAL PAPER

### The Experience of being a Trainee in the Evolution of Early Group Experiences, the Anti-Group and the Group Mother. Peter Zelaskowski

An unpublished clinical paper written as a qualifying requirement for the Goldsmiths Diploma in Group Psychotherapy (1988 – 91)

This clinical paper is based on the first 50 or so sessions of a training group run at the Department of Psychological Medicine, Bart's Hospital on Monday evenings at 7pm. Start date: 14/5/90.

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## Preamble

All of a sudden I am faced with the totality of my training group. I thought, relative to the theoretical papers, that this would be easy, that I'd have too much to say, that here was a chance to come clean, to vent some spleen, to somehow vindicate myself by telling it how it really was. The reality is I can barely bring myself to read through my notes, which tells part of the story. They are scrappy, scribbled, sketchy, incomplete, and for anybody else, incomprehensible. Reading through them, however, the group is beginning to replay itself in my mind. At times a collision of scenes, images, voices, moods and emotions entering my consciousness, some staying, some receding. At others, rhythms emerge from the chaos and I can once again sense the group, feeling it's presence within me, the familiar worries and anxieties, the familiar ways of interacting and being, the familiar faces. I can smell the room, hear the noises from the street, and, from the area of the room I generally sit in, see the dome of St. Paul's out the window, the perfect symbol for this breast hungry group. I feel that I have given enough of myself already to this group and somehow resent having to write this paper. However, the time is upon me, the moment has arrived, a quick straightening of the hair, check to see that my clothes are in order and that my flies aren't undone and..... once more into the breach young man.

# Introduction

The intention here is to examine my training group using three different but usefully connected theoretical filters. Firstly by applying some of the ideas of Winnicott to the early experiences of the group and my experience of being a trainee group psychotherapist and from that posit some tentative formulations about the nature of training groups. Secondly, by briefly introducing and exploring Morris Nitsun's concept of the anti-group and then seeking evidence for its presence in the group. Finally, by applying the theory of the group as mother to my training group. These three perspectives may, I hope, help me to understand, clarify and explain my training groups confusing and at times pained history.

# Winnicott, Early Group Experiences, On Being a Trainee and the Group

The good breast is not a thing, it is a name given to a technique. It is the name given to the presentation of breast (or bottle) to the infant, a most delicate affair and one which can only be done well enough at the beginning if the mother is in a most curious state of sensitivity....Unless she can identify very closely with her infant at the beginning, she cannot have a good breast, because just having the thing means nothing whatever to the infant.

(Winnicott, quoted in Jackie M. Hughes, 1989, p.174)

The birth of my training group was by no means uncomplicated. The period of labour, two terms of double supervision, meant that in my mind it was long overdue. To compensate for my inexperience I had been delayed for a term, which at the time I believed would have delayed my qualifying for a year. In addition I was forced through complications to put the starting date back two weeks from the planned starting date, having already prepared 3 of the then 4 members for that date. Furthermore, I had only 4 members, 1 short of what I believed to be the bare minimum for a viable group. I was, however, determined to start, irrespective of these problems added to which I was full of fears and anxieties and knowing that 2 sessions into the group's life there would be a bank holiday, an early abandonment, for this Monday evening group. On top of this new members started at the third and fourth sessions. Abandonment and loss have been strong themes in my group and I can now see that these early experiences may have had something to do with this. I believe now that starting with 6 members two weeks after the bank holiday may have been a healthier start in life for this new group. The group in a sense was not quite "the good breast," it could have been early on for its members, being presented when it was, more to feed my urgent needs than the needs of the group members. I was unable to identify very closely with this infant group, not being in the required "state of sensitivity" to do so.

According to Winnicott the mother's mental state during the last stages of pregnancy and early years of infancy are critical for the child. The healthy norm he dubbed a "primary maternal preoccupation," a sort of "normal illness" during which the mother through identification of herself with her infant knows what the infant feels like and so is able to provide almost exactly what the infant needs at the beginning, which is a 'live adaptation to the infant's needs'. (Winnicott, in Hughes, 1989, p133) Mv 'preoccupations' at the beginning were with starting and not being delayed excessively, getting new members in as early as possible, before the original four established a culture of four and survival. It seems to me now that what the group was deprived of was an initial stable phase of undisturbed 'goodenough' mothering such that many of the group's later difficulties can be traced back to these early difficulties. An example of my early anxieties and their influence on the group occurred at the start of the very first session. I

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had been struggling with whether to start the session off by saying something. I decided to simply inform the group that the membership at present was four. I entered the room. Anita, Jack and Ron all sat in silence. I informed them that membership was presently at four and that we were waiting on Jackie. I realized as I was saying it that here was an invitation to wait. Sure enough a tense mounting silence passed, during which Anita took out a very hefty looking novel and started reading. Jackie arrived after seven minutes, deeply apologetic and stating that she presumed they'd introduced themselves. I felt a tidal wave of relief enter the room along with Jackie. The seven minutes of silence, I believe, were too much for a new group to bear so early on. My inexperience, compounded by my anxieties and uncertainties, which in the context can be seen as perfectly understandable, disabled my capacity to read and respond to the signals provided by the group and in this case by Anita. It is possible that my anxieties and uncertainties as a trainee are perfectly compatible with the notion of the 'good-enough' maternal care required from the group psychotherapist. Indeed I have often heard it said that the trainee provides the best value for money, given the levels of support they receive. I do not wish to deny this but what I am seeking to elaborate is something that I have become increasingly aware of in my own experience as qualification approaches, which is that as a trainee one is dependent on the group in a way that may be detrimental to the group's development.

It seems to me usual that mothers who are not disturbed by ill-health or by present-day environmental stress do tend, on the whole to know accurately enough what their infants need and, further, they like to provide what is needed. (Winnicott, in Hughes, 1989, p.133)

I would argue that my need for the training group to work or be a success evoked in me a form of environmental stress which has made it difficult for me to know accurately enough what the group's needs have been. Starting the group two weeks prior to a bank holiday break and introducing Dan and Kira in the third and fourth sessions respectively, are examples of how my needs as a trainee took precedence over the needs of the group. Evidence of this can be seen in sessions two and three. Interestingly, just prior to session two I had closed both windows as the previous week the noise from the street had been very intrusive, in particular, it had made things difficult for Ron who is hearing impaired. On entering the room I observed that the windows were wide open. At the start of session Ron, referring to a comment I had made the previous week about the amount of space available in the group to each member, stated that he had taken this personally and that, 'it felt as though he was squeezing me out'. My understanding of this at the time was in terms of the open windows and the other group members' wish to rid themselves of Ron and his obvious problems but now a possible group communication, in terms of the group feeling squeezed out by my needs, unconsciously communicated by myself in the way the group was being set up, comes into focus. Later on in this

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session the themes of safety, being cared for, being heard and my role were prominent. With regard to the latter Jackie said, half smiling and looking apologetically in my direction, 'he probably has as little idea as the rest of us'. I remember feeling this strike home. The following session, after the weeks break and with new member Dan, the group discussed, in a quite intellectualized fashion, whether people who have problems are born damaged or are damaged through their experiences. My feeling now is that the group was expressing something in a safe and disguised form about the birth of the group. The group was silently screaming about how it was being cared for and I was unable to hear.

It is interesting and enlightening reading through my notes on the group. Themes that I did not pick up on so clearly at the time, now suddenly emerge very strikingly as the dominant themes. I remember at the time being aware of some of these communications more, in terms of what they told me about the particular individual expressing them, rather than in terms of what they told me about the group. The dominant themes arising from this retrospective analysis I now experience more as coming from the group than from individual members. I am lead to conclude that my dependence on the group for getting me through the course, and all the concomitant anxieties served to obscure the group-as-a-whole from my vision. In a sense I have been defending myself against the group, in particular I suspect, its feelings of dependence and hostility. It seems to me almost axiomatic that my dependence on the group made me insensitive to its needs. I feel that my sight and hearing have tuned much more into the intrapersonal and interpersonal dynamics than the transpersonal. This has certainly been the message that my supervision group gave me and that I have so resisted. Failure to attend to the group represents, it seems to me now, a form of neglect and a cause of deprivation, because essentially it means that one is failing to hear what is being communicated. It is the parent who acts irrespective of its child's needs, who is directed primarily by its own needs, who is a closed system, cut-off and impermeable, for whom the child is merely an extension of itself, existing to meet its needs, serving as a 'transitional object' for the parent. Winnicott called this 'environmental failure' for the child. It need not be permanent and is in fact more likely to be only a temporary suspension of a mother or father's psychological ability to tend their children. Similarly, what I am describing in terms of my parenting of the group is not an absolute phenomenon, because in many respects I believe myself to be a giving and empathic conductor who attends and is attuned to individual members needs for personal attention, however my psychological ability to hear the group has been impaired at times by my difficulties being in the role of trainee. In a sense, I could not hear the group when it was saying, 'this is not working', but rather I was hearing early on what I needed to hear.

Sessions four and five provide much illustrative material. Kira, the new member, and Jack started session four by sharing their experiences of

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bosses insensitive to their conditions. In Kira's case her epilepsy and in Jack's his Crohns Disease. This lead onto Jack talking about his enforced early retirement from work and Jackie relating an experience from the previous weekend when at a gathering of relatives she'd felt overwhelmed by rage, gorged herself on food and made an early exit. There was general agreement that this was an understandable response for Jackie to have made, given how much her relatives lean on her. Anita then went on to relate how the previous week she had devised a 'hit-list' of the 23 people she was angry with, at the top of which was the man who she'd grown up believing was her father, who'd abandoned her at an early age. She had not seen him for many years and had decided to write a letter to him telling him exactly how she felt. (I had seen Anita 8 times individually prior to her entering the group.) Kira rounded things off by sharing her anger towards her father who had similarly abandoned her very young. My interpretations of these events at the time were more to do with how being in the group was putting individual members in touch with angry feelings towards family and figures of authority. I understood the more latent communications from individuals to me but not the clear unconscious group-as-a-whole communication. Session five commenced with a discussion in the abstract between Jack and Dan about what happens in childhood to make things go wrong. I remember discounting this as simply defensive intellectualization. Anita began to explore the theme of guilt in relation to her very hostile relationship with her supervisor. Kira attempted to convince her that this could well have more to do with what was being dumped upon her by the supervisor. I attempted to connect last week's anger to this week's guilt. Jack wanted this clarifying and then along with Anita and Dan talked of the confusion of their feelings and that they couldn't just simply isolate guilt and say that was what they were feeling. Anita talked about how positive she felt about the letter she had written to her father. I invited comment from others. Kira and Dan gave very affirming responses. I am struck now that Anita, Kira and Dan are to date the members who have dropped out.

One of the striking features of my training group is its pattern of attendance. (See attached chart.) There were no absences during the first seven sessions. For me this became a source of enormous pride. Such a well-behaved unproblematic baby. Then in the seventh session Anita announced that this was to be her last session. She had found an individual psychotherapist and had formed what was to be a leaderless support group with friends and colleagues, all but one of whom were to be women. This came as a bolt completely out of the blue. The previous week Anita, a social worker, had argued with Dan, an administrator in a social services office, about how social workers treat admin workers and vice versa. Anger which now strikes me as misplaced and which Anita was now acting-out. Since session seven there has not been one group where every member has attended. Session eight saw three absences and at session nine Anita returned for one last group during which she stated that one of her reasons

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was that she had a fear of dominating the group and doing all the work. The following week I received two letters from Anita, one to me and one to the group, explaining her reasons for leaving. The group expressed acceptance of her reasons and to a large extent denied having any particular feelings about her departure, although suggestions were put forward to prevent this occurring again. Towards the end, however, Jackie asked if she could change the subject. Today was the eighteenth anniversary of her mother's death. In tears she explained how she felt her mother had punished and systematically undermined her for being a rival for her father's affections. I now see that here more than just coincidence was being enacted. Anita, like Elektra, had been banished from the group by the group as mother, given voice through Jackie doing to Anita what had been done to her, for her attempts to contact father, Agamemnon, himself, myself, unable to protect her. I shall return later to the theme of group as mother, which I believe became its most powerful metaphor, but to conclude here by suggesting that Anita's departure unearthed a fragility, uncertainty and sickness in the group which had not been apparent to me before then but has since become more than apparent.

I have explained the group's difficulties in terms of a lack of early stability and my dependency as trainee on the group, such that the group-as-awhole's communications tended to be ignored. Winnicott's writings on early maternal care provided me with the theoretical underbelly, in that for good-enough mothering to take place the parent needs to be psychologically able to attend to the needs of the child and not simply to his or her own needs through the child.

# The Anti-group

Morris Nitsun (1991) defines the anti-group:

as a construct describing a constellation of destructive fantasies and impulses that may impinge on the group in varying ways and degrees.

The anti-group, he explains:

threatens the integrity of the group and its therapeutic potential. In certain extreme instances it may also threaten a group's very existence.

Reading Nitsun's conceptualization of the anti-group has proved a remarkably encouraging experience for me, as it has I feel the explanatory potential to help make sense of how my training group has developed. In particular several potential elements that he sees as being the source of the anti-group, to which I would like to add my own. The first being that most patients referred do not want group therapy. They want individual therapy. The individual relationship becomes gradually idealized and all that is bad, frustrating and depriving is projected onto the group. The group runs the risk of becoming all that is projected onto it and becomes 'the bad object, undependable, unsafe, persecuting'. Both Anita (8 sessions) and Jack (25) I saw individually in preparation for the group. This, possibly, is nurturing the anti-group.

A second source, described by Nitsun, is the early trauma, which 'may be so profound that the group never quite recovers'. I described earlier the early difficulties experienced at the beginning of my training group. It may indeed be a drop-out which Nitsun describes as:

symptomatic of an anti-group process, not just in the individual dropout, but in the group-as-a-whole, which may unconsciously select a member of the group to enact the rejection of the group.

Possible catalysts for underlying anti-group attitudes are some of the regular features of all groups such as the break, a new member joining, an intense emotional clash or conflict and the absence of the therapist and other members. I would cite the on-going deterioration in my training group's attendance and the group's particularly poor attendance around breaks as evidence of the presence of an anti-group. A point of view reinforced by Nitsun:

The fragmentary nature of the group, particularly in a position of poor, inconsistent attendance and a high drop-out rate, renders it a fragile container. This is frightening and disturbing, and the threat of internal fragmentation in the patient is mirrored in the fragmentation of the group. As this reinforces disbelief in the holding and therapeutic function of the group, anti-group attitudes escalate.

A source of the anti-group that I would add to Nitsun's list is that which relates to the experience, certainly mine, of being a trainee. My dependency on the group for success, as I described earlier, disabled me, I believe, from being able to properly hear and/or respond to the group-as-a-whole but mostly only to individual members, a negating factor likely in my mind to nurture the anti-group as it is in a sense a denial of the group as a trans or suprapersonal phenomenon. I may not have a license to make such an over generalization but I would vouch that the anti-group is over-represented in training groups. The destructive potential of the trainee's anxieties, inexperience, misjudgments and dependency on the group provide the ideal culture for the growth of the anti-group.

#### The Group as Mother

During session 36 Carol, the only mother in the group who this evening had returned to the group after a period of ten weeks absence, was talking about her anxieties in connection to her not wanting to pass onto her daughter the mothering she received from her punitive and undermining mother whom she despises. Jackie picked up and carried on this theme and looking around the room she smiled and announced that she thought she'd worked out why this group had been brought together, 'it's a mothers group, isn't it?' turning to me, 'for people with difficult mothers'. The whole group turned to me expectantly, smiling and awaiting an answer. I could not resist a smile, shrugged my shoulders and said, 'Is that how it feels?' The group was certainly uniting around a remarkable commonality of individual experiences of mothers. However, it was also becoming increasingly clear to me that here was a communication about the group and how it was being experienced by its members. My intention here is to explore this most powerful of themes and how it came to the fore in the group. As I explained previously, that although the group experienced an apparent early stability in terms of attendance during its first eight sessions, there was a neurotic component to this in terms of my dependence on the groups' attendance and general well-being for success or failure, added to which early on the group was not given the benefit of a sufficiently prolonged period of stability. The result of these early experiences, I believe, is that the group on the whole functions at a deeply primitive level and only rarely feels as though it is working positively and constructively towards the goal of psychological change. The departure of Anita and the group's subsequent difficulty working through her loss unearthed an essential fragility within the group which culminated in the group uniting behind the theme of 'difficult mothers' and my thoughts, as conductor, turning to the group's ability/inability to mother.

This coincided with my reading an article in Group Analysis entitled The Dual Nature of the Group as Mother: The Uroboric Container by Alan Prodgers (1990), the theory behind which forms the basis for the remainder of this paper. One of the early themes of my training group was: what happens to all the bad feelings we have? The response, articulated at different times by Anita, Dan, Jackie and Jack, was that such feelings did not belong in the group and should be 'left at the door'. The group therefore had a problem with conflict. In session 6 Avis and Dan have the group's first argument. By session 10 Anita has left the group. The group in-effect had defensively split-off all its bad feelings by way of idealizing itself, by way of idealizing mother. This early experience provides supportive evidence for Gibbard and Hartman's (1973) exposition of the tendency for groups to see the group as the good mother and defensively deny her bad qualities. Schindler (1966) on the other hand suggested, that patients transferred a mother image onto the group that was often a bad mother image based on their own objective or subjective past experiences. The aim

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of therapy was to reduce the negative and frightening aspects of the mother image. Interestingly, he saw the therapist as the recipient of the paternal transference and the group members as recipients of sibling transference. This formulation, I feel, is of value in helping to explain the group from approximately session 13. From this session onwards attendance became very erratic and unpredictable. During this session, with only 3 present for the first time, Kira expresses her view that the group is male-oriented, a dissatisfaction which she was unable to work through and which ultimately through her transferring all the bad onto me, her "impotent, scheming and rejecting father," lead her to leave the group. Also during this session I announced that new members were shortly to join and Ron points to this being our first session 'in the dark' of winter, an early indication of his impending departure from the group for 8 sessions in session 16 due to a psychotic breakdown.

Scheiddlinger (1974) described the regressive pull experienced from being in groups, in particular during the early stages of a group's development, as tending to loosen the individual's self-boundaries and to reactivate primitive wishes and modes of early object relations, and as a yearning for a return to the need gratifying relationship. Ron's experience exemplifies this in that his departure can be seen as a wish to destroy the bad object and an attempt to recapture the "need gratifying" mother. Both Ron and Dan have been seen individually outside the group by myself, by way of holding them during times when they were rejecting the group. They both, in a sense, point to this anti-group split occasionally manifest in the group of therapist idealized as the omnipotent all-giving mother and group as the rejecting and bad mother. It seems to me that fantasies about the group shifted from idealization early on to increasingly negative perceptions later. This reflects, but in a primitive form, Prodgers' conception of the group as mother but with a dual nature. Prodgers quotes Raphael-Leff (1984) who noted the dual aspects of mothering:

- Life-giving, containing, creating, the warming protective mother full of enviable goodness, nurturing and holding the helpless baby;
- A dropping, withholding, rejecting, weaning mother, enticing and destructive, devouring and ensnaring, captivating.

These latter characteristics within the group came to the fore very powerfully in session 22. Jack's mother had died the previous week. An only child whose father had died when he was eleven, Jack had difficulty knowing what he felt about the death of his mother, a manic depressive for the last twenty years for whom he felt great responsibility. He stated that he hadn't yet had the time to mourn her death as he had been so busy with arrangements. Rick then related the events of the weekend when for the first time he met his biological mother who had him adopted at birth. He was surprised at how short she was, having imagined her to be 6'2". He had enjoyed meeting her but had felt strange. Kira then arrived (this was to be

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her last session) and explained that her recent absences were due to her mother being ill in hospital and her having gone back home to look after her. A discussion about guilt ensued which gradually boiled into a deeply wounding row. Rick attacked the group very angrily for being unemotional, overly polite and withholding, e.g., 'a waste of time' and 'full of bullshit', in particular Kira for behaving like a 'secret nurse' and bringing nothing of herself, Dan for his secretiveness and most forcibly Jackie, for whom I feel Rick had developed a powerful maternal transference. This very angry session, I feel, epitomizes a powerful feeling within the group about the group. Rick's misplaced primitive rage, a personal and a group communication, with his abandoning biological mother, triggered by his, Kira and Jack's experiences, was transferred onto the group and most notably Judith.

Session 25 provided further illustrative material. Only Jack, Ron and Carol were present. Much of the session was taken up by Ron and the voices in his head, that had started after he had been to see a female faith healer, which he saw as being the cause of his psychotic illness. The voices were at times encouraging and nurturing and at others attacking and disturbing. There was then talk between Carol and Jack about their obsessive hoarding of things and their difficulty throwing things away. I connected these two experiences by referring to the voices and things as representing the disparate fragments of ourselves we sought to piece together to make an integrated whole. This further had resonance with something Jack had said earlier about the group and its fragmentary and bitty nature, to which I had added that it was something similar to an unpredictable parent. Jack's transference onto the group was maternal in that like his mother the group had become unreliable, uneven and in parts. This experience of the group was by group 39 to put Jack in touch with an anxiety that he was able to identify in himself regarding his mother when she was not near him, or even leaving the room and the underlying fear that she might not return. The group in a sense had instilled in its members fears regarding its very survival and I would certainly add that these fears have often been in me. Indeed these feelings have at times bordered on despair and at times been filled with anger and resentment. I am reminded of the thoughts of Winnicott as outlined by Prodgers, Winnicott (1949) acknowledged that the mother always hates the infant as well as loving it, because of the demands it places on her. The nursing mother needs to come to terms with her hatred for the child. My understanding of Prodgers is that should mother fail to do this and tends towards denial of her ambivalence then this would be to the detriment of the child. Her hostility is much more likely to be unconsciously acted out and this clearly in terms of a group would constitute a nurturing of the anti-group. My anger, in particular, connected to absenteeism has at times made it difficult for me to respond to absence. At times I simply wanted to wash my hands of someone, Dan for example, or have quite simply forgotten to write letters.

The concept of the group as mother connects strongly with Winnicott's notion of the 'environment mother' and archetypal representations of motherhood as a body, vessel or container within which we all grow prior to being born in the world. In its elementary form mothering provides food, warmth and shelter which leads to growth, change and ultimately individuation. This is the perfect metaphor for a group's idealized potential, i.e., as a container within which the individual grows and is ultimately reborn. Both Prodgers, in terms of the negative aspects of mothering and Nitsun, in terms of anti-group phenomena, share the view that groupanalytic theory in the tradition of Foulkes has tended to idealize the group, ignoring the more negative anti-group forces and aspects of motherhood present within the 'mother group', which when unacknowledged imperils the group. The giving mother also deprives and takes away, ensnares and dominates. The mother who nurtures, feeding growth and individuation, also rejects, abandons and causes loneliness, emptiness, despair and madness.

Primitive experiences need to be contained by the group, but often what is projected into it will be fantastic, representations of malignant mothering, of the engulfing or depriving mother. It is then only through group as mother interpretations that such experiences can be understood and re-introjected by group members. (Alan Prodgers)

Carol, the only mother in the group, returned, as I said previously, to the group in session 36. Two weeks previously she had contacted me in response to a letter I had written to her asking if was going to return, saying that she wished to continue in the group but that she had a problem finding a baby-sitter as her circumstances had recently changed and that she wondered if I could ask the group if they were prepared to put up with her continued absence. I agreed and put her situation to the group in session 34 who were most concerned to give her an affirmative response, indeed there was even a serious suggestion that she bring her 13 month infant to the group. I can now see this as a turning point in terms of the group as mother. For several months prior to this the attendance of the women had been very poor. For example session 30 had been a men only one. Mother was in a sense symbolically absent from the group or at the very best in a very poor state of health. During this period Dan had begun to open up and sought to divulge his secretive sado-masochistic sexual fantasies involving violent blood-sucking vampires. His stated fear was that the women would find him out and seek to punish and reject him. Carol's return marked the beginning of a sea-change in attendance. All of a sudden the men stopped attending such that more recently sessions 41 and 42 were women only.

Session 36 saw mothers become the central manifest theme of the group, in particular their more negative aspects. The three women, all first-born, united around this theme. Suzanne, unable to talk about her mother without crying, appeared rapt, asking most of the questions while Carol,

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Jackie and Ron talked. Carol talked more openly and forthrightly than she had ever before about how only guilt kept her in a relationship with her critical and undermining mother who she doesn't like as a person and whom she would gladly stop seeing if it wasn't for her daughter who she doesn't want to deny a grandmother, as she feels her mother had done to her. More recently she had begun to talk more openly and honestly to her father about their relationship. He was showing signs of beginning to understand her difficulties. Jackie then talked about the experience she had in her family of not really feeling, nor was she allowed to feel, separate from her mother.

The most intense group-induced anxiety – recapitulating early developmental sequences of psychological differentiation is the annihilation of self - either through engulfment and fusion with the collectivity at one extreme, or through isolation from abandonment by the group at the other extreme. (Anzieu, quoted by Prodgers)

Jackie's psychopathology is repeated in the group in that she has tended to be the recipient of maternal projections. She, in a sense, identifies with the group as mother. Ron expressed his surprise that all the women had such difficulties with their mothers. He has more recently begun to express feelings of being abandoned by the group in that he is beginning to feel quite powerfully that he has no space in the group. His earlier psychotic departure was more to do with feelings of engulfment and fears of loss of individuality, 'I'm an individual, separate, free to walk alone beside the hedges'. It is my feeling that latterly the group has begun to explore the more negative aspects of mothering. On the manifest level, through exploring individual member's experiences, within which the group has found much that is shared. In terms of the unconscious group-as-a-whole level, my contention here has been that a theory of the group as mother, it's and her dual (positive and negative) nature, provides great explanatory power.

# Conclusion

There is also a danger that in interpretation of negative group-as-awhole phenomenon, the positive aspects of the group as mother are lost, precipitating individuals to near psychotic crisis. (Prodgers)

The theme that runs through this paper is what Bion referred to as the 'illness of the group'. Beyond the early phase of the group I have become increasingly aware of its sickness during what at times felt like a desperate struggle for survival. I have here attempted to cast some light on this dark side of the group's nature by looking at the group through three separate but interconnected theoretical vantage points. Firstly, using Winnicott's ideas on early maternal care and good-enough mothering for guidance I examined the early experiences of my training group in relation my own

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experience of being a trainee. I suggested that my own dependence on the group for success inhibited my capacity to tend sufficiently to the needs of the infant group. I was I suggested defended against being in touch with group-as-a-whole communications. My conclusion would be that much of the group's later experiences and 'illness' can only be understood in the light of this primary phase in the development of the group. Secondly, I attempted to explain the 'illness' in terms of the destructive forces present, according to Morris Nitsun's theory of the anti-group, in virtually every group, which can if unacknowledged destroy the group. I added to his list of anti-group phenomena the dynamics I suggest are inherent to the experience of being a trainee arising out of the trainee's dependence on the group for achieving his or her goals. Finally, I sought a diagnosis for the 'illness' in terms of the theory of the group as mother as explored by Alan Prodgers. This arose through a gradual realization that how members experience the group, this container, womb or vessel, tells you something about their early experiences of mother and that how members talk about their mothers tells you something about how they experience the group and that the group's capacity to mother is a function of its condition, which at times has not been good. This does not preclude, in my mind, maternal transferences being directed at the therapist. My conclusion would be that the dual nature of the group mother and the group's capacity to tend to its member's needs, should be interpreted within the group. Finally, to ignore the therapist's ambivalence, the anti-group forces and the possible negative effects of the group mother, is, I believe, to place the group at risk.

# A Few Reflections

I reach the end of this paper with great relief and some trepidation. I have to admit, to my surprise, that writing this paper has been an immensely valuable and enlightening experience. It has temporarily provided me with the opportunity to take a few steps back from the group, against which I feel like I have had my nose pressed for far too long, and to take a good look at what I have been doing for the last year and more. Interestingly enough the first anniversary of the group's life passed during the writing of this paper, as a result of which the early experiences came back to me with a clarity they otherwise would not have. My dissatisfactions with this paper rest in the sheer lack of time I had to write it. I feel that it contains more or less what I wanted to say but in a form which is at times more than a bit jumbled and in need of rewriting. I also must acknowledge that to begin to describe and explain a phenomenon as rich and complex as a psychotherapy group is an incredibly difficult and probably impossible task.

I would like to finish by looking at session 44 which took place during the writing of this paper. Prior to the group I could feel this growing sense of optimism rising within me. In particular having written about the early group experiences and having discovered, as it were, the anti-group I could feel myself beginning to acknowledge and understand more of my deepest

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anxieties and fears about the group, e.g., that it was about to curl up and die. Everybody turned up to session 44 and I could sense myself literally being able to attend to the group in a way that had not happened before. I felt that I was more fully in the room with a group and not just with a collection of individuals. I could feel myself sitting back a touch further and not feeling the usual need to give them some enlightening interpretational nourishment. In short, the group was beginning to get into shape. Perhaps some of the sickness was leaving its body.

# Bibliography

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