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## A Kleinian Approach to Group Psychotherapy

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Abstract

This article presents clinical material from a group that is now in its seventh year. The clinical material illustrates an aspect of the working through of depressive anxieties. The theoretical framework for understanding the material and my interventions is Bion's application of Klein's ideas. The clinical vignettes show how a group struggles with the split between good and bad characteristic of the paranoid-schizoid position (Ps) and the more integrated view of objects as both good and bad, characteristic of the depressive position (D). This more integrated view carries with it the capacity for both love and hate. One member's early memory of cruelty mobilizes other members' guilt toward their objects as well as their reparative wishes.

## A Kleinian Approach to Group Psychotherapy

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The purpose of this article is to present material from a group that is now, with some turnover, in its seventh year. I have chosen this material because I believe it illustrates an aspect of the working through of depressive anxieties. I will begin by giving a brief account of Melanie Klein's main ideas upon which this group work has been based and outline Bion's application of her ideas to groups. This will serve as a theoretical framework for understanding the material and my interventions.

### The Kleinian framework

Within the Kleinian framework the infant is early on dominated by hating and loving impulses directed at the primary object. The hating impulses stem initially from envy of the object which has what the infant wants and is seen as withholding it. Envious attacks result in an internalized object that is felt to be in a damaged state. A damaged internal object is considered to be a main source of depression and low self-esteem whereas a healthy internal object is a source of security and feelings of self-worth. Envy, one of the core affects within Kleinian theory, is not merely a response to environmental frustration but is due to a wish to destroy the goodness of the object simply because it is good and the infant does not possess it and cannot control it. Unconscious envy attacks

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the good internal object whereas conscious envy, even though extremely painful, does not result in an internal attack. One of the aims of interpretive work is to make envy conscious so the attacks on the object diminish or cease. Once envy is conscious and the person becomes aware of the attacks on the object, guilt feelings are experienced and with them the wish to make amends and repair the object. Guilt and love are seen as inextricably linked since guilt implies love for the object. One could say that, ultimately, the aim of the analyst is to help the patient make contact with his or her loving feelings so that a phantasied reparation of the internal object can take place and self-esteem can increase. For this to happen, however, the patient must first come to terms with the results of his or her hatred, the damaged object, and with mourning the loss of the good object. The stress on destructiveness in Kleinian theory has to do with the necessity of bringing the person's destructiveness toward the object to conscious awareness. Only then can guilt and loving feelings come to the fore leading to the wish to repair the damaged object. In light of this, sublimation in productive work, creativity and mature love are seen as stemming from the impulse to repair the object. During the work, whether with an individual or a group, the person is helped to move from hatred and the fear of persecution to guilt, love and reparation and a more objective view of reality.

In line with these ideas, for Melanie Klein (1946) there are, both developmentally and throughout life, two fundamental states of mind: an early one which she called paranoid-schizoid (Ps) and a later one she called

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depressive (D). The former is schizoid because the infant splits its world, both externally and internally into all good and all bad; paranoid because the bad impulses to attack and destroy are projected into its first object, the mother, who is consequently experienced as a persecutor. Because of the extensive use of projective identification the paranoid-schizoid position is also characterized by a fusion or confusion between the self and the object. In the course of normal development the infant integrates its world and its ego so they are experienced as whole and separate and as neither all good nor all bad but as a combination of the two. In this position love and hate toward the object come together so the attacks on the bad object are also felt to damage the good object. The integration of both the self and the object produces in the infant an awareness of separation from the object, which in turn, engenders sadness and pining for the object. Melanie Klein referred to this state of mind as the depressive position. Whereas in the paranoid-schizoid position anxiety relates predominantly to the anticipated annihilation of the ego, depressive anxiety is predominantly related to the phantasied harm done to internal and external loved objects. The belief that this is the result of one's own attacks on the object produces guilt and the wish to repair the object. For Klein (1948) "depressive anxiety, guilt and the reparative urge are often experienced simultaneously (p 36)".

## Application to groups

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Bion (1961) applied Kleinian theory to groups calling attention to the special regressive defenses of the group which he called basic assumptions. He developed a method of studying the behavior of people in groups which was later taken up by the A. K. Rice Institute and other organizations interested in studying leadership and group behavior. The purpose of such training groups has been to provide participants with an experiential understanding of the unconscious forces, a group mentality, that often dominates a group and interferes with its functioning. Although this may lead to the growth and development of the members, this is not the ostensible purpose of these groups. A range of object relations theories applied to groups has emerged since Bion developed his approach (Tuttman, 1992). These include Ezriel (1950, 1973) who, in addition to group level interventions, added interpretations to each of the members and their relationship with each other. He thus attempted to turn the group learning experience into a therapeutic one as well. Other variants of the object relation approach to groups include Horwitz (1983), Ganzarain (1989, 1992), Kibel (1993), and Schermer and Pines (1994). Interpretations are offered to the group as a whole, to subgroups, to the individuals or to pairs of individuals. The distinctive feature of an object relations approach, however, is not the use of group-centered interpretations but the analyst's focus on the primitive defensive struggles against psychotic-like anxieties (Ganzarain, 1989). Other practitioners who consider themselves as having an object relations approach seem to hold a Sullivanian, interpersonal view of relationships (eg. Rutan & Stone, 1993). In a strict sense then, following Bion's application of

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Klein's ideas, an object relations approach has to do with the internalized object relationships of the members. These internal object relations are analyzed in the course of the interaction members have with each other, with the therapist and with the group as a whole. At present Ganzarain's object relations approach seems to constitute the most direct translation of Klein's theory to group psychotherapy.

Group therapists from different persuasions are familiar with the suspicion and paranoia with which members come to a group, the long silences and expectations of being rescued by the analyst, the fights between the members or their withdrawal, that is, the defenses of the paranoid-schizoid position. We are less familiar with what Bion called a "work group" in which members are able to observe and learn from their experience (Bion, 1961). Whether a group is in the paranoid-schizoid position or in the depressive position, interpretations of the respective constellations of anxieties and defenses seem to awaken the group members' observing ego which allows them to reflect on their experience.

The shift from Ps to D represents a move from a concern for the self to a concern for the object. One needs to remember that Klein called these states of mind positions rather than stages because they fluctuate from one to the other throughout life and can fluctuate within a single analytic session. Bion (1963) also argued that development is not simply a unidirectional move from the

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paranoid-schizoid to the depressive position but involves a back and forth movement between the two (Ps ↔ D). Thus, when we talk about the paranoid-schizoid or the depressive position we are talking in relative terms about a *predominance* of paranoid or depressive anxieties and defenses. In a paper entitled “From A to B and Back to A: Emotional Development in Groups” (Safán-Gerard, 1991), I attempted to show how the individual members contribute to the group’s shifts from Ps to D and back to Ps and how the understanding of these shifts promotes the emotional development of its members. Just as members shift back and forth from Ps to D, they also, in response to interpretations, shift back and forth from an immersion in paranoid and depressive anxieties and defenses to a work group, where members develop the necessary emotional distance to enable them to link the present experience in the group with experiences in their relationships outside the group. While theoretically the work in a group should proceed along developmental lines, with paranoid anxieties and defenses followed by depressive anxieties and defenses, it is not uncommon to find early sessions that deal with depressive anxiety or later ones with paranoid anxiety.

### Working through of paranoid anxieties

Patients develop conscious and unconscious fantasies about the group long before joining a therapy group. The group members and the analyst become the needed object who might frustrate, reject, condemn. The “bad

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mother” in the internal world of the potential members is thus projected into the other group members, the analyst, and even the group as an entity which become, by projection, this bad mother (Ganzarain, 1989). In addition, the analyst is the mother forcing the patient to share him or her with several siblings, and therefore, this analyst/mother is already betraying the patient who would like an exclusive relationship with her. Thus, the unconscious attacks on the members, the analyst and the group as an entity begin even before the first session. Through projective identification the patient expects to be rejected, ignored, and attacked by the other members, the analyst, and the group. The patient will defend against these paranoid anxieties by splitting these objects into very bad one ones and very idealized ones, seeking to form alliances with the idealized ones.

The initial sessions are thus fraught with defenses against psychotic anxieties of annihilation: splitting, denial and projective identification. The patient comes geared to fight for his life and in the course of this fight he splits objects into good and bad, projects whatever is bad, hostile and cruel, denies his need for the group or the analyst, reverses roles and sees others as needy while he or she become the helper, and so on. The members seem to have antennas to pick up the projected hostility in other members and since there *is* hostility, the analyst’s task is to help members distinguish what is projected from reality in these “projections into reality”. The analyst’s interpretations of these paranoid anxieties and defenses move patients from the paranoid

schizoid position (Ps) to the depressive position (D) where all the polarities come together. The patient becomes aware and takes account of hatred that is not merely a response to frustration. A group member recently recognized it this way: "my attack (on another member) was not a response to a threat, it was sheer meanness".

### Working through of depressive anxieties

In a book entitled *Object relations group psychotherapy*, Ganzarain (1989) writes about a third session in which group members were already experiencing depressive anxieties. This had to do with the members' guilt for having taken over the analyst's role during his absence from the second session which mobilized psychotic-like defenses such as denial, splitting and projective identification, that is, a move back to Ps. The integration of the split-off hostility and greed that was involved in the take-over of the therapist's role was too painful to face. For Klein, "...integration always implies pain, because the split-off hate and its consequences are extremely painful to face; the incapacity to bear this pain re-awakens a tendency to split off the threatening and disturbing parts of impulses (Klein, 1960, p. 274)".

Once the defenses in Ganzarain's group were understood, the patients were helped in moving to the depressive position and to work through their depressive anxieties. In explaining the outcome of his work with that group,

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Ganzarain nicely summarizes the working through of depressive anxieties: “The patients tolerated their guilt over their oral sadistic impulses, accepting their responsibility for their hostile fantasies without disowning them through projection. Objects became, therefore, separate, differentiated individuals, and not mere containers of split-off parts. The patients’ view of reality was also modified. They developed a sense of psychic reality by acknowledging both dependence and ambivalence toward their objects. They modified their belief in the omnipotence of destructive and loving impulses. They discovered and practiced actual ways of affecting external reality through hard-working reparation, accompanied by means of effective therapeutic interchanges (1989, p.100-101)”.

These are the poignant moments in the group. The fighting stops, forgiveness shows that loving feelings are winning over hateful ones. Guilt and the wish to make things better for others marks the emergence of genuine concern and empathy. The pace is slower as people are now truly learning from experience and need time to assimilate what they are learning. The “work group’, a now cohesive group, can learn what it set out to learn without being impaired by irrational emotions. Within this theoretical framework this working through of depressive anxieties is the ultimate goal of both individual and group analysis.

## Clinical illustration

My groups are long term and open-ended and include patients with a variety of disorders. This particular group has been meeting for seven years. Only two members remain from the initial membership, Jane and Jack. Jane left three years ago when she got married and moved far away but she returned after the break up of her marriage and her mother's death, rejoining the group two years later. Another member, Kevin, left a year ago for financial reasons and might return after his financial situation improves. My policy about patients interrupting is that they can return at a later time if there is room for them in the group. Group members rarely interrupt but in this group there were two members who did. This group presently has six members, two men, Jack and David, and four women, Mara, Jane, Beatrice and Susan. I will start with a significant segment of a previous session before going into the session I want to discuss.

As I explained above, Jack has been in the group since its inception. He has spoken of his inability to talk with his mother, whom he perceives as cold and distant, and as not having loved him enough. His parents live on the east coast. In the past Mara, who tends to assume a maternal role in the group, has encouraged Jack to talk to his mother when he goes to visit and links her urgency to the sudden loss of her husband eight years ago and to the fact they didn't get a chance to work things out. Mara, the most anxious member of the group, has also complained of problems with *her* mother. Mara's mother lives in

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another country and, as an example of her failings, Mara told the group that her mother went on a vacation instead of coming to stay with her when Mara lost her husband. She had also told the group that her mother used her as a maid to do everything in the house when she was a child. Mara then took pride in being able to help her mother but now blames her for not having had a childhood and for her insecurities and low self-esteem.

When Jack announced that he would be absent two weeks from now because of a visit to his parents, Mara began to encourage him not to miss his opportunity this time. At some point Jack wondered why Mara was so insistent that he *fix* his relationship with his mother when she had an even worse relationship with her own mother. Beatrice accused Jack of having a mean streak: his comment toward Mara seemed quite hostile to her. Beatrice has only been in the group for a year. She has talked in individual sessions of her having had a cruel mother and has expressed a fear that she might act like her mother. Jack appeared to be stunned and hurt by Beatrice's remark since he didn't think he had been hostile at all. Others also disagreed with Beatrice, believing that Jack had been empathic and wondering what was going on with Beatrice. Mara claimed to have been surprised with the comment, but stated that she had felt Jack's concern for her and had not felt attacked. Jack, for his part, didn't know why this was so upsetting to him. He knew he had made the comment with great empathy but he now felt close to tears. I interpreted that Jack's hurt might have to do with other instances of cruelty that he could not remember. This instance,

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when he *was* empathic, brought up other instances when he may have actually been mean.

In the following session only five of the six members attended. Susan, the absent member, was away for two sessions attending a professional meeting in another country. Beatrice started off telling the others that her boss had finally fired her but she felt OK about it. She said the group and I had helped her in the last session and she no longer felt so ashamed of losing her job. Members asked questions about her situation and they discussed this for a short while. Then Beatrice turned to Jack and asked him if he was still angry with her for her accusation in last week's session about his having been cruel to Mara. He said he no longer felt angry and smiled. Then, after a silence he added: "but maybe this is not true because I found myself not interested in listening to your having been fired". This opened up the discussion about Jack's comment to Mara all over again. Mara told the group that after she left the last session she found herself thinking that maybe by encouraging Jack to talk to his mother she had pushed his buttons and that is why he made the comment. This was a return to Beatrice's idea that Jack had been mean-spirited. The members were puzzled by Mara's statement and suggested she only got this idea that the comment was mean-spirited after Beatrice had accused Jack - that is, after the fact.

Was Mara identifying with Beatrice's view of the situation? Why didn't she feel attacked then? Mara argued that during the last session she had both

feelings, that Jack was empathic as well as the feeling “why is he saying this about my mother? I have no problems with my mother!”. Jack seemed defeated, “I thought we had straightened things out last week and you are back to the same idea. I don’t understand...” David had, so far, been silent. He and Jack have been the only men since the third man had to interrupt the treatment. David often falls in the role of co-therapist, uses analytic jargon, and tends to admit too quickly to feelings of competition and envy of me and other members. He has joked about having to fight with Jack for the women’s attention. He said he thought that what Mara was saying had nothing to do with Jack, that it seemed Mara had a conflict within herself, but he could not put his finger on what it was.

As you may recall, in the previous session Jack had felt close to tears after Beatrice accused him of having been mean-spirited toward Mara. I had interpreted that perhaps his distress had to do with an awareness of his being mean at other times. I felt that the fact that Jack had felt close to tears after Beatrice’s accusation revealed that he was getting closer to an awareness of his own destructiveness. By talking about a conflict within Mara, David may have been rescuing Jack from some incipient guilt about attacking his objects. Beatrice said that her comment to Jack came from having seen how Mara was taken aback by Jack’s comment, and that is why she had accused Jack of being mean-spirited. I interpreted that in her account of feeling two ways about Jack’s comment, Mara may be quite accurate: she had reacted *both* to the good

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mother/Jack who was empathic with her and to the bad mother/Jack who was competing with her. She had an idealized mother inside that could do no wrong and a bad one that could do no right but that these views of the mother were separate, so she either had one *or* the other. That explained why Jack's comment was initially felt as coming from the good mother/Jack who cared, while Beatrice's comment had supported the notion of a bad mother out there who was out to attack her. As a defense against this bad mother/Jack, she magically believed that *she* had pushed Jack's buttons and *caused* Jack's meanness. This was her way of feeling that she could control that mother.

Jack spoke about feeling so defeated by Mara's change of mind and began to talk about his three year old daughter whose hatred he has seen in the open. "But it is really up to the parent to contain this hatred", he added. Was he identifying with his daughter as a way of getting away from the painful feelings of guilt that Beatrice's comment had stimulated? He seemed to be going back to the idea that the child was not responsible for his or her cruelty. I interpreted that it was hard for Jack to be the target of his daughter's hatred. He wished he was impervious to it, a good solid father who can put up with anything. This was important for his daughter because it would be proof that his daughter's hostility did not cause any damage to him. If this was the case with his daughter it also meant to him that his own hatred did not cause any damage and thus there wouldn't be a cause for concern for the other. He seemed to still be struggling with the painful feelings he had experienced in the last session

and trying to find a way out from the sense of responsibility for his own hatred. Then, addressing the group, I added that this feeling of responsibility or accountability was especially difficult to tolerate when the hatred was not due to mere frustration but to envy of the parents' capacities. I was able to remind them of a session in which they had banded together to attack me for having illustrated my interpretation with an example from outside the group and how they had later realized that the attack was due to their envy of what they felt to be my knowledge and power over them. If his daughter's hatred was due to frustration alone, Jack would have to accept the blame for frustrating her, which he was willing to do. But what if it was his daughter's own hatred of him because of what he had? Suddenly Jane, who had been silent so far, said, looking distressed, "But then there is the guilt!"

As you may recall, Jane had been in the group since its inception for about three years, left the group for two years and returned two years ago. Her defenses have centered around comparisons between her "old group" and this "new group" where she has been unable to form alliances with other members, which she did earlier on. She has had to face her sibling rivalry and on one occasion, her hostility turned toward Susan, the member who was now absent. At that time she feared that I no longer liked her and that Susan was my favorite. The group, she said, had become too painful an experience and she had considered dropping out. The group had become the "bad mother group (Ganzarain, 1989)".

After Jane said, "But then there is the guilt", she poignantly recounted a memory of having kicked her mother in the face when her mother was putting on her shoes and lovingly had kissed her feet. She was three or four at the time. On the verge of tears Jane added that she now realized that she may have had an *effect* on her mother because her mother never kissed her feet again. Jane's conflict about whether or not to bear the guilt was split off into the other members who assumed the part of her that was not willing to bear the guilt. Mara immediately insisted that Jane's mother should have come back again; she should have understood that her child was angry and needed something from her. Mara gave some examples from the nursery school where she works, how the teachers had to instruct the parents to be supportive of the children and not take their assaults personally. Just like Jack had done earlier when he was talking about his daughter's hatred, Mara was expressing the reluctance of the group to accept a sense of responsibility for their own hatred. I interpreted that it is hard to recognize attacks that are *not* the result of frustration but the result of hatred and envy that wants to destroy the good thing. It is easy to attribute all of it to frustration so that one can feel that the hatred is justified. It's preferable to see oneself as a victim of a cruel parent than recognize one's own cruelty toward that parent. Jane said, "My mother didn't spend time with us, but I may have had an effect on her, I *know* I did".

Going back to support Mara's argument in favor of giving the parents all

the responsibility for the child's attacks, Jack talked again about children not knowing what they do and about his belief that it was up to the parent to understand that. He told the group of having had temper tantrums as a child refusing to eat and about throwing his food around. He added, "I don't know what I was doing, why I was doing that". David agreed with Jack, even though he said he acknowledged he had his own cruel side. He told Jane she was giving herself too much power and taking *all* the blame and he added, "it's your omnipotence". All the while Beatrice was listening quietly and for a while she had her eyes closed and seemed to be in a trance. Asked about her silence and closed eyes she said she felt very tired and her eyes were burning. Beatrice may have been expressing in a more drastic way the wish of the group not to look into this. I interpreted that the group seems to be in a conflict around hatred. Jane was representing the group's awareness of hatred and guilt whereas the others were representing an avoidance of responsibility for their attacks on loved ones. David was fending off his own guilt and sense of responsibility by labeling the other option "omnipotent", Mara and Jack by making one's parents into the guilty ones for frustrating them, Beatrice, by turning off the whole conflict and disappearing.

It is interesting to note that Jane seems to have chosen a session in which Susan was absent to talk about this early incident with her mother. This may represent Jane's attempt to defend against an awareness of the link between that early attack on her mother with similar attacks on loved ones later

on. As I noted earlier, Jane had been cutting and sarcastic with Susan, who had told Jane how much Jane had hurt her. Jane also knew that after this session she herself was going to be absent for a session so this was further insurance against a direct recognition of the active nature of her hatred in the group. Susan would not be there to help Jane link up the earlier kicking to the recent kicking she had received from Jane. Thus, she may have been defending against what she would experience as unbearable guilt because reparation for all these attacks was not felt to be possible.

By now Jane was visibly in pain, her eyes filled with tears. I interpreted that Jane was feeling the guilt for the group while the others were representing the wish to avoid such pain. Except for Beatrice, who had avoided the issue by withdrawing, the others seem to have been choosing the “frustration theory” to account for their cruelty because they didn’t want to feel *they* had caused harm to someone they loved. They wanted to believe that if they had been cruel they were merely reacting to some frustration. I reminded them of how Mara had a sharp separation in her mind between the good mother and the bad mother, a solution that was not foreign to other group members. That splitting allows one to love the good one and to hate the bad one with impunity. One doesn’t have to worry about hating and hurting the real mother who is both good and bad. If I was only a “bad therapist” they could attack me without any feeling of guilt for those attacks. But if I was also a “good therapist” they would feel guilty for attacking me and that guilt would make them stop. Jane’s guilt meant that in this

session her love and hatred had come together in her mind, otherwise she wouldn't have been able to bring up the idea of guilt to the group and to remember an event that made her feel it. Even though she could not change the effect of what she did to her external mother, she was now in phantasy repairing the mother inside her.

There was a long silence. Jane and Mara seemed quite moved. Jack, David and Beatrice looked pensive and somewhat sad. I interpreted that when love and hate come together, the loving feelings can stop the hateful ones *in their tracks*. I reminded them of a recent session when David had been criticizing me and my competence and others had followed suit and how they had stopped themselves to consider if this attack had to do with envy of what they perceived to be my power in the group. At that point their love and hate for me had come closer in their minds. I added, "When love and hate are far apart, however, the loving you doesn't know what the hateful you is doing. Then you can say, 'Who, me? I've done nothing'. Or, 'I'm just attacking out of revenge'." They were all silent again. Then Jack said to Jane, "It's really incredible that you could remember that incident so clearly and that now you can work on it." Certainly Jack and all the others were also working on it. The session was over. In a lighter mood Jane said, "Now we have to spend another ten years of therapy repairing the damage!" They all laughed as they got up to leave. Jane's joke may have resulted from her envy and resentment toward me for my having helped her. It also may have expressed her anxiety about the damaged objects

she needs to repair and her doubt about her capacity to repair them.

I must note my own responses to this session. I found myself resonating with the depressive anxieties as they were expressed by the various members, although they had earlier denied their attacks in an effort to avoid guilt. I suddenly became tearful in response to Jane's tears when she spoke of the effect that her kicking her mother must have had on her mother. I typically respond in this way to a patient's recognition of having attacked an object with the attendant guilt and wish to make things better. The group's struggle with guilt must strike a cord in me as I unconsciously rework these issues along with the group members. I imagine that my response is not unique. The aesthetics of the work is embodied in moments like this when the group members drop their defenses allowing their love and hate to come together.

As a postscript I would like to add that in the following session Jack spoke of having thought quite a lot about the previous session. He had begun to question what he called "the story" he had told himself about his mother being cold and distant and not doing it right. He thought that his throwing food around and his tantrums may have been due to the same hatred that Joan expressed toward her mother when she kicked her. He said, "My mother must have put in time and effort preparing the food she gave me and I was throwing it all away". As he and others talked about this and reviewed the last session Beatrice seemed to get sleepy again and had her eyes closed. Others noticed this and

wondered what was that about. Beatrice could not account for her sudden sleepiness. Her identification with a cruel mother made it difficult for her to take back her projections of cruelty into others. It is paradoxical that her projection of cruelty onto Jack in the previous session is what had prompted the group members to consider their own cruelty, past and present. In this session Beatrice was clearly continuing to express the members' wish to avoid learning about their attacks on their objects and to stay away from the corresponding guilt feelings.

### Discussion

The most difficult task for the group therapist of any analytic orientation is to keep his or her attention on both the group members and the group as a whole, shifting these perspectives to address the one that appears to be evidencing the greatest unconscious anxiety, whether the group, an individual member, or a couple in the group. An analogy may be useful: A painter involved with a canvas can spend some time doing something to a portion of it but at some point must take a step back assessing what has happened to the whole as a result of changes to the part. Sometimes an artist squints in order to perceive the whole in a fresh way. The group therapist also "squints" when taking a necessary step back to assess the group as a whole. This 'squinting' is, of course, more temporal than spatial because the group therapist needs to review the events in the group, what led to what in this session and how

features of one session connect with those of previous sessions.

I have attempted to show one of the instances of how this group is working through depressive anxieties. We can trace the beginning of this sequence to Beatrice's accusing Jack of being mean-spirited. This opened up Jack's awareness of possible cruelty at other times and with other objects. Interpretations to this effect led Jane to bring up her guilt in response to an early memory of cruelty with her mother. The group defended against these guilt feelings by splitting mothers and caretakers into good ones and frustrating ones so that Jane's cruelty could be explained as a mere response to frustration by her mother. At this point the group struggled back and forth between the split view of objects into good and bad ones characteristic of Ps. and a more integrated view of objects as both good and bad with a more integrated view of themselves as capable of love and hate toward the object, which are characteristics of D. Interpretations were geared to work through their depressive anxieties again and again in order to maintain the "work group", that is, a group that is no longer under the grip of psychotic anxieties and defenses but one whose members cooperate in facing the task of learning from experience.

As a result of this struggle between Ps and D and of the working through of depressive anxieties Jack was able to link, in a subsequent session, his childhood tantrums and throwing food around to Jane's hatred of her mother.

The group became aware of their envious attacks toward their ambivalently loved objects, including the therapist. With some difficulty the group members were able to tolerate painful guilt and to get in touch with the wish to repair the object. This shift in the group had a ripple effect outside the group as well. Upon returning from her week's vacation with her family, Jane told the group of the great impact that last session had had on her view of relationships. She had gotten into an argument with one of her sisters about their respective views of their mother, who died two years ago. Jane's sister was still angry at their mother for her mother's failings, a position Jane had shared with her for a long time. Jane proposed that all three sisters should go for a double session to a family therapist in the area where they would have an opportunity to discuss their views and feelings about their mother and about each other in relation to her. Jane shared with her sisters what she had learned about herself in the group and this opened up a fruitful exploration of her sisters' split-off envious feelings toward their mother. Other members responded to Jane's account with reflections about their own parents and the sense of having "unfinished business" with them.

In making interpretations to an individual member the therapist assumes that this member's conflict reflects a conflict shared to a certain degree by *all* other members (Schain, 1980; Ganzarain, 1992). This does not necessarily mean that other group members will benefit by identifying with this member and vicariously learning from his or her exploration. As illustrated in this clinical

material, group members tend to use each other defensively to project unwanted feelings or parts of themselves. Here is where interpretations to the group as a whole are called for, i.e. showing how the split in the group around an issue corresponds to a similar split in the members' minds.

The Kleinian dictum of interpreting the point of maximum unconscious anxiety applies to groups as well. Pointing to the anxiety behind their attacks helps members recognize and accept the reality of their own destructiveness. As the attacks diminish, the paranoia subsides. The consequence of projective identification is that what one projects into the object is followed by an introjection of this object *with* what one has done to it (Klein, 1958). The person then becomes identified with a damaged internal object. Recognizing the attack will lead to guilt and the attempt to repair the damage which means that love and destructiveness will be closer together in the mind. The enormous importance of the shift from Ps to D is that the repaired object will modify the damaged internal object, one of the causes of depression and low self esteem. In an article entitled, "That which patients bring to analysis", Rey (1988) has shown, with material from a group, that patients ultimately come to treatment to get help with repairing their damaged internal objects. An identification with a good object, on the other hand, is the main source of inner strength and creativity. The working through of paranoid and depressive anxieties allows group members such identification.

#### References

- Bion, W. (1961). *Experiences in groups*. London: Tavistock.
- Bion, W. (1963). *Elements of psycho-analysis*. London: Heinemann.
- Ezriel, H. (1950). A psychoanalytic approach to group treatment. *British Journal of Medical Psychology*, 23, 59-74.
- Ezriel, H. (1973) Psychoanalytic group therapy. In L.R. Wolberg & E. K. Schwartz (Eds.), *Group therapy: 1973 an overview* (pp. 183-210). New York: International Book Corporation.
- Ganzarain, R. (1989). *Object relations group psychotherapy*. Madison, CT: International Universities Press.
- Ganzarain, R. (1992). Introduction to object relations group psychotherapy. *International Journal of Group Psychotherapy*, 42, 205-223
- Horwitz, L. (1983). Projective identification in dyads and groups. *International Journal of Group Psychotherapy*, 33, 259-279.
- Kibel, H .D. (1993). Object relations theory and group psychotherapy. In H. I. Kaplan. & B. J. Sadock (Eds.), *Comprehensive group psychotherapy* (3rd ed., pp.165-176). Baltimore: Williams and Wilkins.
- Klein, M. (1946). Notes of some schizoid mechanisms. In M. Klein (1975) *Envy and gratitude and other works*. (pp. 1-24). London: Hogarth Press.
- Klein, M. (1948). On the theory of anxiety and guilt. In M. Klein (1975) *Envy and gratitude and other works* (pp. 25-42). London: Hogarth Press.
- Klein, M. (1958). On the development of mental functioning. In M. Klein (1975)

- Envy and gratitude and other works* (pp. 236-246). London: Hogarth Press.
- Rey, H. (1988). That which patients bring to analysis, *International Journal of Psycho-Analysis*, 69, 457-470.
- Rutan, J.S., & Stone, W.N. (1993). *Psychodynamic group psychotherapy*. New York: Guilford Press.
- Schermer, V., & Pines, M. (1994). *Ring of fire*. London: Routledge.
- Safán-Gerard, D. (1991). From A to B and back to A: Emotional development in groups. *Group*, 15, 213-218.
- Schain, J. (1980). The application of Kleinian theory to group psychotherapy. *International Journal of Group Psychotherapy*, 30, 319-330.
- Tuttman, S. (1992). The role of the therapist from an object relations perspective. In H. Bernard, R. Klein, & D. Singer (Eds.), *Handbook of contemporary group psychotherapy* (pp. 241- 287). Madison, CT: International Universities Press.