## SECOND BIENNIAL INTERNATIONAL BALINT GROUP LEADERSHIP CONFERENCE IN CHARLEROI BELGIUM

## 4<sup>th</sup> – 6<sup>th</sup> October 2012

## The role of Theory in Balint Group Leadership

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I will try to explain in a few words how I see the importance of theory in our Balint work in Belgium.

When I finished my studies at university, I was proud to be a young doctor. I was well-trained but also a bit neurotic. I couldn't imagine that patients didn't fit into the boxes of pathology that we had studied with such difficulty. They had to be fitted in at any price.

But of course, that is not the case; patients do not behave according to textbook descriptions. As a result I felt I was a bad doctor. That was when I decided to enroll in a Balint group. What I experienced there affected me deeply. In fact, I presented to the group a case that seemed to me hopeless. I discovered, as if by magic, at my next appointment with the patient that there wasn't a problem anymore. Indeed, I did not say anything of what I had learned from my group experience to the patient. Everything seemed to come from within me. I did not know how it happened, but I was able to relate again to my patient. I guess that most of you have experienced something similar. Since then I have continued to think about what happened. I read Balint again with even more interest. This was my first return to our theoretical background. I began to understand that what is at stake in a doctor-patient relationship has something to do with primary love. I had to admit that there were quite a few personal issues to work on at the level which Balint described as "the basic fault".

Basically, I became a doctor for an irrational reason. I seemed to be involved in a drama in which my desire to save others is based on the illusion that my own survival depended on being able to do this. This seems close to Balint's 'basic fault' and is connected to his idea of 'apostolic function'. I found that patients constantly brought me to this complicated and conflictual area. Sometimes it seemed to turn into a genuine Greek tragedy. Once again theory came to my support, at first intellectually and later more fundamentally. This helped me not to fall into the trap of my "ego", my personal difficulties. It permitted me to remain self-critical; awake.

Facing this challenge, what can we do to enlighten ourselves with our patients? What else other than entering a personal therapy? Balint proposes the group as an answer. A group unconscious exists which enacts archaic mechanisms of basic love. We can refer to Bion, to Kaës and many others. With Michael Balint we learn that with a group we can reach a zone of creation that makes things possible again.

I became gradually a Balint group leader. With that, other issues arose: what should I be aware of? What is a group? How can it be helpful? Each time I'm leading a Balint group, I'm surprised by the incredible richness of exchanges and the openings that gradually emerge during the session and their diversity. It is exciting to see that a group dynamic actually exists. Sometimes unexpected things occur which can leave us speechless. How can we manage to think at such moments?

The French poet, Jean Cocteau, said "why doesn't the mirror think before it reflects?" It is the same thing with the group. The unconscious is like the reflection of a mirror. What emerges here simply exists, surprising us. It is instantaneous and it takes time to be able to think about these things. But becoming a leader requires thinking before reflecting? Does it not?

In Belgium, at the initiative of Dr Michel Delbrouck, supervision is organized for group leaders with a psychoanalyst guest. A theoretical contribution is really useful in providing supervision. We often experimented in our Belgian team with trying to understand what had happened at various points in the group process. We tried to unravel difficult situations and to find alternative ways if possible. But then again, as in a Balint group, talking about the problem of the leader is often enough, nothing more explicit is necessary. Like a Russian doll, the problem encountered in the group is the same as between the doctor and his patient. In my experience, direct contact with psychoanalysis through the help of a psychoanalyst can enable new thinking, and allows the strengthening of the self of the leader; and this, in turn, strengthens the doctor and the patient. The group is an effective tool in taking care of the basic fault of the leader, and then of the doctor and finally of the patient.

As soon as there is a group, from the very first moment, there will appear on the one side anxiety, regression, and the fear of not being good enough; and on the other - a framework which allows for re-adjustment; leaving aside old ways, working things through and the growth of mutual respect. A Balint group is a place where, through talking, life can open out again and be the basis for development. The leader must try to contain the group's capacity for primary love and must at all times be conscious of this, so that the group can provide a safe space for learning and the strengthening of the professional egos of the participants. Attacks on the leader, for example, or crises in the group, are not directed at the group leader personally. They have to be considered as part of the group process, in the same way that transference in individual treatment is part of the therapeutic process. As Balint said, it is better to have "early detection" of dysfunction in the group. Balint group work is intense and exciting work.

In order to benefit from the contribution of theory, there must be a subtle to and fro between the clinical reality - that is to say what actually happens in the consulting room (the reflection in the mirror) and the knowledge acquired by training, lectures and supervision. One illuminating the other and in turn being put to the test of reality. What is exciting to me is to bring together the discourse that takes place in the group with the theory of the unconscious and then to see that what is elaborated and emerges from this will change subtly what happens in the group.

How often I have felt alone and lost as a leader facing the story of a case? What am I going to do with it? Then I hang on to my role, helping to maintain the framework as defined at the beginning of my talk and allowing the group's work to take place. Then I can begin to see the group dynamics emerging. Questions then arise in me as to the theory but only in a vague undefined form: 'what is at stake here?'; 'why does the group seem depressed or excited or ready to explode?' Is there a link with the case?' 'What kind of emotions are involved here?' 'Is there a projective identification?' I don't express any of this. It is a way to bring theory alive for me in the present. Being able to do this, and having in mind the process of (a future) supervision allows me to keep an inner distance which enables thought. Thus I can preserve my ability to think before reflecting.

When I observe something taking place in the group, a dialogue with theory will arise, either in discussion with my co-leader or in the group supervision for leaders. Development becomes possible, which will benefit the next group session, and so on. The advantage of long-term groups is that one can make a delayed or pre-considered intervention. The group will at one time or another benefit from the work done beforehand by the leader concerning the group unconscious.

This illustrates very simply, the importance of theory in our work. This is what we do in Belgium. It does not involve the teaching of certainty (or a right way) but a process of constant research that allows us to remain open to the unexpected and capable of surprise, rather than closing ourselves with dogmatic truths.