CHAPTER I

A Consideration of Kohut’s Views on Group Psychotherapy

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While I was in supervision with Heinz Kohut, several years prior to his death, his attitudes and feelings toward group therapy emerged. He was somewhat negative toward group therapy for specific historical and possibly personal reasons. First, he talked about the tremendous power of the group leader, which could possibly be quite negative and dangerous. Specifically, he was very worried about the charismatic leader who could use empathy to control throngs of people for his own purposes. This would not only serve the narcissistic needs of the leader, but would give him enormous power as well. Kohut talked of Hitler’s enormous power and attraction to the German people in the 1930s. He intuited selfobject needs, both mirroring and idealization, within the German people, reflecting their feelings, exploiting their deprivations, both sociologically and economically. The Nazis were joined together through general hatred and a wish to be élite, superior and omnipotent. The grandiosity which generally had been so inadequately mirrored previously could now be made manifest through the shared power of the group. An archaic need for the twinship selfobject would also have been called into powerful play as well. Thus, a mass fragmentation resulting from failures around idealization was exploited by a skilful, maniacal, heroic figure, Hitler, who was going to provide for the economically and sociologically defeated Germany the missing idealization – that is the ‘Master Race’ gaining omnipotent power in its destruction of all perceived obstacles.

Kohut had a second problem with group therapy – the concern about patients engaged in an ‘individual self analysis’ and then adding group therapy (which to most practitioners would take place between two and four years following the beginning of the analysis). He felt that such a patient would be used to interaction in which the analyst responded from a stance of empathic introspection and might be counting on and expecting responses from an empathic introspective perspective from the group as well. However, Kohut felt that since the patients in
group are striving for maximum honest self-expression, responses in group at times would be anything but from trying to understand the patient's point of view. This would be especially true, he felt, if some of the patients in the group were engaged in a drive-oriented individual analysis.

Furthermore, if patients were encouraged to express their own feelings, thoughts and needs to advance their own 'voice', serious injuries could occur to those patients coming from a 'self analysis'. This could occur, he thought, even when the group leader models an empathic approach in the group. What we are talking about here is a resulting feeling of assault and breakage, of the selfobject matrix, when the expectation of the empathic understanding received in the individual analysis sharply contrasts with the responses to that patient in the group.

Kohut did not live long enough to become familiar with the work of many self psychologically informed group therapists. There is special attention paid in self-analytical intersubjective groups, where each patient's views are understood and validated just because his/her experiences are valid. Intersubjective self-delination is allowed and encouraged for each group member.

Many self psychological psychoanalysts today are no longer engaged in doing group therapy. Since many self psychologists are identified with Kohut as an idealized selfobject, it is natural that they would adopt his negative concerns towards group therapy.

I would like to turn to how some of Kohut's thinking is a very positive contribution to our work in doing group therapy. I would like also to examine some techniques and different perspectives that might mitigate against Kohut's worries.

The power of the idealizing selfobject transference emerges as a central factor within the group. This occurs in relation to the leader, the group as a whole, and various other constellations in the group (such as how serious conflict between one's own ambitions/views or those of other group members can be brought out and then resolved in the group). To this end, the idealization pole can lead to a plethora of early affective memories which can be activated. In addition, as in any significant interpersonal experiences, there are opportunities for different types of twinship to emerge and work through. The depth and power of the experience in group will lead toward significant merger longings and early memories of the needs for mirroring. Obviously, these same selfobject transferences exist within the dyad as well, but the group expands significantly the various arrays of their manifestation. Group also can more easily bring out early experiences with siblings, peers and significant others. The dimension of safety is also seen as a particular important parameter in group since, in the dyad, safety is usually achieved more quickly and easily, and with less difficulty. In the group, the empathic expectation is far less in place, so the dangers of non-safety are more
apparent and experienced more. Obviously, for the group to work, a
good-enough and safe-enough environment and group composition must exist as
described by Harwood (1995).

On the other hand, multiplicities of dyads in group allows for a more complex
and thorough working through of conflict where all subjectivities are brought
out, valued and understood, and self-delineation is held as a group value.

The safeguards against the 'over-charismatic' group leader using the group for
his own selfish and sometimes negative purposes are fairly obvious. The leader
should be well analyzed, and should have had considerable time as a patient in a
group informed by self psychology. He/she should have had considerable
supervision of group by a self-psychologically informed group leader. It is
assumed here that a prerequisite of any group work for the analyst is solid
knowledge, cognitively and emotionally, of dyadic and multiple experiences.
Moreover, the group leader should be well aware of the dangers of the misuse of
empathy, the 'bandwagon effect' that herds people into constrictive systems, and,
as much as possible, his own narcissistic and grandiose needs. He/she should be
able to tolerate these, understand them, and not feel self-contempt or
over-evaluation toward them. There should be a consistent monitoring of
countertransference, one's own character traits and self-object experiences to be
able to tolerate and empathically accept them. The group therapist needs to be
able to place external boundaries on the gratification of these understandable
propensities, and to be able to fully feel the type of transferences elicited when
gratification is denied.

Furthermore, the group leader should be experientially knowledgeable of the
particular emotional dimensions that are provoked within the group. Historically,
the group leader should be well informed of the dangers considered by Kohut. I
have found that the grandiosity stimulated by leading a group is qualitatively
different from that of the dyad, and should be understood in the context of the
revival of familial and communal/tribal affects and experiences.

If there is an atmosphere of safety, ability to self-reflect and accept each other's
right to a different point of view, and non-defensiveness within the group, most
members do have an emotional, intuitive awareness of the inappropriate use of
empathy — empathy used to one's own ends to hurt another. One dimension
particularly important to me is the constant attention paid to each individual's
history and current experience in the group, with an attitude of guarding each
person's autonomy, voice and rights. I almost never make any 'group
interpretations' or comments that herd people into an undifferentiated pack or
system. It is clear that the group atmosphere supports individual positions above
the overall welfare or system of the group (Stolorow's self-delineation).
Stereotypic and automated (over-regulated) assumptions in group are generally
explored, so that there is always a return to the emphasis on the individual and his/her experiences.

An example of this is when a group develops a stereotype of each week when one of the patients brings in a problem, and the rest of the group behaves as helpers to that person. As a group therapist, I will not do anything to manifestly interrupt that process, but will later investigate what it means and feels like to each person engaged in that process. The group process is always used for the purpose of investigating each individual’s dynamics and experience.

Another example would be when one group member is ill, and the whole group seems to want to send that person a ‘get-well’ card and sign it. I always wonder what it is like for the person who really doesn’t want to sign the card, and might particularly address that to those individuals who show some subtle signs of that position, utilizing my knowledge of their histories and dynamics. Thus, for me, group is another analytic dimension for exploring the intersubjective field. I always try to be aware of what selfobject and traumatic transferences are elicited by my experience as group leader as well as by the other group members.

Finally, I want to address the issue of the ‘shock’ of entering a less safe environment, one with greater incidence of empathic failures, for the patient that has possibly been in a highly empathic dyad. But all individuals come from families and need to rework and heal their old injuries. I am much more careful of group composition than I was prior to my knowledge of self psychology, similar to Harwood’s (1995) views. I will not place someone in the group who is likely to be wounded in a manner that is not easily subject to repair through interpretation. I am more careful about the timing of putting someone in group—that is, I will not place someone in a group that is non-receptive to a newcomer or place an individual who is in a current state of fragmentation. Furthermore, all the group members are aware of the intersubjective position of the newcomer—that is how each group member may transfessionally be affected by the newcomer’s issues. I also am more prone to rule out certain patients for group, thus affecting the composition of the group. Primarily, I rule out anyone who is not capable of an empathic position, at least from an intellectual frame. I also rule out people who are manifestly hurtful to others as a syntonic character trait, even if their position can be readily seen as a fragmentation by-product. With these considerations in mind, and in fully heeding Kohut’s dangers, I have found doing group therapy an exceedingly useful and safe therapeutic medium.

Kohut never did group, nor was he trained in doing group. He just heard about its failures. During the time Kohut voiced his concerns, he was personally also being subjected to hurtful, rejecting psychoanalytic group dynamics. There were psychoanalytic circles/groups which would not recognize Kohut’s self-delineation—developing and contributing to the development of a new theory, Self Psychology. Conversely, to his credit, he did encourage those who had
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References

