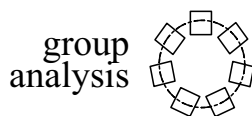


Article



Therapeutic semi-safe space in group analysis

Avi Berman

People come to group analysis knowing that the group is not completely safe. They choose to join an unknown, and in many respects unpredictable and challenging, interpersonal environment. 'Semi-Safe space' in group analysis is a co-created, basically safe and mutually accepted infrastructure, with the mutually recognized challenge of being and communicating in an unexpected and not fully protected environment. The group's semi-safe space represents one of the main advantages of group psychotherapy if handled professionally. Group analysis is a potential space in which minds may be created and develop through mutual interaction, which is sometimes inevitably turbulent and experienced as unsafe. On the other hand, excessive 'unsafety' might destroy the boundaries of the psychotherapeutic domain and become harmful or even traumatic. It is the conductor's crucial responsibility to create initial safety in the group. He can contribute to the participants' sense of safety by exercising some authority in stating those boundaries and opposing any deviation from them.

This contract is based on reciprocity and exchange: protecting the safety of one participant in the group is equivalent to protecting the safety of the others. Mutual risk-taking produces safety while its lack intensifies doubt and fear.

Key words: semi-safety, safety, unsafety, meeting of minds, enactment, exchange, conductor's responsibility

Introduction

. . . The best way I can think of illustrating my image of the individual in this respect is that of a piece of a jigsaw puzzle in isolation. Imagine this as three dimensional as well as in interaction with other pieces. When you take this individual fragment out of its context, it is shaped and formed, or deformed, according to the place it had and the experiences it received in this group. (Foulkes, 1990: 275)

I will start with my main idea in this article: I suggest that, unlike many group therapists' intentions and wishes for patients' safety, people come to group analysis knowing that the group is not completely safe. They choose to join an unknown, and in many respects unpredictable and challenging, interpersonal environment. They are aware that they are about to meet strangers who bring their own personal needs to the group and whose characters and intentions may or may not coincide with those of the other participants in the group. They hope for an empowering yet challenging experience. They wish to feel capable of dealing with a semi-safe environment as they come to realize that the interpersonal field holds together these two polarities of support-empowering on one hand and risky-challenging on the other.

They may believe that this combined experience in the group contributes to their therapeutic needs and may strengthen them personally as well as inter-personally in their lives.

This is how one of the participants described it in his own words:

The group is the real world. It's the money time. They are real people who will tell you real things. The individual therapist speaks out of his professional duty. In that sense he is not real. Participants in the group speak out of themselves. They will tell you the things you really need to hear.

I suggest that the 'semi-safe space' is an aspect of the group matrix co-created by the conductor and the participants to contain the tension that exists between the poles of safety and unsafety in order to enhance the therapeutic benefits to the group. Containing this tension entails oscillating between a basically safe infrastructure of boundaries, inclusion, empathy and sensitivity on one pole and the mutual challenge of meeting others with their unexpected and sometimes surprising needs and reactions on the other.

The word 'semi' was chosen in order to underscore the unformulated and simultaneous experience of safety and unsafety in the group. Not only is there oscillation between safety and unsafety at

any given moment, they may exist at the same time and vary from one participant to another. Any interaction in the group may be protecting and sensitive for some but at the same time disturbing for others. Therefore, semi-safety is an attribute of the group as a whole as well as of any participant. For instance, characterizing the group as 'a collection of strangers', creating 'interpersonal tensions', being 'unpredictable' or creating 'incomplete experiences' (Nitsun, 1996: 48) may describe a basic feature of the group-as-a-whole semi-safe space and not merely its anti-group aspects. The suggested term 'semi-safety' points at the coexistence of partial safety and partial 'unsafety' in the group. The oscillation between poles and the ever-changing meanings of safety and unsafety for different members in different moments. (It does not mean division of 'half and half'). Semi-safety bears, of course, the subjective experience of each participant. This subjective experience, when recognized and worked through professionally, may encourage the participants to take the challenge of making the group safer for each of them and at the same time express themselves personally in a not-wholly safe environment.

Let us consider Foulkes' image of a group member as a piece of jigsaw puzzle. Each of these pieces is shaped to fit one's former groups, and mainly one's original or present family, work colleagues, and friends. When they come from different puzzles into a new one, no one fits completely together anymore. The process of fitting together again, is both transformative and tension provoking. A young man (who never heard of Foulkes) says in the group: 'I feel like a piece of a jigsaw puzzle that fits no-one and no-where'. He feels lonely and desperate in his life and this is the first time he speaks frankly in the group. To his great surprise three other members resonate and identify with him. They feel the same. They praise him for his idiom.

Foulkes asserts:

[the group] is struck by its differences which provoke curiosity, hostility and fear . . . As it proceeds it finds more and more of common ground, and less and less contradiction between individuality and community . . . The group, therefore, respects and supports the emergence and free development of individuality. (1948: 30)

In other words, Foulkes recognizes for a moment the unsafe experience in the group but moves quickly to the more optimistic view of group communality and the therapeutic emergence of individuality.

Characterizing group therapy as ‘a semi-safe space’ did indeed occur in my mind when I compared it to individual therapy. Usually, individual therapy is considered to be ‘safer’ than group analysis. The analytic alliance contains the analyst’s obligation to assist the patient. The analyst dedicates himself to the patient’s therapeutic needs. In this way he is attentive to the patient’s inner experience, points of view and anxieties. According to self-psychology, the analyst as a ‘self-object’ illustrates it as such: the analyst reduces his otherness in order to be an object which responds to the patient’s needs of experience and processing in the analytic process he is undergoing (Kohut, 1971). Others consider the therapist as a mother figure who is responsible for the patient’s safety by taking care of setting (Winnicott 1974; Modell 1968).

Of course, there is no clear-cut distinction between individual and group therapy in terms of the balance of safety and unsafety. ‘The therapeutic encounter is emergent, non-linear and therefore unpredictable (Dalal, 2017: 180)’. Individual therapy can also provide a semi-safe space, as Bromberg puts it:

The analytic relationship become a place that supports risk and safety simultaneously—a relationship that allows the painful reliving of early trauma . . . It is, optimally, a relationship that I have described as ‘safe but not too safe’. (Bromberg, 2008: 332)

While in individual therapy the patient’s needs are prioritized, in group therapy this is not possible. Each participant is entitled to benefit from the group resources. A certain amount of tension between different needs always exists. However much the participant is assisted by the conductor and other group members, he must still assert his needs, obtain himself space and time for himself and cope with the group complexity in order to maximize his therapeutic gains in the group.

The group is characterized by otherness, by constant changes, by the challenge of obtaining space and time, by need-fulfilment, and by meeting the needs of others. It is an environment of unexpected responses by others (pleasant or not) and of diverse personal exposure that, due to resonance reactions, arouse emotions, memories and reactions otherwise denied or forgotten. In Winnicott’s terms (1968), the other participants are outside the range of anyone’s omnipotent control.

As therapists we all aim to provide safety to our patients. Yet, I believe that as group analysts we should bear in mind the need of our

patients to participate in the semi-safe, challenging space in the group and benefit from its therapeutic value. The wish to guarantee safety in the group may restrict this therapeutic gain. Moreover, this wish may bear an unconscious counter-transference component of the group analyst. For instance, the group analyst may deny his own anxiety of feeling unprotected within the semi-safe space in the group, especially as a participant in possible enactments. This anxiety may result in over-protectiveness that sometimes might be (too easily) rationalized by professional consideration.

To my mind, the group's semi-safe space represents one of the main advantages of group psychotherapy if handled professionally. I suggest that we, as group-analysts, should recognize the group as a semi-safe space and know how to distil the therapeutic advantage which stems from it. We are supposed to know how to conduct a group in a manner that enables each of the participants to maximize the potential gain of a semi-safe space. We should imagine that in the absence of this kind of professional understanding, we might disappoint our patients who chose this challenge.

I would like now to expand on both parts of the picture separately. First, the therapeutic value of unsafety in the group and later—the necessary infrastructure of safety which is required in the group.

The therapeutic value of semi-safety

As mentioned above, mutual expressions of otherness by group members are inevitable and form a basic aspect of the group's matrix. Yet some writers consider this aspect as a basic and universal component of interpersonal relations.

Bion (1957) claims that any interpersonal interactions are charged and turbulent by nature. Bion does not differentiate here between love and hate. Every interpersonal encounter entails an emotional storm. Having a mind that functions as a mind is the result of enduring this storm.

Following Bion, Hinshelwood adds that: 'when two characters or personalities meet, an emotional storm is created. If they make a sufficient contact to be aware of each other, or even to be unaware of each other, an emotional state is produced by the conjunction of these two individuals (Hinshelwood, 2003: 181)'.

According to Bion and Hinshelwood, an interpersonal storm is a precondition for creating a mind. Having a 'mind' is a developmental achievement. Its creation makes a person into someone who can

produce meanings and not just draw events from memory or not think at all. The ability to create meanings and process them stirs further development and change. On the other hand, people may avoid a storm and prefer to live in a lack of depth which is actually a lack of thought.

Hinshelwood adds: 'Increasingly, psychoanalysis has come to recognize that in reality, the really important reality for the human being, is the reality of other people. A person's external reality is the inner reality of someone else (Hinshelwood, 2003: 181)'.

And so, the group is the preferred location for a 'meeting of minds'. According to Hinshelwood, processing the storm in the group means reaching the acknowledgement that the other has a 'mind' similar to mine, as well as understanding that any development in the personal and interpersonal world depends upon this acknowledgement.

I suggest that group analysis may be the potential space in which minds meet and contribute to the mutual process of becoming. Within the group, meanings are created and re-created together. Meanings which are the property of the group as a whole can be constantly translated to personal transformations. This potential space is productive if and when it allows for 'emotional storms' that stem from inevitably turbulent interactions, together with care and concern.

In the terms of this article, the storm is a part of the semi-safe space, and is necessary for the creation of therapeutic value. Containing unsafety and promoting the meeting of minds is therefore an essential aspect of group psychotherapy. Containing unsafety ('storm') is the difference between transformation on one hand and developmental arrest on the other.

'Storms' in the group may appear also as a result of mechanism of defence against unbearable anxiety. Hopper (2003a) suggests that fear of annihilation may stir aggregation/massification mechanism (defined as the fourth basic assumption), which includes aggressive feelings (and behaviours), shunning, banishment and scapegoating.

Beside the universal aspect of the 'storm' within interpersonal relations, there is another aspect of unsafety that entails therapeutic benefit. Unresolved and turbulent issues from each participant's history may be reconstructed unconsciously in the group. Thus, participants may re-experience the difficulty and sometimes the storm in their lives within the 'here and now'. Spontaneously and unconsciously, together they reconstruct a poignant experience of real events in their past. Some of the most difficult experiences in their lives may be brought up in the 'here and now' in this way. In the 'matrix of time

and space' (Hopper, 2003: 208) 'there and then' past experiences may appear in the present and get another future opportunities at the cost of 'storms' in the 'here and now'.

This reconstruction functions as an enactment in which participants, as well as the conductor, take part. Following Almond (1999: 523) I refer to 'enactment' as a group-analytic drama, including 'unusual and episodic' moment(s) of mutual participation of the members and the conductor alike. The term 'enactment' is particularly important in this context as it points at both patients' and therapist's unconscious co-creation of a new opportunity to experience and decipher otherwise hidden or split-off crucial therapeutic issues in the participants lives (Chussed et al., 1999). Authenticity in group interaction is often spontaneous and unexpected. Sometimes it is impulsive, emotional, enacted and surprising. When held professionally authenticity may bear a significant therapeutic value. Unexpected authentic personal responses can break through blockages of withholding (Berman, 2012).

In the group 'It is in interaction and enactment that we find meaning evolving (Grossmark, 2016: 5)'. Enactment is fully deciphered and understood only in retrospect. They may become important occurrences of the semi-safe space in the group.

When the re-enactment in the room is interpreted with the help of the conductor and the participants, the group is able to take a look at what is happening and give it new meanings. Group enactment which recreates important life events, together with the group's processing, provide the necessary balance between the safe and unsafe aspects in the group. Regarding the therapeutic value of the area of semi-safety in the group, re-enactment is an opportunity to create an alternative, and sometimes even a whole new beginning (Balint, 1979). The following is an example of that.

Rose

I would like to demonstrate the possible elaboration of semi-safe moments in the group through a clinical vignette from a group which I conduct. This analytic group is composed of three men and four women. Rose is a relatively new participant in the group. She is in her 60s. When she was a teenager she experienced painful social exclusion. It all began when, as a high school student, she refused to participate in the school's extracurricular voluntary activities. She and her classmates were supposed to help underprivileged children in poor neighbourhoods. They had to go to different homes, stay there for two

afternoons a week and help children with their homework. Even though she volunteered for this activity she was frightened returning home at night and waiting for the bus in the dark. Her refusal was not accepted by her classmates. They excluded her and for several months nobody talked to her. She remained lonely and pained but did not change her mind. She did not tell her parents about it. She shared this shameful secret only with two friends from another school.

A few months later three more girls from her class stopped attending this activity. Soon afterwards one of the boys started talking to her and the exclusion dissipated.

Her story was received with empathy and compassion. Yet it turned out that this soft interaction in the group did not make a difference. During one of the meetings, Rose lashed out at the other participants and at the conductors. She claimed that the group moved too quickly to deal with other members and other issues. She felt she had been forgotten. Most of the participants regarded her claim as ungratefully criticizing. Tammy said: 'We were very close to you for almost the whole previous session. We were completely on your side. Don't you remember? I feel hurt by your criticism now.' They attacked her back, accusing her of being self-absorbed and of paying no attention to the other participants. They turned away from her. Only one man, Ron, tried to protect her, saying that she was not yet aware of the meaning of her words and that it would be better to give her more time. He turned to me and said: 'You have pointed out scapegoating. But now you don't protect her. She is left alone in the face of the anger and aggression of the majority here.' In response, he himself was confronted by the rest of the group. He had just announced his intention to leave the group at the beginning of the summer. It seemed that other members expressed their anger towards his decision by attacking him at this moment. They told him that his attitude was condescending towards her and did not hold any more compassion than theirs. The atmosphere at the session was turbulent and angry.

As a conductor I did not intervene up to this moment. I chose to refrain from calming the storm down. Yet, at this moment I felt myself as an abandoning father to both Rose and Ron. I was thinking of the fate of the one in front of the many. Then I remembered a moment in my youth in which I felt rejected by my peers. For a moment I felt lonely and speechless. At the same time I recognized the turbulence in the room as an enactment, a reconstruction of Rose's past exclusion (which had similarly been resolved by the mediation of a boy in the class). I managed to lean on my faith that these stormy

moments in the group must serve as an opportunity for resonance. Then I suggested to the group that the interpersonal situation in the group might have been a re-enactment of the participant's traumatic event at school and that it had to be 'played out' again in the 'here and now' this way. I suggested that situations of exclusion, similar to that which was taking place in the room right now, may be familiar to other participants. Afterwards, the experience of 'us and her' in the room started to dissipate. One participant remembered that she herself was once part of such an exclusion against an immigrant girl in her class. She recalled the pain she inflicted and the regret she felt. Another participant revealed that he was the shortest boy in his class which made him hate everyone. He kept this hatred secret, while sucking up to the bullies.

Rose herself started talking only during the following meeting. She said that she was herself surprised by the intensity of her emotions. She connected with the hatred she had felt in school and, for the first time, discussed this period as a social trauma in her life. She gradually emerged from her solitude by referring empathically to others, holding them in her mind and gaining attention and appreciation. It seemed that containing the turbulence in the group and refraining from quick appeasement by the conductor enabled the participants to transform the tension into personal meaning. Rose herself could take part, for the first time, in an interaction in which exclusion was resolved by communication. Moreover, she could hear what the others had to say to her.

Required safety and the risk of destructive unsafety

We can assume that it is necessary and possible to maintain a basic safety infrastructure in the group, which all participants can feel is sufficiently reliable. We may assume that, having in mind a balance between aspects of safety and therapeutic unsafety in the group we may gain a clearer notion of 'good-enough safety' in group analysis.

Moreover, it seems that excessive unsafety might destroy the boundaries of the psychotherapeutic domain and become harmful or even traumatic. Boundaries must be kept. Pines reminds us: 'Etymologically, boundary is a limit, a limiting or dividing line, a word that derives its origin from the edge of the forest . . . It divides the domestic form the wilderness (1977)'. We may say that destructive unsafety is the wilderness that might invade the group and annihilate its potential benefit.

Obviously, we have to acknowledge risks of destructive unsafety and acquire measures of differentiation between destructive and therapeutic unsafety. Fortunately, our professional literature entails clear enough aspects of destructive unsafety. Potential destructiveness in groups was referred to with terms like 'malignant mirroring' (Zinkin, 1983), 'failure of communication', forms of persecutory projective identification, assault on psychological self (Nitsun, 1996), scape-goating and more. All these may arouse paralysing fears and eventually therapeutic failures.

Indeed, participants may feel safe enough in the group when boundaries of time and space are kept. They feel safe when their right to belong is guaranteed, when they are included in the shared communication of being heard and listened to, when their personal exposure is respected and their secrets are kept. They feel safe enough in the group when they are fairly protected against other participants' absence or sudden dropout.

The role of the conductor needs a separate discussion in another article. Yet something should be emphasized here: even though we are willing to trust the group and its therapeutic process, the conductor is still responsible for providing conditions for basic safety in the group. As Arcari puts it: ' . . . dynamic administration is always the particular responsibility of the conductor . . . The conductor who ignores his/her responsibility imperils the group ability to work (Arcari, 2003: 88)'. Many psychoanalytic and group analytic writers emphasize the importance of maintaining the setting and providing safety. For instance, Schlapobersky notes: 'During group therapy containment in the setting creates conditions of safety in which regression can be tolerated and drawn upon for its resolving and productive benefit (Schlapobersky, 2016: 267)'. In my opinion, the conductor can do so by introducing rules that can reasonably be obeyed and fulfilled by all the participants. Clear introduction of these principles is a part of the initial interview. The patient's capacity to understand those rules and his commitment to obey them should be a precondition for his admission into the group. The conductor can contribute to the participant's safety by exercising some authority in stating those and opposing any deviation from them.

Having said all that, I would like to repeat and emphasize two main points. First of all, maintaining the setting in group therapy (in my view) aims at providing semi-safe space and not complete safety. Secondly, the semi-safe interaction in the group is not necessarily regressive. Many times it is the essence of real meeting of people and

minds. Furthermore, many times enactments of personal difficulties and others' reactions to them produce the most hopeful chance for recovery.

Safety as a dynamic exchange

I would like to suggest that basic infrastructure of safety is also based on reciprocity and exchange: protecting the safety of one participant in the group is equal to protecting the safety of the others. Members of the group exchange protection. Each participant owns a key for the safety of any other participant.

Zinkin, in his article on exchange says: 'It is realized that nothing is lost by making the private public (Zinkin, 1994: 110)'. I would like to add that contributing to safety in the group eventually makes a difference according to the basic gestalt rule: the whole is greater from the sum of all parts: mutually experienced safety in the group is the whole.

As mentioned, the therapeutic contract is based on reciprocity and exchange between all participants. I have found that the more the participants in the group share their sensitive personal issues, despite experiencing vulnerability, and as more participants do the same, the greater the feeling of safety in the group. I formulate this as the paradox of risk-taking: mutual risk-taking produces safety while lack of it intensifies doubt and fear.

Participants' exposure in the group entails sharing their personal issues as well as directly and authentically addressing other participants. These are two forms of communication in the group which are accompanied by a sense of taking a risk. Sharing personal issues reaches its climax when the participant shares themes that are accompanied by a sense of fear, shame and guilt. These emotions are likely to arise whenever participants share painful pieces of their personal history, such as dishonesty in close relations, secret felonies, subjection to sexual abuse, taking part in sexual abuse, memories of rejection, painful failures etc.

These issues may provoke a conscious fear of condemnation and exclusion from other participants. The reasons for these fears may be partially intrinsic since they often resonate the participant's fear of his/her own super-ego's inner judgement. If the group's participants react similarly to their inner condemnation, the participant's exposure may result in additional feelings of guilt, failure, helplessness and hopelessness.

Hurting or being hurt are both anxiety provoking. Direct and authentic reactions toward other participants might arouse anxiety too.

We can assume that most participants experience these fears and are aware of them. They choose to come out of their protected comfort zone and share their intimate issues. They choose to take a risk and hope to feel included and encouraged.

Within the semi-safe space, the group enables the participant to solve fear by risk-taking and daring. Transforming fear into daring can be a life-changing alternative—especially for people who are used to transforming their fears into social avoidance.

I suggest that, more than anything, what enables the group's therapeutic quality is reciprocity and exchange. The group's therapeutic reaction to one's shame and fear is mainly the additional exchange of the sharing of others. I believe that often mutual sharing is more therapeutically beneficial than a clever interpretation or an empathic expressions by others, participants and conductor alike. These comments, as contributory as they may be, can wait. The participant who relates something personal to the group and reacted with interpretations and/or empathy only, may continue to feel lonely and excluded. These empathic expressions alone may underline mainly the painful difference (in the patient's experience) between his abnormality and failure and what seems to him as the successful life experience of all the rest that justify their wise interpretations. In my opinion mutual sharing makes a critical difference between the feeling of 'I'm in your hands and it is scary' and 'we are in our own hands and it is reassuring'. The second possibility is based on exchange and reciprocity. The therapeutic alliance which provides a safety infrastructure is the one in which the participants join into a group with mutual quality of exposure and risk-taking, in spite of fears.

Conclusion

The group can be comforting and relaxing and indeed there are groups conducted in such a way that they are shaped to have these qualities. However, I suggest that these groups would not be considered by their participants as sufficiently relevant to the inter-personal reality the way it is. A group like this, in the terms of this article, is also safe.

It seems to me that group analysis does indeed prove itself therapeutically in the processing of past exclusion, difficulties of belonging and maintaining close relations, in alleviating social anxieties or

trauma. We can cautiously say that for every emotional difficulty and for every problem there is an inter-personal aspect which can be restored in group analysis. It is obvious to us that participants come to the group with anxieties and hopes associated with the inter-personal encounters in their lives.

Distilling the therapeutic advantage of the semi-safe space in the group requires us, the group analysts, to know how to provide the space of potential safety in the group, to enable the semi-safe space and to translate the participants' experiences in this space for their own therapeutic benefit.

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