Introducing the Theme:

In Times of Disruption - Who and What is Group Analysis for and Where are we going in Group Analytic Training?

In recent times, our existence has increasingly met with alarming reports and evidence of human suffering caused by wars and climate changes with weather disasters, like droughts, floods, and heatwaves. Millions of people are driven from their homes, and many can only survive with help from outside. The pandemic has isolated us and made us more cautious about our contacts with our fellow humans. Geopolitically, there is a movement toward protection from external threats and a desperate protection of our known resources. The downfall and disruption in recent years seem endless. It's as if Pandora has opened the jar - again!

The political and economic climate has become more polarized and confrontational, and inflation has caused shortages in living standards and cutbacks in healthcare institutions. A civilized society, it is said, can be measured by how it takes care of the weakest members, the ill and mentally vulnerable. In present times, it is shameful to realize how little attention is paid to failing health systems.

However, Group Analysis was born during a devastating war in Europe. Traumatized men from the fronts were gathered in groups as an experiment to regain their sanity. Hope was sought and found in the darkest times. Group analysis developed along two lines: as a theory to understand human group dynamics and as a treatment option, along with other group therapies. Just as psychotherapy was the treatment for personality disorders, group analytic psychotherapy found its place as an evidence-based option for personality disorders and various other conditions, like eating disorders, depression, sexual abuse, and psychotic disorders. Furthermore, the experience was that a supportive and modified group analytic psychotherapy was needed for use with psychiatric patients. We work with the view that all group analytic psychotherapy is applied!

Looking beyond treatment applications, it becomes clear that Group Analysis cannot solve the world's problems, which are primarily of a social and political nature. At the same time the political context largely determines what we can do in our practices. Mental health services has slowly shifted its focus away from the psychoanalytic basis for understanding the potential of human relationships. The times seem preoccupied with an exaggerated belief in the power of technology as a tool to save the planet from catastrophic overheating. This trend has penetrated into the psychiatric research, where technology is being developed to help patients to monitor

and relieve their mental disorders. New Public Management still dominates the thinking in the healthcare sector, and the desire for political control remains the prevailing perspective. The question is whether psychotherapy and - in our case, Group Analysis - can maintain its place in this system as an effective, understandable, and easily accessible practice. There are differences from country to country in the belief and application of group analytic psychotherapy. Looking at the world, there are no signs that people's mental health in general will improve, not even in the Western world. In fact, it would be fair to assume that there will be plenty to do for mental health workers in the future.

EGATIN aims to gather knowledge about the use of group analytic therapy and the training for this purpose. In addition to the treatment of mental illness, group analytic principles have been used in practices such as 'Social Dreaming' and 'Reflective Citizens' and as an analytical tool for understanding and guiding organizations.

The Institute in Aarhus, which became a member of EGATIN in 1991, was founded by psychiatrists and psychologists in a large psychiatric hospital with a psychotherapeutic department. The hospital provided space and encouraged education in exchange for skilled group analysts who could contribute to a diverse treatment of psychiatric disorders.

In the last ten years, there has been waning interest in psychoanalytic psychotherapy, and fewer applicants for the educational programs. In Denmark, a persistent economic strain on the mental health sector has led to a shortage of beds, staff, and experience. A situation that has just recently prompted more resources to be allocated to this area.

The global disruptions have affected resources for the health sector and social care in many countries. The horror of the brutality and destruction caused by human behavior has led to social anxiety, individual fear and distrust. This has also permeated our training organizations and professional societies.

Where do we stand now? Can we find common ground and develop our professional knowledge and corresponding training?

Let's talk!

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Chair of LOC

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