



ARGO Associazione per la Ricerca sul Gruppo Omogeneo
la Rivista, Gruppo: Omogeneità e differenze

Group psychoanalysis: 50 years of work report



Group Body. Meeting with Simonetta Bruni
Edited by Stefania Marinelli

1. Question: Dear Simonetta, thank you for agreeing to answer some questions about your work and your thoughts on how the group works and can work when its focus is on the body. I am aware of the work you did years ago with patients in hospital wards, which you saw for a long time as a consultant psychiatrist for reported cases (by doctors). Above all, I know of your courageous group work with serious patients in hospital wards. I will not ask you to describe that work here, albeit narrowly, in the Interview (please refer to.... for that). But I do ask you here to tell us, for example, whether it was easy and encouraging for you to organise those groups; or on the contrary, difficult and controversial. And if, in any case, you drew from it a useful, probably important experience on which to continue reflecting.

1. Answer: Actually, my first experience with groups in institutions was born within a hospital, in the field of organic medicine. The project began on the threshold of the new millennium, when I had already been the coordinator for several years of the Psychiatric Consultation work that the Psychiatric Diagnosis and Treatment Service (SPDC-DSM

RM1), within the S. Filippo Neri Hospital Complex in Rome, carried out in the rest of the hospital wards.

I was asked to collaborate with the UOC of Oncological Surgery, for psychological support to women suffering from breast neoplasia, and it was then that I first thought of using the group also for patients with medical problems!

I soon realised, in fact, that those suffering from a serious bodily pathology found it rather untimely to turn to a psychologist or psychiatrist, because they felt they had quite different urgencies to deal with!

As I also soon perceived, although it seems trivial to emphasise it, that the depth of anguish that gripped these patients had an extreme and particular quality that, only as the experience developed and subsequent ones followed, did I begin to think of as being underlain by major experiences of damage to the bodily self.

This further confirmed my intuition in my choice of treatment instrument. I realised that feeling in a group, together with other people suffering from the same pathology, in a psychic space more enlarged than the individual one, allowed a greater containment of an anxiety, precisely so primitive and pervasive. Likewise, the possibility of multiple identifications offered the possibility of sharing a mirroring space in which not to feel alone and ultimately guilty. The group was also felt to be less competitive with respect to the priority and urgency of other treatments.

This type of therapeutic intervention was already present in some other Italian hospitals but then, as now, it was not so widespread.

So it was not at all easy to open up a space and time for thinking and processing psychic experiences, within a medical environment so specialised in dealing with emergencies and managing them in the shortest possible time. Nor was it easy to take time away from my work inside the SPDC, to devote to this project.

But the support of the Chief of the Surgical Oncology Unit allowed this first experience to start. And it was followed by others.

Then came, for example, a collaboration with the Neurosurgery Unit, where I opened a group with craniolitic children who had had more or less long stays in intensive care, until I was also able, over time, to organise several training events aimed at medical and nursing health workers.

These further training projects, also conceived as psycho-dynamically conducted groups, and in this case held by an external operator as a kind of Balint group, were conceived in response to an underlying request for help, which I had been able to gather in my habitual work of consultation from hospital colleagues, especially those working in high-care wards and intensive care units.

Counter-transferentially, therefore, the groups of doctors and nurses were able to express the same death anxieties with which their own patients had

invested them. And this, in addition to offering the participants greater awareness of their work and the emotional movements that had accompanied it, at least made it possible to lighten the inevitable born-out that almost always accompanies this type of profession.

I believe, in fact, that the emotional burden on health workers is generally underestimated, not to say almost ignored. Whereas it would really be desirable for hospital facilities to include services capable of offering this type of service, not only to users, but also to the staff working there.

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As I also soon perceived, although it seems trivial to emphasise it, that the depth of anguish that gripped these patients had an extreme and particular quality that, only as the experience developed and with the succession of subsequent experiences, I began to think of as being underlain by major experiences of destabilisation of the bodily self.

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I believe, in fact, that the emotional burden on health workers is generally underestimated, not to say almost ignored. Whereas it would really be desirable for services capable of offering this type of service not only to users, but also to the staff working there, to be stably and structurally contemplated within hospital structures.

2. Question: All of us in Argo know, also because of the previous edition of *Group: Homogeneities and Differences* that you edited with other colleagues, that you have had just as much experience with adolescent groups in recent years. I ask you if you can tell us what thoughts and main construct(s) you have derived from this, so to speak. And whether this latest experience has aligned with or differed from the previous one. Thank you.

2. Answer: Adolescence is indeed a privileged terrain for the use of group-analysis, because the group, and the peer group in particular, is the habitat of choice for adolescents, where it is possible for them to experience both homologative, reassuring or regressive needs, and germinative and differentiating elements with respect to the family and parental figures.

Adolescents need to feel together in order to cope with the difficult separative tasks imposed on them by evolutionary development, and they have a great need to interweave projective and introjective identifications, even outside the family environment. They need the collective to feel legitimised and accepted the rapid and destabilising changes of the body, as well as the confusion and uncertainty of an identity in the making.

I can say of my fascinating therapeutic experience with them, carried out as Head of Group Psychotherapy at the Prevention and Early Intervention Unit, also within the RM1 DSM, that they easily know how to form a group, they know how to do it naturally and generously, easily anchoring their secret hope for the future, but they also know how to invest it with just as much passion in profound, even if often disturbing content, because the group allows them to be able, early and concretely, to stage even terrifying and unspeakable content, which has remained nameless.

One therefore finds oneself together, especially at the beginning of the experience, immersed in primitive psychosensory or mortiferous experiences with a persecutory quality, to cross a sort of middle ground, without points of reference to orient oneself. These experiences are accentuated by a phase of development where the integrity of the psyche-soma is strongly urged on by the sudden somatic changes that urgently and definitively refer to the elaboration of separative themes, oriented towards the uncertain search for a new identity yet to be constructed.

But the reliable and protected belonging to the group allows the containment of these internal movements, which in particular the dream, with its iconic function, makes representable and recognisable, so as to offer them to the gamma function of thought.

So I would say that it was fascinating and difficult at the same time to share this experience with them, just as it is fascinating and difficult to grow, because the group welcomed and held in suspension elements in transformative movement which, in some cases, could also have been close to drifting. For example, I refer here to a work of mine, "L'esserci e l'altrove" published on this site in No. 6 of our magazine, where I report on an experience with a group of young people who had the opportunity, through repeated absences that really risked causing the experience to fail, to access and concretely experience absence and the failure to settle the self.

Initially, I too found myself immersed with them in a condition of profound bewilderment and helplessness, until I was able to understand the need they had to express their condition as non-living beings, like the zombies that populated their dreams, and to feel how confidently, authentically and passionately they had invested the group for having handed over such disturbing parts of themselves, which allowed them to find themselves and draw great nourishment from this type of experience.

3. Question: I would now ask you whether your idea - that the group is specifically suited to communicating in the most congenial way precisely on the themes of the body, which you spoke about in the Round Table with the members of Argo, published in this issue - whether you have developed it, in the course of your experience, in the first instance (the groups with the

somatically ill) or in the second instance (the groups with adolescents, for whom, as we know from our work and the literature, the group is physiological and congenial, and the themes of the body are also congenial).

3. Answer: Let us say that this theme of the mind-body relationship, so erroneously called because I consider it an extension of a single system, has always been dear and foundational to me. And already from my first experiences with organic patients, I realised how much the group could mobilise, in a more unconscious, facilitating and curative way than an individual work, the sinking into ancient psycho-sensorial experiences, of which it itself becomes a containing perceptive apparatus.

This is considering the group, with Bion, as a mental apparatus and a single enlarged body, a privileged field of expression of protomental phenomena, where the protomental is defined as a basic level in which the corporeal and the psychic are in an undifferentiated state. The re-enactment of this type of experience is not accessible to conscious memory, but traces of it remain in the unconscious memory, which we now call the implicit type.

Bion (1961) argues that: "Beginning at the level of protomental phenomena, we can say that the group develops until the emotions become expressible in psychological terms". And the possibility of returning to experience these implicit memories is what makes it possible, in phases or moments of life that require a reorganisation of the bodily self such as, with due differences, in the case of serious and disabling pathologies of the body or as in the profound somatic changes in adolescence, to authentically operate a renewed identity integration.

In fact, I would like to emphasise how many of the intuitions of psychoanalysis have now been confirmed by neuroscience, which has shown how emotions arise from the body, resting on complex neural networks, hormonal and humoral movements, which is able to collect, through sense organs and sensory receptors, a great quantity of perceptions both external and internal to it, which travel through the nervous system to the brain.

Some of them stop at subcortical arrival stations, others reach the cortex.

Those that stop at subcortical stations are stored as so-called implicit, procedural memories, i.e. not yet accessible to the discriminating capacity of the cerebral cortex, even though they still produce internal states that are more or less intense and more or less pleasant or unpleasant.

While those that access the cortex can be subjected to a discriminative process capable of organising them in a recognisable way, even from a spatio-temporal point of view, so they are stored as consciously recollectable traces. This type of memory is called declarative.

Thus, experiences stored only in implicit memory, because of the immaturity of the cortex at the time they were experienced, or because they are too intense, painful and sudden, cannot be consciously accessed, but nevertheless

inform what we are and what we perceive ourselves to be, our behaviour, sometimes even defensive.

They are easily expressed in field phenomena in collective and group contexts, in the form of psychosensory experiences that are unconsciously synchronised in both somatic and psychic manifestations.

These manifestations, if duly accepted and recognised, can be recovered as conscious, nameable experiences that offer meaning to the experiences that produced them, and thus also become usable in associative processes and in the formation of thoughts, offering consistency to the sense of self.

We can then argue with Winnicott (1958) that '... the true self, continuity of existence, rests on the development of the psyche-soma'.

Thank you for your valuable engagement and generous and clear answers to my questions. Argo, the Magazine's Editorial Board and Readers are grateful to you. Demonstrating original thinking is uncommon and particularly so in an arduous and relatively recent field of work.

Simonetta Bruni, Medical Psychiatrist and Psychotherapist, Board Member and Founder of ARGO. Formerly Medical Director of Psychiatry in the SPDC-DSM RM 1, with the function of coordinator of the Psychiatric Consultation work at the ACO S. Filippo Neri in Rome from 1996 to 2012, and formerly Head of Group Psychotherapy at the UOC Prevention and Early Interventions of the same DSM RM 1. She has published several works on group psychoanalysis, in particular focusing on the themes of the body.

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Stefania Marinelli, clinical psychologist, group psychoanalyst (IIPG). Former associate professor at the Sapienza University of Rome; president of Argo. She has published numerous articles in journals and books on group psychotherapy and psychoanalysis. We recall here: *Il vertice spazio nel lavoro psicoanalitico*, Borla.

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