

period in question. I felt there was strong evidence in many instances that changes were due to one of the partners having taken part in an Encounter Group. If a large number of people were to pursue researches into their own Encounter Group experiences using this method, the pooled results might begin to add up to a general statement even if it is only a general statement about a lot of

individuals' experiences and developments.

I would be glad to respond to any questions, queries or suggestions from people reading 'SELF AND SOCIETY'. This statement has had to be very concise. I hope there are not too many gaps in the sense, that need to be filled out.

THE CONSULTANT'S ROLE

What is the consultant's role in the Grubb/Tavistock study groups?

At the most superficial level his identity is a semantic problem - special member? observer? leader? conductor? guide? facilitator? Typically, group members speculate through this range of terms and the consultant sits smiling at everybody's guesses and agreeing with nobody.

I find it helpful to translate the question into Freudian terms. I.e. the consultant appears at set 'feeding' times and there he is - a breast to be looked at, played with, sucked from, accepted, rejected, thought to be good, thought to be bad.

It's a rather more persuasive picture from the anal point of view. Absolute punctuality is usually linked in psychoanalytic literature with anal compulsiveness and there is a sense in which at meeting times the consultant comes in like a mother and all the group are on their little thrones and mother sits down and doesn't say a word but the implied instruction or invitation is: 'O.K. - give'. And the reactions around the group cover the range of possible responses to that invitation.

I acknowledge that the study group technique is ultimately aimed towards genital group activity, genital play activity, constructive group work, the study of the group process as it occurs, an adult interaction within the group and between the group and the facilitator. These are its objectives, but the criticism must be made that the study group atmosphere of enforced, clock dominated feeding and defaecation is far more pregenital than genital. This may be constructive if it is necessary to work through the pregenital fixations, but if on the other hand the technique strengthens these fixations it correspondingly makes genital creative adult activity all the more difficult to attain.

My most serious reservations about the consultant's role in the Grubb/Tavistock study groups is that it tends to perpetuate the Kleinian view of the death instinct which has been dead for at least 20 years except in Grubb/Tavistock circles. These consultants in my experience put a great deal of stress on the need to mourn the death of the group before it occurs and this differs markedly from the technique of facilitators in encounter groups who insist that the work of the group is to live in the present and not to anticipate the future. In encounter groups the group is brought to its end deliberately - it kills itself, with dignity, when the time comes. Group members express

their appreciations and resentments and then say goodbye, each to each other. This ends the group in accordance with reality because a group is a temporary thing, and when it comes to an end its members return to their primary life groups.

In the typical study group situation, however, the consultant, like a master duellist, gradually overcomes the group with a series of transference interpretations of splitting activities, depressive regressions and primary anxiety.

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