

CHAPTER ONE

The Tavistock Training and Philosophy¹

(1977)

This paper covers the main features of Martha Harris's development and consolidation of the psychoanalytic training founded on infant observation that she inherited from Esther Bick in 1960. In particular she instituted the work discussion group, personality development seminars, and the two-part training that also facilitated the dissemination of psychoanalytic knowledge into the wider community, through workers who would not necessarily train to become psychoanalysts themselves. Her distinctive principle was to encourage "self-selection". She drew on various sources of personal experience—inspiring teachers (Klein, Bick, Bion), work in schools set up together with her husband Roland Harris,² teaching and organizational skills, and above all, personal self-analytic awareness—being firmly convinced that a psychoanalytic attitude is useful in all emotional situations where infant conflicts are inevitably involved and, unless acknowledged and understood, are liable to undermine the work-group ethos.

¹ First published in D. Daws and M. Boston (Eds.), *The Child Psychotherapist and Problems of Young People* (London: Wildwood House, 1977). The editors explain that the Tavistock training in child psychotherapy was one of three existing at that time: the others being at the Hampstead Clinic and the Society of Analytical Psychology.

² Documented in "Consultation project in a comprehensive school", Chapter 21.

This chapter begins with a brief note on the history of the Tavistock course and its present position in a rapidly changing social framework. I shall try also to describe some of the thinking which has shaped and continues to shape this training, although the responsibility for the views expressed must remain my own. There is some description and discussion of aspects of the content of the course and of our teaching methods. However, no attempt is made to give a detailed account of the syllabus.

The history of the course

The Tavistock training in child psychotherapy began life in 1948 in the Department for Children and Parents, under the direction of John Bowlby. He saw the need for an analytical training for non-medical personnel practising psychotherapy in clinics. The organizing tutor during the first eleven years was Esther Bick, who set a high standard of learning from precise and detailed observation. This has continued to influence both students and tutors long after Mrs Bick's retirement.

For a number of years applications for this training were relatively few. This was no doubt due to the infancy of the profession, the degree of commitment required and the expense entailed. The current position is very different: despite the expense and commitment, which have not decreased, applications are many and our resources for training are strained. Although the Tavistock Clinic and Institute have expanded greatly and the teaching staff increased, we are able to meet only in a small way the demand for trained therapists.

The place of the course

The Tavistock is an amalgam of organizations and disciplines accountable to different governing bodies. The Clinic itself is within the National Health Service, which supports the bulk of the training of child psychotherapists, as well as the post-graduate

training of psychiatrists, psychologists and the advanced training of social workers. Nevertheless it is at present necessary to ask students to pay fees in addition to their personal analysis, as part of the training is supported by the Tavistock School of Family Psychiatry and Community Mental Health.

Although the Tavistock is multi-disciplinary, various in its aims and speaks with many voices, there is nonetheless a certain consensus of ultimate goals and beliefs. These give it coherence as an institution. People who study and work there have over a period of time the opportunity to gather a rather wide experience of the way in which different disciplines and departments set about trying to implement their aims.

I think all would agree that we are concerned with the promotion of healthy growth in the individual, the family and society. In this aim we pay attention not only to illness but also to the conditions which seem to permit developmental change. We are averse to fostering privilege, although oriented to allowing individual growth and eccentricity. We are aware of the responsibility we have to share with the community at large the knowledge and insights which we as privileged individuals acquire in pursuing our work. We believe that change is initiated by the enthusiasm of individuals and small groups, enabled by the very process of close observation of inter and intra personal relationships. We recognize that the possible quality and range of that observation has been radically affected by psychoanalysis, which obliges the observer to scrutinize himself, his feelings and motivation, the countertransference which may be used to enrich or to distort what he sees.

Organization

The training is organized in two parts. Minimally it comprises a four-year full-time period. Circumstances may arise, however, which make it desirable or necessary to take some aspects on a part-time basis, and in this case the total course exceeds four years. Students have to complete both parts of the training in order to be recommended for membership of the Association of Child Psychotherapists. The teaching is geared throughout to on-going

professional work; in the first two years that work takes place in an institution outside the Tavistock.

Students are employed in a variety of roles with children, families or young people. Teaching during the first two years takes place in the evenings, so that it is possible for students to work full-time if necessary, but this would ordinarily be undesirable—preparation and writing of observations together with the necessary reading and attendance at seminars themselves should occupy around twenty hours a week during this section of the course.

Students are responsible for finding their own jobs during this two-year period. They are accountable to their employers for the work they do. Nevertheless, we are often approached with a request for someone in training to undertake certain work, and are therefore often able to make suggestions to students about suitable employment. The kind of tasks which students are able to undertake during the first part of the course tends increasingly to be determined by their previous training or qualifications. It is likely that in the future the Tavistock will be required to evolve a more official relationship with the employing bodies, but it is unlikely that any tutorial or supervisory role which it has with students could extend to taking responsibility for the work they do with these employers.

Of several essential seminars which run throughout the first section of the course, two are now described.

*The work-study seminar*³

Seminar members, who are working in varied settings with children, adolescents and families, take turns to present detailed accounts of some aspects of their work. This presentation almost always includes aspects of the interaction between themselves and their “clients”. The presentation is discussed by the rest of the group, led by a psychotherapist experienced in analytic work with children and adolescents, although not necessarily in the particular work-roles of the group members.

³ Currently known as the “work discussion group”: see M. Rustin and J. Bradley (Eds.), *Work Discussion*. London: Tavistock, 2008.

No particular technique is taught in these seminars. The members are encouraged to consider and discuss appropriate ways of dealing with the situations and material described after the possible “meanings” have been explored. The aim of the seminar is to sharpen perceptions and to enlarge imagination, to understand more fully the underlying dynamics of the personality interactions described. Our belief is that education in sensitivity and awareness is a gradual process which takes place through working and discussing work with a more experienced colleague, through a close study of individuals and groups, and of one’s own role and responsibility.

As a leader of one such seminar my task would be to elicit as fully as possible the details of the case, the problem, the situation concerned. It takes a little time to do this. Time is also required to allow the other seminar members to feel their way into the situation and to ask questions. The questions can sometimes cause the presenter to remember details he had not registered as important. It then takes further time to consider and to try to link together apparently disparate elements in the presentation, in ways that can make it more immediate and meaningful to the participants.

I consider it important to pay attention to the emotions evoked by the case presented, both in the actual work and in the seminar group. Further, to consider these as relevant to the understanding of the material—and whether, in fact, the emotion evoked in us is the one we are meant to feel. In this way one tries to encourage the worker to make use of his own feelings, recognizing that these are a valuable part of imaginative perception without which any relationship and any attitude to work is two-dimensional.

It is vital, conversely, to recognize when some of the feeling evoked is not a true response to something actually communicated by the child, but an arousal of inappropriate emotions connected with unresolved infantile conflicts in the worker himself. These may be projected in ways that distort the perception of the child’s real message and individuality. When projection is taking place it seems to me inappropriate to comment upon it in any personal way. It is appropriate, however, to try to make the members of the seminar aware as we go along that such distortions of perception

happen at times with us all. It is a possibility that has to be kept constantly under review. Projections may be examined and understood by renewed scrutiny of the situation in question, by discussion with colleagues, or by self-questioning. The personal analysis is of course the place in which the student has the possibility of fuller examination of personal motivation, and of disturbances and blocks in the capacity to see and feel for the object.

The exchange of experiences in different work settings helps students to feel for the problems which other students encounter and to respect the work which they do. I shall single out for mention here the task which a number of students have undertaken in the past five or six years: that of working with small groups of children in primary schools.

This work arose initially out of the request of various head teachers for someone willing to take charge of small groups of children unable to benefit from ordinary class teaching. These were children with behaviour and learning difficulties. Licence was given to the group worker to engage the children in any kind of activity which seemed profitable. This would at least give the class teacher some respite from coping with one or more children whom she found a source of trouble or despair. With these fairly free terms of reference, and despite great difficulties with chaotic and unmanageable children, as with others who began as inert "lumps" and only then went through periods of volcanic and destructive behaviour, many students found this an invaluable learning experience. It was for them, and I think for many of the teachers, both surprising and illuminating to watch the emotional and intellectual development of such a group of children, usually from chaotic and deprived homes. These were often thirsty for the interest and attention shown, relieved at the acceptance of their more unacceptable behaviour and at the opportunity to translate this into more constructive means of communication.

In some of these small groups the children achieved a stage of deep intimacy and trust. This made it possible for a rich spectrum of the most intense emotions of infantile dependence, sadness and loss, jealousy and rage, to be talked about and lived through with the worker. Children who were formerly drawn together only in

collusive, thug-like alliances learned to show interest, friendliness and attentiveness to each other. Such behaviour would have seemed unthinkable in the chaotic early days of a group. Beneficial developments within the group invariably carried over to some extent, sometimes dramatically, into the child's relationships in the wider areas of school life.

There is much to learn from these small groups concerning interpersonal relationships. The parts and roles played by members of the group can be seen to be operating within the individual personality. The experience of taking a group has often helped the therapist of the individual child to describe and talk to these different parts of the child's personality.

Since the work study seminar runs parallel to the infant observation seminar, which I shall describe next, there is some cross-fertilization between the two. It may in the future be possible for seminar leaders to initiate more formal and organized ways of making links between relationships and patterns discerned in the work experience and those seen in the baby-mother-family observations. At present we do this where we can and hope that students will be encouraged to integrate the variety of their own experience in a manner which may lead on to further fields of enquiry.

The mother-infant observation seminar

This seminar was initiated by Esther Bick at the outset of the course in 1948. All the current seminar leaders at the Tavistock have at some time or another taken part in one of her seminars and have made observations themselves. I mention this not only to acknowledge the debt of those of us who have found this a unique method of learning about the fundamentals of personality development, but also to emphasize that this kind of observation does require the help of trained and experienced people if it is to become meaningful.

For most people other than the mother concerned the movements of a small baby are chaotic and fairly meaningless except in generalised behaviour terms. One has to allow oneself to come close to the baby in order to see and retain details, and to cope

with the emotional impact and struggle with a great deal of uncertainty in oneself before understandable patterns begin to emerge. At a distance one baby (or one person) is much like another.

This particular seminar more than any other is valuable in helping students to discover the value of being, and themselves becoming, a receptive observer. In this exercise there is no obligation to do anything beyond observing—indeed, one has to learn to refrain from action. The mothers are asked if they are willing to have an observer who, although he may be a professional worker with children and may even be a parent himself, would like the opportunity to learn by observing for one hour each week how an infant grows and develops within a family. The mother is also told that it will be helpful and interesting for the student to be informed of any changes and developments which she has noticed in the baby during the intervening week. Her thoughts and feelings about the baby are welcomed, and one often finds that the interest of the observer seems to encourage the mother to take more notice of the baby as a developing individual.

Most people who undertake this exercise find that the closeness to the infant and mother arouses in them extremely intense feelings deriving from their own infancy. These are not always readily recognizable as such, but even when recognized, not to be explained away. Clearly, it is important for the seminar leader to recognize when such feelings are aroused, in herself as well as in other seminar members. She must encourage them to feel both for the mother and for the baby not to over-identify with one or the other. By allowing himself to feel his own countertransference, by trying to contain it and refrain from action or interference, the observer may learn to comprehend the impact on the mother of the responsibility of the baby. He may feel the change and vulnerability evoked in her by her own aroused infantile feelings. He may learn how her sensitivity to the baby and his needs does indeed spring from her capacity to be open to reverberations of his gropings and disturbances, to learn to differentiate among messages by feeling and responding appropriately to them. This, rather than to do what she has learned or been told she ought to do by precept, hearsay or academic psychology.

Not every mother is able to respond in this way. In some the necessary learning comes only slowly. There is every possible variation in degree and in areas of responsiveness and blindness between mothers, and at different times within each mother, as within all of us.

The seminar affords an opportunity to study these personality aspects over a period of two years, together with an opportunity to see the thrust for development in each infant, varying in strength in each case but present in all who live. One can observe the way in which trust and love and a capacity to form object relationships grows in the child through recurrent experiences of being understood. In these ways the student has the opportunity to introject selectively an experience which he can continue to draw on as a model and source for his own development as a therapist with patients.

The observation experience helps the student to endure “living in the question” (as Keats put it)⁴ with his patients, to struggle till he can discern the implications of his first-hand, detailed impressions rather than to flee to premature application of theory. It helps him to see the infant in both the child and the adult, and in his analytic work to stay with that infant and aid him in his arrested or distorted development. It helps him to distinguish movements that are leading towards healthy rather than spurious or superficial growth. It helps to alert him to the significance of minute behavioural indicators and signs of emotion which, when taken into account, add dimension to the quality of his later work.

I think observation also helps some of us in our analytic work to avoid premature, anxiety-ridden interpretation and intervention. It helps relax undue therapeutic zeal, allows us to learn to feel and to respect the drive towards development that exists in every patient, as in every baby. It cannot be hurried. It can be facilitated, encouraged and protected, but it cannot be created or forced. One acquires something of this feeling from observing the wise mother who has learned not to push the baby on prematurely. She knows it is illusory to believe that, if she is good enough, she can help him

⁴ A reference to Keats's concept “Negative Capability”.

to grow up without any frustration. She therefore allows him to struggle with what is within his compass.

It is possible to note and discuss in this seminar the general tendency at times to find fault with the mother. (Or, in another context, the other therapist or caretaking person.) To believe, surreptitiously, that one could do so much better oneself. One may see how this tendency lies behind the recurrent urge to find psychopathology in everything, the voyeuristic eye that looks to criticize rather than to empathize. One also sees the defences against this same tendency—the projective identification with and idealization of the mother-baby, and blindness to the difficulties with which they are struggling or failing to struggle. These impediments to accurate observation manifest themselves in every group at times. They are important to note and to be taken into account as material for the seminar. As in other working groups, their full significance for the individual student and his contribution towards them are matters for further comprehension within the privacy of the personal analysis.

One further point about this seminar. As it is a discussion of observations, not of work undertaken by the participants, a standard not only of detailed but also of freer and more honest reporting is facilitated. In seminars and meetings where individuals present clinical work and results, there is tremendous pressure to trim up, to leave out longeurs, confusions, mistakes, and to organize presentation in a way that pre-empts criticism. The opportunities for mutual learning can be restricted by this desire to present oneself as above reproach. One cannot do away with competitiveness and the need to appear well in the eyes of authority, whoever that authority may be. We are all so tempted. But this seminar focuses attention on the material itself, rather than upon that comparison and measurement of individual performance, which so inhibits honesty and spontaneity in describing one's work.

Training in psychoanalytic psychotherapy

The heart of the course, though not its ultimate goal, is the training in the techniques of psychoanalytic psychotherapy. Three cases—a

very young child, a child in the latency period and an adolescent—are seen on an intensive basis, optimally five times a week. During this part of the training the majority of the students have a sessional appointment at the Tavistock within the National Health Service. Very few spend all their time at the Tavistock, however, as most are working also at some other clinic, where they usually have been given a full-time post and seconded by the Authority concerned for training at the Tavistock. In this way we are able to train more people than the limitations of space and paid establishment at the Clinic itself would permit.

For their three intensive cases students have three different supervisors. This arrangement helps to give them some experience of the ways in which different therapists think and work. They also see a number of children and young people whom they treat by the same general techniques on a less intensive basis. They have the opportunity to learn casework with parents and in some instances to conduct analytic psychotherapy with them, when this seems appropriate.

This brings us to the often asked question: what is analysis and what is psychotherapy? Is analysis treatment of a patient on a four or five times weekly basis? And is what one does less intensively while using the same basic approach termed psychotherapy? One could use an arbitrary definition, and say that analysis is the method of treatment practised by members of psychoanalytic societies when they say they are practising analysis—however varied their ideas of this may be, and indeed are. I myself shall call psychoanalytic psychotherapy the analytic technique which our students are helped to grasp and to apply five times weekly or less. This is the analysis of the processes set in motion by interpretation of the transference relationship, enriched by private attention to the therapist's counter-transference (Meltzer, 1967). Its essence consists in the provision of a setting in which the patient is encouraged, through attention to and interpretive descriptions of his total behaviour, to bring to the therapist increasingly unknown and hitherto unacceptable parts of himself. These are experienced in the relationship with the therapist. They are scrutinized together, and hopefully understood and integrated. This brief statement, as

will be appreciated, is necessarily an oversimplification of a complex process.

On the whole, the therapists at the Tavistock employ this analytic technique whether the patient is seen five, four or even one session a week. The criteria for frequency of sessions remain a matter of constant debate and exploration. One of the simplest criteria is that of sheer expediency. If a therapist has a vacancy for an intensive case at a particular time, and if parents are willing and able to bring the child so frequently, or if it is a question of a child or adolescent of an age and sufficiently motivated to bring himself, the intensive help may be offered. I think this proves a better criterion than it may seem, especially if it turns out—as it sometimes does—that the patient's willingness to attend indicates a willingness also to invest in analytic work. Nonetheless, there are some children who receive five times a week therapy who could have benefited significantly from less. On the other hand, there are some who for a variety of reasons cannot be seen more than once a week—but for whom one may feel this is totally inadequate. There are many fewer of these children, I suspect however, than is generally believed by those who have not had experience in working under clinic conditions.

There is general agreement that, whether therapists after their training wish to work intensively or not, the training work on a five times weekly basis is a necessary and valuable core experience. In it students discern and gain conviction of the intensity of infantile transference to the therapist in analytic therapy. As a rule the transference manifests itself most clearly in the rhythm of the five days sessions and the two days week-end. A recurrent experience is afforded of time with the therapist, then time away. When the infant in the patient comes to trust the experience of being closely held by the therapist's attention, he then has to cope with the break, the absence. We then see what he is able to retain of that previous experience of togetherness. The situation gives the student the most leisurely possibility of being able to study in the analytic therapy what has been glimpsed earlier in infant observation: how the infant may learn to trust, to love and to let

go, optimally and desirably through gradually introjecting and assimilating the experience of togetherness which he is given.

It might in some ways be more accurate to state that analytic therapy is very largely concerned with studying in the transference the factors which militate against the possibility of internalizing—“learning from experience” (Bion, 1962). This study always includes oneself as well as one’s patients, for no development in therapeutic skill can take place without continual re-examination on the part of the therapist.

In a field where resources are infinitesimal and need is great, the criteria of selection for frequency of sessions, or indeed for analytic treatment at all, concern all psychotherapists. We have come to realize increasingly that participation in diagnosis and assessment is a necessary part of the therapist’s training. It is likely to play an increasing part in the work he does and in which he can usefully co-operate with psychiatric and other colleagues, utilizing the experience that is accumulated over the years from investigating in depth the developmental potential of the individual.

In the later stages of their training, or after qualification, psychotherapists are given the opportunity to be supervised on short-term consultative work with self-referred adolescents in the Young People’s Consultation Centre and thereby begin to gain some experience of the possibilities and the limitations of this kind of work.

Supervisions of clinical work

During the first part of the course there is, as a rule, no individual supervision of students’ work unless it is specifically requested. Students, however, may go to their personal tutor to discuss general work problems and programme. If it seems vital that they should receive more support than can be given in the work discussion seminar groups, attempts are made to supply it. During the second part of the course, however, in addition now to individual supervision, students have three weekly clinical seminar groups. Here they have the opportunity to present, and to listen to others

presenting, material from the treatment of children, young people and parents.

Throughout the second stage students are recognized as being responsible for the cases with which they are working, in conjunction of course with the relevant senior colleagues in their place of work. The role of the supervisor in this training is similar to that of the seminar leader, but more personally oriented. The personal supervisor helps the student to think about and better understand the material he is presenting. Equally, to understand the processes of communication, or failure to achieve communication, between him and the patients with whom he is working. The supervisor aims to help the student to sketch tentative maps of the patient's personality and development. He encourages him in alternative ways of thinking about problems, and sometimes raises questions when all seems too clear or pat.

As teachers we ask ourselves questions. How much should we feel we have to tell the student what to say? How far should we go in teaching him to make actual interpretations, and how far should we encourage him to formulate these for himself? It can be appropriate to do both at different times. Even if one is quite convinced that a student recurrently fails to comment upon or even see material that is asking for attention, one can be useful only by trying to approach the material again and again—by describing it ever anew from different angles as it recurs in different contexts. Just as working with a patient one has to do precisely that when trying to illuminate some blind spot. Undoubtedly the attitude of the supervisor can affect the attitude of the student-therapist to the particular case. A mother who is having trouble with her baby is often confirmed in her own inadequacy by some “well meant” advice *de haut en bas*. In the same way the student struggling with his own inadequacy in practising therapy can be crushed by over-knowledgeable interpretations of the supervisor, which take no account of his feelings and his struggles.

A supervisor can do much to strengthen or melt away the illusion that there is a “way” which those who have inside information know about. One may arouse feelings of envy and inadequacy, not by genuine and useful attempts to link material together

meaningfully, but by hinting rather nebulously about areas where the student is not in touch and “hasn’t got it quite right”—yet without offering a helpful alternative. In short, in implying a criticism without being able to document it clearly or to teach otherwise. I suspect that when we so act we are failing to shoulder our own uncertainties. We are failing to recognize or admit how we all have to struggle in the dark towards some glimmer of light.

On the other side is the problem of the student who cannot bear to be wrong. He is touchy about being taught and having his work illuminated by someone else. That is his personal problem, with which he has to wrestle in his analysis. The supervisor may discern it and may have to take it into account. I do not think it is necessarily his job to draw attention to the student’s attitude, unless it is intractable. We have a constant task in trying to improve our methods of supervising, just as the student has his in learning how to remember, to record, to present material and ask the questions which can help supervisors to be useful.

Written work

We try to present students with the opportunity of describing and evaluating what they are learning and the teaching they receive. They are required to write descriptive papers on their observation and work experiences in each of the first two years of the course. If they go on to take the second part of the training they are asked to prepare further presentations and to write papers on some of their cases.

The place of theory

During their training and general reading the students encounter a variety of theoretical approaches and orientations. They are encouraged to make for themselves meaningful links between the work they are doing and the theories they study.

The basis of formal teaching in the course is that of psycho-analytical theory, as developed by Freud in his clinical work and writings and his own self-analysis, which helped him to evaluate this

more accurately and to deepen the field of his enquiry—in short, to explore the unconscious in himself and in others. In addition, students study in particular Karl Abraham and the theories developed by Melanie Klein and her followers. If Freud discovered the child within the adult, then Melanie Klein revealed the possibility of seeing the infant within the child and the adult. Her work has contributed to our depth of knowledge of ways in which development, through truthfully based object relationships, may proceed in a healthy form. And, of course, of ways in which perversity and psychopathology originate and distort or impede growth (Klein; Meltzer, 1973).

The Tavistock course is one which is inevitably known as the Kleinian course in child psychotherapy. Yet it seems a disservice to both the pioneer spirit of Freud and to Melanie Klein herself to label it such. As the years have gone by, many of us who have been intimately involved in the work have come to feel increasingly that the future of psychoanalysis depends not on the learning and propagation of even the most valuable or “respectably” documented theories, but on attention to the conditions in which observations may be made. These allow each student of human nature to realize, and to note in others and in himself, the phenomena on which theories have been based. The furtherance of the work of Freud, of Melanie Klein and of other inspired contributors to the science or art of psychoanalysis, depends on each student living through in his own way that path of discovery—of the interaction between the internal and the external world, the influence of the unconscious upon conscious activities. The journey is made a little easier by using the maps of those who have crossed the wilderness before. But maps read in the cosy safety of home are no substitute for the journey itself. Such cosiness prevents not only further inroads into unknown territory, but the maintenance of ways that have already been cleared.

The personal analysis

Personal analysis is a requirement for every student who decides he wishes to proceed with the second part of the course. He is

asked to have about a year's experience of analysis himself before undertaking analytic cases of his own. Some candidates may have had a personal analysis before they apply, but we do not require students to be in analysis during their first year with us. This is a time of mutual exploration and selection between tutors and students. Our experience over the last few years has shown that many people are able to develop in themselves to varying degrees an enquiring approach of considerable imagination and depth towards the work they are doing, without the experience of being analysed themselves. Many people, when given encouragement to utilize and examine their own emotional responses rather than discard them as unscientific, probably improve greatly the quality and range of their work in the field of personal relationships. Some people who have never had a personal analysis may indeed already be richer and more subtle human beings than others who have. The analyst cannot create the individual, any more than the parents create the baby in that sense.

Nevertheless, even the most gifted individuals, capable of extensive learning from experience, do have unknown areas in themselves which can prevent them from learning from experience in particular areas. These unknown or hived-off areas may be discovered and integrated by analysis. The analysis is not part of the course in the way the seminars and discussions are. It remains a private affair. Its purpose is to put the student more fully in possession of himself. Hopefully it will give him the courage to submit himself more completely to observations and experiences from which he may learn, while tolerating degrees of anxiety and pain which he could not tolerate before.

Analysis should increase the student's fellow-feeling for the children with whom he works. Many of these will be quite crushed and stunted in their growth: in order to proceed in their development they need compassion and understanding from an adult, who knows what it is to be in pain or fear—but importantly, also knows how to struggle through it.

During the personal analysis it is hoped the student will experience more fully the infant and the child in himself; learn step by step how to contain and educate them; and resolve residual

grievances and distortions of perception. He should eventually be more free to fully address himself to his patient's similar problems but unique personality.

Qualities desirable in the therapist

The qualities of the good therapist are notably hard to define. In the past we have tried a variety of methods of selection for the course. These included group procedures, individual interview and reference to people who know the applicants well. We have never been entirely happy about the effectiveness or fairness of any method. Because of the inherent difficulties of selection we have tried, by dividing the course into two parts, to give individuals the opportunity for self-selection. In this way the candidate can obtain gradual, realistic experience of the kind of work he will be expected to do, the kind of training offered and his own responses to it. However, there has unfortunately still to be some selection even at the preliminary stage, as the demand for training in child psychotherapy continues to grow. Up to a point we work on the basis of first come, first served. Nonetheless, there is no objection to anyone not finding a place making a further application in a succeeding year.

Many applicants come in their early twenties before they already have an established profession. Others come at a later point in their careers, when they envisage this training as furthering the development of interests arising from their previous work. Any group of students profits from the inclusion of both younger and more mature individuals from a variety of backgrounds. It is especially enriched in the present case by the inclusion of some from fields outside that of mental health—the humanities, for instance. An education which has afforded the opportunity to specialise in imaginative literature encourages a dimension of perception which may be dismissed as unscientific in many courses of academic psychology. That training takes cognizance of the reality of the inner world of feeling, imagination and values, with which psychoanalysis must be concerned. Such contributions help psychoanalysis not to surface into shallower fields of behaviourist description, nor

the aridities of Talmudic precept and argument over theory. The future of psychoanalytic work depends on the unswerving realization that the inner world of feeling and imagination is also a matter for scientific study and description.

It is important for the profession that it should contain a living core of workers who are devoted to the study itself, but who bring into their consulting room a depth and wisdom from the accumulating experience of their own lives. From the private existence—both external and internal—comes the individual richness of experience. This enables one to be aware with greater sensitivity and precision of the more subtle shades of the patient's communications and behaviour, more likely to bring about a meeting of minds than an explanation derived from a library of previously learned interpretations.

It is equally important for the quality of the therapist's work, however, that he should live in it and be fed by it, as well as by his private and personal life. It is doubtful whether, in the long run, any fundamental benefit can be derived from a contact between two people which does not benefit both parties. The child psychotherapist, nevertheless, has to acquire the capacity to delay, or rather to refrain from asking for, immediate satisfaction from the patient himself. He has to learn to contain and to struggle with just such qualities which militate against contact and comprehension, both in himself and in the child. In order to be able to learn from experience, and to be able to utilize that wisdom to help others to bear themselves better, a reasonable degree of intelligence is necessary. As a rule, the acquisition of an honours degree guarantees the presence of this. But the possession of intelligence by itself is not enough. Method and motivation for using it are vital. We all use our intelligence, to some extent, to find ways of managing ourselves and the world, ways which help us to avoid feeling small and inadequate. It is a more serious and questionable matter, however, when we use it to make ourselves big at the expense of others.

The child psychotherapist has to be able to tolerate feeling small and in the dark, because this is the way a child often feels. This is what the child in us must often feel if he is to remain alive to the wonder and adventure, as well as the hazards, of the world.

Although the therapist's private and professional life need to feed each other, at times they seem to interfere with each other. For instance, although there is now an increase in the number of male applicants, and increasing recognition of satisfying career prospects for men in child psychotherapy, work with children and young people is likely to continue to have particular appeal for women—especially, perhaps, for young women already married, or likely to marry and have children themselves. It is not, however, enough to love one's own children. One needs to have enough feeling and generosity to extend this to other people's children (who represent in the depths of the unconscious one's mother's babies). For a time, when one's own children are young, it may be difficult to find the emotional resource to make the necessary extension. It is, however, an extension which needs finally to be made in the field of work itself. It is not enough, and not in the interests of our own patients ultimately, if our preoccupation with them is so exclusive and intense that we ignore the existence of many others—those others, that is, who do not have the benefit of our special attention, however imperfect that may be.

If the benefits of psychotherapy as an art-science are to be shared, it must concern itself with society as well as the individual. As analytical psychotherapists we must realize that it is a privilege, as well as a task, to be able to offer or receive an educational resource so rare and so costly in time and money. It is therefore an obligation, if we have so benefited, to continue to consider how the attitudes which we have found to be essentially life-promoting may be encouraged in others, especially those who have a hand in the rearing of children. For this reason students are encouraged during their training, or shortly afterwards, to take part in a teaching or consultative project, provided by the Tavistock for workers in the social and educational fields. Many participate in small group discussions in the course for teachers and others engaged in aspects of education.

The philosophy of the training

My own preference is to regard this course not as a training where students are encouraged to model themselves like apprentices on

their teachers, even on the best of them, but to see it as an opportunity for education in the field of inter- and intra-personal development. In this the students are encouraged to work from their own observations of themselves and of the young people with whom they work. They can be helped to organize their observations by psychoanalytical theory; but they must find and draw upon their own style of working within the psychoanalytical technique.

We try to follow an approach which enables the study of links between intrapsychic development and interpersonal family and group relationships. We try to consider the extent to which the individual child seems able to develop by introjecting, assimilating and growing from within—as distinct from the spurious progress made by projecting oneself into unassimilated persons and knowledge. The difference, that is, between the three-dimensional creative growing which proceeds from introjective identification: as opposed to either the two-dimensional socializing, or the “being grown-up” which stops at projective identification. The latter is the “living in someone else’s shoes”; the former the still more impoverished mimicry that clings to surfaces and the appearance of things (Klein, 1946; Bick, 1968).

Our method of teaching, as I have already indicated, is essentially through small seminar groups and individual supervisions. These aim to direct the attention of the student towards increasingly close observation of the details of interaction between himself and the individuals he is studying. The course intends to increase the student’s capacity to tolerate uncertainty; to contain, to think about and to use his countertransference, thereby becoming more sensitive to emotional as well as cognitive communication. It aims to help him respond in practice with less certainty of ever having the final answers, but with greater hope of learning, with the help of the patient or client, the direction in which to proceed. This attitude with patients will tend to take the form of interpretations that describe and bring together data in a way that leads on to further enquiry—and not to the kind of explanations that are conversation stoppers.

Theoretical teaching and seminar discussion would aim to present theories not as sacred or final, but as convenient. They should

illuminate methods of organizing observations, of naming and generalising, and bring order out of chaotic experience—yet leave the space and freedom to admit new data.

At the end of training one hopes that the student does not emerge feeling “qualified” with a certificate giving him the right to practise psychotherapy, or armed with a method and technique that gives him the edge over the other trainings and techniques. One hopes, certainly, he has learned something tangible. But more importantly, that he has learned how to bear uncertainties and difficult questions. One hopes he retains a deep sense of wonder at the infinite diversities of human nature, together with a great fellow-feeling for his patients. I would hope he has gathered some experience of the ways in which he may continue to explore the split-off or repressed aspects of mental functioning; how to bear the pain of struggling, sweetened by hope derived from hard-won experience.

Some of the former students of the course have extended the age range of their clients to work also with adults, an extension which is increasingly taking place within the course.

We are also concerned with the wider issues of personality development in families, schools and societies. We hope as therapists to do something towards breaking down the barriers of resentment about the privilege enjoyed by those who receive and practise psychoanalytic treatment. These barriers are erected, understandably, by some of those workers who have responsibility for the many needy not in a position to be helped in this way.

We see the training in analytic psychotherapy as a foundation rather than an end, a foundation from which further researches into the infinite variety and complications of the individual and his relationships may proceed. We believe that it is necessary for a stream of analytic work to continue more deeply and more widely, not only because of its therapeutic value but because of its necessary fertilizing effect on all studies of human relationships.

Post-graduate developments

Ours is a course which owes its existence to the discovery of psychoanalysis. This, however fallible its practitioners, is essentially

concerned with the self-realization and striving after truth in every human being. This quality of the teaching and of the work done by anyone who undertakes training in the psychoanalytic method ultimately rests on the way in which he continues to maintain that striving in his own heart; and further, tries to foster it in the patients whom he treats and the colleagues with whom he works. It can be kept alive only by the individual working as best he can, not by his following precepts set by supposedly superior authorities, not by remaining a child who wishes to please the parents, but by working through the crises which any truly developing adolescent has in finding his own mind, identity and style of life. To do this he has to question himself as well as what his parents have taught him, in order to find his best way of realizing in practice the values and experience that stand the test of scrutiny—of promoting and protecting what he loves.

In saying this I am aware that it is the exceptional individual who is able to stand alone, who is confident enough about what he thinks and feels in the light of his own experience. The quality of his judgement reflects the capacity to internalize selectively, based upon some fairly clear discrimination between true and false. For most of us it takes a long time to reach a position of relative independence fortified by inner strength; we are often tempted lazily to give up the struggle and settle for our equivalent of the ten commandments, which give at least a sense of knowing how to avoid giving offence to whatever our particular representatives of God or Authority are—feared or idealized, or both.

Most of us need help, support and stimulation long after we are trained and “qualified” to practise psychoanalytic therapy. This is not necessarily the help of further analysis—which has its parasitic temptations. We do need the protection of some group within which work may be discussed with colleagues of varying degrees of seniority and experience. It seems to me that such groups should see themselves as gatherings to promote mutual exchange and development, rather than to monitor or judge. Otherwise they may become, as the families of adolescents sometimes do, a restriction, rather than a nurturing resource that allows for and tolerates mistakes made in the struggle for identity and self-responsibility.

Analytical work inevitably brings the therapist into continual close contact with the relationships and constitutional factors which impede growth. To wrestle with these he has to tolerate the projection of a great deal of frustration, pain and sometimes hatred and reproach from his patients. Like parents who care for their wayward and troublesome children, therapists are also very vulnerable to criticism from the “neighbours”—that is, their own colleagues.

It seems to me that as a professional group our health and strength depend upon the capacity of each one of us for self-scrutiny as well as devotion to the work. When we are genuinely able to shoulder the burden of trying to keep our own house in order (a never-ending task), we are more likely to be able to feel for, and to be good neighbours to, our colleagues. There is no group solution for work which is essentially individual. It is also a problem in this field, as in others, for a professional group to maintain an *esprit de corps* without becoming elitist or heresy-hunting.

The problems with which psychotherapists struggle are likely to be slightly different at different times in their careers. As practitioners and teachers we are, in growing older, bound to face encounters with our younger colleagues and students. These are the kind of anxieties that middle-aged parents face when threatened by the growing-up of their children, and by their challenge. Such threats may encourage a dangerous tendency to shore up uncertainties by the collecting of followers or admirers, by using them to further one’s ideas through variations of the patronage system. Anxieties about the future of one’s work and profession can increase fear of change, and promote that kind of conservatism which looks always to be reminded rather than informed.

The psychic demands of this work can make it difficult to steer between the narrows of complacency and self-righteous criticism and the whirlpool of disorganization. If we are able to face the demands however, it seems to me that the work may continue to be rewarding in a personal sense into old age, and always conducive to strength and wisdom. As long as we do not surface into clichés, we are continually wrestling with “the enemies of promise”, with the foe within. Where else, as Shakespeare so well knew, can death be defeated but in the inner world? (Sonnet 164).