

# The Large Group: Dynamics, Social Implications and Therapeutic Value

Haim Weinberg and Daniel J. N. Weishut

## The Large Group: Typical Dynamics

For many group therapists who are used to the traditional small group, the large group format is unknown and confusing. When coming to a conference that includes a large group, some participants ignore it as if it never existed in the conference schedule or deliberately avoid it and skip its meetings. Others come once, feel overwhelmed, frustrated and perplexed, and vow that they will never come again. Still others come from time to time, wondering about the nature of this “strange beast,” waiting for the features of the small group to appear. Yet some group practitioners become hooked to the large group, attending year after year, feeling that something important is happening there, and even finding that the large group becomes the highlight of the conference for them. We would like to make the large group more “user-friendly” by explaining its dynamics and pointing out its typical processes, and hope that this will assist potential participants in their learning process.

In recent years the large group has regained attention as an experiential or learning group in order to understand societal processes. When referring to “the large group” (LG) in this paper, we relate to an experiential group with membership anything above 30–35, led in an unstructured way, usually from a psychodynamic perspective. This kind of LG can be found in psychological and especially group psychotherapy conferences.<sup>1</sup> We “utilize the large group experience as a laboratory in which to study large group processes, both conscious and unconscious, as a way of understanding their impact and influence upon social, organizational and systemic thinking, feelings and actions” (Weinberg and Schneider, 2003: p. 17). The LG is considered to be a reflection of the society, culture or organization we are part of. In the literature emphasis has been on the social aspects of the LG, while therapeutic aspects have

<sup>1</sup> There are a range of publications on therapeutic large group intervention after disasters (e.g. Terr, 1992). Since they have a different purpose from the kind of the LG we discuss, we left these out.

been mostly de-emphasized. Still, several theorists relate to the psychodynamic processes of the LG, to how the participant learns about his or her social role, and how the LG enhances the development of connections and feelings of belonging to society.

LGs can be “crazy” and chaotic. It is difficult to follow a thread, and voices may be unheard or ignored. The individual experience can be intimidating and paralyzing. Even finding one’s voice in the crowd can be difficult, and for some people just expressing their thoughts in the LG is an achievement. Members may wonder, “Do I dare disturb the universe, overcome my fears and say what I have in mind in public?” The fears are only partly imaginary, because the individual voice might be lost in the crowd, drawing no response at all, which can become a narcissistic blow for the person who dared to speak. Still it is important for the participants to be able to express themselves, as participation in the LG brings to the fore a sense of citizenship and belonging to a community.

LGs can be overwhelming and confusing. It is difficult to think clearly in this setting, and not easy to make sense of the experience. The loose boundaries and weakened container, due to unstable participation in the group sessions, enhance regression and evoke fragmentation anxieties. It takes time to understand what happened and to absorb the events. That is why usually we need small groups following a LG experience to process the individual’s feelings and restore a sense of identity that is sometimes threatened by the LG. Yet it can be strengthening for the ego to go through this experience and to be able to crystallize one’s boundaries and keep one’s identity under the pressure to merge with the mass.

LGs can also be aggressive and conflictual. The anxieties evoked in the LG create a tendency to cling to familiar subgroups. Sometimes you just attach to the friend that came with you. Other times people identify with social subgroups such as those around gender, ethnic origin, religion, political attitude, or any other minority or majority groups. Because there are strong defense mechanisms of splitting and projective identification in the LG, the tendency to group into such social subgroups can create intense conflicts. In addition, anything said aloud in the group will be perceived in its social context. Thus a personal remark could suddenly be turned around into a stance representing a certain subgroup. In this way the LG provides a unique opportunity for people to become intensively aware of multicultural issues and social conflicts from a passionate and involved rather than intellectual and detached point of view.

### **The Large Group and the Social Unconscious**

In psychodynamic group psychotherapy we usually focus on the personal and on the interaction between individuals in the here-and-now. We tend to avoid dealing with the social context in which the group takes place and in which its participants live. But this false dichotomy is based on the premise that the individual and society are separate entities. Western cultures (especially in the USA) praise individuality, encourage the notion of the individual as unique and independent, and focus on the process of differentiation from the family as part of becoming a mature adult. This notion is so embedded in Western cultures that it is taken for granted and creates the illusion

of a truism. Other cultures may put more value on collectivism than on the individual (Hofstede, 2001). It is enough to look at Eastern, African, Latin or Arab cultures, where individuals and society are intertwined, to understand that this emphasis on individuality is only one possibility of deconstructing reality. Actually, we cannot disconnect the individual from her social context.

The Group Analytic approach believes that the individual is social through and through. Pines (1981) characterizes the evolution of group analysis as follows:

The emergence of analytic group psychotherapy as a theory and as a technique was facilitated by a new scientific paradigm, that of the move from the study of the single entity, the item, the individual, to the study of the relationship between an entity and the field of forces in which other entities are encountered . . . . The classical psychoanalytic model of mental apparatus will not do, as it is based on one-body psychology. In group psychotherapy we need other models; perhaps a systems model will do. (Pines, 1981: p. 276)

These ideas sound similar to those of the intersubjective approaches to psychotherapy, arguing that the mind is inherently dyadic, social, interactional, and interpersonal (Aron, 1996). But when we move from one person to two people and then apply these intersubjective ideas even beyond two-persons-psychology into multiple-people-psychology, we can no longer hold on to the idea of the individual as a separate entity from its social context in which he is embedded. The evolution of society profoundly affects individual psychodynamics. As individuals civilize their behavior and restrain their impulses, the power of the social forces inside the individual (and impacting his behavior) increases, and the structure of the psyche changes.

Experiencing the LG is experiencing oneself as part of a social matrix, as belonging to some connecting web that exists all around us but is usually invisible in ordinary day life. In the small group, we sense existence and impact of the-group-as-a-whole and experience “the group mind,” which is a dynamic product of the interaction of the group members. When we move from individuals to groups and as we see groups as an entity, we also have to shift our perspective from the individual Freudian unconscious and focus on a new kind of unconscious that emerges: the group unconscious. LGs reveal what is called “the social unconscious” or the organizational unconscious. The social unconscious (Hopper, 2003; Weinberg, 2007) refers to the existence and constraints of social, cultural and communication arrangements of which people are to varying degrees “unaware.” It includes anxieties, fantasies, defenses and object relations, as well as various aspects of socio-cultural-economic-political factors and forces, many of which are also co-constructed unconsciously by the members of particular groupings.

LGs, conducted in an unstructured way and developing an atmosphere of exploration, can reveal this social unconscious by focusing on shared defenses, fantasies and anxieties existing in that setting. The leaders can bring to attention the subtle ways in which members of the LG co-construct common fantasies, that are beyond the contents of the specific group, belonging to the larger context of the organization or society from which this group comes from. When members bring dreams, use metaphors, share personal stories and associate to them, the leaders might point at a deep unconscious issue connecting these dreams and stories. Utilizing the idea of

parallel processes or equivalence (Hopper, 2003) they can speculate that this issue reflects a preoccupation residing in the social unconscious of that group.

The social unconscious is easier to be noticed and its manifestations in the LG are especially prevalent in traumatized societies. The specific psychological processes of ethnic, national or religious groups are influenced by shared representations of historical events and the transgenerational transmissions of ancestors' trauma. We would like to introduce here the notion that these kinds of groups tend to choose and identify with certain glories and/or traumas. *Chosen glories* are shared mental representations of a large group's ancestors' past triumphs and the heroes and martyrs associated with them (Volkan, 1988). They induce a heightened sense of "we-ness." *Chosen trauma* is the shared mental representation of a massive trauma that the group's ancestors suffered. When a LG regresses, its chosen trauma is reactivated in order to support the group's threatened identity. It is the collective memory of a disaster, which becomes a paradigm that keeps the existential threat in the national memory in order to ward off potential complacency. "Memories," perceptions, expectations, wishes, fears, and other emotions related to shared images of the historical catastrophe and the defenses against them, may become an important identity marker of the affected LG and actually construct its Social Unconscious.

Here is an example from a LG occurring in a conference in Ein Gedi, Israel, 2008, shortly after Operation Cast Lead (the war on Gaza) which had highly controversial results both in Israel and abroad.

A Jewish Israeli woman, who identified with the suffering of the Palestinians (left wing political position in Israel) told the group that in the middle of the war, when she heard about the life-threatening danger to children in Gaza, she and her daughter started a project trying to evacuate 500 children from the Gaza strip. At first they asked Israeli Jewish families from the southern parts of Israel to host these children and were answered positively. When they understood that the Palestinians will never agree to come to Israel, they approached Palestinian families in the West Bank. The project almost started when they got a response from the families in Gaza that they were not ready to send their children away. The argument was that this was an Israeli manipulation not to feel guilty, and that after evacuating their children there would be no reason for the Israelis not to bomb them. The Palestinians said that this was a trick to take their land: First move the children, then move the adults and make them refugees again.

The LG room was full with emotions: The Israelis felt hurt that their good intentions were labeled "manipulative." The Palestinians felt misunderstood as well, and the people from outside Israel felt excluded. The atmosphere changed when one Palestinian asked: so do you mean that Palestinian mothers care less about their children than Jewish mothers? In addition, a British woman associated about the evacuation of children from London in WWII, and the research that showed that the children who were evacuated suffered more post traumatic stress disorder symptoms than those who stayed with their families in London. It helped the group become less reactive and more communicative.

This stormy event in a LG shows how difficult it is to really give up one's point of view and recognize the other's subjective experience, due to chosen trauma residing in the Social Unconscious. The amount of distrust between the parties (Israelis and Palestinians, in this case) is enormous. Although the arguments of the Palestinians were clearly stated, Israelis could not listen to them, drop their righteous attitude and see the issue from the eyes of the Palestinians. What blocked their regular ability to listen was the memory of the Holocaust and the associations involved in the specific case (a well-known case of a "children transport" from Nazi Germany was mentioned in the LG). The Palestinians were not able to listen either to the well-intended Israeli wish to do something positive during the war, since they have their own trauma of the Nakba, which is the loss of their villages and houses following the Israeli Independence war, resulting in them becoming refugees and feeling misled by Arab leaders. These historical events seem to unconsciously creep into the discussion and influence its participants. Without acknowledging these traumas that are part of the Jewish-Israeli and Palestinian social unconscious, and without understanding its impact on members of both nations, dialogue will probably fail. It is also interesting that, in this LG, a historical memory of another nation, brought by a British woman, could penetrate the parties' walls and help reestablish communication.

### Therapeutic Value of the Large Group

The LG is not a small group. This simple truism sounds clear on paper but seems hard to remember. A common mistake is to come to the LG expecting the familiar processes of self-exploration, cohesion and intimacy. Sometimes a member brings in a personal problem believing that she will get feedback or a personal response to her distress. She may be very disappointed when the LG fails to act like a small group and just moves on to another topic. The LG is mostly aimed at exploring societal and organizational dynamics. The focus of the leaders is not on the individual but on the group-as-a-whole, reflecting conscious and unconscious processes of the organization or the conference in which the LG is taking place, or of society-at-large. While the LG may be therapeutic – any resemblance to therapy is more like sociotherapy than psychotherapy. It lacks the setting, the boundaries and the rules (e.g. confidentiality, *see* Weinberg and Schneider, 2007) that usually characterize therapy, and does not provide a safe environment.

Having said that, we still want to argue that LGs can be therapeutic. The notion of the LG being therapeutic has encountered much resistance (Wilke, 2003), despite the fact that in psychiatric settings the large group (or community), including both patients and staff, is recognized for a long time as being therapeutic (Kreeger, 1975; Main, 1946; Springmann, 1975). De Maré (1972) stated that:

The technique of large group psychotherapy, which would appear to be a self-evident conclusion, continues to meet with the suspicion that was once accorded to psychoanalysis and later to small group psychotherapy . . . the intensive and rigorous application of a large group technique *per se* has not yet been seriously mooted. The explanation

for this might lie in the powerful, chaotic and unpredictable nature of large group phenomena and in their tendency to ideology formation which would prove politically and economically dicey in many countries to-day. (De Maré, 1972: p. 106)

De Maré referred to the crucial role of culture as an active ingredient in psychotherapy. He claimed that “psychoanalysis in deliberately isolating the patient from a social to a psychotherapeutic frame is a psychology of the individual. Small groups, on the other hand, involve the psychology of the family. It is only in the larger group that cultural dimensions can be comprehensively explored” (De Maré, 1975: p. 79).

De Maré was not alone. Jordan (2001) called for the use of relational-cultural theory not only to help individuals move into healthier, more mutual relationships in which they can grow and contribute to the growth of others, but also to develop strategies to shift hurtful disconnections between groups of people toward an attitude of respect and mutuality. Agazarian and Carter (1993) discussed the large group as a context for therapeutic change, and put forward that “changing the structure and function of communication within subgroups simultaneously changes both the large group and the individual subgroup members” (Agazarian and Carter, 1993: p. 210). Weinberg and Schneider (2003) suggested that “the large group helps in role differentiation and integration in the developing of both an individual as well as group identity” (Weinberg and Schneider, 2003: p. 18). All these indicate that LGs have therapeutic value:

The large group provides members with opportunities to explore and learn about the difficulties we all have, as subjects, in recognizing other subjects as “equivalent centers of experience” and enabling a move towards enhancing capacities for mutual recognition in the group. (Jarrar, 2003: p. 31).

If we take the group analytic premise seriously, and agree that the individual and society are intertwined, theoretically we cannot make a sharp distinction between sociotherapy, and psychotherapy. Any change in society deeply influences the individual. So let us focus on the therapeutic value of the LG. Specifically, we would like to explore the extent to which therapeutic factors present in the small group are relevant also in the LG. Afterwards we will suggest two more specific therapeutic factors available in the LG. The term “therapeutic factors” could be defined in various ways. We will use the term indicating factors that enhance psychological well-being and/or encourage personal growth.

### **Therapeutic Factors in the Large Group**

Group therapy traditionally has referred to small groups – with usually between five and twelve participants – and was described extensively in many textbooks (e.g. Yalom and Lescz, 2005; Rutan et al., 2007). The therapeutic value of small groups seems indisputable. Yalom and Lescz (2005) discussed the essence of successful group therapy and proposed a list of 11 elementary factors of therapeutic change.

These therapeutic factors are:

1. Instillation of hope
2. Universality
3. Imparting information
4. Altruism
5. The corrective recapitulation of the primary family group
6. Development of socializing techniques
7. Imitative behavior
8. Interpersonal learning
9. Group cohesiveness
10. Catharsis
11. Existential factors.

Yalom and Lescz (2005) noted that there is substantial variance among groups and group leaders in the emphasis they put on each of these factors. Not all factors are always present or equally important. Thus, some groups may put more emphasis on interpersonal learning (e.g., Yalom-type groups) while other groups (for example, psycho-educational groups) would emphasize imparting information. Furthermore, group participants may differ in how much they are able to profit from each factor. For example, one participant could experience the instillation of hope as being most important, while for another, the strongest therapeutic factor could be imitative behavior. Yalom and Lescz emphasized that the distinction between these factors is arbitrary and that the factors are interdependent and do not occur separately.

Yalom mentioned that larger groups also have therapeutic value (Yalom, 1980), and that several of these same therapeutic factors are relevant in larger groups (Yalom and Lescz, 2005). However, he did not expand on this issue and thus left a gap. In an attempt to fill this gap, we will now shortly describe each of these therapeutic factors, and the extent in which they seem available in the LG. We will divide these factors in those that are fully, partly, or hardly available in the LG.

#### Factors hardly available

Some therapeutic factors, readily available in the small group, are hardly available in the kind of LG described previously in this chapter.

*Group cohesiveness* Yalom related to the term “group cohesiveness” as the experience of feelings of trust, belonging and togetherness developed in groups. The sense of belonging to a large group was proposed as one of its main benefits (Weinberg and Schneider, 2003). This seems true for the “natural” group, like a society, political party or professional community. Natural large groups create their own culture and norms; they do not dissolve easily and this provides the individual with strength. However, it is questionable whether we can see this factor as contributing to the therapeutic effect of the LG as discussed here. The boundaries of the LG are too loose, and allow for partial participation (people may attend just one session during a conference), and for joining or leaving its meeting without disrupting its natural continuity. The LG usually does not exist long enough to create cohesiveness; often not more than a few

hours or maximum several days. Actually, many a LG may be experienced as “incohesive” (Hopper, 2003).

*Instillation of hope* One of the more difficult issues to cope with in the LG is the issue of hope. Yalom referred to the recognition that other members’ success can be helpful and develop optimism for one’s own improvement. Yalom and Lescz (2005) suggested that faith by itself can be therapeutic. “Group therapists can capitalize on this factor by doing whatever we can to increase clients’ belief and confidence in the efficacy of the group mode” (Yalom and Lescz, 2005: p. 5). They suggested that for example self-help groups put much emphasis on hope. However, LGs often catalyze tension and chaos (Wilke, 2003). It is not unusual for conflict to remain until the closure of the group, without finding a solution. Eventually, participants may feel bewildered and lost (Hopper, 2003). Although LG facilitators may be in the position to increase hope, it seems that in the LG hope can be easily lost. It is true that, when LGs do reach conflict resolution, it does create hope for resolution of social conflicts, but this is quite rare and most of the time the value of the LG for the individual is learning how to deal with seemingly hopeless situations and still not lose hope.

*Imparting information* Yalom and Lescz referred to the possibility of receiving education or advice by the facilitator(s) or group members. They related to didactic instruction about mental health, illness, and general psychodynamics given by the therapists as well as advice, suggestions, or direct guidance from either the therapist or group members. They mentioned the importance of imparting information as a way to reduce anxiety. Though mental health and general psychodynamics may not be the main concern of most LGs, we may postulate that information on the group process and its reflection of society could be helpful for participants to feel more at ease within the LG. Anxiety is an unseparated part of the LG process. Still, in most of the psychodynamic LGs, leaders provide no or very limited information to the participants; not even about what is expected from them. Participants in the LG may provide information to each other. However, imparting information is considered to be of little importance in the LG, unless it is a group with psycho-educational intent (see Rausch et al., 2006). In some conferences, the large group leaders provide a short theoretical presentation and discussion with the participants after the sessions, as part of the need for credit educational units and its requirements, but actually this is not part of the setting of the LG.

*The corrective recapitulation of the primary family group* Yalom and Lescz related to the unsatisfactory experience most clients have had in their primary family, and to the corrective role the small group has in this respect, through reenacting critical family dynamics with group members in a corrective manner. The LG goes far beyond the primary family group in its size and lacks the feeling of family intimacy. It reflects society, not a family. In conferences where the structure includes both large and small group meetings (“Tavistock” style, group relations, also called Leicester conferences in Britain or A. K. Rice conferences in the US), the small group is associated with the family, while the LG is associated with “the street”. The number and variety of stimuli in the LG exceed the capacity of the self to organize in a family-like grouping (Shields, 2001). Therefore, the LG cannot provide a corrective recapitulation of the primary



family group. When the LG does remind a participant its family of origin, it lacks the capacity for corrective experience. In one of the LG meetings in a day intended to explore LG processes, a participant said: "This group reminds me of my alienated family, where no one really spoke directly to another. I feel so lonely here." There was no response from any other participant, as if to validate this alienated/isolated experience in his family.

### Factors partly available

Some therapeutic factors available in the small group are also available in the LG. However, their availability is rather limited because of the large size of the group.

*Interpersonal learning* Yalom linked to the term "interpersonal learning" to the possibility of gaining personal insight about interpersonal impact through feedback provided by others. It was suggested that the "group analytic model applied within a large group offers a rich opportunity to pursue the therapeutic objective to promote growth in the capacity to build and maintain caring and respectful interpersonal relationships" (Shields, 2001: p. 218). This may be more true to the therapeutic community on a psychiatric ward than to the LG in conferences. Because the LG is not focused on individual patterns of communication and connection, and feedback from one person to another is not encouraged by the leaders, it is up to the participant to do the work inside himself and draw conclusions about his interpersonal style. Some members may be able to do so (perhaps those who are more psychologically-oriented and more used to self-reflection), some not.

*Development of socializing techniques* The small group may be especially helpful in the development of basic social skills, such as learning how to approach people, providing feedback, working out difficulties with particular group members (Yalom and Lescz, 2005). This may also be possible to some extent in the LG. However, both the atmosphere in the LG, which may be intense and aggressive, and its limited focus on the individual may not be conducive for individuals trying to develop basic socializing skills. This is different for the development of more advanced social skills and the ability to deal with power and conflict. If we include this arena in social skills, we can say that the LG can encourage its members to develop and strengthen these skills. We will discuss later in this chapter the ways in which the LG confronts its members with a representation of society and provides opportunities to use power.

*Altruism* Altruism, seen as the experience of offering something valuable to the other without the expectation of something in return, is suggested to be a deeply satisfying experience (Rutan et al., 2007). Yalom related to the boost to one's self image through extending help to others. To do something for someone else makes people feel meaningful, which is therapeutic in itself. In addition, many times in a small group, people are touched by such generous contributions and respond to the altruist person with compliments that strengthen self-image. The LG, like the small group, provides the opportunity to support others in a variety of ways, such as expressing understanding, providing direction, sharing similar concerns, and more. What makes this more complicated is the size of the group in comparison with the time-frame,

which provides space for relatively few people to participate in an altruistic act. In addition, rarely do people in the LG reciprocate with self-strengthening responses, due to the non-interactive nature of the LG, at least in its initial stages. It takes a more advanced LG, the kind that develops only in long enough conferences with enough LG sessions (from our experience there should be at least four sessions of the LG), to develop that capacity.

### Factors fully available

Some therapeutic factors present in the small group are even more readily available in the LG.

*Catharsis* Yalom referred with the term “catharsis” to the release of strong feelings about past or present experiences. The LG is an excellent place for expressing strong emotions. The regressive forces in the LG exert their pressure on the individual and we can witness strong outbursts of anger (even rage) or uncontrolled sobbing. The presence of many people amplifies the emotions and intensifies the cathartic experience. If expression of strong emotions by itself is perceived as therapeutic and relief-bringing, then the LG would be a great place, at least for the people having this opportunity. For others, seeing someone expressing strong emotions could be a vicarious form of catharsis. One could ask though if in order for catharsis to be therapeutic there needs to be an empathetic response. In large support groups or encounter groups we may expect empathy, but in many other LGs, because of their nature we cannot expect much empathy from the group.

*Universality* Yalom and Lescz referred to the notion that other members share similar feelings, thoughts and problems, and add that the disconfirmation of someone’s feelings of loneliness is a powerful source of relief. “After hearing other members disclose concerns similar to their own, clients report feeling more in touch with the world and describe the process as a ‘welcome to the human race’ experience” (Yalom and Lescz, 2005: p. 6). Some of the concerns raised in the LG may not be universal to all. However, the abundance and diversity of people in the LG ensure that often individuals will encounter other individuals or even sub-groups that have similar concerns. Therefore, this therapeutic factor could act even stronger in the LG than in the small group.

*Imitative behavior* Yalom and Lescz suggested that imitating others is a way to experiment with new behavior, and that “imitative behavior” can have a strong therapeutic effect. They related to the possibility of expanding personal knowledge and skills through observation of self-exploration, working through and personal development of others. The LG offers the participant an opportunity to meet with an abundance of different behaviors. Therefore, LGs – like small groups – provide ample opportunity for participants to learn from the behavior of other group participants and/or facilitators. One may think: “If she can do it, I may be able to do it as well.” Imitation or making these forms of behavior one’s own, can take place still within the LG or at a later occasion.

*Existential factors* Yalom then added another cluster of therapeutic factors, which he named “existential factors.”

All these factors relate to existence – to our confrontation with the human condition – a confrontation that informs us of the harsh existential facts of life: our mortality, our freedom and responsibility for constructing our own life design, our isolation from being thrown alone into existence, and our search for life meaning (Yalom and Lescz, 2005: p. 98).

These factors also seem to be highly relevant in the LG. However, “existential factors” seem to be a broad spectrum of factors provided by the group, partly overlapping with other therapeutic factors in Yalom’s list. For example, “hope” was mentioned by several researchers as an existential factor of therapeutic value, especially when coping with health issues (Blinderman and Cherny, 2005; Havens and Ghaemi, 2005). “Isolation” seems to be inversely related to “universality” and “altruism” (Yalom, 1980). Themes that are common in the LG are issues about life and death, personal and social responsibility, human rights and questions of (inner and outside) freedom and oppression. All these are clearly related to existential factors and are discussed many times in the LG with more depth and perspectives than in a small group.

### Factors Available Uniquely in the Large Group

In addition to the factors mentioned above and cited by Yalom, we identify some unique factors that are not mentioned by Yalom, perhaps because they are usually rare in small groups, and are more typical for the LG. Two factors that are available and prominent in the LG, but almost absent from the small group are the representation of society and the struggle for power. Both factors can be connected to a higher maturity level of personality development. Helgeson’s model (found in Saragovi et al., 1997) on a division of personality factors, is somewhat comparable to the proposed division here. Both factors “communion” and “agency” in this model were found to be related to “interpersonal maturity” and well-being. Let us now take a closer look at both factors.

#### Representation of society as therapeutic factor

We are in essence social beings. “No man is an island,” said John Donne in *Meditation XVII*, 1624 (Booty, 1990). Human development is a cultural process (Rogoff, 2003) and personality is shaped among others by cultural influences (Triandis and Suh, 2002). It was suggested that the primary source of our suffering is from isolation, and that healing is the process of connection and integration with different others (Jordan, 2001). However, it takes a kind of awareness beyond inner processes to understand that we are part of a larger system, and sometimes it takes another step to actively become involved in social affairs beyond one’s selfish interest.

The “representation of society” as a therapeutic factor in the LG may be considered as parallel to the “corrective recapitulation of the primary family” as a therapeutic factor in the small group. It relates to complex social abilities, and thus could also be seen as a higher level of “development of socializing techniques”, another of the therapeutic factors readily available in the small group. However, being involved in social issues and developing social responsibility, which might become the result of participation in a LG, is a more complex virtue than simple social skills needed to smoothly interact with others.

The LG can more or less represent the society in which the group takes place. In any LG we can find a huge diversity of people from different ethnic groups, religious background, age and of course, gender. Thus, in the USA, LGs can include both blacks and whites, Christians, Moslems and Jews, Hispanics, Caucasians and Asians, heterosexuals and homosexuals, etc. In LGs taking place in international conferences we can find people from different nationalities as well, adding to the flavor of the encounter and creating a rainbow of diversity. Usually soon after – or sometimes even before – the start of a LG some form of subgrouping will occur. This situation confronts the participant with two essential questions, “What is my social environment?” and “To whom do I belong?” Based on these two questions, we will make a distinction between “diversity” and “pluralism.”

*Diversity* With the term “diversity” we mean the opportunity to discover the variety of possible experiences, ideas and views present in the LG. Shields (2001) claimed that the “rich opportunity for the self in the LG is to develop ‘the capacity to be alone’ in Winnicott’s sense, in the midst of stimulation by the overwhelming diversity that must always be present in the large group context” (Shields, 2001: p. 214).

Others related to the socializing aspects of the LG. James (1994) referred to the LG as enhancing good citizenship, while providing opportunities to learn the viewpoints of others. Weinberg and Schneider (2003) related to the LG as a tool in the understanding of social interactive processes, interrelationships within society and the so called “social unconscious.” They saw the LG as a laboratory for understanding conflict and a way to create acceptance of diversity and multiculturalism. We believe that the LG is exceptional in the possibilities it provides to learn about the enormous diversity within society and one’s own individual position.

There are numerous ways in which people are diverse. One LG, held at an international conference near Jerusalem (Israel, 2010), in which both authors participated, stressed, among others, differences in the participants’ language, women and men, Jews and Palestinians, the organizers of the conference and the participants.

*Pluralism* “Diversity” comprises the notion that we are all different, but relates neither to subgrouping, nor to the power-differential between these groups. “Pluralism” takes this idea one step further to the interpersonal level. With the term “pluralism” we refer to the possibility to gain awareness of one’s own position *vis-à-vis* ethnic, religious and cultural subgroups and to the engagement between, and with, these subgroups on an equal level. It is not enough to accept diversity, and respect other points of view that are different from one’s self, there also is a need to grant

equal opportunities for each cultural, ethnic and social subgroup. Feeling honored and respected in one's culture was suggested to enhance well-being. Therefore, it is important to recognize the inequity of power between groups, and acknowledge everyone's right to self-determination (Waldegrave, 2009).

Belonging to a group enhances a feeling of group identity. The LG facilitates the development of both an individual as well as this group identity (Weinberg and Schneider, 2003). Jarrar (2003) related to the notion that the individual has multiple group identities. These group identities are not necessarily in harmony, and are challenged when participating in the LG. The encounter with different group identities or subgroups in the LG is anxiety provoking and threatening (Jarrar, 2003; Shaked, 2003). However, this encounter assists in getting to know one's own and others' unique subjectivities. The challenge then is to create a dialogue both internally and interpersonally in which the other is not perceived as inferior (Jarrar, 2003). Thus, it seems that the LG provides, more than any other therapeutic group, the possibility of mapping one's group identity among that of many others.

In the previously mentioned group (near Jerusalem, 2010) almost all participants were Hebrew speakers. Since the group was facilitated in Hebrew this put them in a superior position over those foreigners who did not speak Hebrew. Attempts were made to translate for the non-Hebrew speakers, but this did not always work, and some foreigners became upset. This was a good opportunity to learn among others about the limits of goodwill and the extent to which a majority can, or is willing to, adapt to the needs of a minority.

### The struggle for power as therapeutic factor

In any society there are overt or covert power struggles. It was suggested that much of the distress people encounter, may be less the result of internal conflict than of disturbing events in the outside world, including the inequality or abuse of power, leaving us with feelings of powerlessness or helplessness (Mack, 1994).

Small groups do not create the difficulty of speaking we face in LGs. The small group leader focuses on creating a safe environment and the atmosphere in the small group very quickly becomes intimate, inviting shy people to speak and encouraging quiet individuals to talk. In contrast, in many – if not most – LGs we will find struggles for power taking place simultaneously in different realms: the physical (e.g., seating places, room temperature), communication (e.g., language, possibility to hear each other), content (topics of discussion), and leadership (being influential). These power struggles make it highly difficult for the participant, whether actively engaged or merely watching, to stay aloof. For some participants even the ability to overcome inner fears and open their mouths facing this monstrous LG, feels like a huge achievement.

The LG provides a social environment that – if all goes well – is relatively well-contained, and therefore a good playground to experience individual freedom and exercise one's power. The essential questions being: "What do I think about all this?" and "What shall I do with my power?" Based on these two questions we can make a distinction between "agency" and "authority."

*Agency* With the term "agency" we indicate the power of the individual to act independently and make one's own free choices. Personal agency is related to will,

In an international group therapy conference held in Rome (IAGP, Italy, 2009) the leaders of the LG verbalized clearly that the language in the LG will be English without official translation.<sup>2</sup> There were about three hundred participants, half of them from Italy. Language became one of the difficult barriers to overcome in this LG, not only as a means of communication, but also as representing power struggles between cultures. Particularly as many Italians did not speak English well, and were frustrated because there was no translation. As an act of protest and rebellion some of them started speaking Italian in the LG and refused to be translated. Many long speeches came from Italian speaking members without translation. After long discussions and arguing it became clear that the Social Unconscious was at work. This rebellion had to do with the humiliation of the descendants of the Roman Empire who felt overtaken by “strangers.” This issue connected with the fact that immigrants flood Italy nowadays. The struggle was actually around hegemony, namely the opposing of American/English as manifestations of imperialist rulers of the world, current US and the Ancient Roman. This way, the Italians could feel that they restored some of their power and pride as descendants of the old Roman Empire.

freedom, choice and responsibility. Restoring a sense of agency was seen as the main goal of therapy (Mack, 1994). Agency was linked to well-being, through a sequence of mechanisms.

1. In response to widening opportunities of life, people place stronger emphasis on emancipative values,
2. In response to a stronger emphasis on emancipative values, feelings of agency gain greater weight in shaping people’s life satisfaction,
3. In response to a greater impact of agency feelings on life satisfaction, the level of life satisfaction itself rises. (Welzel and Inglehart, 2010: p. 43)

Similarly, Weinberg and Schneider (2003) used the term “inner authority” and proposed the exploration of the meaning of inner authority as one of the benefits of the LG.

Alternatively, we could use the term “empowerment” (instead of “agency”), which is the possibility the group provides in learning to think, decide and behave in autonomous ways. Empowerment was found to be related to psychological well-being and/or mental health in many populations, like family caregivers (Tebb, 1995), refugee and immigrant women (Khamphakdy-Brown et al, 2006), people with psychotic disorders (Castelein et al., 2008), adolescents (Berg et al., 2009), and children (Romanelli et al., 2009). In our view the LG provides ample possibilities to find one’s own individual way within the masses.

Agency involves taking risks. In the Ein Gedi LG (2008) the first author was one of two facilitators, while the second author was a participant. The first author was

<sup>2</sup> This is in contrast with the international conference, mentioned earlier held in Jerusalem, in which the language was Hebrew and foreign participants received simultaneous interpretation on request.

sitting in the inner circle, while the second author initially did not want to be in the spotlight and chose to sit in a circle close to the center. Then, at the start of the group session, there were annoying lights on a large screen at one side of the room. This was an issue of setting, but the facilitators did not intervene. After some deliberation, the second author gathered enough courage to get up in front of everyone, take the lead and turn off the computer causing the disturbance. For him it was an act that required strength and courage. However, the result was unexpected. The screen then said “no signal,” which immediately was interpreted by another member of the LG, referring to the lack of communication in the group.

*Authority* “Agency” means that we are free to decide and act, but this does not necessarily include the use of power over others or the idea of leadership. “Authority” takes this one step further, to the interpersonal level. With the term “authority” we refer to the opportunity to exercise the legitimate and socially approved use of power over others in the LG. Shields (2001) suggested that the “group relations approach is an excellent means to study the impact of diversity within the social system and how covert problems in working with authority may become projected onto potential valuable subgroups in the large group context” (Shields, 2001: p. 220).

Aggression in this context is often used to maintain pressure on people or subgroups to conform to the norms of the majority (Hopper, 2003). We do not see aggression in itself as therapeutic or leading to any positive growth. We need to add that the use of authority does not necessarily include aggression or violating the rights of others. In the LG, power may take the form of verbal or nonverbal aggression.

Shields (2001) claimed that the group relations approach “offers a unique opportunity for members to learn by taking up differentiated leadership roles on behalf of the work of the group” (Shields, 2001: p. 220). Like Weinberg and Schneider (2003), our understanding is that the “large group is an ideal venue for investigating issues of leadership and authority” (Weinberg and Schneider, 2003: p. 18). When stormy conflicts burst out in the LG, every member faces the question: “Should I do something? Would it not be better for me to stay an observer and not intervene?” A decision to express one’s voice when two people or two subgroups enter a fight is not only exercising good citizenship, but is also a unique opportunity to feel that one has an impact on the way things happen in one’s environment. What people learn is that their actions matter. Their lesson can be “do not talk about change – be the change”.

The Ein Gedi LG, in 2008 was about to end in a rather frustrating way, in which many a participant felt that it remained too difficult to bridge the differences. Then, one of the participants staged a dramatized embrace between a Palestinian and a Jewish woman. This was an unusual and powerful step, in which a psychodramatist confronted the majority of psychodynamic oriented therapists with a, for them, different (nonverbal) way of dealing with conflict and pain. Reactions to her way of taking the lead were ambivalent. Though for some members in this LG the event created hope, others felt uncomfortable with the use of psychodrama, while still others felt that she tried to force a positive ending. In any case, she made a lasting impression.

## The Intrapersonal and the Interpersonal Experience in the Large Group

We can see both factors “representation of society” and “struggle for power” as existing on two levels, an intrapersonal and interpersonal level. Initially, both of these factors may cause the individual to take a more personal or reflective stance, temporarily withdrawing from involvement with others. At a later stage both factors may cause the individual to increase interpersonal engagement with her or his environment. Thus, the recognition of “diversity” within the represented society leads to becoming actively engaged in a pluralist society. Likewise, in the process of becoming empowered, attaining an inner level of self-assurance, it takes time to develop a strong sense of agency before one can assert one’s authority in the group (see Table 23.1).

**Table 23.1** “Representation of society” and “Struggle for power” as therapeutic factors.

	Personal	Interpersonal
<i>Representation of society:</i>	Diversity	Pluralism
<i>Struggle for power:</i>	Agency	Authority

In summary, dealing with social issues and fully accepting diversity inside and pluralism outside, in addition to developing a sense of agency and being able to experience one’s authority are strengthening for the self, and lead to a higher level of maturity. Foulkes (1975) saw the analytic group as “ego training in action,” meaning that while working on intrapersonal and interpersonal issues, we train our ego to sustain more pressure, to contain inner anxieties, and not withdraw in conflictual situations. The LG is THE place to train the ego (or the self in more updated terms) in dealing with difficult situations in a more mature way.

## The Role of the Leaders in the Large Group

Although this chapter is addressed to LG participants, we would like to say a few words about leading the LG and point out some important differences between leading small groups and large groups. LGs are usually conducted by two or three highly experienced group leaders. We would not like to give the erroneous impression that conducting a LG could be done by novices. It is difficult enough for novices in group work to participate in a LG, let alone conduct one. Unfortunately, there is no training program aimed at teaching how to lead a LG.<sup>3</sup> Some organizations that frequently organize “Tavistock” style conferences (mentioned earlier) provide a kind of “on-the-job training” for more experienced LG participants. After participating in several such LG conferences in which LG and small group sessions alternate, participants are “upgraded” and put in a small group of more experienced or senior group

<sup>3</sup> Attempts were made by the first author to set up a training track for large group leaders, when he was leading a group leaders’ training program in Israel.



therapists. Later, they join the staff of such a conference, start co-leading a small group, and eventually co-lead a LG.

When conducting a LG, perhaps the main deviation from most of the group therapy approaches practised for small groups in the USA, is the focus on group-as-a-whole interventions. The reasons for doing so are both theoretical and practical. As explained before, the aim of the LG is to learn about organizations, societies, social dynamics or the social unconscious. The leaders are looking for common themes and trying to understand and interpret the process more than relating to the contents. They listen to the tone and music of the interactions in a free-floating attention, identifying it as the free-association discourse of the crowd. They will give their interpretations as if they were “wondering aloud” on what happens in the group-as-a-whole.

Focusing on the individual will not serve the purpose of the LG. The leaders do not and cannot deeply know the individuals in the group (unless from other encounters). The words of the individual are considered as expressing something beyond the specific person, and even when they are unique, the LG leaders try to understand these expressions in the background of the entire process going on. It will be a mistake to address intrapsychic dynamics based on a comment a participant utters. Sometimes, participants who feel at loss try to “invite” the leader(s) to a dyadic interaction, or “seduce” the leader(s) to help them with their problems. The leader will focus on the meaning of these behaviors in the context of the group, and not interpret them as individual dynamics or personal disorders. As said above, although participation in the LG can be therapeutic, this is definitely not the place for personal therapy. As an example, take a LG with the physical structure of concentric circles of chairs, in which most of the inner circle is empty, except for two chairs occupied by two senior therapists. It will be a grave mistake to interpret this interesting seating arrangement as a narcissistic tendency of these participants sitting in the center (whether it is true or not). It might be better for the leaders to wonder aloud about the possible anxiety of the members in taking a central role in the LG or even in the organization. Or perhaps they might explore the possibility that newcomers (to the LG or the organization) feel intimidated by senior members.

LG leaders in conference setting are often known as colleagues, teachers, supervisors or therapists to at least part of the LG participants. Leaders and participants thus may have some common history, as well as a common future. This fact creates certain challenges and ethical dilemmas. For example, we cannot apply or request confidentiality in LGs. It is also clear that it is not feasible, nor even recommended for participants to avoid talking about the LG events outside the group. This is in contrast to what is recommended in some therapy groups regarding social interaction between group members outside the group session. Weinberg and Schneider (2007) summarized some ethical considerations for the LG and recommended that the leaders avoid discussing the events in the group with participants outside the time and setting allocated for the meeting.

The LG leaders are in no way a neutral force in the group. They should be very aware of their biases and countertransference, as in any LG situation they have a choice between the various processes they could emphasize. For example, in the previously mentioned conference near Jerusalem, they opted for reflecting on the power struggle concerning the use of language. At the same time they could have

introduced the idea of pluralism, the notion that there needs to be place for all. Alternatively, they could have put the focus on the many sexually tainted remarks raised in the group. In that case they could have emphasized the implicit power aspects of these remarks or refer to them in the realm of socializing, as attempts to become closer to each other. They thus could use their power to try to direct the group in certain directions. However, the forces within the group are huge, and the power of the leaders is limited – much more than in the small or median group. Furthermore, the limited timeframe and the abundance of information create a state in which many processes remain untouched. In some cases, this may aggravate participants. Individual participants or subgroups may then raise their voices and try to take control. The LG is a crowd and leaders are sometimes overruled by it; this is part of the process. As in society, leaders come and go.

### How to Benefit from the Large Group Experience

Before concluding this chapter, we would like to briefly look at the requested therapeutic effects and risks related to participation in the LG. We then will provide some recommendations to make the most out of the LG experience.

The LG experience is a strong emotional experience. If all goes well, the individual may come out of the LG with a better understanding of social processes, clearer awareness of self versus the group, a strengthened feeling of identity, and a feeling of personal competence. However, because of the higher pressures of the LG compared to the small group and its powerful regressive pulls, to benefit from participation in the psychodynamic LG, one needs a relatively stable or balanced self, the capacity for self-containment, and the ability to stand high levels of uncertainty and frustration. As Weinberg and Schneider (2003) state:

Those who are strongly identified with their own self, are able to accept the roller coaster effect that the large group has on their individual identity. However, there are those who feel lost when exposed to a large group experience (Weinberg and Schneider, 2003: p. 20).

Participating in a psychodynamic LG involves some risks. For many individuals the LG creates strong feelings of being overwhelmed or “at loss.” The tough conflicts that often occur in LGs and which at times may appear insoluble could result in loss of hope. Also, those with fragile identity may experience some kind of identity diffusion. Another risk is the narcissistic blow of making an effort to say something and getting either no response, as if one’s voice met a void, or an unexpected negative response, like in several of the previously mentioned examples. This can be quite a hurtful experience.

Therefore, the novice in the LG might want to consider some recommendations to enhance the experience of the group as a therapeutic tool.

1. **Expectations:** Prepare for a unique and intense experience. Remember that the LG environment is usually unsupportive and may be difficult to endure. People

may get hurt when expecting empathy or impacting others. The experience may be overwhelming to such an extent that you may find it hard to think clearly. In any case, do not come to the LG with expectations from the small group. Remember that the possibility of being mirrored, acknowledged and validated by either the leader(s) or other participants is highly limited in the LG.

2. **Focusing:** Pay attention to your emotions, thoughts, and sensations before, during and after the group. Check these *vis-a-vis* other group members, subgroups and facilitators, and see how they change over time. Try to recognize societal conflicts and power struggles both within the group and as representations of conflicts and struggles in society at large.

3. **Experimenting:** Try out different (physical) positions in the group. Check out how your position affects your experience. Consider expressing your ideas even if this is difficult for you, and be open to unexpected or no reactions from the group. If you do say something, try to interact with others. If you feel up to it, consider the possibility of trying to influence and take a leading role in the LG discourse.

## Conclusion

The LG experience is a strong emotional experience. It involves regressive forces, archaic processes and primitive defense mechanisms of splitting, massive projection and projective-identification. If all goes well, the individual may gain a greater understanding of social processes and conflicts, develop a sense of agency and social responsibility, strengthen an individual and group identity, and feel empowered and influential. However, participating in a LG involves some risks. For many participants, the LG creates strong feelings of being overwhelmed or “at a loss.” Those with less cohesive crystallized identity may experience some kind of identity diffusion.

In conclusion, therapeutic factors of LGs tend to be ignored, which is unfortunate, since it is quite possible to enhance personal growth through LGs. Having discussed the various therapeutic factors in the small group, it seems that at least several of these are active in the LG as well. Two more therapeutic factors were identified as available in the LG on both the personal and the interpersonal level. The representation of society encourages the development of one’s group identity through issues of diversity and pluralism. The struggle for power enhances the individual’s empowerment from agency to authority.

Although we tried to describe the specific dynamics and processes that develop in the LG, we did not mean to instruct the reader how to conduct a LG. Understanding the LG dynamics can enhance the benefits of the LG for the participant, reducing some of its potential hazards. It can also be helpful to those interested in learning how to lead a LG, but this is not enough. Unfortunately, there are not many programs in which one can learn how to lead a LG, but certainly if someone is interested in becoming a LG leader, he or she should first accumulate many hours of participation in LGs.

Research studies about the LG are scarce or almost absent. We would like to encourage colleagues to methodologically check the therapeutic factors existing in the LG.

## References and Bibliography

- Agazarian, Y. M., & Carter, F. B. (1993). Discussions on the large group. *Group, 17*, 210–234.
- Aron, L. (1996). *A meeting of minds*. Hillsdale, New Jersey: Analytic Press.
- Berg, M., Coman, E., & Schensul, J. (2009). Youth action research for prevention: A multi-level intervention designed to increase efficacy and empowerment among urban youth. *American Journal of Community Psychology, 43*, 345–359.
- Blinderman, C. D., & Cherny, N. I. (2005). Existential issues do not necessarily result in existential suffering: Lessons from cancer patients in Israel. *Palliative Medicine, 19*, 371–380.
- Booty, J. E. (1990). *John Donne: Selections from divine poems, sermons, devotions, and prayers*. Mahwah, New Jersey: Paulist Press.
- Castelein, S., van der Gaag, M., Bruggeman, R., et al. (2008). Measuring empowerment among people with psychotic disorders: A comparison of three instruments. *Psychiatric Services, 59*, 1338–1342.
- De Maré, P. B. (1972). Large group psychotherapy: A suggested technique. *Group Analysis, 5*, 106–108.
- De Maré, P. B. (1975). The politics of large groups. In L. Kreeger (Ed.), *The large group: Dynamics and therapy* (pp. 145–158). London: Constable.
- Foulkes, S. H. (1975). *Group analytic psychotherapy, method and principles*. London: Gordon & Breach.
- Havens, L. L., & Ghaemi, S. N. (2005). Existential despair and bipolar disorder: The therapeutic alliance as a mood stabilizer. *American Journal of Psychotherapy, 59*, 137–147.
- Hofstede, G. (2001). *Culture's consequences: Comparing values, behaviors, institutions, and organizations across nations*. Thousand Oaks, California: Sage Publications, Inc.
- Hopper, E. (2003a). *The social unconscious: Selected papers*. London: Jessica Kingsley Publishers.
- Hopper, E. (2003b). Aspects of aggression in large groups characterised by (ba) I:A/M. In S. Schneider & H. Weinberg (Eds.), *The large group revisited: The herd, primal horde, crowds and masses* (pp. 58–72). London: Jessica Kingsley Publishers.
- James, D. C. (1994). 'Holding' and 'containing' in the group and society. In D. Brown, & L. Zinkin (Eds.), *The psyche and the social world: Developments in group analytic theory* (pp. 60–79). London: Routledge.
- Jarrar, L. K. (2003). A consultant's journey into the large group unconscious: Principles and techniques. In S. Schneider, & H. Weinberg (Eds.), *The large group revisited: The herd, primal horde, crowds and masses* (pp. 29–43). London: Jessica Kingsley Publishers.
- Jordan, J. V. (2001). A relational-cultural model: Healing through mutual empathy. *Bulletin of the Menninger Clinic, 65*, 92–103.
- Khamphakdy-Brown, S., Jones, L. N., Nilsson, J. E., et al. (2006). The empowerment program: An application of an outreach program for refugee and immigrant women. *Journal of Mental Health Counseling, 28*, 38–47.
- Kreeger, L. (1975). *The large group: Dynamics and therapy*. London: Constable.
- Mack, J. E. (1994). Psychotherapy and society: Power, powerlessness, and empowerment in psychotherapy. *Psychiatry, 57*, 178–198.
- Main, T. F. (1946). The hospital as a therapeutic institution. *Bulletin of the Menninger Clinic, 10*, 66–70.
- Pines, M. (1981). The frame of reference of group psychotherapy. *International Journal of Group Psychotherapy, 31*, 275–285.

- Rausch, S. M., Gramling, S. E., & Auerbach, S. M. (2006). Effects of a single session of large-group meditation and progressive muscle relaxation training on stress reduction, reactivity, and recovery. *International Journal of Stress Management*, *13*, 273–290.
- Rogoff, B. (2003). *The cultural nature of human development*. New York: Oxford University Press.
- Romanelli, L., Hoagwood, K., Kaplan, S., et al. (2009). Best practices for mental health in child welfare: Parent support and youth empowerment guidelines. *Child Welfare*, *88*, 189–212.
- Rutan, J. S., Stone, W. N., & Shay, J. J. (2007). *Psychodynamic group psychotherapy (4th ed.)*. New York: Guilford Pub.
- Saragovi, C., Aube, J., Koestner, R., et al. (2002). Traits, motives, and depressive styles as reflections of agency and communion. *Personality and Social Psychology Bulletin*, *28*, 563–577.
- Shaked, J. (2003). The large group and political process. In S. Schneider, & H. Weinberg (Eds.), *The large group revisited: The herd, primal horde, crowds and masses* (pp. 150–161). London: Jessica Kingsley Publishers.
- Shields, W. (2001). The subjective experience of the self in the large group: Two models for study. *International Journal of Group Psychotherapy*, *51*, 205–223.
- Springmann, R. (1975). Psychotherapy in the large group. In L. Kreeger (Ed.), *The large group: Dynamics and therapy* (pp. 212–226). London: Constable.
- Tebb, S. (1995). An aid to empowerment: A caregiver well-being scale. *Health and Social Work*, *20*, 87–92.
- Terr, L. C. (1992). Mini-marathon groups: psychological “first aid” following disasters. *Bulletin of the Menninger Clinic*, *56*, 76–86.
- Triandis, H. C., & Suh, E. M. (2002). Cultural influences on personality. *Annual Review of Psychology*, *53*, 133–160.
- Volkan, V. D. (1988). *The need to have enemies and allies: From clinical practice to international relationships*. Northvale, New Jersey: Jason Aronson.
- Waldegrave, C. (2009). Cultural, gender, and socioeconomic contexts in therapeutic and social policy work. *Family Process*, *48*, 85–101.
- Weinberg, H. (2007). So What is this social unconscious anyway? *Group Analysis*, *40*, 307–322.
- Weinberg, H., & Schneider, S. (2003). Introduction: Background, structure and dynamics of the large group. In S. Schneider, & H. Weinberg (Eds.), *The large group revisited: The herd, primal horde, crowds and masses* (pp. 13–26). London: Jessica Kingsley Publishers.
- Weinberg, H., & Schneider, S. (2007). So what is this social unconscious anyway?. *Group*, *31*, 215–228.
- Welzel, C., & Inglehart, R. (2010). Agency, values, and well-being: A human development model. *Social Indicators Research*, *97*, 43–64.
- Wilke, G. (2003). Chaos and order in the large group. In S. Schneider, & H. Weinberg (Eds.), *The large group revisited: The herd, primal horde, crowds and masses* (pp. 86–97). London: Jessica Kingsley Publishers.
- Yalom, I. D. (1980). *Existential psychotherapy*. New York: Basic Books.
- Yalom, I. D., & Lescz, M. (2005). *The theory and practice of group psychotherapy (5th ed.)*. New York: Basic Books.

REVISED