Balint in a Nutshell

An Introduction by Heather Suckling

History of the Balint Group

The name is that of Michael Balint a Hungarian psychoanalyst. His main work was as a psychoanalyst at the Tavistock Clinic, in London. He started groups for GPs in the 1950s to study the doctor-patient relationship, he described them as “Training-cum-research” groups. He worked closely, and ran groups with his third wife, Enid—a Social Worker and Marriage Guidance Counsellor. Her influence on medical training is probably as great as his.

What is a “traditional” Balint Group?

It consists of 6-12 doctors with 1-2 leaders and it meets regularly. Meetings usually last for 1-2 hours and the group continues for 1 or more years. The method is that of case presentation without notes.

What happens in a Balint group?

The leader asks “Who has a case?” The presenter who volunteers tells the story of a consultation, this is not a standard case presentation, but a description of what happened between the doctor and the patient. It need not be long, complicated or exciting but something that is continuing to occupy the presenter’s mind. It may be puzzling, or has left the presenter feeling angry, frustrated, irritated or sad.

The group discusses the relationship between the doctor and patient and tries to understand what is happening that evokes these feelings. The feelings which the patient evokes are significant and may be reflected in the presenter or in the group. This facilitates the understanding of the patient.

All discussions within the group are confidential.

What can a Balint group do?

It provides an opportunity for doctors to reflect on their work
It can provide an outlet for anxieties and frustrations generated by their work
It can arouse a doctors’ interest in patients whom they have previously found upsetting, annoying or “difficult”
It can open minds to other possibilities, both of diagnosis and day to day management
The group provides support and improves communication with patients and other professionals
It can improve job satisfaction, the patient’s perception of care and help to prevent burn-out.

What does a Balint group not do?

It does not tell the doctors “how to do” their work
It does not provide easy answers
It will not solve all doctors’ problems with patients

Who was Michael Balint?
He was born in Budapest in 1896, the son of a GP. He became interested in psychoanalysis after first hearing Freud speak in 1918 and when he met his first wife, Alice, who was an analyst. He obtained his Doctorate in medicine in 1920 and initially worked as a biochemist. Later he undertook psychoanalytic training, his analyst was Sandor Ferenczi. Balint worked as a psychoanalyst in Budapest during the Fascist regime, but in 1939 came to Manchester (UK) as a refugee. In 1945 he was appointed as a Psychoanalyst at the Tavistock Clinic. In the early 1950s he began his work with GPs- the Balint Group was born. In 1957 “The Doctor, his Patient and the Illness”, his seminal work, was published. The founders of the Royal College of General Practitioners were profoundly influenced by Balint’s ideas; they formed the basis of modern postgraduate training for general practice. He used the term “patient-centred medicine” in his description of the group he ran at University College hospital for medical students in 1969.

“Perhaps the essence of Balint Groups has always been to share experiences and enable people to observe and rethink aspects of their relationships with patients and their work as doctors.”

Enid Balint (1992) The Doctor, the Patient and the Group

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