A Balint retreat: "The Terrible Power of a Minor Guilt "(1)

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Prologue:

Israel had been at war for two years since the massacre of 7th October 2023. Since January 2023 a judicial rightist revolution began leading to an increasing social crises and widespread weekly protests al over Israel.

It was entirely uncertain whether the Leaders' conference would take place this year.

We were longing for a quiet place to share and calm down with our colleagues.

When it was eventually held, a question was asked in the opening circle:

“When you come here today to the Balint Seminar what do you leave outside and what do you bring from the outside to the group here today?”

A pained and emotional voice rose from within the group “I can’t leave Amalia – my long-time client, outside. The voice belonged to Ada, a 65year old family doctor and veteran Balint participant. “She passed away, 80 years old. We met at every demonstration for the release of the hostages from Gaza in the last two years. She stood there in the square or on the streets, holding her posters of the hostages, despite the rain, the cold or the heat. She ignored all my warnings that it was harmful to her health. She caught pneumonia last winter and died a week ago. It doesn’t leave me".

Introduction:

Israel has known many wars, but this one is different and none of us has been left untouched by it.

Army officers knock on doors of fallen soldiers' homes to inform the family that their son has died in battle. The daily television and social media announcement, releasing the names of the fallen soldiers. Everyone holding their breath and listening to find out if it's someone they knew.

A study carried out in Israel shows that as a society and as individuals we are in prolonged mourning. Mourning for those who were taken from us and for what we have lost. In a way we are also in a precursory mourning for what is still to come and what we will lose in the future. The judicial revolution (reform) carried with it aspects of what was defined by researchers (research was done on August 2023 after 36 nationwide protests) as political grief and ambiguous loss in a threatened democracy (2). Political grief is a profound response to the perceived erosion of values, ideology and identity resulting from disruption to individuals' 'assumptive world'. Ambiguous loss was extended from the personal uncertain loss of a loved one's person to collective contexts as immigration, Covid -19 and also of the slow democratic backsliding.

Alongside the feelings of identifying with and active participation in the social and security effort there are also feelings of guilt. Feelings of guilt over what we did and what we didn't do, over what we are and what we perhaps should be.

We arrive with this complex weight of emotions at the conference. Balint groups are a safe, quiet place where we can find some peace and share our feelings and professional dilemmas. However, it is not easy to leave the emotions outside the group.

Using the following case from a 2024 Balint leaders conference, we would like to illustrate the challenges faced in both therapy and the facilitation process at the moment in Israel.

All the names and details have been changed.

Case Presentation

- Raphael, a family physician and psychotherapist: I volunteer in a clinic that was set up in the difficult days after 7.10 to offer emotional support. I come here twice a week, from 16.00 – 21.00. For the last 6 months I have been treating Anna, a 50year old woman from a kibbutz that was attacked on the 7th of October attack. Several of her friends were

murdered, others have been held hostage in Gaza for nearly two years. She was evacuated from the kibbutz with her family. She has a 20-year-old daughter who is a soldier in the armed services, and two teenage children in high school. She used to work as a care giver to children in the kibbutz and now works in the make-shift kindergarten that has been set up in the city where they are temporarily being housed. During our sessions Anna spoke about the trauma she had experienced, being locked up with her family in the safe room of their house with the constant sounds of gun shots and terrorists shouting outside. She talked about the terror of waiting in silence for 12 hours until they were eventually rescued. She discussed the difficulties the family experienced in their move to the city and the questions about returning to their home in the kibbutz. She receives medication to help her with anxiety, depression and sleep.

On the day in question, I waited for her to come to her regular 18.00 pm appointment, but she didn't arrive. I was sitting in the clinic in the center of Tel Aviv. Outside I could hear the sounds of the demonstration at Hostage Square. When Anna didn't respond to my phone call I started to worry. She would always let me know if she wasn't able to make an appointment or was going to be late. 15 minutes before the end of the time she phoned to apologize for not being able to make the appointment. She said she would explain at our next session, however she didn't come to that either. Until now I have been preoccupied with the question of why she stopped her sessions. Had something happened to her, perhaps I had done something wrong?

In the round of informative questioning enquiries were made as to what had happened at the previous meeting. They had been discussing the possibility of returning to the kibbutz, which is a very difficult and hot topic at the moment. Some of her friends had already gone back and she was still undecided. Her children were happy with their new lives in the city, and they did not want to go back to the kibbutz. She was full of anxiety trying to make her decision.

A heavy silence fell on the group which lasted many minutes. Then group members started sharing:

- Ido, a family physician: It's always difficult when a patient leaves you, especially when the reason is unclear. Often, we start questioning ourselves. In a regular clinic it can be

frustrating because often the patient who leaves you is simply taken on by one of the other doctors in the clinic.

- Edna, social worker: I can imagine what Rafael is feeling. He sits and waits, full of frustration and uncertainty, but he is also angry that she didn't let him know. It could be that she went to the demonstration in the square and became distracted. Perhaps that is the place where she finds the most support now, where she can identify with those around her.

The facilitator (uncomfortably and hesitantly): I would like to remind you that the Balint group is a place to discuss professional dilemmas (this is not a therapy group concerning the situation in the country).

- Asaf, psychologist: I see many patients who were rescued from the Nova festival or others who have been evacuated from their homes. However, I don't go to the demonstrations anymore. At first, I did but I don't have the strength to continue going. Maybe I have also lost hope that they will help to change the present political situation. A week ago, I spoke to my brother. He goes to all the demonstrations wherever they are, road blockings, everything. He told me that it is because of people like me, who don't go to the demonstrations, that the hostages will not be returned. I was really upset by what he said. The truth is I had already been feeling guilty about not going to the rallies to show my support. Maybe I feel jealous of him for doing what I didn't have the strength to do. I managed to reply that I play my part by treating people who managed to survive the atrocities but look at how the conflict infiltrates everywhere.
- Yael, social worker: 30 years ago, I used to live with my family in a kibbutz on the Gaza border. There I met and became friends with Dana, who also works in the mental health field. We had a really good connection. We raised our kids together, shared stories from our professional lives. Dana took it really hard when we left the kibbutz and afterwards, we didn't keep in touch. On the 7th of October the beloved kibbutz we had lived in was attacked. I heard that she and her family were saved and evacuated to the North. Last week I had a dream about her refusing to leave me. I dreamt that Dana would come to see me at home. She was all dressed up, like she was coming for a court visit to my home. I woke up with a start from the dream. It continued to bother me. A while later a mutual friend from the kibbutz told me that Dana had apparently been the last kibbutz member to be evacuated

that night. She refused to go before she had made sure that all the old people on the kibbutz were safe. She was always very dedicated, and I was very moved by the image of her insisting on looking after those in need, even though there were still terrorists on the kibbutz. I felt really terrible that I had not reached out to her after the 7th.

- Facilitator: Can you tell us if this resonates with your treatment of other patients as well?
- Yael: I feel guilty that I am not doing enough generally for my patients, including those who weren't affected directly by the war. I always ask them how the war is affecting them. I feel the need to go and volunteer more in the centers for the displaced or for Nova survivors. On a personal note, I just feel bad about missing the opportunity to keep in touch with my friend, especially after finding out how incredible she was on the day the war started.
- Rebecca, experienced family physician: I was working in the clinic and Esther came in. She was a 62-year-old patient whose doctor was on holiday. Esther came in to find out the results of blood tests she had done in preparation for an operation. When I sat with her, she was focused and to the point and was getting up to leave when I noticed that she had received a referral to do an ultrasound. I asked her if she had already done the scan and she replied she hadn't had the time. She said that her daughter had been killed on the 7th and she and her husband were helping their son-in-law to look after their children. I was stunned. Esther said that she would do the scan as soon as she could. I told her how sorry I was, she got up, thanked me and left. I was left with very hard feelings of guilt that I hadn't known. I should have asked her more sensitively how she is feeling these days.
- Roni, psychiatrist: I see a lot of patients who experienced deep trauma on the 7th. It is not difficult to diagnose them as suffering from PTSD, after what they went through. I prescribe medication and give them confirmation of their diagnosis. Now, after 2 years, some of them return and ask for a continuation of their diagnosis, because they can't work or function regularly. I know that in most cases the PTSD passes after both focused and trauma treatment or even spontaneously with the passage of time. People have amazing powers of recovery. It is very difficult to diagnose and evaluate their true condition. There are those who seem to be abusing the situation and want to receive a disability certificate, with no justification for it. Although I have sympathy for what they went through I am also now feeling frustrated that I am being used to providing the authorization.

- Danny, family physician and psychotherapist: I also get similar referrals. However, I know that I don't have a lot of experience or skills in the diagnosis or treatment of PTSD and I don't want to feel like a detective who needs to interrogate the patient as to how much he is still experiencing the trauma.
- Facilitators: We see a range of emotions around the treatment of patients who were hurt, from identifying with them to a range of feelings of guilt. It seems you could all really identify with the case. Perhaps we will return to discuss the original case that we were presented with.
- Oded, a social worker: To sit and wait for one hour for a patient requires patience. If I were in that situation, I would be really angry and feel used, I come here and dedicate hours in helping all these people who are displaced.

A heavy silence envelope the room, people are pondering and it seems we are stuck.

The facilitators look at each other and suggest that the case presenter should come back for a few moments to ask him how he is feeling and to find out if he has anything to add after the process so far.

- Raphael: Thank you for enabling me to share something that I don't find easy to share. The clinic where I work was set up after the 7th. Initially there were a lot of therapists and care givers, and we were a tight knit group with a feeling of being part of a national mission to help the survivors and evacuees from the Gaza border. We had regular instruction lessons and discussions where people could feel the support of the rest of the team. Now, some of the teams have left and I stayed. I feel a bit frustrated.
- Yoram, Internist in the Emergency ward of a big hospital: The truth is that sometimes I have been so overworked in the last few months that I feel like I have been kidnapped to some tunnel which is difficult to get out of.
- Facilitator: what do you feel?
- Yoram: inadequate, frustrated, can't see the light at the end of the tunnel.
- Facilitator: The feeling of being helpless is clear and shared by most of you here. Are there any other thoughts about the case presented here?

- Dina, a psychologist: I suddenly thought that maybe the patient had started feeling better and didn't feel the need for further treatment. Do you think that she just found it difficult to tell Raphael that she was stopping?
- Facilitator: Why do you think it was hard for her to tell him?
- Ruti, family doctor: She didn't want to hurt him. Maybe she feels how dedicated he is? That he is still sticking to the mission when her condition is improving.
- Tali, psychologist: Maybe we will never really be able to understand the trauma that these people went through. We come to save, to treat, but we don't really comprehend their situation.
- David, family physician, 63 years old: I can identify with the dedication of the case presenter as I am in a similar situation. I am pre-retirement but still working. I wake up every day to see patients, and I know that my work is what is saving me at the moment. I will share with you that my 35year old son-in-law is on his 3rd round of combat in Gaza as a reserve. In that terrible dangerous place. I look into the eyes of my beloved granddaughters and every time he leaves them my head is filled with terrible thoughts. I wonder if he will come back and have to push away the terrible idea of them having to grow up without a father. The fact that I get out of the house and can help others gives me a sense of purpose in these terrible times.

A deep sadness covers all those in the group and no words are spoken. The atmosphere is laden.

The facilitators look at each other questioningly.

- Facilitator: I feel there is a heaviness in the group, let's stay with that for a moment.
- Yael: There is no solution to the current situation. But I feel a certain amount of relief that I am understood. I have a bit of everything that was mentioned here. I don't think I have ever heard it spoken with such openness until this group today.
- Rachel, psychologist: I apologize for what I am about to say, but nobody mentioned what is going on in Gaza, the huge death toll, the terrible loss. Can nobody stop it?

Again, a heavy silence descends on the group. All eyes are down-cast.

The facilitators wonder how they should react. How to continue from here. They return Raphael to the group.

- Raphael: I feel relief after having shared with the group, because of the understanding and that people identified with what I was describing. However, the case will continue to follow me, (moves uncomfortably on his chair) I just remembered that a colleague, Oded sent me a WhatsApp message this morning, just before we entered the session. He reads from his mobile phone "Rafi, are you coming to the meeting of "Doctors for Human Rights" calling for a cease-fire and in support of the victims in Gaza?"

  Silence.

- Rachel: I think that no matter what we do or don't do we will always be left with terrible feelings of guilt. It's not easy to talk about and it's so difficult when there is a conflict between moral duty and the ability to act accordingly.
- Facilitators: we are left with a complex mixture of feelings and a lot of things to think about. We will not be able to solve them here and now Thank you to the case presenter and to you the participants.

Discussion:

The Balint group does not exist in a bubble.

Just like the rest of the country, for the past 2 years we have been part of the reality of war and social -political struggle. There are many ethical, moral and psychological questions concerning the social-political struggle.

These aspects permeate to therapeutic roles, as can be seen in the group that we described.

The case presented opened a wide range of emotions between guilty feelings and empathy.

The group process was accompanied by silent speechless "stuck" moments. What did these silent moments express? How should the facilitators relate to them?

Grief, sadness and anger were not openly expressed, but guilty feelings were more evident.

Why?

Maybe because guilty feelings tend to push away sadness and grief in the mourning process.

How should the facilitators lead the group through this range of feelings?

Professor Maoz, RIP differentiated between guilt and guilty feelings:

Guilt – for something we did that didn't turn out well, or something we didn't do and later regret.

Guilty feeling – a human emotion that accompanies you throughout your life, as an individual or part of family and parenthood, not always directly connected to the results of your actions.

The group is not a bubble and there is a connection to the outside world. In Balint groups, the feelings of the presenter, the patient and the participants are discussed in context of the case presented regarding doctor-patient relationship with some connection to the outside world. As described, the outside trauma was strongly present in the case presentation and the discussion. Feelings of anxiety, fear, anger, guilt, grief, helplessness which were present in the group were experienced by many as a reaction to the trauma. Our dilemmas as leaders are when, how and to what extent should we focus on the traumatic situation.

What about the feelings of the leaders: Should we share them? When should the leaders illuminate the outside situation that penetrates inside the group and is shared by everyone? Should the leaders talk about it? Stop the discussion and raise the feelings of everyone? In fact, all of us experienced a similar situation during the Covid pandemic which aroused changes in the setting and contents of Balint groups.

The Balint idea of "The Apostolic Function" of the doctor/therapist has had a difficult period in Israel in the last few years. Traditionally the doctor/therapist is seen as the savior,

the wise one, sometimes the righteous one. The last few years have shown us that our role and our ability to fill it is not that clear and this leads to both internal and external conflicts.

Do doctors and therapists, who are also affected by the war with anxiety, fear and guilty feelings have a new message regarding healing?

Suggested dilemmas for discussion:

1.The dilemma of multiple trauma sharing in the group vs. holding the space of Balint "frame".

2.The dilemma of competing traumas: big trauma vs. small ,daily issues .

3.The facilitators' imposter syndrome and helplessness the "guilt of just talking..."

4.Over identification vs. emotional numbing.

5.Ethical issues: Morality based on guilt or morality based on sympathy and identification.

More….

References:

1. In his book “The Terrible Power of a Minor Guilt: Literary essays"(Syracuse University Press2000 translated from Hebrew by Ora Cummings), the well-known Israeli author Abraham.B. Yehoshua contemplates moral issues in a wide range of Hebrew and world literature. He assumes that in literature, moral truths can be arrived at either via feelings of guilt or by identification with characters and their circumstances empathetically. In his opinion a moral attitude is not an anthropological, historical, philosophical or religious attitude but a personal stance.
2. Yehene E., Ohayon S. Political grief and ambiguous loss in a threatened democracy: psychological distress and civic responses during Israel's judicial reform. Front. Psychiatry, 16,2026.