

## The Balint Movement in America

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*Michael Balint's (1896–1970) career evolution from general practitioner (1918) to psychoanalyst (1926) and subsequently to general practitioner educator (1950) began at his home in Budapest and then moved from London to sites in the United States. His frequent visits to America, together with his wife Enid, were an influential force in promoting and training US-based Balint group leaders. Michael and Enid Balint's influence, together with the support of US physicians, South African physicians who became US citizens, and behavioral scientists, laid the foundation for the formation of an American Balint Society in 1990. The Society's educational and research efforts occurred primarily in family practice residencies and have grown over the past 10 years. The Society is presently working to standardize credentialing of Balint group leaders to assure continued quality growth in the American Balint movement.*

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In his 1983 review of Michael Balint's *The Doctor, His Patient, and the Illness*, on its 25th anniversary of publication, Glenn<sup>1</sup> said:

No factor has influenced the evolving nature of family medicine more profoundly than its ties to the behavioral sciences. And no work has exemplified this link more trenchantly than Balint's *The Doctor, His Patient, and the Illness*.

More recently, Zoppi<sup>2</sup> and others cite Michael Balint's work as leading to an "integration and transformation of the clinical method."<sup>3</sup>

Initially it was individuals or single programs and not institutions or medical specialties that were embraced by Balint's work.<sup>4-6</sup> It was not until 1990 that the first, and only, survey study appeared assessing the breadth and character of Balint activities in US family practice residencies.<sup>7</sup> None of these papers explored the historical activities leading to the presence of a Balint movement in America, nor the formation of the American Balint Society.

This report outlines that historical development of the Balint movement, defines its place in family medicine education, and prepares the reader to better understand the results of an updated survey showing one or more Balint groups in 48% of family practice residencies, an increase of 29% over the past 10 years.

### Background of the American Balint Society: From Hungary to England

Michael Balint was born in Budapest on December 3, 1896, the first of two children, to a middle-class, Jewish general practitioner. On growing up, he changed his family name, Bergsmann, to Balint and converted to the Unitarian faith. By 1918, he had qualified as a doctor. In addition to entering general medical practice, Balint pursued psychoanalysis for 2 years in Berlin with Hans Sachs and 2 more years in Budapest with Sandor Ferenczi. By about 1926, Michael Balint came to see himself as a psychoanalyst. His publications changed in focus, and he became a member of the Hungarian Psychoanalytic Society.<sup>8</sup> He served as vice-director of the Budapest Psychoanalytic Institute from 1931 to 1935 and as director from 1935 to 1939. In the 1930s, Balint gathered a few general practitioners together to study the psychotherapeutic aspects in their practices. These groups were the foreshadowing of the Balint seminars.

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Due to the rise of Nazism and political changes in Europe during the 1930s, Balint, his wife Alice, and son John, with the help of his friends, took up residence in Manchester, England, in 1939. Alice Balint died later that year of a ruptured aortic aneurysm. Michael Balint obtained British medical qualifications and in 1945 moved to London. A year after becoming a British subject in 1947, he joined the staff of the Tavistock Clinic.

In 1950, Balint instituted "research cum training" seminars for general practitioners at the Tavistock Clinic. These seminars would come to be known as Balint seminars or Balint groups.<sup>9</sup> In 1961, he reached the mandatory retirement age of 65, though his work with Balint groups continued until his death. By 1969, the general practitioners of those Balint groups founded the Balint Society for the discussion and advancement of his work. Balint's relation to the psychoanalytic community remained strong. He served the British Psychoanalytic Society as training analyst, as scientific secretary from 1951–1953, and as president from 1968 until his death.

### **From England to America**

Beginning in 1958, Balint and his new wife Enid (Eichholz), who he married in 1953, made annual visits, respectively, as visiting professor and associate professor to Cincinnati, Ohio, where they conducted their work and teaching, particularly with Paul Ornstein, psychoanalyst and professor of psychiatry at the University of Cincinnati College of Medicine.

In 1956, Michael Balint met with Rex Pittenger, chief of the Staunton Clinic in Pittsburgh, Pa, which became an important port of call on successive visits. The Balints made eight visits over the next 11 years to the Staunton Clinic. Pittenger became a key figure in extending the work and ideas of Balint through teaching, consulting, writing, and presenting at regional, national, and international meetings.<sup>10-12</sup>

In 1970, Pittenger began conducting Balint seminars for the faculty at St Margaret's Memorial Hospital Family Practice Residency in Pittsburgh. The following year, Pittenger began Balint seminars for the residents. Psychiatrist and psychoanalyst Paul Scott took over that role in 1974 and continued in that role until the past year.

In 1978, Pittenger began offering Balint seminars for the Forbes Family Practice Residency Program, where he was joined by psychologist Laurel Milberg, who would later become the third president of the American Balint Society.<sup>13</sup> She is still leading Balint groups there today.<sup>14</sup> Pittenger also consulted with a Balint group at Albany Medical College Family Practice Residency Program, started by a former resident of his, Warren Litts.

### **From South Africa to America**

A significant impetus to the growth and development of Balint work in America was provided by two South African general practice physicians from Cape Town who were active participants in a Balint group of their peers, with consultation and supervision from Enid Balint. In 1982, one of the two physicians, Frank Dornfest, took a position in the Department of Family Medicine at the University of Mississippi in Jackson, where he remained until 1984 before assuming a position with the University of California-San Francisco residency program at Santa Rosa.<sup>15</sup> In 1993, Dornfest became program director at the Guthrie Family Practice Residency in Sayre, Pa. In all of those sites, he organized Balint groups and worked to train faculty Balint group leaders, as well as residents. He became the first president of the American Balint Society and one of its most active supporters nationally and internationally, serving recently for two terms (1993–1998) as the president of the International Balint Federation.

In 1981, Clive Brock, the second of the two South African general practice physicians, joined the faculty of the Family Medicine Residency of the Medical University of South Carolina in Charleston. Brock began a resident Balint group immediately, and, over the years, he has trained residents, fellows, and faculty both in Charleston and at regional, national, and international meetings. He became the second president of the American Balint Society and one of its most prolific writers.<sup>5,7,16-22</sup> Several of his former residents have assumed active roles in furthering Balint work across the country and supporting the continued growth of the American Balint Society.

### **A British Midwife**

Before the creation of the American Balint Society, those clinician-teachers attempting to form a Balint association were consistently aided by the encouraging words and helpful, teaching presence of the secretary of the International Balint Federation, John Salinsky, who himself is a general practice physician just outside of London.<sup>23,24</sup> Salinsky received his supervision as a Balint group leader from Enid Balint. He has served to date on the faculty of almost every Balint leader training program, as well as presenting at some of the national Society of Teachers of Family Medicine (STFM) Balint workshops. Salinsky can truly be called an organizational midwife of the American Balint Society.

### **The International Balint Federation**

The International Balint Federation, developed in the early 1970s, was the outgrowth of the Balint Societies of Britain, France, Belgium, Holland, and West Germany. Today, the Federation consists of 12 affiliated

national societies, one of which is the American Balint Society. The Federation's ninth international Balint congress was held in Charleston, SC, in 1994. Successive congresses, meeting every 2 or 3 years, have taken place in Budapest, Hungary, in 1996, and Oxford, England, in 1998. These congresses of more than 150 delegates focus on research and practice, as well as treating participants to the cultural specialties of the hosting country. The 1996 Congress in Budapest, on the centenary of Balint's birth, was attended by physicians from all five continents. Currently, these congresses and their elected officers have been exploring guidelines for training and certifying Balint group leaders.<sup>25</sup>

### The American Balint Society

Smaller pockets of Balint or Balint-like groups have come into and out of existence throughout the United States.<sup>26</sup> However, the coordination of a sustained, national effort to spread the research, teaching, and practice of Balint's work did not really begin until May 1990, when the American Balint Society was formed concurrently with the STFM Annual Spring Conference in Seattle. The American Balint Society's ever-expanding educational efforts from 1990 to 2000 are summarized in Table 1. The motivating force and defining values directing the American Balint Society's efforts are clearly and carefully articulated in their mission statement (Table 2).

In February 1999, the American Balint Society initiated the process of credentialing leaders at a 3-day workshop in Sayre, Pa. This is an ongoing activity of the American Balint Society that is central to the mission of certifying qualified and well-trained Balint group leaders. To find out more about the ongoing educational and credentialing activities of the American Balint Society, write: The American Balint Society, c/o Mary Nolan Hall, Secretary, Carolinas Medical Center, Family Practice Residency Program, Myers Park, PO Box 32861, Charlotte, NC 28232-2861, or go online to: [www.familymed.musc.edu/balint/balint.html](http://www.familymed.musc.edu/balint/balint.html).

### Discussion

Michael Balint died on December 31, 1970, at age 74. Until her death in 1994, Enid Balint continued and expanded Michael's work to include non-psychoanalysts as Balint group leaders.<sup>27-29</sup> Their direct and indirect influence on the growth of the American Balint Society is only sketched in this paper to give the reader some sense of the larger international landscape within which the American Balint Society exists and wherein its cultural and his-

Table 1

#### American Balint Society National and Regional Educational Presentations, 1990–2000

Year	STFM National	STFM Regional	Behavioral Science Forum	American Balint Society Leader Intensive	Other Groups
1990	X	X X			
1991	X				
1992	X				
1993	X		X	X	
1994	X	X	X		A
1995	X	X		X	
1996		X	X		
1997	X	X	X	X	
1998	X	X	X	X X	B
1999	X	X	X	X X	C
2000	X	X	X	X X	D, E

STFM—Society of Teachers of Family Medicine

A—International Balint Federation Congress

B—American Academy of Physician and Patient

C—Association for the Behavioral Sciences and Medical Education

D—American Psychiatric Association

E—Association of Family Practice Residency Directors National Workshop

Table 2

#### American Balint Society Mission Statement

The American Balint Society is a supportive and collaborative organization of clinician-teachers who share common values; an appreciation of the use of intellect, emotion, and self-reflection in the doctor's work; and the therapeutic potential of the doctor-patient relationship. These values are promoted through a group process of exploration and training called the Balint Group. The goal of the Balint Group experience is for the participants to transform uncertainty, confusion, and difficulty in the doctor-patient relationship into understanding and meaning that nurtures a more therapeutic alliance between clinician and patient. The goals of the American Balint Society are to communicate the value of the Balint approach, promote the inclusion of Balint group training in residency training and other clinical educational settings, develop training for Balint Group leaders, support research on the Balint process, and nurture the people who do Balint training. The American Balint Society strives to be visible and accessible to clinicians and educators who share our values.

torical roots are to be found. The wedding of psychoanalysis and general practice gave birth to the Balint movement in Europe that has infused the behavioral sciences and family medicine in America. The goal continues to be the humanizing of medicine and the melding of objective clinical science with the professional use of self to deliver more effective care.

Beginning by making home visits with his father, Michael Balint knew from the inside the character of

general practice. His own general practice of medicine followed by many years of psychoanalysis still left him with the question, "How was general practice clinically to benefit from the contributions of psychoanalysis?" His career was given to developing a reflective, case-focused, group process through which individual physicians could find their own answer to that question. One wonders if this is still not a core question being raised in the United States by family medicine: "What kind of doctor do I need to be for this patient today?"

The empathic awareness of the psychoanalyst and the appreciation that at any moment either doctor or patient could begin to relate to each other out of a context of their separate pasts (transference/countertransference) was one of the contributions that Michael Balint saw psychoanalysis making to general practice. Balint groups were the small, intimate professional communities within which case presenters, with the help of colleagues, were allowed to explore and reflect on the possible roles that they have assumed with patients. The group was free to explore further what role(s) might better suit in the ongoing care of patients.

Internal medicine, pediatrics, and obstetrics and gynecology gave general practice its breadth and some of its clinical methods. However, this clinical method was further refined and given new depth through the psychoanalysis that Michael Balint introduced in his seminars for general practitioners. Today in America, family medicine is heir to this tradition. However, family medicine's scope has been broadened by community medicine, industrial medicine, and a variety of other fields. Its depth and method have also been extended by epidemiological thinking applied in practice analysis, informatics, computer-based medical records, and the systems approach to family and social institutions that incorporates the patient. With the still greater breadth and depth of family practice, how are young family physicians to distill for themselves a realistic and personal role as family physicians? Balint groups are one venue in which the family physician may explore and experiment with role clarification in the quest for a more humane and effective practice.<sup>30</sup>

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