

A BRIEF HISTORY OF THE AMERICAN GROUP
PSYCHOTHERAPY ASSOCIATION 1943-1968

By the
COMMITTEE ON HISTORY

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I. THE ANTECEDENTS AND PIONEERS OF GROUP PSYCHOTHERAPY

DESPITE SOME COLLATERAL DEVELOPMENT in other countries, the roots of group therapy are primarily American. Joseph Hersey Pratt, a Boston internist, worked with tubercular patients at the Boston Dispensary and observed that patients' emotional reactions, their feelings of shame and discouragement because of their illness, often interfered with their capacity to adhere to self-care regimens. Pratt, therefore, visited patients in their homes at first, but then conceived the idea of having large numbers of patients meet at the hospital to discuss their attitudes, report on their efforts at self-help in dealing with their ailments, and receive instruction from him.

The goal of these groups, initiated July 1, 1905, was to help patients understand the nature of their illness, to teach them how they could contribute to their own recovery, and to *inspire* them to sustain their courage in living with a chronic ailment. Dr. Pratt's talks were essentially

* Helen E. Durkin, Chairman, Nathan Cooper, Albert L. Deutsch, Benjamin Fielding, Hannah Grunwald, Jack D. Krasner, Helen Langner, Charles McCormick, Max Rosenbaum, Edgar Ross, and Robert Thorne. Consultants: Milton M. Berger, Aaron Stein, Saul Scheidlinger, Harris B. Peck, and Emanuel Hallowitz.

The Committee gratefully acknowledges the contribution of E. Mansell Pattison in formulating a number of the interpretive components and the concluding reflections that have been incorporated in this summary of the history of the A.G.P.A.

of an inspirational nature and included readings from secular writers and from the Bible designed to inculcate more wholesome attitudes and an "optimistic view of life."

His groups were large, consisting of as many as 80 to 100 patients who sat in rows in classroom fashion facing the speaker on the platform. Patients with the best attendance record were moved toward the front. The "star" patients sat on a bench facing the audience next to the doctor. These "Thought Control Clinics" were the beginning of the "Class Method."

Pratt and his co-workers were impressed by the results of this work, and as a consequence of their experience became increasingly aware of the influence of emotional factors in the treatment of their patients. By 1922, Pratt had extended the Thought Control Class Method to the treatment of diabetic and cardiac patients. Soon, others took up Dr. Pratt's work. W. R. Emerson working with undernourished children, R. W. Buck with hypertensives, and Chappell with peptic ulcer patients were the most prominent of Pratt's followers, as well as E. W. Lazell, who, in 1919, applied Pratt's group lecture methods in the hospital treatment of purely mental disorders. With the support of William Alanson White, then Superintendent of St. Elizabeth's Hospital in Washington, D.C., Lazell, in 1921, began his group "lecture method" of treating chronic schizophrenics on the wards of that hospital. In addition to the exhortation, inspiration, and general supportive techniques used by Pratt, Lazell included frank discussion of patients' dynamics interpreted along Freudian psychoanalytic lines. This was an early attempt to combine intellectual insights with emotional support in a mental hospital setting. Later, Lazell discontinued the psychoanalytic discussions.

In the same tradition, Cody Marsh, a minister who later became a psychiatrist, carried Pratt's medical discussion methods to an extreme by de-emphasizing rational understanding and relying on inspiration and exhortation. In 1931, he described his work in the treatment of psychoses in a paper entitled "The Psychological Equivalent of Revival." He also conducted discussions with hospital personnel at all levels to help them acquire therapeutic attitudes toward their patients, and emphasized what became known as the "total push." He organized social groups, work groups, and committees, and utilized every possible group activity to involve patients in the realities of living and to encourage them to discuss their problems and render one another mutual assistance. Marsh

also "taught" groups in the general community in which he included hospital patients along with "normal" members of the community. His motto, often quoted, was: "By the crowd they have been broken; by the crowd they shall be healed."

The authoritarian style of Dr. Pratt was even more prominent in the work of Dr. A. A. Low. He organized "Recovery Inc.," an organization of post-hospitalized psychotic patients. Its purpose was to enable former mental patients to offer each other support in managing their lives in the ordinary community. Each chapter was under the direction and *discipline* of a patient and his lieutenants who had risen from the ranks. The rank-and-file patients were required to have approval of the head of their "chapter" before they could arrive at any decision about their lives or make any move in carrying out their plans. Members of the upper echelon in a rigid hierarchical officialdom were not available to a member involved, except in cases of appeal. Only in extreme instances when all the other officials could not resolve a matter, could the case come before Dr. Low for a final decision. "Recovery" chapters were initiated in Chicago, and the organization has since spread to several Mid-Western states and beyond and are still in operation.

One can characterize both Dr. Pratt's and Dr. Low's techniques as "authoritarian," except that, in the case of Pratt, the approach was inspirational and in Dr. Low's, repressive. The first employed the image of a father figure to be pleased and rewarded; the other, quite correctly in view of the type of patients dealt with, supplied "ego controls." Slavson (1959) characterized them as "authoritarian-inspirational" and "authoritarian-repressive," respectively.

In the early 1930's, Louis Wender held regularly scheduled meetings with the total patient population of a sanitarium in Hastings-on-Hudson, N. Y., the Hillside Hospital. The pattern of the sessions consisted of an informal talk on Freudian concepts of mental health and pathology, followed by an anonymous case presentation which the patients discussed. He pursued this didactic approach for some years, eventually modifying it somewhat under the impact of the developing practice of small-group psychotherapy. Many years later, convinced that the chief advantage of the group situation lay in its resemblance to the family, he included two and three generations of the same family in outpatient groups he conducted at Beth Israel Hospital in New York City.

Paul Schilder, whose work started in 1936, also adhered to the psychoanalytic frame of reference in his work with several groups at Bellevue Hospital in New York. He emphasized discussions of "body image," "ideologies," and attitudes toward self, possession, expulsion, aggression, cooperation, and the like. Dream analysis was also part of the process in his groups.

Another pioneer who needs to be noted is Trigant Burrow, who, having been analyzed by both Freud and Jung, introduced in 1920 what he first named "group analysis" and later called "phyloanalysis." His groups were predominantly residential. Doctors and patients lived together, and the tensions that inevitably arose from this were reacted to and analyzed or discussed by the group. The terms "group analysis," "here and now," and "analysis of group tensions," now in common use were originated by Dr. Burrow.

In 1934, S. R. Slavson introduced at the New York City Jewish Board of Guardians, a child-guidance clinic, a "creative recreational program" for small groups of socially maladjusted girls. Slavson came from the field of progressive education, an area in which he had made distinct and innovative contributions that brought him to international attention and led to his being invited to join the staff of the noted Malting House School in Cambridge, England. He had also had distinctive experience in social group work in which he had become interested in 1911 when he organized groups on his own in the neighborhood where he lived. In addition to his association with Malting House, he had also been associated with the noted Walden School, the Madison House, and the 92nd Street YMHA in New York, and provided leadership to the Socialist Sunday Schools of Greater New York. Slavson published four books dealing with his work in these areas.

Following his educational convictions, he structured the activities of the J.B.G. groups along the same lines—use of arts and crafts materials to allow complete freedom of self-expression devoid of any didactic or judgmental elements—clinging to the conviction that self-expression and creativity are the key to human happiness and constructive social adjustment.

This *seemed* to be confirmed by the first group, as the Big Sisters who had contact with the girls reported distinct improvement in the girls' conduct. The girls grew more outgoing, friendly, and open. As a result, a few more groups were organized, but an exhibit of the girls' works caused him to doubt that it was the creative element that brought about

these results. He then undertook an exhaustive study of the detailed protocol reports of the sessions of one of the groups and came to the conclusion that it was the group interactions (of which he identified eight types) and relations in the *permissive* environment and the *neutrality* of the leader-therapist that rendered the salutary results. The suggestion that the project, which was first known as "Therapeutics of Creative Activity," be called "Group Psychotherapy" was rejected by the Director of the Agency for public relations considerations, and the name "Group Therapy" was adopted.

The project was greatly expanded in numbers of groups and included boys as well as girls, who were treated separately. Because of the non-verbal nature of the process, the groups were limited to children in latency, i.e., 8 to 12 years of age, and to eight members.

Betty Gabriel, a social caseworker at the J.B.G., observing the spontaneous play interaction of children in latency in the waiting room, conceived the idea of having them meet together in her treatment room after supplying them with some of the materials used in the groups inaugurated by Slavson. Mrs. Gabriel (1939) published a significant paper on her observations. Later, this project, greatly expanded, was incorporated with the other groups as a special "Group Therapy Department" under Slavson's direction, as was also the pioneering work of Fanny Amster, another caseworker at the agency, who reported on her work in "Collective Psychotherapy of Mothers of Emotionally Disturbed Children" (Amster, 1944). The department was later extended to include the treatment of preschool children and adolescents and their fathers and mothers. There were usually between 18 and 24 groups under treatment at any one time.

Among the early workers with small groups along "relationship therapy" lines were Helen E. Durkin and Henriette F. Glatzer at the Brooklyn Juvenile Protective Association, the name of which was later changed to Brooklyn Psychiatric Centers. Their work with children began in 1937 and with mothers in 1938. They were joined by another psychologist, Jeanette Hirsh, in 1944. Dr. John Levy was the Director of the Clinic and later was succeeded by Dr. Lawson Lowrey in 1938 after the former's untimely death. The Brooklyn Juvenile Protective Association is credited with being the first to utilize group methods to treat parents of disturbed children in their own right, rather than individually as an adjunct to the therapy of their offspring.

In 1938, Dr. Alexander Wolf started a group of ten of his own analysts. He closely adhered to psychoanalytic principles but added to the regular sessions with him what he termed "alternate sessions," i.e., meetings of patients in his absence. He labeled his method "The Psychoanalysis of Groups," reviving Dr. Burrow's original term for his groups. Dr. Wolf was acquainted with the work of Burrow, Shilder, and Wender and had incorporated some of their principles in his technique while departing from them on some grounds. One of the innovations he originated was the method of "going around" in which each patient in the circle was asked to speak about whatever bothered him. By 1942, Dr. Wolf had five groups of patients, one of which consisted of marital couples. Thus, he was a pioneer also in this latter regard.

Samuel B. Hadden was an ardent admirer and pupil of Dr. Pratt. His first acquaintance with his work came while he was still a resident in White Haven Sanitarium through observing, in 1923, the work of Dr. Joseph Walsh. In the course of practice of psychiatry, Hadden became aware of the need of his patients for the type of experience he had observed in White Haven to help them overcome their feelings of being misunderstood and of hopelessness. He delayed inauguration of work with groups until a propitious circumstance arose at the Presbyterian Hospital in Philadelphia, where he was asked to deal with a large group. This was the beginning of Hadden's distinguished career, not only in group therapy, but in other fields of psychiatric practice. Not having been acquainted with the group developments in New York and a few other centers, his first paper on the subject was entitled "Treatment of Neuroses by the Class Method" (Hadden, 1942). However, two years later in 1944, a paper of his in the *American Journal of Psychiatry* bore the title "Group Psychotherapy." Dr. Hadden remains an enthusiastic and leading figure in the promotion of small-group psychotherapy to this day.

II. THE FOUNDING OF THE ASSOCIATION

During the nine-year interval between the inauguration of the Activity Group Therapy project and the founding of the Association, Slavson conducted investigations to establish criteria for selection of patients and to analyze the group therapeutic dynamics. He refrained from publishing anything on his work until he could establish sound information

adequately validated. In 1938, Dr. Lawson Lowrey, founder of the American Orthopsychiatric Association and editor of its Journal, was engaged by the J.B.G. to evaluate Slavson's work. Lowrey brought in a very favorable report; and Lowrey and Slavson became important persons in the informal channels of communication between the small number of group therapists and the professional community. Lowrey became a major sponsor of group therapy, and as editor of the *American Journal of Orthopsychiatry*, he opened its pages to the new movement.

The American Orthopsychiatric Association conference of February 1943 devoted two sessions to group therapy. With Lowrey's approval, Slavson chalked a note on the blackboard at the conference registration desk inviting those specifically interested in group therapy to attend a luncheon at the Hotel New Yorker where the conference was held. About 50 people attended. Another luncheon meeting, similarly announced at the A.O.A. conference in Chicago, attracted 100 persons. It was decided at the New York meeting in 1943 to create a group therapy organization.

The first meeting took place on June 16, 1943 at the J.B.G. The general aims and purposes of the new organization were decided upon, and the following steering committee was elected to draw up a constitution and make plans for a formal organization: Dr. Nathan W. Ackerman, Mr. Saul Bernstein, Miss Elizabeth Hobbie (representing Dr. Lowrey), George Holland, Dr. G. Pederson-Krag, Dr. Harris B. Peck, and S. R. Slavson. The latter was asked to prepare a draft for a constitution.

On November 16, 1943, a second organizational meeting was held. About 20 people attended, approximately half of whom were on the J.B.G. staff. The hard-core group of original founders consisted of 20 to 25 interested individuals. Most of them were at the meeting. The Steering Committee presented its constitution, which was discussed point by point, revised accordingly, and adopted. In brief, this constitution specified the following: the purpose was to promote interest in group therapy and coordinate and clarify the efforts of those involved in its practice and theory; dues were to be \$3.00 a year; the membership was to make all decisions; officers were to be a president, a vice-president, secretary and treasurer (these latter two offices could be held by one person); each officer was to be elected for a two-year term by a majority mail vote; a Nominating Committee was to be elected at the annual membership meeting to draw up a roster of candidates for officers and an Executive Committee, said Committee to be elected to carry out the policies and business of the

Association. The constitution further provided for four standing committees to be appointed by the Executive Committee: (1) Membership and Publicity, (2) Research, (3) Publication, (4) Education. Constitutional amendments were to be voted upon by mail and required two-thirds of the votes for ratification.

The constitution also specified the qualifications for membership. Since these qualifications were under constant scrutiny and gave rise to many heated discussions, they are quoted here exactly as set forth in the original constitution: (a) Psychiatrists who, in addition to meeting the requirements of their profession, have had three years' experience in psychotherapy. (b) Psychologists and psychiatric caseworkers who, after graduation from a recognized school in their respective fields, have had at least three years' experience in psychotherapy under approved supervision, with psychiatrists participating. (c) Persons who have not had the above specified educational training but who have had five years' experience in psychotherapy, some of which must be in the actual practice of group therapy, under approved supervision with psychiatrists participating. (d) Persons with unusual gifts, knowledge, or experience who have made a distinct contribution to the practice or theory of group therapy.

The inclusion of persons other than practicing group therapists was essential to the formation of an association, since so few had practiced it at that time. However, care was taken to open membership only to persons who by training and experience in psychotherapy would be qualified to add group therapy to their practice. Opening to them the opportunity for exposure to the theory and reports of experiences by practitioners, it was hoped, would induce them to do so. Qualification (c) applied to a number of practitioners drawn from other professions many of whom worked as volunteers, as was the case at J.B.G.; (d) was intended for a small number of individuals who fitted this description, because of the newness of group therapy at the time the qualifications were formulated. Later, a fifth category, (e) was added, "associate membership," for persons who, because of their position "can help the development and spread of group therapy." This category was designed for professional persons in administrative capacities such as heads of social service agencies, clinics, hospitals, and institutions who had the power to include group therapy in their services. In a sense, then, the A.G.T.A. was a combination of professional competence and professional interest, a policy that was necessitated because of the prematurity of the Association's founding. In time,

however, as the number of practitioners grew, categories (c), (d) and (e) were eliminated.

With the constitution accepted, the group authorized the Steering Committee to carry out all the immediate business; to continue as Executive and Membership Committees until the first annual meeting; to appoint a Nominating Committee to prepare a slate for the January meeting; and to develop a program for the first Annual Conference to be held in conjunction with that meeting, January 14 and 15, 1944.

The Steering Committee did as directed. They elected a Nominating Committee, established a mailing list, sent out invitations to those eligible for charter membership, and planned the Conference to be held at the Russell Sage Foundation, January 14 and 15, 1944.

The first Annual Conference dealt with various practices of group therapy and consisted of two sessions: Friday evening, 8 to 10 P.M., a general session, and Saturday morning, 10 to 12 noon, three round tables, with summary reports given from 12 to 12:30 P.M. More than 170 people attended the Friday session, an encouraging omen for an association which did not even officially exist as yet. Only three New York child-guidance centers and one from New Rochelle were represented. Dr. George S. Stevenson, Medical Director, National Committee on Mental Hygiene, was chairman. Among the other participants who acted as chairmen and discussants were Drs. Lawson Lowrey, Nathan Ackerman, Johann Van Ophuijsen, Louis Wender, Giles Thomas, Temple Burling, Alexander Wolf, and Louis R. Wolberg.

The first annual membership meeting was a luncheon on Saturday, 1 to 3 P.M., January 15, 1944. Of the membership of 60—41 actual members and 19 pending—about 20 attended. Most of the 20 had also attended the November organizational meeting. The constitution was presented and accepted. Mrs. Glatzer then presented the slate prepared by the Nominating Committee: (1) Officers: President, S. R. Slavson; Vice-President, Dr. Lawson Lowrey; Secretary-Treasurer, George Holland; (2) additional elected members of the Executive Committee were Dr. Temple Burling, Dr. Kenneth Wollan, Dr. Caroline Zachary, and Fern Lowrey of the New York School of Social Work. The slate was later unanimously approved by mail vote. The Steering Committee was dissolved, and the officers and the other members of the Executive Committee took over the directorship of the Association. The organization did not change its name to the American Group Psychotherapy Association for some years.

III. THE EARLY YEARS, 1944-1947

The Executive Committee decided to meet four times a year and appointed an Administrative Committee to act during the interim periods. In effect, the Executive Committee began to function as a Board of Directors, i.e., it formulated policy but delegated to the Administrative Committee responsibility for the day-to-day conduct of the affairs of the Association and for identifying policy issues and recommending specific policies and programs. The Administrative Committee consisted of Pres. Slavson, Vice-Pres. Lowrey, and Sec.-Treas., Holland. However, in 1946, on the day that Dr. Temple Burling took over as the second president, the Executive Committee appointed a new Administrative Committee: Ex-President Slavson was renamed Chairman and Burling became a member ex-officio. Throughout the first decade, each succeeding president was on the Administrative Committee, but Slavson continued to be re-elected chairman.

This Committee conducted the business of the Association on a day-to-day basis during the early years of the organization. That Slavson was retained in the chairmanship of the Administrative Committee was in recognition of his enormous stake in the development of small-group psychotherapy and his ceaseless efforts to promote the work of the Association. Between 1943 and 1956, the A.G.T.A. operated from his personal office at J.B.G. He handled all the domestic correspondence and, after the war, the correspondence with almost 50 foreign countries. George Holland was assigned the bookkeeping chore, handling the finances and physical arrangements for the conferences. A glance at the Association's early financial reports indicates that the paltry sums from dues, conference registration fees of \$1 inaugurated in 1947, and the sale of publications could not have covered office rental or staff salaries. Slavson has said: "Without the generosity of the Jewish Board of Guardians in supplying the Association with office facilities, secretarial service, and actual costs of mailing, our small band of members would have been hard put to get off the ground with our projects during those early years."

In March 1946, dues were raised to \$5.00, and the Administrative Committee was increased from four to six members.

The Educational Committee, under its first Chairman, Dr. Nathan W. Ackerman, arranged a series of monthly discussions for members only

which met at the J.B.G. headquarters. In fact, all meetings of the Board and Committees met at these premises gratis. The topics explored included various methods of group treatment, the role of the leader or therapist, etc. While these discussions were no doubt valuable to those participating, attendance was very low and the meetings were soon dropped.

The Committee also arranged the program for the second Conference, which was held January 12th and 13th, 1945, and dealt with the *process* of treatment in group therapy. This Conference attracted an attendance of about 400 persons, an impressive increase over the preceding year. The program consisted of two sessions. Since there were so few group psychotherapists available, the Friday evening session was devoted to group treatment of preschool children, group treatment of adolescents, and group treatment of combat neurosis. Saturday morning was given over entirely to one case treated in activity group therapy and discussed from the points of view of group therapy, psychiatry, and casework. The meeting was followed by a business luncheon for members at a nearby hotel.

The fourth page of this four-page program carried announcements of the publication by the Association of three symposia, each of about 40 pages, selling at fifty cents, and reprints of shorter separate articles by Ackerman and Slavson. Charles G. McCormick, one of the earliest members of the Association and a part-time group therapist at the J.B.G., had published a short paper on "Group Work versus Group Therapy" which was reprinted and widely circulated at ten cents a copy. This was done in anticipation of a possible invasion of the Association by *social* group workers or club leaders. A conflict on this score later broke out.

It is clear from the nature of the Conference and the publications that the task of those early years was to educate members of the related professions as to what group psychotherapy was and point up some of its elements and dynamics. No sound basic body of knowledge was then in existence. Those few who practiced it did so on the basis of their own hunches, as it were. The Conference programs, therefore, had to have the best available people invited to present papers. To prevent misunderstanding and misconceptions, each paper was discussed by an acknowledged leader in the psychotherapy field, and long periods for audience participation were provided.

The third Annual Conference, on clinical applications, was equally successful. It was held on January 4th and 5th, 1946. The registrants came

from twelve states. A number of agencies, especially from the Middle West, underwrote the travel and Conference expenses of their staff who attended. The membership of the Association having been increased as a result of the preceding Conferences and the wide publicity they had received by mail and in the press, the Conference locale was accordingly altered. It was now moved to the prestigious Commodore Hotel. (No rent for meeting rooms was involved; the price of the luncheon seemed to cover it in those days.) The Friday evening and Saturday morning plenary sessions dealt with the specifics of group psychotherapy with preschool children, character disorders, speech disorders, social maladjustments, neurotics, psychopathic personalities, delinquents, and psychotics.

The afternoon was given over to two presentations of cases, one in Relationship Therapy by Durkin and Glatzer, the other in Interview Group Therapy. (The term "Interview Group Therapy" was introduced by Slavson to distinguish it from his original technique, which he now dubbed "Activity Group Therapy." Later, he discarded this term as well and substituted "Analytic Group Psychotherapy," which became the title of one of his books published by Columbia University Press in 1950.) All the papers and case presentations were by caseworkers and psychologists, with psychoanalysts serving as discussants. A third round table chaired by Lt. Comm. Howard Rome, "Group Psychotherapy with Military and Post-military Problems," had five psychiatrists as discussants. The number of participants in the program almost quadrupled to 20, of whom six were members of psychoanalytic societies.

The fourth Annual Conference in 1947 was held at the Hotel New Yorker, with papers presented on a variety of subjects, including group treatment of mothers, of adolescents, of sibling rivalry, and of allergies, the private practice of group treatment, and the training of group therapists. Again, the basic material was presented by nonmedical therapists while the discussions remained in the hands of medical men. This time not only were several states represented but, in addition, a number of individuals from foreign countries—Turkey, England, Belgium, Holland, and others—attended.

In 1946, Slavson and his secretary prepared the first bibliography on group therapy, which was published by the Association. It included 140 listings, of which 105 had been published during the preceding five years, a clear indication of the burst of interest in group therapy during 1940-45. It is interesting that there was not one listing bearing the title "Group

Therapy" or "Group Psychotherapy" before 1934. There were titles such as "The Group Treatment of Dementia Praecox" (Lazell, 1921); "The Group Method of Analysis" (Burrow, 1927); "Brief Study in Trigant Burrow's Group on Phyletic Method of Behavior Analysis" (Gait, 1933). In 1931, Marsh published a paper entitled "Group Treatment of the Psychoses by the Psychological Equivalent of the Revival," but in 1935 his paper was entitled "Group Therapy and the Psychiatric Clinic."

Seventeen of the 105 papers listed in this early bibliography had been authored by Slavson. The next largest contributor was the late Paul Schilder with four papers, followed by Joshua Bierer of England, and Lawson G. Lowery with three papers each. The only book on the subject of group psychotherapy was Slavson's *An Introduction to Group Therapy*, published in 1942 and dealing with what later became known as "Activity Group Therapy."

In all, the A.G.T.A. issued 36 brochures. The second bibliography was prepared by Slavson, Emanuel Hallowitz, and the office secretary, No. 32 in the series of brochures, and was issued in 1950. An additional volume was compiled by Dr. Norman Locke. No further bibliographies have been issued since; instead, publications have been listed annually in the *Journal*.

In 1947 International Universities Press published *The Practice of Group Therapy*. This book, edited by Slavson and consisting mostly of papers delivered at the Conferences of the Association, was in three parts: "General Principles," "Activity Group Therapy," and "Interview Group Therapy." Dr. Nolan D. C. Lewis contributed an introduction, and the late noted psychoanalyst, J. H. W. Van Uphuijsen, wrote the last chapter, "Plan and Phantasy in Group Therapy." The book was available for purchase at a reduced price to A.G.T.A. members.

Beginning in January 1945, a "Bulletin," written, mimeographed, and mailed by Slavson, was issued periodically to the membership. The content was largely drawn from his vast correspondence and detailed activities in the field of group therapy in the United States and abroad, which were presented in a breezy style designed to keep interest going until a formal professional journal could be established.

The issue of membership qualifications created a minor crisis in the organization in the second year of its existence. One faction felt that requirements should be relaxed to include social group workers without psychiatric training, while another faction held that formal training in psychotherapy was a prerequisite to the practice of group therapy. At the

second annual business meeting, after intense discussion the matter was tabled. The issue again arose at the annual meeting in 1947. Dr. Burling, the incumbent president, strongly supported relaxation of standards, and the issue was referred to a committee which brought in a negative motion.

During the heated discussions on the floor of the annual meeting which ensued, Dr. Burling scribbled his resignation on a piece of Hotel New Yorker stationery and left the podium. The resignation, which he failed to sign in his haste and probably also anger, can be found in the book of minutes, along with an amplifying statement of his position. In the latter, he says: ". . . Last night the Dean of this Association told us there is no such thing as Group Therapy—there is only psychotherapy. If that is the majority opinion of the membership, it is dishonest to continue to use the present name of this Association. It should be named 'The Association for Multiple or Simultaneous Psychotherapy'. . . ." Dr. William M. Doody was elected by the Board, as was provided in the by-laws, to fill Burling's unexpired term.

Lawson Lowrey supported Burling, while Slavson, McCormick, Ackerman, Friend, and others were strongly against relaxation of standards. The latter prevailed, and the A.G.T.A. was more firmly committed than ever to its original membership qualifications, which included training in psychotherapy as a requisite.

The development of a training facility for group therapy was another issue of early concern to the organization. In January 1945, the membership confirmed the Executive Committee's decision to proceed with a training program. Because of postwar pressures, many agencies in the New York area could not release their staff for such training, however, and later it was decided that it was improper for a professional organization to conduct training of personnel. Slavson then formed a committee of agency executives and announced an extensive training seminar in Activity Group Therapy. Agencies from three states responded, New York, New Jersey, and Connecticut, and in 1945 he gave the seminar at the New York School of Social Work. The A.G.T.A. endorsed the seminar but did not sponsor it.

By 1947 enough money was available to vote the Secretary an honorarium of \$25.00 a month and to allocate \$500.00 for publication and mailing costs. Membership growth was steady. On December 1, 1947, there were 187 members, with 16 applications pending. The Association

had started four years earlier with 41 members and 19 pending applications.

IV. THE YEARS OF EXPANSION, 1948-1960

The cumulative effect of the preceding five years' activities became tangibly apparent in 1948 when an era of accelerated expansion set in which required administrative reorganization. This period saw also a sizable increase in membership, in activities, and in noteworthy accomplishments. Slavson's suggestion for setting up *local study groups* of practitioners to advance their knowledge and improve practice turned into regional and local affiliate societies. The first of these was the New York City group, which called itself "The Eastern Group Psychotherapy Society," with Dr. Max Rosenbaum as its president. By 1968, the affiliate societies numbered 15, in addition to five Latin American national societies and one Canadian society.

Regional and local representatives were added to the Membership Committee, and several years later, under the leadership of Dr. Milton M. Berger, they were added to the Board. The position of secretary was separated from that of treasurer in 1948, and a standing committee on Public Relations was formed. In 1949, several other committees were added to deal with the expanding affairs of the Association. Most were exploratory and *ad hoc*, not requiring constitutional changes. When a committee's work proved fruitful, the constitution was amended to make it a permanent standing committee.

The growth of the Association was reflected also in its professional sector. The 1948 Conference, for example, was extended to two full days. One day, Friday, was devoted to group psychotherapy in various institutions. Registration was limited to institutional staff only. Thirteen papers were presented during the morning and afternoon sessions. Friday evening and all day Saturday were given over to a general conference open to all professionals. Dr. S. H. Foulkes of London, England, whose visit to the United States was arranged by Slavson, opened the discussion at the Friday morning session and presented a paper at the evening session. Twenty-five presenters, chairmen, and discussants took part in the general sessions, among whom were Drs. Thomas A. C. Rennie, John A. Millet, Nolan D. C. Lewis, and S. Bernard Wortis.

Mr. Slavson, in his efforts to involve the psychoanalytic profession in

group therapy, arranged for Dr. Foulkes to address psychoanalytic societies in four cities on the eastern seaboard, including the New York Psychoanalytic Society. Because Dr. Foulkes was a training analyst of the London Society, he was granted the courtesy of appearing before these American groups.

The late Dr. Wilfred C. Hulse and Mr. Slavson attended the First World Conference on Mental Health held in London, also in 1948. The interest shown in group therapy there encouraged them to suggest a regular publication for the Association. Thus, the first suggestion for a journal was made that year. The suggestion was repeated twice more with no action taken until an *ad hoc* committee was appointed by President Loeser in 1949, consisting of Drs. Hulse and Peck and Mr. Slavson. After more than a year's inactivity of the Committee, Slavson single-handedly went to Prof. A. Kagan of the International Universities Press and consummated a five-year contract with the assistance of a lawyer, Joseph A. Leviné, a former pupil of Slavson who donated his services.

The journal, a quarterly which was named with the approval of the Editorial Committee, *The International Journal of Group Psychotherapy*, was to consist of 112 pages, later it increased to 124 pages. The membership ratified the contract at its general meeting in January 1951, and advanced the dues from \$5.00 to \$10.00 in partial defrayment of the cost of the annual subscription of \$6.00 to members. A ballot with a statement of the decision was mailed to the members as provided in the by-laws. A majority voted in favor. In a paper on the history of group psychotherapy presented at the Annual Conference in 1965, Slavson, speaking of the prematurity of organizing an association in 1943 and the inchoate nature of its membership, said in part:

The secondary gain from the publication of the Journal was the separation of the sheep from the goats. Although the various membership committees had been meticulous in rigidly applying membership qualifications to applicants seeking to join the Association, these qualifications of necessity could have been specific only as regards education and training. There were very few actual practitioners extant at the time to form an association of any effectiveness and the qualifications were limited to professional education in related professions, for it was not until 1964 that actual experience in group psychotherapy as a requirement for membership was imposed. Because of the earlier insufficiency of practice qualifications, the membership committees in preceding years had approved 450 members. However, when the

membership fee was raised from \$5.00 to \$10.00 to cover the cost of the *Journal*, no less than 193 individuals did not renew their affiliation. There was thus a loss of 41% of our then current membership.

The first issue of the *Journal* appeared in April of 1951. Dr. Charles G. McCormick was to be editor, but finding himself unable to undertake the task, withdrew his acceptance. Mr. Slavson stepped into the breach and prepared the first issue. He was then asked to continue the editorship of the publication and did so for ten years.

In 1953, a list of contributing editors from the U.S., and eight European countries, and Brazil was added. In 1959, after Slavson's 16 weeks of lecturing and teaching in seven European countries and the second International Congress on Group Psychotherapy in Zurich in 1957, 25 "corresponding editors" were added from as many countries on four continents. In most instances, they were the leading psychiatrists and psychotherapists in their respective countries. In 1961, Dr. Harris B. Peck succeeded Mr. Slavson as editor, the latter continuing in the capacity of "Consulting Editor." Between 1951 and 1960, Samuel B. Hadden served as chairman of the Editorial Board and later as "Advisory Editor."

The publication of the *Journal* and the change in the J.B.G. administration which deprived the Association of such services as meeting mailing costs brought financial strain to the Association. (Also, due to the increased work in connection with the *Journal*, the honorarium of the Association's secretary was raised to \$50 a month.) Some years before, unspent money had been deposited in a special "publications fund," which now consisted of \$500, and this sum was made available. Nonetheless, the fiscal needs were not completely met by this, and several members of the Board, including President Loeser, contributed \$100 each. This was repeated the second year of publication as well.

By 1954, the *Journal* was widely read. Its circulation increased, and it received professional acceptance as a scientific publication of high quality. It also attracted applicants for membership. The *Journal* seemed to give the Association a distinct identity and lift.

The year 1952 brought other changes. A constitutional amendment provided for a President-Elect, who would automatically assume the office of President upon the expiration of the incumbent's term; said President-Elect was to serve as a member *ex-officio* of all standing committees.

Before the end of 1952, incorporation was completed under the mem-

bership incorporation laws of the State of New York. At Hadden's suggestion the name was changed from the American Group Therapy Association to the American Group Psychotherapy Association, thus definitively acknowledging the Association's commitment to psychotherapy as contrasted to other uses of groups for helping people, which the previous title may have suggested, though not intended.

At the annual meeting in 1953, modifications in membership qualifications were recommended and approved; they became official constitutional amendments by subsequent mail vote. Principally, a category of "Associate Membership" without franchise was established. The issue of Associate Membership had been under consideration from the beginning. The question had been brought up again and again, referred to the Membership Committee, etc. Now, finally, the question was resolved. The dues were \$10.00 a year for both Full Members and Associates. The latter could be advanced later to full membership when they had met the requirements. Consequently, the new category provided an immediate source of additional income and a potential pool of additional Full Members. A "Fellowship Class" was added the following year to give recognition to those members who had made distinctive contributions to the field of group psychotherapy and to the Association.

Though there had been a Committee on Standards and Training as early as 1947, it was not until 1952, when Helen Durkin became Chairman, that the Committee really began to function. In October 1953, Dr. Durkin's Committee submitted a report which made the point that A.G.P.A. was neither a certifying nor qualifying association, but rather a membership association designed to advance the application of group psychotherapy. The Committee "recommends the adoption of these 'standards' for anybody interested in adequate training and for any organization that wants to provide a training program in group psychotherapy." The report then specifically outlined: "I. Qualifications for candidates for training, and II. Standards for training, including facilities, curricula, and supervision." However, after careful study and debate Item I of the Standards and Training report was adopted and Item II was tabled.

In the fall of 1954, a subcommittee of the Executive Committee, under the chairmanship of President-Elect Hugh Mullan, presented recommendations for the revision of the administrative structure of the Association, including an overhaul of the constitution. These recommendations

were designed to create a more effective organization, but they also seemed to reflect an attempt to open the Association to therapeutic ideologies markedly different from those (essentially of psychoanalytic orientation) that had guided the Association from its inception and that reflected the prevailing practices in the field in the U.S. and abroad. A comparatively small, highly vocal group of members which included President Mullan and Drs. Berger, Beukencamp, and Rosenbaum, were inclined to existentialist and "non-transferential" therapy. This schism in basic ideology of therapy generated extreme tension among those who carried the responsibility for guiding the Association. Although they continued to work together, this created many problems which came to a head some five years later.

The Conference programs kept pace with the growth of the membership and the prestige of the Association. The listing of the activities of the 1955 program, for example, filled six pages instead of three as in previous years. It was in 1955 that "Workshops" were introduced at the Annual Conferences. Four were held that year, dealing with "multiple therapists," "first session," "private practice," and "resistance."

The 1957 program grew to eight pages and three full days, January 10, 11, and 12, and was preceded by the "First Training Institute," an all-day small-group intensive educational experience. This proved a pivotal event in the life and growth of the Association. From modest beginnings the Institute has steadily grown under the ardent devotion to the project of Drs. Jay W. Fidler, Maurice E. Linden, and especially Milton M. Berger, who carried the full responsibility for the project. From an academic staff of 16 that first year, it grew to 44 in 1968. There were demurrals voiced at the name of "Training Institute" as misleading, and it was decided to omit the term "training." Thus, the Institute became known merely by the single word title.

With the years, an increasing number of medically trained psychotherapists presented original papers instead of serving as chairmen and discussants. In 1955, for example, of the 42 persons who led workshops and presented papers, 31 had the insignia of M.D. after their names. A similar number, 32, were among the presenters and leaders in 1956. The increase in the medical profession's interest in group psychotherapy, as well as much of the proliferation of the field, can be laid to the war years. Many physicians, as well as psychologists and social workers, in the armed forces were pressed into working with "battle fatigue" soldiers under the

supervision of trained psychiatrists. Many of them continued group practice upon their return to their home bases, becoming professional heads in social service agencies, child-guidance clinics, and hospitals, especially those that served war veterans, and thus expanding the operational field for group psychotherapy and enhancing community mental health.

In 1958, several new features were added to the pattern of the Conferences. The Institute was extended to two days; the first research seminar was held under the leadership of Dr. Frank; a dinner dance was held; and a panel discussion, led by Dr. Carmichael, Chairman of the Committee on Affiliate Societies, on the development, growth and programs of the affiliate A.G.P.A. organizations, was held. There were at that time six domestic affiliate societies and seven in the process of formation. The Argentine Association of Psychology and Group Psychotherapy was the lone foreign affiliate at that time and was the outgrowth of a series of meetings by Slavson with Latin American delegates to the First International Conference on Group Psychotherapy in 1954 in Toronto, with Dr. Seguin of Peru acting as interpreter.

If 1948 was the beginning of expansion of the Association, 1957 marked a period of explosiveness. There were a number of contributing circumstances and events. First and foremost was the fact that due to Mr. Slavson's retirement in 1956 from the J.B.G. after 22 years of affiliation, the Association was forced out of its material dependence on it. New quarters and new office staff had to be found. The records of that time show that Slavson approached several social service agencies and mental health clinics with no success. Quarters were then acquired at the Carnegie International Center as a subtenant of a mental health agency, and a part-time secretary was engaged. This greatly strained the resources of the Association. At the 1956 Conference dinner, Slavson privately left a check with Dr. Linden for \$250 on condition that it be matched by donations from the diners. Linden, in his inimitable manner, did better than that. He raised enough from the floor to make up a stake of more than \$1,100. The deficit for 1957 was estimated to be \$2,000 of a budget of \$4,500.

When the landlord-agency found it needed the space occupied by the A.G.P.A., President Mullan rented an office in the New York Academy of Medicine building in which the Association was quartered for a brief time. Finally, offices were located at the present location, 1790 Broadway,

in one small room, and after finding part-time secretarial help unsuitable, a full-time administrative secretary was engaged.

Having a separate office and especially the full-time services of staff made possible many activities that could not be undertaken as a sideline in a very busy office with only one secretary as was the case at the Jewish Board of Guardians. This was the main reason why the participation in the Conferences had remained invitational and the number of committees were held to a minimum, as were also their meetings. The functions of the committees were predominantly policy-making and project-planning, with implementation carried out by the J.B.G. staff. Certainly, an enterprise like the Institute with the vast amount of details involved for Dr. Berger and Dr. Fidler made full-time help essential. However, one cannot overlook the spirit of enterprise and originality in the promoters of this and other new projects that were instituted by the then new administration under the leadership of Dr. Hugh Mullan.

Dr. Max Rosenbaum, chairman of the Membership Committee, had succeeded in notably increasing the number who joined the Association largely, though not entirely, from the psychological profession. The popularity of the Institute, the more extensive promotional efforts, and the greater involvement of the committees, as well as the activities of the local and regional societies between the national Conferences, played a part in the numerical growth of the Association and its activities. All of this could not have been managed as an aside in the J.B.G. setting. Thus, the loss of the J.B.G. hospitality, which seemed at first a calamity, proved to be a boon. The *Journal*, as well, was of a significant value in attracting membership. Not only did its content bring to attention the scope and value of the practice, but it created an image of the Association of worthwhileness, solidity, and permanence.

As a result of the many contacts Dr. Hulse and Mr. Slavson had made in Europe and South America and the almost 12,000 pieces of the Association's publications mailed free of charge to almost 49 countries in the past years, Hulse and Slavson, with the cooperation of Dr. Stevenson, made plans for an International Conference on Group Psychotherapy for 1954 in association with the Third International Conference of the World Mental Health Association in Toronto, Canada. The program for it was published in the *International Journal of Group Psychotherapy* and included a printed announcement, but conflicts arose with the American Society for Psychotherapy and Psychodrama, which subverted the

plans, and to spare the W.M.H.A. embarrassment, a unified conference was arranged.

The events in 1954 presaged continuing difficulties in developing an international body representing group psychotherapy. There have continued to be conflicting theoretical ideologies as well as professional, organizational, and personal divergencies. Thus, although there are now group psychotherapy associations in many European and South American countries, they remain relatively out of touch with each other. The natural problems of communication have been compounded by the rapid growth of group methods and techniques in the United States which have developed with different emphases from some other countries.

In 1956, a revised set of by-laws were approved by mail vote and became effective March 1, 1956. These included five classes of membership (a) Members, (b) Fellows, (c) Associate Members, (d) Life Fellows and Life Members, (e) Honorary Fellows and Honorary Members. The governing body now became a Board of Directors with the following officers: President, President-Elect, Secretary, and Treasurer. The Vice-Presidency was dropped. Also on the Board were: the chairmen of standing committees, the retiring president for a two-year term, and elected members, the latter to exceed by four the number of nonelected members. The Executive Committee—consisting of the President, President-Elect, Secretary, Treasurer and any other members of the Association as designated by the Board—was to act for the Board between meetings.

In addition to the Executive Committee, the original four standing committees had been expanded into the following nine: Membership, Program, Institute, Budget and Finances, Publications, Research, Public Relations, International Aspects of Group Psychotherapy, Affiliate Local and Regional Societies and Affiliate Associations from countries in the Western Hemisphere other than the U.S. The Program Committee was to be responsible for the annual Conferences.

When the A.G.P.A. embarked upon the year 1960, it had its fourth paid Administrative Secretary in three years and was located in its third office since leaving J.B.G. and had evolved a somewhat overwhelming structure of many committees, paid personnel, and a publication of its own. All this required money and space to function, and coordination of its various activities. By 1960, the budget was ten times that of 1948 and was still in the process of trying to catch up with itself. Much work remained to be done in solving the deficit problem and in putting the ad-

ministrative pieces together so that the machinery would run smoothly and easily. That the organization survived and flourished was a tribute to the integrity of the founders of the Association in preserving the professional character of the still new method they had sponsored.

V. THE MATURING YEARS, 1960-1968

Only as a profession acquires some stable maturity can it tolerate and then actively promote the ferment of ideas. In fact, maturity of a profession may be roughly assessed by the degree of responsible interprofessional debate active in a profession. The years since 1960 reflect such growing maturity.

There has been a significant shift in the Association which perhaps is not unique to it but part of the larger ideological shift that has been occurring in the entire mental health field. Thus, in the early years of the Association, the discussion and writings of the leaders were concerned with the application of knowledge of human behavior gained from individual therapy to group settings. Much of the early disagreement focused on the priorities of attention to be given to the individual and to the group. Such debate has given way to larger concerns which involve the awareness of social systems and the interpersonal variables involved in mental health and mental illness. The early dichotomies between group therapy and individual therapy have yielded to new conceptual systems that embrace the whole social process of illness and treatment and the system of mental health care.

The early concerns of the pioneers in group therapy, which stressed the unique contributions of group therapy, have been replaced by a concern for the role and function of a variety of group treatment approaches that can be fitted into their appropriate place in the entire mental health enterprise and are suited to the specific pathological syndrome of each patient. This is not to say, however, that these facets were not recognized long before, almost in the early years of the movement. It was this recognition that was epitomized in the gradation and typing of groups as counselling, guidance, and psychotherapy. It was also early discovered that groups for particular patients can be total, parallel with individual treatment, or designed to taper off treatment. The bone of contention was, however, what constitutes the essence of psychotherapy.

The widening vistas of group psychotherapy, encompassing areas be-

yond clinical frontiers, were reflected in 1968 when the incumbent President, Clifford J. Sager, in an address to the Association, called attention to the social and political relevance of the lessons to be derived from group experiences and group theories. Further, Sager and the Board of Directors formally moved to set committees to work on relating the activities of the A.G.P.A. to related group methods and professional groups involved in group enterprises. In this connection, attention needs to be called to the symposium at the 1955 Conference on "Application of Principles of Group Psychotherapy to Education, Industry and Government," and to Slavson's (1956) chapter in *The Fields of Group Psychotherapy* entitled "(Group Psychotherapy) in Community Mental Health."

During the 1960's both the Annual Institutes and Conferences have grown in attendance and influence. Combined attendance now surpasses 1000 persons each year, with many non-A.G.P.A. members in attendance. After successful trials in Washington, San Francisco, and Chicago, a significant decision was reached in 1968 to hold two out of every three meetings outside New York.

Membership has grown steadily, with just about 2,200 members in 1970, an increase of nearly 900 in an eight-year period. In 1958 there were seven affiliate societies, ten in 1961, and 16 by 1970, plus six foreign affiliate associations. The affiliate societies have grown in strength and influence in the 1960's. Most of them are strong professional groups, conducting extensive training programs.

The affiliate societies have increasingly sought a voice in the executive affairs of the Association. Maurice Linden, President in 1960-61, invited the affiliate societies to participate in meetings of the Board of Directors with voice but not vote. A by-laws revision in 1961 established the policy that affiliate presidents would be "privileged to take part in discussion, serve as consultants, function in an advisory capacity, offer debate and information, and communicate the wishes of the local organizations."

Under the chairmanship of Milton M. Berger, the affiliate societies have come to play an important role in helping to decentralize the northeast hegemony of the Association and bring new national leadership to the fore. Each affiliate society now names a representative to the Affiliate Societies Committee; each affiliate society may also send its president to the regular meetings of the Board of Directors. The Association, by partial reimbursement of travel expenses, has encouraged this wide geographic representational voice in the affairs of the Association.

From the beginning, local and regional societies have struggled with the problem of membership. At times, they have pressed for the right to admit to membership colleagues not fully able to meet the requirements for membership of the parent Association, needing such members to have organizational strength and resources locally, they claimed, as well as wishing to share officially with local colleagues mutually useful knowledge. In a field proliferating in as wide and rapid a fashion as that of group therapy, the leaders of the Association felt it necessary to maintain a strong stand to block such efforts to weaken or undermine the basic requirements for membership in the Association.

The Board of Directors was constantly concerned throughout the years with the need to heighten the requirements for qualifications for membership in A.G.P.A. and its local and regional societies rather than to lower them. It was also engaged in encouraging the development of an increasing number of societies and centers which could offer adequate training in group psychotherapy to interested colleagues clamoring for such postgraduate training to meet the increasing demand for mental health services of all kinds on all levels in their communities.

On October 6, 1963, the A.G.P.A. Board of Directors at its regular meeting attempted to deal officially with this problem by communicating that only qualified members, associates, and fellows of the A.G.P.A. could be accepted as members of the local and regional societies but that "this does not preclude local and regional societies from developing auxiliaries, friends, or supporters." It was hoped that this suggestion, which had, in fact, been developed by some local groups, would allow nonqualified professionals to remain involved with an affiliate society and to be invited to attend some of the affiliate's professional meetings and training experiences while not being members or having voice or vote in the affairs of any official A.G.P.A. local or regional society. This statement was officially made after years of difficulties arising from the fact that locals and regionals, either knowingly or unknowingly, wittingly or unwittingly, had somehow managed to have on their roster of membership people who were not members of the A.G.P.A.

The question of membership has been complicated by the fact that increasing numbers of professionals are using group skills, such as educators, nurses, ministers, probation and parole workers, etc., not directly related to treatment *per se*. Further, the development of community mental health programs has spawned utilization of nonprofessionals and

indigenous mental health and social rehabilitation workers. These persons are frequently being trained in group skills and techniques, just as nonprofessional mental hospital aides are now assuming responsibility for conducting groups in many hospital settings. The A.G.P.A. began as an interest group for persons who, by training and profession, were potentially equipped to practice group psychotherapy, but as professionalization has accrued, it has moved conspicuously toward becoming a competency organization. This was a matter of much debate over the years. But in 1968 the matter was finally brought to a forthright decision that, thereafter, the A.G.P.A. would define itself as a professional competency organization.

Another significant development in the 1960's was the recognition of the importance of sophisticated research. The work of the Association up to this point had been almost entirely clinical. The gap was large between the clinical level of reporting, typical of group therapy literature, and the sophisticated methodological designs and statistics that the academic disciplines studying groups had developed. In the 1960's, a Research Committee was appointed, and it assumed an active interest in both sponsoring and stimulating research interest among the membership. In 1965, a research section was inaugurated at the annual Institute, which has been a regular feature of the Institute since. Many younger group therapists have received training in research, and with the development of ideological openness, there is increasing research interest and support from within the A.G.P.A. The *Journal* and the scientific meetings have been the forum for the critical examination of research problems and applications necessary to move the clinical procedures of group therapy into the arena of a scientific profession.

The history of a movement is the history of ideas, of men, and of organizations. Group psychotherapy, as a movement, is part of a larger intellectual and social development: the growing awareness, interest, and concern for the nature and function of human groups. As such, not all of the intellectual and social concerns of the "group movement" have been of concern to the clinicians who have developed group therapy. Hence, there has been a not unexpected gap between the conceptual base used by group therapists and the conceptual base used by researchers and theoreticians of group behavior. The conceptual interests of the pioneers of group therapy were naturally toward the establishment of a sound theoretical basis for the practice of group therapy, and there was little

time, or impetus, to relate developing theories of group therapy to other scientific theories of group behavior. However, now that group therapy has become well established, conceptual interests appear to be shifting in the direction of building bridges toward related scientific group theories and data.

Among the early founders of A.G.P.A., some sought a broader base of theory and practice, some sought a narrower base. The latter carried the day in the early days of the organization. This may have provided strength then, but it also became an issue of contention among some of the members. In the end, the proponents of conceptual openness and more eclectic approaches to the theory and practice of group treatment appear to have obtained the support of the membership and administrative leadership without imperiling the basic clinical foundation and services of group psychotherapy *as therapy*.

Although the A.G.P.A. was steered in its early years by a group of professionals with strong feelings and ideological commitments, the strength and influence of the organization has come from its capacity to grow into an organization involving group therapists of diverse persuasion. It is a reflection of professional growth that the A.G.P.A. has moved in the direction of becoming an organization that looks toward being representative of all those professionals working in mental health disciplines related to group therapy and practice.

As an organization, the A.G.P.A. is a relatively young professional group. One of its organizational strains has been its, for a time, interdisciplinary nature. Of course, this has also been one of its strengths and a major contribution to professional dialogue and development. As an interest group, the organization could have opted for expanding its base in terms of interest rather than competency. However, the concern for competency was present from the inception of the organization and has influenced all discussions regarding membership. Although the decision has been made to define the A.G.P.A. as a competency organization solely, there will be further issues of professional jurisdiction, certification, etc., which will have to be resolved.

As an organization, the A.G.P.A. and its *Journal* currently represent the major professional identification of group therapeutic practice in the world. It has moved toward a position of leadership in the field. However, the Association faces a number of organizational, professional, and scientific issues to be dealt with in the future. Among these are:

1. The problems of membership. Can all mental health professionals concerned with group treatment methods find adequate representation in one professional organization?
2. The method, content, and context of training. How can training standards be established and incorporated by the various mental health professions? The A.G.P.A. is just now publishing a suggested set of standards that could be basic for all disciplines.
3. Can an adequate research base be established for the investigation of clinical group treatment and for laboratory related research on groups? Is group psychotherapy, in its very nature, susceptible to any research techniques in view of the numerous personality and unratinal factors involved?
4. How can a broader theoretical base for group treatment be established? In part, this issue relates to the broader issues of the theory of psychotherapy, but there are also widely divergent theoretical approaches to group treatment at the present time.
5. How can an interdisciplinary organization develop a flexible base for its function as a competency certifying organization that relates to several different mental health professions, each with its own ongoing changes in standards and practice?

Looking back over twenty-five years of development, the A.G.P.A. has grown into a major professional organization. It bears the responsibility in the United States, and to a considerable degree worldwide, as the particular organizational representative of group psychotherapy theory and practice. The organization has grown from a small interest group to a major professional body which is now faced with the establishment of liaisons with other major mental health professional bodies. The process of professionalization of group psychotherapy as a professional identity has marked the sociological development of the organization. This professionalization has not been total or complete, nor may it become so. However, one of the interesting questions for the future will be the consequences of professionalization of group therapy.

In conclusion, the inception, growth, and current status of the A.G.P.A. may be seen as a reflection of the whole field of group psychotherapy. As an organization, the A.G.P.A. has played a major role in the clinical and theoretical development of group psychotherapy.

OFFICERS of the A.G.P.A.: 1943-68

President

1945-46 S. R. Slavson
1947 Temple Burling, M.D.
1948 William M. Moody, M.D.
1949-50 Samuel B. Hadden, M.D.
1951-52 Lewis H. Loeser, M.D.
1953-54 Lewis H. Loeser, M.D.
1955-56 Donald M. Carmichael, M.D.

1957-58 Hugh Mullan, M.D.
1959-60 Nathan Beckenstein, M.D.
1961-62 Maurice E. Linden, M.D.
1963-64 Milton M. Berger, M.D.
1965-66 Donald A. Shaskan, M.D.
1967-68 Aaron Stein, M.D.

Vice-President

Lawson G. Lowrey, M.D.
Anna Kempshall
Anna Kempshall
Helen E. Durkin, Ph.D.
Margaret Naumberg
Grace M. Abbate, M.D.

President-Elect

Hugh Mullan, M.D.
Nathan Beckenstein, M.D.
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Milton M. Berger, M.D.
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Aaron Stein, M.D.
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Arlene Wolberg, Ph.D.
Glen Bowles, Ph.D.
Helen Papanek, M.D.
Emanuel Hallowitz
Emanuel Hallowitz
Jean Munzer, M.D., Ph.D.

REFERENCES

- Amster, F. (1944), Collective Psychotherapy of Mothers of Emotionally Disturbed Children. *Amer. J. Orthopsychiat.*, 14:44-52.
- Gabriel, B. (1939), An Experiment in Group Treatment. *Amer. J. Orthopsychiat.*, 9:146-169.
- Hadden, S. B. (1942), Treatment of Neuroses by the Class Method. *Ann. Intern. Med.*, ——— (1944), Group Psychotherapy. *Amer. J. Psychiat.*, 101:68-72.
- Slavson, S. R. (ed.) (1956), *The Fields of Group Psychotherapy*. New York: International Universities Press.
- (1959), Parallelisms in the Development of Group Psychotherapy. *This Journal*, 9:451-462.