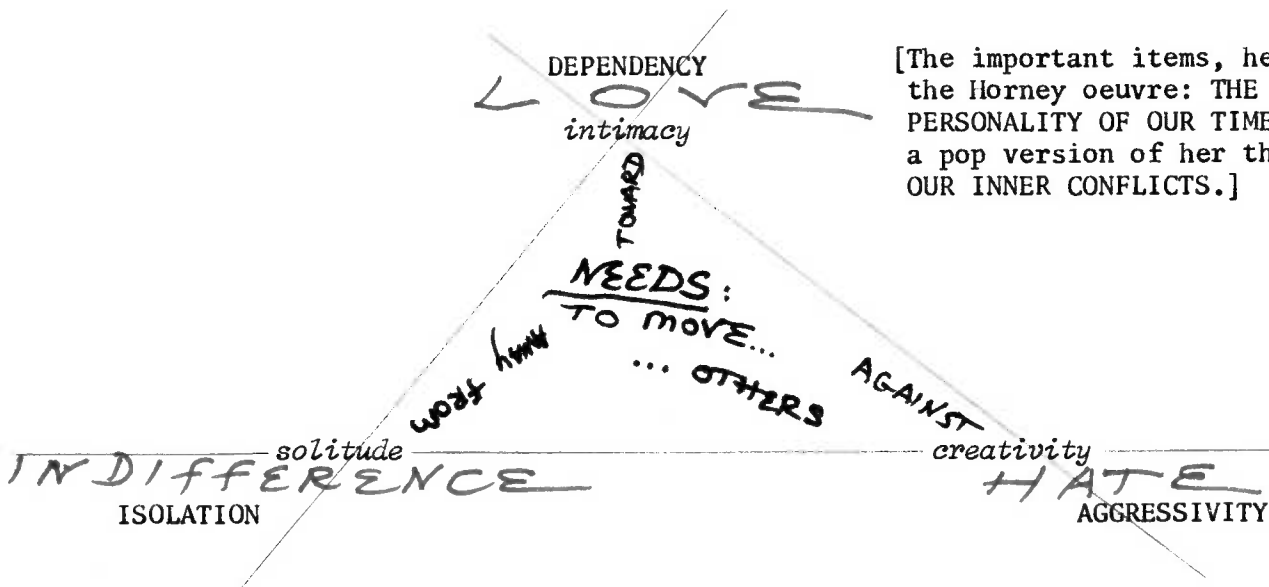


This thinksheet adapts Karen Horney's individual psychology to an aspect of social psychology, viz. group therapy in the sense of the therapy of groups: how to help sick groups get well without calling in a socio-physician. Of course the tagline of medicine ads applies: "In case of doubt, see your doctor." I'm not against asking in the outside expert, though I'm against dependency, which is just another illness; rather, what I'm for is *helping groups learn to use simple processes of self-education and self-therapy, taking charge of their own existence in matters of their own health and wholeness.* In particular, I'm concerned about this for local-church groups (council, boards, committees), whose financial resources are inadequate to the calling in of the outside observer-therapist.

Now, Horney's branch of the dynamic-cultural school of psychoanalysis [the other being H.S. Sullivan's "significant other"] sees neurosis not as bio-based but as socio-based: environmental-cultural factors are the place to look in both diagnosis and cure--a therapy more useful to the Christian social-action perspective than are the individual-biologic therapies. I find very useful her three personality-types, oriented as they are (and as the Bible is) to action: moving toward/against/away from others. The words I've used on the simple diagram below are a mix of hers and mine, but the dynamic is wholly conformable to her understanding. The diagram applies both to individuals and groups; and I've found it illumining and helpful with both.



For individuals and groups, the neurotic positions are the extensions *beyond* the triangle: *within* it, as represented by the internal angles, are individual-and-therefore-group basic human needs. NYT recently had a one-page by the present director of the Horney Inst., a woman who specializes in therapy for executive women; her point was that executive women have difficulty getting their dependency (here, intimacy) needs met because they associate this not with health but with sexist sickness and therefore are, to this extent, macho, i.e. have taken on the hypermasculine neurosis.

GUIDING QUESTIONS for groups to use in connection with this diagram might be: (1) *Is our group now fluid, free-flowing in relation to each member's need for stroking, for affirmation as a human being-in-relationship?* (2) *Does the group grant freedom to each member to stand apart, on issues, from the general orientation of the group?* (3) *When a member so presses something that conflict arises, does the group deal with/deflate the conflict?* (4) *When the group has failed to deal creatively with conflict, is the next step the expulsion of a member or members, or the institution of processes of reconciliation?*