Balint Groups: Definitions and User’s Guide

History and Purpose:
- format invented last century by Michael and Enid Balint
- gives physicians the chance to think out loud with colleagues
  about thorny or complex treatment relationships

Necessary Elements:
- professional role, leading to development of a professional self;
- ongoing relationships with power/responsibility imbalances;
- confidentiality: what’s said in Balint stays in Balint;
- mutual respect among members – if I hear something I would
  “never” do, I try to imagine how/when I possibly could do it;
- taking turns – tolerating silences to allow divergent thinking to
  develop
- steadiness in membership and meetings (results are dose
  dependent).

Format:
- a leader asks “Who’s got a case?
- a typical or problematic interaction with a specific patient is
  presented; this should not be pre-planned.
- the members ask clarifying questions just to fill in blanks where
  possible;
- the presenter ‘steps back’
- the group ‘takes’ the case and begins tackles relational questions;
- What is it like to be this provider?
- What is it like to be this patient?
- What is going on in this provider/patient relationship?

Results:
- lower sense of isolation
- higher job satisfaction;
- lower burnout risk
- improved provider-patient relationships.