

# Where The Wild Things Are: The Power and Challenge of Adolescent Group Work

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## Abstract

Because groups are an intrinsic part of the adolescent's life, group therapy can be a powerful and effective treatment modality for them. However, it poses many challenges to group leaders and members alike. This paper, drawing on Maurice Sendak's well-known and beloved picture book *Where the Wild Things Are*, describes some of the issues involved in setting up groups for adolescents as well as how various developmental tasks of this age group appear in the group process. Clinical examples are utilized to illustrate the challenges and therapeutic efficacy of such groups.

**Key Words:** Adolescents, group therapy.

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THE ADOLESCENT PEER GROUP serves a crucial role in the developmental tasks of this age group. Such tasks include: formation of identity, promotion and enhancement of self-esteem, incorporation of bodily changes into one's self-image, the development of intimacy, and separation from the family. The peer group also offers a refuge—there is safety in numbers. The universalizing aspect of the group—"we are all going through this together"—can be quite comforting. This natural propensity for group affiliation, together with adolescents' strong need to detach from the adults around them, makes group therapy a practical and sensible treatment modality for this age group. This paper describes the manifestation of these and other issues, utilizing a popular picture book to illustrate the themes of adolescent group work.

Max, the protagonist of Maurice Sendak's (1) classic picture book *Where the Wild Things Are*, is drawn to look like a child. Yet in many respects he behaves like the quintessential adolescent. He is oppositional and aggressive, in-

dulges in regressive fantasy, adopts various identities, joins a peer group of like-minded individuals, and eventually comes to some resolution regarding issues of autonomy and independence. So, with apologies and gratitude to Maurice Sendak and Ellen Handler Spitz, a psychoanalytic art historian whose work (along with that of writers on both group and adolescent development) I will draw upon, I would like to examine Max and his cohorts through the lens of issues that arise during adolescent group work, together with their implications for treatment utilizing this modality.

For those readers unfamiliar with the story, I will summarize the plot. Max, while dressed up in a wolf suit, is mischievous and oppositional at home. His mother, whom incidentally we never see—her invisibility signifying her representation as archetypal "caretaker"—angrily calls him "wild thing." Max, furious, vows to "eat her up." She, in turn, sends him to his room without dinner. While in his room, Max envisions a forest and then an ocean, upon which he pilots his own private boat to a land where he meets large creatures (called "wild things") who are simultaneously threatening and humorous. They crown him king, and the group engages in a wild party, or "rumpus." Max then orders them to stop and sends the wild things to bed without their supper. An aroma of delicious food suddenly reminds Max that he is lonely for home, and he relinquishes

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his kingship, sails back home, back to his bedroom, where his supper is waiting for him, still hot.

The story opens with Max wearing a wolf suit, engaging in acts of aggression. He is defiant of the rules—he stands impudently on a book while destroying property (hammering a nail in the wall) and engages in an act of potential aggression (chasing the dog with a fork). I would suggest that Max's wolf suit represents his attempt at trial identification, an endeavor that many writers on adolescence such as Blos (2), Sullivan (3), and Erikson (4) discuss. Let me add parenthetically that for many years I had a poster of "Max and the Wild Things" hanging in my office, and I never ceased to be amazed by the response to it: nearly everyone who came into my office commented on it, from staff to child and adolescent patients—a population that cut across several cultures and ethnicities. I mention this because I think it speaks to the universal power of identification with aspects of this story. Max is, in essence, trying on a new identity in an effort to make it his own and integrate aspects of the "wolf" into his self-representation. The trial identifications in the story, as represented by the wolf suit, include aspects of identity from all developmental levels. Note that the wolf suit also looks suspiciously like pajamas, suggesting regressive, childlike tendencies. Note also the oral themes suggested by the notion of a wolf, as in *Little Red Riding Hood*, as well as Max's retort "I'll eat you up." And finally, one could argue, as Ellen Spitz does in her brilliant exposition of the story (5), that the pointed ears, extended claws and long tail may represent phallic appendages, suggesting the advent of sexuality—a theme quite relevant to adolescent group work. Spitz also perceptively notes the "wolflike" self-portrait of Max hanging in the hallway, which further gives credence to this notion of trial identifications and identity, including aspects of sexual identity. Spitz writes, "On the wall hangs a drawing by, and by implication a self-representation of, Max as an oral sadistic monster, bi-sexual, with plenty of teeth and hair (including a beard), eyes [that look] like breasts and a horn as a displaced phallus" (5).

These various aspects and levels of identity speak to the fluidity of developmental levels exhibited by adolescents, which can make the transference-countertransference matrix in adolescent groups quite a challenge. Thus, in one group, the group may engage in some abstract

formal operational (to use one of Piaget's terms) discussion of moral principles, and in the very same session become regressed, rowdy, disorganized, and difficult to manage when discussing sex, while at the same time indignantly informing the group leader that the choice of food for snack leaves much to be desired. One day, a group at our center artfully arranged the food in sexually explicit imagery, in a manner designed to provoke the group leaders. A group therapist may thus alternately feel rewarded and gratified by the level of discussion, and frustrated and helpless at the rowdy, regressive behavior around him.

On the other hand, Yalom (6) and Sullivan (3), among others, have discussed how these trial identifications can be used for therapeutic gain in groups, as members begin to define who they are and who they are not, in contrast, similarity and opposition to the other group members and the leaders. Max's actions also represent behaviors characteristic of the early stages of adolescent groups. Most writers on adolescent group work describe the issues of power and control in the initial phases of group therapy, as members and therapists struggle to establish limits, boundaries, social hierarchy. This jostling of members may lead to transference enactments of defiance of authority, challenging the limits, as well as steps toward destroying the fabric of the group (or even what may feel to the therapists as attempts to destroy them). For example, two of our therapists at the Adolescent Health Center began a group for adolescent young men struggling with issues of acceptance of sexual identity by themselves and others. One group member, C., who was an accomplished musician, a good student, and very articulate, showed up at the second group meeting noticeably intoxicated, a state that he proudly and defiantly announced to the group, a behavior which appeared to be a clear challenge to the group leaders and group. The group leaders, like Max's mother, felt that it was necessary to set a clear limit regarding this behavior. In the story, Max's mother calls him a "wild thing" in her attempt to contain his aggression. He retaliates, like many adolescents, with further aggression, threatening to "eat her up." In the adolescent group, C. did not take the limit setting around his substance use well. He became angry, threatened not to return to group, and on the weekend following the group meeting, hosted an "orgy" for the other group members at his home, in clear defiance of the group leaders/transference figures.

People often ask which characteristics are necessary for an adolescent group therapist. In addition to a very healthy sense of humor, the ability to provide consistency, stability, and constancy in the face of provocation and aggression is critical. There is a recurring image throughout Sendak's book (and many other picture books, such as *Goodnight Moon*) (7)—that of the moon. Here, too, I quote Ellen Spitz: "Clearly, the moon figures in part as maternal symbol, not only because of its roundness, suggestive of the breast, but also perhaps because of its repetitive cycles: like the [caretaker], the moon disappears gradually and predictably reappears—changing shape but always recognizable. Illuminating the darkness, it again, like the [ideal] mother, serves as a beacon in the frightening realm [of the dark] unknown" (8). The appearance of the moon throughout Sendak's story suggests that regardless of the extent of Max's anger and aggression, his mother/caretaker will remain a constant presence in his life. This is something that August Aichhorn (9), a pioneer in adolescent group work, stressed as critical to group work with adolescents—the ability to contain aggression in a secure yet nonpunitive manner, while concurrently providing the reassurance that the group therapist will not be deterred (or destroyed) by the aggression. Winnicott (10), too, stresses the importance of constancy as well as the ability to withstand aggression as critical to providing a safe and nurturing environment for the infant, which in turn promotes development and differentiation of a cohesive self. Admittedly, this is no easy task, but one that is an ever-present challenge in adolescent group work.

Max, in the safety of his comfortable, secure, familiar bedroom, begins to imagine that the walls are falling away, and he enters a forest-like world with an ocean. Soon he becomes the captain of his own ship and sails away. Another critical task for the adolescent group therapist is to co-create together with the group a safe, secure space, not unlike Saul Scheidlinger's description of "the mother group" (11) or Winnicott's "holding environment" (10), in which issues, feelings, fantasies, hopes, and dreams can be explored. Within the secure confines of the group (not unlike the safety of Max's bedroom), as they enter the middle "working" phases of group development (12), members can begin to safely express difficult feelings. They can even regress, while also trying to learn how to "captain their own ships,"

that is, achieving some degree of separation and autonomy. Max is able to do just this in the secure confines of his room. In a group for HIV-positive adolescents, this might entail creating a safe enough space so that secret fears of mortality or rage at partners or parents who may have infected them can be shared; or in a group for rape survivors, allowing an adolescent girl to elaborate her revenge fantasies toward the man who had raped her, resulting in her not acting on such fantasies, and beginning to piece together and integrate the fragments of her horrific experience.

After his journey, Max comes face to face with the "wild things," who in many ways represent a peer group for him. The adolescent peer group serves a critical role in development—it promotes social/interpersonal learning, can help with self-esteem enhancement, and as writers such as John Meeks (12) and Peter Blos (2) point out, fills the vacuum created as the adolescent pulls away from his/her family of origin. A study of any junior or senior high school shows that adolescents find safety in numbers and that this developmentally syn- tonic propensity for group affiliation can make group therapy a truly powerful modality for this age group.

The wild things are tamed when Max stares into their eyes without blinking, and they ultimately cede leadership to him. In most adolescent groups, there will be challenges to the therapist (hopefully not in the form of wild things), perhaps in the form of provocative questions about the therapist's personal life, or challenges to the therapist's authority. Thus, the group may besiege the therapist with questions about the therapist's sex life, or threaten to destroy objects in the group room. Max's confrontation with the wild things can teach us that aggression must be confronted, unblinkingly so to speak. This serves to reassure the adolescent group that the leader is not intimidated by the group's aggression and can and will confront it, in the form of verbal intervention and limit setting. It also means that the group leader works hard not to personalize the provocations, but rather sees them as transference manifestations. Adolescents are curious, seeking identificatory figures. Their questions and interrogations of the group leader may serve multiple purposes: to throw off the leader, to provide the leader with the experience the adolescents themselves may have of feeling off-balance in the world, to defy the leader's authority and in this way enact their efforts at separation, as well as to discover

just who this adult is who is running their group.

Max's taming of and acceptance by the wild things also serves to link Max with the creatures, suggesting yet another critical factor in successful adolescent group work—cohesion and the fostering of universality. The adolescent group therapist may not need “magic” to do this. Rather than staring into anyone's eyes, simple questions and comments that serve to create bonds and highlight commonalities among members can be just as useful. Universality, one of Yalom's (6) therapeutic factors for all groups, involves the understanding by all members that they are not alone, but share similar situations and predicaments. This can be a powerful tool in fostering a transference to the group and seeing the group as an agent of change. In one group I ran for adolescent girls whose parents were dying or had died of AIDS, the immediate commonality was obvious (14). Yet, these girls found other ways to develop cohesion and universality. From the start, they shared stories of visiting their parents in the hospital, and compared notes about whom they considered better caretakers—nurses, or doctors, residents and interns or attendings. The girls whose parents had died discussed the cemeteries in which their parents were buried. I was rather shocked by their candor, but kept quiet as I realized this was their way of connecting with each other. Ultimately, powerful bonds were forged between them, leading to a cohesive group.

Once cohesion is established, the group is free to “play” and explore issues. “Let the wild rumpus start,” cries Max. And what does this wild rumpus entail? First and foremost, Max and his friends howl at the moon. Bearing in mind Spitz's (8) interpretation of the symbolic meaning of the moon, this has importance for adolescent groups, in particular for the transference toward the group leader. It signifies a challenging of authority (the moon as caretaker), which of course is crucial to adolescents' ability to develop a sense of who they are in relation to prevailing authority and which aspects of such figures they will choose to incorporate and which they will reject, as writers such as Blos (2), Anna Freud (15), and Erikson (4) note. So, you may think of yourself as the nicest, most understanding group leader on the face of the earth, but there's no guarantee that the members of your adolescent group won't use the opportunity to “howl” at you. Again, it is important to understand this as a manifestation

of transference, not personalize it, and deal with it in a therapeutic manner. It seems significant that in Sendak's book we never see the mother—she remains off-stage, a transference figure whose actual physical appearance or characteristics are not as important as Max's reactions to her.

Then, Max and friends quite literally “hang,” from the trees, that is. The relational aspect of the group is not to be underestimated, as Carol Gilligan (16) and others have shown us. Billie Corder (17), in her research on adolescent groups, found that adolescents rated the interpersonal learning aspect of group as highly therapeutic and beneficial. Adolescents use the group to learn how to function—with others and with themselves—and thus can learn to develop intimacy. In many of the groups we run at the Adolescent Health Center, we have found that the group members carry the group beyond the walls of the clinic. For example, in one group for adolescents who had lost a parent to HIV/AIDS, members began to meet at the subway and walk together to the clinic. Then, following the session, they waited for each other and walked as a group to the subway station. Now, there are those who forbid social contact by group members outside of group. But at the Adolescent Health Center, the group leaders and I felt this behavior was representative of the group's cohesion and that it signified the development of empathy, as some members waited behind for stragglers—both therapeutic gains. The relational aspect of group, together with the number of participants, also permits a multiplicity of identifications and transferences. Group members can “try on” different roles and identifications as they watch and observe all the group members, leaders included. Being the focus of such intense scrutiny and observation can understandably make some adolescent group therapists uncomfortable. Nevertheless, the mutuality and reciprocity inherent in such interactions is an important therapeutic aspect of group work, as adolescents and group leaders learn about themselves and from each other.

The last picture of the wild rumpus depicts Max riding one of the wild things. This may suggest that he has learned how to bridle his aggression, and perhaps how to use it effectively and adaptively. This picture is reminiscent of Freud's famous image (18, p. 18): “In its relation to the id [the ego] is like a man on horseback, who has to hold in check the superior strength of the horse.... the analogy may be carried a little further. Often, a rider, if he is not to

be parted from his horse, is obliged to guide it where it wants to go....” Thus, the wild rumpus serves for Max as an arena in which he may experiment or play with his aggression, self-assertion, and independence and perhaps best determine how and in what ways he may use this potentially powerful resource. In fact, Billie Corder’s research also indicates that adolescents value groups that teach them how to solve problems through role playing as well as how to learn positive and responsible methods of self-assertion. I would suggest that learning how to channel one’s aggression and understand the consequences of one’s behavior is an important goal for most members of adolescent groups and one that is hinted at in the picture.

Then, Max shows us his attempt at yet another identification. He orders the wild things to stop and sends them off to bed without their supper. Sounds suspiciously familiar, no? It seems to represent Max’s attempt at identification with his mother who, earlier in the book, had sent him off to bed without his supper. The smell of “good things to eat” (from his home “far away”) makes Max yearn for home. This, too, is suggestive of the adolescent’s maddening push-pull, approach-avoidance stance toward adults. The very same Max who had wanted to sail millions of miles away from his family, now wants to return. In treatment, the adolescent group therapist must be prepared for the members’ attempts to be simultaneously close to and separate from the therapist, a phenomenon most famously described by Peter Blos (2). In a group in an adolescent day treatment program, one group member (who was also in individual treatment with me) proceeded to sit next to me and place a paper towel on his head in an effort to both imitate me and mock me (and the yarmulke I wear), indicating a wish to both identify and connect with me, and anger me and drive me away with his provocation. Of course, how the therapist responds to such efforts toward separation-individuation as well as attachment will also determine aspects of the transference-countertransference relationship.

Max, in his decision to return home, relinquishes his kingship. If the adolescent group is to come to terms with their own limits, mortality, and identities, they must relinquish the narcissistic omnipotence and grandiosity that may characterize their interactions. According to Pumpian-Mindlin (19), the creativity and energy that accompanies the adolescent’s grandiosity and sense of omnipotence needs to be harnessed and used constructively in the

adolescent’s life. It is important that the adolescent group retain access to the drive, intensity and passion that characterize this developmental period, while beginning to accept limitations, both external and internal. It is equally important that the adolescent group therapist enable them to do just that. Unfortunately, the energy, drive and sense of omnipotence of the adolescent group can pose a significant countertransference challenge for the group leader. It is easy for the adult group leader to devalue or dismiss adolescent behavior as just that—“adolescent”—in part because it arouses in us unresolved feelings about our own adolescence and our own unresolved strivings for omnipotence. The fact is, adolescents are potent, vital and extremely physical, and their youth and exuberance can disturb the group leader, who must be careful not to fall into an enactment, dampening the group’s enthusiasm, (much as a parent, teacher or other authority figure would). The adolescent group’s zeal and energy, in other words, needs to be handled with respect.

Max takes leave of the group of wild things and they protest, “Oh, please don’t go—we’ll eat you up—we love you so,” to which Max replies, “No!” Max, who was king of the wild things, co-conspirator of the wild rumpus, is now in danger of being eaten up by the same peers who cavorted with him a few pages earlier. This seems to be an illustration of the number and fluidity of roles in any given group, an aspect of groups that Fritz Redl (20) has described in great detail. A close examination of any group will uncover any number of roles taken on by group members, such as clown, monopolizer, leader’s assistant, and scapegoat. Knowing who’s who in a group can be an important source of information and help determine the leader’s interventions, although there is no guarantee that the roles won’t change, and quickly at that. Each group role usually reflects both the individual’s and group’s needs to enact that particular role. Thus, in one group of early adolescent boys, one group member was consistently regressed, disruptive, burping, farting, fidgeting, and interrupting others while they were speaking, and often running around the group room. The rest of the group seemed to organize around complaining about this boy’s behavior and criticizing him for being so “immature and babyish.” This boy clearly had individual predispositions toward behaving in an immature and regressed fashion and being picked on, thus receiving negative attention and re-priming, but it also served a purpose for the

rest of the group—it allowed them to distance themselves from their own wishes to engage in regressive behavior and, in addition, gave them the morally superior hand. So the role served both individual and group needs, and had to be addressed on both levels.

Regarding scapegoating, Saul Scheidlinger described it in his classic article (11, p. 107) as “a group phenomenon as old as human history.” It is a phenomenon that “entails simultaneous behavioral components from the individual-intrapsychic, the interpersonal, and the group-as-a-whole frames of reference.” It is a defensive group maneuver, designed to help the group deal with unacceptable, and perhaps intolerable, feelings. Thus, in a group run for HIV-positive adolescents, S., a 17-year-old perinatally infected girl, was often ignored and her comments dismissed. In fact, partly due to her history of trauma and abandonment as well as her frail, diminutive physical appearance, she presented in a childlike fashion, and in this sense was quite different and “other” from some of the more streetwise, savvy adolescents who had been infected through sex. Also of note were her frequent hospitalizations and near-death encounter with pneumonia the previous year. What I believe the group had trouble dealing with was S.’s fragility and childlike, innocent demeanor, in addition to the precarious state of her health, which served as a constant reminder to the group of their own mortality and sense of “there but for the grace of God go I.” S., then, had to be excluded, as the thoughts, feelings and fantasies stirred by her presence were too threatening to young people coping with a life-threatening illness. I should add that the group therapists, following Saul Scheidlinger’s caveats, administered “psychological first-aid,” that is, they intervened, and eventually the group members were able to discuss their own fears that were triggered by S.’s health and presence.

Perhaps Max is resisting being thrust into the role of scapegoat when he says “No.” Rene Spitz (21) suggests that the exclamation “no” is an assertion of self and a step toward separation and the ability to define one’s self, one’s own wishes, desires, likes and dislikes, and express them clearly and forcefully to another. Max’s experience in the group, as it were, allows him to decide what it is he wants and doesn’t want. Then he begins the termination process, or final phase of group involvement, by stepping into his private boat and waving goodbye to the wild things.

The termination phase of adolescent therapy groups occurs when the adolescents, and their leader, begin to acknowledge that the group must come to an end. It is often characterized by sadness and mourning. Martha Wolfenstein (22), in her work on bereavement, describes adolescence itself as a trial period of mourning, as the adolescent must learn to relinquish his/her ties to childhood and parents; in essence, it is a loss of childhood and all that it entails. In this termination phase, the members may wax nostalgic over the events of the group. They may also regress, in an effort to recapture the early days of the group. But ultimately, they must be helped to separate and step into their own “private boats” to sail on with their lives. In the groups we run at the Adolescent Health Center, we try to mark each group’s ending with some event or gesture signifying the ending. Thus, for one group for adolescents who had lost a parent to HIV/AIDS, the end of the year was marked by each adolescent designing and creating a panel that honored and commemorated the deceased family member for the national AIDS quilt. In a group for adolescent girls questioning their sexuality, the end of the group meant a special dinner celebration and a trip to a local gay and lesbian center where they could receive additional information and services, and establish linkages to the greater lesbian community.

Max travels back home, to his “very own room,” where he finds his supper waiting for him, and Sendak ends the book with the telling phrase, “and it was still hot.” In the final picture, once again, the moon (symbolic of the caretaker) is full and prominent. Despite all of Max’s anger and provocation, his mother remains a constant, illuminating presence in his life. She shows Max that she can and will withstand his attacks, or as Winnicott lists as the final rule of treatment (19): “The analyst survives.” The sight of the familiar, constant, reassuring moon as well as the hot food (with its implications of warmth and nurturance) make Max smile and, not insignificantly, he begins to remove the wolf suit. Among other things, this can suggest the importance of both the adolescent group leader and the group members themselves being able to survive the anxieties, the group process and the inevitable separation. As Ellen Spitz points out, “On the last page, there is no picture... [just the] words... ‘and it was still hot’.... Love is ongoing and warm; it occurs in the intersubjective realm of language and consensual reality” (5, p. 445). But whatever

lessons the child/adolescent learns from the story, in Spitz's words, "it probably takes a mother who is quite comfortable with her own wild things to be able to read this story again and again...." (5, p. 445). Perhaps that is an important lesson of the wild things for all of us leading adolescent groups. To create a safe enough space for adolescents to express themselves, take tentative steps toward separation and begin to develop their identity, we must be comfortable with the wild things in us. We must be able to tolerate and withstand aggression and sexuality as they appear in group; we must be able to playfully take part in a wild rumpus; and we must recognize and appreciate the exuberance and passion our adolescent patients are known for.

As for our patients, we must ensure that the adolescent group experience "remains hot." Hot, in the sense that we provide nurturance and support not unlike a warm meal. Hot, in the sense that we are unafraid to be in and put others in the "hot seat"—confront when it is necessary, keep the content and process alive and heated, and stay in the moment, as difficult as that may be at times. Ultimately, we hope that we can help our adolescent patients to emerge from the group experience, give up being "kings of the wild things" and use their experience in the play and fray to return to "the night of [their] very own room[s]" and proceed with the developmental tasks ahead.

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