

## Introduction

Demonstrating empathy is a key outcome for newly qualified doctors, as stipulated by the General Medical Council (GMC). Balint Groups (BGs) have been proposed as a means to develop emotional reflectivity, however they are not routinely organised in UK medical schools.

Our aim was to review some of the recent literature surrounding medical student BGs, and identify any common themes to help inform both 1) whether further literature review would be helpful and 2) how to implement successful BGs for medical undergraduates.

The GMC's 2025 NTS highlights 50% of UK trainees find their work emotionally exhausting to a high, or very high degree. BGs are a well established form of support and supervision, focussing on the emotional content of doctor-patient relationships as a way to examine the unconscious and conscious.

Most existing research looks at BGs for postgraduate doctors, however there has been an increased number of recent studies exploring this for medical students.

## Our Experience

AH participated in Balint Groups throughout his psychiatry training. He has experience co-facilitating reflective practice groups, including with undergraduate medical students.

MZ participated in a BG as a medical student and has led a group for FY doctors on local placements in psychiatry since 2022. He has trained as a Schwartz Round facilitator.

Our experience of student BGs has varied and shown that some students really engage with the process, while others struggle. An unforeseen challenge has been the logistical difficulties of setting up new BGs at medical schools that do not have a history of them.

## Methods

We conducted a scoping review of the literature, using BJPsych Open and Google Scholar and comparing reference lists of key papers, to examine what literature currently exists, with a view to extending this into a formal systematic review.

We developed a PICO model to guide the literature search, looking at papers published since 2000. Papers were screened via Title and Abstract review, and papers that were deemed relevant were reviewed by the two authors.

Each author reviewed each paper and independently developed codes and themes via thematic analysis. Codes and themes were compared and refined iteratively. These are presented in the table below as some of the key benefits and challenges of Medical Student Balint Groups.

PICO	Description
Population	Undergraduate medical students Papers published originally in English
Intervention	Balint Groups for medical students
Control	Nil
Outcome	Qualitative or quantitative information about the pros/cons of running the Balint Groups

## Results

Benefits	Challenges	Results of Literature Search
Improved empathy - Subjective measurement 1, 2, 2 - Objective measurement 3, 7, 9	Scheduling difficulties 8, 12, 13, 18	1. Bahri, R., Mohamad, A.K., Davies, S. and Elmubarak, A. (2025). Balint-Ly Obvious: The Value of Balint Groups in Medical Education. <i>BJPsych Open</i> , 11(S1), pp.S81-S81. doi:https://doi.org/10.1192/bjpo.2025.10256
Better understanding of doctor-patient dynamics 5, 6, 11, 16	Perceived lack of relevance at stage of training 5, 13, 15, 16	2. Brock, C., Johnson, A., Milberg, L., Dorrest, F., Psenka, T., Scott, P., Horacek, K., Kurins, L. and Sanford, B. (2025). A Feasibility Study Implementing Virtual Balint Groups With Medical Students. <i>Academic Medicine</i> .
Professional identity development 10, 12, 20, 23	Discomfort with silence 13, 17	3. Buffet du Vaure, C., Lemogne, C., Bunge, L., Calu-Pinault, A., Hoertel, N., Ghassassian, C., Vincens, M.-E., Galam, E. and Jaury, P. (2017). Promoting empathy among medical students: A two-site randomized controlled study. <i>Journal of Psychosomatic Research</i> , 103, pp.102-107. doi:https://doi.org/10.1016/j.psychores.2017.10.008
Supportive peer environment 8, 19, 21, 22	Fear of judgement by peers 5	4. Cowell, V., Chukwunike Aiyegun, Ros, A., Brown, H., Shibu, B., Akella, A., Adekunle Lasin, Bancroft, J., Whitcroft, H., Indu Surendran, Bu, C., Older, A., Gaynor, E. and Sullivan, K. (2023). Balint Group Sessions for Medical Students: A Pilot Study. <i>BJPsych Open</i> , 9(S1), pp.S16-S17. doi:https://doi.org/10.1192/bjpo.2023.117
Interpersonal/ communication skills 2, 4	Intimidated by the environment 8, 17	5. Furlah, A., Markham, H., Fallon, J. and Riddle, P. (2025). Evaluating the Use of Balint Groups in Medical Student Psychiatric Education. <i>BJPsych Open</i> , 11(S1), pp.S89-S89. doi:https://doi.org/10.1192/bjpo.2025.10273
	Difficulties understanding Balint process 5, 11, 14, 17	6. Gares, N. (2020). Can Balint groups fill a gap in medical curricula? <i>The Clinical Teacher</i> . doi:https://doi.org/10.1111/ct.13298
		7. Lemogne, C., Buffet du Vaure, C., Hoertel, N., Calu-Pinault, A., Linaon, F., Ghassassian, C., Le Jeune, C. and Jaury, P. (2020). Balint groups and narrative medicine compared to a control condition in promoting students' empathy. <i>BMC Medical Education</i> , 20(1), doi:https://doi.org/10.1186/s12909-020-2231-9
		8. McCarron, R., FitzGerald, J., Swann, P., Yang, S., Wright, S. and Arends, F. (2023). A Mixed-Methods SWOT Analysis of a Medical Student Balint Group Programme. <i>BJPsych Open</i> , [online] 9(S1), pp.S20-S21. doi:https://doi.org/10.1192/bjpo.2023.125
		9. McManus, S., Kilien, D., Hartnett, V., Fitzgerald, G. and Murphy, K.C. (2020). Establishing and evaluating a Balint group for fourth-year medical students at an Irish University. <i>Irish Journal of Psychological Medicine</i> , 37(2), pp.99-105. doi:https://doi.org/10.1017/ipm.2019.28
		10. Ng, L., Seu, C. and Cullum, S. (2022). Modelling vulnerability: qualitative study of the Balint process for medical students. <i>BMC Medical Education</i> , 22(1), doi:https://doi.org/10.1186/s12909-022-03508-2
		11. O'Neill, S., Foster, K. and Gilbert-Obart, A. (2015). The Balint group experience for medical students: a pilot project. <i>Psychoanalytic Psychotherapy</i> , 30(1), pp.96-108. doi:https://doi.org/10.1080/02668734.2015.1107124
		12. O'Lea, J. and Judy Malone (2019). The Implementation and Evaluation of a trial Balint Group for Clinical Medical Students. <i>Journal of the Balint Society</i> , 44, pp.31-39.
		13. Parker, S. and Leggett, A. (2012). Teaching the clinical encounter in psychiatry: a trial of Balint groups for medical students. <i>Australasian Psychiatry</i> , 20(4), pp.343-347. doi:https://doi.org/10.1177/1039856212447965
		14. Parker, S.D. and Leggett, A. (2014). Reflecting on our practice: an evaluation of Balint groups for medical students in psychiatry. <i>Australasian Psychiatry</i> , 22(2), pp.190-194. doi:https://doi.org/10.1177/1039856213517946
		15. Perry, Z.R., Laudon, A. and Arshave, S. (2019). Emotional Processing — The Use of Balint Groups for Medical Students as a Means for Improving Interpersonal and Communication Skills and Competence. <i>Annals of Behavioral Science and Medical Education</i> , 19(2), pp.16-21. doi:https://doi.org/10.1007/s003355251
		16. Priya, A. and Bhogal, H. (2021). Balint style case-based discussion group for medical students in Bassetlaw Hospital. <i>BJPsych Open</i> , 7(S1), pp.S342-S342. doi:https://doi.org/10.1192/bjpo.2021.098
		17. Richards, H., Polnky, A., Wilkinson, P., Read, E. and Young, H. (2020). Balint-style reflective practice groups in a year 4 undergraduate general practice attachment: experience of the first two years. <i>Scottish Medical Journal</i> , 65(2), pp.52-59. doi:https://doi.org/10.1177/0036933020918266
		18. Ros, A., Older, A., Gaynor, E., Shibu, B., Bu, C. and Sullivan, K. (2022). Balint Group Sessions for Medical Students: A Pilot Study. <i>BJPsych Open</i> , 8(S1), pp.S32-S32. doi:https://doi.org/10.1192/bjpo.2022.147
		19. Tan, L.L. and Koh, K. (2025). Use of Balint Groups (BGs) to Support Wellbeing Amongst Medical Students in a Public Health Institution. <i>BJPsych Open</i> , 11(S1), pp.S107-S107. doi:https://doi.org/10.1192/bjpo.2025.10312
		20. Terppa, M.A., Mäkelinen, E., Mårtensson, C. and Pitkälä, K.H. (2008). A qualitative analysis of student Balint groups in medical education: Contexts and triggers of case presentations and discussion themes. <i>Patient Education and Counseling</i> , 72(1), pp.5-11. doi:https://doi.org/10.1016/j.pec.2008.01.012
		21. Wood, K., Kothari, A. and Malone, J. (2016). Lessons from a Balint group scheme led by psychiatry trainees for year 3 Bristol medical students on their medicine/surgery placements. <i>European Psychiatry</i> , 33(S1), pp.S169-S169. doi:https://doi.org/10.1016/j.eurpsy.2016.01.347
		22. Wroblewski, J., Cardak, B. and Milmore, M. (2025). Medical Student Balint – a Tool to Improve Empathy, Transform Communication Skills and Empower Tomorrow's Socially Aware Patients' Advocates. <i>BJPsych Open</i> , 11(S1), pp.S111-S111. doi:https://doi.org/10.1192/bjpo.2025.10321
		23. Zalidis, S. (2013). The role of Balint Groups in helping first clinical year medical students develop their professional identity and safeguard their boundaries. <i>International Balint Conference</i> .

## Discussion

As demonstrated in the table, the literature describes a range of benefits to students. In doing the review, we noted a broad range of recent research and publications despite BGs being an intervention first used in the 1950s, suggesting still a degree of intellectual curiosity and variability in their implementation.

Of the challenges described, several may be mitigated by a more effective "priming" of students when commencing a BG, allowing them to acculturate to the Balint Process quicker and cohere more as a group. Similarly, the recent literature reflects the general shift towards Distance Learning, with students struggling more when BGs are offered online.

The literature is clear that timing matters. When students engage in BGs during their course is crucial, as well as having enough time for students to engage in the Balint process during their rotation. Students seem to react to the Balint process in different and unpredictable ways, and there is a paucity of research into the mechanisms behind this.

## Implications for Practice

While the literature indicates BGs are beneficial for students, it remains unclear how best to implement them. Studies varied in their practice, with some mandating attendance and others offering it as optional or extra-curricular. Some medical schools have adapted BGs to offer them at earlier stages of training, while other institutions follow a more traditional route.

Based on the literature we reviewed here, we would propose the following:

- 1) A standardised introduction to the process of BGs, with its long term benefits clearly demonstrated to the students, prior to their commencement of the Group
- 2) Adaptation of the BG appropriate to the students stage of training
- 3) Students indicate a preference for face-to-face BGs where this is logistically possible
- 4) Further research into the factors that impact how students engage in BGs

We plan to extend this into a formal literature review in due course.