

THE ROLE OF THE CONDUCTOR IN GROUP ANALYSIS Peter Zelaskowski (1991)

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A this point, I am reminded of the title of a Pirandello play I once saw called, "Six Characters In Search Of An Author".

Introduction

My intention here for the best part of this paper is to explore the role of conductor in psychotherapy groups in relation to external and internal boundary management. This will involve me initially discussing a social-systems approach, which focuses on the managerial authority and responsibility of the conductor, in particular the group-analytic psychotherapist, over such aspects as administration, role and task definition, designing and organizing appropriate structures, contract setting and accountability. I will then apply this developmentally to the import and processing phases of a group's life. Firstly, during the import phase by looking at goal and task definition, contract-setting and Foulkes' writings on how the group-analytic situation is established. Secondly, the processing phase by going on to discuss the conductor's role, with regard to management of the psychological boundaries within the group, as "process commentator". I will finish by looking at an issue of particular and general concern, which is the use and potential abuse of the power inherent within the role of leader, conductor or therapist. But first I would like to briefly discuss what seem to me to be the key factors that conspire to determine the role of the conductor.

Roles

A role is not a static phenomenon. It is elastic, in the senses of both its abstract and actual forms. In the case of even the most scripted roles performed by actors on the stage it is possible to think of, in the first instance, each new interpretation and within that, each new performance, as re-definitions. In the case of the role of conductor of a psychotherapy group which is necessarily an unscripted role, it is, however, still important to have some definition, some picture in the abstract, of the part one is to play, or might be seen as playing, before going on stage. It is possible to identify four significant factors determining its ever-changing form. Firstly, the literature containing the theories, methods and principles, in particular, Freud, Bion and Foulkes – the originators of the group-analytic tradition.

Secondly, what Singer et al (1979) call "the sponsoring organization," within which specific traditions, structures and practices have evolved, defining tasks and roles, by which, either explicitly or implicitly, one is instructed, advised or influenced. For example, certain key aspects of the model practiced within an NHS department in which I worked, would be considered anathema in other settings.

Thirdly, the particular style of an individual, defined by Dorothy Stock Whitaker as "the expression in behaviour of one's attitudes," which she sees as being linked with the conductor's personality,

that is, to the relatively stable set of preferences, concerns, preferred modes of interaction, preferred defenses and personal solutions which group workers and therapists, no less than clients and patients, bring with them to any group endeavor.

(Stock Whitaker, p386, 1989)

My feeling is that one should seek to bring as much of oneself as is possible to the role, to be oneself, and at the same time seek to minimize unconscious agenda-setting, wherein one's own psychopathology gets in the way. At times it is possible to feel that one's group appear synchronized with one's private concerns.

Finally, the group. Not only since different populations and group structures do impose different style requirements on conductors.

(Stock Whitaker, p386, 1989)

In the foulkesian sense, the conductor is the "instrument" of the group. An example of how one's role can be shaped by the group occurred in the 25th meeting of an out-patient group in an NHS department of psychological medicine. The entry button for the main entrance to the building was located outside the group room. It became customary for me to let in latecomers. This entailed me having to momentarily leave the room. Up until that meeting it had been assumed that it was my job to let latecomers in. However, a latecomer at a particularly tense moment caused me to think that this task could and ought to be a shared one. I suggested this to the group who responded blankly. In four years the group failed to take on the task. My feeling about this is that the group needed me to perform the tasks relating to boundary control to confirm its dependency fantasies about my role.

The Conductor as Boundary Manager

The major leadership function of a small-group event, as in any organisation, institution or enterprise, is management of its boundaries. (*Singer, Astrachan, Gould and Klein, 1979*)

The purpose of any group is to fulfill its goals. That is, to accomplish its tasks, and, according to Foulkes (1975) the role of the conductor is to be at the group's service in doing so.

He has made himself into the first servant of the group, into the instrument the group can use, but he has also forged the group, and continues to do so, into the instrument of group-analytic psychotherapy. (Foulkes, 1975)

Applying a social-systems organizational perspective, such as that used by Singer et al, to the group analytic model then one would argue that the methods and principles of group-analytic psychotherapy, including the varying models of the role of the conductor, have their origins in a perceived set of needs, and any concomitant aims or goals forged in relation to those needs. In the case of all forms of psychotherapy the goal seems relatively easy to define in terms such as, some sort of deep and lasting psychological change or reducing suffering or becoming more the person one is or, as it is so often put, "getting better".

Nobody would argue with the view that the role of the conductor or leader of a small group is to maximise the possibility of needs being met and goals being achieved. However there is considerable disagreement, within and without the group-analytic sphere, over which model is best suited to maximising this possibility. I find that I am faced with a range of possible methods, role-models and theories, some of which seem more comprehensible and preferable, some of which I feel uncomfortable with, and, like the shopper in a supermarket, at times I am unable to make choices. Part of the task as is to, as it were, try a few brands, to find one that suits my taste, and in so doing begin to engage in what Singer et al describe as one of the early management responsibilities, which is to define, by establishing **my** boundaries, **my** role as a group conductor.

The Early Phase

During this phase issues of **task** and **contract** are paramount.

Crucial early management responsibilities for those who initiate a group event include defining the task, defining the leader and member roles, recruiting the leader(s) and members, and developing a contract among them - though not necessarily in this sequence. (Singer et al, 1979)

Much of this early work is the responsibility of the sponsoring organisation. A need has been identified and a group event proposed. The successful outcome of the group event, according to Singer et al, is conditional of the degree to which

1) the group's task and structure fit member needs; 2) leader decisions and techniques are geared to the group's overall task.

They argue however, that what often happens is that group goals are poorly defined and conductors tend to think of group events in terms of techniques and theories rather than in terms of task. At worst, techniques and theories have become sacred rituals rather than tools for task performance. At some point in the evolution of the group the conductor takes over and it is then his or her role to manage goal, task, role and structural boundaries, and in so doing strive for "task accomplishment". The task of any group can generally be defined in terms of a continuum which has learning at one end and psychological change at the other. It can be argued that the two go hand in hand, however the analytic-group would tend to see psychological change as its primary task.

A first essential step in this boundary management role is some form of agreement between conductor and potential group member. Contract-setting enables the initial establishment of boundaries around goals, task, role and structure. There needs to be some form of mutual understanding, "therapeutic contract" or "treatment alliance" between therapist and patient prior to the group's commencement.

This can be regarded as being based on the patient's conscious or unconscious wish to co-operate, and his readiness to accept the therapist's aid in overcoming internal difficulties. This is not the same as attending treatment simply on the basis of getting pleasure or some other form of gratification. In the treatment alliance there is an acceptance of the need to deal with internal problems, and to do analytic work in the face of internal or (particularly with children) external resistance. (Sandler et al, 1969)

This process is set in motion at the initial or pre-group interview, during which there is some discussion about:

- What he or she hopes to achieve;
- Times and dates;
- The manner in which the group operates. For example, there is no agenda other than what the group wishes to talk about;
- Expectations regarding good time-keeping, that the group is informed of any absences in advance, the absence of contact with other group members outside the group;
- The current make-up of the group and its maximum membership.

Group-analytic psychotherapists would tend to describe this list as more or less the essential pre-conditions for the group's successful functioning. The social-systems approach stipulates merely that each contractual clause be "task-relevant."

Foulkes and the Group-Analytic Situation

Foulkes (1975) outlines three aspects involved during the establishment of the group-analytic situation. Firstly, the conditions set, which are essentially the task-relevant group-analytic pre-conditions and are the conductor's and/or sponsoring organisation's responsibility.

These are as the patient finds them. He has no influence upon them and is not consulted. He should have been prepared or at least have been informed about them before joining the group.

The conditions set are:

- *Meeting With Strangers*. Prospective group members are asked to inform the therapist immediately whether they are at all acquainted with any current members. Social activity outside of the group is discouraged;
- *Particular Form of Group*. Is it a new group, on-going, slow-open?;
- *Room and Seating Arrangements*. Is there an appropriate sized room and set of chairs arranged in a circle?;
- *The Circle*. Such that each member can see the faces of every other member;
- *Position*. This refers to where particular members seat themselves, and any related behaviour. *Number of Group Members*. Foulkes quotes 7 as ideal, although it is my impression that 8 is the norm;
- *Duration and Frequency of Sessions*. Is it 11/2 hours duration, once or twice (Foulkes' preference) weekly.

Secondly, the principles of conduct required,

are based on the understanding of the group members, and are acquired through social learning in the group so that they will be respected and become a tradition of the group.

Some of Foulkes' principles are clearly task-relevant and self-explanatory, such as regularity of attendance and punctuality. However, others are more contentious and more likely to stir up resentment and confusion as to their task-relevance:

- *Discretion.* This relates to confidentiality in relation to what is disclosed in the group and although a reasonable expectation, it is difficult to monitor;
- *Abstinence.* This relates, in the first instance to "tension-relieving devices" such as smoking, eating and drinking during a session. It also relates to sex between patients and crucially "suspended action," i.e., no physical contact, hostile or tender, or acting-out, such as walking around the room or walking out;
- *No Outside Contact.* This relates to organized social contact outside the group and for some conductors may also relate to the journey home or, in extreme cases to anything outside the time boundary of the group. Foulkes suggests that an absolute compliance may be unnecessary but what is necessary is that "whatever happens outside is brought back to the group." I know of a Transactional Analysis group which has frequent social gatherings. Some members were introduced to the therapist and the group in the first place by existing members. Many hours are spent on the phone, members counselling other members;
- *No Life Decisions During Treatment.* This is perhaps the most difficult to understand in terms of its task-relevance, certainly from my perspective, as it would seem to me that certain life decisions are inevitable and desirable given the psychic changes and shifts forward that occur during treatment. However, Foulkes does qualify this by referring to life-decisions brought about by, "motivations and reactions of an infantile, immature character" often mobilised during intensive therapy.

Finally, the culture promoted:

This is not brought about by a particular act on the part of the conductor, although this total atmosphere is the result of his actions and perhaps to some extent of his personality. (Foulkes, 1975)

The conductor, whether he/she wishes it or not, is highly influential in the early life of a group in determining "the total atmosphere" the norms, ways of interacting with and responding to others. According to Foulkes the therapist should be attentive, non-judgmental, provide injunctions where appropriate, attend, keep to agreed times, etc. The therapist is in this sense a model for group behaviour and psychology, and, according to Yalom (1985) the therapist must model responsibility and appropriate restraint as well as honesty. With the necessary caveat:

The concept of the totally analyzed therapist who experiences no destructive feelings and fantasies towards patients is, in my experience, illusory.

In particular the therapist has a responsibility to nurture "free floating discussion" or "free group association" by discouraging sham democratic and restrictive solutions which a group may defensively turn to such as turn-taking or an over-intellectual approach. On the other hand too much self-disclosure too soon may be equally, if not more anti-therapeutic. The establishment of safety may be more valuable early on than total openness, and the conductor needs to promote this in the culture. Another issue relevant to culture setting is conductor self-disclosure and transparency.

It would seem to me that group culture is a function of goal and task. For example excessive politeness and niceness may be detrimental and restrictive to the goals of a therapy group and it may initially, at least be an important part of the therapist's role to establish a more task-appropriate or enabling culture.

The Task - Learning or Psychological Change

Group events have tasks which lie somewhere on a hypothetical continuum that has learning (in the sense of cognitive/perceptual change) at one end and psychological change (in the sense of altered coping capacity, personality structure or response repertoire) at the other end. *Singer et al.*

It is the role of the group leader to steer the group in the direction appropriate to its task. But how, in the case of group psychotherapy, is this achieved? Learning in its broadest sense, not just as a didactic, cognitive and intellectual process of the sort experienced by the student, goes hand in hand with psychological change. Similarly, what place does learning have in psychological change? Foulkes (1975) provides an interesting insight.

The aim of our psychotherapy is therefore a liberation in the patient's inner psychic life from that which prevents him to change, from his inner blocs, a process of *unlearning* in a sense.

One of the group-psychotherapists task-related functions is to facilitate learning about the group, its processes and individual processes in relation to the group, i.e., intrapersonal, interpersonal and transpersonal processes. Yalom states that what distinguishes the psychotherapy group is its focus on the here-and-now of experience. This focus has two "tiers" to it. The first is an "experiencing" one.

Here-and-now feelings become the major discourse of the group. The thrust is ahistoric: the immediate events in the meeting take precedence over events both in the current outside life and in the distant past of the members.

The second is the "illumination" of what is actually happening in the here-and-now. If the powerful therapeutic factor of interpersonal learning is to be set into motion, the group must recognize, examine, and understand process. It must examine itself; it must study its own transactions; it must transcend pure experience and apply itself to the integration of that experience.

He describes this second tier as a form of doubling-back, "a self-reflective loop". From this dual focus Yalom extrapolates that the therapist has two distinct functions in the here-and-now. Firstly, to steer the group into the here-and-now, a function he states is shared by group members, and secondly, to guide the self-reflective loop or "process commentary", a function which to a large extent is the therapists. It is this function, essential to the role of conductor in a psychotherapy group, which I will turn to now.

The Role of Process Commentator

Possibly, the core skill of the psychotherapist, the most essential, yet most illusive, component, it is the creative heart of psychotherapy.

This is a creative activity which needs much intuition. The conductor has to live with the group, expose himself to the currents permeating it and him, try to divine the meaning of what is going on and the relevance of this meaning.

(S. H. Foulkes, Group Analytic Psychotherapy, p108)

It demands that the conductor be with the group at two distinct levels. Firstly, at the level of what is actually happening, being said or communicated within the group such that for the best part one is actually with the group, experiencing the here-and-now and not aloof to or too distant from the immediate needs of the group. Secondly, at the level of the hidden or meta-communication, divining the unconscious communications, the "what is really going on between people" that is generally so avoided in ordinary discourse.

The aim of each and every moment of every session is to put the patient in touch with as much of his true feelings as he can bear.

David Malan - Individual Psychotherapy and the Science of Psychodynamics.

How much and when? The initial task of activating and operating within the here-and-now is part of the culture building, establishing what Foulkes calls an "interpretive culture," that goes on in the early phases of the group. Once there it is then that the conductor's role as process commentator comes into play. It is this aspect of the conductor's role that clearly demarcates it from the role of patient.

The experienced therapist does this naturally and effortlessly, observing the group proceedings from a perspective that permits a continuous view of the process underlying the content of group discussion. (Foulkes, 1975)

It is down to the therapist to take on what is essentially this necessary, therapeutically task-relevant but socially taboo role. It seems to me that fantasies about the therapist's magical and frightening powers can be traced back to this aspect of the role. I will briefly outline two aspects to the role of process commentator. Firstly, a particularly useful means, described in Yalom, of recognizing process. The conductor needs to be able to distinguish between behaviours which further the patient's achievement of his/her primary task.

To achieve his or her original goals: relief of suffering better relationships with others, or to live more productively and fully. (Yalom, p163)

This being juxtaposed with his/her secondary gratifications enacted within the group, which are essentially regressive forms of resistance and counter therapeutic. This relates quite nicely with the social systems' notion of task relevant behaviours and also echoes quite clearly the "group focal conflict

theory" of Whitaker and Lieberman (1989) which describes group processes in terms of restrictive and enabling solutions to conflict. The patient at some stage will display his/her psychopathology within the group by repeating the familiar probably damaging patterns within relationships. This will happen because the gratification offered, according to Yalom, is often "compelling".

Our social need to be dominant, to be admired, to be loved, to be revered are powerful indeed.

In conclusion, it would seem to me that the capacity of the therapist to distinguish between essentially progressive and regressive forms of behaviour and communication is highly enabling.

The second aspect is the actual task of process illumination and commentary. In this aspect of a conductor's role the group psychotherapist can be understood as a type of guide, leading the patient to change. Yalom has theorized process commentary into a sequence of types of process comment through which the conductor "escorts" the patient, ultimately leading up to the threshold of change:

- *Here is what your behaviour is like.* Through feedback and later through self-observation, members learn to see themselves as seen by others;
- *Here is how your behaviour makes others feel.* Members learn about the impact of their behaviour on the feelings of other members;
- *Here is how your behaviour influences the opinions others have of you.* Members learn that, as a result of their behaviour, others value them, dislike them, find them unpleasant, respect them, avoid them, and so on;
- *Here is how your behaviour influences your opinion of yourself.* Patients formulate self-evaluations; they make judgments about their self-worth.

At this point, which Yalom does not put a time on, the patient has "entered the antechamber of change," described by Cox and Theilgaard (1987) as "a point of urgency" located at the "threshold of the horrible", a place where the patient has resisted being all along. Horrible because it may entail the patient giving up treasured "secondary gratifications" and fulfilling his/her goal of change. What Yalom describes is the process by which the patient is put in touch with what was unknown to them and is made conscious of what was unconscious in their behaviour. What he particularly appears to

stress is the "therapeutic potency of the here-and-now interactional focus" in working things through, rather than using firstly the transference focus and secondly the group-as-a-whole focus. His preference in the process commentary appears to be for working on the immediacy of the encounter rather than the more analytic focus on the psychodynamics of the transference neurosis and the unconscious communications of the group-as-a-whole. A comparison with Foulkes' summary of outstanding areas to which interpretation usually refers is of value. These are:

- The ongoing interactive group processes;
- The conflict which the individual repeats in the group situation;
- In connection with this, past experience, in particular childhood experience, which comes to us rather than being looked for by us;
- The current experience in life outside the immediate treatment situation;
- Boundary incidents between ongoing group and ongoing life.

In conclusion, therefore it would appear that for Yalom the exploration of the past, in terms of its manifestations in the here-and-now, is not necessarily relevant to the task of achieving change and consequently the conductor's role as a transference figure is less important than it is in the more analytic approach of Foulkes. For Yalom the role of process commentator, with a focus more on the interpersonal than the transpersonal, is the key function of the conductor.

Power and the Conductor

The carriage of power is a necessary and desirable social function. Abuses of power relate to difficulties in accepting the responsibilities one has in relation to the power one has. There are dangers which relate directly to one's attitude, assumptions and feelings about power. According to Dorothy Stock Whitaker (1989) the power of a group therapist or worker

derives from his real powers over members in the form of fate-control, from his capacity to influence situations within the group, and from members' assumptions about the conductor's power and the ways he is likely to use it.

The conductor has real powers and it is important that s/he makes it clear to the group the extent of these powers and how they are to be used in order that the group can regulate their own participation on the basis of fact rather than fantasy.

The therapist introduces new people to the group, may have to remove people from the group, establishes the principles of conduct, makes decisions about timing and dates without consultation. During one session I was angrily accused of running a "sham democracy" as the previous week I had consulted the group about keeping a continually absent member's place open for the next month or so while she was having problems finding a baby-sitter. Members will have fantasies about the nature of the conductor's power regardless, and that it is important as a conductor to clearly understand the power boundaries in the midst of all the fantasy and confusion. I believe my powers in groups have been perceived in a range that extends from magical, through schoolmasterly to punishing and malign. One's fantasies about one's powers have are inevitably going to be distorted by transference and egotistical phenomena and so it is important to keep a real perspective on the exact nature of one's powers. Power is a highly seductive force and there are dangers for the conductor in using the group to act out fantasies or as a source of healing.

A particularly virulent form of this is described by Peter Rutter, in his book *Sex in the Forbidden Zone*, in which he discusses the apparently widespread sexual exploitation of female patients by their male therapists. Men with deep seated sexual wounds, he argues are particularly prone to this, as it offers them a possible form of healing. The problem can only be confronted, he argues, by exploring our own fantasies in relation to power, openly and honestly. We are then less likely to act them out.

Concluding Thoughts

The role of the conductor in psychotherapy groups can be thought of as involving a range of possible functions. A social-systems approach suggests task-relevance in relation to the goals of the group as the criteria for deciding on the parameters of the role. However, in reality the role is as determined by issues of an institutional, ideological and personal nature. Boundary management, culture building, process commentary and power are the central concerns of the role discussed in this essay.

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