

Articles

Conductor Interventions: To 'Do' or To 'Be'?

Farhad Dalal

This paper is an exploration of what constitutes the 'group-analytic' approach. It examines the repertoire of possible interventions — their content, timing and motivation. The discussion is framed in a larger debate that explores some of the differences and similarities between humanistic and analytic philosophy and methodology. The thoughts and questions raised in this paper have arisen in the clinical setting. The references made to the practice of particular group analysts have been communicated by themselves in informal and private discussions.

Key words: analysis, group, humanistic, intervention, technique

Coming to training at the Institute of Group Analysis, London, from a background in humanistic psychotherapy, I had several pre-conceptions concerning the 'analytic' method, and particularly, the 'group-analytic' method. My expectations were that the conductor spoke rarely and only when he or she saw the deep commonality of all the communications in the group. The statement made had to be of sufficient lucidity to be understandable to all in the group, but sufficiently enigmatic to address the process of every member in the group. Finally, I thought, the conductor dropped the statement from a great height into the middle of the group, never speaking to individuals directly. Alas, it was not to be. I was soon to be disillusioned through my own therapy and supervisions.

Some Questions and Dilemmas

The disillusionment generated certain difficulties. Because humanistic psychology grew up as a counterpoint to psychoanalysis

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and mechanistic psychology, it often self-consciously set itself up against psychoanalysis and its methodology. So, whilst analytic therapy tended to utilize thought and word as probes into the unconscious, humanistic therapy (for example encounter, Gestalt, bioenergetics and so on) emphasized feeling and action. The therapeutic focus in the humanistic frame is to express feeling, preferably in a cathartic way. This idea, when contrasted with Foulkes's (1975: 61) notion that verbal communication is the highest and most therapeutic form of communication, formed the basis of my dilemma as I tried to fathom the 'group-analytic' method. How was I, as conductor, 'to be' in the group? What was I trying to do? What was therapeutic, thought or feeling?

In effect I was asking the question 'What is the rôle and purpose of the group conductor?' I found that there were as many answers to this as there are group analysts. For instance, someone said that the conductor was there to maintain the setting, start and finish the group, and no more. Someone else said that the conductor was not there to help anyone, rather the conductor was there to facilitate the discovery of truth. Neither of these answers seemed satisfactory.

I asked myself a different question: why did someone join a group, become a patient? The answer on one level seemed simple enough: to get better, to work through something that prevents that individual getting on with life. This gives an answer to the first question as to the nature of the conductor's role: my job was, quite simply, to help individuals 'get better' and leave the group. It seemed to me then that this was the baseline, from which all else had to proceed, and all doctrine and dogma had to fall before this.

However, there was the small point of what does 'getting better' actually mean? Who defines it (patient, group analyst or group?) and what happens when there is a conflict between two or more views of what it is and how to get there? Whatever the case, the emphasis is changed; the question is not what is the correct group-analytic method, rather, the method is to be predicated on the purpose: for patients to get better and to leave.

In partly answering one question, 'What should group conductors be aiming to do?', another was raised: How should they do it? What sort of thing is therapeutic for the individuals in the group? The broad church of group analysis gave answers that were varied and often conflicting. For instance one conductor said that she would do

nothing to assuage anxiety at the start of a new group, emphasizing that it was the working through and understanding of the anxiety that was therapeutic; whilst another said that it was important to reduce the initial anxiety in order to cohere the group so that it could start working therapeutically. These ideas inevitably affected the conductors' styles, the second conductor being more active than the first. So, what makes different conductors 'choose' different modes of action, what informs these choices?

The Repertoire of Intervention

The conductor's potential interventions can be considered from various angles.

Activity Level

At any particular point in the group, should the conductor speak or not speak, look or not look, and to what extent?

Direction of Comment

Space: (a) Is the comment aimed at a particular individual, sub-group, or group-as-a-whole? (b) Is the comment pointing to the inner world, or outer world? (c) Is the comment pointing to the intrapersonal or interpersonal?

Time: (d) Is the comment focusing on the here-and-now, there-and-then, or some future domain?

The Intention of the Comment

Is the comment intended to move the person/group into feeling, thought or sensation?

Purpose of the Comment

To clarify, to comprehend, to connect, to confront, to deflect, to explain, to hold, to interpret, to lead, to link, to model, to open up, to instruct, to protect, to support, to summarize and so on.

The IGA-GAS Research Project

The IGA-Group-Analytic Society (London) research project described the variety of conductor interventions more succinctly (Garland et al., 1984). The two key features used in their classification were: '(1) the nature of the intervention; (2) the configuration within the group with which the intervention is concerned (1984:140). The configuration alluded to is similar to the area I have listed under 'space'. The nature of the intervention was divided by them into three main categories. Interventions that were

aimed at the structure of the group they called 'maintenance'. Interventions aimed at the process of the group they called 'facilitative' and interventions that linked process to content they termed 'interpretations'. They added four other categories: modelling, self-disclosure, action and intervention. These seven when combined with the various configurations gave them a total of 42 categories into which the conductor's interventions might fall.

Why This Rather Than That?

Whichever model is chosen to describe the set of interventions, it is clear that there are a multiplicity of possibilities. Further, given the complexity of events occurring in the group at any one time, there is always the thought why choose to do this rather than that? Why summarize rather than interpret or confront at any one point?

Inevitably, the choice is determined by what is happening in the group. But given the same situation, the fact that different group conductors will plump for different interventions tells us that the choice of intervention is also determined by the conductor's perception of what is happening in the group. Perception is determined in part by what is 'out there', and in part by what the conductor's unconscious allows him or her to see. In other words, the conductor's 'choice' of intervention is informed as much by his or her unconscious as conscious.

Whilst the differing conscious reasons for choosing one strategy rather than another depend very much on the school and ideology of the group conductor, the unconscious reasons will depend on the conductor's particular history of relationships, background and so on. But, however analysed, the group analyst remains with an unconscious. This must result at times in the intervention serving to inhibit the group in order to keep the conductor's unresolved material at bay.

Being and Doing

Whatever takes place, with broad brush strokes one could describe the initial choice for the conductor as being between two strategies: to 'do' or to 'be'.

The analytic session can be thought of as existing in two domains: experience, and comments on the experience. The domain of experience consists of all the lived events, feelings, thoughts and exchanges in the group. The mechanisms that drive this domain are

group forces, transference and countertransference. The other domain, the comments on the experience, consists of interpretations, of thinking and reflecting on the experience from outside the experience. The former is the realm of 'being', where things happen, where in a sense one is merged with the action. The latter is the realm of 'doing', of dissecting and understanding the action. The matter is complicated by the fact that the 'talking about what has happened' is an experience in itself, that is, that one is never completely out of either the domain of experience or the domain of thinking about the experience. One could reframe the two domains as those of primary and secondary processes.

So, how much should the conductor let the group get on with it, that is 'be' and allow the experience (a primary process), and how much should he or she intervene, that is 'do', by commenting on the experience, thereby stopping the action, or at least transforming it (a secondary process).

The answer to this will depend on three things: first, what the conductor thinks is 'really' happening in the group at any particular time (is the group/individual using thinking to avoid feeling, or using feeling to avoid thinking? Is this cathartic discharge of emotion therapeutic or gratuitous?); second, which therapeutic 'style' the conductor is most comfortable with, 'to be' or 'to do', to sit and contain, or to talk and act (there are some training analysts at the IGA who say more in one session than others say in a whole month); and third, what 'group-state' is thought by the conductor to be most therapeutic — when the group is acting and expressing, or talking and thinking? Crudely, if there are a lot of angry feelings flying around the group, does the conductor consider this to be a 'good thing' or a 'bad thing'? For example, one group analyst described an angry group event as 'dangerous to the group' and 'needing to be stopped'; whilst another thought that this particular explosion was a sign of health. Was one more correct than the other?

The Problem of Expression

The issue here is how is the actual expression of emotion to be understood and handled. What rôle is allocated to 'expression' in the different theories? Here are two examples from opposite ends of the spectrum.

The first is drawn from the now old-fashioned psychoanalytic

formulation which argues against expression. The argument goes: instead of remembering a forgotten trauma, the patient expresses it in action and stays blind to it. It is said that the patient acts out a repetition, and because she or he is unaware of what she or he is doing, repeats it again and again. What is being suggested is that discharge actually prevents recollection, that the patient is using discharge defensively in order to avoid remembering. This results in a strategy that advocates prevention of emotional discharge by moving into the intellect, so that the material can be remembered. The formulation comes out of the hydraulic model, saying in effect: dam up this pipe and the material is bound to flow out of that one.

At the other end of the scale is the humanistic model, which is a variation on the Cathartic Method of Freud and Breuer (1895). The humanistic psychotherapist works towards an energetic discharge of blocked emotions, suggesting that traumas too vast to be experienced are locked away within the body with their associated affects. One therapeutic strategy, following Reich (Lowen, 1958) is to release muscular tension, which then allows the affect to be discharged through an explosive catharsis. The emphasis is on the discharge of emotion, which is thought to be the therapeutic lynchpin. Janov's 'Primal Scream' therapy (1973) is another example of this. The whole purpose of the therapy is to reach the birth trauma and release the locked emotions of that event. The release is said to take place through the 'primal scream'.

A Small Dilemma

This scene regularly took place in the first few weeks of a new group and typifies the preoccupations that are the concern of this paper.

Clara was a very withdrawn member of the group. She regularly came late, hardly spoke, and spent a lot of the group staring dejectedly at the floor. When anyone spoke to her, she would look up, give something that was a cross between an embarrassed laugh and a cynical snort, and look down again. Following this she might or might not speak a little.

The problem was what should the group conductor do? There were, it seemed to me, five broad possibilities (each with untold variations):

1. Do nothing active, whilst continuing to think, and let events take their course.
2. Comment on the group dynamic, the process taking place, the rôle allocated by the group to Clara, what she might be carrying for the group and so on.
3. Focus on the individual who had just spoken to Clara.
4. Focus on Clara, the snort/laugh, the 'here-and-now,' what did she think/feel when she was just spoken to? This would be to focus on her defence.
5. Ignore the reaction (the 'here-and-now'), and encourage her to speak on whatever was asked, perhaps 'there-and-then' material. To do this would be to attempt to circumnavigate her defence (the snort and so forth), jumping over the 'here-and-now' defence into the material itself.

Which course of action should be chosen? Group conductors must be continually involved in such decision-making processes — albeit subconsciously. This then, is the conundrum and goes to the heart of group-analytic technique. When this is added to the complication that any particular interaction in a group might be simultaneously understood in at least two different ways (is X risking intimacy with Z, or is X avoiding confronting Y)? the illusion of any objectivity is profoundly shaken. What makes the situation problematic is that it is likely that both perspectives, rather than being contradictory, are complementary truths. This is because any interaction will be a communication of certain things and *simultaneously* an avoidance of communicating certain other things — it is figure and ground. The group conductor would be drawn to emphasize one of the views by a complex fusion of 'forces' which would include the context of the interaction, the history of the protagonists, current group ideations, transference, counter-transference and conductor transference. Whilst some of these forces are outside the conductor, others are inside; whilst some of them are visible to the conductor, others are invisible. Nevertheless they all inform the conductor's decisions of how 'to be' and what 'to do'.

Whichever strategy the conductor pursues, it is clear that he or she does not neutrally observe, but actively participates. It is impossible not to participate. Whether one is silent or talkative, physically absent or present, there is always an impact on the proceedings. This is not, of course, a reason for the conductor to be

gratuitously active and interventionist, neither is it a reason to become 'the invisible man'. What is to be acknowledged is that whatever the conductor does or does not do, it is experienced by the group as a very powerful and influential comment on the proceedings.

Discussion

Technique

To help think about the difference in technique between the humanistic and the analytic worlds, here is a fictitious scenario: Say Y has had some extremely good news, but is unable to allow excitement. A humanistic psychotherapist might offer/give Y some exercise or structure, some way to enable Y to jump over the inhibition to the expression of the excitement. This would have succeeded, to a greater or lesser extent, in getting the person to express the excitement, and no doubt Y (and the therapist) would feel good at having achieved something. But what would this achieve in the long run? It is likely that in a similar situation at another time, Y will feel similarly inhibited. At best Y will remember the technique and use it to jump over the inhibition into the excitement. Perhaps this is sufficient. The group analyst might see the task as encouraging Y and the group to explore the inhibition itself, to look at what fears and losses are contained within the inhibition. In the group context this is a complex process which would include amongst other things, looking at the relationship of Y to the group; what the group-as-a-whole contributes to the inhibition; what investments other individuals in the group might have that add to the inhibition; what would it mean to the life of the group if this particular affect were allowed to exist and so on. In other words the analytic technique is not to 'jump over' the block, but to 'work through' the block via analysis, hopefully to a similar place where it is possible for Y to connect with the excitement. Of course it takes a lot longer to bore a hole through an obstacle than to step around it, and so it might be experienced as less satisfying in the short term.

Thought and Feeling

To return to the dichotomy alluded to at the beginning of the paper, between feeling and thought. It should be said straight away that the

dichotomy itself is a false one. Thought and feeling are but two components of the category 'experience'. The notion of experience rescues us from this particular cul-de-sac. It is not useful to ask which is more therapeutic, to feel or to think. It is better to say what is therapeutic is the full experience, one component of which is affect and the other, thought.

It seems to me that there are defensive versions of both thinking and feeling. There is a kind of defensive emotionality that can take place when there is some crisis, when there might be a freezing of thought, where one hits out in fear and rage with eyes closed or runs in a blind panic — a fight/flight mechanism. One could think of hysteria as a kind of defensive emotionality. Defensive thinking on the other hand, takes place in order to avoid feeling. This too is a fight/flight mechanism, where thought is used to dissect, cut and so attack, and in the process flee from and defend against affect. It is a schizoid process. Thought has to be connected to a 'felt experience' otherwise it remains a schizoid activity.

But having said that, in the current social context the primary problem for a lot of people is that they lack a language of affect compared with thought. This is the outcome of a philosophical tradition that divided mind and body and set them up in a hierarchical relationship, with mind (thought) as something more fundamental than matter. The institutionalization of this philosophy in Christian theology has meant that what has atrophied in 'Western Man' is not so much the capacity to think, but the capacity to feel.

The elevation of thought over feeling has also permeated group-analytic theory and practice. This is not surprising as group analysis comes out of and is a part of this Western philosophical tradition. For example, there is no reference to the terms 'emotion', 'affect' or 'feeling' in the index of any of the following volumes of Foulkes's writing: Foulkes, 1948 and 1964; Foulkes and Anthony, 1957; E. Foulkes, 1990. The omission is striking. Meanwhile, Foulkes's oft-quoted statement (1948:169) that 'working towards an evermore articulate form of communication . . . is identical with the therapeutic process itself' reveals his emphasis on thought processes.

Bion's theory (1989) also prioritizes thought over feeling. He says that groups defend against their mature state, the Work Group (the domain of thought), by fleeing to other group states called Basic Assumption Groups (the domain of emotion). However, his

position is ambiguous, because even whilst he suggests that groups use emotionality and basic assumption states to avoid thinking in the work group, he goes on to say:

I give interpretations because I believe that intellectual activity of a high order is possible in a group *together with an awareness (and not an evasion) of the emotions* of the basic-assumption groups. If group therapy is found to have a value, I believe it will be in the conscious experiencing of the group activity of this kind. (1989: 175, italics added)

'Being' and 'Doing': A Problem of Expression?

Brown (1985: 148) offers a possible resolution to the reflecting versus acting dilemma when he says:

... we must suppose that there is no direct channel of communication between consciousness and the repressed unconscious, with the result that the repressed unconscious energies must go out into external reality before they can be perceived by consciousness.

Put simply: 'things need to happen' before they can be seen, felt, thought and talked about.

A question that remains is how important or/and necessary is the *expression* of feeling? Is it sufficient to just acknowledge it? For example, X has a headache. Let us assume that the headache is connected to X's unrecognized and unexpressed feelings towards his father. Let us further assume that in talking X discovers that he is angry with his father; that is he recognizes and names the feeling. Now, is *recognition* sufficient for the headache to disappear? What about the other component: expression?

Foulkes and Anthony (1957: 45) put it poetically:

A conflict consciously understood and formulated faces us like a territory mapped. We do not alter the territory, but we can now choose a route.

But this does not help much. X having mapped out the territory, is that a necessary and sufficient condition for this particular headache to disappear? Does X actually have to get angry as a necessary next step for the whole procedure to be therapeutic (ignoring, for simplicity's sake, any connections with other authority figures)?

Insight

Etchegoyen (1991: 653–90) throws some light on the matter through his discussion on ‘insight’ and helps draw together the themes of ‘being, doing, thinking and feeling’.

The analytic project consists of making the unconscious conscious by working through resistances. Etchegoyen equates this process with the notion of ‘insight’. Following the work of several authors (Joseph, 1984; Kris, 1956; Reid and Finesinger, 1952; Richfield, 1954; Zilboorg, 1952) Etchegoyen describes two types of insight: ostensive and descriptive. ‘Ostensive insight’ is said to occur when the patient actually experiences some event directly and with immediacy in the transference. He says (1991: 669): ‘ostensive insight . . . is always emotional’. This is a primary process, and is similar to what I have termed the ‘being’ mode. ‘Descriptive insight’ takes place in the realm of words and thought. It is a secondary process and is a description and a making sense of the same event from *outside* the event; it is similar to the ‘doing’ mode.

Both these types of insight need to take place for the project to be therapeutic. Etchegoyen says:

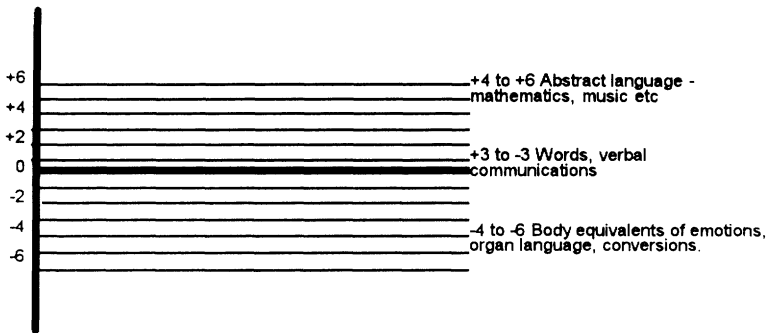
These two types of [insight] . . . sanction a clear difference, but not a supremacy, because these two types of knowledge are not mutually exclusive: things must be known word to word and also ostensively. (1991:667)

Whilst Foulkes’s emphasis on communication does prioritize descriptive insight over ostensive insight, he cautions us against intellectualization (Foulkes and Anthony, 1957: 263):

A rising level of communication in the group is not to be confused with intellectualizing. Intellectualized discussion is suspended . . . in mid-air, whereas true communication in the group is firmly rooted in the experience of the group, and grows from it.

Drawing upon Foulkes and Anthony’s (1957: 61) pictorial representation of the different levels of communication (Figure 1) we can say that for a verbal communication to be therapeutic, it has to be grounded in and connected to ‘the bodily equivalents of emotions’ (1957: 260). In other words, the experiencing of emotions, levels –4 to –6. But the question remains: is it possible to fully *experience* an emotion without *expressing* it?

FIGURE 1
Levels of Communication

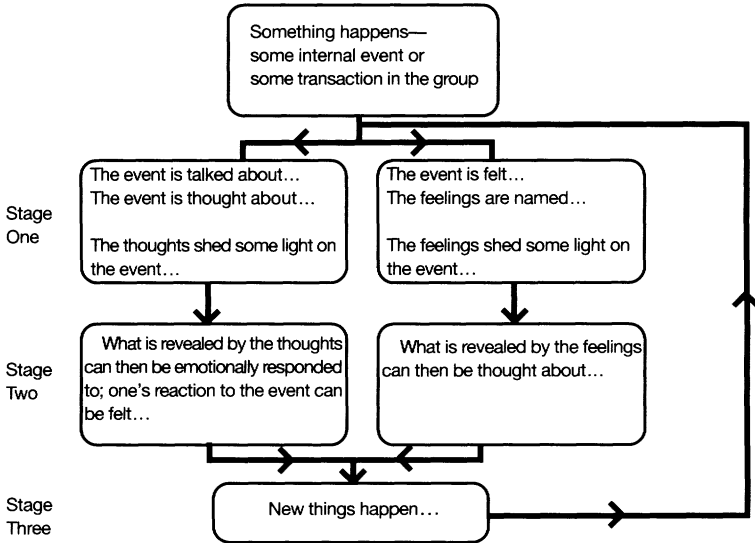


Note: Based on Foulkes and Antony, 1957: 261.

The Therapeutic Process

The therapeutic process can be thought of as a recursive process, one that feeds on itself. Schematically, and therefore oversimplifying the humanistic and analytic positions, the left branch of Figure 2 can be thought of as the more 'analytic' beginning with thought, the descriptive insight, and the right branch as the more 'humanistic' beginning with feeling, the ostensive insight (Stage One). However, the process must next move into the other domain in order to complete the experience (Stage Two). This results in their both arriving at the same place through different routes (Stage Three). It can be seen that this particular division between the humanistic and the analytic, the primacy of thought or feeling, is illusory. However, there are other more fundamental differences between the two that are not illusory and cannot be resolved. What is important is that the process, wherever it may begin, must traverse both domains, thought and feeling, through descriptive and ostensive insight, through primary and secondary processes, in order to stand a chance of being therapeutic. It is when the process gets stuck in one or other domain that problems arise. Many a primal screamer has only screamed, without any change occurring in his or her life, or gaining any understanding of the existential

FIGURE 2
The Therapeutic Process



predicament. Many an analysand has only understood, and has never connected with and experienced the body, remaining stuck in a mental universe.

The word ‘stuck’ can be reframed as ‘resistance’.

Resistances and Change

Because of the consequent anxiety, group members resist at every stage; they stop things happening, or deny that they are happening.

There is a resistance to expressing feelings because of the fear of a response, and also because the heat of the moment is when the censor is most inhibited; things can get exposed. There is a resistance to thinking because it is easier in a sense to keep your eyes closed and throw a tantrum, letting someone look after the mess. To think is to open your eyes, to look at what has happened, name it and take some responsibility. To think is, in a very profound sense, to accept a loss. To think is to risk being the adult. To feel is

to risk being the child. To risk either spontaneously is to risk play, and so risk change.

The conductor's task is aimed at facilitating this process. The interventions are aimed at freeing up the bottlenecks — wherever they appear. The timing of these interventions is of course crucial. To point things out too early is like shouting to someone who is learning to swim 'You're floating on your own! There is no one holding you!' The person is bound to sink. The process of swimming is interrupted to think about the process of swimming. It takes an experienced swimmer to be able to take on the complex position of participant-observer, to think about technique whilst engaged in the act of swimming.

There is another polarity and debate that appears at this juncture, which is whether comments should be aimed at the group-as-whole rather than at individuals. In other words, what is the best way of freeing up these 'bottlenecks'? For some conductors, to speak directly to individuals is anathema: they would see it as colluding with a wish for dependency or as a pairing phenomenon (Bion, 1989). Whilst there is a truth in that formulation, it seems to me that to hold rigidly to that stance is therapeutically counterproductive and is based more on ideology than clinical results. Further, it is an error in logic to suppose that one gets a group functioning only by making group interpretations. One gets a group functioning in a variety of ways, only one of which is the group interpretation.

And Finally . . .

It might seem from the discussions above that I am seeking a prescriptive methodology, looking for the definitive intervention. This has not been my intention. Rather, the intention has been to acknowledge, first, that as conductor I constantly struggle between predicaments and, second, to explore how my preoccupations have, in a sense, created the predicaments, and also informed and influenced the struggle between them.

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