

psychodynamic circles. However, they certainly occur with great regularity, even in groups supposedly run along nondirective lines. The therapist needs to be alert to their presence to ensure that they are being used in a constructive fashion.

Psychological Work Factors

Self-understanding and interpersonal learning are two therapeutic factors concerned with the acquisition of insight into one's behavior or reactions and learning from interactional events. These two processes are difficult to separate because they represent the internal and external components of the same process. Insight focuses on internal states of mind that are revealed in interpersonal action. Interpersonal learning results in enduring internal alterations concerning how the individual views the interpersonal world. Interpersonal learning has been divided into input and output categories. Input refers to the effects of receiving feedback from others. Output concerns attempts to try out new behaviors with others. Self-understanding can be viewed as the resulting "corrective emotional experience." Compared with individual therapy, the tempo of interpersonal learning is generally more vigorous, multifaceted, and unpredictable in groups. In Chapter 10, the discussion of critical incidents centers around the process of psychological learning. These psychological work factors will be discussed in detail there.

Summary

This chapter has introduced the language of General Systems Theory. The idea of the therapy group as a complex set of interacting members that can be understood at several levels is fundamental to clinical work. The importance of identifying boundaries and using these as a therapeutic focus will be developed in later chapters. Therapeutic factors provide a considerable portion of the help attributed to group therapy. They are understood as mechanisms residing in the very nature of group interaction and are not dependent solely on therapist interventions. A simple clustering of the therapeutic factors described in the literature is provided.

CHAPTER 4

How Groups Develop

This chapter provides an overview of group developmental stages. In Chapter 5, social roles will be described that identify the contribution made by different types of members to the development of the group system. Developmental stages and social roles together constitute a theoretical infrastructure for organizing group phenomena. These two chapters outline the principal ideas in a condensed fashion so that the full range of the material can be surveyed at one time. The material will be applied to clinical work in greater detail in Chapters 8–11.

The Concept of Development

The idea of social systems maturing over time grows out of the general systems orientation introduced in Chapter 3 and the importance of boundaries for defining a system. Development is reflected in the emergence of boundary issues that, if successfully addressed, result in a gradual deepening of the group experience. An appreciation of the group task being addressed in each stage may help the therapist to understand the significance of some types of member behavior.

The phenomenon of developmental stages in groups is found in both the social psychology literature and in studies of clinical groups. Some authors limit their lists of stages to four, whereas others prefer expanded lists of up to nine stages. In this book, six stages are

presented: engagement, differentiation, individuation, intimacy, and mutuality, plus termination.

The notion that groups go through a series of predictable developmental stages is somewhat surprising. It is easy to understand the importance of developmental stages in infants because their development is tied to physiological maturation processes. Group development, on the other hand, is dependent on the individual contributions of mature adults. Yet consistently, in psychotherapy groups, administrative committees, community organizations, or athletic teams, the same patterns emerge. Stage concepts may also be applied to the process by which the relationship between two people deepens over time, as in a marriage or in individual psychotherapy. An understanding of the developmental context gives the clinician a useful perspective on the meaning of social behavior.

The concept of group development is another way of addressing group-as-a-whole phenomena. In Chapter 1, reference was made to Bion's ideas about "basic assumption" states and Whitaker's description of psychological conflict held in common by the group members. These same events can be interpreted in terms of group developmental tasks. As in the individual psychotherapy literature, different theoretical traditions use different metaphors to describe similar events. The language of stage development is a particularly useful metaphor for understanding the group as a whole.

The usual approach to stages is descriptive in nature. In this chapter, stage descriptions are augmented with ideas about the tasks that the group members must address in each stage. This expanded view provides the therapist with pragmatic guidelines regarding the sorts of interventions that might be most useful. In the stage model, group development is conceptualized as an epigenetic process in which adequate resolution of any one stage is in part dependent on satisfactory mastery of the preceding stage or stages. At the same time, the tasks of all stages are continually before the group. For example, the engagement task of stage 1 may come into focus again whenever group membership changes, or whenever the group becomes disillusioned with its progress. As a group develops over time, the members interact with increasing complexity.

The ideas of group development are particularly appropriate for time-limited groups. Because such groups generally have consistent membership, there is an opportunity to observe developmental features more acutely than in groups in which members change. When

there are time constraints, groups must move as rapidly as possible into more advanced working stages. By accurately attending to the tasks of stages 1 and 2, the therapist can achieve more time for such work. The more the group experience is packaged into a time-limited format with consistent membership, the more evident will be the progression through stage tasks.

Each group developmental stage is characterized by its own style of internal organization. This may be understood as a task that involves a particular set of interpersonal issues that come into focus during that stage. The task polarizes the members along its particular dimension and implicitly demands that each member reveal a position on the relevant issues. A dialectical tension thus is set up within the group membership that creates a pressure to resolve the extreme positions.

The group task is mirrored within the individual member in whom it will be addressed with more or less ease according to characterologic structure. Each member must participate in attempts to master the task of each stage. Only in this fashion can the members benefit maximally from the group process. Conversely, the process of addressing a sequence of common tasks contributes to a sense of "groupness." Members seriously out of step with the main body of the group are liable to feel alienated. If they are ahead of the majority, they may feel that they are getting little out of the experience. If they are behind, they may experience a drop in self-esteem because of their failure to participate with the other members. In time-limited groups, this is a strong argument for a certain degree of homogeneity in group composition.

A period of developmental change tends to be followed by a consolidation phase during which the members work out their reaction to the new set of role expectations. Thus, the group structure undergoes a series of transformations, with periods of change alternating with times of consistency. Within each stage, the individual member is forced to confront the issues "in focus" during that stage. The stage tasks encompass the major themes of human development. They form a predictable sequence by which human relationships are deepened and enriched. In relationships, as in individual growth and development, one must learn to walk before learning to run. The times of transition between stages are critical points of change during which new and more complex interactional behaviors are attempted by group members (25).

Developmental Stages

Stage 1: Engagement

The first task of the group is to ensure that all members are engaged in its activities. If the group does not coalesce, then "group therapy" cannot occur. This process entails a commitment from each member to participate. The interpersonal dimension that becomes polarized in stage 1 is along an axis from trusting and relying on the group at one end, to keeping separate and distant on the other. The task is addressed through two major mechanisms. The first is the comparison of similarities between the members that promotes universality. The second focuses on the identification of differences between experiences in the group and outside circumstances. This assists in developing the external boundary of the group.

The structure of the group is portrayed in Figure 4-1. The boundary focus is on the external boundary of the group. This underscores the need for group identity and definition. The designated leader is the only person about whom the group members have some knowledge and some specific expectations. The leader created the group, selected the members, and signals the beginning by closing the door of

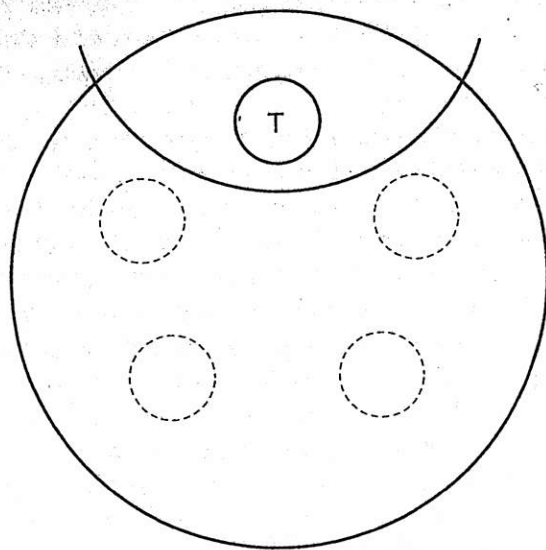


Figure 4-1. Group structure in the engagement stage.

the group room for the first session. The members do not yet represent real identities; they form an undifferentiated membership cluster.

The task for individual members is to allow themselves to become part of the group. Almost everyone experiences anxiety when faced with the task of entering a new social system. Often this fear is associated with the idea that one will not fit in, will be found different, and perhaps will be asked to leave. The task of "getting in" the group is usually handled by self-disclosure. The tentative and partial nature of these self-disclosures is paralleled by the tendency for the other group members to accept them in an uncritical fashion. Members will actively seek positive identifications and similarities rather than make critical or negative critical comparisons.

The process of self-disclosure and the resulting sense of acceptance is of far greater importance during the early stages of a group than the actual content discussed. When individuals put into words the concerns they hold about themselves, they are implicitly acknowledging the need to work on these issues; that is, they are accepting themselves as objects of concern. This process of acknowledgment is the first major step toward successful therapy. The identification of goals with some commonality to other members enhances the universality experience. All of these experiences serve to differentiate the group experience from outside circumstances. They create a sense of what this particular group is going to be about.

The tasks of the engagement stage can be considered accomplished when all members have actively participated in the group and there is a rising sense of satisfaction and commitment to participation. There is a conviction that the group is going to survive and a comfortable sense of cohesion. This is very similar to descriptions in the individual psychotherapy literature of a positive working alliance. Groups may become stuck in the relatively pleasant but non-challenging atmosphere of the first stage, and the leader must be prepared to assist the group in moving on once the stage tasks have been accomplished.

Stage 2: Differentiation

The central tasks of the second stage of group development are to recognize that differences exist among members and to develop methods for conflict resolution. The term *differentiation* identifies the tasks of the stage more accurately than the usual descriptive title of *conflict* stage. The work of this stage contrasts with the focus on

similarities in the first stage, and the emergence of this thematic shift is inherently more difficult and anxiety inducing. However, a more confrontational style addresses the tendency in stage 1 to show uncritical acceptance. A cooperative style of addressing differences must be developed.

The interpersonal axis being examined in this stage lies between the active initiating pole of confronting and asserting, and the avoidance of conflict through passive acceptance. This is a shift from stage 1, in which most of the behaviors lay in the positive and reacting spectrum.

The new group structure is portrayed in Figure 4-2. The focus is now on the individual boundary of each member. This produces friction at the interface with others, but the task of the group is focused on recognizing the individual. "Real" identifiable people are beginning to emerge, though they are still seen in rather general and somewhat stereotypic terms. The designated leader still plays a predominant role in the group.

The process of interpersonal challenge that is going on at the group level will be echoed at an internal level for each member. The need to justify one's position through assertive statements forces increased self-disclosure. The process of defending oneself, taking stands, and criticizing others will often bring to the surface aspects of

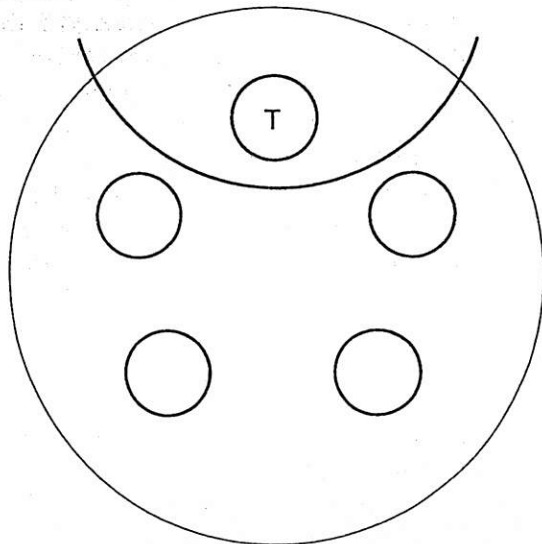


Figure 4-2. Group structure in the differentiation stage.

the self that are viewed ambivalently or negatively. These self-percepts may be as polarized as those within the group generally. Often they are seen as autonomous urges or mysterious reactions beyond conscious control: "The Devil made me do it." Indeed, the exaggerated and stereotypic aspects of the group process in stage 2 often entail the use of projective defenses through which rejected aspects of self are reacted to in others. The group process helps the individual to acknowledge personal issues that need to be addressed. By putting these into words for the group, the member is at the same time clarifying them for self. The individual must become able to tolerate reactions of anger and conflict in self and others. These may be associated with the fear of destructive loss of control.

The individual is also challenged by the group to conform to explicitly stated group expectations. This entails a greater commitment to groupness, which may be interpreted as a loss of individuality. The process of working through these issues serves to consolidate group cohesion and engenders a deeper commitment to the group by its members. The stage reaches its closure when all members have participated to some extent in the assertive work of self-expression and when the group is able to tolerate challenges and confrontations as constructive events. The members realize that they are acceptable to the group even when they seem to be at their worst. There is a recognition that everyone does not need to have the same viewpoint in order to get along. Stage 2 often ends unexpectedly. The leader may come out of one session fearing that the group is going to self-destruct and enter the next session to find a happily interacting working group.

The group moves on from the first two stages with two important qualities: a sense of universality regarding common problems and goals and an ability to tolerate differences and challenge them. Important work has been done on two major aspects of interpersonal functioning—affiliation tasks in stage 1 and self-definition tasks in stage 2. Thus, the first two stages of the group equip the system for more complex interpersonal work. The interactional milieu is becoming more complicated as the system continues its process of maturation.

Stage 3: Individuation

The task of the third stage is to promote an exploration of the diversity within each member. In stage 2, we saw the beginning of the emergence of self-definition. In stage 3, this process continues with efforts to understand the complexity of the individual. Although this

process is conducted through interpersonal dialogue, the content emphasis is on the individual more than on the interaction between individuals (26).

The internal focus calls for an attitude of openness to psychological issues and the relinquishment of a defensive posture. This work polarizes for each member an introspective attitude toward self that has self-blaming and self-oppressing qualities at one end, and self-accepting and self-exploring qualities at the other.

The schematic diagram of the group now undergoes a major shift (Figure 4-3). The designated leader is no longer the center of group attention. The individual members have emerged as fully identifiable individuals. The boundary area in focus has to do with internal issues for each member. This stage is characterized by a marked increase in knowledge about how one functions psychologically. Hidden or unacknowledged material is brought under greater scrutiny.

The central task for the individual member is to challenge characteristic defensive mechanisms. This attention to personal motivations and the consequent interpersonal implications of them allows the individual to view private issues more objectively. In this process, the individual may face a serious threat to self-esteem as previously unacknowledged parts of self are explored. In the longer term, it usually stimulates an expanded view that reinforces self-image.

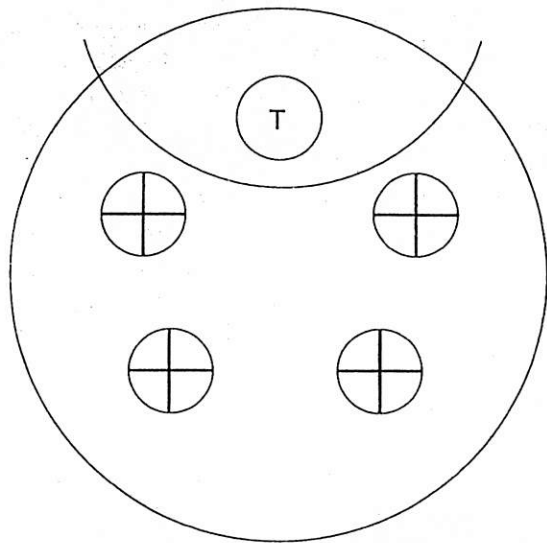


Figure 4-3. Group structure in the individuation stage.

The work of the third stage produces a great deal of personalized information about each member. Participation in this process draws the members closer together, and group cohesion and morale are generally high. The shift to stage 4 is often heralded by the introduction of topics related to close personal relationships. This is a natural progression that uses the knowledge and closeness gained in stage 3.

From this point on in the life of the group, the transition between stages becomes less obvious. Some authors have been content with describing only three stages of development before termination, leaving everything after the conflict stage in one large working category. However, even though the transition zones may be less precise, there is value in considering two further working stages that entail consideration of two basic axes of social life, intimacy, and autonomy. In a sense, this sequence represents a reworking of issues that were first addressed in stages 1 and 2. Engagement is deepened by addressing intimacy issues, and the differentiation task moves into issues of autonomy in relationships. This idea of a deepening spiral of recurring work themes captures an important aspect of group development.

Stage 4: Intimacy

The central task in this stage is to come to terms with the increasing closeness that develops among the members as the group matures. In a technical sense, the increased information that the members now have about each other draws them into closer here-and-now interaction. As greater familiarity develops, the individual members have greater influence on each other and may experience levels of intimacy sometimes greater than any they have found elsewhere in their adult lives. This entails acknowledgment that the acquaintanceships of stage 1 have developed into real relationships. Relationships between members have now begun to replace the relationship with the leader as the principal concern of the members. This task will polarize the members along an "affiliation" dimension. At the positive end, this reflects warmth and closeness toward others. At the other end, rejecting or isolating reactions indicate problems with the affiliation process.

The boundary focus is now primarily at the interface between individual members (Figure 4-4). Special relationship subgroups may develop. The boundary for these is shown as extending outside the external group boundary because there is greater likelihood of extragroup socializing during this stage.

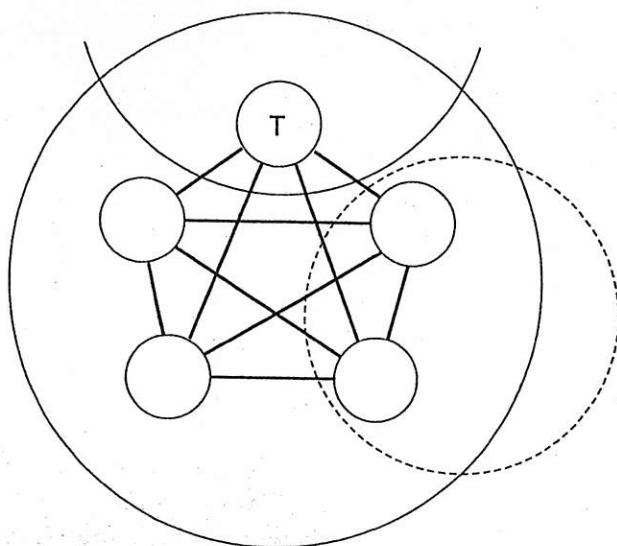


Figure 4-4. Group structure in the intimacy stage.

The work of this stage provides an opportunity to explore the importance of relationships. This will bring with it the threat of rejection by persons who have become known in a highly personalized fashion. Because this is a common problem with patients seeking psychotherapy, the opportunity to explore these reactions provides a powerful experience. This entails an acceptance of self as capable and worthy of closeness and a dimension of trust that the other will tolerate this and reciprocate. This work addresses the universal human need for closeness and acceptance.

The work of stage 4 is generally conducted in a positive atmosphere, sometimes reminiscent of the euphoria of stage 1. There is an excitement in the air. Consistent attention to the task will lead to sobering second thoughts concerning the responsibility of intimacy. This gradual shift leads into the work of stage 5.

Stage 5: Mutuality

The task in the fifth stage is to explore the responsibilities of close relationships. This concerns an appreciation of the fundamental uniqueness of each member and the balance between individual autonomy and interpersonal involvement. The members become aware that mature relationships cannot be determined unilaterally by one

person but must be based on an interactive process of mutual agreement and consent.

The work of this stage is polarized along the independence/interdependence axis. At one end, this entails a consideration of unbalanced relationships based on dependency or control that are quite enmeshed. The other extreme goes beyond the recognition of independence from the other to a degree of separateness that leads to isolation.

The schematic group diagram now achieves its most complex structure with strengthened interactions among all members (Figure 4-5). The focus remains on interpersonal relationships, but the boundary of the individual member is now highlighted. The subgrouping typical of stage 4 is less evident.

The mutuality stage addresses questions of irresponsible closeness that were raised in the preceding intimacy stage. Questions of dominance or submission in relationships are explored. The task of accepting responsibility for one's interactions with others as equals involves working at a high level of personal maturity. Issues of trust often come into focus during this process.

Members report significantly greater ease in addressing interpersonal issues in the group, and there is more evidence of successful application to outside relationships and circumstances. Questions be-

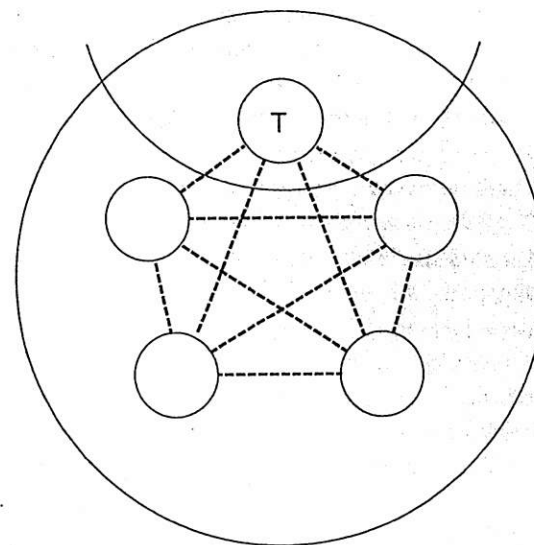


Figure 4-5. Group structure in the mutuality stage.

gin to be raised about how much more therapy is required. Other personal projects and ambitions begin to intrude on the insularity of the room. Attention is again being directed to the external group border.

Termination

The final stage in the life of a group is its ending. No number is given to this stage because termination may occur at any time depending on the duration of the group, the capacity of the members, and the time available. Whenever it does occur, a common set of issues must be addressed. The central task for the termination stage is to achieve a comfortable sense of disengagement from the group system while incorporating the group events as a positive and constructive experience.

The end of a group means the dissolution of group structural features. We are left with individuals only (Figure 4-6). Within each individual is a memory of group experiences.

The individual member must deal with themes related to loss. Components of sadness and grief are usually contained in these associations, along with disappointment and perhaps anger. Working through of these issues in terms of the group itself and its individual members constitutes necessary termination work. The danger is that the end of the group will be interpreted as abandonment before full recovery has been achieved, which may result in a demoralized state that will lead to an enduring interpretation of the therapeutic experience in negative terms.

As in all stages, the work must be done by each member. A

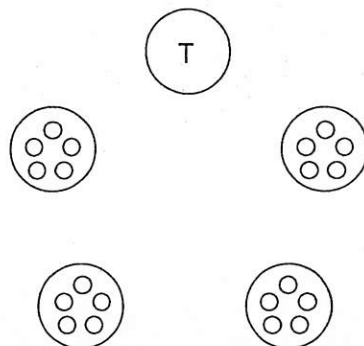


Figure 4-6. Group structure in the termination stage.

particular problem at the end is that some members may attempt to avoid this task by terminating early or missing final sessions. The therapist needs to participate in this stage as much as the members. The natural sense that more could have been accomplished can be offset with the realization that outcome studies indicate that improvement continues to increase for some time after the actual termination.

Summary

This chapter has summarized a theory of group development. Each stage presents specific challenges and tasks to the group and to the individual member. Stage recognition is most useful as the group is beginning. During stages 1 and 2, the leader's principal responsibility is to assist in the creation of a therapeutic group climate. Once this is achieved, more attention can be paid to individual issues.

The thematic shift between stages usually occurs gradually. Early hints of dissatisfaction with the current level of work may surface, or new behaviors may be briefly tried out in the group. Sometimes stage shifts are heralded by a change in the content focus as outside experiences are described. For example, the onset of the intimacy stage often begins with attention to outside romantic relationships. The therapist should be alert to these hints of change. Through reinforcement of them, the stage transition can be facilitated. The therapist cannot, however, force the group through stages. Blocks or resistances can be addressed so that the members may begin to think of new possibilities in their manner of relating. Stage mastery is assisted by encouraging discussion of the process of, and reactions to, addressing the tasks of each stage.

Therapists may also block group development by discouraging the emergence of behaviors or themes that would lead to the exploration of new material. This may be done purposefully. For example, a brief inpatient group with severely disturbed patients is best kept to an engagement stage of interaction because the circumstances make it unlikely that there will be an opportunity to deal with more intense issues. The therapist may assist in holding the group to this task by emphasizing positive and constructive general discussions and deflecting themes of conflict or confrontation. An awareness of group developmental stages prepares the therapist to make such decisions knowledgeably.

One warning is in order: the idea of group stages, like that of individual growth and development, is a general theory. Individual

groups will show unique responses to these general tasks. The ideas contained in this chapter should help to sensitize the therapist to the important issues. Later chapters will discuss in more detail how the therapist may assist the group in mastering stage tasks. At any point, critical incidents may need to be addressed. Specific needs of a particular member may require interventions even if out of harmony with group needs. General clinical skills in psychotherapeutic management are therefore necessary. The group developmental theory is designed as an orienting perspective that can assist the therapist in understanding the relative significance of group events. This provides the leader with guidelines regarding the type of intervention that will be most relevant to the members' experience. For example, issues of an introspective nature may appear in an early session, but to pursue these with zeal may mean that essential group consolidation tasks are avoided.

Group stages are observed most clearly in time-limited closed groups. Such a context provides the maximum opportunity to see a social system develop increasing complexity. In later chapters, the language of group development will be applied in identifying group regression and in appreciating the issues involved at times of group membership change.

CHAPTER 5

Social Roles

The idea of social role connects the interactional style of the individual with the functional needs of the group. The concepts of social role complement the theory of group developmental stages discussed in the preceding chapter. Stages describe the group as an evolving system, whereas roles focus on the impact that types of member behavior have on that system. In Chapter 6, assessment methods will be presented that link the individual patient to these ideas of group organization.

The Concept of Social Role

Social role refers to a group function, not an individual quality. The family literature provides a useful approach to this idea. *Family role position* describes some functional requirement of the family. For example, the family role position of "father" is required. In a single-parent family, this role may be filled by the mother, a male relative, or a boyfriend. The critical point is that the organizational position be filled. Similarly, families can be considered in terms of the parental role system, the spousal roles, or the dependent child role. These concepts may also be applied to group social roles. This matching of group need with individual predisposition makes the idea of social role particularly interesting from a theoretical perspective (27).

One characteristic of patients with neurotic or characterologic