

# **The therapist, an adult seeking his place in the group**

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## **Abstract**

This article describes the role of the therapist within groups of children, highlighting the natural tendency of recent research and aggregation of peer relationships. The creative potential that arises from this type of relationship proves a useful tool for growth and acquisition of skills management and troubleshooting tasks and in particular the peer group reveals an important relationship context and can stimulate the creative aspects and development, to a greater extent than in relationships with adults in the family. The therapist in the group will tend to try to take this attitude, reassuring but not proactive, in order to stimulate free expression and respect of children within the group.

**Keywords:** adult therapist, group, children, childhood

## **1. Children's Groupality seen from Adults**

In our society, in our cities, a child's life is regulated by and subordinate to a series of conditionings that leave little room for the organization of spontaneous and creative groups. At any rate, it may be stated that children's groups are allowed and considered as groups of peers, that is, capable of being autonomous from the family group, when in children's gatherings it is no longer necessary for an adult to be by the side of each child, to take care of him. This is the case when it is possible and useful for the children to fulfill certain tasks together or enjoy themselves, or learn certain skills.

In other words, in our society, the formation of a children's group is seen as the next step to the exclusive relationship with the adult, which makes explicit and functional a relationship between peers, mediated by the adult.

According to this perspective, the adult has the task to continue to foster the social development of the child, by teaching him how to live with his peers in a classroom, in a soccer team, in Sunday school, etc.

Sometimes, in one of these contexts the child has a difficult time in relating to his peers either because he does not learn or because his behaviour does not allow him to adapt to his peers and/or adults. When this happens, there is a tendency to once again suggest to him an exclusive relationship with the adult for educational, therapeutic or rehabilitation purposes, in the belief that such a relationship will be more effective in helping him to bridge the developmental gap.

Indeed, although one is aware of the socialization skills of children, even when they are very small, it is believed that through an exclusive relationship with the adult, the fulfillment of the developmental potential of each child will be prevalently guaranteed and fostered.

## 2. Why an Adult

Though we do believe that this opinion is partly true, we feel that it is important to consider that a peer group relationship is a privileged growth tool. Indeed, it allows the child at each stage of development to acquire different experiences, equally important to his personal enrichment as those which he acquires in an individual relationship with an adult. The therapist's confidence in the autonomous socialization skills of the child is the first condition for the group to fulfill its therapeutic function.

Indeed, this trust will determine the way he relates to the group, his feedback or lack thereof, his taking on or his failure to take on a normative role, etc.

Hence the importance of reflecting deeply on the figure of the therapist in children's groups, for he is asked to profoundly review the way in which he considers himself as an adult in relation to the children.

The reflections illustrated in this paper refer to children in elementary school. If they referred to pre-adolescents or adolescents they would have to be modified, for the way in which these individuals relate to adults is different, and so are the problems characterizing these different phases of development.

Our argument is based on the assumption, now supported by ample research on the first moments of a child's life, that the child tends to interact with his peers from the first moments of extrauterine life. Not only that, but it has also been proven that the child feels pleasure when he is in contact with his peers. This pleasure may be well observed in day-care centers, for example, in the way children happily gather together on cushions, or in their contagious laughter, or in the way they improvise collective music with the help of spoons banged on plates. In day-care centers, we also observe that emotions are shared spontaneously by the group and expressed by the group as a whole, whether it is laughter, crying or anger, for instance.

The task of the group therapist is certainly not to teach children how to be together, but to enable them to rediscover the depth of the group's bond. He can do this by providing the children with a secure physical and mental space where they can re-experience and recognize such a bond, in the presence of an adult, who will help them to make the best use of this relationship to serve the individual growth of each child.

This primitive groupality has not disappeared by the time children go to elementary school. Rather, it is relegated to recess times and kept outside the control of the adult because it is considered as something that cannot be understood or appreciated by the adult, who sometimes even punishes it if it interferes with learning processes. It is thus in this group that the therapist must find a place, to make it evolve. He must also work to first strengthen the group's narcissism and then enrich its members by investing positively in the group.

I think that this task should be considered by every adult that is responsible for a group of children and not only psychotherapists, because enabling children to better

use the group's resources for their individual growth has a precious preventive value for society.

It is a difficult task because it is relatively new. Indeed, it is accepted that within a dual relationship with the caregiver, the child grows as an individual. However, it is not equally accepted that a group of children may grow as a group, that is, as the ability to use the group's resources for one's own growth, within the relationship with an adult. Thus, the ways and best conditions in which this may happen are yet to be equally studied and explored.

The adult is indispensable, for without the adult a group of children remains at the level of a gang and is not able to generate growth.

However, the adult cannot fully enter into the group's mode of communication without relinquishing his role.

How will he solve the problem of participating in the group without reproducing the adult-child relationship, multiplied by the number of children in the group, but rather by placing himself at the service of the group and of its creative potential?

### **3. Specific Aspects of the Therapist's Role in the Group**

In individual child therapy, the therapist gives the child the opportunity to relate himself to others in his own ways, which the therapist will get to know during the therapeutic process. Every child represents something new from this point of view; the therapist will follow the way that the child will point out to him.

On the other hand, the therapist will capture the signs given by the child, which will enable him to understand the child, and approach him according to his needs and his ability to tolerate this relationship.

Something similar, but much more complex, also happens in a group situation.

It is more complex because in the first group session of group therapy, everyone faces something unknown to them, including the therapist. Indeed, although the therapist normally has already met with the individuals, he has never encountered them as a group, this entity still unknown to all.

Since one is afraid of the unknown, the first effort of a child is to exorcize this fear: the child turns to the therapist in order for him to take on a known role, that of the normative guide in the work facing them. This reconfirms the child's experience of the relationship with an adult, and brings it back within the bounds of the familiar. If the therapist is attentive and curious towards what will happen in the group, among all of them, and waits with confidence, without suggesting any rules of conduct, he will be giving a message of this sort: "The situation is in our hands, and I'm interested in seeing what happens".

One feels precisely in the group's hands in those first moments of silent loss, of momentary suspension of one's activity but not of one's precious imagination, which is almost the only clue that the group gives us of its vitality.

Therefore, on the one hand we have the adult that conceives the group, and on the other the children that through his interest and trust may rediscover the importance and vitality of their bond and dare to express it.

How will they express it?

The characteristic which distinguishes the communication of a child from that of an adult, that is, the child's ability to play down verbal communication to the advantage of powerful modes of expression, sometimes less comprehensible for adults due to their multi-faceted nature, is evident here. It is reinforced and enhanced by the group, which acts as a sounding board. The therapist, therefore, is immediately faced with his ability to tune into bodily communication, muscle movements and neurovegetative reactions, and symmetrically, with his ability to come into contact with his own responses and use them to understand what the group is experiencing.

In order to do this, he must delve deeply inside the group, experience first hand the power of the anxieties, fears and enthusiasms that animate the group. After all, he is essential to the group, for the group communication depends upon the therapist, at least in the initial stages, and it is the therapist that makes it possible for it to exist. However, it cannot be said that he is part of the group, in the extent to which his goal is for the group to remain a peer group.

Although he is deprived of the power to direct and is partly deprived of the communication modes most frequent among adults, he always remains profoundly different, big and mysterious, for he does not have a definite place in the world of adults with whom children usually come into contact.

Precisely because his place is not definite, the therapist has the possibility to further the group process, because the group may use him in different ways, according to the circumstance and needs. From time to time the group will ask him to be reassured or to understand better; to share enthusiasms or tolerate problems and frustrations, all of which are emotions connected with the group relationship and are vital to the individual.

At different times of the group's life different requests will prevail. The therapist will have the task of deciphering them and responding at a level which is comprehensible and useful to the group at that time, bearing in mind that the task shared by the children and therapist throughout the life of the group is to enhance and further explore the ability to think together in order to understand one another better.

There are times in which this ability seems to be flooded and overwhelmed by the excitement aroused by unrestrained emotions within the individuals, that need to be cried out in the group in ways that may seem excessive and senseless. Perhaps these are the most difficult times for the therapist, who painfully feels that he is a stranger and powerless. However, they are the most significant for the formation of the group. If the therapist is able to be an attentive and protective spectator, he will discover how important it is for the children to be together so intensely. He will thus be able to help the children, by identifying with their attitude and accepting the group's manifestations and taking them on board, so that they do not destroy the group itself.

At this point, aware of its importance in the eyes of the therapist, the group will reflect on the manifestations determined by its existence, on a par with the therapist. They will thus work together, each being aware of his diversity and possibilities.

When the group feels important, it works with the therapist, it truly becomes a co-therapist, in the sense that the children and the therapist together can reflect on the life of the group, on its possible reactions and their meaning. In this phase it is possible, for example, in the groups in which the setting is appropriate, to discuss the entry of a new member, of how he will be accepted, etc., so that this event too may become a constructive element of the group process.

#### **4. The therapist's activity**

So far, we have stressed the need for the therapist to leave the group free to take the initiative, for him to maintain a very present, very reassuring position but for him to abstain from proposing anything excessively. Indeed, these are the characteristics that must emerge in the first stages of the group, if the group's level of communication is to be one which the children need at that time and not that which the adult imposes.

In such phases, the activity of the therapist may be seen as being rather dependent on the moods of the other members. Indeed, his task is to highlight these common movements by participating in them and thus strengthening them. Sometimes he will do so by commenting on them.

However, there are times when he will have to come out into the open, so to speak. As the setting in Bleger's definition, the adult in the therapeutic group manifests himself and manifests himself in his diversity when the group attacks and excludes him. This may occur in different ways, including the classical way of locking him out of the therapy room, as sometimes happens. Obviously what is very important is not only what one understands but what one says and/or does in such circumstances, in which the meaning of the therapist not being part of the group, but being essential to its existence, functioning and growth is evident.

Other critical moments are those in which the group feels that its survival is in jeopardy, as for example, when one or even more members drop out. The therapist is directly challenged, for the group attributes him responsibility for the crisis and the power to solve it. In the imagination of the group that seeks an explanation for the disappearance of the absent member, the therapist becomes the ogre that devoured him, or the mother who wants him all to herself.

In any case the adult, with his terrible and all-absorbing needs.

In this case too it is up to the adult to accept, clarify and lead back to the group the anxiety-generating contents, so that it can work through them and continue its journey.

Finally, at the end of therapy, children ask the therapist to be able to identify with him so that they can face the central task for any growth passage, namely separation. In this case, they have to be able to separate themselves from the therapist and from the group. "If all of the children stop coming to the group, what are you going to do?"

What will become of this room?" asks Sara. With the end of her therapy approaching, she is trying to anticipate and manage her experience of loneliness when the group will no longer be there to support her.

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