

Expressions of Co-Therapists

Processing and Sharing in the Art

**HOW ART EXPRESSION FACILITATES IN THE PROCESSING
AND SHARING OF CO-THERAPISTS' WORKING WITH GROUPS**

A THESIS

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Abstract

The aim of this research is to explore how art and the art-making process can be used as tools to deepen the processing and sharing between co-therapists working with groups. Researchers disagree on the benefits of co-therapy, but agree that working in a couple is complex and holds risks, and can be beneficial provided that both therapists are able to contain their anxiety and work out their difficulties in a cooperative way (Yalom, 1995, Dugo & Beck 1984). In this research the art processes and its product enabled the co-therapists to explore their relationships from multi-layered dynamic perspectives and investigate issues of self, other, co-therapy relationship and group dynamic processes as part of supervision and self-supervision. This study integrates five parallel dynamic approaches: The art therapy lens, co-therapy developmental perspectives, group developmental theories, supervision approaches and art-based research as a method, using case studies conducted for this purpose. The results of this examination reveal far greater potential for co-therapy than previous studies suggest.

1.1 Introduction

Researchers on co-therapy development agree that co-therapists need to reach a certain developmental stage in their relationship, so they can be effective for the group. To reach that goal, issues of self-recognition, acceptance of others, co issues, group issues, adequate supervision and parallel thinking are essential and should all be processed, but this task can be difficult to fulfill. Difference and inequality are feelings that can be intensified when working together and may trigger feelings of competition, envy, gratitude, aggression, appreciation, love and hate. According to Berger (2001), exploring those delicate issues is not easy for therapists because it is difficult for them to cope with the idea that as therapists they are subject to the same unconscious assumptions they make about their patients.

Although there is change in the perceptions on supervision it is common belief that there is no time for art-making in supervision. In my research, this belief is found to be misleading. Making art means clarifying feeling, exploring the pre-conscious and unconscious feeling, developing empathy, helping differentiate affect and exploring the relationship. The discussion part of the art session is very significant for the integration of parallel and complex issues but the art-making process and the observation of the visual product are as important. The process of creating and observing the art enables the therapists to “see” and explore issues on different levels of experience using their pre-verbal senses and intuitions that cannot be attained verbally. Ireland & Weissman (1999) note that primitive psychic states are often communicated primarily through intense somatic and verbal evacuations, projections, and projective identification. It is only with focused awareness and conscious understanding that these states become clinical data, which can be used to facilitate

treatment. Using art in supervision the supervisor is able to “see” the wider picture of the co-therapists/group situation.

In the art therapy and supervision literature there are some publications on using the arts for individual supervision and exploration. To my knowledge there are no articles on the processing and sharing of co-therapists in the arts and few articles on couple therapy that may have few similarities.

In this research I observed co-therapists processing and sharing in the art and saw how art can enable them to explore their overall issues as co-leaders of a group. My own experience in co-therapy triggered this search for another way to deal with the complexities raised by working together. In this study I discovered an intriguing world of creation and communication that enabled sensitive issues to reframe themselves. My hope is that this study will broaden the therapeutic discourse on the connection between art therapy, co therapy and supervision.

1.2 Dynamic Approaches in Art Therapy

In the arts we can express our inner world nonverbally, and gain insight into our deeper selves by viewing it. “Color, line and form can reveal our energy levels, our feeling states, and our self concepts. Color can be soft or intense, brilliant or dull, delicate or powerful, and as such can 'speak' for us. Line can be jagged or smooth, flowing or disconnected, simple or complicated. All bear kinesthetic messages.” (Roger, 1993) Art can be used to bridge between our inner and outer realities by allowing the process and the images bring us messages. It can give us the opportunity to express feelings, either conscious or unconscious without concern for the final product. As with any self-exploratory medium, expressing ourselves through art may put us in touch with our anger, greed, envy, jealousy or any emotion we might rather

keep hidden inside. It is important to view that “dark side” and use the expressive energy to transform it. Visual arts provide the opportunity to express ourselves dramatically, poignantly, and colorfully and through that process get deeper insight as for whom we are. (Roger, N. 1993)

Art uses many of the symbols and mechanisms of displacement, condensation, splitting, etc. which Freud defined in the study of dream, but Dali notes, that there is a major difference which lies in the fact that art making is a conscious process which gives concrete form to feelings which are often unconscious, hence combining the ambiguity of dreaming with the tension of being fully awake. (Dali, 1995)

Kramer notes that spontaneous expressive use of art materials is not ‘untrammelled scribbling and messing’ the difference is comparable to that between aimless chatter and free association in psychoanalytic treatment. (Kramer 1980:9)

According to Hardy (2001) the symbolism in the picture can resonate and change their meaning over time, which enables the patient or in this case the co-therapists to express emotions safely, as well as facilitates the confluence of competing thoughts. Furthermore, art by itself has a healing power, since using art materials in the process of making a picture reinforces and raises the patient's morale by fulfilling a basic human need – being creative. (Hazut, 2004)

The work of art enables the patient to project difficulties through various images, to disassociate one self from them and to watch them from a distance. This process, which is by itself therapeutic, encourages concentration as well as inner search, which lead towards new solutions, and possibly also towards a change. According to Golub (1985) the use of art and materials as opposed to direct words, enables the creation of a safe space. Patients do not have to fully understand the

meaning of the symbols, images or materials they choose. The unconscious freely arises through the creation process, thus enables a vivid dialogue.

Dali suggests that in a therapeutic situation, the use of art materials facilitates the breakdown of defenses and the emergence of feelings and result in an art piece. In creativity, writes Ehrenzweig (1967), inner realities and outer realities meet by the same process. First there is the phase of fragmented projection, “Schizoid” in character, followed by a manic phase of unconscious scanning and integration when the arts unconscious substructure is formed. The secondary revision occurs in the ultimate ‘depressive’ feedback and reintjection of the work into the surface ego. Because the introjected materials were shaped on a lower, less differentiated level, it must appear to the artist more fragmented and chaotic than it actually is. The artist himself is cast in the role of the spectator faced with the chaos of newly created art (Ehrenzweig, 1967:80)

Pinchas Noy (1997) ponders on the importance of art and states that art expands the mind. In art he means any art activity: creating, making, teaching, experiencing, listening to, reading, thinking about or viewing art. Developmental psychology usually deals with the positive cognitive development: continuous acquisition of new and useful cognitive tools that are more adequate in dealing with the self-need and its reality. His claim that acquiring of the language for example is one of the great achievement but with it there is a big renouncement of many basic communication skills that are lost. The use of accumulates signs (language) that all know and obey to its rules. Words aspire to generalization, they isolate between signed and the sign and it neutralizes most of the signs from their emotion of personal memories.

Observing the art

Joy Shaverien distinguishes between two types of pictures made by people in art therapy - The diagrammatic picture and the Embodied Image. Most clients are not used to the medium of art and are inhibited by it. The first picture they make is diagrammatic and is used by the patient to tell the therapist something. The picture can be used as a guide in talking, meaning that the image is followed by word. These pictures are like maps of the client's world.

The second is the embodied image this is different from diagrammatic picture in the emotional investment. Once there is trust in the therapist a relationship is formed between the patient, the therapist and the art process. At this stage the pictures in the therapy begin to change and life emerges in the images. Feelings that were shut away are now exposed on the page, inescapable but separate. At this stage the aesthetics of the images change and develop. The pictures start to exhibit opposing elements, conflicts, repressed emotions that feel too difficult, too painful to face and become accessible, contained as they are within the frame of the picture. It is this kind of image that carries power for the maker; it is experienced as a talisman, can be a container of transference, and is experienced as a scapegoat. (Shaverien, 1992)

Avi GorenBar, (1999) composed a diagnostic tool for analyzing processes in creative therapy. He notes that the expressive therapies situates in a three point dynamic space: The artist/patient, the observer/therapist and the artistic product. He defines the "Art Product" as any stage of drawing; painting or sculpting done by the patient. He consists six developmental stages of creating in which there is significance and meaning to their order as well as importance to the lack of it.

The first three stages are organizational and give the therapist information about the patient's cognitive, motor and organizational abilities.

Contact - The stage of primary contact with the art. This stage relates to the patient's curiosity, decision-making, preferences within the medium and means of confrontation. In this stage one can learn about the inner rhythm of the patient his readiness to reach out, his dependency and independence.

Organization - The stage in which the patient organizes his body and art materials and may begin improvisation. May reveal the capability to understand a continuum and position in space ability to select, technical abilities, creative solutions and capability in the arts.

Improvisation - The stage that is defined in learning, trial and error. It demonstrates the patients' adeptness to the art, his flexibility, spontaneity as opposed to rigidity, spontaneity and tolerance to frustration.

The additional three stages point out to the therapist the patient's psychological strengths, his imagination, esthetic trait, themes, drives and conflicts he is dealing with. These stages are defined by their symbol/ content are:

The main theme – the period where a main theme rises from the background. In this stage the patient invests most of his attention in a certain aspect in the art product. It is expressed in a few manners: Its location in the creation, the color, the shape, the amount of energy invested and its personal meaning.

Variation – The stage after the main themes emerge, the patient is busy with developing, changing, improving, decorating or adding meaningful text to the piece.

Preservation – The final stage of finishing the piece, taking a distance from it, taking perspective and resting. This stage is defined with preparing for parting from it, preserving it, putting it away, and keeping it as a visual memory.

The therapist looking at those stages in creating process is then able to: reconstruct, follow and report the therapeutic/creative process of the patient, collect important

clinical information about the patient, understand the meaning of the therapeutic process at its various stages, and find possibilities for intervention within the creative experience.

Art therapy approaches

Two pioneers of the art therapy world are Edith Kramer and Margaret Naumburg. Kramer's view was that creating art in it self is healing. Margaret Naumburg on the other hand saw art therapy as analysis in it self and used creativity as a means to raise symbols, signs and issues from the unconscious as art psychology. "The process of art therapy is based on the recognition that man's most fundamental thoughts and feelings, derived from the unconscious reach expression in images rather than words (Naumburg 1958:511) In this approach art is part of a multi-layered dialogue where there is great importance to the verbal analysis of transference and counter transference.

To my mind these approaches don't contradict but support each other depending on the needs of the patient or supervisee.

Transference in art therapy

Margaret Naumburg (1958:511) writes that art therapy transference is not only expressed verbally, but is also projected visually in many pictures...the transference relation in art therapy is considerably modified by the introduction of spontaneous images, for with the projection of images the patient, by means of free association' begins to understand more clearly the original objectification of his conflicts, which may have begun in his earliest family relationships.

Shaverien describes transference as any notion of change of individuation or reconciliation comes about through this emotional engagement between the two people involved. When the patients become aware of his feeling towards the therapist, when they become active, alive and mobile rather than fixed and rigid change and growth is possible. Working in the transference means we are working in the inner world of the client or another way of saying is that we are working in the 'imagination', when acknowledging it the embodied images may be seen as a focus container for this. (Shaverien, 1992)

Counter-transference

An artwork supplies a safer transferable concrete space, compared to a direct transference. The artistic imagery could serve as the central focus of the projected feelings. Thus the therapist's attitude towards the patient is channeled via the artwork, a mediating factor that helps when coping with counter-transference.

Art therapy with couples

Many art therapists practice couple therapy, but little of this work has been recorded in print. The advantages of the creative therapies are numerous and can all be used for the benefit of the co-therapist team. According to Riley's (2003) experience in working with couples the visual images of relational problems provide a fresh view of rigid patterns of behaviors and introduce a new mode of communication. Art expression can make a problem visible and provide both therapists and patients with the opportunity to establish goals and create a treatment plan. Switching artworks between the couple is a means to force the couple to listen to how the partner interprets and projects meaning on his or her art. Reframing is a

technique that enables the couple to see an issue and look at it from a distant and different perspective. Also, couple therapy through the use of structured activities and well defined art interventions; help the couple reexamine the roles in their relationship (Landgarten, 1981 in Riley, 2004).

1.3 Co-therapy dynamic approaches

Co-therapy Background

It seems that co-therapy, like any relationship, is a mixed blessing.

Co therapy is a widely used treatment format especially among psychiatric residents, therapists in university counseling centers and training programs. (Berger, 2001)

The various meanings of Co in the Merriam-Webster's Collegiate Dictionary shed some light on the different nuances when discussing Co-Therapy. **1** : with : together : joint : jointly **2** : in or to the same degree **3 a** : one that is associated in an action with another : fellow : partner **b** : having a usu. lesser share in duty or responsibility : alternate : deputy <copilot> **4** : of, relating to, or constituting the complement of an angle.

As early as 1921 Adler and about the same time Moreo, started using co therapy for training purposes. Co therapy can be traced to the beginning of this century and was first used for special therapy problems and as a training tool for new therapists until about 1960 (Dick, Lessler, Whiteside, 1980). Since then the uses of co therapy expanded, but the attitudes toward co therapy has always been controversial.

Foulkes did not favor co therapy. He thought it was a great tool for training purposes, but altogether believed it is better for the group to have one conductor and if there are two, only one should lead. One of his considerations was that the group will

have one therapist to project their unconscious feelings on, so that the two therapists will not dilute the transference process. (Foulkes, 1975) Other agree and (Mcgee & Schuman, 1970) argue that it confuses transference and counter transference responses, that it should only be used for special purposes and that it increases the likelihood of resistance to be manifested.

Most writers that are in favor of co therapy agree that co therapy poses both special advantages as well as potential hazards. (Yalom, 1995, Dick, Lesser, Whiteside, 1980, Dudley 2001) The advantages: Co therapist complement and support each other, together their cognitive and observational range is greater, they can broaden the possible range of transference reactions, transference based distortions become more evident because patients will differ among themselves in their reactions to each of the co therapists and to the co therapists' relationship. Co therapists may aid each other in the identification and working through of counter transference reaction toward various patients.

Some of the disadvantages they foresee are the tendency for group attack on the couple and the need to weather a group attack so that they can make constructive use of the team. (Yalom, 1995)

They all agree it can be beneficial provided that both therapists are able to contain their anxiety and workout their difficulties in a cooperative way. They all share the impression that co therapy not shared by therapists from the same theoretical thinking (Yalom, 1995) or activity level or tempo might be extremely disruptive (Helfron, 1969, Davies and Lohr, 1971).

Yalom warns therapists not to enter co-leadership blindly, not to co lead with someone they don't like and not to get pressured by work or other reasons into co leadership, because these decisions are much too important and binding. He stresses

that if the two therapists are uncomfortable with each other or are closed, competitive, or in wide disagreement about style and strategy (and if these differences are not resolvable in supervision), there is little likelihood that their group can develop into an effective work group. Consultants or supervisors called in to assist with a group that is not progressing satisfactorily can often offer the greatest service by directing their attention to the relationship between the co therapists. (Yalom, 1995 P. 417)

Beck and Dugo (1986) go far as to claim that psychotherapy groups do not achieve a higher phase of development than the co therapy pair. Thus the development of the co therapy teams becomes a criterion for the progress of the therapy group and the healing of its members. All writers agree that mature co-existence is essential if it consists of mutual acceptance, respect, sharing of responsibilities, a supportive climate and an open state of mind.

Many patients benefit from the mutual respect and non-destructive cooperative competition, without mutual derogation, exploitation they many associate with pairings (Yalom, 1995). Klein and Bernard (1994) argue convincingly that co-therapy can be a metaphor for a family constellation and as such provides the opportunity for corrective experience for many borderline and narcissistic patients that can be a curative for all patients.

Most of the papers on co-therapy date from the early 80's on when interest in co-therapists and the dynamic forces between them was parallel to the growing tendency to include the subjective world of the therapists as a meaningful factor in the treatment process. (Berger, 2001)

The debate over co-therapy and its advantages and disadvantages continues to this day and revolves over issues such as the effect it has on transference and counter transference reactions (Dick, 1980), the value of interpersonal modeling of the co

therapist relationship (Block, 1961, Lundin and Arnov, 1952), on whether co therapy complicates therapeutic process or allows greater objectivity (Yalom, 1995); on whether it is an effective recourse and if the complication of using two therapists is more troublesome than helpful or worse, irreparably destructive to therapy.

Although Co therapy is a widely used treatment format and a great deal is written on its pros and cons (McMahon & Links, 1984, Yalom, 1995, Klein and Bernard, 1994) there is no experimental study comparing outcomes of single versus co therapist models. Yet there are many publications that offer guidelines for developing and supervising a successful co therapy team.

Theories on Co Development

Many researchers agree there are different phases of evolution in conducting groups in co therapy and in supervising others. Each phase has an important impact on co-leadership potential, client development and the dynamics of the group as a whole. (Low & Low, 1975, Winter, 1976, Hoffman & Hoffman, 1981, Brent & Marine, 1982, McMahon & Links, 1984). The phases observed range from 4 to 9. The stages are neither mutually exclusive nor unidirectional but describe a general flow of events. The thrust of this framework is to acknowledge both the positive and negative influences in each stage of growth and to indicate how these influences vary in quantity and quality as the relationship progresses. Knowledge of the usual course of development suggests foci for supervision and growth and can be used to sustain expectations. (Dick et al, 1980) Dick, Lessler & Whiteside (1980) describe four phases:

1. Formation – Intrapsychic Issues: feeling of competency, evaluation of personal adequacy, performance anxiety and personal and

interpersonal style, structural issues, setting goals, time frames and working plans. Basic theoretical guides, treatment, philosophies, strategies and tactics must be addressed.

2. Development – Interpersonal Issues: The team begin to support each other, making up for each other's perceived deficits or utilizing each other's special strengths. If co therapy were evaluated at this stage, it would still be seen as a crutch for inexperienced or frightened therapists and as an uneconomical use of therapy time.
3. Stabilization – Stage of Mutual Trust - The therapists learn from each other and experiment with ways in which they can be most therapeutic as a team. In this stage the use of two therapists make therapeutic and economical sense.
4. Refreshment - Stage of Effortless Co therapy

Dugo and Back (1997) observed nine phases of development, but note that most co relationships are short term therefore may not get to evolve past the first three phases. From their study it is only at the third phase that the co relationship becomes effective to justify the use of two therapists.

1. Creating a contract
2. Forming an identity – competitive feelings, irritations, anxiety, and difference in personal concepts may arise. The team is challenged to identify issues, clarify them and negotiate a structure.

3. Building a team – learning about each other and learning from each other becomes a possibility. Mutual respect is established in this process.
4. Developing closeness – this process leads to emerging feelings of closeness and attraction on sexual and other levels. The ways in which closeness is acknowledged and boundaries are reinforced become central features of this phase. (Safety, understanding are operationalized and acting out minimized)
5. Defining strengths and limitations.
6. Exploring possibilities – readjustment of the working relationship.
7. Supporting self-confrontation – Mutual support (even when difficult), honest feedback, and a depth of commitment characterize this phase.
8. Integrating and implementing change, the personal insights and changes resulting from self-confrontations in phase 7 must now be integrated. (supporting each other in staying in the group or exploring other venues)
9. Closing – A healthy transition requires an acknowledgment to the partner of his or her significance in the shared process, and a review of what was and was not accomplished.

Comparison to the Literature

All theories identify the necessity for a preparatory phase. (Low & Low, 1975, Lazarus, 1976, Winter, 1976, Hoffman & Hoffman, 1981, Brent & Marine, 1982,

McMahon & Links, 1984) However not all acknowledge the importance of a contract. Dugo & Beck's theory stress it is the most important. This forms a solid foundation on which to build a strong, aware relationship.

Phase 2 is also recognized by all theories. It is a high level of agreement about the characteristic issues to be addressed in this phase: authority, power, conflict, differentiation, norm building and control issues are mentioned.

Six of the theories identify the 3rd phase in which co leaders begin to actualize the potential strengths and assets of having two therapists instead of one. The focus an attention on these 3 phases derives from the fact that many relationships are not long term and do not evolve beyond this phase.

The assumptions underlying most of those models are supported by the group dynamics and development literature. One might argue with the sequencing of phases but not with the intended outcome, which is the creation of a mature, functional and therapeutic co therapy team. (Wheelan, 1997)

According to Wheelan Studies with work group have noted that different leadership is needed at different stages of group development. (e.g., Blanchard & Johnson, 1982; Vecchio, 1987; Hershey & Blanchard, 1976, 1977, 1982). The group's needs are determined by the group's maturity level.

Informal Aspects of the Co Therapy Relationship

Any relationship has both formal and informal aspects. The formal level begins with the profession, the level of experience and the role each co leader fills.

Each of the phases can become a stumbling block to the overall evolution of the relationship.

There are 7 major issues: Ease of communication, Compatibility of orientation and style of leadership, Attraction, Gains, Negotiation, Bonding, stress that influence those phases. (Dugo & Back, 1997)

1.4 Group Development Theories

Many researchers and therapists of group development have noticed that all groups evolve through specific stages of development characterized by specific patterns similar in process to the growth and development of an individual. (Mackenzie and Livesley, 1983, Biran, 1997, Bech, 1974, Yalon, 1975) Many factors influence the groups' development such as the groups' purpose and goals, the setting, the role of the leader/leaders and the group atmosphere. There are many group development theories, and some observe nine phases and others three. I would like to focus on two theories with a different orientation: Mackenzie and Livesley (1985) describe five phases of development and Hani Biran (1997) reports of three positions.

Mackenzie and Livesley base their dynamic theory on the premise that the group is a living social system that becomes more complex and interactive. In every stage, there is a focus on a different developmental issue that the group must resolve in order to reach the next stage. The social group supplies pressure on the group to resolve this issue in order for growth to occur. In addition to the groups task there are also individual issues and challenges the individuals in the group are faced with. The first stage is engagement. The goal at this stage is to solve the issue getting acquainted and the main defense is universality. The second is differentiation. The quest is to recognize that there are differences between the members in the group. Attention on the differences raises the fear that there might be danger in the

environment of the group. Individuation is the stage in which the individual is encouraged to bring his complexities, inner conflicts, splits and ambivalence that allows a deeper appreciation to each member in the group. The fourth stage is intimacy and the members are encouraged to experience intimacy and investigate it. In this stage, the members begin to understand that this intimacy is based on mutual responsibility. The fifth stage is Mutuality. The task in this stage is to develop a sense of joint responsibility and investigate further the meaning of intimacy. At the end of the group, feelings of loss and separation are part of this stage. The members of the group must detach themselves from the group and internalize the group and its positive experience.

In practice, they note that the phases and the movement between them are most noticeable in the first to third phase. Most accurately when the group is closed to new members. Adding new members before the group reached the third phase might hurt the creation of the group therapeutic environment.

Hani Biran's presents the object relation's approach of Melanie Klein to analyzing group development. She uses Klein's theory in analyzing each phase as well as Bion's basic assumptions on groups. Object relations in this approach exist between the group (subject) and the therapist (object) as well as between the individual and the group. In her theory, she describes the issues the group is dealing with and the role of the therapist dealing with those issues. Object relation theory assumes that from day one there is a mutual interaction between the baby and his mother. This approach investigates how inter personal relations determine inter psyche structures, how those structures are stagnant or changing and how they hoist internalized relations from the past in the context of inter personal relations in the here and now. This perspective sees the group and the therapist as a baby and his mother

or the baby and the world. The first interaction of the patient with the group and the therapist is equivalent to the baby's first arrival into the world. Patients begin their first day in the group with anxieties, wishes, known and unknown fantasies. The regressive process in the group is essential when the patients will hurry to use their most familiar defenses. Exposing those defenses supply an opportunity to know the patients inner world and create an affective group. The patients project different aspects of their inner world on the therapist. The leader must not take any of the roles projected on him, only to absorb them, observe them and return them to the group in means of interpretation and mirroring. The group members can grasp the leader as a good mother, bad mother, as an omnipotent father, as an only authority and the leader must contain all of those aspects and not become them. He must allow "problems" come out without blocking them. In order to become an object the leader must process and be well aware to his internal world: What issues he encourages? What behavior he disregards? Did he gratify people he feels more comfortable? When is he anxious? Only by his consistent strive to be an object will the leader be able to prevent his own anxieties and needs to infiltrate the group.

In this theory group development is based on phases that one can complete to the fullest or fail, skip or regress to another phase. The first phase is the phobic phase. This is a short phase characterized by a great amount of phobic anxiousness where there is no initiative to get close or further apart. The second phase is the paranoid phase, which is characterized by the anxiety from the object, the leader and the group. At this point the group members may seem threatening and destructive. The next phase is the schizoid phase which is central in working with groups, it is long and it's hard for the group to get out of it and move on. In this phase the group is dealing with envy. Melanie Klein saw the schizo-paranoid phase as one, but in working with

groups the defense mechanism of splitting splits in two phases. In order for the members of the group to maintain the good object, they must distance the bad. The leader/leaders are object to great envy that might paralyze the group. Unconscious envy leads to want to destroy the therapist and compete with him. The patient feels needy and at the same time wants to destroy the object that seem to have all the wealth, that is fertile and abundant. The group has a hard time with conflicts, difference, complex or vague situations and they will not be discussed in the group. In this phase, the groups understanding of the group leader is distorted and unstable. There are sharp transitions from idealization to devaluation, when there are two leaders one might be considered good and the other as negative and bad. The leader in this phase must use translation, mirroring and interpretations that will reduce the amount of anxieties so that the group can move to a more developed phase. The manic phase is an in between phase that eases the transition from using schizoid defenses into the disenchantment of the depressive phase. It is characterized by a false optimism that Bion's terms as a basic assumption of pairing. The group is full of hope, but wishing they could avoid learning from this experience. (Bion, 1970) The group will be in an unfruitful, pseudo pregnancy, feel that they can do everything by themselves and will be unwilling to face this disillusion. The member will use three basic defenses: omnipotent, megalomaniac and sadistic. This manic phase supplies a means to skip over pain, complexities and ambivalence. The last phase is the depressive phase. According to Melanie Klein, this is the most advanced phase. In this phase, the members learn there is bad and good in everything. In this phase, there is a transition from a partial object to a full object. In this phase the group will come close to what Bion describes as a work group, where there will be less use of primitive defenses, the members will be engaged in the therapeutic purpose, the leader

will be perceived as human with positive and negative characteristics and the members will be able to examine feedback they get in the group, feel pain, work through it and be rehabilitated. (Bion, 1970)

On the use of group theory McKenzie, Livesley and Biran would agree that the therapists should use them in a flexible and creative way. Inflexible use of the theories may result in an artificial manipulation instead of encouraging natural process. (Mackenzie, Livesley, 1983)

1.5 Art Supervision dynamic approaches

The word supervise is to oversee, to view another's work with the eyes of the experienced clinician, the sensitive teacher [and] the discriminating professional. A fundamental purpose of supervision is to help trainees with their learning while at a placement and to guide their work with clients. (Holloway, 1995) 'Supervision' comprises two words: 'super' and 'vision'. Bernard and Goodyear (1993) suggest that one of the main skills of supervision is the ability to have this view over a range of perspectives in order to assist in understanding and evaluation a situation. (Lahad, 2000)

Most professionals also observe that supervision includes helping trainees to understand their clients, developing a capacity for self awareness and reflection, and understanding theory and practical applications of therapy to a wide range of clinical and agency settings. (Dye & Borders, 1990; Hawkins, P. & Shore, R., 1989). Supervision attempts to bring together these many different areas of learning with the end result hopefully the development of professional identity in the trainee and the enhancement of the trainee's skills in devising successful therapeutic strategies. In art

therapy supervision, the exploration of the supervisee's feelings and reactions to clients (counter-transference) has been a major focus. While attention to the reaction of the trainees to their clients and to supervision is important, this is a limited and simplistic view of what supervision entails. Supervision in the 90's goes beyond examining transference and counter-transference reactions in therapy; it encompasses ethics, laws and regulations, professional identity and documentation, all areas of knowledge, which affect the welfare and rights of the clients. Supervisors must also be contemporary in their thinking about these issues, which are brought to supervision.

Art therapy supervision – Is it different from supervision in other disciplines?

One obvious difference in art supervision is that the core of art therapy involves art making, play, imagination and creativity. “Why are we so perplexed in the face of imagination? Where and when do we lose this ability? Why are we so defensive and apologetic in supervision when we share our non-logical thinking, circular perception, images, smells, inner pictures, metaphors, and lateral thinking? Is it because we find them hard to defend? Are we afraid of hearing that it is counter transference? Or is it a forgotten language, and is fantasyland a feared place.” (Lahad, 2000) In the realm of the creative therapists being in touch with creativity and imagination is central.

Writers Malchiodi and Riley (1996) describe that the issue of professional identity often comes up in supervision with art therapists. Professional identity – What are we, psychotherapists who use art expression in intervention or artists who use art-making as the core of therapy? Although experienced practitioners are annoyed with this debate, it is one that becomes a problem to trainees and can affect

their work with clients. The supervision will help trainees find a clearer definition for the role art plays in their work as art therapists.

According To Holloway and Johnston (1985) there are three major approaches in art supervision such as case presentation approach where supervisees present their client's work and art expressions created in therapy, and the developmental approach attuned to the supervisee process of becoming a therapist. I would like to focus on the third approach that integrates the art process into the supervision: The Interpersonal process groups. This method comes from the work of Rogers (1975) and it embraces experiential approaches in addition to didactic methods of teaching. The experience does not only serve to reinforce the importance of art as a way to learn about art therapy and understand clients but also as a way of self-exploration. When working in this manner one must keep in mind that experiential work during supervision, because there is the innate tendency of art expression to bring emotions more quickly to the surface, may blur the distinctions between therapy and training.

Traditional uses of art expression in supervision surveyed in an informal study by Malchiodi and Riley (1997) suggest that most supervision is accomplished either by verbal discussion or case presentation, but in recent years changes in the art supervision have brought some interest in using art tasks to enhance supervision.

The uses of post art therapy sessions

Kielo (1991) observes five different purposes for artwork done by therapists in relation to the art therapeutic experience: Art used to develop empathy through replication of client's imagery, to clarify feeling, to explore the pre-conscious and unconscious feeling, to help differentiate affect and art used to explore the relationship.

Beres and Arlow (1974), psychoanalysts who addressed the issue of empathy, concluded that the empathic response in the art involves transient identification with as well as a remaining separateness from the object. It is not only a matter of being with the person but also thinking about the person. According to Beres and Arlow, both the 'with' and 'about' are essential components of the empathic process.

Ireland and Weissman discuss the “The potential space” (Winnicott, 1971) as the gap in contemporary psychoanalytic training and practice. The Kleinian influence is informed by the exploration of primitive mental states from birth to age three. The gap in psychoanalytic training has been the failure to use art techniques as an important avenue into this preverbal, primitive realm, except, perhaps, Winnicott’s “squiggle game” (Winnicott, 1958). The training of verbal clinicians within the tradition of Klein, Bion, Winnicott, et al., focuses attention on non verbal, transient emotional and bodily experiences, and the fleeting thoughts, images or reveries which come to the therapist’s mind during a session as important sources of information for understanding the client’s primitive mental experiences. Art-making itself, however, has not been considered as an informative source.

It is evident that the therapists' drawing of psychotherapy sessions can make a valuable contribution to clinical supervision of verbal psychotherapists. It could be used for the increase of sensitivity to the transference and counter transference theme in the therapy, facilitation of case formulation, the extension of the use of the therapist as a clinical tool, enhanced access to non verbal psychic material and it may allow unbearable feeling to be safely expressed in the drawing of the session and then used further in supervision. This drawing techniques have especially powerful potential for enhancing awareness and understanding of primitive’ nonverbal psychic states, in the therapist as well as the patient. Primitive psychic states are often communicated

primarily through intense somatic and verbal evacuations, projections, and projective identification. It is only with focused awareness and conscious understanding that these states become clinical data, which can be used to facilitate treatment. (Ireland & Weissman, 1999)

Creative supervision

Riley (1997) has integrated art into her supervision and describes the process of art expression in supervision to be similar to those with clients. In general some type of directive is given and the supervisee visually explores the subject through art making using various media, assigned by the supervisor or chosen by the trainee. Some possibilities to work on would be: draw the client, draw pictures of ideal and not ideal clients (for related issues of counter transference), make an image of the agency (to gain perspective on the dynamics) etc.

Mooli Lahad (2000) in his book “creative supervision” calls for supervisors and supervisee to use their intuitive, imaginary, analogical dreamlike mechanisms in the service of understanding the process of therapy, intervention and support. He describes various ways to get therapists in touch with their left brain, the other fifty percent of their experience that will enable them to see the value of experiencing other senses, and thus be able to make sense of their own situations as well as their clients. He distinguishes between three directions in supervision: patient-centered, therapist-centered and process-centered, and leaves the supervisor to decide when which supervision is appropriate. In his supervision process he uses metaphors, stories, images and similar expressive media. He bases his theory on the assumption that a story or image can represent the objective or subjective perception of internal or external reality. Relating to the representative image is likely to change internal

reality, or can bring about a change in perceiving the external reality itself. He suggest two ways of working with the realm of images and metaphors one is to stay with the image without explaining it as opposed to using metaphors as unconscious materials to be brought into consciousness.

Self-supervision

Lahad is aware that sometimes supervision isn't enough and that some therapists go along with little or no supervision and make decision without anyone to consult with. In his chapter on self-supervision he suggests that we all have an inner representation of the client, the therapist and the supervisor. These inner representation are present in every instance, yet we don't always know who is more active, who is making coalition with whom, who is manipulation whom, and so on. He suggests to chose a page, a color and a metaphor for each and create a dialogue between them, listen and then evaluate what came out of the dialogue. Reflect on the process and see where it took you, perhaps it led you to see a new direction.

A trainee, writes Riley, (2003), is an individual who is on the verge of becoming a therapist and is thus working toward independence and autonomy. Part of assigning an art project to a supervisee involves reinforcing the idea that learning through art making can be helpful to self understanding and self reflection, something that the supervisee will eventually need to do for him self.

1.7 Art-based research

The idea of art-based research is to use the fine arts in systematic ways to understand human experience and to explore new applications of the creative process

to areas outside the arts. (McNiff, 2005) Phillip Speiser defines it as a field of research that places the artist and the creative process at the foreground, allowing methodology to emerge from this experience. Susan Langer in her book *Philosophy in a New Key: A Study in the Symbolism of Reason, Rite and Art* (1951) articulated one essential idea in defining ways to researching experience, that all forms of symbolic transformation are not only basic human needs but also fundamental and intelligent modes each characterized by a unique mode combination of symbols that can't be reduced to manner of communication. Within the philosophical tradition of epistemology, Langer made a forceful case for sensory knowing, perceptual thinking, and the way in which the arts communicate concepts. She revealed the serious and limiting bias conveyed by the belief that discursive reason was the only road to knowledge.

Langer's position is that people need to express themselves and transform experience in ways that transcend linear speech and texts. She notes that in presenting the outcomes of this work and researching artistic expression, there has been a tendency to fall back upon conventional discursive ways of knowing and communicating with others. (Langer, 1951) It is as though we don't trust the arts in the area of serious intellectual inquiry and revert to the intellectual assumptions criticizes Langer, believing that only discursive discipline such as the social sciences can convey real knowledge. The mind, writes McNiff, transforms itself and grows more intelligent when new connections are made amongst disciplines and when we exercise faculties other than the existing ones that have held too much sway over our definitions of knowledge. He suggests it is time to take the more creative phase of action suggested by Susanne Langer. He points out that the interpretive process is the most basic mode of orientation that integrates all of the senses, that knowing is a

process of constructive and creative interpretation of experience and words can never contain art to its fullest. Language can further the integration of expressive modalities and in so doing generates new ideas and insight that emerge from the process of interaction.

Art based research opens numerous venues of research such as comparative assessments of how we feel after working with different media, whether the scale of an artwork generates distinct energetic reaction in the artist and/or a person who perceives the work, how different modalities react to art and many more. Art based research can also contribute to enhancing the language we use to describe experience. Art based research is a method of inquiry that uses the elements of the creative arts experience, including the making of art by the researcher, as ways of understanding the significance of what we do within our practice and teaching. (Speiser, 2004)

2.1 Methodology

The research approach in this thesis is qualitative and emphasizes the holistic understanding of phenomena and the importance of the contexts in analyzing them. Since human behavior is affected by the conditions of the research, the data of the qualitative research examines this behavior in its natural environment while the researcher is the major tool. In qualitative research there is no attempt to influence or control the results with quantitative statistic tools. The emphasis is more on the process and not on the results or the final product (Sabar Ben Yehoshua, 1990).

I use the art-based research approach as Phillip Speiser defines it as a field of research that places the artist and the creative process at the foreground, allowing methodology to emerge from this experience (Speiser, 2004).

In analyzing the co-therapists working with groups I will address the parallel processes that are present between the co-team, the group and the co, the co and their supervision by viewing them in the arts. I would like to discuss the therapists' art making and art process from both participants and observer prospective.

2.2 research design

In this research I observed two co-therapists teams for two sessions each as a participating investigator. In those sessions I introduced the purpose of my research, asked semi-structured and open questions, and the therapists worked in the art. We then observed the artworks and discussed issues that surfaced.

The data for the analysis was composed of audio taped sessions and the participant's art works. The therapists and hospitals did not allow other methods of recording.

The participants I chose came from different therapeutic disciplines than my own: movement and psychodrama, because I wanted to explore how other therapists can use the plastic arts for sharing and processing, isolating the knowledge and control factors plastic artists would have.

In the first session I explained the purpose of the research, hence how art can be used for processing and sharing among co-therapists working with groups and conducted a semi structural intake. I asked the therapists questions about their professional background, professional philosophy, their mutual history and their groups in order to get a better understanding of how they perceive their professional and personal professional worlds. The intake was also used to create a more intimate environment for the participants before I started observing them work in the art.

During the session the method derived from a sensitive balance between the participants and research needs.

During the first sessions the participants were allowed to talk in order to observe if there are gaps between verbal and non-verbal communication, but in the second session I asked them not to so they will focus in the creative process.

In Yael and Sabrina's first session (3.1) they did a mutual drawing and a personal drawing since the session was long. Nicole and Thelma unexpectedly could not stay for the whole session and only did a mutual drawing (4.1). I chose to begin with a mutual drawing because it could be a way to form trust between the patient and the materials. In mutual drawing one could discuss togetherness, things in common and empathy on the unconscious level in the pictorial visualization, body language, feelings, techniques and cognition. The purpose of this drawing is to create communication and trust, a give and take, a satisfaction delay, accept and give, tolerance, involvement, flexibility, creativity and intimacy. In this kind of drawing feelings of hidden and bare aggression can be seen, intuition, self control, taking a stand and a capability of facing new situations.

The material I chose to begin with in the first session was oil pastels that are easily over-layered, smudged, rubbed, allows for easy line and spot and their particular qualities create unique results and experience. (Gelkin & Orbach, 1997) In the activity the therapists had to chose a sheet from an options of a full, half, quarter, and A4 sheet. In choosing the size of paper I observed how much space they need and how they relate to each other in choosing it. Each therapists was restricted to four oil pastel in order to observe how the setting effects them, if they can identify them selves in the drawings and it enabled me to use it as tracking data on each therapists

The personal drawing didn't have any rules or materials restrictions and offered: gouache, water colors, charcoal, oil colors, various sizes of paper, cardboard, boxes, plastics, pompons, clay and plasticine its purpose was to observe each therapist created individually. According to Sigalla (2004) the struggle to maintain one's own sense of self as well as one's sense of coupledness is a very important aspect of couple work.

In the second sessions I asked the therapists to make a social atom (chapter 3.2 and 4.2). The social atom is a peculiar pattern of interpersonal relations, which developed from birth. It first contains the mother and child and as time goes by other people whom are pleasant or unpleasant to him and those who do not leave any impression, positive or negative, remain outside the social atom as mere acquaintances. (Moreno, 1939) The social atom is a dynamic unit that represents the spirit and the vitality of the individual. For that activity I offered a variety of materials: gouache, water colors, charcoal, oil colors, various sizes of paper, cardboard, boxes, plastics, pompons, rice, beans, pasta, batteries, plastic parts, wood, hot glue, white glue, clay and plasticine. I offered this variety of materials in order to stimulate the therapist's creativity.

I chose to analyze the first sessions with Avi Goren-Bar's art development axis theory because as an observer of those stages of the creating process I was then able to: reconstruct, follow and report the therapeutic/creative process of the co-therapists, Collect important clinical information about the participants, understand the meaning of the therapeutic process at its various stages and find possibilities for intervention within the creative experience. I then proceeded analyzing the data using thematic analysis techniques drawn from interpretative phenomenological analysis. This type of approach is well suited to capture the complexity of co-therapy

relationship, in a way that is not possible if responses are reduced to pre-defined categories. The first step involved evaluation of the sessions connecting to co-relationships, group development and supervision that paralleled or promoted new themes, resulting in an identification of dominant themes.

In the second session I also used the thematic analysis using the Social Atom because it combines all the significant characters in the life of the individual – friends, enemies, dead or living and also significant objects. (Buchanan, 1984) It is a projective non verbal tool through which it is possible to see the way the participant perceives the relationships in his life (realism or imagination) and thereby see his patterns of communication, relation, needs and feelings.

Due to the evocation of primal feelings in art, researchers on supervision with the arts warn that in the creative process boundaries between therapy and supervision may be blurred and must be taken into consideration. Because of the intense feelings that surfaced during these sessions and since these sessions were neither supervision nor therapy, I felt I collected sufficient data in two sessions. I also sensed from the participants that sharing and processing in the presence of a third person became confusing and more trust and experience on my part was necessary to explore the subject further. The research obeys the law of confidentiality and the therapists' names have been changed. The sessions were held in the therapist's hospitals and were an hour and a half long, unless otherwise mentioned.

3.1 Case Presentation and Analysis – session #1 – Yael and Sabrina

3.1.1 Case study

My first session with Yael and Sabrina was at the mental health hospital in a therapy room they just met with their group. In the session we started with a brief intake, mutual drawing, personal drawing and a discussion.

Intake

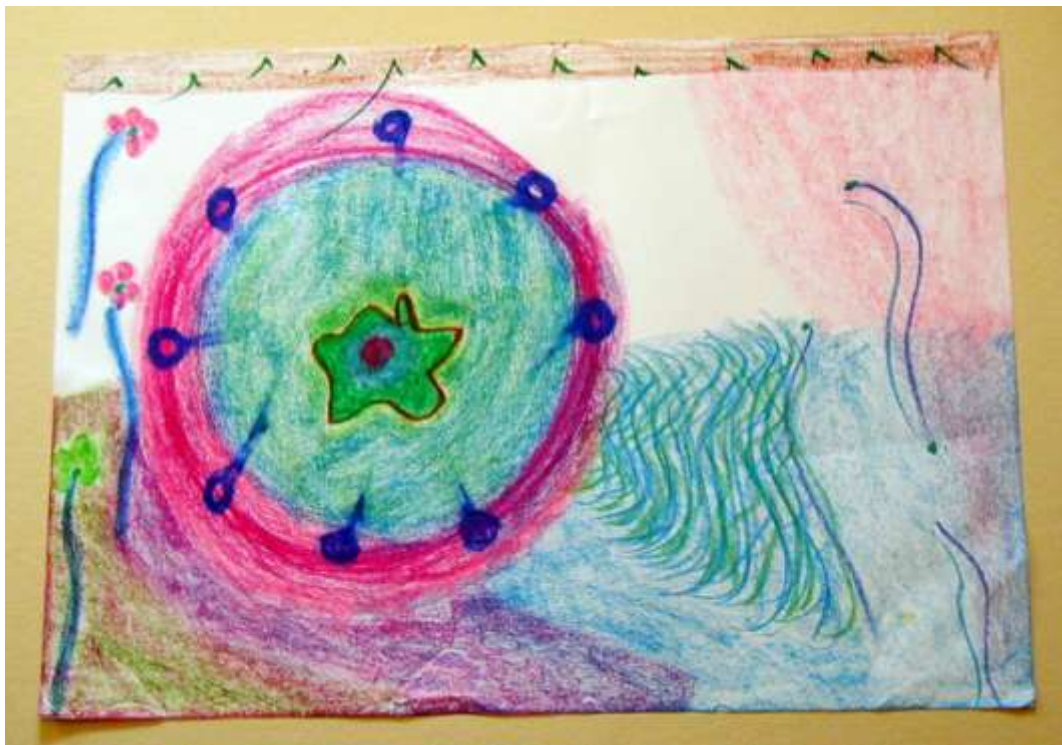
Yael and Sabrina are dance therapists leading a group composed of eight patients: six schizophrenic in remission and two who suffer from depression. All are out patients in the hospital. They studied dance therapy together and have been leading the group for two years. The first year they led the group with a third therapist who led the group for two years before.

Both therapists are in their late twenties/ early thirties. Sabrina is Arab and Yael is Jewish. They have supervision from a dance therapist, but don't have enough time to dance there. The group has been working for four years out of which they were with them for two years. They still talk about the missing therapist. There is always some comparison to her and also they talk about patients no longer in the group. There is a lot of togetherness: they come from sitting in the lawn together but at the same time they speak their minds.

Yael expressed anxiety toward the meeting and what will happen because they only started talking about their relationship two months ago and everything was very sensitive.

The process of making a mutual drawing

As I asked Yael and Sabrina to do a mutual drawing Sabrina was disappointed and said she is in trauma from how she drew. I responded to her worries with an explanation about art therapy, how to use the paints and she was more at ease. I explained they had to pick four colors each and chose the size of the paper. Yael was concerned they will chose the same colors and right away stated she wanted the pink color. In choosing the size of the paper, Sabrina was surprised they both had to share the page and then after agreed they should start with a half a sheet. When they stood before of the page: Sabrina asked Yael to start the painting, she didn't know what to do and then begin drawing with her. Yael started drawing a big purple circle (Picture #1) which took up more then a half of the page. Almost simultaneously Sabrina stared drawing a light and thick brown line. They then drew over their lines several times until Sabrina started painting wiggly lines on the right. Yael left the circle and Sabrina went in. Throughout the process of drawing there was only one person at the circle at a time. Yael then noticed they made something that looked like a fertile egg and a sperm and they both laugh. Sabrina then started drawing inside the circle and stated she is "invading" Yael's space. Yael drew in the outer rim of the circle. They both noticed their aggression. Sabrina remarked that Yael was intense today. Yael reminded Sabrina it was also true about her, when she forcefully throw a ball at one of the patient. Sabrina said she unconsciously smashed a ball on a patient and then she said she might have done it on purpose. She agreed that she felt more comfortable when there was movement as opposed to the "stuck" situation that was in the group at that moment. Yael said they should all bomb one another in the group. Yael broke her crayon and said it is proof of her intensity today.



Picture #1 – Yael and Sabrina’(½ sheet. 18m”m, oil crayons)

Yael’s colors: pink, light green, reddish purple and light blue

Sabrina’s colors: brown, dark green, dark purple and blue.

There was silence. Sabrina asked if she had to work the whole 25 minutes while Yael wanted more colors like yellow. Sabrina was surprised Yael was asking her for something she didn’t have. “I don’t have yellow, so why did you look for it in my things.”

Yael painted over things Sabrina drew. Yael said she wanted to do it over but didn’t dare and Sabrina encouraged her. Yael said that during the warm up in the group she did what she felt like without being attuned to the group that the mess in the group may have been something she brought in. Sabrina responds that she felt more comfortable when there was chaos which meant life and change to her. They both felt that the “stuckness” paralysed them. Yael asked if she can break the crayon and I nodded positively. Yael discussed her uncertainty about the level of intervening in

the group because she feels the silence reflects their meagerness and there is no movement. Sabrina felt they are doing the work. Yael felt they might need something more constructed but Sabrina didn't continue talking about it. Yael talked about Sabrina's absence from meetings in the hospital. There was silence. Yael said that their supervisor might not be in today because she told them that maybe these meeting with me might help them more. They laughed. They both agreed they could talk freely when she wasn't around. Yael energetically pressed on the crayon. Sabrina said that every time she wanted to finish she continued and it reminded her of her that she wanted to stop working in movement but then wanted to continue. They discussed a vacation Sabrina didn't take and Yael was concerned it might make her miserable. They talk about how concerned Yael was with issues regarding Sabrina and visa versa. Sabrina felt that there was a difference between not coming to a meeting and not coming all day, that it doesn't reflect anything about her or her work. It scared her that every decision she made she thought about what Yael will say about it and it upset her. Yael was surprised. There were 3 minutes left and Yael said that they are not even talking about the big question: to be here or not to be here. Sabrina said it's a big question and she got partial answers. Yael filled in the background in the remaining time. She filled in the sides of the drawing and asked Sabrina if she wasn't invading her side. She ironically said she thought Sabrina wanted to leave open spaces. Sabrina laughed and she painted vigorously with a light pink and filled in a large space. Sabrina watched her silently and then approached the painting and said: "At least this color is airy and leaves some space".



Picture #2 Sabrina's personal drawing (1/4 sheet, gouache)



Picture #3 Yael's personal drawing (1/4 sheet, charcoal)

I instructed them to work individually. This time they could work with all the materials available for twenty minutes. Sabrina asks if she can work elsewhere. They both looked for another place to work, but the floor was cold and they returned to their seats. They both chose a 1/4 sheet. Yael asked if now they can use all the materials. She showed interest in the charcoal paints and asked if she should know

something about how to use them. I showed her she can wet them and addressed the fact that she can get dirty using them. She examined all the other paints. Sabrina scanned the table and quickly chose the gouache paints. There was silence. Sabrina looked at Yael's painting. Yael worked forcefully with the chalk. They talked about her expectation that this meeting will be something different than their supervision that they will be able to talk without interference. Yael at this point didn't expand on the page and didn't look at Sabrina. Yael questioned why she was so concerned with what Sabrina was going to do and that Sabrina has the right to do what she wants. Sabrina said this morning she tried to compensate for not showing up and do as many things as possible before Yael got there. They both painted in an orange color. Yael was still at the same point in her page. Sabrina said she felt she needs to prove to Yael she is doing things, because she didn't show up to the meeting and wasn't there as much as her. Yael explained she is trying to understand what is it like to be with her. Sabrina yawned, and said her feelings are mixed. Sabrina said that the moment that she was most uncomfortable to be with Yael was when she felt that she was very different than her, in her wishes, tempo and her abilities. There was silence. Yael said if it's so bad and they tried for two years then they could stop but Sabrina felt that to stop is to walk away. Yael said she was not comfortable they are different so why continue? Yael felt that after they talked before things were different but now she realized they are not. Sabrina felt a change because she can identify things and can talk about them and leaving now for her it's to give up and talking made them continue together. Sabrina said she would feel more comfortable with the art but without me in the room but Yael felt that without me she wouldn't have talked. Sabrina: "I think I chose the gouache colors so I wouldn't touch the colors." They laughed. Yael said that Sabrina kept things in her stomach but Sabrina felt the same

about Yael. There was silence and Yael continued to paint. Yael was upset that instead of thinking of her self she was concerned about Sabrina's difficulties, because it was hard for her that it's hard for Sabrina with her, that when she didn't show up she though what was troubling her Sabrina said when she chooses not to come was because she liked being at home. Yael looked for a color. Sabrina felt that everything was over talked and asked why can't they be normal where things weren't always related. Yael felt bad Sabrina had a hard time with their different tempos but Sabrina said that Yael also had problems with her and she sensed in her instructions. Then they both stop painting. Sabrina got stressed our time was up and said she really wanted this to do them good today and didn't want to leave this way. Yael felt they couldn't tell with what feeling they will come out.

Observing and discussing the artwork

I asked the therapists to talk about the painting in terms of shapes; I suggest we start with the first piece. Yael said the circle she did at the beginning frightened her. That she had an urge to do it and then said wow I took more then half the page, but this is typical for their relationship, that she got frightened and also filling everything or not? During the work Sabrina said she felt happy that Yael was free and it enabled her not to consider her feelings and it made her feel comfortable. I asked Sabrina if she didn't want other people to consider her feelings. She said when it's too much it disturbed her, but every time she felt the circle she felt she had to accentuate her straight line. Yael said the circle for her is fertility, because she is dealing with this issue, with stomach. She said she felt happy Sabrina went in the circle that at first she was careful not to touch it and draw around it, but after a while she felt she could also. Sabrina felt Yael invited her into the circle. I asked if there

was harmony in the circle if everyone felt comfortable with the fact that one of them did a large shape and it was ok for the other and then they felt ok with that they enter the shapes? Yael felt bad with her self after she made the circle. Sabrina said that after she asked Yael to start she felt she could start.

Looking at the drawing Sabrina noticed that in the first painting there were many comfortable feelings she didn't find in her own drawing. In the mutual painting she felt that they could meet. The two drawings seemed different although there is a little similarity in the colors but the kinds of colors were different desires. I asked if she can identify her self in the mutual painting and she answered that she adds a little here and there. Yael looked at the drawing and said she had a nice time. She said she always gets anxious working with art, but she enjoyed it. She said she felt tension and unresolved issues and I asked if she could see it in the drawing. She said it's in the circle and how she felt with her self after making it. She said she wanted a few things to connect because there was no connection. She pointed out that in the green and blue rounded lines there were voice frequencies and said she wasn't sure their relationship was completely flowing. I ask what became possible in the mutual compared to the individual? Yael said she had all the room she wanted. She left white in the personal drawing because she didn't have enough time. Yael felt that their connection was when she said that it's a fertile egg and then Sabrina made sperms. Sabrina laughed and agreed with Yael and added that she also enjoyed when she added the circles on the circle and after hearing Yael described the circle she created and her attempt to voice things she understood she added the circles in order to open something from this sealed things that the frequencies would reach her, because she suffocated seeing the opaqueness around her in the middle. I said I saw an open line and a closed line. Sabrina experienced the closed line as less wanting to meet, less

interested or capable to change something, to keep something of its own. It's closed and its hard to enter. I told Sabrina she wanted to quiet painting after five minutes. She laughed: "Really so quickly, but I came back. I felt I don't want to give up." I asked how did the painting look to them. They laughed. I asked what feeling they got from viewing it. Sabrina said she never liked what she painted. I asked how she is in other things and she says that painting is different from other things.

Yael felt it was difficult for her and thought she may need to leave the group and that she enjoyed painting more then looking at it as an experience. Sabrina agreed. I told them I wasn't aware of their difficulties and asked what was their situation at the moment. They said they had discussed the option one of them would leave. Yael thought they passed the crisis but realized in the session that it may have been a fantasy but they might not be able to. Sabrina seemed worried and asked if this was supervision and I said it wasn't. She said this meeting really opened up a lot of things and was concerned about how they will leave this session. I told them they should I asked them to think about the things that came up take them with them and let them eco. Sabrina was concerned but Yael said those feelings were there before and wasn't worried about how they left the session because they can speak on the phone. I asked a few questions emphasizing the positive sides of their relationship. I asked if they learned anything from one another: lines, materials. They both felt they learned from each other Yael liked Sabrina's lines and Sabrina liked Yael's smearing and looked at Yael in the second drawing to see how she used the new colors. Sabrina felt good Yael was drawing when she didn't because she didn't influence her and it didn't stop her. Yael didn't feel comfortable to the fact she drew and Sabrina didn't. She felt she was interrupting Sabrina that she is rowdy and annoying and a bit obsessive, but it didn't make her stop.

They said they preferred working on the mutual drawing so I asked if leading a group together might be more relaxing than being a therapist alone. Sabrina smiled and said She wanted to remain optimistic that the group will continue with both of them in spite of all the difficulty. It reminded her of her feeling in the group that are different than when she was thinking at home. Yael said she wasn't sure that those things at home are not present when they are together – she points at the mutual drawing.

They both agree that they are not sure what they feel about the individual drawing because it took place after working and talking about harsh things in the mutual painting. Yael said she had a harder time drawing alone, maybe due to the issues that came up, but she was less dependent on how to bring herself there.

3.1 Case analysis session #1 – Yael and Sabrina

First sessions in art therapy as in other therapies may raise anxieties and expectation. Although this meeting wasn't therapy the participants were very anxious about dealing with their Co relationship. Yael said she is anxious about what will come up in the session and Sabrina expressed her concern about her trauma of making art. Both expressed their expectations and their supervisor's hope that this session might help them.

In the analysis of this session I will focus on some of the issues that emerged from a multi-layered dynamic perspective. In art therapy I will focus on the art process, product and the conscious and unconscious issues brought up concerning the co relationship, the group and the supervision.

The art process

I will begin the observation from the supervisor's point of view that suggests that one of the main skills of supervision is the ability to have a view over a range of perspectives in order to assist in understanding and evaluation a situation. (Lahad, 2000). This experiential approaches in addition to didactic methods of teaching does not only serve to reinforce the importance of art as a way to learn about the creative therapy and understand clients but also as a way of self-exploration. (Holloway, Johnston, 1985) In Avi Goren-Bar's (1999) model of the art process one can study the participants and know them better in six stages, unless the one conducting the session wishes to influence them, as I did. In his model he measures each stage of development every five minutes. I will use this scheme for each of the drawings although each activity was a bit shorter than his units of observation. Taking into consideration that my research is dealing with the processing and sharing of the co-therapists, my intervention was to cut short the issues that deal with 'how' to do things to a minimum so they would have enough time to deal with issues they are concerned with in the main theme stage. Because I chose the activity and the materials, the therapists arrived quickly to the fourth stage. This main theme stage expresses subjects, themes, impulses and conflicts the participants are dealing with. In the personal drawing I didn't limit the materials as explained in the research design chapter.

When analyzing these pictures one has to take into consideration the fact that through the whole session they were drawing and talking about their relationship. In the first drawing they were discoursing on the artistic and verbal level and in the personal drawings they were private in the art realm, but affected by one another on

the verbal level. I also used Goren Bar's phases in the art process in order to distinguish between the artistic and the verbal behavior and interaction.

Although in the mutual drawings the first three stages were quick they disclose some information about how it feels being with the other co-therapist and being alone.

The contact stage

In the first stage issues of temperament and decision-making can be seen and both therapists revealed a significant difference in those issues when working together and alone. In both drawings Yael was curious; she asked questions and experimented with the paints. In choosing the colors for the mutual drawing she seemed anxious and grabbed the pink color because she feared Sabrina would also want it. In the personal drawing she established herself in a comfortable space and in the first drawing she didn't give her space much thought. In the mutual drawing she quickly began drawing and had a hard time starting the personal drawing, she tested the paints and sat quietly for a while. In the personal drawing Yael chose to work with charcoal, a harder material than the oil pastels, although one that has many possibilities working with, but can create a lot of mess.

Sabrina in the mutual drawing seemed ambivalent and anxious. She was afraid of drawing and sat at a distance from the paper. When they started drawing she asked Yael to start because she didn't have an idea for the drawing, yet she began at the same time as her. In the personal drawing Sabrina quickly chose gouache colors, which are less controlled than oil pastels, but she used them in a controlled manner. She settled her materials and quickly started to work.

The organizational stage

This stage is defined by interpersonal collaboration and how the participants are addressing their limitations and their capabilities. Throughout the activity both participants, with one exception I will return to later in this chapter, didn't relate to one another artistically or physically. Yael was constantly drawing and didn't raise her head yet Sabrina stopped drawing and looked at Yael. From the beginning Sabrina wasn't comfortable working in the art, she said she felt untalented. It seems she has a hard time with her limitations or with Yael's capabilities and early in the drawing she wanted to stop. Yael was also uncomfortable with herself showing anxieties as she repeated her big circle over and over again. This behavior repeated itself in her personal drawing.

Improvisational stage

This stage is defined in learning, trial and error and demonstrates the participants' adeptness to the art, their flexibility, spontaneity as opposed to rigidity, protectiveness and tolerance to frustration. In both drawings Yael seemed very engaged in the art making process, smeared the colors and tried different techniques. In both drawings, working together and apart, Sabrina seemed detached from the process and not totally committed. She sat at a distance from the paintings. In the mutual drawing she seemed to be decorating and in the personal drawing she was in the center; she used the space and she more confident and looser.

The main theme stage

When they start drawing Yael's initial line was a circle half the size of the paper. The main theme of the drawing was on the page in less than 30 seconds. At

first she seemed very confident but then she started to seem anxious, repeating her lines. The same theme is also present in the personal drawing (the circle and the squiggly lines on the right). Sabrina did the same with her straight line until she started drawing the wiggly lines on the left. In her personal drawing she was looser and those lines were all over the drawing. While observing them in both drawings I felt tension in the air. As both therapists repeated their lines it seems that each therapist stayed in her position, yet at a very different symbolic position: a circular line and a straight line. In *A Dictionary of Symbols* the meaning of a circle is to enclose a space. What is inside the circle is protected, strengthened, and delimited. It suggests movement: the spinning of the planets and the spiraling steps of ceremony, worship, and play. (Cirlot, 1971) For Yael the meaning of the circle is connected with fertility. The straight line is infinity and endless. In geometry, the line provides the shortest connection between the points. The symbols are different yet both hold a variety of opposing, conflicting, and difficult emotions. While drawing they both focused on the circle and the line stayed untouched through the whole session, remaining unexplored.

The adaptation/processing stage

At the fifth stage the relationship between the therapists and with the art can be seen. In the personal drawing Yael repeated her lines and hardly filled the space. Sabrina took space and worked on small details and seemed to fine tune her drawing. In the mutual drawing Sabrina participated sporadically. As they named what they had done as “an egg and sperms”, both therapists took turns drawing in the circle and exchanging aggressive words to describe many of their entries into it. They also expressed verbal aggression towards the group. It seemed that there was a lot of focus on the circle in the drawing and they seemed eager to go into it. In the second

session the circle becomes the representation of the group. Their aggression came to a halt when Yael broke her crayon, wanted more colors and Sabrina didn't feel like drawing anymore. At that point Yael was working aggressively with the colors, entering the circle and filling it all in, saying she wanted to do it from the beginning and didn't dare. She was also wondering if she wasn't invading Sabrina's side and then went to it and filled most of the background, although Sabrina asked if they could be left empty. Sabrina then said that at least it's the pink color that leaves some hollow spots.

In general throughout the session the therapists expressed their differences, their means of communication and their aggression. Sabrina observed the mutual drawing and concluded from her difference in style and location on the page that her role was to decorate. It seemed that in that drawing she was fragmented. In the personal drawing her style became more integrated. It seemed early to speculate but Yael's behavior changed in the two drawings. It was clear from the artwork and the therapist's comments on them, that both therapists were not attuned to themselves or each other. In the mutual drawing Yael seemed to want to cover more space and Sabrina wanted to leave more space and in the personal drawing they both let themselves be different.

The last stage in Goren-Bar's model is the ability to look at the art at a perspective, to contain frustration, develop positive criticism and to be able to change.

The Preservation Stage - Observing the drawings

Yael and Sabrina were allowed to talk while they were drawing since I sensed they were very inundated and spoke about a lot of issues, yet in the art a few main themes that relates to Co-therapists' relationships were very dominant: difference,

communication, aggression and infertility. I will analyze them from the therapists' perspective as they were discussed in the processing part of the session as well as from the observers.

Difference - “me” and “not me”

Observing the mutual drawing it seemed one person created it. The colors Yael and Sabrina chose were very similar and during the activity both focused on the center of the drawing. Yael asked Sabrina for a yellow color and Sabrina was surprised she asked her for something she didn't have. Yael didn't acknowledge what Sabrina had and what she didn't have; hence Sabrina's surprised reaction. Observing all three art pieces it seems that the two therapists “meet” in the mutual drawing, but in the personal drawings they are very different in style, technique, choice of paints style, energy, composition, shapes and lines. Both therapists notice these differences.

Sabrina in the personal drawing chose paintbrushes and commented it may be that she didn't want to touch/come close. Yael in both drawings used the colors with full physical contact smearing and pressing. She felt uncomfortable when Sabrina watched her work feeling she made too much noise and that Sabrina might think she was obsessive. Her difference from Sabrina made her uncomfortable. During the personal drawing Sabrina said to Yael: “The moment that I'm most uncomfortable to be with you is when I feel that I'm very different than you, also when a little bit different... in my wishes, my tempo and my abilities.” Through the art process this envious feeling was brought to the here and now. Winnicot (1975) observed that envy and generosity between Co therapists have to do with difference, with diversity, with an “other” with inner boundaries and external reality, with a gap between “me” and “not me”.

As Yael made the big circle she said she was aware that the issue of how much space she needed and how she felt about it surfaced and she recognized this issue as being typical in their relationship. The therapists' envy that derived from their mere difference was dominant in their process of art making, their art products and may open a new dialogue between them. "An envious state of mind makes therapists vulnerable to all sorts of comparisons; each one is prone to feel inferior to the other in his own turn. Even minor differences between them are likely to be invested with elaborated meaning and feed a vicious cycle that casts them as two-dimensional characters." (Berger, 2001)

When Yael and Sabrina chose colors Yael was concerned they would both want the same one. Yael was concerned with her similarity to Sabrina. She quickly took the pink color, which was a metaphor for her own traits and abilities, but she didn't use her dominant color in the drawing. Two issues were apparent: difference and the ability to show one's individuality. Sabrina acted in a similar way. She wanted to draw on her own paper, in her own space, but settled for drawing together on a small sheet. It seems that both of them were concerned with boundaries and separation or the lack of them.

Communication

Yael tried to get close to Sabrina in the squiggly lines she made to the left of the circle (green and blue). (Picture #1) In the discussion she said she wanted to connect, but Sabrina didn't understand her form of communication. Sabrina then noted that she may have tried to listen to Yael when she did the blue circles on the big circle in order to open the circle, because she felt it was blocked. Sabrina expressed her difficulty to communicate with Yael in the art language. They didn't talk about

the subject for long and it seemed it was a bit delicate for them to discuss further. The art raised the issue, it was seen by both therapists, yet it was not ready to be 'named'. At this stage they were not able to talk about their communication directly and they displaced their conversation to the art to distance themselves from it so they could talk about it.

Aggression

During the whole session there was a lot of tension. They hardly looked at each other. Most of the time they spoke softly, but Yael worked energetically, it seemed she was using the art as a means to take out aggression. Sabrina's aggression was expressed in stating she is leaving the drawings and then returning, in her words: "Not to give up". Looking at the drawings together Yael said she felt bad making the big circle and Sabrina comforted her saying she felt good that she drew the circle because it made her feel she didn't need to consider Yael's feelings. There was a gap between what Sabrina said about her feelings towards Yael's behavior and her actions expressed in the art process. As Yael repeated her circle line Sabrina said, observing the drawing, she felt she needed to accentuate hers. Her actions showed she was not nonchalant about Yael's behavior. A similar gap was seen in Yael's behavior when they spoke about whether Sabrina would stay in the group. The emotions by both sides in this discussion were intense. Yael spoke softly yet in the art she aggressively filled in the background Sabrina wanted to leave empty. Sabrina laughed but for the first time she approached the drawing with a concerned look Yael continued to fill the background with pink and Sabrina tried to balance the gap saying, "At least this color was airy and leaves some space." Both therapists used the art to contain their conflicting and ambivalent feelings. Yael filled the space as they discussed that

Sabrina might leave and leave an empty space. Sabrina talked about her ambivalence about staying or going and related to the pink as something that fills, but still gives air.

Infertility

Yael and Sabrina arrived at the session with a lot of expectations and anxiety yet during the session they observed one moment of contact when they gave their drawing a title of “an egg and sperms”. They continued drawing until Yael broke her crayon which triggered the therapists to observe their aggression in the ‘here and now’. When Yael reminded Sabrina that during the group session she forcefully threw a ball at a patient they detached their aggression and displaced it towards the group. Sabrina remembered she may have done it on purpose. They then expressed their difficulty with the “stuckness”, lack of movement in the group as well as the emptiness of the patients and Yael said they should all bomb one another in the group. The therapists were not willing to face their aggressions towards one another and projected their aggressions onto the group. It may well be that the group was stuck in the schizo-paranoid phase. (Biran, 1997) in which the leaders are objects of great envy that might paralyze the group. Unconscious envy leads the patients to want to destroy the therapists and compete with them. Envy could be the counter-transference of the therapists to their Schizophrenic-Depressive group. The patients as the therapists described them are needy and stand for their rights, but at the same time they want to destroy the objects that seem to have all the wealth, that are fertile and abundant. This duality explains why the therapists during the movement exercises skip their stomach area, hence avoiding their fertility/abundance during the session. The group idealizes the former therapist as the good mother and splits and devalues

the two therapists as the bad mothers. The therapists felt the group was stuck and nothing was discussed. Yael suggested they would interpret more in the group. Sabrina disagreed and felt they were doing the work through the experience and didn't want to continue talking about it. As in the egg and sperms Yael made green and blue signals but Sabrina didn't understand/hear them. Sabrina tried to unblock a venue of communication, but Yael didn't see it either. Sabrina felt the circle line was closed, less wanting to meet, less interested or capable to change something. The therapists had a hard time to create a fertilizing dialogue. They both looked at their drawings and agreed that while they were working together they enjoyed themselves. Observing them it seemed to me that they were overwhelmed with emotions: anger, depression and loneliness, and working together looked like hard work. Sabrina said while they lead the group they enjoy it, but when they go home they feel totally different and uneasy working together. Yael realized that like in the drawings those feeling must be there also as they lead the group.

Parallel processes

It seemed that in this session the therapists projected their various feeling onto the art and to each other. They communicated on the preverbal level and unlike in movement that they had an imprint of their relationship. They were able to observe their difficulty communicating. Yael said that the process intensified feelings that were already there. In the art three parallel processes were evident. The Co-therapists were having a battle over the circle of the group and the group was in the same stuck phase as they were. Another or an additional option was that the Co-relationship was affected by their groups Schizo-paranoid phase. Also the co-therapist's supervision was stuck in the same state where they felt unsafe to talk with one another. In our

own session Sabrina felt the same and said she would have felt more comfortable if I wasn't there. In those three cases there was always a scapegoat. Riley (2003) notes that this is true in couple therapy in which the partners start off blaming one another not seeing their own fault and it seemed also apparent in this session.

The participants came to the session with a lot of hopes, but they had a hard time discussing their issues openly or owning their feelings. Their intense and contradicting feelings were on the page, observed by both therapists but most often didn't get to the stage of verbalizing them. A month later Yael and Sabrina decided with their supervisor that they would end the group in three months and until then they were advised not to discuss their relationship.

Summery

During the session it seemed that the main issues came to the foreground because of the art products: the circle and the line, the egg and the sperms, colors, filling space and leaving them empty. The art language symbolized a variety of feelings such as aggression, sadness, and misunderstandings and could be seen by the observer as parallel to their co, group and supervision relationship. The creative process in itself created a platform the therapists could recreate their relationship, unconsciously in a 'real time' situation.

3.2 Case Presentation and Analysis – session #2 – Yael and Sabrina

3.2.1 Case Presentation

The session began as the therapists expressed their exhaustion, their group's exhaustion and the tiredness they felt in their supervision. Yael stressed that during

this session they would only talk about the group and not about their relationship as discussed earlier.

In the group that day they talked about the preparation for the holiday. Sabrina said they needed a lot of stretching. Two of them talked about wanting to have kids and there was a feeling of rejuvenation. The members arrived to the group one after the other, because often they had psychiatric checkups scheduled at the same time. That day the group members expressed their diversity. They had different needs and they argued. One wanted to stretch and the other to sit. As always when they need to connect to their body something was always missing, for example: "Where is the therapist from last year and the music she brought?" They started with a warm up and there was a bit of a mess and physically they skipped from one limb to the other and skipped over the stomach when they talked about pregnancy. I asked why they skipped body parts and Sabrina said it's what defines them, but they didn't want to open new issues before the holiday vacation. Yael said she has difficulty developing issues and explained that because the group is composed of mentally ill people they tend not to interpret them and deal with the experience in the here and now. As they reflect to one of their patient that she is focused on what she lacked and did not have. Yael said that every patient was in his own shell but they try to connect. I asked if their work is based on words or movement and they say "both." Yael said that both of them remind each other to return to the body because the patients tend to escape with words. Yael said sometimes she escaped more than Sabrina and Sabrina felt Yael sometimes cooperates with the patients and runs off with them. Yael was a bit surprised by Sabrina's remarks. Sabrina felt tension in the group and that was why there was a lot of stretching, but she didn't open the subject because of the holiday.

In this session I said they will make a social atom, gave them thirty minutes, suggested they tried not to talk while working and explained what to do. As they began working in the art Sabrina felt she didn't understand anything and felt she did not connect to the activity. She started working and asked a few times what to do. I explained and said she could do what she understood from what I said. She stayed at the materials table the whole time and felt throughout the whole activity that she didn't understand anything, yet she collected objects and placed them on a brown cardboard. Meanwhile, Yael took pieces of wood and with a lot of power tore them and made loud noises in the process.



Picture# 4 - Sabrina's Social Atom, 45X25 cm

(Cardboard, blue lace, pompons, pasta, clay, paper cuts)



Picture# 5 - Yael's Social Atom, 25X30 cm

(Cardboard, wood, battery, orange plastic, puzzle parts, clay, pink rapped wire)

Sabrina was done ten minutes before the end. She left her artwork on the material table and said she could not glue it, because it was not something that can be glued. Yael felt the same way; she felt the pieces should be held in her hand. I said that they I'll glue it at the end because I need to take it. (At this point I was aware my statement evoked many conflicting feelings and took this into consideration while analyzing the consequences.) Yael decided to glue her work and in order to do so she switched the thin white ¼ sheet with a smaller thick piece of cardboard. It seemed she was doing it for me. Yael looked at her piece after she glued it and said it stressed her to glue, because then there was no movement.

Observing the artwork

Yael explained she made the rugs she hated, the circle of the group, Dr. Nick who is the psychiatrist as a round orange plastic and the supervisor as a battery, because sometimes she was energy and other times she was something electrifying and deadly. If the brown mat was bigger the Doctor would have been further away.

I asked if she saw something different from observing the piece. She said she got scared from some of the things when they became real. She thought about representing their supervisor with binoculars and realized she saw her as the eye that was always watching them. She didn't use the binoculars because she got scared of the imagery. She saw the thorny rugs and they brought up a lot of associations. The line and the circle symbols came to her from the last session and they also scared her because she realized they were so different in her eyes. A circle for her was something pleasant to be in and lean on or hug. It's pleasant inside and out and it's very penetrable, because you can move in and out and it makes her comfortable to see it and be in it. The line was infinity, "it's something open" (she opened her arms), one dimensional, not enough. She needed to close it because she felt it's too open for her, but it has a horizon. Sabrina said that seeing Yael's work made her anxious because her artworks, also in the past are always invested, complex, planned and beautiful and she liked that, but it gave her a feeling that her piece was simple, not complex, not well invested and she did not enjoy working in the art.

When Sabrina observed her work she didn't understand it and that was why she put paper cuts on top of her, on top of the purple pompom. In her artwork she was the purple pompom and Yael was the pink. They were the same shape but

different beautiful colors that she likes. They were in two different ends of the piece to reflect their difference.

She said she felt resistance towards the instructions, the work and the fact it had to be durable. She felt retarded when she got to arrange the objects and do the finishing touches and wasn't clear about what she done or what she was looking at, but she was aware of the base she made. She said the word for a base in Arabic and then switched back to Hebrew and explained she made a strong and durable base that will ground her, give her a sense of security from all those limbs she is sending off and made her feel secure to come out. She said the circle had to be in the piece because it emphasized the group and it was necessary in the group. She made it a bit too thick maybe, so it wouldn't break or get ruined and they could always return to it. It wasn't clear to her what was in and out of the circle. She thought about people that are necessary for a group to be.

I asked how she felt being Arab and talking in the group about a Jewish holiday. Sabrina said that today was also a Muslim holiday but she was away from it. She felt that language and culture are important elements for a having a base and a feeling of connecting, durability and power. She missed it and once in a while it weakened her. Many times she found herself in a situation she didn't understand, that she was slower or even detached. The brown symbolized earth, power, energy and a strong base. Sabrina said that unlike writing, in art she was more flexible and was able to change things like adding the earth/base.

I asked the therapists to switch art works and say what they see. Yael told Sabrina that what she put on her pompon made it harder and uncomfortable for her to see her and it created an uneasy feeling although she understood as she said that they were her extensions. She liked the color Sabrina gave her (pink). She said that in her

associations the pasta out side of the circle were the group member that were sitting on the loan, that unlike Sabrina's explanation of the piece that those are body parts extending out she saw them as patients.

Sabrina noticed that Yael in her piece addressed their supervision and she ignored it. It made her ask her self if she felt she didn't need it. The carpets Yael made in the therapy room demonstrated to her how she disliked them. Sabrina said that when Yael worked with the pieces of wood she really found them disgusting. She couldn't imagine what she will do with them, but when she looked at them they really emphasized their difficulty to create a safe ground because they were not safe and one can fall and get hurt from them. She also liked the fact that Yael used the circle and that it was also important for her and was curious what was a line for Yael? I asked Sabrina where and how she would locate herself in Yael's piece. She said not as a line and then said maybe as a line standing tall, but not taller then anyone in the group. Yael said that, during their supervision, after the group she felt empty and split, but after they discussed things, they became more dimensional. Yael used the puzzle to symbolize the patients. Sabrina asked if the puzzle could be put together. She referred to the patient's defragmented selves and referred to her frustration to not being able to put their pieces together and create a complete group. I asked Sabrina about the meaning of her body parts and she answered they belong to the patients, as Yael suggested, and that all the schizophrenic patients are the same to her. They have things in common, their emptiness, but each one has a different emptiness. Each pasta (group member) was open in a different side. Yael looked at her artwork and suddenly realized there are two couples (line and circle), Sabrina and her were parents of the group, and the supervisor and the shrink were also a couple /parents, and that they were all lines and circles.

Reaction to last session work

When I showed the therapists their artwork from the last session the therapists didn't recognize their drawings. Sabrina and Yael immediately responded to the circle and the line. Yael said she felt that now they complement one another instead of negating each other. She said that when they drew these drawings she felt very distant from Sabrina and now it looked like a circle and a line that complement one another and are needed for all couples. Sabrina said that it's a real encounter. Yael looked at her personal piece and said she wanted to continue it and that while she was doing it she experimented and checked things just as she did today. Sabrina looked at her personal drawing and said that then she didn't like it and today, maybe because the paint dried, it looked dynamic, free, spontaneous, and it's what she tried to do.

I asked Sabrina about the center in her drawing. She responded that the center is very important for her. It's the core that collects her, connects her and keeps her when she needs it. It's the safest place for her. I noticed there was a stage for her pompon in her artwork and she said she liked it and she aspired to be the center, the core, and the safe place that can contain it all.

I asked what shape she would like for herself. She said she really liked this painting, that everything is smeared, that nothing is clear, that the shapes are not static. Yael noticed that Sabrina placed her alone in her piece with no one around her, and that Sabrina was closer to everyone. Sabrina apologized.

Sabrina felt the art allowed her to talk about things the way she experienced them and that it was easier when they were outside.

Yael felt working with the art raised issues that were there, but it gave them a frame, looking at them emphasized her difficulty to touch things, to see them for real. She

didn't want to continue, feeling she didn't want touch these things that are too difficult. Today when Sabrina responded to the line she drew she didn't mean anything by it and her response scared her. Also when Sabrina finished early to work on her piece, Yael had a hard time, and was still working. She asked herself why and what does it mean? Also when Sabrina said that she invested and planned her piece it made her feel uncomfortable. Sabrina asked: "Even though I liked it?" Yael wasn't sure and Sabrina said she was also envious about it.

3.2 Case Analysis – session #2 – Yael and Sabrina (Pictures #4, 5)

In this session I requested the participants to create a social atom. Before this meeting it was decided in the participants' supervision that they will both leave the group in three months and they will no longer discuss their co-relationship. Prior to this decision I wanted to focus on the co-group relations and wanted to observe how the social atom will expose it.

In the former chapter I began analyzing the session with Avi Goren-Bar's developmental axis of working in the arts, which enabled quickly to get to know the participants as they worked together and apart. In this session I will focus on the main theme stage. In this session to my request the therapists didn't talk while working and the art can be isolated from the verbal communication that was in the former session. In this discussion I will analyze this session through observing the art product, the information that becomes apparent from it (the social atom) and the metaphors that rise from the conversation about the art expression. As in the previous analysis I will analyze these session from a multi-layered perspective.

The social atom description

Looking at her artwork Sabrina said she didn't connect or understand my instruction and for that reason the purple pompon that represented her in the artwork was covered. She explained that Yael was the pink pompon, that both of them are the same shape but different beautiful colors she liked and they are in two different ends to reflect their difference. Yael explained she made the rugs she hated, the circle of the group, Dr. Nick as a circle and the supervisor was a battery, that sometimes she was energy and sometimes she was something electrifying and deadly. If the mat was bigger the Doctor (orange plastic) would have been further away.

Observing the Social Atom

Yael explained that looking at the process of making the atom and then looking at it she got scared from some of the things she made as they became real. She thought about using binoculars to represent the supervisor and realized that she saw her as an eye that is always watching them. The imagery scared her and she decided to represent her with a positive and negative battery. Malchiodi (2003) writes that art therapy allow images and image formation and invites to reframe feelings and in contrast to mental images, allows an individual to actively try out, experiment with, or rehearse a desired change through working with a tangible object that can be physically altered. On this issue, I would like to note that the difficulty Yael had should have been brought up in their supervision. Malchiodi (1997) notes that when there is multi supervision they should be collaborated in order to prevent a split in the supervisions. Since there was no collaboration, I think my research on the one hand allowed issues to come out that didn't have room anywhere else but it also created a

split in the supervision where issues that should be brought up there, split into my session.

Yael was also uncomfortable with the line and the circle she recreated in her piece from the last session. As she looked at those two symbols she realized how different both therapists were. She described the circle as pleasant to be in, lean on or hug. The line for her was infinity, something open and more one-dimensional and she needed to close it because it's too open for her. She also mentions a positive side, that it has a horizon. As seen in the previous session the therapists are comparing themselves and dealing with their differences. As seen in the artwork Sabrina's line advanced into the center of the group and might be threatening for Yael. Yael described how the art raised issues that were between them, giving them a new frame, and looking at them she realized her difficulty to touch things, to see them for real. Yael was scared of Sabrina's reaction to her line. She said she didn't mean anything by it and was unconscious to her perception and description of Sabrina as a line. "Many times the couple therapists will be confronted with a situation that either puts clients in a double bind or demonstrates a paradoxical bind that has entrapped the couple. Paradox cannot be confronted on the same cognitive level as other conflict situations because it will not respond until the thinking has moved to another level (Haley, 1963). Only when Yael realized that her piece is composed of two couples that are symbolized by a circle and a line in both sessions she was in a new cognitive level. When they looked at drawings from the last session Yael said that all couples need a circle and a line because they complement one another instead of negating each other, as she saw before. Sabrina also shifted during the session. At first she didn't like the symbol of the line Yael gave her in her piece. When I ask what symbol she would give herself in Yael's piece she said maybe as a line standing tall, not taller

then anyone in the group. After viewing the mutual drawing, Sabrina felt that she can see how the line and the circle connect. Riley (2003) notes that it's important to point out the positive parts of the relationship so the couple will have a flourishing basis for reconstructing the relationship.

The mat

Sabrina said she felt retarded trying to arrange the objects and do the finishing touches on her piece and felt she was resisting this activity. Sabrina was stuck in the theme stage (Goren Bars, 1997) and resisted moving to the processing stage, a stage of elaboration and progression. The main theme came to the surface and she couldn't develop it further. Sabrina elaborated on the mat she made and while talking about it she said base in Arabic and then turned back to Hebrew. Touching and sensing materials can create a regressive effect, in this case a basic mother tongue effect such as the primal touch of a mother and her baby. (Winnicot, 1971)

Sabrina took a cardboard and referred to its color and texture. The brown color symbolized for Sabrina earth, power and energy. To the brown and hard texture of the cardboard Sabrina referred as providing her with a strong and durable base, a ground that will hold her and give her a sense of security from herself (those body parts she is sending off on top of the purple pompons). The Social Atom derives from our basic group perceptions. Sabrina starts building her group, her social atom from her basic needs. According to Gelkin& Orbach (1997) the cardboard allowed her to deal with issues of containing and being contained, which are primal issues that can also refer to the co-therapist, the group and the supervision. Goren Bar's (1999) theory would put an emphasis on the fact that Sabrina didn't leave the material table, which would hint that Sabrina is stuck in a very primal stage of the process. It seemed that there was a

connection between the base Sabrina made (containing and being contained) and switching between Arabic and Hebrew. Therefore I asked Sabrina about her Arab base and how she felt about the fact that today they discussed a Jewish holiday in the group and she is Arab. Sabrina and Yael blushed. It seemed this subject wasn't discussed between them. Sabrina said language and culture are important elements to create a base feeling of connecting, stability and power. She said that many times she felt she didn't understand things and it made her feel detached. It seemed that in both sessions Sabrina was not fully engaged yet it wasn't clear why. As Sabrina spoke about the base her body language changed and she was more present. Dudley in her article "The Co-Therapist Relationship – A married couple?" writes on how social norms of gay friendliness, in this case Jewish and Arab, made her and her partner not discuss this major issue that was between them. She describes how she worked with a gay man for nine years and only after a few years together they dared raising this issue. "Surely in maintaining therapists' neutrality we can transferentially be what the patients want to need us to be and so the actuality of who we are does not matter, nor does our sexuality, and anyway it is the art that counts. This is something John and I had said to each other and which had been said to us within our trainings and supervision. In hindsight, it had become our excuse not to address such matters and it had become a denial of our outward performance. "(Dudley, 2001, p.18) Sabrina's obvious difference was an issue for both therapists and from their reactions wasn't honestly discussed and could be pursued in supervision.

Glue

Glue was an option that I introduced to the therapists. I also told them I will glue their artworks at the end of the session because I needed to take them with me.

My needs for the research affected the participants and there for I would like to address the subject. Gelkin & Orbach (1997) write that using glue is sticking to a choice.

Gluing became an issue when Sabrina and Yael said their pieces couldn't be glued. Yael wanted to be able to hold the items in her hand and Sabrina just didn't see how her piece could be glued. When Yael realized I would need to take her artwork she switched from a white ¼ sheet thin paper to a thick brown size A4 cardboard. Because the new mat was smaller she had to bring the items closer together, which seemed to me as a great sacrifice. At the end of the session she looked at her piece and realized she was quick to please what she felt was my request to glue. She preferred not to glue and that her piece will be lighter. Yael visually saw her shrinking process. Sabrina also glued her piece and wasn't happy about it. Since both therapists are dance therapists it might be that it was their sensitivity to movement that stopped them from gluing. Yael expressed it by saying that it stressed her to glue, because then there was no movement. Yet, their difficulty with commitment can be observed in the first session. Yael did the circle and then got scared from it. Sabrina expressed it in her ambivalence to draw and not to draw, to be and not be in the session, in the group and in the hospital.

Exchanging Drawings

During the session I asked the therapists to switch art works and then explain the other's art as each understands it. Riley (2003) writes on couple therapy that each partner passionately wants the other to "see" the world through his or her lens. Exchanging drawings forces the couple to listen to how the partner interprets and projects meaning on his or her art. Yael observed Sabrina's piece and said that these

things that Sabrina put on herself made it difficult to see her and she would prefer seeing her without it although she understands that, as she said, these were her extensions. In this manner of conversing Yael shows Sabrina she saw her world, but also offered Sabrina another perspective on how she was seen from the outside.

Sabrina noticed that Yael addressed their supervision and she ignored it and made her ask herself if she felt she didn't need it. Sabrina was dealing with the issue of support, stability and security in her own piece, but at this stage it was unconscious and she wasn't ready to make the relating connections. Looking at Yael's piece she was able to distance herself and relate to this specific issue. Also, in looking at Yael's therapy room thorny carpets Sabrina realized how unsafe the room was to the extent that someone can fall and get hurt. Sabrina was able to see in Yael's piece that she didn't feel safe and that as therapists they didn't supply a safe/good enough environment in the therapy room.

Sabrina said that the pasta in her social atom was body parts coming out of her and also what was needed to create a group. Yael saw something different and associated the pasta to the group members inside and out side of the group circle. The ones outside were the group members that are sitting on the lawn. Sabrina adopted Yael's interpretation as she helped her raise the meaning of her symbol to a conscious level and explained that all the schizophrenic patients were the same to her. They have things in common, their emptiness, but each one has a different emptiness (Each pasta hole is open to a different side). Expressing these feelings seemed to be significant and Sabrina was able to expand on her frustration working with this kind of population looking at Yael's puzzle that represented the group members. She asked if the pieces came together. She refers to the patient's defragmented selves created as pieces of puzzle and asked how they could help them, put them together?

The counter-transference of emptiness and fragmentation was seen in both therapists' pieces. Yael expressed her empty and fragmented feelings in the puzzle and said that before supervision she has those feelings, but after supervision they became multi dimensional as they explore what happened in each session. In creating three dimensional art pieces, there are no boundaries, frame or emptiness. The therapists in supervision can create what they do see as well as all the things that they don't. Those social atoms are the transference and the counter-transference of each therapist to the other and to their group. When Yael noticed that in Sabrina's social atom all of the patients are around her she saw a split and a conflict that were contained as they are within the frame of the picture. In the first session Sabrina considered leaving the group, in a parallel process, half the group stayed on the lawn. Dugo and Beck (1986) claimed that the development of the co therapy teams becomes a criterion for the progress of the therapy group and the healing of its members. The split Yael saw in Sabrina's piece elicited an issue between the therapists, but it was contained in the art, seen by both therapists and at the moment remained there till they will be ready to confront it. Discouraged as they were to discuss co-team issues they might probably not discuss it, although the issue was also surfacing from the groups dynamics and can also be discussed on that level.

Both therapists saw in their work process and artworks that they are very different and both Yael and Sabrina didn't feel comfortable with this difference. Just as Sabrina said in the last session that every small difference made her feel uncomfortable Yael exhibited this feeling in Sabrina's response to her piece. Sabrina admired Yael's artwork and felt that her piece wasn't as good. Yael didn't feel comfortable with Sabrina's comparison, feeling it was judgmental. In the last session Sabrina blamed Yael for saying she wasn't professional enough. It seemed this issue

was brought up again in the art. A supervisor might suggest doing an artwork on what is a good therapist, because both therapists are not convinced the way they act is good enough. They are envious and can't appreciate their own abundance. They are dealing with what they are not, just as their group and also their supervision, thinking there might be something more in my sessions than the ones they already have.

Reaction to last session work (Pictures 1-3)

Looking at the "old" drawing both therapists didn't recognize them. They felt they didn't connect then and looking at them again they felt different. (Picture #1) They felt that the circle and the line actually complement each other. Sabrina didn't like her personal drawing (Picture #2) when she made it, but in a second glance she liked what she saw and appreciated the fact it was flowing, dynamic, free, spontaneous and that it portrayed what she intended to. According to Hardy (2001) the symbolism in the picture can resonate and change their meaning over time, which enables the patient or in this case the co-therapists to express emotions safely, as well as facilitates the confluence of competing thoughts. I asked Sabrina about the center in her personal drawing and she said it was very important for her. I noticed in her social atom that her pompon had a stage and she said she aspired to be the center, the core, the safe place that can contain it all. Yael put Sabrina as a line that approached the center. (Picture #5) It seemed that unconsciously Yael saw that ambition in Sabrina and for that reason in the mutual drawing had a need to capture the center before she did.

Summery (Pictures #4, 5)

In this session the social atom exposed the undercurrents that are present in each therapist's perceptions of their group. It revealed the contexts the therapists are in and opened a shutter to the therapist's conscious and unconscious perceptions of each other and of themselves. Sabrina's basic difference from her co, her group and her supervisor was surfaced as a brown colored cardboard material and it became contained in the artwork, with her co and in the session. The symbol exposed her unconscious and opened new options for self-awareness and individuation. The symbol of the line and the circle, as all symbols, held in the session powerful, negating and conflicting meanings such as in Yael's representation of their supervisor as a battery. The battery is both a circle and a line both positive and deadly as Yael noted.

Each material in the art has its alchemic potential. Glue in this case demonstrated both therapists' uneasiness to commit or to stay at one frozen moment and at the same time to move and be spontaneous. There are many implications and it wasn't fully discussed yet it revealed how hard it was for both therapists to remain in one moment, amongst themselves and with a group. Art therapy is able to transition one feeling into another. Yael used this transitioning in turning the supervisor's image from binoculars to a battery because the first image scared her. This creative quality allows dealing with demons after they were created on the possible conscious level. In the art they were able to get perspective, to distance them selves, to detach and split negative forces, to see their abilities and lack of them and begin observing their difficulties, keeping them in the art but also appreciating them as complementary.

3.3 Summary (Pictures #1-5)

There is a high level of agreement about the characteristic issues to be addressed in the second phase of co-therapists development: authority, power, conflict, differentiation, norms and control issues. (Hoffman & Hoffman, 1981, Brent & Marine, 1982, McMahon & Links, 1984, Dugo and Back, 1997) As can be seen through the art making process competitive and envious feelings, irritations, anxiety, and differences in personal concepts surfaced. Those issues according to Berger (2001) are inherent to the human condition and do not get addressed enough in co-relationships. In the first minute of art making the symbol of a straight line and the circle appeared, became the center motifs of both sessions and “spoke” for the therapists about those sensitive issues.

In the first session both therapists were very keen to talk, but it was too confrontational. Conversing through material, lines and colors made it easier to transfer their feelings onto the art piece and distance themselves from what was at that time a very tense relationship. The artistic medium offered a tangible framed containment to an inner sensation described as chaotic, split and conflicting. The visual containment enables the therapists to be inside while in the process of creativity, and to be outside of the entity, when looking at it after it has been created. Unlike dance therapy where the moment is gone and cannot be looked at in art therapy the process and the final product remains. Sabrina expressed this benefit when she said that in dance she was the art and the moment was transient. As Yeats concluded in the poem “Among School Children” (1928) “How can we know the dancer from the dance?” The plastic art allowed her to talk about things as she experienced them because they were outside of her.

According to Golub (1985) the use of art and materials as opposed to direct words, enables the creation of a safe space. Both therapists didn't quite understand their images or materials they chose. Yael couldn't fully comprehend why Sabrina was created as a line and Sabrina couldn't explain why she put most of the group around herself. The unconscious freely arises through the creation process, thus enabling a vivid dialogue. Yael and Sabrina in both sessions were afraid of talking about their relationship and when they talked about it verbally stumbled on many defenses. Because they couldn't control the language of art they were free. In the second session they began dealing with the images' duality and broaden their dialogue. Yet I would like to take into consideration the fact that Yael and Sabrina started the first session with a question mark regarding their future together and were afraid of what would come out. Riley (2003) defines the term "couple" as two persons committed to a long-term relationship and who have, or had, the intention of remaining a couple for the foreseeable future. At the end of the first session Yael expressed her thoughts about leaving and by the second session they decided to separate, yet they stayed with the group for another three months a sufficient time to make progress. Because the therapists did return for the second session I observed their return as an attempt to understand and come to terms with their past and also deal with their ending relationship. Sigalla (2004) note that a couple's capacity for attachment as well as their goodwill and desire to stay together provides a better platform to explore their relationship.

During the sessions Yael and Sabrina perception of themselves and each other changed and by the second session they were able to look at their history (mutual and personal drawings) and begin to see their strengths, compatibility, social convictions, competitiveness and envy and understand each other better.

4.1 Case Presentation and Analysis – session #1 - Nicole and Thelma

4.1.1 Case Presentation

I met Nicole and Thelma in the hospital where they lead their groups. The session began with some tension. Nicole thought the session would be forty-five minutes although I told her it would be an hour and a half. She said she could only stay for 45 minutes. I was a bit surprised and continued using the time we had. I introduced myself and explained the purpose of my study and then did a short intake. Thelma and Nicole were in eye contact with each other throughout the whole intake and communicated with humor. When I started asking questions Thelma said Nicole should begin, “It’s the political thing to do” and they laughed.

Intake

Nicole and Thelma work in the hospital. They lead a group of kids between the ages of nine to twelve that are overweight. They have seven patients in the group. They also lead their parents group once a month. They laughed and said its ‘for parents' ventilation’ purposes. The therapists have known each other for three years from the hospital ward and this is their second year working together as a Co-team. This year they don’t have supervision. They both laughed that they are excellent and don’t need it or that they are scared by it. Last year they had supervision together for the same population, same day, same time, but with different people. The supervision was good and they didn’t talk much about their own dynamics; it was mostly on the group.

Nicole is a psychodrama therapist in her early thirties. She would have liked to do more psychodrama with her patients but usually it’s very hard to move them to it. Tamar is a dance therapist in her late thirties; she is five years in this field. She is

a bit familiar with art therapy and started incorporating it in her session recently. In general, dance is very central for her and if she could she would base her therapy only on the experience and so she would enjoy it more. The processing and sharing part is something she is slowly learning and there is a side of her that doesn't want to talk and she is pro experiencing.

I asked if they can estimate at what stage their group was in and they responded that the group was in the autonomic stage with anxiety before ending the group in three months. In this group at the end they put up a play that raises the inherent issue of competition and taking space. Thelma said that the group operates well and is crystallized and the evidence is that a few times before they began the group the members sat in the circle and started sharing in turns as if they know what to do. The therapists usually don't talk about the group before or after the session; they work together three times a week so things come up. Today they met with the kids and the parents (two groups) and Nicole was very tired.

Mutual drawing

I asked the therapists to choose between the different sizes of sheets a quarter, half and a full sheet. They agreed on a full sheet laughing it was the only option for them. I told them that there are rules for the drawing and they seemed very anxious. Thelma sarcastically said: "But we want a subject" and Nicole humoristically said: "Can we use magazines?"

I asked them to each choose four colors. Thelma chose two colors and yawned. Nicole said she wanted to point out for the protocol that Thelma chose colors very quickly. I gave them twenty-five minute for the activity. Thelma asked: gouache?

Nicole: "But we don't have gouache." She turns to me "You are not looking at these paintings and comparing them?" And she laughed.



Picture # 6 - Nicole and Thelma's Mutual Drawing (Full white sheet and oil pastels)

The therapist's names were covered by white paper cuts

Nicole colors: light blue, red, light purple and green

Thelma colors: yellow, olive green, navy blue and dark purple.

There was a long silence as they drew. Thelma started with the purple on the right and Nicole with the green on the left. Nicole filled the green with purple and Thelma started drawing a squiggly line toward Nicole and then she stopped. Nicole didn't respond. Nicole asked, "Can we borrow colors from each other?"

Thelma advanced with a yellow squiggly line and encompassed Nicole's working area. Nicole moved back and raised her eyes towards her. Thelma giggled, "Go away, go away, go away." Nicole answered, "But it's nice."

They were silent for three minutes. Nicole drew zigzagged lines in red and Thelma went over Nicole's drawing in purple. Thelma drew with a light movement accompanied by sounds. Nicole looked at what she drew in blue and then wrote her

name on the drawing. Thelma added to the purple element she started with yellow and olive green.

They asked if they were allowed to talk. Nicole told Thelma that one of the patients would not be in the group. Nicole's area on the sheet was full so she got up and drew in red and blue on the other side. They talked about problems in the administration that one of the fathers didn't pay and Nicole had to tell him that he must. The drawing was three quarters full. Nicole said she is finished and she laughed at herself that she was talented. They both continued working. They were physically close to each other. They talked about what one of the mother drinks. Thelma said she tried to mirror how she is and Nicole said that she couldn't take it. Nicole started talking about an idea of doing two parallel groups of parents and kids and asked Thelma what she thinks. Thelma said they should think about it and there was silence. Nicole continued talking about the subject and Thelma seemed remote. Thelma said she was bored with just four colors (she looks at me) and asked to switch colors?" Nicole said I don't allow it." Thelma repeated Nicole and said She doesn't allow it. And Nicole said that they could break the rules. They laughed. Thelma drew in olive green that burst out of the blue/purple circle. Thelma said: "So I'm mad." She made big lines that cover Nicole's drawing. Nicole said: "Why at the colors or me? They laughed and she asked again: "You can tell me, because there are a lot of options." There was no response.

Nicole got up and wanted to draw on the other side of the drawing. She said: "I don't reach over there." And Thelma responded: "Must we fill everything?" Nicole said: "No, (they laughed, but she seemed surprised), just if you feel like it. Leave it then."

Thelma drew in the place they both agreed not to. She made no entry symbols. There was hardly space left in the drawing and they added another layer. Thelma added

words and sang them. Nicole was concerned about what I see and if I'll tell them if they wanted. They both continued to work. They talked about a patient that made a major breakthrough. Nicole said they now they must unite between the father and the mother and they succeeded. Thelma was finished drawing. I told them they have twelve minutes to continue. Nicole asked what if they are done and I said it ok. Thelma asked if they could smear. They laugh and Nicole asked if they couldn't use gouache. Thelma smeared her part of the drawing and Nicole looked at her. Thelma was full of energy smearing and as she smeared she got more exited. Nicole asked if they could switch a purple with a purple. I said no. I told them they can stop at any time and Thelma said she needed to smear now. They laughed. Nicole told Thelma there is something phallic in her drawing. They laughed and Thelma said she knows at what stage she is stuck. They laugh. Thelma continued to smear and Nicole looked at the drawing and realized she wrote her name and needed to erase it. She asked Thelma to help but she didn't mind that her name was there. She said her name looked like the mountains of Jerusalem. They asked if I would erase it and I nodded. There was silence and Thelma worked vigorously. Thelma looked at Nicole's part and said it's too tidy.

Nicole said to Thelma: "Can you see what we created? It's like a man with his hands up to the sun." Thelma said: "It's the movement they did before in the group." Nicole demonstrated the movement. Thelma kept smearing and said: "You are really organized." Nicole agreed and said that what she saw is already too messy for her and if she was really loyal to herself she would have used less space. Thelma was surprised and asked Nicole why. Nicole answered whispering that that is her phallus. They laughed and observe the drawing. Thelma asked Nicole if they are done and they finished four minutes before time.

Observing the drawing

Thelma said she tried to be spontaneous but even in her spontaneity she repeated herself, but she didn't think about what came out. Nicole said that her forms are always the same. She always starts to draw the same forms.

I asked if they thought about something while drawing. Thelma said that she wasn't with the group on a conscious level like Nicole was and Nicole agreed. Thelma felt she was with more unconscious things, like she started drawing really rough when the issues about the group started. It was very clear to her that she did a different quality of movement and coloring when group issues were brought up. She said she wasn't angry. Nicole suggested it was aggression that she felt from her all of a sudden when she entered with her first line, covered over what she painted and when she did the no entry signs. Thelma agreed. Nicole asked what was it. Thelma said the signs were to keep it empty. Nicole repeated: keep it empty? They laughed and Thelma said "but I wrote: (A verse from a ballad of a couple in love) Venus sends Jupiter a smile". And Nicole replied with the next verse: "Hey Jupiter let us go..." and then sarcastically said: "This is Jupiter? These no entry signs?" Thelma said that her no entry signs turned in her view into stars. Nicole argued they were first stop signs. There was silence. I asked about the aggression that she connected to the group. Thelma said that when the issues about the group came up she was in another world and typical for her, because she is a bit fed up of thinking. (They don't talk about the group regularly).

I asked how they feel sharing a space. Nicole didn't feel they shared a space and that each one was on their own. She didn't feel they shared, because for her sharing is something together from the beginning. They didn't draw together. Each

one took her corner. Thelma felt differently and said she in that line in the beginning tried to make an attempt to share, not an aggressive attempt to penetrate. Nicole noticed that. Thelma said she stopped there because she wasn't clear if she can advance further and in the yellow line where she encompassed Nicole it was more acting out. Thelma realized they have completely different energies and when she draws she thinks of movement and not what will be there. As far as she was concerned the smearing was part of a sensual thing, if there was mud she would be in it. She didn't draw objects. It was more about the texture that interested her, the movement in the process and she would work another hour and create something new in this drawing if it was more oily...till it becomes vomit (she laughs) and nothing will be seen but there will be movement. I asked what about the white she wanted to keep. She said yes. Nicole said that it really bothered her that they had only four colors. That she would have taken more, that she lacked yellow and the decision of kinds of paint wasn't her first, she would have used gouache, not panda. Thelma said she would have preferred watercolors. I asked how Thelma felt when she tried to communicate and didn't get a response. She said she didn't experience at the time. She stopped because she thought it might be invasive and said to herself: "Like, why I'm I in her territory?" At one moment she felt clear that why was she entering with such spontaneity. It was not her, but she felt there must be some kind of communication. Nicole didn't see it that way, as an attempt for communication. She was in her space that she put to herself and she wasn't open to a connection. Thelma pointed at her yellow line and said she wanted to mirror Nicole, but Nicole saw it as meddling in her affairs. Thelma said: ha. Nicole responded: ha, ha laughing. Thelma asked how it was when she smeared. Nicole said that at that point she wasn't drawing. I asked if they learned something from each other and they laughed: "Not in

our school.” Nicole wanted to expand on the subject of their togetherness, and said she can see it in their dynamics. I offered them to process it now and Nicole said she was tired and that it might sound like resistance, but she was really tired and she miscalculated her abilities for today. I asked if they were surprised with each other’s work. Thelma said that Nicole was very reserved and she experienced her different and in the drawing she was much more reserved. Nicole replied: “Yes it’s with boundaries” and she felt she would have stayed in a smaller area that to her it looked very scattered. Thelma felt it to be weird that she experienced Nicole as fire and in the drawing. They laughed. Nicole then said: that she needed to write her name on the drawing that things would be obvious. Thelma said that it was surprising that she added words that were not clear to her, but maybe working with Nicole she didn’t have any choice. They laughed. They each saw themselves in the drawing. We scheduled the next meeting and we parted.

4.1.2 Case Analysis – session #1 - Nicole and Thelma (Picture #6)

As in the previous analysis I will begin with a short overview of the session in the art and then I will focus on major themes that were observed by the therapists. In this session the therapist spoke while they worked.

The Contact stage

This stage reveals the participant’s temperament, curiosity, decision-making, preferences within the medium and means of confrontation. Nicole and Thelma’s initial contact with the art materials was with excitement: They made quick decisions and both agreed on a full sheet and laughed at themselves they both needed space. But as I introduced the settings: the kind and number of colors, they became anxious

or frustrated and offered alternatives: Nicole suggested magazines and Thelma wanted gouache. Nicole was very anxious about being observed and said: “You are not looking at these paintings and comparing them?” Both therapists' temperament was very dynamic, humorous and alive.

The Organization stage

There was a very distinct difference between the two therapists. Thelma was seeking connection and expanded on the page. She tried different techniques of approaching Nicole, with no success. Nicole seemed as if she was “individuating”, hence looking inward. She started on the left side, near the frame of the page, in a small area. Nicole’s body language seemed to be closed; she was still and focused on the page. It revealed both therapists uneasiness with positioning them self on the surface. Nicole seemed jammed in her space and Thelma seemed lost, asking Nicole for directions.

The improvisation stage

This stage observed the ability of the therapists for trial and error, adeptness to the art, flexibility, spontaneity as opposed to rigidity and tolerance to frustration. Nicole worked close to the page and with small movements drew patterns and apologized for her inflexibility that made her draw ordinary patterns. Thelma constantly expanded and moved on the page. She seemed comfortable and eclectic in her use of colors, lines and movement. Most of her lines were directed towards Nicole and she seemed frustrated there was no response from her, but it didn’t make her stop. It seemed that Thelma adapted to the art easily and Nicole had a hard time to leave

her former patterns. They were both rigid: Thelma had a hard time to contain Nicole's closeness and Nicole wasn't open to Thelma's advances.

The main theme stage

As I introduced the issue of togetherness with the activity of a mutual drawing the issues of communication and boundaries or the lack of them surfaced and brought with it aggression. It can be seen in the meeting point between both bursting lines: Nicole's blue and red and Thelma's olive color. They are located in the center, are big in size and seem to hold the most amount of energy on the page. It seemed that as well as a mutual main theme, as they worked individually, they each had a subject matter of their own. Nicole's topic in the arts seemed to be the red and green parts on the left, because of the use of force and intense coloring. Thelma's issue was the purple bursting out of the yellow object.

As Nicole's space was all drawn in she moved to Thelma's side. As she regressed to a new improvisation stage, she got up spontaneously and wanted to try new things but Thelma stopped her saying they shouldn't fill the whole page. In reaction Thelma regressed to the contact stage and confronted the activity asking for different colors and rules. She drew vigorously and said she was angry. This regression, that I will return to in both chapters, demonstrates how the process as well as the recorded moment on the page can allow the therapists to observe how they react to each other's actions.

The adaptation/processing stage

After Thelma created her boundaries she wrote a line from a poem that describes a couple romantic hand in hand walk in the galaxy and then she started

smearing her initial purple and yellow lines. Nicole told Thelma her drawing looked phallic and she admitted that it was her phallus. While she worked she hummed the song and moved with her whole body. Rogers (1993) writes about sounds for healing that our society offers very few outlets for uninhibited sounding. According to him the voice is where the body and mind meet. Our vocal chords, located between our head and body are the channels through which we link these two aspects of self. When we make sounds as a form of self-expression and personal discovery (rather than performance), we find ways to release the emotions and massage our-selves from the inside, out. Nicole stopped drawing at this stage of developing and observed Thelma.

The preservation stage - Discussing and observing the drawing

Observing the drawing both therapists quickly raised issues that came up during the process. They were honest with each other and able to share difficult issues and discuss them. At the same time there was a great amount of anxiety and tension, which was expressed in humor and in the art. Thelma remarked sarcastically: “We don’t need supervision we are just great.” But humor also enabled them to say harsh things to one another and “soften the blow”. Both functions were used in the art. The art enabled them to sublimate their anxieties and aggression and also do show their aggressive and split feelings to each other. The art served as both the means of sublimation and the visual container of the various conflicting issues that rose.

Nicole and Thelma didn’t have supervision this year and it seemed that my position as an observer and a third person was very threatening for them and they seemed very defensive and suspicious about letting me into their world. Their reaction

was normal for first sessions, but the feeling I got was of a trespasser. I was out of line from the moment I came in the room thinking I came for an hour and a half session to discover the time has been restricted to forty five minutes. I will refer to this issue later in this chapter.

As the therapists worked in the art there were a few main themes. I will analyze them from the therapists' perspective as they were discussed in the processing part of the session as well as from the observer's viewpoint.

By introducing the Mutual drawing to the co-therapists I wanted to form trust between them and the materials so they can discuss togetherness, common grounds and empathy on the unconscious level in the pictorial visualization, body language, feelings, techniques and cognition (Gelking & Orbach, 1997)

Thelma and Nicole's mutual drawing was not about togetherness, as Nicole said it; each one of them drew by herself on the same sheet. In the art there was no contact, intimacy and mutual involvement.

Communication and Aggression

Thelma's noticed visually that when Nicole started talking about the group her drawing style changed. Nicole suggested that she became more aggressive and she felt her lines became invasive. It seemed that Thelma wanted to communicate artistically and Nicole wanted to communicate verbally, but either one of them wasn't reciprocate to the other. Thelma was communicating through the experience with sounds, colors and movement in the here and now and Nicole wanted to communicate throw words about issues concerning the group. Observing the drawing it looked as if they are having a "fight" on the page, but there was also a verbal fight that was off the page. The "fight" began when Thelma made a border with the yellow line around

Nicole. She said to herself to go away, but Nicole moved back and said it was actually nice. Nicole was sending a double message that was seen in the gap between her actions and her words. Thelma understood Nicole's behavior correctly on the experiential level and told herself to leave, but Nicole confused her saying what she did was actually ok. The "fight" accelerated on the page when Nicole drew the red and blue bursting lines and talked about group issues and her ideas for the future. At that point Thelma was clearly not interested in the conversation and felt Nicole was intrusive. She then displaced her frustration onto the art saying she was bored with the colors and then drew the olive bursting lines. Observing them communicate felt as if I was watching two people speaking different languages frustrated how the other doesn't understand. It seemed that both therapists were not aware of their own behavior. This issue can be further explored in art supervision, in the manner that each therapist will learn his own style, tone, movement, tempo, lines, hence their difference and help both therapist deepen their understanding of their own credo as well as understanding their co-therapist. Thelma learned when she became aggressive her artistic style changed. In the next session she was able to investigate this issue further.

Three major themes derive from their communication on the page: difference, which in this session led to boundaries issues and frustration.

Difference "Me" and "Not Me"

Nicole said there was no togetherness on the page and they each did their own drawing on the same page. Thelma noticed their different energies and said she created movement and suggested that Nicole as opposed to her created objects. Thelma is a dance therapist and inherently her work is pre verbal and relies on the

ability of the arts to contain ambiguous feelings that are not yet objects and can not be “named” as in the plastic arts. Nicole is a psychodrama therapist and her work is verbal. Thelma noticed that Nicole created things that have a name that from her point of view arrived to the stage of verbalization and therefore are more defined. The same difference was also expressed in the process. Thelma immersed herself in the experience and talked about the texture and movement, hence the ambiguous state, and Nicole talked about the group as she drew. Her creative process seemed rigid in her gestures and restrictive and composed of patterns. An art supervisor could direct the therapists to view their differences and strengths as a co-team.

Nicole said Thelma’s drawing looked phallic and she admitted that was her phallus. Thelma said Nicole was reserved on the page and Nicole said it was her phallus. Their discussion over the phallus seemed to be rooted to their envious feelings towards each other. The images contain negating meaning of what they do and don’t have as well as their fear of castration, of losing what they do and don’t have. Also, It seemed that the triangle we were in (co therapists and the art, co therapists and observer) enhanced the issue of difference and competitiveness that both evoked a threat to one’s personal resources and security (Klein, 1957) as well as it became a source for self-exploration, of each other’s traits. Thelma expressed this tension in the art when she observed she added words to the drawing. She was surprised it was there because it wasn’t like her. Reflecting on it she realized that working with Nicole she had to lose her preverbal grounds and gain a verbal approach. By observing the drawing the therapists can see their influences on each other.

Boundaries

Thelma said that when she encompassed Nicole with the yellow line she wanted to mirror Nicole's drawing, but it defined both of their spaces. Thelma realized in the discussion how her manner of relating wasn't appropriate. The art process mirrored her behavior. By observing that moment on the page they were both able to pinpoint where exactly was the moment both of them could have made contact and prevented it from developing. Nicole tried to make contact when she wrote her name inside a frame and Thelma's without, she made the erupting red and blue lines but Thelma didn't notice it and moved freely on the page. When Nicole wanted to draw on her side Thelma stopped her. It seemed that both of them feel they need to protect their space.

Nicole seemed reserved and restricted on the page maybe due to the interaction or to her own needs. When Thelma told her she was very reserved in her drawing Nicole responded directly to this subject: "Yes it's with boundaries." In a co-team therapeutic session each person's space is invisible. In the drawing the therapists were able to observe their boundaries visually. Thelma was able to see her mirroring wasn't attentive. Nicole was able to understand through the art process that she wasn't clear enough.

Frustration

During the session the therapists seemed frustrated. They wanted regressive materials such as gouache and water colors which are fluid, messy, less controlled and connected to settings issues and related to the anal stage. Throughout the session they wanted to change the colors, rules, texture of the colors and made comments about their need to rebel. According to Killick (1997) the analytic structure of art therapy

functions as a containing object for the un-integrative condition of the therapists. A condition that is associated to the baby's primal failure to contain and use intrusive identification, which defend against the catastrophic anxieties.

Thelma and Nicole were very anxious and defensive. Nicole expressed it minimizing her self on the page and Thelma in her smearing of the colors (Nicole uses words in the same manner) Thelma transferred her intrusive identification into the art. This need can result from the fact this is the first session and the connection between the therapists and I as well as with the materials was not established. It might also raise the issue of containment among the therapists. The need for less controlled and contact materials like watercolors may derive from a need for holding and security. In the art the concrete touch holds the memory of primal motherly caring.

Summary

Working in the art in this session explored the team's process of co-working as well as the therapist's difference, aggression, frustration and boundaries issues. The art process demonstrated to the therapists that there was no togetherness in their mutual work.

The art took the couple on a journey to a pre verbal developmental state and demonstrated how they feel in ambiguous situations. It brought out Thelma's difficulty with setting and boundaries. It exposed Nicole need for boundaries. It affected Nicole in a way she was closed, less spontaneous and playful, which made Thelma discovered Nicole might not be as wild as she perceived her. Thelma as a dance therapist was more comfortable in this ambiguous state then Nicole who needed defined boundaries and verbal meaning. She expressed it at the beginning of the

session asking me if I'll tell them what it all meant at the end. Both therapists were able in this session to "see" each other in another perspective. During the drawing they went through a struggle. Nicole wanted to be on her own and Thelma constantly looked for ways to interact. Thelma was surprised she used words and realized that was part of her adaptation in order to be able to work with Nicole.

From the observers point of view it was very apparent how both therapists work with different therapeutic disciplines. Thelma used the art therapy inter-model process of healing and understanding, where each layer of artistic expression enhanced and brought clarity to the other. She used movement, sound and art to accentuate and explore her experience as she was experiencing it. Nicole on the other hand often used the observer position and went in and out of the experience in order to understand as she was experiencing it. Nicole experienced and interpreted her experience through "naming" it and Thelma through feeling it. Although they are different in their orientation and style and were much protected during the session they were able to discuss their feelings honestly and take their insight into the co-therapy relationship.

4.2 Case Presentation and Analysis – session #2 – Nicole and Thelma

4.2.1 Case Presentation

I started the session asking the therapists how they were since the last session. Nicole didn't remember much since a month had past and Thelma remembered from her art-making she became aggressive and said she remained wondering where her aggression came from and what evoked it. I reminded her she had said something about the group. She remembered that she didn't want to talk about the group, that

there was aggression in the group that day that may have been a part of it, but there was something else. I reminded them that when the aggression began they had been talking about payment issues.

Nicole said it might be connected to Polly's dad who was "blackmailing" them (Polly's dad) for more and more discounts and she dealt with that aspect of the group and it was hard for her. Also Polly contained the aggression of the group and when she was not around everyone else became more aggressive. I asked them how the group was conducted. Nicole said it's a private group inside the hospital. The patients pay them and it goes to the hospital, so it's a bit tricky and her bureaucratic role sometimes takes away from her therapist's role. I asked why then if Nicole holds that bureaucratic role Thelma held the aggression. Thelma said it might be because she didn't feel like doing the activity and the issue of time that came up at the beginning of our session disturbed her and said: "Your expectations were different than ours and that triggered something and then talking about stuff, that was too much." I said that last time there had been a misunderstanding and Nicole said it was between her and me and that she gave Thelma wrong information. I guaranteed that today we would be on schedule. There was silence and Nicole said she was very tired last time and she hardly remembered things. I reminded her that last time each one of them worked in a different corner and it was familiar to her. Nicole remembered and Thelma said that it really conveyed the way they worked together. Two disciplines that should be very close and intertwine, but each one does their own media: she does movement and Nicole psychodrama. They cooperate but within the Medias they are separate. I asked how the sessions are held. Nicole said that they are structured. Twenty minutes of checking in with the group, twenty to thirty minutes of movement and then they do psychodrama. At the end of the group they do a game called

Pinocchio, a game of movement and jumping that the kids really like. The kids make sure they do it every session but lately since they are putting on a play there are rehearsing and there was no time and there was a lot of stress. Last week she felt the group was falling apart. One kid left early, another girl that always tried to please didn't want to talk to them, one couldn't come and another said she rehearsed all week and it's not good enough and it's difficult for her. There was a lot of anxiety and difficulty and she had a hard time containing it. She was confused between the director's and the therapist roles saw Thelma as detached, and asked Thelma to tell her later if it's true. Finally Nicole said that after a lot of work with the group they started bringing difficulty and anxiety into the group and lately she has been finding herself afraid of the group splitting and she found it very hard to deal with. Also the group will end with the play in about seven sessions. Two processes were happening at once. Thelma said she had a problem with the plays, in the sense of letting in a therapeutic group something that she felt wasn't related, although it was related and a therapeutic process can be done, but she had a problem with it, because when the purpose is putting a play they turned from therapists to something else and she felt the children felt it and their ability to contain them is lesser. They raise their voices and demeaned them things and they don't know us in this context. She felt confused by it and asked herself if she wanted to change 'the way she sees therapy'? Also her role wasn't defined to her in this situation, because Nicole was very good at her medium as a director, so she said to herself to let Nicole figure out how to do it. She then drifted off from involvement in the group because she felt she wasn't a director and when she looked at the kids she wanted them to enjoy and feel comfortable with what they were doing which sometimes contradicts the plays need.

Nicole said she was also connected to what was comfortable for them, but therapeutically she felt the kids can't be on the floor all the time because it meant that they shouldn't be positioned in a low place, that they should hold their heads high and that was the meaning and the point of the play. This was a group that dealt with issues of taking space, how much space and not about being overweight but lifting their confidence that a fat kid can dance and has a variety of movement. We deal with the strong sides not their weaknesses and that was very significant. Nicole said she was also concerned with these issues and didn't know for sure if its right and maybe they should give it up.

The idea was to deal with issues the kids are dealing with and to distance them so they can observe them. But putting on a show and letting other people into the therapeutic process is also an issue, but the play is also very empowering for the kids.

The social atom

I introduced the therapists to the activity of making a social atom. Nicole was familiar with it from psychodrama and Thelma was not. I asked them to make a list of things they associated with the group. Nicole asked if the social atom was also about distance and intimacy and I told her to bear with me and start with the list. Thelma didn't connect and I told her she could write anything that for her deals with the group. Thelma wrote: movement, objects, a circle, rotate, roles, different mediums, leadership, split, no split, dramas, feelings, thoughts, end, once a week, dialogue, power struggle and a the group voice. Nicole wrote: drama, movement, music, being fat, Nicole and Thelma, the group, the hospital, rotate, Pinocchio, names of five patients, love, security, body, a game and play. I showed them the various

materials and asked to position them in the center and then position the other things around them.



Picture # 7 – Thelma's Social Atom (40X35 cm)

(Cardboard, gouache paints, oil pastels, pompons, pasta, wrapped wire, glue)



Picture # 8 – Thelma's Social Atom (35X60cm)

(Cardboard, gouache paints, rice, beans, glue)

During the art activity Nicole worked with gouache and used large quantities of glue to make sure nothing would fall off. Thelma was very curious about the materials and kept investigating their different uses. She laughed and chuckled as she experimented. I gave them thirty minutes and asked them not to talk. They were very concentrated. Once in a while Nicole looked at Thelma. Thelma glued something and it didn't work and she said: "I see my mistake" and then she liked it and said: "It's nice".

Nicole and Thelma both started from the middle of the piece. Nicole made dough from the rice and glued it and put it in a defined area and did the same thing with beans in another defined area. Thelma tried to glue her pasta unsuccessfully. Nicole made dots around her whole piece and Thelma drew white dots on the purple color. I told them they had another minute and Thelma said: "You said a minute, then a minute, we are very disciplined."

Observing and discussing the Social Atoms (Pictures #7, 8)

I asked the therapists what they saw in the artworks. Thelma said that parts of what she did were conscious and others were not. She started off not really understanding the definition of the social atom and was busy with what to write. She said the pink pompon was Nicole, something more protected, and she was the red one. The blue lines signified movement in the circle. All the rest are feelings, experiences, themes, but she didn't define too much. I asked about the pastas that were close to her and she said that it was unconscious and that each kid got a color with his traits and halos. Some of the kids in the social atom had already left the group, but there was dynamics and movement and they were still talked about. There were a lot of power struggles (she stopped herself), and a lot of lines that intersect.

The power struggles were in the group, in the leadership, drama...and in her fantasy she would add a lot more if it was not for the glue. I asked if she left the purple part open and she said that some things were contained and others can exit. The subject of split came to her mind, between therapists, but she wasn't sure what she did with it.

I said it can be seen in the division of the two therapists and Thelma agreed that there was a split of the medias, the leaders and in the group. It was clear to her that Nicole was more dominant, she said that the split could be only her own experience and the kids may not feel it. I asked about the dots on the purple. Thelma laughed and said it was an ornament and she said she usually doesn't use this color but remembered a piece she did in her studies and was amazed by it and it must connect to something.

Nicole said that the sun portrayed her and Thelma. I noticed she added it in the end. She said that when she started she put herself next to Thelma (the red and green in the center), but it didn't look right. It looked grim so she needed light and made the sun. She said she felt that now they are more observant in the group and don't have to be in the center and that was why she put them up. The arms are the growth of the group; the movement, drama, music and they change from different perspective. There was a lot of life and space. The group took a lot of space in her life because it's her work but it's also part of her identity professionally. She felt it was difficult to isolate things from each other and it might be her defense because she knew the social atom and it stressed her to think what she put close and what further away. She had a hard time with that because it threatened her. It was easier for her to see the group as something whole. I asked about the shape in the left side of the piece and Nicole was surprised that something she didn't want to bring to the session came out. She said she was pregnant and unconsciously she made a baby. Nicole was

nervous from it because she didn't plan on making it. She said it was obvious that it affected the group, but she didn't want it and it wasn't easy for her to see it's there.

Thelma said she was really excited that Nicole saw them together as a sun. Nicole said it didn't start that way, but it didn't feel right. Thelma said that she had the opposite process. In her piece she felt there was a split and it made her not like herself for it. She was happy that although Nicole knew about the social atom she had the experience of making something she didn't know, something completely from the unconscious. She said that what she liked in art works is to discover the unconscious, but in her piece she graded her boundaries, not knowing how much she could expose. Nicole in her view brought the therapist in her and she brought the therapist in a very specific place in a co-relationship and that the other really affects her. I ask Nicole if she changes. She said she doesn't think so and that she is very comfortable in those groups. These groups came out of her. Thelma said it's a kind of labor because it is Nicole's concept. It's her other baby.

I reminded them that last time Thelma was surprised Nicole was so defined. Nicole said that when she knows how much space she can take she can be her self and be swallowing and spreading. Because she didn't have to share there was no problem. I asked Thelma about the issue of communication. She remembered that she looked for a connection. Nicole: "You looked for a connection and I didn't get it." Nicole said that it was significant to her that she didn't understand she wanted a connection. She took it to heart and it was great learning experience for her. I asked how they felt about today's session. Thelma said she was moved that Nicole saw them together as a sun as a whole and that her perception of things might be twisted. Nicole said she wasn't sure. Thelma felt that it was very significant to her in the work today.

Nicole said she felt she was very protective of herself and she knows some of the other medias and their interpretations and it stressed her and didn't let her really be there. She said it's her defenses. She said there are a lot of issues that can be further discussed such as the way Thelma reacted to the sun, which she felt obvious about. She felt both of them had part in this feeling. Our time was up. I thanked them; they thanked me and we parted.

4.2.2 Case Analysis – session #2 – Nicole and Thelma

Thelma remembered her aggression expressed in her art making process in the former session and remained wondering where her aggression came from and what evoked it. The art processes as well as the visual image provide an alternative channel for communication with one self and others; as it allows for unconscious feelings to emerge, remain unspoken till they can be re-opened for personal awareness, individuation and progress. (Manicoma & Boronskab, 2003) According to Manicoma & Boronskab the use of art can address areas with which the referrer might want the therapist to work but where the client cannot engage, perhaps because of denial. This allows for a temporary stage of therapy to operate and may be used as a first step before words are spoken. It seemed that Thelma wanted to explore this issue so I reminded her that the aggression was related to her unwillingness to talk about group issues. The co-team connected the aggression to the aggression that was in their group, monetary issues and to a kid in the group that held a lot of aggression. The aggression that was expressed by the therapists in the arts enabled them to discuss their counter-transference from the group. It also helped them to get in contact with their aggression toward me due to the misunderstanding we had at the beginning of

the first session. It seemed that the aggression was present in all fronts: between the therapists, in the group and in our session. Thelma demonstrated her use of art as a voice to her aggression as well as a sublimate of her aggression when she said that the lines in her work were power struggles that were in the group. She then stopped herself verbally and pointed at her artwork saying those lines were a lot of lines that intersected.

Although these sessions weren't supervision or therapy I was a third party involved. Ogden (1997) spoke of the "analytic third" In couple work; the analytic third has special significance when it is created between therapist and each patient and between therapist and couple. For the couple, the third may reflect the bond that is newly forming between the partners as they allow themselves to become immersed in the work of finding new ways to connect.

Due to the fact the therapists were not in supervision and didn't talk between sessions, this session was a first in creating a potential space. During the session it seemed the couple had difficulty communicating on mutual grounds and I felt as if I was trespassing and ambivalently wanted and unwanted. This reaction seemed to be parallel on the co-team level as was observed in the last session where both therapists felt they had to guard their boundaries as they do in their group.

With the preparation for the play the therapists introduced a third party to the group: the therapists' additional role as directors as well as the audience that will see them at the end of their rehearsals. Both therapists during the sessions felt ambivalent about letting the third person in. As Nicole said she was very protected and Thelma said that she was very affected by the "other". Having two sessions for a couple that didn't talk to each other seemed to introduce a lot of fear yet revealed many potential direction they could continue discussing.

I reminded the therapists they worked separately on the same sheet in the last session and they both agreed it portrayed their co-team work. During the last session Nicole said she can see how this manner of working related to their relationship, but didn't want to discuss it further. By the second session both therapists already internalized and acknowledged that the separateness they viewed was their difference as therapists, in their medias and the fact that within the medias they worked alone. Wheelan (1997) questioned if co therapists who work collaboratively as opposed to separately or competitively have more positive effect on the group and the individual member. Her conclusion was that once the initial needs of the group for directions and safety are met, the group developed more independence and that occurred to a large extent by changing the power relationship between members and leaders. In the co-therapy team a united front, clarity of purposes, a consistent approach, and a shared plan of action on the part of the co-therapists are essential. As Thelma told in the last session, sometimes the members start sharing before the group begins, hence the group has developed independence and there was no harm in having two separate roles, but the therapists were concerned it might be a problem. It seemed that the therapists were concerned about the split they saw in the drawing and its effects: Natalie discussed her split roles of being a bureaucrat and a therapist but it seemed their concern was connected to the therapists' approach to their group, their doctrine and purpose of their group. At the time of the session, the group changed its setting and started rehearsing for their play at the end of the year. With the change the therapist had two roles being therapists of the group as well as directors of the play, and the group seemed to react badly to those changes. Nicole who was the founder of this group as well as other similar groups saw the purpose of the play as therapeutic. Thelma saw it differently and didn't feel comfortable with that double

role. Nicole also expressed her anxiety from these issues and said that she felt there was a lot of stress in the group and she had a fear it might break up. The intense issues that were in the group raised question in her regarding the role of the play and its necessity and she wasn't sure what she felt.

The social atom

After the long discussion that emerged out of last session's piece I gave the participants thirty minutes to create a social atom, a projective non-verbal tool through which it is possible to see the way the participant patterns of communication, relation, needs and feelings.

As in the second session with Yael and Sabrina I will not analyze the process of the art making that enabled to be more familiar with the therapist and will focus on the main theme of this session.

In this session the therapists did not talk during the activity. Both therapists were focused on their art making and experimented with various new materials. In this discussion I analyzed this session through observing the social atom, the information that became apparent from it and the metaphors that rise from the conversation about the art expression. As in the previous analysis I will analyze these sessions from a multi layer perspective.

Descriptions of the Social Atom

Thelma (Picture #7) The pink pompon was Nicole, that is more protected. She is the red pompon. The blue lines signify movement in the circle. All the rest are feelings, experiences, themes, but she didn't define them. The pastas are the group members and each one had a different color hallow around them. There are two

members that have left the group that are in the circle because their energy remains. It's dynamic; the movement is everywhere. There are a lot of lines that intersect and represent power struggles. There is an opening for things that are not contained to exit. Looking at the piece she said it looked split and Nicole is dominating the center. Thelma used an array of materials and techniques in the piece demonstrating the detail of color and material for each member and feeling. Her lines are organic and seem to be in motion. As opposed to the last session she didn't use the whole space and the group seemed to be a shape within a shape, with one side open to the outside and the other closed, similar to the mutual drawing.

Nicole (Picture #8) The sun is both of the therapists, it's on the top because at this stage they don't need to be in the center and can observe from the outside. The arms are a lot of growth, movement, music and drama and from each perspective it looked different. There is a lot of life and space. It was easier for her to see the group as a whole and not as its elements. There is an embryo on the left side she didn't intend to create.

Observing the Social Atom (Picture# 7, 8)

Exploring the split

As the therapists observed the pieces and expressed their interpretations it seemed that both therapists were dealing with the split they expressed earlier in the session and processed it within the creating process trying to put things together or breaking them apart. In Thelma's Social Atom (SA) the split was shown in the two pompons in the group in their difference in color and energy: one was in motion and the other still; one was in physical contact with some of the patients and the other more dominant and closed. Thelma seemed to be blocking something with her light

blue motion line that seemed to be dividing the group in two, similarly as her yellow line in the mutual drawing divided both therapists. She said her process started with the two of them together but it didn't seem right because she experienced a split. Nicole did the opposite. She started with the two therapists separate in the center, at the bottom of the page (green and red) and then she felt it was not right and turned them into a sun. The red and green that was supposed to be the therapists in her initial stages were present in the mutual drawing as a main theme, they surfaced again yet she didn't address them. According to Hardy (2001) the symbolism in the picture can resonate and change in their meaning over time, which enables the co-therapists to express emotions safely, as well as facilitates the confluence of competing thoughts. Thelma said she was very moved by the way Nicole portrayed them together as a sun. Nicole could only deal with the group as a whole and couldn't contain its parts and felt Thelma's view of their relationship may have been more accurate. In essence the therapists were able to see contradicting feelings in the two artworks and have a better understand of their complex situation.

Separation / Individuation

When Thelma saw Nicole had drawn both of them as a sun, a very powerful symbol of strength, intuition, power of senses and faith, warmth and glory, she was very moved. For her this unity signified her own difficulty with seeing herself as part of a whole. It touched on her struggle to individuate and separate within a co situation. She observed her piece saying that the split was her defense mechanism guarding her from being swallowed. Nicole felt herself in those groups. Yet I observed a gap between what she said and what was seen in the art. In the mutual drawing her use of space was very small and in the Social atom she used all the space.

She said that in mutual drawing she restricted herself and in the Social Atom she used the entire mat because she usually takes a lot of room, can be swallowing and spreading. Nicole was aware that the use of the individual space enabled her to know how much space she can use and capture; yet she also observed that in the mutual setting she was constrained. According to Segalla, (2004) recognition and acceptance of the “myth of the isolated mind” (Stolorow and Atwood, 1992) have brought an appreciation of the impossibility of analysis without an ongoing awareness of this mutual influence and regulation system. Both Social Atoms allow a glimpse at those “non isolated minds” accept their mutual influence and be in visual, emotional contact with the co-team entity.

Difference “Me” and “Not Me”

Nicole said that the group takes a lot of space in her life that it's her work but its also part of her identity professionally. The issue of the group derives from her own background. Nicole founded this group and was very comfortable with herself in it. In her SA unexpectedly, despite her defenses, she found an embryo and told us she is expecting a baby. In *A Dictionary of Symbols* the child yields to “The promise and potential within the individual, all the possibilities for change, development and transformation within the psyche. However, this source of creativity and wonder is still at a childish – and foolish – phase of development. The child who is dependent and vulnerable, may harbor dark, ugly secrets, such as primitive cravings or archaic, destructive impulses, all of which need to be slowly transformed in the light of consciousness.” Thelma was very happy that although Nicole was very conscious of her art making unconscious issues emerged. The dilemma Nicole and Thelma held about their dual roles in the group was one interpretation of Nicole's baby that Nicole

affirmed. Nicole came up with the idea for the group and now she was at a point where she was ambivalent about its necessity and felt uncomfortable with the implication it had on the group. The embryo took a third of the space of the group and visually demonstrated to Nicole its impact in her life, as well as in the group's life. In the session she found the separateness of the elements hard to contain and stressed that she was at a point where she could only look at the whole picture. She admitted to her resistance at the moment and her difficulty to face her unconscious. Thelma on the other hand expressed in the many lines the power struggles in the group and in the leadership. It seemed that the combination of both SA enabled the therapists to express their different perceptions of the group, which can enable them to compose a better picture of the different forces working in the group as well as obtain two different perspectives that may or may not compliment each other.

Parallel to the therapist's condition the group that seemed to be in an independent (depressive) stage in the last session seemed to have shifted a phase. According to Biran (1997) the group shifted into the schizo-paranoid phase. Due to the change of the therapists' roles they can no longer become self-objects for the group. Since the setting changed and the therapists cannot contain the members as they did "problems" can't be ventilated properly. As Nicole said the kids were devaluating the group and were not able to use it effectively. The members left early; did not want to talk and missed sessions.

As can be seen in Thelma's S.A. the purple shape is blocked. The same motif exists in the mutual drawing as stop signs. Biran (1997) writes that in order to become an object for the group the leaders must process and be well aware of their internal world: What issues did they encourage? What issues are blocked? Only by their consistent strive to be an object will the leaders be able to prevent their own

anxieties and needs from infiltrating the group. Due to the rehearsals the kids were more exposed to difference, conflicts, complex or vague situations and their understanding of the leaders was distorted and unstable. In both therapists artworks their differences as well as their ambivalence about their roles in the group surfaced. Their negative transference to the group was mentioned briefly by Thelma concerning how the kids might see her role in the group, yet as a whole it was contained in the artwork and discussed in the art. At this stage the therapists had “hands on,” hence, physical contact with the issue as they processed it through the creative process.

Glue

Gelkin & Orbach (1997) write that using glue is sticking to a choice. In this session, as opposed to Yael and Sabrina’s session, I only told the therapists that there was glue. The therapists assumed I would need to take the artworks and used the glue, but I didn’t intervene. It seemed that the therapists approach to glue revealed a significant difference between them. Thelma said that if it weren’t for the glue she would add more ‘power struggles’ to her artwork. She regarded the glue as something restricting and resented it for that reason. Nicole wanted a lot of glue and was very concerned the beans and rice will fall off the artwork and she kept pouring more and more glue. Nicole used the glue as a basic element and seemed to be enjoying the stability it supplied.

4.3 Summary

Looking at the visual art and remembering the art process enabled the therapists to return to issues they discussed earlier and explore them from a distance.

Nicole said it was very significant for her to discover she didn't understand Thelma wanted to connect to her, took it to heart that many times she wasn't aware of others people's ways of communication and what happened in the last session was great learning for her. Thelma despite her fear from bringing herself to the session explored her aggression and splits. But she also revealed many unconscious themes in the art that were in the "back burner": her blocked areas, the color purple that reminded her of her days in therapy school and the glue that stopped her from creating what she saw in her fantasy as more and more power struggles.

Nicole felt there were a lot of issues that could have been further discussed such as Thelma's amazement from the sun she made because she became part of a whole which made her think why it wasn't obvious to her and what was she doing to create that feeling.

Both therapists know they are different and looking at the art showed them how these differences are expressed.

4.3 Summary - Nicole and Thelma (Pictures #6-8)

Nicole and Thelma Social Atom conveyed the different ways the therapists saw themselves as well as the group. According to Dugo and Beck's developmental axis the therapist seemed to be in the second phase of co-therapist development, expressing their splits (between the artworks and within the artworks), boundaries and difference in process, materials and artworks. Due to the change of roles, issues concerning their identity, dominance, professional credo and control were not clear between them and it seemed to be affecting their relationship as well as the group.

Both therapists' defenses and resistance were very apparent in both sessions and it seemed that the issue of the third person present and the alliance that wasn't

intact had great influence on those sessions. Yet although there was a high level of resistance among the therapists significant issues surfaced. Dali (1997) suggests that in a therapeutic situation, the use of art materials facilitates the breakdown of defenses and the emergence of feelings and result in an art piece. The therapist unconsciously trespassed, drew over, split, integrated (sun), blocked and opened (ventilation in Thelma's piece), held their patients (Thelma physically touches some of the patients in her piece), revealed their fantasies (Thelma's song about a couple in love), their ambivalence (one sun in the sky as opposed to two therapists in the middle), their dynamics (split or whole), their group dynamics (Thelma's lines as power conflicts). In those two sessions many issues surfaced and all of them were "seen" unconsciously by the therapists, but not all of them were brought to consciousness.

Parallel processes were visualized in the art. Nicole protected herself and didn't want personal issues to surface in her artwork/creation, but they did in a very powerful sign of creation - a baby. Similarly, in the group the kids were not cooperating with the new "baby", the setting and the director role and they didn't like what came out of them as actors. The kids as the therapists had a hard time containing what they saw of themselves.

Nicole felt many issues emerged through working in the art and that this medium suited both of them because it connected Thelma's preverbal modality with her verbal modality. Thelma in working in the art enjoyed the fact that the product didn't disappear and Nicole noted that from observing the product one can think further about how things develop and repeat themselves.

5.1 Discussion

In this study I've observed how art enabled co-therapists to deepen their processing and sharing processes. Art processing with co-therapists is a fascinating and complex challenge; however the addition of art expressions greatly improves the chances for a positive outcome. The multiplicity of issues that rise and affect the co-relationship and the group were vast and dealt with issues such as difference, personal style, perceptions of group, beliefs, splits, conflicts, transference and counter-transference and boundaries which became visualized, observed from different perspectives and verbalized. In this discussion I will address some of the major benefits and restraints of co-therapists' processing and sharing in the arts that became apparent in this study.

Art as a means to explore self, 'other' and the co-unit worlds

"Seeing" each other's works of art enabled the therapists to see their co-partner's world and discover new things about themselves and each other. Thelma was very moved from Nicole's perception of both of them as a sun, realizing Nicole saw them as a unit as opposed to her split perception.

Yael saw Sabrina as a line and used the line as a scapegoat that had characteristics she felt were not part of her. At the second session she realized that the line and the circle are complementary which enabled her to see how co-worlds and unconsciously her own world is composed of circles and lines that can unite and complement each other.

Co therapists can benefit from having a wider view over the group as well as themselves. In the art they can view and explore each other's artworks and help each

other discuss unconscious symbols and images. In picture #4 Sabrina saw in her Social Atom body parts, yet Yael saw them as patients. Yael shared her perceptions with Sabrina which enabled her to see her own world from a different perspective and made her realize how she saw the patients as both extensions of herself as well as empty people and in that manner helped her use the togetherness to her benefit.

By creating separate and mutual worlds of the group and their relationship, the therapists began to observe their togetherness as an entity in itself and began a more constructive dialogue. Inter-subjective and relational approaches view the dyad as interactive systems within which self and mutual regulation must be integrated. (Segalla, 2004) In co-relationship as in couple therapy a very important aspect is the struggle to maintain one's own sense of self as well as one's sense of togetherness. When each therapist worked on her own piece (without talking) she was able to express her self silently without her co intervening and in doing so she regained her sense of self. Yael expressed it in various themes such as 'the battery' (Picture #5). Sabrina exposed her need for a base. Nicole was able to give room a third of the group's space (Picture #8) to her 'baby' she unconsciously created in her social atom. In those cases the issues that surfaced were both personal and professional issues, but through the individual work they could be further explored on the professional level. In addition, observing Nicole's depiction of the co-relationship as a sun and Thelma's description of it as split with a lot of struggles allow them a unique opportunity to begin integrating between the parts (the two therapists' perceptions) that compose the mutual entity. (Pictures #7,8)

Time as a factor in processing and supervision

The major difference between couple therapy and co-relationship processing is that in the co-relationship there are professional considerations, the group and its members', well being. Many art therapists claim that there is no time for art making in processing and sharing as well as in supervision, because there isn't enough time to discuss the complexities that arise in the group, not to mention their relationship. My experience in this study suggests the opposite, as the creative process hastens the connection between the therapists and their primal feelings. In Sabrina and Yael's first session they worked in the arts for almost an hour and created two pieces of art and Nicole's and Thelma's worked for twenty-five minutes and created one. Yet, both sessions through the art quickly revealed the therapists' dynamics and exposed detailed information about their temperament, decision making, ability to contain frustration, improvisation skills, roles, style and surfaced the center issues between them. The therapists noticed some of the themes and others were noted from the observing position. Judging art processing and art supervision on the verbal level might be misleading, because it only takes notice of the processing part that is done verbally disregarding the importance of the centering and crystallizing processes each therapist explores on his own, on a pre-verbal level in order to reach a more purified dialogue.

Researchers that are pro co-therapy mention its advantages (Yalom, 1995, Dick, Lesser, Whiteside, 1980, Dudley 2001) in complementing and supporting each other and in exploring a broader range of transference reactions because patients will differ in their reactions to each of the co-therapists as to the co-therapists' relationship. Co-therapists may aid each other in the identification and working

through of counter transference reaction toward various patients. The innate pre-verbal quality of the art is a significant tool that enables therapists to expose unconscious transference and counter-transference issues that the verbal possibilities don't extend to the fullest. By touching, sensing, coloring, breaking the therapists can get in touch with their aggression, their feelings of emptiness, need of grounding as Yael and Sabrina explored. They can experience their lack of defined roles and their difficulty to contain the group as Nicole and Thelma did in the Social Atom (Picture #7,8). The use of material in those sessions allowed the therapists to create something out of nothing. The unseen/the unconscious becomes materialized.

Also, working with the art expressed the therapist's negative transference onto the group. In Sabrina's Social Atom (Picture# 4) the patients were mostly around her outside the groups setting, as in Picture # 4 in the circle, they didn't discuss it further but as they said in the intake it was a costume for the patients to arrive late and sometimes stay on the lawn. Using the Social Atom (SA) they could see what this custom, as well as what their own split in leadership did to their group. In Thelma's SA (Picture #7) the artwork expressed the co-therapists' inability to 'see' and 'touch' their group members. Nicole in her artwork seemed closed as she was surrounded by a blue wire, and Thelma with her wire seemed to reach only a few of the members. The two images of the therapists: one being closed and the other in constant movement trying to reach the patient expressed their situation in the group having difficulties with five kids out of the seven. Yalom (1995) claims that when a group isn't progressing satisfactorily consultants or supervisors can often offer the greatest service by directing their attention to the relationship between the co therapists. In those sessions this claim was found to be true as the problems the therapists faced in their group were paralleled to their co-difficulties, yet in art sessions the art by default

supplied information about the co-relationship consciously and unconsciously. During the session between Yael and Sabrina they specifically asked not to discuss their co-relationship issues yet they emerged in the art and from the art they were able to distance their feelings and confront them. The art supervisor through working in the art will be able to focus on the co-therapy relationship theme when and if it they seemed dominant in the art, because most activities that the therapists create in the art on their group will reveal their attitudes and positions towards each other when and if they are relevant or problematic.

Words and Art making

During these sessions the therapists in the first session talked while art making and in the second session they didn't. Shaverien (1992) makes the distinction between the diagrammatic picture and the embodied image. It seemed to me that while the therapists were talking they were describing their world as in the diagrammatic picture. Meanwhile their art work was not yet the embodied image Shaverien describes as being revealed only after trust and attachment are involved, but the art work as opposed to the words exhibited conflicting and complex feelings that were not revealed in words and were contained as they are within the frame of the picture. Nicole had a personal main theme in the mutual drawing she drew with red and green in the SA. These colors became the two therapists she made before she united them into the sun. Nicole didn't touch on this subject, but she did say she wasn't able to contain the group as parts, but the duality of parts as opposed to whole was in her drawing. Thelma used purple in both sessions. In the second session she was surprised she used it and remembered it was a color she used in a piece she made in therapy school. This subject wasn't explored but seemed to deal with her roots as a

therapist. The major difference observing the therapists talk and work was that while they talked they described issues, and in creating the innate tendency of the art brought their emotions quickly to the surface and expressed how these issues made them feel. Through the process of creating, feeling become intensified as the art and the creator become one until they separated in the observing stage.

During these sessions talking and art making exposed gaps between verbal and artmaking behaviors. Some of them were noticed by the therapists: In the mutual drawing (Picutre #1) Sabrina left space and asked to leave it empty. Yael drew on it and she said it was okay. Nicole in the mutual drawing (Picture# 6) said it was nice for Thelma to penetrate her drawing area, but backed away, and in the discussion realized she wrote her name on the page stating it's her territory. Thelma said she didn't want to use words and in their mutual drawing realized she does because working with Nicole she must. Thelma noticed she used words, Nicole realized she wasn't making Thelma feel a part of the sun. During the second sessions the therapists didn't talk and it seemed that in the discussion they were more focused and arrived to the discussion less protected willing to explore their unknown realms.

I would like to incorporate Kramer's and Naumburg's rival approaches to art therapy into the discussion about processing in the art for co-therapists, as both the experience of art making and the psychological analysis of the process and the final artwork are significant for development. In creative therapy it is customary to "Trust the process" (N. Roger, 1993) and let the process lead, but in supervision the patient's well being is of primary importance and therefore I fear that keeping issues that have a great effect on the group and the relationship contained in the art unspoken, may leave them unconscious and won't advance the therapists' understanding of both the group and their process. Without the verbalization process, the pace of 'naming' and

recognizing issues would be stagnant, especially when there are negative therapeutic processes involved.

I believe these two theories meet in the manner the therapists processed symbols and images verbally. In these sessions it seemed that a new verbal-art language was created and the sun, the circle, the battery and the line were only a few of its components. This language used powerful symbols and was only understood by those present in the sessions. It was much easier for Sabrina to ask Yael: What is a line for her? Rather than ask her: What do you think of me? Creating the art language gave rise to intimacy and a sense of sorority and for that reason seemed more significant and memorable than regular discourse. A supervisor could use this delicate yet powerful language to also bring out issues that were contained in the art and are still unconscious for the benefit of the therapist's patients. As with Sabrina; discussing the mat enabled the couple to start exploring the Arab and Jewish differences and feelings it emerged.

Creativity as a tool to override resistance

In this study I chose therapists from other disciplines rather than art therapists like my self; thinking I could isolate resistance and therapists' control over the artistic therapeutic tool. I feel my need to control the setting led me to this assumption and was wrong, as both art therapists as other therapists can benefit from this creative and reflective tool. In this study I wasn't able to isolate therapists' defenses and working with them I realized that the creative process overrides them and regardless allowed unconscious issues to emerge. Nicole said she couldn't work freely because she knew the implication of the social atom. Yet working in the art she played and experiments with colors and textures. The process of playing with materials and

creating something new enabled her to let some of her defenses down. Through experimenting with rice, beans, colors and glue Nicole distanced her self from what was troubling her and unconsciously created it as an embryo. Thelma resisted the mutual drawing and talking about the co-relationship. She tried to connect with Nicole and when she didn't succeed she blocked a part of the page with no entry signs; and then wrote a line out of a love song describing two moons traveling through the galaxy, being appreciated by all the other moons: expressing her unconscious fantasy of co-relationship and of the research to love them. She wrote the verse, moved, sang it and continued working on the drawing. Each layer of art making enhanced her understanding of her inner processes as well as her experience. We didn't discuss her defenses or her fantasy, but in the second session she acknowledged that she felt she was only her self when she was alone and she always changes with others. Yael expressed her fear of 'seeing' and 'showing' her art work. She was shocked by the image of the supervisor as someone that watches them (binoculars), so she changed it into a battery. Changing the image enabled Yael to sublimate and refine her feeling towards it and externalizing it visually helped her discuss her fear. Yael was afraid of what she will 'see' and tried to hide it, but the flexibility of the art enabled her to transform her unconscious into an image she could handle. In the SA activity Sabrina expressed her defenses verbally and artistically, yet through the whole artistic activity she didn't detach from the material table, was very quiet and seemed stuck at a very primal developmental stage. When she looked at her piece she couldn't see anything significant in it, except for the mat. By means of free association, she began to understand more clearly the original objectification of her conflict. The art being a transferal object enabled to observe from the art therapists/supervisor position Sabrina's resistance and at the same time her position at

the contact stage, which expressed her dependency on the 'nurturing mother' - material table which related to her ungrounded sense of security, containment and strength. The art as a projection object and the art process leading to introspection enabled her to take priority over her defense.

Art, Art supervision and Co-Developmental Stages

From this study I have come to realize that the innate possibilities of art in aiding to deepen the processing and sharing process among co-therapists might be a constraint to the developmental stage that the therapists are in. In this study, both couples seemed to be in the second stage of their relationship, although they have worked together for two years. Sabrina and Yael couldn't reach a communication level to settle their differences and envy and eventually separated. As Yalom (1995) stresses that if the two therapists are different in style, temperaments, are uncomfortable with each other or are closed and competitive there is little likelihood they as a team as well as their group can develop into an effective work co-team and group. Nicole and Thelma were at the same stage as Yael and Sabrina and had major differences in their vision of the group. Dugo and Back (1997) call this stage the forming of an identity where competitive feelings, irritations, anxiety, and difference in personal concepts arise, but Nicole and Thelma were committed to their relationship and were striving toward clarifying their differences and reaching a 'sun', where they could learn from each other, as they did when they began realizing that their 'sun' and the split constructed a more accurate picture of the group. In the third developmental stage of building a team as Lessler & Whiteside (1980), describe learning about each other and learning from each other becomes a possibility.

In Yael and Sabrina's first session, the discussion needed intervention. As an observer I directed them to observe their strengths, but realized that at the stage of their relationship they were not able to do it on their own. In both cases, because of the therapists' specific stage of development as a co-team I feel that processing and sharing with the art can be used when matching the artistic activity with the developmental stage of the co-therapists and their needs. The mutual drawing I introduced to the therapists intuitively adapted to their developmental stage of exploration of togetherness, communication and trust building. It seems that knowing the stage the co-therapy team is in enables the art therapists to fit the activity appropriately. An example of "A collage of ten things I like" could fit the therapist's stage by using a non-threatening tool of the collage to define each co as an individual as well as to expose what makes them different. Doing this together can reinforce trust building issues as well as further explore the definition of the self with an 'other'. Because of the delicate stage the therapists were in it seemed that their art works should be supplementary to supervision.

Can art replace the supervisor?

It was my hope that sharing and procession in the art will hand that supervisor role to the art. In practice it seems more intricate. It seemed that during the research the art was able to: sublimate aggression and exchange information, enable the therapists to reenact their dynamics into the here and now, observe each other worlds and see their development through viewing their previous artworks and change their perceptions towards them. As Yael and Sabrina saw the circle and the line from the former session (Picture #1) they realized how their point of view changed from seeing their difference as negative to appreciating how they could complement each other.

Although in those sessions I found the reactions to my presence ambivalent, represented as a negative and positive battery with Yael and a trespasser with Nicole and Thelma, it seemed that being a third person between the co-therapists helped the art to mediate. It is evident that the therapist making art of psychotherapy and creative therapy sessions can make a valuable contribution to clinical supervision of verbal psychotherapists as well as the creative artist. (Kielo 1991, Beres and Arlow 1974) Yet in co-therapy it seems more complex. In this study the therapists cooperated and very quickly understood the language of art. But processing and sharing in art as self-supervision for co-therapists, at this stage of their relationship, lacked the potential space between them and raised the importance of the art therapist in the art therapy process. In many ways it seemed that without my presence the art would remain in the preverbal level and would remain art making without deeper understanding. For that reason it seemed that much of the therapeutic work was due to the fact that as an art therapist I supplied the participants with the creative environment that provided them with a safe ground to take emotional risks and through the use of the creative force remind them of their own abundance along with their frustration and needs. It seemed that the potential space of the art as well as the creative uses that I introduced to the co-therapists were in fact those which allowed them to actualize the art therapy/supervisory full potential. Without the art supervisor providing the lens with which the co-therapists can “see” their own view point as well as the other’s, the session can be stagnant.

Franklin (1999) views the art as a witness. He notes that in art therapy, the art and the art therapist both act as a mirror. Through witnessing, or non-judgmentally "being with" another person, one senses how the external witness, in the form of a carefully chosen "other," mirrors the notion of the inner witness. Hence the art

therapist witnesses the art process and product for the patient until he can do it on his own. As Riley (2003) writes the art supervision helps the therapists/ trainee work toward their independence and autonomy and assigning an art project to a supervisee reinforces the idea that learning through art making can be helpful to self understanding and self reflection, which the supervisee will eventually need to do for himself.

This study encompassed two sessions and maybe would have developed in time into a co-processing and sharing with the art without me, just as Thelma and Nicole's group began to operate before they arrived.

The dangers of splitting art processing from supervision

After Yael and Sabrina's first session their supervisor requested me to tell him what happened in the session. I couldn't answer because I had sworn to secrecy, but realized that my research that surfaced many difficulties relating to the supervision might have created a split in supervision. Holloway and Johnston (1985) warn about not collaborating and incorporating elements of supervision into one unit. Therefore when processing and sharing in the arts the therapists should then take the art works and the issues that surfaced into consideration so that the art processing wouldn't create a split from the supervision.

5.2 Research limitations & Recommendations

Observing co-therapists sharing and processing in the art was captivating, although it had a few limitations: The research covered a limited amount of sessions and therefore there was not time to form an alliance and trust with the teams.

Although the original research included five sessions I limited it into two because intense feeling surfaced and since the sessions were neither supervision nor therapy it became confusing for all involved. Thelma expressed it in the second session saying she didn't know how much of her to bring. The recognition that processing and sharing in the art was a very powerful tool but at the stage of both teams needed supervision support led me to limit the number of session. But this understanding made me wonder if there was an importance to my presence as an inexperienced observer that might enable the therapists to recognize their own resources. And at the same time, how would a supervisor's presence affect them?

For the clarity of this research I would like explain my original interest in this subject that initially began with a difficult co-relationship that has reminded me of my own past with co-model. When I was eight years old I saw the process of my parents divorcing. In that year I started my own self art-therapy sessions and continue to find it useful. Yet the notion it could have helped my parents to process their relationship and help me and my co-therapist process our own issues brought me to research co-therapy processing in the art. Researchers that support co-therapy claim that one of their advantages is providing a co-existence model for their patients. My hope in this research with therapists was that co-therapists could handle their relationship on their own, but this wrong preconception probably derived from my own hope that therapists because of their years of introspection will not be subjected to similar unconscious behaviors and assumptions as their patients. This study enabled me to observe my own preconception and acknowledge the abundance of possibilities in the art, as well as understanding acknowledging difference and conflict is part of the process of creating a good co-therapy team. This research also made me realize that

as therapists we must search for clarity, yet remain humble of our understanding of our self as well as our patient.

In this research the benefits of art in processing and sharing of co-therapists was far more substantial than I had expected, but further research should be conducted in studying the uses of art as processing as a constant between co-therapists in order to fully understand these forms of processing implication. When referring to the art processing and sharing of co-therapists I must note that it isn't a replacement for art supervision, but an important addition.

The implications of this study suggest the possibilities of further work in other, similar, areas, such as the use of art in self supervision and in family and relationships therapy.

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