

Co-leader Perception Dimensions

Please place yourself and your co-leader on the following dimensions based on how you believe each of you will behave in the group with respect to the specific item under consideration. The dimensions are rated on a continuum where the descriptive adjective on the left can be as low as a 1 and the description on the right can be as high as a 7. The words in the descriptors are not necessarily exact opposite of one another, in fact some don't have partners listed. The dimensions are best understood as being impressions of one another and not absolutes.

Dimension	Self	Partner
Activity Level Low 1 7 Activity Level High	_____	_____
Accommodates/Follows 1 7 Takes Charge	_____	_____
Challenging 1 (low)..... 7 (high)	_____	_____
Explorative 1 (low) 7 (high)	_____	_____
Affectively Oriented 1 (low)..... 7 (high)	_____	_____
Cognitively Oriented 1 (low)..... 7 (high)	_____	_____
Group Directed 1.....7 Leader Directed	_____	_____
Critical 1 7 Nurturing	_____	_____
Spontaneous 1 7 Cautious	_____	_____
Conflict Avoidant 1..... 7 Conflict Tolerant	_____	_____
Traditional 1 7 Innovative	_____	_____
Beginner 1 7 Experienced	_____	_____

Observations:

Issues to Be Addressed in the Informal Development of a Co-Therapy Relationship

Dyadic Relationship Issues

- (1) The attraction and appeal experienced by the co-leaders in relation to each other helps to bond them. When obstacles emerge or miscommunications occur, the basic desire for the relationship may provide the motivation necessary to work through the problems. As basic as this concept may be, many therapists have a great deal of difficulty talking about this issue.
- (2) The gains to be achieved personally and professionally from the relationship and from conducting the group together may be on the level of hopes and aspirations. Whether it is the wish for closeness, support, or love or whether it is the goal of increased knowledge, professional advancement, or personal-professional development, it is crucial that these needs are clarified and that the co-therapy pair is able to articulate what they want from each other.
- (3) The ease of communication and degree of defensiveness in the relationship needs to be appreciated. As the complexity of the group emerges and stresses occur in the group and in the pairing, it is important to be able to share openly with and to listen openly to each other. They must be able to understand each other accurately.
- (4) The negotiation of the partnership contract and the commitment to regularly examine the relationship and the quality of the collaboration are the basic necessities of maintaining a healthy co-therapy relationship. E.g. -how will supervision be handled; -how much time will be spent processing their relationship; -how are differences to be resolved.

Co-Therapist-Group Issues

- (5) It is critical that the theoretical orientations and the methods of actual implementation of their theories are areas of compatibility for co-therapists. If they do not share the same orientation, then they must be flexible enough to work at integrating their approaches.
- (6) Group members will bond in their own way with each therapist. If members have a pre-existing relationship with one leader that therapist might feel protective of that relationship. It is important for the therapists to be clear with each other and with group members about the range of possible benefits from work with each therapist. Being clear and explicit helps avoid competitiveness and narcissistic injury.
- (7) The stresses due to the evolution of the co-therapy relationship in juxtaposition to the evolution of the particular group being led, differences in the roles where co-therapists work, and events in their personal lives are among the many stresses co-therapists face. How they respond to these stresses defines the degree of supportiveness and understanding versus confusion and isolation that develop in the relationship.

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