GESTALT THERAPY
THEORY AND METHODOLOGY

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I-INTRODUCTION

After two years of Gestalt Therapy Experiential Learning Program, this paper summarizes the theory and methodology of Gestalt Therapy, together with my own insights on how to make sense of Gestalt Therapy theory and methodology in our practice as Gestalt therapists and in our own daily lives, quoting Lewin here, our “lifespaces”.

History of Gestalt Therapy before and after the founders, Fritz Perls, Laura Perls and Paul Goodman is important to make sense of the basic principles of Gestalt Therapy, which later will be examined in more detail at Theory and Methodology sections of the paper. The inclusion of topics under Theory or Methodology section merely depends on the logic of what we do (theory) and how we do (methodology) as practitioners of Gestalt therapy that is mainly an experiential therapy, meaning, the theory and the methodology issues are highly interrelated and intertwined.

II- HISTORY

Following Gordon Wheeler and Lena Axelsson's insights at their book "Gestalt Therapy" (2015), history of Gestalt Therapy will be covered under the subheadings of First Gestalt Generation; Kurt Lewin and Field Theory; Paul Goodman and Fritz Perls; and Gestalt Therapy Model After Goodman and Perls.

II.A – First Gestalt Generation

In early years of the 20th century, the first Gestalt psychologists, a new group of young psychologists in Berlin, explored the larger organizing principles and dynamics of perception and cognition. The important difference between reaction and response in the interaction of the organism with the environment was their major concern. The stimulus-response (S-R) concept of behaviorists actually fall into the reaction (automated response) part of that difference and needed to be challenged with the understanding of a more dynamic, complex interaction within the field that forms purposive, choiceful responses of the organism.

The main findings of Gestalt psychologists showed that *perception is active, not passive* and there is *no perception without interpretation.* Wheeler (2015) explains this finding as: "The stimulus we see, hear, or otherwise take account of is not the infinity of energy impulses that bombard us but some *organized synthesis or reduction of all that into the forms or gestalts* our brain and minds are adapted to *register and respond to."* Two parts of this explanation can be identified. First, our perception is in whole forms or gestalts and not in individual stimuli that is on our attention field. We don't perceive all we see, hear, touch or smell, we are selective in doing so and we form patterns and wholes that are relevant for us (the figures in a sense). The second part is we do that selection in perception in order to adapt to our environment so we register or respond to the stimuli in our habitual and creative way. Thus our brains are detecting patterns and at the same time, if necessary, creating patterns. Here comes the meaning of the classic gestalt psychology phrase of:

"The whole is often more significant than the parts that go into it"

Accepting perception as something operating not as observing reality passively and objectively, but actively and subjectively (with interpretation) makes this mental function of ours, context dependent and unstable. Thus the gestalt psychologists asked the question about "*what is it that determines what we do and do not pay attention to* in our over-busy, stimulus-overloaded perceptual environments?" This is where Kurt Lewin's Field Theory work came in relevant to researchers.

II.B – Kurt Lewin and Field Theory

The Gestalt psychologist Kurt Lewin (1890–1947), used these basic Gestalt principles that picture an *active, selective subject, co-constructing, interpreting, and making meaning in the act of perception***,** and applied them in real life situations. Instead of working with human subjects in a static, values-free lab situation, he made his research with them *in more lifelike situations with more real stakes and real consequences of their actions***.**

For the whole gestalts being synthesized in the minds of the various observers in real life situations, there are environmental physical contributions, but there are also subjective side of that pattern construction. The environmental contribution is mostly the physical

characteristics of the objects and images and patterns in the scene—contrast, boundary, brightness, contiguity, and so forth (the Gestalt perceptual laws). The subjective side of the construction, on the other hand is defined as *"the need or concern"* of the perceiver (the individual) that is uppermost in his/her mind at the time. The need of the person carries the most weight in selecting and organizing the perceptions of that person. Here comes the most important phrase of the Field Theory:

"The need organizes the field"

Lewin, called this process of selecting, resolving, interpreting, and integrating these most relevant features into a coherent, usable whole, **the mapping.** The relevant field we are mapping, he termed, **the lifespace**. In lifespace, everything is psychologically relevant to our own needs. We move actively in our lifespace, to resolve a workable map, in relation to those needs, our awareness of our own inner states, concerns, and our current and larger aims. Wheeler (2015) also believes that, Lewin was far ahead of his time to treat *values* as part of the felt needs, aims, and desires

Thus when we say need organizes the field, we mean "The world one knows—the world one is trying to cope with and thrive in as best as possible—is the world one constructs in relation to the most urgent needs of the moment as they are felt and understood (again, including one's own needs for commitments and consistency of values, however they are felt and understood)" (Wheeler, 2015).

II.C – Paul Goodman and Fritz Perls

In the postwar years of the mid-20th century, there was need for greater faith in the independent judgment and ethical core of the autonomous individual. Gestalt Therapy was founded these days by psychoanalyst Fritz Perls and social theorist and cultural critic Paul Goodman as a new theory and method for psychotherapy based on Gestalt-derived ideas, Based on the first work: *Ego Hunger and Aggression: A Critique of Freud's Theory and Method* (1947), coauthored with Laura Perls but published under Fritz Perls's name alone (Wysong & Rosenfeld, 1982), the holy book of Gestalt Therapy was released in 1951, by Frederick Perls, Ralph Hefferline and Paul Goodman (PHG) under the title, *Gestalt Therapy: Excitement and Growth in the Human Personality*,

According to PHG, we approach situations with some need (or a number of needs), some in conscious awareness and some without full awareness of our experience and needs. We then understand the situation and take actions in relation to those perceptions and subjective needs. This conceptualization of taking actions in relation to needs makes the first template for the formulation of the contact cycle.

Responses and behaviors are ideally partly patterned and habitual and partly new and creatively responsive to the situation (in relation to the individual's goals and needs at the time). *Too much patterning and repetition* in responding results in a rigid or unspontaneous gestalt formation (fixed gestalts), and because of this rigidity, the response (or let's say the reactions) are always the same no matter how much the situation varies. On the other pole, *too much spontaneity* (too little basic patterning or context) in responding means a chaotic experience and a chaotic behavior. Thus, the true creativity lies only in the *blending and integration of the two poles*: while conservation of the past experience, person behaves spontaneously and forms a new response to the unique situation.

The need based experience and the resulting behavior defines the *contact* which is the upmost core concept of Gestalt Therapy. The contact of the organism and the environment (or the other) can be *creatively free* or *neurotically unfree. The therapy* is then *the analysis of contact in this sense.* But by *analysis*, Goodman and Perls pictured something quite different from classical Freudian or psychodynamically informed models. According to Wheeler (2005), "Their analysis was more *dialogic and relational*, more *action based and experimental*, and more *concerned with the client's constructive process* of interpreting, valuing, goal setting, and meaning making.

Perls, Hefferline and Goodman, in their founding book, shared their views on the roles of the client and the therapist, the therapeutic relationship, with focus on emotional experiences and embodiment. They have also written on awareness, consciousness, and the unconscious; present-centered work (here and now) and the role of history; resistance and the defenses in terms of contact interruptions; action and experimentation as therapeutic tools, the goals of therapy and the ideal of health. These topics will be covered under Theory and Methodology sections.

II.D – Gestalt Therapy Model After Goodman and Perls

Goodman's and Perls's **associates and students continued evolving the model** in areas left open or undefined by the founders. They also need to deal with new issues and applications that arose in response to new research, new social challenges, new insights and opportunities in psychotherapy as a whole and psychology as a wider field.

Fritz Perls and Laura Perls founded the **New York School of Gestalt Therapy,** where after Perls's death, Laura Perls focused on *embodiment*, movement and on the development of embodied self-supports (e.g., breathing, "grounding" in the sense of stance). Her colleague Isadore From's focus was more on the *typology of the resistances*.

The second important school was the **Gestalt Institute of Cleveland** which has developed the *contact cycle model* in its full details. It was a simple model that lends itself easily to application at different levels of system—that is, individuals, couples and families, groups and organizations, and even cross-cultural study. However, in its common and superficial use, according to Wheeler (2015): "by extracting the contact process from its context of a meaningful, actively relational social and experiential field, the cycle can seem to imply that contact is just a matter of an individual's internal impulse in isolation (e.g., hunger, pain or pleasure, sexual drive— even though Gestalt insists that even these seemingly biological needs and impulses are always shaped and conditioned with social meanings)."

Thus, the next generations of Gestalt Therapists trained from these founding schools have focused more on the basic relational process model of Gestalt therapy derived from Lewin's work and extended Gestalt psychotherapy into a relational field model, which today we learn as the contemporary gestalt practice.

III-THEORY

Following insights at the Ansel L. Woldt and Sarah M. Toman edited book "Gestalt Therapy: history, theory, and practice" (2005), the founders work will be covered under Classical Gestalt Therapy Theory heading, while the later major developments of following generations until recent times will be covered under Contemporary Gestalt Therapy Theory heading.

III.A – Classical Gestalt Therapy Theory

Margherita Spagnuolo Lobb (Chapter 2, Woldt and Toman, 2005): introduces the innovations that the founders of Gestalt therapy brought to the field of psychotherapy research and praxis, outlining the revolutionary change of epistemological view implied in looking at the normal spontaneity of human nature rather than trying to categorize it. The founders' dream was to build *a theoretical model of spontaneous human functioning* without devitalizing it in the process. Rather than questioning what did not work in the other clinical models (especially analytical and post-analytical ones), they were looking for what *did* work, according to a phenomenological analysis of successful therapeutic actions.

According to Lobb (2015), classical principles of Gestalt therapy theory can be summarized by touching upon the topics of: *The organism/environment field*; *Self as a process*, a boundary event; The experience of *contact*; Resistance as *creative adjustment*; and opening the way from egotism to *relational creativity*.

The organism/environment field

The interaction of organism and environment is inherent in the matrix of Darwinian evolution itself. The very concept of the *organism's self-regulation*, the gestalt way of understanding the natural processes, is linked biologically to the evolution of species. However, the individual needs that fuel the organismic self-regulation is not merely biological (as with flowers or animals to a certain extent) and cannot be considered in isolation from societal rules, in the field. Thus for gestalt theoreticians, the focus was on *contact making and withdrawal from contact* between the organism and the environment, hence the *contact boundary*. Lobb (2005) says: "The field perspective allows us to think of perception as a *relational product* that functions best when our thinking is totally centered on the *contact boundary* and thus *grasping both what is internal and what is external*—both the self's needs or experiences and the environment's demands or conditions." In order not to dichotomize the internal and the external of the organism and think of them making the field together in relational understanding, the attention of the gestalt therapist is always on the interaction site and process, that is the contact boundary.

Self as a process, a boundary event

Self is defined in Gestalt therapy as *the capacity of the organism to make contact with its environment*—spontaneously, deliberately, and creatively. That is because the self is *midway* between the organism and the environment and thus in a uniquely relational position. Moreover, Gestalt therapy theory studies the self not as a fixed structure (as in many other psychotherapy models) but *as a function* of the organism- environment field in contact.

Three functions of the self are the id, the ego, and the personality. The *id* is the sensory-motor background of the experience, physiological needs and bodily sensations perceived as

if “inside the skin”; The *personality* as assimilation of previous contacts; one’s given definition of self and; The *ego* as the motor that moves the other two functions and chooses what belongs and what is alien to it. Although founders of Gestalt therapy used psychoanalytic terms (the id, the ego, and the personality), they “describe these concepts in experiential and phenomenological terms, conceiving them as capacities that function in an integrated mode in the holistic context of experience that constitutes the self.” (Lobb, 2005).

Ego is that function of the self that gives an individual the sense of being active and deliberate. The *ego function* intervenes in the process of creative adjustment to the environment by making choices, identifying with some parts of the field and alienating itself from others. *Gestalt Therapy* describes these ego functions *both as capacities to make contact and as resistances to it (losses of ego functions).* It is the capacity to introject, project, retroflect, *and/or* fully establish contact.

The experience of contact

Developmentally, the child’s capacities like sucking, biting, chewing, standing and walking brings the child into contact with the world and fosters his or her *spontaneity*. Spontaneity means being fully present at the contact boundary, with full awareness of oneself and with full use of one’s senses. This allows one to see the other clearly.

The experience of contact is described in *Gestalt Therapy* as having four phases (*fore-contact, contact, final contact, post-contact*), each with a different stress on the figure/background dynamic (Lobb, 2005):

Fore-contact: The organism’s self-activation is called *fore-contact*, the moment at which excitements emerge that initiate the figure/background process. (sensation and recognition phases of contact cycle)

Contact: The self expands toward the contact boundary with the environment, following the excitation that, in *a sub phase of orientation*, leads it to explore the environment in search of an object or a set of possibilities. The desired object now becomes the figure, while the initial need or desire recedes to the background. In a *second sub phase of manipulation*, the self “manipulates” the environment, choosing certain possibilities and rejecting others, targeting certain parts of the environment and overcoming obstacles. (mobilization and taking action phases of contact cycle)

Final contact: The final objective, the contact, is the figure, while the environment and the body are the background. The whole self is occupied in the spontaneous act of contacting the environment, awareness is high, the self is fully present at the contact boundary with the environment, and the ability to choose is relaxed because there is nothing to choose at that moment. It is in this phase that the nourishing exchange with the environment, with the novelty, takes place. This, once assimilated, will contribute to the growth of the organism. (contact and assimilation phases of contact cycle)

Post-contact: The self diminishes to allow the organism the possibility of digesting the acquired novelty so as to integrate it, without awareness, into the preexisting structure. The process of assimilation is always unaware and involuntary; it may come into awareness to the degree that there is a disturbance. The self, therefore, ordinarily diminishes in this phase,

withdrawing from the contact boundary. (withdrawal and ground phases of contact cycle)

The complexity of the self's system of contact lies in the fact that the system is constantly in action on various sensory and mental levels (physical, emotional, cognitive and spiritual) and they together (one at a time but intertwined) constitute the current experience of the individual.

In some cases, the spontaneity in the experience of the contact faces aversion, some limits, some obstacles. Then the person must compensate by doing something else to make contact, thereby seeking a creative adjustment to the situation.

What helps the child (also the clients) recover their spontaneity in the face of aversion for their natural growth is: experiencing new possibilities of making contact or rediscovering their functional spontaneity with a new creative adjustment—a new organization of the experience of the organism-environment field

Resistance as creative adjustment

For Gestalt therapists, any symptom or behavior usually defined as pathological is a *creative adjustment* of the person in a difficult situation. According to Gestalt theory, "The so-called losses of ego function are creative choices to avoid the development of excitation during various phases of the experience of contact with the environment because that development would cause the person to experience the anxiety linked to that excitement." (Lobb, 2005). The way to understand these anxiety provoking our avoiding behaviors also lies in the study of contact interruptions.

Habitual interruptions of contact lead to the accumulation of uncompleted situations (interrupted spontaneity leads to open gestalts and *unfinished situations*), which subsequently continue to interrupt other processes of meaningful contact.

When *spontaneity* is interrupted, *excitation* becomes anxiety to avoid; *intentionality* becomes distorted; and the *contacting* carries anxiety (of which one is unaware) and happens via introjecting, projecting, retroflecting, egotism, or confluence. These contact interruptions will be covered in more detail under the Methodology section.

From egotism to relational creativity.

Among the ego loss functions or contact interruptions, the most debated one is the egotism, which was included by Goodman in the founding book (PHG, 1951). Perls et al., (1994) also says: "For want of a better term, we call this attitude 'egotism,' since it is a final concern for one's boundaries and identity rather than for what is contacted"

Egotism is a contact interruption that the ego function carries out in the final phase: at the culminating moment of the contact experience. This occurs when there should be an exchange between the organism and the environment and all the willful abilities should be relaxed. Instead, the ego maintains control, making contact without allowing the environmental novelty to upset it. Thus in egotism, "contact with the environment happens but gets finished too soon before the novelty brought by the environment is contacted and assimilated (e.g., the girl hugs her father but doesn't experience the novelty of this event, saying to herself, "I knew that to hug him wouldn't be anything new for me")." (Lobb, 2005)

Egotism, then, has to do with not surrendering oneself to the environment or trusting the vital novelty that the environment represents. The egotist, according to Perls et al., (1994) "make[s] sure that the ground possibilities are indeed exhausted—there is no threat of danger or surprise—before he commits himself" The egotist can be the "recovered" patient who has learned everything about his or her contact interruption, even how to avoid it, but who still is not able to be in the fullness of life, accepting the risk that is implied in trusting the environment to allow for true spontaneity of contact. As Isadore From was saying "egotism is the illness that psychotherapists communicate to their patients when they give them the capacity to know everything about themselves but cannot give them the trust necessary to plunge into life." (Lobb, 2005)

For Gestalt therapy, the aim of "the cure", is not consciousness of self but the spontaneity of contacting the other, the committing of oneself to the spontaneity of making contact, which is the basis for creativity. Thus, founders emphasized a phenomenological model of psychotherapy that could support the organism's spontaneity in encountering its environment, cause we, as Gestalt therapists, are interested in our direct, unprejudiced, not categorizing relationship with the client and we believe, that relationship is where treatment takes place.

III.B – Contemporary Gestalt Therapy Theory

Malcolm Parlett (Chapter 3, Woldt and Toman, 2005) explains changes since Gestalt Therapy was first published. "Gestalt therapists have integrated insights, concepts, and methods, such as the developmental work of Daniel Stern (1985), and have acknowledged other movements, such as that within psychoanalysis toward a more intersubjective view of therapy (see Jacobs, 1992)." Parlett (2005, In Woldt and Toman, 2005) points out to the constant tension between what is new and exciting and necessary to attend to and what is essential for the preservation of Gestalt therapy as a distinct tradition.

Gestalt therapists, wishing to take further the field-related ideas of the founding book, have increasingly looked to the work of Kurt Lewin (1890–1948). For Lewin, the field is an informing metaphor to help in describing complex interrelating events, both "external" social forces and "internal" personal drives and needs that in practice are all interacting and affecting each other. They "come together," and trying to take them apart and study them one at a time and independently means falling into the reductionist trap. Figure" makes sense only when the wider context or "ground" is made clear as well, the figure and ground together composing "the field" that needs to be appreciated as a whole. (Parlett, 2005)

For Parlett (2005) many features of the field perspective have fundamental implications for how therapists practice in Gestalt therapy. First of all, the therapist, or "observer," is not detached, objective, separated from the field but rather a part of it. Gestalt therapists work in the "here and now" and explore the immediate, present field while also attending and exploring different parts of the field. The field is organized, and therapy involves the mutual investigation of how it is organized. In terms of this organization, besides the focus on the immediate *here and now,* there are also: *there-and-then* reality (e.g. a restimulated childhood trauma); *here-and-then* attention to (e.g, how the client is "still resentful towards the therapist from last week's session,"), and; *there-and-now* reporting of some significant contemporary event in the person's work or home life. Thus the field can be thought of as *laminated,* and therapists can move between layers and levels, switching frames or positions according to "what *carries energy* or has been long ignored (because it does not carry energy).

Gordon Wheeler also describes contemporary Gestalt therapy as the Relational Field Model; A view of the individual as uniquely emergent from a *dynamic social field of relationships*. As Wheeler (2015) puts it: "The relational field Gestalt model defines *development* as the ongoing *coconstruction of wider and more complex wholes of meaning and action* that serve to enable the person to continue growing, creating, and resolving ever-more complex understanding, which serves in turn as a platform for ever-more creative and complex actions and experiences."

One example for the relational understanding in contemporary Gestalt therapy will be the phenomenology of *shame as a field experience.* According to Resnick (1997) there is agreement on understanding shame among gestalt theoreticians at the points of: " (a) much of the reported and described experience of shame—feeling "bad," "weak," "worthless," "acutely embarrassed"; (b) its difference from guilt (about being wrong as opposed to doing wrong); (c) how "shame of being ashamed" is common; (d) how shame is used in social control; and (e) how therapists and many therapy interventions can be inadvertently shaming for the patient." In terms of field perspective, Wheeler (1997), claimed that shame in particular might be best regarded as a field phenomenon. "In personal terms, what parts of myself, what urges and desires, what thoughts and feelings, can be received and connected within my social environment...? What parts will meet with resonance and energetic response (including at times energetic opposition), and . . . which parts will be met with a pulling away, a disconnect, often in an overtly belittling or punishing form?" Shame, he suggested, is the "affect of that disconnect in the field". What Wheeler (1997) called the "disconnect in the field" involves an absence of support from, or loss of connection with, others—or worse, acts of hurtful rejection, sarcasm, mockery, or public exposure. (Parlett, 2005)

Many other examples of relational or classical gestalt theory will be covered under the Methodology section that follows.

IV- METHODOLOGY

IV.A - Three Pillars

As the Gestalt therapy theory is accepted as rising over three pillars of Field Theory, Dialogue and Phenomenology, Gary M.Yontef (2005, in Woldt and Toman, 2005) explains how change happens in Gestalt therapy by the practice of a methodology that follows three principles: field process thinking; experimental phenomenological method of awareness work and existential dialogic attitude in contact and ongoing relationship.

Gestalt therapists are concerned with the *relational field of the patient* and with phenomenological awareness work. These two are entwined and the therapist is guided by the therapeutic task of using the *experimental phenomenological method* to explicate the essence of a patient's functioning by increasing awareness and awareness-ability. The Gestalt therapist also understands and is committed to *dialogic existentialism*, and contact with the patient is guided by the principles of dialogue. The therapist strives to establish contact as a whole person with the person of the patient—as the patient experiences him or herself. Out of this existential meeting, new awareness and growth occur.

IV.B - Relational Awareness and the Phenomenological Method

Fritz Perls (1969) identified three zones of awareness: Inner Zone is concerned with internal phenomena such as feelings, emotions, dream world and bodily sensations. Outer Zone is where we make contact with our outer world through our contact functions. This is concerned with our perception of our world and the behaviors and actions we move into. And finally, Middle Zone includes our cognitive processes, our memories, imaginings, fantasies and daydreams. The middle mode at best integrates/moderates between inner and outer zones of awareness but it can also function in a controlling and limiting way and serve to avoid updating creative adjustments, keeping fixed gestalts in place.

For the founders, *awareness* is characterized by contact, sensing, excitement, and gestalt formation (Perls et al., 1951, 1994). From relational perspective, Yontef (2005) explains how awareness in the Gestalt therapy framework is relational; it is a self-process that happens at the interface of the individual and the rest of the field. Awareness is sensory, affective, and cognitive. It includes observing self and other and knowing the choices that are being made.

Contact refers to what one is in touch with. One can be sitting with someone but still not in contact with him, instead he may be thinking of the things he must do. So, one can be in touch with something without being aware of it. *Sensing*, refers to how one is in touch—that is, by hearing; proprioception; close sensing, such as touching, smelling, and tasting; or by intuition. Sensory data are used to orient and organize our internal processes (e.g., urges, provocations, desires, impulses, appetites, needs) and our experience of the field or environmental influences. *Excitement* in Gestalt therapy refers to emotional and physiological excitation. This emotional quality of the excitement/arousal may be joy, sexual excitement, pleasure, disgust, or fear. The *process of gestalt formation and destruction* is also a central part of awareness. A figure arises from the background at each moment and then recedes into the background to make room for another figure. This is a constantly changing process. The figure and ground form a gestalt, an organized and meaningful whole. (Yontef, 2005)

This awareness process, including refinements and the movement of the awareness into

action, is not a one-person phenomenon; awareness is relational. We learn which figures lead to good outcomes from the experience of interactions with other people and also from interactions with the general environment. As Yontef (2005) puts it: “Interaction, contact with others, is the sandpaper that smoothes out behavior, and awareness shapes it. In the best cases, it is shaped in the direction of greater satisfaction and/or safety. In other cases, the relational field creates dysfunction.”

The Gestalt therapist focuses on the patient’s being aware and his or her increasing ability to be aware, as needed, of whatever forces are operating in the person/environment field. To be aware of these forces, to own them, is to own the choices made. The *phenomenological method* has been an important part of Gestalt therapy in order to work on the awareness.

The method, epoché, starts by putting aside (in “brackets”) as much as possible all preconceptions about reality, about what the data are, and about the task at hand, so that there can be a less contaminated co-construction between what is out there and the perceiver. In phenomenological method, the first impression of the therapist or the patient, or an initial interpretation, is only a tentative start. The initial perception is tested by repeated observations. Observations are reported to the patient in order to solicit disconfirmations, confirmations, and corrections of the therapist’s interpretation. Together the researcher/therapist and the subject/patient refine their understanding.

The phenomenological work is traditionally done by observation and focusing. The therapist inquires about the patient’s actual experience on a rather continuous basis by asking “What are you experiencing now?” or “What are you aware of now?” Above that observational focus, Gestalt therapy is also an experimental phenomenology. This means that the focusing often takes place through the therapist’s suggestion that the patient try something new—focus on it and see what he or she experiences. (Yontef, 2005)

IV.C - Dialogue

Buber’s (1958) concept of the I-Thou “is being in mutual relation to someone or something; and affirming him/her/it with one’s entire being. The relation to the Thou is direct, for Buber, “No system of ideas, no foreknowledge, and no fancy intervene between I and Thou.” (that is, phenomenological bracketing). I-Thou relationship requires a Gestalt therapist to be continually working on his or her presence. To be present is to be focused on the here and now, to be aware of oneself, and to bring the self into the therapist/client encounter. The therapist is asked to be genuine and to be selectively transparent where it serves the growth of the client.

The four principles or characteristics of contact that were explicated by Martin Buber and discussed in the Gestalt therapy literature are inclusion, confirmation, presence and commitment to the dialogue. (Yontef, 2005)

Inclusion is when therapists throw themselves as much as possible into the experience of the patient, even feeling it as if it were happening in their own body—without losing a sense of self. *Confirmation* is for the existence of the patient as the whole person, not just the present manifestation of him/her. It is both acceptance and a validation of the growth potential of the patient. *Presence* is for the authentical presense of the therapist as a person. For this authenticity to be useful in psychotherapy, the caring has to be genuine and real. Commitment to Dialogue is about surrendering to the Between

The key to understanding a therapeutic dialogue is that the therapist meets the patient and does not "aim." In a true dialogue, the parties to the dialogue give up control of the outcome by being themselves and interacting with the other person, who does the same. The outcome emerges from this interaction. Phenomenological bracketing enables contact, dialogue, and openness to something emerging from the dialogue that was neither planned nor predictable. And Buber's emphasis on meeting in between is also surrendering to this unknown nature of the outcome.

In the true therapeutic dialogue, both the patient and the therapist are changed. The therapist's sense of self, other, and the relationship is changed by the dialogue. If the therapist maintains a position standing above learning from the interaction, this condition of the dialogue is violated. (Yontef, 2005)

IV.D - Cycle of Experience

A traditional way of understanding the flow of awareness is through a metaphor called the *cycle of experience* (also known as the cycle of awareness or the contact cycle). It is a simple and powerful way of tracking the formation, interruption or completion of emerging figures. It identifies stages from the moment of experiencing a *sensation*, to *recognition* and naming it, making sense of it, choosing, *mobilization* and *taking action*, coming into full *contact*, achieving satisfaction or completion, *assimilation* and then by *withdrawal*, being ready for the next cycle.

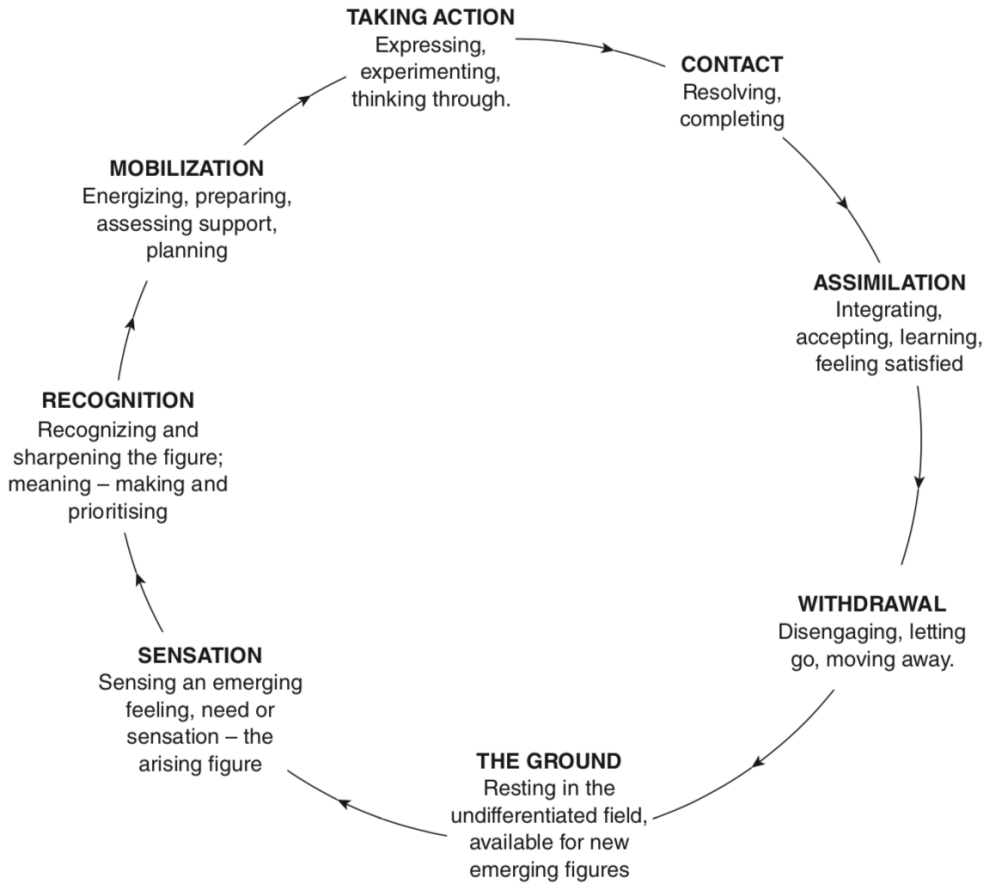

Figure 1. Cycle of Experience (from Joys and Sills, 2014)

The stage that occurs between withdrawal and sensation, after one has completed a cycle and before being energized by the next emerging figure, is often known as the *fertile void.* **A**lso called the *ground* (Joys and Sills, 2014) in order to underline the value of simply 'being there', 'going on and on' in full awareness of self in the world, allowing the emergence of what will be.

Cycle of experience can be useful as a guide to finding out where a process of aware experiencing, the energetic arousal and dearousal process, may be *stuck or diverted*, particularly for a client whose tendency is habitually to interrupt or distort their process at the same stage of the cycle.

IV.E - Contact Interruptions

Different ways of diminishing or adjusting contact with our environment have been identified by Perls at founding book (PHG,1951), expanded upon by, amongst others, Polster and Polster (1973), Zinker (1977) and Clarkson (1989). Originally described as resistances by Perls and PHG, these processes, which occur at the contact boundary, have been termed many different ways including: resistances, moderations, modifications, interruptions and disturbances. (Mann, 2010).

Deflection, is sidestepping or turning away from direct contact. It's about staying with the experience (here and now). *Introjection,* is swallowing whole messages from the environment without chewing. It's about questioning the experience before (and after) the assimilation. *Projection*, is seeing in others what is present in myself. It's about the degree of owning one's experiences. *Retroflexion*, is turning impulses inwards towards the individual experiencing the reaction. It's about the degree of self expression. *Confluence,* is a merging or dissolving of the contact boundary that leads to a lack of differentiation from the other. *Egotism*, is a slowing down of spontaneity by further deliberate introspection and circumspection. It's about spontaneity and control. *Desensitization,* is deadening of our emotional selves. It's about sensitivity and detachment.

The interruptions, the places where clients' energy gets stuck, are noted througout the therapy. Sometimes clients may limit sensory data, cannot articulate their wants, are reluctant to act or acting too quickly and are thus unsupported, may fail to reflect and therefore learn little from their experience. These interruptions are the material for our work as Gestalt therapists and are also the basis for our diagnostic insights.

IV.F - Paradoxical Theory of Change

The paradoxical theory of change by Beisser (1970) states that: "The paradox is that the more one *tries to be who one is not*, the more one stays the same". When people do not identify with some parts of who they are, inner conflict is created, and all of a person's resources cannot go into needed interactions of self and other. However, when people identify with their whole selves, when they acknowledge whatever aspect arises at a moment, the conditions for wholeness and growth are created.

The principle may be also understood when we realize that if a client can make this profound attitude of *self-acceptance*, then he is in fact making a radically different (and transformative) change to his normal attitude to himself. This point was made by Perls (1969) when he

distinguished between *self-actualization* and *'self-image actualization'*. Concept is paradoxical because it implies that in order to change, the client needs to give up trying to change. It asserts instead that there is a natural process of growth and change through ongoing awareness, contact and assimilation.

The most useful attitude the therapist can adopt to facilitate this process is one of *creative indifference*. This concept, which has its roots in Eastern spirituality, is similar to the practice of equanimity or mindfulness in Buddhism. It is based on the idea that the counsellor does not have a vested interest in any particular outcome. The counsellor is willing to accept whatever 'is and becomes'.

IV.G - Experiment

Experiment in Gestalt therapy is the commitment to create a climate that allows the client opportunities to explore and to discover his or her own outcome. In this way, the client acts from experienced awareness rather than following a direction imposed by the therapist.

Experiment is what transforms talking into doing, reminiscing and theorizing into presence and action (Zinker, 1977). The goals of creative experiments are: to expand the person's *repertoire of behavior*; to create conditions under which the person can see his life as his own creation (take *ownership* of the therapy); to stimulate the person's *experiential learning* and the evolution of new self- concepts; to complete *unfinished situations* and overcome *blockages* in the awareness/ excitement/contact cycle; to *integrate cortical understandings with motoric expressions*; to discover *polarizations* that are not in awareness; to stimulate the *integration of conflictual forces* in the personality; to dislodge and to *reintegrate introjects* and generally place "misplaced" feelings, ideas, actions where they belong in the personality, and; to stimulate circumstances under which the person can feel and act stronger, more competent, more self-supportive, more explorative and actively responsible for himself.

IV.H - Spiritual Influences

The roots of gestalt therapy's spiritual tradition and its Eastern influences are evident in its founders' various studies in spiritual philosophy. Laura Perls studied with the existential philosopher Martin Buber. Fritz Perls studied Zen Buddhism and existential philosophy. Both Laura Perls and Paul Goodman followed their considerable interest in Taoism. Development and integration of the Paradoxical Theory of Change (Beisser, 1970) into gestalt and here-and-now focused awareness exercises in PHG (1951) also influenced by Zen meditations. Both Zen and gestalt approaches promote *an acceptance of what is without aiming for change*.

Both Taoist and Zen Buddhist traditions have influenced gestalt's belief in the need to stay with experience rather than forcibly 'move on'. The concept and belief in the value of the fertile void emerged from the founders' studies of Eastern philosophies and existentialism. Taoist belief that opposites exist throughout all of nature, encapsulated in the concept of yin and yang, is mirrored in gestalt's thinking around polarities. Gestalt notion of organismic self-regulation is aligned with the Taoist doctrine of inaction. Gestalt's belief in self as process is also from Buber's dialogical existentialism: "We become a self only through meeting other selves in an I-Thou relationship"

Still, there are many different and varied views on spirituality within Gestalt community. Kennedy (1998) describes the gestalt approach not merely as a form of therapy but as a way of being in the world and a way of understanding ourselves that is 'congenial to a personal spirituality'. On the other hand, there are also other scholars that think, promotion of spirituality within gestalt is both unnecessary and undeserving of major consideration in gestalt therapy. Thus, it lies with the individual therapist to develop their own philosophy in relation to spirituality, the transpersonal and gestalt.

V. KEY POINTS AND FINAL WORDS

THE NEED ORGANIZES THE FIELD
UNDERSTANDING **SELF AS A PROCESS**
THE THERAPIST **MEETS** THE PATIENT AND **DOES NOT "AIM."**
TRUST THE **NATURAL PROCESS AND FERTILE VOID** THROUGH **CREATIVE INDIFFERENCE**
TRANSFORM TALKING INTO **DOING**
ACCEPTANCE OF WHAT IS WITHOUT AIMING FOR CHANGE.

As Lobb (2003) states, "therapeutic co-creation works on an improvisational basis: it cannot happen as a result of premeditated, known, schematic, and knowledgeable processes, but only when there is a person-to-person encounter, where the partners put their knowledge in the background and become instruments of the relationship itself."

There could have been many different ways to make sense of Gestalt therapy and methodology, simple or deep, partial or whole, subjective or relatively more objective, experiential or pure conceptual and so on. I have chosen to take a journey that may get me in touch with the depth and breadth of theory by letting myself hear some solid voices from the history and today of Gestalt Therapy adventure. The dreams of the founders and the horizon of the current scholars of the field brought me the basic principles that needs to be owned and the recent change in the paradigm towards relational understandings.

The Gestalt therapy theory was relational from the beginning, one may say, and that is true because the recent sway around relationality is responded easily and fluently by contemporary theoreticians and practitioners of the field. Dialogue was one of the three pillars of classical gestalt therapy, and now the field and awareness is relational, so is the self, emotions, cognitive functions. Past, present and future are co-constructed in relations here and now. All the field forces are involved in this co-construction, organism/environment, interpersonal, social and cultural. Thus "accepting what is" is the paradoxical way to open the space for creative transformation in self, in relations, in social existence and in construction of meaning for all, by all.

REFERENCES

Beisser, A. (1970). The paradoxical theory of change. In J. Fagan & I. L. Shepherd (Eds.), *Gestalt therapy now: Theory, techniques, applications*. Palo Alto, CA: Science and Behavior Books.

Buber, M. (1958). *I and thou* (R. G. Smith, Trans.). New York: Scribner.

Clarkson, P. (1989). *Gestalt counseling in action.* Newbury Park, CA: Sage.

Joyce, P & Sills, C. (2014) *Skills in Gestalt Counselling and Therapy*. London: Sage

Kennedy, D. (1998). Gestalt: A point of departure for a personal spirituality. *British Gestalt Journal, 7,* 88–98.

Lobb M.S. (2003) Therapeutic Meeting as Improvisational Co-Creation. In M.S. Lobb & N. Amendt-Lyon (Eds.) *Creative License: The Art of Gestalt Therapy*, Wien: Springer-Verlag

Lobb M.S. (2005) Classical Gestalt Therapy Theory. In A.L. Woldt & S.M. Toman (Eds.), *Gestalt Therapy : History, Theory, and Practice.* London: Sage

Mann, D. (2010) *Gestalt therapy :100 Key Points & Techniques*. London: Routledge.

Parlett M., (2005) Contemporary Gestalt Therapy: Field Theory. In A.L. Woldt & S.M. Toman (Eds.), *Gestalt Therapy : History, Theory, and Practice.* London: Sage

Perls, F. S., Hefferline, R., & Goodman, P. (1951). *Gestalt therapy: Excitement and growth in the human personality.* New York: Julian.

Perls, F. S., Hefferline, R., & Goodman, P. (1994). *Gestalt therapy: Excitement and growth in the human personality* (Rev. ed.). New York: Julian.

Perls, F. S. (1969). *Ego, hunger and aggression: The beginning of Gestalt therapy.* New York: Random House. (Original work published 1947)

Polster, E., & Polster, M. (1973). *Gestalt therapy integrated: Contours of theory and practice.* New York: Brunner-Mazel.

Resnick, R. W. (1997). The "recursive loop" of shame: An alternate Gestalt therapy viewpoint. *Gestalt Review, 3*(1), 256–270.

Stern, D. (1985). The interpersonal world of the infant. New York: Basic Books.

Wheeler G. & Axelsson L. (2015) *Gestalt Therapy*. American Psychological Association.
Zinker, J. (1977). *Creative process in Gestalt therapy.* New York: Brunner/Mazel.

Woldt A.L. & Toman S.M. (Eds.), (2005) *Gestalt Therapy : History, Theory, and Practice.* London: Sage

Yontef G.M., (2005) Gestalt Therapy Theory of Change. In A.L. Woldt & S.M. Toman (Eds.), *Gestalt Therapy : History, Theory, and Practice.* London: Sage

Zinker, J. (1977). *Creative process in Gestalt therapy.* New York: Brunner/Mazel.