

GESTALT THERAPY - AN UP-DATE

by

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On the one hand, there are continuing controversies about the relative merits or 'depth' of different psychotherapies. On the other hand, ever since the Fiedler studies (4), there is growing recognition that there is less difference between competent and experienced therapists from different psychotherapeutic approaches than between inexperienced and experienced psychotherapists within any one approach.

This article seeks to update readers on recent developments in Gestalt Therapy and correct some of the misconceptions which are still prevalent. I consider some accidents of history and personality might have contributed to a popularised version of Gestalt, which is but a pale reflection of the richness of its conception and of the diversity of its current practice.

Recent research by clinicians throughout the world supports the view that client characteristics and the helping relationship, and not the choice of system, are the crucial components in effective therapy. Neither empirical studies, nor comprehensive reviews indicate that any one approach is superior to another. (2, 5, 7, 9, 10, 21, 22)

Considering the weight of such objective evidence, I think due caution needs to be exercised when comparing one system of psychotherapy with another on the basis of small uncontrolled samples subjectively assessed. Even more care should be taken before equating any system of psychotherapy with the practice of a few of its exponents.

Popular conceptions of Gestalt are frequently based on an inaccurate understanding of modern developments. Many of these have not been widely published and may appear only in the clinical practice of some Gestalt psychotherapists or in the Gestalt Journal. These developments are not being disseminated in the same populist fashion as those of some of the charismatic Gestalt practitioners in the past.

Gestalt, as it is now practiced in several 'centres of excellence' is more clinically sound, psychologically profound and ethically aware than some of the past excesses would have led us to believe.

There is an ubiquitous confusion about definitions of Gestalt Therapy. It is often equated only with the practice of some

therapists, whereas there has been wide variation in styles of practice, competence and personal qualities among Gestalt therapists.

For me, Gestalt practice represents a complete body of theory and technique 'which implements the major tenets of existentialism as they have application in the psychiatric situation'. (3)

Gestalt is frequently thought to be primarily a set of techniques. This is exemplified in comments such as 'I used Gestalt on the dream', or 'I use two-chair Gestalt techniques'. According to Resnick (18) a true Gestaltist would barely be affected if every technique ever used by Gestalt therapists were never used again.

Gestalt Therapy is not about rules or techniques; it is a process of experimenting, creating and dialoguing. "Gestalt Therapy has at its core holistic, phenomenological, existential humanistic, and dialogic elements whose matrix is ignited and grows, limited only by the therapists's background and creative richness." (18)

Dublin (3) does an excellent analysis of the differences between Gestalt therapy, existentialist Gestalt therapy and 'Perlsism'. He differentiates an optional form of Gestalt therapy (associated with Perls as a person and his particular style) from Gestalt therapy as a much wider and more inclusive approach.

Common misconceptions about Gestalt are perpetuated by the

artificial and misleading division of humanistic therapies into existential and regressive. It denies approaches which span both.

It is sometimes assumed that Gestalt is purely existential; perhaps because of the popularisation of the phrase 'here and now'. However, one of the most attractive features of Gestalt therapy, as I understand it, is that it encompasses both existential necessity and regressive potentiality.

Isidore From (6) points out that the phrase 'here-and-now' was first used by the psychoanalyst, Otto Rank. "It does not imply that 'Gestalt Therapy has discovered that the only time there is, is the present.' That was and is, absurd. Experience occurs only in the present, but that does not mean that the past and the future are meaningless. Remembering and planning (and they are in the present) only have meaning if there has been past experience and there may be a future." (6 p8)

It would also be untrue to say that Gestalt therapists avoid their depth issues of childhood and early experience. Gestaltists may at times encourage a reliving of the past, occasionally be neutral, or occasionally prevent it (e.g. particularly if repeated regressions to past experiences appear to be serving as an avoidance of good contact in the here and now).

Perls was a master at facilitating the reenactment of early life experiences. In 1986 I was in San Diego working with Erving and

Miriam Polster (surely among the greatest living exponents of Gestalt therapy) and we spent a great deal of group time in 'talking about', reconstructing and reliving the past.

Many Gestalt therapists work with birth trauma or intrauterine experiences. The fact that we do this work in the present tense, 'as if it is happening now', serves to enhance the presentness and vividness of the experience. This makes Gestalt a powerful system for accessing those past experiences which interfere with present functioning " . . . remembered with the fresh, felt poignancy that brings it indelibly into the present." (16)

There is also a popular idea that Gestalt psychotherapists do not take a history or make diagnostic assessments. Yontef writes: 'I have found increased value in the patient's life script past experiences, and development history as well as noting that many patients need to begin sessions by relating weekly news flashes on the ongoing development of his or her life.' (26)

Several noted Gestalt therapists value diagnostic schemes which can be specific for Gestalt therapy or can apply to more conventional clinical diagnosis (18, 27, 30)

Modern Gestalt psychotherapy seeks increasingly to emphasise a differential and discriminating, diagnostic attitude towards clients. Trainers such as Resnick (18), Yontef (26) and Tobin (23) encourage, in addition to

thoroughgoing academic and professional preparation for the Gestalt therapist including a study of other systems of psychotherapy.

There may be great differences between some Gestalt practitioners and some so-called regressive therapists. On the other hand, they may resemble each other remarkably. I have had personal and training experience with several leading exponents of both approaches. For myself there was no particular difference in the depth of work that I did on some occasions between, for example, David Boadella and Miriam Polster, though their theoretical orientation certainly differed.

A major reason for an exaggeration of superficial differences in the early days of Gestalt was its popularity. Like psychoanalysis and other well known approaches: "It has been simplified and falsified and distorted and misrepresented." (Laura Perls 25 p17)

Some misconceptions about Gestalt may have been true of Gestalt therapists at some periods in some places. Resnick (18) comments that you can recognise the period (or even the city) where some Gestalt therapists trained, since their approaches reflect the preoccupations of Perls at certain times in his life.

According to Erving Polster (15), Perls was gifted at creating slogans which challenged people's ordinary perceptions of psychological relationships, e.g. "Lose your mind and come to your senses". Perls meant to redress the uneven intellectual-

ised development of the clients of his day. Modern Gestalt therapy has returned to valuing thought, theory, and intellectual creativity as well as emphasising sensory aliveness and choice in emotional expression.

It is true that Sartre (19) represents Roquentin in 'Nausea' as a person without a past and emphasises that only the present exists now. However, Sartre (20 p109) also writes: "In a word, if we begin by isolating man on the instantaneous island of his present, to a perpetual present, we have radically removed all methods of understanding his original relation to the past."

Furthermore, as Erving Polster (15 p16) points out, many other existentialists (e.g. Kierkegaard and Binswanger) did not limit themselves to the 'now' experience. He quotes Kierkegaard: "We gain insight by looking backward and we live by looking forward."

The phenomenologists such as Van den Berg (24) also support a present orientation, but always within a temporal context. Merleau-Ponty (12 p240): "This amounts to saying that each present reasserts the presence of the whole past which it supplants, and anticipates that of all that is to come, and that by definition the present is not shut up within itself, but transcends itself towards a future and a past".

"In spite of the narrow impressions picked up by many practitioners . . . A basic condition for the gestalt here-and-now is the

inclusion of remembering, imagining, and planning as present functions. Although this qualifier should ensure attention to any experiences, no matter where or when, it has suffered the fate qualifiers often do. It has taken a back seat. Inevitably, people are confused by the paradoxical clash between believing that the past does not count and simultaneously believing that remembering does count. Since paradox is hard to handle, one side has become dominant the belief that only the present counts. (17, p171) This may be one reason for the assumption that Gestalt therapists 'do not deal with the past'.

The here-and-now cliches of the 1965-1975 era were a result of a swing of the pendulum to de-emphasise the background or context which was the psychoanalytic preoccupation against which Perls rebelled.

"Classical psychoanalysis emphasised background,. For example, it gathered information about the entire history of the patient, details of how the person's character developed over time. In the process the aliveness of here-and-now moments was lost. Gestalt therapy emphasised the latter, and in the process lost some valuable background. In recent years Gestalt therapy has been moving toward a synthesis of the background context and the figure of the moment." (26 p57)

Yontef emphasises that a truly existential approach must account for the continuity of the patient's existence. He, along with other

Gestalt therapists such as myself, appreciate the necessity of talking about and working with the patient's past.

It is existential psychoanalysis which rejects the hypothesis of the unconscious. Gestalt therapy certainly rejects the notion of a region of the human mind which is permanently or practically inaccessible to awareness. Perls does not use the term 'the unconscious in the way that Freud did. This is not meant to be construed as a denial of experiences that are out of awareness. Perls has a different perspective on the phenomenon of processes which are not conscious.

The concept of the unconscious is replaced in Gestalt therapy by the shifting figure/ground of the concept 'Awareness'.

"And therefore, rather than talking of the unconscious, we prefer to talk about the atthismoment-unaware. This term is much broader and wider than the term unconscious. This unawareness contains not only repressed material, but material which never came into awareness, and material which has faded or has been assimilated or has been built into larger gestalts. The unaware includes skills patterns of behaviour, motoric and verbal habits, blind spots, etc." (14 p54)

The incompatibility of Gestalt with psychoanalysis does not rest on the rejection of one construct of the system "the Freudian unconscious". There is a certain kind of incompatibility which in fact rests on a

difference in the basic view of the person.

Gestalt basically views the person as whole, selfactualising, seeking after growth and the fulfilment of their innate human potential. Whereas orthodox psychoanalysis tends to emphasize a view of the person as being drive-ridden by aggressive or erotic urges.

This philosophical difference is a profound distinguishing factor between the psychoanalytic approach and the humanistic existential approach. Techniques may appear similar, but the value base from which a person practices determines their primary theoretical - ideological allegiance.

It is this basic attitude to the nature of the person that differentiates between an analyst using 'Gestalt techniques' (such as Devanloo) and a Gestalt therapist whose work is informed by her own psychoanalytic training and experience (Perls was such a therapist, as is exemplified in some of his work on dreams).

There may be Gestalt therapists who believe that only an adversarial or frustrating position with an abusive or abrasive vocabulary is 'real Gestalt' (6) There are Gestalt therapists who stress the entire range of needs and values of the person including psycho-spiritual development. (11 p19)

There certainly are Gestalt therapists who take seriously the social need for religious experience defined as the 'quest for coherence,

unity, support, direction, creativity, microcosm'. Gestalt is a large enough psychotherapy to encompass the very polarities it seeks to accentuate.

In the way I use and teach Gestalt, I see it as an outstanding integrative, theoretical and methodological system, encompassing physiology, emotionality, behaviour, intellectual nourishment, societal connection and spirituality. I believe it is now imperative 'that we make our choices with the highest standards of responsibility. And we can learn to do that with some semblance of humility and compassion, rather than with glee and righteousness.' (30 p84)

"In the past decade Gestalt therapy has been true to its existential heritage by increasing attention to human relations, an increasing respect for the phenomenology of the patient, and beginning to deal with issues of continuity. This more mature existential attitude has been the basis for a more sophisticated clinical methodology and a framework for assimilating

new psychoanalytic insights." (26 p51)

Gestalt psychotherapy as it is currently developing, represents probably one of the few humanistic approaches which genuinely, in theory and in practice, can encompass both polarities of psychoanalytic insight and pure existentialism. At times one may be foreground and the other background. At times this may be reversed.

However, the holistic core of Gestalt mandates the use of both figure and context. It is to me the very beauty of Gestalt that both of these can co-exist for the theoretician and the clinician at the same time. Just as little as one can simultaneously see both the vases and the faces of the well-known picture so often used to illustrate the gestalt psychology concept of figure and ground. Gestalt is both existential and regressive. This may not be true for all Gestalt psychotherapists, but it is certainly true of a growing number here in Britain and elsewhere.

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