CHAPTER FIVE AN INTRODUCTION TO GESTALT THERAPY THEORY AND PRACTICE

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Maria looks small sitting on the couch, hands tightly folded in her lap, legs twisted around one another, feet with her heels lifted and toes digging into the carpet. Her hair partially covers her slim face; and her eyes are cast down, only occasionally darting up to look around the room. Maria is 30 years old yet appears, on this day, to be 16.

She has come from Europe, accompanying her husband for his work here in New York. She was a psychotherapist in her country, having been given an introduction to gestalt therapy and related humanistic modalities during her training. She has one year left in New York and has come to me for further study and practice of gestalt therapy.

At this moment, she is describing her previous therapy training to me and, as I lean forward to hear her quiet voice, her eyes suddenly dart up and a broad smile spreads across her face. "Do you play the piano?" she asks excitedly, her hand waving toward the instrument that stands in another part of the room. "Sometimes," I say, "when I'm singing or teaching singing." "Oh," her own vocal tone shoots to a high pitch, "I'm glad to hear it. I was afraid to tell you that I am a poet, and used to teach poetry in the university before I became a therapist.

"In my therapy training my supervisor told me that I was too expressive and needed to become more restrained when working with clients. My supervisor said I was behaving too much like an artist. I am relieved that you practice an art form also." "And so did both Fritz and Laura Perls," I tell her. "Fritz was an actor before he went to medical school. And Laura was a classical pianist who played on a professional level and made a choice between a musical career and becoming a psychotherapist; she never stopped playing the piano, though."

"Really?" asks my student, her eyes opening wide. We look at each other for a moment. "I thought that perhaps I had chosen the wrong profession; I still write, you know," she says, looking down at the floor.

"Gestalt therapy values the whole human being," I respond, "in all our creativity and varied interests." And with that exchange, Maria and I begin to co-create our work together.

CO-CREATING GESTALT THERAPY

Gestalt therapy was co-created by Drs. Fredrick (Fritz) Perls and Laura Perls, husband and wife who left Germany in 1933. They went to live in Johannesburg, South Africa, where throughout World War II they practiced therapy, collaborated in writing their first book *Ego, Hunger and Aggression* (1945/1992), and developed a new therapeutic theory and practice, which they later named gestalt therapy. In Germany, Fritz and Laura had been practicing psychoanalysis in traditional ways, with the client lying on the couch and the therapist sitting behind him or her, listening and saying little. While in South Africa, Laura began to have her patients sit up while she sat opposite them. Grounded in her Berlin studies with eurythmics and bodywork with Elsa Gindler (Gregory 2001), Laura included in her work attention to her patients' posture and movement qualities while inviting them to become aware of these aspects of their own functioning. Laura later said, "You must be a body to be somebody" (Perls 1992, p.x).

Laura Perls developed movement and voicing experiments for use in therapy sessions, in which clients might be helped to bring awareness to, and at times even exaggerate, what they had been doing unawares. Laura would sometimes invite clients to try new postures, movements or gestures and to speak with her about what they were experiencing while trying them. The purpose of this was not to improve movement but to help the client become aware of the details of her or his own functioning, along with the feelings and thoughts that arose at the same time. These ways of working, which Laura and Fritz were using, are described as *heightening awareness of what is*, and *encountering the novel* (experimenting with something new).

Laura reports that during their years of exile in South Africa, Fritz and she would spend each weekend conversing about their work, developing and writing about a system which grew into a new approach to practicing therapy, an approach in which the client was seen to be the expert on her or his own life, and in which activities were as important in session as were the client-therapist conversations through which they were explored and processed (Perls 1992).

Because of their need to escape from Nazi Germany, Fritz and Laura worked in South Africa for over ten years, in relatively professional isolation, far from the influence of Freudian psychoanalysts in Europe with whom they had originally trained. By the end of the war they were practicing a new mode of psychotherapy, which, while growing from psychoanalysis, also departed from it. It became, as Laura put it, a therapy that was experiential, experimental, and existential (Perls 1992).

After World War II, Fritz and Laura settled in New York City. In regular gatherings at their apartment they began to host conversations about therapy, its practice, theory, and underlying philosophy. People participating in these discussions included physicians, psychologists, educators, graduate students, artists, writers, actors, and musicians. This eclectic group of intellectuals and artists discussed theory and practiced together, processing what they were doing, and seeking to develop a new vocabulary to describe the new work they were undertaking in individual and group therapy.

When the weekly meeting had grown to 40 people, Fritz and Laura divided the group in half and each half began to do therapy with and then train 20 people. The first gestalt therapists developed from this effort; and together with Fritz and Laura they formed the New York Institute for Gestalt Therapy.

In 1951, guided by an outline of ideas, which Fritz had brought with him from South Africa, the writer and social activist Paul Goodman, who was a member of the Perls's weekly discussion group, wrote the theoretical half of what was to become our founding text, *Gestalt Therapy: Excitement and Growth in the Human Personality* (Perls, Hefferline and Goodman 1951/1994).

The other half of the book was a set of sensory awareness experiments that the reader could undertake on his or her own. These were written by Fritz, and tried out ahead of publication by Ralph Hefferline's students at Columbia University. Years later, I recognized many of these experiments as having originated with bodywork pioneer Elsa Gindler, who taught Laura in Berlin in 1930 (Perls 1993). In New York, Fritz studied for a while with Charlotte Selver, who had briefly been Gindler's student in Berlin.

Within a few years, Fritz began to travel, teaching groups of psychoanalysts, educators and graduate students around the United States and Canada. Fritz was frequently in residence at the Esalen Institute in California, occasionally coming back to New York, where he stayed with Laura. They lived separate lives from the late 1950s on; and so gestalt therapy developed into two separate styles of practice, reflecting Fritz's and Laura's differing personalities and ways of working. Yet both the East Coast and the West Coast styles of practicing gestalt therapy remained true to a set of core gestalt therapy principles, which were laid out in *Gestalt Therapy* (Perls *et al.* 1951/1994).

Because the "parents" of gestalt therapy effectively split, there was for many years a split in the gestalt therapy community worldwide, the "children" being loyal to one or the other of the founding practitioners' styles. This schism in the field has begun to heal only within the past ten years. Now, because gestalt therapy is more than 60 years old, we are able to look at how it has developed differently in different locales, and how we gestalt therapists worldwide may respect and understand one another with the support of the underlying principles of our theory.

SOME CORE PRINCIPLES OF GESTALT THERAPY'S

Gestalt therapy is meant to treat the whole human being, not just the mind. Ahead of its time, gestalt therapy developed from radical psychoanalysis, as described by Philip Lichtenberg (1969) in *Psychoanalysis: Radical and Conservative*. Gestalt therapy was a response to the times in which it was founded. Paul Goodman, using Fritz's outline, wrote the founding text (Perls *et al.* 1951/1994). Paul was a social thinker and therapist whose many books looked toward encouraging a freer and more personally authentic life style for the socially restricted men and women of the 1950s.

In gestalt therapy theory, we say that figures form and are perceptible in relation to the ground from which they emerge. We understand that figures (*Gestalten* in German) can only be perceived against a ground, the two are thus interdependent. The words figure/ground are taken from art, as well as from the studies of perception by gestalt research psychologists in Germany between the wars (Ellis 1938).

From its beginning, therefore, gestalt therapy was a therapy of implied relationship, since one part of the whole could not be perceived without the presence of the other. In gestalt therapy, we speak about needs and interests being foreground or background, of something being figural for the client or therapist. We speak of emergent gestalts, of sequences of contacting, which include sensing, being aware, choosing, taking action, and assimilating or dissolving the figure. This language is intended to be descriptive and never evaluative.

In gestalt therapy we speak of figures of interest being the leading form through which we do our work with clients and awarely live our lives. The dissolving of figures into the ground, called destructuring in gestalt therapy, changes the ground and is thus part of a dynamic relational process, today described in dynamic systems theory (Oyama 2000).

In the 1950s, the idea of an individual following her or his figures of interest, rather than being merely obedient to societal norms, was revolutionary and quite in contrast to ideas of adjusting, fitting in, or being mentally well, which was the medical model through which mental distress was evaluated then. Psychoanalysis at that time spoke of adjustment to society's norms, and to some extent still does.

By contrast, gestalt therapy spoke of creative adjustment, meaning an individual or group adopting the best possible decision or action in the moment, given the constraints and/or opportunities in the field. These constraints and opportunities may be aspects of the environment or of an individual's capabilities, the two together composing the field.

The concept of field in the 21st century has changed from that which existed when Fritz and Laura first developed gestalt therapy. Individuals in Western society today recognize few personal constraints and often struggle with problems in life related to speed and perceived rulelessness, and from the consequences of our now living in a liquid society (Bouman 2000). The consequences of these struggles can be seen in our most recent economic and environmental emergencies. Assistance through gestalt therapy for individuals and groups contending with emergencies is as available today as it was more than a half-century ago when it first came on the scene. This is because gestalt therapy eschews fixities, but rather encourages clients to grow with awareness of the changing field.

Although he was trained as a medical doctor, Fritz and Laura departed from a medical model of describing mental health or illness. Gestalt therapists look at: how well a patient understands her or himself; how able he or she is to make choices based on the opportunities and limitations of the moment (constraints in the field); how aware of his/her own bodily sensations as well as mental processes he/she is; how aware of the field the patient is part of and in what ways he/she interacts with it; how fluidly he/ she is able to adjust to changes while developing a clear sense of self, within what we call the organism/environment field.

In gestalt therapy, the set of experiences where a person is interacting with the environment is called the contact boundary. This expression, while appearing to be a noun, is actually a set of verbs and interactions that describes experiences. Thus our emphasis in gestalt therapy is on activity, described in verbs, whether in the therapy session or outside it. Our emphasis, too, is on the development of choice-making, which we call alienating and assimilating, as well as on awareness and ability to describe relationships of the elements of figure/ground.

Gestalt therapy has an ever-developing theory, which helps us describe experience; it is thus phenomenological. The therapy helps therapist and client understand where our work together may be moving ahead or be stuck, and to evaluate the kind of stuckness, which we call interruptions in contacting, and help us experiment with whether or not we wish to undo those interruptions and how. The emphasis in gestalt therapy is thus on "how" and not on "why."

Contemporary gestalt therapy values sensing, feeling, thought, and action in equal measure. We evaluate human functions through a process which we call the aesthetic criterion—that is how flowing, harmonious, energetic, and bright we experience a person's functioning to be at the present moment. "Aesthetic" here does not refer to beauty, but rather to balance and authenticity (Bloom 2003). We are less interested in how correct, healthy and "well adjusted" our client's behavior may appear to be to others. The aesthetic criterion looks at a patient based on what she or he says and does—or through the experience of therapy comes to say and do—about what is wanted or needed in living right now.

When the patient is able to articulate and then actively try to fulfill that which she or he wants, given the existing constraints and opportunities in the field, then we say that the patient is creatively adjusting, and may be understood according to the aesthetic criterion. Thus, he or she establishes their own parameters through which therapy may be judged to be or not to be successful for him or her. Gestalt therapy is frequently mistaken to be only a set of procedures, which we gestalt therapists call experiments. Gestalt therapists may utilize experiments in therapy sessions to activate clients and get them to experience that which they were previously only talking about. These experiments may include chair work (drawn from Moreno's *Psychodrama* (2008) as utilized by Fritz), awareness exercises (drawn from the work of Elsa Gindler who taught Laura Perls in Berlin, as well as from Fritz's time in a Zen monastery in Kyoto), movement experiments (some of which come from dance therapy, body-mind centering (Cohen 1993), and other expressive and bodywork modalities), and numerous other active approaches including imagining, drawing, sculpting, singing, writing, drumming, taking a walk with the therapist, going to a store with the therapist, and so forth.

In Gestalt therapy, these active experiments are not seen to be ends in themselves, as they are in some forms of arts therapy, but rather to be ways for the client to experience self in the now and to explore what the experiences mean to him or her. This exploring is a discussion, which we call processing, and it is an essential component of gestalt therapy. What the client makes of the experiment, in a slow exploration of experiences, is what makes the work relevant and useful to her or him, and gives him or her self-agency.

The therapeutic relationship is the medium through which growth and change may occur. What client and therapist may each be imagining about the other, which qualities inspire, intrigue, puzzle, disgust, or frighten the client or therapist may provide a route to explore the client's inner life, style of communicating, and what outcomes the client hopes for from the therapy.

The ways that he or she walks in, sits, shakes hands, smiles, frowns, listens, speaks are filled with personal history which can be attended to in the therapeutic relationship. The here-and-now in the consulting room is regarded as the prism, through which all the important themes of the therapy may be found and explored by client and therapist.

The consulting room is ideally a safe place where all that is important to the client (as well as to the therapist, although that part will be professionally bracketed, except where judged by the therapist to be usefully revealed for the client's growth) can be explored and experimented with—both in terms of knowing more brightly what is (leading to paradoxical change; see Beiser 1970) and inventing and experimenting with new behaviors and ways of thinking. In a gestalt therapy session, we may converse, move, imagine, or engage in any number of creative activities (Zinker 1977), all in the service of the client encountering the novel with the support of the therapist in the here-and-now. We understand that here-and-now is the only place/time in which change can actually occur. The therapy session provides exploration; and assimilating change takes place later, outside the consulting room.

HOW I BECAME A THERAPIST

I was growing up in Brooklyn while Laura and Fritz Perls, along with Paul Goodman and a group of intellectuals and artists, were developing gestalt therapy in Manhattan. My exposure to intellectual life was through my parents' single shelf of books and their well-worn collection of classical records. These we listened to every Saturday while we all cleaned the apartment. Also, when I was young, my mother kept a scrapbook of poems she cut out of newspapers and magazines. And for a couple of years I remember her painting watercolors. During those years, my father was an amateur actor and appeared in modest productions. These were my introductions to "culture," as folks in my working-class neighborhood thought of it in the 1950s.

From an early age, I sang; I sang while I washed the dishes each night beside a window, which opened on to an alleyway. The neighbors in the alleyway heard me and eventually formed a committee to urge my parents to give me singing lessons. This community action set the path for my life.

While Laura Perls was playing classical piano in her apartment on West 96th Street, I was studying voice with my teacher on West 93rd Street and my language coach on West 74th Street. Both teachers were immigrants from Berlin, as were Fritz and Laura. I also studied breath and bodywork with Elsa Gindler's longtime teaching assistant Carola Speads, another Berliner. She lived on West 85th Street. I don't doubt that these "muses who fled Hitler" (Zinker 1977, p.26) traveled in social circles whose paths intersected with those of the Perls', though it would be decades before I would learn who Fritz and Laura were.

In New York City, I attended the High School of Music and Art, City College and, after many years, stepped upon the stages of both the Metropolitan Opera as a competition finalist and the New York City Opera as a principal artist with the company. (I was hired by another émigré from Berlin, Maestro Julius Rudel.) My musical career was founded upon the training available in New York City through classical musicians who had settled here just prior to and after World War II, along with many other professionals, including Fritz and Laura, who all were part of that intellectual migration to New York. I took advantage of this musical and language training throughout the 1970s.

When, in the 1980s, I left the New York City Opera to care for my infant daughter, I began to teach singing. It was then that I experienced a phenomenon that surprised me. Some students would stop mid-lesson and ask for my advice or help on life matters. Others would begin to weep while singing and would then share with me the pain that was welling up from within them. For several years I tried to be commonplace, helpful, soothing, encouraging, dispensing advice, picking songs for them that mirrored their moods. This was not enough, though, and rarely helped in the long run. I was the only professional in many singers' lives: and they were turning to me for help. Finally, I decided to train during the evenings to become a gestalt psychotherapist. I chose gestalt therapy because of its history of accepting artists to its training programs. It took four years for me to become a therapist.

In 1991, I entered private practice while continuing to teach singing a few hours a week. Twenty years later, having just finished a term as president of the New York Institute—the institute which Fritz and Laura had founded—and having been visiting guest faculty at gestalt institutes in Europe, South America, Australia and New Zealand, I continue to teach a few singing students every week when I am in New York. I still concertize occasionally as well. Singing is part of my life no matter what other work I am doing; I have published articles on the health-giving properties of singing (Gregory 2004, 2009, 2011). I feel inspired by the example of Laura Perls, who, although she had a distinguished career as a psychotherapist and teacher, never stopped playing the piano privately on a professional level.

GESTALT THERAPY IN MY EVERYDAY LIFE

Gestalt therapy theory and practice are part of both my work life and my everyday life, though that distinction is a false split in gestalt therapy theory. My whole self is as present with a client as with a friend, although the choices I make for colloquy are different. With the client, our conversation focuses upon his or her concerns and needs. It is my professional responsibility to hold mine in the background, or bracket them. Although I do not speak of my needs and concerns, except in the rare instance in which I determine that such sharing may be supportive to my client, all the aspects of my life are always present in the consulting room: inchoate yet there, they are part of the field. Likewise my work style, my ways of seeing and describing, are present, though rarely directly spoken of, when I am conversing socially. It may be deep background, of which I am at that moment unaware, or near the surface, where I am aware yet am choosing not to make it figural. Gestalt therapy theory and practice is always present with me:

When I wake up in the morning, before arising I check in with myself physically and emotionally to know what I am feeling right then; that is an aspect of gestalt therapy practice.

When I am at work and walk with awareness to the door, noticing my breathing, my feelings and thoughts and then bring that awareness to greeting the client as I open the door; that is an aspect of gestalt therapy.

When I am in line at the grocery store, looking around at the people in front of me and noticing the moods they are in and what seem to be the intentions of their behaviors; that is an aspect of gestalt therapy. When I take an extra few seconds to connect with the cashier, through looking at her, through body language, through asking how she is, through exchanging a smile if she wants to; that is an aspect of gestalt therapy.

When I lift up my grocery bags, awarely balancing the weight to carry them effectively through the crowd of people at the exit; that is an aspect of gestalt therapy.

When I reach home and notice that I am tired and need to rest, sitting down to feel my breathing and to sense my muscles as well as my mood; that is an aspect of gestalt therapy.

And it is gestalt therapy theory and philosophy when I return to these kinds of awarenesses after a period of absent-mindedness during the day; when I smile and realize that as a human being I am apt to lose awareness frequently. Accepting that with understanding is an aspect of gestalt therapy.

I enjoy my life being filled, most of the time, with awareness and choice-making. Physically, Elsa Gindler's work taught me to be aware and to experiment. Cognitively and emotionally, gestalt therapy theory and practice taught me to be aware and to be able to talk about it. It is how I live, most moments of my life, in an integrated way—awake, aware, choiceful, given the opportunities and limitations around me.

How I live, and how I practice Gestalt therapy, are one and the same. I live my life the same way I do my work, and that, also, is how I teach new therapists to work and live. Each of our lives is a whole gestalt, and the interconnectedness of those gestalts is the relational field of our work and of our world, as, for example, is the field co-created by Maria and I.

Maria is preparing to return to her home in Europe. We have been working together for a year and she has grown a lot as a person and as a practitioner. Last night in supervision class Maria had been both bold and kind; she had challenged her "patient," another therapist-in-training who was hesitant about trying an experiment she had proposed.

"Would you be willing to talk about how you feel when you hesitate this way?" (exploring process is as important as exploring content in Gestalt therapy) asks Maria with warmth and firmness. "No," he says, "because to talk about that would be to talk about the personal information I am wanting to withhold. I need to have a wall here." He draws a line in the air with his hand. "OK," she says in a steady, clear voice, "let's both know that together." She draws an imaginary line also. They sit gazing at one another for a moment.

The silence in the room is full. She has spoken clearly, giving support and respect to her client. She is sitting up straight in her seat, sounding kind and caring, her gaze straight at him, eyes bright, her hair swept away from her face, hands resting loosely in her lap, feet flat on the floor. She looks and sounds her age. She is calm, present and settled. The model client smiles at her in appreciation. I see that Maria's professional work as a gestalt therapist has begun well; and I feel satisfied that I am succeeding in creatively teaching gestalt therapy to the next generation.

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