Dream Work

**1- Both psychoanalysis and Gestalt therapy consider that dream exploration can be used as an effective therapeutic technique. However, the two schools propose very different approaches to dream work. Which approach would you favour and why?**

Boundary Disturbances and Ego Defense Mechanisms

**2- Gestalt therapy identifies a number of problematic patterns of interpersonal relationships called Interruptions/Resistances to Contact, or Boundary Disturbances. Some of these maladaptive interpersonal patterns are similar, though not identical, to some of the ego defense mechanisms identified in psychoanalysis. Based on your understanding of these psychoanalytical and Gestalt concepts, which of the two sets of constructs do you find more useful for conceptualizing and addressing potential clients' concerns?**

**Week Six Reading**

**Introduction**

Gestalt theory has made a number of significant contributions to the overall field of counselling and psychotherapy. Prominent among them is the ability to bring aspects of the client's existence into therapy and to work with the client experientially in the present moment.

Gestalt therapy is based upon the personality theory that stresses the organism's innate capacity to strive toward actualization.

Fritz Perls (1893 - 1970) was, by his own acknowledgement, a physician, a psychoanalyst, a scholar, a pilot, and a "dirty old man" (Perls, 1969a). His philosophy of life appears to be represented by the first line of a poem written by Perls (1969b):

In and out of the garbage pail  
Put I my creation,  
Be it lively, be it stale,  
Sadness or elation.

Joy and sorrow as I had  
Will be re-inspected;  
Feeling sane and mad,  
Taken or rejected.

Junk and chaos, come to halt!  
Instead of wild confusion,  
Form a meaningful gestalt  
Of my life's conclusion.

*Gestalt* is a German word with no exact English equivalent; an approximate translation would be *complete pattern* or *configuration*. A *Gestalt* is a perceived whole. Gestalt theory is rooted in a number of disciplines and schools of thought. According to Clarkson and Mackewn (1993), in developing the Gestalt approach to therapy, Perls drew from:

* Orthodox and innovative psychoanalysis
* Holism
* Eastern religion (particularly Zen Buddhism)
* Existentialism and phenomenology
* Gestalt psychology and Kurt Lewin's field theory
* Wilhelm Reich?s character analysis and body therapy
* Theatre, dance, and movement

**Objectives**

Upon completion of the lesson you should:

* understand the key concepts of the Gestalt approach;
* understand the use and application of Gestalt techniques to the process of counselling;
* be able to outline the therapeutic process regarding the therapist, the client, and the relationship between the two;
* evaluate the degree to which the theory behind the Gestalt approach is consistent with your theoretical notions of a counsellor.

**Required Readings**

The text reading for this lesson is Chapter 10 of *Current Psychotherapies*, Corsini and Wedding (2011).

I have uploaded this chapter on “Sharing site” and can be accessed through:

<http://www.keepandshare.com/doc/5000261/chapter-10-corsini-and-wedding-2011-pdf-2-2-meg>

[**Enns (1987)**](http://search.ebscohost.com/login.aspx?direct=true&db=a9h&AN=4962025&site=ehost-live)

<http://www.keepandshare.com/doc/5027351/enns-1987-pdf-998k>

[**Harman (1988)**](http://search.ebscohost.com/login.aspx?direct=true&db=a9h&AN=4961991&site=ehost-live).

<http://www.keepandshare.com/doc/5027349/harman-1988-pdf-315k>

Read the chapter before you begin to work on the lesson in order to get an overview of the theory. Supplement the textbook material by reading the articles by [**Enns (1987)**](http://search.ebscohost.com/login.aspx?direct=true&db=a9h&AN=4962025&site=ehost-live) and [**Harman (1988)**](http://search.ebscohost.com/login.aspx?direct=true&db=a9h&AN=4961991&site=ehost-live).

**Basic Concepts**

* Awareness
* Organismic Self-Regulation
* Unfinished Business
* Here-and-Now
* Field Theory (Figure and Ground)
* Interruptions to Contact (Disturbances at the Boundary)
* Gestalt
* Layers of Neurosis: Phony, Phobic, Impasse, Implosive, Explosive

**Basic Assumptions**

The individual is considered a system in balance. In other words, the mind, body, and feelings are one. While learning is discovering and experiencing, the individual is responsible for his or her own behaviour and choices. As other humanistic approaches do, Gestalt theory recognizes the existence of an innate drive towards wholeness and self-actualization, or an urge to complete.

**Causation**

*Heredity vs. Environment*: Heredity plays no active role in Gestalt therapy. The dominant need (figure) emerges from ground, then recedes (satisfaction). Individuals are a part of their own environment and cannot be understood separate from it. Current awareness and actualization involves the meaningful integration and harmony between the person and his or her environment (Baruth & Robinson, 1987).

*Cognitions*: The world is defined by the subjective reality of the individual's perceptions. The mind or consciousness is understood in terms of its intentionality. Preoccupation with asking "why" things happen prevents people from experiencing "how" they happen.

*Motivation*: The focus is on growth and increased awareness. Everyone has only one inherent goal: to self-actualize. Rogers's definition of self-actualization is "striving to become all that one is capable of becoming". Kempler (cited in Hansen, Rossberg, & Cramer, 1994) changes slightly that emphasis in his Gestalt definition of self-actualization: "becoming is the process of being what one is and not a process of striving to become".

**Time Orientation**

In Gestalt therapy, the past is important insofar as it is represented in the present. An excessive attention to the past may lead to the error of blaming the past as being responsible for what is happening in the present. Similarly, living with a focus on the future often results in not seeing what is at hand. Individuals who stray from the present and become preoccupied with the future are more likely to experience anxiety (Baruth & Robinson, 1987). Therefore, Gestalt therapy focuses on the immediate experience of the individual in the here-and-now.

**View of Human Nature**

Humans are not independent from the environment and they are always in the process of evolving. Gestalt therapy believes that people are inherently self-regulating and growth-oriented. Existential human concerns, such as connection and separation, life and death, choice and responsibility, authenticity and freedom, are all at the centre of the therapeutic process. Gestalt therapy attempts to understand human beings by the study of experience.

**Preference for Explanations**

*Holistic vs. Atomistic*: A person can only be understood as a whole. The whole is qualitatively different from and more than the sum of its parts. People behave in holistic fashion and they have the capacity to regulate themselves. Holism and field theory are interrelated in Gestalt theory.

*External vs. Internal Determinants*: Gestalt therapy focuses on the client's awareness and internal frame of reference. At the same time, this theory regards awareness and human relations as inseparable. People define themselves by how they experience themselves in relation to others.

*Nomothetic vs. Idiographic*: The emphasis is on the uniqueness of the individuals. People create and constitute their own worlds. As such, Gestalt therapy is highly committed to the validity of the client?s subjective reality.

*Longitudinal vs. Cross Sectional*: The emphasis is on the present (here-and-now) and on the awareness of current experiences. However, the role of the past is not ignored in Gestalt therapy, which recognizes the effect of unfinished business and other past experiences.

*Tension Production vs. Reduction*: Gestalt therapy is known as an experiential therapy and attempts to increase the clients' awareness through experimenting, enacting, and role-plays. The technique of exaggeration is sometimes used to intensify feelings and increase awareness.

**Observer's Frame of Reference**

The focus is on the here-and-now and the what. The therapist would work with what is in front of him or her.

**Bases for Inference**

Gestalt theory is not invested in predicting future behaviour. The emphasis is on self-awareness and the uniqueness of the individual.

**Bases for Psychopathology**

Gestalt therapy is centred on increasing the client's awareness of how psychological distress manifests itself, rather than explaining why it may have developed in the first place. According to Gestalt theory, there are several manifestations of psychological distress:

* repeated experiencing of *unfinished business* (incomplete Gestalt);
* lack of awareness of the *need to complete* (fixed Gestalt), leading to the development of neurosis;
* *repetition compulsion*: a neurotic attempt to meet the original unsatisfied need (can be seen in the exercise of a maladaptive behavioural leitmotif);
* the *five layers of neurosis* interfere with the individual's capacity for authenticity;
* *interruptions to contact* (also called *disturbances at the boundary*) represent a failure to develop meaningful, genuine, and committed relationships, through a variety of maladaptive strategies (comparable, but not identical, to the maladaptive defense mechanisms in psychoanalytic theory):
  + *introjection*: rigid assimilation of external values, preventing the individual from developing his/her own personality;
  + *deflection*: inability to focus on the important figure out of the ground;
  + *unaware projection*: planning, anticipating, and empathizing are normal, but unaware projection of negative attributes onto others is neurotic;
  + *confluence*: impaired sense of differentiation between self and the world/others;
  + *desensitization*: numbing of oneself (similar to denial or repression in psychodynamic theory);
  + *retroflection*: doing to yourself what you originally did/wanted to do to others (akin to masochism in psychoanalytic theory);
  + *proflection*: doing to others what you would like them to do to you.

**Bases for Healthy Personality**

The healthy individual finishes Gestalts, is integrated, self-aware, authentic, self-supportive, and responsible. The healthy individual is also engaged in meaningful, genuine, and committed relationships.

**Role of Therapist**

The Gestalt therapist is very active in helping the client overcome barriers to awareness, re-enact past experiences and create adaptive endings to previously unfinished business. Particularly in psychodrama, a Gestalt-based modality of group psychotherapy developed by Jacob Levy Moreno (1889-1974), the therapist acts as a director of role-play re-enactments of clients' experiences. The approach is highly experiential, often anxiety producing, and geared towards increased self-awareness and resolution. Because of the high emotional involvement on the part of the clients, the psychodrama therapist is particularly mindful of and trained in safeguarding clients' boundaries and integrity, containing emotional abreactions in the group setting, and overall ensuring safety and a corrective therapeutic experience. An informative article on the current developments in psychodrama by Blatner (1997) is entitled "Psychodrama: The State of the Art".

**Implications for Helping Relationship**

The Gestalt therapist encourages experiential learning. The length of a Gestalt-oriented treatment varies widely, depending on clients' goals and the therapy format (individual, couples, or group). There are many institutes and schools all over the world offering training in Gestalt therapy.

**Goals of Helping**

The main goal of helping is to move the client from environmental support to self-support and to assist the client in gaining awareness of moment-to-moment experiencing. With awareness, the client is able to recognize denied aspects of self and thus proceed toward reintegration of all parts of the self. Perls likened the therapeutic process towards increased authenticity with the peeling of an onion, following an unfolding of "layers of neurosis":

* Phony layer - stereotypical and inauthentic
* Phobic layer - fears keep us from seeing ourselves
* Impasse layer - we give up our power
* Implosive layer - we fully experience our deadness
* Explosive layer - we let go of phony roles

**Techniques and Procedures**

Techniques focus on the intensification of experiencing and aim at the integration of conflicting feelings or conflicting parts of oneself. The client engages in role-playing. By playing out all the various parts and polarities alternatively, the client gains greater awareness of the conflicts within him/herself. The following are some techniques frequently employed by Gestalt therapists:

* "I take responsibility"
* Focusing
* Making the rounds
* The empty-chair technique
* The two-chairs technique
* Exaggeration
* Enactment
* Role rehearsal and role reversal
* Internal dialogue exercise

Most of the Gestalt techniques listed above are well explained in your textbook. However, I would like to make some clarifcations about the empty-chair technique and the two-chairs technique, which are not fully addressed by Yontef and Jacobs (2008). Both techniques are examples of the internal dialogue intervention; however, there is an important difference between the two.

Ideally, the aim of the empty-chair technique is to help the client process some unfinished business. A possible example of unfinished business would be when a client is saying something like: "I am so saddened by the unexpected death of my grandmother--while she was alive, I never did get a chance to tell her how much I loved her." Then the counsellor would invite the client to imagine grandmother seated in an empty chair and the client would have an opportunity to symbolically talk to the deceased person and, by doing so, attain some sense of closure.

Notice that in processing an unfinished business through the empty-chair technique there is no shuffling from one chair to another, there is no dilemma, or conflict between opposite or suppressed parts of oneself. On the contrary, as indicated in the definitions of terms included in the online Glossary, the purpose of the two-chairs intervention is to help the client integrate apparently conflicting wishes or parts of himself/herself. When there is something worth preserving from each side of a client's inner conflict (initially expressed as an irreconcilable polarity), then the goal of therapy becomes helping the client arrive at a livable compromise, or an integrated realistic understanding that healthy psychological functioning does not have to be a matter of choosing between extremes or absolutes. The two chairs symbolically represent the two initially opposite poles of the client's inner conflict. Inviting the client to move from one chair to the other and to experience each position fully can help the client gradually identify ways in which the two seemingly irreconcilable positions may be integrated, or ways in which an acceptable compromise can be reached.

**Learning Activities**

1. Based on the article by Enns (1987), formulate your own feminist critique of Gestalt therapy. Then, list the possible points of intersection between the Gestalt approach and feminist values.
2. Harman's (1988) response to Enns' (1987) position is very critical of Enns' over-reliance on technique. Do you think that Harman's criticism is justified?
3. Compare and contrast the psychoanalytic concepts of maladaptive ego defense mechanisms and the Gestalt notions of boundary disturbances.

**Study Questions**

1. What are the key characteristics that distinguish the Gestalt approach?
2. Compare and contrast how a Gestalt therapist and a psychoanalyst would work with a client's past.
3. What Gestalt technique(s) would you apply in order to help a client bring closure to an unfinished business?
4. Discuss the concept of the "here-and-now" as it relates to Gestalt.
5. Alfred Adler has been often labeled as a forerunner of humanistic psychology. Identify some of the phenomenological undercurrents that Gestalt therapy and Adler's approach have in common.

**References:**

Baruth, L. G., & Robinson, E. H. (1987). *An introduction to the counseling profession*. Englewood Cliffs, NJ: Prentice Hall.

Blatner, A. (1997). Psychodrama: The state of the art. *The Arts in Psychotherapy, 24*, 23-30.

Clarkson, P., & Mackewn, J. (1993). *Fritz Perls*. London: Sage.

Enns, C. Z. (1987). Gestalt therapy and feminist therapy: A proposed integration. *Journal of Counseling and Development, 66,* 93-95.

Hansen, J. C., Rossberg, R. H., & Cramer, S. H. (1994). *Counseling: Theory and process* (5th edition). Shelburne, VT: Allyn and Bacon.

Harman, R. L. (1988). A response to "Gestalt therapy and feminist theory: A proposed integration". *Journal of Counseling and Development, 66*, 487.

Perls, F. S., & Stevens, J. O. (1969a). *Gestalt therapy verbatim*. Lafayette, CA: Real People Press.

Perls, F. S. (1969b). *In and out of the garbage pail*. Maob, UT: Real People Press.

Yontef, G., & Jacobs, L. (2008). Gestalt therapy. In R. J. Cosini and D. Wedding (Eds.), *Current psychotherapies* (8th edition) (pp. 328-367). Belmont, CA: Thomson Brooks/Cole.

**Useful Links:**

The Gestalt Directory - Canada. Web page: [**http://www.gestalttherapy.net/listings/index.html**](http://www.gestalttherapy.net/listings/index.html)

The Gestalt Therapy Page. Website: [**http://www.gestalt.org/**](http://www.gestalt.org/)

A nearly forgotten interview with Fritz Perls. Gestalt Institute of Cologne, Germany. Website: [**http://www.gestalt.de/english/fritz\_perls.html**](http://www.gestalt.de/english/fritz_perls.html)

The American Society of Group Psychotherapy & Psychodrama. Website: [**http://www.asgpp.org/**](http://www.asgpp.org/)

Psychodrama Training Institute of South Australia. Website: [**https://amcsa.s3.amazonaws.com/index.html**](https://amcsa.s3.amazonaws.com/index.html)

British Psychodrama Association. Website: [**http://www.psychodrama.org.uk/index.php**](http://www.psychodrama.org.uk/index.php)