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Editorial

This year sees the publication of the 25th volume of the *British Gestalt Journal*. Around 285 articles have been published in this time, the work of over 200 different authors. Judging from the popularity of the digital downloads available from the website, many of these continue to be read and studied as avidly as ever.

From time to time, editions of the Journal have had a special focus, and these have covered issues like shame, sexuality, brief therapy, organisational consultancy, research, embodiment, education and working with children and young people. Malcolm Parlett, in his first editorial, explained that the BGJ was started because there was a need for more of a written tradition in Gestalt therapy. Poignantly, he was writing just after the death of Laura Perls, to whom the first issue was dedicated. Setting out his rationale for the Journal, Malcolm wrote,

... there is an urgent need for Gestaltists to describe and explain Gestalt in ways which do justice to it, and which show how solid is its foundation in existentialist and phenomenological thought, field theory, psychoanalysis, holism and gestalt psychology. We need to show connections between Gestalt theory and Gestalt practice, and build bridges to the rest of psychotherapy and other fields of applications.

A glance back at the contents of a quarter of a century of back issues, now easily accessible on the website, reveals how closely the concerns of the Journal have followed this initial call. The key thinkers and writers of the post-founding generation of Gestalt therapy are represented here, often in original peer-reviewed, articles, which have then gone on to be developed into full-length books, or included in edited collections. In recent years, newer voices have found their place, and there has been a deliberate editorial policy to seek out and encourage the next generation of Gestalt practitioners and leaders to contribute through writing and publication. This applies not only to British authors but also internationally, and this is increasingly reflected in the published contents.

There is certainly much for the Gestalt community to feel proud of and to celebrate in this 25th year of the BGJ. An international conference highlighting this is being organised by the United Kingdom Association for Gestalt Practitioners and will take place on 30 June–2 July 2017.

Turning to the contents of this issue, it can be seen to

reflect the mix of interests set out in the Journal's early agenda. In this twenty-fifth year of the Journal, it is appropriate to honour the work of Malcolm Parlett, who was the formative first editor of the BGJ until 2006. The interview with him gives, from his own perspective, an illuminating personal glimpse into the history of Gestalt in the UK, and an insight into the early days of the *British Gestalt Journal*. His recently published book *Future Sense: Five Explorations of Whole Intelligence for a World That's Waking Up* brings together and develops many of the themes for which he is well-known in the Gestalt community, since he published his first article in 1991, 'Reflections on Field Theory' in the *British Gestalt Journal* (1:2). The book *Five Senses* is reviewed here in some depth by Sally Denham-Vaughan. Kiran Chitta, a new author, currently living in Singapore, explores in his article how Parlett's concept of 'whole intelligence' might be applied within Chitta's own field as an organisational change and development consultant.

As promised in the last issue, we give space here to remember and honour the life of Ken Evans. He was one of Malcolm Parlett's early trainees. Evans played a significant role in the development of Gestalt in the UK, not least in setting up the Sherwood Psychotherapy Training Institute in Nottingham, and later moving on to develop training in Scarborough, as well as being influential in the politics of psychotherapy at a national level. Latterly, living in France he has been better known in Continental Europe, establishing many training courses and having a huge effect on developments in the profession as well as in individual people's lives. Maria Gilbert who, like Parlett, knew Ken Evans from when he was a trainee, and went on to be a co-author and fellow trainer with him, writes a warm and appreciative tribute setting out details of his achievements and contributions. Maggie Maronitis's letter is a personal response, representative of many who knew and loved this remarkable colleague.

In terms of theory and practice, we publish a significant paper co-authored by Gary Yontef and Friedemann Schulz. They discuss two ways of working – the dialogic method and experimental intervention, both of which have strong support within the Gestalt approach, but which are often juxtaposed as dichotomies. Yontef and Schulz examine the open-ended nature of behavioural experimentation, as opposed to it being goal-driven. They argue that Gestalt therapy integrates both rela-

tional and behavioural approaches in a way that is theoretically consistent.

Madeleine Fogarty et al. are making an important original contribution to the research literature on Gestalt therapy by developing a fidelity scale which identifies key concepts in this modality and how therapists work with them. The aim is to be able to define what is distinctive about Gestalt therapy in practice. This would enable more accurate outcome and comparative studies to be carried out which would relate specifically to Gestalt therapy as a distinctive practice. Fogarty et al.'s research draws widely on respondents from the international Gestalt community, and the paper published in this issue sets out the method they used to develop this measurement.

As usual the issue includes other letters and book reviews. A Norwegian reader, Birgitte Gjestvang writes a letter on large groups responding to a previous article by Adam Kincl. The other book reviews are a comparison by Sarah Paul of two works on the self-care of the therapist, and a response by Di Hodgson to a collection of interviews with senior female Gestalt therapists. The opinion piece in this issue is a personal account of one therapist's life journey coming to terms with early introjections and the pervasive impact of childhood experiences.

There are changes taking place within the Editorial team as we say goodbye to Katy Wakelin, one of our

Assistant Editors who has worked on the BGC for the past twelve years. She is a gifted editor with a sharp eye for detail and has supported and advised many authors and book reviewers over the years. Her work has been offered on a voluntary basis and we are deeply grateful for her professionalism and commitment. She continues to be a warmly valued colleague and we wish her every success in her future endeavours.

A particular need we have in the BGC production team is to widen our pool of peer reviewers. This is a very important part of the process of publishing original articles, ensuring the quality of the content and writing and maintaining relevance to the international readership. It is invaluable for authors who may not otherwise have the opportunity to receive formative feedback from their peers, and for the reviewers it forms part of their own professional development, and provides them with an active role in the development of new writing in our field. In general peer reviewers will already be published authors, although they are sometimes experienced clinicians with specialist knowledge. Please get in touch if you are able to contribute to the work of the BGC and support the Gestalt community in this way.

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Obituary

In memory of Kenneth Evans: a tribute

Maria Gilbert

Ken Evans died of heart failure on 15th July 2015, shortly before his 69th birthday. He is deeply missed and deeply grieved by many people: family, friends, grandchildren, colleagues and students.

I knew Ken Evans as creative, innovative and energetic. He enjoyed initiating new projects. This was balanced by a compassionate, kind and committed energy to his students. He loved his teaching, which was evident in his lively warm presence in the training room. In the words of his wife Joanna, 'He was so loved by trainees all over Europe. Wherever I go people want to tell me stories about the work he did with them, the meaning he had for them in their lives and how seen and supported they felt by him.' This dedication to the welfare of his students was immediately evident in his commitment to his work as a teacher when he talked or wrote about psychotherapy and supervision. Ken regularly moved on to new projects throughout his professional career with a speed that left me breathless at times; and at the same time, I very much appreciate the significant contribution that he has made to the development of psychotherapy in Europe.

I first met Ken Evans thirty years ago when I arrived from South Africa at Metanoia in West London where he was engaged in doing the Gestalt Psychotherapy Training programme that had been established there just before my arrival. I did some teaching on the programme and got to know him first in that capacity. He was certainly amongst the first graduates from that programme. I have some photographs from that time of a young, enthusiastic Ken Evans entering a new field of interest. Ken's enthusiasm remained unabated over the years of our acquaintance, as the man grew older and wiser!

Once a graduate, Ken started the Sherwood Psychotherapy Training Institute (SPTI) where he developed a range of training programmes from Gestalt to Integrative to Supervision. I recall being intrigued by the choice of name. It was certainly distinctive and immediately memorable and most people would instantaneously associate it with Sherwood Forest and so with Nottingham. There was also for me, with my literary back-

ground, the other association with Robin Hood of Sherwood Forest. I could then, and now, see some validity in the metaphor. Ken was committed to assisting the disadvantaged, those who needed support and encouragement to own their authority and their rights as people and as professionals. This commitment persisted through the time that I knew him.

I was at that time involved in developing the Metanoia Institute with the three original South African founders. However, Ken managed to persuade me to come and do some teaching at Sherwood at the same time and supervise some groups. This experience gave me a very good sense of the ethos of the SPTI training as a place where students were offered an in-depth experiential growth experience linked to good, sound teaching. What I recall most vividly was the interface between a focus on the immediacy of the encounter, a focus on the present moment in the room, and Ken's interest in the person's developmental history as that unfolded in the process. I enjoyed my supervision groups at Sherwood, which gave me a good sense of Ken's capacity to engage his students in self-reflection and phenomenological enquiry as professionals. This fits for me with my experience of Ken as a person, a teacher, and a writer; his focus on the immediacy of the here and now, the process unfolding between him and the other. In all his interactions, this was always in evidence. In my years of relating to Ken in a variety of contexts, and my experience of being a co-author with him, this focus remained central for him in his philosophy of practice.

At first when I went to Nottingham I used to stay with Ken and Marie, his first wife, who welcomed me into their home. I was sadly also around when she contracted cancer and then died after extensive treatment. At this point I stayed elsewhere as Marie needed the space both literally and figuratively in their home. Ken supported her through that painful time involving cancer treatments with some remission but finally ending in her death. He wrote about this experience in his poignant article *Living with Dying*, published in the *British Gestalt Journal* in 2000 (Vol 9, no 2, pp. 87–97). My memory of her funeral remains with me – the grief of the family so in the field and the deep loss to all those present. As an Afrikaans South African by origin and with my experience of the African culture, I was used to much singing and wailing at funerals as people expressed their grief very overtly. What struck me first at Marie's funeral was the silence as she was buried.

Then the family members paid oral tributes in a very subdued and contained and deeply moving manner. This is one of my most memorable first experiences of living in a different culture from my own, especially as I had been ready to join in expressing my grief through singing and expressive grieving!

Ken stayed on at SPTI for a while after Marie's death and then later he moved to Scarborough from Nottingham where he was involved with Scarborough Psychotherapy Training Institute (SCPTI) for some years. Again for me there was that sense of constant movement into new projects where he made his contribution and then moved on. I recall wondering whether he would ever settle in one place and enjoy the sense of peace! Ken bought and became director of The Scarborough Institute in 2002, running both Gestalt and Integrative Psychotherapy programmes, a Therapeutic Counselling programme and a Supervision programme. I believe he stepped back in 2005, in the sense that he became Director of Training, although he was still teaching on all the programmes. Ken enjoyed living in Scarborough, living by the sea and building up the Institute, and made many good connections there. He then moved on to new pastures.

Ken and Joanna were married in August 2007. In 2009, Ken began building up a flock of sheep at the farm he had bought in Normandy. This gradually became their main home and was always open house to many visitors. He mentioned to me very recently that he wanted to retire and become a full-time sheep farmer. I expressed some amazement at this decision, such a contrast to his other activities.

Ken was active in Europe in the European Association for Gestalt Therapy (EAGT), the European Association for Integrative Psychotherapy (EAIP), and latterly the European Association for Psychotherapy (EAP). He was also very active generally in the politics of psychotherapy developments in Europe. Ken contributed to developing psychotherapy in Europe both on the Gestalt and integrative fronts. Ken was the EAGT President from 2002 to 2008. I believe that his most important contribution to the EAGT was to change its structure: he had the vision of creating a large governing board constituted by the Executive Committee and the representatives from the different countries (that have a National Association). Before that the national representatives were a consulting and not a governing board. Another important action was to create the Human Rights and Social Responsibility Committee. In 2009, Ken was awarded the DPsych in Public Works from the Metanoia Institute, a doctorate validated by Middlesex University. His thesis, which was a reflexive account of his achievements, was entitled *Contributing to the Development of Psychotherapy as a Profession in Europe 1987–2008*.

Ken and I were instrumental in starting the European Association for Integrative Psychotherapy (EAIP), the first organisation to be recognised as a European Wide Accrediting Organisation by the EAP. He was the first President of EAIP and then recently returned to the post of President to inject new energy into the association. He very actively recruited and supported new members to join the EAIP, which continues to flourish under the leadership of Bruno Van den Bosch. His contribution to EAIP has been valued and appreciated over the years. I respected the energy with which he committed himself to developing the organisation over many years with the support of the other dedicated members.

Once in Normandy, he also developed the European Centre for Psychotherapeutic Studies (EUROCPS) in Jersey where he ran an Integrative Psychotherapy Training Programme, and then later in Serbia. He also latterly ran supervision programmes and children's psychotherapy training programmes across Europe. He very actively supported the development of institutes across Europe, particularly in Romania and also including Croatia, Bosnia, Malta, Greece and Norway. He was a visiting trainer in many countries. He was particularly keen to develop the thinking he had around 'You are therefore I am'. He also founded and was passionate about the European Interdisciplinary Association for Therapeutic Services with Children and Young People (EIATSCYP) and was president of this organisation as well as EAIP when he died.

Joanna Hewitt-Evans, Ken's wife, was a very active supporter of Ken in all their joint training activities. Although she did not fully share his enthusiasm for sheep farming she did support him at busy times like lambing, checking the lambing shed during cold April nights. During the lambing season Ken made sure that he was around to 'deliver' the lambs and make sure that they were safely born into the world. I imagined Ken sitting there with the ewe patiently through the night awaiting the delivery. This required a devotion to lambing that amazed me! I admired this as an activity that was very far from my range of preferences.

Once the programme in Jersey was up and running, Ken applied to have the European Centre for Psychotherapeutic Studies (EUROCPS) recognised as a European Accredited Psychotherapy Training Institute. At that time I was the only Integrative Psychotherapy assessor on the EAP Training Accreditation Committee (TAC) so I was asked to be one of the assessors for this assessment, which required an Integrative presence. This was a really interesting experience for me as one of my remits was to sit in on training sessions. I sat in on both Ken's and Joanna's sessions which gave me a good sense of their very competent and relational style of engaging. I also had the opportunity of meeting some of the students and hearing directly of their rewarding

experience on this programme. I valued this first-hand experience of their competence and engagement in the learning process.

I think of my relationship with Ken very much as a kinship one. I am/was eight years older than Ken and for me he felt very much like the younger brother I would have liked. Joanna says that he also said that 'Maria is like the sister that I always wished for'. This kinship element fostered our relationship over the years, with me as the older sister and Ken as the younger brother. The 'sibling' element of our relationship gave us the space to have spats and to disagree and then to make up. We often disagreed about how to proceed, Ken wanting to move forward at once, and me pleading for some caution and reflective time before we went forward! In retrospect I can now see that this was a strategy that worked effectively, capitalising on both our strengths and compensating for our weaknesses.

In August 2005 he and I went together to a World Congress of Psychotherapy in Buenos Aires in Argentina. In addition to attending the conference, we spent a good deal of time sightseeing, dining out and relaxing. I saw the playful side of Ken at this time as we allowed our curiosity to take us to different places of interest. I even persuaded him (under sufferance) to come shopping with me, as Buenos Aires offered such an interesting variety. I still have a blouse that we chose and a pair of shoes and a handbag! It was here that I also learnt about another side of Ken. One afternoon it was raining and I slipped and fell near the pavement as I was crossing the street. I had hurt my knee and Ken started laughing. I was irritated and said 'this is not funny!' He warmly apologised and we went on to have a relaxed supper!

In retrospect I realise that he may also have minimised his own suffering in this way as a protective strategy. And then I recalled that he had written an absorbing article on Healing Shame: A Gestalt Perspective for the *Transactional Analysis Journal* in April 1994. This article is an experience-near and heartfelt account of a person's experience of shame and the treatment of shame in psychotherapy. What occurred to me then was how often what we write about helps us focus on and gradually integrate some part of ourselves.

Ken was not a person who easily took advice from others. He was headstrong, principled and sure of his position, so challenging that stance took some courage on the part of others around him. I would recognise that steely look when he was set on a path and few would interfere! What amazed me was that I was on occasion allowed to challenge him from my role as his 'older sister' and he would listen to my point of view and consider it, albeit at times with some anger and irritation. I guess this was part of a good kinship relationship, that sisters and brothers remain around and tolerate each other's foibles. I was also given the liberty to

comment on his choice of partner! I heartily welcomed his choice of Joanna as a trustworthy and emotionally grounded person. I had met her first in one of my supervision groups at Sherwood and was well acquainted with her respectful, loving style of relating to others. I celebrated Ken's choice!

Ken and I had a very productive relationship over many years as co-authors. We wrote two books and many chapters in edited series. We wrote about Integrative Psychotherapy, Gestalt Psychotherapy, and Supervision. Details of our two books are as follows: Gilbert, M. and Evans, K. (2000), *Psychotherapy Supervision: An Integrative Relational Approach to Psychotherapy Supervision*, Buckingham: Open University Press; and Evans, K. and Gilbert, M. (2005), *Integrative Psychotherapy: An Introduction to Integrative Psychotherapy*, Basingstoke: Palgrave Macmillan.

This collaboration as co-authors worked really well for us, especially as we would sometimes have slightly different emphases. Our last chapter was for a book edited by Divine Charura and Stephen Paul, *The Therapeutic Relationship Handbook* published in 2014, and entitled 'An integrative approach to the psychotherapeutic relationship; therapeutic challenges and successes'. What I appreciated about Ken as a co-author was the hard work that he put in to this endeavour and the immediacy of his response. I never waited long to hear from him and in that way we were well matched. I miss him very much in this role as well, as we developed such a good working alliance. I do recall him contacting me a number of times saying 'I have been approached to write a chapter on . . . and I decided it would be best if we did this together', and thinking 'not again!' I appreciated his indefatigable energy and his willingness to engage in new projects that were central to his character in all fields of endeavour. He always managed to persuade me to collaborate after my brief hesitation. Soon after moving to Normandy he also wrote a very interesting book with Linda Finlay entitled *Relational-centred Research for Psychotherapists: Exploring Meanings and Experience* which has been a significant contribution to the relational research field.

Ken was originally trained as a social worker and employed as a local authority Principal Social Worker/Team Leader for several years prior to studying as an Anglican priest in Cambridge. His career therefore involved an initial career as a probation officer and senior social worker. Ken then became a clergyman, a minister of religion in a parish setting and subsequently a Mental Health Chaplain. Once he had moved to psychotherapy and training, he always retained a sense of faith, a spiritual dimension, but this was non-institutional and his faith continued to inform what he undertook in the widest sense.

Most recently he was committed to building up the farm in Normandy as an eco-friendly centre, combining this with his devotion to his sheep! And more latterly he was involved in a commitment to the development of interspecies work. He had been invited to give a keynote address for an Integrative Association in Ghent in Belgium on 24th October 2015 when he was to receive their 'Maslow' award for his contribution to the profession. He had intended to do his keynote on 'Interspecies Psychotherapy'. I was there when the award was given to Ken posthumously. It was very moving when Joanna accepted it on his behalf. Clearly this was a community where Ken was greatly valued.

Ken had started to develop a constitution for what he envisaged as a new European Organisation for Interspecies Psychotherapy. He had been working very excitedly on this during his last few weeks. It grew out of plans to offer training in this area in the United Kingdom and other parts of Europe in 2016, built on what he had aspired to with the farm and the sheep. He was (when at home) out in all weathers building and mending fences, planting trees for the future and tending to the sheep. He was always trying to balance his love of the land with his passion for psychotherapy. He was a proud and loving grandfather and wanted a better world for his grandchildren.

What follows is a brief statement he made about

'Interspecies Psychotherapy and Building this Awareness':

A cultural shift of paradigmatic dimension is urgently needed to change attitudes and extend a life quality belief that extends I-Thou mutuality to all human beings and beyond to include the natural world and its non-human species. This requires an immediate turning away from the pursuit of a reductionist and objectifying drive for an ever-increasing standard of living. This much needed cultural shift away from ego to eco means a new consciousness, a new comprehension that the existence, well-being and flourishing of all human and non-human life on Earth has intrinsic-inherent value.

Ken was an exceptional person, an inspiring trainer and a good friend; I miss him on many levels, both personally and professionally. I consider his death as a great loss to our field of endeavour.

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Dialogue and experiment

Gary Yontef and Friedemann Schulz¹

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Abstract: This paper discusses the compatibility of Martin Buber's dialogic method and active Gestalt therapy interventions, which are called experiments. The authors trace a brief history of the distinction between different psychotherapy systems which focus on the therapeutic relationship on the one hand or on active behavioural interventions on the other. They submit Gestalt therapy as a modality that integrates these seeming polarities, and they discuss the theoretical and practical consistency between the dialogic method, Gestalt therapy's change theory ('the paradoxical theory of change'), the phenomenological method, and Gestalt therapy experiments. It is the authors' opinion that Gestalt therapy experiments do not aim for preset behavioural goals, but that they are in complete alignment with Gestalt therapy's dialogic attitude. A definition of the term Gestalt therapy experiment is given, and its different uses are illustrated. The concept of resistance is examined in light of Gestalt therapy's treatment philosophy. Indications as well as cautions regarding the use of Gestalt therapy experiments are outlined and different types of experiments, including specific examples, are provided.

Key words: Gestalt therapy, dialogic method, experiments, paradoxical theory of change, contact, awareness.

Introduction

Systems of psychotherapy tend either to emphasise the therapeutic relationship, focusing on understanding that emerges from the relationship itself, or to organise around therapist-controlled techniques that aim to reach preset behavioural goals. Gestalt therapy brings together a dialogic approach and the use of active techniques (which are called experiments). The integration is that experiments are variations in investigation that aim for understanding rather than for a direct change of behaviour.

A complete theory of psychotherapy includes a concept of what constitutes a good therapeutic relationship, a theory and methodology of consciousness, and guidelines about what interventions or techniques are consistent with the approach. On the surface, therapy systems that organise around the therapeutic relationship and growth through understanding appear antithetical to approaches that focus on the use of active techniques aimed at changing targeted behaviour. In the former, the emphasis is on understanding the client's experience and behaviour, recognising, understanding and accepting the client's subjectivity, and valuing growth emerging from that relational process.

The relational perspective of Gestalt therapy has a

systematic theory, a methodology for integrating dialogic relationship and active/creative techniques (Yontef and Jacobs, 2010). These theoretical elements include an experimental phenomenological attitude and careful attention to immediate experience. Dialogical relating and experimental phenomenological methodology are grounded in the principle of contemporaneity.² Active techniques and a relationship-oriented search for understanding can work together effectively in an approach organised around phenomenological experimenting and careful attention to what is experienced here and now. In Gestalt therapy experiments, as in dialogue, the quality of contact and emergent clarity of awareness are key. Experiments are not measured by whether they reach preset goals but by how they add to understanding.

In this paper, we will consider some aspects of the historical/theoretical dichotomy between relational and behavioural approaches and how this split can be transcended through an approach that combines careful attention to the therapeutic relationship and the creative use of active techniques. We will discuss guidelines for the use of experiments in a relationship/insight-oriented therapy. Gestalt therapy's dialogic relationship, relational epistemology, phenomenological method, and experimental attitude will be discussed as the vehicle for this integration.

History

The schism between classical psychoanalysis and classical behaviour therapy

Modern psychotherapy was born out of early psychoanalysis and its definition of the therapeutic relationship, theory of consciousness, and specification of technique. In that early, classical approach, the client had the task of free-associating and the analyst intervened only by interpreting the transference. In this two-language system the language of the client was one of free association and the language of the analyst was limited to interpretation of the transference. Any other activity or technique by the analyst or client was considered a breach of the therapeutic frame, and was referred to as 'acting out'. In classical psychoanalysis, if the client had a viewpoint different from that of the analyst, he or she was usually seen as 'resistant'.

In contrast to this, early behaviourism only considered stimulus and response. Whether operant or classical conditioning was the paradigm for a particular treatment, the client's thoughts, experience, and feelings were not considered relevant or even regarded as data. Only interventions of classical or operant conditioning were included in the methodology. Early behaviour therapy manipulated stimuli to control responses, but growth in client awareness was not an intended part of this system.

The limitations of the accepted parameters of both the classical psychoanalytic system and classic behavioural system created a sharp dichotomy between psychoanalysis which centred on 'mind' and behaviourism which focused on material substance. Both manifested a Cartesian system of the isolated mind, separate from the body and others. The choice was between understanding of the transference neurosis through interpretation and changing behaviour directly by controlling stimuli. Rigidly defining methodology and excluding all but orthodoxy not only made an integrated methodology impossible, but also limited growth and expansion in both methods.

Revolution of the 1960s

Alternatives to this dualistic dichotomy appeared in the 1960s and became quite popular. They featured growth through active contact between therapist and client along with active techniques. At the time, the alternative approach was called the Third Force, which included Gestalt therapy. The theories and practices of the Third Force varied, but all were alternatives to the psychoanalytic disembodied methodology and behaviourism's emphasis on control and exclusion of relational, affective, and cognitive factors. The theories and the practices of Third Force therapies were wildly eclectic in

their views on the therapeutic relationship and the range of techniques.

Third Force therapies favoured active techniques, often modelled and advocated confrontational modes of relating, and frequently used cathartic and theatrical techniques. These techniques promoted excitement. Emotions were expressed, often exaggerated, at times enshrined, and overly socialised people exploded in confrontation. Clients shouted, pounded pillows, talked to empty chairs, and vigorously confronted each other. The organising principle here seemed to be to bring the energy into the environment. For example, 'Lose your mind and come to your senses'.

The emphasis varied, but usually included a more active, personal, interpersonal and authentic engagement by the therapist, with more focus on contemporaneity, a greater attention to the awareness process rather than interpreting the unconscious, active observation and work with bodies, sensation, affect, and movement. A wide range of active interventions that were neither systematic behaviour modifications nor interpretations driven by classical drive theory were not only allowed, but encouraged. These included personal sharing by the therapist of his or her personal reactions and the creation of many active interventions.

However, the exact nature of the therapeutic relationship, the techniques, and the connection between them was only superficially explicated. Just how are the search for understanding, awareness, the therapeutic relationship, and these active techniques related? There were also contradictions. For example, many approaches emphasised individual self-definition and assertion, but used techniques that created group pressure encouraging conformity. Similarly, some theories of therapeutic relationships encouraged client self-esteem while using techniques that were shaming (Jacobs, 1989; Yontef, 1993). This necessitated clarification about the exact kind of contact that was effective, what specific understanding to seek and what methods to use in this search for understanding.

One-person versus two-person psychology

A key aspect of the growth and maturation of psychotherapy has been the shift from a 'one-person psychology' to a 'two-person psychology'. A one-person psychology emphasises the intrapsychic, a term developed in psychoanalytical theory that refers to the internal psychological processes of a person (Wallin, 2007, p. 168). This notion depends on a division of inner and outer experience and implies that a person's problems come from within him or herself, and are not relational phenomena. The change theory in the one-person model promotes the idea that the therapist's task is to fix the client and to help create the new person from inside.

However, in light of Gestalt therapy field theory and phenomenology, people are seen as inextricably interconnected and as part of a process of continual mutual influence (Schulz, 2013, p. 28; Yontef, 1993, p. 305). A shift to a two-person psychology moves the focus of our theoretical and clinical investigations away from the inner processes of a person and towards the relational dynamics that exist between people. Awareness is a relational event and ‘change does not occur by looking inward, but by what happens between people’ (Yontef, 1993, p. 33; Yontef, 2002). This shift has been integral to the renewed and increased emphasis on the relational in Gestalt therapy and in relational and intersubjective approaches to psychoanalysis (Wheeler and Ullman, 2009, p. 20; Stolorow et al., 2002, p. 85).

Awareness and contact

With the move from an individualistic to a relational approach, Gestalt therapy organised around the central theoretical concepts of awareness and contact (Perls et al., 1951, p. 8). In this model the ability to contact one’s world with awareness becomes the central concern, of which an essential aspect is knowing what one is in touch with. Phenomenological focusing and experimenting in Gestalt therapy are primary tools for clients to know what they are in contact with, to become mindful of their awareness process and to learn how they are relating to their life context.

Contact refers to the motor and sensory process that occurs between the person and the rest of the person/environment field. Awareness is a form of contact and is not something that happens inside a person, it is rather what happens between the person and the environment. Awareness always is awareness of something (Spinelli, 2005, p. 15). It reaches to the surround and is impacted by the surround.

Contact is regulated by a combination of habit/implicit awareness and focal awareness (Yontef, 1993, pp. 181–201). Most of a person’s self-regulation and contact functions move below the threshold of focal awareness and do not need our continued attention. But we do need explicit awareness when dealing with complex situations, when solving problems or when our habitual responses are not adequate.

Awareness in Gestalt therapy does not just refer to mental insights, but encompasses a holistic process that includes the entirety of a person’s capacities for contacting – the ability to use sensory, emotional and mental experiences to gather and process information and use it in his or her interactions with the world. This includes people knowing their choices and taking responsibility for these choices (Yontef, 1976, 1979 and 1993).

Focal awareness is archetypically articulated as, ‘I am aware that . . .’. Implicit awareness operates in the

background and refers to non-verbal awareness, regulation by the whole organism, and body processes. Optimally, these forces become figural as needed. When awareness does not develop as needed, inhibiting people learning from experience, psychotherapy is indicated.

The developing theory of how therapists and clients relate

The paradoxical theory of change

A cornerstone of contemporary relational Gestalt therapy is a theory of how people change. This theory is at variance with a common belief that to achieve growth or a cure, people have both to desire change and make efforts to be different from who they are. Therapists and clients alike often hold this attitude, and it is frequently also articulated in the professional and general literature. Gestalt therapy has a different perspective on how people change, one that is more consistent with its radical relational stance, called the paradoxical theory of change: ‘Change occurs when one becomes what he is, not when he tries to become what he is not’ (Beisser, 1970, p. 1). In order for fundamental and lasting change to occur, a person must become more aware of who he or she is. When someone identifies with their state of being, i.e. how they feel emotionally, how they experience their bodies, how they think, what they choose and how they behave, then the person is in touch with their existence. That promotes natural growth. Not knowing oneself or rejecting oneself leads to inner conflict and stagnation. In other words, people change and grow when they experience how they are in the world.

The paradoxical theory of change is not a method that specifies or forbids specific techniques, but it is both an empirical observation and an attitude. A therapist with the attitude of the paradoxical theory of change can work at building basic grounding, perhaps directing experiments to build core support, working with trauma, and so forth. The therapist works in the mode of working together, acceptance of the person’s essence and possibilities, and guiding the figure/ground process in a manner that supports organismic emergence rather than deciding outcome at the beginning and trying to behaviourally modify the client’s behaviour toward preset goals.

Gestalt therapy and Gestalt therapy training include learning to identify genuine experience and accept the actuality that is experienced. This involves experiencing personal struggles, working through painful emotions, being torn between options, reacting to the experience of shame, accepting compliments, and so on. For example, a client might feel conflicted about the continuation of her relationship with a boyfriend. She tries

to think through the 'pros and cons' but realises that this is not helping her clarify the issue. Following the principles of the paradoxical theory of change, the therapist might encourage her to pay attention to her emotional experience and to her bodily sensations while she discusses her relationship. She then might acknowledge her sadness over the potential loss of the relationship or feel the tension in her stomach as she imagines continuing it. Bringing any of those experiences into her awareness will help her to achieve a clearer sense of the situation and increases the possibility for her to make a decision consonant with her whole self.

People learn about themselves and learn to accept or reject themselves through their relationships with other people. The paradoxical theory of change requires a therapeutic relationship and a clinical methodology that work by helping clients know and accept themselves, and that support growth and exploration of new possibilities through self-awareness and self-acceptance.

The dialogic therapeutic relationship

The traditional one-person psychology viewpoint is of separate individuals who subsequently come together into various relationships. In Gestalt therapy, contact is considered primary and is the 'simplest and first reality' (Perls et al., 1951, p. 3). Gestalt therapy builds on post-Cartesian philosophy and the relational model of Martin Buber to understand the person as always being 'of the field'. In other words, neither the person contacting the environment nor the environment shaping the individual are primary, instead the simplest reality is the interface of person and environment – human and non-human.

In Buber's conception there is no self without the other. There is the I of the relational mode 'I-It' and the I of the relational mode 'I-Thou' (Buber, 1970, p. 54). But there is no 'I' existing alone. People always exist within a relational dynamic that influences the very experience of the 'I' – our sense of self.

Contact has been a core theoretical concept in Gestalt therapy theory since its beginnings, and the contact between therapist and client has been key to Gestalt therapy practice. In the freewheeling 1960s, a variety of contact styles were rampant, different from both classical psychoanalytic and behaviourist styles. But since then, the question of what kind of contact is therapeutic has been explicated in the Gestalt therapy literature.

Dialogue, as articulated in Martin Buber's philosophy, is a particular type of contact that is best suited to psychotherapy. Most relevant is the premise that the therapist meets the client, follows the client's experience, and does not aim for the client to be different. This is contact consistent with the paradoxical theory of change.

Gestalt therapy's dialogic method and attitude values the client's experience and offers the benefits of a genuine exchange, one in which there is an inherent egalitarianism and a fundamental reciprocity of influence. Buber believed that clients seek psychotherapy as a way to heal their relational deficits. His notion of the I-Thou refers to an approach of being with another person in which the relationship is an end in itself (Buber, 1970, p. 112). In the I-Thou mode, being in a relationship with one another is the crucial aspect of the relationship. An example might be a close friendship, which usually requires openness towards each other and toward one another's personal concerns. In the I-It mode of relating, in which the inter-human meeting serves a particular function, the other person is experienced more as an object (Buber, 1970, pp. 63, 64). An example might be an exchange with a cashier at the grocery store. In this situation, the cashier and the customer are usually not invested in their relating, but in getting through the business transaction.

Buber thought that we cannot function in the world without the I-It, but that we cannot be fully human without the I-Thou. It is helpful to see these two relational modes as part of a spectrum on which all human interactions exist, with each interaction containing at least some elements of both the I-It and I-Thou. Healthy relating requires flexibility and the ability to move along the I-It/I-Thou spectrum according to the needs of the situation.

For Buber, psychotherapy could enhance this flexibility, and his conception of the dialogic method has become an important resource for Gestalt therapists in their efforts to meet their clients.³ Meeting the client, in Buber's conceptualisation, was the path that promoted psychological healing.

In a dialogue-centred psychotherapy, the therapist works from the principle of existential meeting, i.e. meeting the client and being interested in what and how the client experiences. The orientation is to the present experience, the principle of contemporaneity, with careful attention to explicating the process of awareness, the behaviour, and the relationship as it changes over time. The therapist is present in an authentic manner, showing him or herself as a human being rather than a blank screen, an idealised person or a master manipulator of behaviour. Both the therapist and the client participate in a direct experience and gain a potentially healthier understanding of the self and how the self relates to the world, especially to other people.

Relational epistemology: phenomenology

Change in theory leads to changes in therapeutic interactions

As our underlying assumptions about human psychology change, so does our perspective on the psychotherapeutic relationship. These assumptions, including our beliefs and our values as therapists, influence how we view our clients and the issues they present in therapy. Therefore, our theoretical outlook guides our interactions with our clients and leads to specific therapeutic interventions. For instance, important guiding principles are at work underneath the simple question, 'How do you feel?' They include the belief that the client's subjective experience is important and that an understanding of the client's emotional life is an essential element of therapy.

Our therapeutic techniques reveal the principles and attitudes that support them. An example might be a theoretical shift towards a phenomenological approach that results in a changing methodology, such as the change from an expert-style interpretation (classical psychoanalysis) to the phenomenological exploration of contemporary and relationally oriented Gestalt therapy. With the advance of a non-hierarchical and increasingly collaborative philosophy of modern psychotherapy, the expert stance no longer seems sufficient to address the relational experiences of our clients.

Philosophic background

The classic dichotomy of working with relationship and understanding versus working directly with behaviour stems from the classic Cartesian philosophic stream that runs through Western culture. The integrative, relational approaches that emerged, including relational Gestalt therapy, are built on a post-Cartesian philosophy.

Relational Gestalt therapy is a system in which truth is always contextual, perspectival, probabilistic, and corrigible. This is contrary to the predominant belief throughout the history of Western thought, at least from the time of Plato, that Truth is absolute, i.e. that Truth is universal, necessary, certain, and is true in any time or any culture. Following that view, truth is not mere experience; it is what causes experience.

Relational Gestalt therapy is built on the epistemology of existential phenomenology, which attempts to understand human existence and consciousness. It studies the process of awareness in an attempt to distinguish between actual experience, assumptions, and expectations. The phenomenological method is the foundation for the integration of dialogue and experiment. Following this approach, perception,

memory, and knowledge are seen as joint constructions of the perceiver and the environment. We are not isolated minds, nor are we passive recipients of the external world. The whole person/environment field determines what we 'know' and do.

Therefore, we are always already 'of the field' and continually interact with our surround, affecting and being affected by it. Our minds are neither isolated from the outside world nor capable of knowing a logical reality that yields absolute truth.⁴

The experimental phenomenological method

The phenomenological method emphasises description rather than explanation (Spinelli, 2005, pp. 19–35). Epoché (bracketing), one of its elements, asks the practitioner to put aside his assumptions and biases about truth and fact in order to optimise his openness to new impressions. Existential phenomenology does not believe that bias can be eliminated. *What is suspended is the assumption that what one thought was true is indeed objectively true.*

Through this phenomenological method one becomes more open to experiencing the world at a moment of connection before assumptions, reflection, and interpretation. Part of the method is the rule of horizontalisation (Spinelli, 2005, p. 21). There is no a priori limitation on what is relevant data. A phenomenologist is open to a broad range of phenomena and everything observed or experienced is assumed to be relevant.

An expansion of the phenomenological method is experimental phenomenology (Ihde, 1986). In that phenomenology, one can systematically create variations, try something new, and use phenomenological focusing to see what one becomes aware of. The therapist or the client can suggest systematic observations or various experiments, so that the client can become clearer about what resonates as true for him or her. Part of the goal is to distinguish between what is invariant and what is merely a variation. When a client is observed doing something, such as lowering his voice when talking about his career, we can ask ourselves what this behaviour indicates. Is it random, or is it an example of an underlying and ongoing theme? In the experimental phenomenological method one can experiment in a variety of ways, and by looking at a process over time using repeated inquiries/observation and a variety of angles, one can get clarity on what is random and what is an ongoing pattern.

By using phenomenological inquiry and experimentation, not just interpretation, many clients eventually learn to do awareness work on their own. At advanced levels, clients become less dependent on the expertise of the therapist, more able to do work themselves, and thus more powerful co-investigators with the therapist.

For the therapist, this has the advantage that his beliefs, observations, and interpretations are tested against the client's experience.

Combining the relational and active behavioural approaches

Active behavioural methods are frequently conducted in a manner contrary to the principles of the paradoxical theory of change, and often undermine the client's self-recognition and acceptance. Clients often experience the suggestion of active techniques as an indication that the therapist thinks that they are not good enough as they are, thus reinforcing guilt, shame or a sense of failure. Moreover, this might establish the idea that the therapist knows the solution, the correct outcome and the way to get to that outcome, and will fix them. The paradoxical theory of change informs the therapist's stance towards his clients. Even if prolonged directive experiments are used, such as EMDR, the work is done in a collaborative manner, always open to the client's input and feedback. On the other hand, if the therapist gives the impression of knowing what the client should do and having set procedures for controlling the therapeutic pathway, it is hard to convey respect for and trust in the client's ability to discover, direct, and grow.

Contemporary Gestalt therapy has bridged the gap between the primacy of meeting clients and engaging with them so that they feel met and understood and methods that use active behavioural techniques to achieve directed client change. This integration includes a psychoanalytically informed attention to repetitive patterns of behaviour, thinking, and motivation.

In the relational therapies, the goal, other than the process goal of working together to make sense of things, may well emerge rather than be clear at the outset. Similarly, goals may change with exploration. For example, the emerging pattern of feeling, thought, experience or behaviour is often very different than initially imagined, and a trait that the client initially wants to get rid of, when explored, may turn out to be needed and desired.

Experiment as solution

What is an experiment?

Experiment (noun): a test, trial, or tentative procedure; an act or operation for the purpose of discovering something unknown or of testing a principle, supposition, etc.: a chemical experiment; a teaching experiment; an experiment in living. (*Dictionary.com*, 2012)

Perls et al. write:

. . . the therapeutic interview is experimental from moment to moment in the sense of 'try it out and see what happens'. The client is taught to experience him-

self. 'Experience' derives from the same Latin source – *experiri*, to try – as does the word 'experiment', and the dictionary gives for it precisely the sense that we intend here, namely, 'the actual living through an event or events'. (1951, p. 262)

An experiment in psychotherapy is a search for phenomenological data, and a psychotherapeutic intervention is the use of psychotherapeutic techniques that aim to further the goals of treatment. In Gestalt therapy specifically, an experiment is an intervention and active technique that furthers the collaborative exploration of a client's experience as needed for the therapeutic task, namely, awareness.

Experiments as psychotherapeutic actions can range widely, from making a guess about the client's experience – 'this sounds like a very difficult challenge for you' – to the suggestion during a couples session that a client move around the office to find the 'right distance' from his or her partner. The dialogic interaction between the therapist and client can facilitate the emergence of a new and more useful understanding – the client's experience, not the therapist's viewpoint, takes centre stage. Experiments in relational Gestalt therapy are interventions in which the therapist and the client work together to seek the understanding and growth that emerge from dialogic contact and phenomenological exploration. We do something different, think something different, move our bodies in a different way, imagine something desired or feared and so forth, to see what we experience. Something useful usually emerges from this activity. It is not assumed that the experiment will reveal a better way of doing things, but instead, it provides a rich ground for exploration of how the client lives in his or her world.

All psychotherapeutic interactions are essentially experimental

We believe that no therapist can reliably know what a client needs, accurately predict how he or she will impact that client, or fully understand how the client is affected by a particular intervention. The therapist's questions, comments, interpretations, and disclosures express an intention, but how the client will experience these is unpredictable. On one hand, this leads to a less certain pathway for therapists, but an experimental attitude helps them stay open to the unique responses of each client in each moment, and keeps them concentrated on the main focus of their work – the ongoing exploration of the client's experience.

Experimental attitude

An experimental attitude in the psychotherapeutic work supports careful attention to the client's input and allows what emerges between client and therapist to guide the direction of the therapy. It favours creativity

in the therapeutic work (Yontef, 1993, p. 91). A metaphor for this attitude might be a research scientist who follows up on his hunch with an experiment that is designed to generate more data about his idea and adjusts his prior theories and hypotheses according to new findings. Similarly, psychotherapeutic experiments do not need to be performed well or to be completed – they are simply tools for further discovery in the therapist–client system. Since the therapist is not the ultimate authority on what is important or how to understand the client’s situation, the client and the therapist need to work collaboratively.

Experiments can yield new information and are also vehicles for novel experiences for the client. As human beings, we learn from experience: new insights; increased access to physical sensations and emotions; and increased range in our relationships to other people. An experience involves the whole person, and therefore trying out something new can be scary, exciting or frustrating, etc., and might even challenge one’s sense of identity. For instance, asking a client to look at the faces of the other members in a therapy group might carry the risk of further exposure and shame for that client.

A newcomer to the concept of experiments might ask: is it important for the success of the therapy that the client follows the therapist’s suggestion? Not at all! The suggestion of an experiment is itself an experiment. The client’s reactions to a suggested experiment will yield important information and it might even be a needed step for the client’s development to be able finally to resist an authority figure and to say ‘No!’ to the therapist. Exploring the hesitation of a client to participate in an experiment is much more important than that the experiment will be performed.

How is dialogue compatible with the philosophy of experimentation?

To offer an experiment means to engage the client beyond his or her current experience. For instance, we might ask the client to repeat a particular word or phrase and highlight it even further by asking him to say it louder than before. The therapist’s motivation for such a suggestion varies depending on the situation, but when used with an experimental attitude, it attempts to elicit further engagement and further exploration of the material presented by the client. If an intervention aims to help the client to become more assertive or fix him or her via catharsis, then it is not a Gestalt therapy experiment but a behaviour modification procedure. An experimental attitude would be exploring assertiveness as a possibility for that client rather than a pre-established end goal.

As mentioned earlier, discussion of the dialogic method leads us to the question of whether experiments

correspond with the tenets of the dialogic philosophy. One way to look at this is that the psychotherapeutic dialogue itself is an experiment. Every encounter between client and therapist is a moment of contact, and at the same time a meeting of differences. Both parties bring their unique beings into their interactions, and communicate these differences verbally and non-verbally, whether they are aware of it or not. As therapists, we use inclusion to try to understand the emotional undercurrent of a client’s words and feel our way into his or her experience by carefully attuning to our own responses or imagining the client’s reactions.

Thus, communicating our understanding of the client’s experience is investigational and serves as a means of furthering the joint therapeutic exploration. In other words, our part in the dialogue is always experimental in nature; we continually probe for a better grasp of the client’s experience, knowing that our understanding will always stay provisional.

Let us look at an example of an interaction between a client and therapist: the client looks down and seems lost in thought. The therapist inquires, ‘Talking about your sister seems to have affected you. Are you thinking about her right now?’ ‘No,’ replies the client, ‘I was just thinking that I have never talked to anyone about this, and how lonely I have been feeling about it.’ Clearly, the therapist’s inquiry has several motives and layers. He wants to connect with the client and communicate his understanding of the client’s current experience, but he also wants to use an open-ended mode to further the interaction between them. It does not matter that the therapist did not guess the client’s experience ‘correctly’. The communication and question themselves served well as probes to allow the client to bridge a gap in the therapist’s understanding and to further fill out the story of his relationship with his sister and his experience and memory of it. Additionally, it helps to demonstrate the therapist’s care and his trust in the client’s experience as an authoritative test of the accuracy of the therapist’s interpretations. The client’s experience of the intervention is an important part of this work. The client’s feeling met or understood or intruded on and controlled are all part of the phenomenological experimental work in relational Gestalt therapy.

How is the paradoxical theory of change compatible with the use of experiments?

Experiments are complementary with the dialogic theory, but is this also the case with the paradoxical theory of change, another of Gestalt therapy’s theoretical cornerstones? How can we maintain the principles of the paradoxical theory of change, based on the idea of learning from current experience, with Gestalt therapy experiments? Do we not ask the client to move away

from her experience when asking her to talk to an empty chair or to imagine herself back as the four-year-old who missed her mother?

The paradoxical theory of change is not a way of keeping the conversation and therapeutic investigation solely focused on events that are happening in the present moment. As a therapeutic principle, it guides the therapist to interact with a client without aiming for a particular outcome (Yontef, 2005, p. 83). Imagining the future and remembering the past are crucial human capabilities, and many of our clients' concerns involve exactly these imaginings and remembering. Even though a person will project himself into the future, for example to the dreaded public address he will have to perform, or into the past, when thinking about an event in his childhood, the experience of imagining those events is occurring in the present moment, here and now.

A full awareness of current experience also includes the understanding that habitual ways of thinking, feeling, and behaving might not adequately address the current situation. Here is an example: a person in a psychotherapy group is talking to another group member in an abstract way, while looking at the floor. The therapist might ask how she is experiencing herself talking, possibly leading to a conversation and an increased awareness about her hopes and fears when communicating with another person. A more active experiment in this situation might be an invitation for her to look at the other group member and to talk to him about her emotional experience as she attempts to connect with him. Provided that the therapist keeps his suggestions in the spirit of experimentation, trying out new ways of thinking, expressing oneself and behaving will allow the client to further explore her ways of connecting with her fellow group members, and ultimately with her social world in general. Of course, the therapist might also guide this same issue by focusing on the experience of other group members and furthering the interpersonal conversation.

Experiments frequently bring to the foreground things that had been kept in the background and out of awareness. This might include deeper levels of emotion, emotions other than the ones the client was already in touch with, associations from the past and links to the present. As mentioned in the section on dialogue, the interaction between therapist and client is not static, and lives off the flow of verbal and non-verbal communication. The spirit of both the dialogic theory and the experimental attitude requires that the probing questions by the therapist or his empathic comments are meant to connect with the client and/or to further explore the client's experience, and should not be designed to make the client 'see the light' or to behave differently. This psychotherapeutic stance is an essential ingredient of both of those concepts.

The therapist's investment is not in the status quo, as a superficial reading of the paradoxical theory of change might suggest. And however dramatic or cathartic an experiment might be, its goal is greater awareness, not a directed change in the client's behaviour. Most importantly, the exploration aims for self-recognition and self-acceptance, and not self-denial, self-rejection, or self-hate (Yontef, 2005, p. 83).

Cultivation of uncertainty and flexibility

Psychotherapeutic work, like life, entails a certain amount of uncertainty – uncertainty about outcomes and about specific ways to behave, interact, feel, think or be. A therapist's expert stance, as practised in classical psychoanalysis or behaviourism, allows the client and the analyst/therapist to trust in a pre-existent, charted course. As Gestalt therapists, we also trust that important progress can be made in psychotherapy, but not with certainty and not towards a specified behaviour or way of thinking and feeling. Our therapeutic path assumes that people have the capacity to find their own way through their particular life situations and to learn, grow, create, find solutions and improve their world – given the necessary support and awareness. We feel that our task as therapists is to facilitate the emergence of this needed awareness, even though we cannot know the client's specific needs at the outset of the therapeutic journey. The ability to focus awareness is a tool that will be useful regardless of where the therapeutic path leads (Staemmler, 2009, p. 335).

Relational Gestalt therapy allows clients to tolerate better the uncertainty that life brings, and also supports the uncertainty that comes with creativity and experimentation. Trying new approaches in life creates uncertainty for both the client and the therapist. If the therapist does not follow a prescribed, manualised protocol, he or she has both the challenge and the freedom of discovering what is needed at each moment and what will come next. This uncertainty can result in an insecurity that can be terrifying and shameful for a new practitioner.

The relational Gestalt therapy model requires the therapist to be flexible and willing to make course corrections as needed. For example, as an experiment provides new data, e.g. a new way of perceiving or experiencing a situation, this information will need to be processed and integrated by the client and the therapist. The therapist's investment should not be in the correctness of his guesses, but in his openness to exploring alongside the client and to changing his perspective as new material emerges.

Why suggest an experiment?

The central focus of a Gestalt therapy experiment is the awareness process: what can we learn in regard to our emotional and mental processes, our bodily experiences or the therapeutic relationship? We learn from our actions and experiences in the world, not just from talking about them, and clients learn by discovery, by working actively with the material presented during the session in addition to describing their situations verbally. Experiments give us a chance to be systematic in learning by doing. In effect, we are asking our clients to explore their awareness process and to discover how their thinking, feeling, sensing or behaving works for them or how it does not.

The goal of experiments is ultimately an increased awareness about relevant aspects of the client's life. Various aspects of awareness work that can be the focus of the experiments include:

Clarifying and sharpening of awareness

The therapist might suggest, 'concentrate on your critical inner voice for a moment and verbalise it'. Or, 'as you are tuning into yourself, what seems of most interest to you to focus on?'

Bringing into focal awareness what was peripheral before

Therapist: 'As you are talking to me, pay attention to your breathing.' Or, 'You started to take a quick look around to the other folks in the group. What do you see in their faces?'

Bringing awareness to what has been kept out of awareness

Therapist: 'What are you feeling as you are telling me this?' Or, in a therapy group, 'Joe just gave you a compliment, but you didn't seem to react to it at all. What did you experience as you listened to him?' Or, 'That is a very powerful story that you told me. What are the sensations in your body right now?'

Bringing awareness to what interrupts awareness

Through the therapeutic work, a client might become aware of an introjected belief that interrupts his awareness process, and the therapist might say: 'Oh, I see! It is hard for you to look at your mother in this light, because a "good person" doesn't criticise his mother. Is that it?' Or an avoidance of a painful memory: 'It seems that you are afraid that you will be depressed for the rest of your life if you go back to that difficult time'. This kind of clarification can be done with either direct statements by the therapist or phenomenological inquiry according to the needs of the clinical situation and the kind of impact either type of intervention has with a particular client at a particular time.

Experimenting with novel ways of thinking, feeling or behaving

In a therapy group, a member might be asked to look at other people in the room after revealing something emotionally risky. Or the therapist might say, 'you have been afraid of your father your whole life. Why don't you tell me what it is that you always wanted to say to him?'

Support for experiments

As has been noted in recent writings on Gestalt therapy, our ability to interact with the world is made possible through support. Support is defined as whatever makes contact possible (Jacobs, 2006, p. 3). For example, I feel supported by the interest on my students' faces during a lecture and I rest on the support of my musculature to stand at the podium. Every action, thought or feeling is made possible by some kind of supportive process. An experiment is only useful for a client if it fits his or her available supports. Psychological growth occurs when a balance between challenge and support is found that suits the client's needs. If an experiment is too challenging, the best outcome might be that the client cannot assimilate the experience. On the other hand, an experiment only facilitates growth if it introduces enough novel challenge to stimulate potential learning. Jean-Marie Robine writes on the subject:

It is here we find the full meaning of the concept of experiment which lies at the heart of the Gestalt method, in using the actual emergency, or even creating a high-intensity experimental emergency *in situ*. The Gestaltist experiment, used intelligently, is not just a behavioural exercise; it is a symbol or metonym of the subject's experience, just as the experimental high-grade emergency is linked metonymically with the chronic low-grade emergency: they have the same structure, the same gestalt, the same function. (2013, pp. 483–484)

Robine follows this with a quotation from Perls, Hefferline and Goodman:

But the point is for the client to feel the behaviour in its very emergency use and at the same time to feel that he is safe because he can cope with the situation (1951, II, IV, 12). (2013, p. 484)

Support includes both self-support and environmental support. These types of support do not refer to a location within or outside of the client, but can only serve as a way to describe the variety of supportive and difficult factors in the client's life. These concepts are not dichotomous, and are in fact so intertwined that a dividing line cannot truly be determined between them. Self-support can refer to the ability to process the suggestion for an experiment or the capacity to integrate the experience, while the accepting attitude of the therapist would be an example of environmental support.

While we need to assess the client's support in order

to determine his or her ability to gain from a particular experiment, we cannot predict with certainty how our suggestions will be received – otherwise it would not be an experiment. In the end, we will only know from the client's reactions if the experiment was useful at all. From that emerges dialogue with the client and further exploration.

Cautions in suggesting an experiment

When the concept of experiment is introduced, especially to therapists in training, they at times respond, 'finally, I am hearing something that I can apply – something I can do!' The broader concepts of the dialogic method and the paradoxical theory of change might at times seem vague or lacking in specific enough guidance for the beginner. But even though the Gestalt therapy experiment is very useful as an interventional methodology and gives the therapist something to do, there are also risks to consider in employing these techniques.

The pressures on therapists to find solutions, to help or to relieve painful symptomatology are not insignificant, and they can become powerful motivations to move the therapy in a particular direction rather than to work alongside the client. The client, too, often wants to change in particular ways. Usually, therapists enter the mental health profession in order to help other people and to improve some of their difficult situations. However, the psychotherapeutic work itself is often intangible and the results of our work can be difficult to pinpoint. Not knowing what to do as a therapist can be a very scary and shame- or guilt-inducing experience. Thus, our caring as well as our insecurities can become strong motivational factors in aiming for a particular therapeutic outcome.

Therapists at all levels of experience sometimes suggest experiments in order just to 'do something' or to show competence and confidence, or to avoid the intense and uncomfortable emotions triggered by the therapeutic work. However, if psychotherapeutic interventions become vehicles for these kinds of motivations and aims, they serve the personal needs of the therapist rather than the therapeutic task.

Resistance

However creative, clever, informed, or insightful our interventions may be, the client might not agree with our ideas. He or she may feel too scared, insecure or shamed to follow our suggestions or may think that they are silly or useless. As noted earlier, classical psychoanalysis and behaviour therapy regarded resistance as the client fighting the system, as a 'bad' thing and as something to overcome. In Gestalt therapy, resistance is considered a creative adjustment of the client and necessary to the regulation of the therapy.

Therapists need to be attuned to the client's responses to suggestions for an experiment and to the experiment itself. If the client does not want to go along with our ideas, we had better listen. Client resistance is a valid response, an aspect of self-regulation, and if we try to override it, we are being disrespectful, risk rupturing the therapeutic relationship or even re-traumatising the client (Polster and Polster, 1999, p. 121). If we do not yet know the reasons for the client's reluctance to follow our suggestion, it behooves us to explore and learn about it, rather than to 'talk the client into it'. Resistance towards an experiment, or toward any aspect of the therapy for that matter, needs to be appreciated as a communication of importance, as a message that is not yet fully understood by the therapist or the client. As with any unclear aspect of the content or process of therapy, it is usually very useful to explore what we do not yet understand.

For instance, I (FS) once offered an 'empty chair' experiment to a client of mine. She had been in therapy with me for a few years, and when she seemed reluctant to go ahead with my suggestion, I felt comfortable enough to urge her on a bit. She then did go along with my proposition, which only resulted in a flat exercise during which she spoke in a monotone voice, seemed only marginally interested and was certainly distracted. However, our solid therapeutic relationship enabled us to discuss her reactions to the experiment, including the fact that she complied with my request despite her strong reservations. The resulting exploration of our individual contributions to the event proved quite useful to our future work together and to our understanding of both her method of withdrawing by becoming less present and my pushing in order to connect with her. Using a dialogic attitude, our experiments do not have to be accomplished, but need to be, as with any intervention, subject to disagreement, to revision, and most of all, to exploration by all parties.

Types of experiments

As mentioned previously, experiments are interventions designed to facilitate an expanded exploration of the client's experience within the context of the therapeutic task. Experiments can be as simple as asking the client for their reaction to a particular interaction in therapy or as active as role playing an inner conflict that the client is struggling with. The type of experiment is limited only by the creative input of both the therapist and the client. In most cases, the therapist suggests the experiments, but the initiative could also come from the client. This is more often the case after the client has been in therapy for a while and has become comfortable enough to get more actively involved in directing the course of therapy.

Here are examples of some of the more active therapeutic experiments:

Mental experiments might be used to differentiate various aspects of the situation to determine what part is important, what interpretation is accurate, or what exactly triggers the client's reaction. For example, it might be a particular visualisation or a thought experiment that has to do with a past experience or a dreaded or hoped-for future. Or, it might be used to imagine an encounter with a loving parent, a spiritual guide or a feared situation. The therapist might say, 'imagine that you are five-years-old and that your angry father is sitting next to you on your way to kindergarten. What are you feeling or thinking?' Or, 'imagine you are have a job interview. What are you aware of as you imagine your interview tomorrow?' Or, 'imagine your brother says he is feeling sorry and that he apologises in a sincere and heartfelt way. What is your emotional reaction to that?'

Meditative experiments can be relaxation exercises or structured observations of thoughts, sensations and emotions that flow through one's body/mind. A formal meditation exercise might serve as an experiment as well, if the outcome of the practice is not seen in terms of success or failure, but instead focuses on actual and spontaneous experience. This creates time and space for new awareness and leads to an exploration of the benefits or negative results of the practice as well as creative variations that are possible in the practice.

'*Checking in*' often happens at the beginning of a group therapy session as an awareness exercise. The group members are asked to check in with their current experience (including emotions and wants) and articulate some of it to the group or a specific person. But 'checking in' can also be useful with an individual client or a couple.

Exploration of polarities refers to the examination of different aspects of the client's experience; for instance, their emotional or mental conflicts. Let us say that the client is unsure about whether or not to go back to college. The pros and cons that the client is conscious of only comprise one facet of his ambivalence. He may also have internalised different opinions from friends or family, making it even harder for him to gain clarity. He might be confused about which aspects represent his own preferences, and which embody his need to accommodate or resist his parent's wishes. These seemingly polarised views can be given voice during the session, and the resulting dialogue may include all of the often perplexing elements of his decision-making process. Focusing on reactions in the body might be a helpful aspect to such an experiment. This could also work as a homework assignment, e.g. writing a dialogue in a journal. Other polarities that are frequently explored are love/hate, desire/fear, and coming close/needing distance.

Empty chair work is often used to highlight inner conflicts or polarised voices within the client, or as a vehicle to express what is difficult to say to people in the client's life, such as a parent, a boss or a girlfriend. In the latter situation, an absent person could be imagined to be in the empty chair, allowing the client to express him or herself more freely for the purpose of the therapeutic exploration. This could also be done with an experiment in role playing or Gestalt therapy psychodrama. Similarly, a part of the client's conflict – for example an inner critical voice – could be talked to as a figure/person in the empty chair.

Exaggerations of the voice or of a body movement can clarify the diffuse emotional energy behind a comment, fantasy or gesture: 'You just put your hand in front of your mouth as you remembered your mother's scolding. I have a suggestion. Hide your face behind your hands and tell me what you are experiencing.' Or, 'your voice became very low when you imagined telling your sister about your feelings for her. I suggest you try saying the same thing in a loud and clear tone while noticing how that feels to you.'

Experimental enactments are ways to act out memories, wishes or dreaded events: 'Please walk around the room like your father would and talk in his voice about the need to be practical and make one's way in the world.' Or, 'you have wanted to tell these things to your friend for many years. Imagine she is here with us and that she can hear your words. Tell her what is on your mind. How does that it feel to do that?'

Body movements are not separate from the other types of experiments, but at times can help the therapist and client focus on the physical aspect of experience. As a trainee, I (FS) once was asked to use body language to ask for acceptance from other group members in my training group. When, after a while, I assumed a posture of supplication, I became very emotional and felt transported to a feeling state that had been completely out of my awareness at the time. Feelings of need, of shame for needing, of anger and of the desire to surrender became suddenly very present and emerged from these particular gestures. I (GY) remember being asked in movement therapy to move like my mother did, and suddenly became aware of intense anger towards my mother that I had not recognised earlier.

The practice of listening skills can be particularly helpful for couples. The term practice might suggest the idea that the couple is deficient and now needs to improve these skills. This could be the case, but the experimental attitude places the emphasis on exploration, not on creating a particular behaviour. It is less helpful for the couple to feel that they need to learn a desirable set of skills than for the therapist to explore with them what is helpful, objectionable or interesting in that experiment.

'*Alter ego*' means for the therapist to assume the voice of something that is unexpressed for one of the partners during a session. For example, the therapist might 'double' the husband and articulate how she imagines his emotional voice. In his stead, she might say to the wife, 'You often criticise me for not helping you more. But your tone of voice and your words are so hurtful and make me so angry that the last thing I feel like doing is accommodating your wishes.' The therapist then checks in with the husband and asks him to correct her role play or add to it. This could result in an exploration of the husband's reluctance to voice his feelings to his wife. Of course, it is also important to hear the wife's responses to her husband's feelings and thoughts and/or to the therapist's role playing.

Conclusion

We have discussed the tension between a relationship-oriented and a behaviour-oriented psychotherapeutic approach. At first this tension existed for the classical psychoanalytic and behavioural therapies. The psychotherapeutic orientations that were part of the Third Force, including Gestalt therapy, diminished that tension, but their philosophies regarding the integration of the therapeutic relationship and their techniques used in treatment were rarely well articulated. In our clinical experience this lack of specificity and coherence of theory and methodology has led to harming clients by using techniques or confrontation in a way inconsistent both with the basic Gestalt therapy theory and the client's level of support.

As for Gestalt therapy, the confrontational and active, theatrical style that was often seen as its hallmark during the '60s and '70s, changed to a more dialogical and relationship-centred approach that is more consistent with its foundational philosophy. A growing awareness about the importance of the relational aspects of human existence diminished the status of the techniques that Gestalt therapy had become identified with. The '60s technique-focused style of working gave way to a dialogue-centred phenomenological methodology. With this change, the Gestalt therapy experiment, both as a concept and as a form of intervention, changed in focus, became more clearly articulated and was better integrated into the intersubjective relationship.

Gestalt therapy experiments are phenomenological and as such are an important aspect of Gestalt therapy theory and practice. A contemporary Gestalt therapist does not need to choose between a relationally oriented approach and the use of active techniques. In fact, all psychotherapeutic interactions are essentially experimental and an experimental attitude is a crucial element of a relationship-oriented psychotherapy.

One of our concerns was to clarify that the paradoxical theory of change and the dialogic methodology of Gestalt therapy are not in conflict with, but are enhanced by, the Gestalt therapy experiment, and that experiments are part of the therapeutic conversation. Experiments are part of the therapeutic dialogue and should not be used for the therapist's extra therapeutic needs or to override the client's reluctance towards his own feelings or the therapist's perspective. After all, experiments are ways of exploring the client's experiential world and are part of the ongoing dialogue between therapist and client, not a method to fix the client or to make therapy more 'exciting'.

The examples of Gestalt therapy experiments that we have discussed are just a small sample of all the creative ways a therapist can engage with his or her clients, but a repertoire of techniques is not a substitute for the psychotherapeutic dialogue, phenomenological exploration, or a way to avoid the uncertainty that necessarily exists in the therapeutic meeting and in life in general.

Notes

1. We would like to give special thanks to Dr. Lynne Jacobs, who gave us invaluable advice, and to Adrina Schulz, whose untiring edits helped us to complete the project.
2. The principle of contemporaneity states that what has effect is present in the current field. This is an aspect of field theory derived from the work of Kurt Lewin (Yontef, 1993, pp. 285–325; Parlett, 2005, p. 47).
3. Buber's dialogic method has three characteristics: inclusion, authentic presence, and commitment to dialogue. About inclusion Buber wrote, '... for in its essential being this gift is not looking at the other, but a bold swinging – demanding the most intensive stirring of one's being – into the life of the other' (Buber, 1999, pp. 81, 82). For a therapist this translates into a recommendation to feel an approximation of what the client feels – an approximation so close that the therapist feels it in his or her own body. Inclusion requires authentic presence, which means that the therapist must be present as a person, discriminately revealing him or herself: '... if genuine dialogue is to arise, everyone who takes part in it must bring himself into it' (Buber, 1999, p. 86). Therapeutic presence is the disciplined and discriminating use of the therapist's aware experience in the service of the therapy. The third characteristic of the dialogic method is a commitment or surrender to dialogue. The therapist practises inclusion and presence, and something emerges out of this relationship that the therapist does not aim for or control. The therapist stays engaged in the therapeutic process and by surrendering to what arises from the therapeutic dialogue, is him or herself changed.
4. Transcendental phenomenology, a phase in Husserl's thinking, used the science of consciousness to get to an absolute understanding of reality (Spinelli, 2005, pp. 6, 7). The epistemology of existential phenomenology, including relational Gestalt therapy, does not strive for or believe in the absolute Truth that this approach sought.

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Working with whole intelligence in organisation development and change: making meaning, creating context, increasing impact

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Abstract: This article shares my perspective on Malcolm Parlett's 'five explorations', described in his book *Future Sense* (2015). Parlett presents the concept of whole intelligence, or 'whi', as he has named it, as 'an holistic and inclusive general concept, which attempts to gather together a number of valued human qualities and varieties of capability' (p. 19). The five explorations help to reveal and nurture whole intelligence. As an organisational psychologist using both theoretical and experiential lenses to reflect on Parlett's ideas, I conclude that:

1. Whole intelligence has profound implications and potential for global impact within the context of organisational change – a thesis evidenced firstly by placing Parlett's ideas alongside related theories and then placing the explorations within my practice.
2. For the five explorations to achieve impact within the world of work they need a supporting infrastructure, to be better codified and amplified in a hyper-competitive market for management concepts.

Key words: Whole intelligence, five explorations, responding, interrelating, embodying, self-recognising, experimenting, organisation development, change.

'Just as we are affected, so also do we affect others; *and we are doing so all the time.*' (Parlett, 2015, p. 283, original italics)

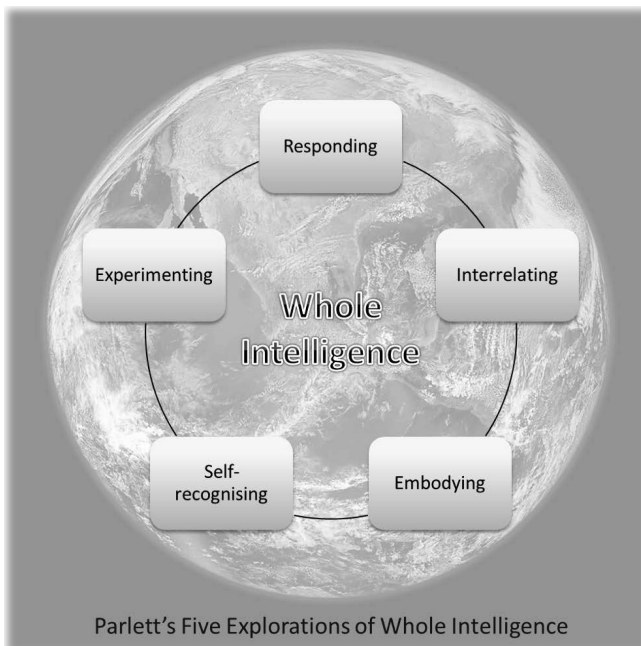


Diagram of Parlett's explorations of whole intelligence – based on *Future Sense* (2015)

Whole intelligence ('whi'): what is it? What does it mean to me?

As a psychologist, my overriding interest over the last twenty years has been organisation development and change in various public and private institutions, within which I am a 'change agent'. There are a myriad of views on the role of change agents in organisations, linked also to how we view the role of organisation development (OD). Critchley's (1998) helpful positioning of his change agency as one of inquiry, experimentation and integration, within 'meta change processes' that are neither linear nor sequential, is consistent with a Gestalt frame of reference, aspects of complexity theory and dialogic OD (see also Bushe and Marshak, 2009, for discussion of dialogic and diagnostic OD). Like Critchley, I am interested in ways in which I can enable 'emergence' in organisations, which I liken to a systemic capacity for creative adjustment. I am writing this article only a few months after the launch of Parlett's book, *Future Sense* (2015), a book that speaks to some of my own hopes and fears for this planet's prospects. This book consolidates and expands the scope of Parlett's original ideas relating to creative adjustment in the 'unified field' (Parlett, 1997), or

'the global field' (Parlett, 2000) with 'five abilities' that support creative adjustment. His exposition on 'five explorations' that develop 'whole intelligence' has inspired my own reflective process, exposed in this article in a similar spirit to Neil Harris's reflections on enacting the five abilities in his own work with young people (Harris, 2011). Parlett describes whole intelligence as 'something nearer to integrated human competence, overall maturity, and demonstrable good sense' (2015, p. 16). It is '*deliberately* an holistic and inclusive general concept' (ibid., p. 19, original italics). Parlett abbreviates whole intelligence as 'whi', which has slightly orientalist connotations, a theme I will return to later (see Parlett, 2014, for his own pronunciation of 'whi' in a recorded video). He argues that 'whi' might include such qualities as 'practical understanding; sensitivity to present conditions; a capacity to discern the dynamics of complex situations; ability to make informed choices; a clear sense of what a group can and cannot do; and a recognition of other people's humanity and potential' (2015, p. 19). My own experiences have led me to the overarching thesis of this article, that such qualities – and 'whi' as Parlett views it – can and do facilitate the kind of emergent change associated with being a change agent in complex human systems (cf. Critchley, 1998). This article explores whole intelligence both intellectually and in relation to my experience. I seek to stimulate the debate and the conversation in a wider practitioner network about how to enact Parlett's proposals in organisational settings, my position being that he has compelling ideas that warrant much more research and development.

The five explorations are Parlett's development of his original description of creative adjustment 'abilities'. Using a complexity science lens, whole intelligence supported by the underlying explorations comes across itself as a kind of emergent quality of human systems both arising out of and enabling change. Whole intelligence may be a prerequisite or superordinate property of relational change (Fairfield, 2013), connected also to 'gracious living' (cf. Denham-Vaughan, 2010). Theoretical associations help us place whole intelligence very much alongside other Gestalt ideas rather than alongside psychometric or personality based models of traits and human abilities, such as emotional intelligence (e.g. Mayer et al., 2008). The five explorations are: responding to the situation, interrelating, embodying, self-recognising and experimenting. These respectively seek to 'celebrate' five very noble motivations, identified by Parlett as: human 'accomplishment', 'friendship', the 'gift of life', the 'development of wisdom', and the 'power of play'. Bracketing slightly my early background in experimental psychology, I have sought to have an open mind about the concept of whole intelligence. I feel it is worthwhile for

me to make my own meanings out of Parlett's work, to notice the ways in which I already put the five abilities (or explorations) to use in my work in organisations, which I will share in due course.

Parlett refers to his contribution to a metaphorical 'sea of thought' (2015, p. 279), possibly an allusion to Matthew Arnold's 'Sea of Faith' in the poem *Dover Beach* (1867). Parlett's book is like a message in a bottle that he has pushed out to sea, with his conscious use of a simple 'meme' in the form of 'whi'. When Richard Dawkins (1978) coined the term *meme* he posed it as an idea that linked evolutionary principles to the spread of ideas and cultural phenomena. Parlett's meme – 'whi' – may 'go viral' like internet memes that ascend to the surface in a digital 'sea of thought', or it may disappear. Clearly, in Parlett's use of language and metaphor as well as the tone of the explorations, there is congruence with the philosophical roots of Gestalt writing (cf. Gaffney and Maclean, 2010; Nevis, 1987). Parlett urges us to see the explorations like 'five different instruments in a quintet' (2015, p. 256) that he argues boldly can 'remake the world' (p. 271). Parlett strives towards moral clarity and humanity in his work rather than scientific precision. Such clarity is something Susan Neimann, the moral philosopher, argues is a feature of a desirable 'grown up idealism' in the way society operates (Neimann, 2008). In *Future Sense* Parlett concocts a hearty soup of social philosophy, psychology, psychotherapy, popular self-help, and ecological activism.

Gestalt schools of human performance and development have historically had at best an awkward relationship with academic and clinical psychology. In this case, an important distinction needs to be made between the way Parlett positions whole intelligence and the way academic psychologists have developed both trait and ability based models (and mixed models), such as 'multiple intelligences' (Gardner, 1983) and 'emotional intelligence' (cf. Dulewicz and Higgs, 1999; Goleman et al., 2004; Mayer et al., 2008). In contrast to emotional intelligence theory, Parlett has not described specific behavioural criteria or personality factors that together constitute 'whi', in favour of more dynamic explorations in need of specific social context to gain any substantial meaning. Alongside Parlett, thinkers like Scharmer and Kaufer (2013), Denham Vaughan and Chidiac (2013), and Fairfield (2013), have all offered Gestalt type models for developmental purposes. From an OD perspective, Gestalt models of capability generally seek to join and mobilise change agents around the need for greater integrity and authenticity in organisations. Parlett shows frustration with the corporate and political spheres, the lack of self-awareness and even self-delusion that he argues undermines whole intelligence in our important institutions, resulting in

‘calamitous collective mistakes’ (Parlett, 2015, p. 184). Similarly, Ralph Stacey has also explored in some philosophical depth the illusion of control arising from the ‘dominant discourse’ about power in institutions (Stacey, 2010). Stacey argues that the prevailing paradigm in organisations relating to strategy, change and power – the dominant discourse – lacks empirical and moral legitimacy, which he evidences with examples from the near collapse of the financial system. His argument is consistent with the empirical data reviewed by Pfeffer suggesting that flawed assumptions about leaders and leadership have contributed to a systemic crisis of corruption, excess, underperformance, and dissatisfaction in many public institutions (Pfeffer, 2015). Pfeffer also posits that much corporate executive education has therefore failed to fulfil its grandiose promises (*ibid.*). Whole intelligence points to an alternative language in relation to collective leadership. The explorations also constitute holistic means with which to develop collective leadership capability. Scharmer challenges normative thinking in organisations, especially ‘economic fundamentalism’ (Scharmer and Kaufer, 2013), which gives primacy to economic goals at any ecological or human cost. Both Scharmer’s and Parlett’s contributions highlight the destruction of the planetary ecosystem as a consequence of this normative economic thinking, converging also with the ‘conscious capitalism’ movement (Pfeffer, 2015, p. 211). There is overlap here with the overt eco-politics of distributed and relational models of leadership (e.g. Haslam et al., 2011). All five explorations are, in principle, to be seen as enablers and components of greater agility, a loosening up of defensive routines (cf. Argyris, 1999) in ‘learning organisations’. *Future Sense*, although not presented as a direct contribution to management or business literature, adds to a growing constellation of Gestalt oriented ideas relating to change in organisations. In this way I have concluded that Parlett’s ideas are helpful additions to the sea of thought, albeit still more conceptual and inspirational than methodologically informative.

Creating context

Some of Parlett’s competitors for share of voice in the market for socially relevant psychological ideas have put forward industrial scale products in support of their thinking, people such as Otto Scharmer (Theory U) or Daniel Goleman (Emotional Intelligence). It would be helpful for organisation consultants to have ways to position whole intelligence as a fully-fledged model, rather than a concept. My exposure to certain corporate cultures (basically Californian), such as Google, or IDEO, the very progressive design consultancy, with

their liberal corporate values, suggests employees in these companies may be receptive to ‘whi’ as a concept. I have not yet personally tested this hypothesis. Those who work in conservative corporate cultures, such as civil service organisations, global banks, insurance companies, law firms, manufacturing firms or oil companies may find ‘whi’ slightly exotic, perhaps too distant from their world. Both of these hunches are borne out of my experience of working within both very modern and more conservative corporate cultures. Parlett’s language vies for attention with popularised psychological jargon in the business world, such as ‘mindfulness’, ‘global mindset’, ‘executive presence’, ‘leadership agility’ or ‘emotional quotient (EQ)’. Despite the challenges of adjusting the language for a corporate audience without losing the originality of the ideas, I am motivated to find ways to integrate Parlett’s ideas and language into my practice. My challenge in this regard is always to use ideas in a way that contributes appropriately to my ‘perceived weirdness index’ (Hanafin, 1976) as a change agent, helping me to be different without marginalising me completely. Cultural context also plays a role in how I use the five explorations, supporting an authentic and helpful presence in client systems.

Like many British Asians of my generation, I have experience of a cultural identity that is forged out of ‘East’ and ‘West’. In the facilitation of organisational change I have exploited this aspect of myself, particularly when working internationally. I feel my personal and professional context reinforces both my own use of Parlett’s ideas and their translation for a globalised audience, assisted by Gestalt’s integration of European and Asian philosophical influences (cf. Mann, 2010). Parlett asserts that we should move away from rational individualism and – citing Tocqueville’s critique of American culture (Parlett, 2015, p. 117) – towards greater collectivism, which we might associate with parts of Asia. This is not an easy or simple cultural or political path in practice, as we can see in some traditionally communitarian cultures in Asia (cf. Trompenaars and Hampden-Turner, 2012). In Singapore I have found an at times surreal coexistence of Confucian paternalism, socialist cooperation and conspicuous consumption. There are wide ranging views about the efficacy of Singapore’s hybrid social and economic model, with some pointing at its extreme inequality (cf. Wilkinson and Pickett, 2009). Altruistic collaboration in service of the whole – even in cultures that could claim to have some communitarian roots such as Singapore – is not a simple thing to engender or sustain. At a macro level the paradoxes of modernity preclude simplistic narratives about collectivism or for any society ever to model whole intelligence in a pure form, for now. An appreciative inquiry focused on

whole intelligence at the micro level is more likely to be fruitful. We will find whole intelligence at work in specific institutions, groups, communities, families, and individuals. It would make sense for our global community of practitioners to find these stories and disseminate them. Having worked both as an internal consultant in central government in the United Kingdom and extensively in the private sector in several countries, and latterly as a consultant in Singapore, I have reflected on the visibility of the five explorations in my practice. Through one or two personal examples of micro-level interventions, I seek to provide some support for my hypothesis that Parlett's ideas can be and are enacted in corporate settings to achieve developmental goals. These examples point to the subliminal rather than explicit or structured nature of this enactment.

In consultancy work that I am doing within one public service agency, my role over a year-long engagement has been to support the process of transformational change. Rather than merely visualising an ideal future for the entire system, then seeking to close the gap with this desired internal end state in a linear fashion, the client is open to exploring and building real world external prototypes of innovative policy solutions during meetings. These ideas are then actively implemented out in the organisation straight away through a variety of temporary, cross-functional project teams. This, in turn, generates learning and appropriate feedback loops allow the organisation to harness this learning for ongoing change efforts. At the same time, together, we (in using 'we', I am adopting a participatory approach to my own change agency) are also exploring new behaviours and ways of working amongst large groups of senior managers. This allows us to scale up new leadership practices immediately if there is sufficient agreement that such practices benefit the whole system. These interventions are all connected to a search for many relatively small-scale ways to enact a recently changed strategic mission for this organisation, in service of an evolving sense of purpose. Each intervention is designed with both citizens' and front-line employees' participation, with considerable effort to avoid reverting to simplistic top-down narratives about a 'strategic change programme'. This requires significant psychological openness to experience from the managers and frontline employees. The sense of emotional safety to conduct real world experiments through which new organisational states will emerge and evolve is essential (rather than fulfilment of any equilibrium). This has required me to engage the client extensively on both the 'what' – the outcomes – and the 'how' – the process – of the change that is necessary. The internal change agents need to demonstrate their agility, their comfort with human realities, constantly having to

bracket their own needs for certainty or simple compliance from thousands of people. Unlike some other clients I have worked with in a similar position, this organisation has not commissioned me to help bring about a large-scale corporate restructuring from the centre but would rather allow people some space to self-organise. This has been refreshing and consistent with an agile approach to change.

I am finding that reshaping public services in emergent rather than centrally planned ways does require the features of whole intelligence in the way I co-create change processes with clients. This requires *interrelating* in authentic ways through our work together, *self-recognising* in the advice I provide while also 'holding up the mirror' on occasion. This helps clients with their own *self-recognising*. Whole intelligence indicates a need for *responding* to clients' needs in facilitation techniques that I use within specific workshops, which are designed to support their *responding* to their shifting environment, *experimenting* with solutions and *embodying* rather than intellectualising change. Through this kind of work I am finding that *experimenting* in partnership with citizens in an emotionally aware way – engaging communities about practical solutions for their problems, say, in their ability to access healthcare or statutory benefits – supports government policy that is anchored in national well-being and citizens' actual needs. Both elected officials and public servants can experience forward movement in the here and now in service of local communities, rather than wait until the end of a long, protracted 'programme' of strategic change cooked up and disseminated to an entire nation by a very small number of self-appointed intelligentsia. In order to go a little deeper into how whole intelligence supports dialogic organisation development and the emergence, rather than management, of change (cf. Bushe and Marshak, 2009; Critchley 1998), I will share a further personal experience. This intervention – a three-day leadership workshop – is excerpted from a reflexive case study based on another long-term engagement within a strategic change initiative.

I was asked by a global company with business operations across Asia Pacific to construct and facilitate a leadership development workshop for twenty senior managers – the most senior manager in various locations in which they operated in the region. This was one of several different projects I had already completed in various locations for this client. These were part of my broader consultancy role and a global initiative designed to promote a cultural shift in the organisation impacting tens of thousands of employees around the world. The central theme and intent was the improvement of both employee well-being and operational business performance. I had been positioned for this particular exercise as an 'expert' on leadership. I felt the

weight of expectation on me. Workshop participants were beginning to arrive from every corner of the region. I felt considerable pressure to entertain, perform and impress, rather than to meet this group wherever it happened to be – to be contactful and helpful.

As I stood up at the start of the meeting I felt that my connection was doomed to be superficial, content led rather than relational, because of how my role had already been framed. In my own introduction of myself I therefore said nothing about my professional background at all and avoided diving into an ‘agenda’. I introduced myself to the group on the first day in a way that I felt was interesting and personal, while still meeting some of their needs for a sense of my technical credibility. I asked the members of the group to share with each other what feelings arose for them as they entered the room, as they sat down and saw the view, as they watched an opening video prepared by one of their colleagues. I then asked them about their personal experience of recent volatility in their industry in the Asia Pacific region and people shared several stories. One participant spoke in moving terms about the political coup which was currently underway in his country and the impact this was having on him and his team. I noticed that in sharing my own thoughts, feelings and reactions to our experience in the room as the conversation unfolded, the contact I was experiencing with the group and a felt sense of our presence together was increasing. In several different ways through the programme I set out to help them develop ways to interrelate in a manner that went beyond the mechanistic, day-to-day tone of business conversations I had learned that they might typically have with each other and with employees. I was aiming to model a relational attitude myself rather than purely an expert attitude and to encourage a relational climate in the meeting. I do find that the first two hours of this kind of meeting process, my ability to elicit the explorations, such as interrelating or self-recognising, in a group of this kind, can have a disproportionate impact on the sense of accomplishment arising out of the whole meeting. Interrelating for the whole first day relied on all of us sharing our lived experiences, feelings and insights as these arose. My imparting of knowledge to them became secondary, although certain models and frameworks did provide some helpful conceptual prompts and structure. As things unfolded several members of the group visibly started their own self-recognising of their own behavioural routines, responding – through role play, experiential and dialogic methods. While the connections both with Parlett’s explorations and motivations are indirect, the links still feel tangible to me.

On the second day, on arrival at our meeting room at a new and truly stunning location, I stayed seated and

silent at the start of the meeting, rather than standing to welcome the group and kick off proceedings – this more official kind of opening being the usual formality for corporate meetings. I felt in doing so I was embodying a letting go of my own need for control of the group and its process, allowing self-organisation to occur. Following this pause, recognising that the group needed help to interpret the silence but not necessarily any actual instructions or direction, I voiced my own reactions to the trip across from the first location, sharing what I noticed and what feelings, memories, associations it stirred with me. There was further silence and then one of the participants said that on the way into the venue he had experienced powerful emotions. He said he even had tears in his eyes as he entered the room. He shared that he had never in his life felt this way about his work because of the humanity, uniqueness and authenticity of the whole experience he was having. The experience did not feel designed, contrived or polished. This was a moment of truth for him, through which he was experiencing contact with the people in his immediate environment. He realised in that moment that as a manager, perhaps he needed to know the places and the people who worked with him on more human terms, for the citizens and people that they were. He wanted to help his team create special and spontaneous experiences in relationship with their customers and with each other, while enriching their own work. This comment started a chain reaction through the group which allowed us then to explore what they were learning from their current experience.

Such exploration allowed us together to uncover ways in which the managers might together achieve greater self-recognition of the ways they were both impacted by and impacted the communities in which they were situated as corporate leaders. We concluded that their work increasingly required awareness and sensitivity towards the local culture, the people and the ecology, rather than a ‘one size fits all’ approach to management. We also explored the polarity of profit and purpose in everyday life as managers. The dialogue we had about this company’s approach to leadership in its business as a whole was informed by our personal and shared emotional reactions and our direct physical experience, becoming very much an embodied group research exercise. The participants did several practical action learning exercises which were immersive in our surroundings, rather than intellectual abstractions. The relationship the organisation had with investors, employees and customers was the subject of reflection and closer examination during the week. As the workshop progressed we were experimenting with several different ideas on various aspects of their management agenda. This resulted in several decisions intended to impact many locations and thousands of employees,

supporting both improved performance and the development of people. A list of actions was agreed and documented, then circulated to the whole group immediately after the meeting. These actions contained several elements that would change various management practices across the Asia Pacific for this group.

I felt this consolidation of outcomes and the group's action orientation – which crucially also had to be evidenced after the programme – reflected a positive way of responding as a business. The outcomes for this group in this micro-intervention would be directionally consistent with the overarching transformational intent of the organisation at that point in time. The intervention required various forms of ongoing support for this group both internally within the organisation from the corporate human resources department and externally, intended to reinforce forward movement. This brief experience predates *Future Sense*. However, in light of *Future Sense*, I can see that much of what I do connects in several ways with the explorations – sometimes very clearly and sometimes less well. I also posit that if there is sufficient critical mass of codification, adoption and application in the field then whole intelligence can support leadership and organisation development work much more directly and at real scale.

Increasing impact

I am not aware of much that is being done in a global context to strengthen the relationship between the explorations and the work being done by organisational change agents. Substantial effort is surely warranted to deepen and adequately to systematise a model of whole intelligence for complex applications by practitioners. The practical tools, training materials, products, even accreditations that make Scharmer's Theory U, Eoyang's Human Systems Dynamics, Fairfield's Relational Change movement, all of which have virtual institutes or centres of excellence associated with them, show that organisation development practitioners have many sources for their own professional toolkit. The models I have identified draw on both Gestalt theory and complexity theory (cf. Scharmer and Kaufer, 2013; Fairfield, 2013; Olson and Eoyang, 2001). Some leading thinkers and researchers appear to have set out to create a school of thought and practice associated with a model. Parlett has offered us a very compelling, simple and useful set of ideas. There is a case to put in place the infrastructure needed for more visibility and scalability in the execution of these ideas. Whole intelligence (or 'whi'), like emotional intelligence, is a big idea with the potential to create a following – if we build an evidence base for it, becoming more specific also on theoretical aspects, methods and applications for change and process facilitation. Right

now a great deal is left to the imagination, which may be intentional and in itself generative, but ultimately insufficient. The vehicle for impact seems for now to have been assigned to a book and its author. Gordon Wheeler has made the effort in the past to juxtapose Parlett's five abilities with Esalen Institute's Human Potential Curriculum (Wheeler, 2006) and derived helpful insights as a result. I have created my own re-interpretation, a juxtaposition of the five explorations with my experience in the facilitation of organisational change. This very preliminary analysis – just a sketch of the landscape – is summarised in the table which I provide in an appendix. The appendix is simply a convenient way for me to organise and share my thoughts at this stage, far from exhaustively. It is also intended to help those practitioners who need to systematise the ideas a little. The remaining questions on my mind now relate to how we might make more explicit and systematic links with OD practice.

Classical definitions of OD such as Richard Beckhard's still have currency in the field:

Organization Development is an effort (1) *planned*, (2) *organization-wide*, and (3) *managed from the top*, to (4) *increase organization effectiveness and health* through (5) *planned interventions* in the organization's 'processes', using *behavioral-science* knowledge. (Beckhard, 1969, p. 9, original italics)

Beckhard's seminal yet arguably outdated definition still finds itself on the ODN (Organization Development Network) website – amongst the most prominent global communities of practice in OD. The scope and core methodology of OD appears to have remained tied to quite linear and reductionist language. Practitioner researchers such as Otto Scharmer, Sally Denham-Vaughan, Mark Fairfield, Mee-Yan Cheung-Judge, Glenda Eoyang, Ralph Stacey and many others are challenging this paradigm, drawing in their own ways on a mixture of Gestalt, reflexive methodology, and complexity science. Whole intelligence can help us to bolster definitions of OD. Without losing the utility of planned change methods intrinsic to OD such as Beckhard's or Kotter's (Kotter, 2014), OD also strikes me as: (1) the development of whole intelligence (or 'whi') in human systems; (2) in emergent, reflexive and holistic ways; (3) supporting the sustainable and collective fulfilment of human potential. This kind of OD may not always use 'behavioural-science' so much as a practitioner's ability to walk empathically alongside their institutional clients as a critical friend, in a Rogerian rather than an expert manner (cf. Rogers, 1961).

Drawing on Olson and Eoyang's suggestion that change practitioners seek to 'amplify productive patterns' in human systems (Olson and Eoyang, 2001),

appreciative inquiry on whole intelligence may set out to find and amplify evidence of its existence in the field. This is consistent with a growing Gestalt literature that is taking an appreciative and socially aware stance on researching organisational change, with Mark Fairfield, Seán Gaffney and Joseph Melnick amongst the current exemplars (cf. Fairfield 2013; Gaffney and Maclean, 2010, 2011; Melnick and Nevis, 2009). Parlett's five explorations have the potential to be as supportive in the way they guide OD practice as Schein's process consultation cycle (Observe, React, Judge, Intervene) (Schein, 1998) and the various Gestalt consultancy models. Whole intelligence could and perhaps should even either displace or work alongside emotional intelligence more explicitly as a language and model for leadership development. All this requires additional impetus from Parlett and the Gestalt community.

My conclusions on future directions are that firstly a concerted effort to develop whole intelligence further in order to achieve greater conceptual depth, some practical codification and so to increase the scope for impact

is needed. Secondly, this also requires us collectively to stimulate a process of diffusion and appreciative inquiry, inspiring people around the world to engage with the five explorations in a discerning manner, undertaking the relevant personal synthesis and assessment of their relevance, then capturing and sharing their learning. Thirdly, I could envision a virtual centre of excellence dedicated to development of whole intelligence, or a network of partnerships, creating links between the five explorations and existing schools of thought. My own immediate challenge is to bring the five explorations to bear in my life and work here and now; to become more aware of the explorations in my interactions. In this sense I have by no means 'arrived' in my own development. At this point I am using the model primarily for my personal edification in the background, rather than as an explicit consultancy tool in the foreground. If Parlett and others agree with my suggested next steps, with more serious research and development of the model by an intentional community, this may change.

Appendix

Table 1. This table lists some principles which I posit are required for change agents to enhance whole intelligence ('whi') in human systems. It connects organisation development (OD) and change practices (at very much a summary level) with Parlett's five explorations. My intention is simply to point to the kind of further detailed development of the concepts and the methodology that I think will benefit a global OD practitioner audience.

Indicative principles in the facilitation of organisation development and change – based on the five explorations in 'Future Sense' (Parlett, 2015)

Responding to the situation – motivated by 'Accomplishment'

This approach to responding to situations can build a shared sense of achievement and sense of accomplishment in organisations.

1. Create ways for people to stand back and regard their collective situation as a complex whole; explore the situation through several different lenses.
2. Help people in a system to use their reading of their situation to discern what kind of action to take in the present moment, better to achieve fit with the environment, not just to reach some idealised point in the future.
3. Support people to build up the courage and confidence to carry through the required steps for change, by maintaining a helpful presence alongside them as necessary.
4. Encourage action and accountability in corporate leaders even in ambiguous circumstances.
5. Create sources of feedback for corporate leaders and change agents to gauge the efficacy of their interventions and ways of facilitating change.

Interrelating – motivated by 'Friendship'

Interrelating is an exploration that can enable organisations to become more collaborative. This in turn builds relationships and trust within the whole system, overcoming the negative effects of structural silos or geographic dispersal, as well as intercultural challenges.

1. Co-create change processes at all levels with as wide a circle of involvement from across the organisation as appropriate to the situation; meetings are also co-owned and co-created by the participants not just run for the benefit of the most senior people in the room or structured by the facilitator.

- 2 Help people explore their interconnectedness and interdependence within the system both in business process terms and in relation to the outcomes they achieve externally.
3. Encourage corporate leaders to manage change within a relational field rather than seeing change as a form of exchange or exercise of power of one person or group over another, in which resistance needs to be overcome; encourage leaders to see resistances as multiple realities out of which the future will emerge.
4. Rather than teach content and theory in classroom education, engage in experiments and experiential activity that help people involved in organisational change to loosen their ego-defensive routines and reactivity. Help people see their own contribution to the patterns of dysfunctional communication in the organisation that might get in the way of creative adjustment.
5. Connect the organisational strategy and mission with a wider human purpose; use shared purpose to reinforce the natural agility and self-organising capacity of a human system.

Embodying – motivated by ‘Life’

Embodying in work life is an essential element of employee well-being. Educating senior leaders and managers about the importance of exploring their own embodied reactions to situations will ground organisational change processes back into an organic, felt sense of what any change is really about in human terms.

1. Explore emotional reactions to change in an embodied way with individuals and groups using somatic methods; encourage the use of intuition as well as rational judgement.
2. Teach methods for embodied self-care during transition periods in organisations; ask participants in workshops and programmes to notice their physiological and inner reactions.
3. Educate leaders about the benefits of putting in place strategies for increased well-being in the workplace and connect this to organisational change strategies to ensure their sustainability.
4. Use metaphors that draw on living systems and ecosystems to show organisational members the difference between embodied change in a living system and mechanical change in a machine.
5. Work with employees during times of difficult change outside the usual air conditioned meeting rooms in corporate offices or hotel conference centres; encourage reconnection with nature within everyday work and during change.
6. Encourage organisations to think about organisation strategy and design holistically, with their whole natural and social ecosystem in mind, not purely their revenues and profits.

Self-recognising – motivated by ‘Wisdom’

In organisations this can be one of the most powerful levers for change. The creation and reinforcement of feedback loops that allow people individually and collectively to adjust their own behaviour, is an important outcome of self-recognising as an exploration within organisations.

1. Teach employees and managers at all levels in human systems to exercise compassion, i.e. help them see the human consequences of their own behaviour, take accountability for this and learn how to take care of themselves and others.
2. Notice patterns of behaviour, thought and emotion that occur in individuals and in the system; help people in organisations achieve an integrated sense of their professional identity at an individual level and collectively as a whole, taking into account their past, present and hopes for the future.
3. Reflect with organisational members on how they can manage the demands that change often creates on people, that will allow them to integrate their change efforts with their other work and with a healthy life; support people to cope with the demands and proliferation of technology and changes which can impact mental and physical health.
4. Develop the deepest sources of motivation in corporate leaders that go beyond monetary incentives, power and status towards a sense of service to others and a therapeutic attitude, especially during times of change.
5. Register the present lived experiences of people in the moment during conversations and workshops about change; encourage mindfulness in everyday organisational routines.

Experimenting – motivated by ‘Play’

Experimenting in organisations enables people to create rapid prototypes of the solutions they identify to their most intractable issues. Experimenting therefore helps people to see the positive results and potential for impact that change can bring. This makes change feel real and ensures it is connected to the needs of an

organisation's external stakeholders, not just an inward looking exercise. The sustainability of organisational change is determined by the degree of active experimentation that occurs.

1. Construct exercises and processes within groups and between groups, that allow them to experience new possibilities directly, learning by doing, not just by receiving information or thinking about what needs to change.
2. Challenge people across a human system to notice the dilemmas that they experience within real work and complex situations; avoid false dichotomy and teach people to live with polarity.
3. Improvise with organisational members in the present in ways that unlock fixed routines and encourage greater creativity; this can involve role play, use of psychodrama methods and a variety of other improvisational methods.
4. Discern constructive from destructive behaviours that have occurred in the past; use the corporate memory of previous attempts at change to enable realism and grounded thinking while still allowing room for great ambition.
5. Manage shame reactions during change; prevent fear of failure from creeping in to derail innovation; treat failed experiments done in good faith as the natural price of progress; help people experience the positive emotions that can come from change in working life when it creates some scope just to relax and to play.

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What do Gestalt therapists do in the clinic? The expert consensus

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Abstract: What it is that Gestalt therapists do in the clinic that is different from other therapists? What is it, in other words, that makes Gestalt therapy Gestalt, and distinguishes it from other psychotherapeutic modalities? This article describes the process of finding an expert consensus about these questions as part of the process of developing a 'fidelity scale' for Gestalt therapy. Using a Delphi study, eight key concepts that characterise Gestalt therapy were identified, together with the therapist behaviours that reflect those concepts.

Key words: Gestalt, fidelity scale, Delphi study, developing awareness, working relationally, working in the here and now, phenomenological practice, working with embodiment, field sensitive practice, contacting processes, experimental attitude.

When I (Madeleine) attended the AAGT conference in Asilomar, California in September 2014, one of my main goals was to persuade some of the participants there to be involved in a study that would try to find an answer to the following questions: What it is that Gestalt therapists do in the clinic that is different from other therapists? What is it, in other words, that makes Gestalt therapy Gestalt, and distinguishes it from other psychotherapeutic modalities? Perhaps most dauntingly, my aim was to try to answer these questions through a process that depended on there being a consensus among experts in Gestalt therapy (GT).

At first, when I spoke to people at Asilomar, there was resistance to the very notion that it was possible to define GT in this way. Later, came warnings about the impossibility of there ever being a consensus in a tradition that is so rich in disagreement and differentiation as GT. But more fundamentally, there were the underlying questions: Why would you want to do this? What would be the point of it?

As I was preparing to write this article, a client returned to me a back issue of the *British Gestalt Journal* that I had lent her several months before. Opening it up, I found myself reading a note that Malcolm Parlett wrote in 2007. The note provided some of the answers to this last question. Commenting on the diversity within the GT community, Parlett suggested that if you were to investigate or dissect any Gestalt term, principle, idea or method a great deal of theoretical difference and confusion would be revealed.

Parlett was concerned that this enormous disparity between Gestalt thinkers threatened the possibility of

securing the GT 'brand' in the wider therapeutic community:

I am thinking of students and trainees who have few stable guidelines after the elementary stage and other experienced professionals who want to grasp quickly what Gestalt offers. If we want to take care of our collective contact boundary with 'interested but not Gestalt educated others', then surely we have to find more consensual rubrics for describing the approach, so we do not put off or confuse this group but rather attract and intrigue them. One need here is to return to practice more, to what we do, and to spelling out our understanding. (2007, p. 54)

Parlett's concern, in other words, was that the wide-ranging divergence of opinion about method and theory within the Gestalt community was a threat to the future of GT. Unless the Gestalt community could agree about what GT was, then it would be difficult to continue to attract students to the 'brand', or to explain what GT is to others.

Around the same time that Parlett was calling for greater consensus about the practice of GT, other researchers in the GT world recognised the need to develop an evidence base to establish that GT is an effective form of psychotherapy (Brownell, 2014; Burley, 2014; Barber, 2009). But before we can tell whether or not GT works, we first need to have a measure for determining whether or not the therapy that a particular therapist is delivering can properly be described as 'Gestalt therapy' (Perepletchikova, 2011; Waltz et al., 1993). And in order to have such a measure,

we must be able to describe what Gestalt therapists do in the clinic that can be distinguished from non-Gestalt forms of treatment.

This then, as I explained to those I met at Asilomar, was what I was going to try to do. The aim was to develop a measure – a ‘fidelity scale’ – that an independent rater could use to determine how faithful therapy being delivered by a therapist is to the methods that characterise GT. The rationale and methodology for the development of such a scale were extensively discussed by Fogarty, Bhar and Theiler (2015). At the very least, development of the scale required the identification of the key principles and concepts of GT; and the ‘operationalisation’ of those principles and concepts in the form of observable therapist behaviours that reflect them.

Usually, fidelity scales are based on pre-existing treatment manuals (Perepletchikova, 2011; Waltz et al., 1993). However, GT has never had a manual, and many experts argue that it would be impossible to create one (Mann, 2010; McConville, 2014; Wollants, 2008; Yontef and Jacobs, 2013). In the absence of a manual, an alternative way to develop a scale is to use the Delphi method. In the Delphi method, statements (such as a description of a therapist behaviour) are submitted to a panel of experts, and treated as valid if endorsed by a consensus of 80% or more.

When reading GT’s rich, vast and diverse body of literature, it is sometimes difficult to imagine that there could be a consensus about anything within GT, and certainly difficult to imagine that experts in GT could agree about the clinical behaviours that characterise Gestalt therapists and that distinguish them from therapists trained in other modalities. Despite these difficulties, in the absence of a manual, the Delphi method seemed to offer a viable and parsimonious path to the development of a fidelity scale for GT. Whether the Delphi method would work depended on whether there was enough consensus in the GT community about what it is to be a Gestalt therapist. Whether, in other words, a panel of GT experts would agree with Dave Mann that although ‘no two Gestalt therapists will be the same . . . both will be recognisable as Gestalt therapists’ (2010, preface, p. xi).

The Delphi method

The Delphi method is an established method for consensus building that poses a series of questionnaires to collect data from a panel of experts about real-world practices (Linstone and Turoff, 1975). The Delphi method involves a group of experts making private, independent ratings of agreement on a series of statements. Experts are also invited to comment on the statements and there are opportunities to offer amend-

ments and modifications in every phase of the Delphi process. Once ratings are received and collated, a summary is fed back to the panel members, who then complete a second round of rating and feedback (Hart et al., 2009). The Delphi method has been widely used in Information Technology and in the field of education to determine prototypical practices for new technologies and practices (Carley et al., 2006; Clayton, 1997). More recently it has been adopted by the health sector in establishing benchmark practices for identifying and treating various disorders (de Villiers et al., 2005; Falzon et al., 2014; Hart et al., 2009).

In contrast to other data gathering and analysis techniques, the Delphi invites participants to engage in a process of multiple iterations, in which feedback and analysis from the first questionnaire is integrated into subsequent questionnaires until a consensus of 80% agreement is reached on each item. Consequently, in the Delphi process participants may have the opportunity to augment or modify their initial position in relation to the analysis and feedback provided by other panel members and communicated by the researcher who facilitates the Delphi process.

The flexibility of the Delphi method and the fact that it provided an opportunity for a wide range of views to be expressed and collated seemed the most appropriate method to develop a consensus about GT and how it might be operationalised in clinical practice.

Participants in the Delphi study

The process of gathering participants for the study began at the AAGT conference in Asilomar, California in 2014. At that meeting, over fifty members of the AAGT were presented with the proposal for the Delphi and invited to participate, or otherwise to suggest participants who may be able to contribute to the study. Despite initial resistance to the notion of a fidelity scale, and many cautions about the difficulties of creating such a consensus in the GT tradition that is so rich in disagreement and differentiation, participants began to warm to the idea, and to understand the importance of such a scale in the face of the demands for evidence-based practice (EBP) in institutional training and the wider health systems (Burley, 2014; Brownell, 2008, 2014; Frew, 2013; Gold and Zahm, 2008; O’Leary, 2013).

The opportunity to meet face to face with so many GT practitioners at the beginning of the process was foundational for this study, as it provided a basis for the lived experience of GT and grounded the cyberspace technology of the project in that experience. Experts for the Delphi had to have either been a GT trainer; edited a GT journal; published books or refereed-journal articles on GT; or been a director of a GT centre. The Asilomar

conference was inevitably North American-centric. However, Asilomar was only the starting point for the invitation of potential participants. After Asilomar, I approached people who were familiar with other regions where Gestalt was practised – such as Eastern and Western Europe and Latin America – to suggest people in those regions who met the selection criteria. The people invited to participate were intended to provide a reasonable representation of contemporary experts in GT theory and practice. Is the representation perfect? Of course not. One obvious limitation of the Delphi is that the study was conducted in English. Given that limitation, it is no surprise that although the list of participants includes experts from many countries, cultures and language, more than half the participants are English speakers. However, parts of the research project have already been translated into German, Russian and Spanish; and in the long run, it will not only be interesting to see whether the study can be validated in the English-speaking world, but whether it can be validated in other languages and cultures as well.

Drafting the survey

Preparing the survey items for the Delphi was a daunting task. A veritable library of resources has been written about GT theory and practice. However, finding commonalities amongst this vast body of literature became easier as the project progressed.

Eight key concepts emerged repeatedly: increasing awareness, working relationally, working in the here and now, phenomenological practice, working with embodiment, field sensitive practice, working with contacting processes, and experimental attitude. Nevertheless, dividing GT into eight discrete concepts felt slightly artificial, because any given moment in a clinical session is likely to include several of these concepts operating simultaneously. Descriptions of the concepts were based on an extensive literature review¹ as well as regular consultation with my supervisors and colleagues; but they also had to be brief, inclusive, pithy and comprehensive.

Describing observable behaviours was even more challenging, as behaviours characteristic of one concept (e.g. phenomenological practice) might just as easily be exemplary of another concept (e.g. working in the here and now).

In this study, the first round of the Delphi was used to develop and refine descriptions of the key concepts and associated therapist behaviours. The refined therapist behaviours were then submitted to the participants in the second round of the Delphi. Therapist behaviours that are endorsed by a consensus of participants in the second round will form the basis of a draft Gestalt Therapy Fidelity Scale (GTFS).

Sending the survey

In the first round, prospective panel members were sent a link to an online survey in which they were presented with descriptions of the eight key GT concepts and associated therapist behaviours. They were asked to rate on a five-point scale whether they agreed with the proposed title and concept description of the eight key concepts of GT in clinical practice. Participants were invited to provide feedback on the name of the concept, whether they thought it was foundational for GT clinical practice, and whether there were any modifications or omissions that needed to be addressed. Participants were also given descriptions of therapist behaviours and asked whether they agreed that each of these behaviours reflected one of the key GT concepts. Finally, participants were given the opportunity to make their own suggestions as to how best to operationalise the key GT concepts.

The moment before the first 'send' button was pressed was like jumping out of an aeroplane (albeit with a parachute and instructor). A leap into the unknown: were people going to respond? Would they be offended by the brevity and condensation of GT into such discrete items? Would they recognise the behaviours as distinctively Gestalt? Were the differences and conflicts within GT about to surface beyond any hope of consensus?

Beyond expectation, the participation from the international Gestalt community was overwhelmingly cooperative. Over sixty experts from around the globe participated, and I feel deeply grateful for their considered feedback and willingness to stay engaged in the consensus building process. Participants included:²

Europe: *Austria* – Nancy Amendt-Lyon; *Belorussia* – Elena Iasaja; *Czech Republic* – Anton Polak, Jan Roubal; *Denmark* – Hanne Hostrup; *France* – Vincent Beja, Gonzague Masquelier, Jean-Marie Robine; *Germany* – Willi Butollo, Rosemarie Wulf; *Italy* – Gianni Francesetti, Margherita Spagnuolo Lobb; *Russia* – Maria Lekareva, Illia Mstibovskiy, Rezeda Popova; *Sweden* – Seán Gaffney, Ia Martensson Astvik; *United Kingdom* – Sally Denham-Vaughan, Toni Gilligan, Phil Joyce, Dave Mann, Malcolm Parlett, Peter Philippon, Christine Stevens.

Middle East: *Israel* – Nurith Levi.

Asia: *Japan* – Noriohshi Okada.

Latin America: *Argentina* – Myriam Sas de Guiter; *Chile* – Pablo Herrera Salinas; *Mexico* – Heather Keyes, Myriam Munoz Polit.

North America: *Canada* – Leslie Greenberg; *United States* – Lena Axelsson, Dan Bloom, Phil Brownell, Victor Daniels, Mark Fairfield, Bud Feder, Iris Fodor, Ruella Frank, Eva Gold, Elinor Greenberg, Mary-Ann Kraus, Lynne Jacobs, Jay Levin, Mark McConville, Joe

Melnick, Ken Meyer, Erving Polster, Bob Resnick, Alan Schwartz, Ansel Woldt, Steve Zahm.

Oceania: Australia – Susanna Goodrich, Noel Haarbarger, Tony Jackson, Judy Leung, Alan Meara, Brian O'Neill, Phoebe Riches, Richie Robertson, Claire Taubert, Greer White; *New Zealand* – Anne McLean.

These participants responded with such clarity and willingness that the iterative process of the Delphi was surprisingly short. In the first round of the Delphi, participants were presented with descriptions of eight key concepts and thirty-five associated therapist behaviours. In light of the feedback received, several therapist behaviours were eliminated, and many more were redrafted. The twenty-five remaining and redrafted therapist behaviours were used to create a mock-up of a draft GTFS.

The first mock-up was taken to a seminar with Bob and Rita Resnick at the Relational Centre in Sydney in early November 2015. Live work and videos were compared with items in the mock-up of the draft GTFS. The work presented by the Resnicks aligned with the mock-up, but further analysis was required. Videos of live work by Gordon Wheeler (APA Series 1 – Systems of Psychotherapy), Erv Polster (work with the unmotivated client), Fritz and Laura Perls, recent work by Serge Ginger, Gonzague Masquelier, and work available on YouTube were analysed. Videos of live work with Lynne Jacobs and Gary Yontef were obtained by consent from supervisees and colleagues to extend further the analysis of the draft GTFS. Finally, the process of analysing the mock-up of the draft GTFS against videos of live work from other therapeutic modalities led to further refinement of the scale.

From the outset of this project it was recognised that dividing GT into differing concepts was challenging because of the fact that GT is a holistic approach that cannot easily be delineated into a list of techniques or skills. Similarly, dividing therapist behaviours into discrete items fails to take account of the fact that in every clinical moment several therapist behaviours may be operating at once. Conversely, no single session of GT will necessarily require each of the therapist behaviours that define GT. Nonetheless, the mock-up of the draft GTFS sought to identify the core therapist behaviours that characterise most sessions of clinical GT.

In the second round of the Delphi, the panel (including several experts who had not participated in the first round) were presented with this refined list of twenty-five therapist behaviours, and asked whether in their view each of these behaviours reflected one of the eight key GT concepts. While I have not yet completed my analysis of the results of the second round of the Delphi, at the time of writing it appears that there will be enough consensus about the therapist behaviours for there to be a viable GTFS.

What follows is a description of each concept, redrafted in light of the feedback given by the participants in the first round of the Delphi, together with some discussion of that feedback. I have also included the twenty-five therapist behaviours that were submitted to the second-round panel.

Developing awareness

Description of the concept

The aim of GT is to develop awareness and promote awareness of awareness. This does not mean simply developing insight or introspection, but exploring experience as physical and emotional beings making sense of our world and our relationship to others and the environment. The therapist supports awareness for the client and his life world and the process by which awareness is developed. In this way awareness can be seen to increase self-regulation. Awareness includes sensory and bodily experience as well as cognitive and emotional awareness. GT identifies three zones of awareness: inner (feeling states), outer (contact functions: behaviour, speech and actions), and middle (thoughts, judgments, ideas). Each of these zones of awareness and their relationship to each other and the wider field is developed through the major concepts that will be explicated below:

1. Working relationally
2. Working in the here and now
3. Phenomenological practice
4. Working with embodiment
5. Field sensitive practice
6. Working with contacting processes
7. Experimental attitude

Given that the aim of developing awareness is central to all GT concepts, no specific therapist behaviours were identified for this concept.

Feedback

There were three comments about this concept that were not fully integrated into the descriptions reproduced in this article (as they were not representative of most views) but remain important to mention. The first comment related to a perennial theme within GT theory: whether the central concept is contact or awareness. The second comment related to the 'zones of awareness' that some felt were outmoded in contemporary GT. The third comment related to the objection that awareness can be perceived as awareness for its own sake (e.g. egotism, self-commenting) rather than developing awareness towards a therapy of action spontaneity and growth (which are clearly the objectives of GT). Fortunately, the comments really only applied to the

descriptions of the key concepts, rather than the associated therapist behaviours.

Working relationally

Description of the concept

Relational perspectives have become central to contemporary GT practice. A relational approach is grounded in a contextualist framework in which human experience is shaped by context. Hence the concept of working relationally is not only focused on the therapeutic alliance, but underscores the meaning-making paradigm for GT. A contextualist framework is paradigmatic in working with the nuances of emotional process, therapist–client interaction, and enduring relational themes.

The therapeutic alliance draws on the concepts of 'inclusion', 'confirmation' and 'presence'. 'Inclusion' requires the therapist to do more than empathically listen and attune to her clients. The therapist leans into the client's experience such that she connects with the client's existence as if it were a sensation within her own body. This is not a merging with the client, but a sensitivity that enables a visceral encounter between therapist and client. Inclusion integrates the therapist's awareness of her responses to the client with a deeply attuned appreciation of the 'otherness' of the client's experience.

'Confirmation' involves a profound acceptance of the immediate existence and potential of the client. The therapist does not control the therapeutic encounter. There is no therapist goal or agenda (except that of increasing the client's awareness). This does not mean that the therapist mirrors or agrees with everything that the client brings to the session. The therapist is committed to the dialogue and this includes genuine moments of dissonance, which are made transparent. The therapist is part of the relational field. This entails commitment to change, not only for the client, but also for the therapist.

The balance between this gently focused inclusion and commitment to the co-created space of the therapy session requires 'presence'. 'Presence' is evident in a grounded and assured quality in the therapist. Equally, 'presence' entails a willingness to be uncertain, to work with 'creative indifference' and to offer support to the client's expressive capacity. This lends an intrinsic ethical quality to the clinical encounter in which shared meaning-making between the client and therapist is developed through an open exchange about how the therapist and client are affected by each other.

Shame and other disruption affective states can also be triggered within the therapeutic relationship for a range of reasons including when the therapist is attending to one aspect of the client's situation, without

maintaining attention for another co-existent (but possibly un-named) aspect of his situation. These ruptures are evident in the withdrawal of the client from the process. It is important for the therapist to attend to ruptures in the therapeutic relationship through offering support and investigating the contribution that the therapist might make in co-creating a shame experience in therapy.

Participants in the second round of the Delphi were asked whether the following therapist behaviours reflect this concept:

- The therapist follows the client attentively, tracking the awareness process and the client's experience, not following a predetermined agenda.
- The therapist responds non-judgmentally to the client, creating the conditions that allow for the most effective client expression.
- The therapist demonstrates a willingness to be uncertain and to work with creative indifference.
- The therapist draws on her relationship with the client as the ground for challenge and growth.
- The therapist seeks to identify and repair any ruptures in the relationship.

Feedback

Several themes emerged in the feedback on this concept. Firstly, a relational stance is central to most humanistic approaches. However, what is specific in GT is the way the therapist recognises that she is a part of the client's field and can be often – as the Other of the situation – his figure of interest. Thus, in GT we often work with/on the clinical relationship. Secondly, many participants wanted the term 'dialogic inclusion' to be used instead of 'working relationally'. But as the question of Buber's centrality to GT remains debated, it was decided to retain the term relational, whilst leaning into Buber's notions of presence, confirmation and inclusion. Thirdly, there was some opposition to a 'Rogerian' flavour in the original description and the GT stance of differentiation and challenge, and this led to some revisions in the description of the concept, as reproduced above. Finally, there was much discussion about the proposition that the therapist does not set an agenda. While most agreed with this as a basis for GT, there was deliberation about the role of the therapist in co-creating the therapeutic space. Most agreed that some kind of interpretation from the therapist is always informing the contact with the client, but some were wary of a top-down approach. In the therapist behaviours submitted to the second round of the Delphi study, a balance was struck between this inevitable tension and recognition that the importance of field sensitivity would inflect the specific situation in each unique therapeutic encounter.

Working in the here and now

Description of the concept

Immediate experience is the essential material for healing and growth in GT. Laura Perls observed that the actual experience of any situation does not need to be explained or interpreted: it can be directly contacted, felt and described in the here and now. This is because the act of remembering the past or anticipating the future occurs in the present. Therefore, in the clinical encounter, references to the past or future are brought back to the present: focusing on what and how the client perceives his situation now. As Gestalt therapists, we concentrate on 'what is' rather than 'what was' or 'what will be', not because we wish to ignore a person's history or his future intentions. For example, in the case of sexual abuse the focus is primarily on how the abuse is being communicated now.

The therapist and client work together on the immediacy of a situation: exploring the many dimensions of the present behaviour or affect. This is particularly the case when the behaviour or affect is habitual or causes suffering. Exploration of moment-to-moment awareness of the present situation can assist in understanding the choices inherent in the broader context of the client's life space. The past may be considered relevant to this exploration, when the immediate situation is thematic of habitual or past experiences. However, the emphasis is always on the immediate encounter, such that if a client wishes to relate an event from the past the therapist would enquire about how it feels to tell that story now.

Working in the present supports the client to 'stay with' his situation rather than shift or change it. This concept is reflected in the paradoxical theory of change that maintains that the focus of the therapy is not to change, but to embrace as fully as possible all aspects of an experience, by increasing awareness of that experience. The aim is not to change, but paradoxically to stay the same, and to engage more fully in that experience. Once full acceptance is reached, then change follows that process of acceptance.

Participants in the second round of the Delphi were asked whether the following therapist behaviours reflect this concept:

- The therapist enquires about the client's immediate presentation.
- The therapist supports the client to stay with what is happening in the encounter between them, by enquiring and seeking to extend awareness about immediate sensation, affect, cognitions and somatic presentations.
- The therapist supports the client to accept and deepen his awareness of his presenting issue rather than trying to change it.

Feedback

Many participants preferred the term 'immediacy' to 'the here and now'. Others also objected to the decontextualised implications of 'the here and now', though this was mitigated by the operationalisation of field sensitive practice.

Phenomenological practice

Description of the concept

Phenomenological practice is more than simply validating the client's subjective experience. It involves exploring the life world situations that the client brings to each session. This requires attunement to 'the id of the situation' through enquiry and support for descriptive language that captures the embodied and sensate aspects of experience. This process may be guided by the method of moving from the general to the particular and avoiding abstraction. By using this method, the therapist and client are able to grow into the situation that they are exploring together and to observe which elements settle into the foreground against the background of the total situation. The main point is to stay as close as possible to the client's experience and to stay with and deepen 'what is' for the client.

This experiential focus takes place in the context of three major precepts of phenomenological investigation: bracket, describe, observe. The first precept is the rule of epoche, which entails bracketing the question of truth or falsehood of any interpretations of reality. The second precept is the rule of description, which discourages interpretations and promotes experience-close detailing of the immediate and concrete aspects of a situation. The third precept is the rule of equalisation. This rule requires the therapist to treat all observed data as equally important without assigning value or structuring a hierarchy.

Participants in the second round of the Delphi were asked whether the following therapist behaviours reflect this concept:

- The therapist supports the client to describe and deepen and become more present to his experience.
- The therapist articulates the different perspectives/experience of the therapist and client.
- The therapist encourages the client to widen his choices rather than establishing a program for change.
- The therapist shares (where appropriate) her own experiences that relate to the client's experience.

Feedback

Feedback on this concept revolved around the question of observation, which was too removed from the inter-

connectedness of the encounter between therapist and client for some. By extension, there was also challenge to the notion of equalisation: as the therapy progresses, not all phenomena are treated equally, and fixed gestalts or the co-created contact style between therapist and client appropriately receive greater attention. In contemporary phenomenology there is greater acceptance of subjective 'prejudices' that shape and inform perception. Rather than seek to reduce these, there is acceptance that we are each always already situated.

Working with embodiment

Description of the concept

Attention to the body is a major focus for GT. From its inception, GT has been informed by Wilhelm Reich's insight that past emotional experiences are carried in habitual bodily tensions. Some therapists might pay attention to the body through introducing somatic experiments. But even without introducing the possibility to exaggerate a somatic habit, or trying a different way of holding the body, GT increases awareness of the way in which the physicality of the client is engaged in relating to the therapist and his wider environment. This approach is both mutual and shame sensitive. The therapist develops awareness of her own body process during the session, and this co-creates an embodied field, which is supportive to the bodily life experience of the client. Shame can often desensitise the body, and encouraging rapid release of physical expression can be overwhelming. So it is important to grade an embodied approach to therapeutic work. Observation of breath (without trying to change breathing patterns) is an example of the GT approach to embodiment.

Therapists may seek to increase a client's awareness of a particular movement or gesture through an invitation to exaggerate, or pay attention to that gesture. Therapists may invite a client to put words to a pain in the body. Connecting embodiment with thought and feelings is essential, as GT does not explore and increase somatic awareness for its own sake.

Touch is not required in working with embodiment, though it can be used to communicate empathy, or to offer support.

Participants in the second round of the Delphi were asked whether the following therapist behaviours reflect this concept:

- The therapist makes observations and enquires about the client's embodiment (including breathing).
- The therapist invites the client to identify sensations, feelings, emotions, thoughts or images that emerge as a consequence of attending to somatic experiences.
- The therapist invites the client to engage with his body through experiment.

Feedback

Feedback on this concept pointed to a tendency to neglect the relational aspect of embodiment in the clinical alliance. The therapist calibrates her own presence and embodiment to support and/or resonate with the client's kinaesthetic experience. Therapists heighten the awareness and ability of clients both to sense their own embodied process and resonate with others. For example, the therapist might say 'I have a sinking feeling in my body as you say that. I wonder what it's like for you?'

Field sensitive practice

Description of the concept

Field theory is considered to be the scientific basis of GT and is fundamental to GT philosophy and method. Field theory is a way of analysing causal relations, such that any event or experience is the result of many factors in which every emerging figure of interest emerges from the ground of a person's life space. Figure and ground are not seen as separate entities but as embedded elements of the person's organism/environmental field.

Field approaches focus on observing, describing, and explicating the exact structure of whatever is being studied in terms of its organisation, contemporaneity, uniqueness, possible relevance and changing process. There are three important aspects of 'field' in GT. First, the experiential field, where the client's perceptions and immediate subjective experience are explored at the level of self-awareness. Second, the relational field between the client and the therapist. Third is the wider field including social, historical, cultural context (or life space) in which the client is situated.

Participants in the second round of the Delphi were asked whether the following therapist behaviours reflect this concept:

- The therapist investigates the ground (or context) from which the client's presenting figure emerges.
- The therapist supports the client to identify how his perception of his environment and prior relationships and needs organise current experience.
- The therapist supports the client to identify the uniqueness of his experience.

Feedback

Feedback on this concept was less varied than other concepts. On the whole, most seemed satisfied with the original description though some attempt was made to integrate a more holistic and interconnected approach to the field, including the systemic idea that one experience or behaviour cannot be isolated from the rest of the elements of the field. The therapist beha-

viours reflecting this concept attempt to include the clinical practice in which the therapist recognises herself as ‘a function of a field’, as defined by the current field with the client, and uses her awareness as information about the current field formation.

Working with contacting processes

Description of the concept

In GT, awareness can be increased by focusing on styles of contact. The contact cycle is one of the key concepts in GT’s understanding of how the organism reaches towards the environment and engages in the (full or partial) satisfaction or frustration of needs and attendant meaning-making. As the client moves towards another (or towards a satisfaction of a need by reaching out towards the environment) there are certain characteristics of this movement that the Gestalt therapist is trained to identify as contact processes. Initially only four stages of contact were described: fore-contact, contact, final contact, and post-contact. These terms were later developed into a heuristic tool: the cycle of contact/awareness/experience. This cycle describes the ‘ideal’ interactive process of contact and withdrawal of organism and environment as involving sensation, awareness, mobilisation of energy, action, contact, satisfaction (assimilation), and withdrawal.

This cycle can be useful in tracking the experience of figure formation and identifying relational patterns where a client may become habitually stuck. Early GT thinkers suggested that psychological disturbances resulted from interruptions to this cycle, which when completed satisfactorily is regarded as ‘healthy’ self-regulation. Seven major styles of interruption to contact were identified: desensitisation, deflection, egotism (self spectatorship), introjection (swallowing rules or norms without consideration), retroflexion (turning an impulse back on the self), projection (disowning qualities of the self and attributing them to others), and confluence. More recent GT thinkers revised this notion of interruptions as individualistic and inconsistent with field theory and refigured the contact cycle as styles of moderation to the flow of contact that might be adopted in any given organism/environment. Whether a contact style is useful or dysfunctional will depend upon the context in which it occurs. The seven interruptions to contact were refigured on a paired continuum:

- desensitisation – hypersensitivity
- deflection – staying with
- egotism - spontaneity
- introjection – questioning/rejecting
- retroflexion – expressivity
- projection – owning

- confluence – differentiation

Through this continuum, every creative adjustment to the environment is considered a form of self-regulation at the contact boundary. Observations about contact style are not based on the content that a client brings to the session, but on the way in which he brings it (or not), including the way he brings (or does not bring) himself to the therapist. The contact style emerges from the relationship between the therapist and the client. It is not a one-person event.

This formulation of patterns of contact and creative adjustments has been further elaborated by European and North American writers. They suggest that the Gestalt therapist develops the ability to sense how the client’s intentions for contact move and shift so as to perceive the sense of an absence at the contact boundary of the therapeutic encounter. This involves cooperation between client and therapist to facilitate a new synthesis of awareness and create new meaning by focusing on experiential information that was previously not yet figural.

Participants in the second round of the Delphi were asked whether the following therapist behaviours reflect this concept:

- The therapist works with the client’s interactional patterns as they emerge between client and therapist.
- The therapist and the client identify the figure together.
- The therapist co-creates a space in which the client and therapist explore how they are impacting each other.
- The therapist identifies experiential processes that have not yet been named or overt and explores the impact of this on her awareness.

Feedback

This was the concept that attracted the most varied and passionate feedback from participants. At one stage I suggested to one of my supervisors (Leanne O’Shea) that the feedback was so engaging that a conference on the topic of contact in GT would be very lively (and potentially lethal, she added!). The main objections arose from the intra-psychic, individualistic paradigm that underscored the models of contact that were developed post-Perls, Hefferline and Goodman (1951). It was difficult to retain the theoretical importance of these models whilst also retaining the more contemporaneous and relational GT approach in which the contact style is emergent from the dyad, not from the client. Many participants emphasised the importance of recognising that contact always occurs in an organism/environment relationship.

Experimental attitude

Description of the concept

Awareness can also be explored through working with an experimental attitude. Experiments are introduced from material that emerges in the therapeutic encounter. Experiments are co-created by the client and therapist and are graded for risk and challenge in a way that supports the client's capacity to engage with and deepen into his awareness. The therapist supports an experience where the client tries out new behaviour, potentially leading to new meaning-making and deeper awareness. The therapist is sensitive to the potential that an experiment may be shaming or rupturing of the relationship. The therapist works with the client to integrate material that emerges from the experiment. The result of the experiment produces a fresh figure of clarity for the client (a new awareness arises).

Experiments include:

- An invitation to exaggerate, minimise, repeat or reverse a bodily gesture or behaviour.
- Empty chair work: either with an aspect of self, or with a person with whom the client is relating.
- Working with unfinished situations from the past by focusing on the internal structure of the therapeutic alliance.
- Guided visualisation.
- Staying at the impasse.
- Directing awareness to breath or bodily movement or sensations.
- Creating a safe emergency.
- Introduction of art materials, movement, music or imagery.

Participants in the second round of the Delphi were asked whether the following therapist behaviours reflect this concept:

- The therapist uses material that emerges in the therapeutic encounter as the basis for introducing experiments to develop the client's awareness.
- The therapist grades the experiment by eliciting feedback from the client regarding the degree of challenge and support that the client perceives.
- The therapist supports the client to integrate learning and awareness that emerges from an experiment.

Feedback

Most participants agreed that an experimental attitude is an essential and differential element of GT. This is only the case where the experimental attitude is a process rather than a method or technique (as some modalities have taken up the empty chair as a technique and decontextualised it from the relational foundations of GT). Thus, the whole of GT is experimenting – experimenting with contacting, presence, self-disclo-

sure, embodiment, challenge, support, where the Gestalt therapist holds an experiential stance and works with clients to develop experiments.

Validation of the scale

Preliminary analysis of the responses to the second round of the Delphi study suggests that it is likely to result in a working document containing descriptions of therapist behaviours that the expert panel agree characterise the specificity of GT in clinical practice. The analysis will be completed in time for the EAGT/AAGT conference in Taormina, Sicily, and may be the subject of a postscript to this article in a subsequent issue of the *BGJ*.

Once the analysis of the results of the Delphi study has been completed, the next stage in the development of the GTFS will involve the validation and reliability of the scale. This stage involves raters being trained in the use of the draft GTFS, rating recordings of sessions from two groups. The first group will be videos of clinical work by therapists trained in (and purporting to practise) GT. The second group will be videos of clinical work by therapists not trained in (and not purporting to practise) GT. The hypothesis to be validated is simple: those trained in (and purporting to practise) GT should rate higher on the GTFS than those not trained in (and not purporting to practise) GT. Once the scale is validated it can be used for clinical trials (including post hoc analysis) and for training purposes.

This has been a wonderful project to be engaged in. I have deeply appreciated the warmth and encouragement from the Gestalt community and have sometimes welcomed the many challenges along the way. Research can often be a lonely path, but this project has offered connection, and most importantly a means towards consensus that our community needs in order to thrive.

Notes

1. The full reference list for the Delphi study is too long for print publication, but it can be accessed via the BGJ website (www.britishgestaltjournal.com), or be obtained by contacting the first-named author.
2. There were three further participants who elected to not be named.

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In his own voice

An interview with Malcolm Parlett, 31 January 2015

Christine Stevens

Malcolm Parlett is the founding Editor of the British Gestalt Journal, a co-founder of GPTI, and author of Future Sense: Five Explorations of Whole Intelligence for a World That's Waking Up (2015). This interview evolved out of several face-to-face conversations. I had looked forward to this project for some time, as through his long life experience, Malcolm has been a part of so much of the history of Gestalt therapy in the UK. Of course, what is printed here is inevitably and intentionally seen through the filter of Malcolm's eyes and in his own voice – this is his take on the events and experiences he describes.

Malcolm, it's so difficult to know where to begin with this interview because your involvement with Gestalt goes right back to the beginnings of Gestalt therapy in the UK, and we could write a whole history about this! Tell me how you were involved.

Well, there are my own beginnings in Gestalt, and there're the beginnings of Gestalt in Britain, and they are not the same. Following my psychology studies at Nottingham and Cambridge Universities, I worked in educational research at MIT and at Edinburgh University and then as an independent consultant. My first encounter with Gestalt was in 1975. I attended a three-day workshop run by Carolyn Lukensmeyer for college teachers, which made a huge impact. I felt as if I had arrived home. I went on to train at the Gestalt Institute of Cleveland in Ohio, USA in 1977–78, with Elaine Kepner, Ed Nevis, Rainette Fantz, Bill Warner, and others, and my first Gestalt therapy as a client was with Sonia Nevis.

Meanwhile in the UK, Ischa Bloomberg had been running Gestalt training (Gestalt Training Services, GTS). Many of the people who encountered Gestalt through him, such as Gaie Houston, Ursula Fausset, Dolores Bate, Marianne Fry, John Whitley, Hilda Courtenay, and Helen McLean went on to be well-known trainers themselves. When I returned from America at the end of 1980, Ischa had just moved to Italy. I met him later, only briefly. This early training in Britain was barely visible in England when I arrived, though it was continuing actively in Scotland. My own initial involvement included co-leading a residential workshop with Gaie Houston and another with Ursula

Fausset. I also did some theory teaching at the Gestalt Centre, London, which had been founded by Ursula Fausset who handed it over almost immediately to Judith Leary-Tanner, Peggy Sherno, and John Leary-Joyce.

How would you characterise the Gestalt that was done in those early days?

There were marked differences in style and emphasis between different centres and traditions. From what I have heard, Ischa's approach was characteristic of the predominant style of Gestalt therapy in that period, meaning that it was conducted in a group, with the therapist or trainer acting as a skilled solo performer, challenging and exposing the unaware behaviours of group members who came forward one at a time to 'work'. There was little interest in group process, hardly any theory teaching, and those who challenged the authority of the trainer had to be very self-confident. Ischa was evidently brilliant, charismatic, and insightful – as well as unpredictable and at times boundary-breaking. It seems that relatively few stayed the course, and those who emerged successfully were resilient and independent-minded – as is obvious given the people I mentioned. They became skilful through observing closely a master-practitioner at work, and finding their own values and strengths. The general advice at the time was that the only way to grasp the nature of Gestalt was to experience it and live it yourself. Books and lectures could not do it.

This leader-focused form of early Gestalt was much influenced by Fritz Perls and also, more enduringly

(and with different emphases), by Laura Perls at the New York Institute. The original members of the Cleveland Institute – the second Gestalt institute established – were also trained by Fritz and Laura, Paul Goodman and Isadore From, but progressively developed a different culture from that of New York. New York upheld the Goodman and Perls tradition of an anarchistic outlook and emphasis on individual responsibility, and those in training often did not have a background in mental health. By contrast, the original Cleveland group were mostly mental health professionals, mostly married, and had more conventional lifestyles: after all, they were Mid-Westerners! By the time I trained at Cleveland, the faculty had developed a whole training programme, and a style of working in groups that emphasised group process; they were extending applications of Gestalt ideas to family systems and to working in organisations, and were trying to communicate Gestalt knowledge to trainees in structured forms, including theory teaching, awareness exercises, and skill-practice with peers. Trainers were discouraged from being narcissistic, and taught in pairs and teams. By present-day standards they were not academically super-theoretical: they focused on conveying core principles and learning skills. While training, the book I studied most intensively was *Gestalt Therapy Integrated* by Erv and Miriam Polster. They had a major influence on the way that the Cleveland Institute developed in the early years. Sonia and Edwin Nevis were also major thought leaders during the time when I trained there and for years afterwards. I formed a strong connection, too, with Elaine Kepner, mother of Jim Kepner, who also gave me an experience of assisting her.

On moving back to England, I was struck by the huge differences that existed between styles of Gestalt. There seemed wholly different versions of Gestalt in existence. To me, the GTS style sounded challenging, exciting, and flamboyant compared to the Cleveland style, which was more collegial, measured, and – in present-day terms – more ‘field-relational’. Trainers in Cleveland were not held in awe, and they modelled ways of working that were non-shaming. Later, when I heard of ‘dialogic’ approaches, I realised they were more or less the same as I had experienced in Cleveland.

So how did Gestalt training develop in the UK?

Alongside the two versions of Gestalt practice I have mentioned – and there were lots of overlaps between them, and increasingly so over time – there also arose a third approach which was different from both, and came about through the influence of Petruska Clarkson. She saw Gestalt as one among a number of approaches, and was equally involved with Transactional Analysis (TA) and later with promoting integrative psycho-

therapy. We discovered later that she did not come out of a Gestalt training tradition, and that her own grounding in Gestalt had been limited – though she was an extremely rapid assimilator of ideas and techniques she encountered, and communicated these with great facility. It was shocking to me that she thought you could go into a room one day and teach and act as a TA trainer and on another day walk into a different course and be a Gestalt trainer. This was very alien to those who, like me, had identified with Gestalt as not just a therapy approach but as offering almost a way of life, a philosophy that one internalised, rather than something one merely ‘did’. It felt alien to how Gestalt had developed up to that point, regarding learning of the approach and personal development as interdependent. However, Petruska’s influence proved helpful in two respects. Her focus was on Gestalt specialists becoming professionally part of the wider psychotherapy community – which has happened, but would have taken much longer without her, I think – and she underlined the importance of ethical practice in ways which had not been articulated formally before. While the Gestalt Centre, by contrast, stayed more aligned with the experiential tradition, Gestalt training took on a quite different flavour at Metanoia – more theory based, academic, and professionally oriented with less emphasis on personal and group development. The whole move towards an increased academic emphasis – which Petruska spearheaded but was arriving anyway – has been a mixed blessing.

What was your involvement at this time?

On a personal level, aged forty, I had come back from America having wound down my consulting group. I wanted to develop a new career as a Gestalt therapist and, in time, maybe a trainer. But at that point I had no clients, no base, and no income, so being offered a nearly full time professorship at the Open University for a two-year contract was a lucky break. It supported me while I set up a Gestalt practice and began offering courses and short workshops.

I also knew I wanted to explore Gestalt theory, which was an interest I held in common with Petruska. I heard she was setting up training, so I went to meet her. I subsequently taught some modules at Metanoia. Peter Philippson, Freda Fitton, and Ken Evans were among the trainees I taught there. Later, all three did some of their first assisting with me. Around this time – 1985 – I moved from London to Bristol. I was planning to set up Gestalt therapy training with my friend and colleague Dr Richard Tillet for health service workers. However, just as I arrived in Bristol, he was appointed as a consultant psychiatrist at Exeter, so that plan collapsed – though we ran a short introductory course together once a year for around seven years. Around

this time I met Marianne Fry at a party at Ursula Fausset's and we got on famously. Marianne and I were both interested in setting up a training, and we decided to go for it, supported by Judith Gregory in Bristol, who helped get a group together. This was the start of Gestalt SouthWest (GSW).

Another way I was involved was that Richard Tillett and I collaborated in organising the first ever Gestalt Conference in Britain. This was in 1987, at Exeter University. I remember sitting down at the opening and the room was full – I think there were seventy or so people there – and feeling a little awe-struck through making history: the first ever meeting together of Gestalt people in Britain. The conference was a success and we organised a second one two years later, again in Exeter. Ken Evans organised the third one in Nottingham. That's where I gave a lecture which became my 'Reflections on Field Theory' paper, published afterwards in the *British Gestalt Journal*. And, of course, the conferences have continued since.

In fact it has been one of the most frequently ordered articles ever since! Can you say some more about Gestalt SouthWest?

Structurally, it was an association of people who wanted to train, and who employed Marianne Fry and me as their trainers. It was non-profit making. We only took people who had already qualified as a social worker, GP, occupational therapist, clinical psychologist or who had a counselling qualification. The training group would meet eight times a year, for long weekends starting on Friday evening, with also a week's residential. Originally, there were four weekends led by Marianne and four by me, alternating, so that trainees could experience two styles – and traditions. When we came to the end of the first year, some wanted to continue and some left, so we decided to top up the group and to continue; and we went on as a rolling group in this way until Marianne's death in 1998, by which time Jenny Mackewn was also an active trainer, and there were also visitors, like Helen McLean from Cambridge. The model of topping up an ongoing group was highly successful and appreciated, in that more experienced members of the training group helped the newly arriving members, who learned through being around others already embodying Gestalt. And the longer-term members could also recognise how much they had 'moved on' in a year.

However, as a training model, it could not transfer to fitting an orthodox linear educational model based on academic conventions, where 'second years' as a cohort are kept apart from 'first years'. That model keeps the 'instructive power' in the hands of the teachers. Our theory teaching was also not based on the academic paradigm of prescribing in advance what was to be taught; most teaching in GSW arose out of what was

happening in the room. Sometimes I would plan things, but the weekends were not topic- or theme-based. Group process featured strongly, as well as practising in threes, experimenting, and demonstrating and discussing therapy. Trainees had to write a case study, describing some Gestalt principle in action and their own process, but writing was not the key goal: clinical competence and personal maturity were. At the end of the year everyone received feedback, including from their peers. People remained in the group for two to three years. There were no formal qualifications or certificates given, but participants gained 'training credit hours' towards a GPTI Diploma.

I have very fond memories of the trainees we had. It was a lively and talented community of people, and a very exciting time. A number have made big contributions to the Gestalt world – people such as Sally Denham-Vaughan, Paul Barber, Neil Harris, Jude Higgins, Judith Gregory, Ann Pettit, Di Hodgson, and Jenny Dawson. Lots of others came for a year or two. It was a huge blow when Marianne died. I soon retired from GSW, hoping that the training would continue – there were capable people coming forward who could have run it, but there were divisions and it didn't carry on, and I was sad about that. Our model was at odds, however, with the whole way in which trainings were developing. In retrospect, I suppose I might have tried to stay on, but I did not 'own' GSW, and attempting to come back in a leadership role, and be forced to take it in an academic direction would have been contrary to the whole culture and philosophy of what we had been doing, which was to share power and build a communal enterprise. One thing survives: the annual Marianne Fry Lecture still evokes the energy of GSW, and those who come to the Lecture often remark on the 'feel of the day' being very lively, friendly, and 'different'.

Where does GPTI come into the picture?

GPTI was critically important for understanding the position of Gestalt SouthWest. Petruska and I decided to set up a national body that would be responsible for Gestalt certification and accreditation. The first Board included Maria Gilbert and Marianne as well. At first, GPTI included just the Metanoia Gestalt training and GSW, and the idea was that other institutes would join in. Sherwood did for a time, and Manchester and York trainings, and Edinburgh much later. But it never became an inclusive national body. The idea had been that trainees from different centres would take a common GPTI exam. The plan was attractive to me because it meant that Marianne and I did not have to administer a complicated accreditation system for our own training. In developing the GPTI regulations, code of ethics and so on, I put in a massive amount of time and effort, with support from Maria Gilbert. At one

level building GPTI seemed very exciting, but behind the scenes it was a great strain. There were constant disagreements, and a culture clash between GSW and Metanoia. It was a stormy and difficult process. Looking back, I see this as a dark and complex period in my life, full of difficult decisions, conflicts, and moral dilemmas. I am afraid that long-term, GPTI carries scars from the way it was at the beginning – especially in how difficult it was, and is still, to become qualified. The roots of this go back to the very, very beginning with explosive differences regarding the first candidates from GSW and Metanoia.

How did the idea to start a journal come about?

This was Ray Edwards' idea. I had met him at Metanoia. He had previously been an assistant editor on a biochemistry journal. He wanted to start a Gestalt journal based on the model of a scientific publication and said he would do all the work, with a semi-automated system, and I could be the 'figurehead'. I fell for this! Taking on the editorship also chimed with my concern to support Gestalt writing and theory development, which I realised would be essential if Gestalt was to survive and flourish. It soon became clear, however, that there was far more to the job than I had anticipated. For a start there was hardly anything being sent in of a publishable standard by British Gestalt writers at that time – there was no tradition at all of Gestalt writing. I remember we had three different printers for the first three issues, and the very first issue was full of typographical errors and odd symbols. We got so far behind that Volume 2 came out two years after Volume 1! It was called the *British Gestalt Journal* to distinguish it from *The Gestalt Journal*, which was already in existence, edited by Joe Wysong. However, I was determined it would be an international publication, as well as serving to stimulate British writing. It was also very important to me that it was ideologically non-aligned, and would not exclude anything that engaged the Gestalt community strongly. I wanted to keep some rigour and boundaries around what Gestalt constituted, as well as foster new thinking.

Tell me about the very distinctive appearance of the Journal.

It was Ray's idea to make it A4 size and we thought that having it yellow would make it stand out from the pile of papers on someone's desk. At first the cover was not laminated, but it quickly began to look drab, so from the second issue onwards it became an even brighter yellow and laminated.

How was it produced at the beginning?

In the early days, submissions would arrive by post in large brown envelopes, mostly written on manual type-

writers, sometimes hand-written. They came to my home address in Bristol, via a PO Box. I would slit open an envelope containing a manuscript and shove it on a pile and not look at it for at least a month or two, because things were slow in those days. By the time I finished editing fifteen years later, contributions were arriving as email attachments and people nagged me if they had not heard back within a week!

Both GPTI and the Journal received grants at the beginning from the Artemis Trust, set up by Richard Evans, a wealthy benefactor who subsequently bailed out Metanoia. He deserves recognition. The grant enabled us to begin the BGJ – get a computer, pay for the first print run. The process was difficult and slow. All I was thinking about was the next issue and whether we could fill it. Ray bowed out after a few issues. Judith Hemming, whose parents had both been journal editors, and Pat Levitsky, who had once been a journalist, were assisting me, which was a huge help. Caroline Hutcheon started to help with the administration in 1997 and has taken more and more responsibility over the years since. In the later years, Neil Harris and Paul Barber were helpful assistant editors. After the start-up money had gone we often existed hand-to-mouth financially and I put my own money in at times. People complained about the price and subscriptions were slow in growing. Sue Congram helped me to put things on a more business-like footing and we set up the *Friends of the BGJ*, which was a way of gaining more financial stability. With this innovation also came the annual BGJ Seminar Day.

The printing for the first few issues was a nightmare, and eventually Pat introduced us to Splash Printers in London, run by relatives of hers. They did a wonderful job for years, but to be sure of getting the finished journal how I wanted it, I would go from my tiny office in Bristol up to London and sit in their big open-plan offices which smelled of printing ink and with the sound of printing presses coming up from below. We used to call it 'Splash Day'. Judith accompanied me for many of these day-long visits. We would go over everything, proofreading with a fine-toothed comb. Naomi Jadwat would be doing corrections throughout the day. Sometimes we would re-write sections or introduce more breaks to make sure it all fitted well visually on the page. I loved the intense creative process and the sense of it all happening against the clock. I was usually finishing my Editorial during this day, often adjusting its length to sort a pagination problem. By the end of the day when I 'signed it off', we felt we had created a Journal! This was a labour-intensive process and I never changed it. It was the end of an era when, Christine, you took over as Editor and ditched that whole system!

So initially the Journal was an arm of GPTI?

Yes, in the first years I was administering them in tandem. I quickly realised that the connection of the BGJ to GPTI was a tremendous handicap: people in other organisations saw it as a GPTI magazine. So I pushed for the journal to become an independent outfit. We became Gestalt Publications Ltd., a separate organisation with its own independent Board, for many years chaired very effectively by Gaie Houston from the Gestalt Centre.

You were the Editor of the BGJ for the first fifteen years of its life and handed it over successfully in 2006 – what stands out for you as you look back over this time?

Despite the highs and lows, I loved the creative process. I was involved with some amazing people and had huge fun at times. I appreciated doing the interviews, especially with Bob Resnick, Georges Wollants, and especially with Daan van Praag about his impending death. I enjoyed the diplomatic challenges – dealing with bruised egos, and heading off potential assaults on our independence. Of course, too, I learned a lot about editing – and about writing: what is he *actually* saying here? Will she object if I re-write that sentence? An important development was that I met Joe Melnick on a Writers' Conference and offered him encouragement when he became the first editor of the *Gestalt Review*. We established a warm relationship over the years, recommending writers to each other and sharing experiences in editing Gestalt journals, as friendly competitors! For me these international linkings-up were the best bit of being editor. Gordon Wheeler, Joe Melnick, Margherita Spagnuolo Lobb, and Frank Staemmler, all editors and teachers, became firm friends. I was determined that the quality of the writing and the calibre of the contributions in the BGJ would stand up to comparison with anything else being published at the time, and I think we achieved this. What also stands out is the personal difficulty I had in delegating responsibility to those who were helping with the Journal. You, Christine, have been far more successful in this, and I admire what you have done. Finally, of course, I greatly appreciated the *festschrift* I was given when I retired as editor.

What else were you doing besides editing the BGJ over this time?

In the first years of GPTI, I was the organisation's representative on UKCP. It was all about how psychotherapy should be organised as a profession. There was talk of enforced government regulation, so there was a move to be ahead of the game – psychotherapists had to have a professional body. The meetings were exhilarating, like attending a political convention. When, after a number of preliminary annual conferences, we finally voted to constitute ourselves as the UK Council for

Psychotherapy, one sensed an enormous, unstoppable development was underway. There was a complex process of dividing up psychotherapy – given that no single, inclusive definition of psychotherapy could be agreed across the whole profession. Some of the fiercest disputes occurred between the various branches of psychoanalysis – for instance between those who asserted that analysis needed to be five times a week or it wasn't analysis, and others who were 'psychoanalytically oriented' but saw people weekly. To outsiders, many of the arguments seemed petty, even amusing, but to those involved they seemed life or death matters. In GPTI we had our own big concerns. We were the only Gestalt organisation there at the time – so our choosing where Gestalt stood within psychotherapy seemed vital to get right. Gestalt had always stood apart: we had roots in psychoanalysis, humanistic psychology, existentialism, and Reichian body work – but that did not mean we were natural allies with any of these exclusively. After a lot of milling around, it became clear that Gestalt was similar to a number of other approaches in that it was not easily classified – that is, we did not fall under the biggest headings – for instance, psychoanalytic, behavioural, or practising hypnotherapy. This is how HIPS (Humanistic and Integrative Psychotherapy Section) came into existence. I found myself in a group that I did not know, did not theoretically agree with, and to an extent had considered competitors. However, we had to find ways of working together as a group – in fact, soon becoming a powerful minority grouping within UKCP. It was pure politics of a kind that I had not encountered before. Despite the others in HIPS being as committed to their approaches as I was to mine, relationships formed and bridges were built. For example, as a result of connections made, I later taught Gestalt to psychosynthesis students for seven years.

And, of course, I was also running the GSW training with Marianne Fry. While it lasted, there was an atmosphere and ethos that was unique. This was partly Marianne; she was a deeply spiritual person, but also provocative. I could tell some wonderful stories about her. She would do things which shocked and enlivened – like opening a newspaper if she was bored. I also taught on a successful Gestalt in Organisations programme with Trevor Bentley and Sue Congram for ten years. In later years, I ran ongoing support and enquiry groups for therapists, some meeting four times a year for three days, twelve people to a group. I also offered individual therapy and supervision. Like Perls, I became convinced that group therapy was much more important than individual because there are so many more resources in a group.

What do you see as key concepts in your therapeutic work with groups?

I wanted to be both inquiring and supportive – and curious, like a researcher – and paying attention to the whole field, the whole group. If someone was working, I would try to keep some attention for the other members, who would often join in as part of the process. Mostly the interruptions were helpful. I wanted the group to employ all its resources and not be passive spectators. People might, for example, take part in an enactment of family members, offering physical or emotional support, or report observations, especially at the end of an episode. The things that mattered to me very much are things I've written about now in my book: especially situational thinking – being sensitive to what is happening in the room, and noticing what needs resolving immediately. I wanted people to work together and also to report resistant or antipathetic feelings towards others in the group. Things weren't left unexplored if I could help it; I didn't want people to suffer in isolation. We did a lot of body process work, and a lot of experimenting and self-recognising. I've always thought that *support* is as important a concept in Gestalt thinking as *awareness* and *contact* are. My view is that as a practitioner you try to create a highly supportive environment – the higher the trust people feel, and the more they know their voice will be heard and their presence and contribution recognised, the more they will take risks with the novel and untried. If people do not feel supported, they won't take risks. I define support as 'That which enables', a definition which Lynne Jacobs took up. The closer people come to their wounds or scars, the more they tend to veer off into habitual modes of protection. In my view, creating a field which contradicts 'expectations of danger' is often the key function for the therapist: the fixed gestalt wobbles and finally collapses if the environment proves to be different from what's expected. Support is often seen as the opposite of challenge: but supporting someone can often challenge them greatly.

Another key concept I have held in my Gestalt work is about people extending their range of functioning. My sense is that we all need to have an extensive repertoire of different ways of being-in-the-world in order to be able to function fully as a competent adult. If we consider the flow of living as interrelational and co-created, any restrictions or automatic responses that one party has will impact others and be destructive of good relationships and group functioning. I like to think I was an agent of stimulating people to extend their range. And groups offer unlimited scope for doing so.

What comes over through all of this, despite setbacks and difficulties, is how much you care about Gestalt.

Yes, I did absolutely fall in love with Gestalt. It has been like a stable marriage in my life – growing, changing, and going through crises, but surviving.

Let's find a way of talking about the circumstances whereby you stopped work as a therapist.

Looking back, I recognise the way I gave up working as a therapist was damaging and unfortunate. I mishandled the situation by stopping so suddenly. Important relationships were disrupted, and many lost, it seems permanently. I temporarily lost my sense of balance and self-confidence and acted too hastily. The precipitating events I cannot talk about, since I am committed to maintaining absolute confidentiality. There is a conflict for me between honouring this commitment and my wish to be open and to model transparency. I know there would be a lot of learning for other therapists if I explained how I went wrong and the traps I fell into. I am still hoping for a change in the situation so that I can speak frankly and freely, as part of a wider healing process. Although my retirement was a sudden and painful experience, I learned a lot about myself. There have been big changes in my life since then. Workwise, I have a small coaching and mentoring practice, but my main focus has been on writing and editing. I have co-edited with Ty Francis a new book on Gestalt coaching, called *Contact and Context*, and I have written several articles and a book.

Looking to the future, what stands out most is your book, *Future Sense*, that you have just published. It seems to pull together many of the themes with which you have been deeply concerned over the years, repackaged into a compelling model for how we can live relationally whole lives.

Well, these are your words! Thank you. Writing *Future Sense*, and now taking it out into the world has been, and remains, an exciting challenge. In my own small way, I want to help redress the reality that as Gestaltists we have failed to live up to Paul Goodman's radicalism. Overall, we have not become fierce public questioners. I regard the five domains of experience I write about as offering to a much wider community of practitioners and citizens, certain values, ideas, and priorities which the Gestalt approach has integrated and long championed, albeit not always explicitly. I believe they are potential resources for the necessary revolution in our culture's understanding of itself – they can show the way towards greater sanity in twenty-first-century human affairs.

In particular, as Goodman emphasised, how we educate the young has enormous impact, not only on their own lives but on shaping the society they grow up to believe is 'normal'. If we want a different future, we have to revolutionise present educational practice. At present, schooling prioritises intellectuality, competition, striving, and social compliance instead of how to collaborate with others, how to listen to one's embodied experi-

ence, release creativity, cultivate field awareness, and develop one's sensibilities as a human animal in a degraded planetary habitat.

In effect, I am arguing in *Future Sense* for a more sophisticated and integrated view of what it means to become an 'educated person' in the contemporary world, and how humanity can get there. An earlier title I considered for the book was 'Growing Up as an Adult'. Many of us have had to do that – 'growing up' through releasing ourselves from the effects of traumatic beginnings, waking up to our limitations, and taking more responsibility for our lives, choices, and actions. These are all crucial steps in recovering what I am calling our 'whole intelligence' – which Gestalt has

sought to cultivate from its beginning. Humanity at large also has to 'grow up' and develop its collective whole intelligence or, as a species, we are done for. That's the message of the book. Even though the tasks ahead for humanity are immense, I'm wanting in *Future Sense* to convey a picture of confident possibility.

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Letters to the editor

Appreciating Ken Evans and honouring his loss

Maggie Maronitis

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Dear Editor,

It has now been seven months since the death of my most treasured trainer, supervisor, mentor, and friend, Ken Evans. My hope is that in writing something of my experience of him, I can both honour him and contribute to my own healing process. There may be others, like me, who are still reeling at his sudden and unexpected departure. In truth, I never considered the possibility of Ken dying, I never wondered what my life, both personally and professionally, would be like without his solid, consistent and constant support. Rather, I was excited at the thought that he, and his wife Joanna, would be celebrating my marriage with me, and I felt deeply honoured that Ken would give a reading during the ceremony (1 Corinthians, 13). Instead, two days before my wedding, I was sitting in a chapel participating in a memorial and thanksgiving ceremony for Ken's life. Feeling totally bereft, I didn't speak then but I feel the time is right to speak now.

I do know what life is like now without Ken, in direct relation to what he brought into my life and what was co-created between us. The following letter, which I have addressed directly to him, provides a window into some of my experiences of Ken, and is an expression of my gratitude for the gift of knowing him.

Dearest Ken

Thank you for having held a dialogical attitude from the very beginning of our relationship, when in 1992 you interviewed me for a place in the Gestalt programme at SPTI. This was my first experience of a horizontal relationship with someone in a position of power. I felt truly met as an equal human being and was elated for days afterwards; I could hardly wait to begin training with you.

Thank you for your availability for contact and for initiating contact with me; for seeing my fear as a trainee in a large group. On more than one occasion

you came to sit with me and held my hand whilst I found my voice and my place in the group. Your gentle attunement encouraged me to move through my fear of contact to a place of seeking contact.

Thank you for your laughter. I have some joyous memories of your laugh, both in training and in supervision with you. Two distinct memories I hold dearly have the same quality, whereby you surrendered to the energy in the between, not knowing what the outcome would be, and on both occasions I felt the healing force of bubbles of happiness overflowing; the freedom of laughter without the old introjection of 'this will end in tears'!

Thank you for your generosity in sharing your knowledge in so many different ways and arenas. I sometimes felt as if I learned by osmosis just by being in your presence because you brought so much of yourself into all aspects of your work. I consistently witnessed you being a truly gifted therapist-trainer whilst working with others as well as through my own experience of you.

Thank you for providing me with a secure base for so many years; for 'being there' for me as such a constant in my life, even when I ventured into CPD training with others and sought alternative/additional supervision. You always welcomed me back and I believe that the reparative relationship was at the heart of your work with me. In response, my relationship with you has always been at the centre of my clinical practice.

Thank you also for being human and fallible, for following your own heart and integrity, and for facing the consequences in the profession you brought so much of yourself to. You gave us all a valuable lesson in hubris, and also in humility and showed us how to recover ourselves.

Thank you for your love. I recall a connection with you, long, long ago, when across a room our eyes met and I felt showered with a love I had never before experienced. This was a spiritual moment for me; one of total connection. We never spoke of it to each other and my words now cannot truly capture the essence of that encounter. You will always be in my heart and I know I touched your heart.

Thank you for all of your healing. Over the years we became close and had more of an egalitarian relationship, of trust and sharing. I will treasure the memory of teaching alongside you, Joanna, and Ann-Marie in Jersey, and the times we spent there together, as colleagues.

I feel truly blessed to have had the honour of healing through you, working with you and knowing you for twenty-four years.

Goodbye my most treasured friend. I miss you so . . .
Maggie

Maggie Maronitis is a Gestalt psychotherapist working in private practice with adults, couples, and groups. Her background was in working with adults in Acute Psychiatry and later as Clinical Supervisor for Primary Care Counselling in the mental health services. Currently, in conjunction with two colleagues, she has a provider contract with the 'Let's Talk' NHS therapy service delivering primary care counselling within an IAPT compliant framework. She has a broad range of teaching experience, to Masters level within counselling, psychotherapy, and supervision.

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Large groups, larger challenges. A response to Adam Kincel

Birgitte Gjestvang

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Dear Editor,

As a therapist, teacher – and a client – I am grateful to Adam Kincel for his very touching, well-written, and insightful paper: 'Large groups, collective gestalts and prejudices' (*British Gestalt Journal*, 2015, 24, 1, pp. 45–53). He brings up a topic that is rarely discussed and reflected upon in Gestalt articles, books and environments.

I found the article important for many reasons, especially because it seems to be quite normal for popular therapists or teachers to expand their group size instead of running several smaller groups. This is understandable, for practical and economic reasons, but it also brings up some questions. For example, if one facilitator leads a large group alone he will receive a higher income by not involving co-leaders or paid assistants. An experienced facilitator should be able to handle a large group better than a less experienced person, but even so, could it be that some facilitators overestimate their ability to lead a large group all by themselves? In the worst case scenario, could it be that for some participants such large groups further traumatise rather than support? With respect to all the

highly qualified facilitators in the world, I do of course know there is not one answer to these questions. However, in my opinion, it would be good for the Gestalt discipline to reflect more on what is needed to build a supportive framework in large groups. Does leading a large group for example require different skills from the leader, and also different experiments rather than in smaller groups?

As a therapist and teacher, I have led groups with around 25 participants, and have assisted groups of approximately 100 participants. My main experiences of large groups are as a participant. Here I will focus on my own reflections as a participant, however my experiences as a therapist and teacher at the Norwegian Gestalt Institute will of course impact on my reflections.

Over several years, I have been in large training and therapy groups, mostly in Holland, Switzerland and Sweden. Some of these groups have been based on the Gestalt discipline, while others have been based on different psychotherapeutic methods. However, all of the leaders have had a holistic approach, and as a member, I found many similarities between them (the details of which I will not go into here).

In the different groups that I have been a part of, the number of participants has often exceeded 30. This I will call a 'large group'. As Kincel discusses, there is no agreement on how many participants there has to be before we define it as 'large group' (p. 46). Some would argue that 20 is a large group and others would say 50 or more. This is important, because during my own experience, the extent to which I felt more or less safe did not just depend on the number of participants, but also on how the group was put together. *Do we already know each other? Do we come from different countries? Do we speak different languages? If so, has the leader thought of how to handle that? Does he perhaps need a co-leader or at least some assistants?* Thus, for some participants a group of 25 can feel too big and too unsafe if the leader does not handle the above questions in a constructive way.

We know that participants in a large group as well as in a small group have to feel safe and supported to be able to communicate and 'work'. It is of course natural and in many ways expected, that there will be some level of challenge and anxiety, and this can be a good thing when it is on a more or less safe and supportive ground, as Kincel also writes (pp. 47, 50, 51).

As someone who is half German, half Norwegian, I have experienced some beautiful moments where, in a large group of multicultural participants, themes were brought up that directly related to my own daily life and family background. In his article, Kincel in a very honest and touching way describes how as a participant in large groups, he became more aware of his background as a Polish immigrant, and how this has an impact on him

today. I can certainly identify with those kinds of experiences.

A large group can also provide a lot of 'energy' which can motivate the single participant to engage even more. Unfortunately, I have also been in training groups where one leader was supposed to handle a large group all by himself, and a lot of the feelings that came up were ignored or not addressed. In this instance, it seemed to me that the leader was stressed because of his schedule, and therefore couldn't respond to the obvious feelings that were being expressed. This was *my* experience of course. Even so, it brings up the question: when is more than one facilitator needed? I am aware that some leaders don't like or cannot manage to cooperate with co-leaders. If so, perhaps they should not run large groups?

One could foresee that in a large group, participants are more prone to feeling lost or not seen or heard, both from facilitators and other group members. In common with Kincl (p. 47), I have also been in groups where people have not shared a single word whilst sitting in a big circle. This leads me to the important question of whether a large group would benefit from having other kinds of structures and experiments than a smaller group.

As a participant, I have had the same leader in a small group and later in a larger one. In my view, the leader continued with the same structure in both: the group sat in a big circle and each person shared their experience one after another using a microphone. The leader also worked individually with one participant in the middle with the rest of the group observing. As a participant, I found these to be good techniques in both large and small groups. However, in a large group I also believe there needs to be more variation, especially if there are a lot of people in the group who do not know

each other. When a microphone is being passed around a group of 30, 50, or even more people who are sitting on chairs in a big circle, the responses can often be quite superficial. And if that's the only structure offered to create opportunities for sharing, then in my view it can create a situation that is unsafe, even if the goal is the opposite. By working with Seán Gaffney from Ireland, who is well known as a group therapist and teacher, I have experienced how through different kinds of experiments he changes the focus from *individual*, to *subgroup*, to the *group as a whole*. In my opinion, this is the most beneficial way of working when you are running large training or therapy groups.

Because of the limitations of space, I will not go into any more detail as to which experiments I find helpful as a participant in a large group. However, I wish we could reflect more on what kinds of structures could improve the quality of large groups.

In this letter, I haven't made a distinction between large training groups and therapy groups – there are, of course, many differences. A teacher in a training group does often have a lot of topics and a schedule he is obliged to cover during a limited amount of time, and that will of course affect the structures and the way of leading. However, in both group situations, the participants are often encouraged to share and work in front of the group in a very personal, intimate and potentially vulnerable way. In my opinion, therefore, the facilitator in a training group faces much of the same challenges and responsibilities as in a therapy group.

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Book reviews

Eros, interconnection and creating conditions for life to flourish

Sally Denham-Vaughan

A review of **Future Sense: Five Explorations of Whole Intelligence for a World That's Waking Up** by Malcolm Parlett. Published by Troubador/Matador, Leicester, UK, 2015, 289 pages. Price: £12.50 (pbk).

Once upon a time, more than my lifetime ago, three men from different backgrounds collaborated to create what became a foundational text for Gestalt practitioners. The three men were Frederick Perls, Ralph F. Hefferline and Paul Goodman. The book was entitled *Gestalt Therapy* with the subtitle *Excitement and Growth in the Human Personality* (1951).

At the start of my Gestalt career in 1985, Malcolm Parlett introduced me to this book. At the time, I was practising as a clinical psychologist, versed in cognitive behavioural and analytic approaches to therapy, which aimed to repatriate individuals who had been diagnosed as having 'mental health problems' back into the world of 'functioning' human beings. My meeting with Malcolm introduced me to an approach that was altogether different, which focused instead on a holistic approach to individuals and orientated them towards living well. Indeed, the very subtitle of the text Malcolm recommended hinted at something completely different than the clinical psychology references that I was familiar with: this dared to suggest that practitioner focus need not just be 'treating the diagnosis/dysfunction', but also attending to such matters as capacity for joy, seeking satisfaction and the ability to live life well. Indeed, to quote from Perls, Hefferline and Goodman, 'Such therapy is flexible and itself an adventure in living' (1951, p. 15).

In setting the context for *Future Sense*, Malcolm Parlett aligns himself very firmly with this initial radical agenda of our foundational Gestalt text: indeed, when I first read *Future Sense*, I felt the stirrings of that very same excitement that I had experienced years ago. A sense that there were things that we could do, indeed, that we must urgently do, as individual citizens, Gestalt practitioners, and members of the human species. A summoning and call to action, combined with a pro-

found hope and belief, that through this empowered action we would be able to heal ourselves and, necessarily, also create conditions for thriving individuals, families, organisations, societies and the biosphere/planet.

In what follows, I will attempt to outline how Parlett approaches such a vast project, and also try to frame why he sees the necessity for the agenda to be so expansive, ambitious and complex. At the same time, it is worth saying from the outset that one of the (many) gifts that *Future Sense* delivers is its readability, accessibility and appeal outside of those versed in technical Gestalt/wider psychological language. The balancing of magnitude with simplicity, and vision with pragmatism, is masterful and delivers for us all a product that has clearly been crafted with dedication and skill across a breadth of time and experience.

Framing and intent

In setting the context for *Future Sense*, Parlett outlines very clearly both the need and the wish to contribute to what he calls a 'growing, highly creative, expanding global consciousness' (p. 2). Indeed, he directly links increased interconnectivity between human beings to an increased capacity to act together for good, or for ill, to effect global issues, policies and problems. Similarly to Perls, Hefferline and Goodman, he chooses *not* to emphasise that which we cannot do, but instead focuses on what *is* possible if people start to act, and preferably, act together along five 'directions'. As Parlett states, 'the argument here is that the greater fulfilment of our talents, potentialities and unique gifts is a direct way of changing the world at the ultimate grass roots' (p. 3). *Future Sense* is thus aimed to firmly link personal development with global development and to empower individuals to work creatively, both alone and with others, to develop their capacity for 'whole intelligence', or, as Parlett terms it, 'whi'.

In this way *Future Sense* can be considered as laying out an agenda for personal activism within the realm of personal development, with a conviction that such development will enable direct contribution to resolution of global problems and creation of a new and positive agenda. The subtitle of *Future Sense* is 'five explorations of whole intelligence for a world that's waking up' and these five explorations are offered as capability-building activities that can be followed by

individuals. They also point to new discourses in different domains of human existence, such as mental health, human development, education, social affairs and policy creation.

A relational sensibility: connections and context

It is perhaps worth stating at this point that I do not consider myself to be an 'objective' reviewer, if such reviewers ever exist. Parlett has been busy with his exploration of these five directions for nearly twenty years, and over that time we have had many discussions, both professional and personal, concerning the contributions that the dimensions might make. He was my first Gestalt trainer and is a current collaborator in Relational Change, where we share commitment to core values and aspirations regarding what Gestalt theory and praxis might contribute to world ecology. Although Parlett states that *Future Sense* is not academically linked to his previous major contributions to the development of Gestalt theory, (for example, *Reflections on Field Theory* (1991), and *The Unified Field in Practice* (1997)), it is my personal sense that his immersion in field theory, phenomenology, and indeed, the worldwide Gestalt community, is deeply implicit in the book. As such, it proved impossible for me to read *Future Sense* without seeing the threads extend from his previous, more academic works and broaden into a more explicit attention to global concerns. Connections abound: between us, with others, with theory and with praxis: across time and space. Indeed, Parlett summarises some guiding principles which those familiar with his more theoretical writing will recognise; namely that human beings are more interconnected, with each other and with their eco systems, than they are separate, and secondly, that because of this interconnection, life on the planet is profoundly interdependent. Therefore, he argues, not only are people willing to work to develop their 'whole intelligence', but for many, they sense this as their lives' purpose. In this definition and construction of his foundational arguments, I would suggest that Parlett demonstrates a profound 'relational' sensibility that, while recognising individual agency and responsibility, nonetheless views individual flourishing as indivisible from the context in which that particular human is situated. This formulation underlies Parlett's arguments and is marked as a 'point of departure' from the general culture, which sees individuals as isolated autonomous entities that are acting *upon* their environment.

Preparing the ground

In chapter 2, Parlett introduces us to the history of the five explorations and describes the moment when he

created the list of five abilities. This is a compelling story accompanied by a rich and satisfying case study. I found myself transported back to a vivid moment in time when the concept of the five explorations had seemingly spontaneously emerged as a compelling gestalt; full of erotic energy, purpose and significance and, seemingly, demanding that Parlett explore in more detail. Through this case study, we learn both how the domains stand alone and also how, in practice, they start to shape and create gestalts, courses (and causes) for action. As such, they open up windows upon both the lived life and doorways to the life that could be created.

Reading this section of the book is an exciting experience, full of potential and possibility, where Parlett's presence as a coach, educator, therapist and guide becomes palpable in the written word. As a reader, I became hooked at this point and found myself reflecting deeply on how the directions applied to my own life; specific situations that were arising and the wider field in general. I anticipate most readers who encounter the model will have similar experiences.

The five figures for exploration

The five directions are explored individually in depth in *Future Sense* and, indeed, some 200 of its 300 pages are occupied with individual chapters outlining these. Parlett argues that each one of the explorations supports the development of each of the others and that all five are necessary for the development of whole intelligence. They are, therefore, I believe best viewed as a complex gestalt intending to describe 'what conditions are needed to bring out the best in human beings' (p. 13). In this way, I would formulate them as dynamic ground conditions to the figure of individual flourishing, and thus describing an optimal field for human and, necessarily, non-human, thriving.

The five explorations are entitled, 'responding to the situation, interrelating, embodying, self-recognising and experimenting'. In each case, a chapter is allocated to an exploration, and each of these five chapters searches for a detailed understanding of a specific dimension of whole intelligence. It is hard not to want to use *Future Sense* at this point as a 'personal development' aid in a rather simplistic way. In other words, to undertake a form of personal action enquiry that allows one to assess oneself in fairly classic fashion as doing well or badly with regard to the exploration, and to attempt to use the chapter to shape up and do better.

To do that, however, would be to collapse complexity and simplify the relational and contextual epistemology that lies at the heart of *Future Sense*. While the book can be used to extend our personal capabilities, the aim of the book is wider than this and is seeking to build a

global community where we support each other to thrive under healthier/more intelligent conditions. The aim is to build a positive feedback loop so that as more whole intelligence is generated in the world, the capacity for each of us to behave more intelligently is strengthened; a dynamic virtuous spiral.

Within each of the five chapters relating to a specific exploration, Parlett makes an eloquent case as to why the exploration is vital to whole intelligence, how its presence or absence shapes functioning and the impact of the dimensions' presence or absence on the context. The examples are vivid and persuasive and the underlying philosophical, epistemological and ethical relevance is highlighted. This latter aspect of the book I found particularly compelling and Parlett is clear that each of the explorations is underpinned by a core motive, or value, that resonates to our global situation.

Of the five chapters, I personally found the explorations of interrelating and embodying the most potent. With reference to interrelating, the critique of individualism and application to the causes of war, violence, competition and destruction by human beings is compelling. Parlett draws upon the thinking of political scientist Benjamin Miller (2007), and his description of a war–peace continuum. This section highlights the power of affiliating and bonding in creating a sense of community and 'tribe'. It also contains some direct and potent examples of how such identification with a specific identity and subgroup can lead directly to distancing and alienation from 'the other'. This exploration of both violence and the potential we have individually and collectively to work to create peace is gripping reading and raises vital issues concerning how we educate children, arrange our economic systems and organise our political institutions. Parlett argues that there is currently an overarching emphasis on competition in conditions of increasing scarcity and that, in combination, this is obviously going to lead to inequities, divisions and potentially violent struggles, rather than building of community and sharing of resources. Parlett addresses these topics sensitively, with compassion and with deep insight and humility. Additionally, the writing style is eloquent and vividly articulate so that complex concerns are delivered in a highly palatable form.

The third exploration, 'embodying', is another tour de force that takes us into discussion of diversity, but rather than emphasising difference as figure, chooses instead to emphasise similarity. I spent a long time immersing myself in this chapter, and feeling the resonance within my body that is generated and amplified by vivid recognition that all humans are deeply interconnected and members of a single species. It is in this chapter that Parlett makes what, for me personally, was his most profound and compelling call for an urgent

shift in human consciousness so that we become more, rather than progressively less, embodied. In particular, he speaks to our alienation from our embodied state as underwriting our alienation from other life forms on the planet. His case for connection with these other species, as well as with our own bodily nature, led me to experience a quite profound shift in a range of ways of responding that I could not have predicted. For example, the first time I read this chapter I was aware that my stomach was clenching and that a feeling of tension was being generated. As Parlett says, it is not easy to write about embodiment, and yet he does so brilliantly and in a way that pulls forth an embodied response that, in my case at least, defied rationality. This was further amplified in my following early morning walk for bacon sandwiches, when, upon going to take my first mouthful, I realised that my stomach was clenching in exactly the way it had when I had been reading Parlett's embodying exploration. It was not that I minded eating meat; it was that I minded not knowing anything about the quality of life and death that the animal had enjoyed/endured.

This is one, albeit small case where *Future Sense* seems to have spoken as much to my body as to my mind and to have generated a holistic response. I take this as evidence of whole intelligence being activated through my experience of not just reading the book, but of actively exploring and working with it in the way that Parlett suggests; by dipping in and out, by engaging in the explorations, and by viewing the book as a profound action inquiry that would inform holistically and not just intellectually; an experience that would summon me to unanticipated action and change.

The fourth exploration, 'self-recognising', is full of potent discussions of what I experienced as 'honesty' but Parlett labels wisdom. He outlines many examples of both personal and political instances where individuals and institutions have determined to create a narrative and then live with their own rhetoric, rather than examine the actual impact of their actions on others. In this chapter, Parlett reaches for a description of 'self' that Gestalt practitioners will recognise as being drawn directly from Paul Goodman's description of self as a process in the later sections of *Gestalt Therapy* (1951). In this definition, the self is seen as the moving, constantly evolving and fluid process that enables us creatively to adapt to a range of situations. Interestingly however, Parlett also makes a good case for the need for stability, predictability and consistency so that we are able to self-recognise and also to sustain relationships on an enduring basis with significant others.

The fifth exploration is focused on the concept of experimenting and it is perhaps most vividly in this chapter that I recognised the life-creating impulse in Parlett's writing that I had experienced in that of Perls,

Hefferline and Goodman some thirty years ago. There is the same formulation that we are energised by novelty and a realisation that this can be viewed as a manifestation of erotic energy that leads to transformation and growth. Parlett views experimenting as an active, and probably preferable method of learning and changing, which he equates to the value of 'play'. In this exploration, Parlett highlights the tension between the urge to change and the urge to stay the same and describes this as 'being caught between the current sweeping us towards the future and its new possibilities, and the opposing current tugging us back to the familiar patterns of the past' (p. 222). I was touched by the way Parlett describes his own preference for adventure, change and novelty, but also recognises the dangers of this and of the accompanying need for stability and familiarity. Again, he makes a powerful case for avoiding polarising change and novelty as good, and argues that Whole Intelligence requires a balanced approach.

It is in this chapter that Parlett writes a relatively long section on the topic of 'dementia care gardens' using a methodology he developed earlier in his career with his colleague Garry Dearden (1977) called illuminative evaluation. This section is particularly potent in demonstrating the very practical possibilities that can arise from an experimental approach in complex and challenging situations. It is here that we can see that Parlett's invitation to view *Future Sense* as a personal action inquiry can also be taken into a range of organisational settings with genuine potent results and outcomes.

Importantly, in this chapter Parlett also addresses some of the dangers that can ensue from experimenting, both to self in the form of unbearable shame and to others when the impact of actions are not factored in and considered. I viewed this as a vital aspect to have included in the book, and as a necessary corrective to the possibility of erotic energy and exploration overpowering the needs for containment, caution, compassion and care. This is, of course, to name some of the criticisms that have been directed at early Gestalt approaches, and, since Parlett is writing for lay people as well as practitioners, one that very importantly he highlights. Thus, although change, growth and personal development can contribute to whole intelligence, the pursuit of them without due care and attention for the longer-term impact on self and others can lead to an abusive form of toxic narcissism often seen in 'privileged' individuals with an overblown sense of entitlement to pursue their own interests at whatever cost.

Summary and closure

Parlett finishes *Future Sense* with a more detailed outline of how the five explorations work together, and also acknowledges that the ideas contained in the book are

likely to be familiar to a range of therapists, coaches, community activists, educators and organisational consultants.

Importantly however, he suggests that we try and focus on three basic principles: first, appreciating the five explorations, and I would add, familiarising ourselves with them via a detailed personal inquiry; second, the importance of seeing 'wholes' and how factors work together, rather than increasingly specialising and fragmenting aspects of our life; and third, the idea that whole intelligence/'whi' is not a given ability, but is something for all of us to cultivate over a lifetime. Parlett proposes that by utilising these three concepts we part company with much contemporary public and political debate and instead enter into what he calls 'an activism of being and becoming'.

This ethic has perhaps already been well articulated by many, but Parlett argues that such interlinking is not just the project of field sensitive and ethically responsible Gestalt/Relational practitioners but falls to every member of the human species. Indeed, Parlett concludes by stating 'I believe that inevitably we are involved in the state of society and the world, and cannot NOT be' (p. 279). Importantly however, Parlett also carefully articulates the need for us to preserve our individuality while cautioning against individualism. In this, I believe he cautions us against a form of collectivism whereby individual difference and diversity are effaced and instead reminds us that each of us is a unique and diverse variant of the human species who is positioned to make our own individual contribution.

Conclusion

I found the book compelling reading, enjoyed and benefitted from engaging in the five explorations and would certainly recommend it to both Gestalt practitioners and members of the general public. Having said that, my own sense is that in terms of meta-theories of change, Parlett perhaps implicitly assumes a level of familiarity with complex change theory that may, in practice, be absent for some readers. I found myself trying to experiment with the idea of approaching *Future Sense* without a background in either field theory or relational thinking and was not sure how the book would have impacted me then. As such, I am left with some concerns that it may be seen by some as a personal guide to self-development, without a fuller understanding of some of the cautions against shame, and/or potential retraumatisation of self and/or other.

What is clear, however, is that in *Future Sense* Parlett reaches back to the vision that brought together the founders of Gestalt therapy, who never lost sight of their wider political and communal context and roots. Reading Parlett there is indeed the same call as the call that

spurred on those founders: the call to create a change process that does not just repatriate individuals to functioning, but that also addresses sociopolitical context and specifies conditions for health and growth. Many of us now focus our work on this full gamut of application and increasingly, in the global community of Gestalt and relational practitioners, there is widespread acceptance and recognition that these two agendas are genuinely indivisible. I would have welcomed explicit consideration of how we might gain data that would support our experiential action inquiries, how such data might inform large-scale research programmes and proposal of a range of strategies to support large-scale application, particularly across complex and challenging cultural differences and given the urgency of the issues.

In writing *Future Sense* Parlett has, I believe, amplified the call of the founding fathers of Gestalt therapy and extended their vision to the world. He has built a bridge from technical specialists in Gestalt/Relational approaches to the global human community. *Future Sense* thus delivers a highly illuminating exploratory methodology for productive personal inquiry and prompts positive generative action that the world desperately needs. I recommend it most highly.

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Who cares about self-care?

Sarah Paul

A review of **Self-Care for the Mental Health Practitioner: The Theory, Research and Practice of Preventing and Addressing the Occupational Hazards of the Profession** by Alfred J Malinowski. Published by Jessica Kingsley Publishers, London and Philadelphia, 2014, 208 pages, price £22.99; and **Competence and Self-Care in Counselling and Psychotherapy** by Gerrie Hughes. Published by Routledge, London and New York, 2014, 192 pages, price £21.99.

You know that irony has played a part in the books you have been given to review when your fellow practitioners start to laugh as you sheepishly tell them the titles, or hold poker-straight faces and say such things as, 'How excellent! You must tell me what you learn.' Taking care of myself as a practitioner and as a person has long been a struggle. This was therefore the question with which I started this review: am I competent to discuss issues of self-care? And if I am, what will I learn, or what can I take from these books?

Placing competence in context, Hughes' book offers relief that my willingness to sit with my struggle whilst reading may be precisely what renders me competent enough to consider what these books have to offer this audience. Sitting with uncertainty, she suggests, is likely a marker of competence for a Gestalt or humanistic therapist, but may not be considered competent work in a framework that values goal setting and knowing (p. 23).

There are some basic self-care principles that most trainings, certainly in the humanistic world, seem to offer early during training: go to supervision and therapy as needed, keep a life outside of work, balance your caseload, work at your growing edge but within your competence, take support with issues that impinge on your presence or availability to others. All these are straightforward, sensible concepts. However, research suggests that, as a profession, we are notoriously poor at self-care, experiencing emotional distress and difficulty in our lives to a substantial degree as compared to those who do not choose to spend their working hours immersed in the distress of others, with all the roll and tumble of emotion, ethical dilemmas and struggle that this can entail.

Malinowski makes this point early on in his book, laying out a concerning list of studies in his first chapter, which, gathered together, broadly demonstrate that around 60% of therapists are likely to complain of feeling depressed at any given time. Not much is made of this statistic in terms of whether correlation

in this case necessarily indicates causation; the author does not discuss how as a profession, we are perhaps more aware of these feelings, more able to articulate them and perhaps to recognise a sign that something needs to change, or how this statistic maps on to the population in general or to other professions. The necessity for self-care in a demanding profession seems so obvious and important, but so difficult to actually attend to in a meaningful and consistent way in order to prevent therapists' own mental health being compromised in the course of their work. Do we follow our own advice, and if we do, why do the statistics suggest it is often ineffective?

Malinowski considers what makes working as a mental health practitioner particularly stressful. He defines what he believes are the tasks a therapist must undertake (being a 'social influencer', 'effective organiser', 'goal planner' and 'psychological helper' (pp. 35–36)). He offers a review of how these tasks can become less stressful and more supportive to your personal and professional development, for example, by ensuring that you have a system for taking and keeping notes and that you set goals with clients in a specific, clear fashion so that you know what you are working towards. This is reinforced by studies supporting the reduced level of stress in practitioners who attend carefully to these tasks and may encourage you to reconsider looser or less efficient areas of your practice. This may also depend on your philosophical or epistemological standpoint however; some practitioners in some modalities may feel hemmed in by the requirement to set clear task-focused objectives for therapeutic work. However, this book is clearly written by an American author for an American audience, in the context of issues within American healthcare practice, such as managed care and insurance paying for therapy. This may skew the author's attitude towards a more goal-oriented approach that may be less relevant for a British reader.

As I read, I noted the lack of directly relational language; the text was 'top-down' in style, the therapist as the director with the client as subject with only a limited sense of mutuality. Alongside the varied roles Malinowski considers, the role of being a relational developer, influencer or even participant seemed missing.

TED talks recently released a talk by Robert Waldinger, head of the Harvard Study of Adult Development, describing the results of a 75-year longitudinal study on what factors lead to a happy life. As a Gestaltist, what was unsurprising for me was that the individuals who lead the longest and self-described happiest lives were those who had the most good, reliable relationships with friends, family, partners and their community. Those with fewer, or poorer quality relationships con-

sistently had poorer health, worse memories, and died younger. Although Malinowski attends to the importance of supportive relationships in our external lives (pp. 136–142), he does not include working to develop authentic, supportive relationships with clients as a way of both managing and modelling self-care and reducing work-related stress. This could be a difference in therapeutic style, but for me the ways of actually managing self-care in the room, during the work with the client, were missing.

Malinowski's eye-opening exposition of study upon study demonstrated the poor mental health of therapists and mental health practitioners and would support the author of an academic research paper well. However, I as reader was not encouraged to reconsider my own standpoint on the issues considered, which were presented rather as a statement of fact. Neither 'self' nor 'care' were set into a personal context and modality-specific variations in what successful therapy looks like were not addressed. Although scholarly and well researched, it was overwhelmingly packed with references and studies that made the text difficult to follow or engage with and ultimately not illuminating in the way I had hoped. Although I was able to review some useful advice to anyone in this profession, such as having a spiritual life, attending to my relationships, going to therapy and supervision as needed and balancing my caseload for both challenge and a sense of competence, I was left feeling that this was a book for beginners, perhaps, or those who are not familiar enough with the field prior to training to know more of the personal cost and make a more informed decision about their desire to train. I felt little encouragement or support to reach into my own process around my capacity for self-care. Why it is *such* a challenge remained ephemeral.

Hughes' book, by contrast, took a more personal and relational approach, offering a more in-depth guide into competence and self-care. The book is usefully split into two sections. The first section defines competence in the context of counselling and psychotherapy: considering how a sense of 'self' develops; how we hold our sense of diversity within this; how a sense of self-as-practitioner is nurtured first by training and then by experience, and then how these impact our competence as we bring ourselves to different clients and different contexts. The second section reviews the given wisdom around professional self-care, personal self-care and supervision.

Hughes places self-care into the frame of competence, which offers a different style from the outset. She begins by asking her reader to question both what 'competence' is as a therapist, and within this, what this 'self' is that is to be cared for. The warm and engaging writing in this book leans into the relational aspect of therapy

and the idea that the therapist's best 'tool', and therefore the tool that needs constant honing, is herself or himself. In this way self-care and competence are clearly brought together: in order to be competent as therapists, we must attend to the 'self' that we bring to our work. Hughes gives particular attention to self-development in terms of how we have learned to be through our childhood histories, understanding the strengths and limitations of our initial training and our experiences of personal diversity.

From this she develops her own 'competence framework', split into three essential elements: the practitioner, the client, and the context. She breaks this down further into these principles:

- Cultivation of the self in relationship
- Recognising the impact of difference
- Acknowledging strengths and limitations of training
- Understanding the nature of the client and the possibilities for therapeutic relationship
- Awareness of context
- Identifying and remedying difficulties
- Making good use of supervision
- Nurturing and replenishing the self

This is then broken down in the chapters that follow, leading to a full and interesting discussion of different aspects of ourselves as practitioners and also as human beings, and how my capacity for self-care and therefore my capacity to be competent may be different with each of these concepts. I felt immediate relief at the possibility of self-care not being a 'thing' that I must achieve through ensuring that I participate in various noble and prescribed pursuits, but something variable according to current life-space, inter- and intra-personal areas of strength and struggle. This gave a field perspective that felt looser, allowed me to breathe; this simply meant being willing to consider where I need more or less help or to pay more or less attention.

I was particularly moved by Hughes' inclusion of a chapter on how we hold our diversity, which considers how our willingness to feel and enter into our experience of being different to others enriches our work as therapists, but also impacts on our capacity for self-care. She discusses how the position we are born into, including ethnicity, class, sexuality, gender, and later influences such as spirituality, religion and age, influence the way we see the world. She takes a two-pronged approach, discussing the importance of tackling and understanding these differences in order to be available to as wide a group of potential clients as possible and also considering how we hold our own diversity and the impact this has on our true availability to others. The challenge in this chapter was clear: to engage with the extent to which we are competent to sit uncomfortably

with our privilege, and courageous in sitting with our difference.

Including this chapter felt both respectful and essential to encourage a 'not generally very diverse group' (p. 59) to bravely identify and face the areas where they are privileged enough to not even see the gap between themselves and others, or to risk reaching out to others for care and understanding. As established above, we are relational beings. In that case, if care for self is reciprocal, it includes taking adequate care of others, which includes being courageous enough to face our lack of understanding so that others can feel even a little received in their difference.

Throughout the book, Hughes helpfully adds a variety of exercises to support the reader to engage with the concepts that she offers. With the assistance of my peer group (thanks to Malgorzata Lanigan, Lucy Chamberlin and Jason Woolfe), we tried out some of her suggestions for group exercises. Specifically, we tried out the following exercise:

Explore your group norms – the unwritten and often unaware 'rules' that you operate under. Which of these contribute to the health of the group, and which undermine it? (p. 125)

This led to an extremely useful conversation in which we brought into awareness our reticence to place time boundaries on our work. This impacted us all differently but in such a way that we were reluctant to bring this into awareness. As a group, we held polarities between finding this loose approach both anxiety provoking, to be without limits, and a relief to be looser, the pressure to 'know' in time removed. Out of our awareness, as a group we limited our capacity to care for each other and ourselves by never naming our loose time management in order that these polarities were not raised. Raising them, however, led to a discussion in which we better understood the strengths and pitfalls of this approach so that we could care for each other better within this and function more competently as a group. The inclusion of these exercises provided me as a reader with the capacity to engage more or less as I needed to with different aspects of Hughes' competence framework, continuing her early point that self-care can vary in different aspects of our functioning.

Both books refer to compassion fatigue, burn out and vicarious trauma, and what Malinowski refers to as 'secondary traumatic stress syndrome' (p. 80). Malinowski gives a good description of how these can come about and what the likely stressors are that could lead to these difficulties, and Hughes makes an interesting point about true empathy requiring separation as well as connection (p. 137), but neither proceeded much further than identifying the issue. Malinowski made some interesting points about character types that are

more likely to struggle with burn out (competitive, feelings-based or 'Type-A' characters (p. 74)), which could support individuals to locate themselves within these frames and consider what support they need. Both books gave some idea of which factors increase the likelihood of burn out, compassion fatigue or vicarious trauma, such as a caseload that is too heavily weighted towards one particular client group (Malinowski, Chapter 5), or losing the capacity to hold your own differentiation whilst empathising (Hughes, pp. 136–137), but neither book offered much encouragement or support for the reader to engage with these concerns, what it means to them and how they might locate and manage their own vulnerability in this. I found it puzzling that this major topic seemed lightly held by both books.

My experience of Malinowski's book was that it was a useful review of the necessity to care for ourselves as practitioners and a useful tool for newcomers to the profession – although perhaps for determined newcomers who would not be put off by the distressing statistics presented. However, I was better supported to really engage with what self-care meant to me, especially in the context of my ongoing competence as a practitioner, by Hughes' more practical approach that asked me difficult questions, left me thinking and really supported me to engage with my own process around this. I returned to the questions this book raised for me several times in the ensuing weeks. This less generic approach meant that Hughes' book achieved its mission of encouraging each individual to consider 'her or his own way of being competent' (p. 1), whereas over time, Malinowski's book slipped more from my mind as I struggled to hold the weight of clinical studies that felt less personally relevant to me as a reader.

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A woman's perspective

Di Hodgson

A review of **Catch the Message. Female Gestalt Therapists in Interview** edited by Adriana Feckova and Jay Levin. Published by Ravenwood Press, Peregian Beach, Qld., Australia, 2015, 308 pages. Price: £17.50¹

There was something serendipitous in having the opportunity to write this review. I had been struggling with finding practical and pragmatic space for my own writing for a while. I hoped that I would be inspired: and I am.

The book is a collection of interviews with fifteen senior women Gestalt therapists, mostly from, and trained in the US in the 1970s. It concludes with reflections by Iris Fodor.

The authors state that they conceived this book because there is nothing specifically written about women's contribution to Gestalt psychotherapy. I am delighted that there is now and I felt sad that it was deemed necessary.

The editors chose the interviewees because they had written articles and were known for their contribution to the profession. In describing their motivations, the editors include their perspective that the women have found their way in difficult times. So I was interested in what is different and distinctive in these women's voices and the extent to which they too shared this perspective of difficult times.

The interviews explore how the women entered the profession, who influenced them, their style, their thoughts about themselves as women, and their perspectives on where Gestalt is heading. The authors state that the questions asked began spontaneously but became more common over time. I would have liked to hear more reflections on their choice of questions, and why they chose these themes for this particular book.

The synchronicity of the timing for me was very interesting. I had recently facilitated a workshop at the 2015 UKAGP conference entitled *The Voices of Women in Psychotherapy*. I was prompted to offer that workshop partly because despite psychotherapy being such a female dominated profession in terms of numbers, one would not think so to look at the book lists for many training courses. So I was very excited to be able to read a book that is a collection of women's voices, and to hear what these eminent women had to say about their experiences as teachers, supervisors, and therapists.

As I began to read I had a very clear sense of some-

thing different in this book. It seemed to be telling a story of the role of women in developing Gestalt therapy; a form of social history. It is certainly a fascinating social history in relation to our founders and their complex relationships.

In preparation for my workshop, I had reread what I consider to be some classic texts: *In a Different Voice* by Carol Gilligan (1982); *Man Made Language* by Dale Spender (1990); and *Eve's Daughters: the forbidden heroism of women* by Miriam Polster (2001). I was reminded of Gilligan's book very early in reading this text, and of a conversation with a colleague who was a visiting tutor at Metanoia last year. We were discussing whether women are more interested in ground than men. Of course, any sweeping generalisation is dangerous: and this book pays particular attention to the ground.

The questions focus on how these women entered the profession, who influenced them, and in some cases the impact of their work on their family life. The editors describe their hope that

... these interviews will provide a wonderful window for our readers to see into the lives and experiences of some of our foremost living Gestalt therapists and to offer this volume as a tribute to those who have fashioned a path for others to follow and expand. (p. 13).

In her reflections, Fodor believes these interviews personify what Polster described as '... a central focus of our work [which] is the individual's responsibility for shaping his or her existence' (Polster, 1974, pp. 249–250). This book certainly includes some fascinating insights into how these women have shaped their careers.

The theme of gender plays a very different role in the interviews.

In describing how they entered the profession, many of the women describe traditional gender roles. I would have welcomed more exploration of this theme.

Some discuss their views on how women are perhaps more practised at seeing the bigger picture, perhaps another implicit reference to the different focus on figure and ground. I am left even more curious to further pursue an interest in the gender aspects of figure and ground.

One interviewee raised the question of how 'equal' it is to have a book solely about women. I have mixed feelings. My many years of working on equality and diversity leaves me fearful that a book about women will be read by far more women than men, in the same way that books about other aspects of diversity are often read by far more members of that minority group. I hope not this time. In other spheres of life and study we still have special celebrations of contributions by women, black and minority ethnic, gay and lesbian,

precisely because their contribution is often hidden, unseen or unacknowledged. It is important that this book is addressing that imbalance within Gestalt therapy, and for that reason I hope it is well read.

In relation to the interviewees being women, they explore the themes of taking space and confidence, amongst others. Despite acknowledging the women who do have self-confidence, questions are raised about women's timidity in putting themselves forward and how women are still underrepresented. As a teacher on a Gestalt programme, I am very aware of the gender of students in training. I hear calls for there to be more men in training which I support. And I am aware of how space is taken by the different genders in training: how they speak of themselves, who is challenged, how I hear the men described as favourites or special; how men still seem to be able to rise to the top, often over equally talented and skilled female colleagues. I would have liked to read more exploration of the co-creation of this theme, in a similar way in which Jacobs (2005) explores the role of whites in ethnic discrimination. For example, it would have been interesting to hear not only how men have supported them (which received extensive coverage) but also how they have inhibited them. I occasionally felt there was a naivety expressed in relation to quotas and the complexities of assessing merit according to gender. There were exceptions, for example, the interviewee who described when co-writing a book with a man being told to write in a less feminine way.

I have been a feminist for a very long time. Language matters. It is a label I wear with pride. I was interested to read which contributors spoke about feminism specifically. Fewer than I had expected. There was a call for trainees to encounter strong female therapists. Some speak of the individual rather than political aspect of gender. One speaks of the need to understand the different socialisation of men and women. Some speak of a lack of recognition and their efforts to address that imbalance. I am left wondering how well we all do to address those imbalances in our teachings and supervision now and what more can be done.

Several of the interviewees referred to the political roots of Gestalt. Laura Perls was cited as having a particular interest in politics.

Although bringing together a collection of women's voices could be seen as a political act, and one that may evoke strong reactions, the political seemed largely absent in the interviews themselves. This was particularly so in relation to power and privilege, how each contributor thought their own worldview impacted their style, and what it meant that many had encountered Gestalt via men and often via their husbands.

The various and varying references to Laura Perls were particularly interesting to me. From Ruella Frank,

who said that she always mentions Laura in her workshops, to Nurith Levi who felt that Laura did not get nearly the recognition she deserves, to what I found to be some rather naive statements about Laura's role in influencing the profession by the interviewers themselves. My concern was with what seemed to me to be the lack of a field or political perspective and exploration: 'But it was her choice, her decision' (p. 228); 'She [Laura] lived in his [Fritz's] shade professionally. It was her decision' (p. 235).

The book gives insights into the interviewees' particular style, focus, and how they describe the art of therapy. It includes some lovely expressions about what they believe is valuable about Gestalt. It includes their hopes for the future, messages about looking out, making contact outside ourselves. It includes reflections and messages about where Gestalt is going and what needs to be done to support its growth. Perspectives on the future of Gestalt were very varied, in terms of hope, optimism and direction. What comes through strongly is that Gestalt is a way of life.

The book ends with conclusions and reflections by Iris Fodor. I enjoyed her insights very much. She begins with a quotation from Miriam Polster, who otherwise is largely absent from the book in her own right: 'I have found that my own womanhood is a very important factor in my work as a therapist . . .' (Polster, 1974, p. 262). Fodor discusses the role that GT played in empowering the interviewees. I agree with her when she says that GT has not featured women's issues as central and continues not to do so. In terms of who had influenced the interviewees, Fodor points out that 'leading the list were mostly male trainers'. Although most of the interviewees said that being a woman was central to their work, and/or that they had accessed Gestalt via their husbands, this was not explored in much depth.

Conclusion

Before I began reading I was curious about the title: catch the message. From reading the introduction I was left unsure. I had thoughts of catching something before it is lost; of catching and, perhaps, holding on to something precious.

If the aim of this book was primarily the recognition of women's involvement in, and development of, GT then it has succeeded. Women have made a difference. They have made a difference often in a different way to men.

If it was an exploration of how they achieved what they did and how they would support other women to take their space, then I am less convinced. Overall, I was left somewhat disappointed at several of the contributors' lack of interest in gender and politics. I would

have welcomed more exploration about how they felt about the fact that they had been able to make space to write, and what they would say to the next generation about that. Sadly, this did not feature highly.

I was often left disappointed that the interviewees moved on quickly or did not explore themes more deeply. Sonia Nevis asked, 'why do you do this book?' There was no response. In her introduction, Gilligan (1982, p. 2) describes the central assumption of her research: 'that the way people talk about their lives is of significance, that the language they use and the connections they make reveal the world that they see and in which they act'. This book does not undertake this type of research, and was therefore perhaps a rather missed opportunity. I was left wanting more on these women's views about politics in general and gender politics in particular. I was left wanting a deeper level of exploration on these themes when they did come up. For example, the theme of 'difficult times' was not returned to. I was also disappointed with what seemed to be a lack of editing, in terms of organising the content and the number of typos, which detracted from the meaning in places.

So for me the book would have benefited from more exploration of how and why the questions were chosen, what made the authors want to know about the contributors' families, and whether there was a gender perspective in that decision. Occasionally the questions jarred with me as I experienced them as overtly heterosexist.

Despite my reservations, I came away with a sense of what was special, individually and collectively, about women's contribution to Gestalt. That is a precious message for the next generation.

I hope this book will inspire Eve's granddaughters.

Notes

1. The publishers have informed us that a revised edition of this book including additional content will be published in September 2016.

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Opinion

Fear and the inner child. How we adopt fears in our early years and then spend our lives trying to deal with them

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Introduction

In each of us, there is a young, suffering child. We have all had times of difficulty as children and many of us have experienced trauma. To protect and defend ourselves against future suffering, we often try to block those painful times. As a result, every time we are in touch with the experience of suffering, we believe we can't bear it, and we repress our feelings and memories deep down in our unconscious mind. This may take many decades and many struggles as we grow into adulthood. This paper will examine some of the processes that attempt to recover our inner child and heal the wounds.

Although there is a wealth of literature about the inner child concept, this paper is based on the Gestalt perspective of experience, experiment and existentialism. I have experienced this inner process myself, observed my clients in my clinical practice and have learned from my own personal therapy about this phenomenon.

My story

I will start by briefly telling my story. I was born a month after the Nazis started WWII with the invasion of Poland in September 1939. Soon after, Ukraine was invaded by both enemies: the Nazis and the Communists. The land where I was born became the start of a struggle between two forces convinced that one of them is right. Eventually both contributed to a major destruction of most of Europe.

My father, who was a photographer, was arrested by the Communists and deported to Siberia and after then was never seen again. My mother spent much of her life searching for the man she loved – they were both

twenty-five-years-old when they married. But this is not the place to write about all the details of my story. I am writing about how fear develops in our early years as children and how our 'inner child' keeps that fear. And then, we become tranced¹ as if in a frozen world, and as adults we constantly seek to resolve our fears by any means to be able to live in peace.

My mother came from a family of five children: two boys and three girls. She was the 'smaller' of twin girls. Her sister was the dominant one and so my mother adopted the role of a 'victim' who needed to survive the 'bullying' of her sister. This served her well in later life when the family designated her as the smallest, most delicate and in need of help and care. So, everybody protected her, helped her and even her 'bully' sister eventually took a lot of the responsibility to look after her.

As I remember well, my mother's 'mantra' was: 'do not get involved in fights'; 'let it be'; 'hide your bad manners'; 'disguise yourself behind the good boy image'; 'lie if you need to – you are a good boy anyway'; 'go to church and pray for your sins and God will forgive all', and so on.

My grandmother was a schoolteacher in a small village in Ukraine. Her husband died of typhus after coming home from WWI and left her with five children to care for. However, she was a great survivor and soon she married the school principal. She sent the five children to a boarding school in another city, and after the wedding she brought them home. My mother was petrified of the nuns in that boarding school which reinforced her 'victim' stance and, as a result, was cared for better than some. She learned to lie and pretend a lot and do as the nuns told her. Her lessons were internalised and she continued to use the 'victim' strategy all her adult life.

Here is a perfect example of how the 'unfinished issues' and tranced experiences begin to manage the adult relationships. As years go on, perhaps a boss, a person in authority or a partner in the relationship may innocently utter a certain word that triggers the recipient into fear. The fear of needing to survive. Something like this happened in my mother's childhood. The person responds in a typical manner of the child (then) and as an adult is not aware of that strategy (now). For example, often the 'victim' has a passive aggressive strategy that triggers the 'bully' to attack, and then both get some reward for surviving. Many painful

'dramas' in relationships begin with the inner child's need to complete some survival issues from the past.

This reaction is an impulse – it just happens – and the result is an ongoing conflict with the partner or spouse. Thus we hear of many stories that a separation or divorce 'just happens' and both partners cannot explain to themselves what did go wrong. Of course each partner has an adult rational or emotional 'explanation' but the hurt, the pain and the repeated failures persist.

Steven Wolinsky in his book *The Dark Side of the Inner Child* (1993) writes that we live in an inner world resembling a state of an inner trance-like sleep (we are unaware of it). We get into this state by being 'hypnotised' by our parents. In other words, we introject, or swallow whole the roles, actions, suggestions, 'shoulds' and rules as we grow up and attempt to survive as powerless children. Most people think and believe that these introjects are not part of our daily (adult) life, but actually they do engulf our every adult experience.

According to Rudolf Steiner,² the first seven years are the most crucial in the development of a person. We want to love and be loved and grow healthy and happy – that is the ideal wish: the facts are often different. In my life, the first years were a journey of survival. Survive the war, survive the losses, survive with other members of our family and eventually grow up and seek loved ones and create a family of my own. I had to learn fast to become an adult.

Many of the messages we adopt as our own come from the many role models that were passed from our parents, and they themselves adapted these from their parents, and so it goes back to what we call family history.

For example: my friend wanted to purchase a bottle of wine to relax after a day's work. Knowing that his partner is worried that he may become an alcoholic (she had an alcoholic father), he hides the bottle and sneaks a drink. But she discovers the used wine glass in the sink and becomes very offended that he does not tell her the truth. Her inner child trance is 'men cannot be trusted'. Then they have a big argument: he says that she unfairly accuses him of being an alcoholic and she is annoyed and angry that he hides things from her and therefore cannot be trusted. Both partners are in the survival trance mode and actually it is their inner child parts that are in survival mode again. This can become a vicious circle in the relationship leading to many couples' crises.

In my history, each relationship started as a wonderful 'love affair', we spent time travelling and enjoying an apparent happy life together. My search for a family (mother, son and father) that gave my inner child joy, happiness and fulfillment led me to marry rather young (I was twenty-four, close to my father's age when he married). I joined a Ukrainian family. I instantly had a

grandmother, grandfather, father, mother and sister-in-law! 'God blessed you', said my mother.

However, as years went by, we separated. The reality of our lives was different. I was a passive (victim type) husband and at the same time I was an adventurer seeking personal growth and seeking the truth in Gestalt therapy. She was also experimenting and her path was more towards alcohol, smoking and drugs. Finally the marriage ended. 'You are a good boy but that woman did not value you', said my mother. That was the 'tape' played in my unconscious part. I was not aware of my inner child that guided my relationship by the mantra: 'be a good boy and all will be well for you'. Why didn't it work?

Well, when my inner child wishes were not met and the promises were not fulfilled, I would become very angry and disconnected from the adult man I was. I automatically (by impulse) acted out my inner feelings and searched for another relationship. I spent years studying personality behaviours, human development, even became a Gestalt therapist and successful lecturer on the subject of relationships. What I was not clear about is that I have a part, a small boy, who longs for attention, love and unconditional understanding. Paradoxically, the more my inner child took over, the more the adult man failed in meeting those needs outside himself.

Experiment: You are invited to engage in the following experiment that will illustrate the process of awareness and discover how the inner child is manifested. Working with a partner can help to clarify your work and get feedback.

1. Become aware when you experience or feel younger than you are.
2. Notice when this part emerges and what triggers it.
3. Note where in your physical or mental space the inner child resides.
4. Watch and observe the inner child.
5. Take responsibility for creating this inner child persona.
6. Observe this phenomenon like observing a situation through a window.
7. Have the adult observer dialogue with the inner child (Gestalt empty chair work).

Another example of how fear controls our lives comes from a student who came to do a weekend workshop. Her face was revealing strong fear and her body seemed as if she was trying to defend herself by hunching her shoulders. In the sessions that followed, she wanted to know everything that would or could happen. 'What are you going to do?' 'What use will this be for me?' She wanted assurances about everything. Even though she was over fifty-years-old, she looked like a frightened

child with a big smile and wide-open eyes full of fear. Her inner child emerged with the act of observing exercises she was willing to do. Her story about her early childhood made very clear her fears now. She was one of five children in a family where the father was very strict. Punishment for any transgression or apparent transgression of home rules was given out severely and to all children, even when only one may have done 'something wrong' – everybody got brutally punished as a result. She said: 'we were so scared to do anything "wrong" that we controlled each other and always needed to know what is OK so we will not be punished'.

As we grow up, our inner wounded child identity remains hurt and goes underground so to speak. This identity requires and often demands completion of the unfinished issues and needs. These demands appear in many different situations as these situations trigger behaviours that are no longer useful in the adult person but they act 'as if' they are necessary and, if unattended, may last the adult's whole life and usually badly affect the relationships with adults. Working in therapy or noticing our inner child's needs, we must understand that:

- We are the creator and observer of the inner child identity.
- We are beyond this identity that is very much a part of our unconscious.
- 'Healing' this part is a false concept. It is not an outside problem.
- We need to get to the source (origin) of this identity and take full responsibility to stop experientially generating this identity.
- Complete the unfinished business by using the Gestalt empty chair dialogue method, as one option.
- Voice dialogue may be another option.

How the wounded inner child affects our adult life

In my own case, as a 'good boy', I had real trouble expressing anger openly. I do not remember ever having a fight in school and active team sports were not 'my thing'. Later, as a Gestalt therapy student, my teacher would define me as 'the diplomat'. I was very proud to be a person that could solve problems and issues that may have led to serious conflict. As a social worker, I was proud to work with groups and deal successfully with any conflict. I never expressed anger and was keeping my 'negative' emotions locked inside. I was never able to raise my voice, shout or rage. I was a 'good boy' after all. I did not know then that this phenomenon is defined as age regression.

'Age regression is a trance state', explains Steve Wolinsky in his book *The Dark Side of the Inner*

Child. It is a basic process where the *Person* moves from the present state (here and now) to a 'frozen' picture of a child interacting with the adult in past time. As long as the memory of the inner child is out of control, these memories (hurts, fears, etc.), will 'pop up' on their own and outside of the awareness of the adult. At first thought, it seems ridiculous that an 'inner child' part in us can continue to live in an adult body. Yet, there is plenty of evidence that the neglected or wounded child part is the major source of human misery.

Until we become aware and work to reclaim that inner part of us, this process may continue to sabotage our adult life. John Bradshaw, in his book *Home Coming: Reclaiming and Championing your Inner Child*, gives a list of specific 'trances' that trigger the inner child behaviour and it is usually at our peril. In Gestalt terminology, this may be called 'a frozen gestalt'. My own life experience is one such example:

I needed to feel wanted and rewarded. This can be described in Gestalt terms as 'confluence'. It is a state characterised by a loss of our own boundaries as an individual and the process of flowing into the other. I was very good at hiding my feelings of frustration and anger. Instead, I attempted to 'please' others and did not ask clearly what I wanted. This was an unconscious aspect of a victim role.

I often behaved as if I was the most important person. We know that the child needs unconditional love to grow well and feel secure. A child's identity is formed by mirroring adults who project on the child all their parts – good or bad. We want to feel the sense that 'I am OK', yet when damaged, the adult develops an insatiable craving for love, attention, affection and being important at any cost. I did not realise that I hated my father for not being around but was constantly reminded by my mother that he was a saint in heaven. I later became very disappointed in the way my mother dealt with men in her life and hated them all. I became a seeker of truth in gurus, teachers and books.

Trust issues became a source of seeking authentic relationships without actually being authentic myself. When an adult cannot be trusted as safe, then the world of a child appears dangerous, hostile, unpredictable and insecure.

I projected my rage on my mother. My mother was a very good cook but used this skill to control me. She would sit beside me while I was eating and watch me with an anxious and sad face. I would get angry inside and lose my appetite and leave the table and then she would cry and say: 'I just cooked this special dish for you and you are not eating it!' I would get on my bike and leave – then feel guilty. I was not able to show her authentically my feelings and created more issues of trust and mistrust.

Anchoring opinions. When I was growing up in a refugee camp in Germany, my grandmother would often say: ‘Your behaviour is killing Mum!’; ‘God will punish you for your sins’; ‘I know what you are thinking’. I adopted these messages with a belief that my grandmother was truly a magician and could read minds and do miracles. These fantasies continued later in my life as thoughts such as: ‘If I get enough money, all will be well’; ‘Surely I will die if she leaves me’; ‘A degree will make me smart and successful’; ‘If I work really hard the world will reward me’; ‘Good results will come if I only wait’.

Magic thinking. Our wounded inner child continues to believe in the magic of fairy tales well into adulthood. They wish on a star, want to have a magic wand and live happily for ever after.

Many people have created fantasies and magic beliefs about intimacy and love. They may ‘solve’ their problems of relationships which have gone badly by jumping to the other polarity. They either fear abandonment or they fear confluence. Some become (like the Sleeping Beauty) permanently isolated for fear of being smothered and wait for the ideal Prince Charming. Others carry on living in destructive relationships for fear of being alone. Most fluctuate back and forth between the two extremes seeking the ideal man or woman.

My sense of authentic self emerged when I was a student of Gestalt therapy in Toronto. My teacher, Jorge Rosner, kept asking me ‘Who are you?’ He would say to me: ‘Work on finding out who you are and you will be able to relate to the actual world authentically and honestly!’

Experiment: do this with another person as witness or a therapist.

- Working with age regression and the false self. Identify and recognise that you are *in trance*. (90% of the process is becoming aware that the child inside you is operating.)
- What emotions/feelings are associated with this (trance) behaviour?
- Use the Gestalt dialogue with your inner child (use the empty chair approach) and ask the child in front of you: ‘what are you doing?’, ‘what is your purpose?’, ‘how do you resist letting go of this behaviour?’
- Keeping the dialogue going by switching chairs and asking and responding until nothing more comes up. Finish by thanking your inner child and promise to look after him or her.

Conclusion

This paper is a reflection about my own discovery of the journey I had to make to meet the inner child as a

phenomenon of growing up and being unconscious about reasons why I am creating blocks to satisfaction in life, feeling pain, sorrow, anger and despair. These feelings wanted to come up like uninvited guests into my living room. Using some insights from Gestalt therapy, working as a therapist and reading pertinent literature, I was able to find the ‘gold’ of healing. My mentor, Michael Meade, states:

Gold is hidden in dark places and that which is golden inside people is more valuable and ultimately more enduring than all the surface differences and divisions that cause the cracks in culture and the biting divisions of life. Everyone gets wounded in this world and everyone has within them some golden qualities that can serve to heal the wounds of time and the traumatic effects of human tragedy. (Huffington Post, 2014)

Notes

1. Trance: an unconscious hypnotic condition.
2. See References: Richard Garner, Education Editor, *The Independent* (2007).

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