

## *Introduction*

This book was conceived as a project in Athens in 2007, during the 9th EAGT Conference when we shared the dream of creating such a volume. We have all been interested in psychopathology for many years and especially in the specific Gestalt therapy perspective on this issue (see i.e. Francesetti, 2007; Roubal, 2007; Francesetti and Gecele 2009). We are Gestalt therapists and psychiatrists, and each of us has undergone a process of integrating these backgrounds. Gestalt therapy has deeply influenced our way of being as clinicians: to understand human suffering, to dwell on the therapeutic relationship, to support our clients, to take care of ourselves as therapists. Additionally our clinical experience has made us more sensitive to specific aspects of the Gestalt approach. We were enthusiastic to share with our colleagues the support that Gestalt therapy has provided us as clinicians and to start a dialogue on clinical applications of our modality.

Three elements have been – at the same time – backgrounds and aims in our work: first of all, there was (and still is) a gap between the rich clinical experience of many Gestalt therapists and the literature available; to have literature on Gestalt therapy clinical work is a fundamental tool for students in training programs and also a support for the ongoing dialogue on psychopathology and its changes over time. It is also relevant for the reputation of Gestalt therapy with colleagues from other modalities and a means to dialogue with them: too often our approach has been identified only with techniques without the knowledge of how rich and illuminating the theoretical understanding is that leads our practice. So this book is an attempt to make explicit what Gestalt therapists are doing in their clinical practice and our specific way of understanding psychopathology.

A second element that pushed us to start this project was the caution that Gestalt therapists have often held towards psychopathology. It has not been an easy relationship for epistemological, historical and political reasons. Nevertheless Gestalt therapy has a specific psychopathological understanding: each psychotherapeutic model has one, explicit or implicit. We think that the lesson of humanistic movements – the uniqueness of each person and experience - remains always precious: Gestalt psychopathology is an understanding of human suffering through our theory, not a way of labelling our clients. This process is a valuable support in our clinical practice. Actually, we think that our seminal book by Perls, Hefferline and Goodman has described healthy and neurotic experience well, but that its core concepts can be further expanded: i.e., the theory of human experience can be the basis for understanding seriously disturbed clients and psychotic functioning.

The third drive was our passion to understand human suffering as a field phenomenon: we are daily involved and challenged by suffering, both when working and in our daily lives. We believe, and have experienced, that Gestalt therapy can offer an original key to understanding, staying with and supporting people who suffer. Moreover, to see human suffering as a field phenomenon opens up the possibility of understanding better both the individual and the social field. Then, by understanding these connections, all of us as professionals play a role in supporting the social field.

These were our motivations that – along with partial blindness to the amount of work – led us to start this book.

Since our understanding of psychopathology is addressed in many chapters, here we just want to focus on the subtitle: *from psychopathology to the aesthetics of contact*. In this line you can find the core of our vision: in the contact process human suffering can be reached and modified and this transformation is aesthetic. Two ideas are present here: first of all, psychopathology is a co-creative phenomenon of the field,

it is emerging at the contact boundary and can be transformed in the process of contact. Secondly, this transformation is aesthetic: that means, it is perceived by our senses, it is evaluated by aesthetic intrinsic criteria and can even create beauty<sup>1</sup>.

Through this means we can bring psychopathology to the heart of Gestalt therapy theory.

We want to make clear to the reader that clinical practice is only one of the fields where Gestalt therapy is applied. Gestalt therapy theory and practice can be a model for work in organisations, in arts, in education, in a social and political dimension. Gestalt therapy can be seen as the way to support the *Gestaltung*, the process of creating the Gestalten, the unified whole of human experience. So, psychopathology and clinical practice are only one of the fields where our theory can be fruitfully applied.

The book has four sections.

The first part focuses on fundamental principles related to Gestalt therapy in clinical practice. Here you can find some basic issues that have to be addressed before or along with the clinical work: core and updated Gestalt concepts, Gestalt perspective on psychopathology, diagnosis and development, ethics, research and the relationship between psychotherapy and drugs.

The second part addresses specific contexts and focuses: this section supports the field perspective of the individual's suffering and helps the reader to consider it in the frame of social, political and multicultural dimensions. You can also find two specific focuses particularly relevant to clinical practice: developmental theories and shame.

In the third section some specific life situations and moment of risks are addressed: childhood, adolescence, old age, loss and grief, trauma and suicidal risk.

The fourth part examines different clinical sufferings from a Gestalt therapy point of view. This section offers an overview of clinical experiences and research on the main psychopathological issues. We have addressed many classical categories: dementia, dependent behaviours, psychotic, depressive, bipolar experiences, anxiety, panic attacks, phobic, obsessive, compulsive styles, anorexic, bulimic, hyperphagic experiences, psychosomatic disorders, sexual difficulties, personality disturbances (borderline, narcissistic, hysteric), violent behaviours. We have chosen to use these categories because they belong to the current psychopathological and diagnostic vocabulary. We hope that by going through the book the reader can find her/his own way to keep these categories as a point of reference and at the same time to deconstruct them when the meeting with the client happens and reveals the uniqueness of each encounter. We have tried to support this journey in all parts of this volume.

At the end of our work we have realised that the structure of this book has changed from the initial project: we planned to focus one volume on specific clinical sufferings and now this is the last part of four. We think that this evolution witnesses an important issue: to speak about psychopathology is always at risk of reductionism and labelling. So, according to our Gestalt perspective, we have felt the need to nourish and enlighten the ground of clinical suffering and work. In this way, the book has – in some way spontaneously – taken its final shape: quite a long and complex journey into the background before being able to enter into specific individual suffering. In the end, this form mirrors a theoretical cornerstone of this book: individual suffering creatively emerges from a relational ground and this provides meaning and direction to therapy.

Each chapter is followed by a comment written by another author: the aim is to offer a second point of view on each topic in order to put it in a wider and critical frame, a kind of binocular perspective that allows three-dimensional vision. The reader is exposed to these different perspectives: a complex horizon that witnesses the complexity of the field in this moment. The wide final bibliography can be a precious orientation that covers most parts of the available literature on Gestalt therapy applied to clinical practice. We have received some very critical comments to some chapters: we think this is both a sign of vitality and of a developing field where different points of view are still struggling with each other and deserve further discussion.

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<sup>1</sup> See also G. Francesetti (2012), "Pain and Beauty. From Psychopathology to the Aesthetics of Contact", *The British Gestalt Journal*, 21, 2: 4-18.

The perspectives you can find in the book come from the available literature and the specific clinical experience of each author. We think that this provides a valuable clinical treasure and we hope that it may encourage the cultivation of research on these topics. Indeed, to have hypothetical clinical constructs is a good ground for both qualitative and quantitative research.

As editors, during this work, starting from our common grounds, we have discovered our differences and tried to deal with them. And we discovered many differences too between us and the authors and amongst them. We have more than fifty contributors involved in this book: this is another reason for complexity. Even though we have done our best to orient them towards a common horizon, different ways of looking at psychopathology emerge from all the chapters and comments. The book offers a picture of the complexity of the Gestalt approach applied to clinical practice. The reader can taste the variety of approaches related to the geographic origin of the authors (they come from about 20 countries) and to the development of Gestalt therapy theory. Again, a rich ground and a witness to a growing field.

In conclusion we hope the book has reached a good form: a polyphonic chorus where each voice has its own specificity and contributes to a holistic whole. Anyway, it is the form we can foster in these times, representing both our own and the field's resources and strengths. We also hope that this volume will be a starting point for future developments: a stimulus to clinicians and researchers to go further with the richness of Gestalt therapy.

If we look now at our motivations described above, we can say that we are satisfied: we think this book provides significant literature in a wide field and can be a fundamental tool for the clinical practitioner.

We want to dedicate this book to Isadore From: to his effort in making Gestalt therapy a coherent clinical approach to addressing psychopathology.

We address this book to our Gestalt colleagues committed in clinical practice, to trainers and trainees in their teaching/learning endeavour. But also to clinicians from other modalities: they can find an original way of approaching psychopathology, and in a time of dialogue and integration we hope this volume can be a bridge to meeting different perspectives.

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