Preface

A Gestalt therapy handbook on Psychopathology, and to boot a relational approach to this complex topic! This book is ground breaking and revolutionary. Breaking new ground is always controversial, as I am sure this book will be, both among gestalt therapists and among more traditional medical model psychopathologically oriented psychiatrists and psychologists. First generation Gestalt therapists would probably respond with shock and surprise to see Gestalt being applied to severe disorders and to the use of labels such as borderline and narcissistic. On the other hand medical model practitioners will find it hard to assimilate concepts such as that psychopathology emerges at the contact boundary and ideas of process oriented, aesthetic diagnoses. But as revolutionary ideas they hopefully will have an impact on received views of treatment and psychopathology and help give Gestalt therapy a voice in mainstream dialogue on more severe disorders.

Gestalt therapy initially was occupied with supporting the growth of the self and greater autonomy in neurotic personalities. As part of the Third Force of Humanistic Psychotherapies it was part of a new cultural movement. Gestalt therapy promoted supporting the autonomy and creativity of those individuals, who felt the need to free themselves from suffocating societal 'shoulds' and family introjects. Self-expression, growth and excitement in the personality was the aim of therapy.

The Gestalt approach began and developed without paying much attention to more severe forms of suffering and psychopathology. Gestalt psychotherapy was not developed to treat more severe disorders such as psychosis, self-harm or severe trauma or personality disorders such as borderline and narcissistic disturbances. Perls promoted gestalt therapy as the therapy of choice for "neurotic" individuals but he was clearly aware that he could not use Gestalt techniques with seriously disturbed individuals.

In addition Gestalt therapy was identified by many with techniques without the theoretical understanding that guided their practice. It proliferated through workshops and self-experience. Research and theory development were viewed with scepticism and academic work on gestalt therapy suffered. Gestalt came to be seen as a growth therapy and not applicable to serious disorders.

The view of Gestalt therapy offered in this book is refreshingly quite different. This book is revolutionary in its effort to tackle the topic of psychopathology from a Gestalt relational perspective and it offers a specifically formulated Gestalt therapy view of understanding psychopathology. It views psychopathology as a co-created phenomenon of the field, that emerges at the contact boundary and as being able to be transformed in the process of contact. This is a laudable attempt to expand the core concepts of a Gestalt theory of human functioning to understanding seriously disturbed clients and psychotic functioning.

There has until recently been a lack of development of theory and research in Gestalt therapy that has greatly hampered the recognition of what gestalt therapy has to offer. Being an experiential therapy, training was based strongly on promoting personal experience as a way of learning. This led to the denigration of intellectual and scientific pursuits, to the elevation of learning by doing, and to only valuing "knowledge of acquaintance". You had to experience it to know it. This was in line with gestalt phenomenological theory of practice, but this approach had its problems in promoting theory and research. This approach exposed gestalt to the danger of becoming an esoteric practice and of losing any recognition as a serious academic, professional and scientifically valid approach. The theoretical and clinical writing that appears in this book is an antidote to this trend.

With the advent of the worldwide call for evidence based practice Gestalt has begun to shift its focus and has begun to develop and encourage more theoretical and research efforts. A sophisticated treatment of psychopathology as offered in these chapters fits into, and points the way, along this new path. In my view it can be thought of as helping to set a new frame for a third generation of Gestalt therapists, one that is more holistic, integrating theory research and practice in a phenomenological, relational and empirical framework.

Chapters in the book focus on many classical diagnostic categories: mood, psychotic, personality, eating and psychosomatic disorders, sexual difficulties, violent behaviours, and dementia. These chapters, although adopting classical diagnostic categories, attempt to keep the meeting with the client as central and preserve the importance of the uniqueness of each person and each encounter.

In addition, I think this approach will help promote one of the key views I have promoted, that of the importance of what I have called process diagnosis which the editors capture in their concept of intrinsic or aesthetic diagnosis. In this view diagnosis involves the moment by moment observation and sensing of where the client is, a functional diagnosis that guides the therapist's next moment. This is a co-constructive form of engagement that is at the heart of a form of diagnosis that leads to differential intervention. Thus following the process, a central gestalt principle, is not some mystical or esoteric process, wild and creative, beyond description or understanding, but rather a disciplined form of recognising the obvious, a form of perceptual differentiation akin to radiologists reading of scans to detect phenomena indicating that certain processes are occurring internally. We have suggested that therapy benefits from the identification of certain markers as indicators of internal states that offer opportunities for particular types of actions by therapists that best fit these states. Viewing diagnosis and intervention in this light helps bring the art and science of psychotherapy together in the performance of skilled practice.

I congratulate the editors on producing a volume that adds to the development of Gestalt therapy theory and captures the complexity of the Gestalt approach applied to clinical practice with complex problems.

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