

BOOK REVIEWS

Psychopathology of the Situation in Gestalt Therapy: A Field-Oriented Approach (2023) Edited by Margherita Spagnuolo Lobb and Pietro Andrea Cavaleri. Routledge. ISBN: 9781032322025

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Reviewed by the founder and former co-director of Gestalt Therapy Brisbane, *Psychopathology of the Situation in Gestalt Therapy: A Field-Oriented Approach* (2023) addresses the suffering experienced by people in a post-pandemic world. Representing the work of the Italian Gestalt Institute, this book is applicable to all psychotherapists. It is written in two parts. The first part advances an exciting, relational gestalt therapy theory that can inform modern practice. The second part offers in 11 chapters case studies and theoretical discussions to working with clients in difficult clinical situations. Moving beyond the intra-psychic to a holistic, embodied perspective, this collection of works by experienced practitioners and researchers blends practical applications with theories encompassing neuroscience, identity, diversity, reciprocity, aesthetics, anthropology, phenomenology, and sociology.

Psychopathology of the Situation in Gestalt Therapy: A Field-Oriented Approach (Spagnuolo Lobb & Cavaleri, 2023) is a valuable tool for gestalt and other psychotherapists. This edited volume has two parts. The first part, written by the editors, Margherita Spagnuolo Lobb and Pietro Andrea Cavaleri, offers a framework for understanding the gestalt therapy approach of working with clients in today's complex, COVID-19-affected world. The second part, comprising 11 chapters, reveals to the reader a broad range of client situations—including challenging childhood experiences, couples and family therapy, and working with older people—through theoretical discussions and case studies. In this book review, I provide both an overview of the book's content and a personal response to the challenges the authors offer.

Spagnuolo Lobb and Cavaleri (2023) argue in the first chapter ("Psychopathological Situations in a Post-Pandemic World") that the situation of psychotherapy has changed as society has changed. This change has been exacerbated by the global phenomenon of the coronavirus. The role of the psychotherapist is no longer to support the client to find relational autonomy and individual integrity but to help them find a sense of belonging in their community and to accept their own vulnerabilities. The psychotherapist too, as part of this society, must work towards the same goals. Such a change

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requires that psychotherapists observe the therapeutic situations within which clients are placed, not just the symptoms they may display. This requires a new reading of the specific painful situations that clients bring to therapy and that psychotherapists immerse themselves within during sessions. This demand brings a relational turn to the engagement between the psychotherapist and the client. The therapeutic relationship becomes a co-created field of safety and security: “What is essential is an ecstatic and aesthetic attitude towards the experience of oneself and the patient. It entails having a humble and ethical attitude which does not deny limits and places reciprocity of presence in the foreground” (Spagnuolo Lobb & Cavaleri, 2023, p. 8).

In Chapter 2 (“Working on the Ground, on Aesthetics, and on the ‘Dance’: Aesthetic Relational Knowing and Reciprocity”), Spagnuolo Lobb details and promotes practice competencies for the psychotherapist, drawing attention to three aspects of therapy. Firstly, of importance is paying regard to the “ground” experience of people.¹ Secondly, the psychotherapist’s field sensitive presence becomes the focus.² Both client and psychotherapist “contribute to their shared reality” (p. 23) and are not operating in isolation. Thirdly, the “dance of reciprocity” between psychotherapist and client is examined as “the space for therapeutic change” (p. 21). The dance of reciprocity can be understood as the way client and psychotherapist work and move together in the process of contacting and being with the other.³ It is based on the intention of the psychotherapist to build a mutuality between them. Spagnuolo Lobb offers an eight-step model of this dance:

1. Building together the sense of the ground.
2. Perceiving one another.
3. Acknowledging one another.
4. Adjusting to one another.
5. Taking bold steps together.
6. Having fun.
7. Connecting.
8. Entrusting oneself to the other/Taking care of the other. (pp. 33–36)

¹ The ground experience of people refers to the situations they are living in. This includes their family, work, health, natural environment, electronic use, past life situations including traumas, and any other factors relevant to the individual. A psychotherapist can be diverted by what a client brings to therapy and ignore the fullness of a person’s life. Exploring the ground of a client’s life can add meaning and insight to the work of a psychotherapist for the sake of the client.

² A psychotherapist’s field sensitive presence means that the psychotherapist is paying attention to the client’s life situations and how these are influencing the client. This is the ground experience of the client as described in Footnote 1.

³ Gestalt therapy’s theory of contact is deep and complex. Contact refers to how individuals connect with themselves, others, and their environment. It also pays regard to how individuals break their connection and how their processes of contact and disconnection are embedded in their psyche and physicality. These processes of disconnection can include deflection, projection, introjection, and confluence.

She develops what each step involves and then offers three “magic questions” to help the psychotherapist reflect on how they are engaging with their client and whether they are building a safe environment for the work of therapy:

1. What do you feel as a therapist, in being with this client?
2. What meaning do you think your feeling has in the client’s life?
3. What should change in your experiential approach in order for the client to be more spontaneous? (p. 36)

The chapter concludes with a challenge to psychotherapists to work so that clients may “(re)acquire a feeling of belonging to a community of human beings, and may become oriented towards their surroundings with determination, grace and a relational sense of rhythm” (p. 38). This chapter provided me with inspiration and enthusiasm regarding how to be with clients. It establishes a new paradigm of understanding the gestalt therapy way of working while staying true to the traditions of phenomenology and field sensitivity.⁴ The comment offered by Erving Polster⁵ as an addendum to Chapter 2 (“Beyond Slogans: Connecting Individuals in a Community”) includes an acknowledgement that Spagnuolo Lobb has incorporated what has been “long-neglected” (p. 44) in gestalt therapy—the social implications.

Cavaleri, in Chapter 3 (“Global Unrest and the Anthropological Perspective of Gestalt Therapy”), paints quite a bleak anthropological view of developed countries. He identifies a society desensitised and unable to cope with the complexities of globalisation. When reading the first half of this chapter, I found myself quoting “The Hollow Men” by T. S. Eliot (1925):

We are the hollow men
We are the stuffed men ...

Shape without form, shade without colour,
Paralysed force, gesture without motion; ...

Ironically, this reference gave me some hope. “The Hollow Men” identified the disarray of society after World War I. People moved beyond this despair into hope, just as people in today’s world can sensitise themselves and begin to cope with the complexities of globalisation. This hope, as noted by Cavaleri, was also expressed by the founders of gestalt therapy, Frederick Perls and Paul Goodman (Perls et al., 1951)⁶: “Starting from a negative criticism of the society of their time, our founders developed a creative solution which is free from clichés,

⁴ Two of the principles of gestalt therapy are phenomenology and field sensitivity. A phenomenological approach in gestalt therapy refers to how the psychotherapist pays regard to the here-and-now experience of the client. Field sensitivity, drawn from field theory, refers to the psychotherapist investigating patterns between the individual and their environment, as discussed in Footnote 1.

⁵ Erving Polster is a gestalt therapist and clinical psychologist. The author of many books, he has been highly influential in the development of gestalt therapy.

⁶ The founders of gestalt therapy are acknowledged to be Frederick Perls and Paul Goodman. Their original ideas are expressed in a book edited by F. S. Perls, R. F. Hefferline, and P. Goodman, *Gestalt Therapy: Excitement and Growth in the Human Personality* (1951).

positive at its heart, full of faith and hope in the potentiality of [people]” (p. 57). This chapter concludes by encouraging gestalt therapists—and I include all psychotherapists—“to be agents of change, capable of promoting and supporting new potentiality and human forms” (p. 63). Gary Yontef⁷ provides a direct response in an addendum to this chapter (“The World Crisis and Gestalt Therapy: Response to Cavaleri”). He reminds readers that the core principles of gestalt therapy—dialogue, phenomenology, and field theory—can unlock a creative future.

In Chapter 4 (“Phenomenology and Gestalt Psychotherapy: New Challenges Under-the-Radar”), Cavaleri explores one of the foundational principles of gestalt therapy, phenomenology, through various theoretical concepts. This is a profound and serious chapter that demonstrates the author’s knowledge across a number of academic fields. It challenges psychotherapists on both a theoretical and clinical level to explore the various aspects of clients’ present realities. This includes not just the issues with which they present but the environment in which they live their lives. Such sensitivities will “revitalise and recontextualise” (p. 77) a gestalt therapy approach. Cavaleri’s exploration includes, but is not limited to, neurobiology, neurophenomenology, and neuroception.

Chapter 5 (“The Gestalt Clinical Data Sheet: A Phenomenological, Aesthetic, and Field Instrument for Gestalt Psychotherapy and Supervision”) introduces a therapist’s tool designed by Spagnuolo Lobb, Elisabetta Conte, and Maria Mione. Enabling the psychotherapist to make astute observations of their work with clients, the Gestalt Clinical Data Sheet is well explained and draws on theory described in the first part of the book. In Chapter 6 the authors illustrate the use of this data tool via a case study. All the chapters in Part 2 implicitly refer to analysis guided by this data sheet.

Part 2 comprises 11 relatively short chapters on a number of clinical issues. These chapters directly meet the needs of practising psychotherapists. I read these chapters in the order in which clients had presented with similar situations in my own private practice. I offer my reflections in this same order, having obtained permission from the clients I refer to in this review. Initially, I turned to the last chapter, Chapter 16 (“For Whom the Bells Do Not Toll: The Processing of Bereavement in Our Time”), by Carmen Vázquez Bandin. I was working with multiple clients grieving over losses, including the deaths of a wife of 50 years, a mother, a dear and long-term friend, and a family member by suicide. Just as Bandin notes, as a psychotherapist I cannot eliminate for others the symptoms of grief and suffering characteristic of humanity when loved ones die, but I can assist the process of grieving with my presence. In sitting together, the bereaved and I could discover “each other in the here and now of our encounter” (p. 259). My experience also resonates with Bandin’s claim that

⁷ Gary Yontef is a co-founder of the Pacific Gestalt Institute. A leading developer of gestalt therapy theory and practice, he trained with the founder of gestalt therapy, Frederick Perls. Yontef has been on the editorial board of the *International Gestalt Journal* (formerly *The Gestalt Journal*), associate editor of *Gestalt Review*, and editorial advisor of the *British Gestalt Journal*.

although loss has a “profound personal significance” (p. 253), it is experienced within a social setting in which support and belonging are offered. I gratefully reflected on the clients I was seeing, knowing that each one belonged to a community that gave them at least some support.

My response after reading Chapter 13 (“Working with the Family in Gestalt Psychotherapy”) by Giuseppe Sampognaro was to write a short note which I sent to one of my supervisees. I have worked with this supervisee over a number of months. During one session he asked me how to work in psychotherapy with a family. He was taking on his first family as clients. I recommended that he read the chapter and sent him the following, which was inspired by my reading of Sampognaro’s work:

Your task with a family is to build a sense of belonging among them and to nurture the affection they have towards one another. Know that the family will change over time and face challenges and crisis points. Locate the family in relation to the social context and challenges of their lives in the present. In your first session you could get each member to introduce themselves and ask each to declare their intentionality of being here in this therapy session. Allow some free dialogue amongst members. Then present an experiment by asking each to name positive qualities of the others. You as therapist observe the contact amongst the members and watch for the complexity that exists. Describe to the family what you have observed. An additional experiment that you could engage with in your second session would be to ask each member to ask the others what they would like from the others to improve their relationship. Again, your task is to listen closely and to observe how they make contact. Watch for the liveliness and immobility within their relationships and notice how they avoid contact. Share what you have observed. In subsequent sessions you could engage in getting each member to shape a family sculpture. Once the family [members] are comfortable working with you, you could ask them to initiate a free discussion.

My supervisee gave me permission to share his response here:

Yes, this is wonderful. Your reflection certainly gives me focus/intent. I will start with the suggestions for the first sessions. I particularly like the idea of supporting them to nurture the affection that they share for each other. It is such an important and beautiful intent. I feel warmed and excited having sat with your reflection. I look forward to meeting this family for the first time. I really appreciate you sending me this. Thank you.

My reflection on Chapter 14 (“Gestalt Psychotherapy and Ageing”) by Alessandra Merizzi begins with this chapter’s closing statement on the need to unravel “unresolved personal concerns related to ageing, disability and death” (Woldt & Stein, 1997, p. 182). There is a complexity to how ageing is presented in this article that I truly appreciated. Merizzi challenges psychotherapists to reject ageism stereotypes, and to accept “the process of ageing as it is for the individual” (p. 234), accede to the limitations and vulnerabilities that come with age, and adjust to the situation that is in the client’s here and now. The issues concerning ageing were invisible when I trained as a psychotherapist. It was not until I began to deal with my own ageing issues—partial retirement, ill health, memory loss, heightened anxiety, and renewed knowledge that my life would end—that I was able to meet my older clients in their vulnerable realities.

In Chapter 12 (“Conflict in Couple Relationships as Space for Recognition: An Opportunity that is Still Possible in the Post-Pandemic World”), Cavaleri presents a way of working with couples by detailing his work with two couples. He presents as his basis four cardinal points that can be found in gestalt therapy: “focus on the ground;⁸ pay attention to aesthetic relational knowing;⁹ support mutual recognition; and revitalise the integrating and regulatory function of the self” (p. 191). The chapter explains each of these points and how the psychotherapist can work with them in couple sessions. This is a valuable discussion. I was particularly touched by Cavaleri’s inclusion of himself as therapist. In engaging with the husband in one of the two couples, Cavaleri saw the suffering in the man’s eyes and felt a sudden sense of compassion. The client in turn saw this in the psychotherapist’s eyes and as a result was able to open up and recount a tragic experience that was coming between himself and his wife. The client told the psychotherapist later that noticing the compassion in his eyes enabled him “to start to relate his secret, his tragedy, in a climate he sensed to be safer and more reliable” (p. 196). This is an example of the power of mutual recognition as experienced in “embodied empathy and resonance” (p. 195).

The power of mutual recognition is also illustrated in Chapter 15 (“Gestalt Psychotherapy in the Relationship with the Chronic Patient: Accepting and Supporting the Experience of Loss Through an Aesthetic Gaze”) by Alessandra Vela and Donatella Buscemi. Tears form in the eyes of the psychotherapist, Vela, when she first meets a client with chronic health issues. It was these tears, the client later revealed, that supported her to stay with her psychotherapist. This chapter details the complexities that face clients who have a chronic condition where “the ground seems to have collapsed” (p. 240).

⁸ Focus on the ground requires the psychotherapist to pay regard to clients’ life situations. See Footnote 1.

⁹ Aesthetic relational knowing is a “clinical tool that emerges from the phenomenological, aesthetic, relational and process-oriented approach that is the Gestalt method” (Spagnuolo Lobb, 2018, p. 50). It requires the psychotherapist to embody empathy for the client and to understand sensitively what is happening for the client. Psychotherapists use their senses to understand the client’s situation and respond in a way that vibrates between the client and the psychotherapist.

It supports psychotherapists to know how to work with such clients. For example, psychotherapists need to acknowledge the complexities that exist in the lives of clients who experience chronic pain and not attempt to simplify or diminish what clients are dealing with. They can also show clients how their suffering is affecting them through embodied empathy and resonance. Openly responding will support the clients to know that they have been heard and understood.

I work with an 18-year-old who is struggling with the developmental challenges of his age. He has been diagnosed with depression, and in the words of Michele Lipani (Chapter 10: “Adolescents in Eclipse: Journey Notes From the Labyrinth of Social Withdrawal”), “has folded in on [him]self” (p. 160). This young man has a fear of illness and repeatedly visits the doctor to reassure himself that he is not dying. His social life is impoverished, and although he is still attending his first-year studies at university, he rejects his classmates, their enthusiasm, and their questioning of established cultural norms and ideas. I concur with Lipani’s assessment that it is fear and courage that need to become allies in the therapeutic relationship. I was touched when my client left one of our sessions saying to himself, “Hold hope”.

Chapter 9 (“To Be or Not To Be Autistic: From the Camouflage Effect to Élan Vital—A Gestalt Perspective”) by Antonio Narzisi provides valuable insights into clients, especially women, who live with autism. The practices of camouflage and imitation used by individuals to “mask the underlying difficulties associated with autism” (p. 149) can come at a high cost, leading to anxiety, depression, and a negative effect on a person’s identity development. The chapter’s testimony of Anna, an autistic girl, is enlightening and powerful. Her experience helps to highlight the differences in communication that an autistic person can have from a neurotypical person. Differences will be particular to each individual, and the psychotherapist must attempt to understand their way of processing and communicating information.

The four chapters of this book that I have yet to refer to (Chapters 6, 7, 8, and 11) deal with working with children and addiction. As I move towards retirement, I do not now engage with either of these populations. However, in reading these chapters I know I would have appreciated their insights when I worked a full practice. Chapter 11 (“Addiction as Persistent Trauma of the Ground Experience: Neuroscience and Gestalt Psychotherapy”) by Giancarlo Pintus and Marialuisa Grech identifies addiction as the “adaptive result” (p. 175) of a child raised in an environment full of anxiety and desensitisation where the child’s need for nurturing is not adequately attended to. Consequently, therapeutic work needs to provide a “real live presence of a significant other” (p. 186). The client begins to understand that they are addicted to drugs, and the psychotherapist supports the uneasy emergence of vitality and spontaneity. The authors note that attempting to intervene between the client and their drug may only lead to frustration and anger, for both the client and the psychotherapist.

The three chapters on working with children continue to emphasise the importance of the psychotherapist providing a deep relational connection with the client. All these chapters provide case studies that bring theory to life. Chapter 6 (“Ring-a-Ring o’ Rosies, a Pocket Full of Posies: Gestalt Psychotherapy and Childhood Suffering”) by Silvia Tosi and Elisabetta Conte contends that children today are “witnessing an increase in distress” (p. 99) and in response they need to be able to share their feelings. At times, their parents are unable to meet their needs. It is the psychotherapist’s role to re-sensitise young clients to themselves and to the environment in which they live. In this case, it is the relational ground that the psychotherapist builds with the child, and at times with their parents, that is of primary importance.

Chapter 7 (“Children of ‘Broken’ Relationships: Repairing the Ground of the Parental Experience”) by Paola Canna and Manuela Partinico is built on the premise of how “that thread is that binds intimate relationships together” (p. 119). It offers mediation as a way of building relationships between separated parents so they can meet their children’s needs and alleviate their distress, for when “couple bonds end the parental bonds must last forever” (p. 121). Chapter 8 (“Gestalt Psychotherapy and Complex Trauma in Preadolescence: How to Support the Integration of the Body, Emotions, and Words”) by Rosanna Militello acknowledges the beauty of a child’s creative adjustment to her history of family trauma as she enters a residential care facility. Initially, her behaviour is rebellious, angry, and aggressive. Her psychotherapist focuses on the dance between them as they move towards attunement and resonance. This is a powerful story of building contact and the integration of body and emotions for the young client.

In conclusion, I recommend this book to all psychotherapists. It will provide an opportunity to inspect and reflect on their practice and to hone their skills. I know that I have sat differently with my clients since reading the book and writing this book review. Being stimulated by fresh ideas is important for me to remain motivated, engaged, and enthusiastic in my therapeutic practice.

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