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Before and After

A Phenomenological Exploration of the Impact of a Four-Year Training in Gestalt Psychotherapy on Gestalt Psychotherapists

Abstract

This article is a shortening of my Master dissertation in gestalt psychotherapy that I conducted as a phenomenological and qualitative exploration into how a group of gestalt psychotherapists in Norway had been impacted by their gestalt psychotherapy training. The related literature and research studies in the areas of training of gestalt therapists, gestalt psychotherapy, individual and group therapy and supervision were reviewed and found to be lacking in number and quality. The data was generated through a semi-structured interview in a focus group and analysed by using a phenomenological method that is discussed. During this process the data were organised in interrelated themes around what motivated them for joining the training, their experience of being in the training and the outcome or impact of the training concluding with a description of the meanings and essence of these experiences. The findings are discussed in the light of the literature, and the limitations of the study are considered.

Key Words

Gestalt training, focus group, challenge, awareness, change.

Introduction

Some years ago I had a personal crisis that turned my life upside down. During this process I questioned myself many times, how come I can deal with this loss in the way I do, and how and where did I learn this skill? When I look back at these years, I see that I was aware of my needs and feelings all the time. This enabled me to ask for help and support when needed and also to withdraw and care for myself when necessary. I discovered that this ability to be aware from moment to moment had developed through my

training to become a gestalt therapist and from my years of practice once qualified. When I investigated further at this, I realised that my gestalt training had had a much richer impact on me than I had been aware of. During my years as a gestalt trainer, I have heard said many times: "This training changed my life", "I do not know how I would have survived without this training," but I had not really been aware of how much it had impacted me before my own crises.

A further motivation for exploring the impact of the training was the fact that I have established, in co-operation with two colleagues, the Gestalt therapy training in Norway and also Norsk Gestaltinstitutt (NGI) in 1986. The training program has changed several times over the years, and is now an officially accepted training by the Norwegian Government. This means that the students get credits and can have student grants and loans during their training. Our intention has been to offer a meaningful training with a high level of quality but because Gestalt therapy is unique and the study of psychologists, psychiatrists, social workers, psychiatric nurses offered at universities and colleges in Norway, are very different, I cannot draw on research from their professions to ascertain the level of quality that I have created for NGI. This made me more curious about the value of the training and how it has impacted other psychotherapists trained at NGI and how their experiences compare with mine. In addition to this, I also had become very engaged in the discussion in the European Association for Gestalt Therapy (EAGT) about the criteria for accreditation of training institutes. I therefore chose to conduct a phenomenological exploration into how former students had experienced being impacted by the training.

Literature Review

Because of my research I conducted a literature review that started with an investigation into trainers and gestalt therapists' view on different aspects of the training in gestalt psychotherapy. This naturally led on to investigating the theories for learning from a gestalt perspective. I also briefly investigated the gestalt theory relevant for teaching gestalt therapists. This theory is relevant from two perspectives: firstly, because the trainees have to know their theory to be able to practise gestalt therapy, and secondly as Harris (1999) points out, the theories support the methods for training.

Due to a lack of relevant research studies on how graduates have been impacted by the training, I reviewed literature on training of psychotherapists in general (Hougaard, 1996). This showed that psychotherapists (mainly psychologist and psychiatrics) were trained by practise, supervision

and personal therapy. I also turned to literature and research concerning gestalt psychotherapy and supervision. These are components of the training that meet the training standards created by EAGT alongside with personal therapy, theory and methodology and clinical practice. In addition to this I reviewed research studies carried out in other approaches to psychotherapy (Clarkson 1997, Hougard 1996, Russel 1995, Seligman 1995, Bohart and Tallman 1999).

My aim was to investigate the impact of the gestalt therapy training and the theories and methods behind it and not to discuss different methods for learning. For that reason I limited the focus of my review to theories of learning from a gestalt perspective (Perls 1992, Brown 1972, Grenstad 1986) and I chose to exclude research studies in general around learning.

I concluded that there is limited literature regarding the issue of how the training impacts trainees. Literature on how to train therapists, the content of the training and its components, is also scarce. In the literature that does exist there are more agreements than disagreements about how to do when training Gestalt therapists (Mintz 1987, Harris 1999, Fuhr and Gremmler-Fuhr 1995, Yontef 1997, Spagnuolo Lobb 1992, Clarkson 1995, Parlett 2000). This agreement concerns the needs for personal therapy, supervision and practise, that the training takes time and that it should be experimental and experiential.

I also searched the literature for what had been written about the different components as mentioned above (Brown et al. 1987, Harris 1999, Yontef 1996, Kearns and Daintry 2000). I found research studies and literature on three of these components (Reichelt and Rønnestad 1999, Reichelt and Skjerve 1999), but practice had not been dealt with explicitly, and also nothing was written about how these components worked as a whole in the context of training.

Methodology

I chose to utilise a qualitative methodology, as I wanted to explore the therapists' subjective experience regarding the impact of the training. The aim of a qualitative research inquiry is to gather a description of the informants lives, especially how they understand and give meaning to the phenomena described (Kvale, 1997). This is also compatible with gestalt psychotherapy. Barber (2002:79) points out "that gestalt has influenced and been influenced by many qualitative approaches to research". He also states "that the researchers become not so much observers, as human data themselves on a journey of discovery" (ibid p.78). Clarkson (1997:35) describes that "Gestalt is concerned

with the quality of awareness, attention, with the integrity of experience - so is qualitative research." Gestalt therapy is focused on the subjective experience in the here and now with full awareness and has its roots in existential and phenomenological philosophy.

I conducted one interview in a focus group with six participants who were all therapists trained at NGI. My intention was to reduce my influence on the participants by interviewing in a group setting. Halvorsen (1996) describes a focus group as a discussion group around one theme, or an interview done in a group where all the participants have experienced what is researched. This generates useful qualitative data not only in response to the researcher's question, but through spontaneous dialogue within the group (McLeod, 2001). Focus groups are advantageous when the interaction among interviewees is similar and co-operative (Creswell, 1998). In a group interview, members in the group influence each other when they share their experiences (Kvale, 2002). They can help one another to remember forgotten material, give supplementary information and together reconstruct the course of events. I videotaped the interview and transcribed the verbatim in order to make the research analysis more valid. The participants later read through the verbatim and were invited to comment on it.

Findings and Discussion

The participants started the gestalt therapy training because they had had a positive experience of gestalt therapy, which they experienced as challenging, strange and practical. They also had an experience of missing something, so they were looking for more meaning in life. Some wanted to learn to communicate, and through this process learn to listen to themselves and others.

The training impacted all the participants, both personally and professionally. The impact was visible in their lives and had also led to many active changes. All the participants had an experience of having increased their awareness, which led them to identify their own needs and choices. Awareness also enabled them to take and give more space, live more in the here and now, trust and accept themselves and others more. Awareness of their own needs and choices also made some feel lonelier and choose friends different than before. They all felt they coped better with crises in life and they saw life more as it is. They all accomplished changes both on a professional and a personal level, which was accomplished by changing profession, deciding to stay in relationship, and developing more skills to be with children and partners.

Because all the participants in the study had had a positive experience of gestalt therapy before they started the training, they were highly motivated. Research studies reviewed by Clarkson (1997) and Bohart and Tallman (1999) found that the involvement and motivation of the clients was key in their therapy having a successful outcome. Orlinsky et al. (in Hougaard 1996) also identified key ingredients to be having a goal and a wish to achieve. Because an important part of the training of gestalt therapists is therapy and the training itself is largely experiential, the same conclusions also could apply to gestalt training. This is also consistent with Harris's (1999) arguments that the link between therapy and training is important in the training of gestalt psychotherapists. He also states that: "we learn best what we want or need to learn" (ibid p. 91). The starting point for learning was therefore optimal for my interviewees. They had had a positive experience with gestalt therapy and had therefore already started their learning process.

An important factor during the participants training, were their experience of being "held". When they talked about this, they mentioned both the time it takes (four years) and the structure of the training. The training standards from EAGT are specific about the necessity of the training taking four years and having structure concerning content and the way it is carried out. Smith (1987) stresses the importance of keeping the learning contract explicit; to make clear boundaries and be clear at the outset of what is being offered. The positive experience the participants had of the length of the training can be supported by Seligman (1995) that showed that long-term treatment did considerably better than short-term.

The positive experiences the therapists had of being held and accepted by their trainers fit with the paradoxical theories of change described by Beisser (2001). Their experiences also confirm what Harris (1999), Yontef (1997) and Fuhr and Gremmler Fuhr (1995) state about how important the trainers are in the training. Positive relationships between students and between trainers and students are also key factors in successful outcomes. This parallels the findings from studies by Clarkson (1997), Hougaard (1996) and Bohart and Tallman (1999) into what works in therapy. Also Russel (1995:217) concludes his research studies by stating that: "Positive change was generally attributed to the healing effects of a benign human relationship". Gestalt theorists are also of the opinion that the relationship is of primary importance (Yontef, 1980, Hycner, 1985).

The participants' experience of being in a safe environment during the training is compatible with what Nevis (1987) described as the ground of the training. Mintz (1987) writes about the optimum

climate for self-development, and Harris (1999) the importance of creating a learning environment and safety in-group settings created by its members and the trainers being an important part of this. Zinker (1977) describes the importance of the group by saying: "At its best, a group is not only a small, cohesive community in which people feel received, accepted, and confronted, but it is also a place and an atmosphere where people can become creative together. An ideal group is a place for testing ones growth boundaries, a community in which members can develop at the highest levels of human potential. In this context, a group may be defined as a *learning community*..."(p. 56).

When the participants described how they learned during the training, they mentioned all the different ways they were taught: experimenting, fantasising and discussing theory. This was similar to Brown (1972) "confluent education" and Perls (1992) theories about learning which includes the "aha" experience.

The first spontaneous response from the participants when asked how the training had impacted them was that it had impacted them very much. Some said it was the most important thing they had done in their life, others said it had made them change their life. This mirrored my own experience of training to be a therapist. Statements like this I did not find in the literature.

When I investigated experience of changes during and after the training, they all mention increased awareness, ability to identify their own needs and to make more free choices. These three areas are mentioned in the gestalt literature by different authors. Yontef (1993) talks about awareness, or rather the ability to be aware, as one of the goals of gestalt therapy. Perls et al. (1994), describe awareness as what arises in us, what we do, feel and plan. This can also be compared to the contacting phase in the theory of creative adjustment (Perls et al. 1994), which is also stressed by Harris (1999), Spagnuola Lobb (1992) and Parlett (2000). Also other aspects of the findings like; living in the here and now, taking and giving more space, seeing life as it is even when they feel lonely and things are difficult, match with the theory of contacting according to Perls et al. (1994). The positive effects for clients attributed to the gestalt approach are increased levels of self-actualisation and personal effectiveness, maximum development of personality potential, and the expansion of awareness and of experiencing. This seems to be also the case for trainee therapists.

No one mentioned shame even though it was referred to in the literature (Fuhr and Gremmler-Fuhr, 1995, Yontef, 1997, 1996, Kearns and Daintry, 2000). One participant mentioned that he

felt shameful before he started the training, but this changed; *“before I had a tendency to run away and feel guilty and shameful... now I can chose pain and then it is possible to stay and make good of it”*. Other participants mentioned how they felt different, outside and not part of the group in the beginning, but this experience changed during the training. *“It was difficult to do the exercises, I'd like to stand in a corner and watch, feeling different. Slowly the scene changed, from looking at the other people with interest, and later with love and affection to them”*. Yontef (1997) stressed concern about the vulnerability of trainees and how easily shame could be triggered in training and therapy. He also looked at the potentials for repair or exacerbation of shame, which I think the interviewees refer to even though they do not specifically refer to shame.

My study does not reveal anything about supervision or having a therapeutic practice, which are important parts of the Gestalt therapy training (Resnick and Estrup, 2000, Yontef, 1996, Kearns and Daintry, 2000). Personal therapy was only mentioned by one of the participants. I chose not to ask the participants directly about these subjects in order not to influence the interview process. These might be areas for further exploration.

Limitations of the Study

The first limitation of my study was the size and the sample. I only interviewed six people trained at the same institute. I would need a much larger sample to make any generalisations about the impact of the training of gestalt therapists. Another limitation, and maybe the most important, is that I interviewed people who had been trained in my own institute. Some had also been clients and supervisees of mine. I am aware that the dual relationship they had with me inevitably influenced the interview process. They might for example have answered more positive than they actually felt about the training to please me. This might have been why I did not get any negative comments about the training or issues around shame. I am also aware that my dual relationship with them might have influenced my data analysis and that my personal interest and investment in the research could have shaped the findings. On the other hand I chose to do this research because of my enthusiasm, knowledge and interest in training, which I have due to my position as a teacher in gestalt therapy, and I think trainers have a responsibility to investigate the outcome and quality of the training they offer

Implications for gestalt psychotherapy training and therapy

My study reveals that gestalt psychotherapy training has had a big positive impact on the participants taking part in it. They have developed more awareness, the ability to identify their own needs, to make changes in their life, to cope better in crises and to be more fully in relationship. They also have acquired skills as therapists and are practicing these skills in their work. The interviewees were highly motivated when they started. Involvement, motivation, length of the training, the relationship between students and students and trainers were all-important in bringing about a successful outcome. The theoretical input and individual therapy were also important factors.

How therapists are trained, will inevitably influence the quality of the therapy they practice. Parlett (2000) writes about creative adjustment and the Global Field: *“... learning self management, staying healthy, and acting in the world in creative ways – may also support an emerging consensus across the fields of therapy, lifelong education, community development, and holistic health”* (p. 24). When gestalt training first started, the therapists learnt through apprenticeship (Harris, 1999). They took part in some gestalt therapy workshops, got some personal experiences, and then they started their own therapy practice. They more or less copied what they had seen their therapist/trainer did, and went into supervision with their therapist/trainer. The danger of creating gurus was huge (Yontef, 1993, Clarkson & Mackewn, 1993), What Perls and his colleagues did in sessions was very impressive. Since then there have been some significant and welcomed changes. The political work of EAGT, EAP (European Association for Psychotherapy) and affiliated training institutes in creating ethical guidelines and training standards has changed the field of gestalt therapy. But until we produce evidence-based research we will not know if all the development and changes create better training institutes, trainers, supervisors and therapists.

This also has influenced the training I have founded. The curriculum, the trainers and the requirements regarding therapy, supervision, written assessments and theory have all changed during the 19 years NGI has existed. When the EAGT now has increased the amount of hours for training, supervision and therapy, they have created a more expensive and time - consuming training, without knowing what the effect might be on the trainees and the training institutes. Lack of research in this field means that there is no evidence-base for these changes. Houston (2000) criticises all the requirements put on training institutions; *“Counting beans is easier than*

recognising lemons one from one another" (p.48). She agrees that it is necessary to measure and count, "but the art is the intuitive, the intimate, the contact full, which cannot be fully replicated by anything except other humans of goodwill" (ibid p.48).

Conclusion

I conducted the research study out of my own personal crisis and my ability to cope in this crisis, my curiosity about the influence of the gestalt therapy training on other people and my interest in the aspects of the EAGT new training standards. I learned by doing this how big an impact the training has had on my interviewees and that they have had similar experiences as me concerning increased abilities to cope with life crises and changes in their life. This has made me humble and grateful for the work I am doing and also for what I have created so far together with my colleagues. By doing this study I have become more aware of my position as a co-director and trainer at NGI and my personal interest in continuing to create a training of quality.

There is a lack of research and literature on how the training influences people's life. The aim of my study and this article, are to highlight this in the hope of generating greater awareness about the impact the training has on students, and gain a better understanding of what works during the training. I also think that exploring the impact of gestalt psychotherapy training is an important aspect of the discussion about validating training institutes in EAGT.

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