



# Gestalt NEWS Foundation

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«To be sexual is to be alive and to be alive is to be sexual.»

(Lowen, 1980)

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**Gender  
Diversity  
and Sexuality**

**Adolescence,  
Post-Adolescence  
Internet Field...**

**The Inter-Subjective  
Structure  
of Experience**



Love does not desire the beautiful as you might imagine; it desires to be birthed through beauty as Diotima said to Socrates. Mortal nature seeks to be as eternal and immortal as possible. The only way is to have a physical and mental birth. Because with birth, something new always takes the place of something old. Even though man is the same, the new is constantly being born and with it something old dies. In this way, every mortal being continues to exist and through this process mortal nature acquires a share in immortality. Interest in and love of other accompanies everyone in their pursuit of immortality. Love is a flow to the other that raises questions and through response meeting takes place. Love has nothing to do with romanticism, nor with sadism, but with the transcendence of the ego, which frees the being, transforms it and

transports it into the present. On the contrary, Ibris, arrogance, is an excess, but an excess as a measure of fairness and prudence, that is, of leniency towards the guilty. How often has society, institutions and each of us not tolerated abuse? How often, through a passive attitude, have we not accepted phenomena that need to be denounced? What is required is the dignity of man and not the transformation of the perpetrator into a victim and the victim into a perpetrator. Human dignity presupposes education and social institutions in action.

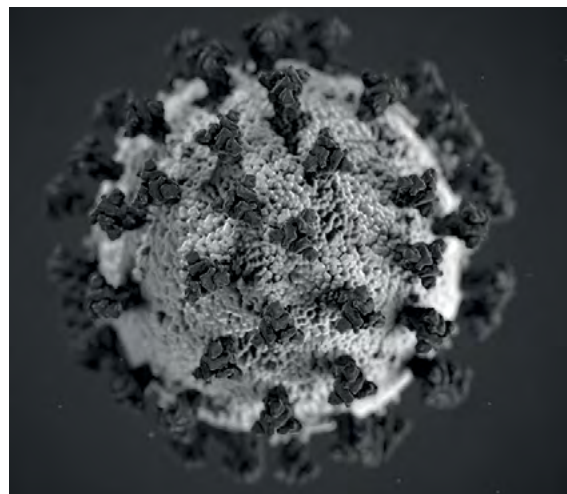


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**•The psychotherapist as a companion in times of crisis**

Sessions from a distance entail something of the unpleasant for me; a little poorer, lacking some excitement and this is the feedback of the patients, who seems to be mostly relieved as they return to the live sessions. When the patient is having a hard time, online / telephone presence may not be enough. And yet at the same time, it is presence. Working in a particular context with vulnerable people, who have little to no external sources of support, I realize even more clearly how important creative adjustment and availability in crisis situations are. So, I break free from my perfectionism and indulge in the notion of a 'good enough' therapist, (Borg, 2006) as someone who is there, authentic, inclusive and in tune with the field (Chidiac



and Denham-Vaughan, 2006). I think of presence as a concept in psychotherapy, and how Zinker (1987) describes it as 'being rather than doing'. The biggest challenge for therapists is to stay in the relationship, with commitment; to function in a state of unprecedented crisis that many of us experienced as a 'dystopia'; to venture out of our safe, structured environment, while at the same time keeping it as stable as possible within an ethical framework. Now, more than ever, how do we to stay open and create a new, safe space that allows the needs of the patient to be met? As Gestalt therapists, we have the ability to co-create a healthy therapeutic relationship inclusive of the therapist-patient inter-subjective experience in this fluid field.

**Katerina Karasavva, Psychologist, Gestalt psychotherapist**

**ΛΟΓΟΤΕΧΝΙΑ**

**ΜΕΛΕΤΕΣ**

**BEST SELLERS 2021**

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## «e-therapy» by Gestalt Foundation

*Gestalt Foundation: Online volunteer social support program*

### **A rich experience of partnership and contribution at the heart of a deeply «traumatized» era!**

On March 18, 2020, just a few days after the announcement of the first cases of COVID-19 in our country, the Gestalt Foundation Psychotherapy and Training Center, (drawing inspiration from the principles of social contribution and volunteering, which characterize its parallel actions), organized and publicized the setting up of a program to provide psychological support, with the symbolic title: «Remote... CONTACT». The aim of the program was for Gestalt therapists to join forces, in a completely voluntary capacity, in reaching out to fellow human beings who needed psychological support but who did not have the means to secure it for themselves. A framework was immediately created that provided for specific categories of people most affected by the pandemic, with special conditions for inclusion in the program, to help any person in need of

for Gestalt Foundation senior trainees, with the view to increasing the capacity for incorporating mental health volunteers in the program. Thus, in September 2020, the Gestalt Foundation announced the organization and operation of the new voluntary program «e-therapy» by the Gestalt Foundation - free psychological support and counseling, in times of crisis, via the Internet. The renewed voluntary program followed the successful operating model of the pre-existing one, but was upgraded and evolved at various levels. Those interested (who had to meet certain conditions) could send their request, via a simple message, to participate in the program on the page created for this purpose on Facebook: <https://www.facebook.com/gestalt.therapy.by.GF>

The conditions for accepting a request to participate in the program were:

- Adults (18 years and older)
- People of all occupations (unemployed or part-time) affected by the current health crisis
- Single parent families (Mother or Father)

Requests for psychological support or counseling was related to the current socio-economic situation created by the health crisis.

After the management and acceptance of each request, the participant in the program was referred to the first available therapist, who undertook the organization, implementation and completion of online sessions with the interested party. Each participant was seen



copied with the uncertainty and the unprecedented pressure of the pandemic, with the psychological impact of quarantine on their daily lives during the restrictive safety measures imposed by the State to fight the corona virus. The program quickly gained great momentum and requests arrived at a rapid pace. The waiting list grew and with it the need to include more and more therapists in the volunteer program. In the initial phase, 4 groups were activated, each facilitated by a Gestalt supervisor, with 30 volunteer therapists divided equally between them. Through this particular program, in the first phase of the pandemic, more than 150 people found the support and care they needed to cope with any difficulties they had to go through, following a series of specific online sessions with their mental health counselor / psychotherapist, or Gestalt Foundation graduate. As applications for the program increased even during the summer months, and given that the pandemic was still active, it was decided to intensify the volunteer program, turning it into an important social service and volunteer program for qualified Gestalt therapists and graduates, but, at the same time, providing an internship structure

exclusively by a specific mental health counselor (or therapist, trained in Gestalt psychotherapy) throughout the 4-6 sessions offered per individual. The therapists, in turn, were assigned to small supervision groups, operated by Gestalt Foundation supervisors. By March 2021, more than 86 therapists (alumni and seniors of the Gestalt Foundation) were working on the program, and more than 420 of our fellow human beings found the support and care they needed to cope with any difficulties they had to deal with because of the pandemic.

Requests to participate in the program have not stopped arriving on our site page. The «e-therapy» program continues with the deep belief of the entire community of Gestalt therapists that together we will be able to overcome this difficulty and contribute to the community with all our strength!

**Nikolas Raptis**, *Mental Health Counselor and Gestalt Foundation graduate, coordinator and administrator of the e-therapy program*

## ARTICLES

**«Adolescence,  
Post- Adolescence,  
The Internet Field &  
Identity Formation»**

The 21st century is characterized by global phenomena such as climate change, geopolitical turmoil and population migration, the melting of Arctic ice and the corona virus pandemic, which has been linked to ice melting though this has not been proven in research. There is some speculation that viruses which had been frozen were reactivated and transmitted through migratory birds to the rest of the planet (ZEREFOS). These multiple crises create abrupt changes in political, cultural, and economic becoming, signaling the need for cooperation and solidarity between the people of the world for the survival of the planet

of physical and technological reality. On the one hand, the realistic and unbearable loneliness of man's daily existence and ways of living and on the other the electronic, non-physical, bodiless presence on a website, where interactive two-way meetings take place, with the least amount of time and without spatial restrictions. From the culture of the virtual reality of Cybernet, there has emerged an irreversible and predictable process of globalization through the mechanisms of space-time compression and distancing, which do away with the concept of space and time. This phenomenon of displacement involves the radical fragmentation of time and its complete detachment from space. Everyone can connect with everyone to construct their world (Hayles, 1993). The virtual and the everyday are united in a cyclical, dialectical relationship of mutual evolution and adaptation. Under these conditions the biological body is redefined within the framework of organic-mechanical



and the organisms that live on it. What also happens in parallel process and which is a hallmark of the 21st century, is the multi-layered development of technology, with the Cybernet as the current protagonist. Cybernet was named after science fiction writer W. Gibson in 1984. The «hyper-sphere» as referred to by R. Debray, the «new earth beyond the horizon» as W. Michel calls it. According to field theory, organism / environment interaction is multi-layered in relation to the conditions that characterize the environment. Thus, multi-layered and interdisciplinary studies are needed to be aware of them. Cybernet is a technologically constructed reality which involves human-machine interaction and in sociology the questions that arise are the subject of research called Virtual Reality. The fundamental principle of Virtual Reality is based on the constant play between the real and the virtual, and brings into contrast two different pictures

convergence. Thus emerges the concept of post-humanity, which concerns the experience of a techno-cultural embodiment. The self in virtual society seems to be more attuned to variability rather than to the frequency with which it retains its characteristics. Eric Brewer, a computer security expert, describes this network as a giant, largely invisible infrastructure that makes our lives better. But how are our lives being affected by the gradual development into a diffuse presence of virtual reality - collectivity, which is strong and at the same time goes unnoticed? We could argue that adolescence and new technology are for all eras an encounter, the interaction of which always leads to something new. We see it reflected in art, culture, politics and the engraving of the new horizon that rises in the future. This is because everything new affects and shapes a teenager's identity. His identity contains elements of the field from which

he comes, his history, family, society, as well as elements that make up the era and the conditions in which the adolescent develops. The way the adolescent interacts with the environment involves the function of the senses. The senses function as stimulating synapses between the body / environment and evolve into bodily experience and meaning. In Virtual Reality the senses involved are sight, hearing and speech. Touch and smell are absent. Touch as a sense is very important for shaping and experiencing oneself and especially for teenagers. I will refer to the ritual of the touch of the Olympic Games flame and the archetypal significance of touch for the body. Touch in the Greek language means light and is directly related to the ignition and function of vital energy. The goal of the young athletes was to compete well and the honorary reward was the crown with the kotino, made of an olive branch. During the games, all hostilities ceased and peace prevailed. Ethics - discipline and energy eu-agonizesthai. Restriction and weakening of touch due to cultural and technological conditions is not just a current phenomenon. As life «becomes easier» vital energy has weakened along with the human entity. We can listen to this existential void from the echo of despair overshadowed by the instrumentalization of the adolescent's physicality, e.g., the use of the mobile phone. The mobile phone as an extension of the hand and the constant preoccupation with it cuts him off from energy and movement. I could describe it as a teenager's infantile condition, where his needs are met immediately, without learning to wait for them to be met. On the other hand, he has to wait an unimaginably long time for later needs to be satisfied, e.g., work, autonomy, etc. What happens to the vital energy of adolescents and how much do we care? And if the fire goes out, where will Prometheus be? We as a society have focused on procurement, consumerism and cutting off our substance. The adolescent, in addition to relationships with peers, in order to form an identity, needs to mirror a parent, a teacher, an adult and then destroy the mirror. Otherwise, he is trapped in a relationship by giving the other what he does not want and asking from other what he does not have to give. Thus, the need to release energy is held within the body. Having a steady adult can help him stand up for what he is and listen carefully, whether frozen, in apathy or with incandescent aggression. The steady attitude of an adult in an adolescent's life can help the emergence of a new figure between passivity and aggression, energy. The knowledge of teenagers today is incredibly expansive, due to easy accessibility via the internet, as well as their activities on the internet. The issues that should concern education today are not so much the acquisition of knowledge, but how adolescents perceive this knowledge and how they are influenced by it. How do they differentiate themselves by choosing what, how, how much and when to engage with the internet instead of remaining passive recipients or aggressive deniers? The development of adolescents' critical ability to choose the type and quality of online contact is what will determine the future. Because, according to the French sociologist D. Wolton, the heart of internet communication beats on the side of people, not machines.

*Yianna Yiamarelou, March 2021*

## ***The Inter-Subjective Structure of Experience***

Intersubjectivity is a concept that comes from phenomenology. To understand it, we need to refer to the concept of intentionality, that is, that every function of consciousness, every experience, is directed towards things, whether they are objects or have abstract meanings. According to this view, the mind is a public function that is performed in my encounter with the world, or rather in my involvement in the world, which also becomes real and public. The world, which is already there, is manifested to man through this purposeful function. That is, identity belongs to things themselves and the recognition of this identity belongs to the intentional structure of human consciousness. In this way, the world and the human experience are formed. They are not manufactured, they are not produced, that is, they do not dominate each other, but they are relative to each other. The other people are presented in the same way. On the one hand, in my direct experience, as physicality, where in the specific situation intersubjectivity is understood as a relationship between embodied subjects that is formed in the gaze of each other so the perception of the self is mediated by the other. However, intersubjectivity presupposes asymmetry. Others are not completely accessible to me; they are always escaping me in its their entirety, and precisely because they are not exhausted in my direct experience, they are experienced as Others. This guarantees their freedom. On the other hand, the others are presented indirectly, through the common world that is at the same time given to their experience. Only to the extent that I feel that others have the experience of the same world does the world become real, and thus my experience is validated. I experience the world in perspective; every moment one side of it



is presented to me, while at the same time or at a different time or in potentiality, different sides are presented to others. Thus, I realize that each of my experiences is structured in the same way and has the same validity as the experiences of others, and I can say goodbye to my privileged position. In short, everyone's experience is intersubjectively structured and all people are co-responsible for shaping the world. How does the concept of intersubjectivity ultimately shape therapeutic practice? Initially, it could be the ground on which we can stand to protect ourselves from the issues of power that emerge in therapy, and protect ourselves from

resorting to the privilege that the position of therapist can give us. It also helps us to remain open to the therapeutic dialogue, to the surprise of the meeting, and not to rush into the premature creation of a figure. It brings us to our responsibility in constructing the experience of the other, and it reminds us of our vulnerability and that our own experience is constructed intersubjectively. Finally, it emphasizes the generosity that exists in the human condition. Everyone's experience is offered to the common world and reshapes the ground from which the new experiences of all of us will emerge. Of course, the concept of intersubjectivity inside and outside of the therapeutic process cannot be exhausted in this text. It cannot even be a summary. But I hope it will help create an opportunity for new dialogue and connection.

#### **Recommended Reading**

Sokolowski, R. (2000). *Introduction to Phenomenology*. Cambridge and NY: Cambridge University Press.

Zahavi, D. (2003). *Husserl's Phenomenology. USA: Stanford University Press*.

Husserl, E. (2002). *Cartesian Meditations*. Athens, Roes.

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### **In pursuit of the self-determination of Otherness or a look at the three-day workshop «Diversity of gender and sexuality»**

*«It is difficult and abusive to ask the Other to conform his nature to social expectations» (Hawley, 2011)*

The theory of Gestalt therapy has shown us that everything is a field and that it is within it that the 'I' comes into contact with what is 'not me'. Such an interaction has the potential to shape and define us, sometimes making us flourish and sometimes causing us crumple. This is exactly the feeling described in the words of Maya Aggelou, one of the most important women in global activism and literature: Man will forget what you told him, he will forget what you did to him, but he will never forget how you made him feel. And in our times, this is emphasized even more through the institutions and their policies (European Commission, Strategy for equality of LGBTQI+ people 2020-2025, the protection and promotion of their physical and mental health), so as to protect all individuals for what they are, for what they feel and for the way they live, wherever they live. The LGBTQI+ population has experienced many changes in the last 50 years and is still far from saying that it enjoys equal rights. This population is constantly struggling to become more visible, to be able to recognize same-sex marriage, the right to childbearing, the ability to buy or rent a home without suffering discrimination (Lugo, 2010). In addressing gender diversity and sexuality in the three-day training at the Gestalt Foundation (February 12, 13 & 14, 2021) we talked primarily about human rights. The spectrum of gender, the continuum of sexuality, the umbrella of sexual identities and their variants reasonably raise the vital right of every human being to self-determination. The way we stand as Mental

Health professionals in support of this human right signals our political position in the therapy room, by sending a clear message to the traditional forms of medicalization and pathologizing, and by saying no to every stigma and dipole.

For the founders of Gestalt theory and therapy, the self, sexuality and gender are a dynamic process, moving along a spectrum, in which each person finds his personal and unique place. Laura Perls treats Gestalt therapy as a therapy that does not attempt to adapt individuals to society nor to conform and normalize them based on social norms and constructions (Rosenblatt, 1998), that is, it is not based on social adaptation, as traditional adjustment therapy would do (Ginger, 2010). Confidence in the subjective-phenomenological experience, in each personal truth and its own rhythm, reflects the confidence in the process of each individual and their organismic self-regulation, as only an individual knows who they are and what they need. The right of all people to be who they are or rather who they become is given both space and comfort, thus highlighting the dynamic and creative quality of the personal process. Paul Goodman, one of the co-founders of Gestalt therapy and known for his contribution to the gay liberation movement, said he was «open» to same-sex relationships and self-identified as bisexual. Today, in the therapy room Gestalt theorists and therapists such as Leanne O'Shea, Billy Desmond, Daniel Rosenblatt, Allan Singer, and David Hawley have put and continue to put the above into practice. Gestalt therapists address issues of gender and sexuality with authenticity and in ways that strengthen and empower the individual. Many of the values and assumptions we make as therapists can be helpful in working on gender in a way that enhances the authenticity of self-expression. Gestalt therapy allows for a creative exploration of the individual's experience of sex (within the body and through active relationship) instead of being driven by a prescribed idea about sex and the soul. The emphasis on intersubjective connection, the deliberate study of projections and hypotheses as well as a clear focus on a «constantly changing and always integrated present» enable us to approach the issue of gender in unique and new ways (Johnson, 2014). In the laboratory we study terms such as heteronormativity which refers to the institutionalization of heterosexuality in a society. Heteronormativity is based on the idea that human beings fall into two distinct and complementary categories: the male and the female. Thus, gender, gender identity, and gender roles must be aligned with either male or female norms, and heterosexuality is considered to be the only «normal» sexual orientation. Heteronormativity requires that all discussions of gender identity be strictly part of the dichotomy that forces individuals to call themselves «men» or «women,» regardless of how they identify themselves. Consequently, not only do individuals not question heterosexuality and gender roles, but also take them for granted. Heteronormativity is expressed through social behavior, family, institutions and the law, placing everything else in an inappropriate zone. An important part of the workshop was the discussion on privileges, which is very relevant. It is important as therapists to recognize the benefits of our gender and sexual orientation and the social benefits that come with these benefits so that we are sensitive to our clients' process. With this workshop we also addressed latent homophobia, which is defined as the fear of homosexual attraction or the irrational fear of people who have

such a desire. George Weinberg first defined homophobia in 1972 and Levine (2014) studies the internalized homophobia of gay men. Iaculo (2004) speaks of cultural and social resistance to the

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full acceptance of gay people and prejudices about «diversity» still exists even though they are less absolute and harsh than before. This particular workshop was designed and carried out with the exploration of these concepts and the principles of human rights at its core. The participants in the workshop deeply moved with their stance on human issues, on natural processes, such as sexual orientation and gender identity. We take with us the inclusion of and respect for the self-determination of each person together with the seed sown in challenging the heteronormative perspective, as well as an openness to deconstructing the gender stereotypes that each and every one of us carry within us.

Thank you very much!

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Continued from page 1


**TRAINEES'  
ESSAYS**
**Introduction**

There is no single definition of sexuality; it has been adapted several times, depending on the historical period and the perceptions and beliefs about morality that prevailed in each given period. According to the World Health Organization (WHO, 2006a) sexual health is a state of physical, emotional, spiritual and social well-being associated with sexuality - it is not just the absence of illness, dysfunction or disability. Sexual health requires a positive and respectful approach to sexuality and sexual contact, as well as the ability to experience pleasurable and safe sexual experiences, free from coercion, discrimination and violence. In order to achieve and maintain sexual health, the sexual rights of all individuals must be protected and respected. Sexuality and its expression are one of the most basic dimensions of human existence and its main goal is pleasure and reproduction. It is an integral part of ourselves and is inextricably linked to our thoughts, feelings, behaviors and actions. It is there, present from the moment of our birth and throughout our life, it is our being acquainted with and our contact with our body, our desires, our wants and our needs. The World Health Organization (2006a) defines sexuality as a central part of being human, throughout life. It includes gender, gender identities and roles, sexual orientation, eroticism, pleasure, intimacy and reproduction. Sexuality is experienced and expressed in thoughts, fantasies, desires, beliefs, attitudes, values, practices, roles and relationships. While sexuality can include all of these dimensions, it is not always experienced or expressed. Sexuality is influenced by the interaction of biological, psychological, social, economic, political, cultural, legal, historical, religious and spiritual factors. A historical review of the concept of sexuality reveals that the 17th century marked an important turning point in the history of sexuality with both the prohibition and the imposition of silence around anything to do with sex, and sexuality was recognized only in relation to couples whose primary goal was reproduction. Something similar continued to be observed in the 18th century, where it was even forbidden to mention sex in everyday speech. There was, however, a simultaneous explosion of discourse about sex aimed at controlling and managing it. Thus, the Christian pastorate, which called for extensive repentance, made its appearance, alongside the medical profession, the state, the justice system and the police. Also, the educational institutions denounced child and adolescent masturbation. In the 18th century, sex became a matter for the police, who ensured that everyone served the common well-being and demands of society. Any act or thought whose focus was not solely related to the reproductive process was characterized as perversion and that was how

# GESTALT and

society dealt with it. The 19th century saw the beginning of sexual heteronormativity. Sex entered the world of psychiatry. A very strict standard for what sexual development entailed was established and all possible deviations were defined. This involved the inculcation of perversions. That is, the strict model of what sexual development meant brought to the surface the other pole of sexuality, that of extreme manifestations of sexual expression. During this century, labels such as «moral madness», «genital neurosis», «deviation of the sexual instinct», «degeneration» and «mental imbalance» appeared. This was an era which, in its attempt to build walls and strict barriers against sexuality, inadvertently caused a flourishing and pathology of the sexual instinct. In the 20th century, there were significant changes in terms of sexuality. Strict sexual prohibitions began to loosen and there was a certain tolerance for premarital or extramarital affairs; the characterization of «perversion» that prevailed in previous centuries began to decline and the taboos that burdened the sexuality of children were for the most part removed (Fouko, 1978). It would appear that human sexual behavior is a complex phenomenon. It involves many different factors, biological, psychological, socio-political, which make understanding it particularly difficult and complex. Since the end of the last century, studies related to sexuality have emerged, from which it seems there is a strong need for understanding and information on the subject of human sexuality. To date, a number of theories, works,





# SEXUALITY

studies on the subject of sexuality have been developed by experts from different approaches, offering the necessary knowledge in this field (Vaidakis, 2005).

## **Theories about Sexuality**

The brain is the main regulator of sexual behavior and in particular the hypothalamic area. More specifically, the hormones released by the hypothalamus stimulate the anterior pituitary gland, which in turn releases hormones that affect the

genitals, ovaries and testicles. These hormones affect the hypothalamus and trigger sexual behavior (Vaidakis, 2005). Sexual arousal, that is, the preparation of someone for sexual contact and intercourse is caused by a multitude of external and internal stimuli. All the human senses are involved and both physical and mental functions work together for complete sexual arousal. According to the DSM-III-R (1987), the ICD-10 (1990) and the DSM-IV (1994) the sexual function is completed in 4 phases: a) the desire phase, which is broken down into 3 components: sexual drive, sexual motivation and sexual expectations, b) the arousal phase, c) the orgasm phase and d) the resolution phase (Ierodiakonou, 1991). In the phase of arousal, orgasm and resolution, the biological system is mainly involved, that is, the central nervous system, the genitals and biochemical processes. According to Freud's (1991) theory of sexual instincts, sexual drive is the main life force; it is based on the

feeling of pleasure and satisfaction and aims to maintain life. This unconscious, biological and sexual energy is called libido. According to Freud, neuroses are caused by the conflict between natural sexual instincts, disapproval from the environment and society, and the frustration of these sexual instincts. Freud developed the theory of child sexuality, which showed the important and decisive role that sexual organization plays in shaping the human personality. According to Freud's theory of psychosexual development, children develop active sexuality from a very early age, which is based on physical pleasure and enjoyment. More specifically, the theory of psychosexual development is as follows: The oral stage, which lasts from birth to the first 1.5 years of a child's life, during which the mouth projects as an erogenous zone and is the main organ of the body from which the baby derives enjoyment and pleasure (e. g sucking). The next stage is the anus phase, which starts at 1.5 years and lasts up to 2.5 to 3 years. In this stage, the child focuses his attention on the anal area and especially on the mucosa of the anus and urethra. Through the functions of defecation and urination, the child derives pleasure. This stems first from physical pleasure as the intestinal system empties itself and secondly from the mental and intellectual satisfaction that the child feels as he manages to perform this function, to control his sphincters for his parents. The third stage of psychosexual development, the phallic stage, begins around the age of 4 and the child's attention becomes focused on the genitals. At this stage the boy and the girl recognize the differences between the sexes and this realization of causes frustrations and fears that differ between the two sexes. The girl realizes that she does not have a penis and that she is not going to have one. Frustration is experienced as she strongly desires to have a penis. From this intense desire emerges an envy of the penis. The boy, on the other hand, desires his mother and experiences feelings of jealousy and competitiveness towards the father, whom he perceives as an adversary to his mother's devotion, love and attention. Freud called this condition the Oedipus Complex. According to the Oedipus complex, the boy is afraid that his father will castrate him because he wants the exclusive possession of his mother (fear or anxiety of castration). The next stage begins at 5-6 years and lasts up to 11 years old; it is called a latent period. During this phase the sexual feelings continue, but are weakened and diminished. The superego is formed, which is responsible for activating emotions such as shame, guilt, fear and the sense of right and wrong, moral and immoral. At this stage children begin their quest for conception and a sex life; sexual exploration and masturbation enter their lives (Bhattacharyya, 2002). Through his analysis of adults, Freud concluded that the basis of their sex life and the problems and difficulties they faced in their sexual life, was attributed to adolescence and childhood, especially from the age of 2-5



years. Through his theory he essentially turned everyone's attention to child sexuality and its significance (Winnicott, 1976). Reich (1989) with the theory of orgasm argued that sexual satisfaction actually relieves neurotic symptoms. In other words, in his theory he stated that the libido was an energy, which could be measured quantitatively and that what an orgasm essentially does is maintain a balance in the energy of the human body and to help release excess biological energy in the body. In the event that this release function encounters obstacles and is disturbed, then the concentration of energy continues without relaxing and being released from the body sufficiently, thus fueling neurotic behaviors. According to Reich, this unreleased excess energy is not only bound up in neurotic symptoms, but also in muscular and character armor which maintains the symptoms or even strengthens them. The aim of his treatment is to achieve full orgasmic potential, that is, the restoration of neurophysiological flow through the deconstruction and removal of the character and somatic / muscular armor of patients which entails the discharging of the energy surplus and the circulation of this bioenergy. Abraham Maslow, in his theory of the hierarchy of needs, classifies sexual need as one of the basic, primary needs of man, together with the need of hunger, and thirst; that is, the needs necessary for human survival. The person, therefore, who has not managed to satisfy his basic needs, can not proceed to the next needs that are higher up on the pyramid - security, companionship, friendship, self-actualization. Therefore, the person who has not satisfied his sexual need, can not feel love, and this is because sexual deprivation stunts his ability to develop higher psychological needs, which are important for the creation of healthy relationships, such as love and companionship (Freud, 1991)

### ***The sexual cycle of contact***

In its approach to sexuality Gestalt therapy talks about the cycle of sexual contact, which is characterized by the alternation between contact, satisfaction and withdrawal. The erratic, complete cycle of sexual contact includes the following stages / phases: Desire (need and preference) - Arousal - Emotion (love and lust) - Expression / Action - Interaction - Satisfaction - Withdrawal. In order to have sexual contact, erotic desire is necessary, which is a basic biological need of man. Apart from erotic desire, the existence of sexual preferences is also essential. Sexual preferences are the individualized expressions of the need for sex, the subjective, that is, the expression of the individual's sexuality. The need for sex is about the «what», or the content of the sexual function, and the sexual preferences are about the «how» or the style of sexual behavior. After the appearance of erotic desire comes the phase of physical arousal, which is mainly characterized by organic intensity

and the mobilization of energy. Feelings of love and desire are evoked through the mobilization of energy. Feelings of love have more to do with feelings of tenderness, while lust is mainly about the desire for organic satisfaction. Experiencing the above emotions, the body is mobilized and takes action. Action leads the person to interact with the other, in contact, that is, with the other person. Once the previous stages are completed successfully, satisfaction follows, which is the last stage of the cycle of sexual contact. The individual feels satisfied and withdraws until a new sexual need emerges as a desire (Smith, 2003). The first part of the cycle of contact - desire, arousal and emotion - is associated with awareness. The second part, action, interaction and satisfaction are associated with expression (see figure 1). Awareness leads to expression and expression in turn is what helps awareness to become disentangled and to unfold. For example, when I touch my sexual partner, through touch I better understand my sexual desire, I feel the arousal in my body more intensely and I am filled with feelings of desire and love (Smith, 2003)

### ***Interruptions in sexual contact cycle***

There are also cases where the cycle of sexual contact is interrupted, disturbed, resulting in dysfunctions in the sexuality of the person.

**Blurred awareness:** Blurred awareness of sexual desire reduces sexual arousal and promotes impotence and frigidity. If the person has a sexual need, which, however, is not allowed to come to enter awareness, then the feeling that usually prevails is boredom, «I want something, but I don't know what. «Nothing seems appropriate.» In this case, the individual misinterprets the preferred type of sexuality as such a need, with the result that nothing else is enough. For example: «I can only make contact if I'm on top and I don't even want to try anything else». Even if sexual need is referred to as a preference. In other words, the person, in this case may claim that he forgets to have sex or that he's too busy and has no time (Smith, 2003). Awareness may be altered through the mechanisms of introjection, projection, and confluence, as well as through retrojection and desensitization. The toxic message embedded is: «Do not have sexual needs!» (Smith, 2003).

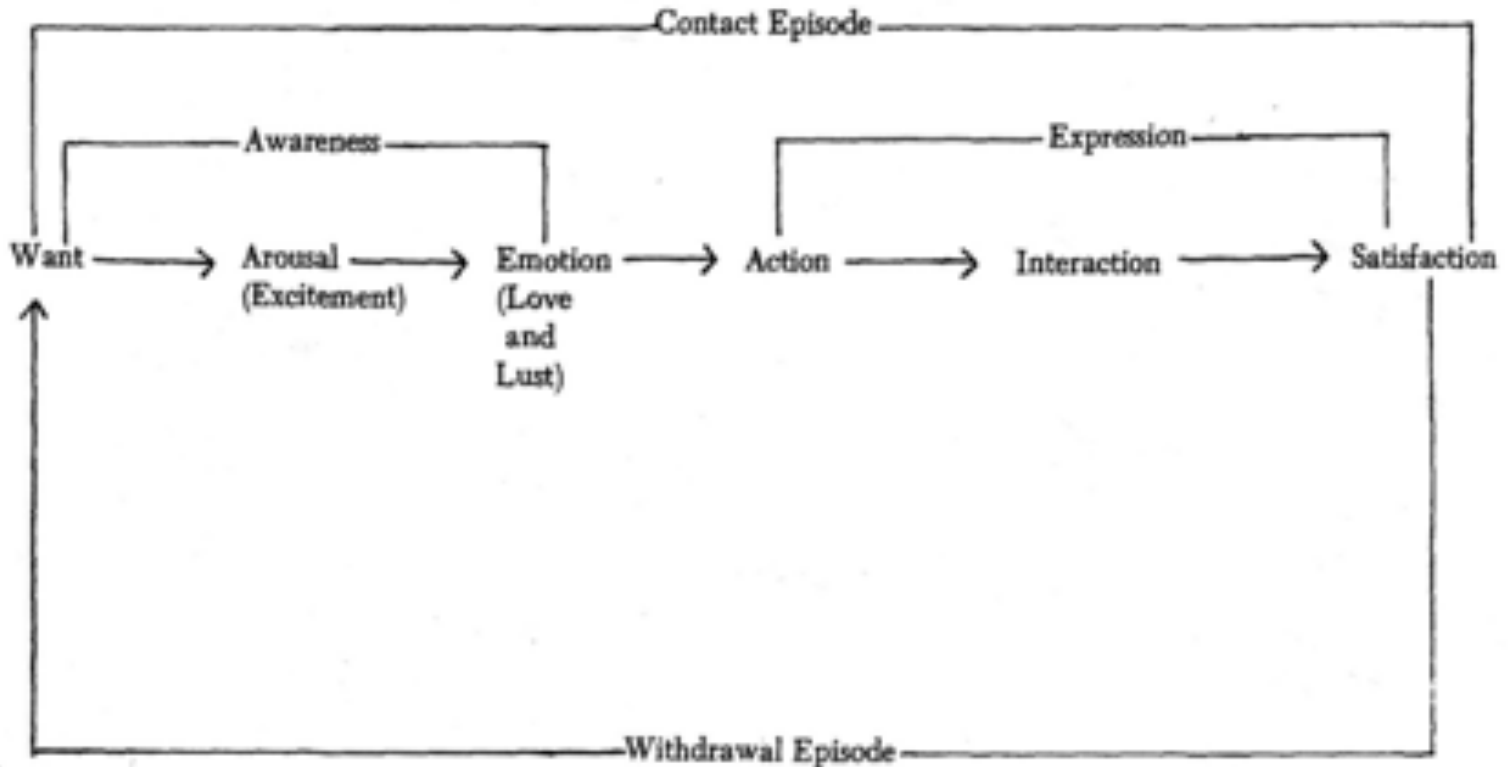
**Interruption between desire and arousal:** At this point in the cycle of sexual contact there is sexual desire, but there is no somatic sexual arousal. That is, the spirit wants but the body does not respond. Often the person describes his condition as «lack of enthusiasm». This interruption in the cycle in men occurs in the form of erectile dysfunction and in women with reduced vaginal secretions. Self-disruption at this point may be the result of a toxic introjection such as: «Do not be sexually aroused!».

**Difficulty in transitioning from excitement to emotion:**

At this point the person cannot connect with the feelings of love and desire. On the contrary, his awareness is blurred and feelings such as irritability, agitation, anxiety, and tension

this point it is observed that the person is not sexually mobilized and pulls away from action. There is the intention for expression, which, however, is never fully manifested. People

Figure 1. Sexual Contact/Withdrawal Cycle (SCWC)



prevail. The toxic introjects that exist are: «Do not feel love!», «Do not feel lust!», «Do not feel lust with love or do not feel love with lust».

- «Do not feel love!»: In this case the person is free to have sex and to be sexually active with lust. But the feeling of love is weak or absent. His sexual activity is characterized by intensity and excitement, but there are no feelings of tenderness, intimacy and love anywhere. The person can have sex, but not love.
- «Do not feel lust!»: According to this toxic introject, the person has mainly platonic sexual experiences. This person expresses his sympathy in a verbal way, with tender movements and touches; he is very emotional and tender. However, his sexual contacting is not at all passionate and is characterized by a lack of energy, intensity and passion.
- «Do not feel lust with love or do not feel love with lust»: In this toxic introject lust cannot coexist with love in sexual activity. The person can not feel love and lust for the same person. For example, the person loves his partner, but also creates passionate relationships with other people. In other words, the feeling of love and that of desire are allowed, but what is not allowed is that the two can coexist for the same person.

**Difficulty in transitioning from Emotion to Action:** At

who are obsessive and full of fear of being misled seem to exhibit such behaviors. The prevailing toxic introject is: «Do not behave sexually!». There is often an hierarchy scale present in measuring of what constitutes sexual contact and what does not. Therefore, when the message is 'do not act sexually', it is saying that you can do everything except have sex.

**Interruption of interaction:** This toxic introject is: «Do not have sex with anyone or with particular individuals!». During this interruption of the cycle, the sexual interaction is prevented, and blockage and reversal of the interaction is observed. The individual does not interact sexually with anyone, or chooses sexual partners who also do not interact (Smith, 2003).

**Difficulty of satisfaction:** In this interruption of the sexual cycle, the person self-interrupts in the phase of satisfaction. There is no sexual completion, the person does not feel pleasure and satisfaction from the sexual experience and does not experience an orgasm. While there is sexual interaction with the sexual partner, there is no sexual satisfaction. The person often complains that he is never satisfied as much as he would like, or that he is missing something. The toxic introject in this case is: «Do not enjoy sex!» or «Do not be sexually satisfied!» (Smith, 2003).

**Inability to withdraw:** Immediately after satisfaction, what

comes naturally is withdrawal, relaxation. The natural rhythm of sexuality is essentially this: from «together» to «apart», so that there is the right time and space for a new sexual need to emerge. Here the person does not seem to oppose sexuality and even seems to support sexual satisfaction. He does not however go on to withdrawal, but persists, in order to prolong the satisfaction, he gets from sexual contact. By staying in touch after satisfaction, possessing an insatiable appetite for sexual contact and refusing to withdraw, this satisfaction becomes unpleasant and, in many cases

can turn into disgust. What the person has toxically introjected is: «Do not let go, you may not have the opportunity again!» (Smith, 2003). What happens, then, when the sexual cycle of contact is interrupted is that a need remains unsatisfied and therefore results in unfinished business. The main reasons for these breaks in the cycle of contact are the toxic introjects that the person carries from his parents, caregivers and in general his social environment, which are maintained without question and/or investigation

throughout the life of the individual. As a result, the person is in constant conflict between the natural impulse of his sexual vitality and the toxic sexual scenarios he has introjected. Thus, in this way necrosis or «armor» is created and bio-negative messages are sent to the body (Reich, 1989). Toxic introjects can be classified as primary and secondary. Primary toxic introjection is characterized by content (e.g. «You should not be sexual...») and destructive expectation (e.g. «If you do this dirty thing, I will not love you!»), where the person feels fear that they will not be loved or that something very bad will happen. Secondary toxic introjects appear when the person is older, more logical, and in essence act as reinforcers of the person's already existing beliefs. More specifically, the parent can say to his teenage son: «Sex is dangerous. Be careful, because you can catch a disease!» These introjects, then, build the system of ideas and values that the person has about sex and constitute his sexual scenario (Smith, 2003). In general, it seems that the causes of sexual dysfunction are mainly psychological and emotional.



### ***Gestalt psychotherapy practice in sexual issues***

According to Gestalt theory, sexual difficulties are relational even when a partner feels sexually unsatisfied, confused and unable to feel pleasure and satisfaction (Amendt - Lyon, 2013). Many of the problems that arise in interpersonal relationships, as well as sexual problems, have to do with blocked communication both with others and with ourselves. Thus, Gestalt theory does not see sexual dysfunction as a problem to be solved. On the

contrary, the approach to sexual issues is more holistic and evolutionary and it is perceived as rich experience and an attempt to creatively adjust. The primary goal is sexual satisfaction and transformation, not performance in sex. How therapists deal with sexuality issues in the therapy room has to do with the way they themselves communicate and manage their own sexuality and sexual identity (Amendt - Lyon, 2013). That is, how they perceive and feel their sexuality, how they express it, whether they prevent or allow its

manifestation, certainly affects the form that sexuality will take in the therapeutic context (OShea, 2000). When the therapist feels some sensuality, this is not necessarily unprofessional behavior. It is important for the therapist to have the ability to manage what he or she feels and experiences in such a way that allows for focus on what is helpful and beneficial for the patient's therapeutic process. Whether the therapist will be able to perceive and recognize any issues of sexuality that will arise depends on the relationship he / she has with his / her own sexuality (OShea, 2000). In the field that exists between the therapist and the patient throughout the therapeutic process, the wider field, the social environment, is involved. This broader field includes values, beliefs, religious beliefs, nationality, social class, the way society treats sexuality and the role that sexuality plays in society. It also concerns the relationships that the person has developed in the past and in the present, his financial situation, the problems he faces at work and in life generally. All of the above is important for the client to come to awareness during therapy (Amendt - Lyon, 2013). This social aspect is related to how we talk about sex in our daily lives or how we avoid touching on this issue. More specifically, it is related to emotions, such as shame and embarrassment that may arise from both the therapist and the

patient during therapy. On the one hand, the client may feel ashamed and embarrassed in the face of a sexual habit that arouses these feelings (eg sadomasochistic sex) and on the other hand, the therapist may have difficulty connecting with some of his own issues, which he may not be aware of. Through Gestalt therapy, the individual becomes aware of the ways

like, "How are you doing when you touch your partner? How do you want to be touched?" involve the "here and now" of the client, his present experience, and can be used by the therapist to enhance the patient's awareness. These exercises help the person not only during therapy, but also in life outside the therapy room, because he becomes aware of his subjective



in which he prevents self-regulation. The therapist is there to help the client get in touch with his or her psychological processes, find out where he or she is interrupting, and recover from feelings and needs that remain unsatisfied (Mosher, D. L., 1979). Sexual dysfunction occurs when the natural cycle of sexual contact is interrupted. The therapist helps the client to see, to discover how he interrupts the normal sexual process; in other words, to become aware of his process (Mosher, D. L., 1979). With awareness, the individual manages to discover patterns of behavior and mechanisms that he automatically uses in his life. Gestalt therapy increases a person's level of awareness by bringing them in contact with their senses and emotions. This is achieved through relaxation exercises, breathing, somatic awareness, where the person does not seek to change, but simply observes and develops awareness of his body. By observing his breathing and the reactions in his body, the person comes in contact with his process. Questions

truth, focusing on the present and manages to set his own limits and his own choices. The goal of Gestalt therapy is to enable the patient to develop a phenomenological awareness of what exactly is happening in his body during the therapy session, to describe it and not to analyze it and thus to try to get in touch and discover all the issues that affect his sexuality. As he manages to connect with the deeper issues of his sexuality, he recognizes that he has resistances, as well as thoughts that accompany these emotional and sexual resistances. When the individual becomes aware, he is able to take personal responsibility and move on, choosing what he wants (Resnick, 2004). This is also achieved through experiments used in Gestalt therapy. Through experiments, instead of «talking about something», the patient «does something», manages to bring repressed sexual instincts and urges to the surface, and to come in contact with his own unique way of expressing his sexuality (Resnick, 2004). Gestalt therapy also aims to bring the

patient in contact with the subjective experience of pleasure. In other words, to be able to answer questions such as: How do I get pleasure in my life? Is my body a source of pleasure? How do I feel about my body? Do I feel pride and pleasure or shame and embarrassment? Do I have social, family introjects which limit and hinder my pleasure? Do I enjoy the little everyday



things? What makes me feel good? What works? (Zinker, 2000). Through these questions and therapeutic process, the patient can discover small erotic pleasures which focus on sexual fulfillment and empowerment of his sexual life (Resnick, 2004). When working with sexual issues in therapy it is important to let the client talk to us about the difficulties he is facing, to give us all the information about his history of difficulty (When did it start? At what point? How is it experienced? In what context? etc.) and understand the background of his sexual life (Amendt - Lyon, 2013). Issues that can be further explored are in relation to attachment (childhood ties, losses), development and any developmental experiences (toilet training, if he went as a child, how he adjusted to school, menstruation, when it started, nightmares, masturbation, etc.); family patterns that are passed down from generation to generation; religious beliefs in general; the cultural background; the expectations that each family has for the traditional role of each sex and the feelings associated with these expectations, such as shame, guilt. The client's observations - his movements, his somatic awareness, how he breathes - are important so that the therapist can recognize his difficulty and the patient's embarrassment or hesitation in talking about some issues, and to give time and space for specific issues to emerge when the therapeutic relationship is more established and the patient can endure exploration of the subject (Amendt - Lyon, 2013). In working with sexual issues, it is beneficial and helpful for

the therapist to be well read and to be sufficiently aware of the psychological, cultural and somatic factors that influence sexual dysfunction, to know the sexual guideline, and to be able to listen and discuss issues, which can often be extreme and beyond imagination, without shame, criticism and judgment (Amendt - Lyon, 2013).

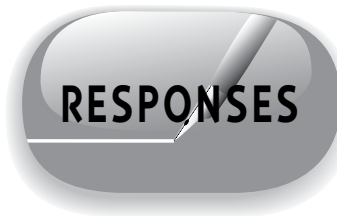
## Epilogue

Based on all the above, we conclude that sexuality is one of the most basic dimensions of human existence, influenced and determined by various psychological, biological, social, cultural factors. In the course of our evolving humanity, there have been different and varied views, thoughts, ideas, and prejudices about the expression of sexuality. What is certain is that no matter how many norms and rules there are, each person experiences their sexuality in their own, unique and personal way. Sexuality is not just about sex and reproduction; it is much more than that. It is our acquaintance and our contact with our body, our senses, our desires, our wants and our needs. It is the way we breathe, move, communicate, meet each other in life. This is how we holistically approach sexual issues. Gestalt therapy does not focus on sexual performance, but on sexual pleasure, and on the transformation of the person into a sexual being, free from introjects, prejudices, and stereotypes that block and prevent a person from caring and respecting himself and his body as well as that of others. Because in order to meet the other, I must first meet myself through awareness!

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**Dimitra Kondochristou**, Third-year trainee - 2020



### **Thoughts about the workshop «The Inter - subjectivity of experience»**

Friday noon. Body-less heads, we sit in front of computer screens.

The workshop is about the

inter-subjectivity of the therapeutic experience and we, wired up, observe our voice and image being transmitted to others through optic fibers and strict, impersonal programming languages, miles away. The computer is an obstacle and a bridge at the same time in our meeting... Sunday afternoon. But isn't that how the therapeutic process works? I sit opposite you, acknowledging and meeting your existence. Initially, barriers, relational patterns, fixed gestalts are the only way to be in this relationship. Slowly, through interaction I reveal myself, you are revealed. We create a relational home that will support emotions, relationship needs and existence itself. And inside this home there is space for change and growth. A big thank you to Despina Balliou and Dimitra Chantziara. They presented us with the rich theory that is not only our roots and foundation as therapists of the Gestalt modality, but also our common meeting place, our identity. At the same time, they stayed with us in our (internet) relationship and shared concerns, feelings and needs. They stood with us on an equal footing, from a position of responsibility and not of power. And I keep this as a personal workshop tale.

The two of us

A deep existential sensation of the human being

A flat screen between us

But no other obstacle

We can be emotional, feel loved or we can hate each other

We can sit next to each other and be staring at the same view

But not with the same point of view

And this perspective brings me closer to you

**Fotini Pantazatou**, Athens graduate, 2017-2018

(\*) *Hydner, R. & Jacobs, L. (2018). Η Θεραπευτική Σχέση ως Ίαση στην Ψυχοθεραπεία Gestalt, (σελ.198). Αθήνα: Εκδόσεις Ι.Σιδέρης.*

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### **A few words about a workshop... important**

A few weeks ago, I attended the workshop «Gender diversity and sexuality: what I know, how I feel and how I stand as a Gestalt mental health professional», with Irini Koutela, Naoum Liotas and Katia Hatzilakou as facilitators. My decision to participate was triggered by a lack of knowledge on the subject of gender diversity and an obligation to feel more aware of issues that are more and more often coming into the therapy room. For those who were not present, I refer here to the content: During the 3 days I had the opportunity to understand the contemporary terms used in discussions about gender, sexual orientation and sexual expression. I explored the stereotypes and introjects that I also «carry» in relation to the above issues and better understood the concepts of homophobia (internalized or not), transphobia and amphiphobia. I realized how many people in society are concerned with diversity (much more

than I thought) and how automatic heteronormativity is, how much space it takes up in my daily life, and how little space is then left for what is different. And how easily it can be pathologologized. I could say that I moved away from some polarizations. I was also able to experiment as a client and as a therapist in what was for me a new territory. I started out feeling a little anxious, awkward and a little «irrelevant». I left connected inside and outside, with a more open outlook on gender issues, with new acquaintances and connections, with appetite and better prepared for therapeutic work on gender issues. The forming of the group was also a very important factor. There was, or rather we created, an atmosphere of great respect and security, a very generous sharing of knowledge and personal experiences, trust and honesty. What we wish for in every healing process. For all this I thank Irini, Katia and Naoum. Even more, I thank the co-participants, for what everyone offered. When not only therapists but also teachers, public service workers and NGOs participate in workshops on diversity (whatever that may be), therapy truly becomes a political endeavor (L. Perls). And we can slowly be called agents of change (P. Lichtenberg).

**Ioanna Kato**, Psychologist, Psychotherapist, Gestalt Supervisor and Trainer

### **Feedback on the workshop «Gender and sexual diversity»**

Recently I attended the workshop entitled «Gender and sexual diversity». After it ended, some thoughts that I want to share are running through my mind. First of all, I believe that this is a theme that should be a key part of psychotherapy education. For me, in addition to knowledge I did not have, it is a responsibility in the event that either a person comes to the office with a request related to the issues discussed, or whether it concerns my public voice as a member of the therapeutic community. Through the excellent presentations, the discussion and the work that was done, I got valuable material that concerns not only the self-determination of each individual in relation to their gender and / or sexuality, but also in relation to this fluidity. And this is an important principle of Gestalt philosophy. My next thought concerns the collaboration between the people who coordinated the three days, Katia Chatzilakou, Irini Koutela and Naoum Liotas, but also the people who attended the workshop. People from different years and levels of education and training, people with more and people with less experience. With emotion I felt, once again, a deep sense of equality, as much from the three facilitators as from those who attended. It is this equality that allowed, in my view, important work to be done. Finally, I am pleased to share with you that this workshop has organized at least one InterVision group (more people have also expressed a desire to self-organize) that aims to continue in supporting each other, but also to keep the interest of these issues high on the agenda. This sense of collectivity was a breath of fresh optimism in this difficult period of pandemic, isolation and individualism.

**Christos Karapiperis**, Social Worker - Gestalt Psychotherapist, President of the Hellenic Association for Gestalt Therapy (HAGT)



## ***The decisive role of LEADERSHIP in the «GESTALT IN BUSINESS & ORGANIZATIONS» approach***

In our Gestalt in Business and Organizations' training program, the introductory course is on leadership. In other words, this is an extremely typical issue in the current era of the pandemic, as leadership in all important areas is emerging as a determining factor for the course of events. It is a fact that valuable leadership emerges much more in times of crisis. Personalities, who in calmer times would not have made their mark, have been written into the history books because they emerged in times of difficulty. But why? Leadership process highlights three key characteristics: power, power management, and influence. All these play a decisive role in difficult times! According to the conventional leadership model, which focuses on the leader's profile, the latter is a guide that everyone follows. Even today, this leadership model is considered by many to be appropriate. However, in the contemporary model of leadership, process is the focus. Without ignoring the importance of power (but based on the exploitation of the leader's assets) and the management of power (not as an end in itself, but with respect for principles and values), special emphasis is placed on the «relational» element of influence. That is, how through contact, interaction and empathy, the leader can influence in a positive direction. Today, the leadership model, also known as «transformational leadership», prevails in Business Administration. For Gestalt, of course, this has always been the model, as Jon E. Frew tells us in his iconic article, «Organizational Leadership Theory Has Arrived: Gestalt Theory Never Left.» According to Sue Congram's model, the modern-day leader combines the heroic element (where he can influence a shift in behaviors), the cooperative element (where he can influence the direction of collective actions) and the value element (where he can lead to a change of attitudes. When, from the

Gestalt perspective, we look at a group, an organization or a large social group, we symbolically use John Porting's so-called «Organic Iceberg», which we divide into three parts. According to this, the upper part of the iceberg, which is located above the sea surface and therefore completely visible, is called «Functional». This includes all the operational data of the organization, such as: organization, operation, procedures, rules, roles, etc., which are known, visible to everyone and therefore we have a clear picture of them. The middle part of the iceberg, just below the surface of the sea, is relatively visible, but it is blurry, cloudy, due to the water, which affects the clear visibility. We call this section «Relational». That is, how the members of the organization relate to each other - with likes and dislikes, with confidence or lack thereof, with security or insecurity, with agreement or with polarized positions and so on. The bottom of the iceberg, which is not visible, as it is located deep under the sea, we call «Value», as it expresses the principles, values and beliefs of the Organization. We realize that from the bottom up, the weight and impact on the life of the body is very great and affects the way the body works. The same is true in a very large organization, such as society. Given that the members of a group, an organization, a society, have opposite tendencies, arising from human nature and our existential needs, such as e.g., need for growth, fear / resistance to the new but also stagnation / consolidated model of behavior, as Guus Klaren has shown us, leadership can significantly influence healthy, creative and authentic mobilization! Group process, change, conflict management, but also diagnosis and intervention at a professional level (which are the other thematic units of our program) further highlight the importance and meaning of leadership for Gestalt in Business and Organizations.

**George Stamatis**, *Coordinator of the Gestalt Coaching in Business and Organizations Program*

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