



# Gestalt NEWS Foundation

BIANNUAL INFORMATION & COMMUNICATION NEWSLETTER OF GESTALT FOUNDATION PSYCHOTHERAPY & TRAINING CENTER  
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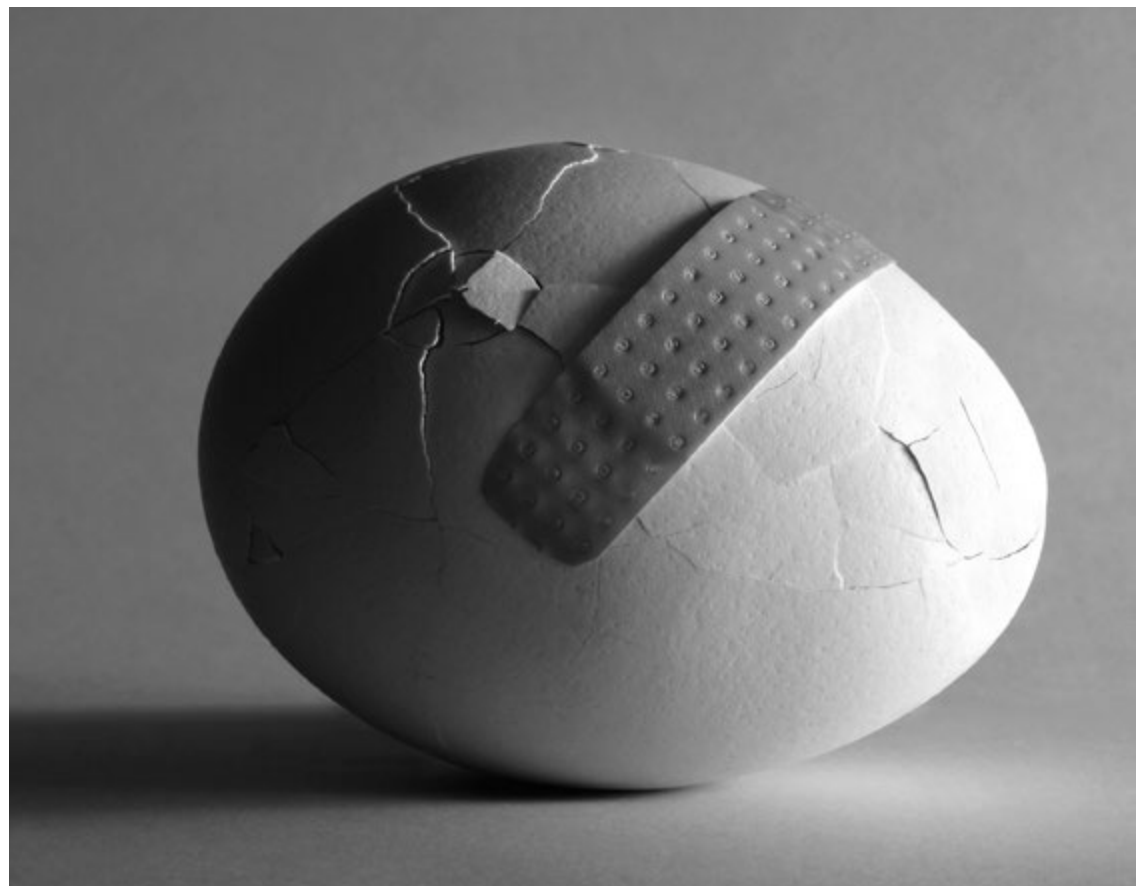
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By studying concepts such as awareness, contact and barriers to contact, id, ego personality and phenomenology, the therapist is taught how to manage the first encounter with the client (history) and how to develop a diagnosis according to Gestalt therapy.

It is important for the therapist to understand that in Gestalt therapy, the diagnosis is dynamic and process-oriented and its purpose is not to label the client, but to facilitate awareness and the development of the therapy.

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The 34th issue of our newsletter finds us almost 24 months «trapped» in a pandemic that has radically changed and affected the lives of us all. I think we have never, at least for as many years I can remember, ever applied the concept of «creative adjustment» to such an extent in every area of our daily lives. Health, education, religion, friendship. People have been lost, relationships tested, families divided but also new perspectives and possibilities have appeared. As the pandemic slowly recedes into the background, (and I sincerely wish from the bottom of my heart that it ceases to be a figure in our daily lives as soon as possible), the time has come to take stock of this whole process and to reassess «values» in each of our lives. A big thank you to the unwavering presence of everyone in the

voluntary activities of our Center with programs that started as a result of the pandemic and the disasters that have occurred during these last months (earthquakes in Larissa, fires in Evia) but also those which have been going on steadily for so many years now.

... «May God keep us strong... to meet again» and why not «rejoice» in the excitement of meeting!

### Katia Hatzilakou



M.Sc. Social and Clinical Psychology, Gestalt Psychotherapist, Trainer and Supervisor, member of EAGT (Ex-Chair of NOGT and External Relation of EAGT). Holder of ECP (European Certificate of Psychotherapy). Founder Member of the Gestalt Foundation, psychotherapy and training centre. Founder member of HAGT (Hellenic Association for Gestalt Therapy)

## «Safe together»

As part of its social and voluntary action and recognizing the need to support our fellow human beings who were affected by the earthquake in the region of Thessaly, in March 2021, the Gestalt Foundation Psychotherapy and Training Center in Thessaloniki organized and provided free short-term psychological support and counseling to our fellow human beings.

The initiative provided for adults (over 18 years old), who were living in the region of Thessaly (Municipalities of Karditsa, Larissa, Magnesia, Sporades, Trikala) and had been affected by the earthquake.

6 beneficiaries and 5 Gestalt psychotherapists participated in the program. The majority of people who took part and received psychological support showed mainly psychosomatic symptoms such as tachycardia, mild anxiety, profuse sweating, difficulty sleeping, etc. Most of them had a low level of education and the age



range was wide. The fear of the earthquake seemed to trigger a variety of issues in these people.

We provided four 1 hour online sessions for each person seeking help.

The aim of the program was the psychological support and counseling of people who experienced the earthquake in a way that «shook» them metaphorically and literally.

In such critical and unpredictable living conditions «fear is overcome only by action, there is no other way...» (Jorge Boukai).

So we, too, felt that we helped to overcome the fear of the earthquake, and everything that can emerge, with the action of «Safe Together».

The therapists who provided their services were: **Kelly Agorostou,**

**Apostolia Xiromeristou, Leftheris Siakis, Tonia Sklavou, Margarita Tartabouka**

## BEST SELLERS 2022

ΛΟΓΟΤΕΧΝΙΑ



ΖΥΡΑΝΝΑ ΖΑΤΕΛΗ  
ΟΡΑΤΗ ΣΑΝ ΑΟΡΑΤΗ



ΙΣΙΔΩΡΟΣ ΖΟΥΡΓΟΣ  
ΠΕΡΙ ΤΗΣ ΕΑΥΤΟΥ ΨΥΧΗΣ



MONICA GUTIERREZ  
ΤΟ ΒΙΒΛΙΟΛΕΙΟ  
ΤΩΝ ΜΙΚΡΩΝ ΘΥΜΑΤΩΝ



ΟCEAN VUONG  
ΣΤΗ ΓΗ ΕΙΜΑΣΤΕ  
ΠΡΟΣΚΑΙΡΑ  
ΥΠΕΡΟΧΟΙ

ΜΕΛΕΤΕΣ



ΣΤΕΦΑΝΟΣ ΞΕΝΑΚΗΣ  
ΤΟ ΔΩΡΟ



ΑΛΕΞΗΣ ΠΑΠΑΧΕΛΑΣ  
ΕΝΑ ΣΚΟΤΕΙΝΟ ΔΩΜΑΤΙΟ  
1967-1974



MARK MANSON  
Η ΕΥΓΕΝΗΣ ΤΕΧΝΗ  
ΤΟΥ ΝΑ ΤΑ ΓΡΑΦΕΙΣ  
ΟΛΑ ΣΤΑ ...!



ΘΕΟΔΩΡΟΣ ΠΑΠΑΚΩΣΤΑΣ  
ΧΩΡΑΙΕΙ ΟΛΗ Η  
ΑΡΧΑΙΟΤΗΤΑ ΣΤΟ  
ΑΣΑΝΣΕΡ;



KLAUS SCHWAB &  
THIERRY MALLERET  
Η ΜΕΓΑΛΗ ΕΤΑΝΕΚΚΙΝΗΣΗ



THOMAS ERIKSON  
ΑΝΑΜΕΣΑ ΣΕ ΗΛΙΘΙΟΥΣ



Α. ΦΕΙΜΠΕΡ & ΙΑ. ΜΑΖΙΣ  
ΠΙΟΣ ΝΑ ΜΙΑΛΕΤΕ  
ΣΤΑ ΠΑΙΔΙΑ ΟΣΤΕ  
ΝΑ ΣΑΣ ΑΚΟΥΝ



ΕΚΤΟΡ ΓΚΑΡΘΙΑ &  
ΦΡΑΝΣΕΣΚ ΜΙΡΑΛΛΕΣ  
ΙΚΙΓΚΑΙ

# ΙΑΝΟΣ

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## «e-therapy» by Gestalt Foundation

*Online social service and volunteering program*

### 3rd year for «e-therapy»

The Free Psychological Support and Counseling Program «e-therapy» is now a core factor in the Gestalt Foundation's social responsibility and volunteering activities.

This is a voluntary program of action that was activated shortly after the onset of the health crisis caused by the pandemic around the world, with the aim of responding to the massive need for psychological support.

For the 3rd consecutive year, extending this program was considered extremely important and the Gestalt Foundation decided to support it by reactivating 4 supervisory teams and 35 therapists for the period 2021-2022.

Through this program, since its inception (March 2020) until today, more than 520 of our fellow human beings have found the support and care they needed to cope with any difficulties they had to experience due to the unprecedented pandemic, following a series of specific numbers. sessions, online, with their mental health counselor / psychotherapist and Gestalt Foundation associate.

The requests for participation in the program are still arriving on our page today!

<https://www.facebook.com/gestalt.therapy.by.GF/>

Finally, it is also important to highlight the voluntary contribution of more than 110 supervisors, therapists and trainee therapists who have been active, and continue to provide their services.



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!

**Nikolas Raptis**, Gestalt Foundation Mental Health Counselor and Program Organizer

## Collaboration of Gestalt Foundation with «Alma Zois» of Thessaloniki

*With special joy and honor in October 2021 a new placement program for students of the Gestalt Foundation started in collaboration with the 'Alma Zois' of Thessaloniki.*



The Association of Women with Breast Cancer «Leap of Life» of Thessaloniki is a Non-Profit Association founded in 2008 by women who had experienced breast cancer, from the initiative of the Panhellenic Association of Women with Breast Cancer "Alma Zois" established in Athens. The

purpose of the Association is to provide organized mutual aid, psycho-social support and counseling for both the suffering women and the members of their families. In addition, it contributes to the demystification of cancer and to informing the female population about the prevention and early diagnosis of the disease.

What distinguishes the Association is the fact that its members are all only women with experience in breast cancer. The need to establish the Association was exclusively to support these women, as well as women suffering from metastatic breast cancer and their families. Thus, in supporting the organization and women, the need for cooperation with the Gestalt Foundation was created. The common denominator was one: Support.

The first two groups created were one with a central theme of breathing and movement and the second with theatrical interaction. The teams were held online and the participation was very satisfying given the difficult times we are going through. The teams were created with love and attention to such a sensitive group of women, who need help and support more than ever. Through group dynamics, experiential exercises, contact with the body and play, women either at the beginning of the diagnosis, or who had have their cancer come back, or even those who have recovered and left the experience of cancer behind them, are receiving therapy now, meeting with trainee therapists of the Center to experience together concepts such as creative adjustment, acceptance, awareness and the power of «here and now».

Here's to a strong beginning and even stronger continuation!

**Despoina Partsia** is an accredited Gestalt Psychotherapist, Social Worker and Scientific Director of the 'Alma Zois' program in Thessaloniki. She trains mental health professionals in psycho-social support for cancer victims and she is a member of EAGT and HAGT.



**«Thoughts while observing Alzheimer's caregivers» by Katerina Liakou**

Hi Katerina! I am writing to you because I am thinking of you. I am writing to you to remind you of the path you have been following from April 2 until today. It was your first day of observation during quarantine. You had the pleasure and the honor to attend five meetings with the Alzheimer caregivers' team. You were moved, you were shocked the first time, remember? These people, without knowing you, without seeing you and hearing you because of the poor internet connection, allowed you to be there, to hear their pain, to see their tears, to feel their despair. How many times have you not imagined being a fly on the wall, to see what it would be like ...? Wasn't it an unprecedented feeling? So you were given the opportunity to become a cyberfly! You participated in five meetings until the opening of



the institutes and your return to everyday life. They coincided with many changes in your life. These meetings worked symbolically, they were a key point in your path. Until now you have been the receiver of therapy, you know this role well. These five encounters mark the gradual transition to the role of therapist. But before you get there you had a lot of work. The role of observer provided you with rich nourishment. You followed the process of the group members and the therapist Katerina. Important points that stood out: 1. Patients with dementia are sick. Whatever they do, they do not do it themselves, the disease does it. 2. Caregivers, in order to provide care, learn self-care at the same time. 3. Caregivers forget to ask for help. Instead, they can ask questions and find support and understanding. 4. Often, they may treat their patients the way their parents treated them when they were children. The illness of their relatives can serve as a starting point for their own personal search. Beyond that, each course is unique. Coping is a personal matter. The needs and views of caregivers have much in common, but generalization is a trap that leads to a dead end. Words can distract from the conversation. Content is not enough. The

presence of the person is declared in other ways. To observe movements, expressions, the tone of voice. Return to your senses, to your body. Pause to feel, silences are essential. Feelings come to you, your own memories and thoughts. Recognize them, permit them, but put them aside. Do you remember the story with the six blind people in the first meeting, who had to move to make sense? Are you moving? What are you thinking? Emotions will come, because you are alive. But if you live only in your own experience, you lose the other. Do you remember the spoons in the second meeting? It is like trying to feed yourself and it is impossible. Share genuinely, authentically, and you will be in that white room of mutual nourishment. This is how it happened in the last meeting. You had in mind one member, Katerina. You were influenced, you identified. You got anxious. You almost

entered the black room. The anger at the therapist Katerina came, do you remember? Was it accidental? ... - Well, that's enough, calm down! After all, you are me! We are in Gestalt. I am who I am. I recognize myself, I watch, I flow. At the moment I am in the triangle of Katerinas: Katerina in therapy, Katerina as an observer and Katerina as a therapist.

Three sides of the elephant, all mine. I'm playing with them right now and I'm enjoying it. Experiment. I'm really in a creative transition. On the turn of the road. This space-time of supervision, this white room of spoons, gave me momentum, will, strength. Melina, you offered me a lot of care, you included me with concern and inspiration, thank you very much. Members of the team welcomed me warmly, I learned from you and you entrusted me with the baton. Thank you. Members of the care team, I wish I could show you how grateful I am. Katerina being healed, I hear you, I feel you, I see you and I observe you. I was lucky to meet you. Through you a dark spot emerged in me. I can take care of it and put it aside ... I can leave it ... Be well. Katerina therapist, thank you for your knowledge, for your examples, for your experimentation and dynamism and ... calm down! ... I'm coming to you! Finally, Katerina the observer, ... with openness ... thank you.

**Katerina Liakou**, 3rd year trainee, Gestalt Mental Health Counseling, Thessaloniki.


**RESPONSES**
***Shall I tell you what a Gestalt Four Day Psychotherapy Residential is like?***

For me, Four Days of Gestalt psychotherapy is the most important thing I have done in my life and I'm telling you this exactly 20 years since the first time I went ...

The four-day period starts long before I go, the whole preparation has a flavor of sharing closeness and love. Days before, with the training team, I prepare the presentations, videos, texts that will be presented in front of trainees, trainers, psychotherapists and many others. The day before I leave for the four days I do not want to work, because my thoughts are there, with the people I will meet in the four days. The day before, I prepare all the technical equipment to record the magic of what it is like to experience these four-days ...

And Thursday comes with the journey to Volos, which in recent years has become the venue for the 4 day residential. I arrive with my colleagues at the Valis Hotel. I say to myself here we are, and I mean here we are as a whole, because «the whole is greater than the sum

of its parts» ... Because Valis is not a luxury hotel for me, it is the people, not just the people, the meeting with people, the process of simplicity that co-creates us ...

And I enter the entrance of the hotel where I am always welcomed by two big eyes with a big smile from Christina who is there once again. The last time she told me to tidy up first,

I chose to leave my things at the entrance and go straight to the conference room and when they asked me if I had anything brilliant, my answer was that brilliance is inside and I meant people! And I enter the room and sit back in the dark discreetly respecting the presentation, when something happens and there is a short pause and my name is heard ... Do you know what it is like to suddenly start being greeted, hugged me and kissed I have never felt so much concentrated joy, emotion and love, with people I haven't seen for a year, or even more years. Because in Gestalt, when you meet the other, share your truth and stay with it, the connection is not lost ...

And it's time to get in the first group. It's a little awkward since the

theme is about abuse. I had never thought before that my own abuse would be the issue of others, I had not thought that there are people who will «embrace» ... But in a Gestalt process I learned to come as I am and to meet you, and to leave as a whole I, no I do not mean as perfect, but whole, embracing me as I am authentically, as when I was a child and with the time they quarreled because I painted on the wall of the house, so ... in the four days they do not argue with me and do not judge me, they can sooth my trauma, and they accept me with it ... and so I learn to accept myself, not like us they wanted, not as they thought I should be, but as I am and as you are. Do you know how difficult it is to be what you are and not what you're supposed to be? Every four days I have the feeling that many people are here and now, people who feel me and I trust and connect with them ... because I cannot exist without You because life is others and life is when others touch you and why when people are deeply connected they enter into a relationship even if they do not know each other ... Is it not magical? It may be, but this is the 4 Day Gestalt Psychotherapy Residential!

A four-day experience has many processes each with its own meaning as Katia would say. Fun and joy are not absent, such as the plenary session, the Gala, the dance, the movement, the closing and many



more are integral parts, which I would like many pages to share, although the best way to understand these four days is to experience them up close!

Every time a four-day period ends, I continue to be connected for several days after ... because every four-day period gives me the opportunity to evolve and take care of my inner self in relation to people!

I dedicate this to the creators of the four-day Gestalt psychotherapy residential, to the people who came, are coming now and to those who will come!

**Ioanna Goutzioti**, Gestalt Psychotherapist

## 23rd 4-Day Gestalt Gathering

My name is Katia and I am embracing the whole Gestalt family online. The theme of the conference is phenomenology and I'm sure we will all enjoy it together even if I don't get along very well with the internet; I know about creative adjustment.

My name is Kostas and after the opening ceremony I get to know for the first time the first year cohort from Thessaloniki. Inspired by a story by Kazantzakis, I present the first exercise to them and they enjoy it very much. Then I proceed with psychological work with two trainees where I present the phenomenological way of working. In the feedback that followed at the end of the excellent seminar, I hear, among other things, that they really like the tone of my voice.

I am Anta and through various role playing I show the phenomenological work in psychotherapy but also various wrong interactions that the therapist can enter if they are not careful. When it's my turn to play the client, I literally disguise myself, sometimes



I wear a sweater and sometimes a bathrobe, sometimes a glass and sometimes a flower, but I always offer material so that the trainee can gauge their boundaries.

My name is George and I have a multidimensional role. I have some very interesting seminars where I will proceed to a phenomenological exploration of empathy. But at the same time, I have to organize an online Gala, so that we can all have a good time, even from a distance. Of course, there I dance non-stop with colleagues and trainees - and with their children.

I am the other little room of the Gala; here come those who want to talk. I have a good time in my own way. I hear about the different parts of Athens, about diseases that were conquered, while a girl is playing the piano at the same time.

I am the zoom and I thought it would be very difficult to conduct the conference, but I was wrong. In all my boxes there are smiling faces full of active interest. And who, after all, is this Harry who organizes everything with such mastery? Well done.

I am the work of the all the training groups. They present me for two days, but I am written in such an original and different way that I hold everyone's interest and at the same time I keep my educational value.

I really appreciate the feedback that the trainers give at the end of each of my presentations. It is so to the point that I understand they all have their attention focused on me.

My name is Dimitris and I have a great time. In every work presentation, I find someone that I have met in a seminar and I automatically become his group. I did not realize it but they are now my people. I get excited and find the conference as you can already understand ... dreamy!

**Dimitris Papadopoulos,, 1st Year trainee, Thessaloniki.**



## Φαινομενολογική Συνάντηση

Είμαι ό,τι φαίνομαι!  
 Φαίνομαι ό,τι Είμαι;  
 Είμαι ό,τι βιώνω!  
 Βιώνω ό,τι Είμαι;  
 Τι φαίνεται από μένα;  
 Τι φαίνεται από σένα;  
 Τι βλέπει το βλέμμα;  
 Τι αγγίζει το δέρμα;  
 Τι σφραίνεται η μύτη;  
 Τι γεύεται το στόμα;  
 Τι ακούν τα αυτιά;  
 Πόσες συνάψεις τα μυαλά;  
 Πόσα μηνύματα κρυφά;  
 Nous, συναίσθημα και σώμα  
 Με συνείδηση και μη, όλα μπλέκονται μαζί,  
 σε εμπειρία φαινομενολογική!



Στο πεδίο απλώνεται,  
απ' το πεδίο διαμορφώνεται.  
Όλα κινούνται σε χορό,  
κι εγώ παρατηρώ και δρω.  
Καθώς έρχεσαι κι εσύ,  
νέα φτιάχνουμε μορφή.  
Η συνάντηση, μη σταθερή,  
αλλάζει διαρκώς η επαφή.  
Άλλωστε και το σύμπαν «πάντα ρεΐ»!  
Σε βλέπω, σε παρατηρώ,  
έχεις αλλάξει στο λεπτό.  
Με βλέπεις, με παρατηρείς  
έσβησε η σπίθα της στιγμής.  
Η γνώση μου περιορισμένη.  
Το σώμα μου μιλά.  
Υπάρχουν μηνύματα, τα σιωπηλά,  
που είναι άγνωστα, θολά.  
Το άγνωστο δε θα φανεί.  
Το γνωστό θα εκδηλωθεί.  
Τι θα νοηματοδοτηθεί;  
Μυστήριο που θα το πει η στιγμή.

Και η δική μας εμπειρία  
μόνο στο τώρα έχει σημασία.  
Δομή, όλον και ροή.  
Είμαι και γίνομαι στην επαφή.  
Πώς θα ζήσω τελικά;  
Πως θα συναντηθώ ξανά;  
Δεν γνωρίζω καθαρά.  
Άλλωστε, αλλάζω, κάθε τώρα,  
από το περιβάλλον και την ώρα.  
Δυνατό παιχνίδι η ζωή.  
Πώς θα ζήσω, δική μου επιλογή!

**Thomas Demka, April 2021**

*This poem is a part of the group presentation of the 2nd year of training in Larisa entitled "The body never lies" \* of Alice Miller that was presented in the 23rd Workshop*



Continued from page 1

## TRAINEES' ESSAYS



### **Historical Background**

In the years between 1930-1950, the influences from the philosophical currents of existentialism and phenomenology, as well as the rapid socio-political,

economic developments and their effects on life, paved the way for a new view of human existence. In the field of psychology, the views expressed by Abraham Maslow, Carl Rogers, Frederic Perls and others, in looking for ways to include part of their philosophical thinking in their therapeutic practice, were so catalytic that in the process the important differences with the psychoanalytic tradition and psychoanalytic assumption became apparent.

As a result, a broad and autonomous therapeutic movement began to emerge which was later named «Humanistic Psychology». The term humanities was coined by Maslow to describe a viewpoint that emphasizes the creative potential of humans and aims to assist them in realizing their full potential. This movement also became known as the «Third Force» in psychology, developing as an alternative to the other two theoretical approaches that dominated at the time, psychoanalysis and behaviorism.

The humanitarian current gave birth to new approaches, such as Person-Centered, Existential Psychology and Gestalt therapy, where the human being was placed at the center of their attention. In contrast to the traditional practice until then, where the prevailing view was that the therapist held the position of authority, imparting his wisdom to the patient (Yontef 1993), the theoretical background of humanitarian approaches created conditions of alliance and equality in the therapeutic relationship between therapist and patient.

All of this has resulted in extensive discussions about the meaning and justification of diagnostic practices in the process of psychotherapy during the evolution of humanitarian approaches and Gestalt therapy (Fuhr, 2000). According to Yontef, in the diagnostic model until then, there was an already predetermined lack of faith in the individual's ability to select, develop and recognize his personal condition. The patient's experience was not respected as he did not have direct access to the subconscious meaning that only the therapist as a theorist could explain (1993). In this way, the extensive diagnostic stage was part of a linear, hierarchical system in which dialogue and the patient's actual immediate experience were subordinate to theory, diagnosis, and authority. Given the above, in the context of the humanitarian movement, there was opposition to the explanation, categorization and pathologicalization (Nevis, 2007) with the result that, within the Gestalt movement, an anti-diagnostic approach to mental health in therapeutic practice prevailed; the imposition of the medical model was viewed as inappropriate. (Fuhr, 2000).

As Yontef observes, sometimes progress requires moving from one end to the other before a position is found in the middle mode. The absolute rejection of the diagnosis by the early Gestaltists was one such case of resistance, and Yontef stressed the need for the modern Gestaltist to abandon this original bias as it runs the risk of overlooking the valid aspects of a diagnostic approach, thus becoming the target of negative criticism and devaluation (1993). As a result of the above thoughts and in the search for an intermediate

# DIAGN



position, there is a stream of new modern theoretical Gestalt therapists, who have incorporated diagnostic practice and therapeutic planning skills while maintaining the principles and process of Gestalt therapy (Giamarelou, Diplas, Konstantinidou, Balliou, Hatzilakou, 2011). Yontef goes on to say that in fact a good diagnosis is an integral and necessary part of Gestalt therapy (1993).

### **Definition of Diagnosis**

As we have seen, although many of the original arguments against the then established diagnostic practice were justified, in redefining it, we can see that in reality, as human beings, we cannot fail to diagnose or at least make an evaluation. Our way of making sense



# NOSIS



can be seen as an ongoing diagnosis. We meet, observe and try to understand all the time. We organize our every experience; we give it a name and an essential structure. So, since we cannot actually avoid it, the choice is whether to do it involuntarily and carelessly or in a targeted and fully aware way (Yontef, 1993). What is needed, from the position of the therapist, is to do it taking into account the benefit of our client and to have constant contact with our own processes in shaping the diagnosis (Roubal, Gecele & Francesetti, 2013).

Etymologically, the word diagnosis comes from the compound ancient Greek verb διαγιγνώσκω, which means I know through. As Roubal mentions, the question that arises is through which path I

will get to know and discern (2013).

The most established and typical model of diagnosis comes from the field of psychiatry. The clinical model, which essentially takes into account empirical studies and their statistical analyzes, summarizes the observed symptoms, groups them and concludes a diagnosis. The most common systems among them are the International Statistical Classification of Diseases and Related Health Problems (ICD) and the Diagnostic and Statistical Manual of Mental Disorders (DSM).

On the other hand, according to the humanitarian tradition of Gestalt, diagnosis is approached not as a fixed system of boxes in which we put the clients, but as a system of data and indications that help the therapist to constantly orient himself and create a useful map during therapeutic process.

In this way, Edwin Nevis (2000) defines diagnosis as first and foremost a descriptive statement that formulates what we observe in the present but also that goes beyond the present implying a pattern but also a prediction even in a minimal degree. The diagnosis may or may not include a concept of causality. Thus, when we make a diagnosis we try to enlarge the image and go beyond what is observable, to what is difficult to see (Nevis, 2000).

The difference in vision is obvious however, when a therapist meets a client; he comes in contact with a huge amount of complex information. To process it, we need filters and concepts that help organize the information in a meaningful way that is necessary to identify realistic therapeutic goals and processes. What is important is that Gestalt therapists not only stay focused on observing the current interaction but are also able to make functional assumptions (Mackewn, 1999)

### ***Perspectives on Focus during the Diagnostic Procedure***

What we see depends on the point from which we observe. By adopting different focus perspectives, therapists create different maps for the same therapeutic case that help them organize and make sense of the information they receive from the client. This helps them find ways to support healthy contact and by extension the healing process.

Roubal (2013) emphasizes the need for Gestalt therapists to learn to use and combine different diagnostic perspectives and proposes a model that describes three focus perspectives. The first, which is a specific contribution of Gestalt therapy to the field of psychotherapy, is called the co-creation perspective, which refers to what the therapist observes emerging from the relationship in the here and now. The second perspective as the context perspective, where he observes the interactions and roles through the client's relational system, and the third perspective is called the symptom perspective where the therapist observes possible clinical symptoms.

By flexibly changing the perspective from which Gestalt therapists observe their clients' process during therapy, they can formulate a multidimensional diagnosis. In order to be able to get the most benefit from the different perspectives, therapists need to recognize through which perspective they are diagnosing in any given moment. It is also important not to approach the perspective in a hierarchical way; that is, as one being more important or better than

the other. The perspectives do not compete with each other but rather complement each other, in order to form a multidimensional diagnosis that reliably guides the therapist (Roubal, et al, 2013). Below is a reference to the perspective of symptoms suggested by Roubal (2013), as well as the benefits offered to gestalt therapists by switching focus during the diagnostic process.

### ***The Perspective of Symptoms***

From this perspective, therapists consciously focus on observing the symptoms. That is, they observe the structure of the individual characteristics of the client, what reasons caused or contributed to the appearance of the symptoms and how they developed. Here they can apply the knowledge offered by the medical model of clinical psychopathology.

As we saw earlier, the Diagnostic and Statistical Manual of Mental Disorders (DSM) published by the American Psychiatric Association is a lens through which mental distress is perceived and it frames the clinical diagnostic model. It focuses only on mental disorders and aims to classify and specify their symptoms, in order to facilitate communication between mental health professionals and other related bodies. The manual has been in publication for about 60 years and since then there have been several revisions. It is widely used as a diagnostic tool both worldwide and in Greece.

The DSM-IV suggested that each diagnosis refers to at least five axes, that is, to describe the patient's difficulties in relation to five different factors. The first two of them were the main diagnosis of mental problems, the other three provide secondary but important information (Giaglis, personal communication, 2018).

Briefly, Axis 1 refers to clinical disorders e.g. mood disorders, anxiety in addition to personality disorders and mental retardation.

Axis II to personality disorders such as e.g. schizophrenic, antisocial, narcissistic and in cases of mental retardation.

Axis III to general medical conditions that may be associated with the mental disorder e.g. hypothyroidism, arrhythmias, diabetes.

Axis IV to psychosocial and environmental problems, which can affect the diagnosis, prognosis and treatment of mental disorders, i.e. life events such as illness, divorce, abuse.

Axis V, in the global assessment of functionality assesses psychological, social and occupational functionality with the GAF scale, 1-100.

Based on the DSM-IV, the patient in each axis up to III, could receive more than one diagnosis or none at all.

The DSM-V abolished the multi-axes diagnostic system (although the clinical significance of the axes of the previous versions was not in question) and uses an axis-free diagnostic system, effectively combining the axis III and the axes I and II diagnoses. Behind this decision there is an effort not to distinguish mental disorders from physical, biological and genetic factors but to highlight their correlation (Giaglis, personal communication, 2018).

In addition to Roubal (2013), who proposes the inclusion of the symptom perspective, Joseph Melnick and Sonia Nevis (1997) argue that there are compelling reasons why Gestalt therapists need to include in their diagnostic practice a more systematic and stan-

dard method such as the DSM. These reasons are listed below.

First, the diagnosis provides a map and describes the probabilities of how a person can develop. Therefore, the therapist benefits from the structure that functions as a compass to help organize information but also provides clues as to which direction to move in the vast field of data.

Second, the diagnostic process allows therapists to control their anxiety. By removing himself from the data, the therapist can remain calm as he waits for a form to emerge.

Third, another reason to diagnose in a more formal way is a matter of economics.

Linking Gestalt theory to other diagnostic systems opens up a huge



amount of research and theory for the therapist. In addition, it is more effective as the therapist can make predictions without having to wait each time for the data to emerge from direct experience. Fourth, it offers support for a broader perspective that includes the future and especially the past. Although Gestalt therapists explore the past, this type of examination is of a different nature.

Finally, it prevents the Gestalt therapist from being isolated from others with a different theoretical orientation. Although the use of diagnostic categories may not be completely consistent with our theory, in our communication with others we use clinical diagnostic descriptions, such as schizophrenia and narcissism.

From the above, we can conclude that it is useful for the Gestalt therapist to be able to deliberately focus on aspects of the therapeutic condition that are observable and to be able to make use of the clinical model whenever necessary. One of these cases is the first interview with a client. By using the clinical model, the therapist can obtain a clear and distinct image of the client. Here, he can consciously focus on observing the symptoms, make decisions regarding the management of each case, recognize the evolutionary stages of the problem and organize his treatment plan (Melnick & Nevis 1997).

### ***Diagnosis under the Prism of Gestalt Therapy***

As mentioned earlier, the clinical perspective of diagnosis is a way for Gestalt therapists to enrich their background and ensure professionalism. But beyond that, it has other tools that can be used in the diagnostic process through the theoretical and philosophical structure of Gestalt.

Based on the humanitarian background as well as the meta-theoretical propositions of Gestalt psychotherapy, Fuhr, Sreckovic and Gremmler-Fuhr (2000) defined four axioms / principles that can guide the therapist in the diagnostic process.

The first axiom states that individuals are considered a whole, a unit of body-soul-spirit which is integral to their environmental field and as such must be approached at diagnosis. This contrasts with the diagnostic way of categorizing, which isolates aspects of the individual and separates him from his environment.

The second refers to the continuous and cyclical interaction of the organism-environment, including the therapist, an axiom on which the evaluation must be based. Through this interaction, the therapist can identify the client's patterns that have been consolidated and which cause discomfort for himself and his environment.

The third axiom concerns the focus on the experience of the here and now, where the past and the future can intervene but without the focus changing.

Finally, the fourth axiom concerns the fact that during therapy everything happens through dialogue. Any observation or evaluation must be immediately understandable and validated by the patient, who is equally involved in drawing a conclusion. Roubal (2013) incorporates this principle in the perspective of co-creation.

Taking these as data, we consider that in the process of diagnosis, the Gestalt therapist must, through the phenomenological observation of the client's contact functions, evaluate the process of formation and deconstruction of figures through the cycle of awareness, self-function and sources of support of the person. Therapists also needs to observe contact style, characteristic polarities, unfinished business as well as fixed gestalts as repetitive patterns of interaction with the environment. (Zinker, 1978; Mackewn, 1997; Giamarelou et al, 2011)

In the following, we will refer in more detail to the specific theoretical parameters that are observed during the diagnosis.

### **Observations on Contact Functions.**

Delisle (1999) emphasizes the importance of sensory observation as a key diagnostic tool for a therapist. During the session, the therapist concentrates all his attention on observation of the patient, knowing that the reason for his visit will somehow become apparent in the here and now.

Through vision the therapist observes the way the patient makes eye contact, gathers information indicative of emotion, boundaries (closed / open), information about contact and awareness, barriers to contact, issues of trust and distrust, current situation (e.g. in crisis) etc.

Through listening, the therapist observes the way in which the patient communicates verbally, such as the volume of his voice, the speed of his speech, the clarity that is indicative of his cognitive functions. But also the way the patient listens is an indication of his stress levels, obstacles to contact (e.g. reflection) etc.

Through touch the therapist can observe the relationship of the patient with his body, boundary issues and self-care, if he/she reflects etc.

Through smell and taste, emotions can be observed, mood, boundary issues, substance issues (alcohol, smoking) and by extension

self-care issues.

Also, the way in which the patient breathes and moves are elements that reveal important information about the self-support system and are indicative of his self-image and self-esteem (Delisle, 1999).

### **Observations on Support Systems**

The individual's support system refers to his internal and external sources of support. As internal we mean his cognitive system, i.e. the good organization and storage of previous experience and his biological system, i.e. the way he breathes, is supported by his body, etc.

As external sources of support we mean individuals social network, close relationships, interests, work or pursuits from which they derive pleasure. All of this is directly related to the individual's interpersonal and interpersonal skills. In other words, the ability to recognize one's needs, to use previous experience to one's advantage, to successfully manage stress or arousal, to use existing social networks when help is needed etc.

The evaluation of these parameters should be done in the diagnosis since it affects the depth of therapy but also because therapy is an attempt to move towards support.

### **Observations on the Formation of Figures and the Cycle of Awareness**

The process of formation and destruction of figures marks for Gestalt therapy the existence of or lack of health, depending on the clarity of emerging figures, the ability to focus and evaluate, satisfaction, and their withdrawal in the background.

The cycle of awareness (senses, awareness, energy mobilization, action, contact, satisfaction, withdrawal) reflects the above process. So we observe how the individual moves in the cycle to understand how he has organized his personality (Yontef, 1993). Healthy operation involves relatively easy movement in the individual phases, i.e. without either excessive blocking or excessive speed. The malfunction is expressed either by staying unnecessarily stuck or by a repetitive and very fast movement throughout the cycle, which leads to a lack of completion and satisfaction. A dysfunction in one stage of the cycle affects the other stages as well. Diagnosing the break point of the cycle is important since if we intervene at a later stage, although there may be some success, its character cannot be substantially affected. Also, the valid location of the break point is sufficient to formulate therapeutic strategies and interventions (Nevis, 2007).

### **Comments on Contact Style**

Obstacles to contact, or defense mechanisms, are the mechanisms that the individual uses to keep the half-finished situations present, thus depriving the satisfaction of his needs and preventing good contact with the environment. In other words, they are disorders of the contact boundary and are expressed in the following ways: Through Introjection, where the person absorbs elements of the environment without assimilating them and thus does not accept the

stimulation he feels. Through Confluence, where the person does not recognize the boundary between himself and the environment and thus does not make contact with excitation or stimulus. Through Retroflexion, where the person focuses the actions he would like to do to others on himself, thus avoiding conflict with the environment. Through Projection where the person attributes to others an emotion / behavior which belongs to himself, thus avoiding contact with both himself and others. Through Deflection the person avoids contact with maneuvers, as well as with egoism which eliminates the contact boundary, and with meaningful interaction. Finally, through desensitization where the individual focuses awareness away from the senses (Giamarelou et al, 2011). It should be emphasized here that care must be taken by the therapist during the diagnosis and treatment planning process as, very often, these mechanisms function either as acts of self-regulation, adjustment and survival in difficult environments, or as healthy choices in the service of the organization.

### **Observations on Polarities and Unfinished Business**

Polarization concerns the opposing sides, the opposing forces that exist inside and outside of us. The person in a state of equilibrium is at a point of creative indifference and, depending on the respective condition, manifests the most appropriate of the opposite qualities that exist within him. If someone is trapped in one of these opposite forces / poles, he acquires a one-sided view and his life loses its balance. It acquires blind spots that are eliminated from consciousness, and as they increase, the more inflexible the self-image becomes. The sense of integrity is lost and the individual is limited to stereotypical attitudes and behaviors that evoke stress (Giamarelou et al, 2011). That is why the diagnosis of polarities is important in order to be able to integrate them. Locating unfinished business through diagnosis is just as important when it comes to substitute experiences, that is, needs that have not been met and emotions that have not been expressed. Unfinished business demands the solution and is constantly pushing for completion. In the case that they it is excluded from the consciousness, it affects the whole system of the individual, that is, his physical and emotional functions, resulting in the development of neuroses (Perls in Giamarelou et al, 2011).

### **Observations on Self-Function**

Diagnosis in Gestalt therapy can draw important information from

the model of the self and its functions, the theory of the self. The function of the self concerns the system of contacts of the organism at all times; it is flexible and varies depending on the dominant organic needs and the intensity of the stimuli from the environment. It is not a fixed and unchanging structure but a dynamic and constantly evolving function where the self is experienced each time as a current possibility based on the organizational self-regulation and the system of creative adjustments in the field. The self has three sub-functions, the «id» which concerns the senses and answers the «what I need», the «personality», that concerns the history of the person and answers the «what / who I am» and the «ego» that answers «what I want / what I do». The pathology of the self concerns the loss of the function of the «ego» and the dysfunction of the «id» and the personality. This means interrupting the



individual's ability to make contact, thus accumulating unfinished business which in turn will prevent any new contact attempt. All therapeutic interventions are related to these three functions and are considered so important in diagnosis.

The above theoretical parameters are the map that the therapist uses to navigate the diagnostic process.

This map is the result of a comparison between a model of the phenomenon, and the phenomenon itself, and is created when the therapist consciously focuses on describing the meaning of the current situation.

This view contributes to the external diagnosis for Gestalt therapy. But in order to be able to use the map, I also need to have a sense of direction.

This sense of direction is a specific diagnostic prism for Gestalt therapy, called Internal or Aesthetic Diagnosis.

### **Aesthetic Diagnosis**

The orientation of aesthetic diagnosis is based on the bi-aesthetic assessment of contact and is a specific type of knowledge that emerges at the contact point at a time when the body and environ-

ment have not yet differentiated.

For this reason, aesthetic knowledge is secretive (pre-verbal) and already coordinated in the intersubjective space (Desideri, 2011; Francesetti, 2012).

Tonino Griffero (2010) calls this intersubjective space atmospheres and considers them to be primary and emotionally charged presences, the perceptual preconditions, beyond which nothing empirical comes before.

(Francesetti, 2015).

To perceive the atmosphere means to capture an emotion in the surrounding space that is implied beyond any subsequent clarification, both logical and cognitive. It means that I perceive something more and it is exactly that, which goes beyond the tangible reality that I nevertheless feel.

In short, it is found in the difference, the resonance, of the perceptible space full of atmosphere, not as a material object but rather as a vibration, in which the observed and the observer meet and still merge isomorphically and pre-Westernization (Griffero, 2014).

For the same reason, a figure and sometimes even the sound of a voice can immediately arouse passion or dislike. This is why we feel something when we visit a particular apartment for the first time, when we see a natural phenomenon or when we meet a stranger. In all these cases, we perceive an emotional and tangible impression that is subject to immediate evaluation and has expressive consequences.

(excitement, paralysis from terror, leap of joy, blushing, shivering) whose a posteriori explanations almost always seem like flat rationalism (Griffero, 2014).

It is the ability to coordinate with these emerging atmospheres that allows the therapist to understand how the psychopathological field moves within the sphere of the atmospheric (Francesetti, 2015).

The aesthetic diagnostic approach is not a prefabricated model that leads us but are the unique and special qualities of a human relationship in the therapeutic condition.

The aesthetic emerges through the tangible experience of sight, sounds, touch, posture, breath and even the smell of life. To experience is the aesthetic process of co-creation of the organism and the environment. Experience is a whole process, inseparable from spirit, body, sensation, consciousness, emotion, thought and movement. It is an overall contact process (Bloom, 2003).

To make an aesthetic diagnosis means to be present on the edge of contact with the senses, awake, aware of my physical, emotional and cognitive resonance (Roubal, 2013). It means being vigilant with my senses activated, but at the same time relaxed, allowing myself to be touched by what is happening. No time is consumed in cognitive processes, since this type of evaluation is pre-cognition and pre-verbal, and involves not only passive energy but also action by the therapist.

Working with aesthetic diagnosis means using the senses themselves as a source of support. The most immediate interventions are not made by cognitive processing but by the awareness of the therapist who orients himself through the aesthetic criterion.

Often only after the session can a therapist find a way to describe verbally and to cognitively understand the reasons that led him to

an intervention.

This does not mean that the therapist works chaotically; his sense is cultivated by his experience and training. The cultivation of aesthetic qualities allows the therapist to distinguish the space between where words and thoughts are not enough.

The fundamental points of this minute-by-minute diagnostic approach are to be found here, that is, in the experience of space, and in the now, the experience of time of the experienced moment as it manifests itself at the contact boundary. The therapist is the sensitive needle of change in the contact line and records through resonance the aesthetic qualities of the relationship. He constantly counts these fluctuations and is constantly re-positioned with aesthetic and physical unity in relation to them.

In this way, he performs not only internal diagnosis but also treatment as this is the unit of diagnostic - therapeutic action (Roubal, 2013).

### ***Instead of an Epilogue***

Imagine walking in the park and seeing a statue. You look at it, you detect it, you explore it. Then you walk around it and observe it from a different point.

It is the same statue and yet you perceive it differently. Then you change position again and observe it from a different angle.

One perspective is not enough to meet the statue.

(Roubal, 2013).

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**...”My” Kythira...  
6th international  
summer camp of  
Gestalt,  
7-11 July 2021**



«Trip to Kythira»... a poetic expression for the meeting with the unknown, the unexplored, the unprecedented, the unique.

The meaning of the trip and the exploration of the process of each one of us... is the main goal of our summer camp.

Trip to Kythira, trip to the place and time... contact with the old and the new... yesterday and today...

Cooking lessons and oven cooking to the traditional wood oven, acquaintance with the olive and the oil as well as with the way they are produced, guided tours in paths, collecting herbs, ...boat trip to Xitra and swim in the cave with the blue waters ...why not scuba diving ...we may meet Aphrodite ... it's her island after all!!! ... hiking in the forest ...yes Kythira have forest!!! ...flying fox, climbing and canyoning in wet or dry field, via ferrata to Kakia Lagada or Dog and Cat at Mitata..., abseiling at Katouni bridge..., workshops about

photos, meditation, yoga, beat box and movement are only some of the offered activities of the camp.

Living in tents at Patrikio School of Agriculture or in hostels of the island ...to avoid overcrowding...!!!

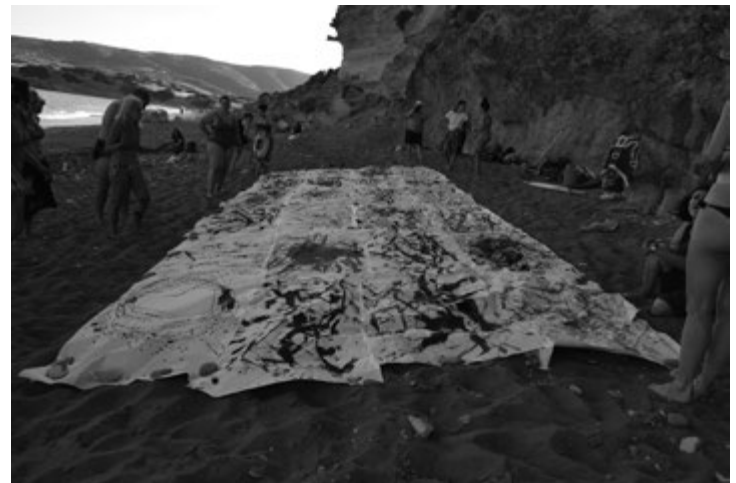
We are expecting you with joy, anticipation, faith and willingness to meet, explore and find the meaning of each one's trip!

Welcome to our Kythira!»

This was the invitation to the trip to Kythira from Despina Balliou, Maria Farmaki and Katia Hatzilakou.

There were various reactions:

- You couldn't do the summer camp fΚαλά further away?
- There are some isolated and deserted islands in Crete, maybe you can have the summer camp there, next year?
- Is there something on land?
- I can't wait to join a summer camp on an island, because I went to the summer camp on land!
- I really want to come but how?



The truth is that the Trip to Kythira began from the moment someone took the decision to join, crossing mountains and seas, literally.

And we meet at Kythira, 110 people from different places of Greece and the world! And the "Gestalt Family" connected again after 2 years of absence!

Someway everything was rolling, without much surprises (as if some Goddess helped the process!!!...).

Children and adults, dogs and cicadas belong to the crew of the camp! Everybody and everything took their place and joined the activities (in door and outdoor) that were held.

What can I say about the workshops:

«From the «point» to the «field»»

«Dancing ... at the baths of the Helen of Troy »

«Powers Yin and Yang in us»

«transformation, movement, transfer, translation and... after...»

«Yoga, body with energy and contact cycle »

«Who is in here? Or a lived space of miracles...»

«Our life in plaster cast»

«Establish contact without the touch»

«We are having fun, exploring our decision-making process...»

«Say something about you... that I don't know»

«Photo Notebook»

«Sympathy and Self-sympathy »

«Building Trust»

«It is what it is»: Acceptance & Mental Resilience »

«Body and words meet under the roof of the game!»

«A poet travels...»

«Aikido»

«I throw the ball... Or you are throwing to me the ball?»

Only by the titles someone can understand the good mood and the fun!

Palaiopoli, Castle, Chora, Livadi, Karabas, Milopotamos, Amir Ali's water sources, Patrikios School of Agriculture (the beautiful place that was the "base" of our camp), Gerakari, are some of the villages we visit and loved.

While all these were happening, we have also the "Big Game" that started at the beginning of the camp, but has its crescendo! The teams' presentations...

I am still laughing with «Aphrodite you don't hear me calling...!!!».

And of course, the children had their one's presentations (with music and dance!)

One of the stations of the "Big Game" was the Tree of Wishes. Here are some of the wishes that decorated it:

To love yourself and to love!

I wish everybody to be very healthy.

Smile.

Love, health, creation, union!

Smile, life is beautiful!!!

To find serenity wherever you are.

The memories of this summer to give warmth to our winters. Gestalt 2021.

Don't forget to live!

I wish faith to the perpetual. Joy, Strength.

I want you to have imagination!

I wish life!

Peace within and out of us ...

Self-respect!

To get love.

I wish you to live fully!

Love, hugs, companions and smiles...

My roots to be strong, your trunk flexible and my branches full of fruits yummy as the love of my friends. All together let's make a Όλοι μαζί as κάνουμε ένα field of life. Gestalt community I love you.

Beautiful moments full of people!

I wish you enjoy life at every moment.

I am with you!

Make the trip. Live, Gather. Laugh. Everything is YOU!!!

Life the you don't share is a stolen life.

Return to Kythira SOON. Life full of joy!!!

Calmness, freedom, love.

Laughs and tears, I wish you have both.

Beautiful trips, full of experiences.

I give you a wish ... To be full, to empty and like a tree to grow ...

Always to meet and have fun!

I wish to enjoy.



I wish knowledge and self-trust.

I wish all the trips to be as beautiful as this one in Kythira!

As fair is concerned... what to say: food, drinks, dancing and laughter!

And the reveal of Manitou! How beautiful and touching experience!

While I know the process, every time is like the first time...!!!

From the bottom of my heart, I wish us to meet again soon!

Wherever the road will lead us...???

**Xristina Hatzilakou**



## LEADERSHIP January-June 2021

What is missing from leaders or leadership today? What are the characteristics of a leader who will help to promote the work of

a framework, an organization, and at the same time help individuals to enjoy their work and coexistence with other members / employees, evolving personally and at the same time developing the work of the organization or business?

And what makes a Gestalt consultant effective, when called upon in a crisis in a business or organization, to «see what is happening», «hear» behind the words and behaviors and observe behaviors and dysfunctional phenomena of the employee and the organization in each «here and now» moment, in order to train, to highlight the best part of each employee, while becoming at the same time a model of all the above in the current leadership of an organization, and thus to be able to deliver a model of good practice?

The Gestalt Coaching In business & organizations course is an appli-

cation of Gestalt consulting in companies and organizations aiming at equipping participants with the basic principles of the theory and methodology of the Gestalt approach and how it affects businesses and organizations, developing through these principles skills of self-awareness, awareness, creative adjustment and functional contact with themselves and the environment in which they are called upon to help as a consultant, trainer and / or team coordinator.

Through an experiential process, the ultimate goal of these workshops seems to be to initiate participants in transformational leadership, that is, to the type of leadership where those in charge have high moral and ethical standards, and inspire trust and respect in

those who are there and to inspire them to get past self-interest and to motivate them to be creative and innovative - even challenging ingrained beliefs and practices of the leadership and the organization. This training «pushes» the participants to learn to think about each person individually, listening carefully to his needs and supporting them, in order to become fully activated and to fully develop his potential!

**Theodora Skali, E.D.I.P.**  
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