

# First steps into phenomenology: learning phenomenological comprehension of a therapeutic work

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**Abstract:** This paper explores the possibilities of phenomenology within psychotherapy and particularly within Gestalt psychotherapy. Two aspects of the whole are presented: apart from psychotherapeutic applications, the aspect of pedagogy and its potential is shown and demonstrated using the concrete example of the online available therapeutic work of Dr Robert Resnick. The basic notions of phenomenology as Husserl's legacy are introduced in order to show their relevance for psychotherapy and its pedagogy. Since some notions taken from Gestalt psychology (e.g. figure/ground structure) have their origins in phenomenology, there is a question as to whether this could be a challenge for Gestalt therapy theory.

**Keywords:** phenomenology, Gestalt therapy, experiential learning, phenomenological notions and structures.

## Introduction

The aim of this paper is focused on some lesser known but basic notions and structures of phenomenology within the context of Gestalt therapy training. I will show how their understanding and application can be helpful when trainees have difficulties in seeing the therapeutic work as a whole. When they are lost in a manifold of particularities, this understanding can help them to step back from *prima facie* complexity to the simplicity of the work overall in order to begin to make the transition from simplicity to complexity again. For this purpose, I shall refer to an example of therapeutic work that illustrates how to make the first steps into phenomenology with students or trainees, and to demonstrate how this understanding can contribute to the learning process of Gestalt psychotherapy training. While some of the notions will be demonstrated through this example, other basic notions still need an initial introduction. Instead of introducing them through analysis, I will describe how this understanding can be achieved experientially through the exercises in three steps.

## The four step process: from simplicity to complexity

There have been several attempts to research phenomenology in a Gestalt psychotherapy context

(McConville, 2001; Robine, 2003; Burley and Bloom, 2008; Bloom, 2009; Crocker, 2009; Brownell, 2008, 2010, 2017; Kotnik, 2011; Burley, 2012), in psychiatry (Wiggins et al., 1990; Saas, 2010; Hirjak et al., 2013;<sup>1</sup> Burley et al., 2015), and in other contexts (Owen, 2015); however, my interest is in the context of pedagogy, i.e. how phenomenology can be introduced to psychotherapy training in general and Gestalt psychotherapy in particular. I have used this approach with students of philosophy,<sup>2</sup> students of psychology,<sup>3</sup> and with trainees in Gestalt psychotherapy. The process usually consists of four steps. For the purpose of this paper, the first three necessary steps will be summarised and then I will proceed to the fourth.

## Step 1: 'See, Imagine, Feel'

In Step 1 the basic phenomenological notions are derived from a simple, well-known experiential exercise 'See, Imagine, Feel' (Brown, 1996, pp. 118–122). The original idea of this exercise had its own purpose. For us it has a different aim: to experience a comprehension<sup>4</sup> of the basic notions. When a participant works in a pair in an active role, telling the other (in a passive role) what he or she sees, judges and feels, he or she can practise and learn the difference between judgement<sup>5</sup> and description.

One of the participants (a psychology student)<sup>6</sup> shared her experience of the exercise in the following way:

In this exercise I realised that ... my 'seeing' is already saturated with my 'feeling' ... and that when I feel something, I look at things differently ... During the exercise ... I was all the time questioning myself what did I really see, what really existed and was my observation and what was my assumption and what I assumed or supposed. Was I really observing or already judging? ... From this exercise I have learned that ... phenomenological reduction is about paying attention to observation without attributing the meaning.

This report demonstrates a learning experience in which the participant can distinguish between attention to the object (*natural attitude*) and attention to the *evidence* of her own *lived experience* of it (*phenomenological attitude*) and to understand in this way the role of *phenomenological reduction* and its implication (*description* as a method). This experience also offers an understanding of *what* phenomenology is, what is its *subject matter*, and what is its main *principle* (see Figure 1).

## Step 2: tracking one's lived experience in the here and now

Step 2 is also a well-known exercise: with closed eyes, pay attention to what is figural for the participants in the here and now. I use it to derive phenomenological notions and conceptions relevant for psychotherapy: *figure/ground, here and now, stream of consciousness, intentionality, phenomenological field, attention, advertence, freedom (shift of attention)*.

The emerging figure from the ground either recedes or a new figure emerges. If it remains, we follow how a lived experience as a figure is directed (seeking) towards the meaning (sense), which is Husserl's understanding of intentionality. At this point (if appropriate) it is possible to refer to the origin of phenomenological conception of figure/ground relationship in §35 of Husserl's *Ideas Pertaining to a Pure Phenomenology and to a Phenomenological Philosophy* (Husserl, 1913/1982, §35) (hereafter *Ideas*), where he introduces the significant notion of 'free turning of "regard"' as a possibility of freedom.

One participant describes her experience, demonstrating a level of understanding of available phenomenological notions:

During the exercise I started to ask myself: 'Where is my stomach ache coming from? Is it that I haven't eaten anything this morning? Or am I worried about something which is expressed in this pain?' I got the answer soon, since my ache started diminishing and receding, my lips started trembling, and my eyes were heavier since I was on the verge of tears. These tears were telling me that something in me has a tendency to get the meaning. In this way my ache as a figure in my lived

experience receded and a new figure again emerged which represented a dominant need in that moment and persisted till the end: a memory of my grandpa.

In this report, the participant describes the content of her lived experience and at the same time its process, thus opening the possibility of using corresponding phenomenological notions. When trainees learn how to express therapeutic processes in these terms, they can learn how to use these notions in practice.

## Step 3: a cube as conscious experience

The aim of Step 3 is to derive additional notions using Husserl's example of a cube as a paradigm of conscious experience, presented by Sokolowski (2000, pp. 17–41). The derived notions are *objectivity/subjectivity, part/aspect/profile, part/moment/whole, manifold/identity, presence/absence, phenomenon/essence, eidetic/synthetical insight into whole, universality, intersubjectivity*.<sup>7</sup>

This step is only partly experiential. For participants, it is easy to see a cube on the table. According to Husserl, our consciousness has the ability to 'see' the whole. Thus, this 'seeing' the whole without going around and counting the sides is called *passive synthesis*. However, phenomenological comprehension of a therapeutic work is a much more demanding task which needs *active synthesis* and requires an understanding of the derived notions. In psychotherapeutic training, our main aim is to overcome trainees' difficulties in seeing the therapeutic process as a whole, how its parts are related, and how they form the whole. From this introduction, we proceed to other phenomenological notions and structures as described by Sokolowski: from objectivity (the sides of the cube are something objective) to intermediate area (aspects/perspectives of looking at the cube: from a different angle a square can be seen as a trapezoid), and finally to pure subjectivity (profiles: momentary presentations at different times as private and subjective).

If we put together the derived notions of all three steps in a structured and systematic way, one of the possible forms is shown in the following diagram (Figure 1):

Figure 1 combines results from the three exercises in such a way that they form a whole and indicates their relevance for psychotherapy. From the left middle part of the diagram, we get a condensed but systematic insight into phenomenological notions necessary for the understanding of Step 4. For further clarification, see several available theoretical introductions to phenomenology (e.g. Sokolowski, 2000; Smith, 2007, 2013) or the basic works of Husserl (1913/1982, 1960,

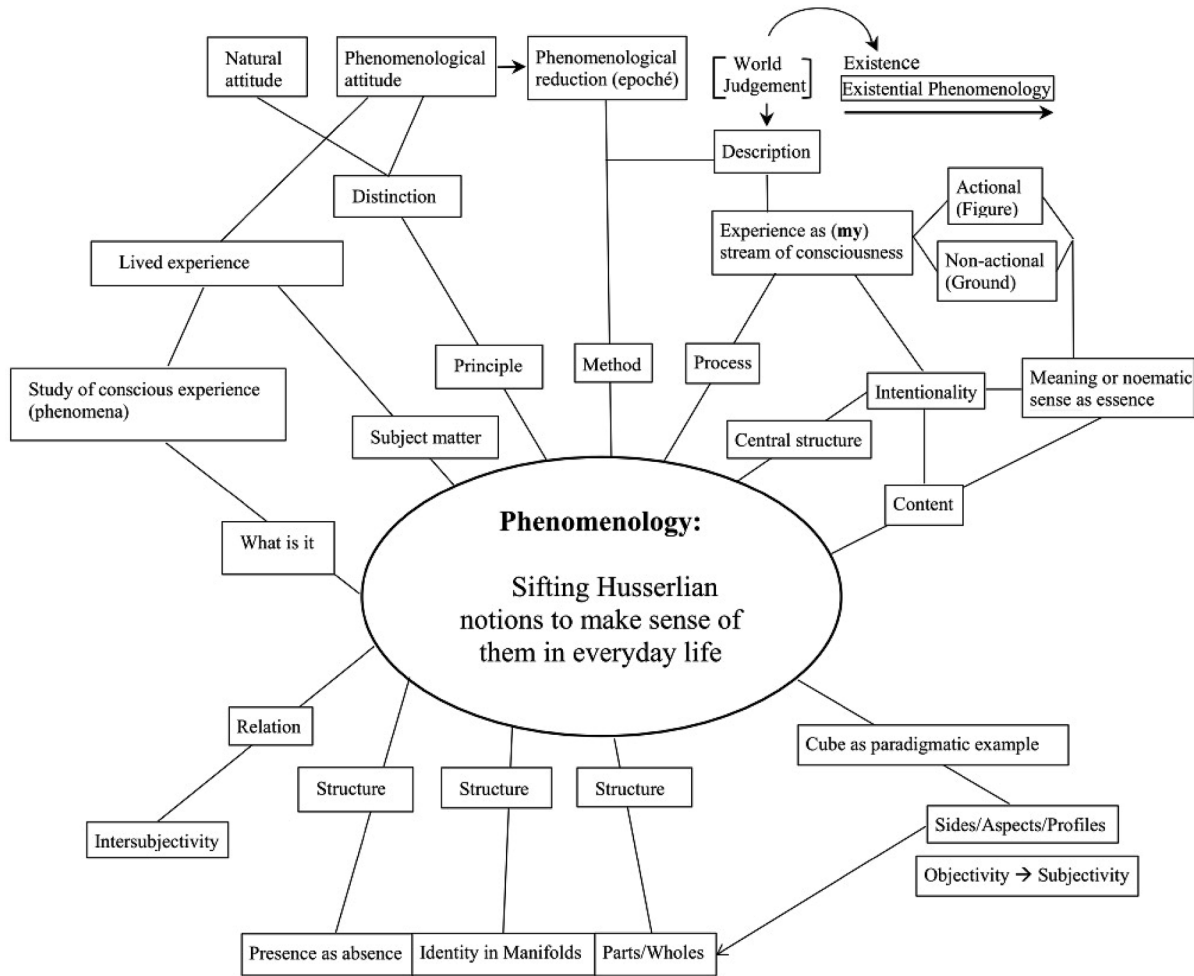


Figure 1: Phenomenological notions and structures as Husserl’s legacy derived from the three exercises: Step 1 (upper left), Step 2 (upper right), Step 3 (lower half).

Note: Actional/Non-actional lived experience (also Attention/Inattention) is Husserl’s phenomenological approach to what later in Gestalt psychology became figure/ground organisation of perception.

1970, 2001). In the upper left part of the diagram, we see what phenomenology is in its origin, what is its subject matter (*lived experience*), what is its basic principle (*phenomenological reduction*) and what is its method. In the upper right part of the diagram, the relevant notions for psychotherapy are presented: the stream of consciousness with figure/ground relationship and intentionality as directedness toward meaning, including Husserl’s possibility of shift as a possibility of freedom. The upper right corner indicates further development (transition) from initial transcendental towards existential phenomenology.<sup>8</sup> The lower part of the diagram (from the right to the left side) follows the approach of Sokolowski (2000), who derives phenomenological structures from the paradigmatic example of the cube. The most relevant structures for our purposes are presented within the context of a therapeutic work in Step 4.

For the purpose of this paper, the three steps allow us to proceed to Step 4 in relation to concrete therapeutic work. I have chosen for an example a Gestalt

psychotherapy piece of work by Dr Robert Resnick, which is available online (Resnick, 2016). I will present below some selected passages from the transcript and from Resnick’s introduction.

### Step 4: clinical application of phenomenological notions

From Bob Resnick’s introduction to the video *A Rose on the Grave of My Family*

In this session, the client is fairly withdrawn and it’s the end of a 12-day workshop. Every morning participants check in and they have the option of either saying where they are or saying ‘pass’ if they don’t want to say where they are that day. As this client was using ‘pass’ again, I became concerned and let her know how I felt, and what I thought when she was again taking the ‘pass’ option. I also let her know the impact on me. The delicate balance here is between inviting the person, but not pushing the person. Coming to the person, but not intruding upon the person.

The next morning, which was the last day of the workshop, the client asked if she could work with me individually in the group. The work turned out to be about her needing support for even having a want or having a need. Laura Perls' dictum comes to mind in terms of the therapist in this kind of situation; which is to give as much support as is needed, and as little as possible. Laura also said that work could be divided into contact or support issues and could begin as either. However, whether the work begins as a contact issue or a support issue sooner or later you get to the support issue below. This session was about finding a safe place to be seen, to be received, to be heard, and to be confirmed by another. To be who you are in the presence of an other is in itself a healing experience. (Resnick, 2016, transcript of video)

### A selection of passages from the transcript

Although readers may wish to view the video for themselves, I quote significant passages from the transcript below.

*Client: I find it difficult to look at you.*

*Therapist: Yeah. I appreciate your courage. I know it's not easy for you to come forward and put yourself here.*

*C: I don't like to be in the centre.*

*T: My thought was I wondered if that's worth exploring. Not wanting to be in the centre, and I don't want to rush you so I didn't suggest exploring that, just told you that was a thought.*

*T: It looks like some feeling just came up. I noticed your neck got red, you held your breath. Your eyes got a little bit teary, and then you squeezed.*

*C: It's just that, uh. It's very difficult to talk about my own needs. I cannot. I try to put them aside, usually.*

*T: Yeah.*

*C: And ... when I feel that I'm talking about it I feel that I'm just demanding something or taking somebody's time and so many problems around this which are much more important. So ...*

*T: So you don't have the right?*

*C: Yes. I don't know why I'm sitting here because it's the last day, and I don't want to carry something but whatever happens here I know I'm going to carry a lot of things from this program. All because I just decided that's it, it's there. And I have to ... to talk to you.*

*T: Yeah. Can I invite you to talk about what's difficult to have needs? I'm not asking you what your needs are. I'm asking you what the difficulty is for you to talk about your needs or having your needs.*

*C: I don't like to put myself in the centre, and it seems like my needs are so minor. Or perhaps I'm afraid of the other person's reaction as well.*

*T: What kind of reaction are you afraid you might get if your needs are ... if you say your needs?*

*C: All kinds, I don't know.*

*T: Now I don't believe you.*

*C: You're right.*

*T: And I thank you for acknowledging that.*

*C: Just I don't ... I don't have the right to speak about my needs, and...*

*T: So that's your belief and you also think that's what others would think?*

*C: Yes.*

*T: Their reaction would be that you have no right to have a need.*

*C: Yeah. And ...*

*C: And I'm afraid that if I express what I want it would be misunderstanding. And ...*

*T: What would the misunderstanding be?*

*C: That I want something that cannot be achieved, maybe. Or what I need is so simple that everybody's laughing. 'That's your need? That's all?' So it's these two extremes of: 'Why do you take our time to talk about it?'*

*T: So it's either so small it's ridiculous, or, it's impossible.*

*C: Yeah.*

*T: 'It's too big. It's impossible.'*

*C: Then ... So... So I push it away until the need disappears, and I find it very difficult to find it again. I just don't know what it is anymore.*

*T: Yeah. So you anaesthetise it. But then it comes back.*

*C: Then it comes back. And here I am sitting.*

*T: What do you already know about this? The 'this' I'm talking about is your unentitlement to have needs. Your belief that you don't think you're entitled and that you don't think the world would think you're entitled to have needs. What do you know about this?*

*C: I guess from my upbringing. From home. It's not that I know of. It's just I was brought to the world to fulfil a role. And make my parents happy, because of what they've been going through in the Holocaust. And put my needs away. And ... Just my father passed away not too long ago and I'm thinking, 'If my mother passed away soon, where is my role?' I mean, I need to keep going. I need to fulfil some other people's needs. Because there were terrible things going on and they were not disclosed to me. I just felt when I was very young that there's some sadness inside, but nobody spoke. So, I was this and I think I said it before I was this, I took it on myself that I should be the rose growing on the graves of my families.*

*T: Yeah, I'm not just talking about the identification of children of the Holocaust, I'm talking about the job of children of the Holocaust. Which is the one you're talking about. Having no needs. And dedicating your life to others' needs. And feeling badly when you have a need.*

*C: Yeah.*

*C: Yeah. And yesterday I called home and I said I didn't make it. ... So I feel that I did not achieve what I wanted.*

*And actually I didn't know why I came, so now I know why I came here. And I feel that I failed.*  
 T: *So what're you going to tell them about today?*  
 C: *I don't know how it ends, let it end first.*  
 T: *Even if it ended right now?*  
 C: *That I was able to talk about something.*  
 T: *Yeah, that you were able to come here and you were able to say something how you felt towards me? And about you and your needs.*  
 C: *Yeah. Yeah. Sounds encouraging. It's a big step.*  
 T: *You say that with a small voice, 'It was a big step.'*  
 C: *I have to digest it still.*

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 T: *Yeah. Okay.*  
 C: *Thank you. ... So I'm not doing 'like that' to you anymore.*  
 T: *No. I appreciate that, and it feels good to be to have you come close and to allow me to be here with you, and allow you to be here.*  
 C: *Okay.*  
 T: *And, I want to repeat to you, that I absolutely believe it's not your intent when you do 'that'.*  
 C: *Okay.*

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T: *I feel really good that you came out.*  
 C: *Yeah.*  
 T: *And you came out.*  
 C: *Your eyes are teary.*  
 T: *Yeah.*  
 C: *Why?*  
 T: *The joy of connection.*  
 C: *Okay. Touch my heart. Thank you.*

### Two step-by-step processes: learning phenomenological notions in the context of psychotherapy by following the presented therapeutic work

After watching the video, and before we enter into our learning process, trainees (students) are often touched by the story of the work, by the client and the therapist and their encounter during the therapeutic process. After sharing personal experiences, we proceed to a discussion of this work as a whole. Then we proceed to our main aim, which is to learn the relevance of phenomenology for psychotherapy, focusing *just* on

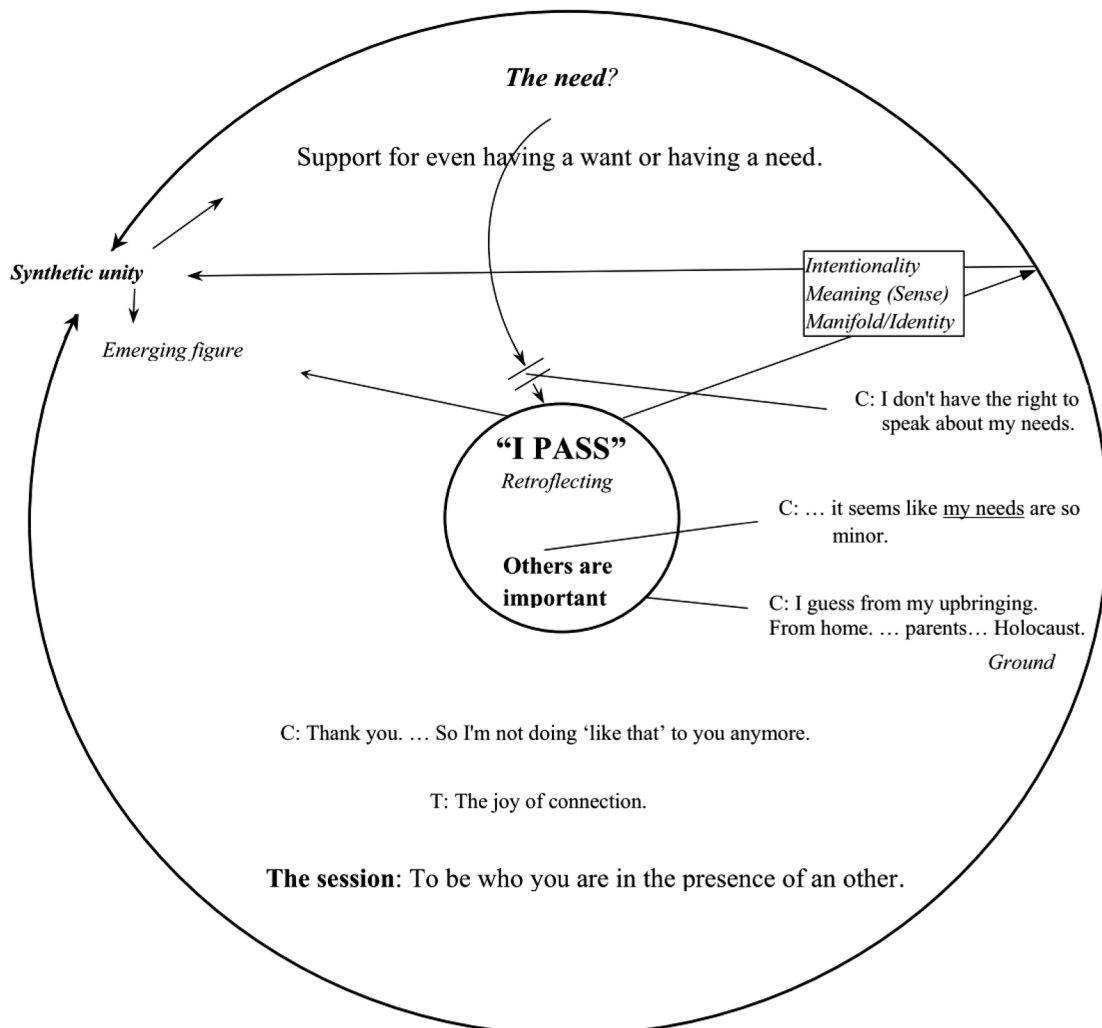


Figure 2: Insight into the work as a whole in its 'simplicity' (phenomenological notions are in italics).

phenomenological aspects of the work which we can follow according to the prior discussion of basic notions.

It is worthwhile stressing again that *our aim is to learn phenomenology*, and I propose some guidelines for application of notions for teaching/learning purposes:

- Simplicity: starting from the work as a whole, we try to see the forest apart from the trees (Figure 2).
- From simplicity of the whole to the complexity of a *manifold* of details (Figure 3).
- Exploring how the *identity* of the whole is formed from this *manifold* (Figure 3).

In the beginning, particular experiences can be difficult to comprehend. However, looking back and relating experience to context, we can gradually come to phenomenological comprehension. This is not the same as theoretical explanation, which can be part of the endeavour. From the perspective of the therapist, these experiences can be seen to have meaning, relatedness and multiple interconnectedness. For the purpose of illustration, see Figure 2.

Following the video, trainees are asked what could be the ‘simplicity’ of this work as a whole? We can ask, what kind of insight into the whole can we get? There may be several starting points. One of them is the word ‘pass’ as a figure (for an observer), which now has the meaning in relation to the client’s need for ‘support for even having a want or having a need’ formulated in the therapist’s introduction to the work. This can be expanded further: ‘This session was about finding a safe place to be seen, to be received, to be heard, and to be confirmed by another. To be who you are in the presence of an other, is in itself a healing experience.’<sup>9</sup>

When we have an idea of the need<sup>10</sup> and how the client holds it back, if we are looking back to the work as a whole, then we can make a connection between the beginning and the end of the session, and we could say that this need has been met in the ‘here and now’ in the therapeutic process (‘Thank you. ... So I’m not doing “like that” to you anymore’). In Figure 2, apart from this relation, we notice other relations and connections represented by lines which relate significant stages or moments in the session. This ‘simplicity’ is now more clear than at the beginning. The way we can *see* the relationships and connections as a whole is synthetic unity, which is represented with the large circle. The directedness of the emerging figure from the ground towards a meaning is called *intentionality*, and intentionality as tendency towards a *meaning (sense)* is considered to be the central structure in phenomenology (Step 2) and has special relevance for psychotherapy.<sup>11</sup>

For experienced trainees and therapists this may be enough, but beginners may need more. Trainees usually follow the content and notice particular

phenomena of the process, but have difficulties seeing the structure of the whole. While the example of a cube illustrates passive synthesis (Husserl, 2001), and while it seems to be obvious that we see a cube without going around and counting the sides before making a final judgement, in therapeutic work this is not so obvious. It is an active synthesis (ibid.). From a phenomenological perspective it means that *learning* active synthesis is a process which can take place in psychotherapeutic training. Now we must make the step from the ‘simplicity’ of a whole to the complexity of a manifold of details. For this purpose, we include the principle of phenomenological psychology which ‘starts by placing itself from the outset on the terrain of the universal’ (Sartre, 1936/2012, p. 122). In psychotherapeutic process, this means that we look at the concrete situation at the same time with a ‘wider view’, or how the part fits into the whole. This universality can be thought of as the as yet only partially formed idea: ‘to be who you are in the presence of an other’ as a universal characteristic of human existence emerging from particular intersubjective experience.

Now we shall move towards the next step, from the simplicity to the complexity of the work (Figure 3). If we follow phenomenological principles, we begin with *the obvious*. We follow with patience and pay attention to everything that is either said or shown without needing to be interpreted or ‘seen’ through theory. We hear the client saying ‘pass’. When we watch the video for the first time, it draws our attention, but we do not know its meaning (except the meaning given by the client at that time). However, it stands out in context from the previous day. It is something which is *present as an absence* and is therefore a *phenomenon*.<sup>12</sup> As a phenomenological structure, it was introduced by Husserl (Sokolowski, 2000, p. 22). We follow a particular client’s experiences and words without any intention to give them meaning and without theory (bracketing). Thus, we just follow the raw, virgin experience (Resnick, 1995, p. 4).

What can we notice as observers in the session? It depends on our attention. If we pay attention to the two lived experiences as differences (or their intersubjective phenomenological field), on the one hand we can remember from the previous day the concerns, feelings and thoughts of the therapist when the client took the ‘pass’ option, and on the other hand, the client’s reactions as words (‘better listen to what others have to say’), being embarrassed, and being sad. In the session itself we can pay attention to the words: ‘I find it difficult to look at you ... I don’t like to be in the centre.’ I can notice that in *my stream of consciousness*, something stands out as a figure on the side of the client. I can notice now, after seeing the video and looking back, different content but (examining step-by-step) the same

process, and the two different sentences now begin to reveal a clearer meaning. On the side of the therapist, I notice his words which I can understand (according to what he said in the introduction) as an expression of support, which could be understood as a possibility to sharpen the client's figure. When the therapist offers the possibility of exploring what has been said by the client, she takes a step further in her sharpening of the figure: 'I'm actually shocked by the fact that I'm asking to work with you.' Another supportive therapist's sharing enables her further step. When the therapist shares his observation with the client ('It looks like some feeling just came up. I noticed your neck got red, you held your breath. Your eyes got a little bit teary, and then you squeezed'), this is an example of *description*, shared in their intersubjective phenomenological field, leading to the client's statement: 'It's very difficult to talk about my own needs. I cannot. I try to put them aside, usually.' As an observer, I notice that she is talking about her needs and that she is holding them back. So I 'notice' her *lived experience* (holding back her needs

– which in Gestalt therapy is called retroreflection) and I can relate it to the initial insight into the synthetic unity of the whole. The question, *how* does she hold back her need seems to be the next necessary step in this exploration. The therapist then makes this (phenomenological) move to *how* in a meaningful and sensitive way: 'Can I invite you to talk about what's difficult to have needs?' The phenomenological question of *how* is a question of how she is holding back, and her answers ('I don't like to put myself in the centre, and it seems like my needs are so minor. Or perhaps I'm afraid of the other person's reaction as well') turn her attention to her lived experiences of *projecting* and the way of *her* projecting with introjects. In this way, we obtain another insight into a smaller whole, the sequence: retroreflecting/projecting/introjecting as three interrelated processes as *lived experiences* which basically form a phenomenological structure. The psychotherapeutic significance of this realisation is that we can maintain the phenomenological attitude, i.e. without a need to introduce theories and to a great

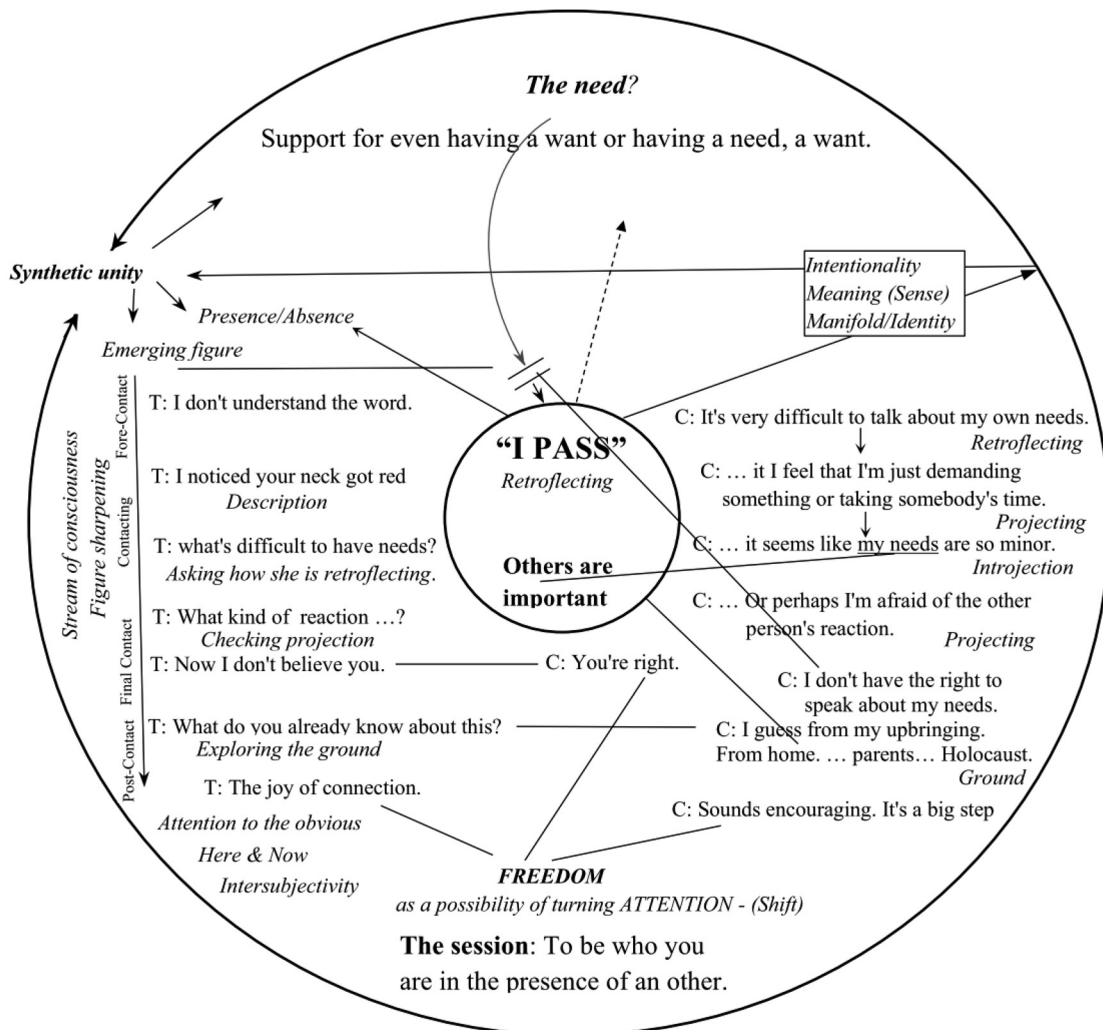


Figure 3: Phenomenological notions and structures through the psychotherapeutic work in a step towards complexity (phenomenological notions are in italics).

extent without interpretations, staying just with the obvious: what we hear, observe, and describe.

At this stage of our therapeutic encounter, we notice an engagement of the two lived experiences which become significant. When the therapist checks the client's projections regarding what kinds of reactions she is afraid of, she replies: 'All kinds, I don't know'. The therapist simply says: 'Now I don't believe you' and she says: 'You're right'. This appears to be one of the turning points of this therapeutic encounter. From a phenomenological perspective, it can be understood as a *shift* or as a possibility of turning attention from the figure to the ground, which in the phenomenological context is understood as a possibility of freedom, a possibility of choice, or 'free turning of regard' (Husserl, 1913/1982: §35).<sup>13</sup> When asked about *the ground*, the client herself seems to achieve an insight into the difference between new and old experience and relatedness to the ground, which is her history as a child of Holocaust survivors. This insight has significant phenomenological relevance, since initial lived experience as a figure has its own intentionality, and directedness toward meaning. This meaning now seems to become more clear. Now we get an insight into the whole, how all these constituents are related, and how they form the whole. We cannot know what kind of insight this was for the client, but we can notice the change and how she sees the situation from her own words. However, there is another significant missing relation for us as observers: we get it when the initial need is met in the *here and now*, in the encounter of the therapist and the client. To be who you are in the presence of 'an other' – this is happening in the here and now in their relationship as a lived experience of meeting her need in the here and now; by being able to come there and to say something is a lived experience in a real sense, also by *doing* it:

*T: Yeah, that you were able to come here and you were able to say something how you felt towards me? And about you and your needs.*

*C: Yeah. Yeah. Sounds encouraging. It's a big step.*

## The role of the diagrams

Turning to Figures 2 and 3,<sup>14</sup> their first role is to try to clarify this insight to the whole of the therapeutic encounter. If we 'zoom in' and 'zoom out', we can now see how these constituents form the whole and how they are related. We can see how this manifold of seemingly different lived experiences as modes of being in a therapeutic relationship forms a meaningful whole, and how the identity of the same process can be seen. In my experience, trainees often report that looking at the diagram itself is enough without further clarification.<sup>15</sup> For trainees, this is a way to see

(apart from particular 'trees'), the 'forest' as a whole, as the identity of the manifold. The final role of the diagrams is that trainees make use of them in the learning of psychotherapeutic practice. One aspect of their learning process is to make a move from passive to active synthesis. Phenomenological reflection and analysis of therapeutic work, together with the diagram, is an attempt to facilitate the learning process in which this phenomenological analysis is part of the trainee's ongoing attitude, a way of seeing the therapeutic process. Since the process is expressed with phenomenological notions (in italics), trainees can practise to distinguish content and process by switching from the content to the process and back. In the next step they learn to draw diagrams of their own work as part of the learning process.

## Concluding remarks

This paper has explored the potential of Husserl's legacy in the context of psychotherapy and particularly within Gestalt psychotherapy training. Phenomenological step-by-step analysis in psychotherapeutic work is a demonstration of gradually becoming familiar with phenomenological notions and structures in their simplicity, but without simplification. In my view, this is an opportunity for trainees to further explore the potential and capacity of immediacy in a therapeutic relationship prior to the application of theoretical models. Thus, they can pay attention to the extent that the therapeutic process can already be understood through phenomenology before we introduce theories (which cannot be universal). I argue that a solid phenomenological ground can facilitate the process of learning before engaging with learning theory.<sup>16</sup>

## Notes

1. This study deserves special attention, since it explores the fruitfulness of Husserl's notions in psychiatry, e.g. disturbances of intentionality in FRS (First-Rank Symptoms in Schizophrenia), which have implications for psychotherapy.
2. In the case of philosophy students, the aim is just to show how a seemingly abstract and complex or even mysterious philosophy can make sense and can be related to everyday life.
3. For psychology students who are introduced to the basics of psychotherapy in their fifth year of study, the aim is to demonstrate the role of phenomenology in humanistically oriented approaches.
4. The term 'comprehend' in its Latin origin has specific phenomenological significance. 'Latin comprehendere "to take together, to unite; include"; ... also "to comprehend, perceive" (to seize or take in the mind), from com "with, together."' Online Etymology Dictionary: <https://www.etymonline.com/word/comprehend>. See also Robine (2009, p. 224).
5. The term judgement and its derivations refer to Husserl's concept of *Urteil*.
6. The description is a passage from her essay at the end of a 30-



hour course entitled Approaches in Psychotherapy: Humanistic and Existential Approaches. This is her first encounter with humanistic psychotherapy.

7. This is the range of possibilities which this step offers and would need further analysis; however, we are limited to just what is needed for Step 4.
8. While for transcendental phenomenology judgement and the whole world are bracketed, existential phenomenology takes human existence in the world from the brackets to become the object of its study.
9. I have chosen this example to make the task easier for trainees since the therapist's words offer a basis for insight into the work as a whole. In their next task, the trainees can do this by themselves and can proceed to learn how to use this experience in their own therapeutic work.
10. Husserl speaks about 'drive intentionality' (Triebsintentionalität Hua XV, Text Nr. 34 – quoted by Moran and Cohen, 2012, p. 87)
11. I am emphasising here a significant empirical study (Hirjak et al., 2013) on the disturbance of intentionality in schizophrenia, which refers directly to Husserl's notions and has significant psychotherapeutic implications.
12. 'The absent is given to us as absent; absence is a phenomenon, and it must be given its due ...When we are looking for something and cannot find it, the absence of the thing is all too present to us' (Sokolowski, 2000, pp. 36–37). See also Husserl (1913/1982, § 45).
13. Figure/ground structure is introduced as a phenomenological structure by Husserl in his *Ideas* in 1913/1982 in §35 including his significant 'free turning of regard' as a shift of attention, regarded by Stevens (1974, pp. 141–156) (see also Colin Wilson (1983)) as the basis of Husserl's conception of possibility of freedom in a sense of 'I can'. I emphasise this because of its significant implications for psychotherapy.
14. Robert Resnick (2019) considers these diagrams as 'a meta frame that could be useful in training and once assimilated and integrated can inform the work even below the therapist's awareness'.
15. Since my interest was also whether this methodology works, a survey was carried out to gather information about trainees' experiences. The results indicated better understanding, clarity, and usefulness.
16. If these are the first steps in phenomenology, what are the further steps? One of the challenges is to follow, notice and explore the therapeutic process as an intertwining of natural and phenomenological attitudes: we pay attention to both causality (why) as well as to the significance of phenomenological attitude (how). This leads to the next step towards complexity, which goes beyond my limited purpose in pedagogy and challenges questions such as whether this intertwining can be understood in terms of Merleau-Ponty's *chiasm* (Brownell, 2017, p. 145).

Finally, the figure/ground relationship, which is usually treated as a Gestalt psychology concept, in fact has its origin in Husserl's *Ideas* from 1913 and previously in William James (1890, 1899/1992) and Lloyd Morgan (1894/1903). Since several other notions in Gestalt therapy have phenomenological origin, a challenging question arises: can phenomenology offer more to Gestalt therapy theory – as indicated by Goodman (Stoehr, 1994, p. 103)?

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