ARTIGO

Intentionality, in flesh and blood
Toward a fore-contact psychopathology

Intencionalidade, em carne e osso
Fronte ao ciclo do contato psicopatológico

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RESUMO

Trabalhando na perspectiva de campo requer uma mudança radical na aproximação do encontro terapêutico. Nós precisamos focar no que é chamado "a situação" e o conceito de intencionalidade deve ter uma grande importância. A função-personalidade do mesmo sempre leva a intenções repetitivas por atos que previnem contatos com a novidade. Por essa razão, gestalt-terapêutas podem frutiferamente "voltar" ao conceito de intencionalidade, com prioridade para qualquer formação de intenção consciente ou agencia. Meu ponto de vista é que a intencionalidade de um que está na presença de outra pessoa tem que ser conquistada através da afetividade, que é, por via na qual o outro é afetado pelo encontro. Longe de qualquer diferenciação prematura ou assignação de responsabilidade sem estar atento pré ou não consciente intencionalidade deve ser uma aproximação conforme vai se tornando cada vez mais atenta, e disponível para novas provisões diferenciadas. Como resultado dessa mudança proposta, uma nova base é dada para a psicopatologia do contato. Os terapeutas se auto-descobrem recebendo novos significados.

Palavras-chave: Gestalt Terapia; Intencionalidade; Ciclo do contato; Situação; Experiência; Intuição; Encontro; Vago; Confuso; Não-consciente; Inconsciente; Corpo.

ABSTRACT

Working in a field perspective requires a radical change in our approach to the therapeutic encounter. We need to focus on what is called "the situation", and the concept of intentionality should take on great importance. The personality-function of self often leads to repetitive intentions through acts or meaningaking that prevent contact with novelty. For this reason, gestalt therapists could fruitfully 'go back' to the concept of intentionality, as prior to any formation of conscious intent or agency. My assumption is that the intentionality of one who is in presence of another person has to be sought through affectivity, that is, through the way in which the other is affected by the encounter. Far from any premature differentiation or assignation of responsibility, unaware pre- or non-conscious intentionality should be approached as it becomes more and more aware, and available to new and provisional differentiations. As a result of this proposed shift, some new ground is given to a psychopathology of fore-contact. The therapist's self-revealing receives new meanings.

Keywords: Gestalt-therapy; intentionality; fore-contact; situation; experience; intuition; encounter; vague; confused; non-conscious; unconscious; body.
“On his deathbed, an old patriarch summoned his three sons and bequeathed to them his worldly goods: seventeen camels. The eldest was to receive half the number, the second son a third, and the youngest son one ninth. Having pronounced these words, he passed away. The children remained quite perplexed. But they managed to find a wise man as intelligent as he was impoverished. He possessed but one camel. The three sons appealed to him for help in resolving the problem—apparently insoluble—of their heritage. The wise man simply added his camel to the seventeen others. From then on the division of goods, according to the final wishes of the deceased, became child’s play. The eldest son received half of the eighteen camels, that is, nine. The second son, one third, or six camels. And the youngest received, finally, two animals or one ninth. Yet the figures nine, six, and two make up a total of seventeen, as was foreseen by the patriarch. And thus, the eighteenth camel, that of the wise man, was automatically eliminated. One no longer needed it, however indispensable that camel had once been.”

This Arabic legend is related by Medard Boss to facilitate our comprehension of the role of the analyst, and to cut short what he called, “All the chatter about the ‘transference’.” Without the introduction of another person, the situation is a dead end; without the generosity of that other, without his gift—a thing indispensable that must rapidly become “dispensable”—the impasse remains. Such is the presence of the psychotherapist. Such is the unfolding of the therapeutic encounter.

The clinical and psychopathological analysis of the experience of another person, insofar as it is possible, can only be effected within the encounter. On Heidegger’s own account, it was precisely this that Ludwig Binswanger, Boss’s longtime comrade, overlooked in his attempt to elaborate a psychotherapy under the sign of phenomenology. In his Zollikon Seminars, for over a decade, Heidegger received at his home, several times per year, an audience of medical or psychiatric students. In these seminars, Heidegger decried Binswanger’s “total lack of comprehension of his thought,” an incomprehension tied to the fact that Heidegger’s Daseinsanalytik had nothing to do with solipsism or subjectivism, but rather with a ‘being, with other beings’. “For me, it is a question of you, and for you, of me,” he was accustomed to say. Psychotherapy can only be approached as discipline for two (à deux personnes), and it should be theorized as such. An impossible wager? A thousand year long tradition of speaking of the other as though he existed outside the gaze we cast upon him, which is a gaze formed by the co-created situation, has led us to approach the other as though he could be revealed to ‘me’ outside of me, outside my intentional aim [visée], and outside our encounter itself.

Goodman proposed a Gestalt therapy that stands opposed to that tradition. At the heart of his work written with Perls, the paradigm of the organism/environment field postulates the priority of indifferensation in the experience of the I and the You: “Experience is prior to the ‘organism’ and the ‘environment’, which are abstractions from experience.” It is from experience that the work, which takes place in the therapeutic encounter, should begin (it...
owes itself that departure), and it is from there that I would like to start, to develop this essay.

1. Psychotherapy Approached as a Situation

A number of thinkers in the social sciences today agree that we should consider the personality as arising so strictly from the situation in which it is engaged, that it can never wholly depart from it and can thus only ever react to its situation within its situation. In a prior study, I underscored the importance that the founders of Gestalt therapy attributed to the concept of situation, to the point of seeming to prefer the reference to “the situation” over the concept of the “field” in their reflections. Psychotherapy is firstly the construction of a situation, and we can readily apply to the latter the definition of situation given by G. Debord: “The concrete construction of momentary life environments and their transformation into a higher passional quality [en une qualité passionnelle supérieure].”

What we call the social situation is a structure of possibilities that I create with the other, and which in turn creates us respectively. Clearly, the therapeutic situation defines my presence and my intention as a psychotherapist, just as it defines the presence and expression of my client. The situation hardly invites the latter to give me his “pot roast recipe,” but he may come to do so nonetheless. If the tradition impels us to think of this event as resistance or as some other critical mode of contact, another gaze could just as readily call our attention to our patient’s project, to his intention, as well as to our own solicitation.

Nevertheless, although the patient’s “I am”—which gets declined according to the personality mode of the self—is one of the results of his experience, it is no less (and fundamentally) a play of representations and rhetorical attitudes. If narrative identity, as it is called today, can designate one of the possible declensions of the self, it cannot embrace them in their totality. Gestalt therapy comes to temporalize and delocalize the approach to this concept of the self, thanks to the radical turn that it imposes on the self. Narrative identity, contrariwise, is readily envisioned as static; it frequently lets itself be apprehended as a structure, or a character, thanks to its fixity, which is at least sufficient to give us the impression of permanence and continuity in time.

Rightly or wrongly, I recognize the same ‘I’ in him who I was a few decades earlier. This is, moreover, why G. Yontef defined a structure as “a process that evolves very slowly.” This need for stability and continuity forecloses access to the novelty of situations and opens us to the repetition of experiences, including the most painful ones.

The subject approaches situations in which he finds himself in light of his narrative identity; and in the patient-therapist face-to-face, the psychotherapist is likewise readily credited with another narrative identity, generally implicit, tied to the presuppositions and needs of the subject. These presuppositions have more ‘reality’ to them than does observation, since perceptions or sensations in the situation are rarely called forth as reliable material.
“I would like to touch on such and such question,” says the patient, “but I am afraid…”

“Could you identify how it is that I am causing you to feel fear?”

“Oh, you’re not doing anything…It is I! I am always afraid of speaking of these things…”

This condensed version of an interaction, while typical in its banality, is born out of representations the patient has of himself and which bring him a certain comfort. It contains the a priori denial that the other could intervene in any way at the level of the experience that is lived in the moment of the situation. A certain form of 1960s and ’70s psychotherapy—and of Gestalt therapy in particular—advocated this “taking responsibility” for what can be thought, sensed, felt, enacted, or lived. It seems to me to go against the perspective of the field, in that it constitutes what I would call a “premature differentiation,” because it rests upon an equally premature individuation.

If the process of differentiation and individuation concerns the psychogenesis of each one of us, and if it is progressively and for the most part elaborated in the first moments of life, it nonetheless seems to me that each situation, each encounter, each experience reopens the metaphorical construction site, in so far as the subject opens to differences, novelty, uncertainty, or to the unknown.

2. Intentionality

Developed by Edmund Husserl, who made it the central concept of his philosophy, the term intentionality was introduced into psychology before Husserl by Franz Brentano in the second half of the 19th century. The perspective that guided Brentano consisted in separating psychology from the natural sciences. To that end, he sought to elaborate a psychology that refused to make the psyche into an object liable to be apprehended by the methods of the natural sciences and which, on the contrary, would rest on “experience.” Brentano was thus one of the first to speak of the exteriority of psychic life, seeking to construct a “psychology without the soul” that would be a psychology of perception and experience. It is not unreasonable, then, that Gestalt psychology and phenomenology would each consider Brentano as their precursor. Some hundred thirty years later, it is anything but certain that Brentano’s enterprise succeeded, given the still current, pseudo-scientific propensity to consider the soul of the other person as some reified object for examination.

“What characterizes every psychic phenomenon,” wrote Brentano, “is what the mediaeval Scholastics called intentional presence, and what we could ourselves call…a relation to some content, a direction toward an object…or immanent objectivity.” Later on, Husserl will refine the concept of intentionality (when he specified that consciousness is not a container, but is rather the signifying intention) by defining it as the tension of consciousness toward that which it signifies: “To have meaning, or to intend some meaning, is the fundamental character of all consciousness,” as he summed it up in his famous formula.
The present moment contains an inherent future [avenir inherent], an orientation, and a direction. We can compare this to Goodman’s correction to the famous “here and now”: “and Next.” Here, now, and next.

If the developments of the concept of intentionality concerned above all mental-consciousness, and particularly the world of representations, certain authors nevertheless enlarged the field of possibilities. For example, Maurice Merleau-Ponty, in his *Phenomenology of Perception*, maintains that all signification and every speech act are rooted in bodily intentionality. Levinas, then Searle, emphasized in turn the domain of sensations. Today, it is clinical psychology’s turn (in J. Chemouni’s voice) to lay claim to intentionality as the object of its own definition.

The choice of this concept implies the ground principle according to which the human being could not be reduced to its physical nature (“the organism”); that it is, instead, always in relation to an “object,” whether real or imaginary. The human being is always directed toward something; for instance, toward an object that has neither existence nor ‘objective’ meaning in itself, but acquires these thanks to the intentionality that aims at it. In fact, and clinical practice brings this clearly to light, the existence of an object, represented or representable, is not the essential condition of intentionality. One may sometimes speak of an “intentional state or content without an intentional object.”

3. Intentionality in Situation

Every situation, more specifically every interpersonal situation, mobilizes intentionality in each of its protagonists. The force mobilizing this intentionality can be designated and theorized in different ways. Freud spoke of it in terms of the drives and, following Groddeck, elaborated his theory of the Id, the first reservoir in the psychic economy. (It is, moreover, important to remember throughout what follows in our reflection, that when Freud attempted to theorize the psychic instances [Id, Ego, Superego] from a dynamic and psychogenic point of view, he set up the ego and the superego as progressive differentiations of the id.) In his time Goodman introduced the concept of the “id of the situation,” a way of localizing the origin of the drive motion in the situation itself, in preference to any localization in the organism or in the psyche itself. The human being gives form to the situation as the situation gives form to the human being. “Situations are that to which subjects adjust via the definitions they give to them.” This movement of contact and reciprocal constitution founds the human being as actor and beneficiary, as acting and acted-upon in one and the same process.

If the Id takes shape in a situation, then it is in the situation too that intentionality becomes an intention. It is there that the ‘Id’ comes to be felt, to be affect, word, contact, act, behavior, or interaction… If Groddeck could argue, “man is lived by the Id,” it is no less true that, starting from the ‘id of the situation’, or from the ‘drive id’ (if we want to preserve the intra-psychic model), modulation and
formation [*modulation et mise en forme*] are the act of the self, whose constitutive dimension is the Id.

In lived experience, the subject readily localizes what is felt, what are behaviors, etc. as its own belongings [*comme des appartenences propres*]. The subject explains or justifies them in the personality mode (the “narrative identity”), and situates himself preferentially in an ‘I’, which he claims is free and conscious. This blocks off the regulatory force [*contrôle*] that the situation exerts over his experience. Could we not claim, instead, that one of the functions of psychotherapy consists in dismantling this often-implicit representation, to reconstruct an individuation better articulated through the consideration of successive contacts and situations? Could we not postulate that, in the field of experience, intentionality constitutes what is proper to the subject—constitutes and defines him—and that we place his intentionality as a response to the situation or as an initiative, since intentionality shall give birth to *forms*?

4. How to Know the Intentionality of the Other Person?

*The saying of the felt experience* [*le dire de l'éprouvé*]xxiii

In Gestalt therapy’s non-dualistic perspective, that is, in taking up a position beyond what Perls and Goodman called “false dichotomies” like that opposing the body and the mind,xxiv nothing can be thought outside the bodily experience [*ressenti corporel*]. It would thus be incoherent to dissociate, or oppose a thought- or deliberated-intentionality to a corporeal intentionality, even if this lay outside the field of consciousness. Our approach readily gives privilege of place to the patient’s statement of what is present to his immediate consciousness. Beyond this limit, psychotherapy proposes a veritable training in the expansion of the field of consciousness into the domains of sensation, emotions and sentiments, gestures and behaviors, thoughts and memories, representations and fantasies, perceptions of the environment… In the first phase of the construction of the Gestalt, it is a matter of allowing the emergence or development of a clear figure that could thereupon be deployed. This amounts to the “drawing together” [*ratissage*] of partial experiences in immediate consciousness with those that come up, assemble, conflict with, or dialectize the experience in a specific direction of meaning. Every clinician knows how readily the illumination of the coincidence between a patient’s anecdote, a bodily experience associated with it, and the gestures that accompany it, etc., structures an orientation noticeably different from the orientation engaged on the basis of spoken words alone (i.e., words intentionality verbalized, thereby having become themselves an intention)---words which may have been spoken with no regard for the situation itself.

If intentionality is ‘directed toward-‘, then its meaning should be sought in the situation as a whole, that is, in the field understood as a “structure of possibilities,”xxv where these possibilities cannot be reduced to the single
‘organism’, or even the single psyche, as too many clinicians would seek to limit it.

**Intuition**

Clinicians frequently evoke intuition to designate the modality that opened access, for them, to the other and thus permitted, after all, them to construct some intervention, sometimes highly relevant. Although some would remind us that this mode of access to the other is not free from attributions of meaning and projection, or even from counter-transferential stakes [enjeux contre-transférentiels], intuition nonetheless permits a knowledge or awareness [une connaissance], often unrepresentable and inexpressible, of certain components of the patient’s experience.

My hypothesis is that this intuition is formed at the crossroads of perception and resonance. The therapist’s self-knowledge, which he owes to his personal therapy and his supervision, allows the practitioner to elucidate certain components of resonance that may be in play in the process. It remains for us to come back to what has been perceived, sometimes without consciousness, treated with extreme rapidity and turned into a synthesis that may appear passive. What, then, are the linguistic and bodily signals; what are the vocal and sub-vocal, the contextual and atmospheric signals perceived by the clinician and immediately synthesized into a global and implicit signification?

It is necessary, moreover, not to lose sight of the fact that intuitions, like perceptions, are organized equally by the knowledge, the science and experience of the clinician. It would be difficult for me to have the intuition that this person before me was frozen with shame—against which he was struggling, that he may have been maltreated or the victim of abuse, or that his depression was the consequence of a crypt or a ghost—if the theories implied were totally foreign to my own reflective markers [repères de pensée].

**The Encounter with another Intentionality**

The essential postulate of Gestalt therapy rests upon contact. The human being is fundamentally contact, creative or conservative adjustment within an environment. It is in and through alterity that intentionalities exists. The therapeutic encounter is an encounter of intentionalities, each calling to the other and in this way refining it. Through the encounter, intentionalities take the form of intentions.

In a prior study,²xxxvi I invoked the concept of affordance to enlarge the spectrum of linguistic possibilities that should permit us to speak in terms of a field and not just according to the solipsistic conception. This neologism was forged by Gibson,²xxvii father of eco-psychology, from the verb to afford, which can be paraphrased as “to have the means to do something.” It thus designates a
characteristic that refers at once to the ‘organism’ and to the ‘environment’, to the fundamental properties that determine the way in which ‘the object’ can be used. A chair offers support; its affordance lets me envision sitting down, in connection with my intentions, perceptions, and possibilities.

Affordance is at work in the therapy session, as it is in every situation. The patient perceives the psychotherapist and his affordance; this will mobilize those “uses” that the patient will be able to make of him, while extinguishing others. My perception of a chair can entail the wish to sit down; if I need to accede to an object out of reach, high up in my library, I shall perceive a certain number of affordances in the situation: a chair, a chest on which to climb. I could even organize habitual affordances; perceiving in telephone books a means to raise myself up, or even the possibility of using someone in the room as short ladder. Contact with my environment reveals me to myself and actualizes certain of my potentialities, at the same time as I bestow on my environment potentialities perhaps unexplored up until then. But these attributions nonetheless take account of the possible affordance of the object: I will not perceive in the pocket calculator on my desk the possibility of accessing a shelf beyond my reach. “Situations do not provoke our actions, but neither do they represent the simple background against which we realize our intentions. We do not perceive a situation in function of our aptitudes or our present dispositions to act,” Joas wrote.

In the therapeutic encounter, we are each for the other, consciously and unconsciously, the essential, constitutive element of the situation.

The Other Person Affects Me

It is a matter of common sense and experience to recognize that the other person affects me from the moment I am in his presence. He affects me, that is, he brings me to feel [me donne à ressentir], to imagine, to think, to infer, and to experience bodily and emotionally… Even my neutrality—if such neutrality exists—or my indifference, is not the pure product of my will or my choices. My lived experience [éprouvé] is a tie. It is tied to my intentionality, to be sure, but also to the presence of the other and his own focus or intending.

My working hypothesis consists in claiming that consciousness of my lived experience in the here and now of the situation is a privileged instrument of knowledge of the intentionality of the other. I would be tempted to juxtapose this assertion to Perls and Goodman’s remarks about emotion, when they say: “Emotion is the immediate consciousness that integrates the organism-environment relationship. As such, it is a function of the field. […] In the sequence of figure and ground formations, emotions take control of the motivating force of desires and appetites […] (Emotions) are means of cognition. […] They represent unique information on the state of the organism-environment field.”

What I feel in the presence of the other is thus an indicator of what is in the field. It speaks of me, speaks of the other; it speaks of the situation, of the
atmosphere, and it speaks of our encounter. I agree completely with Perls and Goodman when they acknowledge that, as cognition, emotions are fallible, but one can correct them—indeed, cultivate and refine them. And above all, one can speak or state them as indicators of what is.

When a woman I am following in group therapy begins speaking a confused language on the verge of incoherence, when her incoherence is accompanied by diverse vegetative manifestations, onomatopoeia and stammering (bafouillages), the more I seek to understand her the less I understand. The sole information to which I can hold fast at that particular moment is what I feel [mon éprouvé], which gradually takes the form of a desire to take her in my arms as I might do with a child, and at the same time the desire to strike her! Now, when I name these for her, she calms down and begins to speak of the abuse she experienced as a child—an abuse she had never brought up before—in which she already experienced violence and tenderness woven together. It was in that direction of meaning that her intentionality, or that of the situation, thrust her confusedly.

**Conscious and Non-conscious Intentionality**

In the working perspective of Gestalt therapy, it does not seem to me to make sense to rely on some differentiation between what it could mean to raise something—as other approaches do—from consciousness or the unconscious up to the level of intentionality; this is a dissociation that Perls and Goodman ranked among the ‘false dichotomies’. Our approach, centered on the process of consciousness or the becoming-conscious [devenir conscient], does not require the postulate of a “site” from which intentions might arise that were possibly contradictory to those already present in consciousness. In this sense, the symptom constitutes something unavoidable in regard to the question of intentional aiming, which must bring together what is conscious and what non-conscious in the experience, in order to be unfolded in view of its becoming explicit. The child who at a given moment fails in school is certainly not conscious that he aims to arouse the attention and supportive presence of his mother, in order to forestall with this the intensification of the mother’s depression. Nevertheless, as long as some intentionality is not brought to light—which does not necessarily imply bringing it to consciousness—and other modalities of reaching the same, essential objective are not elaborated, the symptom will resist, in search as it is of acknowledgement.

This is why it seems fundamental to me, when we undertake the work of unfolding or analyzing a symptom, clarify its impact upon the patient’s repertoire, how it may be experienced, how it affects the other person, and how it motivates actions in response. These shall figure as givens, essential to venture meaning hypotheses about the intentionality of the symptom.

When Gestalt therapy states that the symptom begins by being—at the moment of its constitution—a creative adjustment to the situation or an attempt, however
awkward, to resolve the problem encountered, it acknowledges implicitly the intentionality of that symptom. The symptom is a trying- or a meaning-to-say addressed to someone [vouloir-dire adressé].

Synthesis

Basing my remarks on the works of Brentano, Husserl, and some of their successors (without pledging complete allegiance, nonetheless, to their arguments), I have sought to show how the concept of intentionality could prove valuable in the domain of psychotherapy. Other Gestalt therapist authors, notably Pietro Cavaleri, have placed this concept at the center of their thought. Yet it seems to me impossible to follow Cavaleri in his definition of intentionality, since he assimilates Goodman’s “deliberateness” to Husserl’s intentionality. That way, intentionality becomes, for Cavaleri, a characteristic of the self in the mode of ego functioning. This conception of intentionality probably corresponds to a contemporary use of the term, as when one gives excuses, for example: “I did not do this intentionally.” There, intentionally clearly corresponds to “deliberately.” For my part, I would situate intentionality as constitutive of the emergence of the figure, and I would thus see it as tied more to the “id of the situation” and to its “…and next,” in a field perspective. If individuation is to be sought, as I have proposed, on the side of bringing to light the reflections of this intentionality, then I can only approach it in the clinical situation in vagueness and confusion. Only by starting from deliberate intentions and working back to that imprecise intentionality, which speaks as readily of self as of the other and of the situation, can we disengage from the self a part of the play of representations established in advance by the personality function, in order to allow it (the self) to accede to an ego mode solidly tied to the id of the situation. It is therefore to a psychopathology of pre-contact that our reflection will bring us; it is that which will constitute the second section of our essay.

II

The Vague and the Confused

It is to Eugene Minkowski that I owe the above mentioned two concepts—the vague and the confused. They seem to me particularly appropriate for evoking this phase of the process of construction and destruction of gestalts, which is situated at the moment of emergence and/or the construction of the figure; that is, at the fertile exit from the void that, according to Perls, defines the zero point, the before and the after, of every gestalt.

In the therapeutic process, such as the gestalt therapist expresses it, each sequence is ordered as a “dance” of figures and grounds. Over the course of the pre-contact, a figure is constituted and gradually differentiated from the ground. The background of the figure—or simply its ground—nourishes and sustains the figure, and it is only in the relationship between the figure and
ground that we encounter meaning. The figure gives meaning to the ground, which, without it, would only be confusion and vague associations, just as the ground gives meaning to the figure that it raises and sustains. This figure-ground relationship is intentionality, meaning direction, and excitation-toward. In the following phase of setting in contact \( [mise en contact] \), the intentionality of the figure-ground relationship will gain fullness and precision, clarity and firmness, through the unfolding of contact according to predominantly active and deliberate modes.

Sometimes the patient comes to a session with a firmly constituted theme, problem, demand, or emotion. This formation, this meaning constitution was effectuated in advance and the figure that he thus brings with him is, in a sense, the bud ready to burst open.

Yet this figure is already filled with history and representations, language and presuppositions. “The meaning bank is the individual’s memory.”\(^{\text{xxxiii}}\) It is not that I would claim to be able to arrive at a tabula rasa, free of the impact of the personality-function in the formation of the experience to-come \( [l’expérience à-venir] \). There is nonetheless a certain play we must introduce into what might otherwise be a set of gears, too well oiled. We introduce a measure of uncertainty, even doubt. This is what the Gestalt therapist does (sometimes intuitively), when he refuses to take, as is, the figure (or screen-figure?) that the patient brings to him, but rather unfolds it with him. In so doing, the therapist returns in a sense to the conditions of its elaboration. He returns to the bringing to light of the very materials used in the figure’s construction. He combs through \( [ratisse] \) and rejoins the elements constituting the ground: thoughts, experiences, sensations, gestures, analogical language, associations, verbal and nonverbal expressions, sentiments and emotions, fragments of signification, etc. Aiming to reach the background of the figure provided, this work often redistributes the excitation and—precisely because it takes the situational present and the presence of another person into account—inflects and recomposes the direction of meaning; it complexifies intentionality by amplifying the confusion. Minkowski clearly showed how what should remain united or whole sometimes finds itself separated; he called this phenomenon, “disjunction.” To its contrary—which Minkowski called the “tie” that binds, albeit abusively at times—he opposed what should remain separated. If he showed clearly how these phenomena are at work in certain pathologies characterized as epilepsy and schizophrenia, Minkowski also specified how, according to more indistinct modes, they operate in the world of forms. These figures we find brought to us are filled with ties and disjunctions, tied to history, to narrative identity, to context and to many other factors—and it is in this precise place that “play” and mobility should be introduced. To be sure, new disjunctions and ties will not fail to arise, which will perhaps become the objects of new upheavals. It is in the activation of these processes that a fundamental part of the therapeutic work operates (the foundations). And it is there that the term “work” takes on its full meaning—a term with which I am quite content when I think that one says of a fine wooden instrument that the wood “works.”

“We now have reality before us anew, in its primary fullness. Now, in accordance with various demands, we cut slices or sections out of this reality. It
is in this way...that we come to pose the “object” before us. We do this not by separating it from other objects...but by cutting out all that gravitates round it, all that envelopes it primitively and attaches it to the whole. That is, we cut out all that living and moving atmosphere into which it is plunged (that atmosphere in which everything seems to have to be confounded), by finding there simultaneously its original source—made up of that breath of poetry that passes through reality and belongs to it by the same right that prose does, made up likewise of that sphere in which words forming images and metaphors experienced (and accessible to each of us) find their place and translate, at almost every instant and in so expressive a way, that side of life. Would it not suffice, in Minkowski’s magnificent description, to speak of the “figure” instead the object, to rediscover, at work, that process of construction on which the patient and the therapist collaborate?

But this disjunction dialectizes with the tie that binds: “Life is in no way made up of objects situated in space, nor of facts situated in time. Life is made of that dynamism that governs everything. In man, we also find the need to follow this path; to attach, to establish a tie.”

Minkowski sketched the conjuncture between confusion and the mechanism of the tie. “In confusion, things that ought to come apart impinge upon each other, they enter into each other and, in a word, get confused.” Experiences get agglomerated, amalgamated, mixed together. No figure can then emerge with precise contours, limits, relief, brilliance or fullness. The Gestalt therapist recognizes there one of the clinical forms of confluence which, according to our founders’ terminology, prevents the discovery-and-invention of a figure in regard to a ground. As we showed in a previous study, if confluence allows us to bind experience, then it also knows how to alienate experience by holding it in a murky feeling from which the figure struggles to extract itself.

Another characteristic of the confluent experience can be approached through Minkowski’s concept of “the vague.” Here again, “the contours, limits, and boundaries prove to be compromised; partly erased, they grow frayed, lack precision, and cease to be clear cut. But this deficiency does not come from the various objects being substituted for each other and getting into a muddle, the dimming or effacement points toward the object itself.” A word is vague; needs are vague; intentionality is vague and, as long as it remains vague, the figure will have difficulty emerging as such in the subject’s field of experience. Yet the figure is there, nascent as it were, since it is in formation. Confusion, or ‘the confused’, is no doubt prior since it contaminates the emergence of the figure. From this imprecise emergence, a form with more differentiated contours detaches itself; at first it is vague, but it can perhaps become more precise, that is, unified. The confused is clearly found more at the level of felt [du ressenti], or lived, experience, whereas the vague already begins to limit, extract, to think and to come together into a figure.

The vague and the confused make wandering, straying, and distraction possible. The progressive differentiation to which they may give rise, with the support of the therapist as the figure takes shape, constitutes the essential part of the moment of pre-contact in the construction of the Gestalt. Out of the initial
confusion, the beginnings of consciousness are extracted. Combing through them [le ratissage] allows us to gather up vague forms or experience-extracts that, once assembled, will constitute themselves into a more and more precise and pregnant figure.

The confused and the vague can be anxiogenic, which can lead the subject to make hasty differentiations whose product can itself be immobilized in a fixed form. The form gets fixed, here, because it has served its purpose containing anxiety in a given situation, but now gets repeated, ignoring the transformations in the originary situation.

The emergence of a precise figure can likewise generate anxiety. Confluence allows us to interrupt the process by a return to confusion, vagueness, or the undifferentiated.

In the construction of the Gestalt, this is a moment both particularly delicate and potentially fertile in the therapeutic encounter, since it sets the process of individuation back to work from the ground up. The paradigm of thinking—since Aristotle no doubt—has reduced individuation to the individuated entity. It is the constituted individual who structures the real, not the real that presides over individuation. Stability [le stable], on which the notion of the individual rests, is thus considered the very form of existence. But in every domain, the most stable state is death. Life, on the contrary, is mobility and process. Each moment offers the renewed possibility of taking up genesis, of engaging becoming on the basis of the complex situations in the present, and thus the possibility of being engaged in a recomposition of processes starting from states.

The therapist can contribute to this process of disjoining; he can contribute to the differentiation of composites and to the separation of linkages [conjointures]. Obviously, it is not a question of substituting new, presumably more fitting, ties for old connections supposed to be dysfunctional. It is much more a matter of introducing mobility in such a way that nascent experience can modulate its available and accessible materials into creative configurations, themselves unceasingly renewed.

It is to a truly aesthetic function that the therapist is invited in this phase of therapeutic experience: he follows the shaping, the Gestaltung, to the same degree that the patient sets his own aesthetic functions in motion to constitute a figure from the elements in presence. In his own time, Freud opposed the painter’s act to that of the sculptor. The first works by adding matter in successive strata, and so, works by additions and layers. The sculptor, Freud explained, proceeds by successive removals: he causes a form to arise by removing matter, shard by shard, shaving by shaving. In the twentieth century, artistic creation diversified the modes by which it created forms: the painter can tear his canvas, glue and cement, scratch and cut. The sculptor can assemble heterogeneous materials (cf. the work of Boltanski, Annette Messager, etc.); he can work by compression or expansion (César, etc), by accumulations and juxtapositions (Arman, etc.), wrappings and coverings (Christo); he can solder (Giacometti), work with the Readymade (Duchamp), assemble constructions
(Panamarenko’s war or flying machines, the igloos of Mario Mertz), etc. And why not extend the metaphor to other formal practices: making the strings of a cello vibrate, dancing, setting the stage, orchestrating, modulating the voice, poetizing, dramatizing, clowning, recounting, producing images, and other metaphors. Each aesthetic practice contains its talents and its limits. Each one teaches us new characteristics of the process of taking-shape. In the same way, the fabrication of symptoms and dysfunction arises from this same dynamic of taking-shape, as Rank demonstrated and as other Gestalt theorists like Michael V. Miller have attempted to show in their approach to psychopathological phenomena.

This mode of formation or assembly allows us to approach what Merleau-Ponty called “the speaking word” [parole parlante]. What he is designating with this expression is the word, animated by a signifying intention in its incipience; the word which attempts to “put into words a certain silence” that preceded the intention itself. Merleau-Ponty opposes the speaking word to the “spoken word” [parole parlée], which rests upon sedimented meanings and “enjoys the available meanings the way one enjoys an acquired fortune.” On the basis of these acquired and available meanings, the creator, like the child, is able to produce other expressive acts and to repeatedly transform the spoken word into word that speaks anew. It is useful, in this regard, to read Goodman’s pages on chatter and poetry, in Chapter VII of his Gestalt Therapy.

III

The Intention nascent, in the Body

Out of that initial chaos—vague and confused; out of that present or recovered confluence, or again, out of that pre-differentiation which we rediscover by working our way back behind premature differentiations, the dynamic of individuation rests upon the formation of intentions, their identification and acknowledgement. If we accept an hypothesis of the field [hypothèse de champ] and thus of situated activity or the situated word, then a vague intentionality—which, originally, is only a direction of meaning—will be more readily discovered and/or invented on the side of the speaking word [parole parlante] than on that of the spoken word [parole parlée]. At least we will be searching for the speaking word within the spoken word.

The body “is not just one expressive space among all the others, but the very origin of all the others, the very movement of expression...a primordial, signifying operation in which what is expressed does not exist apart from the expression itself. Meaning animates my body as it animates my nascent word. Intentionality and corporeity mutually awaken each other. It is not with clear meanings or an elaborate thought that the other person communicates with me, or I primarily with him. Rather, it is through a certain bodily style of being, with a speaking word whether it be verbal or non-verbal. And my reception of the other person’s intentionality is not a reflected thought. It is not a reflective and explicit consciousness, but a certain form of my existence in the mode of “being-affected.”
“The communication or comprehension of gestures is achieved thanks to the reciprocit between my intentions and the gestures of the other person, between my gestures and the intentions legible in the other’s behavior. Everything happens as though the other’s intention inhabited my body, or as though my intentions inhabited his. The gesture that I witness sketches the outline of an intentional object in a kind of dotted line. This object becomes actual, and it is fully understood when my body’s powers adjust to it and cover it. The gesture is before me like a question, it indicates to me certain perceptible points in the world, it invites me to join it there,”⁴⁷ as Merleau-Ponty writes magnificently.

It is not so much words or representations that establish primary communication, as a signifying intention that sets words and bodies in motion within an implicit register. There is someone facing the patient and, in an act (conscious or not), there is an intentionality that focuses on and affects him. It is in this respect that the tentative setting into words of the way in which the other person affects me, reflects a certain number of indices that may allow us to shed light on his implicit aim and thereby contribute to its differentiation.

The expressivity of the body should be distinguished from the intention to signify. To signify, in effect, consists in using a sign to designate an object and its meaning to another person. But expressing [exprimer] does not imply the mediation of a sign. The smile is not a sign referring to some meaning; the smile is the corporeal modality of meaning. It is intentionality lived by the subject, and it will become meaning in being perceived by the other person, and in the return he gives it.

The corporeal lived experience [vécu corporel] of a subject is rarely independent of the intentionality it contains. In this regard, I would invite the doubting reader to try a very simple experiment. In focusing your consciousness subtly, gently touch, before your eyes, the tip of your left index finger with your right index finger. Keep in mind the distinct sensations you noted in each of your index fingers. Then do the opposite movement. That is, touch your right index finger, this time, with your left index finger. You will doubtless note that, at the contact point, the sensations are different according as your finger is animated by a “touching” intentionality or by a “being touched” intentionality. From a strictly mechanical point of view, the sensations ought to be the same. However, when the touched reverses into the touching, that which organizes the difference arises from a specific intentionality, and not from some objectifiable factor.

But the sole access I can have to the other’s intentionality is tied to his expressivity. “A priori, the other person is defined in each system by his expressive value, that is, by his implicit and enveloping value...The other cannot be separated from the expressivity that constitutes him...To grasp the other as he is, we were justified in calling for specific conditions of experience; that is, the moment in which the expressed does not yet exist (for us) outside of that which expressed it,”⁴⁸ as Deleuze maintains. He even adds, “we must understand that the other person is not a structure among others within the field...
of perception. He is the structure that conditions the field in its totality, as well as the functioning of that totality.\textsuperscript{xlix}

Phenomenology has taught us that it is impossible to separate things from their manner of appearing to someone. This hypothesis sets us radically apart from the belief in the neutrality of the therapist. It invites us, on the contrary, to consider the modes according to which things appear to him as constituting the phenomena themselves. Far from deploring the presence of my subjectivity (including the influence it has in determining the organization of the field), I lay claim to my “being-affected,” as a tool by which to comprehend the other. Georges Braque said that the painter did not seek to “reconstitute an anecdotal fact, but rather to constitute a pictorial fact.”\textsuperscript{1} By analogy, I would readily say that the therapist does not seek to reconstitute an anecdotal fact, but rather to constitute a therapeutic fact.

We are thus distancing ourselves from an approach that would call itself scientific, in order to enter fully into an aesthetic procedure [démarche esthétique]. If I want to comprehend (and I mean to com-prehend, not to explicate) and feel light, to whom shall I turn more readily? To the physicists who speak to me of photons and undulatory phenomena, or to the works of painters of past centuries? The therapeutic situation is where a taking-form or taking-shape occurs; it is a situation of construction and deconstruction of forms (Gestalts), in and through the encounter, which may be conflictual, of two intentionalities.

\section*{Provisional Conclusion}

A number of philosophical, sociological, psychological or psychotherapeutic approaches have placed the notion of the subject at the heart of their theories and practices. Our thought patterns are constructed on this prejudice. According to these approaches, the self (or the subject, etc., whatever the name we choose to give it) is assigned a forced residence because it has been confused with the individual. It is therefore shut up and alienated. The Gestalt therapy born in the 1940s and ‘50s undertook a theorization for psychotherapy that vanished into the cracks that this system of thought had begun to manifest. The cracks became breaks or gaps, and then faults, and finally a paradigm change.

Everything should be rebuilt in the perspective of the field: therapy is to be rethought as a situation; practice, as an encounter; expression, as an effect of the field. Indeed, we must rethink expression as an effect of the field before being the manifestation of a psyche—which it (the psyche) generates rather than following from that psyche.

In the therapeutic encounter, the one and the other may be tempted to position themselves as \textit{a priori} constituted, as individuated. This is a modality that has stood its tests over the decades. Another modality can come into being on the bases established by our founders, and their definition of the self. As a catalyst
of functions requisite for contact with novelty and for realizing creative adjustments, the self is engaged in the situation. The Gestalt therapist is engaged in the situation, and this engagement is part of the very structuring of the field. He affects the other person and the other affects him. The implicit intention of each party can be stammeringly expressed on the basis of each one’s experience, such as he feels and perceives it. In this respect, the moment of pre-contact, the moment of emergence and/or construction of the figure, is determinative. In effect, it allows us to orient ourselves in the ‘same’, that is, in what is known, in the narrative. It may also allow us to start from an undifferentiated site, which will have to be individuated continuously, on-goingly. Thus, recalling Medard Boss’s tale with which we began this essay, the therapist will have to add his “camel” to the givens of the situation, and without even knowing what will come of it. His intentionality will simply be to open conditions of possibility—the forms of which remain to be created.

Translated from French by Bettina BERGO

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NOTES


'Gary Yontef, “Comments on ‘Boundary Processes and Boundary States’,” Miller, in The Gestalt Journal, Vol. XI, No. 2, pp. 25-36. “Process is often opposed to structure. However, in Gestalt therapy’s theory of the field, we can conceive structure simply as a process that evolves slowly, [where] states and structures lose their appearance as processes, because they are framed in such a way that they no longer evince the dynamic aspect of the process. The difference resides in the way in which they are framed.” p. 29.


xxii Ibid., p. 46.


xxviii In this epigram, almost as curious in French as in English, Robine is playing on the subject and the objective genitives. Thus, the expression can mean: “the fact of stating what we undergo or experience,” or “the speech, or self-expression, of the experience itself.” Leaving these two genitives in flux is clearly the author’s intention, as it bespeaks the experience such as he explained it in the previous paragraph.—Trans.


xxl Ibid., p. 696.

xxli Ibid., p. 699.

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