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## Isomorphism: A Bridge to Connect Gestalt Therapy, Gestalt Theory and Neurosciences<sup>1</sup>

### 1. Introduction

In this work I will highlight an epistemological turning point in hermeneutics and clinical work shared by Gestalt therapy, Gestalt theory and Neurosciences. I will use the concept of isomorphism as a possible bridge connecting these three methods, and finally I will present the clinical consequences of this change of perspective.

I understand that to address isomorphism within any one of these areas would be challenge enough. To flesh out the concept as a connecting principle across the three areas is a vastly ambitious undertaking. Therefore I want to note at the outset that my interest is speculative rather than theoretical: the concept of isomorphism, the discovery of mirror neurons and the theory of contact of Gestalt therapy endorse the fact that what “resides” in our brain is the capability to creatively adjust to the other/environment, inferring their intentional movements.

From the beginning of the 20<sup>th</sup> century, Gestalt theory has developed the phenomenological perspective<sup>2</sup> in European psychology, using a research method (referred to as phenomenological or experimental phenomenological) based on an accurate description of the immediate experience of situations(-stimulus) by individuals. Hence, the study of perception was put in the spotlight, and the focus was shifted onto senses and sensory experience.

In the '40s, Frederick and Laura Perls, a couple of psychoanalysts who had studied in Goldstein's laboratory in Frankfurt, tried to integrate in their psychoanalytic practice the attention to senses and to what is perceived which they had learnt as scholars of Gestalt theory, in order to go beyond those aspects they identified as the limits of psychoanalysis. Gestalt theory played a crucial role in the epistemo-

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<sup>1</sup> I wish to thank Prof. Fiorenza Toccafondi for her suggestions on this article. A longer version can be found in Spagnuolo Lobb M. (2013). *Isomorfismo: un ponte concettuale tra psicoterapia della Gestalt, psicologia della Gestalt e neuroscienze*. In: Cavaleri, P.A. (ed): *Psicoterapia della Gestalt e Neuroscienze. Dall'isomorfismo alla simulazione incarnata*. Milano: Franco Angeli.

<sup>2</sup> This partly influenced the Cognitivism of the '60s in terms of the attention paid to innate aspects of behavior.

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logical change which progressively occurred in the clinical thought of this couple, who would eventually found Gestalt therapy<sup>3</sup> in New York together with others. The fact that they focused on the concreteness of sensory experience also radically changed the anthropology and treatment perspective which characterized psychoanalysis at the time, no longer emphasizing the analysis (and the Cartesian dichotomy), but the support to intentionality (and the aesthetics of contact).

In the '90s, the discoveries of neurosciences proved the existence of structures in the brain which are responsible for the perception of emotional and intentional factors belonging to the other (perceived object). These discoveries make us speculate, on the one hand, on the unitary condition between organism and environment which occurs before the formation of a separate self, and, on the other hand, on a sort of isomorphism (cf. Eagle & Wakefield 2011) between brain functioning and relational life. It follows that our brain is made to be relational.

This is not because it builds relationships on the basis of sensory data; conversely, sensory data – which emerge from a “being-with” as figures connecting with other complex data in a shared background – allow us to be part of a “natural self-evidence”, and to belong to the world (cf. Blankenburg 1998; Spagnuolo Lobb 2013a; 2013b). Today, studying perception, neurosciences find that it occurs when there is a capability of feeling the other, even when the perception of the other is not part of one’s personal experience (cf. Rubino 2011): a sort of “intuitive wisdom” which leads back to a primary, unitary condition between organism and environment, of which our brain preserves a trace. The survival function of this correspondence between self and world<sup>4</sup> in terms of evolution is obvious. Hence, we can explain isomorphism: we perceive the world through brain structures and functions which reproduce its essence.

We are born with the ability to be with the other, and during our life we can develop this competence or block it. Thus, the purpose of therapy is no longer to analyze unconscious dynamics in order to enable the formation of a self based on the principle of reality, but to stay within the shared background and draw from it the solidity of perception which allows the differentiation of an I from a You.

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<sup>3</sup> See Bocian (2012) for a biography of the years this couple spent in Berlin – in the heart of Mitteleuropean culture – elaborating those innovative ideas which would be at the basis of the birth of Gestalt therapy in New York in the '50s.

<sup>4</sup> As Köhler wrote (1938, 396): “*The principle of psychophysical isomorphism follows from the principle of evolution. Isomorphism represents indeed the only way in which mental life can be dynamically interpreted, in which it can become a subject matter of physics.*” If we want to consider the mirror neuron discovery, or the theory of embodied simulation, we might want to consider it in the context of invariant dynamics – suggestive of a kind of universality in felt experience (described well by Köhler in his *Psychology and Evolution*, 1950, as well as *Place of Value*).

## 2. The Concept of Isomorphism and the Overcoming of Dichotomies

In order to build the bridge which connects these three approaches (Gestalt therapy, Gestalt theory and neurosciences), I shall start from an in-depth analysis of the concept of isomorphism. As affirmed by Henle (1984), it is the concept which has been subject to the greatest number of misunderstandings in Gestalt theory.

Given the considerable confusion surrounding interpretation of the concept (cf. Luccio 2010), and its susceptibility to gross misunderstanding and misrepresentation, it is important not to add to that confusion. It is important to maintain clarity regarding what the original conception was, and in which way I use it here. In Wertheimer's laboratory, around 1911, great enthusiasm was in the air. Wertheimer's idea was to integrate a physiological theory in psychology, and Koffka and Köhler, the two researchers who had taken part as subjects in the *phi* phenomenon experiment (conducted by Wertheimer in Frankfurt) saw this as a chance for release from the prison represented by the associationist psychology of the late 19th century (which lacked concreteness). However, it was Köhler – not Koffka – who fully developed Wertheimer's intuition, accounting for the hypothesis of isomorphism<sup>5</sup>.

We could simplify and say that isomorphism<sup>6</sup> means that when we are aware of something, something equivalent is happening in our central nervous system. Thus, there is a similarity (to be defined) between the phenomenal field and neurophysiology.

Köhler himself stressed the need to distinguish between verbal explanations and actual, substantiated conclusions. In *Place of Value* (1938, 174) he distinguishes between “verbal rather than substantial achievements”, specifically in relation to isomorphism.

Wertheimer and Köhler agree that neurophysiology and phenomenology are the isomorphic domains. In other words, every experience has a corresponding neurophysiological structure which makes it possible. If we perceive a triangle with three non-aligned points, there will be a neurophysiological structure which will enable us to unify the three stimuli in a unitary rational figure. However, it is not clear whether the isomorphism regards structures or functions (Luccio 2010, 240). In other words, if we consider the capability to integrate different stimuli in a unitary figure, is the corresponding neurophysiological form a structure en-

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<sup>5</sup> For an in-depth study of the term “isomorphism” by Gestalt theorists Wertheimer, Köhler and Koffka, see Luchins & Luchins (1999) and Luccio (2010).

<sup>6</sup> In abstract algebra, the word “isomorphism” (from the Greek: ἴσος *isos* “equal”, and μορφή *morphé* “shape”) applies when two complex structures can be mapped onto each other, in such a way that for each part of one structure there is a corresponding part in the other structure (cf. Hofstadter as quoted in Wikipedia).

trusted with the integration or the function of the integration of synaptic connections?

The phenomenology of Gestalt psychology seems to bring the field of consciousness and the phenomenal<sup>7</sup> field together, identifying phenomenal reality (one's experience, the inner world) as its main subject of research and distinguishing it from the transphenomenal or meta-empirical reality (the biological, physical and social world, transcendent with regard to consciousness).<sup>8</sup> It is therefore identified as the "science of the immediate phenomenal datum". The phenomenal datum is what is given, what is manifested, what is shown to the consciousness "here and now". The innovative aspect of this formulation is that every phenomenal datum is immediate, every experience is direct; the time of experience is "a non-stop here and now". As affirmed by Lanfredini (2009, 140):

"Phenomenal consciousness is essentially, although not thoroughly, intentional. Actually, even though non-intentional experiences exist – for instance, sensations – a consciousness which is not supplied with a certain degree of openness towards the world which takes shape while moving towards objects, events, processes and so on, cannot be defined as thoroughly intentional".

Therefore, the consciousness must be characterized by the property of intentionality, in order to be distinguished from the phenomenal I become conscious when I activate myself towards the world. This is also the core element of the theory of contact experience according to Gestalt therapy (Perls *et al.* 1951; Bloom 2003). It is important to mention that there are several different points of view on isomorphism. Some scholars have even associated the concept of isomorphism with Cartesian or ontological dualism (cf. for instance Boring's critique 1933; 1936). As underlined by Toccafondi (2002), time after time, Gestalt theory has been considered neo-Kantian, idealist, or even empiricist.

The revolutionary intuition of Gestalt theory – and this is what is worth underlining here – is to assume the existence of unifying psychological processes (to which physiological structures correspond) above stimuli, and to apply this to human relations and clinical situations. Perl's ingenious clinical intuition was to apply this to psychoanalysis. Neurosciences provide physiological evidence to support this.

A consequence of this epistemological turning point is the overcoming of the dichotomous thought, an epistemological basis of phenomenology, which connects our approach to Gestalt theory and, as we shall see later, to neurosciences.

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<sup>7</sup> Phenomenology is the science which studies the phenomenal field, that is to say, how direct experience of the world occurs.

<sup>8</sup> The distinction between phenomenal and physical has been approached by Köhler (1938, 148 f.) who exemplifies that body refers to phenomenal experience, while organism refers to the physical world.

Luccio (2010, 254) reminds us: “Henle (1987) proves that it is impossible to collocate Gestalt theory, and Wolfgang Köhler in particular, in the frame of the classical dichotomies which have largely been employed in psychological theories”. This is what we read in the introduction of the founding book, *Gestalt Therapy*:

“This book concentrates on (...) a series of such neurotic dichotomies of theory, leading up to a theory of the self and its creative action. We proceed from problems of primary perception and reality through considerations of human development and speech to problems of society, morals, and personality” (Perls, Hefferline & Goodman 1994, 17).

The basic principle is to stay with what works and develops; with what is, rather than falling into the trap of categorizing reality, and of establishing what should or should not be (cf. Spagnuolo Lobb 2013, 77).

As far as neurosciences are concerned, Damasio (2003, 139) refers to James to affirm that feelings are necessarily a perception of the real body as modified by emotion, thus placing the body at the center of experience and going beyond the Cartesian dichotomy between *res cogitans* and *res extensa*. Other contemporary neuroscientists, such as Varela (Varela, Thompson & Rosch 1991), LeDoux (1996), Kandel *et al.* (2000) have hypothesized an *integration* among the traces left on the body by the sensory channels and the bodily traces which have already been memorized by the central nervous system (Piccolo 2011, 507).

### **3. Isomorphism and Co-Creation of Self at the Contact Boundary in the Organism-Environment Field**

The discovery of mirror neurons – as underlined by Eagle & Wakefield (2011) – incontestably recalls the concept of isomorphism proposed by Gestalt theorists 70 years earlier<sup>9</sup>. We might think of an accordance between Gestalt theory and the theory of embodied simulation developed by Gallese (2003) about the non-inferential perceptual directness of our understanding of others’ internal mental states<sup>10</sup>.

Clearly the mirror neuron discovery, indicating some capacity for direct representation of feelings and intentions of the other - a shared, indwelling, largely unlearned language of emotional meanings registering seamlessly in our perception of the other - is fully consonant with the Gestalt-theoretical view. In the broadest of terms, it offers evidence for some sort of neural correlate of the experienced

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<sup>9</sup> Cf. Koffka, 1924: “...the perception in the mind of an onlooker, if it so constituted as to embrace what is going on in the agent, must itself possess a similar articulation. And hence *the experience of agent A and the observant B must resemble each other*” (Koffka 1924, 130-131. Emphasis added. Quotation taken from Eagle & Wakefield 2011, 48).

<sup>10</sup> Gallese (2003, 520): “(...) we seldom engage in *explicit and deliberate interpretative acts*. The majority of the time our understanding of situation is immediate, automatic, and almost reflex-like”.

‘other’, where that ‘other’ is experienced not simply as an object, but as a ‘subjectivity’, with whom one shares a common language of feeling and care. This is true although Köhler focuses on molar, not micro-processes (as in the case of mirror neurons): “It is only macroscopic structures which can be common characteristics of the perceptual and physical world (Köhler 1938, 146)

But what is the advantage this endorsement can give to psychotherapy? I believe that, somehow, the discovery of mirror neurons and the subsequent theory of embodied simulation developed by Gallese (2003)<sup>11</sup> endorse even more the idea that isomorphism is about the creation of the self at the contact boundary, rather than the mere perceptive process. What “resides” in our brain is the capability to creatively adjust to the other/environment, inferring their intentional movements. Thus, what is endorsed by the mirror system and the theory of embodied simulation is not just a subjective perceptive modality, but an *adaptive capability* which must necessarily involve the other, or rather, *the other’s movement*, through a spontaneous process of creative adjustment, a continuous stream of adaptive movements which, for us, correspond to the development of the self in contact (cf. Spagnuolo Lobb 2013, 73-100).

This perspective has important clinical implications: the basic anthropological approach is that of an isomorphic relationship also between nature and culture (not only between the phenomenal and neurophysiology), with a subsequent positive vision of human nature, which should be recovered rather than sublimated, in its capability to creatively adjust, to perceive the other rationally through one’s senses (cf. Spagnuolo Lobb 2013, 145 ff.). Impulses such as hunger or aggressiveness (cf. Perls 1942) are tools for adjustment and acknowledgement of the world, not for primordial chaos. Psychotherapy should help to “get in contact” through one’s senses (where one’s mind is part of the sensory process).

This *trait d’union* which connects Gestalt therapy, Gestalt theory and neurosciences is an important epistemological turn in the way we approach diagnosis and treatment.

#### **4. The Phenomenology of Co-Created Contact**

Specifically, Gestalt therapy deals with what happens “between”, in the boundary space “between” organisms-in-contact (the self is defined as the process of contact, cfr. Perls *et al.*, 1994, 151). When they meet, organisms form an experiential field in which emerge energies that – through a process of mutual, creative adaptation – lead to growth. The focus – in particular as regards contemporary

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<sup>11</sup> Also cf. the studies mentioned in Eagle & Wakefield (2011, 46): Fadiga *et al.* 1995; Rizzolatti *et al.* 1996; Grafton *et al.* 1996; Dimberg 1982; Dimberg & Thunberg 1998; Dimberg, Thunberg & Elmehed 2000; Lunqvist & Dimberg 1995.

Gestalt therapy – is on what happens at the boundary, rather than on the effects of individual growth.

Gestalt theory, historically, has developed a phenomenological understanding of the processes of perception, and consequently has dealt with, among others, the problem of consciousness<sup>12</sup>. Gestalt therapy, in its attempt to integrate the phenomenological approach to psychoanalysis, has focused on the process of contact between therapist and patient, in the here-and-now. They both focus on the place and time in which the patient – with her/his pain and desire to live a better life – and the therapist, with her/his science, art and compassion towards the world – synchronize their intentions in order to transform a story of relational suffering into a story of spontaneous ability to reach the other.<sup>13</sup>

As a Gestalt therapist, my knowledge of Gestalt theory concepts of self is limited, and I will describe Gestalt therapy theory better than Gestalt theory, whose concepts of ego and self are different in many respect from the Gestalt therapy theory of self (mostly for epistemological reasons). But they also share some points, and one in particular: they both see ego and self not as fixed entities but as field processes (though they have different field concepts).

Almost half a century after the birth of Gestalt theory – in response to the needs of the time, to reassess the role of the ego and to give voice to the democratic (and potentially anarchic) soul of its founders – Gestalt therapy suggested that creative response (in line with Wertheimer's active, integrated theory) does not only allow the organism to survive: it also allows the individual to happily belong to society (cf. Spagnuolo Lobb *et al.* 1996). This new approach modified the trends of the time, founding a theory of the self capable of grasping the spontaneity of the contact experience between the organism and its environment *in fieri*.

Therefore, self, the hinge on which all psychotherapeutic approaches are based, is conceived in *Gestalt therapy*<sup>14</sup> as the ability of the organism to make contact with its environment – spontaneously, deliberately and creatively. The function of the self is to contact the environment (in our terminology, the “how” of human nature) (cfr. Spagnuolo Lobb 2013, 81); it is regulated by the dynamic of creative adjustment (Spagnuolo Lobb & Amendt-Lyon 2003).

For Gestalt therapy, the *organism/environment field* is a phenomenological con-

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<sup>12</sup> In some respects, in parallel with American pragmatism and the theories of consciousness of Dewey & James (two roots, inter alia, of Gestalt therapy), in an attempt to resolve the issue of conscious and unconscious perception.

<sup>13</sup> See Walter (1990) for a description of the connection between Gestalt theory and Gestalt therapy.

<sup>14</sup> The book by Perls, Hefferline & Goodman (1951) to which the foundation of Gestalt therapy is usually attributed.

cept<sup>15</sup>, hence experiential. The field perspective allows us to think of perception as a ‘relational product’ strictly connected to the fullness of the concentration of the individuals involved at the contact boundary. In this way they are able to grasp both what is internal and what is external – both the needs or experiences of the self and the demands and the environmental conditions (cfr. Spagnuolo Lobb 2013, 80).<sup>16</sup>

Today the Gestalt community sees a renewed interest in the study of phenomenology with regard to intentionality, the *now-for-next*. The co-creation of the therapeutic experience is motivated – supported and directed – by an intentionality, which for the Gestalt approach is always an intentionality of contact with the other (cfr. Spagnuolo Lobb 2013, 33).

The integration processes – which Gestalt psychologists had understood as an individual dynamic of perception, although influenced by the field in which the individual is inserted – in Gestalt therapy are applied to the process of contacting the environment. This movement towards the only reality available to our senses, in other words the contact between our own self and the world (the moment when consciousness happens is a moment of contact, in which the senses are activated) was precisely the change of perspective which Gestalt therapy underwent. It is a – perhaps still immature – passage in the founding text by Perls, Hefferline & Goodman (1951), as emphasized by Wheeler (2000) and Macaluso (2014), who highlighted the – still individualistic for the most part – perspective of Perls *et al.*. However, it has certainly been greatly developed from the ’80s to this day (cf., for example, Yontef 1993; Ullman & Wheeler 2009; Jabobs & Hycner 2010; Spagnuolo Lobb 2010).

The patient’s feeling is grasped in its tension towards the significant other in the here-and-now and the therapist’s feeling is used as “world-of-the-life” of the patient, as *spontaneous environment*, which reacts to the patient and is in its turn enacted by her/him, with the difference, compared with the patient, that the therapist has a map to read the contact that is taking place in the here-and-now of the therapeutic encounter (cfr. Spagnuolo Lobb 2013, 34). The contact-boundary between therapist and patient is the place of the therapy and the patient tends

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<sup>15</sup> The concept of the organism-environment-field in Perls *et al.* (1951) has been borrowed from Gardner Murphy, who was the first to use this term and to outline the concept behind it in 1947 in his then very popular and influential book *Personality. A Biosocial Approach to Origins and Structures*. His concept of bio-social includes with no distinction the “biological” and the “social” (and phenomenal). In this sense, it is opposed to Wertheimer’s, Köhler’s, Koffka’s field concept (cf. Koffka 1935). Murphy’s concept, imported by Goodman into the founding book of Gestalt therapy (Perls *et al.* 1951), from one side may clash with the main phenomenological thread, from the other expresses the wish of the founders to overcome cultural dichotomies in Gestalt therapy thinking.

<sup>16</sup> See Cavaleri (2001) and Parlett (2005) for an in-depth examination of the perspective of the phenomenological field.

to be *more spontaneous* with the therapist than s/he has been able to be in preceding significant relationships. Treatment for us does not consist in analysis, but in the relational recognition of that intentionality of contact that had been blocked.

Here is a brief exchange, part of a session<sup>17</sup> in which the intentionality of contact is blocked by forms of introjection that prevent a full expansion of the self:

PATIENT: I think that basically you know that there's no hope for me: maybe I've made a tiny bit of progress, you've been very good with me, but I'll never be a high flyer. You know that. You're a high flyer, not me.

The patient feels a mixture of fear to expand, envy of and love for the therapist. We can also sense her desire to overcome fear and be herself.

The therapist supports the "interrupted gesture" of the patient, starting from the affection s/he feels for her.

THERAPIST: There's room for two high flyers in the sky. And I'd really like you to spread your wings, soar in the sky and have fun together.

P: Would you really like that?

T: Yes, I'd like it if as we were flying you told me the flaws in the way I fly, we could even play at telling each other our flaws!

The patient can thus re-own – by means of the game – the spontaneity of saying: "The king is naked", a spontaneity that was previously frozen by the rigidity of an environment that has not accepted the energy of the differentiation.

P: I guess you'd fly with a book on psychology in your hand: you'd never give up your intellectual style!

T: And I think that while you were flying you'd be concerned to see whether I was relaxed or angry with you... but I think you'd spread your wings anyway and relish your energy.

P: Yes, I think I can do it now, I know you don't feel limited or scared if I unfurl energy (*She gets up and spreads her arms as if she were flying. She looks at me and smiles happily*).

In co-creating the contact boundary from their different, converging intentions, therapist and patient allow the reconstruction of a relationship history in which the senses are available (i.e. not hindered by anxiety) and support the development of the intentionality of contact. The point is to allow one to reach the other, which results in a sense of self-growth, rather than self-mortification.

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<sup>17</sup> From Spagnuolo Lobb 2013, 135.

## 5. The Shared Paradigm of the Fleeting Moment

For all three approaches, the focus of research is upon the development of the experience with the other (or the world), understood as perceptual data which generates a movement, a tension-towards which emerges in a phenomenological field. This shared paradigm shifts the focus of observation and therapy on the ever-evolving “betweenness” between self and world, and implies that therapeutic action should take place in this “betweenness” – in other words, within the contact between therapist and patient, the fleeting space and time in which what matters is the music, the way in which certain emergency traits are activated by both sides in order to adapt creatively to the given situation.

The discoveries of neuroscience – according to which certain empathic processes are activated only when the observer is able to see an intentional movement by the other – make us think that the evolution and adaptation of the species are accomplished precisely in the development of contact, in other words the moment when subjects move towards each other. That is the fleeting, crucial moment when changes are made, not the subsequent one in which a person processes the experiences s/he has had.

Most certainly, reading or intervening in the fleeting moment of contact is much more difficult than reading or trying to intervene in the tracks left by experience on the individual. Yet this is what the epistemology that merges the three approaches leads us to, and it is also the greatest challenge of contemporary psychology, together with the new categories of movement and action-towards.

The most recent studies tell us that consciousness does not really respond to the categorization of data, but rather to the integration of different information. Thus, the more lively we are, the more we are able to give answers which are always new, because our brain integrates various information in different ways, and even a small modification in one factor might change the final solution. This is what the neuroscientists Edelman & Tononi (2000) affirm when they define consciousness as an “integrated information theory”.

It is appropriate here to recall the recent theoretical breakthroughs by Daniel Stern (2011) in his book *Forms of Vitality*, in which the psychoanalyst, developmental theorist and researcher, referring to the aesthetics of perception, states that movement is the perceptive unit *par excellence*: the meaning we give to the actions we see is related to the act of building a story, giving motion and sequentiality to pictures, even when they are static.

In summary, isomorphism, based on the sensory activity of the here-and-now and on the immediacy of the perceived phenomenon – which finds a correspondence in the neurological functions or structures – shifts the focus of attention on to perception as an action, understood as immediate sensory data, and on to

the process of creation of “good form”, of harmonious, meaningful integration of sensory data.

## 6. The Development of the Self at the Contact Boundary in Clinical Practice

I am pleased to conclude this work with a clinical example, taken from a live session that I held in the presence of Vittorio Gallese, and on which he later commented.<sup>18</sup>

The patient was a young therapist (unknown to me) trained in another approach, who lent herself as a volunteer. She complains about her difficulty in feeling emotions when she is in a psychotherapeutic setting with her patients.

THERAPIST: *(smiles)* Close your eyes, feel your own body, breathe.  
*(Silence. The patient starts the experiment).*

PATIENT: I can hear my heart beat.

T.: What I want you to do is make the same motion your heart makes, with my hand.

P.: *(Nods, approaches the therapist)* What do I have to do?

T.: Your heart, with my hand.

P.: You mean that I have to hold.. *(the patient holds the therapist's hand)*. Can I close my eyes?

T.: Yes.  
*(Their hand movements resemble a beating heart).*

T.: You move me so much, it's like feeling the center of your being.

P.: *(Smiles)*

T.: I can sense you. *(Silence)* You have a nice heartbeat. I feel that you are there.

P.: It's the same for me, because I can feel you too.

T.: Now, instead of talking *about* what's going on, let the movement talk: stay in your heart's movement, like you are already doing. See if any words come from this movement.

P.: Should I continue with the beat?

T.: Yes, yes: continue with the beat.

*(Silence)*

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<sup>18</sup> Both the session and the comment took place during a meeting with Professor Gallese, arranged by the Istituto di Gestalt HCC Italy in February 2011, in Palermo. They have been published in the journal *Quaderni di Gestalt*, 2011/2, 91-99. Cf. also Spagnuolo Lobb (2011, 117-129) for a systematic analysis of Gestalt clinical practice of the fleeting moment or *now-for-next*.

P: Well, the words are related to physical sensations, such as warmth. (...) I can also feel the pleasure of contact. It is a pleasant feeling.

T: Do you feel that I am here?

P: Yes.

*(The patient's hands pause for a moment and the therapist gently squeezes her hand).*

T: Whenever you get lost, I will stimulate you, and tell you to "come back".

P: *(Smiling, with her eyes still closed)* Yes, as if you were showing me the way.

*(Silence)*

T: Breathe.

P: Then, of course, I feel a bit confused.

T: Open your eyes. *(She opens her eyes)* How is it now?

P: *(Smiles)*. Less confused... and I still feel good!

T: Are you embarrassed?

P: No, it's not embarrassment, it is a pleasant emotion. Embarrassment, to me, belongs to a very different category of emotions. It's really nice. I don't know, I can't define it, it's a mixture of an emotion that's complex (and so not simple), of serenity and happiness, like a discovery.

T: Did you feel recognized?

P: Respected, for what I am. I feel recognized.

T: A nice heartbeat recognized.

P: *(Smiles)*.

T: It was nice to meet the beating of your heart. (...) I hope you discover your emotions.

P: Thank you.

T: Your heartbeat really is nice. *(Smiles)*.

P: *(Laughs)* Thank you. *(They retract their hands)*. (...) I feel very good, I'm moved, but these are all positive emotions. Even fear felt like it belonged to the good ones, as if it was a sort of healthy activation. I have to say that I felt their *(addressing the audience)* (...) presence, and it didn't bother me.

T: Thanks, it's good to see you brighter and more radiant.

The “established” purpose of this session was to reach the emotion (in response to the request of the patient). In the sensory evidence, experienced in solitude (the beating heart) I led her to make contact with me. I told her: “Make your heart with me”, assuming that the experience of the heartbeat was her experience at the contact boundary with me. (Spagnuolo Lobb & Gallese 2011, 98).

As also outlined in Professor Gallese’s comments after the session, in a phenomenological approach we support what already works, and already has a movement-towards, an intentionality, in order to let the client regain, in the here-and-now of the contact with the therapist, her/his interrupted intentionality (cf. Spagnuolo Lobb & Gallese 2011, 97).

An important clinical consequence of the paradigm shift which these three approaches share, is that the therapeutic action is not aimed at a deeper understanding of internal processes, but rather at a heightened awareness (presence in the senses, with a related energetic charge directed towards contact), which gives meaning to the being-with the other. This awareness is made up of physiological functions; of mental processes of integration of percepts, of emotions; of open gestalts and desires to accomplish one’s own way of being with the other, of the definition of a self that is able to feel and to want. It is defined in a particular movement-towards, which I call *now-for-next* (Spagnuolo Lobb 2013). All this complexity appears at the contact boundary with the therapist during the session – the only experienced reality in which it is possible to act, to create change.

## **7. Conclusion**

For the psychotherapist of the boundary, as for the gestalt psychologist, the focus of interest might be the unspoken word as well as the failed gesture, in the here-and-now of therapeutic contact, intended both at psychological and neurological processes.

Gestalt theory has provided a tool for observing perception while remaining adherent to the reality of the senses. What we see is the only reality of which we can be witnesses, and the way in which we perceive it is the only – relative – reality we can deal with.

This perspective is common to Gestalt theory, Gestalt therapy and neurosciences. All three disciplines choose to deal with the phenomenal field, although with different accents, and the concept of isomorphism is, in a sense, the expression of this.

This article provides a platform for an acknowledgement of intersubjectivity woven deeply and fully into human experience, with selfhood substantially a function of the self-other relation, with experience at that place of contact the most significant and revealing, and with the greatest opportunity for revelation and positive change.

## Summary

The Author highlights an epistemological turning point in the way to approach diagnosis and treatment shared by Gestalt therapy, Gestalt theory and Neurosciences. All three disciplines choose to deal with the phenomenal field, although with different accents, and the concept of isomorphism is, in a sense, the expression of this. The concept of isomorphism, the discovery of mirror neurons and the theory of contact of Gestalt therapy endorse the fact that what “resides” in our brain is the capability to creatively adjust to what is sensed at the contact boundary with the other/environment. Starting from Gestalt therapy’s renewed interest in the study of phenomenology, this article speculates on a more grounded connection between Gestalt theory and Gestalt therapy. Clinical consequences of this change of perspective are shown through a live session that the Author held in the presence of Vittorio Gallese, and on which he later commented.

**Keywords:** Isomorphism, Gestalt therapy, Gestalt theory, mirror neurons, now-for-next, contact boundary.

## Zusammenfassung

Die Autorin beleuchtet eine erkenntnistheoretische Wende in der Erarbeitung von Diagnose und Behandlung, die Gestalttherapie, Gestalttheorie und Neurowissenschaften gemeinsam sind. Alle drei Disziplinen setzen sich mit dem phänomenalen Feld auseinander, wenn auch mit unterschiedlichen Akzenten. Das Konzept des Isomorphismus ist, in gewissem Sinne, ein Ausdruck davon. Das Konzept des Isomorphismus, die Entdeckung der Spiegelneuronen und die Beziehungstheorie in der Gestalttherapie bestätigen die Tatsache, dass das, was in unserem Gehirn „wohnt“ die Fähigkeit ist, sich kreativ auf das, was an der Kontaktgrenze zu anderen und der Umwelt spürbar ist, einzustellen. Ausgehend von der Gestalttherapie und ihrem erneuten Interesse an der Phänomenologie, wird in diesem Beitrag über eine besser fundierte Verbindung zwischen Gestalttheorie und Gestalttherapie nachgedacht. Folgen dieses Perspektivenwechsels in der klinischen Arbeit werden durch eine Live-Sitzung, die die Autorin in Gegenwart von Vittorio Gallese hielt, und zu der dieser zu einem späteren Zeitpunkt Stellung nahm, anschaulich dargestellt.

**Schlüsselwörter:** Isomorphismus, Gestalttherapie, Gestalttheorie, Spiegelneuronen, now-for-next, Kontaktgrenze.

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