

# **CHAPTER 4**

## **A CONTEXTUAL FRAMEWORK**

### **A GESTALT APPROACH: TOWARDS THE HEALING OF THE EMOTIONALLY TRAUMATIZED CHILD**

#### **4.1 Introduction**

In chapter two and three the concepts of music and trauma was discussed, respectively. This discussion created a conceptual framework of reference for the researcher. Before the child can be discussed, a contextual framework needs to be created. This contextual framework will explain the context from which the researcher understands the healing process of an emotionally traumatized child.

The Gestalt approach is concerned with exploring and increasing the child's awareness of how he processes and responds to situations in his life, how he makes choices, interprets and understands the different experiences in his life. It is a process of the child developing more of an authentic self rather than a false sense of self. This process involves the child's search for *equilibrium* by focussing on aspects such as *awareness*, *contact*, *assimilation* and the *here and now*.

The child in Gestalt therapy has a dominant need that becomes *figure* during this process of searching for balance. The child meets this need by contacting the environment with certain behaviours. The contact is organized by the

figure of interest against the background of the environmental field. During the therapeutic process with the child, the therapist engages in a meaningful dialogue while assessing and exploring the situation that is in the *foreground*. With greater awareness it is believed that the child would have greater clarity in making choices, and thereby remove those thoughts and feelings that are blocking his way towards healing. Through a process of organismic *self-regulation*, the child progresses towards integration *self-support* and freedom.

When a child's need is met the gestalt becomes organized and complete. However when the need is not recognized and expressed, the environmental field is disturbed because the incomplete gestalts interfere with the formation of new gestalts. Awareness of the content and structure of a situation or experience leads to *environmental contact and change*.

The contextual framework, that is, the gestalt approach, also serves as a 'map', without which the therapist would have difficulty in guiding the child therapeutically towards healing and restoration.

## **4.2 Defining the Basic concepts in Gestalt Therapy**

- **Gestalt**

In the context of this research Gestalt refers to the unified whole of a person. According to Thompson and Rudolph (1996:91), a person is composed of physical, physiological, emotional and psychological functions, that *unify and integrate* to make up the whole being or gestalt.

- **Equilibrium**

This refers to a state of balance and integration achieved when the child regains a sense of control over various aspects of his life (Schoeman, 2000:15).

- **Organism**

This refers to the total child and not just one part of the child. The physical, physiological, emotional and psychological functions combine to make up the organism (Thompson and Rudolph, 1996:92).

- **Awareness**

Is a state of being able to fully and clearly experience one's own needs, feelings, wants, what needs to be done, how one needs to do it and the environmental alternatives for meeting these needs without becoming distracted and losing control because of the various environmental stimuli which are competing for one's attention (Thompson and Rudolph, 1996:93).

- **Continuum of awareness**

This refers to the continual process, of aspects in the child's life, being brought to the foreground, into awareness, so that it can be assimilated and integrated in order for the individual to grow towards a state of health and change (Schoeman, 2000:14).

- **Authentic self**

This refers to the ability of the child to have a realistic and honest view of himself, that is, his wishes, wants, needs, likes, dislikes, ideas, opinions (Oaklander, 1999:69).

- **Here and now**

This refers to those aspects of the child's field that are at present on his foreground and refers to what is being expected, felt and thought at the present moment (Thompson and Rudolph, 1996:93).

- **Contact**

Contact involves the ability to be fully present during interaction within the therapeutic relationship. When a child has difficulty sustaining contact, the therapist needs to be fully present to assist the child in making contact (Schoeman, 2000:22).

- **Contact Functions**

This involves the use of our sensory modalities, that is, touching, seeing, hearing, smelling and tasting, as well as the awareness and use of our bodies, expression of emotions, language and intellect. Children who are emotionally traumatized are often restricted and inhibit these vital functions (Schoeman, 2000:22).

- **Contact boundary**

When the child is not fully present and resisting all attempts by the therapist to make and sustain contact, a hindrance, obstacle or boundary needs to be worked through in the process of therapy so that contact can be restored (Oaklander, 1999:68).

- **Deflection**

A child is often frightened and confused by the extent of his feelings, for example, rage and anger. He would therefore turn away from these feelings by denying they exist, repress them, shut off emotionally from contact with the therapist, change his focus of thinking or indicate that he is fine when he is not (Oaklander, 1999:68).

- **Figure**

The need or issue that comes forward in the child's thoughts at a particular point in time while relegating other needs to the background. This need then becomes the focus in therapy (Thompson and Rudolph, 1996:93).

- **Foreground**

The dominant issue that has come forward and presses most intensively for satisfaction. This becomes the priority of the child's attention and focus in therapy, despite having many other issues in the background of information in his life (Thompson and Rudolph, 1996:93).

- **Therapeutic relationship**

This involves building a relationship of safety and trust within boundaries and limits. It is developed over time as the therapist and child get to know each other (Schoeman, 2000:22).

- **Field**

This refers to all the influences in a child's life-space especially interpersonal relations but also includes influences of the person's body, mind, emotions and spiritual factors. All the influences are in immediate relationship and responsive to each other and no part is uninfluenced by what goes on elsewhere in the field (Yontef, 1993:297).

- **Self-support**

This involves helping the child build inner strength, through the expression of the self. The child who achieves self-support is able to know and define his authentic self with the ability to make choices and take control over aspects in his life that he previously did not have mastery over (Schoeman, 2000:22).

- **Change**

In gestalt therapy we refer to the *paradoxical theory of change*, that is, the child changes when he becomes more fully himself not when he attempts to become someone else or someone he is not. During the process of therapy as the child makes choices, absorbs and rejects information from the environment, satisfaction is experienced and change occurs in the child's behaviour and in his attitude towards himself and those around him (Mackewn, 1997:63).

- **Emotional expression**

This involves the child reaching a stage where he understands what his feelings are, learns to know and own his feelings and expresses blocked feelings in safe and healthy ways (Schoeman, 2000:22).

- **Organismic self-regulation**

This is a constant process of being fully aware, so that one is able to solve inner conflicts and frustrations or dismiss them when it is not possible to resolve them. It involves the child being able to maintain a state of equilibrium under varying conditions and situations, satisfying his needs, taking personal responsibility and being in control over various aspects in his life (Oaklander, 1999:65). According to Yontef (1993:11) in organismic self-regulation choosing and learning happen spontaneously.

- **Assimilation**

This involves integrating all the influences from the environment into the self. It involves receiving, taking in or absorbing new information and experiencing change and nourishment from it. The child can also choose to reject this information as inappropriate and unnecessary (Korb and Gorell, and Riet, 1989:24).

- **Polarities**

This refers to the opposing parts of the child that are constantly in conflict with each other. The child often becomes confused and has difficulty accepting those parts of himself that others may dislike or criticize resulting in a fragmented self. The goal of therapy would be to bring integration and reconcile all parts of the self, positive and negative, which is a prerequisite for a healthy life (Oaklander, 1999:73).

- **Confluence**

Allowing yourself to be directed, controlled and led by the other person or influences from the environment. In the therapeutic process the therapist at times needs to go in confluence with the child's emotions and needs but there needs to be obstacles in order for growth to take place (Schoeman, 2000:15).

- **Integration**

All the fragmented parts of the self become unified, with the child being able to find his strengths, being satisfied with his whole self and being motivated to stay in control, knowing how his needs can be met and taking responsibility for his own development (Thompson and Rudolph, 1996:95).

- **Introjections**

This refers to a circumstance or situation that is being forced upon the child, something that the child does not want to do. When this is identified the therapist needs to go in confluence with the child, motivating and building the child's self-esteem and confidence (Schoeman, 2000:15).

According to Yontef (1993:10) through introjection, the child absorbs foreign material without discriminating or assimilating.

- **Retroflection**

Children retroflect their feelings by pulling themselves into themselves and hurting themselves in ways that they would like to hurt some other person (Oaklander, 1999:69). Yontef (1993:10) explains retroflection as "a split within the self, a resisting of aspects of the self by the self".

- **Fragmented**

Many parts of the child's life may have not been dealt with, lying unresolved and incomplete. The child is often unable to identify and obtain what is needed to make his life whole (Thompson and Rudolph, 1996:94).

- **Self-nurturing**

This involves flushing out the negative messages and introjections the child may have received from the environment and learning to nurture and reframe those parts of the self that have received the negative messages (Oaklander, 1999:74).

- **Projection**

Sending feelings, thoughts, ideas and experiences outward onto someone or something else. According to Schoeman (2000:15), this needs to be guided and channelled constructively in the therapeutic situation using projective techniques. If not channelled constructively, feelings and thoughts can be projected outward without the child taking personal responsibility to bring about healing. Yontef (1993:10) describes this as pathological projection.

- **Projective techniques**

In gestalt therapy, projective techniques are used as important avenues for helping the child express what is being kept hidden and often difficult to express. Examples of these techniques include using the creative forms of expression, such as, the sand tray, puppetry, body movement and music. Other forms of expression include the empty chair technique and the rosebush technique. These techniques are used to strengthen those parts of the child that were previously weak and difficult to face (Oaklander, 1999:71).

- **Resistance**

It is the child's way of protecting himself during the course of therapy as he ventures to open himself to trusting and being vulnerable. The child could break contact with the therapist, withdraw or refuse to proceed with an activity or suggestion. The therapist needs to respect this and gently work towards progress and new growth as the child stretches beyond this boundary (Oaklander, 1999:71).



- **Responsibility**

For the child to have his needs satisfied, he must be able to determine what he needs, and know how to manipulate and interact with the self and the environment to meet these needs. The child who is fully aware of himself and the environment takes responsibility and is able to make the necessary adjustments (Thompson and Rudolph, 1996:93).

- **Unfinished business**

The child may have unfulfilled needs, unexpressed feelings or some incomplete situations that clamour for their attention and obstructs the path towards self-growth and healing (Thompson and Rudolph, 1996:94).

#### **4.3 The Gestalt Approach towards the traumatized child**

According to the South African Oxford Dictionary (2002: 37), approach refers to a way of dealing with something or starting to deal with something in a certain way.

The basis of the Gestalt approach is *phenomenological* which refers to observation of what is existing or happening. The Gestalt approach is also *existential* in nature as it focuses on the individual becoming aware of and organizing his existence in a meaningful manner. The existence of a child is dynamically changing as new discoveries are made of himself and the opportunities around him.

The two aspects of the Gestalt approach that will be discussed in depth are the *environmental field*, and the *paradoxical theory of change* which comes about as a result of awareness and contact being made by the child with his environmental field. In this study trauma will be part of the child's environmental field.

### **4.3.1 The Environmental Field**

According to Yontef (1993:323) "Field theory is an attitude that permeates Gestalt Therapy and holds the gestalt therapy system together. It is a framework for studying any event, experience, object, organism or system, and the emphasis is on all the forces or influences that together form an integrated whole. Meaning to life is only achieved in relation to all aspects in our field. Everything is moving, becoming and changing to bring about integration and wholeness". The researcher came to the conclusion that applying this theory during the therapeutic process of the child would illuminate and objectively confront all dynamics in the child's life, that is, school, parents, friends, relatives, past trauma and positive experiences, that brings meaning to the child's ability to function as an integrated individual.

From the explanation of the field in which the child lives, change occurs on a frequent basis. Within Gestalt theory this process of change is referred to as the '*paradoxical theory of change*'.

#### **4.3.1.1 The field of the traumatized child.**

According to Yontef (1993:286), Gestalt therapy is built on the importance of being aware of the awareness process. The process of thinking is an important aspect of this awareness. How a child thinks describes his philosophy of life and much of his character. Field theory points to the process of how he thinks. Full awareness is the process of being in contact with the most important events in the individual/environment field with full sensorimotor, emotional, cognitive and energetic support.

The therapist in Gestalt therapy explores this process of thought in detail to bring about contact and awareness of a specific situation or event and reshape our thinking so that the child can productively assimilate all aspects in his field

to bring about lasting change. Without examining all the influences in a child's life-space, the therapist is at risk of limiting and slowing down the potential of the child reaching wholeness.

From this statement it is thus evident to the researcher that field analysis would look at the total context, especially the interpersonal relations and would bring familial group and social processes to the fore. It would also look at how the child's process has developed over time. Field theory helps the therapist to focus on what is important and what is peripheral to the child's immediate situation. It is a framework for communicating. In working with the child in Gestalt therapy one cannot work in isolation from the environment which is constantly changing and influencing awareness and contact. Therefore in terms of the field theory the child's environment field creates itself, with the individual part influencing the rest of the field and the rest of the field influencing the child. The field theory perspective integrates much of psychological theory and includes influences of the body, mind, emotions, social interaction and spiritual factors. It is these factors that form an integral part of the child's process in gaining awareness of a particular stressful and traumatic situation.

Mackewn (1997:113) is of the opinion that "in Gestalt therapy, awareness is the holistic process of contact with and withdrawal from others in the field, of self-regulation and meaning-making which takes place within our whole person and changes us." This involves noticing, recognizing and being in touch with our experience of the physical, mental, emotional and spiritual dimensions of our self. Gestalt therapy focuses on the here and now, however, elements of the past often come into the present awareness. Revisiting the past intentionally, without a significant change in the client's field especially with

regards to support systems, will only result in re-traumatizing the child rather than healing and bringing about change.

The researcher comes to the conclusion that, in Gestalt therapy the therapist supports the child as the child explores all forces which are active within his field and creates conditions in which he can see his life as his own responsibility. The therapeutic experience is always seen as the self within a relational field. This helps the child focus more deeply on the self and goes beyond preoccupation with the self to experiencing themselves as being part of the world and relations around them. This enables the child to cooperate in a more productive manner with elements in their environment.

When attending to aspects that make-up the background of a child's life, the background at that point ceases to be in the background because the child has turned his attention to it. Those aspect / aspects that made up the background now becomes the figure while whatever was previously being attended to temporarily recedes into the background. The researcher cannot explore the background without making it figure. In the Gestalt approach the therapist is not bound by staying with the child's figure but may make any aspect of the child's field figural. Moving attention between the different aspects of a child's field, that is, from figure to ground, there is a constant reconfiguring of the field which is the essence of Gestalt therapy. In doing this, the child is able to explore and reorganize the relationship between all aspects of his background and those aspects that he is aware of at present, the figure. This process of awareness and making contact is the essence of gestalt therapy.

In using the field approach the therapist needs to take into account all the factors affecting the choice of intervention he may use. These factors may include personality type, aims of counselling, circumstances in which

counselling takes place, the energetic process of the child, recent present and past life experiences of the child, the stage of the counselling process etc. Developing the ability to be aware of and take account of all these field conditions requires acute observational skills, experience and theoretical training, lots of practice and plenty of professional support.

Mackewn (1997:23) states that " In the reality of life many of us have been taught to ignore our unfolding process of awareness and the ebb and flow of our interests and excitements within the field due to aspects in the field that externally regulate our behaviour or internal pressures associated with messages from the past which are often out of our present awareness. If such a life-style or behaviour continues, we will be constantly reacting to external pressures and become counter-productive".

The researcher thus argues that a child who verbally acknowledges the stressful situation he is in but does not really see it, know it, react to it and feel it and respond to it is not fully aware and is not in full contact. The content of a stressful situation may be distant in that it happened in the past but the act of remembering is in the present although what is remembered occurred in the past. As a result of this process of bringing significant aspects into awareness, reorganizing of the field occurs in an attempt to make meaning of our experience.

When the child reaches a sense of impasse, that is, the child is in conflict between parts of the self which wants to gain awareness and parts of the self which wants to avoid painful and uncomfortable feelings; the therapist needs to use his skill and knowledge of the child's environmental influences to assist the child to stay with the uncomfortable aspect and develop awareness of it. As

the therapist supports the child in developing a deep awareness of themselves and their styles of contacting and relating to others, change and growth occurs.

Being aware of the field conditions along the continuum of awareness is vital in understanding the child's ability to make contact or to withdraw. These field conditions are not just centered around the child but could also be centered around the therapist's approach, voice, gestures, speech etc.

Underlying awareness is the affirmation of the individual and of environmental processes, as they exist, not as they are said to exist or as one might wish them to exist. According to Korb, Gorrell, Riet (1989:19) "What is, is; what we do, we do. No aspect of living is to be avoided. All aspects of living need to be affirmed. All children choose from their experiences what they will and as they will". According to Yontef (1993:331), "there is no 'core' or 'self' apart from an organism or environment field". He also states that the self is the system of contacts and that the core must be reached through the contact boundary."

From the above it is clear that the self plays an important role in organizing perceptions of a child and his circumstances and making meaning out of the perceived world in which we live. The activity of the self is the forming and dissolving of meaningful figures of interest against the background of the individual's changing field or world. The self grows through contact and assimilation of experiences with aspects of, or people in, the environment. The way a child experiences and configures himself depends on how he configures his environment and vice versa. When contact is made with the environment or boundary or other, healing and change begins. Therefore the self is involved in a continuous process of experiencing, learning and assimilating from each unique contact with different aspects or people in the environmental field.

According to Mackewn (1997:120), the self is not aware of itself abstractly but is only aware of itself when in contact with something or someone. The self has the ability to take responsibility for the experiences in a child's life. The self experiences, organizes and modulates the process of contact through contact functions, self functions, experiencing functions, self support functions, our feeling functions, differentiating functions, assimilating and reconsolidating functions. The contact functions in the environment refers to sensations, the self functions refers to the individuals quality or capacity for managing experiences, the experiencing functions refers to sensing, moderating and many others, and self support functions refers to the individual's strengths available in stressful situations.

The researcher comes to the conclusion that no matter how dysfunctional a child can be, his distress arises not only out of his individual self but also arises out of the context of his field. Therefore a child does not necessarily need to remain permanently distressed but can remake himself in changed conditions of his environment.

To conclude, the following according Mackewn (1997:182, 79), is important:

(i) while working with the here and now and the contact between child and counsellor, do not overlook the wider context of the child's life. Find out how the background of their lives contributes to who and how they are. Equally explore how children relate their therapeutic sessions to the rest of their lives and how they integrate the learning of therapy into the overarching processes and structures of their experience.

(ii) the self encompasses both variable process and enduring features. It varies, remaking itself afresh in response to new encounters in the ever-changing circumstances of the field; and yet it also manifests background qualities of stability, cohesion and continuity which provide the support for

each fresh contact episode. Counsellors and therapists need to pay active attention to both poles of this self-continuum. Exploring the counselling relationship provides one with easily available means of studying the way a child creates himself in the world and integrates (or fails to integrate) his experience.

The field theory enables Gestalt therapy to keep the focus on the child as an active agent in present field relations, through changes in the field that inevitably occur over time, through changes that occur in different contexts of the field, and the differences in how children construct themselves.

#### **4.3.1.2 The paradoxical theory of change in the traumatized child**

Gestalt's theory of change is known as the paradoxical theory of change because it is based on the "apparently paradoxical premise that people change by becoming more fully themselves, not by trying to make themselves be something or someone they are not: change occurs when one becomes what he is, not when he tries to become what he is not" (Mackewn 1997:63). It is therefore the responsibility of the therapist to influence, direct and reinforce those aspects of the child that would build their self-image, self-confidence and self-motivation. This would assist in the process of the child learning to accept and nurture himself, which in turn would bring about change to the way he sees and responds to the circumstances around him.

According to Gestalt therapy change comes about spontaneously through awareness and contact. This kind of change is based on self-actualisation, that is, being aware and accepting yourself "as is". The opposite of this kind of change is forced change which is imposed upon child, and acceptance is not



internalised to the self but to an outside image. When acceptance is directed to an outside image, this retards the process of change.

The Gestalt theory of change has an underlying belief that all of nature including children have an innate drive for health, and the process of gaining awareness and contact bring about natural change.

Forced change is referred to as introjection. When values and beliefs are imposed upon the child, he may take it in superficially (on the surface) but will not fully digest the material with the result that information is not fully integrated into the self and change is delayed or does not fully occur. To illustrate this point, take a lecture room full of children who are apparently listening, copying information from the chalkboard and remembering facts as taught to them but do not completely digest the information, that is, integrate the material and make it their own. The material remains as that which they have heard from someone else.

On the other hand when there is full awareness and contact with, ' what is', the child is in touch with his existence with 'what is' which includes their sensorimotor functions, emotional state, cognitive state and his energy levels. Through the awareness continuum of continually bringing things to the foreground, working through it, assimilating and integrating it, the individual grows towards a state of health and change. This kind of change brings a child to the point that he is in control of, has choice over, and takes responsibility for his own behaviour and feelings.

Without this cognitive, sensory and affective experience of being in full contact with the here and now, change cannot occur. Taking responsibility is an integral part of change as opposed to blaming outside forces or pressurizing

oneself into what one 'should be'. When a child is blaming others for his actions or reactions and constantly focussing on what one 'should be', no assimilation or integration can take place and this in turn retards the growth process and the pathway to change.

The following example illustrates this process: An emotionally traumatized child has often already developed a critical self, taking everything personally and turning everything against himself. In this case, according to the Gestalt approach, the child's negative belief about himself is changed through a process of nurturing that part of the child that can love himself understand himself and comfort himself. Illuminating the negative and getting in contact with the positive nurturing self, brings about integration and change.

The field is a child's whole life space where the parts of his life and experiences are in immediate relationship and responsive to each other and no part is uninfluenced by what goes on elsewhere in the field. The field theory views no action as being at a distance, the here and now is focussed on and would include aspects from the past.

According to Mackewn (1997:56), the principle of the changing process, refers to a child's life space being in a continuous state of change, therefore there needs to be a sense of creativity with a child that adapts to the needs of the situation at different points in his life with the goal of creating a balance at that point in his life space and bringing about change to that area of his life at a particular time.

The researcher can therefore make a deduction that as the child adjusts himself to the experience of the here and now and allows each experience the reality it seeks, the experience would then fade into the background and in turn be replaced by whatever next is on his foreground. This continual movement is a

rejuvenating cycle of development which is foundation to life process. According to the Gestalt perspective, as children stay in their own experiences, as they evolve, they will develop the ability to use creative and adaptive ways to channel their drive for health and positive change Yontef (1993:13).

Children are caught in a struggle when they try to be what they 'would like' to become rather than allow themselves to be currently 'what they are now', that is, being fully aware of who or what is. To achieve this the therapist supports the child's self-acceptance and works towards developing the child's holistic awareness of themselves and their field. This approach grows out of Gestalt's theory of contact or self-other regulation, which proposes that " awareness and contact are the natural means by which people develop and grow and that when contact made, assimilation and integration can take place, and change occurs spontaneously and automatically" (Mackewn,1997: 64).

This process involves a child being aware of himself and being willing to take action or risks with what they are aware of and have made contact with. When the child is able to feel his authentic self and let go of his self image (who they would like to be) he changes.

This concept is a shift in thinking from the traditional way of change, which emphasizes changing, in order to conform to environmental standards, that is, societies morals, family cultures, willpower and determination. This kind of change "what I should be" conflicts with "what I have become aware of in myself." When the focus is on what 'I should be', parts of the self are being disowned or denied. This kind of change which may be driven by coercion or willpower or persuasion is likely to be short lived because it is not in agreement with a child's real self.

When a child comes for therapy he often indicates his desire to change from the standpoint of wanting to be 'what he is not. This is often due to external or environmental standards of behaviour that are imposed on him. The Gestalt therapist needs to be careful not to focus on the part of the child that wants to effect change but focus on the development of awareness of the child's field, so that he becomes authentically aware of his real, holistic self and total assimilation and integration can occur. According to Mackewn (97:65), the child may temporarily express satisfaction if the gestalt therapist deals only with one part of him that wants change but the child in the long run is less likely to feel confirmed in his whole being.

A child may sometimes force the therapist into a role of the change agent, for example, wanting the therapist to express disapproval of his behaviour. The gestalt therapist needs instead to focus on a positive warm support of the child as a whole person looking at all factors in the field contributing to the child's lifestyle, one of the factors being bad behaviour. The child will eventually become his change agent, taking responsibility for checking his own behaviour. This brings greater awareness to the child of all forces operating in his field. According to Yontef (1993:144) this awareness is a primary therapeutic tool in Gestalt therapy.

The paradoxical theory of change requires intensive discipline, as much of our society emphasizes the building of self-image how one should be. The process of awareness and contact can be anxiety -provoking for a child as it calls for the child to constantly destroy part of his self image (old gestalt) and old habits and become a person that is in contact with his authentic self.

### **4.3.2 The Therapeutic process of Trauma**

According to Yontef (1993:128), Gestalt therapy is a phenomenological-existential therapy. It teaches therapists and the traumatized child the phenomenological method of awareness, in which perceiving, feeling and acting are distinguished from interpreting and reshuffling pre-existing attitudes. Explanations and interpretations are considered less reliable than what is directly perceived and felt. The child and the therapist in Gestalt therapy dialogue, communicate their phenomenological perspectives. Differences in perspectives become the focus of experimentation and continued dialogue.

Yontef (1993:129), also states, “Gestalt therapy focuses more on process (what is happening) than on content (what is being discussed). The emphasis is on what is being done, thought and felt at the moment rather than on, what was, might be, could be, or should be.” In essence Gestalt therapy focuses on the child’s awareness and what is directly experienced during the child’s existence and relations to others. Yontef (1993:129) explains further that “the goal is for client to become aware of what they are doing, how they are doing it, how they can change themselves, and at the same time, to learn to accept and value themselves.” For the purpose of this study Gestalt therapy treats what is ‘subjectively’ felt in the present by the child as well as what is ‘objectively’ observed, as vital information in process of healing and recovery.

The child functions within an environment. This environment is referred to as the field. The child experiencing trauma receives events from the field. It is thus important to describe the field or environment in which the child lives. Perls (Thompson and Rudolph, 1996:143) is of the opinion that the child moves through different phases in order to change. These phases are also referred to as layers of neuroses and forms a therapeutic process. In order for

the child to move through these phases or layers, the therapist needs to have enough knowledge about the phases. These phases are directly linked to the gestalt experience cycle, which will be discussed in chapter five.

### **4.3.3 Stages of Neuroses in Gestalt Therapy**

During the therapeutic process, the child whose self may be fragmented, due to various past and present traumatic experiences, often creates psychological defences which may be a form of protection for himself but a hindrance to growth and change. As explained by Perls in Schoeman (2000:94) these defences can be identified as follows:

#### **(1) The phoney layer**

The child at this stage has many conflicts that have not been resolved.

Communication is superficial with an attempt by the child to be what he is not.

According to the researcher the traumatized child will deny the trauma and how to deal with it. The traumatized child in this layer believes that what happened to him is his fault, it is “supposed to be like this” and it is “okay”. He chooses to ignore the facts.

#### **(11) The phobic layer**

At this stage the child becomes aware of his phoney games, superficial talk and fears that cause him to create an impression of himself that is not his real self.

In the traumatized child’s life, he becomes aware of the influence the trauma has on his life. He realizes that the trauma has a negative influence. This awareness may leave him anxious because he does not have enough energy to change his situation.

#### **(111) The impasse layer**

This is the passive stage where the child would often indicate that he is “fine” although in reality, he does not know how to cope with his fears. The child would often resist moving forward, owning his problem and dealing with the

real situation. Impasse with the traumatized child is often recognised when feelings of depression, low-energy levels, ‘numbness’, apathy or isolation occurs.

#### **(1V) The implosive layer**

As the therapist persists gently despite the child’s resistance, the child becomes aware of and starts to recognise his problem. The child starts experimenting with new behaviours as he realizes how he has been restricting himself from progressing. The therapist at this stage needs to go in confluence, that is, in agreement with the child’s suggestions or experimentation with new behaviours. The therapist also focuses on using polarities, that is, expressing the opposite of what the child is perceiving in an attempt to integrate the negative and positive parts of the ‘self’. The traumatized child realizes that he can control his feelings.

#### **(V) The explosive layer**

When the child’s experiments with new behaviours are successful, he is able to reach the explosive layer. At this stage the child starts re-orientating himself to alternative ways of handling his problem. At this stage the therapist is able to confront the child and encourage practical application of handling and dealing with the problem situation. The child is also able to engage himself in self-nurturing activities to flourish completely, in himself.

According to the researcher the therapist needs to work through these five layers with the traumatized child. This will enable the child to maintain a healthy balance. If the traumatized child is helped through this process he will be able to reach awareness, take responsibility and maintain self-support, self-acceptance and self-nurturing.

## **4.4 Assessing the Gestalt Therapeutic Process in Music**

According to Perls (Thompson and Rudolph, 1996:144), the main goal of gestalt therapy is to help the child gain balance and to take responsibility for his own life. In order to reach this goal, the therapeutic process will be assessed according to the amount of awareness, the ability in taking responsibility and the potential to shift environmental support to self-support.

### **4.4.1 Encouraging the child to take responsibility**

Oaklander (1999:64) is of the opinion that a child usually enters therapy as a result of a problem identified by the parent or teacher. However, the therapist needs to see the child, as *he is*, when he enters the therapy situation. A child often does not have the strength and ability to clearly articulate his needs and often his dysfunctional behaviour and inability to cope, is a cry for help.

Making contact with the child, ensuring a feeling of them being inclusive and an integral part of the therapy session is vital when first meeting with the child. This will in essence determine his ability to be self-motivated to enter the future therapy sessions, without resistance.

### **4.4.2 Building a relationship with the child**

Building a relationship with the child begins in the first session and develops throughout the therapeutic process with the child. As the therapist presents her real self in an honest and authentic manner while maintaining a sense of integrity, the message conveyed to the child should be one of respect and total acceptance. According to Oaklander (1999:70), this relationship in itself is a highly therapeutic experience for the child.

Oaklander (1999: 66) is of the opinion that the child entering therapy, comes in with various behaviours that he is using to survive, get his needs fulfilled,



discharge energy and contact the environment around him, in order to feel some sense of self. The child as a total organism has an endless need for equilibrium that results in the child withdrawing, projecting, fantasizing, denying, avoiding, striking out at others, screaming, stealing, being afraid, remaining confident, becoming ill and other negative behaviour reactions. A child entering therapy with these behaviour reactions indicates to the therapist that he has a faulty sense of self and an inability to make good contact with others.

Therefore in rebuilding this contact of the child with his environment and the therapist in particular, a child needs to have his contact functions well-developed and operating. Without a good sense of his contact functions, children have a weak sense of self, unsure of their personal boundaries. According to Polster and Polster (Thompson and Rudolph, 1996:100) contact implies touching the physical sense, that is, looking, listening, touching, talking, moving, smelling and tasting. Music as a contact function enables the troubled child to therefore make contact mainly through the sense of listening and movement. When an emotionally traumatized child initially enters the therapeutic environment, it is often with a *self* that is resistant to change and restricted in its ability to contact the 'world' in a meaningful way.

Therefore contact and involvement by the child is facilitated by structuring musical experiences that ensures success. This may be achieved through exploring instruments and improvisation experiences. With various rhythm instruments available, the child may be given the opportunity to listen, observe and explore thus encouraging further contact with the environment around them. During this initial part of the therapeutic process the therapist has the opportunity to make contact with the child and include him as much as possible in the exploration of the music experience, while building a rapport

and relationship with the child so that that the child feels safe and respected with a willingness to return to the therapeutic environment.

#### **4.4.3 Encountering resistance during the therapeutic process with the child**

Perls (in Schoeman, 2000:94) also refers to this stage as the impasse. Resistance is expected during the therapeutic process and needs to be respected so that the child eventually feels safe to go through it, after which further growth and a new way of being and responding is discovered. According to Oaklander (1999:71), when we encounter resistance with a child we are making progress because it is a place of further potential growth.

According to Oaklander (1999:71), resistance is expected, respected and accepted for it is the child's way of protecting himself and as a therapist, when we recognize the impasse, that is, an emotional place of resistance, we can expect that the child is on the verge of a new discovery and further growth.

As the therapist moves easily and gently wanting to gain the continued trust of the child, it is important that she allows the child to take control. When using music the therapist needs to go in confluence with what the child wants to express and how the child wants to use the music. According to (Music, Rhythm and Music.*sa*) the therapist becomes the vessel through which the child can express himself using music, for example, if the child slows down his rhythm when playing a musical instrument, the therapist plays more softly and slowly and if the child speeds up, the therapist matches that as well. Anything the child expresses the therapist is to follow unconditionally. In this way greater understanding and trust is built which creates the atmosphere for the child to open himself and be a little vulnerable, allowing himself to express those parts of the self that have been locked in.

#### **4.4.4 Using projective techniques during the therapeutic process with the child**

As a means of expression, using a technique is important in working with children. Expression through art, clay, music, story telling, puppetry, the sand tray, body movement, drama and sensory awareness are naturally familiar to children and an effective means to encourage children to express themselves thus strengthening those parts of themselves that have been locked in, hidden and difficult to express verbally.

As a means of expression, music can be used as an effective technique. According to Peters (2000:74) music is a multisensory experience, that is, it includes auditory, visual, tactile, kinaesthetic components. It helps the child increase his perception and discrimination skills in many sensory areas thus increasing awareness of himself and the environment around him.

#### **4.4.5 Gaining awareness and experience during the therapeutic process**

When working with a child, awareness of who he is, how he feels and what he wants is much more important than the awareness of the process that led him to the negative behavioural responses to those around them. As the child goes through this process of gaining awareness of himself, a sense of well-being and calmness will develop and awareness of previous negative behaviours would gradually decrease, thereby bringing greater clarity to the child's experience of himself and himself in relation to situations affecting and influencing his life. Greater awareness of the self is strengthening for a child and encourages him to explore and experiment with new ways of behaviour. Peters (2000:74) also explains that when music is used creatively, it reflects, mirrors and matches the 'here and now' of the child, identifying and symbolizing the relationship between child and the therapist, resulting in an

awakening of the child's responses. This is known as the continuum of awareness. During this part of the therapeutic process the therapist needs to be aware that whatever the child's responses are with or without music instruments, needs to be reflected and translated into musical structures which would assist the child to focus his attention and activity and provide a point of stability and comfort. This encourages the child to gain confidence in being in control, over how he responds emotionally to the music. The child also has the freedom to make choices and respond emotionally in the here and now with the assurance that he is being heard and understood. This can be seen as part of the child's process of awareness in making contact with the environmental field.

#### **4.4.6 Interpreting the child through his projections**

In Gestalt therapy the therapist's task is to assist the child in sharing his experience rather than interpreting his projections. Through a process of encouraging greater awareness, ownership of his projections and 'contactful sharing', the child's self is strengthened, gaining new self-support. Instead of interpretation the Gestalt therapist normally uses tentative translations, guesses and hunches that the child verifies throughout the therapy process.

As the therapeutic process progresses Oaklander (1999: 72) explains that it is almost difficult to avoid interpreting what children do. However, the therapist needs to keep focussed on giving the child as much opportunity as possible to share his unique experiences and express himself without judgement, thus strengthening his own self. During the sharing, reflecting, matching and expressing of music, the therapist may have a hunch or make an observation, for example, "you seem to be playing a very soft and sad sound with that instrument, do you feel that way sometimes." This gives the child the

opportunity to explain or interpret himself, rather than the therapist imposing her own thoughts and feelings on the child.

#### **4.4.7 Towards healing and change: reaching goals and expectations**

In determining the actual cause that brought the child into therapy, the therapist can then decide on the need for family therapy, parent counselling or group therapy. Even if these are essential, seeing the child individually would still be required to help the child in “getting back to her unimpeded path of growth” (Oaklander, 1999: 73).

Helping the child gain self-support through getting back his senses, his feelings and his intellect would enable the child to meet his own needs realistically. This reality Oaklander (1999:73) states is, “ to know when he needs help in getting his needs met, and to know when his needs cannot be met at this time”. The therapist also needs to bring the child to a place of “coping with situations that may be faulty and unfair for him at this time and know that at least he has himself”

The researcher came to the conclusion that making choices independently and relating to others in a more satisfying way is also a goal in therapy. Although these are goals that the therapist would want to see the child achieve, the child cannot be forced into achieving these. The therapist needs to stay in contact with the child’s process and only use these goals as a guide. Being acutely aware and in touch with moments in therapy that could open the door to greater communication, is a means for building self-support and providing direction for the therapist as to where she could possibly lead the child or just follow without interrupting the child’s process of healing.

During the process of using music, in which the child initiates and explores new rhythms, interacts with the therapist, while staying in touch with feelings of the here and now, the child gains confidence to handle the music more independently. It is therefore the goal of the therapist to work towards self-support in the child, gently following the child's process without interfering or interrupting.

According to Gilroy and Lee (1995:52), "the act of improvising with music, enables the person to hear himself through sound". These authors explain that the process of forming music and moving towards some form of coherence is the therapeutic process, the process of healing, "and the escape from the emotive fragmentation to the creative act of becoming whole."

According to Gestalt therapy, the process of becoming whole is when a child moves towards self-support, finding ways of coping and making choices in order to relate better to his environment, in a way that not only benefits those around him but is also satisfying to himself.

#### **4.4.8 Polarities**

Working towards "integration, reconciliation or synthesis of one's opposing parts, positive and negative, is a pre-requisite to a dynamic and healthy life process" (Oaklander, 1999:74). When a child despises those parts of himself causing distress, there is increased fragmentation of the self and the child begins to dislike and have trouble accepting himself. In therapy when the child's fragmented thinking is identified, the therapist may use opposite feelings and thoughts in order to provoke and bring into awareness those positive parts of themselves that are hidden and out of the child's awareness.

Through the medium of music and exploration of instruments the child has the freedom to express those parts of himself that may be angry and hateful and those parts of himself that are carefree and loving. During this process the therapist needs to sensitively guide the child towards a spontaneous sound where he creates a variety of sequences independently, putting more of his personal self into it rather than being dependent on the therapist's response to create a musical expression or sound.

#### **4.4.9 Self-Acceptance and Self-Nurturing**

A child has the ability to self-judge and “develop powerful introjects, often doing a better job of criticizing themselves than his parents do” (Oaklander 1999:74). Self-acceptance of the good as well as the hateful parts of oneself is vital to progress and a sense of well-being.

According to Oaklander (1999:74), “self-acceptance comes about through the development of a nurturing self.” The child's own loving, nurturing part must come into contact with his negative beliefs about himself in order to accept, understand, comfort and love it, so that integration and self acceptance takes place.

According to Campbell (1997:77) “music provides a haven for the listener and can generate a sense of safety and well-being”. Through the freedom and confidence that a child gains in initiating rhythms and exploring different musical structures, while staying in touch with his feelings, there is a constant working towards reaching a new confidence in themselves and a moment where a meaningful ‘whole-self’ would emerge. As this confidence develops the child sees his good side clearer. As those darker aspects come into contact with the emerging positive self, the child experiences integration.

## **4.5 Conclusion**

In this chapter it was clearly stated that the Gestalt approach is a field approach. The choice of the way in which the therapist intervenes depends on all the field conditions at the time and is a matter of fine observation and discrimination. Factors affecting the choice of intervention includes the personality type and ego strength of the child and counsellor, the length and aims of the counselling, the circumstances in which the counselling takes place, the holistic energetic process of the child, the recent present and past life experiences of the child and the stage of the counselling. Developing an awareness of all the relevant field conditions will assist the therapist to decide on the best way to handle the child. The fine discrimination and observation of the therapist contributes significantly to awareness and contact made by the child which ultimately brings about integration, assimilation and change.

It is now important to explain this contextual framework in the field and apply it as in chapter five, within the conceptual framework of music and trauma, to the two case studies chosen for the purposes of this research.

To explain the practical applicability of the theory in a real life study, the research methodology as well as empirical data will be presented in chapter five.