

Intersectionality and Assemblage theory in Gestalt therapy

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Abstract

This thesis explored if feminist theories of intersectionality and assemblage can be found in the theories and practice of Gestalt therapy, and to what extent, in order to determine if Gestalt therapy is a good base to practice feminist therapy from. The method that was chosen to investigate that subject was semi-structured interviews with four therapists in the Netherlands, that were trained in and practiced Gestalt therapy. After conducting the interviews, the derived data were analyzed by using discourse analysis. The material was analyzed under three categories, namely identity, process and power. Furthermore, the analysis included the author's perspective on the themes that rose, as a client of Gestalt therapy. After the analysis, Gestalt therapy offered many similarities with the feminist theories in question, and opened up the possibility of Gestalt therapy functioning as a base to insert feminist theories in the practice of psychology.

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Feminist practices often have their locus outside of the mainstream. As a psychologist, I have been trained to understand, proliferate, and contribute to the advancement of the mainstream psychological practices. As a feminist, I have been educated in the ways that normative practices can oppress, detain, and abase categories of people, material, and immaterial beings. As a feminist psychologist, I wish to find a way to occupy a space in the field that I have been trained in, while at the same time I depart from mainstream practices that do not align with my core values. This research project originated from my position and aimed to contribute new knowledge in the field of psychology and feminist therapy.

My interest in the subject originated from my readings on the critiques of mainstream psychology, and specifically its epistemological framework. The field nowadays relies on the positivist model of inquiry, which renders its practices rigid and lacking more fluid understandings of identity, mental illness, and healing (Nichterlein & Morss, 2017). On the other hand, feminist psychologists have developed a community, a school of thought called feminist therapy, that consists of feminist therapists trying to practice psychology by using main feminist theories and values as the starting point (Brown, 1994). However, feminist therapy is not a consistent type of therapy, like Cognitive-Behavior Therapy (CBT) or psychoanalysis, and it does not provide a specific pool of theories and techniques to use as a base to practice therapy from. It is instead a lens that a community of like-minded psychologists employs to practice psychology, and they have developed literature that attempts to provide some inputs on why and how to do feminist therapy. While the existing literature answers many questions that will be analyzed in the literature review chapter, the literature on feminist therapy does not designate a school of therapy that contains elements of feminist theories, or that could be a suitable base to practice feminist therapy from. When talking about feminist values, I mean intersectionality, but an intersectionality that is not

rooted on the event-ness of identity, but in the ongoing process of identity formation, namely intersectionality through assemblage theory (Puar, 2012). In that regard, I aim to explore if I can find intersectionality and assemblage theory in Gestalt therapy.

While there is significant literature on feminist therapy, there is no literature on how feminist values, and especially an assemblage informed intersectionality could be practically implemented in the mainstream psychological practice through an already existing type of therapy. As Puar (2012) proposes a way to inform and develop intersectionality without tearing it down, or removing it from its status quo, in the same way, I recommend assemblage theory as a way to infiltrate mainstream psychological practice without leaving it entirely. This assertion is directly connected with my position, as I aspire to assert feminist therapy outside of the realm of mainstream psychology, but also to find a way to make feminist therapy and feminist values more acceptable and accessible in the training and the practice of psychology. That is why contextual therapies and specifically Gestalt is the basis on which I will examine the theoretical framework demonstrated above. Through my research about Gestalt therapy and my personal experience as a client of Gestalt therapy I was inclined to believe that there is a possibility that Gestalt already encompasses some feminist values or that it can be the ground for feminist values to be inserted. At the same time, it has a high level of legitimacy in the dominant field, so it could be deployed as an access point to the mainstream psychological practice. The following thesis will offer an analysis of four interviews conducted with Gestalt psychotherapists in the Netherlands, where we will negotiate if and to what extent some feminist values (intersectionality and assemblage theory) are already present in Gestalt, or if it could profit from such integration, in an effort to determine if Gestalt therapy could be a suitable base to practice feminist therapy.

Research questions

My research questions are: Are theories of intersectionality and assemblage present in the theories and practice of Gestalt therapy? If not, is Gestalt therapy suitable for an integration of theories of intersectionality and assemblage?

Essentially, what I am trying to find is if Gestalt practice is feminist, or it could provide a suitable base for practicing feminist therapy, stemming from theories of intersectionality and assemblage. Answering those questions aims to contribute to both the fields of psychology and feminist therapy. To start with, until date, there has been no research exploring a type of therapy that uses intersectionality through assemblage theory as its starting point.

Furthermore, while there is extensive literature on feminist therapy, there has not been an account of contextual therapies, and specifically Gestalt, as being compatible with feminist therapy.

Methods

In order to answer my research questions, I will use the methods of interviewing, and throughout my analysis, I will bring in and reflect on my own experience as a Gestalt client. To start with, I will conduct interviews with four therapists based in the Netherlands, that have been trained in and practice Gestalt therapy, and I will analyze my data by using discourse analysis. While the choice of the research methods will be further elaborated in the methodology chapter, it is worth noticing that due to ethical reasons, observing therapy sessions was not optimal for this project. Lastly, in my analysis, I will include my perspective as a client of Gestalt therapy, as a fifth perspective on the matter.

Positioning

This research is a very personal project that derives from my personal position. Specifically, I was trained as a psychologist in Greece, in a school that on the one hand shared the western society's aspiration for Psychology to be considered as a science among the others, but on the other hand, had an affiliation with the political left and promoted

images of a different than the mainstream psychology. For example, during my studies, I became acquainted with critiques of the rigid diagnostic entities of psychology, and the vast categorization and pathologizing of any behavior that drifted away from the norm. Furthermore, I was heavily influenced by teachers that were pioneers in the field at fighting the stigma of mental illness and opening our minds to possibilities that transcend the medical model of illness. Through those experiences, I envisioned a Psychology that could host more socialist values.

When I moved to the Netherlands to pursue a Master's degree in Clinical Psychology, I came across a Psychology that was positioned as a science among the others and was constantly striving towards a greater legitimization in the western scientific world. During my Masters, I was trained to be absorbed in this hegemonic field that appreciated evidence-based therapies that provided quick and cost-friendly alleviation from distressing symptoms, and that strived to teach us how to conduct "good" science. While I find that a big part of the knowledge that is taught in clinical psychology masters like mine is valuable and necessary to practice such a delicate profession, during my studies, I kept feeling that the system that mainstream psychology is embedded was clashing with some of my core values.

That is when I started my Masters in Gender Studies, where the feminist theories, values, and research resonated with me and my professional identity as a therapist. After attending to the literature on feminist therapy, I connected with the writings of those like-minded therapists that try to subvert psychology and create new paths for feminist therapists to practice psychology. However, I could still not pinpoint a way that I could practice psychology in a feminist way, without engaging in the hegemonic field or departing from it completely.

Since my personal history and position is an amalgamation of mainstream and subversive practices, I couldn't help but long for a way to insert feminist values in the mainstream

practice of psychology, and for a way to make feminist therapy and feminist values more accessible to psychology students but also to psychologists that feel that the rigidity of the medical scientific model (and the positivist model) confines them, but do not wish to leave the system all together.

The thesis will be divided into five chapters. In the first chapter, the literature review, I will present the existing literature on some notions that are important for the development of my thesis. I will present some critical critiques of mainstream psychology, delineate key elements of feminist therapy, and built a basis on Gestalt therapy theory. I will conclude the chapter by presenting what I found that was missing from the literature. Next, in the theoretical framework chapter, I will build on the theories that will inform my analysis. These theories are intersectionality, assemblage theory, and contextual therapies. Later, in the methodology chapter, I will present the methods that I will use and the rationale behind the choice of these particular methods. In the analysis chapter, I will present the findings of my analysis, and I will connect the findings with the theories presented in the theoretical framework under three categories, namely Identity, Process, and Power. Lastly, in the conclusion chapter, I will present the key concepts of my research and will propose future applications of the findings and subsequent extensions of the subject.

1. Literature Review

This chapter will focus on exploring what the existing literature has to offer on doing therapy in a feminist way. In my search for such therapy, a school of therapy/thought has emerged under the name feminist therapy. Despite feminist therapy not being a concise school of therapy, there seems to be some consensus and homogeneity in the literature about some core values and aspects of feminist therapy practice. Before I analyze the findings of my literature research on the subject, it is important to present the most important critiques of mainstream psychological practice that have led the therapists that have invested in the so-called feminist therapy, and myself, to search for alternative, more feminist ways of doing psychology and therapy.

1.1 Critique of mainstream psychology

Until the 1870s, psychology was considered a domain of philosophy. Psychology officially became a science in 1879, when Wilhelm Wundt founded the first laboratory dedicated exclusively to psychological research in Germany. From that moment on, Psychology strived to gain legitimacy and be considered a science among the others. In order to do so, it had to engage in the dominant western scientific mindset and practices. Psychology has become deeply embedded in the positivist model, where objectivity and logic are cherished, while research rooted in different epistemologies, and therapies that do not qualify as evidence-based are being denied access to the mainstream field. Nichterlein & Morss (2017) describe psychology as a discipline that has come to prefer familiarity and block the unexpected by “turning the study of our psyche and our condition into a subjugated and subdued discipline that is entirely distanced from its aspirations and from its possibilities” (Nichterlein & Morss, 2017, p.28). Psychology has developed a kind of dogma,

where new-age psychologists are being trained to proliferate a specific way of doing science, of engaging in therapy, of observing and acting (Nichterlein & Morss, 2017). By fixating on 'objective knowledge' psychology trains color-blind subjects, with a receding ability to engage with the unfamiliar and to comprehend the complexity of its subject matter, because it "persists in a desire to domesticate its subject instead of engaging with it constructively" (Nichterlein & Morss, 2017, p.31).

That is not to say that a standardized training in discipline-specific techniques and values is inherently dogmatic. However, having built its legitimacy by engaging in hegemonic positivist practices, psychology seems to base its scientific identity in the proliferation of such techniques, fretfully dismissing anything that could endanger that status. That is clearly demonstrated by the homogeneity of published articles in the mainstream journals, where only the ones that implement 'objective research designs' by using 'value-free researchers' manage to get published. In the same way, the therapies that are widespread in public health institutions, are the ones that have gained the legitimacy of the evidence-based label, after being tested in positivist research designs.

However, the notion of evidence-based treatment collides with feminist visions as the therapies that are implemented massively are becoming more and more sterile and superficial. Furthermore, in the base of their legitimacy lies their ability to be measured and tested, which diminishes qualitative sources of knowledge, such as intuition, personal experience, and trans-generational knowledge that often enough feminist therapists rely on.

1.2 Feminist therapy: Basic Principles

That is where feminist therapy emerges. In this section, I will present some basic concepts in feminist therapy. Then, I will present what I believe is missing from the existing literature and which aspect of feminist therapy I am interested in exploring in my research.

Feminist therapy differentiates from other types of therapy, in that it is not merely a set of techniques produced under a theoretical framework of psychopathology, but a philosophy of therapy, value-driven instead of technique-driven (Brown, 1994, Hill & Ballou, 1998). Feminist therapy opposes the medical model of illness, that promotes the broad categorization and pathologizing of most human behavior that fails to fit in the hegemonic-idealized cast of normal (Brown, 1994).

Hill and Ballou (1998), in an article that looked at how therapists politicize the therapeutic relationship, setting, assumptions, techniques, and dialogue, have summarized some of the basic principles of feminist therapy. One of the main principles that they proposed that was vital to feminist therapy was the inversed "the personal is political," as in the "political is personal." They believe that distress has a sociocultural basis, and they seem to locate intersectionality at the core of doing therapy in a feminist way. In other words, in feminist therapy, it is essential to consider the intersection of race, class, gender, and sexuality in the making of the client's problems, but also in the therapeutic relationship itself (Hill & Ballou, 1998).

What becomes evident here is that an important aspect that separates the so-called feminist therapy from other types of established therapies is the prior determination of the therapists to use their political and theoretical feminist values in the core of their practice. These theories and values are used as the theoretical base that will form some assumptions about the client's symptoms, and that will determine the therapeutic context, rules, and form of the therapeutic relationship. Furthermore, these theories and values inform the techniques that are used in the therapeutic context. In other words, for many feminist therapists, an essential aspect of doing feminist therapy, are the values of the therapist, a notion that I am interested in deconstructing and determining if we can render a therapy feminist without expecting the therapists to study in-depth feminist theory and practice. Particularly, I am

interested in exploring if Gestalt therapy already encompasses feminist values such as intersectionality and assemblage theory so that a more significant number of therapists and clients can profit from these feminist values.

Building on the elements that constitute what is called feminist therapy and precisely the therapeutic frame, according to Hill & Ballou (1998), another critical principle of feminist therapy is the horizontality in the therapeutic context. There seems to be a high consensus in feminist therapy literature about that aspect.

Furthermore, Laura Brown (1994) asserted that in feminist therapy, the power imbalances of the therapeutic frame have to be analyzed and forefronted in the therapeutic procedure. Those power imbalances can be real, pertaining to the salary of the therapist and the therapeutic frame, the power of the therapist in establishing the setting of the therapy and its terms, but also symbolic and sociocultural based (Brown, 1994). Creating an egalitarian relationship in no way means that the feminist therapist undermines the power dynamics that are in session or believes that an equal relationship without power imbalances is possible. However, they include those imbalances in their analysis and their practice. "Understanding the power of the therapist in the psychotherapeutic relationship from a feminist perspective requires this sort of continual close inquiry into the cultural and political context in which each therapy relationship is situated, into the meanings lent to therapy and the therapist by that context, and into the significance of the therapist to all players (Brown, 1994, p.113)".

1.3 Feminist therapy: an epistemological shift

Another point that feminist therapy differentiates itself from mainstream psychological practice is its (lack of) proximity to the positivist model of science that mainstream psychology is embedded. A reason for that is that feminist therapy is not easily

measurable or contained as a consistent type of therapy, as it can vary from therapist to therapist, from client to client (Brown, 1994).

In feminist therapy literature, there seems to be a consensus on the critique of mainstream psychology's epistemological framework. Apart from drifting away from positivism, feminist therapy questions other epistemological rigid entities of mainstream psychology, namely identity. Mainstream psychology views identity more as an individual unit, and less as a contextual unit that is influenced by various aspects of personal, social, and political life (Nichterlein & Morss, 2017). Most therapies view psychopathology as deriving from an individual identity. At the same time, some go further to include relational aspects of identity, as in systemic therapy, where psychopathology is considered to derive from the "system" in which the client is embedded, which is usually based on a heteronormative understanding of family (Barrett, 1998). Furthermore, Barrett (1998) argues that for therapists that belong to the dominant culture to help our clients develop a (positive) contextual identity, we need first to assert our dominant status and develop an awareness of our dominant white identity and privilege.

In order to transcend hegemonic notions of identity and move towards more feminist and inclusive understandings of it, we need to question and subvert dominant understandings of identity. Nichterlein & Morss (2017), propose to challenge psychology's unit of analysis through Deleuze's notion of assemblages, where the identity is always an emerging entity, continuously intersecting with the elements of its context.

1.4 Feminist therapy and contextual therapies

As feminist therapy does not rely on a prescribed set of techniques, its base is frequently an integrative approach to psychotherapy, which means that each therapist is trained in various techniques and forms of psychotherapy that they think are compatible or

can be made compatible with the philosophy of feminist therapy (Brown, 1994). In feminist therapy, the therapist often is their own expert, as it is a branch that was developed not by one authority, but by the ideas and practice of various feminist psychologists that tried to incorporate feminist theory and practice in therapy (Brown, 1994). While searching about feminist therapy literature, I have come across research exploring the ways that feminist therapists use creative ways to modify mainstream therapy techniques such as CBT or other techniques to make them compatible with feminist therapy (Hill & Ballou, 1998). However, I have not found extensive research on the possible compatibility of new-age contextual therapies such as Gestalt therapy, Narrative therapy, or third-wave CBT such as Acceptance and Commitment Therapy with feminist therapy, which is an idea that I am interested in further exploring.

However, not all types of therapy can be utilized in a feminist way. While there are some types of therapy that feminist therapists have modified to fit the context of feminist therapy, some others are harder to be utilized in a feminist way. For example, systemic therapy assumes a causality for mental distress that derives from a heteronormative notion of family and try to treat it by utilizing a narrow gaze, on the system of parents and siblings (Barrett, 1998, Nichterlein & Morss, 2017). In the same way, Deleuze and Guattari in *Anti-Oedipus* critiqued Freud and psychoanalysis as focusing on the nuclear family and betraying the revolutionary insights of psychoanalysis by "forcing the study of the unconscious back to the familiar, back to family dynamics, rather than exploring further its ongoing revolutionary potential" (Nichterlein & Morss, 2017, p.40). Deleuze and Guattari also critiqued the rigid frame of psychoanalytical therapy, with the therapist functioning as a distant authoritative figure but also with the function of the exchange of money between the therapist and the client, with the first one imposing rigid, strict rules about charging money for a session even if a client has canceled in time (Nichterlein & Morss, 2017). Similarly, many types of

evidence-based therapies used by strictly adhering to a therapy protocol can collide with feminist visions, since the therapist is expected to utilize psychological techniques from a certain pool of tools, irrespective of the client's particular needs or background.

What seems to be a viable solution for feminist therapists are new-age contextual therapies, such as Gestalt therapy. Those therapies' theoretical basis and assumption about psychopathology factor the client's context and environment in a way that, in my opinion, resembles intersectional feminist theories.

1.5 Gestalt therapy

Although the link between feminist therapy and contextual therapies have been made, it has not been systematically researched or analyzed. Specifically, there have been associations of feminist theory to narrative therapy (Hill & Ballou, 1998, Nichterlein & Morss, 2017, White & Epston, 1990), but not with Gestalt therapy, which could also contain feminist values inherent to feminist therapy as found in the literature, such as intersectionality. In this research, I will focus on Gestalt therapy, as I feel that it is the closest one to feminist therapy. For example, Gestalt therapy considers the client's environment and context in the assumptions of their distress' causality, but also in the construction of the therapeutic plan. Furthermore, the therapists are encouraged to build a collaborative therapeutic relationship with their clients and to be authentic rather than maintaining a distant therapeutic persona, as they are encouraged to use self-disclosure in therapy.

Research in Gestalt therapy has identified the contextual focus as an important aspect of one's experiences. Gestalt therapy places an emphasis on the "whole," meaning that it considers someone's reality as consisting of interlinked elements creating a "whole," rather than individual assets (O'Leary, 1992). Every aspect of someone's behavior can be considered as a manifestation of the "whole," meaning that we cannot comprehend "psychopathology"

without examining someone's context (O'Leary, 1992). In the same way, as far as healing is concerned, Gestalt considers someone's environment as an essential aspect in the therapeutic procedure that needs to be addressed at all times, either when helping the client negotiate how to compromise some aspects of their behavior to create less friction with their environment, or how to change their environment themselves (O'Leary, 1992). This consideration of someone's context as constitutive of their identity and their symptoms raises questions of whether Gestalt therapy already encompasses some feminist values in its core theories and values. However, we still need to determine if the way that these values are manifested can represent feminist intersectional values since Gestalt theory speaks of a "whole" encompassing intersecting identities/ locations while Puar's intersectionality through assemblages' views subjectivity less as a whole and more as fragmented and always in process.

1.6 What is missing from the literature

In this research, I am interested in what constitutes feminist therapy, under the assumption that contextual therapies have a proximity to feminist theories of intersectionality, as they consider someone's context, hence social, personal, political environment as contributing to their mental health, and specifically in the problems that they are trying to address.

First, I want to explore if contextual therapies and specifically Gestalt therapy is theoretically close to some of feminist therapy's theoretical bases, something that has been abstractly insinuated in the feminist therapy literature, but not explicitly analyzed. Secondly, and building on the previous inquiry, I assume that a crucial aspect that constitutes a therapy feminist is intersectionality and the construction of the therapeutic plan according to someone's race, class, sexuality, and gender but also in including a power analysis in the therapeutic plan and the therapeutic practice. That produces questions of how important is

someone's background, environment, and place in the world in the assumptions that a therapist makes about the client's problem, but also about the solutions to that problem. Also, it produces the question of how a therapist practices psychology, how they build their therapeutic persona, how they deal with authority and important therapeutic decisions such as diagnosis, self-disclosure, and (physical and emotional) proximity to the client (therapeutic relationship).

Thirdly, the questions raised by including intersectionality in the psychological practice brings us to the question of how the therapist views the client's identity. So, it's not only about practicing intersectionality but about how they view the world and the people they are trying to help. It's not only a practical question but an epistemological one as well. For that reason, I am interested in looking at intersectionality through the lens of assemblage theory.

While looking at the titles in *Women & Therapy Journal*, there were many research articles about how to incorporate intersectionality in art therapy, family therapy, or couples' therapy, but none discussing how to integrate intersectionality in mainstream psychological practice through contextual therapies. Additionally, there was much research on how to explore and analyze the identity of the therapist that belongs in the dominant race, but none in exploring how the conceptualization of the client's identity through the lens of dominant psychological science inhibits a feminist practice of therapy.

In other words, there is much literature on the critique of mainstream psychology as well as in doing feminist therapy as an antidote to the oppressive aspects of mainstream psychology. A significant focus in feminist therapy literature has been on the political aspects of feminist therapy and specifically on how to politicize therapy, how to create social change through feminist practice and how feminist therapists can stay true to their values and their political/ activist agendas through feminist therapy. Furthermore, feminist therapists have

analyzed how intersectionality is a core element of feminist therapy. Deleuze and Guattari have critiqued mainstream psychology's unit of analysis, and Nichterlein & Morss (2017) have proposed that viewing identity through the lens of assemblage theory can resolve some of the friction between mainstream psychology and feminist theories. However there has not been a research on the presence of intersectionality and/or aspects of assemblage theory in contextual therapies and specifically Gestalt therapy, nor has an analysis of intersectionality and identity through assemblage theory in Gestalt therapy has yet been proposed as a way to incorporate feminist values in mainstream psychology. That is what my research aims to do.

2. Theoretical Framework

In the following chapter, I am going to analyze the key theories and concepts that formed my hypothesis, and that will later be used to conduct and analyze the interviews with four Gestalt psychotherapists. To start with, I will present a brief overview of the main concepts of intersectionality. Moreover, I will delineate some basic critiques of the model, and I will analyze the angle under which I will incorporate intersectionality in my analysis, namely intersectionality as Puar (2012) has proposed, a post-human, fluid intersectionality, through the lens of assemblage theory. Later, I will explain why I believe that Gestalt therapy has a proximity to these feminist values, and I will finish the chapter with an analysis of assemblage theory. At the end of this chapter, I hope that the main theories and values that will inform my analysis will be explicit, as well as the rationale behind my research questions and goals.

2.1 Intersectionality: a brief overview

Intersectionality is a term coined by Kimberle Crenshaw in 1989, in a paper that was making a case about the discrimination and violence against black women, through an analysis of the bias in the US legislative system. In that paper, Crenshaw (1989) made a case about the inherent racism and sexism that historically have oppressed black women, and that was still evident in court cases of rape against black women. Notably, she argued that "intersectionality is a lens through which you can see where power comes and collides, where it interlocks and intersects." In that article, she offered the famous analogy of traffic in an intersection to explain intersectionality, which has been widely used ever since to describe the essence of the theory. Ever since, intersectionality has been complemented and analyzed by major theorists in the field and has become a central axis of analysis in feminist academia.

While Crenshaw coined the term, the need to develop a new frame that would eschew white feminism and consider the multiple axes of oppression that marginalized people endured, was already voiced by many feminist theorists. A historical moment that has been recognized as a symbol of the emergence of black feminism and intersectionality is when Sojourner Truth rose to speak at a Women Rights conference in Ohio, and despite some women's efforts to silence her she gave a speech about slavery's impact on black women and produced the famous words "Ain't I a Woman?" (Crenshaw, 1989). In the following years, many theorists such as the Combahee River Collective (1981), Audre Lorde (1981), and Bell Hooks (1982) analyzed the struggles of women of color and opened the way for the emergence of intersectionality. Other theorists enriched and complicated the theory by foregrounding intersectionality as the main axis of new feminist epistemologies such as Donna Haraway with *Situated knowledges* (1988), Patricia Hill Collins with *Standpoint theory* (1990) and Sandra Harding with *Strong Objectivity* (1992).

Intersectionality, essentially, is an orientation that views oppression as deriving from a set of interconnected social and political identities such as race, gender, sexuality, and class. It offered a new way to think about power, a way that treated privilege and oppression as confluent and relational, and that transcended one-dimensional analyses of power imbalances between groups, by attending to within-group differences (Nash, 2017). What is essential about intersectionality is that it considers several elements that construct and operate in someone's identity and oppression that do not limit to general categories of gender, race, and class, but transcend to more nuanced axes of signification such as age, nationality, religion, body abilities, etc. (Wekker, 2009). "Gender is not the only, or most important, object of research in this theoretical perspective, but is always investigated in conjunction with other grammars of difference. The intersectional approach, in other words, entails that gender

always carries ethnic and class significance, and that race/ethnicity always already has a gendered and class dimension” (Wekker, 2009, p.73).

2.2 Critiques of intersectionality

In recent years, intersectionality has become the rubric under which most feminist theories are organized. Many theorists are critiquing intersectionality and questioning whether the time has come for intersectionality to be replaced by a new theoretical framework. Fundamental critiques focus on the fact that intersectionality has entered the mainstream neoliberal academia and has been legitimized, as it offers the axis around which mainstream feminist knowledge is being produced. Some theorists contest that the legitimization of intersectionality has granted it power that has rendered it an integral part of the power structure that it was initially trying to subvert, and that has changed its radical and change-provoking elements. Bilge (2013) argues that the neoliberal academia whitens intersectionality, as race is being erased in contemporary feminist intersectional scholarship, and the products of black feminist thought are being disciplined and diluted. The incorporation of intersectionality in the same system that it was trying to subvert, according to Bilge (2013), incorporates "various progressive struggles into market-driven and state-sanctioned diversity governmentality, to which the question of knowledge production and institutionalization and the building of new disciplines are integral" (Bilge, 2013, p.6).

Furthermore, intersectionality has become so inextricably linked to black feminist struggles and agendas that race has come to be equated to non-whiteness, and whiteness is left out from the analysis (Bilge, 2013). Intersectionality was vital in bringing some power to the marginalized and in moving some focus in their struggles as well as in eschewing white supremacy. However, some theorists are concerned that by continuously foregrounding intersectionality in our analyses, without allowing it to change and evolve, we run the risk of

repeatedly othering the "Other" and proliferating a category of "women of color" emptied of its initial meaning (Puar, 2012). "Despite decades of feminist theorizing on the question of difference, difference continues to be "difference from," that is, the difference from "white woman." Distinct from a frame that privileges "difference within," "difference from" produces difference as a contradiction rather than as a recognizing it as a perpetual and continuous process of splitting. This is also then an ironic reification of racial difference" (Puar, 2012, p.53).

Puar (2012) has asserted that intersectionality has been rendered a representational politics battlefield, and she has tried to bridge the gap between intersectionality and post-human scholars that are concerned with nonrepresentational aspects of the "matter itself." These scholars, and especially those influenced by Deleuzian thought, believe "that the liminality of bodily matter cannot be captured by intersectional subject positioning. They proffer instead the notion that bodies are unstable entities that cannot be seamlessly disaggregated into identity formations" (Puar, 2012, p.56). Puar (2012) believes that intersectionality does not need to be replaced but instead offers a solution to intergrade recent critiques into a reshaping of the theory, to fit modern notions of identity formation. For her, that can be done by considering intersectionality through Deleuze and Guattari's assemblages.

While I will explain the concept of assemblages in detail at a later point, in Crenshaw's traffic intersection analogy, intersectionality is described as an event, and identification as an event, an accident, a fact (Puar, 2012). However, new materialist theorists view identity as a liminal process whose traces cannot always be seen or trailed. In the same way, mainstream psychology views identity as a horizontal event regularly dismissing the intersection of powers that contribute to its construction, while I believe that it would greatly benefit from a post-human, fluid conceptualization of identity formation. That is the reason

why I want to use intersectionality in my analysis, but an intersectionality through assemblages. I will further analyze this point later in this chapter.

2.3 Contextual therapies: Gestalt Therapy and its proximity to intersectionality

As already mentioned in the previous chapter, although there has not been a direct link between new-age contextual therapies and feminist therapy, I have proposed that contextual therapies such as Gestalt therapy might be compatible with feminist values, and be used in feminist therapy. Some of the characteristics that I believe renders them compatible with feminist therapy are that they consider the client's environment and context in the assumptions of their distress' causality, but also the construction of the therapeutic plan.

Gestalt therapy specifically, believes that someone's context affects their experiences and that a person cannot be fully understood without their context. Gestalt therapy has a systemic element that can be linked to feminist notions of intersectionality. While these contextual elements of Gestalt therapy seem to be in proximity to notions of intersectionality, that does not render them intersectional. Intersectionality is inextricably connected to feminist theories and has political implications, while contextual therapies are implemented in the narrow therapeutic context. While it could be argued that the theoretical framework of some contextual therapies has been influenced by feminist thought (White & Epston, 1990), they are still embedded in the mainstream field of psychology, and they are recognized and legitimized by it, meaning that they have to comply to some "scientific" standards. However, I believe that a consideration of Gestalt through the lens of assemblages, or Puar's (2012) intersectional assemblages can help "decolonize" mainstream psychology and increase its proximity to feminist values.

2.4 Assemblages: main concept

By developing the concept of assemblages, Deleuze and Guattari denied the notion of the world as sum of representations and images and instead asserted that there is no way to determine an accurate and universal depiction of "the world as it is," but only the world as one experiences it (Nichterlein & Morss, 2017). Assemblages are amalgamations of material and immaterial, animate and inanimate, symbolic or semiotic elements that cannot be contained within one individual, but transverse through spaces and bodies (Nichterlein & Morss, 2017). "Bodies are no longer the loci of individual subjectivity but are at the crossroads of a multitude of assemblages. Furthermore, in a way that actualizes the openness of the system, assemblages are in movement; they are the result of a process of *territorialisation* of space" (Nichterlein & Morss, 2017, p.106). Deleuze and Guattari reject the duality of the body and the mind. Instead, they characterize the body as 'a body without organs' and pre-defined characteristics. Rather, they view the individual identity as established by belief and imagination and examine the possibilities of the body (Nichterlein & Morss, 2017).

As we already discussed in the previous chapter, Deleuze challenged psychology's unit of analysis, namely the individual, and proposed to conceptualize the individual through assemblages, as "an integral part of a larger ecology, a cog in a much more complex machine" (Nichterlein & Morss, 2017, p.40). Nichterlein & Morss (2017), propose that psychology needs to change the way it conceptualizes identity, healing, and difference. It needs to continually identify and analyze the flow caused by the constant movement and transformation of assemblages, a movement that Deleuze and Guattari thought that happens between 'striated' and 'smooth' spaces (Nichterlein & Morss, 2017). Striated space is "a well-defined space that captures (nomad) becomings into stable identities; into an interiority that is often confused with subjectivity but, in fact, constitutes a sophisticated mechanism of continuous control" (Nichterlein & Morss, 2017, p.125), while smooth space is a space

without border, grid or measurement, a space that Deleuze paralleled to the ocean (Nichterlein & Morss, 2017). The first one can be paralleled to mainstream psychology that restrains creativity and blocks feminist practices in entering the mainstream practice in the name of scientific legitimacy, while the second one could be a symbol of the endless possibilities (and dangers) lying beneath the surface. In a way, what I am trying to do with this research, is to examine if psychology (striated space) could open up to the unpredictability of inserting some smooth space in our practice, through creating an epistemological shift and allowing assemblage theory to change the way we view identity, psychopathology, and healing. In the same way that Nichterlein & Morss (2017) use Deleuze's smooth and striated space to insert assemblages in psychology, Puar (2012) uses post-humanist theorist's notions, to talk about how language and representation has been granted too much power. She also asserts that through assemblages, we can view intersectionality, its categories, and various identities as "events, actions, and encounters between bodies, rather than simply entities and attributes of subjects" (Puar, 2012, p.58). Deleuze and Guattari problematize a model that "produces a constant in order to establish its variations" (Puar, 2012 p.59), and instead use assemblages to foreground the event-ness of identity and insert more complex arrangements and more interactive crossings in rigid categories or identities (Deleuze and Guattari 1987 cited in Puar, 2012).

2.5 Conclusion

In the chapter above, I have offered a demonstration of the main theories and concepts that will inform my analysis. The main theory that will be the axis of my analysis is assemblage theory, and intersectionality as analyzed by Puar (2012), an assemblage-informed intersectionality. The question that is raised at the end of this chapter is, how do you bridge

the gap between theory and practice, between the theories I have demonstrated above and the mainstream psychological practice?

I have already analyzed some gaps in mainstream psychology and some qualities that inhibit feminist visions. The extensive categorization, the epistemological rigidity, the medical model of mental illness, the focus on the “objective” therapist, and the focus on the individual and the familial in a more rigid, heteronormative sense are only some of the notions that I have analyzed in the literature review (Nichterlein & Morss, 2017). The reason that this is important is that from the moment a strong therapeutic relationship is established with a client, the therapist's theoretical orientation, training, and political stance has the power to affect people's lives. That power is potentially being wasted in proliferating the hegemonic practices that ultimately maintain psychology's scientific status quo. Instead, I propose to approach psychotherapy with a new analytical frame, one of intersectionality and assemblages where the ever-going fluidity of identity offers a sense of freedom. Along, it offers a legitimate analytical frame to consider our client's (and ours, as therapists) lives, their traumas, and narratives of how those traumas came to happen, but also their truths in the "here and now" of the therapeutic procedure, their healing and their future.

3.Methodology

In order to answer my research questions, I chose to interview four therapists that practice Gestalt therapy in the Netherlands and use my own experiences as a client of Gestalt therapy as a fifth perspective. I chose interviews with therapists that practice Gestalt therapy rather than clients that receive it because I wanted to examine first and foremost if the theories and techniques of Gestalt therapy encompass any elements of intersectionality and/or assemblages. For that purpose, it seemed that talking directly with therapists that have been trained to practice Gestalt therapy could offer me the best access point to examine my assumption. Secondly, I wanted to determine if the practice of Gestalt therapy contains elements of intersectionality and assemblage theory. That part could also be examined by observing actual Gestalt therapy sessions and performing a field analysis. However, such a research design would raise ethical concerns, since I would have to be present in individual therapy sessions and interfere with my physical presence in them with the incentive of making the process of therapy and the clients my research object. As a therapist that has observed various individual and group sessions in my training in multiple settings, I have experienced first-hand the impact that the physical appearance of an outsider can have in the therapeutic process and as an extension, to the clients that are in a vulnerable position and moment in their lives. In those instances, I have been present with the role of the therapist, and I have dealt with that responsibility with respect. Moreover, in those instances, as a mental health professional, I have tried to use my presence in a way that benefits the people involved, so attending the therapeutic space with the role of the researcher felt unnatural and unethical. For the reasons outlined above, I chose to approach my research through interviews with Gestalt therapists.

3.1 The interviews

My aim was to conduct four interviews with Gestalt psychologists in the Netherlands. My initial intuition was to diversify the pool of therapists, but that turned out to be limited due to accessibility and availability. Since I was looking for therapists that practice Gestalt therapy and that have been explicitly trained in Gestalt theories and techniques, I excluded therapists that used an integrative approach to psychotherapy. I contacted approximately 20 Gestalt therapists (most of them through e-mail) and ended up conducting interviews with four therapists.

Interviewing is a valuable tool in feminist research, since it allows for the researcher to gain insight in the realities and perspectives of the respondents and their located truth, and is a method in line with feminist epistemologies (Hesser-Biber, P. Leavy, 2007). An aspect that separates feminist from non-feminist interviewing is the awareness of the researcher's role and their influence on the process of interviewing. In other words, the analysis of the power relations that are present in the moment (Hesser-Biber, P. Leavy, 2007). During the process of the interview, I tried to be aware of the power dynamics that were present, and that could have influenced the data. Prior to the interviews, I was open about the question that was motivating my research, namely exploring if some feminist intersectional values were present in the practice of Gestalt therapy. That could have an impact on the derived data since the interviewees might have felt the need to accentuate the connection of Gestalt therapy to some feminist values to help me with my research, and please me. However, the subjects of my research were not in a vulnerable position, but in the position of experts that were sharing their expertise with me. Furthermore, I was approaching them with the role of the student-colleague that wants to learn from their authority with full transparency on the motivation behind my research, my aims, and the process that I will follow to analyze the interviews. In that context, the power dynamics in the interviews were quite equal, or in some cases, in

favor of the interviewees, so the possibility that their responses were influenced by their desire to please me lessens.

The interviews were semi-structured, meaning that there was an agenda and a list of questions already prepared, but its structure was flexible enough for both parties to navigate the contents of the interview (Hesse, 2007). In other words, I devised a set of questions that were not strictly designated, and I conducted the interviews in a manner that allowed follow up questions. The reason I chose this format of interviews was that I wanted to give space to the experts in Gestalt to mold, and add on the material asked. The interview questions revolved around three themes. The first theme was intersectionality in the Gestalt practice, in which I asked questions regarding the way that someone's race, gender, sexuality, ethnicity, and class are being accounted for in the stages of the therapeutic process. The second theme was identity and assemblage theory in which I explored how Gestalt views the construction of identity, and whether assemblage theory is already present in Gestalt practice or if it could be implemented in the clinical practice. Finally, the third theme was about the therapeutic relationship and about power in the therapeutic relationship, to explore possible similarities of Gestalt therapy to the literature about feminist therapy and the importance of an intersectional power analysis in the therapeutic practice.

The interviews were audiotaped after retrieving consent from the participants. After the completion of the interviews, I transcribed the audio file verbatim, meaning that I transcribed every word spoken, along with grammatical errors, filler words, false starts, and informal fragmented speech. I tried to transcribe as many non-verbal elements of the interview as possible, like pauses, laughter, and essential for the content hand gesturing. I chose this way of transcribing to be able to better grasp the verbal and non-verbal elements of the spoken word that might contain meaning. This way of transcribing was also chosen to

facilitate the analysis of the data, for which I used discourse analysis, which depends greatly on the language to extort broader meanings.

3.2 Analysis

As already mentioned above, I used discourse analysis to analyze my data. Discourse analysis is not a technique but a method, a set of approaches that can be employed by researchers that work with texts (Hesser-Biber, P. Leavy, 2008). Discourse analysis aims to explore how meanings are produced through language and how power relations are reproduced in narrative accounts (Hesser-Biber, P. Leavy, 2008). According to Hesser-Biber and Leavy (2008), discourse analysis is influenced by Derrida's notions of deconstruction, and Foucault's analyses on power, regulation, normalizing, and prescription, that are enforced through the western disciplines of biology and social sciences. Those influences render this method of analysis compatible with feminist research methodology, as it incorporates a political element in the study.

In the same way, discourse analysis has been used in psychology since the 1980s as a way to critique mainstream psychology and to provide an alternative to the medical model of illness and positivist research designs (S. Hesse-Biber, R.B. Johnson, 2015). By challenging the view of language as a means to paint already existing internal and external realities, discourse analysis "provided a reconceptualization of language so that it offered a means of constructing social reality and achieving social objectives, rather than being used to simply label preexisting states" (S. Hesse-Biber, R.B. Johnson, 2015, p.375). Essentially, what defines discourse analysis -since there is not one way or technique to perform it- is the focus on the language used in the texts to identify the themes and systems of ideas that emerge, but also the truths that are produced and the realities that are being marginalized in someone's use of language (Hesser-Biber, P. Leavy, 2008).

An essential part of my research is my positionality regarding the research question and the reasons that lead me to explore this subject. My aim is to further incorporate my positionality in the analysis. Specifically, I am using my perspective as a client of Gestalt therapy to contribute to the answering of my research question.

3.3 Limitations

As already mentioned, the sample of my study was small and not quite diverse, due to the lack of accessibility and availability. The participants were located in a specific city in the Netherlands (Amsterdam) which could also have an influence on the results since Amsterdam is a big, international city, which increases the possibility that the therapists I interviewed had worked with a variety of races, cultures, sexualities and gender expressions. For the reasons outlined above, the results of my study cannot be widely generalized. However, the results of the study could provide possibilities for further studies on the subject, which will be discussed in the conclusion.

4. Analysis

In the following chapter, I will unravel the findings derived from analyzing the data from four interviews with Gestalt therapists. The interviews were conducted between January and February of 2020 in Amsterdam, Netherlands, with Karen, Vera, Marten, and Eric. The interviewees were all white and cis-gendered, trained in and practiced Gestalt therapy. Two of them identified as women and two as men. Two of them were Dutch, one of them was from the UK, and one of them had a mixed ethnicity. Most of them received coded names, namely Karen, Vera, and Eric. Karen, Vera, and Marten were very experienced Gestalt therapists, working with clients for several years, while Eric was younger and chronologically closer to his theoretical training in Gestalt, but still had experience in working with clients. Marten identified as gay and feminist, while the rest did not position themselves in regards to their sexuality or feminism, nor were they asked to do so, since that surpassed the aim of the interviews. As already mentioned in the methodology chapter, the interviews were semi-structured.

As far as the analysis is concerned, as mentioned above, I used discourse analysis. After the completion of the interviews, I transcribed them verbatim and began perusing the material. After completing a careful reading of all the interviews, I started freely coding and analyzing some key phrases of the interviews. At that stage of the analysis, I had some codes in mind that would come up, that derived from the thematics of the questions of the interviews, but also from my memory of the interviews and things/ notions that I found interesting and noteworthy. After the first coding was completed, I scanned the interviews a second time, where I started refining and grouping the codes into more cohesive themes. After the second coding, I already had formed an idea of the reoccurring themes and concepts of the interviews, so I started grouping the coded phrases under the most prominent themes. That led to the weaving of an analysis derived from the themes that came up, but also from

the language that was being used. In the following chapter, I will present the findings of my analysis of the interviews and my autoethnographic notes as a client of Gestalt therapy. The themes that came up and that will provide the structure of this analytical chapter are Identity, Process, and Power.

4.1 Identity

Identity was a fundamental concept throughout my thesis. The idea that thinking of identity through assemblages could counteract some issues of mainstream psychology, and lead to more feminist ways to view and do therapy, informed the process of building my research questions, as well as choosing my methodology and conducting the interviews. Although I was exploring whether we can find aspects of intersectionality and assemblage theory in Gestalt therapy, I already had some ideas of those theories being present in Gestalt through my own experience as a client in that school of therapy. However, the analysis of the interviews led to the emergence of concepts and theories that connected with assemblage theory on a deeper than expected level. Specifically, not only some Gestalt theories that inform Gestalt therapy's practice contain some elements that resembled assemblage theory in a theoretical level, it further seemed to inform the philosophy behind it, with practical extensions.

I will begin this section by presenting some theories behind Gestalt practice, that share many similarities with assemblage theory, and I will continue with my findings on the notion of identity in Gestalt therapy. Lastly, I will present some practical examples that further showcase the fluidity of identity, and the importance of the body in Gestalt.

To start with, when I asked my participants about the identity formation in Gestalt and assemblage theory, all of them mentioned its proximity to field theory. Field theory is one of the most prominent concepts in Gestalt, and it proposes that a person cannot be viewed

isolated from their context and that their identity is formed in the interaction between the person and their environment. That theory provides a start in connecting Gestalt with intersectionality and assemblages. In Karen's words: "Yeah, (..) my identity is formed by my field, and my field is everything I have experienced, and that is my family of birth, and it's my own family, it's my schools and work, but it's also my longings for the future. That's all in my field, and that's also affecting my identity, that is part, it makes my identity (...). That is never fixed because it's always, in a way it's fluid, but it's also really a core, a core that it's not that fluid anymore, you know?". This view of identity is aligned with the theory of assemblages, as they are made with more than material elements, specifically with "content," that according to Deleuze and Guattari included bodies, actions, and passions (Nichterlein & Morss, 2017). The notion of "content" can be linked to Karen's view of identity as an amalgamation of past, present, and future as it is formed from past experiences, significant relationships, emotions, and longings for the future. Even though many elements from Karen's quote insinuate that identity is a fluid concept, the language she uses implies that there is a certain rigidity to it ("is formed, makes my identity, a core"), as it seems that all those influences point to an end result. However, that end result, the moment that the identity is something that can be grasped and handled, seems to be the "here and now" of the therapeutic process. The "here and now" of the therapeutic process appears to be a core element in practicing Gestalt therapy, and it resonates with assemblage theory, as assemblages are not stable entities but work more like 'swarms of difference that actualize themselves into specific forms of identity' (May, 2005, p. 114 through Nichterlein & Morss, 2017). The "here and now" of the therapeutic process can be the moment that this actualization takes place for Gestalt, before it slips again to an endless loop of becoming. In a similar way, Vera explained the notion of identity being interrelated with someone's context through the theory of the boundary of contact. There everything is connected as "I breathe in,

breathe out, and I'm connected with the air, but also I'm connected with my family, with, well, finally also with the whole world and cosmos, (...) so, then the final consequence is that your identity is only in this context...". Vera seems to assert a post-human conceptualization of identity and to approach the dissolution of the nature/culture divide, as bodies are treated as porous (connected with the air through breathing) and subjected to a "robust interrelationality of material agency" (connected with air-family-the whole world and cosmos) (Alaimo, Hekman, 2008, p.202). Eric, on the other hand, explained the fluidity of identity through the theory of the contact cycle, or loop of awareness, which proposes that any action has a reaction that influences someone's environment and context in an infinite process of change.: "So this is like the contact cycle for Gestalt. Everything we do has an impact, that impact has an impact on us back, so we're constantly in...flow.". According to Eric, that is practically integrated in Gestalt practice, as change is always seen as starting with ourselves since a shift in our position will inevitably change our environment, that will react to our movement. The theory of the contact cycle can be connected to a Deleuzian understanding of subjectivity, where agency is no longer an attribute of subjects and objects, but a "doing/being in its intra-activity", or in other words a gear in the infinite loop of becoming (Barad, 2003, p.821). "Humans are neither pure cause nor pure effect but part of the world in its open-ended becoming" (Barad, 2003, p.822).

According to my interpretation of the interviews, Gestalt therapy seems to reject the notion of identity as an event, and rather embrace the notion of identity as a process. Vera used the Dutch word *zichzelf* to explain the way she views identity formation. For her, *zichzelf* is the process of becoming yourself, a process "of dialogue and exchange," which is a lifelong and ongoing process, and it depends a lot on someone's past, but also the people, circumstances, and contexts that they will encounter. This idea offers a direct link to assemblage theory, as identity is seen as an ongoing process, rather than a prescribed set of

events and attributes. In a way, for Vera, identity is more a need than a construct, as "the call for, or the need for an identity is when it is questioned," and the need "to have a clear outspoken identity" is more prominent when you need "to keep yourself up in an environment which does not accept you." That is in contradiction to mainstream psychology's notion of identity, as it is sometimes seen as an "essence, something fixed or innate even" (Vera) that can be hidden in the unconscious or the subconscious sphere and that reflects the reality and the truth (Nichterlein & Morss, 2017).

Another interesting point of consensus between the interviewees is regarding the materiality of the body. Specifically, the boundaries of the body are not considered fixed, nor is the skin signifying the end of our material body. One part of this argument is that we are in constant interaction with our environment and the air we breathe, the food we consume, and the people we touch, in a way that we can not always pinpoint where we end, and our context begins. The other part of the argument is that depending on one's context, life story, and their symptoms, they occupy a different amount of space. For example, Marten shared with me the story of a woman that fled from her country and was experiencing sadness and difficulty connecting with her body and the people around her. In her case, according to Marten, it seemed that her body receded inside her physical body, as she was highly introverted and was unable to feel, and they worked together to expand the boundaries of her body until she was able to feel again. In the same way, as Eric has noticed in his practice, clients can turn into their inner child during the session, with their voice and their posture transforming. The fluidity of our bodily boundaries and the notion of becoming a child in a therapy session are very familiar to me as a Gestalt client. On numerous occasions, especially when we were doing experiential exercises to contact my feelings/awareness, or to contact my past self, I have felt becoming smaller, or bigger and I have felt my bodily senses numb or heightened as if the space I was occupying in my body was fluctuating. The consideration of bodies as fluid

and fluctuating in size and shape is adjacent to Deleuze's conceptualization of assemblages escaping traditional definitions of self, and of bodies as "no longer the loci of individual subjectivity but at the crossroads of a multitude of assemblages" (Nichterlein & Morss, 2017, p.106). That brings to mind Ahmed's (2014) assertion of our bodies being marked and traced by the feeling of pain. Pain for Ahmed (2014) signifies how our bodies occupy time and space, how they dwell, curl, shape, -or disappear from our consciousness in the absence of pain-: "I become aware of bodily limits as my bodily dwelling or dwelling place when I am in pain. Pain is hence bound up with how we inhabit the world, how we live in relationship to the surfaces, bodies and objects that make up our dwelling places" (Ahmed, 2014, p.27). In the same way, we could assert that psychological pain could also have the power to signify our bodily image or the absence of it.

The boundaries of the body seem to be fluid in the therapeutic relationship as well, where the field is treated as a space that can host energies that transverse through bodies, as assemblages are always "in movement; they are the result of a process of territorialisation of space" (Nichterlein & Morss, 2017, p.106). In the therapeutic relationship, Gestalt therapists seem to account for a third entity that consists of the amalgamation of the therapist's and the client's fields. In that third entity, a therapist might physically feel the client's pain (Karen), or a question or an assumption might appear in the therapist's mind, that is originating from the client. That coincides with my own experience with a Gestalt therapist, where our boundaries with each other have become more fluid. For example, when I had the tendency to emotionally disconnect from the subject, without being aware of it, we used my therapist's body to alert us when I was disconnecting, since she was physically feeling it in her body, as a sensation of disconnecting and drifting away. At that moment, we treated our bodies as interconnected rather than separate entities, and we used that as a tool in the therapeutic process.

In the same way, someone's social and political identities can render the boundaries of their bodies more or less expanded. An example that Marten attended to is one of a trans man that was once his client, that had to get used to the space that a male body is considered to occupy: “nowadays, I notice, in this male body, I can walk in the street just in a straight line. And I don’t have to step out every time. But I’m so used to stepping out that I am bumping into people because I want to go aside and the other one as well because they see me as a man now”. That example underlines the consideration of bodies as not only biological entities, but sociopolitical ones as well. That is in line with an intersectionality through assemblage as one’s corporeal identity is fluid and momentarily shaped by the bodies of others that meet one’s trajectory. In the words of Grosz (1994) “Significantly, this notion of the body as a whole is dependent on the recognition of the totality and autonomy of the body of the other. The ego is thus a map of the body’s surface and a reflection of the image of the other’s body. The other’s body provides the frame for the representation of one’s own. In this sense, the ego is an image of the body’s significance or meaning for the subject and for the other. It is thus as much a function of fantasy and desire as it is of sensation and perception; it is a taking over of sensation and perception by a fantasmatic dimension. This signifiatory, cultural dimension implies that bodies, egos, subjectivities are not simply reflections of their cultural context and associated values but are constituted as such by them, marking bodies in their very “biological” configurations with sociosexual inscriptions.” (Grosz, 1994, p.38)

4.2 Process

After analyzing the themes that rose regarding the construction of identity, and the ways that intersectionality and assemblage theory can be found in Gestalt therapy's theories and practice, I will proceed to the next theme that will structure my analysis, namely, process.

In that section, I will present the ways that I found that intersectionality and assemblage theory are present in the practice of Gestalt therapy in the form of prior assumptions on behalf of the therapists, but also in the “here and now” of the therapeutic process. Then I will analyze the ways that those theories are present during the process of therapy, with more tangible examples of specific techniques used in the therapeutic process.

What appeared to be common among all the interviewees, is that they are very cautious with making interpretations about how someone's race, gender, sexuality, ethnicity, class or any other social or political identities that are evident prior to the beginning of the therapeutic process, might have influenced their symptoms. An important aspect that all of them seem to take into consideration is awareness. Specifically, according to the participants, the Gestalt therapists try to be aware of their field and the way that their identities and their experiences might influence their assumptions, and try not to force them on their clients. "And then, and that's typical Gestalt, I'm always aware of my own context and my own field, and knowing that I look with my own eyes, with my own ears and they are colored by my field. You know, so my colleague will see other things that I see, so it's not about the truth, but it's about what is it that I feel that I sense, that I stick on, so that's what's happening when someone is here for the first time" (Karen). In another excerpt, Karen gave me the example that the first time she had a client coming from a different race or ethnicity than her, she had no prior knowledge or experience as a point of reference. While she started having more clients culturally and racially diverse than her, those experiences were added to her field, so with every new client, her field was different, and she would make different assumptions and think differently. This example further shows an assemblage driven conceptualization of identity since it shows that the therapist is never the same person, and with every new person we interact, we change and become changed through the cycle of contact. While the assertion that the Gestalt therapist makes no assumptions about their clients prior to the beginning of

the session would be a-political and missing important nuances about power and privilege, Karen seems to pointing to another direction. Specifically, it appears that she is rejecting the notion of the objective therapist and favor a notion of positionality. In a way, she avoids the apolitical positioning of "I don't see color" and rather asserts that she uses her assumptions with caution, knowing that her field is limited by her positioning.

However, Marten, who identifies as an intersectional feminist, further incorporates an analysis of power and privilege, prior to the start of the therapeutic sessions: "So, and I think it's not very Gestalt to make an interpretation already or to make it into a clinical assumption, because it's more about what appears in our contact. You know, what I, I think I am most aware, and that's also what I'm training Gestalt therapists, to be what I am, and how it influences people coming here, I work here in this room, how it influences people that they see me, as a white man of six foot seven... big strong voice etc., the house, the books, the pictures, etc." Although all the interviewees mentioned working on their awareness, trying not to force their assumptions and being open to be falsified, Marten was the only one that actively incorporated an analysis of the ways that his field and his social and political identities can already influence the sessions, before a therapeutic relationship is even built. That resonates with an intersectional approach to therapy, that many feminist therapists try to incorporate in their practice. For Barrett (1998), a conscious attending to the frame that therapists choose to evaluate their personal and their client's identity, can even lead to social change "A complex, contextual frame for understanding the identity of ourselves and others provides a much fuller, more integrated sense of self than an emphasis on any one or two of the various areas. Though at any given time an individual may focus on a particular form of identity, in general all levels need to be included in a full sense of self."(Barrett, 1998, p.62). Marten seems to consciously incorporate a multilevel, intersectional analysis of his positioning, that could that might lead to a more intersectional practice of psychology.

Another aspect of the process of therapy in Gestalt, are the practical ways that intersectionality through assemblage can be actualized through specific techniques. One of them is experimenting and working through the body in the "here and now". As already mentioned, the "here and now" of the therapeutic session is an essential notion in Gestalt therapy, that we previously linked to assemblage theory. When I asked the therapists how it looks practically to work with the concept of assemblage theory, they all pointed me to the direction of exploration and the body. Through different exercises and techniques, they are trying to raise awareness of what is happening to their client and help them through experiential learning.

In my experience of being a Gestalt therapy client, we have been working a lot in raising the awareness of my body and giving my body some agency. We've especially and extensively played with the agency of my body when I was feeling physical symptoms that I perceived as threatening, and I learned to engage in a dialogue with my body, ask what it wants and needs, and treat it as a voice that needs to be heard rather than a threatening entity. That was accomplished through experiential exercises in the "here and now" of the therapeutic process, where I was asked to find the locus of my distress in my body, take care of it, talk to it, or let it speak to me by answering the question "What is it telling you? What does it need?", or experimenting with different ways to interact with it, "How does it feel if you warm that area? If you hug it? Etc."

Another tangible technique of working through the body came from Eric. Eric likes to work a lot with emancipation and empowerment of people that feel that they do not have or have lost their voice. Through exercises, his clients experiment with boundaries and personal space, where he encourages his clients to become aware of the feeling of their boundaries being crossed and assert what they need from the situation (move away, come closer, stop). This experiential way of practicing empowerment can be linked to an intersectionality

through assemblage, if we view it through the lens of the contact cycle mentioned above. In that case, change is seen as happening in the "here and now" and originating from a manufactured experience in the context of therapy that actualizes someone's identity momentarily, before it slips back to the process of becoming.

Lastly, Marten has found his own way to incorporate intersectional feminism in the Gestalt practice, as he has devised a set of identity cards that he places on the floor and encourages his clients to touch them, walk on them, stand on them, feel their energy and reflect on how much space they take within them and interact with them in various ways. What is very interesting about this technique, is that he encourages his clients to embrace the intersection of their multiple identities, but does not force his assumptions about them on them. Most importantly, it supports a conceptualization of intersectionality through assemblages, as it leaves room for them to explore the fluidity of their identity on various sessions. "Interviewer: I can see assemblages a lot also in this one (showing the cards), cause one day someone might stay on the gender, the other day they might stay there, so your identity then, depends on the day, or the time, or the sun, or..."
Marten: Yes. Even within the conversation, it changes."

4.3 Power

By this point, we have talked about the more tangible aspects of the therapy session that can connect with intersectionality through assemblages, in the form of theories and techniques. I would like to conclude the analysis with the last theme that came up that I hope to bind the analysis together, namely power. The question behind looking for intersectionality through assemblages in Gestalt therapy was: Is Gestalt therapy feminist? Can it be feminist? Through the first two themes, I covered two main aspects of doing feminist therapy, namely using feminist theories and adjusting therapeutic techniques to those theories. Another

important aspect of feminist therapy that was very prominent in feminist therapy literature is incorporating a power analysis in the process and giving power back to the client, in an effort to render the therapeutic relationship as horizontal as possible (Brown, 1994). This theme of my analysis turned out to be the most complicated one since it was harder for the therapists to grasp and answer. The reason for that is that a big part of an intersectional analysis of power derives from feminist theories about privilege and power that are the most difficult to analyze and confront, especially when you haven't been exposed to feminist literature on these matters. In the following theme, I will present the ways that I found those feminist theories to be present in the therapeutic relationship and in conceptualizations of power.

To start with, as expected, a crucial aspect of Gestalt therapy is the therapeutic relationship. All the interviewees were concerned with making the therapeutic relationship as horizontal as possible. One way of doing that is by bringing their awareness in the session and with developing dialogical connections. The therapists bring their authentic selves in their session and are far from believing that the objective therapist exists. Eric explains the therapeutic relationship as a contact that aims "to meet each other half-way, sort of, in the middle." For Marten, the Gestalt is dialogical "so we are both here with all our stories, I'm visible in Gestalt, so I am talking also about myself and my awareness during the relation," while Karen and Vera also talk about bringing their true self in the sessions, and being aware of their field and how it interacts with the client's field. Another aspect of horizontality in the therapeutic relationship, as well as giving power back to the client, that is in line with feminist therapy literature is self-revealing, which all the therapists admitted on doing when they felt that it could profit the client. The therapeutic relationship in Gestalt seems to be in line with feminist therapy literature, since a part of doing therapy through intersectionality is trying to eliminate as many power imbalances that derive from the therapeutic framework as possible, and create a dialogical connection (Brown, 1994).

As expected, Marten's regards to power were the closest ones to the power analysis present in feminist therapy literature. As he was working through intersectional feminism, from the beginning of the therapy, he encountered the ways that his social and political identities could possibly interfere with his clients, and he was utilizing this power play in the process of therapy. For example, he would ask his clients, "How is it, to sit here in front of me? What are you aware when you see me, when you look at me? If I say this, what happens? (...) here we can do experiments, like ok, how would it be to sit on my chair, or how would it be to sit higher than I am, or sit lower, how would it be to push me away?" In this example, Marten seems to use an assemblage-like conceptualization to deal with power imbalances, as he uses material and immaterial elements, symbols and signs -as the metaphor of sitting on the chair of the person that holds power/ sitting higher than the person that holds power- to address and attenuate his power in the therapeutic process.

As already mentioned, the terminology accompanying analyses about power derives from feminist theories, and most of the interviewees were not explicitly trained in the feminist theories I was exploring. However, once I explained my rationale behind the questions about power, and the ways that I imagine power being present in the therapeutic sessions it became obvious that the way they viewed the therapeutic relationship contained many elements of giving power back to the client in order to make the relationship as horizontal as possible.

All the interviewees explained that when they feel that a power imbalance is present in the relationship, they bring it in the session, and they discuss it with the client: "the only thing I can say about it is that when I have the idea or the feeling that it is in our way or it is in my way, I will lay it on the table say: Hey! I feel a bit strange, or I feel a bit pushed away, or I can also ask, am I too dominant, or am I too, you know?". Karen here views power as something that can block the relationship ("in our way or in my way") rather than an aspect

that can be inherently helpful as an analytical tool, as many feminist therapists assert (Brown, 1994). However, she recognizes that once it rises on the surface, it can be utilized in favor of the therapeutic process. Another interesting aspect is that Eric, Karen, and Vera reflected on power regarding three specific elements: gender, age, and authority. Particularly, they reflected on the ways that they have experienced power being present in the therapeutic field. Karen and Vera have noticed that when working with students or younger people, sometimes they tend to hold back or view them as the authority. When that happens, they actively encourage their clients to doubt them and work on empowering them in the relationship. Similarly, Eric mentioned occasionally noticing people viewing him as the authority that they blindly listen to. Moreover, all the therapists have encountered instances when their gender has created power dynamics in the session, that they later had to bring into awareness and confront.

What appeared through these commonalities is that Gestalt therapists are aware of power and the ways that it can interfere in the process, and they use it as a tool once it is brought into awareness. However, in their accounts of power, they mention only the identities that seem to be more pertinent to them (age, gender, authority). As many feminist therapists assert, a sociopolitical analysis of power imbalances within the session is a crucial element of doing therapy through intersectionality (Brown, 1994, Hill & Ballou, 1998). Furthermore, as Marten said, Gestalt gives the possibilities to work through identities in an intersectional way since many core theories of Gestalt seem to have proximity to intersectionality through assemblage. Similarly, Karen noted that working through assemblages is a very significant source in therapy that not everyone has an "eye for" (mostly talking of other than Gestalt practices). However, the power analysis seems to be missing an intersectional element. One possible answer would come from field theory. As I talked to a limited number of therapists, there is a chance that they have not encountered instances in their clinical experience where

power regarding sexuality, race, ethnicity or class has been brought to the field, either because their clients mostly shared similar identities with them, or because it has not "blocked" the therapeutic relationship in any way. The other explanation would be that they do not have "an eye for it," or they do not find a sociocultural analysis of power optimal or necessary for the process of therapy. The question that Marten asks his trainees when they complain that their clients do not talk about sexuality is "How easy it is for you? Because that's again the dialogical thing, if I hide sexuality, or religion, or whatever, then my client will think, "oh, then therapy is not about it." In that case, working through intersectionality begins with the work on oneself and an active effort in using feminist intersectional values in the core of the therapy (Brown, 1994, Hill & Ballou, 1998). Although in the previous sections of identity and process, working through theories that contained elements of intersectionality and assemblage seemed to render the practice of therapy feminist to some extent, there is a chance that in the matter of working with an intersectional power analysis requires education in feminist literature. That is to say, that if a therapist is not trained or comfortable in confronting their privilege and accountability on matters of race, sexuality, ethnicity, or class, then there is a chance that when subtle power signals about those identities arise, they will not reach their awareness.

5. Conclusion

5.1 Key arguments

According to an article by Hill & Ballou (1998), some basic principles of doing feminist therapy are intersectionality as in recognizing sociocultural causes of distress and integrating an analysis of oppression, attention to power to therapy, and goal of social change. In my research, in order to answer the question of Gestalt being feminist or a fitting base to practice feminist therapy from, I attended to the first two.

As far as intersectionality is concerned, I accounted for the recent criticisms of the concept and decided to look for an intersectionality through assemblage theory, based on Puar's (2012) analysis on the matter. Assemblage theory was a key concept in my research as it did not only offer a new lens to look at intersectionality, but it also provided a promising epistemological framework to look at identity formation and challenge psychology's unit of analysis (Nichterlein & Morss 2017).

Through conducting interviews with four Gestalt therapists, and my own perspective as a client of Gestalt therapy, I attempted to find elements of intersectionality and assemblage theory in the theories and the practice of Gestalt. My data was interpreted by using discourse analysis. The final analysis led to the emergence of three themes, namely, identity, process, and power.

One of the conclusions that can be derived from the analysis is that intersectionality and especially assemblage theory is deeply embedded in the theories and practice of Gestalt therapy. To start with, core Gestalt theories such as field theory, the boundary of contact, and the cycle of contact seem to encompass a fluid conceptualization of identity that is rooted in an endless interaction with one's environment, past, future, animate and inanimate essences. In that regard, the client's identity is not static and fixed, but it is tangible in the "here and now" of the therapeutic process, where therapists use techniques that work with the body and

the element of exploration, to help their clients raise awareness, heal and self-embrace. In the same way, it seems that there is a post-human, fluid conceptualization regarding the materiality of the body and its boundaries. The same fluidity seems to be present when talking about the boundaries between the client and the therapist, as they view the therapeutic relationship as dialogical, and place much emphasis on the connection with the client, and the coalescence of their fields.

Furthermore, I explored if this theoretical proximity of Gestalt notions with assemblages can be seen in the process of the therapeutic practice. In that section, I looked at the ways that intersectionality through assemblages is present before and during the therapeutic practice. What I found was that Gestalt therapists use their positionality to analyze the assumptions that arise when they first interact with a client. In other words, they recognize that their assumptions are colored by their field and try to keep an open mind on the ways that these assumptions could be falsified in the process. During the process of therapy, Gestalt offers a pool of techniques that could be argued that can be used in a feminist way, as they utilize a fluid conceptualization of identity as their source.

Lastly, I explored if an analysis of power, through the lens of intersectionality and assemblage, is a part of Gestalt practice. In analyzing my data, I found that when power dynamics between the therapist and the client present themselves in a therapy session, they can be brought in awareness and utilized in favor of the process. However, it appeared that an intersectional analysis of power is not an inherent or necessary aspect of Gestalt therapy, and it is in the matter of each individual therapist to decide if and how they want to work with it.

5.2 Research questions

In my analysis, I have addressed the first research question of the thesis: Are theories of intersectionality and assemblage present in the theories and practice of Gestalt therapy?

The answer is positive since, in the previous chapter, I analyzed the ways that we can find intersectionality and assemblage theory in the theories and the practice of Gestalt.

My sub-questions were: Is Gestalt practice feminist, or can it provide a suitable base for practicing feminist therapy? Since Gestalt therapy's theoretical base is in close proximity to feminist theories of intersectionality and assemblage, many of its techniques and practices subvert mainstream clinical practices. Furthermore, it offers a way to see how psychology (striated space) can open up to the vulnerability of inserting some smooth space in its practice. However, calling Gestalt therapy feminist could be misleading, since a big part of doing feminist therapy stems from the therapist's values and agenda. In other words, in order to implement some of feminist therapy's core principles, such as recognizing sociocultural causes of distress, integrating an analysis of oppression, and an intersectional power analysis, one needs to educate themselves in some core feminist theories and actively work on their positionality and their privilege. In the words of Marten, Gestalt gives you the possibility to work intersectionally, but not everyone takes it.

In the second part of the question, I have addressed if Gestalt therapy is a suitable base for practicing feminist therapy, and for inserting feminist values in the mainstream practice. Gestalt seems to be a viable alternative to mainstream clinical practices, while it offers the legitimacy of a respected school of therapy. Furthermore, due to its subversive nature and its proximity to feminist theories, it offers a good starting point to spread feminist values and practices in the field of therapy, without the need of specialized education in feminist theories.

5.3 Future research

This thesis has hopefully demonstrated that Gestalt therapy contains feminist theories of intersectionality and assemblage and that it is a suitable base to practice feminist therapy

from. That opens up possibilities for future research to explore if other contextual therapies also contain elements of feminist theories, and can be used as a base to practice feminist therapy from. Furthermore, it could be valuable to replicate the study with a more extensive and more diverse pool of participants to determine if the results are the same. Lastly, the development of a research design that includes the perspective of the clients of Gestalt therapy would be optimal.

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