

Leading Humanistic Approaches in Psychotherapy: A Comparative Analytical Study

المدائل الإنسانية الراءدة في العلاج النفسي: دراسة تحليلية مقارنة

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Abstract:

This study aims to provide an analytical comparison between three of the most prominent humanistic approaches in psychotherapy: client-centered therapy, Gestalt therapy, and existential therapy. This is done by focusing on each approach's perceptions of human nature, therapy goals, therapist's role, therapeutic relationship, and the techniques used in each. The study highlighted the theoretical foundations from which each approach originates, such as the emphasis on the innate tendency for self-actualization in client-centered therapy, present awareness and direct experience in Gestalt therapy, and the search for meaning, freedom, and responsibility in existential therapy. It also highlighted the importance of the centrality of the therapeutic relationship as a crucial factor in bringing about change, thru the empathy, genuineness, and acceptance it provides, disabling the patient to discover themselves. The study concluded that these approaches, despite their differing theoretical foundations and practical techniques, converge in their positive view of humanity and its capacity for growth, making them highly valuable in contemporary therapeutic practice. They offer holistic perspectives that consider the entirety of the human experience, contributing to the support of mental health and the achievement of psychological balance for the individual. Moreover, the social transformations and increasing psychological pressures in our current era highlight the need to employ these approaches in an integrative manner that enables individuals to face them effectively and manage their lives with awareness and responsibility

Keywords: Humanistic Therapy; Client Centered Therapy; gestalt Therapy; Existential Therapy; Therapeutic Relationship

ملخص:

تهدف هذه الدراسة إلى تقديم مقارنة تحليلية بين ثلاثة من أبرز المداخل الإنسانية في العلاج النفسي، وهي العلاج المتمركز حول العميل، والعلاج الجشطالتي، والعلاج الوجودي، وذلك من خلال التركيز على تصورات كل مدخل لطبيعة الإنسان، وأهداف العلاج، ودور المعالج، والعلاقة العلاجية، والتقنيات المستخدمة في كل منها. وقد أبرزت الدراسة الأسس النظرية التي ينطلق منها كل اتجاه، مثل التأكيد على النزعة الفطرية لتحقيق الذات في العلاج المتمركز حول العميل، والوعي الذاتي والخبرة المباشرة في العلاج الجشطالتي، والبحث عن المعنى والحرية والمسؤولية في العلاج الوجودي. كما أوضحت أهمية مركزية العلاقة العلاجية باعتبارها عاملاً محورياً في إحداث التغيير، وذلك من خلال ما توفره من تعاطف وصدق وقبول يُمكن العميل من اكتشاف ذاته. وتوصلت الدراسة إلى أن هذه المداخل، رغم اختلاف منطلقاتها النظرية وتقنياتها التطبيقية، تتقاطع في رؤيتها الإيجابية للإنسان وقدرته على النمو، مما يجعلها ذات قيمة عالية في الممارسة العلاجية المعاصرة، لما تقدمه من رؤية شمولية تراعي الكلية الإنسانية تساهم في دعم الصحة النفسية وتحقيق التوازن النفسي للفرد. كما أن التحولات الاجتماعية والضغط النفسي المتزايدة في عصرنا الحالي تُبرز الحاجة إلى توظيف هذه المداخل بطريقة تكاملية تمكّن الأفراد من مواجهتها بطريقة فعالة وإدارة حياتهم بوعي ومسؤولية.

الكلمات المفتاحية: العلاج الإنساني؛ العلاج المتمركز حول العميل؛ العلاج الجشطالتي؛ العلاج الوجودي؛ العلاقة

العلاجية.

Introduction:

The second half of the twentieth century witnessed the emergence of a new approach in psychology known as humanistic psychology, which is referred to as the "third force" alongside psychoanalysis and the behavioral school. This approach emerged as a reaction to the shortcomings attributed to psychoanalysis, which was seen as focusing on pathological aspects and unconscious drives. It also came as a reaction to behaviorism, which largely relied on experimental research and the study of human behavior through animal experiments and the stimulus-response mechanism (Ali, 2014, p. 116). In contrast, humanistic psychology affirmed an optimistic view of humans, considering them as free, conscious beings capable of growth and realizing their potential (iResearchNet, n.d.). This approach is based on a fundamental belief in the innate ability of humans to achieve perfection and seek meaning and essential values such as truth, goodness, beauty, and freedom (Ali, 2014, p. 116).

This intellectual shift has contributed to the emergence of several therapeutic approaches with a humanistic orientation. Such approaches have

made the therapeutic relationship, the individual's subjective experience, and personal growth central to the therapeutic process, to the extent that they are collectively known as the "third force" in psychotherapy. Among the most prominent of these approaches are client-centered therapy, Gestalt therapy, and existential therapy. These are therapeutic schools that share several philosophical and humanistic principles, but differ in their theoretical frameworks and practical methods (Corey, 2013).

Based on this, this article aims to provide a comparative study of these three approaches by analyzing their fundamental concepts, views on human nature, roles of the therapist, goals of the therapeutic process, as well as the techniques used in each, with the aim of highlighting the points of agreement and disagreement among them in light of humanistic philosophy.

1. Client-centered Therapy:

Carl Ransom Rogers (Carl R. Rogers, the founder of Client-centered Therapy), is considered one of the key figures in what is known today as the "third force" in psychology. His approach is classified among the therapies that represent the "humanistic movement" in the psychological field, alongside Gestalt therapy and existential therapy (Corey, 2013, p. 228).

This approach is based on the concept of the "third force" as an alternative to both psychoanalysis and behaviorism, by emphasizing human dignity and value, and the importance of the individual's pursuit of growth and self-actualization. It also calls for the establishment of a humanistic psychology that focuses on the individual's status and dignity as the main axis of psychological work (Malika, 1996, p. 147).

Rogers' theory is considered one of the first theories that transformed the traditional relationship between the client and the therapist or counselor, as it shifted the focus of the therapeutic process to the client, viewing them as the active party in the process of therapy and personal change. The role of the therapist in the therapeutic practice is reduced to creating conditions for indirect assistance, allowing the individual to understand themselves and achieve proper psychological openness. For this reason, Rogers initially named his theory "non-directive psychotherapy" or "indirect therapy," which later became known as "client-centered therapy." As the theory evolved and its applications expanded to include non-clinical aspects of the patient, such as education and personal relationships, he later renamed it "person-centered therapy," a name that reflects

its broader humanistic scope. It is worth noting that Rogers prefers to use the term "client" because it is more relevant in conveying the image of the person. The client, as the term suggests, is "a person who has come of their own volition seeking help to solve their problems" (Abdullah, 2012, 70). Rogers' approach in this therapeutic direction is based on a central hypothesis, which states that every person possesses the ability to grow and is capable of self-actualization if provided with a safe psychological environment. This environment is achieved in a relationship characterized by honesty and acceptance, where the therapist assists the client without making judgments, within a framework of human support that conveys the therapist's concern for the client's psychological reality and expresses it sincerely (Al-Asami, 2015, p. 15).

1-2- The Theory's Conception of Human Nature:

Rogers assumes that the basic human nature has a positive character at its core, and that there is nothing negative or inherently evil within humans (Nay, 2018, p. 191). The general philosophy of the theory sees the individual as having great importance, and regardless of their problems, they possess good elements in their personality that help them overcome their crises on their own. The ordinary individual is capable of taking responsibility for guiding themselves and choosing their own destiny, and they are not a subject to be diagnosed or a type of procedural means (Al-Khawaja, 2002, p. 149). The fundamental philosophy of the therapist is to respect and appreciate the individual, and to work on enhancing self-direction, which makes them worthy of respect (Zyoud, 1998, p. 182).

The following is a summary of Rogers' theory on human nature and his most prominent beliefs:

1. Individuals are trustworthy, The therapist should treat the patient with trust by not taking on the role of the leader in the therapeutic process.
2. Individuals tend to self-actualize, This is the driving force for positive growth in the individual, which protects them from being controlled by others and leads them toward independence and self-control.
3. Individuals have internal sources to guide themselves in a positive direction, and the humanistic therapist must believe in this principle if they want to help the individual increase their self-esteem and acceptance.
4. Individuals respond to their phenomenological world as they perceive it internally (Abu Zuaiz, 2013, p. 124).

These perceptions are part of the humanistic movement in psychology, which places the individual at the center of the guidance process and grants them an active role in understanding themselves and changing the course of their lives.

1-3- The Basic Concepts of the Theory:

Client-centered therapy is based on a positive humanistic view, which holds that the individual possesses innate abilities for growth and psychological development whenever the appropriate environmental conditions are met. Carl Rogers started from this conception of human nature to build a unique theoretical framework, which consists of a set of fundamental concepts that form the core of this therapeutic approach, highlighting his understanding of the human being, the therapeutic relationship, and the process of change. The following is a presentation of the most important of these core concepts: **First: The tendency for self-actualization:** It is an innate tendency in humans to develop all their abilities in ways that serve and enhance their survival (Abu Zuaiz, 2013, p. 119). As Rogers says, the individual has the energy to direct, organize, and regulate themselves, provided that certain specific conditions are met. In the absence of such conditions or circumstances, the individual becomes in need of external control and organization. Furthermore, when you provide the individual with reasonable conditions for growth, they will develop their energy in a completely constructive manner (Al-Sarhani, 2016, p. 6). **Secondly: The center of evaluation and the organic evaluation process:** This concept can be considered a complement to the tendency of the being to realize itself in reality. It describes a process accompanying that tendency and helps to explain in more detail the positive inclination of the human being toward growth and development (Nay, 2018, p. 212). The concept of the center of evaluation indicates that the source of judgment for the evaluation process originates from within the individual (internal criterion) rather than from merit conditions (external criterion). It is a permanent and continuously periodic process in the form of needs and satisfactions experienced by the individual. The process of organic evaluation is a continuous process where values are never fixed or rigid, but experiences are accurately symbolized in the concept of self, and are evaluated in light of the satisfactions that the living being experiences, which maintain the progress of the self in the present and future (Al-Asami, 2015, p. 51).

Third: the self and self-concept: The self represents the core and essence of Rogers' theory. He believes that through the individual's interaction with others and their perceptual field, the individual gradually begins to distinguish a part of their experiences, and this distinguished part is called the self (Al-Izzi and Abdul-Hadi, 1999, p. 110). Through the individual's interaction with significant people in their life and those present in their surroundings, the subjective experience leads to the self-concept as something perceived within the field of experience (i.e., what the individual actually lives). In addition, the concept of self or self-structure as Rogers sees it is a gestalt (holistic) organized concept or depiction (Al-Sarhani, 2016, p. 9). Rogers defines the concept of self as: "the organized, coherent, and structured conceptual whole composed of perceptions of the self (I), perceptions of its relationships with others, and perceptions of various aspects along with the values associated with these perceptions. This concept develops through socialization, learning, and continuous evaluation." That is, a person's concept of themselves is about what they are, what they should be, and what they ought to be. Again, when the self becomes organized, it becomes a coherent whole, a harmonious model of these three parts" (Al-Asami, 2015, p. 40). That is, to better understand the meaning of the concept of self, it can be viewed as consisting of several parts, which are as follows:

The true self: It is the essence of the self-concept and means what this individual actually is (what they are in reality).

The perceived self: It relates to how a person sees themselves, "the self as seen by the self," and this aspect grows through the individual's interactions with other people and the environment. If the individual is loved and accepted, the self perceives that. If the individuals learn that they have no value, their self-perception will indeed reflect that.

The social self: It is the self as seen by others, and most of the time, the individual tries to live up to the expectations of others. Internal conflicts arise when there is a gap between the perceived self and the social self.

The ideal self: It is the self that a person aspires to, the roles and ambitions they strive to achieve or wish to become. An individual is in a healthy state when there is no significant difference or gap between the ideal self and what the individual can actually do or achieve (Abdullah, 2012, p. 66).

Fourth: congruence and incongruence: Congruence is a type of consistency and harmony, while incongruence is its opposite, meaning a lack of consistency

and harmony. Rogers arrived at this concept through his experiences in clinical psychological therapy, as he observed the extent of the effort the patient exerts to adjust their "self-understanding" to become more consistent with the natural experiences and events of the individual organism (Nay, 2018, p. 221). Further, incongruence means the contradiction between the self and experience, where the experiences of the living organism are not perceived as subjective experiences because they are not accurately symbolized in consciousness, as they do not harmonize with the concept of the self. This contradiction between the self and experience is a source of maladjustment and inappropriate behavior, making the individual more susceptible to injury. That is, incongruence means maladjustment in terms of the individual's inability to reconcile themselves with the social and natural environment, which affects their emotional life and generates different types of psychological conflict (Al-Asami, 2015, p. 53). Therefore, Rogers believes that incongruence is the cause of all adjustment problems in humans, and thus, removing incongruence leads to problem-solving (Ghanem, n.d., p. 66).

Fifth: the fully functioning person: The term "fully functioning person" was used by Rogers as a postulate to represent the highest stage in the development of the being in the course of their life. Simply, because what matters to Rogers is the process of self-actualization in reality itself, that is, the realistic image. The person who fully functions with themselves and their abilities is the being capable of progressing constructively toward further growth and self-actualization in reality (Nay, 2018, p. 225). Rogers formulated a list of criteria for mental health that apply to a person fully functioning in their roles. These are: the absence of any conditions of worth, complete congruence between experience and self-concept, full openness between experience and self-concept, immediate correction of any choices not stemming from true understanding, expression of their subjective experience and resistance to false standards, feeling of worth because they are loved and capable of love, unconditional positive regard toward others, living freedom and integration in every moment, and not seeing happiness in fixed systems or standards (Mohamed El-Sayed, 1998, p. 416).

1-4- The Therapeutic Process:

1-4-1- Therapeutic goals:

The goal of client-centered therapy is to provide an environment that facilitates the client's self-actualization because individuals inherently tend toward self-actualization. This is achieved through the therapeutic relationship, which is the essence of the therapy (Abu As'ad & Al-Azaida, 2015, p. 316). Rogers (1961) identified a set of goals that the client seeks to achieve during the therapeutic process within the framework of client-centered therapy, where these goals are not imposed by the therapist but rather emerge from the client's own experience in an atmosphere of safety and acceptance. They are as follows:

1. The shift toward self-direction: where the individual begins to choose their own goals and take responsibility for their decisions and behavior.
2. To become an "ongoing process" rather than a "result": that is, to see oneself as a constantly growing and changing being, instead of striving for a fixed or "ideal" state.
3. Comfort with internal complexity: That is, the individual accepts the multiplicity of their feelings and thoughts, even if they are contradictory, without trying to simplify themselves or deny this contradiction.
4. Openness to experience: the readiness to accept internal feelings and experiences as they are, without distortion or denial.
5. Unconditional acceptance of others: where the individual becomes more respectful of others' differences and uniqueness without judgment or attempts at control.
6. Appreciating internal processes: This means that the individual learns to trust their internal compass represented by their feelings, intuition, and personal experiences, considering them as valid sources for evaluation and decision-making.
7. Striving to live with awareness and acceptance of the true self: that is, moving toward living the inner self authentically instead of playing false roles.
8. The ultimate goal is to become one's true self: to be liberated from external expectations and to realize oneself as one truly is.

These goals represent a comprehensive approach toward psychological maturity and mental health, as they seek to enhance spontaneity, independence, self-acceptance, and openness to experience (Rogers, 1961, pp. 166-172)

1-4-2- The role of the therapist and the therapeutic relationship:

The fundamental hypothesis of client-centered therapy is summarized in the following statement: "If we can provide a certain type of relationship, the client will reveal within themselves—as a party in the relationship—the ability to use this relationship for maturity and change, leading to personal growth." The process of changing the client's personality is largely related to the existence of an equal (equitable) relationship between the therapist and the client (Abu Zaid, 2013, p. 130). Rogers proposed three conditions for building the guiding relationship, which are:

1. **Unconditional positive regard:** This means that growth or change is more likely if the therapist has an accepting and appreciative attitude toward the client. The therapist accepts the client as a person of importance and value and does not evaluate them positively or negatively; it is a warm relationship.
2. **Congruence and authenticity:** Authenticity means that the therapist does not hide behind a mask or personal facade. The more authentic the therapist is in the relationship and does not hide behind any personal or professional facade, the greater the likelihood that the client will change and develop in a constructive manner. The meaning is that during the therapeutic relationship, there is no contradiction between what the therapist says and who they are. Therefore, there is a close alignment or harmony between the physical experience, the contents of feelings, and what is communicated to the client.
3. **Understanding and empathy:** Empathy or empathetic understanding is the third essential aspect of the relationship, meaning that the therapist listens to the client attentively and tries to understand them. This means to understand the client's world as accurately as the client perceives it from within, as if it were the counselor's own world (Abu As'ad & Arabiyat, 2009, p. 278; Radwan, 2020).

1-4-3- Therapeutic techniques:

The most notable contributions of Carl Rogers in the field of counselling lie in his focus on a specific type of counselling relationship, which does not rely on specific techniques as much as it depends on the human relationship as a primary medium for the client's growth. According to both Natalie and Rogers, client-centered therapy does not rely on traditional therapeutic procedures or techniques, but rather on communicative practices based on acceptance, empathy, and genuineness. According to Bohart (2003), the therapeutic process in this approach is based on being genuinely present with the client, entering

their world, and fully engaging with their movements and feelings as a means of effecting change.

From here, the most distinguishing feature of the client-centered therapeutic encounter is the "presence" of the therapist and their complete engagement in the guiding relationship. This presence is considered stronger than any therapeutic technique, as it enables the counselor to bring about change by activating a set of skills such as active listening, acceptance, empathy, respect, understanding, and responsiveness, all of which must come from the therapist with genuine authenticity (Corey, 2013, p. 239).

- Gestalt Therapy:

Gestalt therapy is another prominent form of humanistic therapy, developed by Friedrich Salomon Perls; greatly influenced by Gestalt psychology (Fad, 2005, p. 57). It was later developed by Laura Perls, Paul Goodman, and Ralph Hefferline, that contributed to the crystallization of this type of psychotherapy (Adwan, 2016). Gestalt therapy emerged against the backdrop of Perls' critique of the theoretical foundations of psychoanalysis and his gradual departure from interpreting psychological disorders from the perspective of traditional analysis, leading toward what later became known as Gestalt therapy (Timothy, 2007, p. 602). The first reference book on Gestalt therapy is the book by "Perls, "Hefferline," and "Goodman," published in 1951 (Adwan, 2016).

Gestalt therapy is a cognitive therapeutic system that moves away from interpretation and focuses on present-moment awareness (here and now), instead of being preoccupied with the past. Most of its interactions between the therapist and the client revolve around "who am I, and who are you" rather than ready-made hypotheses or theoretical propositions. Gestalt therapy focuses on what is actually happening in the present (the process) rather than just the content, and it encourages the therapist to help the client take responsibility for their behavior, as well as assisting them in making choices and growing through organic regulation.

Gestalt therapy is based on the direct awareness of a person's subjective experience, without relying on cognitive interpretations of causes or symptoms, as these methods weaken the effectiveness of Gestalt therapy (Fad, 2005, p. 57).

2-1- Theory's view of human nature:

Perls believes that a person is free to make their own decisions and is fully responsible for their behaviors. He believes that humans always strive to achieve self-actualization, and that they feel they have not yet reached it. He sees the drive for self-actualization as a motivator or engine for human behavior, meaning that humans act and work to become what they want to be. He believes that humans always seek to reach a state of balance and satisfy emerging needs, and that they may disrupt this state of balance (Abu Zuaiz, 2013, p. 213).

Based on this perception, Gestalt therapy views the human being as a unified whole, not as a collection of separate parts. The fundamental principles of this perspective can be summarized in the following points:
_The human being is a creature composed of interconnected and integrated parts, including emotions and feelings, perceptions and beliefs, sensations and behaviors, and none of these aspects can be understood in isolation from the whole.

_ The individual is part of their own environment, and cannot be isolated from it, as they cannot be understood outside their environmental and personal context.

_ A human being is not just a passive entity that responds to external and internal stimuli, but rather an active and proactive agent in interacting with the world around them.

_ Humans possess an internal energy that enables them to be self-aware of their feelings, thoughts, and perceptions, and they are capable of making choices because they are free and responsible beings.

_ Humans have the ability to organize their private lives effectively and efficiently when they are aware of and understand themselves.

_ A person cannot directly experience the past or the future, but they are capable of living their true self in the present "now."

_ A person is not born good or evil, but rather free and open to possibilities of growth (Abdullah, 2012, p. 80).

2-2- The basic concepts of the theory:

The word Gestalt is a German word meaning shape, pattern, image, form, and it was adopted by Perls from Gestaltism (Al-Zyoud, 1998, p. 221). This

theory is based on the following concepts:

First: Holism: This concept is considered the foundation of the theory and means that the whole is greater than the sum of its parts, and that the mind and body are not separate entities but rather one whole, and that it is impossible to separate the physical and emotional aspects of a person (Al-Izza, 2010, p. 143).

Secondly: Figure-ground: The figure refers to what stands out in consciousness and attracts attention, representing the individual's psychological needs. As for the background, it is what does not appear in the foreground and remains in the background of consciousness. The background is the whole, and the figure is the part. When a certain need (the figure) is met, it recedes to become part of the background, and another need (a new figure) emerges. Perls believes that the most important goal of counselling and psychotherapy is to restore the balance between figure and ground, so that needs are organized in a complete and coherent manner (Abu Zuaiz, 2013, p. 208).

Third: Organization: Cognitive organization is considered one of the central concepts in Gestalt theory, where Perls believes that the individual does not perceive their environment partially or randomly, but always strives to perceive it as a "whole" that provides them with understanding and psychological coherence. Cognitive organization refers to the process through which an individual organizes their perceptions and experiences according to their psychological priorities and urgent needs, so that some stimuli emerge in their consciousness (figure) while others are marginalized (background) according to the internal tension or deficiency they seek to satisfy.

Perls emphasizes that the disruption of this process leads to a breakdown in understanding and behavior, as the individual is unable to integrate their experiences into a coherent whole, hindering their psychological integration. From here, Gestalt therapy seeks to restore this natural organization of experiences by helping the individual perceive the figure and ground clearly, and organize their needs and emotions in a way that contributes to reducing tension and achieving internal balance (Al-Izza, 2010, p. 144).

Fourth: Here and Now: Perls believes that focusing on the "now" is fundamental in Gestalt therapy; the truth lies in the present, and behavior can only be understood in its current temporal context. As for searching for answers in the past, it is an attempt to deal with what no longer exists. From this perspective, Perls believes that therapy should take place only within the

framework of the present moment, as awareness of the "now" contributes to enhancing the individual's ability to adapt and grow through a direct confrontation with the current moment, without escaping to the past or the future.

Perls emphasizes that "now = experience = awareness = reality," meaning that the present is the only moment that can be lived and understood, as the past has passed and the future has not yet arrived. From here, he indicates that existence is only realized in the "now" (Timothy, 2007, p. 603). Based on that, the therapist's task is to make the client evoke the past in the present, that is, now as if it is happening now, and what happens here (Abu As'ad and Arabiyat, 2009, p. 287).

Fifth: unfinished business and avoidance are the unexpressed emotions such as anger, pain, fear, frustration, or repressed desires, which remain stuck in the unconscious and continue to resurface until they are addressed and resolved. Individuals tend to avoid situations that might trigger these emotions to escape the pain, which hinders their psychological growth and healthy adaptation (Al-Khawaja, 2002, p. 178).

Sixth: awareness and responsibility: Awareness is the individual's perception of what they feel, think, and do in the present moment and understanding its reasons. Responsibility, on the other hand, is the person's awareness of their actions and choices and bearing the consequences of those actions. This is reflected in the harmony between their language, feelings, and behavior (Abu As'ad & Arabiyat, 2009, p. 287).

In Gestalt therapy, it is important to help the client accept responsibility for their actions and feelings, as they belong to them, and they cannot deny, escape, or blame others for them. In short, if one wants to extract the four most important words in Gestalt therapy that describe it best, these words would be: awareness, experience, now, and responsibility (Timothy, 2007, p. 605).

Seventh: contact boundaries: The organism and the environment exist in a reciprocal relationship, and the point of interaction between the individual and the environment represents the contact boundaries. Our thoughts, actions, behaviors, and emotions are means of experiencing events related to these boundaries. In addition, the things and people in the environment that satisfy needs represent positive aspects of psychological energy, while those that hinder or threaten satisfaction receive negative psychological energy. The individual

seeks connection with the former type and withdraws from the latter (Blan, 2015, p. 170).

Eighth: energy and its obstacles: Energy in Gestalt therapy is the vital force that moves the body and emotions, and monitoring it and understanding the obstacles to its flow is considered a central step on the path to healing and increasing self-awareness (Corey, 2013, p. 274).

2-3-The Therapeutic Process:

2-3-1- Therapy goals:

Gestalt therapy goals are divided into four interrelated main goals, which are:

- 1. Self-organization and self-realization:** The primary goal of Gestalt therapy is for the client to become more self-aware and able to rely on themselves to meet their needs, instead of depending on others or the environment.
- 2. Helping with maturity and personality integration:** Some individuals come to therapy in an incomplete state, and because they have to maintain an externally imposed self-image, they divide themselves into parts through projections, introjections, and retrojections. The goal of guidance here is to reunite and integrate the separated and incompatible parts, which helps in the flow and liberation of psychological energy.
- 3. Awareness:** where the shift from environmental support to self-help from within the individual is necessary to achieve awareness of needs and awareness of the parts separate from the self. Perls considers that awareness itself is healing. And when individuals are aware, they perform according to the correct Gestalt principle, and restoring awareness is considered an important goal for the guide.
- 4. Taking responsibility:** The therapist seeks to cultivate a sense of responsibility in the clients for their actions, decisions, responses, and the parts and aspects of themselves that they have distanced from. When we find that these individuals have started to accept responsibility for the distanced and fragmented aspects of themselves, they are moving toward achieving integration in their personalities. The growth of the individual's personality is linked to their acceptance of responsibility.

These are the main goals of Gestalt therapy, and regardless of the type of problem the client brings, the therapist will strive to achieve these goals in counselling. These goals are intertwined and interconnected, and progress in one enhances the achievement of the others. Together, they contribute to the growth

and integration of personality, self-organization, and realization (Abdullah, 2012, p. 89; Blan, 2015, p. 172).

2-3-2- The Role of the therapist and the therapeutic relationship:

The Gestalt school focuses on the reciprocal relationship between the client and the therapist, where the interaction between them is viewed as a fundamental element in the therapeutic process. It is important for therapists to allow themselves to be open to their feelings and be influenced by the client, while sharing their perceptions and experiences during the session (Corey, 2013, p. 280). This therapeutic relationship is characterized by several features, the first of which is the focus on the client's current behavior and motivations to become more aware of them. As for the second, it is the therapist's focus on uncovering the phenomenon of the unconscious, which is much broader than mere subconsciousness. The third characteristic lies in considering dreams useful in therapy for what they reveal about the unconscious aspects of the client's personality, thereby enhancing self-integration. Finally, the fourth characteristic is that the Gestalt therapist's focus is on the present, not the past (Abdullah, 2012, p. 90).

The role of the Gestalt therapist can be summarized as follows:

- _ He/she confronts the patient in the present, directly and spontaneously.
- _ He/she is lively, active, engaging, and innovative, viewing interaction with the patient in the present as the foundation for change.
- _ He/she prepares the therapeutic experience as a miniature of daily life, centered on: "You and me," "here and now."
- _ It prepares a supportive therapeutic environment and climate that is less painful, more hopeful, and more meaningful to free the patient from past memories and future fears.
- _ He/she facilitates growth and the pursuit of meaningful goals for the patient.
- _ Helps to satisfy the patient's needs. (Sari, 2000, p. 210)

2-3-3- Therapeutic techniques:

Perls rejects the therapist interpreting pathological symptoms and delving into the patient's past, advocating instead for focusing on the present and the individual's organization of their relationship with the environment through their own knowledge. Among the most important Gestalt therapy techniques are the following:

- **"I" language:** In this approach, the use of the word "I" is encouraged instead

of using "you," "he," or "they."

Using "I don't want to" instead of "I can't" increases the sense of control and responsibility.

Using "what" instead of "why"

- **Incomplete sentences:** They are considered as an exercise or training to help the patient become aware of what benefits or harms them.

- **Dialog exercises:** These involve conducting a dialog between the aspects of the individual's personality related to the problem (such as the mind and emotions). One method to achieve awareness of the conflict between the aspects of the personality is the Two Chair Technique, which is used to resolve existing conflicts or those considered an open gestalt.

- **Addressing the unfinished task:** This involves resolving repressed emotions behind the shield of the body or personality, such as anxiety, by focusing on awareness of them and disclosing their content, representing their aspects through confrontation and imagination, and playing different roles.

- **Handling the opposite:** The individual may be asked to address something by being aware of its opposite. For example, an introverted person may be asked to perform extroverted roles.

- **Contradictions:** The goal of dealing with contradictions or conflicting parts of the personality is to make each side aware of the other so that the two opposites can be reorganized and reconciled, making life easier. Each side should exist but in "integration with the other" so that the personality becomes complete.

- **Experimenting with the situation:** This means training the individual (e.g., anxiety) to practice the behavior situationally in the form of a rehearsal before the actual behavior.

Exaggeration of symptoms: When an individual makes a gesture, sign, or utters a word without noticing its significance, they are asked to repeat it or exaggerate its display until they fully understand it and know its meaning in relation to their problem.

- **The Empty Chair Technique:** This involves avoiding talking about any absent person outside the session. In this method, the "empty chair" technique is used, where the client is asked to imagine a person who has an influence on them (father, mother, opponent...) He sits in an empty chair, then is asked to talk to it as if the person were present, then he switches places to take on the role of the other person and responds to himself. This helps in expressing repressed

emotions and resolving internal conflicts.

- **Taking responsibility:** The patient is asked to express their feelings and decide that they are responsible for these feelings. This helps them take responsibility for their behavior instead of blaming external sources as the causes of their behavior and feelings.

- **Dream enactment:** The dream is one of the methods of awareness of the individual's world "here and now." Gestalt therapy is more concerned with the integration of dreams than their analysis, by reviving the dream emotionally through awareness of the dream's people and events. Perls believes that the different parts of the dream represent parts of the dreamer's personality that must integrate to form a complete whole. (Sari, 2000, pp. 204-209)

3. - Existential Therapy:

Existential therapy is considered another form of therapeutic approaches derived from the third force in psychology, represented by the humanistic approach alongside Carl Rogers' client-centered therapy and Perls' Gestalt therapy. This approach emerged as a reaction to the limitations of traditional psychological schools such as psychoanalysis and behaviorism, which focused either on unconscious experiences or on observable behavior, ignoring the existential aspects of human beings such as freedom, responsibility, meaning, and death.

Existential therapy is based on the concepts of existential philosophy and places utmost importance on human freedom in choice and will. It is based on a fundamental assumption that a person is not a victim of circumstances or the past, but rather a free being responsible for their life and decisions. Our existence precedes our essence, and what we do defines who we are. Therefore, it is the individual's responsibility to give meaning to their life and confront their existential issues with awareness and choice (Al-Qarni, 2022).

The roots of this approach trace back to profound existential philosophies, such as those of Kierkegaard, Heidegger, Tillich, Sartre, and Jaspers. A number of thinkers have transformed these philosophical concepts into therapeutic practices, including Binswanger, Boss, Gendlin, Frankl, May, and Laing (Timothy, 2007, p. 597).

Victor Frankl is considered one of the most prominent representatives of existential therapy, through his development of "logotherapy," which sought to help individuals discover meaning in their suffering as a way to achieve

psychological and spiritual balance. This approach has contributed to expanding therapeutic concepts to include existential issues of human beings (Ghanem, p. 132).

Meaning-centered therapy is an existential therapeutic school where theory and practice are integrated, and meaning plays a crucial role in giving real value to human life, making it a fundamental pillar within the humanistic approach and the third force in psychology (Frankl, 1997, p. 5).

3-1- The theory's conception of human nature:

Frankl sees humans as a unit composed of three dimensions: the physical (somatic) dimension, the psychological-mental dimension, and the spiritual (moral) dimension. However, it is an integrated whole, and these dimensions are merely reflections of the same thing.

The first and second dimensions are interconnected and represent the psyche and the body, encompassing inherited moral factors such as innate (primary) drives. Both Freud and Adler focused on these dimensions. As for existential therapy, it emphasizes the third dimension (spiritual), as "spirituality" is the first of the three characteristics of human existence that distinguishes it from animals, from which consciousness, love, and moral conscience are derived. As for the second characteristic that distinguishes human existence, it is "freedom," and freedom means confronting three things: instincts, inherited predispositions or tendencies, and environmental conditions. Although a person is influenced by these conditions during their development, they have the freedom to accept or reject. He/she is free to make his/her own decisions. The third and final characteristic of human existence is "responsibility," as human freedom is not always liberation from things, but rather liberation to something, or liberation toward something, which Frankl refers to as "individual responsibility." The individual is responsible to themselves, to their conscience, and also to God. Human existence means that a person must be aware and responsible, and "meaning therapy" attempts to make the patient aware of their responsibilities, thus granting them the freedom of choice and helping them understand their position as responsible for this system. And although each individual is a unique unit, when they are alone, they lack meaning. The importance and meaning of human personality are always linked to the social environment in which one lives. (Abdullah, 2012, p. 209; Al-Zyoud, 1998, p. 280; Al-Khawaja, 2002, p. 121; Abu Zayza, 2013, p. 152)

3-2- The basic concepts of the theory:

First: Will to Meaning: The will to meaning is considered a deeper human drive than the pursuit of pleasure or the avoidance of pain. It expresses an individual's desire to find meaning in their life, and it differs from the will to power (Adler) or the will to pleasure (Freud), as it seeks to transcend the self and engage in goals that go beyond the self.

Secondly: Existential frustration: Existential frustration arises when the will to meaning is thwarted, manifesting as emptiness or loss of purpose, and it may lead to existential neuroses. Existential frustration can be addressed in three ways: the first refers to self-existence as a distinctive mode of being for humans, the second to existence as a given, while the third relates to the pursuit of felt meaning in the subjective experience.

Third: Existential vacuum: The existential vacuum refers to the loss of a sense of meaning and purpose, manifesting as a state of confusion or meaninglessness. The contemporary human suffers from this existential void due to contemporary technological changes and the absence of traditional guiding structures (religion, customs, and traditions), leading to feelings of boredom, loss, and anxiety. This sometimes manifests in compensatory behaviors such as indulgence in pleasure or the pursuit of money or power.

Fourth: The meaning of life: The meaning of life is a personal matter that varies from one individual to another and from day to day, and it cannot be generalized. Meaning is not imposed from the outside; rather, it is discovered through individual experience and embodied in the daily tasks, relationships, and responsibilities that a person undertakes in their lived reality.

Fifth: The meaning of love: Love is the means by which a person can perceive the deep essence of the other. It transcends desire or possession to become a spiritual act that allows one to see the other as they truly are in their innermost depths. through love, a person can recognize the value of the other, contribute to realizing their potential, and discover another dimension of meaning.

Sixth: The meaning of suffering: Suffering gains meaning when a certain situation or reality cannot be changed, such as being afflicted with a terminal illness like cancer. In such cases, an individual can transform suffering into an opportunity to achieve higher values, serving as a free response that transcends pain toward discovering a purpose that manifests even in the darkest moments, making suffering a deeply meaningful human experience. (Ghanem, n.d., pp. 132-134)

3-3- The therapeutic process:

3-3-1- Therapeutic goals:

Existential therapy aims to help the individual discover their own goals, granting the client the freedom to determine their therapeutic path based on their self-perception, while the therapist works to broaden their perspective by posing existential questions that aid in a deeper understanding of the nature of their life. Among the most prominent of these goals are: developing the client's awareness that options remain available to them despite surrounding circumstances, and facilitating their acceptance of responsibility for their actions and decisions. The therapy also aims to enhance the individual's independence so that they can face situations relying on themselves, while making them feel that their personal will plays a crucial role in directing their life. Additionally, he/she is encouraged to develop individual methods for dealing with his emotions and to strengthen his confidence in his own opinions and beliefs. When these goals are achieved, the individual begins to perceive their existence more clearly and gains a true sense of their being, making them more capable of making decisions freely, and thus psychological change becomes possible. (Abo Zaeza, 2013, p. 159; Al-Khawaja, 2002, p. 129)

3-3-2- The role of the therapist and the therapeutic relationship:

Building an effective therapeutic relationship between the therapist and the client is considered one of the most important components of the success of the therapeutic process in the humanistic approach, where therapy is not viewed merely as a technical process, but as a deep human relationship based on sincere interaction and personal encounter. The success of therapy is linked to the quality of communication established by the therapist with the client, and their ability to understand them as a unique being with their own experiences and struggles (Blan, 2015, p. 492). In existential therapy, the relationship between the two parties takes on a special character, as the client is viewed as an independent entity that should not be subjected to ready-made models or preconceived notions. The therapist here does not impose their vision but accompanies the client in exploring their inner world and attempting to understand their suffering from an existential perspective. This model can be likened to the relationship in which the therapist redefines their roles based on the characteristics of each case, making their role more humane and less directive (Sofian, 2018, p. 419).

In this context, Frankl established a set of rules that clarify the nature of

the therapeutic relationship and define the roles of both the therapist and the client, among the most notable of which are:

1. The necessity of empowering the individual to find meaning in their life, considering it a fundamental aspect of therapy.
2. The therapist does not impose meaning but helps the client discover it themselves, based on their own experience.
3. Guiding the client to recognize the importance of having a goal in their life and committing to achieving it, even if it requires enduring suffering.
4. Empowering the individual to overcome pain by giving it meaning, which contributes to their psychological support and enhances their resilience.
5. Viewing existential stress as a natural experience that can stimulate growth when employed positively.
6. Relying on the will to meaning as a foundation in therapy, as this will is an indicator of the individual's responsiveness to treatment and their ability to recover (Frankl, 2015, pp. 493-494).

These principles demonstrate how the therapeutic relationship in the existential perspective transcends the technical aspect to become an essential means of helping the individual build meaning in their life and restore their inner balance.

3-3-3- Therapeutic techniques:

Frankl developed two therapeutic methods: the method of paradoxical intention and the method of that diversion (distraction of thought), which have garnered interest and acceptance from many therapists due to their simplicity and effectiveness in numerous cases.

- **Paradoxical Intention:** Frankl defines this method as "the patient's attempt to do or wish for what they fear, resulting in the removal of the anticipated anxiety, which explains the feedback mechanisms through which the neurotic condition begins and continues."

The technique of paradoxical intention is applied in a humorous atmosphere, where the patient is asked to exaggerate their symptoms to the point that it becomes laughable and mocks their symptoms (Abdullah, 2012, p. 218).

- **Dereflection:** The goal of the dereflection technique is to shift the patient's attention from their weaknesses to their strengths, encouraging them to transcend the self and focus more on the external world than the internal one (Abdullah, 2012, p. 219).

4.- An analytical Comparison between the Three Humanistic Approaches in Psychotherapy:

The three humanistic approaches—client-centered therapy, Gestalt therapy, and existential therapy—share a common affiliation with the humanistic orientation, which is considered the "third force" in psychology, following psychoanalysis and behaviorism. These approaches are based on respecting human dignity and believing in the individual's ability to change and grow, while also granting a central place to the therapeutic relationship and subjective experience.

However, despite their agreement on the humanistic foundation, these approaches differ in their theoretical and philosophical premises, as well as in their intervention methods and practical techniques. **Client-centered therapy**, as developed by Carl Rogers, asserts that humans are inherently positive beings, possessing an innate drive for self-actualization, and only need a therapeutic environment that provides unconditional acceptance, empathy, and genuineness to achieve their psychological balance. It is a non-directive therapy that focuses on the relationship as the primary means of change without relying on specific procedural techniques.

As for **Gestalt therapy**, which is associated with Fritz Perls, it is based on Gestalt principles and views the human being as an integrated unit of emotions, perception, and behavior. This approach focuses on the "here and now" and on activating the individual's awareness of their current experience through interactive techniques such as the empty chair, "I" language, dialog exercises, and exaggeration of symptoms. It aims to reorganize the experience and remove obstacles to the flow of psychological energy.

On the other hand, **existential therapy**, as articulated by Viktor Frankl, is based on existential philosophies that see humans not as victims of their circumstances but as free and responsible agents, seeking meaning in their existence, even in pain and suffering. It focuses on helping the client discover this meaning through existential questions, without imposing ready-made models. Two main techniques are used: paradoxical intention and thought disruption, in addition to evoking the meanings of life, freedom, and responsibility.

Based on the above, it is clear that these approaches, despite differing in their references and techniques, converge in placing the individual at the center of the therapeutic process. They seek to enhance self-awareness and empower

individuals to live authentically and in harmony with their selves and existence, making them represent a comprehensive direction in serving mental health from a profound human perspective.

Conclusion:

In light of the comparative analysis of the three humanistic approaches, it can be said that these models represent a qualitative development in the course of psychotherapy. This is because they have transcended traditional approaches that reduced humans to instincts or observable behavior. They place at the core of their concern dignity, awareness, and the ability to grow and find meaning. Client-centered therapy focused on the importance of the therapeutic relationship, Gestalt therapy on activating therapeutic presence in the "here and now," while existential therapy called for exploring existence, freedom, and responsibility.

Despite the differences in their philosophical foundations and procedural techniques, these approaches complement each other in providing a deep and comprehensive vision of humanity, making it a free, responsible being capable of directing its life toward coherence and growth. Its importance does not stop at the theoretical level; it extends to contemporary therapeutic practice, which increasingly relies on approaches that enhance the value of the therapeutic relationship and recognize the individuality of the client and their personal experiences as a fundamental basis for change.

In a world where psychological pressures are increasing and challenges are intertwining, these approaches emerge as therapeutic frameworks capable of supporting mental health and enhancing the individual's psychological balance, by enabling them to understand themselves, achieve their presence, discover meaning in their experiences, and take responsibility for their choices. Thus, humanistic approaches contribute to building a more humane and comprehensive therapeutic practice, responding to the needs of contemporary individuals and opening new horizons for healing and inner growth

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