Good morning and welcome to all of you!

Section 1

In the fall of 1918, a worn-out soldier returned from the battlefields of World War I. He was a student of medicine, but also interested in political matters and in psychoanalysis. When he came home, he was traumatized by what he had seen and undergone in the trenches (see Bocian, 2007, 111ff).

He described himself as “desensitized” and filled with “horror of living and horror of dying” (Perls 1993, 6). And the woman who later became his wife said that he was “desperate, cynical, and very disillusioned” (Perls & Rosenblatt 2005, 117). During the endless static warfare in Belgium, he had not only suffered from hostile environmental conditions and hunger; he had also seen unspeakable atrocities, terribly wounded bodies, comrades and combatants dying from gas, deformed corpses . . . In sum, he had experienced what the Freudians of his time might have called ‘the death instinct gone wild’.

His name was Frederick Perls.

He was left with nagging questions about the meaning of human aggressiveness—questions that would haunt him for the rest of his life: It had become crystal clear “that repressed energies not only do not disappear but may even become more dangerous and more effective if driven underground” (Perls 1942/1992, xvii). Moreover, Freud also seemed to be right when he assumed that there was only a slight chance for the death instinct to be tamed by the influences of rational thinking and
sublimation—So how could there be a chance to overcome the destructive potential of mankind?

More than twenty years after World War I, Perls wrote and published his first book, the title of which was *Ego, Hunger and Aggression* (Perls 1947). He conceived of it as *A Revision of Freud’s Theory and Method* (which was the subtitle).

Now he was under the current impression of the Nazis’ most offensive aggression and of the even more effective deadly machinery of World War II. It is very likely that these events should have reactivated the psychological processes he had acquired to cope with his earlier traumatization: desensitization, desperation, and cynicism, but, on the other hand, probably also the hope for peace.

So Perls thought that maybe human aggression was not that bad in the first place; maybe it only became evil because it was seen as a deadly force that had to be kept under control. What if we looked at the so-called death instinct as a “life supporting assignment” (1997, 49)? Don’t we use our teeth every day in order to destroy the food that we eat and, by doing so, ensure our survival and growth? This “dental aggression,” he figured, actually was a means without which we would not be able to survive. If we were not able to bite, chew, and digest, i.e. to aggress, destroy, and assimilate, we would be threatened with extinction. So to him it appeared that aggression was an important aspect of a life force that also seemed to be at work when we explore our world, take initiative and assert ourselves in order to get what we need. In the end he concluded that aggression should neither be repressed nor sublimated, but rather cultivated and integrated. He “became more and more convinced that there was no such energy as aggression, but that aggression was a biological function” (Perls 1942/1992, xvii).

Hence the death instinct was transformed into the idea of *positive aggression*. What the ordinary person may regard as an oxymoron and what can be seen as the outcome of sloppy thinking (see Staemmler & Staemmler 2009), now made its career as a central concept in gestalt therapy theory. It also served as a main source of our jargon of “mental metabolism”—a term, by the way, that Perls borrowed from Smuts, who was a *biologist*: We have accepted Perls’s advice “to look upon psychological material in the same way as upon physical food” (Perls 1942/1992, 155); for him, that was a basic theoretical concept, not just a metaphor. Therefore he seriously advised his readers: “To understand and assimilate the world you have to make full use of your teeth” (*ibid.*, 232).

So we do not say that we think things through; we ‘chew’ on them. We do not say that we adopt an opinion; we ‘assimilate’ it. We do not say that
we reject a proposition; we 'spit it out.' What Sartre (1997) has once ironically called a "digestive philosophy," has become a hallmark of our theory.

And it appears to have become a sacred cow too. Very rarely is the contradictory idea of positive aggression challenged in our literature. The sharpness of our thinking—or should I say: the sharpness of our teeth?—got lost with respect to this concept. For many years, we have swallowed it whole. We have given up our critical mind with respect to the miraculous transformation of the death instinct into positive aggression. Meanwhile, this so-called positive aggression has attained the status of a cult, of faith healing.

I have often wondered why this concept has appealed to us so much. My best guess it that it represented a sense of vitality and of unsuppressed energy as well as the liberation from restrictive cultural norms that made it difficult to experience and express one's feelings. Those were some of the major values of the zeitgeist in the 1960's and 70's that inspired us when we first learnt about gestalt therapy. We did not see that "dental aggression" was only a small section of a large array of life energy's possible manifestations. We took a part for the whole. But biting, and digesting are only some examples for a multitude of ways in which human beings engage in an exchange with their worlds. To give you other examples, I would only like to remind you of a person's breathing and of the exchange of gazes between a baby and her mother.

However, if aggression and destruction are seen as the paradigmatic ways in which we make contact with the world and, moreover, are sainted, then the dark side of man, also called evil, is simply denied. Moreover, the aggression that has caused so much dying, pain and suffering, now appears as something positive and worth identifying with: Very literally we are dealing with an identification with the aggressor. Perls suggested that "if you are afraid to hurt people, to attack them, . . . you should attend to the following exercise: imagine yourself biting a piece of flesh out of someone's body" (1942/1992, 232—italics added). And for those, who might feel scruples to engage in this almost cannibalistic fantasy, he offered the following rationalization, paradoxically invoking drive theory again:

You might condemn such an exercise as vicious and cruel, but this cruelty is just as much part and parcel of your organism as it is of the animal's in its struggle for life. Your biological aggressiveness has to find outlets somewhere and somehow; even behind the mask of the mildest person, a person with a sweet, forgiving character, there lurks a latent aggressive
nature which must come out in one way or another . . . (ibid. 233—italics added)

We know from trauma research that desensitization and the identification with the aggressor can be ways in which a person may try to cope with overwhelming life events. I do not know, if the traumatized soldier of World War I, who was the founder of our therapeutic approach, resorted to these means when he developed his theory. But I do know that generations of gestalt therapists, including my own, have cherished the cult of positive aggression for many years. We have uncritically believed in our founder, when he wrote:

If a person suppresses aggression, . . . if he bottles up his rage, we have to find an outlet. We have to give him an opportunity for letting off steam. Punching a ball, chopping wood, or any kind of aggressive sport, such as football, will sometimes work wonders. (Perls 1942/1992, 134f.)

Perls was convinced of the “cathartic value” (ibid., 245) of such behavior and invited his readers and clients to

. . . visualize a person against whom you feel a grudge. Tell him exactly what you think of him. Let yourself go; be as emotional as you can; break his bloody neck; swear at him as you have never sworn before. . . . Never mind feeling ashamed of having been so “silly.” (ibid., 297)

In keeping with this recommendation, for many years we have practiced what Gary Yontef (1991, 7) has once called “boom-boom-boom”-therapy. We have naively encouraged our clients to hit pillows, to yell at empty chairs and to indulge in cruel fantasies in the hope that that will be healthy for them and will make the world a more peaceful place. (I have recently found this photograph in a magazine that shows a current variant of this practice, called “destruction therapy.”)

At the same time we have ignored all empirical evidence demonstrating that cathartic expression of anger does not result in less aggressiveness, but in more (see Bushman, Baumeister & Stack 1999)! We have also closed our eyes with respect to the research which shows that repeated or continuing activation of aggressive physical states does harm to the health of the angry person herself (Williams & Williams 1993)—not to mention the damage that is done to her relationships.

Of course, most of us have given up cathartic procedures many years ago. We have intuitively understood that they do not yield the desired results and are not in accordance with a focus on the therapeutic relationship. However, the theory on which they were based is still widely
accepted, although in *Ego, Hunger and Aggression* Perls did not discuss human relationships very much; he primarily discussed the hungry organism. And such an organism is greedy, horny, and egocentric—dominated by its biological drives.

Not minding category mistakes, Perls applied a biological theory of nutrition to the psychological, interhuman domain by making it a general theory of contact—not only of an organism’s contact with food, but also of personal contact among human beings. In his view, a person’s individual needs become the predominant directives of her actions. The other person exists only as a means for the satisfaction of one’s own needs. And these needs have to be penetrated through the use of aggression.

(In Buddhism, by the way, that is seen as attachment to one’s ego and one’s needs.) As a result of this attachment, ultimately the alterity of the other is disrespected; ethical considerations are left out of the picture; the possible Thou is degraded and treated as an It.

In this context, I would like to honor Phil Lichtenberg by quoting him with an observation that I find most important; he writes:

> Were a person to have definitive wants at the beginning of a relationship and insist that these wants be met without alteration, that person would be ignoring the actual relational nature of human functioning and would inherently be fostering connections of dominance and submission. (Lichtenberg & Gray 2006, p. 24)

I fully agree with Phil that contact is not a one-sided event; in interhuman contact the situation of the other has to be taken into account; my own wishes have to be negotiated with the other person, and to be attuned to our joint situation. We cannot apply Perls’s theory of ego, hunger and aggression to the interhuman realm. That would just not support “contactful” behavior and experience in the *humane* sense of the word—Listen to one more quote by Perls:

> If the hunger tension becomes high, the organism marshals the forces at its disposal. The emotional aspect of this state is first experienced as undifferentiated irritability, then as anger, and finally as rage. Rage . . . finds it outlet in aggression, in the innervation of the motoric system, as a

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1 Even in Gestalt Therapy, which in some respects goes beyond Ego, Hunger and Aggression, the “mental metabolism” theory can be found in many places; for instance in the discussion of “post-contact”: “Where the contact is by incorporation. . . . , we speak of assimilation” (Perls, Hefferline and Goodman 1951, 421).
means of conquering the needed object. After the "kill," the food itself has to be attacked. (Perls 1942/1992, 136—italics added)

In my view it is tragic to see that Perls, who started out to free aggression from its alleged roots in the death instinct and to transform it into a positive function, lost touch with his original positive intentions. He seems to conceive of human beings essentially as beasts and ends up advocating the martial vocabulary of "conquering" and "killing." This may be biographically understandable; but do we really want to believe in an idea of man as a beast wandering about in search of prey to satisfy its hunger?—I don’t think so.

From the outset, however, I find in my life-world fellow-men who appear not merely as organisms but rather as bodies endowed with consciousness, as men ‘like me.’ A fellow-man’s behavior is not, if you will, a spatiotemporal event, but rather action ‘like mine.’ That is to say, it is imbedded for them in meaning-contexts. (Schütz & Luckmann 1973, 15)

Section 2

So I think it is time for a change now. But there is space for continuity as well, if we draw on Perls’s opinion that any theoretical innovation

. . . must be preceded by a ruthless purge of all merely hypothetical ideas; especially of those hypotheses which have become rigid, static convictions and which, in the minds of some, have become reality rather than elastic theories, and which have yet to be re- and re-examined. (Perls 1942/1992, xiv)

I think that in what I have said so far, it has become clear that such a re-examination has to address different levels, among them the relational level between human beings. Obviously, this level can be described much more adequately with Buber’s terminology and that of other dialogical philosophers than with Perls’s theory of aggression. In this respect I would like to refer you to the writings of Gary Yontef (1993; 1998; 2002), Lynne Jacobs (1989; 1998; 2003; 2005), Rich Hycner (Hycner & Jacobs 1995; 2010) and others.

In what follows, I would like to focus on other levels. The first one has to do with a differentiation that I have only briefly mentioned before. Already in 1939, in the title of her lecture “How to Educate Children for Peace,” Laura Perls names her intentions, with which I fully concur and which I also apply to my therapeutic work. In this lecture, she sums up the traditional theory of aggression and makes an interesting observation:
Deploring the educational style of parents who suppress certain behaviors of their child, she first states that "...not only... his so-called 'naughtiness,' his crying and shouting, biting, kicking and scratching, tearing and breaking things, but also . . . his curiosity and his inquisitiveness" (1992, p. 39—italics added) are punished. And she shows empathy for the adults in a second statement: "Of course, the child's inquisitiveness and his physical aggressiveness are very trying for the grown ups. Their satisfaction demands so much time and patience . . ." (ibid.).

And in a third place a few pages later she writes:

Aggression is not only a destructive energy, but the force which is behind all our activities, without which we could not do anything. Aggression not only makes us attack, it also makes us tackle things; it does not only destroy, it also builds up; it not only makes us steal and rob, it also lies behind our endeavors to take hold and to master what we have a right to. (ibid., pp. 42f—italics added)

In these three quotes you find that although Laura Perls always talks about one theoretical concept, i.e. "aggression," she continuously uses the linguistic pattern of "not only . . ., but also . . ."

Thereby she describes two types of phenomena: "aggressiveness" on the one hand, and "inquisitiveness" on the other hand. This distinction of the two kinds of phenomena was not only phenomenologically sophisticated, it also turned out to be visionary in the history of motivation research. Nevertheless, it disproved the theoretical concept she and her husband had developed.

The distinction was phenomenologically accurate because there are numerous differences in the respective ways in which people experience the one and the other: First, the target of aggression is usually aversive, whereas the target of inquisitiveness is usually—at least potentially—attractive. Second, the basic attitude in aggression is "contra," in inquisitiveness it is "pro." Third, the feeling tone in aggression is distressing, in inquisitiveness it is hedonic. Fourth, the attentional focus in aggression is narrowed, in inquisitiveness it is widened. Last but not least, the social function of aggression is distancing and separating, whereas in inquisitiveness it is connecting and bonding.

The distinction was visionary, because today most researchers in the psychology of motivation make similar distinctions to the one that Laura Perls introduced already in 1939. They usually distinguish five or six different motivation systems in humans. Two of those are relevant to my discussion here:
Graumann, for instance, speaks of "aggression" on the one hand, and of "investigation" or "exploration" on the other hand. Another researcher, Ford, distinguishes between "annoyance-anger-rage" on the one hand, and "curiosity-interest-excitement" on the other hand.

Joseph Lichtenberg, who is a psychoanalyst and an infant researcher, distinguishes five motivation systems, among them "aversion through antagonism" and "exploration and assertion."

And last but not least, Jaak Panksepp, who is a neuroscientist, identifies two different motivation systems too, based on his insights in neurological circuits and transmitter systems. He calls them RAGE and SEEKING.

In sum, we have to make a clear distinction between the two systems—no matter how we name them. In other words, supporting exploration and assertion is not the same as supporting aggression! Therefore I think we should stop subsuming both motivation systems under one term, the term "aggression." Clients who confuse the one with the other typically cannot assert themselves without becoming hostile or—if they have introjected not to be aggressive—they also do not allow themselves to be assertive and explorative.

Joseph Lichtenberg has given a wonderful illustration; I quote:

Fear, shame, and guilt are the affects parents most commonly evoke to erect prohibitions against exploratory-assertive activities they regard as dangerous or damaging: climbing on tiltable chairs, running after a ball into a street, grabbing a toy away from another child, pulling on mother's earring or glasses to inspect them. A subtle but important interplay exists in the parent's perception of the child's motive. Parents who recognize their child's activity as exploratory, self-assertive, and playful in nature, after effectively prohibiting a dangerous pursuit, will help the child to switch to another exploratory-assertive goal, including exploring the danger when appropriate. Parents who regard their child's exploratory-assertive activity as aversive, that is, as antagonistic and rebellious because they do not like it, after prohibiting the dangerous pursuit, shame the child as foolish, malicious, and bad. Consequently, the child will confuse assertion with antagonism and the persistent carrying out of a self-conceived agenda as shameful and evil. (Lichtenberg et al. 1992, p. 55—italics added).

Lichtenberg describes pretty much the same scenario as Laura Perls. But he carries the argument a little bit further. He makes clear that a potentially pathogenic factor in those parenting styles consists exactly of a lack of differentiation between the child's two different motivations, i.e. of a parental behavior that treats the inquisitive activity of the child as if it
had its source in aggressive motivations. As a result, the child will not be able simply to assert herself; she will have to attack the one, towards whom she actually only wants to assert and try out herself; the intended self-assertion easily becomes an aggressive activity.

The lacking ability to differentiate fosters unnecessary (and originally unintended) aggression, since it either confuses aggression with self-assertion or puts aggression in the service of self-assertion. Reversely, the lack of differentiation may also contribute to a lack of self-assertion, for instance when self-assertion gets under the impact of aggression inhibition that, given a clear differentiation, would not need to affect it. I think it is safe to assume that the same is true for many of our clients.

There is another branch of investigation that is akin to motivation research; it is the research in emotion regulation. Here researchers have come to a consensus in recent years: the idea that there are basically three emotion systems that regulate our responses to all kinds of life events.

I do not want to go into the details of this now, but I would like to point out that we find similar distinctions here again: The yellow and the red circles illustrate that the emotions that are related to exploration and pursuing must be assorted to a different cluster than anger.

To sum up this section of my lecture, I would like to underline that the explorative-assertive motivations of people on the one hand and their aversive-aggressive motivations on the other hand deserve to be seen in their respective own rights and dealt with in the respective appropriate ways. Moreover, many clients need support to learn and distinguish between the two. Therefore it makes sense not to subsume them under the same term, aggression—neither in theory nor in colloquial parlance.

If we draw this conclusion, we will not only have a clearer orientation in our work as therapists, we will also support ourselves to be better understood by our colleagues from other therapeutic orientations and other scientific realms. Most of them use the term aggression in the way in which it has been defined by the World Health Organization (WHO):

"Aggression is any form of behavior directed toward the goal of harming or injuring another living being who is motivated to avoid such treatment."

In the light of this definition it becomes evident, that from an ethical point of view as a rule of thumb it will be unproblematic to support clients in developing their explorative and assertive capacities. In contrast, supporting aggressive behaviors must be seen as ethically problematic in most cases.
Section 3

But as we all know, psychotherapy is not only about behavior; to a large extent it is also about attitudes, emotions and other aspects of human interaction. So let us look at the practical clinical questions in more detail.

If I think of those of my clients, who are having problems with their aggressive attitudes and feelings, they roughly fall in one of two categories. First, there are the ones, who have troubles feeling and/or expressing their anger and suffer from this lack of awareness and expressiveness in various ways, for instance stomach ulcers or depressions or occasional temper tantrums. They are the ‘classical,’ more or less well-adapted, so-called “anger-in” clients, for whom therapy is associated with the hope for liberation from their introjected cultural injunctions, by which they suppress and inhibit their emotions and their liveliness. Maybe they were also the ones Perls had in mind when he developed his cathartic procedures.

The second group is apparently increasing in numbers in the last decades. I think, for instance, of those clients, who have been labeled “Type-A” personalities in the research literature of the 1960’s and 70’s. A so-called “Type-A” person is characterized by strong purposefulness, ambitiousness, and striving for success; impatience and hastiness; irritability and increased readiness for anger and aggressive behavior. A more recent diagnostic label for people with similar features is called “Intermittent Explosive Disorder.” People with IED may attack others and their possessions, causing bodily injury and property damage. Sometimes they are sent into therapy by family members or by officials, sometimes they come voluntarily, because they see the damage they do to others and to their relationships, but find themselves unable to change their “anger-out” behaviors.

These people do not have difficulties feeling and expressing their anger, they even act out their aggression frequently. So usually their hope is to receive support to learn and “control” their anger in ways they don’t know yet.

The problems of these two groups of clients and what they expect from therapy are different in kind, and they need different kinds of therapeutic support. However, it is interesting to note that they also have something in common. This commonality was, for instance, substantiated with respect to blood-pressure:

The diagram is to show that to statistically significant degrees, in both the “anger-in” and “anger-out” group, blood pressure increases in correlation with the intensity of the respective pattern (see Spielberger et
al. 1988)! That is, in both groups the same aggressive physiological pattern is activated.

Anger-in people typically do not experience this activation as angry feelings; they may simply develop coronary heart disease or other symptoms. Physiology itself remains mute. So any therapy that supports these clients to become aware of the activation of their aggressive pattern and of their anger, will help them to better understand the situations in which the pattern is activated; that is, the physiological reaction can now be experienced as an aspect of an angry emotion and thus as a social response. It will, therefore, enable them to cope with these situations in communicative and behavioral ways. Of course, one can only enter a communicative exchange with others about problematic situations, if one is aware that one activates aversive sensations and feelings. In this way the person opens up to herself an important array of new interactive options—These are, in brief, the useful aspects of the way in which we have traditionally worked with anger-in clients.

There are, however, two dimensions that are not automatically addressed and dealt with in this kind of work. The first dimension is expression. If you become aware of your anger, you attain the option to express it. But there are different kinds of expressions: You can enter a respectful dialogue, or you can act as a bully. You can begin to negotiate the problematic situation with the other person, or you can yell at her or even beat her up—which is exactly what “anger-out” people tend to do and what we, mostly unintentionally, trained our clients to do when we encouraged them to hit the pillows that were used as placeholders for significant others.

So I hold that respectful—or, if you prefer: contactful—expression needs to become a subject-matter too, both in our theory and in our practice. This subject-matter must not only be discussed with respect to the relation between expression and awareness, and it must not be restricted to the cathartic aspect of the expression of feelings in the sense of trying to ‘get rid’ of them as if they were rubbish. As you can read in Gestalt Therapy, “an emotion is the integrative awareness of a relation between the organism and the environment” (Perls et al. 1951, p. 407) or, as I prefer to say, between the person and her Mitwelt. So predominantly, a theory of expression has to deal with the relational aspects of expression including its relational impact.

The second dimension has to do with the original activation of the aggressive physiological pattern and the anger. Being aware of the fact that you are aggressive and angry is not tantamount to being aware of how you became aggressive and angry in the first place! Here is another array
of options to be unlocked, i.e. the array of different ways in which a person can *interpret* a problematic social situation. In other words, we are entering the realm of the personal *hermeneutics* of aggression. Human beings are no stimulus-response-machines. They attribute *meanings* to the stimuli and then respond to these *meanings*.

I would like to discuss this in some more detail with respect to anger and aggression. For this purpose it is useful to have an idea of what an emotion is.

Let us look at the box in the center of this diagram (Figure 23-1); it describes the four aspects of any emotion. However, it does not only describe the parts of an emotion, it also shows the temporal sequence of their activation. So first comes the appraisal, and then follow the other three parts synchronically: physical regulation, feeling and expression. What is called “appraisal” is the respective individual’s interpretation of what she or he perceives in a given situation. Depending on this interpretation the three other parts are activated in a way that is appropriate to the appraisal.

One might also say that emotions are judgments, for which the person, who applies them, is responsible. And since they are judgments, they can be changed: “If you should convince me that John has not wronged me, I do not simply conclude that my anger is unreasonable, unfair, or unbecoming. *I cease to be angry*” (Solomon 1980, 261—italics in original). In other words, if I change my appraisal, I also change my feeling (as well as my physiological reactions and my expression, of course).

To be sure, I am not saying that we should talk our clients out of their anger, but I want to point out the aspect of an emotion that is easily accessible to therapeutic influence, because it can become aware and can be spelled out.

There is a typical appraisal to each of our emotions. These appraisals are also called “core relational themes,” because they describe the essence of how a person relates to situations emotionally. Let me give you two examples, the first one being sadness.

For sadness, the appraisal can be spelled out with the words, “I have experienced an irrevocable loss.” Let’s say, your beloved sports-car was stolen. You have to interpret this situation as a definitive loss to feel sad. But maybe you evaluate this situation differently, maybe you see it as an attack against your property and against your personal integrity. Then you will get angry (Fig. 23-1):
The core relational theme for anger can be spelled out with the words, "I experience a demeaning offense against me and/or mine." In this brief formulation a few important details are included, to which the therapist can alert the client, if they want to work on the client’s excessive tendency to get angry or to act aggressively:

First, the client feels frustrated with respect to certain desires.

Second, these are desires to which the client is attached, so that their frustration is something that he sees as an offence against himself or his self-esteem or his "ego."

Third, the client blames others for the frustration he experiences.

Fourth, the client holds others responsible for having caused the frustration. The more responsibility he attributes to the other, the more angry he will get: For instance, if he thinks the other frustrated him because of an oversight, he will get less angry than if he thinks that the other did it out of bad will, "just to hurt" him (see Lazarus 1998, 359).

You are experienced therapists, so I do not need to tell you how to support your clients to become aware of these implicit facets of the way in which they appraise certain situations; they show in their choice of words, in their postures and attitudes of entitlement and outrage, in their accusations and allegations. You can use your familiar therapeutic instruments. The important shift is in the focus of your attention. You do not focus on the feeling alone, you also focus on the appraisal to help your clients experience how they create their anger and aggression. Once they have found out that they are the agents who have an influence on the way
they feel, they have the choice, whether or not they want to get angry and act in aggressive ways.

There are many alternatives: There are other appraisals and feelings, and there are other kinds of conduct. In my experience, many clients are interested in developing more sophisticated ways of asserting themselves, if they find that their needs are not met. Usually they report that they are much more effective in getting what they want, when they do not fight against others, but when they stand up for themselves in peaceful ways.

**Summary**

Now I would like to sum up briefly what I have tried to convey in this lecture:

First, *theoretically* I think that our traditional theory of aggression is problematic with respect to its inherent logic. In addition, it is too deeply rooted in drive theory and in a one-person psychology to be adequate to today’s demands for an intersubjective and ethically justifiable approach to psychotherapy. In short, it is no more suitable as a psychotherapeutic metatheory. A contemporary metatheory needs to be built upon other elements of our legacy, for instance the insight that “contact . . . is the . . . first reality” (Perls et al. 1951, 227).

Second, *psychologically* our traditional theory lacks the necessary differentiation between the aggressive motivation system on the one hand and the explorative-assertive motivation system on the other hand. It creates a hotpot of motivations and, thereby, may frequently be confusing for both therapists and, consequently, their clients. A psychology of motivation has to take into account this decisive differentiation, as it has been foreshadowed by Laura Perls in her lecture on education for peace.

Third, *practically* our traditional theory of aggression opens up only limited therapeutic strategies, some of which—especially the cathartic ones—are even detrimental to the well-being of our clients and to the fate of their relationships with other people. More therapeutic options result from a clear distinction between aggressive and assertive motivations as well as from a therapeutic focus that emphasizes the awareness work on the appraisals that are embedded in our clients’ emotions.


