

Exercise Using Gestures

Role play



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Why use gestures

- Gestures are signals.
- Signals elicit emotions, not words.
- Words can be used as “place markers.”
(Signals can be used as “place markers.”)



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Introduce Gestures

Simple Arm/Hand Postures
And Their Symbolic Meaning



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Exercise Roles

- One person is the “therapist.”
- One person is the “patient” and role plays a simple problem involving anxiety, depression, habits or relationships.
- There will be two “sets” of exercises, and each person will be a therapist and patient twice.
- The exercise is designed to develop therapist states, not to cure the patient. It is not to be used with patients in this exaggerated form.



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Exercise One

Only do the exercise one way. Do NOT change roles.
Patient role plays any simple psychological problem.
NOT real.

Therapist responds with simple phrases that introduce hand and arm gestures that reflect back your empathic understanding of the patient’s emotional message (“X”) (or even a therapeutic intervention), e.g.,: “What you are experiencing is something like this _____ (make gesture). Or, “Is it more like this _____ (gesture 1) or like this (gesture 2)? The words are “scaffolding.”

The therapist should think analogically: What is (“X”) like?



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Exercise One

Essentially: Whenever an emotion is expressed, communicate it back AND ENHANCE IT with a symbolic gesture, not words; therapist uses signals and limits words. The patient must use words.

Continue for at least ten interventions. Take time to think. Go slow.

Discuss the impact for each participant. What “state” is elicited?



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Exercise One Alternate Version

Only do the exercise one way. Do NOT change roles. Patient role plays any simple psychological problem. NOT real.

Therapist responds primarily with sounds that reflect back your empathic understanding of the patient's emotional message ("X") (or even a therapeutic intervention), e.g.,: "What you are experiencing is something like this _____ (make sound). Or, "Is it more like this _____ (gesture 1) or like this (sound 2)? The words are "scaffolding."

The therapist should think analogically: What is ("X") like?



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Exercise One Alternate Version

Essentially: Whenever an emotion is expressed, communicate it back AND ENHANCE IT with a sound, not words; therapist uses signals and limits words. The patient must use words.

Continue for at least ten interventions. Take time to think. Go slow.

Discuss the impact for each participant. What "state" is elicited?



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Exercise Two

Only do the exercise one way. Do NOT change roles. Patient role plays any simple psychological problem. It CANNOT be real.

Therapist responds with a simple phrase that introduces the use of an object in the room that is used to reflect back an understanding of the emotion the patient communicated ("X"): E.g., "What you are experiencing is something like this _____ (use object). Or, "Is it more like this _____ (using object 1) or like this (using object 2).

Essentially: Whenever an emotion is expressed, communicate it back and enhance it with a symbolic action, not words

The therapist should think analogically: What is ("X") like?

Continue for at least ten interventions. Take time to think.

Discuss the impact on each participant. What "state" is elicited.



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Why??

- Adds drama and novelty for the patient.
- It encourages the therapist to be novel (prevents burnout)
- It develops therapist sub-states
- Signals have more emotional valence than words.
- Emotions are communicated with signals.
- Every emotion has a specific sound and action that may be expressed or suppressed. Addressing the signal is more powerful than addressing the word for the emotion.
- Makes simple ideas come alive.
- It is based in utilization.
- It forces therapists to trust their unconscious.
- It encourages the therapist to be analogical and metaphoric
- Makes therapy fun
- Multisensory methods increase impact.



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Exceptions

- Solution states have components. What are they? How to symbolize them and create living metaphors.



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Exercise Three

Switch Roles: Only do the exercise one way. Do NOT change roles.

Patient role plays a different psychological problem. It CANNOT be real.

Therapist asks for exceptions ("What is it like when you are doing better [or happy])"? "What else is it like?") and responds with a simple phrase that uses an object in the room to reflect back an essential understanding of what the patient just communicated: "What you are experiencing is something like this _____ (use object). Or, "Is it more like this (use object 1) or like this (use object 2)?

The therapist should think analogically: What is ("X") like?

Continue for at least ten interventions. Take time to think.

Discuss the impact.



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Exercise Four

Only do the exercise one way. Do NOT change roles.

Patient role plays a different psychological problem. It CANNOT be real.

Therapist asks for exceptions (E.g., “What was it like when you were happy”? “Tell me more.”) and responds with a simple phrase that introduces the use of a full body gesture that reflect back an understanding of what the patient just said: “What you are experiencing is something like this (stand and gesture each time). Or, “Is it more like this (stand and gesture 1) or this (gesture 2)?

The therapist should think analogically: What is (“X”) like?

Continue for at least ten interventions. Take time to think.

Discuss the impact.



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Jeffrey K. Zeig, Ph.D.
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Jeffrey K. Zeig, Ph.D.
The Milton Erickson Foundation
3606 N. 24th St
Phoenix, AZ 85016
tele: 602-944-6529
cell: 602-684-1918
jeff@erickson-foundation.org

www.erickson-foundation.org
www.ericksonfoundationstore.com
www.evolutionofpsychotherapy.com
www.brieftherapyconference.com
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