

(Almost) Everything I Know About Psychotherapy,

I Learned in Acting School

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### **Introduction**

I graduated from acting school in 1977, when I was 22, and worked as a professional actor for the next couple of decades. In my late 40's, acting work started to fall away, so I decided to go to university. It seemed logical to study linguistics, as my acting career had been largely about talking. I had also read Stephen Pinker's, *The Language Instinct*, which opened my eyes to the world of neuroscience and psychotherapy. In the final semester of my undergraduate degree, I did a semester of Acting 101. I thought that might be something I could do easily enough. What an extraordinary and cathartic experience that semester was. I did a scene from Hamlet. In my personal life, my marriage was ending. In one auspicious moment, a trumpet blasted in my brain. It dawned on me that Hamlet was pretending he was insane so that he could stay close to his Uncle and get revenge for the murder of his father. It did take him five acts to get it all together, but I guess Shakespeare had to give the audience their money's worth. But, the important revelation was that I understood that I was a little bit insane and pretending that I was sane so that I could keep up appearances in normal society. In that moment, I realized that the process of acting and doing therapy were connected. They are so similar, but from different perspectives. Three more masters degrees later and I am convinced there is a connection between acting and doing therapy, but more importantly, there is a connection between acting and being a therapist.

### **Being an Actor**

My first conscious memory of being an actor – of creating a performance where I felt I was *being* someone else – was when I was 8 years old. I was Prince Philip at the Empire Day performance in Second Class at East Lindfield Primary School. I stood on one side, at the top of the stairway to the principal's office, and my "Queen Elizabeth" stood on the other. It was an important day. I know from photographic evidence that I was Joseph in a Nativity scene when I was about 4 because the picture was used for the cover of Readers' Digest in 1958, but I'm pretty sure I just thought it was a fun day where I got to wear a towel for a hat.

I also remember the moment when I knew I could be a "real actor", in the professional sense. I was 20 years of age, in my first year of acting school. This moment changed my life. I will describe the event later in the book, but at the time, I thought it was the dawning of my career as an actor. Now, I realize that it was the beginning of a long path to my life as a psychotherapist. It is certainly lovely to receive the applause and appreciation as the curtain falls, but all too often, the mind of the audience rapidly begins to wonder if they will go for coffee or pizza (I have, literally, heard audience members say this – on more than one occasion). On completion of therapy, however, there is no applause, no press reviews, and little to no public accolades, but a human being, who was in distress, has found something magical within themselves that changes their life for the better. This really means

something. I am so grateful for my years as a professional actor for helping me to be able to do this. What I learned in acting school was a fundamental preparation for my career as a psychotherapist.

## **Being a Therapist**

In 1980, my mentor, Ernest Rossi, and Milton Erickson, two extraordinary people in the history of psychotherapy and therapeutic hypnosis, sat down for a conversation. Rossi had asked Erickson whether hypnosis could be used to “open my mind to learning everything I needed to know to become a good practitioner of therapeutic hypnosis.” Erickson had invited his friend and physician, Dr Marion Moore to join the discussion. Erickson (ME) and Moore (MM) sat either side of Rossi (ER), “surrounding the subject with a teaching and therapeutic milieu.” Erickson began to talk about what makes a “good practitioner”, but it was in a very different direction to Rossi’s expectations.

*ME: We think communication is words. But babies learn by intonations, inflections, and facial expressions.*

They discussed the importance of touch to human connection, and also the fragility of someone’s “*personal space*” and the “*intense focused attention*” that can occur between therapist and client. Then, they turned to the importance of “*real life observations*.”

*ME: When you look at patients, look at all of them. Don’t miss anything. We have to learn to read faces – the mood, the expression.*

*ER: The little wrinkles on the forehead that indicate thought and focus of attention...*

*MM: It can be tremendously helpful to any therapist if he/she can read facial expressions correctly.*

The conversation continued with Moore explaining how he was able to tell that a patient was pregnant by the changes in her skin color, muscle tonus, and “a number of other things.” Rossi eventually reflects on what he feels Erickson and Moore are teaching.

*ER: ... you have to be an acute observer... Observations from everyday life is the best approach to opening your mind to becoming a better psychotherapist.*

*ME: Yes.*

*ER: We have to find out how to read faces. We have to find out how to read inflections of words, minimal cues that patients give us about their underlying problem...*

*ME: Yes*

But, Rossi realizes the therapist’s dilemma.

*ER: There is no school for face reading, posture reading, voice inflection reading – except the school of everyday life.*

But there is. I wish I was there in 1980 to tell Rossi that all this, and more, is taught in acting school.

(Later Rossi went on to study acting with Lee Strasburg for exactly the reason I am writing this book – to improve his sensitive observation and interpersonal responsiveness. We have often spoken of the vital importance of acting to our therapeutic capacities.)

### **The Actor's Way**

Acting school is all about developing your sensitivity and awareness of others and yourself. Every facet of human expression is examined, explored, tested and experimented with. We pull characters apart and imagine all their possibilities and then reintegrate them into the context of the story. This is where I learned about the complexity of being human. I learned about our strengths and our fragilities, but not only from an objective view. We learned at a visceral, experiential level. We learned by doing and by being. This is where I learned my most valuable lesson: that we can be many expressions of our “self”. We change, and adapt “who” we are in relation to the narrative, the context, the environment, what we say and what is said, what we feel and what is felt. All these contribute to how we express ourselves in any given moment and this expression can be observed in the way we breathe, move, speak, tilt our head, move our arms and hands in gesture, also our facial expressions, and so much more. As Erickson said, when we look at someone, we need to “look at all of them.” Knowing ourselves is the best place to start.

Client's often present for therapy and say, “I don't feel like myself” or “I don't want to be like this” or “I want to be someone else other than me.” This is a truly extraordinary expression of self-awareness. Certainly, they are in some degree of distress and are probably stuck in a painful situation, but, somehow, they know they are somewhere they don't want to be and they have a belief that there is a possibility for change. They have an implicit sense there is something more within them. What they need is some help.

An actor also searches for the play's character and, somehow, they know it is within. There is no better example than the documentary by actor Al Pacino titled, *Looking for Richard*, which documents Pacino's search for the Shakespearean character of *Richard III*. Where and how can he find this person? Pacino searches within, but also seeks out those that have been through similar experiences, or can share some special knowledge. Pooling these investigations and the deep understanding of his own self, Pacino creates a “possibility field” (as with *complex systems*) from which the answer to the problem emerges. In Pacino, it emerges as the unique persona of Richard III. In the client, the answers emerge as beneficial changes, developments and transformations from their troubled self, to a more resolved and integrating self. As described in *The Practitioner's Guide to Mirroring Hands*, when given the opportunity, the client is able to access their own self-organizing problem-solving and mind-body healing processes. This is how the client enables effective therapeutic change. I feel that the actor utilizes these same inner capacities to find the character they are to perform. The actor's character is the emergent answer to a particular type of problem, but, just like the client, it needs to come from within to be “natural” and

“real”. I learned this in acting school, so when Ernest Rossi described the power and strength that resides within the client to find and generate their own therapeutic change, I was *not* surprised. Not only that, but it also explained why I had been troubled by directive, practitioner dominant therapies taught in my training for psychotherapy. All actors know that it is not the director’s job to manufacture their performance. The director facilitates the *opportunity* for the actors as individuals, and as an ensemble, to find the best within themselves.

English actor, Laurence Olivier, was playing Heathcliff in the Hollywood film version of *Wuthering Heights* in 1939, directed by the highly demanding, Billy Wilder. Wilder was notorious for filming numerous takes. During one scene, Olivier was asked to do the 72<sup>nd</sup> take. In exasperation, he turned to Wilder and exclaimed, “For God's sake, I did it sitting down. I did it with a smile. I did it with a smirk. I did it scratching my ear. I did it with my back to the camera. How do you want me to do it?” to which Billy Wilder replied, simply, “I want it... better.” Wilder didn’t tell Olivier what to do. Wilder just invited him to delve deeper, find something more, allow something more to emerge, to find something wonderful within himself and bring that to life. That is the actor’s way.

### **The Therapist’s Way**

The therapist’s way has a similar intention. The therapist helps the client find what is within themselves, and that may require a number of “takes.” We usually begin with building rapport and creating a safe space, before embarking on a relational journey to find a path to healing and recovery. We may do a “take” with *cognitive behavioural therapy* (CBT), or *rational emotive behavioural therapy* (REBT) or perhaps *narrative therapy*, then shift the style to *acceptance and commitment therapy* (ACT) or a take a *solution focused* approach. We may feel the need to create a breakthrough with *mirroring hands* or with a *metaphor therapy*. We may engage in a totally surprising and unexpected improvisation that emerges from our *client-responsive* interaction. There are many ways that different modalities can be utilized in order to facilitate what the client needs. We will explore this in greater detail as the book unfolds, but, in essence, many of the therapeutic techniques we use in psychotherapy are not dissimilar to what directors and actors utilize in finding the characters of the play.

During my therapeutic studies, I found myself thinking that most therapies were not unique inventions of a modern researcher, but just differentiated aspects of what happens normally in life. Erickson would say that the best therapy is the one that is natural, and possibly even unique, for the client. Carl Rogers also talked about engaging with the natural qualities of the client. Therapies that have been laid claim to by modern theorists and researchers can be seen in plays written long before the formalization of psychotherapy. We can go back to the stoic plays, like Plato’s *Euthydemus*, and philosophers of Ancient Greece to see the early concepts of CBT and REBT:

*Man is disturbed not by things, but by the views he takes of them.* Epictetus,  
1st Century Stoic philosopher

These ideas, these natural truths of life, were refined and reframed into modern times by thought leaders like psychologists, Albert Ellis, (REBT) - *People don't just get upset. They contribute to their upsetness* – and Aaron Beck (CBT) - *Cognitive therapy seeks to alleviate psychological stresses by correcting faulty conceptions and self-signals. By correcting erroneous beliefs we can lower excessive reactions.*

There are countless theatrical and cinema examples of characters grappling with psychological issues. Their journey to resolution and recovery is not always through therapy, but can be facilitated by the natural therapy of their life experiences and the people they encounter. We have seen it time and time again:

- *It's a Wonderful Life (1946)*, directed by Frank Capra, where a suicidal man is shown what his friends and community would have been like if he had never existed. His negative self beliefs are challenged as he witnesses the narrative of a life without him (CBT and narrative therapy).
- *Silver Linings Playbook (2012)* follows two young people with debilitating psychological problems. They have both required institutionalization. Their recovery, however, does not come from a therapist, but the gradual realization and acceptance of who they are. Their relationship is as much about interpersonal therapy as it is about love or lust. They learn how to take their own steps toward management of their lives (interpersonal therapies and ACT).
- *As Good As It Gets (1997)* gives us Jack Nicholson's portrayal of a man with an obsessive compulsive disorder. Although he attends psychiatric treatment, it is the experiences of life that impact him more effectively. Love is a powerful panacea for many mental and social ills, and in this film we find that recovery is achieved more through working with the solution than on the problem itself (solution focused therapy).
- Shakespeare's *Romeo and Juliet (1595)* depicts a theme of strong feelings in conflict with social expectations, although the conclusion is tragic. Rather than therapeutic experiences, the situation is escalated by an absence of therapy. Even though it was written around 1595, we can see, today, the dangers of social regulations and suppression of passion. Audiences of this play often lament, *Why couldn't someone have done something to help?* In 1595, I expect that many audience members felt the same.

Each of these examples is a learning opportunity for any therapist, and can also be helpful for many clients. It is possible to see “modern therapies” played out in theatrical writing and performances that were created years before modern therapies were formulated into modalities and manualized. For my part, I learned about many different types of therapy at acting school, I just didn't realize they were therapies until I began to study psychotherapy. Although, this book will not be directly exploring the content of movies and plays as *therapies*, we will make regular reference to theatre, film and video, as well as anecdotes from the world of acting when it is helpful. Therapies involving drama and film, including psychodrama, drama therapy, cinema therapy, and film/video making therapy are well canvassed by others, including Jacob Moreno, Gary Solomon, Miguel Prados, Joshua Lee Cohen, Ofer Zur and Birgit Wolz. Our principle focus is on the development of the therapist's

capacities to observe and notice what is happening in the client, in the narrative of the therapeutic experience and, most importantly, in themselves.

### **Where the two practices – acting and therapy – diverge.**

Acting is different from “play-acting” or “role playing.” It is more than just pretending. Somehow, from only a collection of words on a page and interaction with others, actors develop a deep sympathy with another human being. They are usually doing this with limited dialogue, that may or may not be true, and in situations that are highly charged, complex and dramatic. That sounds a lot like therapy, where the therapist often deals with a client who is most likely to reveal their story in a limited way, not always tell the truth, or, at least, all the truth, and in the context of great personal difficulty. The client has become stuck in the “performance” of a character that has grown out of their fears, worries, pain and disturbance. It is not who they want to be or who they believe they are able to be. Therapy can be like acting in reverse, where the client transform from the “character” they have become in an unhappy “play”, to a better version of themselves where they rediscover their health and well-being.

It is also important to be clear that acting and psychotherapy are *not* the same, although they share many skills and capacities. I am suggesting that the two professions can inform each other and enhance each other. The two most important things that a psychotherapist can learn from acting is *sensitive observation* and the *experience of walking in another person’s shoes*. At some point, however, the professions take different paths. The actor takes their sensitive observation and begins to create a character within themselves for the purpose of performance. The therapist, however, takes a different path. The therapist utilizes their sensitive observation in a feedback engagement with the client that stimulates an emergence of the appropriate therapeutic conditions and actions into the therapeutic space. This enables the *client* to find and activate their natural capacities for problem-solving and mind-body healing to resolve their disturbance within.

### **The Point of Intersection**

This book is both a class in therapy and a class in acting, but it is really a class in both. It is a class in becoming aware. Achieving that requires a lot of trust. Trust to explore, even though you might not like what you find; trust to share, be it with a therapist or other actors in the play; trust to let go and allow the truth to reveal itself; and, most importantly, to trust that, given these trusting opportunities, there is a natural inclination to seek the best in ourselves, to naturally move towards problem solving and naturally move towards a more integrated and resilient self.

Ernest Rossi has answered his own question many times since he asked in 1980. His books, articles, and his therapeutic practice speak clearly on how to “*open my mind to learning everything I need to know to become a good practitioner.*” The therapist must become deeply sensitive in their observation with both objective engagement, and also subjective connection. What I learned in acting school is that it is about being able to trust from the inside out and that our sensitive observation can become the inspiration for the best therapy to emerge. It is also about being

aware and engaged with what is natural. We should be able to reverse engineer therapeutic modalities back to their natural context. Finally, we need to remind ourselves that therapy is, foremost, an interactive, relational experience with another human being. People have been doing this for a long time. Let us turn on our sense of wonder and our curiosity for knowing, and for playing, and for discovering what being a therapist might mean. In acting-school we were given the opportunity, and the challenge, to take the time to see ourselves and feel ourselves and know ourselves. There were so many questions and challenges we faced as acting students:

- How do breathing patterns match our thoughts?
- What is a facial expression?
- Is it possible to “fake it till you make it?”
- Why do we move the way we do?
- Why do we feel different when we change the way we walk?
- Why do we make sounds and speak language?
- Do we choose our words or do they choose themselves?
- What do we look like when we are healthy and why is it different when we feel ill?
- What does it feel like to be happy? Or sad? Or excited? Or depressed? Or anxious?
- Why do we seek to do the best things, but then sometimes seem to do the worst?

These are some of the questions I explored in acting school. The answers gave me a “felt sense” of what it was to be a person of possibilities, possessed of strengths and fragilities at the same time. This has been vitally relevant to my current practice as a client-responsive psychotherapist. We will explore these fascinating questions and more. We will look at the actor’s way and then how this is applicable and helpful in therapy. Finally, we will revive the practical activities and exercises that I learned in acting school and reframe them for enhancing sensitivity and awareness in therapists and in therapy. These can be utilized directly from the book, but they also become the foundation of a new workshop. Rossi’s final observation in his conversation with Erickson and Moore captures it perfectly.

*ER: That’s a lot of work! (So) you don’t just sit there and talk and empathize.*

We should start with something simple. Something so natural we take it for granted – breathing. But, breathing is so much more than just taking air in and out.