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ABSTRACT

This paper explores the supportive and effective uses of improvisation in counseling. Specifically, the intention in this paper is to accomplish three goals: to explore the history of improvisation in psychotherapy, to examine the aspects of improvisation that pertain to the counseling process, and to identify ways in which the use of improvisation in counseling can be extended and enriched. (Contains 13 references.) (GCP)

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Improvisation in Counseling

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"In so called real life, we rearrange our lives to insure that we always know who we are to be, what the situation is, and how to meet other's expectations so that we will be seen as worthy. When improvising, this comfortable familiarity is stripped away, replaced by a fear of being noticed by others while being unable to control our performance"

(Wiener, 1994, p. x).

With any risk comes a sense of fear and opportunity. It is this exciting potential that is valued in exploring the supportive and effective uses of improvisation in counseling. Specifically, my intention in this paper is to accomplish three goals: (a) to explore the history of improvisation in psychotherapy, (b) to examine the aspects of improvisation that pertain to the counseling process, and (c) to identify ways in which the use of improvisation in counseling can be extended and enriched.

Improvisation offers counselors and clients a method based on spontaneity, creativity, acceptance, intuition, and relational story building. Improvisation invites clients to attend more closely to others, to move their own agenda forward, to accept support, to surmount defensiveness, and to create a non-competitive environment (Johnstone, 1981; Newman, 1996; Violin, 1963; Wiener, 1994). In improvisational contexts, prescriptive therapy models are replaced by creative (and recreative) processes in which new roles can be added to existing roles. In other words, improvisation—as I am describing it—avoids pathological categorizations, as well as explanatory or theoretical formulations. Improvisation eschews referential statements and

objectified language. It offers clients to experience emotional pain in a continually relational, contextual, stimulating, and developmental story-building environment.

Improvisation has been defined in a variety of ways. One online dictionary alludes to "a performance given without planning or preparation" (Worldnet 1.7 Dictionary, 1997). Another dictionary describes it as making, inventing, or arranging "offhand." (New Merriam-Webster Dictionary, 1989, p. 372). According to Wiener (1994), "theatre improvisation is a method of stage-acting in the moment, using minimal prearranged structures (such as scripts, plots, or props)" (p. ix). In general, improvisation provides an opportunity for counselors to conduct counseling relationally without relying on referential discourses (e.g. relating to the client as if she or he was a rat in a Skinner box).

Several counseling pioneers have adapted improvisation to counseling. Notable, in this regard, is the invention of Jacob Moreno's Psychodrama (Moreno, 1947). George Kelly (1955) incorporated improvisational techniques into his Personal Construct Psychology (Kelly, 1955), and somewhat later, Gestalt therapists such as Fritz Perls (1969) made innovative use of improvisational tasks. These techniques and tasks facilitate a client's emotional growth such as the "living newspaper," fixed role therapy, and empty chair exercises. Overall, these early pioneers helped the clients create a new role for themselves using minimal prearrange structures or techniques.

First, Moreno's use of the "living newspaper" helped a client's emotional growth by using a newspaper headline to set up a scene, which would elicit some hidden, unresolved, or undeveloped emotion within the client. The purpose of the headline was to capture, elicit, and give language and expression to hidden, unresolved, or undeveloped emotions to foster a new

role for the client. In fact, Moreno used this technique successfully to stop one of his chief actresses from physically beating her husband.

Second, Kelly's use of fixed role therapy requires the client to act out an unfamiliar role. Both the client and therapist choose the unfamiliar role. Fixed role therapy focuses on the client's old stories/roles of a certain situation to developing new stories/roles of the same situation in therapy and then outside of therapy. Although fixed role therapy is more in depth, the basis of the technique attempts to offer the client an alternative construction of their life by enacting a new role.

Perls often helped his clients to elicit roles that were outside the client's awareness. Often, the client would work on undeveloped/unresolved emotional experiences through the use of the empty chair technique. He believed that these unaware roles were "unfinished business". In turn, the unaware roles usually require that the more familiar/aware roles be temporality suspended. His goal was to integrate the roles that the client was aware and unaware of with this technique. Perls had a minimal structure to complete the empty chair technique and once initiated he had to go without a plan or improvise the empty chair technique in the moment or "here and now".

Similarly, more recent practitioners such as Johnstone (1981), Holzman (2000), Newman (1996), Wiener (1994), and Keeney (1991) have adapted improvisational practices to their own therapeutic styles. All of these clinicians emphasize the ways in which people "collectively live [their] lives through performing (simultaneously being who [they] are and who [they] are becoming)" (Holzman, 2000, p. 89). Improvisation opens up a space where being and becoming exist together, loosening fixed or rigid narratives.

Johnstone, an improvisational theater guru, believes that improvisation involves the stripping away of familiar social roles that dictate how we "should" perform and instead face the

dangers and risks of the unknown to perform “unshouldly” roles. Likewise, Holzman and Newman believe that growth can only occur in social contexts where individuals are supportively challenged to be other than they are while still being who they are. Their Social Therapeutic approach adapts concepts from Vygotsky (zone of proximal development, action oriented theory (tool and result)), Marx (alienation, power, revolution of societies), and Wittgenstein (language games). Using these theorists in practice, Social Therapists are continuously performing without a plan but with a relationship to enhance growth within the client. Wiener has adapted theatrical improvisation from Johnstone and Spolin in his therapeutic work. Consequently, he has adapted many improvisational games to his therapeutic work in an effort for his clients to improvise. In turn, the improvisational experience allows the client to grow by stripping away the clients' initial plans, normal routines, and familiar ways of “living life” replaced by no plans, no routines, and unfamiliar ways but new ways to choose to live and relate to life.

Can improvisation in counseling help clients in emotional distress? For the therapist, improvisational work means giving up our ordinary reliance on common ways of knowing and doing. Wiener, for instance, discusses the role of spontaneity involving a daughter enmeshed with her mother. Wiener asked the daughter to spontaneously improvise a scene that would allow her to feel less attached to her mother. As a result, the daughter was able to create “not-knowingly” a different and less enmeshed relationship with her mother.

Most practitioners exposed to adolescents in counseling sessions know that they need to accept their client’s resistance at times. For example, this one adolescent I was seeing did not want to talk about his relationships at home, school, or anywhere. Instead, the client was pointing to pictures in the therapy room and stated that “he did not like that picture and it should be turned

over". I, being his counselor, turned the picture over and he laughed and asked for the other pictures to be turned over. I complied. After, we were able to talk about his social life at school. Many improvisers believe that acceptance is the key to any improvisational performance, and so, I believe the same belief holds true in therapy. While acceptance was present in this example, other dimensions of improvisation were also present such as spontaneity, intuition, going without a plan in the moment, and relational story building.

Another example comes from O. Spurgeon English (private communication, 2002). He describes a client who behaved as a dog. The client never spoke a word until English "got down on all fours" and began to imitate his client's dog behavior. In this example, English accepted his client, went with his intuition, and became spontaneous and creative without a plan being in the moment. All three of these improvisational examples have helped their clients with their emotional distress.

Despite having the potential to help clients in emotional stress, it is the belief of some psychologists that improvisation occurs naturally, even in therapy and overcoming emotional pain. As social constructionist Sheila McNamee (2000) reports, "improvisation is what all conversation is to me. . . . and thus it cannot be otherwise in therapy". Active improvisation is never pedestrian. It involves utilizing a powerful transformative process. In fact, several practitioners believe that improvisation is the fulcrum to overcoming emotional pain. Strong (1996), for instance, states, "I am particularly interested in exploring the unvoiced possibilities of health conversations, to invite improvisation where conversation and meanings have ossified to the detriment of all affected" (Strong, 2000, p. 4).

The ability for the client and counselor to create a role without bothering about the usual sorts of "knowing" allows the client to be supported in an environment where he or she can

experiment with being someone else. It allows the client to play with a persona that may lead to positive life changes. Essentially, improvisation allows the person to be him/herself while simultaneously becoming someone other than him/herself, thus facilitating a transformative process using its six dimensions: creativity, spontaneity, intuition, acceptance, in the moment, and relational story building.

From my perspective, the full benefits of improvisation have not been explored or researched. Improvisational methods have not been integrated with most of the therapeutic practices. Therefore, a potentially rich resource for promoting client development remains untapped. This paper was aimed at clarifying the value of improvisation for today's practitioners.

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