

# *Experiment*

## *Experimentation: Bringing Therapy to Life*

### **The definition of an experiment:**

- *'doing something new'* ( Encarta Dictionary)
- an attempt to do or try something new, or a trying out of something to see what will happen

\* Fritz Perls introduced active experimentation into Gestalt Therapy to encourage the client to try out new behaviours in the safety of the therapy room (Clarkson & Mackewn). The process of active experimentation allows the client to learn through trial and error, the outcome of different behaviours, and integrate them into real life situations with safety and support. Fritz Perls as well as other contributors to Gestalt Therapy, advocated the principle that human beings learn better through experience rather than by talking about something (Lewin et al cited in Mackewn).

The Gestalt experiment brings therapy to life. It transforms 'talking about' into action and living through *enactment*. It has many benefits in the therapeutic relationship, from heightening awareness, to trying out and integrating new ways of relating and being. It is effective in surfacing polarities, completing unfinished situations ('unfinished business') and in encouraging self-responsibility, self-support and authentic relating.

The Gestalt experiment ranges from short awareness exercises such as attention to breathing and exaggerating movements, to more involved enactments, such as the 'empty chair' process, 'live enactment' and 'dream work'. The Gestalt experiment can involve the therapist and client alone, or the other group participants within a group setting.

Preparation and timing are important elements in developing and initiating more involved experiments in the therapeutic relationship. The level of risk of the experiment must be in alliance with the degree of self-support and safety felt by the client in the here-and-now situation, as well as being of relevance to the immediate process. The level of risk in the experiment is determined by checking and maintaining contact with the client throughout their process. In some cases the experiment may need to start off with small achievable steps and increase in difficulty over a period of sessions. Perls Hefferline & Goodman refer to the excitement of the 'safe emergency' as the balance between mobilising the client's energy within the experiment whilst maintaining a feeling of safety for the client to proceed.

The application of a Gestalt experiment is not always a success, and an element of uncertainty is always present when creating an experiment. Flexibility is required by the therapist in order to let go of, or to down-grade an experiment that is either ineffective in mobilising the client's energy, or, invoking anxiety beyond the client's ability to cope and stay present. Ultimately, the Gestalt experiment is designed by the therapist to be within the reach of the client, but there are no guarantees, the outcome of the experiment can never really be pre-determined or controlled by either the therapist or the client. This is the proverbial 'unknown' in Gestalt Therapy and the discovery of every moment as it arises in the 'here and now' of process work.

\*NOTE: Zinker specifies that sometimes the order may be slightly different depending on the 'natural course of events between people'.

### **Referenced Texts:**

**Clarkson, P & Mackewn, J., *Key Figures in Counselling & Psychotherapy: Fritz Perls***

**Zinker, J., 1991, *Creative Approaches to Gestalt Therapy***

**Polster, E & Polster, M., 1973, *Gestalt Therapy Integrated***

**Mackewn, J., 1997, *Developing Gestalt Counselling***

**Woldt, A & Toman, S., *Gestalt Therapy: History, Theory & Practice***

# *Designing an Experiment*

(A simplified version of Perls, Hefferline & Goodman's Model (1951/1973) by Clarkson & Mackewn (1993).

**Precondition:** A precondition for setting up any experiment is that the client is willing actively to attend to what she is feeling, thinking, doing, saying and to enhance her awareness through imagery, body sensation, non-verbal communication, description, possibly movement or enactment.

**Stage 1:** The theme of an experiment must be something of immediate interest to the client, so that she does not need to deliberately try to attend to it, but is naturally drawn to it. It must be something about which she is vaguely, but not fully aware.

**Stage 2:** The therapist suggests (or designs in cooperation with the client) an experiment through the actual doing of which the client can explore the current field and increase her awareness, irrespective of the outcome.

**Stage 3:** The client is invited to either (a) exaggerate and amplify her present behaviour or attitude, or (b) inhibit her present behaviour or attitude.

**Stage 4:** As contact with the denied behaviour or feelings gets stronger, the client's excitement/anxiety will inevitably be aroused or mobilised. She will experience the experiment as some sort of emergency or existential crisis and may therefore feel stuck between excitement and fear. This stuck point is also called the impasse. (Both client and therapist know that the felt emergency is in fact also safe.)

**Stage 5:** In the safe emergency, the repressed or unaware feeling, attitude, behaviour or memory can come fully into awareness and thus change the client's experience of her self or of her I-boundary.

**Stage 6:** The client accepts the repressed part of herself as her own, now feeling that 'it is I who am feeling, thinking, doing this.'

# *Developing an Experiment*

(Extracted from Zinker, 1978, *Creative Processes in Gestalt Therapy*)

Zinker's outline of a general sequence in the development and conclusion of an experiment is as follows:

- attending to the quality of contact and laying the groundwork of support
- negotiating consensus between therapist and client for the experiment, exploring with the client specific signals for withdrawing from the experiment
- grading the work in terms of experienced difficulty for the client
- identifying and heightening the clients energy
- focusing awareness and energy toward the development of a theme
- generating self-support for both the client and therapist
- choosing a particular experiment
- enacting the experiment
- debriefing the client: reflection, insight and completion