

Improvisational Acting Exercises and their Potential Use in Family Counseling

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Expressive therapy interventions are a useful resource for counselors working with a wide range of presenting issues. This article illustrates a series of improvisational acting exercises that can be used within a family counseling context. Clear directions for specific exercises are provided, along with illustrative case examples.

KEYWORDS improvisational drama, psychodrama, creativity, counseling, drama, acting, role playing, family therapy, couples counseling, communication

Individual and family counselors have long sought creative avenues for facilitating therapeutic improvement in their clients. Expressive therapy interventions including visual art, music, psychodrama, and other experiential techniques have shown various clinical benefits. Acting instruction in improvisational techniques attempts to overcome the temptation to be overly critical of one's initial, honest responses to a particular message from, or encounter with, another (Spolin, 1999). This article will discuss the benefits of improvisational acting exercises within a family counseling context. Specific examples of exercises will be provided.

THEORETICAL UNDERPINNINGS

It is not unusual to see individuals seek justification for their positions, complain about the acts or inaction of others in the family, or blame others for a

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given situation when participating in family counseling. Blatner (1994) suggests that these behaviors lead to a type of unconscious parental transference toward the counselor. In other words, the family desires the counselor to play the role of judge, referee, and authority. Improvisation is inherently a playful process that allows the counselor to take a more curious and positive posture with the family. Counselors emphasize what they have noticed or observed during an exercise or activity versus focusing on which family member's position is most correct or most justified.

Notable figures in the field of family therapy such as Salvador Minuchin (1981) and Virginia Satir (1977) have sometimes operated with psychodramatic interventions for much the same reason. The family is taken out of their traditional methods of interaction and challenged to find new ways to communicate their ideas. The results can be insightful and can facilitate meaningful change.

Spolin (1999) suggests that if the environment encourages it, one can learn whatever she or he chooses to learn, and if the individual allows it, the environment will teach everything it has to teach. This is inherently a systemic concept as well; that is, human behavior (in this case, learning) is fundamentally organized in an interpersonal context. In the same vein, Relational-Cultural Theory describes human development as relationally based (Comstock et al., 2008; Miller, 1976, 1986; Miller & Stiver, 1997). We grow through our relationships with others.

The notable Russian actor and director Konstantin Stanislavski experimented with physical movement and gestures as “conscious means to the unconscious.” He believed that these physical actions would enable actors to reach important and valuable emotional states on stage (Moore, 1984).

J. L. Moreno, often considered the originator of psychodrama, believed that what was learned in action could also be unlearned in action. Thus psychodrama could be used as a tool to reshape oneself (Dayton, 2005).

Nichols and Schwartz (2004) emphasize the notion of cybernetics, namely, that systems like families have a tendency to maintain their stability by using feedback about their general performance. Through the course of an experiential, or improvisational, exercise in family therapy one has the chance to discover or learn something that could alter the feedback loop for the family and create meaningful change.

Farmer and Geller (2005) examine the integration of psychodrama with Bowenian family systems work with couples. They identify the following ways in which psychodrama enhances Bowenian work: replication of the here and now, exploration of emotional processes through action, director detachment from couple triangulation, venue for play and spontaneity, opportunity for “Ah-ha” experiences through role playing and modeling, rehearsal for living, differentiation and actualization. Farmer and Geller believe the aim of counseling is to bring a needed catharsis to the clients and create new understanding and meaning in life.

Some suggest that this honest “in the moment” response means that counselors can be most helpful when they are authentic and when clients recognize the impact they have on their counselors (Jordan, 2001; Piercy, Sprenkle, & Wetchler, 1996). If counselors expect the family to have the courage to be real, they must also demonstrate that courage. Any techniques that counselors might utilize are meant to foster a relational and creative experience. The improvisational acting activities are applied to help free the family members to experience each other and life more creatively, personally, and authentically.

Johnson (1988) developed a clinical assessment tool, called the *Diagnostic Role-Playing Test*, which served as a projective test offering insight into an individual's inner world, including symbolic modes of expression. In Johnson's test, the individual is asked to role play five social roles, one at a time. The roles identified in the test include “Grandpa,” “bum,” “politician,” “teacher,” and “lover.” The roles are intended to signify particular dimensions of social interaction such as nurturance, control, sexuality, and personal competence. The counseling client is asked to begin portraying the role of “Grandpa.” The “scenes” are stopped after roughly one minute, and the next role is presented to the client. The session is videotaped and later evaluated by the counselor for spontaneity, ability to transcend reality, repertoire of role, organization of scenes, patterns in thematic content, and attitude toward enactment (Johnson, 1988). Johnson, then, essentially integrated a spontaneous, improvisational acting exercise into the process of clinical assessment.

It should be noted that while improvisational acting exercises at their root appear to be “playful” processes, they require a significant commitment to spontaneity. This is not easily achieved by many individuals or families. Some authors have noted that spontaneity may only increase as anxiety decreases (Blatner, 1994). In counseling, the anxiety relates in large part to the question of how one's actions and reactions will be interpreted by others.

Counselors must use their training and skills to foster an atmosphere that is conducive to such creative personal exploration. Note that as one presents an idea or concept, the others do not necessarily need to agree, understand, or condone it. Their primary responsibility is to simply react. Illustrations are provided in the following examples.

SPECIFIC TECHNIQUES

“Yes, and . . .”

One common improvisational exercise is called “Yes, and . . .” (Dixon, 2001). This activity is built on the premise that when one partner in the exercise offers an idea, action, or concept, the other must receive it as such and respond without rebutting or negating anything. For example, a partner might act as if he is offering his spouse an object and he might say,

“This is a ball.” The partner must respond by first using the words, “Yes, and . . .”. Thus, her reply might be, “Yes, and this ball is red.” She would then place the imagined object back in the hand of her partner, and he would reply beginning with “Yes, and . . .”. A typical encounter might go as follows:

Husband: “This is a ball.”
Wife: “Yes, and this ball is red.”
Husband: “Yes, and I know red is your favorite color.”
Wife: “Yes, and red is also the color of roses.”
Husband: “Yes, and roses often have thorns.”
Wife: “Yes, and thorns can hurt if you’re not careful.”
Husband: “Yes, and being careful is important to you.” (Ruby & Ruby, 2008)

In this activity, the couple begins with an idea and stays with it until the counselor calls time or the couple seems too stuck to go on any further. While nothing groundbreaking is necessarily mentioned in the dialogue of the encounter, the couple does experience an atmosphere in which each knows that no matter what they say, their partner is going to stay with them and say, “Yes, and . . .” in response. Troubled family relationships are less often characterized by “Yes, and . . .”, than they are by “Yes, but . . .”, or “No.” In practice, many individuals find the exercise difficult even though there is a clear understanding that no matter what is said, their partners will respond with the affirmation, “Yes, and . . .”.

Point and Un-tell

Another exercise that is utilized is called, “Point and un-tell,” sometimes called “point and un-name” (Matuszak, personal communication, January 14, 2004). This partner activity requires automatic responses that have not been prepared in advance. Thus, partners are asked to respond in the moment with the first thing that comes to their minds.

In “Point and un-tell,” one partner points to an object. It is important to point clearly to one thing that can be easily recognized and identified. The second partner then has the task of immediately naming the object something other than what it is actually named. For example, if the first partner were to point to a desk, the only “wrong” answer would be “desk.” The naming partner’s response must be given immediately in response to the pointing by the first partner. It is, thus, an unprepared response. A sequence might go something like this:

Partner A: (points to a shoe)
Partner B: “duck”

Partner A: (points to a window)

Partner B: "swimming"

Notice that Partner A does not question or evaluate the response of Partner B, but instead moves on quickly to point to another object. Typically, second partners (B) will have moments where they will feel "stuck" and do not know what to say. The irony is that any word is acceptable with the exception of the one word that best describes the object itself. Thus, the options for "success" are innumerable.

"Point and un-tell" serves as a powerful illustration of one's ability to self-edit. That is, instead of an honest response to another in a given moment, family members will often screen or alter their responses in an effort to avoid conflict or self-disclosure. The exercise points out that one cannot effectively create and edit at the same time. Implications for communication abound, particularly as it relates to potentially conflictual communication.

The family counselor should take notice of any critical responses, verbal and nonverbal, that come from the pointer, Partner A. Such a response might indicate a wider pattern of criticism or contempt that is consistently present within the relationship. Also, the presence of significant hesitation to name something by Partner B might indicate a hesitancy to speak up in the relationship in general. These emerging themes that present themselves in the exercise become fodder for therapeutic conversations and strategic intervention.

Blatner (1994) suggests that such artistic exercises use other less familiar dimensions of experience, circumventing some of a client's defenses by making a symbolic compromise: The unconscious will express itself and allow itself to be perceived by the conscious and express important themes in metaphoric form.

Dr. Know-It-All

A third exercise that proves useful is called "Dr. Know-It-All" (McInerney, 2008). This is a valuable tool for assessment of levels of cooperation between family members, as well as a method by which families can practice cooperative problem solving. In this exercise, members of the family sit or stand near one another and act as if they are a multiheaded creature named "Dr. Know-It-All." Often, family members are asked to put their arms around one another as they portray the expert, "Dr. Know-It-All." The family (as "Dr. Know-it-All") responds to questions from either the counselor or the family members themselves, but they do so one word at a time from each family member. For example, "Dr. Know-It-All" might be asked by the counselor, "What time is it?" The answer might look something like the following in a family of three:

Mother: "It"
Sister: "is"
Father: "seven"
Mother: "o'clock."

Each family member responds to the question as one part of a larger unit. Typically, the first questions asked are light-hearted and fun in order to allow the family to work together in a nonthreatening manner. As the exercise progresses, however, the questions become more closely related to the presenting problems in the family's life.

CASE EXAMPLES

A Family With "Dr. Know-It-All"

A family comprised of a mother, father, 14-year-old daughter, and 8-year-old son came to counseling seeking help for what they called a "conflict-ridden relationship" between the father and the adolescent daughter. The father was quite verbal, and it became apparent to the counselor that the father played the role of spokesperson for the family. The mother was soft-spoken, but appeared to listen intently, and spent much of her time in session attending to her son and watching her teenage daughter. Neither of the children spoke out much in session, though the daughter argued some of her father's positions to no avail. After several unsuccessful attempts by the counselor to verbally engage all of the family members, she decided to utilize the improvisational technique known as "Dr. Know-It-All." The counselor was hoping to instill a structural communication device that would elicit participation from the less verbal members of the family while simultaneously managing the father's attempts to control the session.

The counselor began by explaining the technique. She then arranged the family members in the way she believed would be most useful for observing communication patterns. In this case, she placed the family in this order: mother, son, daughter, and father. The counselor then had the family members stand, place their arms around one another, and then respond to a basic question. She started with, "What's the weather like outside?" The family responded one word at a time successfully. The counselor offered praise for their ability to work together and share the responsibility for describing something they might have all seen differently.

The counselor then asked, "What is something you all enjoy doing together as a family?" This question served two purposes. First, the counselor was able to continue to assess their ability to work together. Second, she was also able to see how they might handle possible differing positions. Gratefully, there was a disagreement, and the counselor was able to note how it was handled. The conflictual response went as follows:

Mother: "We"
 Son: "like"
 Father: "to"
 Daughter: "watch"
 Mother: (after a pause to think) "sports"
 Son: "on"
 Father: "TV."
 Daughter: "I don't like watching sports on TV and neither does Mom!"
 Mother: "I don't mind it."
 Daughter: (Rolls eyes and lets out a frustrated sigh.)
 Father: "Stop trying to control everything, [daughter's name]!"

Before the family could escalate their negative responses, the counselor interrupted and said, "Ah, well that was interesting. I wonder how often people feel like others are speaking for them or trying to control them in your family. Let's try that again and remember that you are all in this together and that your answer should be something that *all* of you enjoy."

This encounter was diagnostic on two levels. The counselor was able to see the family carrying out a typical way of communicating. In this case, the mother deferred to the father, the son was quiet, and the daughter was accused of being controlling because she disagreed with the father. Secondly, the family was able to see how a simple exercise that focused on something relatively nonthreatening highlighted a pattern that was likely taken for granted.

A Couple with "Yes, and . . ."

A couple came to counseling and presented conflicts about money management. The counselor quickly noticed that neither partner was particularly interested in listening to the other's position. The couple had established a routine argument that essentially fed on itself and resulted in a cycle that allowed for no meaningful resolution.

The counselor decided to introduce "Yes, and . . ." as an exercise to promote listening and encouraging the possibility of taking another's position. After explaining the technique, the counselor asked the female partner to begin with, "This is a ball." The male partner responded with, "Yes, and it is really big." After a few interchanges, the couple's demeanor had changed from one of anger and frustration to one of play. This was indicated by their laughter and sense of surprise as to where the story of the ball took them.

The counselor commended them for their participation and asked, "Wouldn't it be great if the same possibility for something new and different that happened in this exercise would be present in your conversations about money?" Noting the couple was pondering this question, he went on to ask, "What might that do for your relationship?" After engaging the couple in a discussion of the power of doing something different in response to "Yes,

and. . .” energy, the counselor asked them to repeat the exercise, but this time the male partner would go first, and his first statement had to be, “This is our financial situation.” An abbreviated recounting of the interchange follows:

Man: “This is our financial situation.”

Woman: “Yes, and it’s a mess!”

Man: “Yes, and it’s not my fault.”

Woman: “I never said it was!”

The counselor stepped in at this point and reminded them that each statement *had* to begin with “Yes, and” in order for the process to be able to work. He asked the woman to repeat her statement, but begin with “Yes, and . . .”.

The couple continued to need coaching along the way, but the counselor encouraged them to try it at home as they made financial decisions—not so much to force agreement, but as a tool to encourage listening and trying on the partner’s position for a change. The couple agreed to do so and found that their conversations about money were far less explosive and more conducive to cooperative problem solving.

CONCLUSION

Increased research needs to be conducted in regard to the possible effectiveness of using creative interventions such as improvisational acting exercises in family counseling. This article was not intended to promote clinical evaluative data, as much as it was designed to introduce the possibilities of the integration of these types of exercises into family counseling for both assessment and in-session counseling techniques. It is the hope of the authors that the counseling community will continue to be open to creative interventions and will also continue to seriously pursue critical evaluation of them.

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