# **Shifting** perspectives

In the human givens approach, the client's imagination is used as a mental resource, says **Denise Winn** 

he heaviness around Amira\*
seemed to suck the energy out
of the room. She was an attractive
young woman although she had
told me, in an expressionless
voice, that she had ceased caring about
how she looked, no longer bothering to put
on make-up when she went to work and
alternating one of two outfits, because she
had no interest in her clothes anymore.

In her early 30s, she had a high-powered job in marketing but she had stopped finding it challenging and was listlessly looking around for something else. Yesterday, I sent a really rude email to a colleague. And I don't give a damn,' she intoned dully.

Gradually her story came out. She was born in the Middle East and moved with her family to Scotland when she was 18, where she attended university. When her parents moved back she stayed, as she had started a master's in business administration. She knew it was expected that, at some point, she would accept an arranged marriage. However, she fell in love with a Scot and, after a period during which she wrestled with disappointing her family, she decided she must follow her heart and admitted that she wanted to marry him. Initially her parents were shocked, angry and upset, but eventually they welcomed the marriage. 'And then I felt truly free for the first time,' she told me.

She continued: 'I should be so happy because we are very much in love and I am three months pregnant and I so wanted a baby. But now I care about nothing, and I dread the baby being a girl because she will have a terrible mother as a role model.'

It was chilling to hear that. After asking Amira more about herself and still finding nothing that lit up her eyes, I resorted to the miracle question, that staple of the solution-focused approach, which can open things out into a new direction: 'If you woke up tomorrow, Amira, and all these problems were gone, what would you be doing differently?'

She shrugged. 'Putting on make-up, I suppose. Caring again about how I dressed.'

I had a very strong feeling that this was not it. 'No, what would you *really* be doing?'

She stared at me for a moment and then her eyes did light up. She told me that she missed her culture and had come up with an imaginative idea for a small business based around crafts traditional in her homeland. I expressed genuine interest and enquired how practical an idea this was, financially and otherwise. She envisaged dropping down to part-time work and making use of different talents she had, as well as drawing in those of others, while her own marketing expertise made her confident about the promotion side. Her husband would be supportive. They could manage.

By the time we had talked it through, I felt reassured that she was not being unrealistic in her expectations. And so I ended the session with a deep relaxation and guided visualisation designed to help focus her attention on what she wanted to make happen and how.

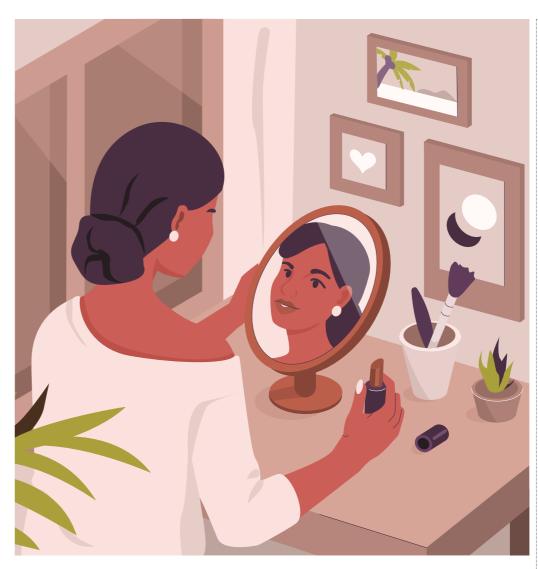
## Mental resource

It is very common for human givens practitioners to finish a session with guided visualisation. Learning and practising the skills required for carrying it out in a way suitable for different clients are crucial parts of our training. The potential benefits are multiple. Most basically, when clients are extremely anxious, the power of deep relaxation and guided imagery can lie simply in enabling them to experience a brief period of calm, which can be a new and quite profound experience for many. For someone whose head has been throbbing with relentless unpleasant and racing thoughts, being guided to lose themselves momentarily in some imagined or remembered beautiful place in nature and experience mental peace can be the trigger for a realisation that things can be different. It enables the person to leave the session feeling hopeful and highly motivated to return.

In the human givens approach we consider imagination a major mental resource, and it is the unintended misuse of imagination through catastrophising that fuels anxiety and depression. Conversely, when imagination is used correctly it is a powerful means of drawing on positives from the past to enable a different future. During the session we carefully note, observe or ask about successes, large and small, within clients' life experiences - anything from career, parenthood, particular skills, talents and passions right through to having managed to maintain just one romantic relationship for at least six months or being loving towards a pet. Later, having guided clients into a deep state of relaxation, we will gently remind people of those qualities and strengths and suggest how to draw further upon them.

If we did this in the ordinary course of a session, the client's habitual negative mindset might lead them instantly to reject our suggestions - 'Oh that was years ago! I'm less adaptable/confident/good-looking now. Look where it got me, anyway! Anyone would have done the same thing in the circumstances' - and so on. In a trance-like state, however, the

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critical faculty can be bypassed. We can actively facilitate our clients in re-experiencing those feelings and relating them to whatever they want to achieve right now. For instance, if someone is nervous about giving a forthcoming presentation, that might mean guiding them to draw on the felt memory of a time when they gave some kind of performance that they were proud of, then to imagine themselves giving the upcoming presentation, applying the same methods or mental attitude that worked so well the first time, or tweaking them as required.

As we learn in human givens training, trance states are natural, powerful programming states that occur when our attention is fully focused and which must be worked with respectfully, as they can be used, intentionally

or unintentionally, for harm as well as good. Cult leaders and orators, for instance, can easily induce trance states in their followers or listeners, which make them vulnerable and susceptible to often very unhealthy teachings and belief systems. Even in therapy that is well meaning it is possible unintentionally to embed unhelpful suggestions, which is why our training emphasises correct and sensitive language skills, and everything else related to safe usage.

## **Trance states**

In expert hands, trance states can be induced to aid in shifting fixed, unhelpful perspectives - 'I'm no good'; 'I can't cope' - and enable, particularly through judicious use of story

and/or metaphor, the seeing of a bigger, more empowering picture. We don't use scripts, instead relying on our own spontaneous creativity, as our aim is to tailor both the induction and the visualisation experience to each client's own specific needs. I have used the words 'seeing' and 'imagination' merely because these are words in common parlance; however, we fully recognise that a significant proportion of people are aphantasic - they do not have a 'mind's eye' and imagine in a different way. Guided visualisation works just as powerfully with them - indeed, a number of our practitioners have recognised that they are themselves aphantasic.

Amira, I discovered, was able to sink quickly into a deep trance state. Even as I was still just starting to relax her, suggesting that she imagine her anxiety and tension flowing out of the tips of her fingers and toes, I saw her making gentle flipping movements with her hands as she followed my words.

Once she was fully relaxed, I reminded her of her very considerable resources - her care and respect for her family; the passion that enabled her to be true to herself and follow her heart; her academic prowess, her work skills and so on, as well as her love for her country. I asked her to imagine pursuing the path she had described to me, envisaging the steps she needed to put in place, the setbacks she might face and how she might counter them, using her considerable skills.

I also used the 'my friend Jenny' technique, where I referred to another client who had felt equally stuck and lost and who, during guided visualisation, had a strong sense of a completely different future, which she went on to make happen. Henceforward, I suggested, Amira also could be open and alert to anything that might help her further in her endeavour. Towards the end of the visualisation I suggested that she could look forward again to having her baby and, should it be a baby daughter, how wonderful that she would be role modelling for her, as a woman, the power of passion and commitment and following her dreams to make them real.

When I counted her back out of trance she opened her eyes very slowly and gave the deepest of sighs. She looked like a different person, her expression soft, her eyes glittering. She glanced with surprise at the window, as rain was hammering down, and yet she had been certain, she said, that the sun had been

THERAPY TODAY 26 FEBRUARY 2024

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beating through and warming her face. It was another sign of the depth of her trance that she had felt sun on her skin when she was imagining walking on a beautiful beach.

As she left shortly afterwards, she gripped my hand and said, 'I am so looking forward to tomorrow.'

# **Overcoming obstacles**

I remember Amira because the experience of working with her and the outcome were so powerful, and because I did not even need to see her again, although I checked in on her to ensure that she was still moving in the right direction. It was one of those unusual cases where someone who was clearly in deep depression came out of it in just one session. I don't think this could have happened without the guided visualisation, which allowed her, in a safe place, to test out and rehearse, realistically, a completely different life course for herself

The same thing had, indeed, happened a long time ago with the client 'Jenny' that I had referred to. Also in her early 30s, she had come to see me about bulimia. It emerged that she was bingeing and then purging out of frustration - she felt trapped because she could get no further in her career without a higher degree and that would not be possible. She was particularly disgusted with herself because she cared a lot about health and wellbeing.

As I took her on a guided visualisation, I told a story of a quest to overcome obstacles, find keys to doors, unlock boxes and choose paths. After she came out of trance she was in a state of disbelief, saying all the fog in her head - which I hadn't even known was there - had disappeared. She, like Amira, started talking about a dream she had been nursing, which was to become a fitness coach. She went away and made this happen. Indeed, it was this client and this fulfilling therapeutic experience that encouraged me to commit to being a human givens practitioner, as I had only just qualified and was still also earning a living mainly as a freelance journalist.

In these two cases, I feel the presenting issue lifted so quickly because the symptom itself was so clearly signalling that something fundamental was not working well in the client's life. More usually, however, guided visualisation is an adjunct, rather than an epiphany, a valuable means of consolidating the progress that has been made in a session maybe in rehearsing the skills the client has just been taught for managing anxiety better, or being more assertive, or taking one small step that we have agreed on as a goal, to help them start mastering long-standing depression. Maybe they are struggling with self-belief or lack of confidence or defeatism, and their negative mindset, however uncomfortable, somehow feels familiar and safe. Through guided visualisation, we can often smuggle in, again through metaphor and story, another more empowering perspective, which the client can, at both a conscious and unconscious level, accept or reject. We use permissive language - 'you can find that'; 'maybe you can feel' - so that the individual will own whatever experience they have. It is all about creating a setting in which people can feel free to open their minds and make more informed choices that will work best for them.

Guided visualisation doesn't work for everyone. Some neurodivergent people may not respond well to it. Nor would we use it with someone who is in a highly stressed state that might tip them into psychosis. Occasionally people don't like the idea. I also would not use it with someone who has not slept well! I once had a client travel five hours to attend a 9am appointment with me - he had been away for the weekend. He had not gone to bed before leaving and arrived exhausted. I knew that he would not be able to stop himself from falling asleep, which would render the work useless.

Over the 20-plus years that I have been a human givens practitioner I have had countless rewarding experiences of helping instigate and witness profound change, given substance through guided visualisation. Often I will suggest something - maybe a wave of

relaxation flowing down through the body or looking out at the magnificent vista, if they have told me they want to relax on top of a mountain - and afterwards they will tell me that, instead of a wave, they imagined a shower of gold sparkles; or that they had changed their mind about the mountain and were snorkelling instead. The mismatch does not seem to matter at all. It is wonderful confirmation that, ultimately, the client stays in charge of the process, interpreting the therapist's words in whatever way they need.

Guided visualisation is an effective means of instilling not only confidence and self-belief but much more besides, such as aiding in coping with chronic pain, dealing with grief and facilitating the specific techniques we use in human givens for working with phobias and trauma. Its use requires deep respect for the individual in front of us along with readiness for our imaginations to work in tandem with theirs. It is such a satisfying tool to use and I would recommend it to any therapist as a valuable adjunct to their own practice.

- \* This case study is a fictionalised composite example that reflects typical client presentations and work.
- The accredited CPD workshop 'Guided imagery and visualisation for therapeutic change' by the Human Givens College runs in London, Bristol and Leeds. www.humangivens.com/college



## About the author

# **Denise Winn** is a

psychotherapist qualified in the human givens approach and has been practising since 2000. She was editor of the Human Givens journal for 26 years, having stepped down in December 2023, and is a Fellow of the Human Givens Institute. She is the author of 11 books on psychological topics and co-author of the five books in the human givens self-help series, 'Essential help in troubled times', which covers effective ways to manage depression, anxiety, anger, addiction and chronic pain.