

Serhii Krasin

**INTRODUCTION TO DIRECTED
FILM THERAPY**

Healing through films



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TO DIRECTED FILM THERAPY
Healing through films

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The book covers the practical basics of film therapy in an accessible form. The main approaches and methods of work are highlighted. A new, effective approach to working with clients is described, based on watching any audio-visual series - movies, cartoons, clips, shows.

The book will be useful for psychologists, psychotherapists, consultants, coaches and anyone interested in therapy with the help of cinema.

У книзі в доступній формі висвітлено практичні основи фільмотерапії. Виділені основні підходи та методи роботи. Описано новий, ефективний підхід до роботи з клієнтами, який базується на перегляді будь-якого візуального ряду – кіно, мультфільмів, кліпів, шоу.

Книга буде корисна психологам, психотерапевтам, консультантам, тренерам, коучам та усім, хто цікавиться питанням терапії з допомогою кіно.

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DEAR READER!

This book describes a new effective approach to work with clients which is based on watching any audiovisual series, e.g. films, cartoons, clips, shows. This is a completely new method that I developed for nine years.

As an ardent fan of film therapy, I have always strived to make the best use of films in my work. To do this, I studied all the available literature, different approaches and methods. I also tried various approaches in the use of films in counselling, training and therapeutic work. Gradually, the true essence of film therapy, its strengths and weaknesses, opportunities and limitations were revealed to me more and more.

Having accumulated enough experience, I developed a new approach that significantly increases the effectiveness and expands the possibility of using films in a psychologist's work. This approach is described in this book. Directed film therapy is useful in therapeutic, training, counselling and coaching work with clients.

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INTRODUCTION

Film therapy (cinema therapy) is of increasing interest in modern psychology. A lot of psychologists, trainers, coaches and consultants use films or would like to apply them in their work with clients. At the same time, most of them have not received appropriate professional training. In order to get all the necessary knowledge and skills of high-quality film therapy it is insufficient to use the materials that are available on the Internet and in other open sources. The information presented in them is often fragmentary and sometimes even contradictory. **The purpose of this book** is to reveal the essence of film therapy, eliminate the contradictions and introduce a new method of work based on watching any audiovisual series such as feature and documentary films, cartoons, shows and clips.

The book consists of two sections.

The first section is devoted to general issues of film therapy and consists of three chapters.

In the first chapter the existing myths about the creation of film therapy are described and dispelled. The reader also gets to know about the authors and their works on this topic.

In the second chapter a general overview of the history of film therapy creation and its brief description are given, and the key differences between its main types are outlined.

The third chapter focuses on three groups of definitions that significantly limit the possibilities of film therapy, and the ways to overcome those limits are suggested. At the end of the chapter the conclusions are made and the therapeutic essence of film therapy is described.

The second section is devoted to the description of the Directed Film Therapy method.

The fourth chapter outlines the features and key differences of film therapy, gives the definition of the method, explains the meaning of the name and describes basic requirements for the preparation of a film therapist.

The fifth chapter focuses on the features, mechanisms, key differences and scope of application of the four directions of the method – therapy and counselling by methods of directed film therapy, directed film training and directed film coaching.

The sixth chapter is devoted to strategies, techniques and other methods of directed film therapy. It describes the peculiarities of work with short videos, feature films and selections of films.

The seventh chapter describes specific strategies and techniques of work with short videos. The reader will be introduced to three strategies and six techniques based on those strategies. The description of each strategy is followed by the techniques created on its basis.

In order to facilitate the application of the received knowledge in practice, only techniques created on the basis of short cartoons that are available on the Internet were selected for the book. In the description of each technique there is the name of the cartoon and a link where you can watch and download it.

Section 1

**TRUTH AND MYTHS
ABOUT FILM THERAPY**

Section 1:

TRUTH AND MYTHS ABOUT FILM THERAPY

Chapter 1 MYTHS ABOUT THE CREATION OF FILM THERAPY

«It ain't what you don't know that gets you into trouble.
It's what you know for sure that just ain't so».

Mark Twain

(the quotation from Adam McKay's film «The Big Short»)

Film therapy, or cinema therapy, is a direction of psychotherapy. Its main distinguishing feature is that a psychologist works with a client on the basis of the reactions received after watching the film. Although film therapy has appeared quite recently, there are different versions about the time of its origin and the creators. In some sources the name of Bernie Wooder is mentioned, others suggest that it was created by Gary Solomon, while the third say that Antonio Meneghetti was the creator. The period when one of them began to use films in his therapeutic practice is considered to be the time when film therapy was created. We decided to look into this difficult issue and conducted our own research. The study of primary sources led to unexpected findings. As it turned out, the same inaccurate and unverified information is often found in most news items, websites, books and publications on the history of film therapy. This information is so common that some ubiquitous myths have appeared. Most readers may have heard one or more of them. In order to break this vicious circle and exclude the possibility of the influence of these myths on the reader in the future, the book begins with a chapter in which both the myths themselves and the truth that is hidden behind them are described.

So, there are four common myths.

Myth 1

**FILM THERAPY WAS CREATED
BY BERNIE WOODER**

According to a lot of websites and other sources film therapy was created in the 1990s by Bernie Wooder, a psychotherapist from London. This is a myth.

Truth: Bernie Wooder began to use films in his work in the late 20th century. He made a huge contribution to the development of film therapy and wrote two books that were published in 2008 and 2014. He conducted classes for students, advised the film companies Metro-Goldwyn-Mayer and Warner Brothers, used films effectively in individual work with clients, but he was far from being the first person to use films in therapy.

Myth 2

**CINEMA THERAPY WAS CREATED
BY GARY SOLOMON**

No less often, especially in English-language sources, you can find information that cinema therapy was created by an American psychologist, Dr. Gary Solomon in the late 1980s or early 1990s. This is also a myth.

Truth: Gary Solomon made a great contribution to the development of film therapy, developed his own approach, lectured to students, spoke on radio a lot and wrote three books. His first book *The Motion Picture Prescription: Watch This Movie and Call Me in the Morning*, was published in 1995. He even owns the copyright on the name Cinema Therapy ©. However, Gary Solomon himself does not claim that he was the first person to use cinema for therapeutic purposes. Here are his own words in an interview on KLAC Radio: "Therapists and doctors have been using this method in their practice for a long time. I'm just the first person to write a book about it."

However, in order not to become the authors of another myth, it is worth making an important clarification at this point. In fact, the first book on film therapy was written by Antonio Meneghetti, not by Gary Solomon.

Myth 3
**CINEMA THERAPY WAS CREATED
BY ANTONIO MENEGHETTI**

Antonio Meneghetti is the third person who is considered to be the creator of film therapy. Similar information can be found on websites on ontopsychology and cinemalogy. According to this version, cinema therapy was created in the early 1970s. You might be surprised but this is also a myth.

Truth: Antonio Meneghetti wrote the first book on cinema therapy in history of psychology, which was published under the title *La Cineterapia (Cinema Therapy)* in 1972. He made a huge contribution to the development of cinema therapy. However, the first publications on work with films appeared much earlier and they were written by other authors.

Myth 4
THE STORY OF BERNIE WOODER'S CLIENT

The following information can be found on many websites.

When one of Bernie Wooder's clients was telling the story of her life, he noticed that she seemed to be retelling the plot of the film he knew. He suggested watching that movie. After watching the client understood the essence of her problem and was healed. This is another myth.

Truth: The story with the client is real but it has nothing to do with Bernie Wooder. This case is described in the book *Reel Therapy* by Gary Solomon as the beginning of his practice in film therapy.

WHO WAS THE FIRST?

Bernie Wooder, Gary Solomon and Antonio Meneghetti played an enormous role in the development of film therapy. Each of them created their own approach, wrote several books and drew the attention of psychologists and society to the method. In this way they made an invaluable contribution to the development of film therapy. However, the truth is that the possibilities of therapy with the help of cinema were actively studied in the middle of the 20th century. Many psychiatrists and psychologists worked on this issue. In order to completely spare the reader the influence of myths and speculations on this topic, the following chapter is devoted to a brief historical overview of the film therapy creation, which will finally put everything in its place.

Chapter 2

HOW IT ALL BEGAN

«The history of the world is but a biography of great men».

Thomas Carlyle

The interest of scientists and practicing psychologists in the influence of cinema on a viewer arose from the very moment when the Lumière brothers made their first film. The representatives of cinema industry were deeply interested in managing the attention and consciousness of the audience in order to maintain their interest in films. They studied the audience's reactions to movement, colour, sound and the content of the film. The techniques and methods of film editing were developed in order to achieve specific goals. The information on this topic can be found in the books on film directing and editing. The educational role of cinema was of particular interest. In the 1930s Soviet psychologists B.M. Teplov, N.I. Zhinkin, O.I. Nikiforova conducted the research on cinema and children.

Psychiatrists were the first to show interest in the use of films for therapeutic purposes. In 1949, an article about a new method of treatment in the clinic was published in the Great Medical Encyclopedia. "Theoretically speaking, it is possible to create specially selected film programs by studying perception of different viewers, including the patient, which will have a certain positive psychotherapeutic effect." In the early 1950s, the representatives of psychiatry actively studied the patients' reactions to the films. They looked into the connection of films with excitation and inhibition processes and defense mechanisms. In particular, transference and resistance mechanisms were considered. Special attention was paid to safety issues and a therapeutic effect in group therapy. The ability of films to influence on individual and group dynamics was studied. The impact of cinema on the level of the patients' anxiety was of great interest. All work was done mainly within the framework of the psychoanalytic approach.

In the early 1950s the first publications on cinema therapy appeared. In 1951 M. Prados wrote his article *The Use of Films in Psychotherapy*. Between 1950 and 1970 experiments and clinical trials were conducted. Dozens of scientists published the results of their studies, observations and conclusions. However, all the publications were exclusively scientific and were not widely published. The first book designed for a wide range of readers came out in 1972.

ANTONIO MENEGHETTI'S CINEMALOGY

The first book on film therapy was written by an Italian psychologist, philosopher, artist and founder of the ontological school Antonio Meneghetti. In 1972 his book *La Cineterapia* (Cinema Therapy) was published. Later, he called his approach Cinemalogy which he characterized as one of the directions of the ontopsychological method.

In Meneghetti's own words, cinemalogy appeared by accident. One day, after the film was watched by the group, a heated debate started. Meneghetti witnessed the discussion and noticed that each participant insisted on their point of view, despite the fact that the film should have had a common interpretation. The points of view were absolutely different. Meneghetti had previously conducted consultations with the participants of the discussion so he knew them quite well. He noticed that each person interpreted the film through the projection of their own complex. Meneghetti was interested in this issue. Later, he continued his observations which confirmed his assumption. This is how cinemalogy was born.

"The purpose of cinemalogy is not to teach or criticize the director's work, but to use the film to analyze the people who watch these images. The viewer is emotionally involved in the things which are identified with him," writes Meneghetti in his book *Cinema. Theatre. The Unconscious*.

In cinemalogy a film is viewed as an integrate force which penetrates into the person's inner world. There is a viewer and external reality. Cinemalogy

voices the viewer's emotions, feelings, thoughts, behavior and external reality of the film.

Meneghetti distinguishes between two types of cinemalogy – therapeutic and didactic. Cinemalogy has its own methodology, stages and approaches to work with defense mechanisms.

GARY SOLOMON'S CINEMA THERAPY

An American psychologist, Dr. Gary Solomon was the second author who wrote the book on cinema therapy. A big fan of films since childhood, Solomon has gone through a rough patch. Once, as an adult, he lost all his savings. As Solomon himself writes, he “went off the rails.” Alcohol and drugs could have killed him. It was the films that helped him stop in time.

Gary Solomon returned to work with films when he was conducting psychotherapeutic practice. Once, when one of his clients was telling the story of her life, the doctor noticed that she seemed to be retelling the plot of the film he knew (this story is often mistakenly attributed to Bernie Wooder). Gary suggested watching this movie and gave the woman the task to describe her thoughts on what she had seen. He also asked her whether she recognized herself in one of the characters. At the next meeting, the client asked, “How did you find out?” She explained that it was as if she had seen her own life in the film.

This case showed Dr. Solomon the benefit of such viewings. He noticed that films contributed to establishing contact and helped clients become more aware of the situations and difficulties which they were facing. Gary Solomon suggested watching films in which the characters experienced the same problems. Indeed, after watching, clients opened up faster and spoke about those problems in their lives that they had not noticed before. Films helped them recognize their own psychological reality. Solomon began to use films in his work with codependency, addiction, escapism, alcoholism etc.

Emphasizing the healing properties of films, he called them "healing tools", and film therapy was referred to as "a healing journey". He recommends using films in individual, pair, family and group work.

Another important Solomon's discovery was the fact that it wasn't obligatory to use only movies with a happy ending. The therapeutic effect was often achieved after watching the film which ended tragically. For example, a story about a dying alcoholic helped the client cope with alcoholism. The client learned not to repeat the character's mistakes. Solomon called this effect "paradoxical healing." Gradually, he created special selections of films on different topics and began to use them in his work.

Gary Solomon is the author of three books on cinema therapy. Thanks to his ideas and productive work, Solomon received the nickname *The Movie Doctor*.

BERNIE WOODER'S MOVIE THERAPY

Bernie Wooder was trained as a psychotherapist in his mature years. He first began to use films in his therapeutic practice in the early 1990s. Here is how he describes this moment: "As I was listening to the client's words, a scene from the film suddenly flashed through my mind. At first I didn't have enough confidence, so I didn't use movies in my work. But I started thinking about it more and more." Later, he offered his clients to watch films and noticed that the viewings contributed to the release of unconscious repressed emotions and memories. By choosing the right moment in the film, he worked with relationships, trauma, anxiety, and so on. Thus, Bernie Wooder's Movie Therapy appeared.

As an accredited specialist in Core Process Psychotherapy (a combination of Western and Buddhist psychology), Bernie pays a lot of attention to the balance between the clients' spiritual and psychological development, helps them develop awareness and teaches them to observe their thoughts,

feelings and senses. He notes the importance of developing the ability to understand and reveal unhealthy patterns of relationships and behaviour. Bernie emphasizes that movie therapy must be conducted by a specialist who knows how to work with anxiety.

Bernie Wooder has made numerous radio appearances. He also took part in an interesting experiment which was aimed at helping the client to overcome ornithophobia (fear of birds) using movie therapy. The experiment showed that only the right film has a therapeutic effect. Bernie wrote two books – *Movie Therapy: How It Changes Lives* and *No Ordinary Life: Buddhism, Psychotherapy and Movies*, in which he shared his experience of using films in individual therapy.

TAV SPARKS' MOVIE YOGA

Tav Sparks says that any film has the ability to heal, change life and transform a person. Instead of going to a therapist, he suggests watching a movie in the hope that it will tell the person something about himself. It's sufficient to do only two things to achieve this goal. Firstly, we need to pay attention to the feelings that we experience when we watch a film. Secondly, we must let these feelings transform us. He described this way to connect with your feelings, inner world and emotions using films in his book *Movie Yoga*.

Movie Yoga is based on a system of healing, the so-called Awareness Positioning System, or APS. The APS is similar to a coordinate system in which the person's relationship with the world, his outer experience, is reflected on the horizontal axis. On the vertical axis there is the person's inner world, what happens inside him.

Our personal issues are below the horizontal axis: the past, something which we have forgotten and things which motivate us to be who we are. Above the horizontal axis there is experience which can be described as the movement towards integrity, the Higher Self.

This system is very simple. When we watch a film, we treat it as an external event and look at all our feelings from this perspective. But then we relate these feelings to our inner past and future experience. We stop blaming the outside world and take responsibility for what's happening to us. In this way we gain the strength for change and healing.

As the leader of Grof's Transpersonal Training, Tav Sparks views the effect of Movie Yoga through the prism of the Basic Perinatal Death-Rebirth Matrix and its four parts: the Naivety Matrix, the Victim Matrix, the Matrix of Struggle and the Freedom Matrix.

SERHII KRASIN'S DIRECTED FILM THERAPY

The training programs for teachers, parents and school students were the first materials developed on directed film therapy. Their popularity and interest in them, as well as a large number of positive reviews stimulated further work and research. During the work, the author noticed that a high therapeutic effect depended not only on the content of the film being viewed, but also on the actions performed by a film therapist. The therapist's wrong actions sharply reduced the effectiveness. In contrast, competent actions greatly improved the effect of watching. The author got the idea of creating a method in which a lot of attention is paid to careful planning of the therapist's actions before, during and after watching the film as well as the viewing itself. The therapist does more than just encourage the discussion of the film. He creates conditions in which the client receives relevant knowledge, gets important insights, feels emotions and develops necessary skills. The method was called Directed Film Therapy. It has become an essential part of the therapeutic process. Directing strategies and techniques developed on their basis appeared.

In the course of work it was found out that directed film therapy can be used equally well not only in therapy, but also in training, coaching and counselling work with clients. Thus, the following directions appeared – therapy by methods of directed film therapy, counselling by methods of directed film therapy, directed film training and directed film coaching.

HOW IT ALL BEGAN

At the moment, directed film therapy includes more than thirty strategies for work with film excerpts and more than ten algorithms for work with short and full-length films. Hundreds of techniques and dozens of training programs have been developed. You will learn more about the method in the section *Directed Film Therapy*.

Chapter 3

THE ESSENCE OF FILM THERAPY

«It's raining up», admitted the man hung upside down.
P.S. «This is true».

From Unkempt Thoughts (Myśli nieuczესane)
by Stanisław Jerzy Lec

There is no single definition of film therapy, as well as a single understanding of its essence. Each author identifies the essence, meaning and purpose of film therapy from their personal experience and knowledge. Most of the definitions, being partly true, in general do not reveal the essence and versatility of the direction. It's just like the parable of the Blind Men and the Elephant, remember?

THE PARABLE OF THE BLIND MEN AND THE ELEPHANT



The six blind men lived in a village. One day they heard that an elephant had been brought to the village. The blind had no idea what an elephant was or what it might look like.

“How can we find out what kind of elephant it is?” they thought.

“I know,” said one of them. “We will touch it.”

“Good idea,” agreed the others. “This way we can find out what kind of elephant it is.”

And the six blind men went to "watch" the elephant.

The first man touched a large, flat ear that moved back and forth.

"A fan! The elephant is like a fan!" he exclaimed.

"Mmm... no, it's something round and thick... The elephant looks like a tree!" said the second man, touching the elephant's leg.

"You are both wrong", said the third man. "Yes, it is round, but not thick and it is also very flexible! It looks like a rope!"

This blind man touched the elephant's tail.

"A spear, the elephant looks like a spear!" exclaimed the fourth man, holding on to its tusks.

"No, no, the elephant is like a high wall. Big, wide and rough, don't you understand?" shouted the fifth man, touching the side of the elephant.

The sixth blind man was holding a trunk in his hands.

"You are all wrong," he said. "The elephant is like a snake"

A heated debate started. Each blind man stuck to his opinion. It is not known how it would have ended if a wise man was not passing by.

"What's the matter?" he asked.

"We can't figure out what an elephant looks like", replied the blind men.

And each of them shared his thoughts about the elephant.

"You are all right in your own way. It's just that each of you touched different parts of the elephant", the wise man calmly explained.

This ancient parable vividly demonstrates the current situation with film therapy. An analysis of the huge number of film therapy and cinema therapy definitions which are given in books, speeches and websites showed that most of them can be divided into three large groups. Each group reveals only one aspect of direction, excluding the others.

The first group contains definitions that give a superficial view of film therapy. The second group includes definitions that show only one narrow aspect of film therapy. The third group contains definitions which are based on one-sided view of film therapy.

Let us take a deeper look at the above-mentioned groups.

The first group.
A superficial view of film therapy.
How to avoid? Have a deeper look at film therapy

You might have come across the common definition that film therapy is the process of watching films which is followed by a discussion. To say this about film therapy is the same as saying that psychotherapy is just listening to the client's story and then discussing it. Such definition can only be given if one does not delve deeply into the essence of the work of a psychotherapist. Listening to a story and psychotherapy are completely different things. Similarly, film therapy and film viewing are two completely different processes. What is the difference?

Watching a movie is a way of entertainment, film therapy is a way of healing. Watching a movie is usually aimed at getting pleasure. The effectiveness criteria are likes and dislikes. Film therapy is aimed at healing. The criterion of effectiveness is the healing of the human soul.

In directed film therapy, the last thing we care about is that the client enjoys the experience. A good story about good people who lived well and always rejoiced is of little use for film therapy. It has a poor effectiveness. Films that awaken feelings, emotions, motivate, make you think, suggest certain thoughts, offer to look for a way out are much more suitable for film therapy. It is the lack of enjoyment while watching that has a high level of effectiveness. This is the effect on which Gary Solomon's paradoxical healing is based.

The second group. A narrow view of film therapy. How to avoid? Have a wider look

Most definitions of film therapy show only one narrow aspect without revealing the essence of film therapy in its depth. In this case, it makes no sense to give these definitions in full, so it is enough to highlight some of their key characteristics.

1. Cinema therapy (film therapy) is a method of group work

Yes, of course. It is absolutely true. This is a group work method. But why is the use of film therapy limited to a group work? Gary Solomon recommended using films in individual, pair, family and group work. Bernie Wooder used film therapy as one of the key tools for individual therapy. Tav Sparks' Movie Yoga can generally be done on your own at home. Directed film therapy is equally effective in individual, family and group work.

2. Cinema therapy (film therapy) is a type of psychological counselling

Yes, of course, this is a type of psychological counselling. But why is the use of film therapy limited to counselling? After all, there is psychological therapy, training and coaching. Film therapy can be applied equally effectively in each of these directions. There are four areas of directed film therapy – therapy by methods of directed film therapy, counselling by methods of directed film therapy, directed film training and directed film coaching. Each of the above-mentioned areas has its own resource and capabilities.

3. Cinema therapy (film therapy) is a form of complementary therapy

This definition again shows only one narrow aspect of film therapy. There is no doubt that film therapy can be used as a form of complementary therapy. But it can also be used as a form of primary therapy. This is a completely independent and effective method. How to work depends solely

on the purposes of therapy and the experience of the therapist. In directed film therapy, there are strategies which allow use film therapy as the main form of work, supplemented by other forms and methods. This approach brings great results.

4. Cinema therapy (film therapy) is a joint analysis of a watched film

Let us have a wider look. There is a joint analysis in group work, an analysis during an individual session and independent analysis. In addition, in directed film therapy there are some strategies of work which do not include the analysis of the film. The emphasis is on people's reactions, not on the events of the film. By the way, Antonio Meneghetti emphasized the importance of using the film to analyze people's feelings, not the director's idea.

**The third group. One-sided view of film therapy
How to avoid? Look beyond the surface**

Most specialists see film therapy as a method of a particular direction. For example, psychoanalysts see it as an analytical method, art therapists as a method of art therapy and the representatives of the ontopsychological method look at film therapy as a method of ontopsychology. Of course, within the framework of the above-mentioned directions, each of them is right to a certain extent, but none of them is absolutely right. So, what exactly is film therapy?

Having appeared within the framework of psychiatry and a psychoanalytic approach, film therapy quickly confirmed its effectiveness in many other areas. The four authors who were mentioned in the second chapter are representatives of different directions. Bernie Wooder is a specialist in Core Process Psychotherapy which is a combination of Western and Buddhist psychology. Antonio Meneghetti is the founder of ontopsychology. This school raises questions about the psychology of human being. Ontopsychology, in the words of its founder, is "the study of mental

processes in their primary relevance, including the understanding of being.” Gary Solomon is a psychotherapist who sees the film as a healing story. Tav Sparks, who is a representative of transpersonal psychology, views the film through the prism of perinatal matrices.

The potential of film therapy is so multifaceted that it can include other directions. Directed film therapy includes strategies and methods of work that are effective not only in different areas of psychotherapy, but also in counselling, training and coaching.

So, let us sum it up. What exactly is film therapy?

Film therapy is a direction of psychotherapy that includes a system of methods based on ways of work with human reactions received during and after watching a film and aimed at spiritual and mental healing.

An important distinguishing feature of film therapy is that it focuses not on the film, but on the client. Film therapy is easily combined with other directions, approaches and methods.

The main types of film therapy:

1. Antonio Meneghetti's Cinemalogy
2. Gary Solomon's Cinema Therapy
3. Bernie Wooder's Movie Therapy
4. Tav Sparks' Movie Yoga
5. Sergey Krasin's Directed Film Therapy

All other approaches and methods of film therapy known to us are, to one degree or another, subtypes of one of those listed above.

Section 2

DIRECTED FILM THERAPY

Section 2:

DIRECTED FILM THERAPY

Chapter 4 GENERAL CHARACTERISTICS OF THE METHOD

«The highest skill is not the ability to draw.
The highest skill is to find the balance
between heat and light inside the image,
which can make the film frame perceptible».

Yuri Norstein

In the first section, you got acquainted with the features of film therapy. We looked at the common myths associated with the history of its creation, studied five basic approaches, explored three groups of limiting definitions and outlined the essence of film therapy. In this section, you will be introduced to the Directed Film Therapy method. You will find out what directed film therapy is and why the method got such a name. You will also understand how the method works and look at the distinctive features of each of the four areas of directed film therapy.

Directed film therapy is a system of methods that contribute to the client's spiritual and mental healing and help acquire the necessary knowledge and skills in the course of work with reactions received before, during and after watching movies, cartoons, shows, clips and any other audiovisual series.

When the viewer usually watches a film, he perceives only those images which the director and the actors try to convey from the screen. Methods of directed film therapy, on the contrary, create conditions in which the client gets to know himself through the images of the film. In the holistic space of therapy, the film with a certain plot and acting doesn't exist separately. The client is not just a viewer, with his requests, desires and dreams. During the therapy, the psychic, spiritual, emotional and mental realities of the viewer

and the film are combined into a single, healing reality, in which the client discovers his unconscious inner world. This is the reality in which the person receives important answers, experiences unprocessed emotions, establishes contact with himself or with one of his subpersonalities and understands his potential. The therapist is present in this reality as an observer and a guide.

The therapist's task is to create a therapeutic space which will make the patient healthier using the methods of directed film therapy.

The training of a film therapist includes:

- understanding the specific impact of cinema on the viewer;
- knowing the peculiarities of film perception;
- understanding the principles of conducting film therapy;
- developing the ability to organize a therapeutic space with a clear understanding of one's role as a therapist in each session and at each stage of therapy;
- acquiring the skills of using strategies, methods, techniques and other algorithms of directed film therapy.

**What does the name of the method mean?
Why do we use the term “film therapy”
and not “cinema therapy”?**

The terms "film therapy" and "cinema therapy" are usually considered as synonyms. But if we talk about the concepts of “cinema” and “film”, then the second one expresses the essence of directed film therapy much more accurately. The concept of "film" is broader than the concept of "cinema".

There are movies, cartoons and amateur videos. There are clips and shows that can also be considered as a film with their own characteristics. In directed film therapy we work with all kinds of movies, cartoons, clips, shows, commercials and amateur videos. This is reflected in the name *film therapy*.

What does the term directed mean?

A director is one of the main jobs in cinematography. This person directs the process of making a film and is responsible for the artistic, acting and stage components. Thanks to the director's guidance, the certain tone for the film is set and the images get the meaning. The viewers interact with this energy when they watch a film. However, the process of film therapy is not just watching a movie. This is the space in which a person meets himself. The film therapist's task is to create conditions in which this meeting will have a therapeutic effect. We use the term "to stage therapeutic space" to describe this process. The viewing and subsequent work based on the images from the film is done according to special algorithms which are called director's strategies.

Chapter 5

DIRECTED FILM THERAPY AREAS

«If you just communicate, you can get by.
But if you communicate skilfully,
you can work miracles».

Jim Rohn

There are four areas of directed film therapy:

1. Therapy by methods of directed film therapy
2. Counselling by methods of directed film therapy
3. Directed film training
4. Directed film coaching

Each direction has its own goals, objectives, ways and mechanisms of work, as well as opportunities and limitations. The therapist must be proficient in all four areas of directed film therapy and be able to determine the most effective way of work on a case-by-case basis.

Therapy by methods of directed film therapy

Therapy by methods of directed film therapy is aimed at solving deep personal problems that underlie the person's life difficulties. The images of the film are a resource for resolving the client's internal conflicts and profound personality change. The therapy is directed at identifying the reasons which caused the client's problems and difficulties in the past and eliminating their influence on the present.

The work is based on mechanisms of projection, identification, association, concentration, actualization, experiencing emotions and catharsis.

Projection

The projection mechanism is based on the fact that a person consciously or unconsciously ascribes their internal properties and states to others. A film is an active background for projection. The events of the film and the actions of the characters acquire a tinge of the client's experience, knowledge and emotional reactions. Thanks to this, the client's inner world manifests itself and opens first to the film therapist, and then to the client himself. A number of directed film therapy strategies are based on working with projection.

Identification

The identification mechanism is the process of unconsciously identifying oneself with someone else. While watching a film, the client may consciously or unconsciously identify himself with one or more characters, situation or events. As an unconscious process, identification happens automatically at the time of watching the film. Conscious identification occurs when the therapist asks the question "Who could you identify yourself with in this film?" or instructs the client to identify himself with a particular character.

Association

The association mechanism is based on the fact that the manifestation in the mind of one event entails the manifestation of another event which has some features similar to the first one. Based on the events of the film, and actions, words or experience of the character, the client may have associations with events, actions, words or emotions from his own life. Thanks to this, it is possible to find the source of the client's conflicts, worries or other problems.

Concentration (focus)

The concentration of attention is the focus of the client on certain images of the film. Concentration occurs consciously or unconsciously. In case of unconscious concentration, the film captures the client's attention and controls it until the end of the viewing. If concentration occurs consciously, we use the term focus. In the case of focusing, the client is instructed to focus on specific images of the film. What was the focus of attention is always related to the internal state of the client. Further work with the client's state gives a therapeutic effect.

Actualization

The client is not always aware of one's emotional, mental, speech and psychomotor reactions to the events of the film. Actualization is the process of focusing the client's consciousness on these unconscious reactions in the course of therapy. A number of directed film therapy strategies are based on actualization mechanism. This enables the client to experience their emotions, feel, think and act in a more conscious way.

Experiencing emotions

Watching a movie is always associated with emotional and mental immersion in the events of the film. The client experiences certain feelings, emotions and shows their attitude to the events as if they were happening in their own life. But at the same time, the client understands that in reality the events of the film will not affect them in any way. Thus, certain life scenarios and situations are experienced in a safe way. With the help of this mechanism, the client receives an experience that contributes to the resolution of internal contradictions and conflicts, increase of awareness and gaining integrity.

Catharsis

Catharsis is the process of releasing psychic energy and emotions which helps to reduce or get rid of anxiety, conflicts and frustration through speech or bodily expression. As a process of internal purification, catharsis leads to a better understanding of oneself and has an overall beneficial therapeutic effect on the individual. In film therapy, catharsis occurs at the moment of experiencing various strong emotions together with the character. It helps to release tension and accumulated emotions. Further work with these reactions helps to increase awareness and understand oneself.

Directed film therapy is recommended for clients who:

- are looking for an answer to the questions "Why?"
- are concerned about some psychological problems
- seek self-understanding, change in attitude towards themselves and their condition
- need to eliminate painful deviations in behavior;
- deal with old problems, emotional pain or trauma;
- need to increase stress tolerance;
- need empathy and support.

Counselling by methods of directed film therapy

Counselling by methods of directed film therapy is carried out only with a clinically healthy person and is aimed at solving the difficulties and problems that arise during the interaction of a person and the environment they live in.

In counselling, the client's reactions to film images contribute to

- understanding by the client of what is happening in his living space;
- a meaningful achievement of the goal;
- a conscious choice;
- solving emotional and interpersonal problems.

The mechanisms in counselling by methods of directed film therapy are the same as in therapy: projection, identification, association, concentration, actualization, experiencing emotions and catharsis. Counselling is focused on solving the client's problems in the present and eliminating their impact on the future.

Counselling by methods of directed film therapy is recommended for clients who need:

- to change behavior;
- to develop coping skills;
- to fulfill their personal potential;
- to eliminate inadequate, destructive views;
- to form, strengthen and develop the skills to make effective decisions;
- to develop the skills for building interpersonal relationships;
- to get emotional support and attention.

Directed film training

Directed film training is aimed at gaining certain knowledge, skills and social attitudes. The events of the film are used as models and examples that show actions, deeds, qualities and skills and contribute to enhancing the client's experience.

Commonly used techniques are a vivid illustration, a strong argument, a convincing example, a classic analogy and a role-play. The work is aimed at solving the client's current tasks. The techniques are focused on active learning.

Directed film training is recommended for clients who:

- look for an answer to the question: "How to do it?"
- seek to improve competence and acquire knowledge
- want to change their attitude towards something;

- learn how to overcome difficulties;
- seek to master new behavioral and thinking skills.

Directed film coaching

Directed film coaching is focused on assisting the client with understanding, formulating and achieving their goals as well as revealing and fulfilling personal potential. Films play a motivating and stimulating role.

Work with film images:

- helps to focus on the main goal;
- makes the clients realize what they really need;
- motivates for action;
- motivates the client to take an active position.

In directed film coaching we do not look for the reasons why a person ended up in a particular situation. We focus on where the client is now and where the person wants to be later. The main focus is on the client's actions and future.

Directed film coaching is recommended for the clients who:

- look for an answer to the question "How?"
- want to live and interact with the world at a higher level;
- want to clarify their leading life values, specific goals and look for ways to achieve them.

Chapter 6

METHODS USED IN DIRECTED FILM THERAPY

«In addition to having beliefs,
it is necessary to be able to gain knowledge
and master the methods».

Bertold Brecht

All methods used in directed film therapy are divided into three types:

1. **Methods of work** with short videos up to 10 minutes long.
2. **Methods of work** with selections of excerpts from films, clips, cartoons and other videos up to 10 minutes long.
3. **Methods of work** with full-length films and selections of films.

Methods of work with short videos up to 10 minutes long

This group includes strategies and techniques for work with:

- film excerpts, cartoons, TV programmes and shows;
- short cartoons;
- clips;
- commercials;
- social videos;
- amateur videos;

Techniques

Techniques are ready-to-use methods of work with a specific type of problem. In terms of cinematography, this is a script on the basis of which the client gets the therapeutic support before, during and after watching the film. Any technique always has clear goals and is aimed at working with a certain category of people. It is the simplest tool in directed film therapy, and therefore requires a minimum level of training to use it. Training in directed film therapy begins with mastering the techniques.

Techniques include a detailed description of the algorithm of work:

1. Description of the video clip.
2. Preparing for viewing.
3. Instruction before viewing.
4. The scheme of viewing:
 - what to do;
 - how to comment;
 - what to say and ask.
5. Discussion algorithm with a description of the stages of work and a list of questions (if the technique provides for discussion).
6. Tasks and exercises with a detailed description and full instructions (if the technique provides for tasks).
7. Summing up.

Hundreds of techniques have been developed so far. You will get acquainted with some of them in the chapter Strategies and Techniques.

Strategies

Strategies facilitate work on developing techniques. They are ready-to-use templates which make creating techniques simpler, easier and faster. Each strategy is a detailed step-by-step instruction that describes how, when and what to do and why it must be done. An experienced film therapist who has mastered strategies can design a technique within minutes. So far, more

than thirty strategies have been developed in directed film therapy. The names of thirty of them are given in this book. You will find a detailed description of three strategies in the chapter Strategies and Techniques.

Directed film therapy strategies

1. Role polarization	16. Spiral
2. Role identification	17. Step by Step
3. One-man show	18. Asking a question
4. Pendulum	19. Food for thought
5. Counter script	20. Classic analogy
6. Screenwriter	21. It's high time
7. Semantic triangle	22. Insight
8. Semantic thread	23. Key frame
9. Plot analysis	24. Double viewing
10. Analytic unit	25. Good advice
11. A vivid illustration	26. Shock
12. A strong argument	27. Wish
13. A convincing example	28. Puppet theatre
14. Emotions & images diagnostics	29. Role play
15. Contrast shower	30. Real life

Methods of work with selections of excerpts from films, clips, cartoons and other videos up to 10 minutes long

The methods of this group are aimed at developing sessions which are based on several unrelated short excerpts. The session includes viewings, discussions, doing tasks and exercises. The necessary conditions for therapy are created by focusing attention on certain things, foregrounding topics and designing tasks carefully.

Particular attention is paid to the following issues:

1. Selection of videos. Even one incorrectly selected excerpt can affect the result of the entire session.
2. Order of videos in the course of the session. The order of excerpts affects group dynamics and the participants' individual state.
3. Targeted development of techniques. A technique is developed on the basis of every video excerpt. Each technique is used at a certain time and situation in the course of the session.
4. Integration with other directions and methods. It is important not to focus solely on video excerpts. Other methods and ways of work can be included to enhance the result.

Methods of work with full-length films and selections of films

This group includes the following methods:

1. Watching the film with a client. It allows the therapist to work with the client's reactions during and after the viewing.
2. Watching the film by the client before the consultation. It allows the therapist to work with the client's reactions after the viewing.
3. Watching the film by the client after the consultation. It allows the therapist to prepare the client for viewing and then work with their reactions to the film.

The full-length films are watched according to a flexible plan which includes the following stages:

1. Clarification of the client's request.
2. Choice of the film.
3. Preparing the client for viewing.
4. Watching the film by the client.
5. Analysis of the film.
6. Work with the client's request according to the results of the film analysis.

Work with selections of full-length films includes the following steps:

1. Making a selection of films on a particular topic.
2. Preparing the client for choosing a film.
3. Choice of the film.
4. Preparing the client for viewing.
5. Watching a film by a client.
6. Analysis of the watched film.
7. Work with the client's request based on the results of the film analysis.
8. Choice of the next film.

Stages of work

1. Making a selection of films on a particular topic

(only for work with film selections)

1.1. Options:

1.1.1. Making an individual selection according to the client's request.

1.1.2. Using previously prepared selections of films by topics.

1.2. The number of films in the selection.

The minimum number is one. The maximum number is not limited and is determined by the specialist independently.

1.3. During the preparation for the viewing the therapist can use quotations from a film that was chosen by the client. To do this, the therapist preliminarily selects these quotations when he makes the list of films.

2. Preparing the client for choosing a film

(for work with feature films and film selections)

2.1. Before choosing a film, the client explains his request.

2.1.1. The request is one of the key aspects of work with feature films. All subsequent work is aimed at meeting the client's request. The request is aimed at getting psychological assistance in a specific form; it is a motivated appeal or a statement of a problem that a person wants to solve in the course of film therapy.

The request is always aimed at:

- transforming a person internally (acquiring positive qualities and getting rid of negative ones);
- resolving internal and external conflicts;
- changing behavior patterns;
- acquiring knowledge;
- mastering actions;
- building skills;
- developing the skills which are important for the area of life that a person plans to transform.

3. Choosing a film

(for work with full-length films and film selections)

This is one of the most important stages of work. It must be done carefully and cautiously. There are two ways to choose a film.

3.1. The therapist chooses a film for the client based on his own experience and knowledge. It is important to clearly understand what resource the offered film has and how it can help in meeting the client's request.

3.2. The client himself chooses the film that he will watch. It is important for the therapist to clearly understand what resource this independently chosen film has.

4. Preparing the client for watching a film

(for work with full-length films and film selections)

Watching a film in directed film therapy does not mean entertainment or relaxation.

In case of group therapy or individual viewing, the client is accompanied by the therapist at all stages of work, i.e. before, during and after watching a film.

In the case of individual watching, the client receives the following instructions:

1) Watch a film alone. Nobody must be around. While watching the film, do not discuss it with anyone. It is important to be focused on the viewing process itself.

2) While watching you need to remember about your request. To do this, you can use one of the options:

- write down the request before viewing and reread it from time to time while watching the film;

- if you remember the request, think about it from time to time;
- set a timer with an interval of half an hour. When the timer goes off, stop watching and read the request once. Then set a timer for the next half hour and continue watching.

3) Don't rely on your memory. Write down all the hints, answers, thoughts, associations etc. when they come to your mind. Stop the film, write about your thoughts, and only then continue watching.

5. Watching a film

(for work with full-length films and film selections)

5.1. A client watches a film in a session with a therapist.

The therapist observes the client while they watch a film. In this case, it is allowed to carry out the work described in paragraph 6.

5.2. The client watches the film on his own.

The analysis of the watched film takes place at one of the subsequent sessions.

6. Analysis of the watched film

6.1. Work with emotional reactions.

During this stage, the therapist works with the client's/group's emotional reactions to the film. All reactions are discussed in detail. The questions are asked depending on the situation.

Sample questions:

- What did you feel while watching?
- What feelings did the events and plot of the film and actions or words of characters evoke?
- Was there anything that made you feel good?
- Was there anything that made you feel uncomfortable?
- What do you feel now?
- And so on.

6.2. The analysis of the watched film is carried out depending on the client's request.

The plot of the film, the events that the client considers important, the characters' actions and words, the quotations recorded by the client, and the client's conclusions are analyzed.

Sample questions:

- What do the characters' actions mean?
- What do the character's image and name express?
- Which of the character's traits would you like to have?
- Which of the character's traits are unacceptable for you?
- Which of the character's actions would you like to do in your life?
- Which of the character's actions are unacceptable for you?
- How does it relate to your request?

7. Therapeutic / training / coaching / counselling work with the client's request based on the results of the film analysis (for work with full-length films and film selections)

This stage of work is carried out taking into account the client's emotional reactions at the previous stage. The therapist relies on the client's insights, awareness, positive and negative reactions which were discussed or experienced during the analysis of the film.

8. Choosing the next film (for feature films and film selections)

The next film is chosen only after the work with the emotions, feelings and thoughts associated with the images of the previous film is fully completed.

Chapter 7

STRATEGIES AND TECHNIQUES

«Each tool has the greatest benefit in the hands
of the one who has studied it
as deeply as possible and mastered it».

From A Word about Words by Lev Uspensky

How it works

As important parts of therapy, strategies and techniques are inseparably linked to each other. Strategies are designed to create techniques, while techniques are the bridge that unites the film, the client and the therapist in a single therapy space. Metaphorically speaking, a technique is the route that the client takes to resolve his request. A strategy is an instruction for developing a route. Many techniques can be developed on the basis of one strategy. At the same time, each technique will have its own goals, objectives and content. This applies even to those techniques that were developed on the basis of the same piece of video using the same strategy. Each technique has its own unique resource and capabilities. For example, in this chapter two techniques are described: *You – I – We* and *I am a Man*. Both of them were designed using the *Key Frame* strategy and are based on the cartoon *In the Rough* by Blur Studio. *You – I – We* technique is designed to work with women, while *I am a Man* technique is aimed at work with men.

Key Frame strategy

Short description

This strategy requires careful preparation. Therefore, there are two stages of work – preparatory and practical.

At the preparatory stage, the film therapist watches the selected piece of video and chooses the key frames in it. Each frame must be a clear symbolic expression of a specific aspect of the topic of a training or therapy session. These frames are saved as images. The strategy is developed on the basis of selected frames.

At the practical stage, the piece of video is watched, which is followed by a brief discussion. All subsequent work is based on the selected key frames.

Algorithm

1. Preparatory stage. Before the session.
 1. Watch a piece of video.
 2. Choose the key frames.
 3. Save the key frames as images.
 4. Give each frame a descriptive title. For example: a man is kicked out of the house, a man kills a bear, a man gives a diamond. The title should clearly describe the frame.
2. Practical stage. At the session.
 1. The participants get acquainted with the background of the plot just as much as it is important in this strategy.
 2. Instruction:
 - Now we are going to watch an excerpt from (the name of the film), in which (name the characters and indicate why the video is being shown). Your task is to watch what is happening on the screen and observe your feelings and reactions.
 3. Watching a piece of video.

4. Immersion into work with key frames.

- I would like to draw your attention to a few key frames from this piece of video.

(The film therapist shows the key frames and reveals the essence of each frame using a descriptive title)

5. Work with situations from the life of the participants based on key frames.

6. Summing up. Making conclusions.

Now let us look at how this strategy works on the example of *You – I – We* and *I am a Man* techniques.

You - I - We technique

The technique is based on the plot of the Blur Studio cartoon *In the Rough* and was developed using the *Key Frame* strategy.

Materials and equipment: a laptop, a projector, a screen, speakers, Blur Studio cartoon *In the Rough*.

To find the cartoon on YouTube, type Blur Studio *In the Rough* in the search bar.

Time: 30 minutes.

Target audience: girls and women aged 18 and over.

Purpose: Harmonization of family relations. Prevention of conflicts.

Tasks:

1. To study the level of demands for a partner and yourself.
2. To identify willingness to make concessions
3. To look for common values

Introduction

Relationships are one of the most important components of human life. Family relationships are the foundation on which the family is built and exists. Attitudes, values, beliefs, demands and expectations of partners strongly influence what happens to their relationship and, as a result, to their family. In some cases, they can bring joy and happiness, and raise interest. In others, they can be the cause of disappointment, resentment, irritation, anger, and even a breakdown in relationships. The ability to forgive, look adequately at what is happening, avoid placing heavy demands on yourself and your partner, treat each other with respect and accept the values of another person will be a reliable foundation for a long and happy relationship.

Key Frame strategy

Short description

Watch the cartoon before the session. Select three key frames. Save the frames as images.



Frame No.1.
The wife kicks her husband out of the cave.



Frame No.2.
The husband defeated the bear.



Frame No. 3.
The husband gives his wife a diamond.

After watching the cartoon, the work will be based on these key frames.

Practical stage

Step 1. Watch the cartoon

Instructions before watching

- Now we are going to watch the cartoon *In the Rough*. Look at what is happening as a symbolic expression of conflict and reconciliation in the relationship between a man and a woman.

Step 2. Discussion after watching

Question 1: How do you feel right now?

Question 2. What did you pay most attention to?

Question 3. What did you like most in the cartoon?

Question 4. Was there anything that caused discomfort?

Step 3. Immersion in the topic

- I would like to draw your attention to three key frames in this cartoon:

The first frame (show the image) – the woman kicks the man out of the cave and throws his things away.

The second frame (show the image) – the man defeats the bear.

The third frame (show the image) - the man gives a diamond.

In these frames, three aspects of the relationship are shown, which can be present to one degree or another in the relationship of any couple. Now we are going to work with these aspects.

Step 4. Demands for a partner

Think about your partner (a husband or a boyfriend), imagine him in front of you and answer the question:

Question 1. What must your partner do so that you are ready to break up with him? Write down your answers.

Question 2. If you broke up, then, speaking the language of the cartoon, which bear should he kill so that you agree to listen to him and be ready to get back together? Write down your answers.

Question 3. Speaking the language of a cartoon, what diamond should a man give you so that you finally understand that this is your man? This cartoon is a metaphor. Think not only about material gifts and jewellery but also about any values in the relationship that are the most important and relevant to you. Write down your thoughts.

Invite the participants to share their thoughts but don't insist. Let each participant decide for herself what she will say.

After the discussion say:

- I suggest that you think a little deeper about your answers.

Recall your answer to the first question. Why are you ready to end the relationship? Is the reason serious enough? Do not forget that your partner is an ordinary person. He is neither an angel nor an ideal man. Is it possible for an ordinary person to live in such a way that they never make any mistakes? Write down your thoughts.

Recall your answer to the second question. Which bear must he kill to earn your respect? Think about why you need this bear. Is it important for you to see change, atonement, sufferings of a guilty man and the process of struggle? Or is it a desire to punish and let him suffer?

Do you think your man must kill a bear on his own or are you ready to help him? Are you ready to rebuild relations with him without this bear? Write down your thoughts.

Recall your answer to the third question. Which value must a man bring to you? Did you write down the value that is only important to you, or is it meaningful to him as well? Write down your thoughts.

Are there common values in your relationship that are equally important to both of you? Write down your thoughts.

Step 5. Demands for yourself

Question 1. Which actions of yours give your partner the right to break up with you?

When you answer this question, pay attention to the level of demands placed on the partner and yourself.

1. Whether your demands are equally fair
 - a. You are equally demanding both to yourself and your partner;
 - b. Demands for the partner are higher than demands for yourself;
 - c. Demands for yourself are higher than demands for the partner.
2. Think about the demands for yourself and the partner.
 - a. Are they the same demands, or are there any differences?
 - b. If there are differences, what are they?
 - c. What lies behind these differences?

Question 2. What are you ready to do to rebuild the relationship? What feelings lie behind these actions?

Question 3. What value can you bring to your partner's world that is important to him?

Step 6. Summing up

Question 1. Look at your answers. Are you satisfied with everything or do you want to change anything?

Question 2. What do you need to do?

Question 3. What would you like to start with?

Question 4. What kind of help do you need?

I am a Man technique

The technique is based on the plot of the Blur Studio cartoon *In the Rough* and developed using *Key Frame* strategy.

Materials and equipment: a laptop, a projector, a screen, speakers, Blur Studio cartoon *In the Rough*.

To find the cartoon on YouTube, type Blur Studio *In the Rough* in the search bar.

Time: 60 minutes.

Target audience: boys and men aged 16 and over.

Purpose: to diagnose male identity role and the ability to express gender-based male roles.

Tasks:

1. To diagnose social identity role and the ability to perform social roles.
2. To diagnose sexual identity role and the ability to build relationships with women.

Introduction

Male identity is the awareness and experience of belonging to a male group. It is connected with the ability for disposition, self-presentation and performing gender-based roles.

The concept of male identity is closely related to the concept of male initiation. There are two types of male initiation – social and sexual. Social initiation requires a man to be able to prove his worth, suitability, usefulness and take a worthy place in society. To become and be a man socially means to be an adult member of human society, that is, to fulfill the traditional

male roles of a defender, a warrior, a breadwinner and a builder.

Sexual initiation is to get to know a woman. Sexual identity is to be a man sexually, to treat a woman in the way that is accepted in society.

Description of the technique

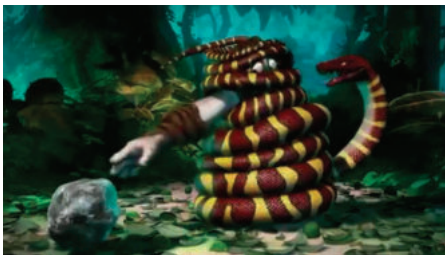
Preparatory stage

Using the cartoon, the film therapist identifies five key roles: a Builder, a Fighter, a Breadwinner, a Warrior and a Husband. A man gets the opportunity to test the level of his masculine maturity in each of these roles, identify resource areas and develop his abilities in the role that he finds necessary to improve.

Watch the cartoon before the session. Choose five key frames. Save the frames as images.



Frame No. 1.
The man is building a house
(a Builder)



Frame No. 2.
The man is coping with
suffocating circumstances
(a Fighter)



Frame No.3.
The man has found food
(a Breadwinner)



Frame No.4.
The man is fighting the enemy
(a Warrior)



Frame No. 5.
The man has won a woman's
heart (a Husband)

After watching the cartoon, the work will be based on these key frames.

Practical stage

Step 1. Watch the cartoon

Instructions before watching

- Now we are going to watch the cartoon *In the Rough*. Look at what is happening as a symbolic image of the roles that are important in a man's life.

Step 2. Discussion after watching

1. Describe your feelings after watching.
2. Are there any things in this cartoon that impressed you more than the others?
3. How would you characterize the main character of the cartoon?
4. Although comical, this cartoon depicts some of the key roles that are important in a man's life. Which of the character's roles did you pay attention to in this cartoon?
5. Which of these roles has the main character mastered?
6. Which roles did he fail to cope with?

Step 3. Immersion into the topic

- I would like to draw your attention to five key frames in this cartoon:

Frame 1 (show the image). The man is building a house. The first important role for a man is to be able to provide himself and his family, if any, with housing. Let's call this role a Builder.

Frame 2 (show the image). The man is coping with suffocating circumstances. This is the second important role. The ability to face difficulties, cope with them and win. Let's call this role a Fighter.

Frame 3 (show the image). The man has found food. It is the ability to provide for oneself and one's family. Nowadays this third important role is expressed in the amount of money earned. Let's call it a Breadwinner.

Frame 4 (show the image). The man is fighting the enemy. The fourth important role is the ability to defeat the enemy and defend one's territory. Let's call it a Warrior.

Frame 5 (show the image). The man has won a woman's heart. The ability to communicate with a woman, to build relationships with her, to treat her exactly as a woman, and not as a mother, is the fifth important role. Let's call it a Husband.

Step 4. Diagnostic

- Let's explore your potential in each of these roles.

The first role. A Builder

Question 1. Do you have an image of the house you are planning to build?

Question 2. Do you have all the necessary resources to build it?

Question 3. If you do not have them, what should be done to ensure that all the necessary resources are available to you?

Task 1. Make two lists. Write down your internal resources in the first list, and all your external resources in the second one.

Internal resources	External resources

The second role. A Fighter

Grade your ability to resist external circumstances according to a ten-point scale.

Consider the duration and strength of resistance.

Question 1. Which circumstances are easier for you to deal with and which are more difficult?

Question 2. What qualities do you need to in order to enhance the abilities of an ideal fighter?

The third role. A Breadwinner

Evaluate your abilities as a breadwinner (food, clothes and necessary household items).

Question 1. What can you do on your own? What do you need help with? What can you help others with?

The fourth role. A Warrior

Assess your qualities as a warrior, i.e. a person who is capable of fighting the enemy.

Question 1. What ways of dealing with the enemy do you know?

Question 2. In what ways of fighting are you the most effective in?

Question 3. Which ones are you the least effective in?

Question 4. What skills would you like to develop as a warrior?

The fifth role. A boyfriend, a fiancé, a husband. Relationships with women

Think about your relationships with women.

Question 1. Are you satisfied with everything?

Question 2. Do you have enough masculine skills to be interesting to women?

Consider the following areas:

- finance;
- strength of the body;
- intelligence;
- ability to pay women compliments;
- generosity.

Add your ideas.

Step 5. Therapeutic

Read your answers carefully.

Question 1. Which of these five areas do you consider yourself to be the most successful in?

Question 2. What areas would you like to improve your abilities in?

Question 3. Which area would you like to start with?

Question 4. What should be done?

Question 5. What help do you need?

Question 6. When are you ready to start?

Emotions and Images Diagnostics strategy

Short description

The participants are invited to look at the events taking place on the screen as a symbolic expression of the situation that is happening in their own lives.

For example:

- emotional states they experience;
- the level of emotional burnout;
- stages of family development, etc.

In the piece of video being viewed, the film therapist identifies key images through which the dynamics of the development of the situation is expressed.

For example, the dynamics of emotional burnout development.

The diagnostics is carried out based on the images of the film.

The effect of emotions and images diagnostics is that through images the participants are more clearly aware of the situation they are in.

Algorithm

1. The background of the plot is not required. It is given only if it will contribute to the diagnostic work.
2. Instruction:
 - Imagine that the events on the screen are a symbolic expression of the processes which are taking place in your life (name the area of life being diagnosed). Do not pay attention to the sequence of events. Try to feel emotionally which situations from your life (name the area of life being diagnosed) are symbolically expressed in the viewed plot. Think about what aspect of your life is reflected in the images and symbols of this video. After watching, we will diagnose your internal state using the images of this video.

3. Watching the video.
4. Diagnosis of the situation based on the images of the cartoon.
The film therapist names the key images of the film and explains their meaning. The participants determine which of the images corresponds to the current stage of development of their situation.
5. Based on the data received, further correctional work is planned.

Now let us look at how this strategy works on the example of the Family Life and Last Knit techniques.

Family Life technique

The technique is based on the plot of the cartoon *Happily Ever After* by Yonni Aroussi and Ben Genislaw and was developed using *Emotions and Images Diagnostics* strategy.

Materials and equipment: a laptop, a projector, a screen, speakers, the cartoon *Happily Ever After*.

You can watch the cartoon on the Vimeo website at <https://vimeo.com/54529194>

Time: 30 minutes.

Target audience: couples and everyone who needs to diagnose the situation in the family.

Purpose: diagnostics of family relationships through emotions and images.

Tasks:

- to update the emotional experience of family relationships;
- to study the dynamics of family relations development

Introduction

The technique is useful at the initial stage of work with the topic of family relationships. It allows you to see the situation more objectively, understand and feel the dynamics of its development in the family from the past to the future. It helps to develop and build an effective program for the correction of family relations.

Description of the technique

Step 1. Watching the cartoon

Instructions before watching

- Now you are going to watch the cartoon *Happily Ever After* by animators Yonni Aroussi and Ben Genislaw. Imagine that the events on the screen are a symbolic expression of the processes which are taking place in your family. After the viewing, you will receive a task. In order to complete it, do not pay attention to the sequence of events in the cartoon and how the characters get mature. Feel emotionally what situations from the life of your family are symbolically expressed in this cartoon. Think about at what stage your family is now in relation to the images and symbols of the cartoon. After the viewing, we will carry out the diagnostics.

Step 2. Diagnostics of emotions and images

Instructions before watching

- Now, with the help of cartoon images, you are going to analyze the situation that has developed in your family.

Take a sheet of A4 and divide it into four columns. Give the columns the following names:

- Column 1 – It happened in the past;
- Column 2 – It is happening now;
- Column 3 – I expect it to happen in the future;
- Column 4 – It has never happened

- I'm going to name specific moments, situations and states that you have just seen in the cartoon. There are 21 items in the list in total. Put them in the following columns: it happened in the past, it is happening now, I expect it to happen in the future, it has never happened. The same item can appear in several columns at the same time.

The list:

1. The beginning of a relationship. Joy and play.
2. You arrange a place to live.
3. You exchange loving glances and admire beauty.
4. You have romantic meetings and evenings.
5. You live happily together.
6. You behave freely and naturally and feel good about it.
7. There are troubles and problems.
8. There is interest and sexual attraction to each other.
9. You get tired of family problems and issues. There are nervous breakdowns.
10. There are first problems in sexual relations.
11. There are persistent problems in sexual relations.
12. You live in the pursuit of buying things.
13. Your life is an endless shopping spree.
14. There is lack of sexual desire.
15. Each of the partners lives by their own interests, goals and objectives.
16. There are conflicts.
17. You live together by inertia. You regret it.
18. The collapse of all plans and hopes.
19. A sense of impotence and exhaustion.
20. Your family home has collapsed.
21. You are looking for a new relationship

Questions for the participants:

- How many items did you put in column 1 (it happened in the past)?
- How many items did you put in column 2 (it is happening now)?
- How many items did you put in column 3 (I expect it to happen in the future)?
- How many items did you put in column 4 (it has never happened)?

Step 3. Therapeutic

Question 1. Are you satisfied with the situation and development of events, or do you realize that you need to change something?

Question 2. What would you like to change in your relationship?

Question 3. What would you like to start with?

Question 4. What must be done for this?

Question 5. What help do you need?

The Last Knit technique

The technique is based on the plot of the cartoon The Last Knit by Laura Neuvonen and was developed using *Emotions and Images Diagnostics* strategy.

Materials and equipment: a laptop, a projector, a screen, speakers, *The Last Knit* cartoon.

To find the cartoon on YouTube, type The Last Knit in the search bar.

Time: 30 minutes.

Target audience: teachers, psychologists, social care teachers, social workers, specialists from civil services and other organizations.

Purpose: diagnostics of the degree of professional (emotional) burnout.

Tasks:

1. To widen the participants' knowledge about the topic.
2. To increase emotional interest in the topic.
3. To develop the participants' skill in self-diagnosing the degree of emotional burnout.

Introduction

Professional burnout is a syndrome that develops on the background of chronic stress and leads to the depletion of emotional, energetic and personal resources of a worker. It is a process of gradual loss of emotional, cognitive and physical energy. The symptoms are emotional and mental exhaustion, physical fatigue, a sense of personal detachment and decreased job satisfaction.

It is recommended to use this technique at the training session on the prevention of emotional burnout during the diagnostic stage or before doing tasks. The coach highlights ten key points and makes a brief comment to each of them while watching the cartoon. The exact time and the content of the comments are given in the description of the technique.

The technique does not have clear quantitative criteria and cannot be used as a test. The main practical effect of the diagnostics is experiencing the stages of emotional burnout development on the emotional level.

Description of the technique

Step 1. Watch the cartoon

Instructions before watching

- Imagine that the events on the screen are a metaphorical expression of your inner world. The state of the woman and the development of the plot symbolize the dynamics of professional burnout development. While watching, I will make brief comments that will help you feel on an emotional level what is happening on the screen. After the viewing, we are going to carry out the diagnostics.

Moment 1. 30 seconds.

Events on the screen: The woman has sat down on a chair and started to knit.

The psychologist's comment: You have just got a job. You have prepared the workplace and started working.

Moment 2. 1 minute 25 seconds.

Events on the screen: The woman is pushing the scarf away with her foot for the first time.

The psychologist's comment: The first difficulties appear but you can easily deal with them. Nothing bad is noticeable. The work brings you pleasure.

Moment 3. 1 minute 44 seconds.

Events on the screen: The woman is pulling the slipping scarf towards her for the first time.

The psychologist's comment: You have to work harder and make an effort in order to return to a comfortable state.

Moment 4. 1 minute 44 seconds – 2 minutes.

Events on the screen: The woman pulls the scarf towards her from time to time but later falls under its weight.

The psychologist's comment: The work is getting harder. You have to make more and more efforts in order to return to the comfortable state. The sense of heaviness returns from time to time and gradually increases.

Moment 5. 2 minutes 24 seconds – 3 minutes 5 seconds.

Events on the screen: The woman is working at the limit of her strength.

The psychologist's comment: The work load is increasing. You have to adapt. The work is very tiring. There are strong feelings of irregularity and injustice.

Moment 6. 3 minutes 20 seconds – 3 minutes 30 seconds.

Events on the screen: The woman is holding the scarf at the limit of her strength.

The psychologist's comment: Circumstances are stronger than a person. A person still strives to work, but understands that nothing will work without full dedication. It is usually only at this stage that people begin to realize that they are burning out.

Moment 7. 3 minutes 30 seconds – 4 minutes.

Events on the screen: The woman is using the last of her strength and resources

The psychologist's comment: The person is completely absorbed in the situation, becomes especially vulnerable and looks at the situation in a limited and narrow way. The person is no longer able to cope with it on their own, without the help of a psychologist.

Moment 8. 4 minutes – 4 minutes 30 seconds.

Events on the screen: The woman is completely aware that the situation is hopeless. She is making an attempt to escape.

The psychologist's comment: The awareness that the situation is hopeless and an attempt to escape usually result in giving up a job or an illness.

Moment 9. 5 minutes 20 seconds

Events on the screen: The woman is throwing away her knitting needles.

The psychologist's comment: A person leaves work and looks for a new job or a new position.

Moment 10. 6 minutes

Events on the screen: The woman is holding the scissors in her hand and looking around.

The psychologist's comment: If you do not change your attitude to work, everything will happen again, just in a different form.

Step 2. Diagnostics

After watching, the participants are asked to diagnose their level of burnout with the help of the cartoon images. The psychologist offers the participants to recall their emotions about the cartoon once again. Then he names the key points (see below) and offers the participants to compare their state with one of those images. The offered options correspond to the key points of the cartoon.

The options:

1. You're full of strength and energy. You have just started to work. There are no difficulties. The work brings you pleasure.
2. You understand that there are difficulties, but you easily cope with them.
3. You feel that the workload is increasing. You try to return to the normal rhythm of work but you do it without much effort. You think that everything is in order. You are still enjoying your work.

4. Difficulties increase and return from time to time, but you are still able to cope with them and think that this is how it should be.
5. The workload is increasing. You have to adapt. The work is very tiring. There are strong feelings of irregularity and injustice.
6. You have already understood that something is going wrong. You are aware that you are tired and exhausted.
7. You understand that it is no longer possible to cope with the situation on your own and you need external help.
8. You get ill more often. There are thoughts about leaving the job.
9. You get a serious illness or leave the job.
10. After leaving your old job, you start to believe that the new job will be much better but you end up repeating old mistakes.

After conducting self-diagnostics, you can ask the participants who are at the first stage of professional burnout to raise their hands. Then ask to do the same those participants who are at the second, the third stages etc. Usually, there are several heavily burnt-out employees in the group.

The diagnostics has the following effect:

- the participants understand more clearly what stage of burnout they are in;
- they become more open and willing to work in training sessions.

The diagnostics has a delayed effect. In the future, the participants themselves will be able to characterize their state using the cartoon images and will be more eager to do preventive work on time.

Classical Analogy strategy

Short description

After watching the video, the participants are asked to complete a task that contains an analogy of what they have seen on the screen. They can be actions, events, reflections, etc.

For example, at a training session on parent-child relationships, a piece of video is shown in which a mother pays attention to the needs of her child and helps the child to meet them. After watching, the participants are given the task to pay attention to the needs of their children and, by analogy with the woman from the video, find a way to respond to them. The resource of this strategy is that after watching the video the participants get the emotional charge and a ready-made action plan. To do this, we first analyze the events on the screen and only then work with the client's situation.

Algorithm

1. The participants get acquainted with the background of the plot only as much as it is needed in this strategy.
2. The instruction:
 - Now we are going to watch an excerpt from (say the name of the film), in which (say the name the characters and indicate why the video is being shown). Your task is to carefully observe what is happening on the screen (specify the task as much as possible).
3. The participants watch the video.
4. Discuss and analyze the situation, identify the key points.
5. Do the task. Work with the client's situation according to the algorithm that is similar to the one shown in the video.

Let's see how this strategy works on the example of *Two Worlds and Moon Cheese* techniques.

Two Worlds technique

The technique is based on a British short cartoon *Head Over Heels* by Timothy Recart and was developed using *Classic Analogy* strategy.

Materials and equipment: a laptop, a projector, a screen, speakers, Head Over Heels cartoon. You can watch the cartoon on the Vimeo website: <https://vimeo.com/54228768>

Time: 30 minutes.

Target audience: family couples and everyone who needs to clarify and improve relationships.

Purpose: to overcome family crises.

Tasks:

1. To define crisis areas in relationships.
2. To look for ways to overcome the crisis.

Introduction

Directed and written by Timothy Recart, the cartoon reveals the complexity of maintaining a relationship. The main characters of the cartoon are the spouses Walter and Madge. Over the long years of living together, they have grown apart. They live in the same house but they hardly meet or talk to each other. But something changes and their life is filled with bright colors again.

Description of the technique

Step 1. Watching the cartoon

Instructions before watching

- Now we are going to watch the cartoon *Head Over Heels*. It shows the life of two spouses Walter and Madge. Your task is to observe what is happening on the screen and pay attention to your feelings and emotions that are caused by the events shown in the cartoon.

Step 2. Discussion after watching

Question 1: How are you feeling right now? Describe your state after the viewing.

Question 2. The cartoon is called *Head Over Heels*. Why do you think it has such a name?

Question 3. What features of the main characters' way of life did you pay attention to?

Question 4. What do you think helped them to restore their relationship?

Step 3. Working with the client's situation

Acceptance of each other's individual characteristics

Question 1. Write down the features of your world (here we mean the individual characteristics of the client's life). What things belong only to your world throughout your relationship with a partner?

Question 2. Write down the features of your partner's world (here we mean the individual characteristics of the partner's life). What things belong only to his world throughout his relationship with you?

Search for common ground

Question 3. What are the characteristics of your shared world? What unites you?

Search for crisis zones in relationships

Question 4. Are there risk zones in your family that can destroy your relationship?

Learning to make concessions

Question 5. In the language of the cartoon, what kind of shoes can you nail to the ceiling to restore a relationship?

Question 6. Who in your family supports and leads another spouse throughout life, like the wife supports and guides her husband in the cartoon?

Moon Cheese technique

The technique is based on the plot of the cartoon *Of Mice and Moon*.

Materials and equipment: a laptop, a projector, a screen, speakers, *Of Mice and Moon* cartoon.

To find the cartoon on YouTube, type *Of Mice and Moon* in the search bar.

Time: 30 minutes.

Target audience: parents of preschool children, preschool children.

Purpose: to improve child-parent relationships.

Introduction

The technique is recommended for parents who want to improve their relationship with their children.

Viewing options

1. Parents and child watch the cartoon separately.
2. Parents and children watch a cartoon together.

Algorithms of work:

1. Only with a parent.
2. Only with a child.
3. With a parent and a child.

Description of the technique

Parents and a child watch the cartoon separately

Stage 1. Algorithm for work with parents

This is recommended for work with parents who do not understand and do not appreciate the interests and needs of their child.

Step 1. Watching the cartoon

Instructions before watching

- Now we are going to watch the cartoon Of Mice and Moon. It is a good story about two mice – a father and a son.

Step 2. Discussion after watching

Question 1. Did you like the cartoon?

Question 2. How do you feel now?

Question 3. How do you feel about the father mouse's action?

Question 4. Do you think the son mouse was happy?

Step 3. Ask the parents about their own experiences

Question 1. Did you have a dream as a child?

Question 2. How did you feel at that moment?

Question 3. Did you tell your parents about it?

Question 4. Did you tell your child about it?

Question 5. How did you talk to your child about that dream?

Step 4. Questions to parents about the child

Question 1. Do you know your child's dream(s)?

Question 2. How do you feel about their dream(s)?

Question 3. What emotions do these dreams evoke in you?

Question 4. What have you done to help your child achieve their dreams?

Question 5. What else can you do?

Question 6. Is your child as happy as a little mouse from the cartoon?

Question 7. Think about the things which must happen in your life, so that your child could experience such happy moments.

Stage 2. Algorithm for work with a child

Step 1. Watch the cartoon

Instructions before watching

- Now we are going to watch an interesting cartoon about two mice – a little mouse and his dad.

Step 2. Discussion after watching

Question 1. Did you like the cartoon?

The psychologist's comment:

- I liked that the little mouse really wanted to go to the moon, and that his dad figured out how to do it.

Question 2. Do you sometimes feel like you really want something?

Invite the child to draw (sculpt, write about, etc.) his dream.

Stage 3. Discuss with parents the possibility of fulfilling their child's dream

Parents and children watch the cartoon together.

Step 1. Watch the cartoon

Instructions before watching

- Now we are going to watch a short interesting cartoon about two mice – a little mouse and his dad.

Step 2. Discussion after watching

Question 1. Did you like the cartoon?

(The child answers first, the parent answers second).

Question 2.

The psychologist's comment.

- The little mouse dreamt of going to the moon, and his dad came up with an interesting game. He built a toy rocket in which they together flew up to the moon made of cheese. What games do you play together?

Question 3. Is there anything that you really want to do or can play together?

Step 3. Exercise. My favourite game

1. Give the task to the mom and the child to draw / sculpt / cut out their favorite game. The mother and the child perform the task separately.

2. After completing the task, the mother and the child show each other their crafts and tell what they made.

Homework: play with the child the games that you have told each other about.

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англійською мовою

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The method described in this book will allow you to effectively use movies, cartoons, shows, clips in therapeutic, consulting, training and coaching work with clients.

