

Instructions for Imagery Rescripting

1. **Enter the current scene:** Bring up an image of the situation you want to work with. What do you see? What do you hear? Is there anything you smell or taste? How does your body feel? What are your feelings now? [If there are other people in the image, ask] What do the people around you do? Now let the image start to move. Do your feelings get more intense? Go over the most intense part again in slow motion. What do you feel in your chest and your stomach?

1. **Float back:** Let the image fade, stay in touch with these feelings, and drift back in time to your adolescence or childhood. What pictures come to mind? Our mind always has images, which is why we dream in images while sleeping. What picture comes up right now? Tell me without trying to analyze anything! [Continue “talk the client into trance”, don’t pause].
2. **Let a childhood scene appear in the client’s mind, guided by the emotions:** What scene are you in? What do you see? Give me some details. Let the emotions come. Everything is on hold right now. You have the remote control in your hand. So nothing happens! You have full control. What do you feel? What do you need right now?
3. **Change perspective:** Can you picture yourself entering the scene as the adult you are now? [We recommend entering the scene as the therapist, too. We also suggest letting the client STAND UP with EYES CLOSED looking down on the chair below him or her to picture the other person and the vulnerable self on the chair. The upright body posture makes shifting into Adult mode much easier] Coming into the scene as the adult person you are now, what emotion do you feel watching the scene? What do you feel now, seeing how the child suffered? How does that resonate in your body? [If the client remains blocked, detect interfering critic mode voices, use the extension or substitution technique, or act as a role model].
4. **Reappraise the scene and choose sides:** [Look at the EFFECTS of the caregiver’s behavior on the child. Do not judge the caregiver as person. However, disregard the caregiver’s intentions and reveal this person’s self-centeredness. Let the client choose sides.]

5. **Impeach the significant others** (if constructive anger is sufficiently activated. Make the client physically stronger, if necessary):. What do you want to say or do now, making use of the power of your constructive anger? [Leave the significant others in the care of somebody else.]
How do you feel now in your body?
6. **Care for the child:** Looking at the child sitting down there now. What do you feel in your body? [Be aware whether the client is feeling some compassion for the child. If the client remains blocked, detect inter-fering critic mode voices, use the extension or substitution technique, or act as a role model]. What do you want to say or do now to care for the child?
How does the child react? What do you see in the child's eyes? What else does the child need? [Eventually, let the client take the child's role.] How do you feel now, at the end of this exercise. How about your feelings? Can you feel any difference? [Exit via safe place imagery or by going back to the initial scene.]
7. **Return to the current scene:** Now very slowly bring up the image of what you first talked about. Bring it up slowly enough that you can stay in touch with your current emotions.
8. **Find an adaptive solution:** Now that you're again in the scene we started with, what would you like to say or do to bring about a better result? Can you see yourself doing that? How do the other people react? Can you try something else?
9. **Discriminate and extract a take-home message:** [Once the scene comes to an end, ask] How do you feel? If you compare your feelings now with your initial feelings, is there a difference?
If you were to try to say, in one sentence, what you learned from this experience, what would be the take-home message? [Count back from ten to one, and let client open his or her eyes.]