Closing the Experiment - Session activity

Facilitate a structured practice of closing the experiment with preparation, reflection, and an agreed closing.

Mental health professionals | 30 minutes

Fictional example: Rae ends an exercise with one observation and no homework commitment.

0-5 min | Agree on purpose and fit

Explain the educational scope. Ask what would be useful, check readiness and access needs, and establish choices to observe, adapt, or pass. Use an ordinary example; do not solicit trauma narratives.

5-10 min | Orient with an example

Experiential work benefits from integration and return to the present. Fictional example: Rae ends an exercise with one observation and no homework commitment. Ask what is observed and what remains uncertain.

10-20 min | Practice and compare

Name what was noticed, what remains uncertain, and what should stay unfinished for now; orient to the room before leaving. Offer quiet individual work, a supported conversation, or an observing role. Compare two possible responses without evaluating people as right or wrong.

20-25 min | Reflect on meaning

What would help you leave this exploration at a manageable point? Ask what fit, what did not fit, and how culture, power, disability access, or external conditions affect the options.

25-30 min | Integrate and close

Invite one optional next step or support request. Orient to the current setting, allow an unfinished question to remain unfinished, and agree how to revisit it. End early or adapt if activation increases.

Adaptations

For a group, use fiction and no compulsory round-robin disclosure. For remote use, allow off-camera reflection and private notes. For brief use, keep one example and one question while retaining opening and closing choices.

Reflection

What adaptation or follow-up is needed?

Scope and adaptation

Keep experiments collaborative and low intensity. Chair-based or unfinished-business exploration belongs with appropriately trained clinicians after assessment, with a stop cue and an observing alternative. Do not interpret symbols, recover memories, force body focus, or use cathartic confrontation.

Original AI-assisted educational draft; independent clinical review pending. Version 1.0. Background: Gestalt Therapy: An Introduction. Full source links and scope: library.morethantherapy.org/approaches/resources/GST-A19-4