

Exercise

Professional Version | US English

Progressive Muscle Relaxation



Description

Progressive relaxation training originated in the 1930's as a treatment for tension and anxiety. Edmund Jacobsen developed a systematic and lengthy program of relaxation training which involved training clients to systematically tense and release muscle groups and to attend to the resulting feelings of relaxation (Jacobsen, 1934, 1938, 1964). Joseph Wolpe built upon Jacobsen's work and integrated relaxation techniques into his program of systemic desensitization. Wolpe's insight was that fear responses could be counterconditioned: evoking an incompatible response while simultaneously presenting a feared stimulus could eliminate a fear reaction (Wolpe, 1958). Wolpe significantly shortened the Jacobsonian relaxation training program, as well as integrating it within a theory of conditioning for the treatment of anxiety. Bernstein & Borkovec (1973) described standardized progressive muscle relaxation procedures which have subsequently been used in many research trials.

Progressive relaxation training has been demonstrated to be a clinically important intervention. Selected results include:

- Applied relaxation (incorporating progressive muscle relaxation) in the treatment of generalized anxiety disorder (GAD) resulted in treatment effects that were comparable to CBT (Dugas et al, 2010).
- A meta-analysis comparing 'less complex' interventions (including progressive muscle relaxation) with 'more complex' interventions (such as CBT, EMDR, and behavioral therapies) for a wide range of conditions found that 'less complex' treatments yielded medium effect sizes. 'More complex' interventions added only modest additional benefits (Stevens et al, 2007).
- Progressive muscle relaxation is effective in reducing acute feelings of stress and anxiety in patients with schizophrenia (Vancampfort et al, 2011).
- Progressive muscle relaxation is of debatable utility in the treatment of panic attacks and panic disorder. Some research has indicated that relaxation can be beneficial in the treatment of panic (e.g. Ost, 1988) although dismantling studies indicate that muscle relaxation is one of the less important techniques for the treatment of panic (e.g. Pompoli et al, 2018). Contemporary treatment approaches for panic tend to emphasize the importance of exposure to physical sensations of anxiety (e.g. Craske et al, 2014).

This Psychology Tools exercise is a one-page resource to help clients learn the technique of progressive muscle relaxation. Clinicians may find it helpful to practice the techniques in session and then to encourage regular self-practice.

Instructions

Clients should be given a rationale for the utility of learning progressive muscle relaxation. Bernstein & Borkovec (1973) used the following:

"Progressive relaxation training consists of learning to sequentially tense and then relax various groups of muscles, all through the body, while at the same time paying very close and careful attention to the feelings associated with both tension and relaxation."

Clients should be instructed to:

- Focus their attention on each muscle group in turn
- Tense the muscle group
- Maintain the tension for 5-7 seconds
- Release the tension
- Maintain the focus of attention on the muscle group for about 20-30 seconds and notice feelings of relaxation before moving on to the next muscle group

A recommended full sequence of muscle groups is given below:

1. Right hand and lower arm (clench your fist and tense the lower arm)
2. Left hand and lower arm
3. Right upper arm (bring your hand to your shoulder and tense your biceps)
4. Left upper arm
5. Right lower leg and foot (point your toe and gently tense the calf muscle)
6. Left lower leg and foot
7. Both thighs (press your knees and thighs tightly together)
8. Abdomen (pull your abdominal muscles in tightly)
9. Chest (take a deep breath and hold it in)
10. Shoulders and back (hunch your shoulders or pull them toward your ears)
11. Neck and throat (push your head backwards against the surface you are resting on)
12. Lips (press them tightly together without clenching your teeth)
13. Eyes (closing them tightly)
14. Lower forehead (frown and pull your eyebrows together)
15. Upper forehead (wrinkle your forehead)

Alternative muscle sequences are given below. Bernstein & Borkovec (1973) describe three muscle relaxation sequences varying in length. They recommend that clients become familiar with the full sequence before practicing with the shorter sequences. We find that some clients prefer to practice relaxation in 'upwards' or 'downwards' sequences.

Instructions

16 muscle groups	7 muscle groups	4 muscle groups	Upwards	Downwards
<ul style="list-style-type: none"> • Dominant hand and forearm (make a fist and simultaneously tense the lower arm) • Dominant biceps (bring your hand to your shoulder and tense the biceps) • Nondominant hand and forearm • Nondominant biceps • Forehead • Upper cheeks and nose • Lower cheeks and jaw • Neck & throat • Chest, shoulders, upper back • Abdominal or stomach region • Dominant thigh • Dominant calf • Dominant foot • Nondominant thigh • Nondominant calf • Nondominant foot 	<ul style="list-style-type: none"> • Dominant hand, lower arm, and bicep • Nondominant hand, lower arm, and bicep • Facial muscles (combination of frowning, squinting the eyes, wrinkling the nose, and pulling the corners of the mouth back) • Neck and throat • Chest, shoulders, upper back, and abdomen • Dominant thigh, calf, and foot • Nondominant thigh, calf, and foot 	<ul style="list-style-type: none"> • Left & right hands, arms, and biceps • Muscles of the face and neck • Chest, shoulders, back, and abdomen • Left and right thighs, calves, and feet 	<ul style="list-style-type: none"> • Left and right feet • Left & right calves • Left & right thighs • Abdomen • Left and right hands and forearms • Left and right biceps • Shoulders and upper back • Neck and throat • Lower cheeks and jaw • Upper cheeks and nose • Forehead 	<ul style="list-style-type: none"> • Forehead • Upper cheeks and nose • Lower cheeks and jaw • Neck and throat • Shoulders and upper back • Left and right biceps • Left and right hands and forearms • Abdomen • Left and right thighs • Left and right calves • Left and right feet

References

- Bernstein, D. A., Borkovec, T. D. (1973). *Progressive relaxation training: a manual for the helping professions*. Champaign, Illinois: Research Press.
- Craske, M. G., Treanor, M., Conway, C. C., Zbozinek, T., & Vervliet, B. (2014). Maximizing exposure therapy: An inhibitory learning approach. *Behaviour Research and Therapy*, 58, 10-23.
- Day, M. A., Eyer, J. C., Thorn, B. E. (2014). Therapeutic relaxation, in *The Wiley Handbook of Cognitive Behavioral Therapy*. John Wiley & Sons, Ltd.
- Dugas, M. J., Brillon, P., Savard, P., Turcotte, J., Gaudet, A., Ladouceur, R., Leblanc, R., & Gervais, N. J. (2010). A randomized clinical trial of cognitive-behavioral therapy and applied relaxation for adults with generalized anxiety disorder. *Behavior Therapy*, 41(1), 46-58.
- Jacobson, E. (1934). *You must relax*. New York: McGraw-Hill.
- Jacobson, E. (1938). *Progressive relaxation*. Chicago: Chicago University Press.
- Jacobson, E. (1964). *Anxiety and tension control*. Philadelphia: Lippincott.
- Öst, L.-G. (1988). Applied relaxation vs progressive relaxation in the treatment of panic disorder. *Behaviour Research and Therapy*, 26(1), 13–22.
- Pompoli, A., Furukawa, T. A., Efthimiou, O., Imai, H., Tajika, A., & Salanti, G. (2018). Dismantling cognitive-behaviour therapy for panic disorder: a systematic review and component network meta-analysis. *Psychological Medicine*, 48(12), 1945-1953.
- Stevens, S. E., Hynan, M. T., Allen, M., Braun, M. M., & McCart, M. R. (2007). Are Complex Psychotherapies More Effective than Biofeedback, Progressive Muscle Relaxation, or Both? A Meta-Analysis. *Psychological Reports*, 100(1), 303–324.
- Vancampfort, D., De Hert, M., Knapen, J., Maurissen, K., Raepsaet, J., Deckx, S., ... Probst, M. (2011). Effects of progressive muscle relaxation on state anxiety and subjective well-being in people with schizophrenia: a randomized controlled trial. *Clinical Rehabilitation*, 25(6), 567–575.
- Wolpe, J. (1958). *Psychotherapy by reciprocal inhibition*. Stanford: Stanford University Press.

Progressive Muscle Relaxation

Progressive muscle relaxation is a form of relaxation training that can teach you how to achieve deep physical relaxation. You will tense groups of muscles, then release the tension and pay close attention to feelings of relaxation. Relaxation should be enjoyable, so if any part of the exercise is too difficult skip over it and move on to the next part. If you have any injuries be careful not to stress that part of your body.

Preparation

Choose a quiet place where you will not be disturbed. You can relax while lying down on a firm bed or couch, or sitting comfortably in a chair with your head well-supported. Loosen any tight clothing and make sure that you will be comfortably warm.

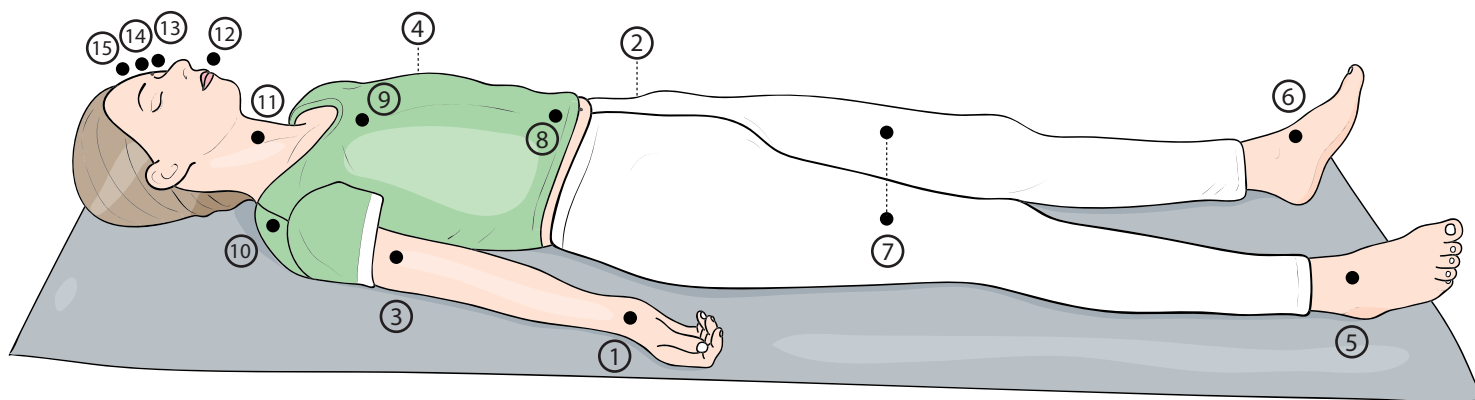
Instructions

For each group of muscles you should:

1. Focus your attention on that muscle group.
2. Tense those muscles as instructed.
3. Maintain the tension for about 5 to 7 seconds.
4. Stay focused on that muscle group for about 20 to 30 seconds before moving on, noticing feelings of relaxation.

Go through the sequence three times:

1. **Tense & relax:** tense the muscles, maintain the tension for few moments, then relax.
2. **Lightly tense & relax:** tense the muscles only very slightly, then relax.
3. **Relax only:** just pay attention to each muscle group and decide to relax it.



Recommended sequence

1. **Right hand and lower arm** (clench your fist and tense the lower arm)
2. **Left hand and lower arm**
3. **Right upper arm** (bring your hand to your shoulder and tense your biceps)
4. **Left upper arm**
5. **Right lower leg and foot** (point your toe and gently tense the calf muscle)
6. **Left lower leg and foot**
7. **Both thighs** (press your knees and thighs tightly together)
8. **Abdomen** (pull your abdominal muscles in tightly)
9. **Chest** (take a deep breath and hold it in)
10. **Shoulders and back** (hunch your shoulders or pull them towards your ears)
11. **Neck and throat** (push your head backwards against the surface on which you are resting)
12. **Lips** (press them tightly together without clenching your teeth)
13. **Eyes** (closing them tightly)
14. **Lower forehead** (frown and pull your eyebrows together)
15. **Upper forehead** (wrinkle your forehead)

Psychology Tools develops and publishes evidence-based psychotherapy resources. We support mental health professionals to deliver effective therapy, whatever their theoretical orientation or level of experience.

Our digital library encompasses information handouts, worksheets, workbooks, exercises, guides, and audio skills-development resources.

Our tools are flexible enough to be used both in-session and between-session, and during all stages of assessment, formulation, and intervention. Written by highly qualified clinicians and academics, materials are available in digital and printable formats across a wide range of languages.



Resource details

Title: Progressive Muscle Relaxation

Type: Exercise

Language: English (US)

Translated title: Progressive Muscle Relaxation

URL: <https://www.psychologytools.com/resource/progressive-muscle-relaxation>

Resource format: Professional

Version: 20230721

Last updated by: JP

Terms & conditions

This resource may be used by licensed members of Psychology Tools and their clients. Resources must be used in accordance with our terms and conditions which can be found at: <https://www.psychologytools.com/terms-and-conditions/>

Disclaimer

Your use of this resource is not intended to be, and should not be relied on, as a substitute for professional medical advice, diagnosis, or treatment. If you are suffering from any mental health issues we recommend that you seek formal medical advice before using these resources. We make no warranties that this information is correct, complete, reliable or suitable for any purpose. As a professional user, you should work within the bounds of your own competencies, using your own skill and knowledge, and therefore the resources should be used to support good practice, not to replace it.

Copyright

Unless otherwise stated, this resource is Copyright © 2023 Psychology Tools Limited. All rights reserved.