



# The Milton H. Erickson Foundation NEWSLETTER

Vol. 25, No. 2

Summer Issue (Evolution)

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## I N T E R V I E W

### *Scott Miller, Ph.D.*

*"Scott Miller Ph.D. is co-director for the Institute for the Study of Clinical Change out of Chicago, Illinois. He is the author and co-author of twenty articles and seven book on treatment and research in Psychotherapy including his landmark book The Heroic Client: Principles of Client-Directed, Outcome-Informed Clinical Work (Jossey-Bass, 2000; Revised, 2004). Miller is a frequent invited presenter at the Milton H. Erickson Foundation conferences and known for his work with the homeless and other traditionally under served populations.*

*Scott was interviewed by Jim Walt, MA, LMFT, director of the Santa Cruz Center for Counseling and Consultation, and past president of the "California Association of Marriage and Family Therapists."*

**Jim Walt:** I've had the pleasure of knowing you for about six years now-- first as an author, researcher,



and workshop presenter, and now as a friend. I've watched your work evolve considerably in that time. In fact, I can remember a time when I was concerned for you. You wrote about that time in an article entitled, *Losing Faith* (Miller, 2004).

**Scott Miller:** I've always gone from crisis to crisis in terms of my

development as a therapist. And actually, the first major crisis in my career was at the outset! Others seemed much more certain of their ability and skills that I did. I'd watch my supervisors or fellow students work and was surprised, and secretly envious, of the confidence with which they stated their diagnostic opinions and offered their technical expertise. I, on the other hand, was plagued by doubt. Even later, as a fully bona fide treatment professional, seated opposite a particular client, I often felt like I had missed the one crucial day in graduate school—that one day when they taught you the secret handshake, the secret ingredient in the "Big Mac" of therapy.

**JM:** That sounds very familiar, personally and professionally. The students I teach at John F. Kennedy University want to know, "what do we do?" What did you do to fill the gap?

*See INTERVIEW on page 18*

## EVOLUTION OF PSYCHOTHERAPY CONFERENCE: *A Tribute to the Masters* December 2005, Anaheim

Plans are under way for the fifth *Evolution of Psychotherapy Conference*, December 7-11, 2005 (Wed-Sun), with a special Pre-conference workshop with Patch Adams, Tuesday, December 6, 2005. The Conference will be held at the Anaheim Hilton & Towers and Anaheim Convention Center, in Anaheim, California. *More than 5,000 professionals and students, representing every State in the U.S. and more than 30 countries, are currently registered for this landmark Conference!*

The Faculty include Albert Bandura, Albert Ellis, William Glasser, John & Julie Gottman, Mary Gouling, Jay Haley\*, James Hillman, Otto Kernberg, Arnold Lazarus, Marsha Linehan, Alexander Lowen, Cloé Madanes, James Masterson, Donald Meichenbaum, Salvador Minuchin, Erving Polster, Ernest Rossi, Martin Seligman, Francine Shapiro, Thomas Szasz, Ken Wilber, Michael

*See CONFERENCE on next page*

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**EDITOR'S COMMENTS**

I remember Virginia Satir telling me that the first Evolution of Psychotherapy Conference in 1985 was the "...best conference in which I have ever participated." The fifth Evolution of Psychotherapy Conference slated for December 2005 promises to be no less spectacular.

Each of this year's faculty represents an aspect of how psychotherapy has and is continuing to evolve. Venerable pioneers such as Albert Ellis, Tomas Szasz, Otto Kernberg, Albert Bandura, William Glasser, Salvador Minuchin, and Arnold Lazerus overlap with current visionaries such as Ken Wilber, Michael White, Scott Miller, Francine Shapiro, and Mary Catherine Bateson to mention only a few of the faculty. Therefore, the next two issues of the newsletter are dedicated to the upcoming 5th Evolution of Psychotherapy Conference.

We have two exceptional interviews for this newsletter to commemorate this Special Edition. Jim Walt interviews Scott Miller and Annellen and Alex Simpkins dialog with Catherine Bateson. Both Miller and Bateson look at our current world through new lenses and question basic assumptions. They explore the process of experience and effectiveness that expand options into many different possibilities. For both, the first rules of understanding and learning are the very Ericksonian ones of curiosity and having a comfort in *not* knowing.

To put the fifth Evolution of Psychotherapy Conference in context, our *Historical Times* column

presents some excerpts from *The Lourdes of Arizona* by Carlos Amantea, who was both insightful and creatively humorous in covering the first Evolution of Psychotherapy Conference presented in Phoenix in 1985. Later, George Burns (our Contributor of Note this issue) gives his energetic book review of the anthology *The Fourth Evolution of Psychotherapy: A Meeting of the Minds* that covered the fourth Evolution of Psychotherapy Conference presented in 2000.

I have been an admirer of Thomas Szasz for as long as I can remember. He has spent much of his life questioning the unquestioned assumptions that have driven many of our mental health systems. In our *Ethical Directions* column, Szasz presents the conclusions to his questionings in his *Reflections on Ethics and Politics*.

In our *Case Reports* section, I asked Jeff Zeig to present one of his one-session interventions. In his *Ericksonian Family Therapy with a Problem Child*, he demonstrates a truly multifaceted approach that encompasses his learnings and experience as a master therapist. We would have needed to dedicate the entire newsletter to adequately cover all of the nuances and elegantly executed interventions on this one session. In this article, Zeig gives us the essence of the attitude and perspective needed to understand the elements that go beyond technique that makes this session so effective.

We have also reviewed some of the books and videos from this year's Evolution faculty to give a flavor of their diversity.

Nicholas A. and Janet L. Cummings' *The First Session with Substance Abusers: A Step-by-Step Guide* is reviewed by Maria Escalante Cortina. As the founder of the four campuses of the California School of Professional Psychology, National Academies of Practice, American Managed Behavioral Healthcare Association, the National Council of Professional Schools of Psychology; the retired Chief of Mental Health Care for Kaiser Permanente; and the former executive director for the Mental Research

See *COMMENTS* on page 4

White, Irvin Yalom, and Jeffrey Zeig.

The special State of the Art Faculty includes David Barlow, Judith Beck, Claudia Black, Nicholas Cummings, Robert Dilts, Harville Hendrix, Harriet Lerner, Scott Miller, Christine Padesky, Daniel Siegel, Bessel van der Kolk, and Michele Weiner-Davis.

The Keynote Addresses will be given by Patch Adams, Mary Catherine Bateson, and Aaron Beck.

**Visit the NEW Evolution Web Site!**  
**[www.evolutionofpsychotherapy.com](http://www.evolutionofpsychotherapy.com)**

The new Evolution Conference web site has been launched! Register Online, view the full Conference brochure, make hotel and travel reservations, print Volunteer application forms, and stay informed on Conference activities. Also included is the new *Registrants Corner*, offering FREE audio streams of past Evolution of Psychotherapy Conference speakers, such as the currently featured *Carl Rogers Conversation Hour* (1985 Evolution of Psychotherapy Conference). Don't miss the web log, registrants' guestbook, Online store, workshop handouts, and more!

To register for this exciting event go to the Evolution Conference web page, or contact American Continuing Education, Inc. (ACEI), P.O. Box 17980, St. Paul, MN 55117; Tel, 651-487-3001; Fax, 651-489-3387; E-mail, [miltonerickson@cmehelp.com](mailto:miltonerickson@cmehelp.com)

To receive the full Conference brochure by mail contact The Milton H. Erickson Foundation, Inc., 3606 N. 24th Street, Phoenix, AZ 85016-6500; Tel, 602-956-6196; Fax, 602-956-0519; Web, [www.evolutionofpsychotherapy.com](http://www.evolutionofpsychotherapy.com); E-mail, [office@erickson-foundation.org](mailto:office@erickson-foundation.org) Please include your complete mailing address with your request.

The fifth *Evolution of Psychotherapy Conference* is sponsored by The Milton H. Erickson Foundation, Inc., with co-sponsorship by California State University, Fullerton, Department of Counseling Psychology.

The Online version of **The Milton H. Erickson Foundation Newsletter** can be found at  
**<http://www.erickson-foundation.org/news>**

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### Pre-Conference Day



with  
**Patch Adams**  
Tuesday, December 6

- Morning Workshop on Joy
- Lunch with Patch!
- Afternoon Workshop on Love

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*"The most outstanding event in the history of psychotherapy."*

— Cloé Madanes

## The Evolution of



## Psychotherapy

**Where:** Anaheim, California **When:** December 7-11, 2005  
(Anaheim Hilton & Towers and Anaheim Convention Center) (Wednesday - Sunday)

**Why:** *"The world's biggest, best organized, most ecumenical psychotherapy event."* — Thomas Szasz, MD

### Featuring the Masters...

Albert Bandura, Albert Ellis, William Glasser, John & Julie Gottman, Mary Goulding, Jay Haley, James Hillman, Otto Kernberg, Arnold Lazarus, Marsha Linehan, Alexander Lowen, Cloé Madanes, James Masterson, Donald Meichenbaum, Salvador Minuchin, Erving Polster, Ernest Rossi, Martin Seligman, Francine Shapiro, Thomas Szasz, Ken Wilber, Michael White, Irvin Yalom, Jeffrey Zeig

### and Special State-of-the-Art Faculty...

David Barlow, Judith Beck, Claudia Black, Nicholas Cummings, Robert Dilts, Harville Hendrix, Harriet Lerner, Scott Miller, Christine Padesky, Daniel Siegel, Bessel van der Kolk, Michele Weiner-Davis

### Keynote Speakers...

Patch Adams, Mary Catherine Bateson, Aaron Beck

**Conference Registration Deadline  
extended to September 9, 2005**

Complete Conference Program...

[www.evolutionofpsychotherapy.com](http://www.evolutionofpsychotherapy.com)

## CONTRIBUTOR OF NOTE

**George Burns**

By Teresa Garcia

Director, Milton H Erickson Institute of Madrid

At his home in Perth, Western Australia, George Burns runs a busy private practice, is Director of The Milton H. Erickson Institute of Western Australia and The Hypnotherapy Institute of Western Australia, and an adjunct senior lecturer at Edith Cowan University. He founded Australia's first, and for more than a decade *only*, Erickson Institute in 1984.

I first met George in the High Arctic, just 600 miles from the North Pole where I had come to co-participate in a workshop/study tour he was leading. The tour seemed typical of George and his desire to combine his passions for life, adventure travel, and psychology.



Cruising the Arctic Ocean in an ice-strengthened vessel, we had regular onboard workshops on hypnosis. Floating along the face of glaciers in rubber dinghies, walking the stark shorelines, or looking for polar bears, reindeer, walrus and Arctic fox, we engaged in exercises in ecotherapy, or what George calls "Nature-Guided Therapy." If someone is able to insert hypnosis in a naturalist model it is

George, not only because of his love of nature, but because he speaks in such a natural way, utilizing what is around, that it's hard to tell when the absorption into trance starts or finishes. His style is natural and pleasant.

When not distracted by the forested valley views from his study window, or the variety of birdlife and marsupials at his backdoor, George is probably writing another of his numerous articles or book chapters. He has published five much-acclaimed books varying in subjects from hypnosis to ecotherapy (*Nature-Guided Therapy*, 1998), metaphors (*101 Healing Stories*, 2001 and *101 Healing Stories for Kids and Teens*, 2004) and happiness (*Standing Without Shoes: Creating happiness, relieving depression, enhancing life*, 2003) co-authored with Dr Helen Street and a foreword by the Dalai Lama. His books have been published in six languages.

I have found George is the sort of person who, when he does something, does it well. His workshops are well-researched, yet essentially practical in terms of the clear skills that they offer therapists. He is present, listening to the client or workshop attendant, absorbing and registering a lot of details that he later utilizes. A warm and accessible person, he brings wit and wisdom into his work, especially through his storytelling. [He is looking for stories of using metaphor in therapy for a new book. If you have any ideas you would like to submit for consideration, he can be contacted at [burnsg@dialix.com.au](mailto:burnsg@dialix.com.au).]

Finally, let me say how George not only enjoys life but also congruently communicates to clients and friends that, "life is great." During one of his workshop/study tours, The King of the high Himalayan Kingdom of Bhutan declared Burns is more interested in "gross national happiness" than gross national product. George Burns is a true Contributor of Note, not only to the Newsletter, but to the world as a therapist, a teacher and as a person.

**COMMENTS** *continued from page 2*

Institute at Palo Alto, Nicholas Cummings represents the personification of the evolution of psychotherapy delivery systems. With this same eye for efficiency and removing the fluff, Cummings has filled this volume with nuggets of information.

Deborah Beckman presents a concise review of the classic *The Marriage Clinic: A Scientifically Based Marital Therapy* by John Gottman. Gottman is renowned for his research on marital stability and divorce prediction, involving the study of emotions, physiology, and communication. Gottman cuts through to what therapeutic assumptions and schools of thought are and what are not backed by the research.

Will Handy of the Milton H. Erickson Institute of Dallas, reviews *Healing Trauma: Attachment, Mind, Body, and Brain*, an anthology edited by Marion F. Solomon and Daniel J. Siegel. This collaborative work is Siegel's most recent contribution in linking brain science to behavior since his *The Developing Mind: How Relationships And The Brain Interact To Shape Who We Are* (Guilford,

1999) and *Parenting from the Inside Out: How A Deeper Self-Understanding Can Help You Raise Children Who Thrive* (with Mary Hartzell, PenguinPutnam, 2003). *Healing Trauma* includes chapters written by other Evolution faculty such as Bessel van der Kolk and Francine Shapiro.

Handy then reviews Robert Dilts' video *Integrating Conflicting Beliefs* filmed at the ninth International Congress on Ericksonian Approaches to Hypnosis and Psychotherapy, December 3, 2004. Handy shows the strength of this video is in how Dilts is able to integrate a complex set of symptoms into a coherent treatment form. Given the limited time he is give and the complexity of the client, Dilts presents a good example for the beginning and intermediate therapist.

In addition to the articles relating to the Evolution of Psychotherapy Conferences, we have set aside a special area for the Milton H Erickson Foundation's continuing evolution. We start with an update by Roxanna Erickson Klein our new *Director of the Erickson Foundation Archives*.

Roxanna Erickson Klein actively rejects the limelight so not many readers know the incredible amount of dedication, work and energy she puts into making the newsletter the professional communication organ that it is. Her contribution to the Foundation is no less involved or appreciated. Thank you!

Another active contributor to the newsletter is George Burns, our current *Contributor of Note*. Teresa Garcia, the director of the Milton H Erickson Institute of Madrid, does a wonderful job of communicating some of the things that make Burns the epitome of the Erickson philosophy. Whatever he teaches in his workshops in the way of techniques always turns out to be a metaphor for a bigger truth and an opportunity to view from a wider perspective. For Burns, the techniques never overshadow the deeper understandings.

In the *Facets and Reflections* column, Melba Vickery gives us a delightful taste of what it was like in the 50's when Dr. Fredericka Freytag, a well known psychoanalyst introduced her to Erickson. Much has truly

evolved since then and much has withstood the test of time.

The omnipresent Marilia Baker interviews Tamer Dovucu, the major force behind the establishment of The Milton H. Erickson Institute of Istanbul for her article, *Introducing the Institutes: The Evolution of a Concept*. Between Baker's and Dovucu's energy, I expected the Newsletter to spontaneously combust at any moment.

As I am reviewing this Special Edition, I am getting more excited in anticipation of the *Fifth Evolution of Psychotherapy Conference* to be held in Anaheim, California this December. I can hardly wait to reconnect with some of the original faculty from the previous *Evolution* conferences and to meet the recent inductees to this prestigious conference. Please join me in this unique cross section of history.

Rick Landis, Ph.D.  
Executive Editor



# C A S E R E P O R T

## *Ericksonian Family Therapy with a Problem Child*

Case Report by Jeffrey K. Zeig, Ph.D.

Harold called me because he was concerned about his ten-year-old son, Bob, who was phobic about gravel roads. Bob's phobia had generalized to the extent that he had become reticent about leaving his home. I told Harold that I would be willing to provide a one-hour consultation, if he would bring his wife, June, and his son.

Bob was the most hyperactive child I have ever seen in my private practice. Based on the phone call, I had no idea that ADHD was part of the constellation. Bob couldn't stop fidgeting. As he entered my office, he poignantly announced, "I'm the crazy person." My heart went out to him.

I did not want Bob to assume a negative self-definition. I gave him a difficult wooden puzzle consisting of two pieces that fit together to make a pyramid. Bob struggled but could not solve the puzzle. I told him that I could not solve the puzzle when I first got it. I called the friend who sent me the puzzle and asked, "Where's the third piece?" There was no third piece.

I took Bob out of the office into the waiting room. I showed him how to solve the two-piece pyramid puzzle. I then instructed him to give the puzzle to his mother and father. Smiling, he strolled back into the office. Then Bob and I watched as his mother and father struggled to put the puzzle together. They could not easily do something that he knew how to do. Now Bob was one-up.

Building on the situation, I said to Bob and his parents, "I'm an expert at helping families solve puzzles." I wanted to define the solution as existing within the family.

Harold told me how Bob's problem began. The family was driving on a gravel road when suddenly a mechanical failure caused the car to spin out of control. A very good driver, Harold brought the car to a safe stop, but Grandmother, who was in the back seat with Bob, completely panicked. Then Bob panicked, and

subsequently refused to get into a car. Eventually he refused to be in any place where there was a gravel road. When Bob went on to say that he was afraid of being out of control, Harold had a new insight. He had not previously understood that aspect of his son's problem.

I remembered a dictum from Gestalt therapy: "If you're in terror, play out the terrorizer." If I can get the fearful person to play the part of the fear monger, it may breed a solution. Continuing my redefinition of their familial problem, I said, "Mr. Fear has attacked this family." I then asked Bob to show me Mr. Fear. Bob went to the far corner of the office and became Mr. Fear, attacking his family.

I knew from experience that analogies can generate a solution, so I inquired, "Tell me, what is Mr. Fear like?" Bob asked me if I watched Power Rangers, which I knew only vaguely. "Mr. Fear is Drilla Monster," he continued. "Be Drilla Monster and attack your family." So Bob pantomimed being Drilla Monster attacking his family.

Next, I thought about the Ericksonian principle of eliciting resources. I knew that there must be a resource in this family to deal with Bob's fears. Since Bob had offered the metaphor of Power Rangers, I asked him, "What power do you have?" "I know karate," Bob replied. "Show me how you can use karate to fight off Drilla Monster," I said. Bob successfully fought back the imaginary Drilla Monster, pushing him out of the consulting room.

Next, I explained the therapy. Whenever Mr. Fear, Drilla Monster, attacked the family, they were to stop and convene a meeting of all the Power Rangers who would decide together how to use their powers to defeat Drilla Monster. I then added, "I have two other therapies that I would like you to practice." Because June seemed exhausted and overwhelmed, I directed the tasks to the father and son. Harold was bright-eyed and seemed to have a lot of energy to devote to Bob. I explained that each morning for a week, Harold and Bob should practice being out of control. Bob would go into the backyard and play being out of control and Harold

would coach him about being better at being out of control. Then Harold would act out of control and Bob would coach him about being out of control. My covert design was to turn a problem component into a game. They agreed to the therapy.

Then I offered, "I have another therapy for Bob. I want you to write your name in my driveway." I live in Phoenix, Arizona, in the desert. My driveway is made of gravel. I told him that I did not even allow my daughter to write in the gravel, but that I would like him to leave his mark there showing that he had been at my home office. My technique was a symbolic desensitization. Bob would have to slide on my driveway as he shuffled his shoes around to put his name in the gravel. I would have him violate his phobia about gravel. Adequate psychotherapy with a phobia can be achieved when one gets the patient to violate the phobic pattern, even on a symbolic level.

In the one session therapy, I had a

series of heuristics that could generate solutions. In this case, the most important heuristic was faith. There were three components of this faith: One, I had faith in my ability to *utilize* whatever they brought me. Most of my professional contributions in print during the past ten years have been explications of Milton H. Erickson's utilization method. I have made utilization a center point of my therapy. The second aspect of faith also came from what I learned from Erickson. I had faith in the family. I had faith that they had a resource in their system that would be adequate for solving the problem. The job of the psychotherapy would be to help them access that resource experientially. Finally the third part of this faith was in myself. I knew that I had surmounted similar problems. I also had used methods to cure myself similar to those I prescribed for them. If I could do it, I knew they could, too.

*Jeffrey Zeig, PhD will present at the December 2005 Evolution of Psychotherapy Conference, [www.evolutionofpsychotherapy.com](http://www.evolutionofpsychotherapy.com)*

Friday Evening, December 9, 2005

meet your favorite authors

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meet our renowned faculty/authors  
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**The Evolution of Psychotherapy Conference**  
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# INTRODUCING THE INSTITUTES

## The Evolution of a Concept: The Milton H. Erickson Institute of Istanbul.

[www.nlpdegisim.com](http://www.nlpdegisim.com)

Email: [tamerdv@yahoo.com](mailto:tamerdv@yahoo.com)

Interviewed by Marilia Baker, MSW

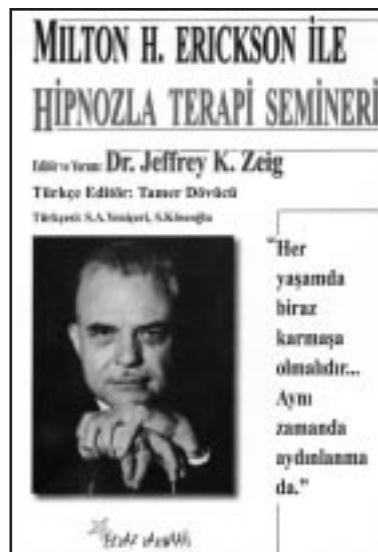


The Milton H. Erickson Institute of Istanbul, Turkey was founded in 2004. It is located on the campus of Yeditepe University<sup>1</sup>, in conjunction with the NeuroLinguistic Programming Research and Application Centre. The founding directors are Hakan Bilgen, MD, Tamer

Dovucu, MA, and Arzu Tatli, MD. There also are ten associated founding members who are located in other cities of this vast country of nearly 70 million inhabitants. Tamer Dovucu, the major force behind the establishment of the Institute and the NLP Research Centre, plans to disseminate Ericksonian methods swiftly and efficiently throughout the ten main cities in the country, particularly in Ankara, its capital. The location of this Institute in Istanbul, the former capital of three empires (Eastern Roman, Byzantine and Ottoman) is a propitious metaphor for what its founding directors want to accomplish. Istanbul, a cosmopolitan city of 13 million, stands literally as a *bridge* between two major, formidable modern worlds and cultures - the European and the Asian - through the Strait of Bosphorus.

Says Dovucu: "I think we all started with great admiration at the mastery of Dr. Milton H. Erickson. I remember reading my first book by Erickson in 1996. Then I translated his language patterns into Turkish, because our grammar is quite different from English. Thus, the story started. I began to learn NeuroLinguistic Programming in London, and read almost all books by Erickson and on Erickson, except *Advanced Techniques in Hypnosis*." When Dovucu returned to Turkey in 1998, he had already amassed more than 2,000 hours of practice in NLP and Ericksonian techniques. "Finally," he adds, "I mostly created my own style. I believe that I also have developed my own model of therapy - like a big picture about human thinking processes, different levels of thinking in a single mapping -- based upon Erickson's powerful model and techniques." Dovucu plans to introduce his innovative concepts and model to our Newsletter readers in a separate article.

He continues: "Since 1998 I have been teaching about Erickson and his techniques (teaching about Erickson himself has always been more important to me than teaching his techniques) to my students, to my health profession associates and to the readers of our magazine *Personal Growth and Change*. Since 1999, when we started publishing the magazine, for the first time in the history of our country, Turkish people have read something about Erickson's life, his anecdotes and stories". Dovucu recently published his translation of Jeffrey Zeig's *A Teaching Seminar with Milton H. Erickson*. He is in the process of completing Zeig and Geary's *Handbook of Ericksonian Therapy*. Co-director, Arzu Tatli,



M.D., an NLP trainer, achieved her specialization in psychiatry (1999) from Bakirkoy Mental Hospital, the largest in Turkey. Currently in private practice, she combines her passion for Ericksonian approaches with cognitive-behavioral and psychodrama methodologies. In addition to editing medical research texts, she is working on a book about rape.

Dovucu, his co-directors, and associates chose to establish the Institute in the academic environment because he firmly believes that Erickson's teachings and that of his followers must *flourish* and *thrive* in a noncommercial, academic setting. The Institute's goals and objectives are the following:

### 1. Research:

- To carry out research about Turkish people and their behavioral patterns;
- To carry out research on Sufism<sup>2</sup> as a model for thought, behaviors and action. Since its inception in 2004 the Institute has been studying the thought processes and thinking patterns of great Sufi masters, both living and deceased. Dovucu informs me that they have identified 17 basic awareness steps within the growth of a Sufi master. Currently they are involved in further identifying sub-steps, a process which will take about two to three more years.
- Modeling accelerated language learning. According to Dovucu, this project's first phase was successfully completed, having as main *motif* the following question: "If Milton H. Erickson taught English, *how* would he do it?" The Research Centre has, likewise, submitted project proposals to the Ministry of Education about accelerated learning.
- Modeling leadership in business & academia.

In terms of applications, both the Research Center and the MHE Institute aim at fostering personal growth and therapeutic applications. The first Intensive course on hypnosis and psychotherapy, was recently successfully (March 21-27/2005) carried out by the staff (picture). Jeffrey Zeig and Brent Geary have been invited to teach the next level of training.

As indicated in the beginning of this article, the Milton H. Erickson Institute of Istanbul is a vibrant, pulsating, living example of "a world of unlimited possibilities". Cross-fertilization between patterns of a venerated Eastern tradition for a healthy way of life with the profound teachings in hope and resilience by a New World master truly demonstrate the evolution of Milton H. Erickson's concept: life delightful.

<sup>1</sup> Yeditepe University, named after the legendary seven hills of Istanbul, is at the forefront of modern academic institutions in Turkey. Its mission is to educate the country's youth to be "fully capable of meeting the highest demands of the contemporary modern world".

<sup>2</sup> Sufism, a thousand-year-old system of Moslem mysticism, "is a way of life in which a deeper identity is discovered and lived. This deeper identity, or essential Self, is beyond the already known personality and is in harmony with everything that exists. This Self has abilities of awareness, action, creativity, and love that are far beyond those of the superficial personality. Eventually, it is understood that these abilities belong to a greater Being which, each of us, individualize in our unique way, while never being separate from it." (author unidentified)

<sup>3</sup> Life isn't something you can give an answer to today. You should enjoy the process of becoming who you are. There is nothing more delightful than planting flower seeds and not knowing what kind of flowers are going to come up."



## Reflections on Ethics and Politics I

Thomas Szasz

(I learned long ago in my high school debate teams that I had nothing to fear of the other's answers if I could get them to ponder the wrong question. Thomas Szasz has spent his life exploring the nature of the right ethical questions. The following is his response to my asking him to reflect on where these questions lead him. – Ed.)

Juvenal (60-c. 130) asked: "*Quis custodiet ipsos custodes?*" ("Who shall guard the guardians?"). History answers: no one. This is the central problem of ethics and politics.

\*\*\*

The liberal-scientific ethic: if it's bad for you, it should be prohibited; if it's good for you, it should be required.

The therapeutic ethic: convict and punish the innocent, and call it mental hospitalization; diagnose and excuse the guilty, and call it the, "insanity defense."

\*\*\*

Justifications for treatment:

For the true believer in medicine: disease.

For the medical autocrat: the need for treatment.

For the loyal pharmacrat: a court order.

For the libertarian: the patient's consent.

Ignoring or confusing these conflicting moral premises is the source of most of our problems in medical ethics.

\*\*\*

In the nineteenth century, the false explanation called "ether" obstructed advances in physics and cosmology. Today, the false explanation called "mental illness" obstructs advances in psychology, psychiatry, criminology, and drug policy.

\*\*\*

Three types of tyranny:

Economic: The authorities pauperize the people.

Political: The authorities enslave the people.

Psychiatric: The authorities invalidate the people.

\*\*\*

In 1843, the Marquis de Custine observed: "The political state of Russia may be defined in one sentence: it is a country in which the government says what it pleases, because it alone has the right to speak."<sup>1</sup>

In the modern totalitarian society, this remains the case: only the right man has the right to speak, and what he says is true.

In the modern democratic society, everyone has the right to speak. But when the right man lies, his falsehood is accepted as truth, and when the wrong man speaks verity, it is dismissed as a lie.

\*\*\*

People dream of making the virtuous man powerful, so they can depend on him. Since they cannot do that, they pretend that the powerful man is virtuous and glory in being victimized by him.

\*\*\*

The traditional scapegoat was deprived of life, liberty, and property. Since the end of the Second World War, we have developed a new way of making use of the scapegoat: instead of *taking* away his life, liberty, or property, we *give* him entitlements.

The modern American scapegoat is not persecuted, he is pampered. The goal is not to liquidate him, but to render him into an object of loathing. Instead of eliminating the scapegoat from the body politic, he is incorporated into it as an

See *ETHICS* on page 11

# 5 LEVELS Fundamentals of Ericksonian Hypnotherapy A 13-hour Course with the Masters

### Fundamental Hypnosis Level 1 Induction Techniques

— Stephen Lankton, M.S.W., DAHB

This lecture, demonstration and practice workshop will go step-by-step through the phases of trance induction. The differences between well-known methods will be explained.



### Fundamental Hypnosis Level 2 Fundamental and Easy to Learn Ideodynamic Approaches to Therapeutic Hypnosis

— Ernest Rossi, Ph.D.

This session will present group and individual demonstrations of basic ideodynamic approaches to therapeutic hypnosis utilizing Rossi's innovative activity-dependent creative work with hand signaling.



### Fundamental Hypnosis Level 3 Getting a Good Trance Going

— Betty Alice Erickson, M.S., LPC

Various trance inductions will be demonstrated with volunteers. Each induction will be discussed with indications for its uses. Differences between formal and conversational trances will be demonstrated with rationales for choosing each. Multiple practice opportunities will be given.



### Fundamental Hypnosis Level 4 Accessing and Contextualizing Resources in Hypnosis

— Michael Yapko, Ph.D.

Milton Erickson's approach typically featured finding hidden personal resources and extending them into situations where they would help the client. We will first see a portion of this basic, but valuable, strategy in a video of Dr. Erickson; then have the opportunity to practice this strategy in a structured practice session.



### Fundamental Hypnosis Level 5 The Use of the Therapist's Self in Hypnotherapy

— Stephen Gilligan, Ph.D.

This workshop describes how a therapist can join a client's reality to hypnotically generate a 'therapeutic trance' that includes both the problem and resources, as well as the client's perspectives and the therapist's perspectives. In this way, a therapeutic trance is one that 'transcends yet includes' the client's problem in a way that allows new freedoms and possibilities.



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## UPCOMING TRAINING

DATE	TITLE / LOCATION / LEADER	CONTACTS
<b>2005</b>		
9/15-17	Family Therapy / Graz, Austria / Jeffrey K. Zeig, Ph.D.	1.
9/18-24	European Society of Hypnosis Congress / Malta / Invited Presenters	2.
10/24-28	Intensive Training in Ericksonian Approaches to Brief Hypnotic Psychotherapy - <i>Fundamental</i> / Phoenix, Ariz. / Brent Geary, Ph.D., Stephen Lankton, MSW, DAHB, Zeig, and Invited Presenters	3.
10/31-11/4	Intensive Training in Ericksonian Approaches to Brief Hypnotic Psychotherapy - <i>Intermediate</i> / Phoenix, Ariz. / Geary, Lankton, Zeig, and Invited Presenters	3.
10/20-23	Mujeres, Hombres, Parejas, en Tiempos de Retos y Oportunidades / Querétaro, México / Invited Faculty	4.
11/3-6	Kindertagung / Heidelberg, Germany / Invited Faculty	5.
11/10-13	Intensive Supervision Workshop in Ericksonian Clinical Hypnotherapy - Master Class / New York City, NY / Zeig	6.
12/7-11	Evolution of Psychotherapy Conference / Anaheim, Calif. / Invited Faculty	3.
<b>2006</b>		
1/19-25	Ericksonian Therapy / Istanbul, Turkey / Zeig	7.
2/2-5	Intensive Supervision Workshop in Ericksonian Clinical Hypnotherapy - Master Class / New York City, NY / Zeig	6.

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7. Email, [tamerdvc@yahoo.com](mailto:tamerdvc@yahoo.com)

To submit a listing for Upcoming Trainings, please send dates, title of workshop, venue, city/state/country, list of presenters, and complete contact information ONLY. Information must be sent in the format above. A \$10 fee, per listing, is required. Deadline for the 2005 Fall/Winter Issue (November) is September 30, 2005. All workshop submissions are subject to approval by the Erickson Foundation. For more information, please contact the Erickson Foundation at 602/956-6196; [marketing@erickson-foundation.org](mailto:marketing@erickson-foundation.org)

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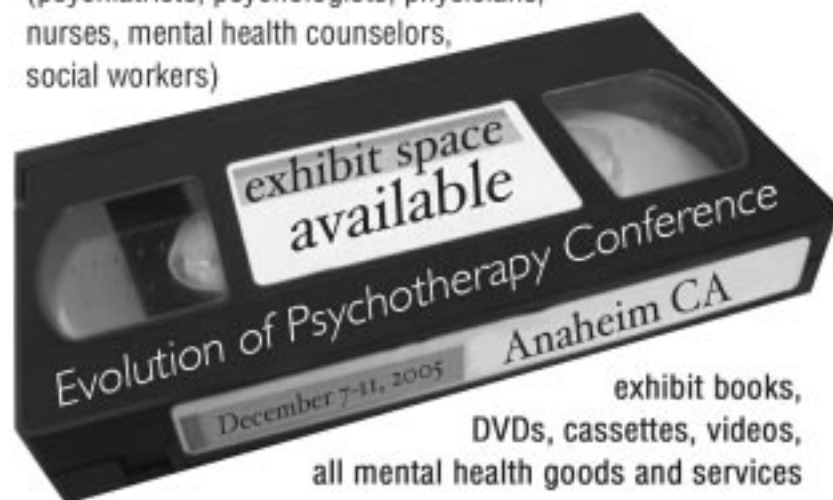


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## NEWS

### Foundation Archives Update

By Roxanna Erickson Klein RN, PhD

Dallas, Texas

In January of 2005 I accepted an appointment to the role of Director of the Erickson Foundation Archives. It is both a privilege and a responsibility to assume this volunteer position; I am honored to serve.

Working with preservation and development of archival material, one confronts the same challenges that exist in other technical areas. The possibilities are developing and advancing quickly; as soon as a selection is made, other possibilities emerge. Our focus has been on choosing processes that not only will preserve the priceless materials that we have, but also will be amenable to future conversions as they are needed.

The initial goals set included fund-raising for the Archives, and digitation of the video materials of Milton Erickson. Thanks to the generosity of several donors we have raised sufficient resources to move forward with the digitation. Working with the staff at the Foundation, a plan for sending in one set of videos at a time is now in place, and this important step is underway.

Upon completion of this task, my next goal is to develop a pilot-project that will generate income for the Archives. Up until this year, the Archives has been built and evolved from the general resources of the Foundation. Now, perhaps we can develop a means by which the Archives can become more self-sufficient. Dr. Zeig and I will work together to create something for the purpose of bringing economic resources directly into the Archives.

Preservation and development of materials is a complex and costly proposition. But through it, we are entrusted not only with the past but also with the future of the work of Milton Erickson. I express deep appreciation to all who have contributed to this important mission, and I invite any comments, critique, or ideas. Please feel free to contact me at my home number 214-526-9634.



# H I S T O R I C A L T I M E S

## *The Lourdes of Arizona*

By Carlos Amantea

Mho & Mho Works

San Diego, California 1989

*(On December 11, 1985, the first Evolution of Psychotherapy was convened in Phoenix, Arizona. Among many journalists, Carlos Amantea was there, representing a small and esoteric literary journal, The Fessenden Review. None were able to capture the intense feelings of having so many "historical masters of brain-change under one roof" like Amantea. An example of the wealth of wisdom and experience to be found at the conference was the following conversation that Amantea overheard and chronicled in The Lourdes of Arizona between New York Times reporter Daniel Goleman and Salvador Minuchin. The book is to be reprinted soon. For information : [jeff@erickson-foundation.org](mailto:jeff@erickson-foundation.org) -Ed.)*

"There is an interesting interaction between the 7000 people here and the twenty-six faculty," says Minuchin. "There is a kind of hope that those who are listening to us are more flexible than we are, that their perspectives will be effectively changed in their own way. Yesterday, I was on a panel with Moreno, Golding, and Ellis. And I realized that I was talking about what I was *thinking*, not what I was *doing*. I am unorthodox in what I think, not in what I do..."

"...The approaches we use to emotional problems don't change when we have a new piece of knowledge. *Knowledge does not expand the ability for dialogue*. We are prisoners of our dogma. We maintain our blindnesses. The diffusion of knowledge does not reverse systems."

As I am writing, I fall into a brown study about the time I spent working on a master's degree in Social Work at a famous (but herein unnamed) California State University. The course we took with social issues, thinking, techniques—all from twenty-five years ago. One of the teachers had us reading

Existentialism. In his assignments, he showed himself to be oblivious to the massive changes that Gregory Bateson, Systems Theory, Minuchin, Perls, and Erickson had created in the helping profession. Teachers are a product of their own schooling, keeping up with the revolutionary changes since 1960, they force us, their students, to study doctrines that were *outré* and formidable in the culture of the Eisenhower years, but which, in order to practice in the 1980's, are about as vital as brass hubcaps."

"We have to deal with the fiefdom of belief systems," said Minuchin. "Most conferences of the APA or group therapists come together with like-minded people and you can dance together in a ritual of confirmation with your priest. Here, there is a series of parallel monologues, not dialogue. And you need a generation to die before the ideas can die and you can have new ideas rise in their place."

*[Later, Amantea discussed the conference with R. D. Lang and Carl Whitaker—Ed.]*

...Q. Looking over this conference, what do you think are the ways in which the faculty here [is] coming together, and what do you think are the biggest divergences?

Lang: Well, they're not coming together, I'll tell you that.

Whitaker: I think the real divergence may be those people who want to help people get to where the therapist thinks they *could* be; and those people who want to help people be more of who they are, rather than somebody else. You could simplify that by making it a differential between the "manipulators" and the "enablers." I think that's over simplistic, and I think that it may very well be that a lot of what therapists do is unknown to the therapist, and maybe a hell of a lot help without knowing about what it is.

Q: Just like teachers never know?

Whitaker: Of course, of course. Or like my racket of getting grandparents in, and asking for their consultation in helping this family consists of their daughter and her husband and

their grandchildren. And hour after hour I can sit and listen to what seems like gobbledygook or social chitchat or very defensive stuff, and the next week when the nuclear family comes in, they say "Did you hear what my mother said?" No. "Well, I never heard her say anything like that before in my entire life." Grandmother didn't know what she was saying that made a difference to her daughter. And I sure as hell didn't hear anything that sounded significant. But the connection between those two people had been going on for forty years. And they [the children] hear things differently when they're forty than they heard them, and swallowed them, when they were six. So I think therapists are a lot like that. The foster mothers who say

things that may not mean much to them, but may turn out to mean a hell of a lot—a symbolic experience—for the patient. So I don't know [that] the divergence is all that real. It's just very apparent sometimes.

*[Amantea caught the flavor and excitement of the First Evolution of Psychotherapy. In each subsequent Evolution of Psychotherapy conference the faculty has developed its own character and energy. The current faculty of the December 2005 Fifth Evolution of Psychotherapy is continuing the tradition by creating its own mix of history, wisdom and personality in this landmark conference, [www.evolutionofpsychotherapy.com](http://www.evolutionofpsychotherapy.com) - Ed.]*

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# BOOK REVIEW

## *Willing to Learn: Passages of Personal Discovery*

By Mary Catherine Bateson

Steerforth Press

*Willing to Learn: Passages of Personal Discovery* is the latest book from prolific and well-known writer-educator, Mary Catherine Bateson. This book is a collection of articles she wrote over a forty-year period, many of them previously unpublished. Each article is prefaced with a current introduction to give the reader a double reflection from the author. Bateson weaves personal narrative with substantive discussions to engage the reader in paradigm-shifting, thought-provoking experience.

The book is divided into four parts. Part I, "Family Memoirs," brings the reader into the family circle of Bateson's famous parents, Margaret Mead and Gregory Bateson. But the articles in this section are not

just personal accounts; they also offer intellectual insights into the important thought of both mother and father as no one else can.

Her article "Continuities in Insight and Innovation: Toward a Biography of Margaret Mead," gives us substantive understandings of her mother's anthropological thought along with insider insights such as a mother's notion of disciplined subjectivity to utilize her subjective responses in her work. An article about her father employs a creative device, an imaginary dialogue between daughter and father: "Daddy, Can a Scientist be Wise?" lights up Gregory's sometimes obscure and murky theoretical conceptions with her innocent eyes. She also includes a deeply personal account of her father's last days.

Part II: "The Shapes of Lives: Age and Gender" focuses on the life cycle



through its developmental variations. Bateson is sensitive to the change process, understanding how it must balance between old and new, past and present. Included in this section is one of her well-known ideas of living life as a creative composition. She shows how women's roles have undergone tremendous changes in recent decades which gives them the opportunity to lead in new patterns, to refocus their curiosity, and redefine traditionally defined paths.

Part III, "Culture and Conviction" is of contemporary relevance. Bateson expresses insightful observations and concerns gained from living and working, especially in the Middle East. She addresses variation in custom, culture, belief systems and national conflict. One of the most acclaimed articles in this section offers a unique perspective on 9/11, offering a healthy way to move forward. Another article has an Ericksonian flavor, "Learning to Learn and Knowing What You Know," where the ability to learn

makes the task of needed adaptation to change a viable possibility.

Finally, in Part IV, "Ways of Knowing" Bateson presents unique perspectives on philosophy, research, problem solving, and policy-making. Of particular interest for psychologists are her insights on qualitative research and some of the pitfalls of quantitative research in, "Multiple Kinds of Knowledge."

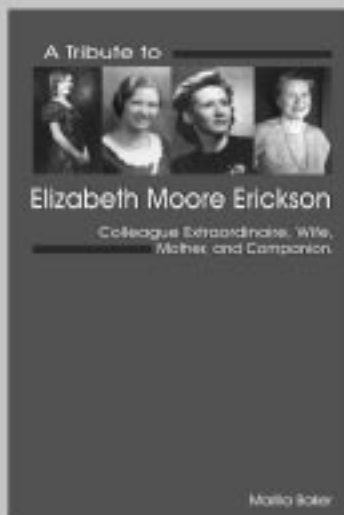
*Willing to Learn* gently loosens constricting concepts, creating openness for flexible and sensitive new patterns to take form. Crossing disciplinary lines, Bateson invites alternative ways of thinking, experiencing and living, helping to extend the horizons of perception, always useful to therapists!

### Reviewed by:

C. Alexander Simpkins, Ph.D. and  
Annellen Simpkins Ph.D.  
San Diego, CA

*Mary Catherine Bateson will present at the December 2005 Evolution of Psychotherapy Conference, [www.evolutionofpsychotherapy.com](http://www.evolutionofpsychotherapy.com)*

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## *A Tribute to Elizabeth Moore Erickson. Colleague Extraordinaire, Wife, Mother, and Companion.*

by Marilla Baker

"The gleam of a universe of meaning and experience emerges from the sensitive crystal of Marilla Baker's newly released book, *A Tribute to Elizabeth Moore Erickson, Colleague Extraordinaire, Wife, Mother, and Companion*. The book is an intimate slide show of significant people and events, all benefiting from the nurture of Elizabeth Erickson. With subtle and evocative prose, Baker encourages the reader to envision a personal world and to be enriched through the process, in authentic Ericksonian style. First published in Spanish (2003) and Portuguese (2004), the English version brings this beautiful tribute to English-speaking readers.

Marilla Baker's book... not only informs but also inspires. In encountering the best of humanity, through the exemplary life of Elizabeth Moore Erickson, we are stirred to new potentials that we might not even know are there, true to the Ericksonian way."

C. Alexander Simpkins, Ph.D. and Annellen M. Simpkins, Ph.D.  
Book Review Editors, *Erickson Foundation Newsletter*; *Authors: Self-Hypnosis: Plain and Simple; Zen in Ten: Easy Lessons for Spiritual Growth.*

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irreparably defective subhuman object that provides lucrative work and self-enhancing "compassion" for a vast corps of social fixers and teachers of self-esteem, whose job is to encourage the scapegoats to esteem their "diseased" and disreputable selves and remain permanently dependent on their helpers.

\*\*\*

Addiction, obesity, and self-starvation are political problems: each condenses and expresses a contest -- between the individual and some other person or persons in his environment -- over the control of the individual's body and mind.

\*\*\*

It would be nonsensical to call a physician critical of coercions in the name of dermatology an "anti-dermatologist"; critical of oncology, an "anti-oncologist"; or critical of ophthalmology, an "anti-ophthalmologists." The fact that it is *not* nonsensical to call a physician critical of coercions in the name of psychiatry an "antipsychiatrist" is evidence that psychiatry is about coercion, not healing.

\*\*\*

The person who controls himself and cares for his own well being has no need of an external authority to protect him from himself. He is his own self-protector.

This renders paternalistic authority unemployed. What is he to do if he cannot control others in the name of protecting them? He could mind his own business. But that is a fatuous answer. Persons satisfied with minding their own business do not aspire to become paternalistic authorities, while persons who become such authorities consider minding other peoples' business their own business and call it "caring" and "assuming responsibility."

Authority needs persons who lack autonomy or whom they can readily deprive of it, such as children, old people, and patients. Hence the ceaseless warfare of authority against autonomy, against suicide, against masturbation, against self-medication, against the proper use of language itself.

<sup>1</sup> Excerpted and adapted from Thomas Szasz, *Words to the Wise: A Medical-Philosophical Dictionary* (Brunswick, NJ: Transaction, 2003).

<sup>2</sup> Quoted in Tibor Szamuely, *The Russian Tradition*, Robert Conquest, editor (New York: McGraw-Hill, 1974), p. 3.

*Dr. Szasz will present at the December 2005 Evolution of Psychotherapy Conference, [www.evolutionofpsychotherapy.com](http://www.evolutionofpsychotherapy.com)*

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COMMENTARY BY  
**Jeffrey K. Zeig, Ph.D.**



**Advanced Techniques of  
Hypnosis and Therapy:**

**Milton H. Erickson, M.D.**

**Working with  
Resistance**  
(1979)

In 1979 Milton Erickson and Jeffrey Zeig spent five hours reviewing a demonstration that Erickson conducted at a Teaching Seminar. That demonstration is now available as a training video for Ericksonian Practitioners.

Erickson's experiential methods include the symbolic use of hypnotic phenomena, encouraging resistance, naturalistic confusion technique, seeding, and using isomorphic anecdotes. Jeffrey Zeig, Ph.D., discusses the mechanics of Erickson's unique approach to psychotherapy.

*Working with Resistance* is a training tape that provides an opportunity to watch a master hypnotherapist demonstrate his technique.

Milton H. Erickson, M.D., (1901-1980) was the father of modern hypnosis. His contributions to the fields of hypnosis and psychotherapy are legendary. Erickson conducted pioneering research and contributed numerous books and scholarly articles.

Jeffrey K. Zeig, Ph.D., is Founder and Director of the Milton H. Erickson Foundation.

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# FACETS AND REFLECTIONS

## "Just Who IS that Dr. Erickson?"

By Melba Vickery, RN., BSNE.,  
CRNA(ret).

Sierra Vista, AZ.

*Editor's note: Melba Vickery, author of this lively piece, gives us a glimpse of the flavor of what learning about hypnosis in the professional venue was like in the late 50's. Introduced to Milton Erickson by a well known psychoanalyst, Dr. Fredericka Freytag, Vickery shares with us some of the fun and energy that bubbled through the early days of the ASCH.*

"Just Who IS that Dr. Erickson everyone's so crazy about--up there center-stage on the platform?" I asked Dr. Fredericka F. Freytag that 1959 Friday, March the 6th. The Chase-Park Plaza ballroom in St. Louis was full of male doctors of then-known health sciences. Few women. Fewer smokers than usual for that era. No blubber in the entire congenial crowd.

I was the only non-doctor (and warmly welcomed) among those seeking introduction to that "new" mysterious medical hypnosis.

Dr. Freytag's answer: "He's the Father of American Medical Hypnosis! Founder of the seminar sponsor --the A.S.C.H.-- and editor of its Journal. Please allow me to introduce you."

The Seminar faculty: Dentists E.E. Aston, and Irving Secter (who called Dr. Freytag "Freddie" as he flashed his pearly-whites and glanced impishly toward her) and physicians, Seymour Hershman MD, and the already-world-renowned Milton H. Erickson MD.

Septuagenarian Freddie's dark brown eyes beamed gentleness. Her short black hair with tiny hints of silver was simply styled. No distracting jewelry. A three-piece Michigan-appropriate deep-navy skirt, blouse and jacket. If she were alive today, she'd *never* be caught in "Tucson Casual!" (Tee-shirt, wee skirt, flip-flops.)

Psychoanalyst Freytag was serenity-serious, with instant hearty laughs at good jokes often heard among Ericksonians. Her diction: scholarly-precise; quoting sages, philosophers, poets and professional literature as readily as Dr. Erickson.

In practice sessions, Dr. Freytag suggested deepening by "descending a stairway, with a friendly... little black dog down there" because in '59, true joy meant boy and dog.

Her months of consulting with Dr. Erickson imbued her with his naturalistic permissive utilization techniques. He lauded her in his Foreword to her *Hypnoanalysis of an Anxiety Hysteria* published by Julian Press that year.

Her psychotherapy was dominated not by symptomatology but by patient needs and abilities, exploited solely for the benefit of the patient. That book documents 95 hours in 75 therapeutic sessions, with explanations, evaluations, and the patient's expressed gratitude for recovery from his enigmatic illness. He had repeatedly demonstrated how the patient is

in control at all trance levels, with insights resulting from suggested autohypnotic trances at home. He responded (in Erickson fashion) according to his *unconscious memories and experiences*. Illustrated were how certain deep-trance phenomena, including partial regression, time distortion, and some amnesia, occur in lighter trances.

Hypnosis, Ericksonian perspectives in particular, facilitated and *shortened* therapy for the severely troubled physician-patient to whom the book was dedicated.

Dr. Freytag's second book in 1961 *Hypnosis and the Body Image* has been emulated and imitated by psychologists, law-enforcement investigators, artists, social workers, writers and counselors.

Dr. Freytag and I enjoyed Chinese dining (MINUS "leg of dog"!) Her "May I serve you?" heaped on the chow (mein or whatever.)

Elegant "Freddie" was not on the Speakeasy floor in Chicago that 1965 night Dr. Edel Charleston'd with more gyrations than the rest of us.

Thanks, dear Freddie in the Great Beyond, for that introduction, adding Ericksonian joy to my life from that day into forever.

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## CONFERENCE NOTES

The 10th Congress of the European Society of Hypnosis: *The Spectrum of Hypnosis in Therapy* will be held September 17-24, 2005, on the Island of Gozo (near Malta in the Mediterranean). The Congress includes Symposia on Clinical and Research Advances, Invited Workshops, Intensive Training for Beginners, and Conversation Hours. For information and to register contact the European Society of Hypnosis (ESH) Central Office, P.O. Box 3352, Sheffield S20 6WY, United Kingdom; Tel, +44 114 247 4392; Fax, +44 114 247 4627; Email, [mail@esh-hypnosis.org](mailto:mail@esh-hypnosis.org)

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The American Psychotherapy Association will hold the 2005 National Conference, September 30-October 1, 2005, in San Diego, California. The Conference will be held at the Manchester Grand Hyatt in historic downtown San Diego. For information contact the American Psychotherapy Association (APA): Tel, 800/205-9165, ext. 164; Web, [www.americanpsychotherapy.com](http://www.americanpsychotherapy.com) ; Email, [conference@americanpsychotherapy.com](mailto:conference@americanpsychotherapy.com)

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The New Zealand Society of Hypnosis 13th Annual Conference will be held October 1-2, 2005, at the Museum Hotel in Wellington, New Zealand. The principal presenter is Brent Geary, Ph.D. Topics will include Dimensions of Utilization; Biofeedback and Hypnosis by Tom Nesor; and Hypnosis in the Patient with HIV by Tannis Laidlaw, Ph.D. For information contact Dr. Patrick McCarthy, Level 9 CMC House, 89 Courtenay Place, Wellington, New Zealand; Tel, +04 385 6998; Fax, +04 382 9311; E-mail, [cmc89@telstra.net.nz](mailto:cmc89@telstra.net.nz)

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Congreso Internacional: Mujeres, Hombres, Parejas, en Tiempos de Retos y Oportunidades, Homenaje a la Pareja de Milton y Elizabeth Erickson, will be held October 20-23, 2005, at the Hotel Real de Minas, Querétaro, Mexico. For information, Web, <http://www.hipnosis.com.mx> ; Email, [congresos@hipnosis.com.mx](mailto:congresos@hipnosis.com.mx). The Conference is sponsored by Centro Ericksoniano de Mexico, and Insitituto Milton H. Erickson de Querétaro.

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The Milton Erickson Institut of Rottweil is organizing the fifth *Kindertagung: Hypnotherapy and Systemic Concepts for Working with Children and Adolescents*, November 3-6, 2005, in Heidelberg. The Conference gathers numerous presenters from every corner of the globe. Registration for the last two *Kindertagung* conferences (1997 and 2002) in Heidelberg sold out. For information: Milton Erickson Institut Rottweil, Bahnhofstrasse 4, D-78628 Rottweil, Germany; Tel, +0741 41477; Fax, +0741 41773; Web, [www.kindertagung.de](http://www.kindertagung.de) ; Email, [kita@meg-rottweil.de](mailto:kita@meg-rottweil.de)

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The Second European Conference: *European Ways of Brief Strategic and Systemic Therapy - Best Practice, Best Teaching*, will be held November 9-13, 2005, in Arezzo, Italy. Daily topics will include: Technique, Language, Relationship, Communication, and parallel workshops. **Call for Proposals:** The Scientific Committee will be accepting proposals (in abstract format) for the following categories: Oral Communications (presented November 12th); Workshops (presented November 13th). Deadline for proposals is October 10, 2005.

For information on the Conference or for more information regarding Proposals contact Centro di Terapia Strategica, Tel, +39 0575 350240; Fax, +39 0575 350277; Email, [ewbst.conference@centroditerapiastategica.org](mailto:ewbst.conference@centroditerapiastategica.org) ; Web, [www.centroditerapiastategica.org](http://www.centroditerapiastategica.org)

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The fifth *Evolution of Psychotherapy Conference*, sponsored by The Milton H. Erickson Foundation, will be held December 7-11, 2005 (Wednesday-Sunday) with a special all-day Pre-Conference Event with Patch Adams, December 6, 2005 (Tuesday). The Evolution Conference will be held at the Anaheim Hilton and Towers and the Anaheim Convention Center, Anaheim, Calif. Presentations will include Point-Counterpoint Presentations, Workshops, Clinical Demonstrations, Dialogues, Panels, Conversation Hours and Keynote Addresses.

**Faculty includes:** Albert Bandura, Albert Ellis, William Glasser, John & Julie Gottman, Mary Goulding, Jay Haley\*, James Hillman, Otto Kernberg, Arnold Lazarus, Marsha Linehan, Alexander Lowen, Cloé Madanes, James Masterson, Donald Meichenbaum, Salvador Minuchin, Erving Polster, Ernest Rossi, Martin Seligman, Francine Shapiro, Thomas Szasz, Ken Wilber, Michael White, Irvin Yalom, and Jeffrey Zeig. **State of the Art Faculty:** David Barlow, Judith Beck, Claudia Black, Nicholas Cummings, Robert Dilts, Harville Hendrix, Harriet Lerner, Scott Miller, Christine Padesky, Daniel Siegel, Bessel van der Kolk, and Michele Weiner-Davis. **Keynote Addresses** by Patch Adams, Mary Catherine Bateson, and Aaron Beck.

Full brochure and Online registration available through the Evolution Conference Web Site: [www.evolutionofpsychotherapy.com](http://www.evolutionofpsychotherapy.com). For registration and volunteer information contact American Continuing Education, Inc. (ACEI), P.O. Box 17980, St. Paul, MN 55117; Tel, 651-487-3001; Fax, 651-489-3387; Email, [miltonerickson@cmehelp.com](mailto:miltonerickson@cmehelp.com) To receive the full brochure by mail contact The Milton H. Erickson Foundation, Inc., 3606 N 24th Street, Phoenix, AZ 85016-6500; Tel, 602-956-6196; Fax, 602-956-0519; Email, [office@erickson-foundation.org](mailto:office@erickson-foundation.org) (Include full mailing address with request.)

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The XVII International Congress of Hypnosis, sponsored by the International Society of Hypnosis (ISH), and Centro Ericksoniano De Mexico, A.C., will be held in Acapulco, Mexico, August 21-26, 2006. For more information contact Centro Ericksoniano de México, Av. Colonia del Valle 618, Col del Valle, Mexico D.F., 03100; Web, [www.hipnosis.com.mx](http://www.hipnosis.com.mx) ; Email, [congresos@hipnosis.com.mx](mailto:congresos@hipnosis.com.mx) or [hipnosis@convention-center.net](mailto:hipnosis@convention-center.net)

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The Third International Conference of Asian Federation for Psychotherapy: 2006 International Congress of Psychotherapy in Japan, will be held August 28 - September 1, 2006. The Academic portion of the Conference will be held at Keio Plaza Hotel, Tokyo; Komazawa University in Tokyo will be the site for the Cultural portion including the practice of Zen, Tea Ceremony, and Flower Arrangement. This Conference is sponsored by the Science Council of Japan, in collaboration with The World Council for Psychotherapy, and The Asian Federation for Psychotherapy.

For information contact the Preparing Committee, c/o Community Care Center, Komazawa University, Tel, +81 3 5431 5200; Fax, +81 3 5431 5201; Web, <http://www.the-convention.co.jp/06icptj> ; Email, [icptj2006@the-convention.co.jp](mailto:icptj2006@the-convention.co.jp)

# BOOK REVIEW

## *The First Session with Substance Abusers A Step-by-Step Guide*

By Nicholas A. Cummings and Janet L. Cummings

Jossey-Bass Inc., A Wiley Company, 2000

274 pages. ISBN: 0-7879-4933-7

[In our 2002 interview of Nicholas Cummings (Vol 22, No.3), he demonstrated how he valued being able to remove the fluff and get to what he felt to be the heart of the matter in therapy. In *The First Session with Substance Abusers: A Step-by-Step Guide*, he and his daughter exemplify this approach and vision. -Ed.]

*The First Session with Substance Abusers, A Step-by-Step Guide*, is a plan for conducting an initial session for unearthing substance abuse problems even with the most resistant and manipulative clients.

The introduction emphasizes that substance abusers present themselves in the first session as suffering from marital or job stress. As the authors state, these subjects also complain of exhaustion and "frazzled nerves," their own common name for one of the side effects of prolonged chemical abuse.

It is sometimes difficult to find a correct diagnosis using other words, whether or not a person is a substance abuser. In "Who is a substance abuser?" (Chapter 1), we can find some reasons why we may "misdiagnose" when treating clients. Cultural points of view may determine what is deemed OK. Addicts may attempt to excuse their addiction by proffering the claim that their behavior is socially acceptable. Here, as the Cummings state, "*Our job is to treat addicts, not to engage in philosophical discussion of what is culturally or ethnically acceptable social behavior.*"

The book is replete with useful information regarding phenomena that occur when a person is going through an addiction. A good example of this can be found in "Presenting Problems," where special attention is given to the psychophysiology of addiction. Here readers can learn about the three bases of addiction: (1) genetic, (2) in utero (prenatal), and (3) environmental. There is information about physical alterations that brain cells experience in response to physiologically addictive substances. Other organs' reactions such as liver damage also are explained. This chapter can be especially useful for professionals who work in medical areas.

The Cummings provide data about different drugs, their chemical components, the physical reactions users show, as well as their behavioral reactions. There is valuable information about "Downers" such as depressants and opiates, and hallucinogens (including LSD, mescaline, and peyote). Other drugs such as Ecstasy also are mentioned. One of the topics that kept my attention was the explanation about the reaction of serotonin neurons when exposed to Ecstasy. Clients sometimes need additional information when in counseling; in which case, I would recommend they read this book.

As therapists we know that, "Identifying the Problem in the First Session" (Chapter Three) is fundamental. As the authors state, "Far too often, the therapist fails to discern and address the addictive problem as primary and pursues instead derivative or collateral problems." Utilizing case examples the authors provide tips for making accurate diagnoses.

Chapter Four includes information regarding "Modalities of Treatment," where there is emphasis on "tolerance," the medical term for the body's response to chemical dependency. Modalities such as the Behavioral and Abstinence Models are mentioned. One thing I found to be particularly useful is a section where "Inpatient versus Outpatient Care," is discussed.

In "Further Interviewing Strategies," *The Games* provide tools that can help professionals obtain additional information about client's behavior. The Victim Game, for instance, can help clinicians find out about addicts' relationships. Appendix A shows how a "Structured First Session" can be conducted.

*The First Session with Substance Abusers*, is useful, easy to read and full of

practical ideas for both new and experienced psychotherapists. I highly recommend this book.

### Reviewed by:

Maria Escalante Cortina MA  
Mexico City

Nicholas Cummings Ph.D. will present at the December 2005 Evolution of Psychotherapy Conference, [www.evolutionofpsychotherapy.com](http://www.evolutionofpsychotherapy.com)

# VIDEO REVIEW

## *"Integrating Conflicting Beliefs"*

by Robert Dilts

Presented at the Ninth International Congress on Ericksonian Approaches to Hypnosis and Psychotherapy, December 3, 2004

Video/VHS or DVD IC04-CD-V6B

Produced and distributed by the Milton H. Erickson Foundation

In this video Robert Dilts, an important figure in NLP from its early years, explains and demonstrates his methods of "Integrating Conflicting Beliefs."

His exposition presents ideas about the nature of conflict and the nonverbal behaviors that reveal them, such as asymmetrical emotional expressions in different parts of the body.

Dilts demonstrates with Connie, a retired psychotherapist born in Europe, who has mild-but-annoying dissociative symptoms including, "going unconscious" shortly before appointments and thus forgetting to go; suddenly "discovering" that she has performed a behavior that she's vowed to avoid; abruptly ending important relationships when she finds others' behavior to be unacceptable, and she has health issues. There was much to cover.

Dilts begins by "sorting" the conflict – separating and clarifying its components in a manner reminiscent of Gestalt therapy. He points to clinical pitfalls along this path, such as the client's tendency to slip from one role into the other, noting that this confusion shows why conflicted people need outside help.

Unfortunately, Dilts switches back and forth between working with Connie and talking to the audience about what he is doing – a "sorting" problem of his own that dilutes his therapeutic impact. His descriptions are clear, though, and he demonstrates how to bring the client to a deeper experience of the poles of the conflict, and then find the unifying, life-affirming intentions that can bring resolution between the apparently warring components.

Dilts gives us a cliffhanger. Under time pressure (60 minutes is cruelly short), he tries to move things along quickly, but Connie balks. Their emotional connection frays. Suddenly, she brings up a whole new element: "What's important is to help *my daughter!*" What will he do with *that*?

From this near-fatal distraction, Dilts brings insight. Having given each part of her conflict a place to stand on the stage, he realizes that she has placed her daughter *between* them, creating a block. "To help your daughter, you're going to have to integrate these two. So put her *out in front* ... so she can see you." The daughter is now differentiated and has a role: she is the witness, who benefits from Connie's healing.

Dilts ends by giving Connie a physical gesture that brings the wisdom from each side of the conflict into her own heart. Clearly moved, she spontaneously integrates a tender, gift-giving gesture toward her daughter.

This video gives a clear sense of Robert Dilts's ideas. We get less clarity about him clinically, due to a combination of time constraints, a complex demonstration subject, and some problems in separating his exposition and his demonstration. Beginning and intermediate clinicians will benefit from studying "Integrating Conflicting Beliefs."

### Reviewed by:

Will Handy, MSSW  
Milton H. Erickson Institute of Dallas

Robert Dilts will be presenting at the December 2005 Evolution of Psychotherapy Conference, [www.evolutionofpsychotherapy.com](http://www.evolutionofpsychotherapy.com)



## *Therapist Sculpting: Experiential Methods in Ericksonian Co-therapy for a Case of Trauma*

By Jeffrey K Zeig, PhD and Lilian BorgesZeig MA

Presented at the 9th Ericksonian Congress on Hypnosis and Psychotherapy

Phoenix, AZ. 2004

Video/VHS or DVD IC04-CD-V1

Milton Erickson Foundation

Zeig and Zeig conducted a therapy session together during the Ninth International Congress. Potential viewers should be aware that they will not have a map that says "you are here." Instead they will find themselves searching from the beginning. This DVD starts shortly after the work commenced, inviting the viewer to make discoveries and actively participate in the process.

Essentially, the session featured a woman who had experienced during her childhood, a life-altering trauma that left her afraid. As she grew up, she developed a tough exterior that served to keep others at a distance. She described herself as non-empathic, and maintained a busy schedule to keep herself distracted and less likely to experience herself as weak or soft (as she had perceived herself in childhood).

Jeff and Lillian began alternately providing the client with a visual model of the client's various emotions by altering their own postures, thereby co-creating an understanding of the client's typical "stance." Although the client was Italian and there was somewhat of a language barrier, the sculpting served to surmount any inherent difficulties with putting words to emotional experiences. The language of their bodies was quite unified and comprehensible. The sculpting served to link the client's internal processes with her physical and social behaviors.

Was the session therefore a simple demonstration of sculpting? No. I found it to be interwoven with Ericksonian trancework, indirect and direct suggestion, use of metaphor (both within and outside of trance), modeling, paradox, reframing, psychodrama, and behavioral rehearsal. The client was involved in co-creating her own sense of meaning of the problem, the solutions, and was even given a roadmap for how to focus her efforts on various "parts" of the solution in the future.

The Zeigs were complementary in their coordinated teamwork. Lillian was used as an empathic model for the client to be simultaneously soft and strong, and the client responded readily to the novelty of emulating her. This was Ericksonian "with a twist" and I recommend that it be viewed by therapists who are looking for ways to offer more active (i.e., therapy that involves movement) and integrative therapy. Even without prior experience or training in sculpting, much can be gained by an intuitive understanding of seeing and hearing what was done.

In summary, this 54-minute DVD is worth viewing because it uniquely illustrates the variety of intervention approaches that were offered to engage the client. It is a didactic example of how to meld seemingly diverse therapy approaches while preserving the essence of an Ericksonian approach. The viewer gains a vivid view of an intense moment of effective therapy in action. If you are unfamiliar with sculpting, you will feel inspired to learn more. And if you already use this method, you will find this DVD can help you to refine your techniques.

**Reviewed by:**

Kathleen Donaghy Ph.D.  
Phoenix, AZ



COMMENTARY BY  
**Jeffrey K. Zeig, Ph.D.**



**Advanced Techniques of Hypnosis and Therapy:**

**Milton H. Erickson, M.D.**

**Therapy within a Marital System**  
(1978)



Can you imagine how interesting it would be to sit in on an actual therapy session with Milton H. Erickson, M.D.? Well, this rare teaching video, presented by Jeffrey K. Zeig, Ph.D., affords viewers the opportunity to do just that – to step into Erickson's small office to witness Erickson, physically limited yet mentally agile and focused, as he works with a young married couple.

The hypnotherapeutic session took place in 1978, and decades later, it's just as powerful and engaging. Enhancing the viewer's learning experience is Dr. Zeig's discussion of the underlying elements of Erickson's methods: the ARE model of induction; the art of parallel communication; targeted utilization; and the use of implication. Erickson's fluid repertoire, drawn from systematic thinking includes the use of anecdotes, symbolic communication, and strategic seeding.

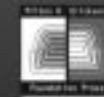
This unique teaching video is a testament to the richness and potential of the psychotherapeutic interaction built on a foundation of experienced complexities, depth of thinking, a wealth of ideas and techniques, and process-oriented communication. All serious students of psychotherapy, no matter what their orientation, will benefit from learning from one of the world's foremost master therapists.

Copyright 2004 • 147 min. • DVD - ISBN 1-932248-17-X \$79.95 (plus shipping & handling)

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See page 31 for ordering information

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## B O O K R E V I E W

## *The Marriage Clinic* A Scientifically Based Marital Therapy

John M. Gottman Ph.D.

WW Norton & Company 1999 USA

ISBN: 0-393070282-0

According to John Gottman Ph.D., marital therapy research demonstrates, that "...we have an intervention methodology that nets relatively small effects, and we have a huge relapse problem" (p. 5). Although it might be tempting to skip over or skim through the research in Part I supporting the assessment tools, Part II, and intervention strategies, Part III, don't do it. Many current approaches to marital therapy do not bear up under Gottman's careful research. A reorientation by the therapist is required before conducting an assessment or implementing the described interventions.

Gottman proposes we only need one set of principles. We need a new one for marital therapy based on the study of how people "go about the business of being married" and observation of their "ability to repair things when they go wrong." Happily married couples are not free of conflict.

A core conclusion is that "negative affect reciprocity" is the most consistent discriminator between happily and unhappily married couples, and is the greatest single predictor of divorce. The research section also incorporates the Four Horsemen of the Apocalypse (criticism, defensiveness, contempt, and stonewalling) that can destructively gallop through a couple's living room. The Four Horsemen are vivid descriptors of what constitutes 'negative affect reciprocity.'

There is an astonishing wealth of assessment tools. Yet Gottman states his assessments, based on the Sound House Marital theory, look only for two things: the strengths in the marriage and the areas that need improvement. Appendix B is the 15 self-report questionnaires that assess each process of the Sound House Marital theory developed by the author and Kim Ryan. Appendix A offers thirteen different questionnaires from the author's selected library along with the recommendation to not expect to use these in every case. Three basic interview forms are included in Appendix C.

Chapter eight, *Solving What is Solvable*, offers insightful information for both the therapist and the couple. The therapist's role is to distinguish between what is a solvable problem and what is a perpetual issue that has become gridlocked. The goal then becomes solving what can be solved and reestablishing a dialog regarding perpetual issues. *Living with the Inevitable*, Chapter nine, covers the latter topic more thoroughly.

Chapter twelve, *Avoiding Relapse*, offers specific strategies and skills along with thorough questionnaires that determine how a couple will process a "failed marital argument" that has left feelings of hurt, rejection or alienation. In Chapter thirteen, *Putting it all Together: Working as a Team and Terminating Therapy*, Gottman suggests that therapy is terminated once the trajectory of the marriage has been changed and before it is a great marriage. A great marriage becomes the long-term goal of the couple who now have the tools and the ability to repair things when they go wrong.

Gottman concludes we need a major change in our approach to marital therapy; we need therapy that is based on scientific observation, research, and one set of principles. There is no question that *The Marriage Clinic* is both thorough and insightful. If you are ready to accept Gottman's challenge of becoming a therapist that affects a major change in your approach to couples therapy, then study this book and implement the valuable concepts and tools provided.

### Reviewed by:

Deborah Beckman, MS

The Milton H Erickson Institute of Dallas

John Gottman Ph.D. will present at the December Evolution of Psychotherapy Conference [www.evolutionofpsychotherapy.com](http://www.evolutionofpsychotherapy.com)

## *Healing Trauma: Attachment, Mind, Body, and Brain*

Edited by Marion F. Solomon and Daniel J. Siegel

Published by W. W. Norton and Company, 2003

ISBN 0-393-70396-7

*Healing Trauma* explores recent advances in the treatment of trauma, informed by attachment theory and neurobiology. Theorists are returning to the idea that trauma plays a crucial part in the development of much psychopathology. Modern methods of brain imaging show the effects of trauma on the brain – especially in the formative years.

The book offers contributions from the likes of Siegel, Erik Hesse, and Mary Main, bringing those unfamiliar with attachment theory up to speed. Allan N. Schore's stunning article (19 pages of references!) convincingly demonstrates that the infant/caretaker relationship has profound, observable impacts on brain development. The behavioral effects of these neurological changes are admittedly speculative, yet solid evidence backs up his ideas: brain centers regulating emotion and empathy develop abnormally under the influence of abuse and neglect; the damage predisposes the child to violence and other antisocial behavior.

Many authors use Shapiro's distinction between "small-T traumas" and "large-T traumas." Children who suffer family violence, emotional abuse, or neglect demonstrate brain and behavior dysfunction even in the absence of massive traumatic events like life-threatening experience or violent rape. Bessel A. van der Kolk contributes a fine overview of "Posttraumatic Stress Disorder and the Nature of Trauma."

Inevitably, the clinical articles have less research support than those on development. Francine Shapiro and Louise Maxfield describe EMDR's impressive outcome research, even including a few brain-imaging studies suggesting neurological changes from the procedure. Other methods seem as yet to have little research to back them up.

*Healing Trauma* gave me the sense that psychoanalysis is alive and

well – radically streamlined and turned into a brief therapy. Diane Fosha and Robert J. Naborsky describe and provide transcripts of their respective methods, both of which are based on similar principles: Faulty attachment to parents in infancy is traumatic and leads to ineffective defense mechanisms when the person encounters difficult situations; when the emotionally-stunted adult seeks help, therapy must create a stable attachment relationship in which the patient can (and must) *deeply experience* the negative emotions that have been avoided through the defense. Therapist confrontation and interpretations of defenses simultaneously stimulate those emotions and provide support. By negotiating the planned or inadvertent disruption and reestablishment ("repair") of the therapist/client relationship, the client can learn healthy attachment, discard the limiting defenses, and reconnect with her/his innate adaptive flow.

This is where an Ericksonian perspective – especially if it had research to back it up – would be welcome. Ericksonians tend to skip re-experiencing the pain, as well as confrontation and interpretation from the therapist. The new trauma therapists – who also claim rapid amelioration – see these as vital. Exciting dialogue and cross-fertilization could flow between these groups.

Fosha sums up the scientific issue well: "Our understanding of the neurobiology of attachment and trauma is unfolding with increasing pace. Now, our understanding of the neurobiology of healing has to catch up so that the therapeutic interventions by which the suffering of trauma ... [is] relieved can continue to grow in precision and effectiveness." *Healing Trauma* provides fresh information and stimulating perspectives. It's an intellectual work-out that set me thinking.

### Review by:

Will Handy, MSSW

Milton H. Erickson Institute of Dallas

Daniel J. Siegel MD will present at the December 2005 Evolution of Psychotherapy Conference, [www.evolutionofpsychotherapy.com](http://www.evolutionofpsychotherapy.com)



***The Evolution of Psychotherapy:  
A meeting of the minds.***

Zeig, J.K., Ed. (2003)

The Milton H. Erickson Foundation Press, Phoenix. (pages: 401)

ISBN: 0-9716190-5-0

This book collates the invited addresses from the Fourth Evolution of Psychotherapy Conference organised by The Milton H. Erickson Foundation. The first was held in 1985 and, with more than 7,200 delegates from 29 countries, it was the largest meeting ever held solely on the topic of psychotherapy. It was the brainchild of Dr Jeffery Zeig and pulled together a who's who of psychotherapy as its keynote presenters. There was Beck, Bettelheim, Ellis, Haley, Laing, Lazarus, Moreno, Polster, Rogers, Satir, Wolpe and many others. Never before had so many innovative people from so many various schools of psychotherapy come together to discuss their commonalities and differences.

As this volume is sub-titled, it is a meeting of the minds, of the masters and mentors of our discipline. Those names are no lighter than the ones at the first Evolution Congress. Representing analytic psychotherapy we have Judd Marmor and James Masterson. In the cognitive area there is Donald Meichenbaum, Albert Ellis and Aaron (Tim) Beck. The systemic school is represented by people such as Australian, Michael White, James Hillman, Cloe Madanes and Jay Haley. In the section covering experiential therapies are Mary Goulding, Zerka Moreno, Erving Polster, Alexander Lowen and Jeffery Zeig. Looking at ethical and social

issues are Arnold Lazarus and Thomas Szasz...and I have only listed some of the names! In fact if there is anyone who is renowned in a school of therapy, you are likely to find them in this volume.

For me, one of this book's interesting features is that not only do the 'Minds' present their own approach to psychotherapy, but their address then is discussed by a 'Mind' from another field. For example, cognitive behaviourist, Aaron Beck, discusses analyst Otto Kernberg's presentation on transference-focussed psychotherapy for borderline patients. Rational-emotive behaviour therapist, Albert Ellis, has his say - as Ellis is prone to do - about Michael White's narrative therapy presentation. And psycho-dramatist, Zerka Moreno, makes his comments on Paul Watzlawick's chapter about therapy "As If."

I always find it a struggle to adequately review an edited book and this one is a particular challenge as it represents so many different thoughts from so many different fields of psychotherapy by so many different people who are each at the foundation of the school of thought that they represent. And that diversity is its strength. If there is anything that you ever wanted to know about the breadth and length of the fascinating spectrum that is psychotherapy - and wanted to learn about it from the 'Minds' of each area - then this book is truly a meeting of those 'Minds'. Even more it is likely to challenge your mind, as it did my mind, in terms of concepts and constructs that I have at the basis of the work I do. If this is a sample of what I missed by not attending the Fourth Congress, I can't wait for the Fifth Evolution of Psychotherapy Conference in 2005.

**Reviewed by:**

George Burns, M.A.

Milton H. Erickson Institute of Western Australia

*The Milton H. Erickson Foundation, Inc. Sponsored*

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## INTERVIEW

continued from page 1

**SM:** Two things. First, I entered psychoanalysis.

**JW:** Did that help?

**SM:** Let's just say, it didn't help me figure out how to do therapy. My thought was that perhaps something was wrong with me. I just didn't get "it." So I went to get help.

**JW:** What else did you do?

**SM:** Well, I read every book I could get my hands on and went to every workshop I could afford, hoping that I'd learn how to do "it." In the beginning, the work of Erickson and his students were a great help. Unlike graduate school, they weren't afraid to show me what they did, to teach specific strategies. Ernest Rossi's work and books were particularly reassuring. Other important mentors included Lynn Johnson, Jeffrey Zeig, and Corey Hammond.

**JW:** Did that help?

**SM:** Yes...

**JW:** But you moved on...

**SM:** Yes, eventually, I made my way to the Brief Family Therapy Center (BFTC) in Milwaukee. Erickson's work had been important. I learned many things I *could* do. But, something was missing. I still needed someone to help me figure out where, when, and with whom the things I knew how to do should, in fact, be done—the underlying rules. For some time, I'd been interested in the work of Steve de Shazer. I'd read that he had been plagued by the same question I had, "How did therapists know what to say and do?" At that time, around the mid-1980's, the team at BFTC was working with the idea of "skeleton keys"—a generic set of therapeutic strategies that could be used depending on certain qualities of the presenting complaints. For the first time in my career, I felt like I knew what I was doing—there were some maps. Steve was an incredibly clear thinker and his partner, Insoo Berg, a gifted teacher. I learned a lot. With time, I got to

where I could do solution-focused interviewing in my sleep.

**JW:** I have a sense here that another crisis was coming!

**SM:** I've always had an affinity for empirical research. In the early 1990's, several follow up studies were published that challenged much of what we were saying about our work. First, the data indicated that solution-focused *brief* therapy (SFBT) was, in spite of our claims, no briefer than any other treatment approach on the market. Second, and more troubling, the research indicated that our model of therapy wasn't any more effective than other models. As you might imagine, these two findings opened up an old wound for me. I thought I knew what I was doing. I was certainly more confident about it. But it turned out that my confidence was misplaced. Yes, the therapy worked. SFBT worked. But if it worked about as well as everything else, then the effectiveness could not have much to do with the specific technical operations—the ingredients in the recipe, so to speak—of SFBT.

**JW:** So if it wasn't the specific ingredients, then perhaps factors common to all approaches might account for the overall effectiveness of the

talking therapies?

**SM:** Exactly. Many scholars had offered this explanation before. Jerome Frank is the name usually associated with this perspective, although the first person to suggest and actually write about it was Saul Rosenzweig—a psychologist in the same graduating class as B.F. Skinner. By the way, I should add that I was exposed to the common factors point of view in graduate school but rejected it out of hand. It didn't tell me what to do. In fact, it strongly suggested that the treatment model mattered very little. "How could this be?", I wondered at the time, "and anyway, if it's true, what the hell am I doing in graduate school?" Anyway, with a few years under my belt, the common factors argument suddenly began making sense to me. Depending on how one counted, there were between 400-1000 different models or therapeutic approaches. Study after study found no difference in outcome between the various and competing approaches. With so many models and so few differences, it just didn't make sense to assume that every approach contained some unique ingredient(s) responsible for success.

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**JW:** Perhaps this also accounts for why most experienced therapists identify with an "eclectic" orientation?

**SM:** Absolutely. Ideological adherence quickly gives way to technical and theoretical pragmatism. With time and experience, most clinicians, the research indicates, gravitate toward eclecticism—picking and blending a broad range of strategies and techniques in an attempt to find something that will work for the client seated in front of them at that hour. Common factors, it seemed to me at the time, was the perfect marriage of theory and practice. In practice, clinicians could use any of the 400-1000 different approaches as long as, in theory, the particular strategy, technique, or model fit with the client and empowered one or more of the common factors.

**JW:** Can you give an example of what you mean?

**SM:** Sure. The therapeutic relationship is widely considered a core common factor, accounting for 30 to 50% of the variance in treatment effects *regardless of theoretical orientation*. Said another way, it doesn't matter so much if the therapy is Ericksonian, Strategic, or Cognitive in flavor as long as the clinician's approach results in a good working alliance. Since *client* ratings of the alliance have a higher correlation with outcome than therapists' ratings, the preferred strategy will be one that the therapist believes in (thereby enhancing another common factor, "alliance effects") but also, and more importantly, something that fits for the client. In *Escape from Babel* (Norton, 1997), *Impossible Cases* (Norton, 1997), and *The Heart and Soul of Change* (APA, 1999), Barry Duncan, Mark Hubble, and I not only summarized the research on the common factors, but offered a framework for operationalizing them in day to day clinical work regardless of the therapist's preferred orientation.

**JW:** So what was the epiphany that caused you to "Lose Faith?" It seems to me that what you're leading up to here is that the common factors still focus too much on therapeutic process: the "how."

**SM:** Exactly. Turns out, the common factors are a dead end precisely because they focus on process. First of all, the minute we started talking about the common factors, clinicians would rightly ask, "How do you do it?"

The result was that we were just developing another way of doing therapy—a transtheoretical model, kinder and gentler to be sure, but a model nonetheless. "And what had the research shown about models?" No difference in outcome. Moreover, at most, they account for one percent of the variance in treatment outcome. More troubling, how could there be a common factors informed approach at all since *every therapeutic approach out there was already based on and worked because of the common factors*.

**JM:** So, the common factors cannot offer much guidance on how to do therapy. If anything, they muddy the picture.

**SM:** Hopefully, they challenge us to remain flexible since all therapeutic models have the potential to be helpful. But knowing about the common factors will not, in my opinion, improve outcomes or help you figure out what will work for that client seated in your office at a given hour. In fact, in many ways, the message of the common factors is, "the method really doesn't matter."

**JW:** And that was the question you started with when you entered the field, "What should I do? What would be best?" Hence, another crisis of faith.

**SM:** Yeah and here's the paradox: Research on psychotherapy indicates that allegiance, that is, a therapist's belief in the way he or she works, contributes significantly to treatment outcome—four times more than the model or approach that is actually used. At the same time, the common factors literature makes clear that, in general, the method one uses is of little consequence. For me personally, I found it impossible to maintain faith long enough in something I knew made no difference in order to make it work! Voila, I lost faith.

**JW:** Wait a minute, can you say that again?!

**SM:** Let me say it another way. The research is clear: therapy works. The average treated client is better off than 80% of the untreated sample in most studies. Hold onto your seat: psychotherapy has an effect size 27 times greater than the one associated with aspirin for the prevention of heart attacks and stroke. Not surprisingly, research further shows that clinicians attribute the effectiveness of therapy to skill and expertise. Unfortunately, there is little evidence to support clinicians in that belief. If there were, then experienced therapists, licensed

clinicians, would on average have better outcomes than, say, students. Typically, they do not. Hopefully you're anticipating what I'm about to say.

**JW:** Therapists must *believe* in what they do, in their skill or expertise, or the chances of success dim considerably. At the same time, it's hard to believe if or when you know that the particular model of therapy one embraces matters very little in terms of outcome.

**SM:** Right.

**JW:** So, what happened?

**SM:** Well, as I describe in the article *Losing Faith* this was really a difficult transition for me. I seriously considered leaving the field. But then I came to the conclusion that I had simply been putting faith in the wrong place.

**JW:** In therapy?

**SM:** Consider two pivotal findings from the research. First, the client's experience of change early in treatment is a really good predictor of whether or not a particular pairing of client and therapist is likely to be successful. And second, the client's experience of the alliance—that is the relationship with the therapist—is also highly predictive of whether or not a particular pairing will work.

**JW:** I remember reading in Walter and Peller's book, *Becoming Solution Focused in Brief Therapy* (Brunner-Mazel, 1992), "the meaning is in the response." What you seem to be suggesting is that the client's response to the particular therapist in the particular situation - the meaning they make of that - is the definer of whether or not it will be successful.

**SM:** Compared to the therapist's assessment of the alliance and progress? You bet. After all, clients' ratings of the alliance have a higher correlation with outcome than therapists' ratings. That same research indicates that the client's experience of change early in the treatment process accounts for at least 15 times more of the variance in outcome than the treatment approach used. Simply put, the client's experience of process and outcome beats the life out of everything we therapists have been saying leads to good treatment outcomes.

**JW:** Where does this take us then?

**SM:** Well, in a manner of speaking, our field has been acting like therapy is (or should be) the psychological

equivalent of a pill. The "right" therapy applied competently to the appropriate problem stands the best chance of resulting in symptom amelioration or cure.

**JW:** And you are suggesting that is a dead end?

**SM:** More like an abyss (laughing). There are 1000 different treatment approaches, over 100 manualized, evidence-based therapies, and the number is growing. But, as I said earlier, the search for a psychological formulary has been an abysmal failure. There simply are no contextless psychological interventions—that is, therapeutic strategies that apply across clients, diagnosis, and cultures. Said another way, process is not a reliable determinant of outcome.

**JW:** So our faith has been, as you say, "misplaced."

**SM:** As I said, it is important to believe in what you do—in fact it's critical. I'm not against learning and using treatment models.

**JW:** But the final arbiter is the client, can they relate and do they think it is working, whatever "it" may be, psychoanalysis or crystals.

**SM:** Outcome has to drive process. The important question is not, "what works?" but rather, "Is what we are doing together working for you?"

**JW:** Ultimately then, because allegiance is critical, clinicians have to find a way of working that fits for them—their beliefs, values, personality, etc.—and then, when working with someone in particular, ask, "Can you relate?"

**SM:** Yes and "is it working?"

**JW:** Now, I've watched you present these ideas in workshops and even taught them myself to students, and it's not uncommon to hear people say in response, "I check in with my clients all the time." Are they just out to lunch?

**SM:** Well, yes and no. Yes, I believe, and my experience confirms, that most therapists work hard at listening to their clients. In fact, I think that explains the drift toward eclecticism I noted earlier. Therapists are trying to tailor treatment to each client. At the same time, we know that therapists check in far less often than they think. More importantly, however, the research shows that the kind of feedback therapists look for and use when determining whether to continue or

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alter course does not result in better outcomes overall.

**JW:** Otherwise, eclectic therapists would as a group have better outcomes, since they are supposedly tailoring the way they work to the individual client in response to feedback.

**SM:** And there is no evidence of this. What we do know is that access to real-time feedback regarding the client's experience of progress and the therapeutic alliance dramatically improves outcome—by as much as 65% in fact—while simultaneously cutting deterioration and drop out rates by as much as a third! Importantly, such improvements in outcome were achieved without any attempt to dictate the kind of treatment being offered or without training in new diagnoses or therapeutic techniques. Indeed, current research indicates that the effect size of formal feedback on outcome is double that reported for the "best" so-called evidence-based practices.

**JW:** The implications for training, certification, even reimbursement for services are mind-boggling.

**SM:** And truly, just beginning to be explored. Training and certification should be based on reliable feedback about a therapist's ability to connect with and actually *help* people.

**JW:** Right now, it's based on achieving "competence" in core areas associated with the particular therapeutic guild providing training.

**SM:** Right. It seems to me that instead of empirically supported therapies, the field—and those who use and pay for our services—would benefit from empirically-supported *therapists*.

**JW:** Is this happening anywhere?

**SM:** Yes, and let me share just a few of the developments we've noticed in treatment settings and healthcare systems that have switched from an *evidence-based practice* to what I like to call a practice-based evidence perspective—in essence, using outcome to inform treatment process. First, time-consuming, process-oriented policies, procedures, and paperwork have been reduced significantly. In exchange for seeking and using formal client feedback, a number of settings we consulted with have completely eliminated onerous pre-authorization requirements, treatment planning

paperwork, and utilization review procedures that have become the bane of professionals, agencies, and healthcare systems everywhere. As a result, more time is being spent in direct clinical service—the reason that most of us got into this field. At the same time, consumer access to, and utilization of, services has actually increased—and wait until you hear this—with *the blessing of the payer*.

**JW:** In a way, everyone wins. On one hand, therapists get to work in a way that fits for them and their clients. On the other, those paying for the service have evidence of a return on their investment.

**SM:** And clients, they have the first real-time protection against poor outcome and deterioration.

**JW:** A therapist who hears this for the first time will probably ask, "How do you measure and monitor outcomes?"

**SM:** Perfect, that's the dialogue our field should be having in my opinion. Many measures and systems for monitoring outcome are available. Barry Duncan, Jacqueline Sparks and I review these in the latest edition of our book *The Heroic Client* (Miller et al 2004). Therapists can also access a great deal of practical, step-by-step

instructions on our website ([www.talkingcure.com](http://www.talkingcure.com)) as well as download free, working copies of our own well-validated alliance and outcome questionnaires.

**JW:** So is there another crisis of faith in your future?

**SM:** (laughing). I'm sure there is. And while this may sound cliché, so far, each has been both necessary and helpful. I can tell you that incorporating formal, ongoing, and reliable feedback regarding the client's experience into my work, finally helped me answer the question that dogged me from the outset of my career: "What do I do?"

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Duncan, L. and Miller, S. *The Heroic Client*. (2004) San Francisco: Jossey-Bass

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