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Steven C. Hayes

Interviewed by Richard Landis

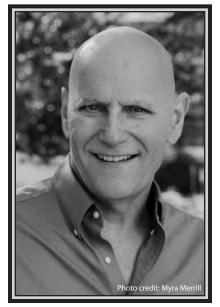
Steven C. Hayes is a Nevada Foundation Professor of Psychology in the Behavior Analysis program at the University of Nevada, Reno. An author of 47 books and nearly 675 scientific articles, he originated and co-developed Acceptance and Commitment Therapy (ACT), one of the most widely used and researched methods of psychological intervention, and Relational Frame Theory, a basic experimental analysis of human symbolic thought on which ACT is based. Dr. Hayes has received several national awards, including the Lifetime Achievement Award from the Association for Behavioral and Cognitive Therapy. His popular book, Get Out of Your Mind and Into Your Life was a best-selling self-help book in the U.S., and his most recent book. A Liberated Mind has received wide acclaim. His TEDx talks have been viewed by more than a million people, and he is ranked among the most cited psychologists in the world.

Rick Landis: Where did your impetus for developing ACT start?

Steven Hayes: Let me give you a little background that leads up to that question. As a graduate student, I became convinced that we needed principles that precisely describe the pragmatic impact of human language and cognition, of human thought and symbolic reasoning. That was a long time ago, and there wasn't a good way to speak about thoughts, feelings, memories, and bodily sensations using the principles-oriented tradition of the time. I had become interested in psychology because of deep issues of human purpose and meaning. I understood the difficulties, but I thought there must be a way through this that looks less like history and more like what we think of in experimental psy-

The book that changed my life was B.F. Skinner's, Walden Two, which gave me kind of a vision for that. And I, like many of my hippie generation, was attracted by the idea that you could develop principles that are so broad in scope, that they could tell us something about how to live a life worth living, how to raise kids, how to organize our societies, and how to make sure that we didn't foster injustice, war, and environmental destruction. I was an anti-war protester and early environmentalist. And I was concerned with issues of fairness and equity in the civil rights movement.

Then, in my early years as an academic, I had the extraordinarily good fortune of developing panic disorder. That focused me, because for a three-year period, I spun down into a narrower and narrower life, in ways that looked insane, disordered, and dis-



Steven C. Hayes

turbed. I had no real understanding from where this was coming. And I, like many others, hit bottom. It's not an uncommon story. [For more of this story, see Hayes' first TEDx talk at https://www.youtube.com/watch?v=o 79 gmO5ppg.]

At that time, my need to understand how the mind works became quite close and personal. I really had no choice but to do something different. I found that CBT and behavioral therapy were not working for me. It wasn't until I turned towards things that I had learned in my hippie days that I found not a way out, but a way in.

RL: What were the questions that moved you forward?

SH: The questions that have mobilized me in my professional life since my hitting bottom in the winter of 1981 were, "Why is it so hard to be human?" and more personally, "How can the human mind take a young academic to his knees to the point where he isn't able to give a lecture to five or six undergraduates without having a panic attack?"

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INTERVIEW continued on page 9

EDITOR'S COMMENTS

In the 15th century, the Indian poet Kabir Das said, "Wherever you are, that is the entry point."

I have long been frustrated by the concept of what should or should not be—and for me, the shoulds have always been an attempt to start the journey at the finish line. Using a map to reach a destination has limited value unless you know where you are starting. If you want to end up in San Francisco, the direction you go makes a big difference whether you start in San Diego or Seattle.

I have viewed psychotherapy as a vehicle to help people find their entry point. It is only from *this* moment that a person can choose a different direction. It is not possible to make a different choice in the past or future. Whether the current experience is happy, sad, confusion, boredom, or fear, this moment is the entry point. Only in this moment is change possible.

This issue is dedicated to Kabir's simple, yet profound observation

Each of the offerings in this issue present vehicles for people to become aware of where they are in the present moment, the point of entry.

We begin with Steven Hayes for our *Featured Interview*. Hayes is one of the major presenters at The Evolution of Psychotherapy this December in Florida. This is a personal interview I conducted, discussing the impetus for the origin of Acceptance and Commitment Therapy (ACT) and Steven's courage to ask of himself the question, "How can the human mind take a young academic to his knees to the point where he isn't able to give a lecture to five or six undergraduates without having a panic attack?" In the rest of the interview, he describes his journey in answering that question, and how he discovered the answer to be an entry point which led to acceptance and profound change. The passion and positive energy radiating from this interview could recharge your cell phone from across the room.

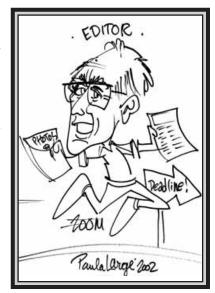
In our *Case Reports*, Henry Close tells a delightful story of his niece hating her freckles when she was a little girl and how Close reframed her "problem" by writing her a letter. His brilliant way of offering his niece a different perspective is followed by an insightful commentary by Eric Greenleaf, comparing it to a similar case of Erickson's. Close helped his niece step out of her frustration and pain as a victim, and stand in the current moment, observing, as a helper, another little freckled girl's frustration and pain. He elegantly changes a "shouldn't be" into a "possibility of what it can be." Charming.

John Lentz interviewed Joe Winn for *In the Spirit of Therapy*. Among other things, Winn is a member of the training faculty and group supervisor with the South Shore Sexual Health Center (SSSHC) in Quincy, Massachusetts. The SSSHC's training philosophy embraces an anti-racist, intersectional understanding of sex, sexuality, and eroticism. The interview reveals his desire to understand what lies beneath surface emotions and reactions to find the complexity that drives *the moment*.

I enjoyed Michael Hoyt and Joseph Goldfield's *Facets and Reflections* column On Using Humor and Jokes in Therapy. I remember listening to Erickson sprinkle his therapy and seminars with word plays and what I felt were Midwestern-style jokes. Only later did I discover that some of the most impactful learnings came from those jokes. Hoyt and Goldfield share their perspectives and wisdom derived from those understandings. (And the jokes they tell are funny!)

In Jeff Zeig's *Historical Hypnotic Procedures* column, he continues to bring us fascinating procedures from the early days of medical hypnosis. The article illustrates how the intention in the moment can affect outcomes. The protocol is reminiscent of the Healing Touch procedures used at the Mayo Clinic today. I find it interesting how understandings of the times can ascribe different models to similar procedures.

Zeig also delights us with his piece on Albert Ellis for *Inspiring Moments*. A long-time friend of Ellis, Zeig gives us a personal glimpse of the man who habitually lived in the *now*. I especially loved his description of how Ellis would talk to



his drop-in group therapy participants "...with the smarts and demeanor of Woody Allen, while channeling the irreverence of Lenny Bruce." You can hear Zeig's love and admiration for Ellis in the article.

Our *Theoretically Speaking* column features Rubin Battino's and Michael Hoyt's observations on Exorcism and the Placebo Effect in Psychotherapy. Consistent with our opening quote by Kabir, Battino and Hoyt use presupposition, expectation, and intention to transform a single session into a point of entry for change. A novel approach with all the underlying elements that facilitate change.

Erickson was a master at envisioning each moment as an entry point for seeding and intervention. This is highlighted in an excerpt from Jeff Zeig's upcoming second bio on Milton Erickson entitled *An Epic Life II: Personal Perspectives*.

We finish this issue's theme of "Wherever you are, that is the entry point" with four special book reviews: *Core Creativity: The Mindful Way to Unlock Your Creative Self* by Ronald

Alexander; US: Getting Past You & Me to Build a More Loving Relationship by Terrance Real; Advancing Psychotherapy: Transforming Conversations in Dialogue with Milton Erickson, Jay Haley, and John Weakland, edited with commentary by Jeffery K. Zeig; and The Heart and Mind of Hypnotherapy: Inviting Connection, Inventing Change by Douglas Flemons. Each is an invitation to experience understandings that can become fascinating entry points.

I hope that this issue will provide entry points for each of us, following the articles and reviews to where they may lead.

Rick Landis, Orange, CA

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IN THE SPIRIT OF THERAPY

Interview with Joseph Winn, MSW

By John D. Lentz, D.Min.

Joe Winn LICSW, CST-S, is a clinical social worker, AASECT certified sex therapist and supervisor of sex therapy. He completed his MSW at Boston University School of Social Work in 1995 and since 2003 has maintained a private practice. Joe has worked with a variety of individuals, families, and couples, including recovery from domestic violence, psychological trauma,

sexual assault and abuse, substance abuse, and endof-life issues. Joe also provides consultation and training to community mental health organizations in the New England area. His clinical interests are centered on working with LGBTQQIA + relationships, consensual non-monogamy, and people regaining sexual intimacy after sexual assault, as well as people in the BDSM and kink communities. Joe is also a member of the training faculty and group supervisor with the South Shore Sexual Health Center (SSSHC) located in Quincy Massachusetts, which is an AASECT approved training program for clinicians interested in becoming certified sex therapists. The SSSH's training philosophy embraces an anti-racist, intersectional understanding of sex, sexuality, and eroticism, and works to foster sexual, systemic, and social justice.

John Lentz: The purpose of this interview is to look at what you do from a spiritual standpoint.

Joe Winn: So, are you asking me if I have spiritual perspective about my practice?

JL: Exactly. I suspect that you have some thoughts that would be new to many of us.

JW: I separate spirituality from religion for a couple of reasons. When you work with marginalized populations and you see the things that people

do to one another in the name of a particular dogma, it has an impact. No one messes religion up more than religious folks. In a world where your relationship is to One who is bigger than you, it becomes important to treat all people as if you are seeing them through a lens that actually values them. Doing this, breathes life into those places they thought were long dead. I think the danger of religion is different from the practice of inviting someone to recognize their worth and their interconnectedness with the world.

JL: Bill O'Hanlon has a definition of spirituality that I like: compassion, connection, commitment.

JW: That is funny, my favorite definition of religion is for those who are afraid of hell, and spirituality is for those who have already walked through it.

JL: [Laughs]

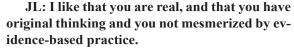
JW: I think that whenever you work with human beings, you have to reach for something deeper and I do that with everyone in my practice, particularly queer folks—part of the community to which I belong. One of the things that happens is people do not realize the injury done to them at a spiritual level until they actually have someone saying to them that it is okay to not protect the people who did or said those things to them. What would happen if you allowed yourself to step into those feelings? There would be a lot of anger. I invite those people to get into the grieving that is just beneath the anger.

One of the things that I have seen in my work is that people want to be al-

lies to particular groups, but they do not necessarily want to be a witness to the pain that these groups have endured. When you create room for witnessing, you get to create something that is along the lines of what Gershwin Kaufman calls a *personal bridge*. I don't know what happens after this life, but I do know about life right now. People want to be seen. They want to be heard. They want to know that someone understands. That is really the key to therapy.

JL: That is profound. I like you already.

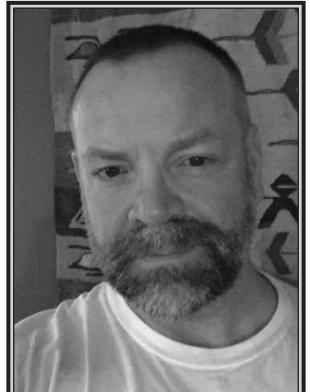
JW: I like you too. What is it that you like about me?



JW: Evidence based practice is a tool of capitalism designed to enslave the masses. It hynotizes but it doesn't bring about healing. I don't know how people cannot see its political aspects. Twelve sessions to deal with the fact that your grandmother pimped you out at a young age—that should be enough!!?

JL: We have dealt with some of the same people who have been marginalized, and we both find it difficult to have faith in evidence-based positions.

JW: I enjoy being not famous for a reason. I grew up in a housing project and in poverty. I found my own way to education. If people do not understand my position about evidence-based practices, then that is their choice. In fact, if they disagree, that is an invitation to their own spiritual awakening. One of the things on the wheel of life is that you graduate from one level of hell to a more sophisticated level of hell, until you don't need that wheel anymore. It is about the very thing that you are seeking to do. It is about the relationship.



Joseph Winn

JL: You are right. It is about the relationship.

JW: I think when we are moving toward something where people's feathers do not get ruffled, then that it is the opposite of spirituality.

JL: You are right.

JW: I know that you worked in a women's prison as a chaplain. We both know that a fixed number of sessions isn't going to fix anything. I don't know about existentialism and big systems, but I trained in structural family therapy with Salvador Minuchin. Being able to step into the stickiness of seeing and being seen, and holding one's story, is the heart of healing. When someone says they have never been anything but the receptacle of someone else's desire and suddenly they are seen as a human being—that is what growth is about. Maybe we should comfort the discomforted and shake up the comforted.

JL: Now you sound prophetic.

JW: That is the work. And when we stop being afraid, we can step into what it means to do better.

JL: Yes! You are making it clear how you express spirituality to your clients. I wonder how working with the population you work with has changed you and your spirituality.

JW: I think it has made me more reflective. And it has made me humbler. At times, it has also made me angry. I think it has made me unafraid of things that I cannot explain. When you have done this work long enough—and I am sure that you have—you pick up spiritual experiences. When suddenly you get

HISTORICAL HYPNOTIC PROCEDURES

In the spring of 2021, in the thick of the pandemic, I introduced this new column to newsletter readers to not only emphasize that history repeats itself, but also to remind us that we can learn from those who forged the way.

Hypnosis in Medicine and Surgery: The Work of James Esdaile, M.D., was originally published in 1850 as Mesmerism in India. I read the reissue, published in 1957, which included an introduction by William Kroger, M.D.

In residence in India for six years, Esdaile used mesmerism for 300 major surgeries. In the tedious introductory material, Esdaile, a staunch advocate of mesmerism, counters the skepticism surrounding mesmerism in the medical establishment at that time. Indeed, interlaced throughout the book are remarkable accounts of recovery from Esdaile's surgeries using mesmeric anesthesia. On page 144, more than halfway through the book, I finally found a passage detailing his procedure. Perhaps the rather buried placement of this is telling, in that Esdaile seemed deeply concerned about nonprofessionals unscrupulously hijacking the method.

Here is a quote from the text detailing the procedure:

Desire the patient to lie down, and compose himself to sleep, taking care if you wish to operate that he does not know your intention: this object may be gained by saying it is only a trial; for fear and expectation are destructive to the physical impression required. Bring the crown of the patient's head to the end of the bed and seat yourself so as to be able to bring your face into contact with his, and extend your hands to the pit of the stomach, when it is wished; make the room dark, enjoin quiet, and then shutting your patient's eyes, begin to pass both of your hands, in the shape of claws, slowly within an inch of the surface, from the back of the head to the pit of the stomach; dwelling for several minutes over the eyes, nose, and mouth, and then passing down each side of the

neck, go downward to the pit of the stomach, keeping your hand suspended there for some time. Repeat this process steadily for a quarter of an hour, breathing gently on the head and eyes all the time. The longitudinal passes may then be advantageously terminated, by placing both hands gently but firmly on the pit of the stomach and sides; the perspiration and saliva seem to aid the effect on the system.

It's better not to test the patient's condition by speaking to him, but by gently trying if the cataleptic tendency exists in the arms. If the arms remain fixed any position they are left in and require some forced to move them out of every new position, the process has been successful. (pp. 144-145).

Kroger's introductory input is valuable. He contextualizes the historical importance of mesmerism and Esdaile, who was a student of John Elliotson, a professor of medicine at the hospital attached to the University of London. Elliotson was an early expositor of mesmerism and was also ostracized for his practice of it. Kroger reminds us that inhalant forms of anesthesia were not used until the 1840s, which accounts for mesmeric initiatives.

If you are interested in history and how mesmerism paved the way for modern hypnosis, you will enjoy Hypnosis in Medicine and Surgery. And although the procedures Esdaile used have no relevance to contemporary clinical methods, what we learn is that the patient's and practitioner's beliefs may be more effective in ameliorating pain and promoting healing than the so-called "right" and proven method. We also learn that advances in science often surpass established theories at the expense of becoming steeped in controversy.

It's safe to say that some of the practices we swear by today will become the antiquated practices of subsequent generations.



COUPLES CONFERENCE, JUNE 2022 REVIEW

Elliott Connie and Solution Based Brief Therapy

by Joyce Bavlinka, M.Ed., LISAC

More than 250 professionals attended the virtual Couples Conference June 24-26, 2022. The conference was organized by Ellyn Bader of the Couples Institute in Menlo Park, California, and the Erickson Foundation.

Elliott Connie, the president and founder of the Solution Focused Universe, presented a keynote on "The Solution Focused Approach with Couples" and "Questions to Couples that Evoke Love."

Elliot's presentations are lively and engaging and his workshops are popular. For more than 15 years, he has honed the Solution Focused Brief Therapy (SFBT) approach and he is considered a leader in the field. Elliott is a casual guy who generally presents wearing his trademark hoodie. He maintains that he does not fix people, but rather delivers hope by identifying the person's resources and focusing on the desired outcome.

Using the SFBT approach, couples can overcome any challenge and create a relationship of mutual satisfaction. One of the fundamental principles of SFBT is the premise that every couple has a successful past. Through questioning, the practitioner connects with the couple, asking relevant questions, including "What are your best hopes from this session and our working together?" And "If your best hopes become a reality, what would you notice?"

The "101 Solution-Focused Questions" takes one through the SFBT model, with questions about desired outcome and unearthing resources. Questions help clients focus on how they can deal with their problem and help the cou-

ple define a better outcome. The process fosters an environment for change and hope. It inspires people to find their own solutions and live better happier lives!

Elliot also presented a structure for SFBT sessions.

Elliott just signed a book deal with a major publisher that will be coming out in early part of 2023. The book will be for both professionals and the general public. The working title is *The Solution-Focused Brief Therapy Diamond: A New Approach to SFBT that Will Empower Both Practitioner and Client to Achieve the Best Outcomes*.

For more into about SFBT, Elliott Connie, and the Solution Focused Uni-



Elliott Connie

verse go to Elliott's website: www.elliottconnie.com You can follow him on Twitter or Instagram @Elliottspeaks or on Facebook at www.facebook.com/elliottspeaks/.

SPIRIT OF THERAPY

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a picture of what someone has experienced, or you suddenly get a feeling in your body that they are trying to put into words, that is a spiritual experience. This work opens doors and experiences many people don't have. It opens you to greater possibilities, and that is how I feel I have been changed. I have a propound respect for this work, and for those who do this work with integrity. And again, when you are working with sexual minorities and with those who look like they have had nightmarish lives—and they have—and they still hold themselves with grace and dignity and let you bear witness to that, you cannot help but be humbled.

JL: Absolutely.

JW: That's it. I wish I had pretty words for you, John.

JL: Those aren't pretty? I have a sense that you allow yourself to become so focused on the client that you begin to feel what they are feeling.

JW: Yeah, to be able to feel it is to be able to step into their experience. It is developing relationships with people. I am blessed to what I do. I get to offer sex therapy, and supervise sex therapists, as well as teach and supervise therapy. When people are struggling to say what their experience is, and they can't quite articulate it, I try to articulate what they mean. If that is what they are trying to say, then I ask, "And how is this related to how your mom raised you or how your dad raised you and the messages you got from the church?" "I am curious ... when the Catholic priest was abusing you and then called you a faggot, what part of his voice is still operating in your head and reflected in your own sexuality?" Many people say that they never made that connection—how they view themselves coming from the very person who abused them and was damming them for it. I think you have to have a spiritual compass to step into this work. And you have to have a view of the world being bigger than what we see.

JL: Yes! And that is one of the reasons I am intrigued in talking with you—because I thought you would come at spirituality from a place that a lot of us don't dare to touch.

Working with prisoners, I saw a side of society that caused me to see things I had not before seen. But because I worked in a women's prison, I was not there to do sex therapy. You talked about boundaries and being a member of ASECC, and you have developed approaches to dealing with the shame that surrounds all of that. I think you have refreshing ideas.

JW: You know, sex is more than our genitals. Sex is an act of creation and an act of assertion -- of self and society. Eros is not just about what you masturbate to or to have sex. It is about giving yourself permission to step into an act of creation -- to step into possibilities. Sex is tied to everything we do. Even my clients who identify as asexual still live in a society that is sexual. We are all sold a bill of goods about sex, right? But when you start to teach that sex is about consent, the fact that as a child when you were told to kiss Grandma and you didn't want to touch Grandma, well, that was not consensual. How that plays out and the connection with that is powerful. We also believe in the power of saying "yes" to something: "Yes, I would like to touch your body, and yes I would like to be touched. I don't especially want to climax; I just want to be touched and receive and give affection." I see sex and sexuality as avenues of healing for growing.

JL: The varying experiences of the clients have added a dimension to your thinking. You have to examine a lot of your preconceived notions about what sex is and that it is really okay if someone doesn't want this but does want that. Those are things that we take for granted. I have enjoyed getting to know you.

JW: Thank you, I enjoyed getting to know you as well.

INSPIRING MOMENTS WITH THE MASTERS

Albert Ellis

By Jeffrey Zeig

My friendship and professional association with Albert Ellis went back nearly 40 years before he died in 2007 at the age of 93. Al, as he was known (not Dr. Ellis), was the founder of Rational Emotive Behavior Therapy (REBT). His approach to therapy and the human condition was down-to-earth and filled with playful humor. He was known to take a popular song and change the words to reflect the principles of REBT, and then lead other therapists in song—all belting out his personally written lyrics.

I cannot enumerate his countless contributions in this brief column, but a central tenant in his work is that our attitude, not our circumstances, determines our future. Al was one of the pioneers of cognitive behavior therapy, and his work in sex therapy and hypnosis is also significant.

Al's approach was practical, and it was not confined to the therapy office. For example, he would prescribe tasks to shy clients. He would have a client sing opera on the New York subway, to demonstrate that they could overcome their shyness. And to demonstrate that he could take his own medicine, Al would approach random women at the Bronx Zoo in search of a date. And he was not to be stymied by his lack of success.

Since he first presented at the 1985 Evolution of Psychotherapy Conference, Albert Ellis was a supportive and longtime friend of the Erickson Foundation. I also considered him my personal friend. He presented at every subsequent Evolution Conference until 2003 and he also graced the podium of the Brief Therapy conferences and Erickson congresses.

The most memorable moment I had with Al was when we engaged in a dialogue at the 1988 Brief Therapy conference in San Francisco. With Al, of course, the dialogue quickly turned to debate, but I felt honored when he told me at the end that I had "done a good job." For Al, that was high praise.

Over the years, as I traveled to New York City to teach, I would visit Al and Debbie Joffe Ellis, his then wife. Toward the end of his life, when Al was confined to a rehab hospital, Debbie's devotion, love, and care was inspiring and touching.

In December 1990, Al presented at the Evolution Conference in Anaheim, California. I had rented Disneyland for a private party for Evolution attendees on December 13th. Seeing Al in the "Happiest Place on Earth," was...well...odd, to say the least. A physically manifested oxymoron. But Al didn't stay happy for very long, leaving with a dramatic flair spewing expletives about his surroundings that would make Bashful blush. My thought was that Al had better things to do, like writing another book. (He wrote 75 over his lifetime.)

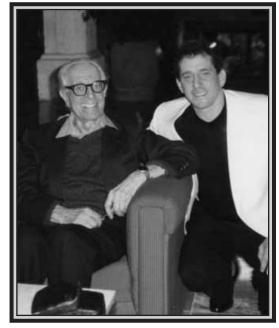
Albert Ellis was a highly efficient person. And he was tireless. He would see a patient and finish the session and immediately continue writing one of his many professional papers and books. In 1972, my best friend Chuck Theisen was working on a master's degree project at the United States International University in San Diego and wanted to interview Al who was lecturing in the city at that time. Al agreed to be interviewed but insisted that the interview take place on his flight to Phoenix. So, Chuck had to buy a roundtrip ticket to Phoenix just for the in-

Al had what is best described as abrasive humor, liberally punctuating his speech and his letters, with curse words. He was also not one for lavish living. In fact, he lived just the opposite: a nearly spartan existence in a modest apartment above the institute he founded in New York City. His sole purpose was bettering humankind by having people correct their distorted, negative attitudes.

Perhaps some of my affinity with Al was that we were both Jewish men from the Bronx. Albert Ellis was in fact, an institution in New York. His Friday night drop-in group therapy sessions in the city were legendary. He would talk to participants with the smarts and sense of humor of Woody Allen, while channeling the irreverence of Lenny Bruce.

Throughout the years, the Erickson Foundation has formally invited faculty to present at conferences. With Al, I could always be sure of his informal reply. "I am coming to your (expletive deleted) conference," he would write back and then joke about his presence being sufficient enough. No need to muck things up with other faculty.

I have shared the podium with Albert Ellis several times, including at international conferences and I frequently use his methods in therapy. For example, Al's notion was that we all belong to the FFH club: Fallible, F*#ked up Humans, and



Albert Ellis and Jeffrey Zeig

I have used this to reframe patients' foibles.

Albert Ellis was and still is significant to the history of psychotherapy. In fact, at one point in the early '80s, he was considered the second most influential therapist. Carl Rogers was number one and Sigmund Freud trailed behind Al.

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CASE REPORT

FRECKLES

By Henry Close, Th.M

At 8 years old, my niece Laura was (and still is) totally charming, bright, outgoing, and playful, with flaming red hair and a face full of freckles. But as a child, Laura was extremely self-conscious about her freckles. At a Thanksgiving gathering, she told me she didn't like them and wished they would go away.

I wanted to reassure her that her freckles were in no way a liability. Indeed, they were one of her most defining features. But I knew that direct, straightforward reassurances were unconvincing. That is what family is supposed to say!

Indirect reassurances, however, such those in a story can be much more effective. Milton Erickson was known for his use of storytelling and indirectness. He would sometimes write letters to children as an effective way to communicate.

When we talk to someone, half our energy goes into listening; the other half is spent thinking of how we might reply. But when we read a letter, we can postpone our reply, thus devoting more energy to accepting and understanding. Also, letters are much less likely to stir up our defenses.

The first step I took in writing Laura a letter was to establish rapport. I let her know that I took her seriously and understood how terrible freckles can be for the freckled one. Then I positively reframed having freckles.

For the author of the letter, I thought of Santa, who symbolizes kindness and love. A letter from Santa could address her concerns in a loving way—but obliquely. Direct reassurance, even from Santa, would lack authenticity.

I even thought of a letter within a letter—one to establish rapport, the other to reframe.

Santa's Workshop The North Pole Novemberdoodle 23½

Dear Laura,

A little girl from Seattle wrote me a most interesting letter, and I wanted to ask your advice about how to answer it. She wrote:

Dear Santa,

What I want for Christmas is something I don't want! I mean, I don't like the freckles on my face. My brother teases me about them and makes me cry.

Mom and Dad tell him to cut it out, and he does for a while, but then he teases m again. Sometimes Dad gets really mad and yells at him, but he always teases me again the next day.

Please take these freckles off my face, or else take away my mean old brother. I don't know why anybody has to have freckles. Who invented freckles anyway!!???

Love, Cindy

I wrote back that very afternoon. Here is what I said:

Dear Cindy,

My goodness, it seems that you have a real problem. I know it must feel terrible when your brother teases you—es-

pecially when he teases you about the way you look.

I'm sorry, but I cannot take your freckles away, even if I wanted to—which I don't. If I took your freckles away, I would have to take away all the freckles in the whole world. Just think how terrible that would be.

All the stars would disappear too because stars are the sky's freckles. Nobody would ever be able to have lights on their Christmas tree, because those lights are the tree's freckles. And there wouldn't be any more specks of light in the ocean at night because those specks of sight are the ocean's freckles.

The world would be much less interesting with all the freckles gone

But what I can do is bring you a box of CINNAMON COOKIES for Christmas. Cinnamon is about the same color as freckles, and if you spilled some on your face, nobody would notice

Please tell me, Laura, what else I should tell Cindy. Love, Santa

Cindy hated her freckles, and for good reason. Then Santa said that freckles were as beautiful as the stars, as lovely as lights on a Christmas tree, and as fascinating as the specks of light on the ocean at night. This wasn't me saying this to Laura; it was Santa saying it to Cindy. Santa's letter also established Laura as a valid authority on freckles.

At our Christmas gathering, Laura greeted me with an enthusiastic hug, and with a big smile on her face handed me her reply to Santa.

Dear Santa,

Thank you for the note. Anyway, I decided I like my freckles. But I'd like some cinnamon to help Mom cook.

P.S. Tell Cindy that freckles are camoplage (sic). When you play hide and seek, you can hide better.

Love, Laura

Accompanying the letter was a playful drawing of the sky, complete with the moon, a smiling sun, and several stars, with the notation, "Sky freckles are stars."

(From the Journal of Pastoral Care, 2000.)

Commentary

By Eric Greenlead, PhD

Henry Close charms us, and Laura, with the notion that "stars are the sky's freckles." He is circumspect, allowing Laura distance from adult judgements, and asking that she help another little girl with freckles.

Erickson's case about a child with freckles might seem as though he was brusque and direct in his communication, but the printed word does not convey Erickson's tone of love and good humor. Erickson said to the child with freckles, "You're a thief!" and used the same cinnamon simile as Close does, also with good effect.

Children are cautious about trusting adult wisdom and advice, and both Close and Erickson were wise enough and kind enough to help without being too helpful.

INTERVIEW

continued from page 1

RL: Those are not easy questions. How did you go about trying to answer them?

SH: Those are definitely processoriented questions. At that time, I didn't have a particular technology in mind to deal with them. The process began inside my own suffering, and then moved forward, unpacking human language and cognition. It ended up with developing Acceptance and Commitment Therapy and Acceptance and Commitment Training (a non-clinical version), and the six elements of the psychological flexibility model.

During this time of struggle, in my study of relational learning, I was exposed to the earliest work on stimulus equivalence. This focus gave me insight regarding questions about how the mind learns. Maybe learning to derive arbitrary relations is itself a new form of learning that builds on the forms of learning that I was exposed to in the Animal Learning Lab. That line of questioning resulted in Relational Frame Theory. There are several hundred studies on it now, as it coevolved with ACT and informed each of the six psychological flexibility processes.

RL: Where did your understanding of the nature of learning enter into ACT's evolution?

SH: I believe we are dealing with a clash between a form of learning that is 1,000 times more recent than our basic underlying neurobiology and the forms of learning that are associated with it. These underlying ancient forms of learning are given form in processes like habituation, and operant and classical conditioning. What is going on right now, as you read these words, is fundamentally different from them, even though it builds on them. For example, while you read this, you may find yourself evaluating your own internal states. And based on those evaluations and predictions, many will try to avoid sensations, feelings, memories, and so on, which can be a very toxic idea. However, it can feel as though it is a logical, reasonable, and sensible approach. You are trying to use your recent form of relational learning to manage your ancient form of experiential learning. Unfortunately, doing so actually makes the problem worse; it focuses our energy on that which makes it difficult.

RL: How does ACT's six psychological flexibility processes of Cognitive Diffusion, Acceptance, Being Present, Self as Context, Values, and Committed Action conceptually fit in here?

SH: The flip side of creating a competition between the ancient and current learning processes is cognitive diffusion: the distancing of mindful awareness of thought and flight without entanglement with it. Cognitive diffusion gives you a way of managing and balancing those two forms of learning. This distancing also occurs with acceptance or non-attachment to features of human emotion. We need to learn emotional openness because we judge and evaluate our emotions as well. And just like with our thoughts, we try to use top-down regulation, when really what you need to do is to take what's useful inside your felt experienced bodily sense and your emotions and be able to use them if they're useful and let them go if they're not. However, there is no need to focus on them, push on them, and judge them and try to demand that they go away. That would just make them more cen-

Our attention similarly becomes directed in a problem-solving way, instead of a way that is softly linked to what works best for us. Our sense of self becomes our narrative self, our categorical self, our evaluated self, the persona —in Greek, the mask—the personality that we put forward, like the clothes that we wear, rather than the witnessing, noticing, observing sense of awareness that connects us in consciousness with others. Once we're able to take the perspective of others, we can look back and notice our own sense of looking from where we are. It's literally the perspective-taking we that establishes the me that resides in that sense of awareness. [What ACT calls Self as Context.] And so, the social basis of consciousness gives us another place to go with a sense of self that is inherently more interconnected, less defended, less categorized, less

We hurt where we care; we care where we hurt. We tend to treat our life as a problem to be solved rather than a process to be mindfully noticed. We tend to try to avoid the risk of caring, even at the cost of being able to

be motivated towards things that have a deep sense of meaning and purpose for us.

We determined that being hurt must be avoided at all costs. The result of this is to hollow out life itself. Instead, you can embrace the process of being able to *focus on and choose your values*, not just your goals, but those qualities of being and doing that you wish to put into your life's moments. And then to build habits around the broader patterns of *values-based action*.

Those are the six psychological flexibility processes, and all of them require an understanding of human language and cognition in order to be able to pursue them.

RL: What are the original questions that set you on this journey and have any new questions emerged?

SH: The original questions that moved me forward were, "How does the human mind work?"

"Why is it so hard to be human?" They led to, "What can we do about it?" While science has not been able to definitively answer these questions, we have been making major inroads.

The psychological flexibility model of six processes is the smallest set of processes that do the most work in the most areas as any set of processes known in science. That is an empirical fact. We recently completed a meta-analysis of every mediational study ever done in psychotherapy (Doi: 10.1016/j.brat.2022.104155), and the single most powerful set of processes are psychological flexibility and mindfulness. Those processes and their close allies account for more than half of everything we know about how change happens.

I do think we have found the smoking gun as to what human language and higher cognition really is—and that is the most arrogant thing you'll ever hear me say. I do think relational learning is at the core of human language. It is not associative learning. Three hundred years of trying to make associative learning work has failed us. But relational learning works very well. We can use relational learning to teach kids how to develop a sense of self if they don't have a sense of self; how to raise IQ; how to reason; and how to think. And we can

use it to rein in the excesses of the problem-solving mind and connect into a more observant and appreciative mode. We also have within us that which helps us be more cognitively, emotionally, and attentionally open—from a sense of self that doesn't need to be defended.

So, this is not a final answer, and nothing is ever finished. But if you ask me about questions I had at the beginning that I now have answers for, I would say, "What is the core of human language and higher cognition?" And from that, "Why do we suffer?" And then from that: "What do we need to focus on the most to do the most good in psychotherapy?" I would suggest to you that a broadened version of psychological flexibility will help understand virtually any psychotherapy approach. I'm not saying it's a panacea. And I'm not saying it's everything that matters. I am saying that it gives us a core from which we can build.

RL: How has that focus on process of change you have been describing evolved over the years?

SH: What has begun to happen in the psychological community is that we have focused on these flexibility processes and realized how powerful they are, and we have focused on how much we know about change. This was not just from ACT, but also from DBT, CBT, humanistic therapy, analytic therapy, and so on. They all work through greater emotional and cognitive openness and greater attentional flexibility. And they are about finding a sense of self that doesn't need to be defended and focusing on what's important to get your feet moving in that direction. In psychotherapy we're on a common journey learning together.

Now, one of the things that I've done that has changed, is that I have begun to think of the behavioral sciences and all of its wings in more of an evolutionary way. I'm saying that variation and selection fit into a context. That is the game that all complex systems are playing.

RL: And when you refer to complexity, I assume you are referring to the formal definition of a system that it is diverse, interconnected, interdependent, and adaptive.

INTERVIEW continued on page 20

FACETS & REFLECTIONS

On Using Humor and Jokes In Therapy

By Michael F. Hoyt and Joseph A. Goldfield

Dr. Erickson said: "In teaching, in therapy, you are very careful to use humor, because patients bring in enough grief, and they don't need all that grief and sorrow. You better get them in a better frame of mind right away." (Zeig, 1980, p. 71) He also said, in 1937 (reprinted 1980, p. 157): "In short, the techniques of conscious humor are an earnest and serious matter in unconscious psychic processes."

Here are a couple of examples of our use of jokes and humor to bypass conscious resistance and offer entrancing opportunities for multileveled communication.

Did You Hear the One About ...?

Case One: While going to visit the Erickson home, Hoyt and Ritterman (2012) describe telling a funny joke to their taxi driver to help him reframe his divorce from his ex-wife as escape rather than as a painful abandonment. The punchline was that another taxi driver, stopped by a traffic cop, is told by the police officer that he will let him go if he has a good story—to which the driver replies, "I thought you were the cop she ran off with and that you were bringing her back!" Hearing this, our driver laughed heartily and said, "I'm going to remember that story."

Case Two (Hoyt): Bill and Jane were a couple I saw for therapy. While they made some progress on a variety of issues, discussions about Bill's overconsumption of alcohol quickly became acrimonious and nonproductive. Bill liked to tell jokes and present himself as witty and in control and did not want or accept being told that he was "drinking too much," or that he was "in denial." In a session, sensing that Jane was about to once again contentiously bring up problematic drinking, I said:

I don't know if you've heard this one: A guy walks into a bar at 5:00 and says, "I'll have three beers." The bartender draws the beers and puts them in front of the guy, and he drinks them—one, two, three. The next day, the same thing—the guy comes in at 5:00, orders three beers and drinks them. After a few days of this, the bartender says, "You know, I could bring you the beers one at a time, so that each would be fresh and cold, rather than all three at once." And the guy says, "Thanks, but the deal is this—every day when my two brothers and I are apart, at 5:00 we each go to a bar and order three beers and drink them. That way we can have a drink together every day." The bartender shrugs and says, "Okay." And for a while this happens: Three beers every day at 5 p.m. Then, one day, the guy comes in and says, "I'll have TWO beers." And the bartender looks worried and hesitates before saying, "Did something happen to one of your brothers?" And the guy says, "Oh, no. I've quit drinking!" (See Hoyt, 2017, p. 230)

They both laughed. At our next session, two weeks later, Bill reported that he had greatly reduced his drinking, and Jane concurred.

Comment: Carl Whitaker (see 1975) said that humor and absurdity were a "way of getting around the corner without tearing down the building." And the great comedian, Mort Sahl (1976, p. 23) wrote: "Humor is the ultimate shorthand."

Case Three (Goldfield): Sean was a 27-year-old man who lost his father in October after his father had struggled with cancer for about three years before succumbing.

At our session before Christmas, Sean reported that he and his mom would be alone and that his sister would be away at college. They were anticipating Christmas with extreme dread.

I gently asked if there were a way to communicate with his father, what advice would his father give Sean and his mom about getting through. He brightened a bit and said his dad always brought humor to the family, especially during rough times, and that he would probably do something to make them laugh or suggest they do an activity that had humor involved. As he spoke, a memory came to me. I smiled, and Sean asked me what I thought.

I told him a true story. My dad had died three years ago after also fighting cancer for three years. I told Sean that when I was missing my father, I would sometimes think of funny events involving Dad. Sean was curious and asked for an example. I told him about one time when my dad was repeatedly and unsuccessfully trying to teach my son a card trick and I was watching. And my sister said "Hmmm...how did I get myself into this?" I told him that I was laughing so hard that my son and wife worried that I was going to have a heart attack! I began to spontaneously laugh again as I remembered the experience. My laughter was contagious because Sean began to laugh as well.

I had followed Sean's lead about bringing humor into a difficult situation by tapping into humor as a longstanding family coping tool. Talking about our fathers' deaths developed rapport and provided support from someone who "got it" because they had a similar experience. At the end of our meeting, I could see by Sean's uplifted demeanor that a positive seed had been planted.

At our next meeting, after New Year's, Sean reported that his family had changed their holiday plans. His sister had returned home, and his paternal uncle came to visit. They had solemn moments, but he also said they had a "good time," which included a little "joking around." When I commented that the family seemed resilient, he told me that they had gotten that from his dad, who often used humor to deal with his battles with cancer.

Comment: What sometimes is called *countertransference* can often be thought of as *client-inspired therapist contributions*, constructively utilizing whatever emerges in the work with clients (Hoyt, 2017, p. 180). The unconscious of one person can communicate directly with the unconscious of another, opening various resources. As Erickson said (quoted in Greenleaf, 2000, p. 57), "...it became apparent that there were multiple levels of perception and response, not all of which were at the usual or conscious level of awareness but were at levels of understanding not recognized by the self." This can produce a kind of "passing the trance" (Greenleaf, 2000, pp. 56-60). Therapy is a bi-personal field. We're in it together, and most of us have been inspired by what a client has said.

Discussion

Jokes and humor can be useful in therapy to offer comfort and build alliance, to create and release tension in a surprising way, and to send a message and shift meanings. As Short (2021, p. 286) wrote, discussing core competencies in Ericksonian therapy (ET): "In ET, the use of humor and surprise is considered an important part of therapy."

Humor tickles the neurology that holds us stuck, and disrupts a negative trance (Hoyt, 2013, 2017; Hoyt & Andreas, 2015; also see Goldfield, 2013). "You need to teach patients to laugh off their griefs and to enjoy their pleasures," said Erickson (quoted in Gordon & Meyers-Anderson, 1981, p. 29). As Frank Farrelly (Farrelly & Brandsma, 1974) taught, laughter can be the sound of victory.

When you go into those small rooms to talk people out of their problems and unhappiness, bring your sense of humor with you. Holding things lightly, being playful at the right time, and evoking laughter and delight can be salutary for both clients and clinicians. That's right. Is it not?

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THEORETICALLY SPEAKING

Exorcism and the Placebo Effect in Psychotherapy

By Rubin Battino¹ and Michael F. Hoyt

Shapiro and Shapiro's definition (1997, pp. 37-38) is a good starting point:

A placebo is any therapy (or that component of any therapy) that is intentionally or knowingly used for nonspecific, or psychological, therapeutic effect, or that is used for a presumed therapeutic effect on a patient, symptom or illness but is without specific activity for the condition being treated.

As Shapiro and Shapiro (1997, p. 2) note: "The great lesson then, of medical history is that the placebo has always been the norm of medical practice ... until recently the history of medical treatment was essentially the history of the placebo effect." The placebo effect has been in use for millennia, in various guises, from medicine men and shamans to modern times. It also plays a significant role in psychotherapy (Battino, 2000, pp. 37-70).

With respect to psychotherapy, the placebo effect is in the expectation of both the client and therapist that the client will feel at the end of a session that what he or she wanted from the session has occurred. As Milton Erickson wrote (1954, p. 261): "Deeds are the offspring of hope and expectancy." In 1995, Jerome Frank similarly observed, "I'm inclined to entertain the notion that the relative efficacy of most psychotherapeutic methods depends almost exclusively on how successfully the therapist is able to make the methods fit the client's expectations."

This begins (does it not?) when the client asks for the session. The client is stuck in some specific emotion or behavior and expects (hopes, too) that the therapist will have ways of getting them unstuck. If the therapist is using a method that is new and novel (and the client knows this), the session is likely to be even more helpful. Indeed, there are reports (Lehrer, 2010) that when a new medicine comes out and the doctors believe in it, the patients get better. And then after a few years when they use it a lot, it does not work as well. The patients stop getting better.

Expectation (Battino, 2006) can be considered to be the main factor in the placebo effect.

Battino (2014) uses this directly when he tells his clients that he expects to be able to help them in one session (although they can always ask for additional ones). So, from the outset a seed is planted. The probability of change is enhanced by suggesting to the client at the beginning of the session that they keep somewhere in mind the question: "What are you willing to change today?" This basic Redecision Therapy contract question (see Goulding & Goulding, 1979; Hoyt, 2017, pp. 51-53) implies success in the session, and also initiates the client's thinking about what they can change. Hidden in these openings is the implicit permission and expectation of the therapist that change will occur. The word "hidden" is emphasized because giving the client permission to change is a significant part of what we do as therapists, although it is rarely mentioned.

For the placebo effect to work in psychotherapy, depends in large part on the strength of the therapeutic alliance. The client needs to trust the therapist and continue to believe that s/he will be able to help. This means that the therapist has to quickly establish a trusting rapport with the client. This can be done by starting out with a friendly chat before suggesting various possibilities of change to the client. From time to time the therapist just staring off into the distance (having told the client that one does this to think about what to do next) lets the client know that the therapist is totally focused on useful possibilities.

Exorcism and the Placebo Effect

Exorcism is defined by Oxford Languages (retrieved 9 March 2022 from Google) as "the expulsion or attempted expulsion of a supposed evil spirit from a person or place." When you suggest to a client that the behaviors or beliefs that are restricting them may be caused by an evil spirit or demon, they often readily accept this idea since it means that they are not doing anything wrong and they are not to blame for their behavior. (As conceptualized in Narrative Therapy, this externalization makes "it possible for people to experience an identity that is separate from the problem; the problem becomes the problem, not the person" —White, 2007, p. 9.) This opens the possibility of doing something to remove that controlling entity from them so that they could be free of it. It can be effective to tell the client that this can be done by an exorcism. (This strange suggestion has never been refused in the first author's experience!) To establish the reality of the evil entity, the client is asked if there have been any times when they have been able to resist it. And, if yes, how were they able to do that?

Before beginning the hypnosis session for an exorcism, it is important to give the evil entity a name, which can be a symbol or a number or a color. The following transcript (a reconstruction) with a client named Larry illustrates the procedure. He was 20 years old and wanted help in controlling his emotions. Larry chose the name "Red" as the controlling element in his body. He paid attention to breathing to relax, and his bedroom was his safe haven. After explaining about needing someone or something to exorcize or get rid of this controlling influence, Larry chose the name "Avenger." We decided for simplicity to just call it "AV" (without any descriptive information about AV). This procedure is an adaptation of the guided imagery approach which incorporates a way to relax, a safe haven where the client selects to go to within his/her mind, and a healing or change effecting entity, which the client also picks (Battino, 2000, 2020). Using vague "magic words" (Battino & Hoyt, 2021) such as "somehow," "you know," and "somewhere in your body" allows the client to use his or her conscious and unconscious wisdom to move forward.

Please make yourself comfortable. If it is okay to close your eyes now. Please do so. We can start with you just paying attention to your breathing. Notice each breath as it comes in and goes out. With each inhale your chest and belly softly rise, and then with each exhale all of those muscles just relax. This breath and the next one. This heartbeat. Continue to breathe softly and easily. And now, within your mind, you can just drift off to your own special place, your bedroom. Enjoy being there.

And, while you are there, something interesting and special happens. You become aware that AV is somewhere near you. And AV is very knowledgeable and powerful and can do what is needed this afternoon. AV comes closer to you and knows just exactly where within your body that Red is located. Then, somehow, AV gently enters your body and goes to where Red is. AV grabs hold of Red in a secure and powerful way so that Red cannot escape. Then, somehow—and you may even sense this going on inside you-AV carefully and slowly moves Red to the surface of your body and out of it. AV, holding onto Red, moves towards the window and through it to the outside. And AV easily moves up through the air with Red captured and into the stratosphere and beyond. At this point, AV just winds up and throws Red towards the sun at the speed of light. And we know that it will take eight minutes for Red to get to the sun and burn up and disintegrate and disappear forever.

Continuing to breathe comfortably and easily, this breath and the next one, you are aware that Red is no longer within you, and that you are completely and forever free of Red's control. Perhaps can you take a deep breath and sigh now, and then within your mind you thank AV for ridding you forever of those old controls over you.

COUPLES CONFERENCE, JUNE 2022 REVIEW

By Ellyn Bader

Despite the challenges of organizing another COVID-era conference, this year's Couples Conference featured a stellar faculty of 10 who discussed a wide variety of topics. The dynamic topics included everything from anxiety to sexuality—with gender, race, and power thrown into the mix!

Participation was primarily online, but a small group of about 30 individuals gathered at the hotel for in-person learning. We felt the energy of being together, learning new things, and focusing on the importance of our work as couples' therapists.

There were more presentations than I could attend—and far more presentations than I can describe in this review. But here are a few highlights. I hope this review conveys at least some of the excitement and inspiration in the ideas we heard and shared.

William Doherty, PhD, offered a keynote called "Common Factors and Best Practices that Characterize Effective Couples Therapy." These best practices span across couples therapy models and include 1) sharing airtime with both partners from one session to the next 2) preventing partners from interrupting each other 3) not allowing "unmanaged aggression" or "hot conflict" to be displayed in session 4) acting as a filter for negative messages; having partners communicate positive messages to each other 5) challenging mindreading and pathologizing of each partner by the other 6) finding out if divorce is imminent divorce; and finally 7) communicating hope.

I presented a workshop on "Developmental Thinking: How to Be a Skilled Couples' Therapist."

Developmental Thinking enables you to view couples' struggles as part of the journey for psychological growth and wholeness—not as pathology or illness. When we think developmentally, we are focused on growth, not pathology.

Here are my five principles of Developmental Thinking: 1) Strong leadership is essential. 2) Create individual autonomous goals. 3) Set the stage for self-differentiation. 4) Open clients to expressing their vulnerable thoughts, feelings, wishes, and desires. 5) Get each partner "back in their own skin."

When you first meet with a couple, Developmental Thinking leads you to uncover where the couple is stuck; where and how their development is arrested; the main sources of their pain, disappointment, and disillusionments; how they have hurt one another; and finally, how far off course they are from what one would expect based on their ages and the time they have been together.

Developmental Thinking illuminates couples' problems, which are predictably based on several factors: how long they've been together; the developmental stage of the relationship; the severity of the arrested development; and if there has been chronic triggering of trauma that has not been repaired.

Strong leadership is essential. An effective couples' therapist should know where to take the sessions and the relationship. The therapist should also manage sessions so that they don't get out of control and step in and take charge when necessary. The therapist needs to make it clear to the couple that they must stop rehashing their "fight of the week" without a clear direction.

Perhaps the most important benefit of Developmental Thinking is that therapists can make an enormous difference in people's lives.

I also participated in a panel discussion on "Lies and Deception" with Stan Tatkin, PsyD, MFT, and Ari Tuckman, PsyD, CST,

I highlighted four types of conflict-avoiding lies:

- 1. Lies of omission.
- 2. Finessing the topic; when partners fear that the truth will cause a fight, they avoid and shy away from difficult topics.
- 3. Lies to self that some things—even important ones—don't matter.
- 4. Hiding relevant details of a crucial situation when asked.

Tammy Nelson, PhD, gave a workshop on "The Future of Sex: What's New?"

Sex is naturally a hot topic, and this workshop did not disappoint. Here are a few memorable facts from the session.

Consensual non monogamy (CNM) is about as common as owning a cat. Research shows that 4-5 percent of Americans are involved in this type of arrangement at any given time and about one in five has engaged in some form of CNM in their lifetime. In other words, these relationships are more common than you think, and therapists need to know about working with CNM couples.

Skoliosexuality, sometimes spelled "scoliosexuality," is the attraction to people who are transgender or nonbinary. This is a more recent term, and a reminder of the importance of always learning about ever changing cultural norms and variations from the familiar.

Robosexuality is on the rise. This is the term for mutual attraction and/or sexual relations between humans and robots, and it oftentimes involves humans and robots of the same gender.

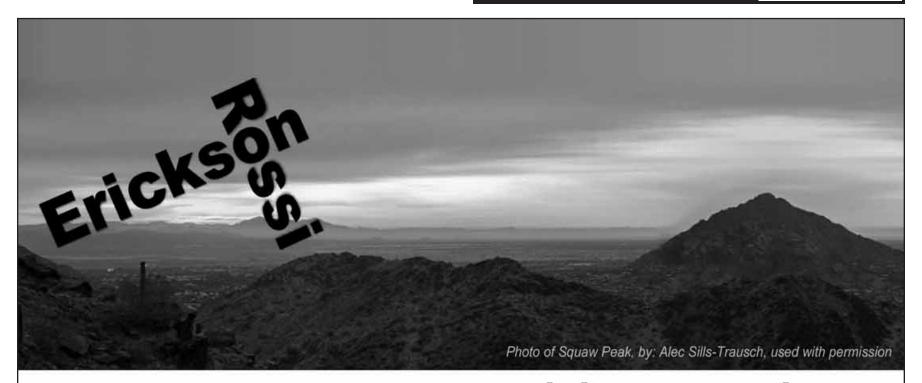
Gatebox, in Japan, is a communication device for living with virtual characters, including holographic anime assistants, and wives. A recent new product touted as a solution for lonely men quickly sold out.

Tinder, one of the current largest dating apps, has 50 million users and records 12 million matches per day! So apparently dating is not outdated.

The faculty for Couples Conference 2022 included: Ellyn Bader, PhD, Elliott Connie, MA, LPC, William Doherty, PhD, Martha Kauppi, MS, LMFT, Tammy Nelson, PhD, Sejal Patel, PsyD, Peter Pearson, PhD, Stan Tatkin, PsyD, MFT, Ari Tuckman, PsyD, CST, and Joseph Winn, MSW, LICSW, CST-S.

Thanks to everyone for delivering great information with a slightly different angle, which resulted in a program that was varied, rich, and deep.





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The Collected Works of Milton H. Erickson, MD Digital Version

Edited by: Ernest Rossi, Roxanna Erickson-Klein, Kathryn Rossi

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BOOK EXCERPT

The following is an excerpt from Jeff Zeig's soon-to-be-released book, Advancing Psychotherapy: Transforming Conversations. The book is based on discussions between Erickson and Jay Haley and John Weakland regarding the nature of psychotherapy and hypnosis. It features Zeig's commentary. To order the book visit: https://www.erickson-

foundation.org/books/p/advancing-psychotherapy

Hypnosis with a Resistant Disbeliever

Milton Erickson: I do not know if this is a suitable example, but I will cite it. David and Anna Lee were doing a lot of research in hypnosis, and they ran across Jane. David thought she would be a good hypnotic subject. Very intelligent, alert girl. She had every conceivable misconception of hypnosis. She said, "That is sheer nonsense. There is no such thing." She had studied enough psychology to know there was not such a thing; it was just a stage trick and people pretended. David tried to persuade Jane to be a hypnotic subject. Sure. She did not respond at all. David persuaded her to come here to meet somebody who could really hypnotize her.

Actually, talking to that girl with hypnotic suggestions would be like me reading Chinese poetry to you when you knew nothing about it, not even that it was Chinese poetry. She listened to me and was completely unresponsive. So, I told her that hypnosis was really a phenomenon. "You like David. You like Anna Lee. You respect them. You know that they get good grades in college, and that they are definitely sincere and honest people. You enjoy your social contacts with them, and you know they believe in hypnosis." She said, "Yes, I know that. I do not know why they do." "And you know they have both been hypnotized, and you know that you do not believe in hypnosis. You think it is purely a philosophical argument, nothing more. Just as absurd as the ancient philosophical arguments about how many angels can stand on the point of a pin." In her reading, she had come across that phrase.

"You know the definitions of positive hallucinations, and the definitions of negative hallucinations, and you know that they say they have been hypnotized.

So, there is a possibility that while they sit there and you sit here, that they may have gone into that condition that they call a hypnotic trance. And that they may actually be hallucinating positively or visually."

"Now, I rather have a feeling that they are in a trance, and I think I can prove it to you. Because I think that they will demonstrate a negative hallucination, and I think you will see them demonstrate a negative hallucination. I think that is going to jar your ideas, if you really see them demonstrating a negative hallucination. And I think you will get curious about how they can possibly do that, and then I think you will recognize the validity of their statements. And so, I am going to ask David a question first, and then I will ask Anna Lee. I think they will be negatively hallucinating. 'David, tell me, do you see that fishpond there?' [He points to the shiny side of his filing cabinet) And David answers, 'No, there is no fishpond there.' 'Anna Lee, do you see that fishpond there?' 'No, there is no fishpond there.' What do you think? Are they negatively hallucinating; are they lying; are they faking; or is it valid behavior?" She looked at me and she looked at that, and she said, "David, don't you really see that fishpond? Anna Lee, don't you really?" They said, "No." But she said, "Look at that student walking past it. Can't you see the student?" "No." Anna Lee could not. "Look, there are several students walking past now." David said, "What fishpond?" She said, "Good heavens, you walk past it every day on the campus."

To believe that hypnosis can be a state, Jane had to experience it for herself. A didactic approach would not counter Jane's established belief; she had to feel the effect. Therefore, a hypnotic hallucination of a fishpond was inferred. When it was realized by Jane through experience, the cognitive dissonance countered and altered her steadfast belief.

A girl completely unresponsive in every approach I made. I could not get her to accept anything. So, I pointed out what David and Anna Lee could not accept. Therefore, she had to accept their nonacceptance. And in accepting their nonacceptance, she had to see the fishpond. She hallucinated visually, auditorily.

And when David tried to tell her that there is a wall; there is a filing case, [laughs] she asked me appropriately: "But David, there is no wall there. And why would they have a filing case out on the campus?" [laughs] And she did that and said, "You know he is really hallucinating positively."

BOOK REVIEW

Core Creativity: The Mindful Way to Unlock Your Creative Self

By Ronald Alexander 2022 Rowman & Littlefield Publishers ISBN: 978-1-5381-4956-0 224 pages

Reviewed by Jeffrey K. Zeig, PhD

Helping people to elicit their creativity is one thing. Helping people to use mindfulness meditation effectively is another. Fortunately, we have Ronald Alexander who shows us how to accomplish both at the same time in his new book, *Core Creativity*.

This book is written for the general public, so therapists can recommend it.

But health/mental health practitioners can also benefit from reading it. Exercises with clear instructions guide readers in learning how mindfulness meditation can be a tool to enhance creativity.

Alexander liberally sprinkles his text with stories about how famous artists generate ideas and he recommends healthy creative habits, such as rising at the crack of dawn, talking a stroll, and analyzing your dreams. Artists may be starving, but Alexander contends that "creative people are less likely to be mentally ill" than the overall population.

Core Creativity is wide ranging and includes current information on psychotherapy, neuroscience, and the effective use of psychedelics in creativity and psychotherapy.

Alexander is a psychotherapist, mindfulness teacher, and creativity and executive leadership coach. He has been on the faculty of conferences organized by the Erickson Foundation. This important addition to the literature extends his reach and will be a boon to those who follow its recommendations.

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BOOK REVIEW

Advancing Psychotherapy: Transforming Conversations

In Dialogue with Milton Erickson, Jay Haley, and John Weakland

Edited with Commentary by

Jeffrey K. Zeig

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https://www.erickson-foundation.org/books/p/advancing-psychotherapy
ISBN-978-1-932248-96-x

Reviewed by John D. Lentz, D. Min., Shepherdsville, KY

For a book about the conversations between Milton Erickson, Jay Haley, and John Weakland, who better to edit and provide commentary than Jeff Zeig. Readers are also treated to a foreword written by Cloé Madanes who was once married to Haley and collaborated with him to develop strategic therapy.

While the bulk of this book is primarily the transcript of the conversations between three men, Zeig's commentary offers insights into the straightforward ideas suggested. It is a unique study of the inception of Ericksonian approaches.

And although this transcript records the ideas and methods of people who made history, they were not always right. But what is fascinating, is the process of figuring things out as they went along. Even their speculations that turned out to not be correct are incredibly instructive, because again, we are privy to their process.

It is obvious from the transcript that these three men clearly valued each other. Haley and Weakland's questions and Erickson's answers are inspiring and stimulating.

Even though I am quite family with double binds, I found that section to be eye opening. Haley and Weakland's purpose in meeting Erickson, was to discuss their theory that the double bind and trance have similarities. Erickson never directly concurred with them, but he deeply understood double binds, including contextual ones and he did utilize a double bind to induce trance, not just in one instance but repeatedly. And he used it not just to induce trance but to alter it, deepen it, and to shift it.

Double binds are the fabric of mental dysfunction as well as mental health. And they are useful in every aspect of psychotherapy. That is only one of the many learnings that I gleaned from this book.

I especially enjoyed Erickson's letter to Gregory Bateson, indirectly letting him know that Erickson's bill for meeting with Haley and Weakland was unpaid. He did this by telling a little story with an embedded a pun. Bateson got the message and sent a check. This is a wonderful example of Erickson being playful and yet effective. It is also an example of the creative and practical lessons that make this book so wonderful. Readers will also gain practical tools on how to use distraction to generate amnesia and how to use confusion to elicit trance.

Throughout this 343-page book, Zeig provides commentary (nicely boxed for delineation) to help understand the transcript in context. His insights are subtly genius, helping us, the reader, comprehensively understand the ideas presented.

Not only do I recommend this book ... I have used parts of it to teach concepts. It has given me fresh ways to understand double binds, and for that I am indebted.

BOOK REVIEW

The Heart and Mind of Hypnotherapy: Inviting Connection, Inventing Change

By Douglas Flemons W. W. Norton & Company New York, NY Copyright Douglas Flemons 2022 ISBN: 978-0-393-71439-5

Reviewed by John D. Lentz, D. Min., Shepherdsville, KY

With a foreword written by Michael Yapko—who writes that this book fills an important gap in hypnosis literature—and with endorsements from Eric Greenleaf, and Stephen Jay Lynn, and Jeff Zeig, you know you are in for a powerful thought-provoking read.

In *The Heart and Mind of Hypnotherapy*, author Douglas Flemons offers readers a remarkable experience by using multilevel communication to evoke emotional connections that invites learnings. In short, he teaches us how to initiate connection and invent change by offering clinical examples interspersed throughout and he masterfully quotes scientists, artists, and poets. On page 19, he quotes Berman, who notes, "...in situations of intense relatedness—romantic love, psychosis, mystical experience—it is impossible to distinguish where Self ends and

when the Other begins." That is the point of connection: You can and will have knowledge of the Other in powerful ways that will offer realizations and opportunities for change.

Flemons distinguishes himself not only as a competent and insightful therapist, but as someone who has studied Zen and a range of meditation styles, as well as human nature and science. I was so impressed with his examples, I found myself taking notes. They have been particularly useful while teaching hypnosis and therapeutic interventions. I was also moved by his words.

By reading this 266-page book that includes an index, readers will gain a surprising amount of wisdom and practical tools. There are six chapters: Mind Body Self, Meditation and Self-Hypnosis, Connecting with Clients, Formulating Hypnotherapy, Inviting Hypnosis, and Inventing Change. In the chapter on inviting hypnosis, Flemons demonstrates how using multilevel verbal communication can have greatly and positively impact on the outcome. This made me want to use more poetic language with induction.

In the chapter on inventing change, Flemons elegantly demonstrates styles of creatively that bring about change. I love how he uses a story about fly fishing to create a physical change, because it demonstrates how we can become creative in the moment to elicit body responses as well as unconscious connections.

I found myself inspired, informed, and intrigued by this way of thinking and connecting. I have personally liked Douglas Flemons for a long time and can now easily point to his work that I admire so much. I recommend this book and believe that Flemons deserves special credit for it.

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BOOK REVIEW

US: Getting Past You & Me to Build a More **Loving Relationship**

By Terrance Real Rodale Books ISBN 0593233670

Reviewed by Jeffrey K. Zeig, PhD

This is the story of relational life, and how the pressures of one's Adaptive Child often trumps one's Wise Adult. But thanks to Terry Real this story no longer needs to progress to a tragic end point.

In US: Getting Past You & Me to Build a More Loving Relationship, Real presents the methods he uses in his Relational Life Therapy to help couples live more adaptively. We see how the programs of the past become the patterns of the present, and how they can erode the spirit of "we-ness" and relational wellbeing. We learn that these patterns that lurk in the dark can be unearthed and exposed to the light, so that we can begin to heal and grow.

Real's contribution is not a therapy textbook replete with theories and techniques. Instead, it is a guide for relational health that couples can use to reinvigorate the love that initiated their partnership. Through peerlessly written dialogue, Real provides wise counsel that therapists can absorb into their practice to reinvigorate their own relationships.

This book should be required reading for every novice couples' therapist, and it should be on the bookshelf of every accomplished couples' therapist. US: Getting Past You & Me to Build a More Loving Relationship is wisdom, experience, and therapy in one worthwhile book.

It's no wonder Bruce Springsteen writes in the foreword that this is "a beautiful and important book, particularly for the moment we are in."

FOUNDATION

In June, the Foundation hired Sarah Clinebell as the new archivist.

Sarah grew up on a farm in rural Illinois. Her father was a biology teacher and folk singer/songwriter, and her mother was an artist. Both parents were conservationists and preservationists.

When Sarah was 9 years old, her father died suddenly. Her mother, brother, and she lived several places before moving to Phoenix when Sarah was 14.

Sarah graduated with a B.A. in anthropology from ASU in 2017. Since then, she has worked in archives and museum collections.



Sarah Clinebell

At that time, Sarah supplemented her income by performing as a singer of rock and folk songs and playing guitar. She still plays regularly at home.

When Sarah saw the ad for archivist at the Foundation, reading about Erickson sparked her interest. "What initially grabbed me," she said, "was his work with famed anthropologists Margaret Mead and Gregory Bateson."

"Archives are endlessly interesting, and I learn something new every day. Everyone at the Foundation has been incredibly welcoming and supportive. My goal is to consolidate the archives, making them easily searchable and userfriendly. In doing so, I hope to help unearth any hidden gems that might be contained within."

Outside of work, Sarah likes to forage for edible mushrooms. She also enjoys taking nature photos. She has two grown sons, Jeff and Connor. Sarah lives with her significant other Tim and their dog Gigi.

THEORETICALLY SPEAKING

continued from page 11

And Larry, you know that your mind is somewhat like a recording machine, and that you will remember everything that has happened here this afternoon. Occasionally, from time to time, you might wish to find a quiet place, pay attention to your breathing, and remember this remarkable change. I want to thank you for your attention and confidence, and whenever you are ready, please take a deep breath or two, blink your eyes, stretch a bit, and come back to this room here and now. Thank you.

Larry "returned" to the room with a big smile on his face. We chatted briefly and I offered him one of the smooth polished stones from my collection to take and keep as a memory of this session. I heard back from him about two months later, and his life was moving smoothly along.

Commentary

To a great extent, the success of this session was based on the placebo effect, i.e., on Larry's expectation that change would occur. His belief in the process helped to activate his resources and open the door to his making the changes he desired. Although exorcism is usually associated with religious or spiritual traditions (such as Christianity, Buddhism, Hinduism, Judaism, etc. See Wikipedia article on "Exorcism," retrieved 9 March 2022), it can be used in clinical and counseling situations and is well worth learning how to do.

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IN MEMORIAM

Sid Rosen (1926-2022) Our Thoughts Go with You

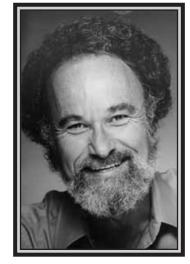
By Jeffrey K. Zeig, PhD

We have lost yet another great in the Ericksonian world. Sidney Rosen, MD, died at the age of 95 on May 19, 2022. He was a tremendous scholar, educator, physician, pioneer, and author. He is survived by his children Jeffrey and Joanna.

Sidney (Sid) was founding president of the New York Milton H. Erickson Society for Psychotherapy and Hypnosis and author of *My Voice Will Go with You: The Teaching Tales of Milton H. Erickson* (1982). He was a great friend and supporter of the Erickson Foundation, and he was a faculty member at 11 Erickson Foundation congresses. He also taught internationally.

Born in Detroit, Michigan, in 1926, at the age of 21, Sid was one of the youngest people in North America to receive a medical degree. He did his residency in psychiatry at the Syracuse Psychiatric Hospital and served as a captain in the U.S. Army Medical corps during the Korean War. He then worked as supervising psychiatrist at Brooklyn State Hospital, and in 1964, he became supervising psychiatrist at the Rusk Institute of Rehabilitative Medicine and assistant clinical professor of medicine at New York University Medical Center, where he taught for more than twenty-five years.

He became interested in hypnosis in high school and used to practice it with friends. At that time, Erickson worked in Eloise, Michigan, and few of those friends went to see him at the hospital. They came back with fantastic stories about how they had been in and out of trance all day and the nonverbal methods Erickson used. So, Sid devoured anything that Erickson wrote and used it to practice hypnosis in medical school.



In 1970, after his psychoanalytic training, he met Erickson. He was not particularly impressed on that first visit, but eventually Erickson did get him back into using hypnosis and he did prompt him in having a profound and life-changing dream where the statement: YOU NEVER FINISH ANYTHING appeared in capital letters. After that, Sid prolifically wrote and contributed, and he continued to visit Erickson over the years.

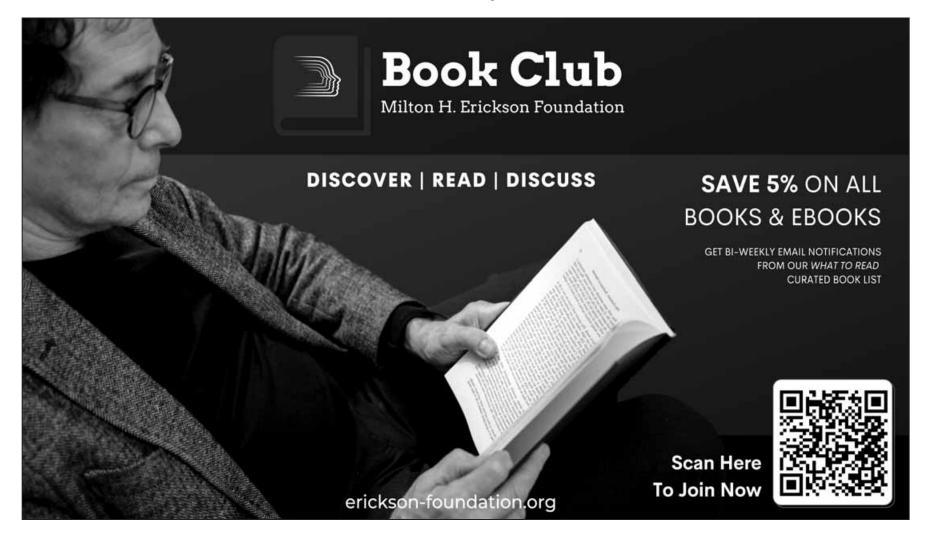
And In 1982, he published My Voice Will Go with You, which continues to be met with wide success. Prior to its publication, he brought a draft to Phoenix, and we discussed the understructure of Erickson's teaching stories. In 2020, at the age of 93, he published his

final book, Understanding Ericksonian Hypnotherapy: The Selected Writings of Sidney Rosen.

Kristina Erickson, Milton Erickson's youngest daughter, recalls that her father thought highly of Sid, and so did the Erickson children. "He was always so warm, friendly, and kind," she wrote in an email. Upon hearing the news of his passing, several of the other Erickson children wrote condolences.

Sidney Rosen's career and vocation was helping others to live more adaptively, and he was excellent role model.

I first met Sid in 1979 when he visited Phoenix and attended one of Erickson's teaching seminars, the one recorded in *A Teaching Seminar with Milton H. Erickson* (Zeig, 1980). I was honored to know Sid and my life is better for having met him.



UPCOMING TRAINING

DATE	TITLE / LOCATION / LEADER CONT	CONTACTS	
2022			
8/20-23	Master Class – Austria / Jeffrey K. Zeig, Ph.D.	1.	
8/31-10/19	Intensive Training Online – Levels E (Advanced) / Virtual / Lilian Borges, M.A., LPC; Brent B. Geary, Ph.D Stephen Lankton, LCSW, DAHB, FASCH; Dan Short, Ph.D., Zeig	2.	
9/1-4	Master Class – Barcelona, Spain / Zeig	3.	
10/11-15	Master Class – Guangzhou, China / Virtual / Zeig	4.	
10/26-12/28	Intensive Training Online – Levels E (Advanced) / Virtual / Lankton, Short, Zeig	2.	
10/27-30	Master Class in Ericksonian Clinical Hypnotherapy / New York City, NY / Zeig	1.	
11/11-13	Master Class Series and Workshop / Japan / Zeig	5.	
12/14-17	Evolution of Psychotherapy / Orlando, FL / Invited Faculty	6.	

Contact Information:

- 1) For information contact Stacey Moore: Email, <u>SJMTJM@msn.com</u>; For information on virtual programs with Jeffrey Zeig including virtual courses with Spanish translation visit: <u>www.jeffzeig.com</u>
- 2) The Milton H. Erickson Foundation: 2632 E Thomas Rd, Ste 200, Phoenix, AZ 85016 6500; Tel, 602-956-6196; Fax, 602-956-0519; Email, support@erickson-foundation.org; Web, www.erickson-foundation.org 2022 Intensive Training Program, Art of Psychotherapy, Grandmaster's Approach to Psychotherapy: www.erickson-foundation.org
- 3) For information contact: Email, info@danielaconstantin.com
- 4) For information contact: Email, 1250947144@qq.com
- 5) For information contact: Email, <u>airsoulaqua@gmail.com</u>
- 6) For information: Web, www.EvolutionOfPsychotherapy.com

Note: Due to the current global public health situation some of the above trainings may be postponed, cancelled, or modified. Please use the contact information listed for the most updated information.

For Upcoming Trainings, ad rates / specifications visit www.erickson-foundation.org or contact Karen Haviley karen@erickson-foundation.org. A \$25 fee per Upcoming Training listing is required. Deadline for the December 2022 issue (print copies mailed early December) is October 10, 2022. All workshop submissions are subject to approval by the Erickson

CONFERENCE NOTES

Foundation.

*Due to the current global health situation some of the dates and venues for the following conferences may change. Please contact each organization directly for the most updated information.

The 73rd Annual Workshops and Scientific Program of the Society for Clinical and Experimental Hypnosis (SCEH), Next Steps and Future Directions for Hypnosis Research and Practice, will be held October 12-16, 2022. The meeting will be held virtually. For more information visit: https://www.sceh.us/2022-conference-details or Email, info@sceh.us

The Evolution of Psychotherapy Conference will be held December 14-17, 2022, at the Gaylord Palms Resort and Convention Center in Orlando, Florida. Confirmed faculty includes Diane Ackerman, Denise A. Beagley, Helen Fisher, Steven C. Hayes, Otto F. Kernberg, Lynn Lyons, Cloé Madanes, Donald Meichenbaum, Scott D. Miller, Stephen W. Porges, Terry Real, David L. Shapiro, Daniel Siegel, Stan Tatkin, Lenore E. Walker, Michele Weiner-Davis, Jeffrey K. Zeig. For the conference agenda including two pre-conference offerings, online registration, hotel and travel information visit www.EvolutionOfPsychotherapy.com

2023 — The European Society of Hypnosis (ESH) will hold the XVI ESH Congress, *Hypnosis Food for Body and Mind: an Integrated Approach to Healing*, October 26-29, 2023 in Istanbul, Turkey. Online options also will be available. For complete information on the Congress and to register with early rates visit https://esh2023.org/

2024 — The International Society of Hypnosis (ISH) and the Polish Milton H. Erickson Institute will hold the XXII World Congress of Medical and Clinical Hypnosis, "Cooperation in Hypnosis. Challenges and Benefits," June 12-15, 2024, in Krakow, Poland. (Note: The Congress was scheduled for June 2022 but due to the global health situation the organizers have moved the gathering to June 2024.) For complete information visit https://www.ishhypnosis.org/ or Email, info@pie.pl

FACETS & REFLECTIONS

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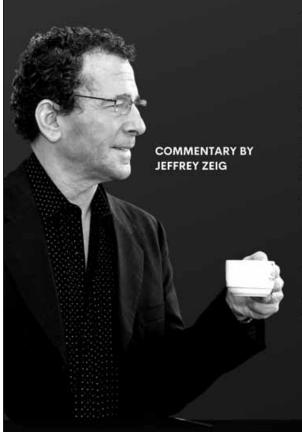
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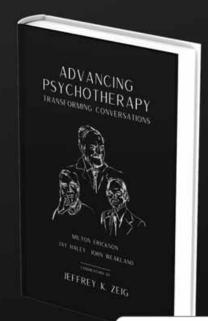


WHEN GREAT MINDS MEET, WE ARE PRIVILEGED TO LEARN FROM THEIR EXPLORATIONS...

As part of a communications project conducted in the mid-1950s and spearheaded by anthropologist Gregory Bateson, Jay Haley, and John Weakland went to Phoenix, Arizona to learn from and collaborate with Milton Erickson. The meetings of these three great minds were recorded. Their explorations together both advanced the Bateson Project's Double Bind Theory and helped to develop more effective approaches in psychotherapy.

Advancing Psychotherapy is a glimpse into an important time in the history of the field and a rare opportunity to learn from those who shaped the future of psychotherapy. Its content will improve your practice of psychotherapy.

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INTERVIEW

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SH: Yes, And that's how groups evolve; it's how societies evolve; how cultures evolve; how people evolve; how species evolve; and how the simplest, complex system evolves, through variation and selection in context at the right dimension and level.

So, the way my interest in process of change has evolved, is that I am now more interested in all the different forms of healthy variation. Variation, per se, is not necessarily good. But flexibility is a kind of variation that is fitted to the needs of the moment. And that achieves the satisfaction for that particular dimension we yearn for, as part of a larger journey of moving in a direction that we choose as human beings.

Let me give you an example. The purpose of emotion is to feel and to learn from your feelings. And it's important because lots of our learning is not categorical or cognitive. It's based on more ancient systems that are flying beneath our awareness and those overtly judgmental and evaluative and

verbal systems. And so, if you don't have a sense of what your emotions are, or what your sensations are, what this moment contains, you're flying blind. We need to learn to be more emotionally open in the same way that we want to have sensitive fingers so that we can feel the desktop in front of us, or the cheek of our loved one. However, the human mind easily comes in and says, "Oh, don't feel that. Make sure you only feel this."

The ACT community is interested in helping people learn how to feel in a way that is not wallowing. It is a healthy reaching out and sensing what's there, even beyond what the mind knows how to categorize, judge, predict, and evaluate. Over time, I've become more interested in somatic awareness, emotional deepening and broadening, and non-clinging in intuition and felt sense and experience.

ACT was always an experiential approach. That was the subtitle of the first ACT book in 1999. I am not really interested in ACT techniques. I am more interested in the underlying

processes and in broadening to include all of the processes that we know that are important to human change. That has taken me in the direction of process-based therapy. I think processbased therapy is the future of evidence-based therapy and ACT, as an example of why progress can happen when we go in this direction.

ACT is now sitting in almost 1,000 randomized trials; 3,000 to 4,000 studies overall. And it began with one guy and four graduate students. Forty years later, it has spread around the world. And it's used by almost every culture and, doesn't have that quality of being only relevant to the white, educated, industrialized, relatively successful world where 12 percent of the world's population produces 80 percent of the science. Instead, in the ACT community, you'll find almost 250 randomized trials on ACT in the Islamic world. And so, this journey I'm on is one of trying to put ways of building progress into the psychotherapy and behavior change traditions, based on a high precision, high scope, high depth,

and processes of change that can be fitted into an overall evolutionary perspective as part of a complex system analysis.

RL: The interview continued for some time with Hayes speaking about how six questions need to be asked about the process of relationship in psychotherapy for its impact to be lasting. He was also asked about his cognitive and behavioral roots; what he means by "I think we should use our traditions as a foundation and not as a fence," and his observations that the very definition of evidence-based therapy will change, be studied, taught, and understood. He was also asked about what is going to be different in the world of psychotherapy. Steven Hayes will cover these topics and more when he presents at the 2022 Evolution of Psychotherapy Conference in December.

I especially want to thank Steven Hayes for his sharing of himself, his passion, and his faith in the evolving field of psychotherapy.

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