

# The Milton H. Erickson Foundation NEWSLETTER

Michael D. Yapko, Editor / P.O. Box 234268 / Leucadia, California 92023

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Fall 1991

## 5th Congress on Ericksonian Approaches Returns to Phoenix

The Milton H. Erickson Foundation Board of Directors has announced that the Fifth International Congress on Ericksonian Approaches to Hypnosis and Psychotherapy will return to Phoenix, Ariz.

"This (Phoenix) is our headquarters, and we're happy to hold the Congress back here," said Foundation Director Jeffrey K. Zeig, Ph.D. The Fourth Congress was held in San Francisco, Calif., in 1988.

The meeting will be held Dec. 2-6, 1992. Sessions will be held at The Hyatt Regency Phoenix, The Sheraton Phoenix and The Phoenix Civic Plaza.

Phoenix is the home of the late Dr. Milton H. Erickson. A number of sites here were close to his heart such as Squaw Peak, The Desert Botanical Gardens and The Heard Museum. The Board felt a return to the headquarters city fit well with the meeting theme.

The Congress theme, "Ericksonian Methods: The Essence of the Story," will feature a "return to the basics of Ericksonian therapeutic methods," according to Kristina K. Erickson, M.S., M.D., Board member.

### Call for Proposals

A Call for Proposals form is included in this issue of The Newsletter. It is the only opportunity to be given to submit proposals for The Fifth Congress. All proposals must be submitted to the Milton H. Erickson Foundation by Jan. 2, 1992. Proposals will be accepted for short courses, symposia and papers. Only 18 accepted papers and 45 accepted short courses and symposia can be accommodated in the program.

Persons interested in submitting proposals may send information to The Milton H. Erickson Foundation, 1992 Congress Committee, 3606 N. 24th St., Phoenix, AZ 85016.

### Erickson Foundation Announces Scholarship

The Milton H. Erickson Foundation will offer \$3,000 in scholarship money for the fall semester of 1992.

The scholarship money will be for full-time graduate students in accredited mental health programs. These funds came from the sale of commemorative items at the 1990 Evolution of Psychotherapy Conference.

For an application and additional information, graduate students may contact the Milton H Erickson Foundation, 3606 N. 24th Street, Phoenix, AZ 85016.

### Early Registration

Located in this issue is a registration form. Special rates will be offered to all Newsletter subscribers who register on or before Jan. 1, 1992. The Early Bird Registration fee is \$225 (\$125 for full-time graduate students). After that date, U.S. fees will be \$285 (\$185 for full-time graduate students) until May 31, 1992; \$335 (\$235) until Sept. 30, 1992; \$385 (\$285) until Nov. 15, 1992; and \$500 for onsite registration (if space is available).

Rates for foreign attendees (including Canada and Mexico) after Jan. 1, 1992, will be \$250 (\$150) until Sept. 30, 1992; \$385 (\$285) until Nov. 15, 1992; and \$500 on site.

## Foundation Re-Accredited by ACCME

The Milton H. Erickson Foundation, Inc., has been resurveyed by the Accreditation Council for Continuing Medical Education (ACCME) and awarded accreditation for four years as a sponsor of continuing medical education for physicians.

ACCME accreditation seeks to assure both physicians and the public that continuing medical education activities sponsored by The Erickson Foundation meet the high standards of the Essentials for Accreditation as specified by the ACCME.

The ACCME rigorously evaluates the overall continuing medical education programs of institutions according to standards adopted by all seven sponsoring organizations of the ACCME. These are: the American Board of Medical Specialties; the American Hospital Association; the American Medical Association; the Association for Hospital Medical Education; the Association of American Medical Colleges; the Council of Medical Specialty Societies; and the Federation of State Medical Boards.

Kristina K. Erickson, M.S., M.D., member of The Foundation's Board of Directors and chairman of its Continuing Medical Education Committee, and Linda Carr McThrall, Executive Director of The Foundation, went to Chicago, Ill., to defend the application for the ACCME.

"The application process is extremely thorough," Dr. Erickson said. "We are very proud that The Erickson Foundation has

*Continued on page 7*

### Interview

## An Interview with Carol Lankton

by Michael D. Yapko, Ph.D.

Carol H. Lankton, M.A., is well-recognized for her central role in the development and growth of Ericksonian approaches to family therapy and clinical hypnosis. She is co-author (with Stephen R. Lankton) of *The Answer Within: A Clinical Framework of Ericksonian Hypnotherapy*; and *Tales of Enchantment*.

She is Clinical Member of the American Association of Marriage and Family Therapy and a founding editorial board member of the Ericksonian Monographs. She also has been an invited faculty member at the International Congresses on Ericksonian Approaches to Hypnosis and Psychotherapy. This interview was conducted at the Evolution of Psychotherapy Conference in Anaheim last December.

**Y—As usual, I would like to start with biographical information. Tell me about your life.**

L—I was born in 1950 in Mississippi. I'm the middle child of five children. I had a happy childhood; no problems, no traumas.

**Y—What were you like as a child?**

L—Probably headstrong. I had a lot of opinions about things that I wanted to do. I think I didn't take "no" too well. In fact, I did an interview with my mother and asked her that question, and she told me that I was probably her most different child to raise. I remember her talking about how I'd be out in the middle of the rain digging worms in the yard, because that was something that I felt was interesting. Also, she told me how content I seemed to be without any particular reason for it. I was alone a



lot playing fantasy games, even though I had brothers and sisters around. I was good at inventing games to play by myself that were interesting. We moved around a lot; my father was an excellent salesman, and because of that, they kept moving him into new territories. So, I was constantly meeting a lot of new people. Entering into these already-established environments, I would feel a little lost, but also got the chance to figure out how I could fit in. When we moved again, I was sorry to leave each place and a little bit less scared about going to the next place. I built an ability to interact with a lot of different people. I also developed a special bond with my brothers and sisters. Now, in adulthood I appreciate enduring relationships that have such primitive roots.

**Y—All that moving around was all through childhood?**

L—Yes. From age nine until the middle of

*Continued on page 10*

**The Milton H. Erickson Foundation, Inc.**  
3606 N. 24th Street  
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Michael Yapko



## Notes From The Editor

Several issues back, I wrote an article describing the work I was doing with psychologist Bill Campbell on an elephant breeding program at the San Diego Wild Animal Park (SDWAP). Many have asked for an update. It's a mixed report. SDWAP had its first successful Asian elephant birth, a boy named Omar. His mother rejected him at birth, though, and following a series of illnesses, he had to be put to sleep. In the same week that that painful episode occurred, a trainer was killed in a freak accident with one of the elephants. They are very large, potentially dangerous creatures.

The elephants are being trained for more independent living. They are healthy, and they are rapid learners. The African elephants are especially successful in breeding, I'm happy to say.

My role in the project has come to an end — a temporary end, I hope. I learned more about elephants, and was manhandled by more elephants than I could ever have imagined. I used to like elephants a lot, but I'm now totally captivated by them. It certainly makes one want to think ahead to a sensible future of protection and caring rather than one of unchecked deterioration.

I suppose if one tried hard enough, one could pretend that such experience has no relevance for therapy.

Elephants have complex personalities, unique ways of responding to circumstances, surprising abilities and sensitivity to subtle changes.

—Michael D. Yapko, Ph.D.

## Conference Announcements

The American Association for Marriage and Family Therapy (AAMFT) is holding its annual conference in Dallas, Texas. October 31-November 3. The conference theme is "Constructing the Future," and features more than 200 workshops. For information, contact AAMFT, 1100 17th St., N.W., 10th floor, Washington, D.C. 20036; (202) 452-0109.

\* \* \*

The National Institute for the Clinical Application of Behavioral Medicine is sponsoring its 3rd National Psychology of Health, Immunity and Disease/Healing the Heart Joint Conference December 4-7, 1991, in Orlando, Fla. Emphasis will be on techniques for mind/body counseling and behavioral medicine. Twenty-plus CEU credit hours are available. For more information, contact: NICABM, Box 523, Mansfield Center, CT 06250; (203) 429-2238.

## News From Around The World

by Reese Price, Ph.D. *Institutes Newsletter Editor*

A new feature of *The Milton H. Erickson Foundation Newsletter* is a column with items about Erickson Institutes around the world.

The Foundation now has 49 Institutes. We are pleased to announce the formation of six new affiliates during the past few months.

The new institutes include L'Institut Milton H. Erickson de l'Outaouais in Ottawa, Ontario, Canada, under the direction of Julien Mercure, M.A.; The Milton H. Erickson Institute of Normandy at Cherbourg (France) under the direction of Dominique Meggle, M.D.; The Milton Erickson Institute of Guadalajara (Mexico) under the direction of Ricardo Figueroa Quiroga, M.S.; The Milton H. Erickson Institute of New Jersey in Princeton, N.J., under the direction of Harriet Hollander, Ph.D.; L'Institut Milton Erickson, Lemannique in Geneva, Switzerland, under the direction of Charles Schaefer; and the Eastern Virginia Erickson Institute in Yorktown, Va., under the direction of Martha Cantu, M.Ed.

### In other news:

The Milton H. Erickson Institute of Atlanta, under the direction of Henry T. Close, Th.M., sponsored Yvonne Dolan in a workshop in early 1990. Mr. Close has taught three six-session seminars on clinical hypnosis. He said there is growing interest in hypnosis in Atlanta, and "I am glad to be able to add to the dignity of this interest by teaching some of Dr. Erickson's principles."

\* \* \*

Dr. Harriet E. Hollander is director of the newly formed Milton H. Erickson Institute of New Jersey. Her advisory board members are Cheryl Sanford, Ph.D., Ann Wexler, M.S.W., and John Edgette, Psy.D. Dr. Edgette also is director of the Milton H. Erickson Institute of Philadelphia. The New Jersey Institute will offer a two-year training program in hypnotherapy beginning in October 1991, and will sponsor a seminar with Stephen Gilligan in March 1992.

\* \* \*

The Milton H. Erickson Institute of Northern Illinois has a new address: 2421 W. Pratt Blvd., Suite 214, Chicago, IL 60645. The telephone number is the same: (312) 274-0746. Marc Weiss is the Director of the Northern Illinois Institute.

\* \* \*

The Instituto Milton H. Erickson de la Ciudad de Mexico has a publishing house that is spreading Ericksonian work in Spanish. The first book published is *Concierto para Cuatro Cerebros en Psicoterapia* by Teresa Robles, Ph.D. The second book was scheduled to appear the end of August: *Terapia Cortada a la Medida. Un Seminario Ericksonian* con Jeffrey K. Zeig, Ph.D., edited by Dr. Robles.

The Mexico City Institute's directors are Dr. Robles and Jorge Abia, M.D.

The Institutes in Philadelphia and Normandy, reported 12- and 24-month training programs in progress at this time. The institutes of Western Australia and Chicago also reported a variety of workshop opportunities through their institutes.

\* \* \*

On other fronts, the Oklahoma Institute just completed a very successful four-day conference entitled "Generating Possibilities Through Therapeutic Conversations." A faculty of 18, including Stephen Gilligan, Bill O'Hanlon, Michele Weiner-Davis, Steve de Shazer, Michael White, David Epston, John Weakland and Karl Tomm, was very well received, and a second expanded conference is planned in two years. A book contract has been offered by Norton Books. The book will be a compilation of presentations from the conference and will be edited by Stephen Gilligan and Reese Price.

\* \* \*

In closing, I hope more Institutes will have something to report for future newsletters and columns for this publication.

— Reese Price, Ph.D.  
Institutes Newsletter Editor

*Institute directors and their colleagues may send items of interest to Reese Price, Ph.D., The Milton H. Erickson Institute of Oklahoma, Mental Healthcare Services, Inc., Tulsa Psychiatric Center, 1620 E. 12th St., Tulsa, OK 74120.*

## Nancy Czech Dies in Climbing Accident

The Milton H. Erickson Foundation was saddened to learn of the death of Nancy Czech, M.A., of Seattle, Wash.

Ms. Czech died in early July in a climbing accident.

She served on the faculty of the Third and Fourth International Congresses on Ericksonian Approaches to Hypnosis and Psychotherapy.

We send our condolences to her family and friends.

## Newsletter Business

The *Newsletter* is published three times per year. The closing dates are April 15, August 15, and December 15. This means all items to be included must be received by those dates. The *Newsletter* is posted approximately six to eight weeks later. As always, send all advertising directly to the Foundation in Phoenix. Training events, announcements and other information should be sent directly to me at the Leucadia, Calif. address on the front page.

### The Editor's FAX

Michael Yapko, the newsletter editor, is now even more accessible than before. He has a new FAX line, operational 24 hours a day. The number is (619) 944-6368.

## Enhancing Therapeutic Effectiveness

## The Ericksonian Approach

with

Jeffrey K. Zeig, Ph.D.

November 14, 1991

For Information:

Department of

Psychological Services

Telephone (519) 663-3470

Fax (519) 663-3743

University Hospital

London, Ontario, N6A 5A5

CANADA

Eligibility: Participants must have a minimum of a Master's degree in a mental health field from an accredited institution or be a full-time graduate student in an accredited mental health program.

## TRANCEWORK

The Uses of Hypnosis in Psychotherapy

with

**MICHAEL D. YAPKO, PH.D.**

in

**San Diego**

**December 4-8, 1991**

For information on this and other Michael Yapko workshops, contact:  
P.O. Box 234268, Leucadia, Ca. 92023. (619) 295-1010.

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Stories That Heal:

Reparenting Adult Children of Dysfunctional Families Using Hypnotic Stories in Psychotherapy

by Lee Wallas
Published by W.W. Norton & Co.
1991. \$22.95

In her introduction to Stories that Heal, Lee Wallas states, "I have come to the conclusion that all traumatized adult children share the same syndrome, and that 'adult children of dysfunctional families' most accurately describes them." (p.5) She characterizes these "adult children" as either "caretakers" in "deep denial" who have learned not to trust, talk or feel, but to become "invisible," or "controllers," rigid and obsessive, who think in terms of "black/white, either/or."

Confessing that she is one of those "adult children," Ms. Wallas included an autobiographical paper which she wrote in graduate school entitled, "The Effects of Being the Child of Motherless Parents." It was in rereading this paper, she states, that she was "struck by how many of the classical theories of the developmental stages... are now being applied to adult children..." (p.5)

Thus, she leads us to her thesis, which is that the "key to recovery" for the adult child is reparenting. Reparenting she defines as "unlearning what does not serve us and replacing it with what enables us to develop our own greatest potential." (p.13) Her method of reparenting is to tell stories in trance "in the tradition of the great psychotherapist, Dr. Milton H. Erickson." (p.13)

Ms. Wallas explains the manner in which she prepares people for trance. She asks them to remove their shoes, loosen their clothing, lie down on her "bed-sized couch," and "pretend that they are going to bed for the night." She then tells them it's okay to fall asleep. (p.16) She tells them, in fact, that people can learn a foreign language while they are asleep. (She offers no evidence in support of this statement.)

She then goes on to offer stories to "serve as templates for what should have happened in their actual experience... frames for developmental stages." (p.23) The context of the stories, she acknowledges, are white and middle-class with the traditional gender roles which she believes "facilitate favorable development." (p.23) (Although she refers the reader to sources where she says this point of view is supported, she does not cite any specific evidence.)

The remainder of the book is a collection of stories which Ms. Wallas claims sprang from her unconscious while doing hypnosis with clients. She offers 51 stories grouped according to seven developmental stages. The stories read like something out of a third-grade primer. They are concrete, saccharin, and devoid of anything metaphorical.

Ms. Wallas' definition of "adult children" I find unsatisfactory, her autobiographical paper embarrassingly self-conscious, her "reparenting" thesis unsupported, her description of her work as "in the tradition of... Milton Erickson" ludicrous, her belief that people can learn while asleep impossible to accept, and her stories offensive to any sensitive reader.

If the reader is looking for models of good storytelling (as I suspect most readers are who buy this book), my advice is take the \$22.95 you might have spent on this book and buy yourself some Sufi Tales, Canterbury Tales, Shakespeare's plays, Aesops Fables, or, if you like, go see a few good movies instead.

- Marian J. Richetta, M.A.
San Diego, California

Most people do not know of their total capacities for response to stimuli. They place mystical meanings on much of the information they get by subtle cues.

(Erickson, Rossi & Rossi, 1976, pp. 247-248)

Ericksonian Hypnosis

with Jeffrey K. Zeig, Ph.D.

Jan. 24 & 25, 1992 in Las Vegas, Nevada

For information, write:

Suzanne Faust, Ph.D., Therapy Institute
2265A Renaissance Drive, Las Vegas, NV 89119

Eligibility: Participants must have a minimum of a master's degree in a mental health field from an accredited institution or be a full-time graduate student in an accredited mental health program.

Ideas, understandings, beliefs, wishes, hopes, and fears can all impinge easily upon a performance in the state of ordinary awareness - disrupting and distorting even those goals which may have been singly desired. [1970]

(In Erickson, 1980, Vol. IV, chap. 6, p. 55)

In other words, to be abnormal, behavior must necessarily be lacking in purposeful useful qualities so far as the reasonably average goals of the specific individual person are concerned.

(Erickson, 1941a, p. 101)

Early-Bird Registration Form for

The Fifth International Congress on Ericksonian Approaches to Hypnosis and Psychotherapy



Ericksonian Methods: The Essence of the Story

Phoenix, Arizona December 2-6, 1992

\$225 Professionals \$125 Full-Time Graduate Students

Eligibility: The Conference is open to professionals in health-related fields including physicians, doctoral-level psychologists and dentists who are qualified for membership in, or are members of, their respective professional organizations (e.g., AMA, APA, ADA). The Conference is also open to professionals with mental health-related graduate degrees (e.g., MSW, MSN, MA or MS) from accredited institutions. Applications from graduate students in accredited programs leading to a degree in the above fields will be accepted if they supply a letter from their department on letterhead stationery certifying their full-time student status as of December 1992.

Refund Policy: Requests for refunds must be made in writing, postmarked by November 15, 1992, and are subject to a \$35 administrative service charge. No refunds will be made for requests postmarked after the refund deadline. Agencies billed should assume responsibility for payment of the administrative charge if cancellations are made. Refund requests received after October 15 may not be processed until after the Conference.

Checks should be payable in U.S. CURRENCY, and drawn on an AMERICAN BANK and made payable to: The Milton H. Erickson Foundation.

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Phoenix, AZ 85016 USA; FAX (602) 956-0519



## Upcoming Training

(Note: The Erickson Foundation lists workshops as a service to its *Newsletter* readers. We cannot attest to the quality of training provided in these workshops.) A \$10 fee is required for each workshop submission.

DATE	TITLE/LOCATION/LEADER	CONTACT
<b>1991</b>		
9/6-7	Recovering with Ericksonian Hypnosis, Fort Lauderdale, FL, John Edgette.....	1
9/14	Intermediate Training, Chicago, IL, Marc F. Weiss.....	2
9/21	Fundamentals of Ericksonian Hypnosis, Malvern, PA, John Edgette and Janet Edgette.....	3
9/21	Introduction to Ericksonian Hypnosis & Psychotherapy/ Basic Training, Chicago, IL, Weiss.....	2
9/30-10/5	Phoenix, Intensive Training (Basic), Phoenix, AZ, Brent Geary, Jeffrey K. Zeig.....	4
10/2-6	Trancework, San Diego, CA, Michael Yapko.....	5
10/7-12	Phoenix Intensive Training (Intermediate/Advanced), Phoenix, AZ, Geary, Carol Lankton.....	4
10/11-12	Ericksonian Psychotherapy, Park City, UT, Zeig.....	6
10/17	Ericksonian Psychotherapy, Little Rock, AR, Zeig.....	7
10/17-18	Reclaiming the Self, Cincinnati, OH, Yvonne Dolan.....	8
10/17-20	Applying Hypnosis, San Diego, CA, Yapko.....	5
10/18-19	Ericksonian Psychotherapy, Mexico City, MEXICO, Zeig.....	9
10/24	Ericksonian Psychotherapy, Scottsdale, AZ, Zeig.....	10
11/8-9	Treating Depression, San Diego, CA, Yapko.....	5
11/14	Ericksonian Psychotherapy, London, Ontario, CANADA, Zeig.....	11
11/15-17	Ericksonian Psychotherapy, Montreal, Quebec, CANADA, Zeig.....	12
12/4-8	Trancework, San Diego, CA, Yapko.....	5
12/10-15	Ericksonian Psychotherapy, Buenos Aires, ARGENTINA, Zeig.....	13

## Contact Information

- Joyce Gilbert, M.S., Awareness Counseling Services, Great Western Savings Building, 3511 W. Commercial Blvd., Suite 304, Ft. Lauderdale, FL 33309; (305) 739-0300.
- The Milton H. Erickson Institute of Northern Illinois, 2421 W. Pratt Blvd. Suite 214, Chicago, IL 60645; (312) 274-0746.
- Immaculata College Graduate Division, Immaculata College, Immaculata, PA 19345; (215) 296-9757.
- The Milton H. Erickson Foundation, 3606 N. 24th St., Phoenix, AZ 85016; (602) 956-6196; Fax (602) 956-0519.
- The Milton H. Erickson Institute of San Diego, P.O. Box 234268, Leucadia, CA 92023; (619) 295-1010.
- Gary Totland, Director of Marketing, Benchmark Regional Hospital, 592 West 1350 South, Woods Cross, UT 84087-1665.
- Arkansas Clinical Society of Hypnosis, HC73, Box 68, Jerusalem, AR 72080.
- Robert Bushorn, 5695 Valley Forge Drive, Fairfield, OH 45014; (513) 829-1165.
- Teresa Robles Uribe, Ph.D., Instituto Milton H. Erickson de la Ciudad de Mexico, A.C., Nicolas San Juan 834, 20 Piso, Col. del Valle, Mexico D.F. 03200 MEXICO.
- Arizona State Psychological Association, Brady Wilson, Ph.D., 3501 N. Scottsdale Rd., Suite 332, Scottsdale, AZ 85251; (602) 990-0037.
- Victoria Valley, Ph.D., Dept. of Psychology, University Hospital, University of Western Ontario, 339 Windermere Rd., London, Ontario, CANADA N6A 5A5; (519) 663-3496.
- Michel Kerouac, L'Institut Quebecois de Therapie et d'Hypnose Ericksoniennes, 33, Chemin Beaudette, North Hatley, Quebec, CANADA JOB 2C0; (819) 842-4549.
- Mauricio and Maria Ana Chrem, Instituto Sudamericano de Programacion Neurolinguistica, Beruti 2576, Room 13 333, Buenos Aires, ARGENTINA; (011-54-1) 83-7690.

*Underneath the diversified nature of the consciously organized aspects of the personality, the unconscious talks in a language which is a remarkable uniformity; further that that language has laws so constant that the unconscious of one individual is better equipped to understand the unconscious of another than the conscious aspects of the personality of either. [1938]*

(In Erickson, 1980, Vol. III, chap. 19, p. 186)

*I object very seriously to this attitude of perfection that some physicians and dentists and psychologists have when dealing with human beings. I've never met a perfect human being yet and I never expect to meet one. I think the faults that you recall in human beings give their charm to that individual that enable you to recognize and remember that individual.*

(ASCH, 1980 Taped Lecture, 7/18/65)

## Next Year in Jerusalem

# The Joint Conference Ericksonian Hypnosis and Psychotherapy

## Arts - Facts - Artifacts

July 22 - 24, 1992

sponsored by  
Milton Erickson Society for Clinical Hypnosis Germany (M.E.G.),  
International Society of Hypnosis (ISH) and Israeli Society of Hypnosis (IsSH)

with

Joseph Barber, Peter Bloom, Graham Burrows, Walter Bongartz, Fred Evans, Erika Fromm, Joan Murray Jobsis, Moris Kleinhauz, Stephen Lankton, Camillo Loriedo, George Matheson, Ernest Rossi, Burkhard Peter, Herbert Spiegel, Kay Thompson, André Weitzenhoffer, Peo Wikström, Jeffrey Zeig, et al.

as Pre-Congress to the

## 12th International Congress of Hypnosis

July 26 - 31, 1992

sponsored by  
Israeli Society of Hypnosis (IsSH) and International Society of Hypnosis (ISH)

### Call for Papers and Information

Joint Conference: Burkhard PETER, Dipl.-Psych., M.E.G., Konradstr. 16,  
8000 München 40, Germany

12th Congress: Moris KLEINHAUZ, M.D., 12th International Congress of Hypnosis,  
P.O.B. 50006, Tel-Aviv 61500, Israel

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## CHARLES C THOMAS PUBLISHER

PRESENTS

### GESTALT PSYCHOTHERAPY: CONCEPTS AND DEMONSTRATIONS IN STRESS, RELATIONSHIPS, HYPNOSIS AND ADDICTION

1991

by Richard E. Hardy, Ed.D., ABPP  
Fellow, APA

Virginia Commonwealth University

This important new book focuses on aspects of particular interest such as dealing with polarized conflicts, theoretical contributions, disturbance and contact boundaries, dream work, conflict; humor, paradox and pain in Gestalt therapy, as well as neurosis and functional living. It covers enhancing relationships, projection and the taboo trap, loving non-addictively, intimacy, building commitment, and loving too much as well as addiction, and hypnosis in Gestalt therapy.

Therapy demonstrations are offered on codependency, self-empowerment, recovery from abuse and controlling in relationships. Dr. Hardy demonstrates his style of often working intensely one-to-one and then integrating group interaction into the Gestalt therapy process.

\$27.75

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The Milton H. Erickson Foundation has for sale a wide selection of tapes on a broad array of subjects relative to Ericksonian approaches to hypnosis and psychotherapy, as well as other disciplines of the mental health fields. For information about prices and ordering, write The Milton H. Erickson Foundation, 3606 N. 24th St., Phoenix, AZ 85016.

**A Conversation Hour with Viktor Frankl, M.D., Ph.D.**

Produced by  
The Milton H. Erickson Foundation,  
Phoenix, Ariz., at  
The Evolution of Psychotherapy  
Conference, Anaheim, Calif.,  
December 1990

To talk with a master of any discipline is a worthwhile experience. But what might we expect from a conversation with Dr. Frankl? Obviously, we will learn about the struggle to create meaning in our lives; we will learn about application of ethics to our daily choices.

Perhaps more than anything, we will learn how one ought to respond to one's enemies. In this area, Dr. Frankl has no peer. This tape will appeal to those therapists who feel a desire to decide about meaning and ethics in their work. It is not for everyone, certainly. It is clearly not for some therapists who seem to enjoy finding and punishing evil.

I once lost an argument with a therapist over whether one who has suffered abuse ought to attempt to forgive one's enemies when she pointed out my life had been smooth, while her family had suffered through the Holocaust. For this reason, I couldn't speak with authority on the subject. Neither I nor my family had suffered evil.

And she is right. So it is with some joy that I hear Dr. Frankl speak powerfully on this topic, and I listen attentively. He believes in reconciliation with one's enemies, and opposes collective guilt. He points out that those who cannot reconcile with the children and grandchildren of their persecutors are enacting a tenet of the National Socialist platform, namely, that of family guilt. In Nazi Germany, if one member of the family resisted that evil, the whole family was punished. Guilt, Frankl asserts, is an entirely personal thing, and cannot exist in a collective. It is, he states, absolutely unethical to blame someone for what their ancestors did or failed to do. Thus, he always takes a stand against the notion of collective guilt.

But what of the persecutor himself? Frankl speculates about how he might have reacted to the chance to speak with Josef Mengele or Adolf Eichman. He hopes he would have been able to help them (rather than to punish them), to be able to squeeze out some quality of meaning from their lives. His hope is that they might, through finding such meaning, make a shift in their lives which helps them to atone for their guilt.

This is a wonderful, hopeful, and to some, unrealistic stance to take. Our temptation when faced with the Enemy is to

dehumanize him, make him the Other, something one can drive out, punish, and kill with impunity. Can we rise to Frankl's challenge by banishing words like "victim" and "perpetrator/oppressor" from our thinking, and instead see humans who have made terrible mistakes but are nonetheless human? Can we accept his offer to see the Other as Ourselves, and still in need of reconciliation, as we ourselves are?

— Lynn Johnson, Ph.D.  
Salt Lake City, Utah

**Therapy Demonstration:  
Gestalt Therapy:  
Humanization of Technique**

by Erving Polster  
Produced by  
The Milton H. Erickson Foundation,  
Phoenix, Arizona, at  
The Evolution of Psychotherapy  
Conference, Anaheim, Calif.,  
December 1990

I admit it: I approached this tape with a chip on my shoulder. My experience with

gestalt therapy was back in graduate school, watching hours of Fritz Perls getting people to talk to empty chairs, then trying out what I saw on my hapless clients in the practicum. I finally decided that anyone with enough ego strength to talk to an empty chair didn't really need therapy.

And besides, the people I knew who seemed to be "good at gestalt therapy" seemed to be obnoxious folks. I didn't want to be like them.

So with the "Bad Attitude," I sullenly

*Continued on last page*

**Ericksonian Methods: The Essence of the Story**

*The Fifth International Congress on  
Ericksonian Approaches to Hypnosis and Psychotherapy*

December 2-6, 1992 — Phoenix, Arizona

— PRESENTATION COVER SHEET —

- 1) Individual submitting proposal: (All correspondence will be sent to this address.)  
Name \_\_\_\_\_ Degree \_\_\_\_\_  
University \_\_\_\_\_ Major \_\_\_\_\_ License # and State \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/ZIP/Country \_\_\_\_\_  
Telephone (Day) \_\_\_\_\_ (Night) \_\_\_\_\_

- 2) Names, Addresses and Degrees of copresenters (if any):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NOTE: All presenters must meet the Erickson Foundation's academic eligibility requirements of a master's degree or above from an accredited institution in a health-related field. Full-time graduate students enrolled in accredited programs also may present. Graduate students must submit a letter on letterhead stationery from their department certifying full-time student status.

- 3) Title of Presentation: \_\_\_\_\_
- 4) The presentation is submitted as a:  
a) \_\_\_\_\_ Paper (30 minutes for delivery plus a brief discussion period)  
b) \_\_\_\_\_ Short Course (one hour and 30 minutes)  
Level: Basic \_\_\_\_\_ Intermediate \_\_\_\_\_ Advanced \_\_\_\_\_ All Levels \_\_\_\_\_  
c) \_\_\_\_\_ Symposium (one hour and 30 minutes; 3-4 speakers discussing a single topic)

NOTE: Only one presentation (paper, short course or symposium) will be accepted for any prospective faculty member submitting a proposal.

- 5) Audiovisual equipment required:  
\_\_\_\_\_ 35mm slide projector  
\_\_\_\_\_ Overhead (transparency) projector

NOTE: Any other audiovisual equipment must have special approval prior to the Congress.

Enclosure checklist: (SEND FIVE COPIES OF EACH) Attach this cover sheet to only one copy. The other copies should contain only the title because the review process will be blind.

- 200 word presentation summary  
 75 word abstract (for publication in the program and syllabus)  
 Educational objectives (minimum of two objectives). In your objectives, indicate what participants will have learned at the end of the presentation. Be specific, e.g.: 1) To list three principles of hypnotic induction; 2) To identify three techniques of hypnotic pain control.  
 Curriculum vitae of all presenters. (Two copies only.)

If my proposal is accepted and placed in the program, I will be present at the Congress. **For accepted papers:** I hereby certify that this paper previously has not been delivered, published or submitted. I understand the Milton H. Erickson Foundation will have the first rights of refusal for publication in the Congress proceedings or *Erickson Monographs* and, if accepted, I will assign the copyrights to the Erickson Foundation.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Proposals must be postmarked by January 2, 1992. Acceptance or rejection will be sent by March 14, 1992.

Mail proposals to: The Milton H. Erickson Foundation  
1992 Congress Committee  
3606 N. 24th Street  
Phoenix, AZ 85016 USA

Only 18 accepted papers and 45 accepted short courses and symposia can be accommodated at the Congress.



**The Couples Hypnotic Dance: Creating Ericksonian Strategies in Marital Therapy**

by Carol Kershaw

Published by Brunner/Mazel Publishers, Inc., N.Y., 1991. \$25.95

*The Couples Hypnotic Dance* is a thoughtful and readable text in which the psychotherapeutic and hypnotic approaches developed by Milton H. Erickson are applied to marital therapy.

The text begins with a clear foundation. It describes the goals of marital therapy as twofold: To alter unproductive, painful or limiting interacting sequences and to expand the interactional repertoire of the couple.

Kershaw briefly acquaints the reader with the work of Erickson, and with the broad range of naturalistic and formal hypnotic techniques associated with him. She utilizes Erickson's basic premise that the unconscious mind is a repository of untapped resources, and initiates expansive reorganization from within the reality of the patient. Kershaw's numerous examples emphasize the use of the unconscious to build conscious interventions and to help expand the client's constrictive resources.

Basic assumptions of Erickson's work, gleaned from a variety of primary and secondary sources, are delineated in a clear and articulate manner. Kershaw's background as an educator shines through with the logical sequence and polished presentation of materials.

Application of hypnotic strategies begins with observation of a couple's pre-existing recurring interaction patterns. Kershaw identifies this naturalistic process with the term "hypnotic dance" and demonstrates how this mutually entrancing pattern co-creates the couple's reality. Utilizing the partner's propensity for entrancing each other as the framework, Kershaw assists the

clients in learning to use their "dance" in mutually and maritally beneficial ways.

Kershaw's work is richly embellished throughout with a variety of literacy references as well as case reports from her private practice. Methods of developing a working hypothesis for intervention are presented by way of a sample assessment questionnaire, and augmented with a discussion of marital stages of development. Kershaw covers a broad range of marital dysfunctions, and specifically addresses the areas of childhood trauma and psychosomatic issues. Trance induction strategies may serve as useful guidelines to the therapist who wishes to integrate these methods into his or her own professional repertoire.

The publication is directed toward professional marital therapists. Training in hypnosis and a background in the work of Erickson would be beneficial to deriving full benefit from Kershaw's ideas. The text does not, nor was it intended to, stand alone, but does provide formidable adjunct support to the professional who wishes to become fluent in the use of hypnosis in marital therapy.

The weakness of the work includes a few vague references to physiological phenomena such as immune response variations within the alter-personalities of a multi-personality patient. Incomplete case reports also leave the reader wondering what happened next. A mystical element lingers and is even punctuated by the far-reaching literary references.

I was disappointed that the work did not more firmly ground the reader in scientific studies on hypnotic phenomena. Kershaw's ability to work within a rather complex framework is not wholly counterbalanced by her ability to communicate her ideas in a clear manner. Although much of Erickson's work was multidimensional, effective interventions often can be achieved from a simpler direction. It would be most unfortunate if therapists who are not fully conversant with Erickson's work were discouraged into thinking that complexity is akin to effectiveness.

Overall, the powerful elements of this accomplishment far outweigh the deficiencies. Kershaw has shown herself adept at synthesizing Erickson's methods with the needs of a changing society, one considerably different from the times in which Erickson himself practiced. By so doing, she will help to keep Ericksonian approaches vibrant and germane to contemporary society.

*The Couples Hypnotic Dance* contributes a refined balance of the artistic elements of Erickson's work with the more mechan-

ical infrastructure. I highly recommend this book to professionals who are interested in broadening their skills to include Ericksonian methods, as well as to health professionals who already are versed in the work of Dr. Erickson. There is much to be learned from the presentation of Carol Kershaw.

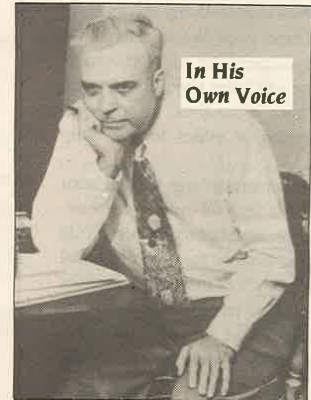
— Roxanna Erickson Klein,  
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## IIBA Schedules Conference

The International Institute for Bioenergetic Analysis has scheduled a conference on the topic of sexuality. The event will be held May 11-17, 1992, in Miami Beach, Fla.

The conference will include an understanding of the role of sexuality in the development of the personality, its role in the therapeutic process and the problems of sexual abuse. Alexander Lowen, M.D., will open the conference with a keynote address which will examine Reich's sexual theories from the viewpoint of 50 years after the sexual revolution.

For information, persons may write IIBA 1992 Conference, The International Institute for Bioenergetic Analysis, 144 E. 36th St., New York, NY 10016.

## ISMA Sets Meeting

The Fourth Interdisciplinary Meeting of the International Stress Management Association (formerly the International Stress and Tension Control Association) will meet in Paris, France, Sept. 1-5, 1992.

Proposals for presentation are welcomed on any scientific or applied study of stress or stress management. Some specialized topics are aging, cognitive functioning, bereavement, the cardiovascular system, psychopathology and alcoholism.

For information, write Professor F.J. McGuigan, Director, Institute for Stress Management, United States International University, 10455 Pomerado Rd., San Diego, CA 92131.

## Joint Conference/Hypnosis Congress Announced

The Joint Conference on Ericksonian Hypnosis and Psychotherapy: Arts - Facts - Artifacts, will be held in Jerusalem, Israel, July 22-24, 1992.

The Joint Conference is being held as a pre-congress to The 12th International Congress of Hypnosis in Jerusalem July 26-31, 1992. The Joint Conference is sponsored by The International Society of Clinical Hypnosis.

To register for the Joint Conference, professionals may contact Burkhard Peter, Dipl. Psych., c/o M.E.G., Konradstr. 16, 8000 Munich 40, Germany; Fax (011-49-89-641-2599). Persons wishing to submit papers also should contact Mr. Peter.

For information about the 12th Congress, contact Moris Kleinhauz, M.D., 12th International Congress of Hypnosis, P.O. Box 50006, Tel-Aviv 61500, Israel.

## Chilean Organization Continues Work in Ericksonian Hypnosis

The Chilean Institute of Applied Hypnosis continues its efforts to study, use and teach Ericksonian hypnotherapy.

The group has held seminars for mental health professionals and recently sponsored an intermediate level seminar with 20 practitioners.

A member of the Institute, Psychologist Mario Pacheco, taught a course on Ericksonian hypnotherapy last year in a Chilean university. Another member, Psychiatrist Raul Miserda, M.D., has been working with psychotic and schizophrenic patients.

The members were invited to participate in the Annual Seminar of the Chilean Psychiatric Association.

## Media of Note

Michele Ritterman has a new book out called *Hope Under Siege: Terror and Family Support in Chile*. A champagne reception was held in Michele's honor in Berkeley in August. We wish her well with this important work.

For information about the book, persons may write Michele Ritterman, Ph.D., 3908 Lakeshore Ave., Oakland, CA 94610.

\* \* \*

Newsletter editor Michael Yapko's new book, *Free Yourself from Depression*, is a self-help book that therapists may recommend to their depressed clients. The book will be available in hard cover from Rodale Publishers around Thanksgiving.

## Research in Ericksonian Approaches Sought

We would like to include two new sections in upcoming issues. One section would be entitled "Dissertations of Note," and the other section would be entitled, "Research of Note." We are interested in having you contribute brief (up to 150 words) abstracts of ongoing or completed research in areas relevant to Ericksonian approaches to hypnosis and psychotherapy. Please send abstracts to the editor at the address on the front page of the Newsletter.

### ACCME *continued*

again been awarded accreditation by the ACCME."

The Erickson Foundation also has been reapproved as a provider of continuing education credits for the American Psychological Association. The re-accreditation by the APA is for a five-year period.

The California Psychological Association also granted approval to the Erickson Foundation to offer courses for continuing education of psychologists. The authorization is for three years.

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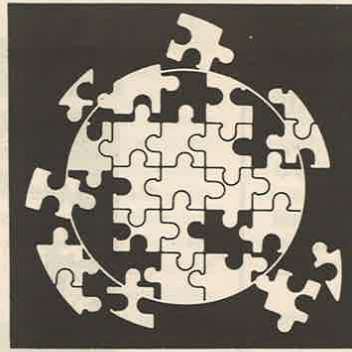
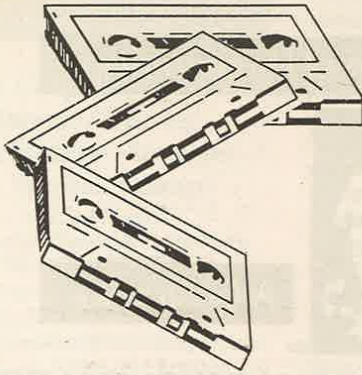
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## Interview *continued*

high school, we moved almost every year. Then, I finished high school in one place for three years.

### **Y—Then you went off to college?**

L—Yes. I was in Birmingham, Ala., when I finished high school. I spent an uncertain semester at a small college outside of Birmingham. Initially, my father wasn't real big on the idea that I needed an education; he reminded me of what great secretarial jobs I could find, and how much money I could make to get myself a nice car. That first semester away at college, without any financial support, took my entire summer earnings and left me thinking, "Well, I really better be congruent about which direction I want to go here because it's too expensive to flounder around." So, I took a year off and worked in an advertising agency.

### **Y—Was it somewhere around age 20?**

L—Maybe 18 or 19. During that period, I started going to school part-time at the University of Alabama, Birmingham Campus, because I could live at home and go there at much less expense. That's where I took my first psychology courses and got a feeling of inspiration that I really understood and liked this subject. I originally majored in English and Literature but I was becoming uncomfortable with the questions my father kept asking; "Well, what would you do with a degree in literature? How do you get a job in that?" Psychology seemed a little more practical. When he asked, "Well, what do you do with a degree in psychology?" I responded, probably 50 times during that period, "Well, I don't really know that either, but I'm sure that there will be something." I really had no idea what a psychologist did at that point, but I was confident that there had to be lucrative and interesting and beneficial applications.

### **Y—When did you get into the more advanced study and clinical aspects of psychology?**

L—Not until after I got my first psychology-oriented job. After I got my bachelor's degree, I found a job at a mental health center that did not have any expectation about prior training. In fact, it was a clinic where they *preferred* that I not have the illusion that I knew a particular way to do things, because they highly emphasized their own in-service training and wanted to train me to do the job the way they wanted it done.

To their credit, they used a variety of approaches, and there were many in-service training activities that I found extremely valuable. I went into this first job without much therapy training. I was actually hired as a psychometrist, but they believed in assigning certain types of therapy cases to psychometrists. When they assigned the first person to me, I asked, "What exactly is therapy? What, specifically, do I do in there?" They said, "For therapy, just be yourself." At that point, I found myself relying on the informal training I had from going to different schools, meeting new people and connecting with them in some meaningful way. I wasn't sure exactly what to do; I certainly had no strategy of psychotherapy at that time, which caused me some discomfort. I

quickly filled that gap with in-service training and entered a master's program as well while continuing the job. It wasn't yet in vogue to talk about Milton Erickson in graduate programs, but I eventually discovered Haley's written material about Erickson. It was like a breath of fresh air. I always had found something to appreciate and benefit from in every theory, but the Ericksonian material represented a significant shift in approach. Transactional analysis had been my theory of choice at that point, and I found the Milton Erickson viewpoint compatible with this framework and yet expanding it in interesting ways.

I think I developed a transference with Erickson long before I actually met him, just from reading his case studies and descriptions of therapeutic interactions with his children. I responded on a feeling level, as if from the child's point of reference, to how incredibly respectful of his children he was and how he helped them learn without teaching in a forceful manner. I was drawn to this because my own father was the opposite type—he'd tell me what to do forcefully. One day he called me on the telephone even after I was grown up and told me abruptly, "Carol, you've got to stop letting other people tell you what to do!" He didn't appreciate how paradoxical that message was. He loved me, and he wanted the best for me. I just didn't feel respected and inspired the way I felt when I imagined myself in the child position of the Erickson stories. So, I responded on that level and also with new understanding about therapy.

### **Y—Given the feeling that you had from reading about Erickson, how did you feel when you actually met him? Can you describe your first experiences and impressions of Erickson?**

L—I was instantly and constantly surprised. I expected him to be more limited and possibly bitter because of his illness and pain. I did not expect him to be so full of life; I expected him to be more influenced by his own difficulties. When I met him, he was in his late 70s. I knew he was in a wheelchair. I knew he sent people to climb Squaw Peak as a test of their sincerity and motivation. So, I climbed Squaw Peak before I met him and told him about it. I knew he wore purple, but I was surprised by the fact that this extended to furry purple booties. As I waited for him to enter the room at our first meeting, I somehow forgot that he would be coming in feet first. My first sight of him were these furry booties slowly coming around the doorway. I think I went into my first trance at that moment. I was certainly fixated. The next thing that struck me was how full of life he was despite his severe physical limitations and his advanced age. When he came into the room, the light in his eyes was so bright. His interest was intense, and he focused it on me. You know, I obviously had a lot of interest in him, but to him I was just a stranger. I was surprised at the level of attention that he turned on me. The way he looked at me with such undivided attention was very validating without his saying anything. He never told me, "You're okay," or anything like that. He just radiated curiosity and enjoyment and seemed full of acceptance and understanding. I felt honored to be focused on in this manner.

### **Y—How long did you actually study with him?**

L—A very brief time, just a few days. But I had been studying him for years through other people and reading. Stephen (my husband) and I met, in fact, because of our mutual interest in Erickson. We met at a Transactional Analysis conference where he was doing some presentations on his experiences with Erickson. That was very exciting for me, because at that point my experience of Erickson was only from reading about him. I hadn't realized he was still alive. Stephen had been with him for many sessions and was clearly stimulated by this same "breath of fresh air" and perspective that had inspired me. We developed an instant rapport on several levels, but that is another story.

When I finally met Erickson, even though it was only for a few days, the impact was profound because it seemed as though things were just falling into place. From all the pieces I had been collecting and putting together, I could somehow now see a pattern—I could see them in action. I had an understanding that probably would not have come so quickly had I not been laying the groundwork beforehand.

I was still in for a lot of surprises. I remember thinking that his nonverbal inductions were pretty clever, but it probably wouldn't work on me because I was a verbal person; I was especially looking forward to hearing one of his clever verbal inductions. I hadn't taken into account that I wouldn't understand a word he said through his paralyzed lips and his somewhat unusual selection of vocabulary. When he first began to talk, I couldn't understand him. Then, he did one of those nonverbal inductions on me before I was even cognizant of what was happening. He was looking at me, and I was looking at him, and then he simply changed his focus as though looking "through" me and dropped into trance himself while holding my gaze. Even as I followed him into trance, my conscious mind commentary was saying, "I'm having one of those nonverbal inductions. I'm going into trance without a word." I was aware of developing tunnel vision for his face that was both intense as well as joyful. Meanwhile, he was talking about various things.

Stephen and I had asked him to do an informal wedding ceremony for us, and although he was talking, I still didn't understand his words. Then, something happened as I was looking at him; all of a sudden the sound track "kicked in" as though someone had turned on the microphone. I could understand perfectly what he was saying within the trance relationship. So, that was a learning.

Then, I was interested in *what* he was saying, and I realized he was admonishing us, which I wasn't too thrilled about at first. He said, "The first thing I want to do is admonish the two of you because you're blind," which was another interesting alteration in my visual experience. I was already blind for everything but him with my tunnel vision. Then he said, "Don't worry, it will clear up. You'll begin to see one another's faults." We had actually been married several months, and we had already seen a few of each other's faults!

He went on to say, "And don't give up any of your faults—either one of you—because you're going to need them to understand and accept the faults of your partner." And then, he had a big smile on his face that gave a different meaning to his admonishment. We were figuring this out in our conscious minds and enjoying it as he went on to the next paradox and the next one, and the next one, so much so that we ended up having amnesia for much of the ceremony. We wish we had it on tape, but we don't.

In the following days of training, he told a lot of stories about couples who come together and ways that they build intimacy and connect and get closer and start rituals that they base their lives on. It was very meaningful and memorable. The way he worked made sense, I think, because I had a framework that I could put it into. But, I'm always hesitant to categorize Erickson according to any one framework, because there are so many different interpretations of Erickson, each of which make special sense to that person. But the framework that I have been broad enough to fit comfortably; I can recreate a large part of what I experienced. He was telling stories about assignments that he had given to people when he was younger and moved about more. So, I had a sense of the more active Erickson as well as the Erickson who was able to communicate a great deal of information just sitting there in his chair paralyzed, with paralyzed lips telling stories.

### **Y—You have emerged as one of the premier Ericksonian therapy trainers. Now, you're in an interesting position, because whenever you see the faculty at meetings, you're one of the only women on the faculty. Why do you think that is? Is it an accurate observation that there are fewer women who are Ericksonian, and if so, why do you think that this is the case?**

L—I don't think being Ericksonian is male-oriented. Currently, there exists a small core group of Ericksonian therapy trainers. Given that it's a very small group, I don't feel that it is odd or representative of a trend that I'm one of the few women in that particular group. At big conferences, I experience many strong influential women therapists and trainers. They're not necessarily exclusively Ericksonian, but they've certainly been influenced by Erickson. Yesterday, I was sitting between Cloé Madanes and Mary Goulding, both of whom have some Ericksonian aspects though they may not term themselves Ericksonians. I have trouble knowing what "Ericksonian" really means. Once Betty Erickson said, "It's Ericksonian until proven otherwise," which means it's a broad range of things. At the large Ericksonian congresses, there is such a diverse faculty! There are quite a few prominent women, each with different styles and different frameworks: Michele Ritterman, Yvonne Dolan, Kay Thompson, Noelle Poncelet, Joyce Mills, Cloé Madanes, Madeleine Richeport, and others. I've watched their work and have been impressed with their styles. Some women come up and thank me for making a contribution as a woman. They may have some difficulty identifying with male presenters who seem to be represented in greater

*Continued on next page*



## Interview *continued*

abundance.

**Y—I was wondering if people commented to you about that.**

**L—I don't know why there are not more women at the core of the faculty, but I don't think there's any reason why they couldn't be. I think it probably just happened that many women who were trained by Erickson or who knew Erickson, or who do Ericksonian therapy have elected not to go on to be presenters. I was an Ericksonian therapist long before I was an Ericksonian trainer. Maybe other women will emerge as Ericksonian trainers, but I really see the field as so broad that I think there are a lot more women teaching Ericksonian material than are reflected in the core group. But, the people currently in that group teach techniques and interventions that can just as easily be used by men or women in a congruent way. When I watch a man teaching or doing therapy I can learn from the technique he uses. Whether it's a man or a woman, you are still going to have to adapt the technique to fit your style. You can't just adopt it straight from the person teaching it just because they happen to be your sex. I'm glad that women appreciate me offering a female model, but I think there's a little too much made of that particular issue. In my therapy, I tend to minimize gender differences and focus on people and what people need. I see people pretty much as the same with regard to the needs they have—their needs to have their feelings by virtue of being alive, and the need for behavioral options that they should be able to have whether they're male or female.**

**Y—Are there other issues that come up that you find bothersome to have to deal with as an Ericksonian trainer?**

**L—I guess the biggest one is the diagnostic category focus that is so prevalent: The idea that there should be some particular way to treat a particular diagnostic category or particular symptom. I think it should be like Lazarus said, "... it should just be problems people have that you deal with." I was teaching the other day about goal-oriented metaphors, and someone said, "Well, what story would you give to a borderline?" or "What story would you give to a bulimic to treat the problem?" They ask questions like that as though there is some predetermined and invariant formula. "Okay, now that would be story number 53 you should tell the bulimic..." One of Erickson's tenets that made a lot of sense to me and remains central to my work is that everyone is so unique. It makes this business so complex. That really irritates me when therapists want to group unique people together into one lump and say, "Well, how do you treat this lump of people?"**

**Y—You have been closely identified with the use of metaphor as a primary therapeutic tool. Your first book, *The Answer Within* and your subsequent books, *Enchantment and Intervention* and *Tales of Enchantment*, placed a heavy emphasis on the use of metaphor. Do you think that the books created an impression that you really didn't intend about the nature of your work?**

**L—Well, if they form the impression that metaphor is all I do and that's all that I think is valuable, then that's not a correct impression. I wouldn't want them to have that impression.**

**Y—Have you had that feedback?**

**L—Occasionally, but not so often that it is a pet peeve. One reason I don't encounter it is that I always emphasize in the preface of a book or the beginning of a workshop that these indirect methods are not intended to supersede something that therapists already do or take its place or make it obsolete. It's just another area, another way of stimulating ideas, another way of illustrating, another way of retrieving experiences. We have focused on it, and we do use it and find it to be very valuable. We found therapeutic metaphors to be an area that wasn't very well developed a few years ago. Now it's enjoying more prevalence. There are a lot more books out on metaphor. Yet the definitions are pretty different. I think, on metaphors. We focus specifically on therapeutic stories, and call that metaphor, which is not exactly accurate if you check the dictionary. Metonymy is the correct word for what we do, meaning complex stories with a purpose and movement rather than a simple analogy.**

**Y—Metonymy?**

**L—Yes, but we don't use that word because no one has any associations to what it means. When we listen to the stories that Erickson told we notice that there are pattern differences that are identifiable, and we incorporated these into our framework. Perhaps Erickson was just proceeding intuitively. Intuition and placebo are two phenomena that I don't think should ever be minimized as in "just intuition" because they are manifestations of potentials that no one really understands. At any rate, whether Erickson used particular guidelines or structures in his stories or not, we notice that there were stories we had strong feeling responses to, like crying or feeling strong, or angry, or whatever. There were other stories that seemed kind of boring because they were somewhat repetitive—the same details over and over—that we wondered consciously, "Why is he going on and on about this?" At another level, something was being imprinted. This kind of repetition just burned it in. There were other stories that caused a cognitive questioning reaction; I'd try to figure out what the point was because there seemed to be one, but there was a mystery about it. So, we thought about what guidelines we could use when we make stories. We wanted to be able to create stories that would facilitate a specific experience when having that particular feeling would be relevant and desirable for the person. We also wanted to tell stories that would illustrate particular behaviors that seemed relevant for the person to have available. Other stories challenge an existing attitude that supports a person's continuing problem, such attitudes as, "This is just the way I am," or "I can't do this"—the limiting kind of attitudes. So, we put together guidelines for creating these different types of therapeutic stories.**

We have told a lot of stories to a lot of clients while they were in trance. We've noticed when therapists come to our trainings that, initially, they're concerned about

how they're going to put a person into trance. They think *that's* going to be hard. And then, of course, they learn that it doesn't take very much skill at all to facilitate a client going into trance—most people already know how to do this. An opportunity to do it is sometimes all that is needed in regard to helping them go into trance. Then what? How can you use trance to accomplish something meaningful? One of the things I liked that Erickson said was that hypnosis doesn't cure anything; it's not curative in and of itself. It might be useful in facilitating relaxation, but it's not particularly going to cure anything. Many people have the idea, "Just hypnotize me, and that will make me stop smoking or having this weight problem..." or any of the other habits that people have the idea that hypnosis can magically alter. Hypnosis doesn't cure anything. He went on to say, "... it's just a modality. It's just a means for exchanging information." Then the question becomes, "Well, what information should we exchange?" and "How?" When we're using hypnotherapy, we also are telling stories as a way of exchanging information with that client, probably 95 percent of the time. But, the percentage of time we do hypnosis is highly flexible. It may be never with some clients; probably in our case load it would be 50 percent of the time that we would use some version of hypnotherapy.

**Y—Let me ask one last question. What's next for Carol Lankton?**

**L—Well, the '90s. I'm currently an ex-author, in the sense that I'm not writing anything new right now, which is good because it means I still believe everything in my books. I feel like the framework that we have right now is holding together pretty well. It's something I can rely on personally when I work as a therapist, and the therapists that we teach find it useful. But I'm open to finding out how I will evolve my understandings and then share them in changing ways. My clients constantly teach me new things. Every time I have the opportunity to meet another unique person, I find out something different and unexpected. I also think I find out different things about doing therapy as my children grow through new stages of development. Here I am near the end of this interview and I didn't even mention that I'm a mother! I have a seven- and a five-year-old. I sometimes can hardly remember how I was able to be a therapist before I was a mother; my understanding of life is so different as a result of being a mother. I think one thing that kept Erickson so young was his fascination with each of his many children as well as his grandchildren. Having my children going through early stages of development so intimately in front of me renews and enriches my perspective. Children go through things for the first time in such a pure, intense, and innocent way. Experiencing this process with my children allows me to be more attuned to the needs that my clients are having that may relate back to their movement through those same stages that didn't go so normally and ideally.**

Of course, my clients benefit when I can understand them. That also occurred before I had children, though I can hardly remem-

ber how. I'm sure as they get older and I experience them through their next stages of development, I'll wonder how I even did therapy with only my current level of understanding.

**Y—Therapeutic development will parallel child development?**

**L—I think so. My motherhood is in development. I don't know what's next other than continuing to grow and applying what I learn to my clients and to the people who come to workshops and who ask questions that I sometimes can't answer, like: "What's next with you?" Sometimes I flirt with the idea of being a full-time gardener or opening a gourmet vegetarian restaurant as my next career, or finally becoming a classical pianist—all those secret passions that are on hold and waiting for a time and a place to happen.**

We hold the belief, as Erickson did, that people have psychological problems because they aren't able to get the resources they have available into the new circumstances where they need them. So, if we can facilitate retrieval of that experience or resource, and facilitate an association to contexts where they need it, that's good therapy. To me, that's an organizing framework that is broad enough to include everything Erickson did and that all the different practitioners of his approach do some version of. Metaphor within hypnosis is only one way of helping people to have experiences and make associative links to the context where they want to have the experience. Other interventions and methods also result in getting people to retrieve and associate experiences that are desired and available, but not necessarily organized and easily available.

Sometimes I think that the metaphor approach has worked so well for us because our clients have been so resourceful. Of course, all clients are resourceful, but many therapists routinely work with some very impoverished clients. We find when we are able to communicate well with resourceful clients, especially when the time for therapy is limited, that telling stories is a way to rapidly communicate a great amount of information without necessarily having to take the time in therapy that Erickson sometimes did. He worked for days and weeks and years with people, even going with them on assignments. Erickson might spend years helping an impoverished person who didn't communicate well and had time for a longer therapy to develop skills and associate them to the context where he would need them and want them. Sometimes what I first do in therapy is not enough for a particular client working to retrieve experiences and associate them to a desired context which doesn't seem to result in a cure or an alteration of the problem. Then, I wonder if maybe the interventions I applied to retrieve the experiences weren't enough or weren't relevant for that person, or maybe the associational links weren't very thorough. Or, maybe I somehow missed understanding the person well enough to know what experiences were relevant and which situations they needed to connect with.

I never conclude that the clients are resistant or something negative like that. I

*Continued next page*



## Gestalt *continued*

pushed the tape into the VCR. And I soon realized I was wrong. This is beautiful therapy, warm yet provocative, always surprising, and charmingly engaging. Erving Polster is an artist.

Polster accurately points out the absurdity of separating technique from humanity. We are both human and technicians. It is unbelievable to assert that in the therapy hour there is no technique. Why else would I pay a lot of money, but to have some kind of technical difference in our conversation, something I can't get from a friend, a religious counselor, or (perhaps the same thing), a bartender. I expect that technical difference to make a living difference in my experience of myself.

Polster works with two clients. The first is a woman immobilized by homesickness, grief over leaving friends and coming to a new place. We see Polster honing in on a specific topic to focus on, reframing her complaints delightfully, playing with one-up and one-down positions, and making her there-then complaint into a here-now relationship experience. This seems to be a 10-minute session in which the patient may not need further work. He has broken her out of her impasse, and she is moving again. If so, what a delight to have a 10-minute single session cure. I always have a fear that many humanistic therapists get so enamored with the relationship that they continue to see clients beyond that which is necessary. Again, Polster might surprise me on this score too.

The second client seems to be bent on a political statement, complaining about the lack of women/minorities at the conference. An interesting point, but to me irrelevant to psychotherapy. I couldn't see a therapeutic issue, and suppose I would have failed to do anything with her. Polster is wiser, gently reframing her issues until it becomes something therapeutic. Again, an artistic, poetic performance, but one done with certain specific techniques. He does use the notorious Empty Chair with this client (which perhaps supports my superstition that she wasn't appropriate for therapy anyway), but I can forgive this lapse in so great a talent.

I have showed this video to a number of people at workshops, and they are as charmed and delighted as I am. Polster transcends his roots and becomes accessible to therapists of almost any persuasion. Highly recommended.

— Lynn Johnson, Ph.D.  
Salt Lake City, Utah

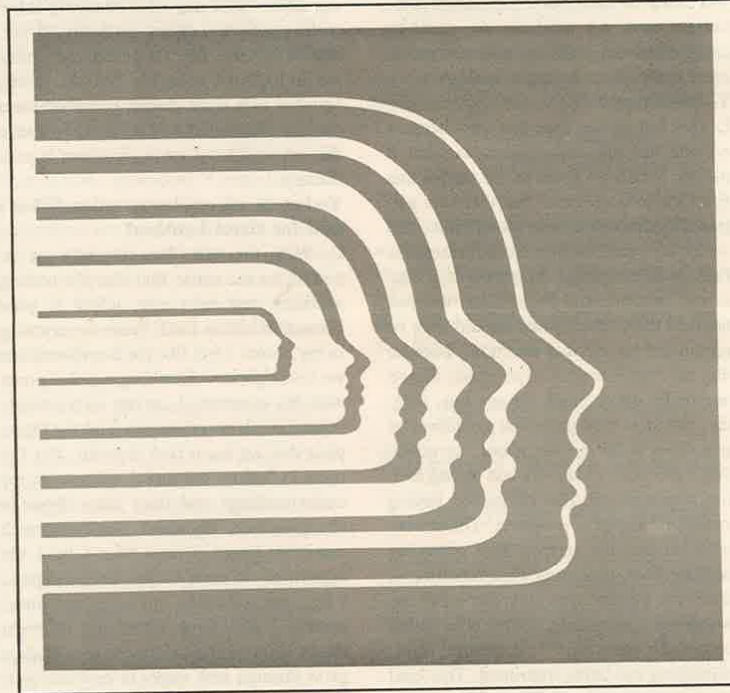
## Interview *continued*

simply conclude that we haven't yet created the desired outcome and continue to try something else.

**Y—Well, okay, we better stop there, but I'm glad to know that your plan is more learning, and more growing. I'm sure it will show up wonderfully in your teaching.**

**L—I look forward to looking back when I'm 80 at the things I thought of when I was 40. I'm sure I'll wonder how I could have possibly said anything back then when I still had so much to learn.**

**Y—Thanks for doing this interview, Carol.**



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*Full regard must be given to the human need to succeed and to the desire for recognition by the self and others of that success. [1952]*

(In Erickson, 1980, Vol. I, chap. 6, p. 51)

## Donations

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