



The Milton H. Erickson Foundation NEWSLETTER

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Fall 1994

Sixth International Congress

The Sixth International Congress on Ericksonian Approaches to Hypnosis and Psychotherapy marks the 15th Anniversary of The Milton H. Erickson Foundation and features a world-renowned faculty.

The meeting, scheduled for Wednesday-Sunday, Dec. 7-11, 1994, near Los Angeles, Calif., is expected to sell out. The innovative program offers an excellent educational opportunity, according to Jeffrey K. Zeig, Ph.D., Director of the Erickson Foundation.

"We think registrants will be extremely pleased with the wide array of presenters and presentations," said Zeig.

The new format provides attendees the chance to participate in size-limited, in-depth, experiential tracks on one of nine topics. Track titles are "Fundamental of Ericksonian Hypnosis;" "Intermediate Ericksonian Hypnosis;" "Advanced Ericksonian Hypnosis;" "Brief Ericksonian Therapies: Strategic Therapies, The MRI Model, Solution-Oriented Therapy and NLP;" "Therapist Development;" "Anxiety and Depression: Panic Disorders, Incest and Abuse, Obsessive/Compulsive Disorder and Depression;" "Behavioral Medicine and Mind/Body Approaches;" "Children and Adolescents;" and "Family Therapy."

Tracks are limited to approximately 100 participants each. The purpose of the tracks is to establish a sequentially developed, experiential training program.

In addition to the Track Sessions,

Open Workshops will be held simultaneously. There will be more than 60 workshops from which to select.

Other features of the Congress are Keynote Addresses by Jay Haley, Bernie Siegel and Philip Zimbardo; Demonstrations, Conversation Hours, Dialogues and Trialogues and Short Courses. More than 100 faculty members will offer their expertise.

A special PreCongress also is being planned. Featuring Simon Budman, Ph.D., and additional faculty, the event on Managed Care will be held Monday and Tuesday, Dec. 5 and 6, 1994.

The PreCongress and the Congress will be held at the Century Plaza Hotel, a luxury property located near Beverly Hills, Calif. Hotel rates are \$85 single/\$95 double. The hotel is in walking

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Kristina Erickson, M.S., M.D., Retires from the Board

Kristina Erickson, M.S., M.D., has announced her retirement from the Board of Directors of the Milton H. Erickson Foundation, effective Dec. 31, 1994. She has served throughout the 15 years existence of the Foundation.

Kristina has elected to leave the Board of Directors in order to devote more time to her career as an Emergency Department Physician in her home city of Tucson, Ariz. Roxanna Klein, R.N., M.S., has been appointed to fill the vacancy. The other members are Jeffrey K. Zeig, Ph.D., J. Charles Theisen, M.A., M.B.A., J.D., and Elizabeth Erickson, B.A.

Kristina has been active in all areas of the Foundation's activities. She has been particularly interested in accreditation and in striving for higher educational standards. She will continue to pursue this interest by remaining on the

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I N T E R V I E W

Interview with Erika Fromm, Ph.D.

by Roxanna Erickson Klein

Background: Erika Fromm, Ph.D., is a professor emeritus at the University of Chicago. She has been actively involved in advancement of professional hypnosis since 1959, and particularly influential in the areas of research and hypnoanalysis. A Clinical Editor of the *International Journal of Clinical and Experimental Hypnosis*, she also is past president of the Society for Clinical and Experimental Hypnosis (SCEH), the American Board of Psychological Hypnosis, and the American Psychological Association's Division of Psychological Hypnosis. She has received numerous honors and awards for her work, has authored 97 scientific papers, co-authored or edited six professional books, four of them in the last eight years (three of which have won national awards), and currently is writing another with Michael R. Nash of the University of Tennessee.

Roxanna Klein (REK): You frequently have been identified as the most in-



Erika Fromm, Ph.D.

fluential woman in hypnosis. What personal attributes helped you to reach this position of prominence in what had been a male-dominated profession?

Erika Fromm (EF): Devotion to a cause and hard work.

REK: Do you have a brief definition of hypnosis?

EF: Hypnosis is a state of concentration and relaxation, a state in which the subject has little concern for the things in

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Bulletin

Members of the Board of Directors of The Milton H. Erickson Foundation have announced the appointment of William Matthews, Jr., Ph.D., as editor of *The Ericksonian Monographs*.

Dr. Matthews replaces Founding Editor Stephen Lankton, M.S.W., who has served in the capacity for 10 years.

Interested contributors may send articles to Dr. Matthews at 22 Fox Glove Lane, Amherst, MA 01002.

The Milton H. Erickson Foundation, Inc.
3606 N. 24th Street
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Roxanna Erickson Klein, R.N., M.S.

This is the final issue of my participation as co-editor. In my joint role as editor with Betty Alice Erickson we identified goals which we felt would enhance the Newsletter as well as lead the audience to better understand the emergent directions in psychotherapy known as Ericksonian approaches. We wished to structure the Newsletter organizationally so that the process would continue to grow. Over the past two years, our actions have increased participation of contributors and introduced features which encourage reflection upon each practitioner's knowledge and limitations.

We have sought to reinforce forward movement with a strong base from which to build. As part of this support we have reviewed older books on hypnosis, that have not been previously reviewed in the Newsletter, but which still are available and considered to be standard resources. We actively have sought additional primary resource materials that have not been previously covered in the Newsletter, that will guide our readers to a better understanding of the work and philosophy of Dr. Erickson. In this issue, we are delighted to share an insightful review of a professionally-made film of Dr. Erickson's work.

1979-1994



ANNIVERSARY

Extensive coverage is given to the Ericksonian Monograph Series. These books offer a unique and central resource for the clinician interested in learning more about the new directions that are an outgrowth of the work of Milton H. Erickson.

My working relationship with Betty Alice has been nicely balanced; her education is in psychology and counseling, and mine is in nursing and public administration. We enjoy complementary working knowledge in psychology, physiology and organizational areas. Our commitment to the ethical advancement of our father's work continues to be a driving force for each of us.

In a shorter time than we had hoped, the goals we set have been realized. An important lesson that we have learned is that a search for common ground does not necessarily call for the establishment of precise or rigid boundaries. We have posted our own trail markers. This will be the final issue in this existing format. In the next issue we will be dividing editorial responsibilities and introducing new editors. It is particularly satisfying to me that my own period of editorship is culminated with this issue, which contains exceptionally valuable resource materials.

With the next issue, structural changes will be introduced that will continue to foster the refinement of the Newsletter as a voice for the broad group it strives to represent. Betty Alice will remain with the Newsletter as Editor-in-Chief. I have accepted an appointment to the Board of Directors of this Foundation.

I express much appreciation to all who have supported the advancement of the Newsletter, and helped it to become what it now is. I credit the contributors and all of the individuals who have provided feedback, both positive and constructive, as that is an integral element in refinement and growth. I am optimistic and confident that the positive growth will continue.

Sincerely, Roxanna Erickson Klein

Congress *continued*

distance of shopping, movie theatres and restaurants and within a short drive of numerous other activities.

"There really is an incredible number of great events at this Congress," Zeig said. "We may hear complaints about how hard it is to decide what to attend."

Continuing Education credits are available for most disciplines. Some 31 hours of credit are available for attend-

Dear Kristi:

Your retirement from the Board of Directors, effective Jan. 1, 1995, prompts this letter.

I have known you for more than 20 years. During the last 15 years, during your tenure on the Board, we have collaborated on numerous projects and have spent countless times discussing the direction of the Erickson Foundation (not to mention the time we have spent sharing our children's activities). Our collaboration has generated fruitful ideas that have taken the Foundation from its infancy through its development as an internationally respected educational organization. Disagreements have been minor and constructive; on major issues we have been unified: We want to promote and advance your father's clinical legacy in every professional way.

I have appreciated immensely your dedication and the enormous amount of behind-the-scenes efforts you have devoted to the Foundation. You are gifted with an incisive ability to steer a prudent course through complex and occasionally turbulent territories. Your patience, graciousness and understanding of protocol have facilitated relationships with professionals around the world.

Among numerous contributions, I would like to single out your extraordinary efforts in developing the Continuing Medical Education program for the Erickson Foundation and in working on the Monographs. In these projects and others, your dedication to developing a program of high quality, professional education has been peerless.

I appreciate greatly your willingness to serve as Chair of the Foundation's Continuing Medical Education Committee.

You have been a vital part of all facets of the Foundation's growth and development, and I will miss your direct input. You can know, however, that your contributions to the Foundation are endur-



Jeffrey K. Zeig, Ph.D.

ing and much credit for its success is yours. The goals you have set will continue to strengthen the Foundation.

I am grateful for your energetic and meticulous efforts from which I have learned so much both professionally and personally. I am most grateful for the honor of knowing you and being your friend.

Much love,

Jeff

CORRECTIONS AND CLARIFICATIONS:

Vol. 14, #1, Page 15: Robert Schwarz, Psy.D., wishes to extend credit to Steve Andreas, M.A., and Connirae Andreas, Ph.D., for the development of techniques used in the audiotape "Releasing Resentment and Remorse: Facilitating Forgiveness of the Self and Others."

Vol. 14, #2, Page 1: Jane Parsons-Fein is a Diplomate of Clinical Social Work.

Vol. 14, #2, Page 11: In the column which featured the study: "Event Related Potentials During Cognitive Processing in Hypnotic and Non-Hypnotic Conditions," we omitted the names of the co-researchers. They are Graham Barnes, M.S., and Mirjana Dabic-Jeftic, M.D., Ph.D.

Vol. 14, #2, Page 18: The German center, cited by Dr. Trenkle, for teaching varied approaches is a family therapy institute.

— Editors:

Roxanna Erickson Klein & Betty Alice Erickson

ing the entire meeting, and another 12 credit hours are available for attendance at the PreCongress.

A registration form can be found on page 3 of this issue of *The Newsletter*. For additional information, call or write The Milton H. Erickson Foundation, 3606 N. 24th St., Phoenix, AZ 85016-6500; (602) 956-6196; fax (602) 956-0519.

In Appreciation of Stephen R. Lankton

by Elizabeth Erickson

The publication of the 10th issue of the *Monographs* will mark the achievement of the term of editorship that Stephen Lankton set as his goal. His work as founding Editor of the *Monographs*, including this work is only one of many contributions that he made toward the advancement of the work of my late husband, Milton H. Erickson.

Milton had a few students whom he cherished. Stephen was one of them. While Stephen was still a graduate student and perusing his own professional direction, Milton recognized the promise that clearly resided within him. His optimistic disposition and focused approach complemented his exceptional ability to work cooperatively and indicated a potential for significant professional contributions.

Milton's close professional relationship led to friendship and mutual respect. Milton was honored to preside at a ceremony which celebrated the marriage of Stephen and Carol Lankton. This event took place at our home in front of Milton's favorite tree, the giant palo verde which carried a desert mis-

tletoe in its branches.

Milton's expectations of Stephen's potential were accurate. Stephen Lankton's contributions have been as impressive as they have been numerous. In addition to his excellence as editor of the *Monographs*, Stephen has authored three fundamental books on Ericksonian approaches: *The Answer Within*, *Enchantment in Intervention*, and *Tales of Enchantment*, and has made numerous other literary contributions. Over the last 20 years he has worked tirelessly as a teacher, presenter and clinician.

The Erickson Foundation, and the ongoing movement for the advancement of the work initiated by my husband have been the lucky recipients of the virtual lifetime's worth of achievement in the relatively short span of Stephen's professional career. On behalf of myself, our family and the Foundation, I want to express how very much we will miss his participation as *Monograph* Editor. We sincerely hope that his new labors will be as fulfilling to him and as rewarding to others as his work with us has been.

Volunteers Needed for Congress, PreCongress

Volunteers are needed for the Sixth International Congress on Ericksonian Approaches to Hypnosis and Psychotherapy, Dec. 7-11, 1994, in Los Angeles, Calif.

A limited number of spaces have been set aside for full-time graduate students from accredited programs. In exchange for a waiver of registration fees, volunteers will serve in varying capacities such as monitoring meeting rooms, assisting with registration and continuing education, and working with faculty and staff.

Upon acceptance, volunteers will be asked to submit a \$50 deposit, which will be refunded after the student has successfully completed his/her participation in the meeting.

Volunteers also are needed for the PreCongress Institute.

For additional information, please contact Diane Deniger, Volunteer Coordinator, The Milton H. Erickson Foundation, 3606 N. 24th St., Phoenix, AZ 85016-6500; telephone (602) 956-6196; fax (602) 956-0519.

Managed Care Topic of PreCongress

A special PreCongress Institute will offer professionals state-of-the-art information on the topic of managed care.

The program, "The Challenge of Managed Care: What to Do NOW to Succeed Tomorrow," is scheduled for Monday and Tuesday, Dec. 5 and 6, 1994, at the Century Plaza Hotel in Los Angeles. The meeting precedes the Sixth International Congress on Ericksonian Approaches to Hypnosis and Psychotherapy.

The PreCongress program has been designed by Simon Budman, Ph.D., president of Innovative Training Systems, Inc., who has assembled a faculty

to teach various aspects of managed care. In addition to Dr. Budman, presenters include Laura Altman, Ph.D., Don Fowls, M.D., Richard Edley, Ph.D. and Matthew Weinstein, B.A.

The goals and purposes of the Institute will be to familiarize the audience with practical steps to offer clinical services within managed behavioral health-care.

For additional information and a brochure, call or write The Milton H. Erickson Foundation, 3606 N. 24th St., Phoenix, AZ 85016-6500; tel. (602) 956-6196; fax (602) 956-0519.

1979-1994



ANNIVERSARY SM

DECEMBER 7-11, 1994
LOS ANGELES, CALIFORNIA

The Sixth
International Congress
on Ericksonian Hypnosis
and Psychotherapy

"Tracking Ericksonian Methods"

NEWSLETTER READERS' REGISTRATION SPECIAL

**SAVE 10 PERCENT BY REGISTERING
BEFORE OCTOBER 11, 1994**

Join The Milton H. Erickson Foundation
in celebrating its 15th Anniversary.

Name: _____ Degree: _____

Telephone: _____ Profession: _____

Major: _____

Among the presenters:

Alman, Araoz, Barber, Barretta and Barretta, Cheek, Combs and Freedman, Dolan, Erickson, Fisch, Gilligan, Havens and Walters, Keeney, Kershaw, C. Lankton, S. Lankton, Lorio, Lustig, Mills, Papp, Pearson, Ritterman, Rosen, Rossi, Shapiro, Thompson, Trenkle, Watzlawick, Yapko, Zeig, AND MORE!

KEYNOTE PRESENTATIONS BY
JAY HALEY, BERNIE SIEGEL AND PHILIP ZIMBARDO

Special Fees: \$360.00 U.S. (Professional) / \$270.00 (Full-time graduate students*) until October 11, 1994. Fees increase to \$450 / \$350 until November 12, 1994.

(Fee must be accompanied by this form. No copies or faxes will be accepted. Complete all information below.)

ELIGIBILITY: Open to professionals with master's degrees and above from accredited institutions and eligible students.

*Must supply certifying letter.

Street: _____ City: _____

State: _____ Country: _____ Zip: _____

University: _____

Mail by October 11, 1994

The Milton H. Erickson Foundation, 3606 N. 24th St., Phoenix, AZ 85016-6500, (602) 956-6196

Cancellation Policy: Cancellations must be received in writing. There is a \$35 administrative fee for requests postmarked before Nov. 15, 1994.

European Evolution Conference attracts audience from around the world

Billed as the first of its kind in Europe, The Evolution of Psychotherapy Conference, in Hamburg, Germany, attracted registrants from around the world.

More than 5,200 professionals attended the event July 27-31, 1994, which featured leaders in the field of psychotherapy. Sponsored by the Milton H. Erickson Foundation, the meeting was organized by Bernhard Trenkle, Dipl. Psych., a premier teacher of Ericksonian psychotherapy in Germany. Trenkle, his Executive Director, Christine Duffner, Dipl. Psych., and their staff did a remarkable job in administering the numerous details involved in successfully executing such a meeting, according to Jeffrey K. Zeig, Ph.D., Director of the Erickson Foundation.

While similar in format to its two preceding meetings in 1985 and 1990 in the United States, the European conference differed in two ways. Faculty presented two three-hour workshops, one on fundamentals and the other on an advanced special topic of the faculty member's selection. Also, there were 75 minute debates, called "Point/Counterpoint." One faculty member presented a primary position statement and another served as a discussant.

Trenkle also hosted approximately 150 invited professionals from Eastern Bloc countries.

Response from registrants was enthusiastic. Many said it was the best conference they ever attended. Evaluations by attendees indicate that they were extremely pleased with the content of the program.

Among the highlights of the program was the keynote address by 89-year-old Viktor Frankl. He received a 10-minute standing ovation for his inspiring message about essential humanism. Audiocassettes of all presentations are available (see advertisement this issue).

Miriam Polster was unable to attend due to illness. Nossrat Peseschkian and Hilarion Petzold were invited to present.

Other faculty members were Aaron Beck, M.D.; Albert Ellis, Ph.D.; Eugene Gendlin, Ph.D.; William Glasser, M.D.; Mary Goulding, M.S.W.; Klaus Grawe, Ph.D.; Jay Haley, M.A.; James Hillman, Ph.D.; Otto Kernberg, M.D.; Arnold Lazarus, Ph.D.; Alexander Lowen, M.D.; Cloé Madanes, Lic. Psychol.; Judd Marmor, M.D.; William Masters, M.D.; James Masterson, M.D.; Donald Meichenbaum, Ph.D.; Adolf Ernst Meyer, M.D., Ph.D.; Salvador

Minuchin, M.D.; Mara Selvini Palazzoli, M.D.; Erving Polster, Ph.D.; Ernest Rossi, Ph.D.; Helm Stierlin, M.D.; Thomas Szasz, M.D.; Paul Watzlawick, Ph.D.; Joseph Wolpe, M.D.; Irvin Yalom, M.D.; and Jeffrey Zeig, Ph.D. Cofaculty members were Clifford Lazarus, Ph.D.; Jan Scott, M.D.; and Matteo Selvini, M.D. Moderators at selected events were Bela Buda, M.D.; Krzysztof Klajns, Lic. Psych.; Liz Lorenz-Wallacher; Camillo Loredi, M.D.; Burkhard Peter, Dipl. Psych.; Gunther Schmidt, M.D.; and Bernhard Trenkle, Dipl. Psych.

The European Evolution Conference has resulted in considerable interest in the 1995 event, scheduled for Dec. 13-17, 1995, in Las Vegas, Nev. For additional information about the 1995 program, write or call The Milton H. Erickson Foundation, 3606 N. 24th St., Phoenix, AZ 85016-6500; tel. (602) 956-6196; fax (602) 956-0519.

Couples' Workshop set March 3-5

The Milton H. Erickson Foundation, Inc., is organizing a special three-day workshop entitled "Integrating Sexuality and Intimacy: The Challenge for Treating Couples in the '90s." The event is set for Friday through Sunday, March 3-5, 1995, in San Francisco, Calif.

Keynote addresses will be presented by John Gottman, Ph.D., and Harville Hendrix, Ph.D., who also will conduct workshops. Other faculty members include Ellyn Bader, Ph.D., and Peter Pearson, Ph.D.; Joseph Lo Piccolo, Ph.D.; David Schnarch, Ph.D.; Michele Weiner-Davis, Ph.D.; Marty Klein, Ph.D.; Ruth McClendon, M.S.W., and Les Kadis, M.D.; Jeffrey K. Zeig, Ph.D.; and Bernie Zilbergeld, Ph.D.

Organizational design and input will be by Dr. Bader, codirector of The Couples Institute.

Registration fees for the workshop are \$295 (professionals) and \$195 (full-time graduate students) until Dec. 1, 1994; and \$350 (professionals)/\$250 (full-time graduate students) from Dec. 2-Jan. 15, 1995. Registration deadline is Feb. 10. Fees until then will be \$400 (professionals)/\$300 (full-time graduate students).

For information, write or call The Milton H. Erickson Foundation, 3606 N. 24th St., Phoenix, AZ 85016-6500; (602) 956-6196; fax (602) 956-0519.

13th ISH International Congress of Hypnosis

The Australian Society of Hypnosis sponsored the 13th ISH International Congress of Hypnosis August 6-12, 1994, in Melbourne, Australia. More than 410 professionals gathered from around the world to participate in the Congress. Workshops on academic and clinical aspects of hypnotherapy were complemented by a scientific program. A series of keynote addresses were offered by individuals from around the world who have made major contributions to the field of hypnosis over the last decade.

Attendees were from Europe, Australia, and America, as well as from Japan, Sweden, Holland, South Africa, Canada, Russia, Great Britain, Germany

and Mexico. The international composition of the gathering offered unique opportunities for individuals from diverse cultural and professional orientations to examine central issues and glean insight from varied perspectives.

The International Society of Hypnosis (ISH), under its new president, Peter B. Bloom, M.D., already is involved in plans for the 14th ISH International Congress which will be sponsored by the American Society of Clinical Hypnosis. Richard P. Kluft, M.D., has been appointed Chairman for the June 1997 meeting to be held in San Diego. Over 1,500 participants are anticipated for that meeting.

F O R E I G N N E W S

Novosibirsk, Siberia, was the scene of a recent workshop on Erickson Hypnosis presented by Betty Alice Erickson, M.S. More than eighty-five mental health professionals attended the three-day seminar. Inga Topeschko, Anatoly Tkachev and Boris Zakharov spent several months arranging an official invitation for Erickson and circulating news of the workshop to nearby cities and towns. Novosibirsk, which is four time zones east of Moscow, is not often privileged to host foreign presenters and professionals are eager to learn Western techniques. Ms. Erickson spent an extra week in Novosibirsk and was also invited to lecture at the medical school at the University of Novosibirsk. Topeschko, Tkachev, Zakharov and other Siberian

psychologists are currently in the process of completing requirements to establish a Milton H. Erickson Institute in their area.

* * *

Jean Godin, M.D., gave a lecture on Ericksonian Hypnosis to the Royal Society of Medicine in London, England, in June. This was the first time a lecture had been presented on Ericksonian Approaches to Hypnosis to this group. Dr. Godin has presented at International Congresses on Ericksonian Approaches to Hypnosis and Psychotherapy sponsored by the Foundation, and is the founding president of the Institut Milton H. Erickson de Paris which was established in 1983.

Obituary:

Paul Sacerdote, M.D., Ph.D. 1908-1994

By Elizabeth Erickson

Paul Sacerdote, M.D., Ph.D., a Fellow of both the Society for Clinical and Experimental Hypnosis (SCEH), for which he had served as President, and of the American Society of Clinical Hypnosis (ASCH), died February 10, 1994. Dr. Sacerdote received his medical degree from the University of Turin, Italy, and came to the United States in 1939. Originally working in internal medicine, he became interested in pain control, especially in cases of advanced cancer and became an expert in the use of hypnosis. He taught courses in hyp-

nosis and hypnosis for pain management for the SCEH for more than three decades.

Dr. Sacerdote also developed a technique of hypnotically induced dreams for both physical and emotional problems. In 1967, he published this method complete with case histories and examples in a book, *Induced Dreams*, which was republished in 1978. Author of more than 30 papers and book chapters on the nature and applications of hypnosis, Dr. Sacerdote received the Milton H. Erickson Award of Scientific Excellence in Writing on Hypnosis in 1973 from ASCH.

A longtime friend and colleague of my husband, Milton Erickson, Paul Sacerdote will be greatly missed by his friends and family as well as the professional and scientific community.

U P C O M I N G T R A I N I N G

(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
1994		
9/23-25	Interactive Guided Imagery; San Francisco, CA; Martin Rossman, M.D., and David Bresler, Ph.D.	1
9/30-10/2	Ericksonian Approaches to Hypnosis and Brief Psychotherapy; Boston, MA; Brent Geary, Ph.D.	2
10/3-7	Phoenix Intensive Training Program (Basic); Phoenix, AZ; Geary	3
10/4-8	45th Annual Workshops and Scientific Meeting of Society for Clinical Aid and Experimental Hypnosis; San Francisco, CA; Faculty	4
10/6-7	Integrative Ericksonian Approaches into Hypnotherapy; Princeton, NJ; Harriet Hollander	5
10/7-9	Integrative Guided Imagery; Washington, DC; Rossman and Bresler	1
10/10-14	Phoenix Intensive Training Program (Intermediate); Phoenix, AZ; Geary	3
10/10-11	Interactive Guided Imagery; Philadelphia, PA; Rossman and Bresler	1
10/12-13	Interactive Guided Imagery; New York, NY; Rossman and Bresler	1
10/14-15	Couples Work — A Solution-Oriented to Couples Counseling; Melbourne, AUSTRALIA; Robert McNeilly and Conrad Aikin	6
10/14-16	Interactive Guided Imagery; Boston, MA; Rossman and Bresler	1
10/15-16	Enhancing Therapeutic Effectiveness: Key Concepts in Ericksonian Psychotherapy; La Jolla, CA; Jeffrey K. Zeig	7
10/20	Advanced Supervision in Ericksonian Psychotherapy; Belo Horizonte, BRAZIL; Zeig	8
10/20-22	Fundamentals of Ericksonian Hypnosis; Warsaw, POLAND; Geary	9
10/21-23	Ericksonian Hypnosis and Psychotherapy (Basic); Belo Horizonte, BRAZIL; Zeig	8
10/26-28	Patterns of Utilization in Ericksonian Hypnosis; Krakow, POLAND; Geary	9
10/28-30	Family Therapy; Sao Paulo, BRAZIL; Zeig	8
11/11-12	Therapist Development; Princeton, NJ; Zeig	5
11/11-12	Up Against the Wall: Therapy with Challenging Individuals, Couples and Families; Phoenix, AZ; Faculty	10
11/12-13	Trauma, Dissociation, Memory and Hypnosis; Berkeley, CA; Maggie Phillips	11
11/18	Value-Oriented Brief Therapy; Phoenix, AZ; Geary and John Moran	12
12/5-6	PreCongress: The Challenge of Managed Care: What to Do NOW to Succeed Tomorrow; Los Angeles, CA; Simon Budman, Ph.D., and Faculty	3
12/7-11	Sixth International Congress on Ericksonian Approaches to Hypnosis and Psychotherapy; Los Angeles, CA; Faculty	3

Contact Information

- Academy for Guided Imagery; P.O. Box 2070; Mill Valley, CA 94942; (800) 726-2070; (415) 389-9324; fax (415) 389-9342.
- Elaine Gifford or David Stern; The Milton H. Erickson Institute of Boston; 29 Wendall St.; Cambridge, MA 02138; (617) 491-0155; (617) 781-8425.
- The Milton H. Erickson Foundation; 3606 N. 24th St., Phoenix, AZ 85016-6500; (602) 956-6196; fax (602) 956-0519.
- SCEH Central Office; 6728 Old McLean Village Drive; McLean, VA 22101; (703) 556-9222; fax (703) 556-8729.
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- Robert B. McNeilly, MBBS; The Centre of Effective Therapy; 85 Male St.; Brighton 3186, AUSTRALIA; [03] 5926791; fax [03] 5920820; CompuServe 76050, 1142.
- Jane Criss, Program Representative; Dept. of Education, Health & Behavioral Sciences; University of California — San Diego; University Extension, 0176; 3300 Miramar Road; La Jolla, CA 92037-9986; Tel: (619) 534-5823; fax: (619) 534-7483.
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- Krzysztof Klajs; Pietrusinskiego 12/14 m.8; 91-074 Lodz; POLAND; Tel/Fax: 48 42 434861.
- Neil Weiner, Ph.D.; 1845 S. Dobson, #204; Mesa, AZ 85202; (602) 820-6246.
- California Institute of Clinical Hypnosis and Health Sciences; 4171 Piedmont Ave., Ste. 205; Oakland, CA 94611; (510) 655-3843.
- Brenda Watkins; St. Luke's Behavioral Health Center; 1800 East Van Buren; Phoenix, AZ 85006; (602) 251-8127.

The STDP Institute at St. Clares•Riverside Medical Center announces

October 20 & 21, 1994 Workshop on

SHORT-TERM THERAPY

Two-Day Conference with Case Videotapes

Discussant: David Malan, D.M.

Workshop Director: Michael Alpert, M.D.

Faculty:

Joe Celentano, M.S.W.	Michael Laikin, M.D.
Patricia Della Selva, Ph.D.	Leigh McCullough, Ph.D.
Catherine Duca, M.S.W.	Constance Seligman, M.S.W.
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Diana Fosha, Ph.D.	Margaret Tompsett, M.D.
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The Boxer

by Dan Short, M.S.
Dallas, TX

The 21-year-old client did not want to be in therapy. Charged with assault on his girlfriend, he had been ordered to counseling as a condition of probation. The intake, conducted by another therapist, noted, "Client is reluctant to focus on violence related issues."

The client, muscular and sullen, entered the first session in silence and sat slouched in his chair with a cap concealing most of his face. He had described himself as "a boxer" and had explained that counseling should not interfere with his "career," which consisted solely of daily sparring at a local gym.

After preliminaries, I began giving the client an explanation of the negative effects of emotional stress. I told him how "industrial psychologists are paid high wages to insure workers have their lives in order at home." The role of sports psychologists was also described in detail with some impressive statistics about successful results. The client was then offered psychological training in order to benefit his boxing career. He responded with increased enthusiasm toward treatment.

First, the client was trained in hypnotic time distortion and rapid relaxation. This allowed him to experience, subjectively, 15 to 20 minutes of rest in a three-minute period. This was important because it allowed him to "gather strength more quickly between boxing rounds." He also was given training for increased tolerance of frustration "to ensure clearness of thought while in the boxing ring." The client was told to practice these skills at home with his girlfriend.

During the first few sessions, the client came with specific requests aimed at helping him with his boxing. For example, he said his coach told him he didn't do as well while sparring with people he liked and that he needed to stop being "so nice." We explored the concept of respect. Respect for a friend demonstrated by sitting at lunch and asking "how things are going" was differentiated from sparring in the ring "where one wants to show respect by doing one's very best."

In the following sessions, our topics changed from specific boxing tactics to more general principles. These included moral strength, responsibility for self and self-respect. The client was given

both direct and indirect suggestions about transferring the abilities for the self-discipline required in boxing to the self-discipline required for healthy relationships.

After a few weeks, the client no longer mentioned his boxing career. Instead he began to ask for advice about his relationship with his female partner. He also talked extensively about his current relations with his extended family and his desire to be a son of whom his deceased mother "would be proud." Toward the end of his counseling, the client was discussing plans to retire early from boxing and become an accountant. After the mandated ten visits, the client was given a letter of completion. Three months later, he returned for a social visit. A six-month follow-up revealed he had enrolled at a local junior college and has had no further reported acts of violence.

Commentary: The Boxer

by Tina Foster Jansen, M.S.
Dallas, TX

Court-ordered clients are typically unmotivated. Faced with this type of client, Short used an opening strategy which would encourage the client to be involved in counseling to the "benefit of his boxing career." As Cormier and Cormier state, "A productive assumption in converting involuntariness into a commitment to be counseled is that the client's chief interest is himself." (p. 575) Short's adroit therapeutic intervention began the changes that eventually alleviated further violence, and also had positive influences in other areas of the client's life.

The treatment in this case is a study in reframing and utilization. Short used the strengths, weaknesses and temperament of the client to reframe inherent abilities so destructive behaviors could be changed. Haley (Nichols, 1984) maintains reframing is a necessary step in altering problem-maintaining sequences. Proper reframing changes a viewpoint to the meanings of interactions are changed while the facts of that interaction remain the same. Short reframed respect for the client. This new definition allowed the client to change behaviors while keeping and building on the client's wish for personal respect.

Haley (1971) concludes that, on a general level, the goal of the therapist is to change the maladaptive behavior of the individual. An additional and subsidiary

Ericksonian Monographs Number 4 Research, Comparisons, and Medical Applications of Ericksonian Techniques

Edited by Stephen R. Lankton
and Jeffrey K. Zeig
Brunner/Mazel Publishers, New York
1988 (118 pages)

This volume of the Milton Erickson Foundation's *Monograph* series presents papers from the 1986 Third International Congress on Ericksonian Approaches to Hypnosis and Psychotherapy. As the title suggests, they deal with an eclectic set of topics.

The four opening chapters present empirical data of some sort bearing on various aspects of Ericksonian thought. Jean Godin classifies differences between direct and indirect forms of suggestion and analyzes a transcript of

Milton Erickson conducting hypnosis. Murphy tested the effects on postural sway of two simple types of indirect suggestions for subjects' falling forward in response to direct suggestion and a control condition. The greatest effect occurred for direct suggestion, but Murphy concludes that the utilization of indirect suggestions in some way may be crucial for their effectiveness. Omer, Darnel, Silberman, Shuval and Palti tested the effect of a variation of Barber's rapid induction analgesia on women before an invasive diagnostic procedure, and before and during labor. The greatest therapeutic effects occurred in low stress conditions, and situations in which there was little "clash" between the taped suggestions and the patient's experience at the time. Hollander, Holland and Att Howe examined the question of whether or not hypnotic susceptibility can be altered by experience; subjects given a standardized measure of susceptibility before and after an Ericksonian seminar showed enhanced ability on skills specifically practiced, but no general change. Overall these papers confirm some Ericksonian-derived hypotheses and disconfirm others.

Papers by Feldman and Phillips elucidate similarities between Ericksonian approaches and those of cognitive behavioral therapies and the redecision therapy of Robert and Mary Goulding. All these schools of thought emphasize behavioral change through accessing the person's internal representations of reality, but Erickson was unique in attempting to access unconscious processes directly and in the patient's frame of reference.

The last set of papers by Goldsmith, Auer, and Britchford deal with the application of Ericksonian principles in medical settings. I particularly enjoyed Goldsmith's paper for his novel use of techniques such as agreeing with patient complaints about medication while continuing to prescribe it. Auer's paper presents some novel and moving examples of how she helps dialysis and transplant patients feel more in control of their fates.

Without belittling the other contributions, many of which I enjoyed and learned from, I particularly value the research studies presented in this *Monograph* as the best antidote against Ericksonian theories becoming simply another set of dogmas.

— Reviewed by:
Raymond F. Finn, Ph.D.
Ft. Worth, TX

goal is to extend the client's personal range of experience. By getting this client to change his violent behavior, Short was able to open the door for further change by the client. The man's personal range of experience could be extended. He could consider ways of obtaining respect other than through violence — he could consider becoming the son his mother "could be proud of." He then could begin to extend his idea of a career and investigate choices.

Utilization is a cornerstone of Ericksonian psychotherapy. Short demonstrated a superb ability to enter his client's world and regard that world as having the material for productive change. He took the problem behavior, violence, and gave the client ways in which to reframe that behavior so his needs to be respected and strong were productively met. Short should be congratulated for his insightfulness and creativity in using negative behaviors as material for productive change.

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B O O K R E V I E W

Ericksonian Monographs Number 5 Ericksonian Hypnosis: Application, Preparation and Research

Edited by Stephen R. Lankton
Brunner/Mazel Publishers, New York
1989 (126 pages)

This volume of the Milton Erickson Foundation's *Monograph* series is eclectic, including among other things a reprinted encyclopedia article by Erickson himself, a discussion of the ethics of "manipulating" patients for their own good, three book reviews, and an unusually thorough discussion of the use of posthypnotic suggestions in hypnotic pain management.

The opening article was originally written by Milton Erickson for the *Encyclopedia Britannica*, and clearly de-

scribes his views on the nature of the hypnosis. The next three articles all deal in some way with preparing patients for hypnosis. I especially enjoyed Graham Andrewartha's presentation of a three-sentence induction formula for beginning hypnotists. William Nugent contributed two related chapters describing his use of quantitative pre- and post-treatment measures and standardized hypnotic interventions with a series of patients to reach conclusions about the causal effect of his treatments. While his approach does not eliminate the need for control groups, his reasoning is sophisticated and his methods eminently usable in real world clinical settings. I hope others will emulate him.

I liked, as well, Robert Schwarz's paper on posthypnotic suggestions in pain management. He classifies them as aimed at the perception of the pain, at underlying physiological variables such

as differentiating pain from dysphoric affect, or at interpersonal processes which can maintain pain, with numerous subcategories and sample suggestions for each one. Schwarz manages to be thorough while remaining readable. Janet Edgette thoughtfully discusses ethical issues in Ericksonian therapy, which has been criticized as "controlling, manipulative, dishonest, tricky or insincere" (p. 105). I will oversimplify her argument greatly by saying that she exonerates Ericksonian approaches, but also finds professional codes of ethics largely silent on the issue.

I have not mentioned three other articles and the three book reviews, and invite readers to discover their own favorites in this diverse but consistently high quality volume.

— Reviewed by:
Raymond F. Finn, Ph.D.
Ft. Worth, TX

B O O K R E V I E W

Ericksonian Monographs Number 6 Extrapolations: Demonstrations of Ericksonian Therapy

Edited by Stephen R. Lankton
and Jeffrey K. Zeig
Brunner/Mazel Publishers, New York
1989 (122 pages)

Volume six of the Milton Erickson Foundation's *Monograph* series is the most single-minded to date. It presents transcripts of demonstrations of hypnosis by Joseph Barber, Stephen Gilligan, Stephen Lankton, William Hudson O'Hanlon, Ernest Rossi, and Jeffrey Zeig, all well known to readers of this *Newsletter* as Ericksonian innovators and teachers. The demonstrations were originally presented live at various conferences from 1982 through 1988. They are followed by comments from the presenter, each of whom also was asked to comment on one other demonstration. The result is a series of snapshots of the diverse lessons these talented individuals have drawn from Erickson's work.

The prize for rhetorical flights of fancy undoubtedly goes to Gilligan, who works with a volunteer preparing for comprehensive graduate school exams. After helping her achieve a trance state he delivers a virtuoso monologue on sail planeing, California weather, martial arts training, and lucid dreaming research among other topics, all laced with embedded suggestions for removing the subject's mental blocks and in-

creasing her feelings of security and trust. Reading Gilligan is like listening to a gifted jazz improviser, although one gets the impression that the subject could have walked offstage without his noticing.

By contrast Barber's style is almost prosaic, as he works with Dr. B., a therapist who complains of a lack of spontaneity in his hypnotic work. Barber eschews metaphors for the most part and uses fairly concrete, though always permissive, suggestions. He interacts constantly with the subject as they explore in fantasy the layout of Dr. B.'s European boyhood home. With this disarmingly simple technique Barber subtly encourages Dr. B. to spontaneously express his fear of a distant and perfectionistic father and anger toward an attention stealing older brother.

Rossi delivers a brief lecture on the use of hypnosis in a Rogerian manner to facilitate "creative moments" in hypnotherapy. He then works with the dream narratives of four women, using short, ingenious techniques to interrupt the subjects' conscious routines and allow something new to emerge from "intense inner work" (p. 85). To this reviewer, Rossi's methods seem a useful counterbalance to those of us who sometimes become preoccupied with our patients' problems and limitations.

In Lankton's demonstration, he works with a self-critical woman who was the victim of childhood violence, and develops a lovely metaphor in which he encourages her, among other things, to use his stories of parenting his daughter

to "pretend" to have a feeling of safety and security. An extended demonstration by Lankton of a similar technique is presented in volume 9 of these *Monographs*. O'Hanlon and Zeig mine a similar vein in constructing stories to help subjects complaining respectively of sleep disturbance and preoccupation with fears of nuclear holocaust.

The commentaries often give valuable insight into how interventions were planned. Readers will doubtless have their own favorites, but will, I trust, appreciate all these teachers for informing the rest of us by working in such a public way.

— Reviewed by:
Raymond F. Finn, Ph.D.
Ft. Worth, TX

Kristina *continued*

Continuing Medical Education Committee as Chairman.

Although she has not been highly visible, Kristina has given liberally of her time, knowledge, energy and resources to support the Foundation's professional progress. Much of the work of directing an organization, such as the Foundation, consists of an enormous amount of "behind the scenes" labor. Kristina has excelled in both quality and quantity of these contributions. A driving force in the ongoing refinement of Foundation activities, Kristina's work has included the professional advancement of psychotherapeutic techniques of Milton H. Erickson, M.D., as well as helping develop the Evolution of Psychotherapy Conferences.

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Review by Jeffrey K. Zeig, Ph.D.,
Director of the
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B O O K R E V I E W

Ericksonian Monographs Number 7 The Broader Implications of Ericksonian Therapy

Edited by Stephen R. Lankton
Brunner/Mazel Publishers, New York
1990 (85 pages)

The majority of chapters in this volume of the Milton Erickson Foundation's *Monograph* series present a lively debate regarding the theoretical implications of Milton Erickson's work. Richard Fisch, director of the Mental Research Institute's Brief Therapy Center throws down the gauntlet in an initial position paper by asserting that Erickson's major contributions were the "depathologizing" (p. 2) of human problems, seeing them instead as normal, if misdirected, strivings of individuals try-

ing to get through life as best they can. He also praises Erickson's focus on the subtleties of verbal communication, but labels it as "really" interpersonal in nature, and not aimed at the individual patient. Erickson's many developments of hypnotic technique and his concept of a "benign unconscious" are seen by Fisch as less important if not downright misleading, and he declares Erickson to be a closet systems theorist.

If Fisch wanted to provoke spirited discussion he has succeeded admirably; the seven commentaries by such notables as Stephen Gilligan, Robert Pearson, and Ernest Rossi are sharp and largely critical. Most reassert Erickson's primarily monadic view of the therapy process and challenge Fisch's dismissal of the importance of hypnosis and of the unconscious. William Mathews and Rossi independently raise the point that

Erickson's unwillingness to theorize about his techniques, and his tendency to talk to those with a theoretical interest in his work in their frame of reference, have created a void, allowing his successors to find what they want in his work. Bradford Keeney and Douglas Flemons find this vagueness desirable, allowing "our explanations of therapy to mesh with the conceptual net of our audiences" (p. 14). While I will not pretend to bring the debate to any resolution, this reviewer is reminded of the late psychologist Kurt Lewin's comment that there is nothing as practical as a good theory. We will never know for certain what ideas Erickson used to guide his actions, but we could do worse than follow the old clinical research model of replicating therapeutic results, and inventing explanations with testable consequences of why Ericksonian tech-

niques work when they do.

Three remaining articles report on a linguistic analysis by Otani of Erickson's famous interspersal induction, a single case study by Nugent of a hypnotic intervention with pre- and post-treatment ratings and psychometric test scores, and Gall's account of his use of naturally occurring infant reflexes to minimize stress in pediatric physical examinations. Collectively, they play second fiddle to the debate but yield their own pleasures. In general, the Foundation has succeeded in this volume at stimulating Erickson's students to build on his work.

— Reviewed by:
Raymond F. Finn, Ph.D.
Ft. Worth, TX

B O O K R E V I E W

Ericksonian Monographs Number 8 Views on Ericksonian Brief Therapy, Process and Action

Edited by Stephen R. Lankton,
Stephen G. Gilligan, and Jeffrey K. Zeig
Brunner/Mazel Publishers, New York
1991 (116 pages)

An international flavor permeates this volume of the Milton Erickson Foundation's *Monographs*, which presents eight papers from the Fourth International Congress on Ericksonian Approaches to Hypnosis and Psychotherapy. Seven of the ten authors live and work outside the United States. The emphasis is on brief intervention techniques with a variety of populations, such as chronic schizophrenics, rebellious Japanese adolescents, and Italian families in crisis. In most cases the therapists do not aim for a complete cure; the schizophrenic patients are still schizophrenic, adolescents in residential treatment still act out and have conflicts over independence. But the skillful use of paradox (e.g., inviting patients to practice "problem" behavior), siding with resistance, and other Ericksonian techniques help these individuals to move closer to normal functioning.

My personal favorite is Keiichi Miyata's paper on helping adolescent Japanese males work through conflicts over assuming their role in the family. He

presents two cases, a teenage boy who spits at family members, and another who wets the bed. Outright rebellious behavior, at which American adolescents excel, apparently is almost unknown in Japan, where a syndrome of depression, withdrawal from responsibilities, and regressive behavior is the norm. Miyata's use of techniques such as symptom prescription, substitution of humorous for more defiant behavior toward parents, and encouraging age-appropriate behavior leads to a typically Japanese resolution, in which both children are able to assume their roles of the older brother in the family. I also enjoyed Michael Vancura's description of interventions with chronic schizophrenic patients in crisis, and those of Janet Edgette with adolescent inpatients. Papers by Jean Godin and Peter Brown are more theoretical. Godin examines historical "myths" of hypnosis and their influence on both hypnotist and subject. Brown attempts to link current neurophysiological research with the evocative power of poetry, and especially Erickson's studied use of phrasing, timing, and imagery in the way he talked to patients.

For dessert we are offered a remembrance of Milton Erickson's hypnotic work with family members by B.A. Erickson and R.E. Klein. Both health professionals themselves, they document Erickson's move to less directive methods of working, as seen through the

eyes of his favorite demonstration subjects, his own family.

This volume maintains the high quality of earlier *Monographs* in this series and demonstrates the fertility of

Erickson's ideas when transplanted to other cultures.

— Reviewed by:
Raymond F. Finn, Ph.D.
Ft. Worth, TX

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**Ericksonian Monographs
Number 9
The Essence of a
Single-Session Success**

Edited by Stephen R. Lankton and
Kristina K. Erickson
Brunner/Mazel Publishers, New York
1994 (164 pages)

This is the latest in a series of periodic *Monographs* published under the auspices of the Milton Erickson Foundation. The format is somewhere between an edited collection on a single theme and the typically unrelated articles in a journal, with about half the papers in this issue grouped around a single topic.

After an introduction by the editors, the first paper by Jay Haley presents the transcript of a filmed demonstration of Milton Erickson inducing hypnosis in five volunteer subjects. Haley showed the film to Erickson eight years later, who commented on his procedures and answered Haley's questions. Haley also has added comments on the commentary, for a thoroughly multilevel experience. I will not add any more layers to this confection, except to note that Erickson's use of implication is notable in his approach to each subject; accepting the seemingly innocuous premises he poses often leads them to a sudden and unexpected state of suggestibility. In one telling phrase he says to Haley, "The carne (*Ed. note: carnival worker*) works that way. A magician works that way. And we all learn it" (p.7). There also is an unintentionally humorous illustration of the awe Erickson could inspire, even in someone of Haley's stature. Haley asks Erickson why he substituted words during some of the inductions, apparently assuming this to be some well-thought-out and subtle maneuver. In truth, Erickson was sick that day and his speech was slurred as a result, although he later used the same word deliberately, capitalizing on his mistake. These brief comments only hint at what can be learned from this paper; the student of Erickson's methods will find it well worth reading and rereading.

The centerpiece of this issue is the transcript of a single therapy session conducted by Stephen R. Lankton with a 37-year-old woman suffering with anxiety and despair over her life. After some initial conversation setting the stage for his main intervention, Lankton offers the patient a lovely, entrancing

image in which she is able to simultaneously experience herself as a nurturing parent to a son she long ago lost custody of, and as the recipient herself of this nurturing, to counteract her rather deprived childhood. Lankton also weaves in an image of the patient's mother taking pride in the person the patient has become. Nine different authors offer commentary on the session, including such Ericksonian luminaries as Richard Fisch, Robert Pearson, and Betty Alice Erickson. I will not repeat the story of the blind man and the elephant (partly because Pearson beat me to it in his commentary). Most of the comments identify Lankton's initial development of rapport, normalizing the patient's experiences and half serious desire to escape through a nervous breakdown, and the reparenting that becomes possible for this woman through Lankton's fusing of the images of a nurturing mother and receptive child. Naturally there are some differences between the authors in what they believe was crucial for the patient, and Robert Schwarz sounds a cautionary note that these interpretations are hypotheses to be tested. I think Lankton is to be congratulated for allowing this kind of scrutiny of his work. Thoughtful readers will find themselves generating their own insights by seeing his work examined from so many informed perspectives.

Two other papers by Akira Otani and Jeffrey Feldman, respectively, attempt to explain and systematize Erickson's methods by turning to theories about the person's internal representations of experience. Otani briefly reviews literature from cognitive psychology on context, which he defines as "an internal influence that mediates information processing without itself being consciously recognized by the individual" (p. 38). He proposes a classification of Ericksonian hypnotic techniques based on whether they (1) form, (2) utilize, (3) fuse, (4) violate, (5) destroy, or (6) alter the person's contexts for explaining his "problem." For example, Erickson's use of shock and surprise is explained as a way to break up maladaptive contexts.

Feldman offers a classification of what he refers to as cognitive schemas, which "guide our perception by means of selection and interpretation of information" (p. 58). He suggests that Ericksonian and cognitive behavioral methods both operate on patients' schemas, but with Ericksonian methods directed more at unconscious, deep ones

about the self, and behavioral methods more at the conscious mind. Feldman's and Otani's papers dovetail nicely, offering in combination a classification of patients' schemas and of techniques for affecting them.

Janet Sasson Edgette's paper resonates with the theme of this monograph by presenting two cases in which single session hypnotic interventions were used to overcome one patient's fear of entering private practice, and another's compulsive eating in the workplace. Her work demonstrates that psychodynamic concepts can be used to derive brief, symptom-oriented techniques by rear-

ranging the relationship between internal representations and behavior.

This monograph pulls together seemingly disparate papers with a deeper focus of understanding brief therapy from a variety of viewpoints. It avoids admirably the ossification that often occurs in schools of psychotherapy, where the master's ideas become frozen and new evidence is as welcome as a plague. I think Milton Erickson would be pleased with the way this volume both honors and extends his thinking.

— Reviewed by:
Raymond F. Finn, Ph.D.
Ft. Worth, TX

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Impasse: Resistance and Addiction Treatment, Combining Brief Strategic and Twelve Step Approaches

by Ray McGarty, M.S.

Addiction Therapeutics Press (1993), Durham, NH, 110 pages, 1993, \$10.00

The deceptive thinness of *Impasse* disguises a well-integrated synopsis of McGarty's approach to considering and treating resistance in the addicted/chemically dependent client.

After an initial adjustment to the somewhat awkward annotated style, it is easy to develop an appreciation for the breadth of McGarty's source material. He uses an equally broad framework for constructing therapeutic interventions within the book. His definitions of terms are refreshingly straightforward. They include biopsychosocial considerations as well as systemic and learned behaviors.

At first, his framing of "first order changes" and the phases of additions, using the work of several clinicians was frustrating. It seemed to recap rigid and behavioral responses to the symptoms of an addicted individual by their family members and the therapists rather

than providing new approaches.

McGarty followed this with the contrast of "second order change" or, unconscious change work in the addicted individual, and demonstrated the importance of understanding a separation between the conscious and the unconscious mind. Relying on Erickson's clarity in separating the conscious mind's need to habituate from the unconscious mind's need to generate, McGarty identifies the types of change that lead to long term recovery.

The book is a series of short chapters, each of which can stand independently and each of which follows the author's thread of treating resistance as a central problem in addictions. Each chapter includes nuggets of useful thought and clinical examples.

The book concludes with chapters on the use of paradoxical interventions with defiant and compliant clients and, my personal favorite, "Negative Reforming." This notion is demonstrated by the Preamble read at every AA meeting.

I found this book to be easy and rapid reading. But McGarty has produced a good resource, one that can be picked up and read again and again.

— Reviewed by:

Patricia Langan Greer, LCDC
Dallas, TX

Using Metaphors in Psychotherapy

by Philip Barker

New York: Brunner/Mazel, 1985, 221 pages

I would recommend *Using Metaphors in Psychotherapy* to anyone who wishes to be introduced to metaphor and its broad possibilities in therapy. Using straightforward language, and relevant examples, Barker describes the many variations of metaphor. Stories, anecdotes, analogies, tasks, objects, and art are presented as metaphorical tools. The purpose of metaphorical communication, as stated by Barker, is to circumvent conscious resistances by remaining indirect, thus reaching the affective component of the personality in a non-threatening way. Barker makes appropriate reference to Milton Erickson as a masterful pioneer in the use of therapeutic metaphor.

After elaborating on the utility of metaphor, Barker proposes a model for establishing treatment goals, followed by a description of the many different problematic contexts in which metaphor can be applied. Some 39 metaphorical tales fill the book's 11 chapters. Reading these tales alone is an experiential exercise,

not only serving as an illustration of concepts, but also as a source of personal motivation. Many notable works on metaphor, such as those by Lankton and Rosen, are referenced along with 72 other pieces of literature. The book's content is somewhat eclectic; portions of hypnotherapy, NLP, strategic, and systemic intervention are related to the use of metaphor. Singularly, each of these approaches remain indebted to the inspiring work of Milton Erickson.

Using Metaphors in Psychotherapy demonstrates both the simplicity and potential complexity involved in metaphorical communication. The book's author recommends primarily a conservative approach with metaphorical interventions. For instance, it is suggested that metaphorical stories be used at the end of therapy, as through the intervention was simply casual conversation. Barker warns that metaphorical communications is not to be mistaken as an independent means of conducting therapy, but instead, metaphor should be considered an important adjunct to other, direct or indirect forms of intervention.

— Reviewed by:

Dan Short, M.S.
Dallas, TX

H I S T O R I C A L N O T E S

The Contributions of James Braid

by Cynthia Chtay
Dallas, TX

James Braid, a 19th century physician, is credited with ushering in the "Age of Hypnosis." This turning point came in the mid-19th century and was marked by both a change in techniques and the emergence of a new theoretical framework. Prior to Braid's work, the state now referred to as hypnosis, was called "magnetism." It generally was believed that the process of "magnetism" involved directing the flow of forces and fluids within the body. The altered state was achieved through a series of stroking motions over the patient called "passes." Braid himself initially used these techniques.

Upon observing a stage exhibition, Braid questioned whether or not the altered state of the subject had been achieved through ocular fatigue instead

of "magnetism." In early investigations, Braid asked his subjects to look at a cork secured to their foreheads. With this, he expected to produce strain on the subject's eyes and eyelids. Braid stated that this stimulation of the retina acted on the subject's nervous systems to induce "nervous sleep." Patient difficulty in maintaining this eye position required Braid to modify this method, and so he held an object above the patient's head for eye fixation. He found both techniques successful in achieving altered states of consciousness in his subjects.

Braid approached the local medical society to read a paper on his discoveries. In 1843, he published a book entitled *Rationale of Nervous Sleep*, (London: John Churchill Publishers) in which he proposed calling the phenomena "hypnotic" rather than "mesmeric" (Baker, 1990).

Braid identified that the induced state occurred internally without the involvement of external "magnetic" influences, as had been the dominant belief in the

years prior to his work. Braid further believed that the induced state occurred in the absence of any interactional factors which might exist between the two persons in contact.

Braid continued to explore these ideas, and developed a technique of offering suggestions of eye-closure and sleep while the subject gazed intently into a bright light. This induction technique was later refined to involve use of a shiny object which he moved in front of the subject's faces. The subject was instructed to follow with his/her eyes while keeping the face in a fixed position. This induction technique came to be known as "Braidism," and similar techniques are still in use today by some practitioners.

Braid continued to investigate hypnosis and refine his ideas throughout his life. In his later years, Braid felt that the term he initiated, "hypnosis," was a misnomer, and unsuccessfully tried to substitute the term "monoideism" (one idea) which reflects the focused atten-

tion that is achieved in trance.

Braid's exploration of the use of suggestion in induction techniques constituted an important and definitive advancement in the study of hypnosis. His view that interactional elements were *not* central stimulated study and research of these elements that continue today. James Braid's work has stood as a monumental contribution to modern hypnosis and psychotherapy.

The following sources were consulted in writing this article:

- Baker, R. (1990) *They Call It Hypnosis*. New York: Prometheus Books.
Chertok, L. & De Saussure, R. (1979) *The Therapeutic Revolution from Mesmer to Freud*. New York: Brunner/Mazel.
Tinterow, M. (1970) *Foundations of Hypnosis*. New York: Thomas Books.

VIDEOTAPE REVIEW

"The Artistry of Milton H. Erickson, M.D."

Parts One and Two (1975)

Produced by Herbert S. Lustig, M.D.
(215) 642-5755
(105 minutes)

When Herbert S. Lustig, M.D., asked to work with Milton H. Erickson, M.D., Erickson agreed, and for reasons that elude even Lustig, agreed to filming. The personal videotaping done by Lustig marked a reversal of Erickson's position of refusal for all videotaping for the decade preceding this request. It led to permission for many other students to videotape, and also led to Lustig's professional production, "The Artistry of Milton H. Erickson, M.D."

Dr. Lustig, currently in full-time private practice and Clinical Professor of Psychiatry at Temple University School of Medicine, had graduated from Albert Einstein College of Medicine in 1968, and completed a pediatric internship there the next year. Following an adult psychiatry residency at The Johns Hopkins Hospital, he trained at the famous Philadelphia Child Guidance Clinic under Salvador Minuchin, M.D., from 1971-73. The Clinic was seminal in those days: Jay Haley was in residence, Braulio Montalvo taught family therapy, Kay F. Thompson, D.D.S., visited to teach, and Alexander Yanovski, M.D., consummately demonstrated hypnotherapy. Each of these colleagues described the richness of Erickson's work but from individual perspectives. Lustig decided to see for himself. He met with Erickson for his first study session in the Fall of 1973.

An intimate relationship developed: first, as teacher and student, then as mentor and colleague, and then as friends. Their friendship broke the bounds of professional interests and spilled deeply and richly into their personal and family lives. Erickson was loyal and loving with all those around him, and Lustig never betrayed the trust Erickson extended to him.

Unwavering in his resolve to share and capture Erickson, the man himself, on film for future generations, Lustig proposed to Erickson that he treat two patients on camera. Erickson immediately said, "All right." At great cost of time and money, Lustig arranged to rent an entire television station in Phoenix and hired Dick Pyle, Philadelphia's finest professional director of live edited interviews to film the event. The rest is history.

The color videotape (which has been permanently transferred and stored on color film) was made on April 28, 1975. It is in two parts. Each part begins with Lustig setting the scene in an opening narrative that succinctly states Erickson's approach to therapy and skill in rapidly establishing a therapeutic rapport, his views on the conscious and unconscious minds, his use of direct and indirect suggestion, and his understanding of how people communicate verbally, nonverbally, and with body movements.

Lustig asks us to first look at the tape without stopping or thinking — let it wash over us to experience Erickson directly from beginning to end. He then suggests we will want to look at it with frequent interruptions for identification and study of Erickson's contributions to hypnotic inductions: "direct and indirect inductions, direct and indirect suggestions, deliberate alterations in the locus and tonality of his voice and the tempo of his speech, the precise choice of words, the use of body language, and the use of nuance, metaphor, and symbolism." For the interested student of Erickson, unlimited time may not yet exhaust the learning available for serious study.

The first 53 minutes records Erickson's work with the first of two patients, Monde and Nick. He just recently has met them and they both are on camera at the same time. His hypnotic techniques are discernible, but only as brush strokes in a master painting are seen to contribute to the whole of the painting itself. These techniques, seamless as they are part of the whole, include direct and indirect inductions and suggestions, arm levitation and catalepsy, dissociation, age regression, positive and negative hallucinations, revivification, positive ego strengthening suggestions, and posthypnotic suggestions.

Underlying Erickson's impact on "Monde," Lustig points out that "Erickson strongly emphasizes the value of the patient's previous experiences. He manifests a compelling expectancy about the patient's ability to retrieve old memories and responses, and to use this experiential learning *positively* (author's emphasis) in the present and in the future." I agree with Lustig that Erickson's work is both "subtle and complex," but it strikes the viewer that it is also simple and effective, which is the paradox of all great art.

The second 53 minutes records Erickson's work with Nick, while Monde

also is present and participating to a lesser degree. In this segment Erickson demonstrates what one does when trance is induced — that is when techniques per se are less emphasized. Viewers watching this portion will wonder how Erickson can think and plan all the elements of his lengthy discussion with Nick, the latter remaining quietly in trance and listening deeply. The viewer at first doesn't listen critically, as is common when in Erickson's presence either directly or, in this case, on tape.

Erickson's purple casual suit, accented by a bola tie, allows my mind to wander. I see this wise man of great inner strength and dignity sitting in his wheel chair (later stating he "knows from my own experience, it is wonderful to be able to be in a wheel chair and I meet nice people"). His hair is white, his eyes so clear, and his voice. . . .

The studio lighting is warm and the colors vibrant, set against the deep blue-black background. It is like a trance itself wherein nothing is attended to but the immediate process at hand. And as I listen and watch, I hear Erickson tell Nick, who is now in a deep trance, about living fully. He talks about being liked, using fear constructively, learning that his unconscious mind knows a great deal more about his strengths than his conscious mind does, about merit being earned — there is no such thing

as a free gift. He humorously tells about another patient in great pain whom he taught how to scare her pain away by imagining hungry tigers were looking at her and licking their chops. He reminded Nick and Monde that the knowledge of things learned in Arizona will never be forgotten because they are a part of "a greater learning." He says to Nick, "The unpleasantness and unhappiness of the past — leave them in the past, way back in the past and look forward to the good days coming, the new experiences, the new understandings." A timeless message for us all.

"The Artistry of Milton H. Erickson, M.D.," is among the most important primary sources that exist on Erickson and his work. Lustig, in solving his own dilemma in learning who Erickson really was, gave us this direct experience with him for all succeeding generations to enjoy and learn from. I am deeply grateful to Lustig and Erickson and their abiding friendship that created this work.

— Reviewed by
Peter B. Bloom, M.D.
President:
International Society of Hypnosis
Clinical Professor of Psychiatry
University of Pennsylvania
School of Medicine

VIDEOTAPE REVIEW

"La Creacion de una Realidad"

Instituto Milton H. Erickson
de la Ciudad de Mexico
FAX 011 (525) 536-4484

Editors' note: This 14-minute videotape was made by the Milton H. Erickson Institute of Mexico City. The video attests to the use of hypnosis as sole anesthesia for the removal of a gall bladder. The co-directors of the Institute, Teresa Robles, Ph.D., and Jorge Abia, M.D., participate respectively as the patient and as the hypnoterapist.

The brief video, which contains both the Spanish and English versions, presents a summary of the preparation and follow-up as well as actual operating room footage. A complete description of the protocol used, which included 15 hours of preparatory hypnosis, was previously published in the *French journal*, Phoenix Vol. 3, No. 10, February 1991. The surgery itself lasted 45 minutes (although only a few minutes are shown), and the patient was discharged two days

postoperatively.

Rather than submit this rare material for a standard review, we asked three outstanding professionals, each of whom has specialized expertise in this area, to view and comment on the film. This "review" contains some of their comments, which we felt would give the viewers a perspective on this unique resource.

Dabney Ewin, M.D., is a general surgeon who encourages the use of hypnosis as an adjunct to anesthesia. Alexander Levitan, M.D., an oncologist who has reported the application of hypnoanesthesia for surgery in numerous cases, and Victor Rausch, D.D.S., who himself underwent a gall bladder removal with self-hypnosis as the sole anesthesia. That case was published in the *American Journal of Clinical Hypnosis* 22:3 (1980).

Dr. Levitan: The tape mainly confirms that it is possible to perform ab-

continued on next page

“Cognitive Therapy of Panic Disorder”

by Christine Padesky, Ph.D.

The Milton H. Erickson
Brief Therapy Conference
1993 Video #F 280-V18

Cognitive Therapy of Panic Disorder features Christine Padesky, Ph.D., founder of the Center of Cognitive Therapy in Newport Beach, CA, demonstrating a specific, cognitively-oriented treatment for panic disorder. After briefly, but clearly, differentiating panic disorder from other anxiety disorders, Padesky elicits a complete picture of the biological, cognitive, emotional and behavioral components of her demonstration subject's “worst panic attack.”

A master of the active-directive approach, Padesky skillfully guides “Mary” in discovering how her particular symptoms relate to the “fish hook” model of panic disorder, which is conveniently projected on an overhead during the demonstration. In this “behavioral experiment,” Padesky leads the volunteer in “over-breathing” for a short time until all sensations experienced in the panic attack were elicited.

Some therapists may panic at the prospect of having a patient in a panic attack in their office during session. Obviously, the therapist should possess good clinical skills and a clear understanding of the physiological aspects of panic response attempting this treatment. Moreover, a therapist already should have completed a thorough patient assessment with medical history to rule out physiological conditions which might make over-breathing and/or hyperventilation dangerous.

The patient was guided in developing a more rational hypothesis about her symptoms instead of focusing on catastrophic misinterpretation of the sensations which intensified the symptoms.

This particular treatment was first developed by David Clark and Paul Salkovskis in the Department of Psychiatry at Oxford University (Clark, 1989). Results of the well-researched study suggest that 80 to 85 percent of the patients involved were successfully treated for their panic disorder in an average of 12 sessions. Moreover, approximately one-half of the patients improved after only five sessions.

In this era of managed care, conserva-

tion of patient resources is increasingly important. A treatment which alleviates patient suffering in a relatively brief time is of great interest.

The quality of this 52-minute videotape is excellent; both picture and sound are clear. It is Padesky's remarkable communication skills, however, which make this a valuable teaching tool for experienced therapists.

Reference: Clark, D. (1989) “Anxiety States: Panic and Generalized Anxiety” in Hawton, K., Salkovskis, P., Kirk J. and Clark, D. *Cognitive Behavior Therapy for Psychiatric Problems: A Practical Guide*. Oxford University Press, New York.

— Reviewed by:
Diana Awad, M.A., L.P.C.
Dallas, TX

Editors' Note: Sadly, Diana Awad died unexpectedly shortly after submitting this review. She was an active participant in many areas of service in the professional community. We share with her family, her friends, her patients and her colleagues in this tragic loss.

Interview *continued*

the outside world. The general reality orientation fades into the background and the inner subjective reality comes into focus. I strongly feel that hypnosis is an altered state of consciousness in which there is much more imagery, much more suggestibility than in the waking state. There is somewhat more ego receptivity, more contact with the unconscious and more dissociation of the observing ego from the experiencing ego.

I also feel that there are people who have more of a talent to go into a trance than others. The talent for going into trance is on a bimodal distribution curve, there are 2% on the tail that are practically non-hypnotizable, 90% are in a bell-shaped normal distribution, and the remaining 8% peak as highly hypnotizable.

Artists are usually very good hypnotic subjects, but accountants are usually not. People who are rigid are not good subjects. People who are more artistic are usually better. People who enjoy fantasy and fairy tales are good subjects. Children are not so reality conscious. One time, I went to my pantry to get something, when my daughter was quite young and she suddenly yelled, “Mommy, how could you do that!” When I asked, “Do what?”, she answered, “You stepped on Flame's foot

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La Creacion *continued*

dominal surgery employing hypnosis as the sole anesthetic with little need for postoperative medication. Unfortunately, the tape does not cover the specific hypnotic techniques or suggestions employed to achieve this end, thus the tape's value as a teaching aid is limited to validating that surgery under hypnoanesthesia can be successfully performed.

Dr. Rausch: I applaud and respect Drs. Robles and Abia for utilizing hypnosis for the surgery and making the videotape. It is verification that hypnosis can be useful in surgery and as such is a valuable contribution.

I cannot wholeheartedly endorse the marketing of this tape as a teaching tool since I disagree with most of the conclusions presented on the videotape. I feel that the hypnotic approaches were too lengthy and complicated. Much of the protocol was unclear, and the video was lacking in specific information.

Dr. Ewin: Several things about this tape appeal to me, particularly: (1) the review of the previous surgeries during the preparation for surgery, (2) the

“disconnecting of the left hemisphere” and (3) using the stimuli of the operating room to deepen the trance.

Reviewing previous surgeries of the patient may turn up negative mind sets or identification with others who have had disasters during surgery. The logic of the left hemisphere would tell you that surgery is quite painful, and turning off the left hemisphere is an easy way to think of this kind of trance.

Apparently it is much more difficult to attain a surgical plane of hypnoanesthesia for cases that are elective and where other anesthetics could equally well be used. Since it is impossible to predict all the events that may occur in a surgery, no matter how routine, I commend the instructions in this case to allow for unexpected possibilities.

I am bemused by the patient's awareness of the moment when the bile duct was ligated. I wonder how that information was communicated to the patient. At that depth of trance, is the mind so in touch with the rest of the body that it is a somatic communication? Was there some non-verbal communication from the surgeon?

The “scuba” metaphor is obviously

good for *this* patient, but since many people are afraid of water or have had near drowning episodes, it's not a good metaphor for general use. Watching the tape, the patient is clearly in a deep somnambulistic eyes-open trance.

The tape also points out the need for deepening at the time of skin closure in order to get better muscle relaxation. It is reminiscent of the paper by Alice Magaw (1906) who was the anesthesiologist for the Mayo Brothers. At a time when the death rate from anesthesia was one in 400 cases, she reported more than 14,000 consecutive anesthetics without a death. Her father was an expert hypnotist. Her report is interesting, as she uses ether for the skin incision, then shuts off ether and uses “suggestion” to comfort the patient through the procedure, and then administers ether again for relaxation and closure of the wound. There is a strong public inclination to seek surgery where the fatality rate is low. Her report contributed immeasurably to the success of the Mayo Clinic.

Reference: Magaw, A.: A review of over fourteen thousand surgical anesthesia. *Sug. Gyn. Obs.* 3:795, 1906.

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Interview *continued*

and broke it!" Flame, as it turned out, was a fantasy horse that she had stabled in the pantry, and Flame was as real to her as the pantry was to me. I had to bandage Flame's foot for the next four weeks. Imagination is very real to a child. We do need to educate our children to be reality conscious, but parents who tell their children from the age of two, or so on, that there is no Santa Claus, will produce a child with less imagination and people who are much less able to go into trance.

I don't have much talent to go into trance. Milton Erickson hypnotized me once at a convention. He was talking about a beautiful rug, an Indian rug that was hanging on the wall. It was a blank wall. I could see that rug vividly. He had the whole room hypnotized. It was so beautiful that I can still remember that experience which occurred maybe 30 years ago. I was truly entranced, enthralled. Even now, if I try, I see the imagery. It was the deepest trance experience that I've ever had. I don't know exactly how he did it, but it was beautiful.

REK: *Is the true nature of hypnosis still elusive, or has research over the past few decades brought us closer to an understanding of it?*

EF: We are closer to a unified theory now, but still don't have one. Hilgard's work, which was based on Janet's earlier work in the 19th century, has brought us closer to understanding the essence of hypnosis. There are four basic theories now: state, trait, dissociation, and social interaction. Daniel Brown and I have discussed them at length in our book *Hypnotherapy and Hypnoanalysis* (Earlbaum, 1986).

REK: *Is there consensus among researchers about empirical variables that measure hypnotizability?*

EF: Yes, individual hypnotizability can be measured. There are some scales that are better than others. The Stanford Hypnotic Susceptibility Scales A, B, & C by Weitzenhoffer and Hilgard are all very good. There are some other scales that are good for individuals who are highly hypnotizable.

REK: *In your book Hypnosis: Developments in Research and New Perspectives 2nd ed. coauthored by Ronald Shor, 1979, you discussed some of the divergences of the phenomenological versus behavioral aspects of hypnosis. Since this book was written, has there been more agreement between these two perspectives?*

EF: There are still differences. They have to do with the enormous influence

of the behaviorists in the United States from about 1926 until about 10 years ago. It was stated, in a somewhat magnified form, "What cannot be observed by an outside objective observer isn't psychology and it 'doesn't exist.'" The reports of inner experiences are not objective, and therefore behaviorists do not believe they exist. When someone describes what their inner experiences are, that doesn't count for behaviorists. It has to be observable by an outside observer.

Ronald Shor wrote a chapter in the 1979 edition of our book which states that one should ask subjects what they are feeling inside. That is being done more and more now. We are at the end of behaviorism now. More and more research has turned towards phenomenological aspects now.

REK: *In what way would you like to see a bridging of the differences between these two groups?*

EF: No bridging of the differences between behaviorism and phenomenology is possible. These are two diametrically opposed ways of looking at psychological data. I am a phenomenologist and I would like to see the behaviorists vanish into the woods. If a subject describes what is going on inside, movement is occurring. That is of more importance to me than whether or not I can see an arm moving.

REK: *Your work which was presented in Self Hypnosis: The Chicago Paradigm (Fromm, E. & Kahn, S., The Guilford Press, 1990) seems to bridge qualitative and quantitative research. Is that work representative of a bridging of the phenomenological and behavioral views?*

EF: No, but it shows that these two approaches can supplement each other.

REK: *I was very impressed with the cooperative work that was done by so many individuals in that study. Your use of graduate students and volunteers allowed for the significant piece of research to be done at a minimum of costs. Was this intended as a model for future research now that funding has become scarcer?*

EF: That was not the original intention. We had to do it this way because I didn't get a grant. But I wasn't going to give up this research. It was very important for me. Grants for hypnosis research were really harder to get 20 or 30 years ago than they are now. Fortunately, I had a group of devoted students around me. When they saw how interesting the research would be and how passionately I was interested in doing it, they agreed to work for me without pay. I hope that other researchers may take this

as an example and stimulate their students to become idealists rather than materialists.

REK: *In your book Hypnotherapy and Hypnoanalysis coauthored with Daniel Brown, (Earlbaum Publishers, 1986) there is a separation of Erickson's approaches and the permissive approach. Many of the techniques used by Erickson are described in the permissive section. In your view, did Erickson's work influence the development of the permissive approach?*

EK: Yes of course. He invented some approaches, but others invented similar approaches at the same time. There was a book that came out in 1949, *Hypnotherapy of War Neurosis*, by John G. Watkins (New York: Ronald Press). It is long out of print, but I have a copy of it. He used and advocated permissive hypnosis in that book already.

Another book was written by Gill and Brenman, the originators of hypnoanalysis, was published in 1959 (Gill, M. M. & Brenman, M. *Hypnosis and Related States: Psychoanalytic Studies in Regression*, New York: International Universities Press). It also has references to the permissive approaches. I have carried the study of hypnoanalysis further than they had.

The development of the permissive approach had to do with the turning away from the authoritarianism of the time. It was like democracy and not keeping people under your thumb. Now I may have a stronger view, being a refugee and because I hate the Nazis and authoritarianism, but the tenor of the times is the reason why everything changes. Hypnosis in the 1930s was different than it is today because we fought the Nazis and authoritarianism in the 1940s, I feel.

If Erickson invented the permissive approach, and the others took after him, then I certainly want him to get the credit, but I think that the permissive methods definitely preceded him. The techniques evolved from a "zeitgeist," the kind of environment present. There were a lot of people about that same time who were beginning to use the permissive approach. Oftentimes, such things happen by themselves in a way.

Let me give you another example. A Dutch painter of the 17th century, Hieronymus Bosch, did realistic painting that used symbols. His paintings really require psychoanalytic interpretation. They are clearly psychoanalytic, but no one had written about this. I wrote an article, and had sent it in to a journal, but I had not yet received an answer. And suddenly, I opened another journal and someone had written a psycho-

analytic interpretation of Hieronymus Bosch! None had been written for two centuries. Then, two people knowing nothing about each other, in different locations, right at the very same time decide to write about the same thing. Both articles were published because they were somewhat different. Somehow the time was right for this to happen.

The permissive approach was invented by many people at the same time too. Erickson invented a confusion technique that I use. This is a technique where you use suggestions on the way into trance going down deep, deep, deep, and then you use those same suggestions on the way up out of the trance and quickly alternate the two. It takes real virtuosity to use Ericksonian confusion techniques. I cannot use any others because I get confused before the patient gets confused.

REK: *The Evolution of Psychotherapy Conferences have been fertile meeting grounds for eminent psychotherapists of diverse backgrounds. Do you believe that this exchange of information will lead developing therapists away from specific schools of thought to a more eclectic or complementary approach? Will this benefit psychotherapy?*

EF: I certainly view those conferences as positive things. These conferences are excellent. There are two kinds of eclecticism. The first is superficial: it is one in which one is not committed to any approach, but takes from many different approaches without any firm direction, taking a little bit here, and a little bit there, and a little bit there. The other kind is one in which there is first a commitment to one approach and then one takes the best things from many other approaches and uses those things to expand one's own basic approach. These are both eclecticism.

Some of the people who attend these conferences don't have a solid background. If they come with basic knowledge, the conference can make them less orthodox and more open-minded. There are good things that come from other approaches. Too much commitment to one theory actually is not good. Many psychoanalysts are totally committed to psychoanalysis. I'm not. I am a psychoanalyst, but I will take other tools too into my tool chest. I will take parts of other theories and use them with concepts that are psychoanalytic, and also with concepts that play a great role in hypnosis, and also with concepts in comparative psychology. I wrote a paper two years ago in the journal, *Consciousness and Cognition* (1992, 1, 40-46) about free will having to do with dis-

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Interview *continued*

sociation, cognition, repression, and voluntarism. It's a psychoanalytic paper, but it's about the structure of consciousness and unconsciousness. A lot of the thoughts I expressed in this paper belong in the field of cognitive psychology.

I think it is extraordinary to have the opportunity to hear other theories and that kind of eclecticism is fine. But if you superficially take the crumbs, it reminds me of streusel cake. This is a cake, the top of which is covered with little balls that are made from sugar and butter. The top is very tasty, but if you just pick at the top, you have no base. You have to have a solid base and a solid commitment to a theory, and then add other things to it.

Does it lead developing therapists away from specific schools of thought? It starts them to think of the choices. There is not just one way to Rome. This allows them, on the basis of their solid knowledge, to select other things that they might add. Such a conference should commit people to read more in other areas. You can start to change your views; with a week's conference you can learn and begin to change. These conferences are excellent. Hopefully, the leaders in these fields also will become interested in learning more.

REK: *What current trends do you think will have the greatest importance on*

the future of hypnotherapy?

EF: At the moment there is a lot of interest in PTSD (post-traumatic stress disorder) and MPD (multiple-personality disorder). This is much more than a passing wave of interest. In this wave, there is debate over false memory issues. There are two camps over false memory issues, and that split is a very dangerous kind of thing. There are people who believe that most of the false memories are produced by the therapist and there are many others who say these things could *not* be produced by the therapist. As far as I am concerned, neither position is right. False memories *can* be produced by therapists *if* they suggest them. But only poorly trained and unscrupulous therapists would produce false memories. The false memory movement could kill hypnosis altogether, and then those patients who have really suffered trauma could not be helped anymore.

My personal view is that in psychoanalysis for 100 years it was all the Oedipus complex. Then we came to see that there may be incest too, and not all is just a fantasy. Then there comes a period in which suddenly incest seems to come out of the walls. The pendulum swings from one side to the other, and I think that it has swung too far. There are many people who have suffered sexual abuse. Some of the abuse could be false memories, yes. And it is very hard to decide which is false and which is

not. Just because it is a fashion does not mean that *we* are producing it. There are some people who, particularly with hypnosis, could produce it, but *responsible* people in hypnosis will *not* suggest it. Zeitgeist plays a role. Even if there is no hypnotherapist, abuse is in the newspaper. One can give self suggestions. With imagery, you can change certain things, and in a memory you can also change certain things. This, at the moment, is of the greatest importance, because it could kill hypnosis.

REK: *From your knowledge about professional organizations, what do you consider to be the most pressing priority for professional organizations interested in the advancement of the professional use of hypnosis?*

EF: In hypnosis you have to be so awfully careful that you don't suggest something. The most important thing is to get over this trouble with false memories. In psychology, we have false negatives and false positives. With a false positive, people think that something has happened, but it hasn't. With a false negative, people think that something has not happened, but it has.

The people to whom abuse has happened should be given the opportunity to get therapy. At this moment, this is the most pressing thing. In general, the most pressing priority for organizations who deal with hypnosis is the advancement of ethics and ethical standards.

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