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# NEWSLETTER

Vol. 19, No. 2

Summer 1999

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Also included are reviews  
and special articles

## Evolution of Psychotherapy: A Conference

The Milton H. Erickson Foundation announces the long-awaited *Evolution of Psychotherapy: A Conference* with the theme *Interaction/Inner Action, The Psychotherapeutic Bridge*. This landmark Conference will be held May 25-29, 2000, at the Anaheim Hilton & Towers and the Anaheim Convention Center, in Anaheim, Calif. The Conference is expected to attract some 7,000 mental health professionals from a variety of disciplines, throughout the world. Continuing education credits also will be available.

Faculty members presenting at the Conference include Aaron T. Beck, James F. T. Bugental, Albert Ellis, Eugene Gendlin, William Glasser, Mary Goulding, Jay Haley, James Hillman, Otto Kernberg, Arnold Lazarus, Alexander Lowen, Cloé Madanes, Judd Marmor, James Masterson, Donald Meichenbaum, Salvador Minuchin, Zerka Moreno,

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## INTERVIEW

### An Interview with Carol Lankton, M.S.W.

by Mimi Jalenak, MSW, BCSW, CCH

*Background: Carol Lankton is a marriage and family therapist in Gulf Breeze/Pensacola, Florida. For 20 years, she has been known in the Ericksonian tradition for her books and training. Carol's first book was published in 1983, The Answer Within, which was co-authored with Stephen Lankton. Lankton has trained professionals in continuing education/post-graduate programs around the world and at the Erickson Congresses. Lankton also is an Approved Consultant for the American Society of Clinical Hypnosis (ASCH). Lankton is a mother, teacher, therapist, and corporate consultant.*



Carol Lankton, M.S.W.

**MJ:** Tell me about the first time you met Milton Erickson.

**CL:** The first time I met him was on December 20, 1979. I felt as though I knew him because I had known him through his work so long before. I had

*continued on page 19*

## Seventh International Congress and Tribute to Jay Haley

The Milton H. Erickson Foundation, Inc., celebrates its 20th Anniversary in 1999 at *The Seventh International Congress on Ericksonian Approaches to Hypnosis and Psychotherapy*, with a Saturday all-day *Tribute to Jay Haley*. The Congress will be held Wednesday through Sunday, December 8-12, 1999, at the Hyatt Regency Phoenix Hotel at Civic Plaza, in Phoenix, Ariz. The new Conference format consists of three components: *The Seventh International Congress on Ericksonian Approaches to Hypnosis and Psychotherapy*, a Saturday all-day *Tribute to Jay Haley*, and a track of *Fundamental Training in Ericksonian Hypnosis*.

The first component, *The Seventh International Congress on*

*Ericksonian Approaches to Hypnosis & Psychotherapy*, includes Solicited Short Courses, Invited Workshops, and Keynote Addresses on Wednesday, Thursday and Sunday. In addition, there will be Interactive Events consisting of Panels, Dialogues, Conversation Hours, Demonstrations, and a Keynote Address, to be held on Friday for all registrants. Attendees in the *Fundamental Hypnosis Training* also will attend the Friday Interactive Events.

The second component will be *A Tribute to Jay Haley*, Saturday, December 11, 1999, for all registrants, including those attending the *Fundamental Training*. The tribute will consist of Invited Papers, Keynote Addresses, and Invited and

*continued on page 3*

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## EDITOR'S COMMENTS

If you have been following the Editor's Comments, you know the story of the missionary in the tree and of the man on the hill. These remind us of the power of self-fulfilling prophecy. The most obvious implication is the importance of creating positive expectations. But is it possible to be overly optimistic? Are unrealistic expectations sometimes dangerous?

These questions bring to mind the sad story of a retired postal worker. While driving his route, Jeff McKissack collected a large amount of discarded items. Pieces of metal and glass, machinery parts, and even an old Santa Claus suit were incorporated into his dream of hosting the greatest show on earth. It was to be known as "The Great Orange Show" and it would take place in an entertainment fortress containing three small amphitheatres, four observation decks, a maze of colorful passageways, and of course, an orange juice bar. McKissack began construction in 1959 on an empty lot in the center of an otherwise ordinary residential neighborhood. After 20 years of welding, laying brick and erecting massive poles (some flanked by large iron birds) McKissack was ready to open his show to the public. The day before the grand opening, McKissack told a reporter that he expected 100,000 visitors on the first day. By the year's end he expected everyone in America to have either visited or at least heard of "The Great Orange Show." Although several paying visitors did attend the opening, hardly anyone returned in the days to follow. Overcome with disappointment, McKissack refused to leave his house. A few months later he was found dead, due to unexplained causes. Ironically, the theme of "The Great Orange Show" was that oranges promote long life.

It is our hopes and dreams that allow us to escape the confines of immediate reality, thereby providing greater emotional stability, a stronger sense of direction, and an increased capacity for decision making. However, high hopes can lead to hard falls. There are many tragic stories of individuals who set themselves up for failure by pursuing feelings of confidence based on naiveté or unchecked grandiosity.

When predicting positive out-



Dan Short

comes, you should make certain that your statements will be correct. In the contents of this issue of the *Newsletter*, you will find several examples of how skillful problem solvers can raise a person's expectations without setting him or her up for failure. These can be summarized in three basic principles. (1) Place greater emphasis on "opportunity" than on "success." While the experience of success is notoriously elusive and short-lived, opportunity is always available as any exception to failure. This same idea is conveyed by Steven Gilligan who writes, "All experiences, no matter how bad, can be gifts of growth" (see *Therapeutic Frameworks*, p. 8 ). (2) Place as few constrictions on positive outcomes as possible. A good example is the Ericksonian method of suggesting that an anticipated change will occur at any moment, perhaps today, perhaps tomorrow, or in a couple of weeks or months or at some other unexpected time. If you can avoid constrictions of time, place, and manner, then you will have created a much larger space for meeting the needs of the client. In a wonderful case example, shared by Carol Lankton, all three of these constrictions are removed by means of an ambiguous assignment (see Carol Lankton, p. 1 ). (3) Avoid utopic ideas associated with terms such as "cure" or "symptom removal." What are the implications for curing someone who suffers from depression? Are you going to ensure that this person never again suffers a sad or depressing moment? An alternative approach is to help the client find a way to live a meaningful and produc-

tive life, thereby reducing the significance of the symptom (this goal is one of the basic tenets of Morita Therapy, see *Historical Times*, p. 12 ).

A health professional's prediction of positive outcomes can be powerful medicine (e.g., the well known placebo effect), however, like precious antibiotics, its distribution requires discernment. Predicting positive outcomes is not just a matter of picking the right fruit; how you slice it can be just as important.

**Editor:**  
Dan Short

*Note: For those interested in visiting the Orange Show, it remains open to the public, as a folk art attraction, on*

*Munger Street, Houston, Texas.*

### Corrections & Clarifications

**Vol. 19 No. 1:** The correct publication information for "Whither Family Therapy? A Jay Haley Version" is as follows: Triangle Press, P.O. Box 8094, La Jolla CA 92038. Telephone/fax: 619-454-6254. This tape may be ordered from Triangle Press. Please note advertisement on page 10.

**Vol. 19 No. 1, p. 14:** The book by Battino and South, *Ericksonian Approaches: A Comprehensive Manual*, is now available through Crown Publishing in the UK. This publisher can be accessed at [www.anglo-american.co.uk](http://www.anglo-american.co.uk).

### Conference *continued from page 1*

Erving Polster, Miriam Polster, Ernest Rossi, Thomas Szasz, Paul Watzlawick, Irving Yalom, and Jeffrey Zeig. The Conference also will feature selected State of the Art faculty, as well as notable keynote speakers.

The last *Evolution of Psychotherapy Conference* took place in December 1995, at the Las Vegas Hilton, in Las Vegas, Nev. The Conference was attended by nearly 7,000 mental health professionals representing more than 20 countries. The first *Evolution of Psychotherapy Conference* in 1985 was held in Phoenix, Ariz., and was attended by more than 7,000 professionals. It was hailed as a landmark conference in the history of psychotherapy. The 1990 Conference also was attended by more than 7,000 professionals and was held in Anaheim, Calif.

"We have received numerous calls, faxes, and E-mails requesting information on the Evolution 2000 Conference. Many people want to register as soon as possible to assure their space.

I encourage prospective attendees to contact us to be placed on the

special mailing list to receive the brochure. This special mailing list is growing, and those on this list will receive the brochure as soon as it is published," said Karen Haviley, registrar and marketing coordinator for The Milton H. Erickson Foundation, Inc.

"In addition," she said, "by placing your name on this list, you will receive promotional offers for reduced registration rates before the brochure is printed. This allows the opportunity to register at the lowest possible rates."

More information will follow in upcoming issues of the *Newsletter*. The brochure for the *Evolution of Psychotherapy* in 2000 will be distributed this summer. To be placed on the special mailing list to receive the brochure as soon as it becomes available, send your request to: The Milton H. Erickson Foundation, Inc., Evolution Brochure, 3606 N. 24th Street, Phoenix, AZ 85016-6500; fax, (602) 956-0519; E-mail, [mhreg@aol.com](mailto:mhreg@aol.com). Please be sure to indicate the *Evolution 2000 Conference Brochure* on all requests.

## The Milton H. Erickson Foundation NEWSLETTER

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Solicited Workshops, on the contributions of Jay Haley to the fields of hypnosis and psychotherapy. The Erickson Foundation also will hold a 20th Anniversary Banquet Saturday evening for all registrants and their guests. The Banquet will have dinner, dancing and a guest speaker honoring Jay Haley. Banquet tickets are available for purchase and reservations can be made on the Registration Form in the Congress brochure.

The third component includes a five-part *Fundamental Training in Ericksonian Hypnosis* on Wednesday (parts I & II), Thursday (parts III & IV) and Sunday (part V). Those registered for the *Fundamental Training* will participate in the Interactive Events on Friday, and the *Tribute to Jay Haley* on Saturday.

"The Erickson Foundation currently has more than 300 professionals and students registered for the Congress. With the brochure beginning circulation, and the first registration deadline set for June 23, we are expecting and preparing for an abundance of new registrations within the next few weeks," said Registrar Karen Haviley.

A *Handbook*, which will contain

chapters authored by meeting presenters, and a select number of experts not presenting, is being published by Zeig Tucker and Company and will be available at the Congress. All attendees pre-registering for at least three consecutive days will receive a complimentary *Handbook* upon arrival at the Congress.

The Foundation would like to encourage the Milton H. Erickson Institutes from around the world to make plans to attend the Congress, giving them the opportunity to meet with other Institutes that also provide educational trainings and therapeutic clinics. The Foundation plans to hold an Institutes' meeting to discuss future activities.

See page \_\_\_ for the advertisement listing all presenters for the Congress. To receive a brochure for this exciting event, send us your complete mailing address by mail, fax or E-mail to: The Milton H. Erickson Foundation, Inc., Attn. 20th Anniversary Celebration, 3606 N. 24th Street, Phoenix, AZ 85016-6500, U.S.A.; fax, (602) 956-0519; E-mail, mhreg@aol.com. Web Site: www.erickson-foundation.org. Information on hotel rates and discount travel automatically will be sent to all registrants.

## Festschrift to Honor Jay Haley

The Milton H. Erickson Foundation is accepting papers for a *Festschrift* to be published in honor of Jay Haley, who is being honored at the *Seventh International Congress on Ericksonian Approaches to Hypnosis and Psychotherapy* in December.

A special presentation of invited papers will be featured at the Congress, and others are now being solicited to appear in the *Festschrift*.

Haley will be the subject of a tribute set for Saturday, Dec. 11, 1999, as part of the International Congress. The day-long event will culminate with a banquet Saturday evening. Students and colleagues of Haley's will offer a variety of presentations during the day, with keynote addresses being offered by Salvador Minuchin, Lyman Wynne and Jay Haley. Richard Belson will serve as master of ceremonies at the banquet Saturday evening.

Papers for the *Festschrift* should be no more than 20 pages in length, double-spaced and written using APA style. Deadline for submission is Dec. 15, 1999. Please submit papers in triplicate and include two diskettes containing the paper.

For further information, call or write the Erickson Foundation, 3606 N. 24th St., Phoenix, AZ 85016-6500; telephone, (602) 956-6196, ext. 205; fax, (602) 956-0519.

Visit Our Website:  
[www.erickson-foundation.org](http://www.erickson-foundation.org)



# THE SEVENTH INTERNATIONAL CONGRESS on Ericksonian Approaches to Hypnosis and Psychotherapy DECEMBER 8 - 12, 1999

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featuring

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#### Featured Speaker

Jay Haley

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MILTON H. ERICKSON FOUNDATION

20th ANNIVERSARY CELEBRATION

# UPCOMING TRAINING

DATE	TITLE/LOCATION/LEADER	CONTACTS
1999		
7/8-9	Symposium on Ericksonian Hypnosis/Rio de Janeiro, Brazil/Jeffrey K. Zeig, Ph.D., Jairo Mancilha, Ph.D.	1
7/10-11	The Therapist Training (Psychaerobics)/Rio de Janeiro, Brazil/Zeig	1
7/19-23	Intensive Training in Ericksonian Approaches to Brief Hypnotic Psychotherapy — Fundamental/Phoenix, Ariz./Brent B. Geary, Ph.D.	2
7/26-30	Intensive Training in Ericksonian Approaches to Brief Hypnotic Psychotherapy — Intermediate/Phoenix, Ariz./Geary	2
8/27-29	Ericksonian Hypnosis — Part III/Guadalajara, Mexico/Zeig	3
8/26-31	Spiritual Dimensions of Hypnotherapy/Maui, Hawaii/Irv Katz, Ph.D., Eileen Cawley, LCSW, BCD	4
9/3-5	Intensive Training in Hypnotherapy Workshop Series — Part III/Puebla, Mexico/Zeig	5
9/9-10	Love, Marriage & Children/New York, NY/Cloé Madanes, Lic.Psychol., Peggy Papp, ACSW, Helen Fisher, Ph.D.	2
9/16-17	1) Treating Depression, 2) Working with Memory/Pittsburgh, PA/Michael D. Yapko, Ph.D.	6
9/25	Working Smarter, not Harder under Managed Care, Brief Therapy Intro./Research Triangle Area, NC/Dorothy Miller, CCSW	7
9/30-10/3	21st Annual Convention of the Deutsche Gesellschaft für Hypnose — Hypnosis and Depression/Bad Lippspringe, Germany/Invited Faculty	8
9/30-10/3	Hypnosis and Treating Depression/Bad-Lippspringe, Germany/Yapko	8
9/30-10/3	Advanced Ericksonian Hypnosis/Bad-Lippspringe, Germany/Zeig	8
10/8-10	Applying Hypnosis in Brief Therapy/Johannesburg, South Africa/Yapko	9
10/27-31	Hypnotherapy: An Ericksonian Approach To Problem Solving/Pensacola Beach, Fla./Lankton, Lankton	10
11/1-3	Hypnotherapy: An Ericksonian Approach To Problem Solving — More-Advanced Training/Pensacola Beach, Fla./Lankton, Lankton	10
11/13-14	Applying Hypnosis in Brief Therapy/Manchester, England/Yapko	11
11/16	Hypnosis and Treating Depression/Bournemouth, England/Yapko	12
11/26-28	Ericksonian Hypnosis — Part IV/Guadalajara, Mexico/Zeig	3
12/8-12	20th Anniversary of the Milton H. Erickson Foundation at the 7th International Congress on Ericksonian Approaches to Hypnosis and Psychotherapy/Phoenix, Ariz./Invited Faculty, *Special All-day Tribute to Jay Haley (12/11/99)	2

## Web Announcement

The Milton H. Erickson Institute of Avignon-Provence, France, has a new Web Site: //members.aol.com. Information regarding the *Second French-speaking Forum of Hypnosis and Brief Therapy* in 2000, can be found on their Web Site (//members.aol.com/confhypnos). For more information, please contact Patrick Bellet, M.D., President of L'Institut Milton H. Erickson D'Avignon-Provence, B.P. 82, (rue Ernest Renan), 84110 Vaison la Romaine, France; phone, 33.490-36-19-31; fax, 33.490-28-70-17.

## Contact Information

- Jairo Mancilha, Ph.D., phone, 21.551-1032; E-mail, pml@netgate.com.br; Web, www.netgate.com.br/pnl.
- The Milton H. Erickson Foundation, Inc., 3606 N. 24th Street, Phoenix, AZ 85016-6500; Toll-free tel, 1-877-212-6678; tel, (602) 956-6196; fax, (602) 956-0519; E-mail, office@erickson-foundation.org; Web, http://www.erickson-foundation.org.
- Juan Francisco Ramirez Martinez, M.S., Centro Meicano de Programacion Neurolinguistica, Juana de Arco 14, Vallarta Norte, 44690 Guadalajara, Jalisco, Mexico; tel, 52/3-616-8447; fax, 52/3-616-56-53; E-mail, cmpnl@jal1.telmex.net.mx.
- Irv Katz, Ph.D., tel/fax, (619) 481-6675; e-mail, iups@healthy.net.
- Psic. Vicente Martinez Valdes, Depto. de Psicologia, Benemerita Universidad Autonoma de Puebla, 3 Oriente 403, Centro Historico, CP 72000 Puebla, Pue. Mexico; fax, 52/22-42-61-43.
- Pennsylvania Psychological Association, tel, (717) 232-3817.
- Dorothy Miller, CCSW, phone, (919) 477-1333; e-mail, dmtherapy@juno.com.
- Deutsche Gesellschaft für Hypnose, Geschäftsstelle, Druffels Weg 3, D-48653 Coesfeld, Germany; tel, +25-41-700-07; fax, +25-41-700-08; E-mail, DGH-Geschaefts-stelle@t-online.de.
- South African Society of Clinical Hypnosis, tel, 27.12-997-3715.
- Carol H. Lankton, P.O. Box 958, Gulf Breeze, FL 32562; tel, (904) 932-6819.
- University Hospital of South Manchester, phone, 44.161-291-3758.
- Integrated Therapies & Trainings, tel, 44.1483-502-787.

\* To submit a listing for Upcoming Trainings, please send dates, title of workshop, venue, city/state/country, list of presenters, and complete contact information. There is a \$10 fee for each workshop submission. Deadline for the 1999 Fall/Winter Issue (October/November), is September 1, 1999. All workshop submissions are subject to approval by the Erickson Foundation.

## 15th International Congress of Hypnosis, Munich

The Milton H. Erickson Society for Clinical Hypnosis, Germany, (M.E.G.), is sponsoring the *15th International Congress of Hypnosis*, October 2-7, 2000, at the University of Munich, in Germany. Prominent professionals from the hypnosis community are expected, and plans are underway to invite eminent scientists and clinicians from the broader field of human sciences including psychology, philosophy, medicine, biology, poetry, and other relevant areas. These state-of-the-art keynotes will loosely group around the general theme of "Psychotherapy and Public Health: Past — Present — Future." This congress is in the tradition of the *First International Congress for Experimental and Therapeutic Hypnotism*, which took place in 1889 in Paris, France, and was attended by such notable figures as Sigmund Freud and Hippolyte Bernheim.

**CALL FOR PAPERS** — For those interested in contributing to this Congress, please send on diskette, or

by E-mail, the following information for each submission:

- Full name, title, profession
- Affiliation (if applicable)
- Full mailing address
- Telephone and fax number
- Title of contribution
- Abstract of contribution (75 words or less)
- Indicate if the contribution is a paper or a workshop (please indicate the number of hours for workshops: 3, 6, 9, 12)
- For workshops ONLY, indicate the level of the workshop: fundamental, intermediate, advanced. Also, indicate the professions you allow to attend the workshop.

Please send all submissions to: M.E.G., Burkhard Peter, Ph.D., Konradstr. 16, 80801 Munich, Germany; E-mail submissions to: 106004.127@compuserve.com.

For more information: http://our-world.compuserve.com/home-pages/milton\_erickson; fax, 49.89.34029720.

## Conference Notes

*The Eighth European Congress on Hypnosis in Psychotherapy and Psychosomatic Medicine:* "Hypnosis in medicine and psychotherapy; toward a new millennium," hosted by the European Society on Hypnosis, will be held August 14-19, 1999. The Congress venue is Leeuwenhorst Congres Centrum, Amsterdam/Noordwijkerhout, The Netherlands. For advance information, please contact Cure & Care Development, Prins Hendriklaan 7, 3701 CK Zeist, The Netherlands; tel, 31-30-691-26-50; fax, 31-30-691-16-56.

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The 1999 American Psychological Association (APA) Convention will be held August 20-24, 1999, in Boston, Mass. Jeffrey Zeig, Michael D. Yapko, and Reid Wilson will present on Ericksonian derived methods. For more information on registration and a complete Convention Program, contact the APA Convention Office, 750 First Street, NE, Washington, D.C., 20002-4242; phone, (202) 336-5500. Or see the APA Web Site: [www.apa.org](http://www.apa.org).

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The International Association for the Study of Pain is sponsoring the *Ninth World Congress on Pain*, August 22-27, 1999, held at the Austria Center in Vienna. The Congress consists of a Scientific Program, Plenary Session Topics, Topical Workshops and Free Communication Sessions. Comprehensive refresher courses will be offered the day before general sessions. For registration and Congress information, contact the International Association for the Study of Pain, 909 NE 43rd Street, Suite 306, Seattle, WA 98105, USA; tel, (206) 547-6409; fax, (206) 547-1703; E-mail, [IASP@locke.hs.washington.edu](mailto:IASP@locke.hs.washington.edu); Web, [www.halcyon.com/iasp](http://www.halcyon.com/iasp).

\*\*\*

The Australian Society of Hypnosis is sponsoring *The 29th ASH Congress: Hypnosis or Virtual Reality?*, September 12-16, 1999, in Sydney, Australia. The Congress will feature Workshops covering "Hypnosis & Pain," "Hypnosis in General Practice," and "Hypnosis and Child-birth." Half-day Workshops on "Constructing Personal Realities" and "Hypnosis and Sleep Disorders," also

will be offered. Presenters for the 29th Congress include Dr. Fred Evans, Dr. Patrick McCarthy, and Dr. Bob Large. For more information, contact The Australian Society of Hypnosis, P.O. Box 3009, North Willoughby NSW, Australia; fax, 61.2.9417.0091; E-mail, [zaharah@sunink.com](mailto:zaharah@sunink.com).

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*The International Congress: The New Technologies of the Science and Education at the Threshold of the Third Millennium*, is being sponsored in part by The International Chair of UNESCO, The Novosibirsk State Teachers Training University, and the Institute of Philosophy and Law of Russian Academy of Sciences, and will be held November 22-26, 1999, in Novosibirsk, Russia. The Congress will discuss scientific technologies at the border of the 21st Century, the national and regional strategies of the development of science and education, theoretic approaches in development of the pedagogical technologies, the new technologies of the ecological education, the cultural and ethnic technology in the strategies of educational process, and health for nations including the role of family at the beginning of the 21st Century. More than 300 attendees from all over the globe are expected. For information, contact the Institute of Philosophy and Law, SB RAS. Ave. Lavrentev, 17, Novosibirsk, 630090, Russia; or contact Faculty of Natural Sciences, Novosibirsk State Pedagogical University, str. Viluiskaya, 26, Novosibirsk, 630126, Russia. E-mail: [secretar@philosophy.nsn.ru](mailto:secretar@philosophy.nsn.ru); phone, (3832) 680115, 681432, 357206; fax, (3832) 357206, (3832) 680135.

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The *Second French-Speaking Forum of Hypnosis and Brief Therapy* will be held, June 2-4, 2000, in Vaison la Romaine (Southern France). The forum is sponsored by L'Institut Milton H. Erickson D'Avignon-Provence. For more information and registration, contact Patick Bellet, M.D., L'Institut Milton H. Erickson D'Avignon-Provence, B.P. 82 (rue Ernest Renan), 84110 Vaison la Romaine, France; phone, 33.490-36-19-31; fax, 33.490-28-70-17; Web, [members.aol.com/confhypnos](http://members.aol.com/confhypnos).

## LOVE, MARRIAGE & CHILDREN

A WORKSHOP IN NEW YORK CITY  
September 9 & 10, 1999

FEATURING

CLOÉ MADANES, LIC.PSYCHOL.

PEGGY PAPP, ACSW

AN INTERVIEW WITH HELEN FISHER, PH.D.

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- ◆ Examine how primary emotion systems affect the anatomy of a relationship.

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"All hypnosis is self-hypnosis" Milton Erickson (1977)

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Dr. Alman weaves his 20+ years of consulting and workshops and the training he acquired through his 4 years with Milton H. Erickson, M.D. into a profound, unique learning experience for professionals. Dr. Alman's introduction to self-hypnosis and Dr. Erickson was because of his own pain problems and brings further depth and validity to the concepts he teaches.

Since earning his Ph.D. in psychology in 1979, Dr. Alman has become an internationally known author, clinician, healer, trainer and researcher. He is in private practice in San Diego where he works with individuals and offers workshops for professionals. He also teaches for the Milton H. Erickson Foundation.

- Develop individualized metaphors
- Create self-hypnosis approaches
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# CASE REPORT

## Utilizing Ericksonian Hypnotic Techniques with a Sexual Offender

by Mark S. Charich, Ph.D., and Carole Metzger, LCSW

*Editor's Note: In this Case Report/Discussion, the authors were co-therapists. They worked together in writing both the report and the discussion.*

The client was a 40 year-old male, youngest of a family of 15, incarcerated for 12 years for sexual abuse. He was considered a "light-weight" offender with offending behaviors of flashing and peeping. He had been diagnosed with mixed personality characteristics of borderline, anti-social and narcissistic disorders. He had been in group therapy throughout his incarceration, with a modality of cognitive/behavioral treatment with a confrontational and experiential component.

"Henry" had a developmental history of neglect and trauma. It included rape by his older brother during his latency years. He also had been exposed to other sexual deviancy throughout childhood, principally his father's harassment of the older brother's girlfriends. Henry was illiterate but during treatment, decided to learn to read and write, and subsequently earned his GED.

Henry's core issues were typical for this type of sex offender. There were themes of abandonment, rejection, loneliness, dependency, jealousy, insecurity, feelings of inferiority, and possessiveness. A major issue for Henry was power and control.

The major goal of therapy was first and foremost that Henry not re-offend. Several hypnotic techniques were selected to support this treatment goal as well as helping Henry with the unresolved pains of childhood. Both authors participated in therapeutic sessions with Henry and had established a trusting relationship with him.

Henry had given meaningful themes and images which the authors were able to transform into therapeutic metaphors. One of the themes he

had discussed as vivid and comforting to him was taking a hot bath. He had soaked after his brother had raped him and it felt comforting and soothing during a horrible time of pain. Another image Henry liked was a protective Doberman Pinscher that he once had as a pet.

A metaphor commonly used in the sexual offender treatment program sessions is that of a "Recovery Journey." The concept of recovery is rooted in the belief that there is not a "cure" (Carich and Adkerson, 1995; ATSA 1996). In this "Journey," the offender can choose "to" or "not to" re-offend.

The induction protocol was a muscle push-release method in which the client simply pushes tension out of various muscle areas (Carich, 1989; 1990a; 1990b). The warmth of relaxation is felt flowing through body and mind. Depth was established by counting, and unconscious communication established through ideomotor finger signaling (Carich, 1996; Carich and Metzger, in press).

The content of each individual's "Recovery Journey" parallels unique personal dynamics. In Henry's case, a "Journey of Encouragement" was used. "No More Victims!" was a slogan adopted as a theme of all the therapeutic work done. Henry vividly imaged it on a flashing neon sign.

A brief age regression technique was used to continue therapeutic work with past issues of resentment, pain, loneliness and abandonment. These issues were brought to the present time and the pain scaled from one to ten. The hot soak in the bathtub which Henry had found so comforting was used as a cleaning process. Bubbles in the bath water represented forgiveness, inner security, healing, letting go of the past, and self-nurturing.

During Henry's feelings of comfort and security in his warm bath, another metaphor was created with the image of a Doberman Pinscher. Henry's beloved pet, the guardian Doberman Pinscher, was to alert Henry by barking at the onset of any inappropriate decisions and in high-risk situations. The strength and kindness of this dog was emphasized. The Doberman was used in combination with the hot bath metaphor to take

advantage of feelings of safety and security. Henry's more difficult feelings were easier for him to address when he felt safe and secure. Throughout, it also was emphasized that Henry must accept full responsibility for his behaviors.

Within the hypnotic work, he visualized apologies, forgiveness, and healing hugs with family members. By doing this, he was able to understand that people are imperfect and fallible. This understanding gave him great peace and strength in his recovery process.

Post-hypnotic suggestions were given so that he could use the soothing bath any time he needed to reaffirm his safety and security. His Doberman was included in this metaphor.

Age progression was implied throughout the hypnotic work (Carich, 1990). Dreams and his hypnotic experiences also were used to project into Henry's future.

Work with sexual offenders commonly uses phallometric assessment. A measuring device, the penile plethysmograph, is a gauge attached to the subject that measures arousal via blood flow and swelling. Another metaphor used was a control dial, which Henry could use as an adjunct to the therapy. Arousal could be modified as he concentrated on turning the dial down to lessen it. Subsequent measurements indicated Henry's arousal was lowered. He reported he felt to be more "even-keeled."

The outcome of the hypnotic work appeared successful. Henry seemed to "let go" of some of his old and hidden resentments. He had created, and was continuing to create, healing effects for himself.

## DISCUSSION

Well-timed hypnotic techniques can be highly successful in treating sexual offenders who typically have chronic and entrenched dysfunctions (Carich and Adkerson, 1995; Carich, 1997). The concentrated use of hypnosis was one technique of many used with Henry. Most of the first five to six years of treatment, during his incarceration, were spent using confrontational strategies within a group. This approach had limited success. Henry had developed elevated levels of trust with both therapists. It appears that the hypnotic imagery had a great impact; with hypnosis, he was able to make substantial behavioral

and cognitive changes.

Henry's treatment plan included a strong emphasis on the following sequences: 1) Trance induction; 2) Techniques for deepening trance state; 3) Establishment of ideomotor signaling; 4) Emphasis on an individualistic "Recovery Journey" with an overlying theme of "No More Victims."

The use of the bath metaphor, Henry's cleansing process, was seeded with suggestions of healing; thus the client's own positive experiences were used to help him further resolve issues. Other resources, his own positive experiences, were re-mobilized to enhance his growth further. Although Henry's parents were deceased, he was able to give and receive amends by visualizing hugging by significant others with an emphasis on forgiveness and "letting go." These images were made more powerful through ambiguous time distortion suggestions. He could either go back into time or bring his images to the current time. The choice was left to him.

It is important that offenders put closure on some core issues while taking full responsibility for past, present and future behaviors (Erickson, Rossi and Rossi, 1976; Zeig, 1980, 1982; O'Hanlon, 1987; Yapko, 1995; Zeig and Lankton, 1988). The past time element consists of identifying key developmental and pain issues. The present is based on themes of accountability, responsibility, skill development, victim empathy, cycle behaviors and interpersonal relationships or social contacts. The future time dimension involves preparing the offender for behavior control in both high and low risk situations. This was done by projection into imagined high risk and "trigger" scenarios and the development of coping skills and behaviors.

Past, present and future therapeutic suggestions all emphasized continuance of growth, maturity, independence, responsibility, victim empathy, a lifelong "Journey," and, perhaps most importantly, the theme, "No More Victims!" In general, Ericksonian principals, concepts and tactics were used throughout (Zeig, 1980).

The use of a control dial to reduce arousal was a valuable tool (Carich, 1990 b; Carich and Metzger, 1999). When Henry was able to reduce arousal with this control dial during plethysmograph assessment,

*continued on next page*

he had concrete feedback that he was being effective with his imagery. This process created a recursive self-reinforcing loop of positive accomplishment for him. This, in combination with his previous successes in learning to read and write and in obtaining his GED, reinforced a theme of competency and confidence for Henry. Each success reinforced a pattern of measurable accomplishment.

The sequencing of the treatment plan and the emphasis on the "Recovery Journey" with the continued repetition of "No More Victims!" gave Henry the tools to manifest his decision to stop offending. He was able to gain strength and integrate his resources using hypnotic imaging to promote healing and to find his path of future success. This systematic approach, combined with previous and more confrontational techniques, contributed to a status of readiness. The combination of metaphors, suggestions and concrete feedback yielded opportunity for the best possible outcome. Henry was able to complete the program successfully and return to society.

(For more details on plethysmography treatment, see: ATSA, 1996;

Carich and Adkerson, 1995; Roy and Roy, 1994; Murphy and Barbaree, 1994.)

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**Media of Note**

The Journal of the Spanish Federation of Family Therapy Associations, *Mosaico*, contains (Spanish) articles on family therapy, interviews with prominent professionals in psychology, information on upcoming Conferences regionally and nationally, and articles discussing issues facing the psychotherapeutic community. Please contact Marta Bidaurreta, Coordinator of Mosaico, Alda Recalde, 71-1 Isda, 48012 Bilbao, Spain, for more information.



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## THERAPEUTIC FRAMEWORKS

### The Principle and Process of Sponsorship

by Stephen Gilligan, Ph.D.

The legacy of Milton Erickson has been elaborated and deepened in many ways in the last 20 years. My own work has moved from a more mainstream Ericksonian emphasis (see Gilligan, 1987) to the development of a neo-Ericksonian approach I call self-relations psychotherapy (see Gilligan, 1997). Like Erickson's work, self-relations emphasizes the positive aspects of problems and symptoms. It sees such disturbances of the "normal order" as evidence that "something is waking up" in the life of a person or community. Such disturbances are double-edged crises. On the one side, they are often hidden opportunities for major growth. For example, most of us can recall negative events—a death, divorce, illness, or addiction—that led to significant positive change in our lives. On the other side, such disturbances can be destructive. For example, people can become lost in depression, acting out, or other problematic behaviors. Self-relations suggests that the difference is in whether or not a disturbance can be "sponsored" by a skillful human presence.

The principle and processes of sponsorship are the cornerstone of self-relations. The word "sponsorship" comes from the Latin "spons," meaning, "to pledge solemnly." Sponsorship is a vow to help a person (including one's self) to use each and every event and experience to awaken to the goodness and gifts of the self, the world, and the connections between the two. Self-relations suggests that experiences that come into a person's life are not yet fully human; they have no human value until a person is able to "sponsor them."

A good example of this can be found in the extraordinary life of Helen Keller (see Keller, 1902/1988). At 18 months of age Keller contracted a severe illness that left her without sight or hearing for the rest of her life. For the next six years she suffered in a dark and isolated world of intense sensations, anger, self-absorption, and frustration. Nobody could

find a way to connect with her, and she could not find a way to directly communicate with others. When she was seven, Annie Sullivan came into her life. She became her sponsor. As Keller wrote, "The most important day I remember in all my life is the one on which my teacher, Anne Mansfield Sullivan, came to me. I am filled with wonder when I consider the immeasurable contrasts between the two lives which it connects" (p. 16). Through her connection with Annie Sullivan, Keller re-entered the world of the living and never looked back. She went on to distinguish herself as one of the most intelligent, inspirational, humanitarian persons of the century.

The distinction between what we might call the pre-sponsored Helen Keller and the post-sponsored Helen Keller can be found in each of us at many levels. It is easy to see in young children, who have no language or other sponsorship skills for their feeling states, such as being tired, hungry, lonely, or angry. Instead, children simply act them out until a sensitive adult can recognize their meaning and attend to them. It is to be hoped that over time children will learn to recognize and "sponsor" their own feeling states, and thereby become "re-sponsible" within the community. However, any experiences or behaviors that are neglected, ignored, or cursed by the person or community remain in their pre-sponsored, "not quite ready for prime time" state. They repetitively assert themselves, looking for the human presence that will sponsor them and thereby allow their positive value to become apparent to self and community. But if each time they are rejected anew, they become increasingly troublesome and antagonistic to the person and the community.

This is when clients appear in therapy offices: an "out of control" experience or behavior is increasingly disturbing them. The normal sentiment of any person (including client and therapist) might be to use whatever means necessary to defeat, destroy, or otherwise "get rid of" the negative otherness and thereby re-establish the old "normal" self. In contrast, self-relations builds on the legacy of Erickson by examining how such experiences, however "terrible," can be sponsored as the gifts of growth. Thus a "depression" might be

the gift that signals that the client cannot continue with their false self that tries to achieve happiness by pleasing others or achieving at all costs. An addiction can allow a person to discover that there is an intelligence within them that is greater than their intellect. A marital failure might force a person to learn to speak their true feelings. An anxiety can help a person discover the strength of the indestructible "tender soft spot" at the core of their being.

To transform these seemingly negative experiences into their deeper positive values, sponsorship includes many processes. The "yin" (receptive) aspect of sponsorship involves receiving, allowing your heart to be opened, bearing witness, providing place or sanctuary, soothing, gently holding, being curious, deep listening, and beholding a presence with the eyes of kindness and understanding. The "yang" (active) aspect includes relentless commitment,

fierce attentiveness, providing guidance, setting limits and boundaries, challenging self-limitations, and introducing the sponsored experience to other resources. Through a skillful combination of these and related sponsorship processes, an experience or behavior that seems to have no value to the self or community can be transformed from an "it" that should be destroyed to a "thou" that can be listened to, appreciated, and allowed to develop within self and community.

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The first two recordings in the series are now available. The first, entitled "Misconceptions and Phenomena of Hypnosis," was presented to an audience of physicians and dentists in August 1955. Dr. Erickson's compelling overview of hypnosis is followed by an induction demonstration with a volunteer from the audience. The second recording, also from August 1955, is entitled "Techniques of Induction and Utilization in Hypnosis," and includes such topics as Dr. Erickson

explaining the logic of his teaching method, a discussion of the relationship between protecting the patient and development of trust, and a multitude of other techniques. Each recording is 70 minutes in length and are available in both CD and audiocassette format. Anyone interested in obtaining copies should contact Sylvia Cowen at the Foundation in Phoenix at 602/956-6196, ext. 210. CDs are \$15.95 and audiocassettes are \$11.95, plus \$4.00 for tax and shipping (foreign shipping is \$8.00).

Several hundred hours of lectures, teaching seminars, and clinical demonstrations are housed in the Erickson Archive. The sound quality of most of the recordings is remarkably good, and when necessary the sound quality is being enhanced.

Additional volumes in the series are being prepared with plans for distribution.

Wendel A. Ray, Ph.D., is scholar-in-residence at the Erickson Foundation this summer and is working full time on transforming these rare, original recordings to digital format and making them available for interested clinicians, researchers and scholars. In addition to his work at the Erickson Foundation Archive, Dr. Ray is Associate Professor of Marriage and Family Therapy at Northeast Louisiana University in Monroe, Louisiana, and serves as a Research Associate and Director of the Don D. Jackson Archive at the Mental Research Institute (MRI) in Palo Alto, California.



## Grandpa's Fairy Tales

by Nicole Erickson, B.A.

The Twentieth Anniversary Conference of MEG was held in November last year, in Bad Orb, Germany, a renowned spa along what is called "the fairy tale road." The organizers could not have been aware of how it would speak to the heart and soul of one of Erickson's grandchildren. I had been awarded a Fulbright scholarship to Germany and was living there.

One of the focal points of the gathering was the importance of hypnosis as a therapeutic resource and the strength of hypnotherapy in the modern medical world. Bernhard Trenkle, Dipl. Psych., president of MEG, gave a lecture on utilization. Dr. Ellis Huber, president of the Board of Doctors (Arzttekammer) in Berlin talked about politics of the

German health system and Peter Bloom, M.D., immediate past president of the International Society of Hypnosis, gave a moving keynote address. The second focal point was fairy tales, myths and metaphors. The meeting was held in conjunction with the European Society for Research on Fairy Tales. Dr. Heinrich, president of the European Fairy Tale Society, gave an excellent lecture on the fountain as a symbol in fairy tales.

Another highlight was the granting of the first Milton H. Erickson Prize for Scientific Excellence, a monetary award of 10,000 DM. This prize was founded by Dr. Ulrich Freund, and was given to Professor Vladimir Gheorghiu. Professor Gheorghiu's life mirrored Erickson's ability to face, struggle with and overcome multiple and severe challenges. These obstacles were primarily due to political upheavals within Europe and the communist takeover of Romania (for more information on Gheorghiu

see "Speaking of Research," p. 10).

I was delighted and honored to have been invited to this Conference. Previously, I attended a workshop on Ericksonian hypnosis and psychotherapy, in Novosibirsk, Siberia, read numerous books, and heard endless stories about about my grandfather. Now, for the first time in my life, it became clear to me how my grandfather was able to influence so many people from so many different cultures around the world. Until that Conference, my grandfather was just the purple-clad man who taught me how to hypnotize myself, when I was five years old, and who was famous in certain circles.

This Conference in Bad Orb became a time of both personal and intellectual discovery for me. My degree is in English Literature. I was raised in the Erickson tradition of family stories and bedtime tales. The fairy tale aspect of the Conference spoke directly to me. Through those

tales, I was able to find a doorway into my roots. I also discovered how much I already had been taught about psychology and hypnosis. Most importantly, I learned how much of Grandpa and his life has been handed down to me across the generations through the stories I already knew.

As I listened to stories told of my grandfather, I began to recall more of my own stories. I began to realize how his life has, and will continue to shape my own.

Along the fairy tale road in Bad Orb, my own father and my grandfather stepped out of the fairy tale worlds I had given them. The magic and wisdom they have given me became more attainable.

I not only discovered my roots, but an important part of myself. I went home knowing that the world of psychotherapy, especially hypnotherapy, was not just an untouchable fairy tale, but something I already had within me.

## Re-Establish Your Ericksonian Hypnosis Skills

The Milton H. Erickson Foundation is proud to sponsor the eleventh year of the *Phoenix Intensive Training in Ericksonian Approaches to Brief Hypnotic Psychotherapy*. The program has trained more than 1,000 professionals, both nationally and internationally. The Coordinator of Training is Brent Geary, Ph.D., and the program features invited presenters including Jeffrey K. Zeig, Ph.D., director of the Erickson Foundation.

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Intensive Training Program provides 30.0 hours of continuing education credit. The Intensive Training Program's continuing education hours also may be used toward certification with the American Society of Clinical Hypnosis (A.S.C.H.), and has recently been approved for Mandatory Continuing Education for Psychologists in California (M.C.E.P.). The following are the dates for the Summer 1999 program:

Fundamental — July 19–23, 1999

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The Erickson Foundation is seeking full-time graduate students to serve as volunteers at the 20th Anniversary Celebration at the *Seventh International Congress on Ericksonian Approaches to Hypnosis and Psychotherapy*, December 8-12, 1999, in Phoenix, Ariz. In lieu of registration fees, volunteers assist with registration, continuing education procedures, with faculty and staff, as well as monitoring meeting rooms. Volunteers must send a \$75 deposit, that will be refunded after they have completed participation in the meeting.

The Foundation first accepts full-time graduate students as volunteers. Professionals who illustrate need may be given an opportunity to serve as volunteer monitors if positions are still available nearer the Conference dates.

Those interested in serving as volunteers, should contact Diane Deniger at: The Milton H. Erickson Foundation, Inc., 3606 N. 24th Street, Phoenix, AZ 85016-6500; phone, 602/956-6196 ext.208; fax, 602/956-0519.

# SPEAKING OF RESEARCH

## Vladimir Gheorghiu

by Sharon McLaughlin, MA  
Lakeport, California

*Editor's Note: The information in this article is a summary of Burkhard Peter's laudatio and interview with Vladimir Gheorghiu, the latter published in two of the 1997 issues of the Newsletter of the International Society of Hypnosis (ISH).*

In November 1998, at the 20th anniversary meeting of the Milton H. Erickson Society for Clinical Hypnosis in Germany (MEG), the "Milton H. Erickson Award for Outstanding Scientific Contributions in the Field" was presented to Vladimir Gheorghiu, Ph.D., Professor Emeritus at the University of Giessen, Germany. Gheorghiu has authored several books both in German and Romanian. During his career Gheorghiu has overcome incredible obstacles such as a prohibition against the non-medical use of hypnosis and the opposition of communist authorities. He is responsible for the growth of hypnosis in Germany from its limited medical use to its more current and expanding applications. He also helped form an international network of hypnosis clinicians and researchers. By overcoming opposition and oppression, and bringing together the resources of Western and Eastern Europe, he has generated new possibilities in the science of hypnosis.

Gheorghiu's contributions to the research of hypnosis include such topics as suggestion and suggestibility from a cognitive and social psychological perspective; the relation between hypnosis and suggestion; and the adaptive value of suggestion. He has elaborated scales and tests for the measurement of suggestibility independent of the hypnotic context, with special reference to the assessment of the effects of indirect suggestions on sensory and motor processes. He also developed some suggestive and imaginative techniques that facilitate the induction of hypnosis and relaxation.

Gheorghiu's first contact with hypnosis came when he was working as a young psychologist on staff at the Psychological Research Institute in Bucharest, Romania. Studying ques-

tions of inter-individual differences in the power of imagination, he and his colleagues became interested in the extent to which imaginative processes could be examined by hypnotic methods. At that time in Romania there were very few recent works on scientific hypnosis, and the practice of hypnosis was restricted to use by medical doctors. Though it was forbidden, Dr. Gheorghiu requested works from hypnosis researchers in the West. As it turned out, the only ones to reach the Bucharest Institute were those of the American Journal of Clinical Hypnosis, edited by Milton H. Erickson.

Gheorghiu credits several circumstances, and many professional relationships, as being beneficial to him in his efforts in the development of hypnosis. His success in using hypnotic methods in both a dermatological as well as a neuropsychiatric clinic created a basis of cooperation with the medical community. His success allowed him to surmount the barrier of not being authorized to use hypnosis. Although intending to make the study of unconscious processes under hypnotic conditions the subject of his doctoral research, this idea was deemed too daring by the Institute. He settled upon the research of "Hypnosis and Memory," the findings of which would later emerge into the book by the same title. Eventually, Gheorghiu's work was banned by the communist government of Romania. He was unable to continue his work in Romania. However, the academic communities of the world raised such an uproar that he was allowed to continue his research in Germany.

In 1966, Dr. Gheorghiu attended the International Psychology Congress in Moscow. There he found the lack of information on hypnosis so acute, that he and a friend began a hunt, meeting with every possible colleague they could find who was dealing with hypnosis. From 1968 to 1973, a time when research into hypnosis and suggestion received little attention in Germany, he was awarded a scholarship by the Humboldt-Stiftung and the Deutsche Forschungsgemeinschaft. He conducted his scientific work at the Gutenberg University in Mainz. During that time, Gheorghiu was able to establish, and over the years main-

tain, a network of communication among colleagues in Eastern Europe. The cooperation among colleagues in Western and Eastern Europe was requisite to the development of hypnosis beyond its previous limitations. In each socialist country, he found at least one or two psychologists or doctors who were studying the theoretical, experimental and applied aspects of hypnosis.

For several years, Gheorghiu also collaborated with Professor Dietrich Langen M.D., known for the development of "Gestufte Aktivhypnose" (Phased Active Hypnosis) in Germany. Gheorghiu credits Langen for developing cooperation between medical doctors and psychologists who were concerned with questions of experimental and clinical hypnosis in both Western and European countries.

Another important influence in his career was his 1967 meeting with

Ernest Hilgard and Martin Orne at a symposium on the "Psychophysiology of Hypnosis." Hilgard in particular was to become a significant, and supportive influence in Gheorghiu's career.

The concept of bringing researchers and clinicians together, and increasing their communication, is one Dr. Gheorghiu continues to view as valuable to the future development of hypnosis. He cites as significant, the number of colleagues who find the constantly recurring dispute between "special processes" theorists and "social psychological" theorists concerning the nature of hypnosis as an artificially created dichotomy. He believes further analysis of this idea ought be continued in years to come, and encourages the organizers of the International Society of Hypnosis Congress in Munich, in the year 2000, to use it as support for the scientific program.

## VIDEOTAPES BY JAY HALEY AND MADELEINE RICHPORT-HALEY

Now the viewer can experience in the home, office, or classroom, Jay Haley's practical model for brief therapy that formulates problems so they are solvable. (Enacted)

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## The Milton H. Erickson Institute of the Bay Area

by Eric Greenleaf, Ph.D.

The Milton H. Erickson Institute of the Bay Area (MHEIBA) joined the other Institutes in 1994. Our distributed identity, though based in Berkeley, Calif., includes Betty Alice Erickson, in Dallas, Texas, and Pat Murphy, in the U.S. Virgin Islands.

The members of the institute have taught Ericksonian approaches in countries such as Poland, Scotland, Germany, France, Lithuania, Russia, Spain, England, Scandinavia, Greece and in the Caribbean. Betty Alice Erickson and Eric Greenleaf were scheduled to lead a two-week trip to study trance and healing in Bali in June.

MHEIBA has close connections with the Erickson Institutes in Germany, Poland and Lithuania and with the National College of Hypnosis and Psychotherapy in Great Britain. To provide wider access to our writing and training we formed a web site, [www.miltonherickson.com](http://www.miltonherickson.com). We have been gratified to discover communications sprouting up everywhere, from Tasmania to Missouri. E-mail, [ericg@miltonherickson.com](mailto:ericg@miltonherickson.com), has put MHEIBA in touch with students, therapists and patients from all over, and our membership has access to a growing video library of Ericksonian tapes.

Our interests in Ericksonian therapy are long-standing. Eric Greenleaf has given training in Ericksonian hypnotherapy since 1968. Milton Erickson chose him for the first Award of Scientific Excellence for Writing in Hypnosis, from the American Journal of Clinical Hypnosis, in 1970. Our Berkeley study group, then known as "The Clinic of Last Resort," had been consulting together for years when we met Betty

Alice Erickson at the 1992 Erickson Congress. After working together to provide training, she decided to join our Board of Directors.

At home, the MHEIBA training program provides different possibilities for those interested in Ericksonian practices. Deborah Joy, Ph.D., offers a five-week series in self-hypnosis, titled "Getting Your Feet Wet." She also teaches a course



Betty Alice Erickson



Pat Murphy



Eric Greenleaf, Ph.D.



Deborah Joy



Lori Greenleaf



Linda Silver

entitled "Sexual Pleasure and Relaxation Through Self-Hypnosis." Deborah Joy is a director of the Center for Non-Abusive Relationships, an agency that helps couples involved in domestic violence. She also teaches hypnosis at local colleges.

A longer course, "Hypnosis for Psychotherapists," is taught by Eric Greenleaf, Ph.D., and includes student therapists and experienced professionals in a 45-hour experiential class, now in its 15th year. Each participant prepares an hour of hypnotherapeutic suggestion with the help of the class and then conducts the session live, with an outside volunteer, in front of the class. All class sessions are videotaped to aid further study.

Betty Alice Erickson, M.A., is known for her work as Editor-in-Chief for the *Milton H. Erickson Foundation Newsletter* and for her wide-ranging workshops and publications in hypnotherapy. Betty Alice Erickson is now working with AIDS patients, teaching pain management. She has offered training with the

other directors of MHEIBA since 1993.

Linda Silver, R.N., is a consultant for hospices and hospitals, and leads groups, classes and workshops on death, grief and loss. Her hypnotic work includes the use of EMDR and writing practices for change and healing. Along with our additional faculty, Sandra Wooten, M.A., she offers workshops in mind-body communication.

The emphasis on mind-body and spirit, central to Milton Erickson's work, is promoted in several of our joint workshops with Sandra Wooten, who is founding president of the Rosen Institute and director of the Rosen Method Center Southwest. Our workshop, "In Touch With Trance," given in Berkeley and Santa Fe, N.M. by Sandra Wooten, Eric Greenleaf and Betty Alice Erickson, continues our involve-

ment in mind-body healing.

Another interest of the MHEIBA directors is imagery. This has been a focus of much of Eric Greenleaf's published work, discussions and demonstrations of hypnotic psychotherapy. Both Lori Greenleaf,

M.A., and Pat Murphy, M.A., trained as artists, use the expressive arts as tools of therapy. Both have used these tools in leading recovery groups and have incorporated the arts in hypnotic therapy during workshops. Lori Greenleaf also offers a workshop on "Theater Games for Therapists," exploring the use of improvisational techniques in therapeutic work.

The commonality of all our training and approaches is the use of hypnotic communication to sharpen the therapeutic skills of active listening, focused attention, spontaneity, collaboration and creative problem solving. Utilization of human creativity, healing touch, imagination, and the rhythms of grief and renewal are, we feel, extensions of the work begun by Milton Erickson and of his recognition that all things human have uses in therapy if we approach them with the goals of our patients as our goals.

Our interest in each other's work has sustained us and our enjoyment of each other's company has provided even greater nourishment. The members of MHEIBA believe that therapists should not confuse "serious" with "somber." When together with our Board members and their partners, we talk, laugh, and follow Bismarck's dictum, "The most important thing is to eat well." In these ways, we hope we are following Milton Erickson's example of practices integrated with lives and of the extended family which engages and promotes our most private efforts in life.

### Advertising Rates for Newsletter

The Milton H. Erickson Foundation is accepting ads for the Fall/Winter (October/November) issue of the *Newsletter*, with the deadline set for September 1, 1999. Advertising rates are as follows:

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## WOMEN OF NOTE

### Carol Kershaw, Ed.D.

by J. William Wade, M.Div., LPC,  
LMFT

Carol Kershaw, Ed.D., is a psychologist, family therapist, university professor, and Co-Director of the Milton Erickson Institute in Houston, Texas. She received her Bachelor's degree from the University of Texas at Austin, two Master's degrees from the University of North Texas in Denton, Texas, and her doctorate in Marriage and Family Therapy and Psychology from Texas A & M University in Commerce, Texas. Her interest in clinical hypnosis and body/mind sciences dates back to the late 1970s when she did her doctoral dissertation on the use of guided imagery with diabetic patients. Her research became one of the chapters in *Bridges of the Bodymind* by Jeanne Achterberg and Frank Lawlis. In 1987, Kershaw published a case study in the Ericksonian Monographs on the use of hypnosis in treating childhood asthma.

For the last five years, Kershaw has been leading a group for cancer patients in which group therapy and hypnosis are used to facilitate healing. One patient entered the group with a brain tumor. He had received a "death sentence" from his oncologist. Five years later, he is symptom free. This patient greatly prolonged his life expectancy and resumed his career. While his remission may or may not be attributed to the group, he had a remarkable change in attitude toward his ability to influence his body, mind, and spirit. The group is a teacher for every person present and a constant reminder to live fully.

In addition to her work with hypnosis and the body/mind, Kershaw also uses hypnosis in marital therapy and is the author of *The Couple's Hypnotic Dance*, published by Brunner/Mazel, 1992. This book was also published in German and Spanish. Kershaw is now working on a new book.

In true Ericksonian fashion, Kershaw weaves together a highly pragmatic and dynamic form of psychotherapy. She believes the therapeutic relationship and the trust engendered between therapist and patient is the primary factor to determine whether the outcome will be

positive. A student of language, Kershaw believes communication occurs on multi-levels. Subtle nuances in phrasing, wording, and body language can have a major, albeit unconscious, impact on the outcome of therapy. She believes the therapeutic process is co-created by patient and therapist. While, some therapy may be successfully completed in a single-session, she has major concerns that economics rather than patient welfare are much of the driving force behind managed care's insistence on brief therapy. One of her mentors, the late Carl Whitaker, using a music metaphor once said, "Some patients come to therapy to learn how to play chopsticks, others want to become concert pianists." Kershaw believes that therapy is best and retains its integrity when the therapist allows the patient to determine how much is to be accomplished in therapy. She believes the unconscious continues the therapeutic process long after sessions have ceased.

Currently, Kershaw is exploring the use of neurotherapy or biofeedback and hypnosis in treating depression, anxiety and attention disorders, and chronic pain (such as fibromyalgia). She believes the quality of one's attention creates a satisfied inner life. An unfocused mind leads to pain and distress. Because trance phenomena are aspects of attention, they can be used to enhance the inner life. Moving beyond the phenomena into the realm of watching thought with no attempt to change it, and then into "no mind," one can learn how to keep a mind settled even in the greatest of life challenges. Operating from the assumption that people can access higher levels of health and well-being, Kershaw believes a creative perspective on circumstances can be developed as well as humor toward our own dysfunctional thinking.

Kershaw has been a faculty member for the last two Ericksonian Congresses and is an invited faculty member for the upcoming Congress. She has served as a moderator for the *Evolution of Psychotherapy Conference*. She is a frequent faculty member for the regional workshops and the Annual Meetings for the American Society of Clinical Hypnosis.

Last November, Kershaw was invited to form a treatment team to

travel abroad to treat a member of a royal family who suffered from panic disorder. Despite strong cultural prohibitions against women treating men, Kershaw was also permitted to treat a male member of one of the royal families. She combined the use of hypnosis, neurofeedback, strategic, and in vivo exposure therapy to successfully treat her patient.

Besides maintaining a full private practice, Kershaw has served on the Board of Directors for the Texas Association for Marriage and Family Therapy, was program chair for the Marriage and Family Therapy program in Denton, and department chair in Houston for Texas Woman's University. She was one of the Features Editors for the *Milton H. Erickson Foundation Newsletter*, and is currently an adjunct professor in the Marriage and Family Therapy program for the University of Houston at Clear Lake, Texas.

In addition to her professional activities, Kershaw is a member of the internationally known St. Paul's United Methodist church choir. This choir has been the choir-in-residence at Westminster Abbey in London,

England, three times. The St. Paul's choir is the only choir in the world to have been invited a second time to sing at the Abbey. This summer, Kershaw will be touring with the choir to sing in Bach's church in Leipzig, Germany, and Yorkminster in York, England. In September, Kershaw will sing with the St. Paul's Choir which will be making its fifth appearance with the Houston Ballet and performing the choral music to the "Gloria by Poulenc" at the Wortham Center in Houston, Texas.

Currently, Kershaw and Bill Wade (her husband) are completing a series of compact disks that feature stereophonic dual inductions. Their voices are accompanied by the playing of Chinese gongs. This CD is being researched in the psychology department at the University of Houston for treating depression. In addition, Kershaw is conducting workshops on body/mind medicine with hypnosis and sound.

Curiosity is Kershaw's constant companion and helps this woman of note stretch into new and exciting areas, both professionally and personally.

## HISTORICAL TIMES

### Morita Therapy

by Akira Otani, Ed.D., ABPH  
University of Maryland

Morita Therapy is a unique psychotherapeutic approach that was originated and systemized in Japan around 1920 by Masatake Morita, M.D. (1874-1938). Treatment philosophy underlying Morita Therapy reflects Eastern views and principles, especially those of Zen Buddhism. It is particularly effective in the treatment of anxiety disorders and has gained popularity both in and out of Japan including Australia, China, Korea, and most recently the U.S.

Morita was born during the period when Japan began rapid industrialization in an effort to catch up with Europe. Although long interested in religion and liberal arts, Morita decided to pursue medicine as a career and specialize in psychiatry in the new Kraepelinian school that emphasized direct observation of patients and empiricism. Morita openly admitted his own anxiety and sensitivity since early childhood. For example, he once recalled an early episode of seeing a painting depicting hell at a local Buddhist temple that left him terrified for days with obsessive ruminations.

His interest in anxiety disorders was thus rooted in his personal experience and shaped by science-based medicine that surfaced in Japan at that time. Later in his career, Morita and Seitai Marui, M.D., a Freudian counterpart of the time, participated in several heated debates at annual meetings of the Japanese Psychiatric Association. Morita criticized psychoanalysis for its lack of scientific rigor. He never changed his mind about the issue.

Morita was a prolific author and expert in several areas of psychiatry such as diagnostics, delusional disorders, and personality disorders. Indeed, he was a pioneer in the use of hypnosis in medicine and psychiatry in Japan. He published several papers on the topic and discussed uses of direct and "masked" (i.e., indirect) suggestion in clinical practice. It would be of interest to study his approach in comparison and contrast to Erickson's work. Unfortunately, these papers have yet to be translated into English.

Sometime around 1918 Morita started treating patients with anxiety disorders at a clinic that he set up at his residence. He referred to this type

*continued on next page*

## Ethics and Morality

by Sharon McLaughlin, MA  
Rohmert Park, Calif.

The history of any agency can be discovered by reading its policy manual; idiosyncratic rules against drinking on the job, or dating co-workers emerge from incidents whereby negative consequences have occurred. Likewise, the history of a given profession can be traced by examining the codes of ethics designed by various schools within that profession.

Throughout the mental health community, ethical codes contain statutes against behaviors that have historically caused harm to clients. However, a distinction should be made between reactive "rules" and morality. The purpose of having an ethical code is to formulate a set of normative values for the profession. Ethics in therapy protect clients from the individual morality of each clinician.

A paradox occurs when a clinician is confronted with the choice between adhering to an ethical code and doing what he or she believes is in the best interest of the client. Because mental health is an evolving field, it is imperative that its guidelines allow room for change. The challenge then is for the code of

ethics to evolve at a rate that provides for the development of the profession and the human beings it is designed to serve.

According to a professor of ethics, Joseph Stamey, Ph.D., morality is that which is right or wrong above the level of instrumentality. Ethics is the study of morality. In this context, instrumentality refers to the methodology of therapeutic interventions. The codes of ethics for professional psychotherapists are designed to determine the morally correct way for therapists to treat clients. There is a responsibility for these codes to reflect the current stage of development of the profession, and how best to operate within that given context. Dr. Stamey (1996) explains that normative ethics attempts to determine the best or most adequate moral principles or value system. Normative ethics are intended to supersede the actual values and principles professed by some group or individual. Perhaps the best value system would be one that allows that group or individual to evolve.

In a topical panel conversation, "Key Ethical Considerations," given at the *Evolution of Psychotherapy Conference*, 1995, Jeffrey Zeig, Ph.D., challenges clinicians to examine several examples of discrepancies

between what is moral, ethical, and legal in contemporary psychotherapeutic practice. After citing the prohibition against dual relationships, Zeig points out, "... if the problem with a patient is dealing with social anxiety, shouldn't we be able to take the patient out to dinner? ... Clearly therapy shouldn't be confined to the consulting room, therapy happens in life ... but if we take a patient out to dinner that is unethical because we have created a problem with a dual relationship." Certainly, individuals have been harmed by dual relationships, but a steadfast rule prohibiting such behavior for all may be "throwing the baby out with the bathwater."

In public mental health settings, under the umbrella of Assertive Community Treatment, and Systems of Care, clients are treated by means of a psycho-social rehabilitation model. "Therapy" is redefined as that which helps people stay out of hospitals and functioning in communities. A therapist's job may include coaching an individual through the experience of eating in public, shopping for food, or riding a bus. This is evidence of progress by taking a step backwards; treating clients in a social context is not a new concept. Yet, as psychotherapy goes back to knowing what it already discovered, it encour-

ters rules designed to protect clients from an individual sense of knowing what is right and what is wrong.

Rigidity in any system creates problems. Even something as essential as the determination of a morally correct way of treating those who seek professional help, and the creation of guidelines by which they will be protected, must allow for flexibility and growth. It is necessary for ethical and legal codes to be continually re-evaluated so that they may reflect what is in the best interest of the people for whom they were designed. A therapist who has accepted the idea that taking a patient out to dinner is morally wrong, may as a condition of his or her job be expected to do just that. Clinicians and the ethics review boards may have to adjust to meet the needs of the client and the community. The primary consideration remains, "Who is being served and protected?"

### References:

- Stamey, J. D. (1996). *Introduction to Ethics*. McMurry University Press.  
Madanes, C., Singer, M., Szasz, T., & Zeig, J. K. (1995, December). "Key Ethical Considerations," Topical Panel at the 1995 Evolution of Psychotherapy Conference, Las Vegas, Nev.

## Historical *continued*

of condition as shinkeishitsu or "nervous disposition." Patients lived with Morita and his family while following a therapeutic regimen that focused on desensitizing anxiety and promoting active living. This inpatient approach became the prototype of Morita Therapy. Morita (1928/1998), treated 260 patients suffering from panic attacks, phobias, obsessive-compulsive disorder, and generalized anxiety between 1919 and 1928. He had the patients participate in daily activities with the Morita family, such as house cleaning and cooking. Patients also kept a journal which Morita reviewed and critiqued every day. He also organized monthly group meetings for present and former patients to provide support and necessary after care. These attempts clearly reflect Morita's effort to reflect the Japanese value of family and group harmony in his therapy.

Morita maintained his medical school professorship and clinical work at his home clinic until his death

in 1938 at the age of 64. Physically frail, Morita nearly died twice because of illness. Nevertheless, he kept his therapy practice until the very end, sometimes attending monthly group meetings lying in a futon bed. His dedication to his patients was enhanced because several former patients chose medicine as their career and returned to his clinic as resident psychiatrists. They later became the second generation Morita therapists and contributed to the further development and refinement of Morita Therapy. At present, the third and fourth generation Morita therapists, including many non-Japanese, are actively engaging in both the research and the practice of Morita Therapy.

In summation, Morita Therapy is a Japanese-born therapy that is particularly effective in the treatment of anxiety disorders. It combines various therapeutic elements and its relevance seems to be cross-cultural. For further information, contact the author at aotani@wam.umd.edu.



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## TOPIC REVIEW

### Video Conversations by Jay Haley and John Weakland

Triangle Productions  
P.O. Box 8094  
La Jolla, CA 92038  
[http://members.aol.com/prizefilm/  
index.htm](http://members.aol.com/prizefilm/index.htm)

### Remembering Milton H. Erickson, M.D.

*Remembering Milton H. Erickson, M.D.*, is a videotape featuring an informal conversation between Jay Haley and John Weakland on the topic of their professional remembrances of Milton Erickson. Each had worked on an on-going basis with Erickson beginning in 1955. "He was young and we were young and everyone was energetic" — the discussants were in a growth phase in their own professional development and clearly enthusiastic with the opportunity to work with him. They continued periodic meetings with Erickson over the years and were the first to try to pinpoint Erickson's methods with trance step by step. Haley continued regular meetings with Erickson through 1971. Haley and Weakland certainly represent exceptional students as Erickson represented an exceptional teacher.

*Remembering Erickson* is a videotape distributed by Triangle Productions. The video led Weakland and Haley to recognize that they also had invaluable recollections about Gregory Bateson and the work they did with him, and subsequently, a second video, *Remembering Gregory Bateson* was produced. The Bateson tape is a bit more polished; the beginning and conclusion are a bit smoother. The Erickson tape almost begins mid-sentence and the viewer feels as though he or she has popped in on a conversation between two good friends that is already in progress.

They describe their meetings with Erickson which originally came about as an offshoot of the Bateson project. Originally, they reminisced, they regarded him with awe. They remembered viewing Erickson's ability to communicate with his patients almost as though there were some-

thing magical about it. They remember it irritated Erickson, who insisted they observe more carefully to discover exactly what he did and how he did it. They then learned the only "magical" element to Erickson's work was the way he was able to integrate his conceptualizations about the patient and the methods that patient used to communicate and understand the world. Then, Erickson was able to conceal the actual interventions of psychotherapy that were being done into conversation with that patient. Since they worked with Erickson, he has become widely recognized for his contributions to indirect suggestions and the uses of metaphors as therapeutic tools.

The two talk about Erickson's ability to motivate people to move beyond perceptions of their own limits. It is clear that they are talking about themselves as well as the patients Erickson described to them and the patients with whom Erickson worked while they observed. Erickson's way of making each case unique can be seen as metaphorical for the way the patients felt while working with him—that they were unique and able. All of this, they remark, they learned from their own observations and from their conversations with him. They also began to appreciate fully that he worked with extensive deliberation and preparation. His flexibility and willingness to put in long hours of planning also were central pillars that supported his remarkable abilities. They discuss how their understanding and insights about Erickson and his work changed with this greater understanding.

The nature of their conversation is filled with humor as well as with fascinating tidbits of fact. A few may perceive this warm style, which by the definition of a conversation becomes non-linear, as a weakness. True, it does not provide all the specific dates and facts a serious student might want. However, my own reaction is that this informal style is a strength of this video. There were metaphors and stories, and multiple levels of learning within, presented to the viewer, to be grasped immediately or later.

Every concept, indeed, virtually every aspect of Erickson and his work

that they discuss is lavishly illustrated with fascinating case material. The memories that each have are inextricably intertwined with stories and enticing glimpses of Erickson working with patients. In fact, the tape becomes a metaphor for how Erickson worked — the teaching material is so interspersed with the stories that learning and expansion take place without the viewer realizing how much is being learned. This is experiential learning at its finest from the men who worked with the man who pioneered this way of therapy.

To hear what exceptional students regard as being most important from their exceptional teacher provides an unexpected and incomparable source for personal growth. I am left with the hope that Haley's and Weakland's students do for them what they have done for Erickson — that they provide their recollections, some of what they learned and how they learned it—for the benefit of students-yet-to-come.

### Remembering Gregory Bateson

Opening with a champagne toast between John Weakland and Jay Haley, to the memory of this great scientist, whom Haley calls the social scientist of his generation, *Remembering Gregory Bateson* is a loving and fact-filled tribute. It includes an overview of the historical status of this eminent contributor to the fields of communication, psychology, psychotherapy, social psychology, biology and anthropology — among others — as well as interesting and personal remembrances.

Bateson was a highly innovative and creative thinker whose influence far transcended the actual work he did. In fact, even Weakland and Haley seem to be in awe over the scope of this man's genius, contributions and ideas. Holding the book, *Steps to an Ecology of the Mind* which is a collection of Bateson's

*continued on next page*

## CYBER NEWS

### The Scientific Hypnosis Web Page

<http://www.hypnosis-research.org>

A new hypnosis Web page developed at UCLA combines a large searchable database of references on clinical and experimental hypnosis (11,000 items and growing) with information for the public. Many of the references have abstracts or notes, making it possible for one to retrieve data quickly for patient care, presentations, and research. Furthermore, using an interactive menu the visitor can add new references that then become immediately available to colleagues around the world. For example, we found only 138 Erickson-authored articles in the database, but one could easily add more of Erickson's articles and books (which would be color coded until reviewed by the editor). Also, one can add abstracts or summary notes to the 138 Erickson items already in the database.

As an example of how the database is used, the visitor might search or 'browse' (as you would with a card catalog) by topic, author, words in the title, or even by language or type of reference (e.g., Dissertations, Reviews). One can combine search terms. For example, finding articles by Erickson that included either 'hallucination' or 'perception' as Keywords, or that included both as Keywords. There are more than 400 Keywords. The list begins with "abreaction," "absorption," "abuse" and ends with "vomiting," "warts/viruses," "witchcraft/vooodoo."

The database should not be seen as just another National Library of Medicine (MEDLARS) kind of repository, but rather as a new type of information sharing. While the initial listings come from Ernest Hilgard, Jean Holroyd, and Burkhard Peter, anyone may add new records. Newly added material is shown in a contrasting color, until the editor (currently Jean Holroyd) reviews and approves it.

With photographs from the UCLA Japanese Garden introducing each part of the homepage, this Web Site also may be useful as an introduction to hypnosis for prospective clients or interested colleagues. The address is <http://www.hypnosis-research.org>.

#### Information provided by:

Jean Holroyd, Ph.D.

Web Editor for the UCLA Scientific Hypnosis Web Page  
[holroyd@ucla.edu](mailto:holroyd@ucla.edu)

papers, the two men, luminaries on their own merits, share commentary on the magnitude of his contributions. They then agree that whatever is said about Bateson's sweeping ideas, there are whole other ideas that are not even addressed. His ability to raise questions, to refocus ideas to fundamental concepts obviously provided a framework for the examination of the nature of mankind. Bateson's framework which stimulates an ongoing quest for knowledge, still provides a valuable tool decades after his initial work.

Bateson had a lengthy and highly productive collaboration with Margaret Mead and the two of them made a comprehensive and still valuable study of the culture of Bali. Weakland pointed out that Bateson thought on two levels — either very abstract or very specific. He was not easily able to fill in the "middle-ground." Mead once remarked that in her and Bateson's collaboration, one of her functions was to fill in that middle ground. Pieces of the original film of these Balinese studies are interspersed in this part of the video. The Mead and Bateson study of trance states in Balinese dancing had led Bateson to Erickson. That friendship and collaboration was instrumental in Haley's work with Erickson and his own study of hypnosis. Bateson's ongoing interest in hypno-

sis and trance later influenced Haley's own work. Bateson once mused, "What is trance?" a question of clarification. As Haley thought about this, he knew he wanted to study and write about the interpersonal side of hypnosis.

Indicative of the interesting conversational style of this video, Weakland and Haley remark how their own interest in studying the use of film and the impact of film on the viewer is one of the common bonds between them and Bateson. Haley had been studying films, analyzing them from a Freudian perspective, still a useful framework. Bateson used films as a vehicle for study in a more social context. Weakland's incisive abilities contributed to making this part of the project even more valuable. The two continued to speak about other areas in which Bateson asked provocative questions, which stimulated their future work. There was considerable freedom in the Communication Project which allowed basic work on the understanding of the importance of hierarchies, influence, manipulation and power, and how these are achieved within a social structure. In this video, even the different dialects used in a power structure, the differences between those who have power and those who do not, in families as well as in society at large are mentioned. Weakland and Haley each made significant contributions in this broad

aspect of family therapy.

Anthropological studies led to Bateson's interest in psychiatry in 1949. In 1951 he co-authored with Jürgen Ruesch *Communication: The Social Matrix of Psychiatry*, which still contains basic principles for understanding psychiatric ideas. Bateson received funding from the Rockefeller Foundation for his seminal project on communication, which then developed into a long-term undertaking lasting from 1952 to 1962. The initial grant was given after Bateson met with Chester Barnard, a maverick in the field of organizational psychology. From Bateson's landmark communication project came a large number of innovative ideas and studies about specific aspects of the human condition, including work on the nature of schizophrenia. The project changed the face, practice and theories of psychotherapy and marked the beginning of family therapy as we know it, as well as giving broad understandings and insights about people overall.

Bateson worked in a style, which was creative and certainly innovative. The standard way of learning about an idea was to examine data and produce a hypothesis, which was then tested. Bateson reversed that. He believed in beginning with a fundamental idea about the world, an idea that had been developed by mankind

over the eons, and then going to the data. He did not think significant ideas could be reached starting with an examination of data. As Haley describes, after evaluating the gathered data, "you produce a new fundamental idea or modify the old one. It is a different process of reasoning." This paradigm shift perhaps remains one of Bateson's most powerful legacies.

A man on the cutting edge of science, Bateson was a visiting professor at respected universities throughout the United States and even a Regent for the University of California systems. However, he was never a tenured professor perhaps because his innovative and creative way of thinking did not fit well in academia. In fact, Bateson was a provocative and influential man, a creative and confusing thinker. Both agree that if he were sitting with them, "you and I would shift to a higher level of discourse. Because that's what he did. He forced you to work at your highest level of thinking. To have a research director who does that, what more could you ask?" Indeed, what more can a student of anthropology, psychiatry, communication, therapy, or thinking ask?

**Reviewed by:**  
Roxanna Erickson Klein, Ph.D., R.N.  
Dallas, Texas

## INTERNATIONAL COMMUNITY

### *Hypnosis in Cuba: Current Tendencies and Future Directions*

by Manuel Rodriguez Sanchez, Ph.D.,  
Julio Santana Marino, Ps. Lic.,  
Maria Rodriguez Rodriguez, Ph.D.,  
Guillermo Piqueras Hernandez,  
and Liban Alvarez Ramirez  
Manzanillo, Cuba

The beginnings of hypnosis in Cuba started in 1958, when the first hypnosis society was founded by the Argentine professor, Dr. Duprat. Another important moment was the formalization of the Cuban Hypnosis Society, in 1986, adjunct to the Sciences Academy, whose president is Braulio Martinez Perigod, Ps. Lic.

Three books have been written by Cuban authors on the topic of hypnosis: *Hypnosis: Theory, Methods and Techniques* (authored by Martinez Perigod and Moises Asis);

*The Teaching of Hypnosis: Theoretic and Practical Course* (authored by Garcia Benitez Diego, Ph.D.), and, *I Do Believe in Hypnosis* (authored by Alberto Cobian Mena).

Scientific events that have taken place in the country include, "The Cuban Hypnosis Society Congress," in Havana, and recently, "Hipno Santiago 99," an international seminar on hypnosis with Cuban and foreign participants. The main topics discussed at this meeting were biological basis of hypnosis, psychology and hypnosis, anesthetic and surgical procedures using hypnosis, forensic medicine, as well as other topics. The scientific program included plenary lectures, debates, workshops, symposia and posters.

Santiago de Cuba is one of the prominent locations of the clinical hypnosis development in Cuba. Alberto Cobian Mena, Ps. Lic., is a professor who teaches hypnosis.

There is an outstanding development of hypnosis research at Manzanillo, where the local society is called "HipnoManz." The main investigations carried out by the teaching and research staff are major surgery using hypnosis as the only anesthetic procedure, hypnosis for the treatment of hypertension, short term memory in hypnosis, clinical vital signs in hypnosis and in the "awake" state, learning under very deep hypnosis, and potentiating mental capacities (see *Rev Neurol Espana*, 1997, 25 (148), pp.1859-1862). This group from Manzanillo also is distinguished because of the teaching of hypnosis, since a prestigious and well-known course, "Hypnosis Techniques", is conducted by the new generation of Cuban professors. The course is directed to health professionals throughout the country.

It is a strategy of the Public Health Ministers in Cuba to promote and support the development of hypnosis, including the teaching of the subject for the health professionals in

postgraduate courses and as a part of the Traditional and Natural Master Degree. The practice of hypnosis is allowed only in state health institutions by certified professionals and under a strict code of ethics. The most common uses of hypnosis are for the management of hypertension, headaches, skin diseases, pain control in surgery, oncology and gynecology, and in dentistry.

Hypnosis-based psychotherapy has started to grow in the last years in Cuba, especially for the treatment of phobias, anxiety, depression, and sexual dysfunction. However, this type of therapy still has a long way to go, and it constitutes a special clinical challenge in the future.

The most widespread induction methods are traditional techniques, even though there is a growing interest in Ericksonian approaches.

Cuban professionals are open to scientific exchange within the world of hypnosis on the basis of the ethics and fraternal principles that encourage them.

## VIDEOTAPE REVIEW

### *The Problem Is the Solution: A Demonstration of Self-Relations Therapy*

Demonstration by Stephen Gilligan,  
Ph.D.

1998 Brief Therapy Conference  
Available through the Milton H.  
Erickson Foundation, Inc.

See Page 17 for ordering information.

During this demonstration, at the 1998 Brief Therapy Conference, Stephen Gilligan, Ph.D., works with Moises, a volunteer he has just met. The purpose of the demonstration is to teach mind/body work. Moises, who is a psychiatrist, complains of mid-abdominal pain when he is working with clients. Moises is not highly cooperative, giving bland, non-committal responses like, "I'm feeling OK." Undisturbed, Gilligan eventually uses Moises' "resistance" as the core of the therapeutic work.

After gathering some basic infor-

mation about his client, Gilligan soon begins a trance induction characterized by silences and deep sighs. Moises soon stops responding verbally, so Gilligan works with already-gathered information and minimal cues.

This free-form trance shows Gilligan at his most artful, as he blends standard, almost boilerplate, trance features with the client's specific statements and the therapist's own intuition. Disorienting Moises in time, he invites him to examine the relevancy of a "handful" of different ages and offers him a time-lapse view of himself living out both old, conditioned responses and fresh ones. He compliments him on *not* following a suggestion and instead following his own truth. Moises later tells us that he is rebellious by nature. Building on this rebellion, he directs Moises toward greater awareness of his own internal wholeness, with its innate wisdom and comfort.

Maintaining his focus on the problem as the solution, Gilligan identifies the office (the location of the problem) and the sensation of los-

ing his "unitary sense" (whole, mind/body awareness) as triggers for discovery and opportunities for Moises to develop his own wisdom. He continually makes Moises the source of healing, even setting up learnings to which he, as therapist, has no access. For example, "Like opening gifts; you think you're through, and then you see something else, waiting to be opened ... and another one."

Gilligan creates a multi-faceted, searching trance, filled with respect for his client. In the brief closing discussion, Moises makes it clear that he enjoyed the experience. Unfortunately, as with any such video, we are left wondering whether this is an effective piece of psychotherapy or merely a lovely display of esthetic expertise presented for the delectation of an audience of connoisseurs. If only we could know the results.

The tape is somewhat marred by an odd dichotomy: For all of Gilligan's grace and beauty while working with the client, his didactic presentation is curiously ugly. During the set-up, he speaks in a halting, monotone voice, with a maddening number of "uhs" and "umms." He clouds his ideas with egregious jargon, such as "pre-linguistic felt sense," "linguaging," and "felt relational field." His teaching would ben-

efit from the directness of speech shown in his therapy.

The tape comes without documentation. It would be more effective with a brief biography, a bibliography, and a transcript.

Quibbles aside, this demonstration is excellent. Though Gilligan's technique is spectacular and deeply informative, his teaching goes much deeper. He shows us that real therapy springs from a profound love of the client. As he makes contact with Moises' heart by gazing, not at his face, but at his chest, he speaks tenderly to children of many ages within Moises. He shows compassion for Moises' craving for respect — to "become someone important" (an idea never mentioned by the client). Deeply trusting his client's ability to heal himself, Gilligan has an amused willingness to get out of the way when the client's wisdom preempts his own: "I sincerely believe that any success in therapy is predicated on the failure of the therapist."

There are too many therapy demonstration videos in the world. "The Problem is the Solution" is one of the few that point us toward helping people heal.

**Reviewed by:**  
Will Handy, LMSW-ACP  
Dallas, Texas

## BOOK REVIEW

### *Broken Images, Broken Selves: Dissociative Narratives in Clinical Practice*

Editors: Stanley Krippner, Ph.D. &  
Susan Marie Powers, Ph.D.  
Brunner/Mazel, 1997

In the book, *Broken Images, Broken Selves*, a broad range of dissociative phenomena are examined across cultures and in relationship to topics ranging from psychological disorders, such as Post-traumatic Stress Disorder, to personality variables, such as fantasy-proneness, to more paranormal events, such as near-death experiences and even alien abductions. The book is a collection of 16 chapters written by various authors. Contributing authors are established professionals with back-

grounds in psychology, psychiatry, philosophy, and parapsychology. Areas of research by these authors are as diverse as the areas addressed in the book, and include hypnosis and hypnotherapy, trauma, dissociative phenomena across cultures, near-death experiences, psychedelic drug use, dreams, Post-traumatic Stress Disorder, Dissociative Identity Disorder, and alien abduction accounts. A few of the topics covered in the book seem fantastic and will undoubtedly arouse skepticism in many clinicians. The authors do not attempt to dispute or confirm the veracity of such extraordinary accounts. It is the premise of the book that client narratives, their "stories" as they relate to dissociative events of all kinds, can serve several important roles in psychotherapy regardless of whether they sound credible or incredible to the therapist. As a therapist listens to and tries to understand

client's experience of dissociative events through that client's narrative, the therapist-client relationship can be strengthened. During this time connections can be made, trust can be established, and the therapist may gain insight into the client's perception, not only of the dissociative experience, but of the world in general. Narratives provide clues to client strengths, fears, problems, and potential solutions. Furthermore, although the narrative itself may be questionable, it may metaphorically represent factual occurrences that have significantly affected a client's psychological functioning.

The book is divided into three parts. The first part examines dissociative phenomena historically and across cultures. The normalcy of dissociation as part of the human experience is discussed. Also, there is a contrast between Western society, which pathologizes dissociative experiences, and other cultures that provide a framework in which such experiences are accepted and even revered. Dissociation is defined and

divided into several different aspects including whether a dissociative experience is "life-potentiating" or "life-depotentiating." Thus, a strength of this book, which is not reflected in its title, is its emphasis on dissociative experiences as being adaptive, positive, and even growth facilitating. The book provides a carefully balanced realistic examination of potentially negative consequences that can result from dissociative experiences. This balanced perspective is maintained through the next section, which consists of chapters on specific dissociative phenomena. In each chapter, both "life-potentiating" and "life-depotentiating" client narratives are presented and discussed with respect to the theme addressed by the chapter. Relevant theories, research and references, and applications in therapy are reviewed. The themes covered are: Post Traumatic Stress Disorder; Dissociative Identity Disorder; near-death experiences; inspiration, mediumship, and surrealism and their relationship to creativity; alien abduc-

*continued on next page*

tion narratives; sleep and dreaming; psychedelic drug experiences; terror of death; and fantasy-proneness. Although some of these are not necessarily dissociative states, they are discussed in relation to dissociative states.

The final section of the book specifically addresses the issue of verity, first from a therapeutic perspective and then with regard to other situations. As was mentioned earlier, in working with client narratives, the truthfulness of such accounts is not especially relevant. Even narratives that appear to be confabulated may hold, at their core, a seed of truth. For example, an alien abduction narrative may actually have its origins in childhood sexual abuse, with the perpetrator becoming the alien. Close attention to the details of narratives may guide the client and therapist to the core issues of the client and to the development of alternate narratives. Of course, in forensic and other are-

nas, historical truth becomes more relevant than narrative truth. These differences in historical and narrative truth are addressed, as are the implications and relevance to the psychotherapy process.

Throughout the chapters, the manner in which issues are examined is thought-provoking, informative, interesting, and useful in working with clients whose own personal narratives reflect some of the themes covered. While the book seems to be most suitable for clinicians, there are several chapters that seem appropriate for clients, as well. Since the book is a collection of the work of various authors, a few chapters are difficult to follow, but overall the book is easy to read and comprehend. *Broken Images, Broken Selves* will be stimulating reading, especially for clinicians who are interested in the many different aspects of dissociation.

**Reviewed by:**  
Lisa Vinuesa, M.A.  
Dallas, Texas

# BOOK REVIEW

## *Managed Mental Health Care: Major Diagnostic and Treatment Approaches*

Editor: Richard Sauber, Ph.D.  
Bristol, Pennsylvania: Brunner/Mazel  
1997

If you have begun reading this review, the subject of this book is more interesting to you than it initially was to me. Aside from one of my daughter-in-law's textbooks on root canals, I can think of nothing that interested me less, so imagine my surprise to find a compelling, helpful, well-written book on this subject.

The editor has assembled 13 articles dealing with the practical aspects

of working as a mental health professional in a managed care context. The articles cover such topics as employee assistance programs and how to effectively intervene in that context; the psychiatrist's changed role in the managed care era; brief group therapy, marital and family approaches; children's mental health services; and the treatment of adjustment disorders, depression, anxiety disorders, and alcohol problems. The articles are clear and readable and the suggestions are concrete and helpful.

Included in this volume is an excellent article by Luciano L'Abate in which he addresses the paradox of change. He talks about how therapists are certain that change can and should happen for our clients, however, it seems that therapists resent and resist the changes that have been foisted

*continued on next page*

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

### *Metaphor in Psychotherapy: Clinical Applications of Stories and Allegories*

by Henry T. Close, Th.M.  
Impact Publishers

(BooksWithImpact@compuserve.com)  
P.O. Box 910, San Luis Obispo,  
CA 93406

\$34.95 hardcover  
395 pages, including index

Henry Close orients *Metaphor in Psychotherapy* to "the heart." He believes learning takes place at the affective level, the experiential and feeling parts of each of us. The participatory reaction elicited by a well-crafted story leads learning and

change. Close is a pastoral counselor who has contributed a number of Case Reports to the *Milton H. Erickson Foundation Newsletter*. He now shares a full book of his interesting and clinically relevant interventions demonstrating the use of allegories and metaphors.

In this loosely constructed collection of stories, anecdotes and discussion of principles, Close presents a case and describes his goal for that patient. He uses a variety of frameworks in the descriptions and in the way that he approaches each presenting problem. Flexibility is obviously his strength. He creates interventions wrapped in stories as a central and fundamental element of his therapy.

Principles of therapy are richly illustrated with a wide range and depth of presented complexities. Virtually the only flaw in the book is

that sometimes the reader is left wondering about unmentioned details. The stories that Close uses are easily read, easily understood, and almost all have an easily felt "tug at the heartstrings." It becomes obvious how his stories and allegories engage a particular patient and lead to therapeutic change. The changes, in some cases, are further analyzed and discussed, in logical and meaningful commentary.

Close uses elements other than simple words for his communications. Conversational trance is clearly an integral part of his work. He uses nonverbals as well. One anecdote addressing childhood fears involves a main character of a "slimy green monster." Close describes how, when he told this story, he sat on the floor with the children and initially made contact with their fears by talking in a scary voice. As he re-framed the situation, his tone of voice changed. He named the monster "Jimmy" and described how this monster still sat on his mommy's lap, watched cartoons and ate lollipops. It's hard for any child to maintain fear in the face of these friendly details! Similar to Erickson, Close steps outside other commonly taught principles. He frequently tells stories about himself. The opening metaphor is a lovely story about a boy who carefully constructed a kite. This story which is

replete with love, affection and respect for relationships was originally written as a wedding present for his wife. Sharing stories about himself not only adds to the humanness of therapy, Close also provides an excellent role model. Life is wonderful and yet can be hard. How we deal with the realities within our lives determines, to a great extent, the kind of life we will have.

This book is packed with gems of wonderful information. I strongly recommend that readers abandon their cognitive style of understanding and simply read and re-read this book. With a few short strokes of his pen, Close has the ability to captivate and engage his audience. The reader eagerly waits for the next scene, the characters seem to come to life and developments seem to occur on their own. The multiple levels of communication and creative ways of connecting, understanding and modifying continue to entrance as the reader is attracted by gem after glittering gem of wisdom.

In the book Close quotes Erickson when he says, "Therapy should above all else be charming" (p. 4). *Metaphor in Psychotherapy* is exactly that!

**Reviewed by:**  
Betty Alice Erickson, M.S.  
Dallas, Texas

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

### *The Mud People: A Parable of Recovery*

by Laney Mackenna Mark  
Warner Books, Inc., 1998

*The Mud People: A Parable of Recovery*, by Laney Mackenna Mark, is a brief and lyrical novel that addresses the emotional, physical, and spiritual process of surviving and healing the wounds of abuse. Using the healing journey of a young, "mud-covered" girl as a metaphor for the therapeutic process, the author gently weaves an emotional connection with the reader as she describes the many feelings, choices, and steps that lead the main character out of the shadow of abuse into a lighter, happier world.

Mark has crafted her story in flowing and compassionate fashion. The tale begins with the introduction of a young girl, Kaila, who lives in a dark and shadowy forest with her "mud family." Every person in Kaila's life, including Kaila herself, is covered in a layer of thick and painful mud and lives in a world of unhappiness and abuse. Kaila watches and wonders about the beautiful and clean river that runs by the edges of her forest home, and at last finds the courage to venture out to its banks. From there, she meets a gentle guide who she learns to trust enough to commence a journey of healing down the river. The remainder of the tale relates the process and outcomes of Kaila's journey, and what happens when she returns to her mud family cleansed of her mud. The book is enhanced by several delightful illustrations by Juliana Hamilton Chase.

In her preface, Mark acknowledges herself as a survivor of abuse. She immediately connects with her intended audience by stating "[i]f you have experienced abuse or harm in any way, know that I have written this story for you" (p. 9). It is a story for adults, not children, but may speak to the hurt that many experienced as children. This book is not for the strictly practical-minded, or those who can not appreciate the spiritual aspects of the author's view of healing. *The Mud People* is strongly poetic and symbolic, and although it is spiritual rather than religious in content, powerful religious symbolism is woven throughout the story. For those who have experienced abuse, *The Mud People* may serve as an aid to self-awareness for those in the healing process. Practitioners may look to this book for insight as to how clients who are survivors of abuse may perceive or experience themselves and the therapeutic process.

**Reviewed by:** Valerie Morgan, M.A., Houston, Texas

### **Managed Care**

*continued from page 17*

upon them. How therapists adapt to the new managed care environment, to a large extent, helps to determine the effectiveness of their practice. He suggests that rather than bawailing the limits placed upon them, therapists need to take this limit-setting as a challenge and find new methodologies that work more efficiently. He addresses some of the possibilities for growth that managed care encourages.

Darren W. Adamson and Michael D. Gardener address the nitty gritty aspects of being a managed care provider, going as far as giving detailed do's and don'ts for applying for preferred provider status. They give helpful advice on maintaining close ties with EAP care case managers and working collaboratively with them. Their advice is invaluable.

Henry I. Spitz's article on brief group therapy, again is specific and detailed. It provides a therapist with practical information on different types of groups and how to determine such things as whether they should be time-limited or not and whether they

should be heterogeneous or homogeneous. He even includes information on tracking of the group and the individuals for purposes of accountability to the managed care provider. Luciano L'Abate's article on distance writing and computer assisted training offers new approaches to providing mental health intervention in an economical manner.

There are numerous other articles that are similarly helpful. This is a book filled with optimism. Its overall message is that managed care is an opportunity for growth and change not only in clients, but in the profession and the effectiveness of mental health care practitioners. As a group, these articles encourage creativity and exploration.

Perhaps my experience with this book is a metaphor for the message of the book. Just as a task became a delight for me, new challenges for mental health practitioners can become an opportunity for us and our clients.

**Reviewed by:**  
Rona Michelson, DSW  
Modi'in, Israel



such a strong reaction just hearing of his work, his approach, that I have likened to a breath of fresh air blowing across the traditional psychotherapy trail. I was a young therapist at that time and was not comfortable with the traditional pathology, problem focused way of looking at people. When I read Erickson's material it was not the traditional approach. It was that turned inside out. The whole idea of discovering the answers within was so refreshing. His convincingly powerful assumption of the health within people was such a surprising thing. Not only was I struck at a professional level, but also at a personal level. My awareness increased after reading his stories, especially the ones about his children. These stories illustrate how a parent can give children permission to be unique, think their own thoughts, solve their own problems. These are based on the powerful belief that answers and health are within. At a number of levels I would ask myself what must that be like. I would go into a little fantasy imagining what it must be like and put myself in a Milton Erickson child trance. I later realized he said, "It's never too late to have a happy childhood," and I would have it, imagine it, feel it and let myself learn it at more than just a conscious level. So, in a way it was as if I had adopted him in the back of my mind as a parent long before I actually physically met him.

**MJ:** *I have the idea that Erickson presided over your marriage ceremony.*

**CL:** Well, he did, but we were already officially married. We had to get married a couple of times to get all the bases covered. Steve called and asked if it would be all right if we came to participate in the training and have Erickson do a ceremony. He said yes and hung up abruptly as he was prone to do. Steve remembered that we were bringing some friends and did not think we should show up with them unannounced, so he called back and this time Mrs. Erickson answered. He said we were planning to come and we were bringing friends. She said, "Well, I don't know. That week is really busy. Maybe you shouldn't even come at all." Steve said, "Could you go and check the book to make sure he is not too busy because we would really like to come?" She put the phone down to go get the book. Steve discovered that Erickson was listening the whole time

when he suddenly said, "I bet you're glad the first time you called you got me instead of her." Mrs. Erickson came back and hesitatingly said that we could come. Her role was clearly to guard Erickson's time and energy.

**MJ:** *Tell us about the ceremony.*

**CL:** We went to see him with our friends in tow. I knew that he had sent people to climb Squaw Peak frequently. I climbed Squaw Peak before I met him, so my first words to him were, "Hi, I am Carol Lankton, and I climbed Squaw Peak yesterday." I was hoping he would approve of me. He did not say anything at that moment. Later in the ceremony he said, "Since you climbed Squaw Peak yesterday, you will be interested in seeing this." He took a piece of Nerf granite off his shelf and threw it at me with such force that it surprised me. No words were exchanged. However, I felt the most impacting effects of his undivided attention. It was extremely validating to be held with the positive regard beaming specifically to me as I went through my levels of learning about the rock.

I went into several trances that day. The first was when Erickson came into the living room wearing purple fuzzy slippers, that came creeping around the room like giant caterpillars. The visual stimulus shocked me. When he arrived in the living room, I was just standing there deep in some kind of expectancy trance. Then we went out to Erickson's garden to perform the wedding ceremony. He showed us his favorite Palo Verde tree with a parasite growing on it that he called Arizona Mistletoe. I was a little mixed about what I expected. I did not take into account that I would not understand things he said. He was speaking through paralyzed lips. He had an unusual choice of words that you do not hear every day. He was talking but I was not getting it. I was blessedly ignorant at that moment, but Erickson said, "The first thing I want to do is admonish the two of you because you are both blind." I was just watching Erickson. I was stuck in tunnel vision. My thought was, "Oh no, I'm not understanding what he is saying and I really want to because these clever verbal things are something that I don't want to miss."

Erickson went on to say, "It will clear up. You will begin to see each other's faults. When you do, don't either of you give up any of your faults because you are going to need them to understand the faults of your partner." Then he stopped, his eyes twinkled and he seemed to say, "Now

figure that out." The essence of that paradoxical utilization, positive frame around what could just as easily be taken as a purely negative thing was so refreshing. He talked about other things that we remember a bit of, not as much as we wish we did. Then we went into the office for the throwing of the rock episode in my third trance of the day. He started telling stories about people building intimacy, and connecting in ways that served them well and lasted a lifetime. He also handed me a fertility statue that he thought I might be interested in holding, seeing, and getting some ideas about it. It was a very interesting, powerful number of days.

**MJ:** *That was the first time you met Erickson?*

**CL:** It was the first and only time. He died, unfortunately, in March of 1980. So, when he threw that granite at me, he did not say "Do not take anything for granite," but I was thinking that. Yet one of the things I took for granted was that I would be seeing him for a long time. It is funny that many people that have wanted to meet Erickson thought that he was dead years before he had died. I am just glad I had the opportunity.

**MJ:** *What is your favorite Milton Erickson story?*

**CL:** That is a hard one. There are so many to choose from. I am reminded of frequently told stories in which Robert Erickson would relate how he would ask his father for advice when he encountered problems. Just hearing those stories really shocked me. I could not believe he was able to ask his father for help on any issue. Robert said when he would go to his father, he always helped him. The answer was always the same. He would point at Squaw Peak and say, "climb."

It would be the permission, the directive, the start of the process by which he would go and he would climb the mountain. Robert would focus his spotlight of consciousness on cactus blooming, or lizards across the path, or a breeze blowing, or where he was going to put his next foot. I imagine he sometimes grumbled about why his father did not just tell him what to do instead of sending him up this stupid mountain again. The thing that I am convinced Robert took unconsciously was the powerful sense of being believed in by his father. Robert said that he never climbed down from that mountain without a change of perspective. The

problem would either be forgotten, changed or somehow solved or altered. We do not have a mountain like that here in Pensacola, but we have a beach that is a good perspective change.

**MJ:** *How long have you and Steve offered the training in Pensacola?*

**CL:** We joined forces about 19 years ago. We were living in Ann Arbor, Michigan, the first year we got married because that's where Steve lived. At that time we were primarily doing communication training that more exemplified the "Practical Magic" material because he had just written that book. Immediately, we took the Ericksonian angle of the training more than the neurolinguistic aspect. We started having day-long intensive training sessions using metaphor, goal-oriented metaphor and hypnosis. These are aspects of Erickson's work that were not included in other training programs. This became our focus early on. We developed different exercises and the specifics of the course by the time we moved down to Pensacola.

**MJ:** *Tell me about some of your favorite "ambiguous assignments" that you have given clients.*

**CL:** I like to have people doing something, usually some task. My favorite assignments include symbolism that is sometimes interpreted differently than I would have expected. That is always delightful. They do not have to be inventive or wild. I do not try to get people to do crazy things.

There was a specific case that led to the development of the term "ambiguous function assignments." I had done everything I knew how to do for this client. I had said everything I knew how to say. But she did not feel like it was enough. She did not feel finished, so we needed some other event to punctuate what had happened, and to help her activate new solutions. I consulted with Stephen, and asked what else he thought would help this client who was unwilling to terminate. He cooperated by going inside and collecting his "Erickson ego state." He came back and said, "I would have the lady carry a heavy weight and walk around the block three times until she could tell me why I had sent her to do that." Immediately, I recognized that it would be interesting and probably useful, but definitely scary for me. I did not know how she would react, or if she might just flat out refuse to do

continued on next page

**Interview** *continued*

it. Then I thought, "Why wouldn't I? Why can't I? What prevents me?"

These are questions Erickson might ask, so I thought if I was going to go around saying, "I am Ericksonian," I would have to push past my comfort range. That is sort of what being Ericksonian means to me — being flexible enough to find a way to do what the client needs. I called her and said, "I want you to show up for our last session today wearing comfortable clothes, walking shoes, and be prepared to change." She did not object. When she came to the door expectantly, I met her bringing two twelve pound barbell weights. I explained that she could carry one or both around the block until she could return and tell me what she had learned. She looked at them for a second, took one weight, turned around and was gone. It surprised me that she went so easily. She was pacing the street while I was pacing the office. I was wondering what she was going to say, of course I could not anticipate her response. I was impressed to realize how much readiness she had when she named some good reasons why these heavy things she carried around were unnecessary, and that she could put them down. It sounded like good valuable learning but I realized immediately that it would be a shame to stop so soon.

I told her I am sure there is more that is really important that you could get out of carrying these. Maybe you would have had a deeper learning had you taken both, but you are probably glad you took only one. She defiantly took the other one, as well, and turned to walk again. She kept coming back with better, deeper and more emotionally intense and relative answers each time. She went a total of four times. The last time we replaced the weights, I handed her a crystal weightless glass filled with sand dollars. When she came back, she said tearfully and very emotionally, "When I took this out at first I was angry because I felt, why do I have to have your answer? I almost just wanted to throw it down and break it, but I didn't because I looked up to the trust you had in me to carry this precious delicate thing. I realized that I have a precious part of me that is equally valuable and I don't honor and carry that with much care." That seemed important. At that point, I said, "Great, why don't you sit down, close

your eyes and we will review these things that you have learned." The answer was whatever she made of it. I detailed in trance how a person takes care of the delicate part of herself, and learns how precious it is.

**MJ:** *Can you relate Ericksonian thinking to parenthood?*

**CL:** I cannot imagine how I knew enough to be a therapist before I became a mother. I have learned so much from that process. Now my children are 15 and 12. There are a whole new set of things I am learning. My theory on why Erickson was such a good diagnostician and aware of needs at different ages, was that he was always paying attention to the way life unfolds. He watched the way genetic potential comes to fruition as he watched children at every age. Both of my children were very articulate. They each came to me when they were hardly big enough to walk and said things like, "You know I want something, but I don't know what it is. Nothing is really wrong, but I am just not quite as happy as I want to be." I would listen to this existential angst and think, "It sure starts early." It was really surprising to me that children would know that kind of process, which I immediately recognized. I do not think I ever thought to express it to my parents. I did not ask for it to be normalized like that, utilized, and congratulated. You do not know what you are going to learn until after you have found it out, but you can focus the spotlight of consciousness on this matter of, "What do I want?" You can expect that the knowledge and awareness will come. Be comfortable while you wait, knowing that you do not have everything you want, but it will come.

**MJ:** *What do you see happening to therapy in the future?*

**CL:** It depends on whether we are talking about managed care therapy or the real thing. I like the way Erickson blurred the boundary of what hypnosis is, as opposed to just an altered state of consciousness. I think it was great that the focus of therapy shifted from finding out what is wrong with people, to a context for people to figure out what they want. It would be great if therapy was known as a place to help you figure out what you want, as opposed to therapy being the place where you come to have some expert tell you what is wrong with you. I think people are rusty at wondering. If they do know

what they want, then they are lacking permission to feel it is okay to proceed toward that goal because it might be selfish.

I have had people sit in my office and tell me, "If I am seeing you that means I have a big problem." I would like people's idea of therapy to change. We should help people shift from the question, "What am I supposed to do?" to, "What do I want to do, and how do I want to handle the situation?" It seems simple and obvious, once you look at things that way. I do not know if that is going to be the future of therapy. I would certainly applaud it. I would like to see therapy be instrumental in making this

become the cultural assumption or expectation that all parents are conveying to their children. The definition of mental health is not the absence of problems. It is the sense that you will be able to solve problems in some appropriate way. It is the best you can put together at that time, taking into account your needs and the needs of others. It is belief in the presence of a storehouse of learning. This learning includes potentials and abilities that you believe in. It will increase the more times you have had the opportunity to use your resources, knowing confidently that you can do it again.

**Donations**

The Milton H. Erickson Foundation, Inc., would like to thank the following colleagues for their generous donations since the last issue of the *Milton H. Erickson Foundation Newsletter*: Scott B. Amos, Student, Julie W. Harig, M.A., Selma Ingber, M.S.W., Daniel Levinson, M.D., Kirke McVay, M.A., CCMHC, Carol Murphy, M.S.W., M.A. Quinteros, L. Roberts, Diana L. Stromsky, M.A., Richard Whitmire, M.S.W., James L. Widerman, Ed.D. We also would like to thank A.J. Sherr and Dr. Roberto Bacci Bonotti, for their contribution to the Archives Fund. We thank you for your continued support of the Foundation and its activities.

The Foundation is engaged in a massive project of making new masters of tapes in the Erickson Archives to preserve them into the new millennia. For those interested in participating in The Archives Fund Raiser, the Erickson Foundation has bricks from the former Erickson home still available. With a donation of \$25 U.S., you will receive a commemorative brick; with a donation of \$100 U.S., you will receive a limited edition commemorative brick (numbered and signed by Mrs. Elizabeth Erickson); and with a donation of \$250 U.S., you will be sent a limited edition commemorative brick and a pencil sketch of Dr. Erickson's "Home of Hypnosis," 32 W. Cypress Street in Phoenix. In the United States, please add \$7 U.S. for postage and handling charges. All foreign requests, please add \$20 U.S. postage and handling charges. We thank you for your help in preserving audio and videotapes of Milton H. Erickson, M.D.

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