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I N T E R V I E W

AN INTERVIEW WITH PAT LOVE, Ed.D.

Interviewed by Richard Landis, Ph.D.

Pat Love, Ed.D., a graduate of West Virginia University, began her professional career as a Counselor Educator at Texas A & M University, Commerce, in the field of Marriage and Family Therapy. She went on to co-found the Austin Family Institute where she continued to train, supervise, write and lecture. She is also a charter faculty member of the Imago Institute for Relationship Therapy.

Dr. Love has published several professional articles, book chapters, and authored/co-authored The Emotional Incest Syndrome, Hot Monogamy, The Truth About Love, and How to Ruin a Perfectly Good Relationship. She has appeared on numerous television shows, including repeat appearances on Oprah Winfrey, the NBC Today Show, and CNN. She is regularly fea-

ured in magazines, some include Cosmopolitan, Glamour, Good Housekeeping, New Women, Self, Men's Health, Men's Magazine, Ladies Home Journal, Redbook, New York Times Sunday Magazine, Good Housekeeping and Reader's Digest. Love is also a frequent honored presenter at the Milton H. Erickson Foundation conferences.

Most recently, Love has introduced Neuro Affect Therapy as a major contribution to couples therapy. (For more information on Neuro



Affective Therapy, please see Sharon McLaughlin's audio review of Love's workshop at the Couples Conference

See INTERVIEW on page 22

December 2003

Brief Therapy Conference: Essence and Evolution

San Francisco

Space is still available for the upcoming *Brief Therapy Conference: Essence and Evolution*, December 11-14, 2003, at the San Francisco Hilton and Towers, in San Francisco, Calif. Sponsored by the Milton H. Erickson Foundation, the *Brief Therapy Conferences* are the only multi-disciplinary conference on brief therapy in the world. Last year's *Brief Therapy Conference* (Orlando, December 2002) was the highest rated Conference in Foundation history.

The Conference offers a maximum of 31 Continuing Education Hours. Registration must be done onsite at the San Francisco Hilton and Towers (333 O'Farrell Street; Tel, 415/771-1400), Thursday morning, December 11, 2003, beginning at 6:00AM. Registration fees for the full Conference for all attendees is \$599. For those unable to attend the full Conference, day tickets are available onsite for \$175 per day.

The Conference consists of keynotes, workshops, topical panels, supervision panels, dialogues, conversation hours, clinical demonstrations and solicited short courses. The faculty includes: Danie Beaulieu, Jon Carlson, Frank Dattilio, Robert Dilts, Yvonne Dolan, Betty Alice Erickson, John Frykman and Murray Korngold, Stephen Gilligan, William Glasser, Mary Goulding, Michael Hoyt, Stephen Lankton, Pat Love, Scott Miller, Michael Munion, John Norcross, Christine Padesky, Michele Ritterman, Ernest Rossi, Francine Shapiro, Dan Short, R. Reid Wilson, Michael Yapko, and Jeffrey Zeig. Keynotes will be given by Albert Bandura, Robin Lakoff, Donald Meichenbaum, and Frank Sulloway

To receive the full conference brochure contact The Milton H. Erickson Foundation, Inc., 3606 N. 24th Street, Phoenix, AZ 85016-6500; tel, 602/956-6196; fax, 602/956-0519; E-mail, office@erickson-foundation.org Please include your complete mailing address with your request. Visit our Web Site, www.erickson-foundation.org/btrfther.htm for a registration form and the latest Conference information.

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EDITOR'S COMMENTS

Recently, one of my students asked me what I thought brief therapy is. I found it both a simple and a profound question. It was simple if I just looked at what the surface question implied: What number of sessions or elapsed time is needed for therapy to be considered brief? Six? Twelve? Or "Less than a year of sessions? Before the insurance runs out?" I saw the question as profound if both *brief* and *therapy* were taken into consideration. Simply stated, for me, therapy, as provided by ourselves or through others assisting us, is the means for us to return to a balanced state after we have developed a rigid unbalanced reflex. Therefore, for me, brief therapy is the act of doing something that breaks the inertia of the old unbalanced pattern and redirects the pattern back to center. My goal in doing brief therapy is not necessarily to fix or cure the problem, but to make the system fluid again so the natural process of balance can more easily occur.

In the service of that student's question, we have amassed some wonderful articles, columns and reviews in this issue, which emphasize brief elements that can be used in the perturbing of a rigid inertia.



I have long been enamored with the ins and outs of the human condition. I have found that the more I understand the effects that our biology has on our human differences and similarities, the more magical being human appears to me. Therefore, I asked Pat Love to spend some time with me to describe her adventure into the utilization of her understanding of the biological nature of humans in the service of brief interventions with couples. Her interview is followed by a review of her taped provocative and exciting workshop that she presented at the *Couples Conference* in San Francisco in June of 2003, *Using Neuro-affective*

Therapy to Help Couples.

The neurological perspective is further explored in Alexander and Annellen Simpkins' research review on *Some Neurological Evidence for Fostering New Learnings in Clients*. This is a wonderful article by an incredible team of clinicians and researchers. I encourage you to read more about them in the *Contributor of Note* column by Roxanna Erickson Klein. They are truly a gift to the field.

Presentations by Rossi and Erickson act as a bridge between the research and practical applications. Ernest Rossi approaches the issue of neural growth in his clinical demonstration videotape *Facilitating the Creative Dynamics of Gene Expression and Brain Growth*, reviewed by Deborah Beckman. At the *Brief Therapy Conference* in Orlando Florida in December 2002, Rossi gave an elegant demonstration that utilizes his models of the plasticity and the heuristic state of the human brain when aided by hypnotic patterns.

Maria Escalante Cortina's evocative review of Erickson's presentations at St. Luke's Hospital from 1958 brings a clean edge to the pragmatic application of hypnosis as it applies to medical practices. Here, encapsulating his years of research, Erickson

speaks to medical professionals about how "...hypnosis is primarily a method of communicating ideas to people..." Erickson then explains the nature of the ideas that are so important for physicians to communicate.

The remainder of this newsletter presents practical ideas and techniques: how to use brief interventions to help jog the inertia of the rigid reflexes. Will Handy's review of Christine Padesky's audiotape *Constructing New Core Beliefs*, focuses on the content of such communications of which Erickson spoke. In the *Facets and Reflections* section, Francoise Quelin provides a monumental behavioral metaphor that extends the legacy of Erickson. *Case Reports* describes an intervention that appreciates the difference between reflexive versus mindful responses in keeping a family united.

As I reviewed all of the material from which to choose for this newsletter, I was struck by the sheer volume of excellent research-based and creative training that has taken place over this last year. With that in mind, I am excitedly looking forward to this December's *Brief Therapy Conference* in San Francisco, and I hope to meet many of you there.

Richard Landis Ph.D.
Laguna Niguel, Calif.

The Milton H. Erickson Foundation NEWSLETTER

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VOLUNTEER FOR COUPLES CONFERENCE 2004!

The Milton H. Erickson Foundation is seeking full-time graduate students and interns to assist the staff and faculty at the upcoming Conference, *Challenging Couples, Challenging Therapists*, March 26-28, 2004, at the LAX Marriott Hotel, Los Angeles, California.

Volunteer duties include assisting with registration procedures, continuing education, assisting faculty and monitoring meeting rooms. In exchange for the registration fee volunteers must send a \$75 deposit that will be refunded after successful completion of volunteer duties.

Full-time graduate students and interns are the first to be accepted as volunteers. If needed, professionals will be accepted as the meeting draws closer. Volunteer duties are assigned based on the needs of each session, the faculty and staff. Accepted volunteers must attend a MANDATORY volunteer meeting on Thursday, March 25, 2004, at 3:00 PM. To volunteer, please send a letter requesting a Volunteer Application to: The Milton H. Erickson Foundation, Inc., ATTN: Volunteer Coordinator, 3606 N. 24th Street, Phoenix, AZ 85016-6500. For questions and information contact the Erickson Foundation: Tel, 602/956-6196; Fax, 602-956-0519; E-mail, karen@erickson-foundation.org

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COUPLES

CONTRIBUTORS OF NOTE

C. Alexander Simpkins Ph.D. and Annellen M. Simpkins Ph.D.

By Roxanna Erickson Klein, RN, Ph.D.

C. Alexander Simpkins, Ph.D. and Annellen M. Simpkins, Ph.D. are a husband and wife team. Their interest in psychology began as a deeply felt concern followed by a commitment to have a positive effect in the world. They became interested in the unconscious mind early on as a primary source for positive potential, and have been pursuing this interest in several forms, through hypnosis, psychotherapy, and Eastern philosophy for many years.

In their early years of training they decided to try to deepen their learnings by seeking out personal teaching from experts in the field of psychotherapy and hypnosis. As part of an independent study masters' degree program through Goddard College, they traveled to leaders in the field. Their independent studies continued at the University of Florida where they had private meetings with a number of superb teachers, including Arthur Combs and Sidney Jourard. This background provided a platform of understanding of humanistic therapy, self-disclosure, and self-actualization. There, at the University of Florida they ran groups under supervision to put some of the theories into practice and also studied behaviorism and gestalt therapy, comparing and contrasting methods.

Next they traveled to Baltimore where they began a long-lasting relationship with Jerome D. Frank, M.D. Ph.D., at Johns Hopkins Medical School's Phipps Clinic. Frank was involved in the latter years of a 25-year study of psychotherapeutic effectiveness. He taught the Simpkins to open their minds and look beyond the taken-for-granted level, to search for more universal underlying factors. They interned on the wards at Phipps and met with Dr. Frank regularly to discuss psychotherapy. They also interned at Sheppard Pratt under the guidance of Lawrence Kubie.

Their first hypnosis teacher was



G. Wilson Shaffer, retired Dean of Johns Hopkins University, Director of Training in Psychotherapy at Sheppard Pratt, and Director of the Hopkins Counseling Center for many decades. Learning to recognize and trust the client's internal capacity and potential under his supervision, they began their first hypnotic work with clients.

They came to San Diego for further development and higher degrees. During their graduate work at United States International University (USIU), they began their studies with Milton Erickson in 1976. They would never forget their first appointment, scheduled for 11 a.m. on a Monday. They expected it to last an hour or so at the most, but ended up staying for a week, attending his fascinating seminars. Every time they traveled to study with Erickson, they witnessed him disclosing his vast depth of knowledge in subtle and sensitive ways. Each seminar was unique, but the threads of the tapestry of his teaching led to many theoretical interpretations. The Simpkins also studied with, learned from, and were supervised by Ernest Rossi, who expertly helped to guide their graduate research comparing insight therapy to hypnotherapy. His creative and insightful interpretations of hypnosis helped to broaden their own understandings. Hypnosis later became one of their primary tools of therapy as they worked with clients at the USIU Counseling Center and later in private practice.

The work with Erickson and Rossi bridged their other research interests that include brainwaves and mental states, creativity, and creative learning. Additionally, another important tool for the Simpkins' inquiry into the unconscious has been through meditation, Eastern philosophy, and learning the martial arts. They became fascinated by the ancient understandings of mind in Buddhism, Zen, Taoism, and Confucianism. They have been writing books on these topics and teaching martial arts and meditation for many years.

Balancing their private practice, which specializes in hypnotherapy and meditation, they have evolved

writing as a primary occupation. Authors of eighteen books, with several more in process, they have written on self-hypnosis: *Effective Self Hypnosis: Pathways to the Unconscious* with a paperback version, *Self Hypnosis Plain and Simple*. This book has been translated into Italian, Spanish, and Bulgarian. They have also written a book on psychotherapy, *Timeless Teachings from the Therapy Masters*, which includes a large section on Dr. Erickson. This book won first-place from the San Diego Book Awards in 2001. Their early Eastern philosophy books were a series on meditation, *Principles of Meditation, Living Meditation, and Meditation from Thought to Action* and *Zen Around the World*. They have written two series on Eastern philosophy: a Simple series, *Simple Zen, Simple Buddhism, Simple Taoism, Simple Confucianism*, and

See CONTRIBUTOR on page 8

NEW CONFERENCE ANNOUNCEMENT!

Challenging Couples, Challenging Therapists

The Milton H. Erickson Foundation, Inc., with organizational assistance by The Couples Institute (Menlo Park, Calif.), is sponsoring the next Couples Conference, *Challenging Couples, Challenging Therapists*, March 26-28, 2004 (Friday through Sunday), at the LAX Marriott Hotel at the Los Angeles International Airport. The Couples Conferences have become a leading vehicle for learning the applications and the latest research on facilitating treatment with couples.

Learn to work with hostility, violence, affairs, depression, narcissism, divorce, deception, addictions, PTSD, and passive-aggression.

Meeting the challenges are Daniel Amen, Ellyn Bader, Stephanie Brown, Helen Fisher, Pat Love, Cloé Madanes, Peter Pearson, Esther Perel, Terry Real, Janis Spring, and Jeffrey Zeig. Keynotes will be given by Daniel Amen, Helen Fisher, Pat Love, Cloé Madanes, Terry Real, and Janis Spring.

Additional Special Programs!

A six-hour workshop entitled *Laws & Ethics: Update for Clinicians Working with Families and Children* is included in the Conference and will run concurrently with the Conference sessions. Attendees may elect to register for this course only. Steven Frankel, Ph.D., J.D. will present the workshop on Friday, March 26. This course covers topics necessary for professional license renewal.

Domestic Violence Workshops I and II, will be offered on Sunday, March 28, and will be presented by Cloé Madanes. As of January 1, 2004, California MFT's, LCSW's, and all Licensed Psychologists are required to take a course in spousal or partner abuse. The *Domestic Violence Workshops I and II* will cover the required topics.

The *Challenging Couples, Challenging Therapists* offers a maximum of 19.0 Continuing Education Hours (20.0 for those attending the full conference including the Laws & Ethics Track). **Newsletter Readers: See page 3 for a special registration offer!** For a complete brochure contact The Milton H. Erickson Foundation, Inc., 3606 N. 24th Street, Phoenix, AZ 85016-6500; Tel, 602-956-6196; Fax, 602-956-0519; E-mail, office@erickson-foundation.org. To view the Conference Schedule at a Glance, visit the Conference web page: www.erickson-foundation.org/challenge.htm

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The Milton H. Erickson Institute of Dallas

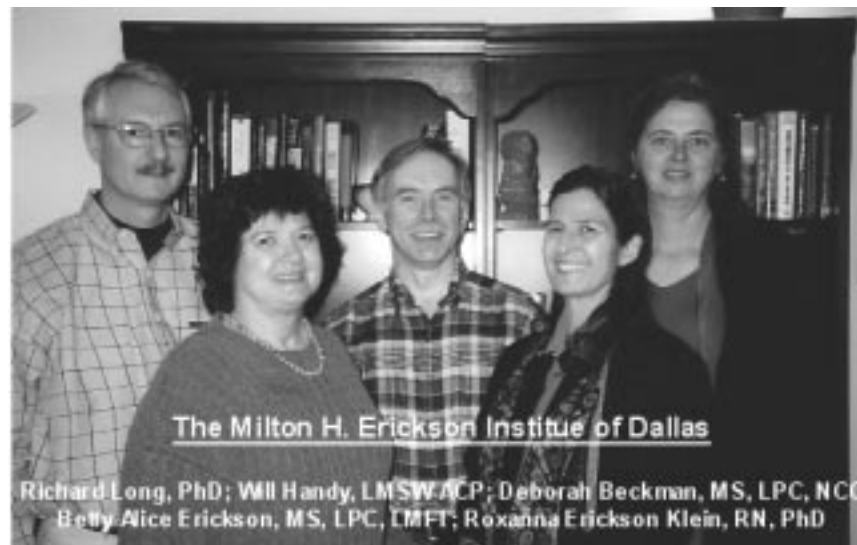
Interviewed by Marilia Baker, MSW

The MHE Institute of Dallas is unique among the other 108 institutes around the world; two of its founding board members can be said to have studied with Milton H. Erickson, M.D., from the day of their birth! Actually, one could add, they probably heard and became familiar with their father's memorable hypnotic voice before their birth.

The idea of establishing an Institute in Dallas emerged from Betty Alice Erickson's monthly hypnotherapy seminars. A small but enthusiastic group of professionals had met monthly for several years and in Fall, 1997, decided to create an Institute. Deborah Beckman M.S., and Will Handy, L.C.S.W., offered their services as teaching faculty which allowed emergence of a vision for the Institute to focus on training in Ericksonian approaches. The Board of Directors was rounded out by co-seminar member, Richard Long, Ph.D., Dan Short, Ph.D., Betty Alice Erickson, M.S., and Roxanna Erickson Klein, Ph.D.

The Institute training brochure best describes their vision: "Rather than relying on a formula or set of rules, Erickson developed treatment from his own vivid, astute observations of the person in front of him. Our training strives to teach the same standards: to develop each participant's ability to create a unique therapy for their clients." Following the guidelines established by the Erickson Foundation, and with the invaluable and generous input of Rubin Battino, M.S., president, the Milton H. Erickson Society of Dayton, Ohio, the Dallas Institute created beginning, intermediate and advanced training workshops with 120 hours total class time.

The MHE Institute of Dallas continues to provide monthly meetings, some as a forum for each attendee to



teach a particular area of expertise. Other meetings serve as a means to hone hypnotic skills. In these, a client, from the practice of a regular attendee, agrees to be presented, similar to a patient being presented at Grand Rounds in the medical arena. Each professional provides a healing trance for the client. Afterward, the client critiques what was received and after the client leaves the room, members discuss their own and other people's approaches. As Deborah Beckman says, "This on-going opportunity for refinement of professional clinical skills, with an emphasis on hypnosis, provides a rich learning atmosphere and a spirit of *camaraderie*."

Beckman, institute training coordinator, is a therapist in private practice in Dallas and has distinguished herself for developing an effective method of treating sleep disturbances and creating individualized therapeutic metaphors. She has presented at major conferences, including the 8th Erickson Congress (2001); Rome (2002), and at the 2002 Brief Therapy Conference in Orlando. She is scheduled to present at the 2003 Brief Therapy meeting in San Francisco. Beckman is currently writing a self-help book on sleep disorders, based on her methodology of working with these patients.

Will Handy, also a primary faculty member providing training, is described by his fellow team members as excelling in making

Erickson's philosophy intimately available to clients and peers alike. The brochure describes his unique style: "Will weaves the (Ericksonian) method into a more traditional-looking session, only occasionally using outright hypnosis." Will has a private practice in addition to working with HIV patients at a mental health agency where he also supervises therapists.

Richard Long, Ph.D., clinical psychologist, is particularly talented in working with children and adolescents. He is in private practice while holding a teaching position at Southern Methodist University. Richard's expertise, academic focus and years of clinical work, provide both a balance and broader perspective for evaluation of services and activities of the Institute.

Dan Short, Ph.D., former executive editor of the Foundation *Newsletter*, resigned as a founding board member when he moved to Phoenix to become associate director of the Foundation where he has focused on developing the Erickson Archives.

Roxanna Erickson Klein, Ph.D., is a registered nurse for St. Paul Hospice, working with terminally ill patients in their homes. Additionally, she is a member of Board of Directors of the Erickson Foundation and considers the Archives to be her area of special interest. Roxanna also served as editor of the *Newsletter* for more than a decade.

The final Board member, Betty Alice Erickson has been part of the Institute's training programs since its inception. In addition to her private practice and tenure as an editor for the Foundation *Newsletter*, she is currently writing a book about Milton H. Erickson with Bradford Keeney, Ph.D., for the *Profiles in Healing/Cultural Healing Series*. She maintains a busy teaching schedule with a particular interest in bringing Ericksonian ideas to areas not commonly associated with the Erickson movement such as Azerbaijan, Siberia, Bali and Nepal.

Future plans include sponsorship of workshops in other regions which have not had financial resources to provide Ericksonian training. Some of this will be funded by the prize money awarded to the Erickson Family by the German Institutes (M.E.G.). Betty Alice has also received the first *Premio Franco Granone*, awarded by the *Centro Italiano di Ipnosi Clinica e Sperimentale*, of Torino, Italy, in October, 2003. The money given with this honor will likewise help fund workshops in areas of the world with limited financial means.

It is an important goal of the Dallas Institute to pursue communication with other Erickson Institutes and other teachers of Ericksonian work in order to exchange information, compare methods, and ideas for future programs. "Cross-fertilization with other creative people can only enhance programs," commented Roxanna enthusiastically. "The generous efforts of Rubin (Battino) helping Will and me with our curriculum is a prime example of Dr. Erickson's philosophy of sharing" adds Deborah. Another such cross-fertilization is happening through the contributions of Albina Tamalonis, Psy.D., who has been a guest presenter at the Intensives and at the monthly gatherings. The Institute faculty is grateful for her generosity, enthusiasm and continued support.

The Dallas MHEI through its members' vision, mission, programming and talent exchange efforts is a true embodiment of Milton H. Erickson's profound belief in the *cooperation principle* in hypnosis and psychotherapy and the deep respect for the uniqueness of each individual.

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S P E A K I N G O F R E S E A R C H

Some Neurological Evidence for Fostering New Learnings in Clients

By C. Alexander Simpkins Ph.D. & Annellen Simpkins Ph.D.

For the processes of new learnings and new experiences do not cease with childhood; they continue throughout life, bringing with them even new and different possibilities of favorable or unfavorable personal adjustments. (Erickson & Rossi 1980, Vol IV, xviv)

We as therapists try to encourage new possibilities for our clients with the assumption that this will help them. Erickson showed us that there are always creative alternatives. He was a living testament to successful innovation in how he lived and worked. One source of confirmation for the value of stimulating new options in clients as Erickson did can be found in neuroscience research.

Prior to the 1990's, most neuroscientists believed that neural connections were formed in the early years, and they remained fixed and unalterable throughout life. If damage occurred, function was permanently lost. But recent research with animals and humans has revealed a large amount of plasticity in the human brain. And in the mature adult, new neural connections do form under certain circumstances.

It has long been known that human vision has a blind spot where the optic nerve attaches to the retina but that the visual cortex fills in the area so that we do not see any gaps in our visual field. However, when patients have damage to their visual cortex, gaps in their visual field would be expected to occur. Yet in many cases, the brain fills in the gap, leaving patients unaware of any hole in their vision. (Ramachandran 1992)

How does this happen? Gilbert and Wiesel (1992) were some of the many researchers who looked for answers in the physiology of the brain. They destroyed a small area of the retina in animals and found that at first, the cells in the visual cortex became unresponsive. But within a few minutes, the retinal cells close to the lesion excited the area on the visual cortex in place of the damaged retinal cells, filling the gap.

Similar remapping was seen when a limb was amputated. In experiments with monkeys, the middle digit of one hand was amputated. (Merzsenich, 1984)) Within two months, the receptors in the cortex corresponding to the middle digit were taken over by the two adjacent fingers so that when either of these digits moved, the cortex area for the amputated digit also responded.

Further research extended over twelve years showed that the cortical area originally corresponding to the lost hand of the monkeys was taken over by the sensory input from the face (Pons 1991). The effect was explained as researchers came to understand how the neural networks for body sensations are mapped

onto the cortex. The widely accepted model known as the Penfield homunculus shows that hands are mapped on the brain next to the face. The fact that sensations in the face were felt as the lost hand shows the plasticity in the brain to remap with new connections that are close by on the cortex.

These findings became even more clearly evident with human subjects. Ramachandran (1993) worked extensively with amputees who suffered from phantom limb pain. He was able to trace out the activated areas in the cortex by stimulating certain places on the face, which were experienced by the patient as fingers on his phantom limb. Later research has supported that considerable reorganization of the cortex takes place over time (Aglioti, 1997). The brain responds by making new connections when the need is there.

As clinicians, we utilize these discoveries from neuroscience when we encourage our clients to engage in new behaviors. By applying such Ericksonian methods as tasks and new hypnotic experiences, we can stimulate neural pathways in our clients that lead to the favorable possibilities for personal adjustment Erickson so wisely foresaw.

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CONTRIBUTOR

continued from page 4

Simple Tibetan Buddhism and a Ten Easy Lessons Series: *Zen in Ten*, *Taoism in Ten*, and forthcoming on *Buddhism in Ten*. These books have been translated into numerous languages. Their Eastern philosophy books not only inform people about these ancient traditions but also guide in incorporating the wisdom into everyday life. Most include chapters on psychotherapy and many refer to Erickson, pointing out the many overlaps with his ideas. They also have a book on martial arts, *Chung Do Kwan: The Power of Tae Kwon Do*

and a philosophical novel in an action-adventure genre, *A Perfect World*. Another forthcoming book is on yoga, and they are currently working on two new books on hypnosis. They continue their path and hope their books will enhance potential, as Erickson always encouraged.

We, at the Erickson Foundation are gratified and privileged to have Alex and Annellen Simpkins working with us on the *Newsletter* where they have recently accepted the responsibility as Reviews Editors. Their deep appreciation for the vastness of the pathways of healing is an asset to us all.

BAY AREA

Making the Illusion Real

Richard Landis, Ph.D.
Laguna Niguel, CA

Allison was a 48-year-old, six-foot-two inch, big-boned woman who held her entire family hostage to the fears that she would embarrass them in public or destroy family events, both of which she did with regularity. She was brash and insensitive to anyone's feelings but her own. With glee, she would point out any shortcoming or physical imperfection a person might have. She was a thoroughly unpleasant person. Her parents would plaintively say to Jim, the younger brother, "How could she say that to Aunt Elma?" However, they would refuse to confront Allison for fear that she would not come to the family events that she destroyed. The parents valued the illusion of family unity above all even though Allison's

behavior put her as an outsider. My client, Jim, spent his entire life trying to protect his parents and change his sister by confronting her in the presence of his mother and father, only to have the parents deny there was a problem.

When Jim came to me he was mirroring his parents pattern of complaining about Allison's hurtful behavior when she was not around

...his Mother won the big pool in guessing which bomb Allison would throw first and to whom.

and, fearful of making a scene and disrupting the illusion of family unity. Jim did not want therapy. While he said he wanted advice as to what to do, he also stated that there was nothing to do and he just had to live with it. It looked as though it was going to become one of those dreaded, "ain't-it-awful" sessions.

In two weeks a family get-together was scheduled where fifteen relatives would meet to watch a sporting event on the parents big screen television. Jim was beside himself. He greatly wanted to visit with the other fourteen relatives, whom he liked and with whom he got along. He knew that his desperation in wanting to protect them all from Allison's hurtful behavior would keep him from enjoying the event.

Jim was convinced that there was nothing that could be done, so I agreed with him. When he mentioned that family always had several betting pools for certain outcomes of the sporting events, I asked, "Since nothing can be done to stop Allison, would the family be willing to set up a betting pool to predict how long

after Allison arrived she dropped the first bomb? Or to whom it would be directed? Or how many of her all time favorite "inappropriatenesses" she would do in an hour? Or...?"

Jim convulsed in laughter. "They would love it!" Jim thought for a minute and said, "But, I would have to set it up before the get-together and we would have to keep straight faces. Mom and Dad would never want to hurt Allison's feelings."

I said that would be fine and that I knew he would know how to do it.

I got a phone call from Jim three months later. He said that the get-together was wonderful, and that his Mother won the big pool in guessing which bomb Allison would throw first and to whom. The result was that everyone was rooting for Allison to say certain things in certain ways so they could win a particular pool. Their primary reaction to Allison's previously brutal attacks was now

See CASE REPORT on page 13

INTENSIVES

INTERNATIONAL COMMUNITY

BRAZIL

The 9th PanAmerican Brazilian Congress of Hypnosis and Psychosomatic Medicine and the 1st Congress of Hypnosis of the Medical Hypnosis of the Society of Rio de Janeiro was recently held in Rio de Janeiro, Brazil, August 2003. The highly successful meeting attracted participants from all over Latin America, according to the main organizers, Jairo Mancilha M.D. and Marcia Mathias, Lic. Psych. The faculty included presenters from South America as well as Teresa Robles, Ph.D., of Mexico and Stephen Paul Adler, Ph.D., and Betty Alice Erickson, M.S., from the United States.

During the Congress, the entire faculty, participants and the children of the late David Akstein, M.D., who was a leading figure, prominent author and founder of the Brazilian Society of Medical Hypnosis gathered for a tribute to his memory. A short film was shown and colleagues expressed appreciation for the monumental contributions of Akstein. Commemorative medals were given to the family and a few others who have continued the work of Akstein and to the promotion of legitimate hypnosis in South America. Akstein's son, Claudio Akstein, M.D., expressed the family's appreciation for this great tribute to his father.

The Fourth Meeting of Ericksonian Therapists in Latin America, May 22-25, Cuernavaca, Mexico

Organized by the Centro Ericksoniano de Mexico and the Institute of Cuernavaca, this important gathering attracted attendees from throughout Latin America, Italy and France. Sponsored by the Latin American Association of Milton H. Erickson Institutes and Centers, the meeting had the theme of "Ericksonian Psychotherapy Today in Latin America".

Unique to this Congress, was the introduction of many recent books authored by participants in both Portuguese and in Spanish. Foremost was *Homenaje a Elizabeth Moore Erickson: mujer extraordinaria, profesional, esposa, madre, companera* by Marilia Baker, MSW, of the MHE Institute of Florianopolis, Brazil. Elizabeth Erickson was designated as Patron of Honor for the

Conference and delivered a short speech via video.

Keynotes speeches were a unique means of recognizing and uniting the different groups. They were delivered by Teresa Robles of Mexico, Sofia Bauer and Marilia Baker both of the MHEI Florianopolis, Mario Pacheco, Sebastian Castro and M.Elena Viveros of MHEI Santiago, Chile and Jeffrey Zeig and Betty Alice Erickson of the U.S.

In addition to lectures, short courses and workshops by the 50 invited faculty, there was an Institutes meeting in open air, outdoors, following the local native, ancient tradition, of gathering the wise and learned individuals of the region to discuss their common destiny. Representatives from Argentina, Brazil, Chile, Mexico, as well as guests from Societa' Italiana Milton Erickson (SIME), Brazilian Society of Hypnosis, IFACT/Brief Therapy Institute, France, UNAM (Autonomous University of Mexico) and many others were present.

This meeting was an extraordinary event. It united professionals from throughout the world, allowing them to come together, share experiences, exchange ideas, and plan for a cooperative future which can only benefit mankind.

POLAND:

The "10th Birthday Celebration" of the Erickson Institute of Poland, held June 23-25, 2003 was very successful for the 300 participants from Poland and Europe. Directors Kasia Szymansa, Ph.D., and Kris Klajs, Lic. Psych., had put together a busy program in the beautiful city of Krakow. The atmosphere of the Renaissance architecture in the "old town" and the status of the oldest University in Poland, added to the overall sense of learning in a magical atmosphere. Faculty from the United States, Germany, Switzerland and Poland, including Brent Geary, Ph.D., Eric Greenleaf, Ph.D., from the United States and Bernhard Trenkle, Dipl. Psych., of Germany participated in this well-organized and informative meeting. The Institute also provided well-attended pre- and post-Conference workshops on topics such as the handling of stress, anxiety and panic attacks.

IN MEMORIUM

Erika Fromm

By Dr. Steven Kahn

Ericka Fromm, Ph.D., was not only a leading contributor to hypnosis, but helped steer all of psychology in new directions with numerous books and over 100 scholarly articles. Born in Germany, she first fled the Nazi regime to work in a Holland mental hospital-one of the first psychologists to work in such a position. After four years, she again fled the onslaught of the Nazis and immigrated to the United States. The loving Dutch family who helped her greatly when she first arrived with her new and hard-earned doctorate in hand, remained her life-long friends. She felt so supported by the family that she considered Dutch to be her mother language and Holland her native land for the rest of her life.

In 1960, she became interested in hypnosis. She overcame her initial skepticism about it and became a pioneer in the field, attempting to imbue it with a scientific rigor and testability. In the 1970's, she published two compendiums of edited papers (with Ronald Shor), which investigated all

Her commitment to truthfulness and to the dissemination of unimpeachable knowledge was her trademark.

the relevant ongoing research in hypnosis. She also began an investigation of self-hypnosis which "everyone was doing clinically, but no one had studied systematically." In the 1990's, she published (with Stephen Kahn) a summary of her research on self-hypnosis, as well as another collection of scientific papers and a clinical book integrating psychoanalysis and hyp-

nosis (both with Michael Nash). Expanding her work into the 21st Century, she edited (with Stephen Kahn) a clinical casebook about the challenges hypnotherapists face in their work. In 1999, she wrote a paper on the need for passion in those entering the field of hypnosis. No longer a new phenomenon, she said, it had become "normal science."

Her renown as a researcher and

clinician brought her into contact with many students. She spent four decades at the University of Chicago where she taught, did research and trained thousands of students. Her commitment to truthfulness and to the dissemination of unimpeachable knowledge was her trademark. Her encouragement of and generosity to her students was equally celebrated.

She was always interested in creativity. As a graduate student, she wrote to Einstein and Freud about their innovations in such a lively and energetic way that they actually responded. She explored the role of hypnosis in creativity and, at one time, hypnotized Andrew Greeley who then became a prolific writer exposing some of the underside of the Catholic Church.

Throughout her life, she possessed a belief in a self that could prevail over the legacy of the past, one that could create new hope and broader horizons despite what one had endured-to rise above and triumph, as she would say, "like a Phoenix from the ashes."

Fromm, who is survived by two grandsons, Daniel and Michael Greenstone and two great-grandsons, gave us all a model of living life. It is for us now all to strive to emulate this remarkable woman even as we mourn her passing.

David Akstein, M.D. (1923-2003)

By Madeleine Richeport-Haley, Ph.D.

The scientific and clinical world of hypnosis will miss David Akstein, a neuropsychiatrist who practiced most of his life in Rio de Janeiro, Brazil. He was a colleague and dear friend of Milton H. Erickson, who had written a preface to Akstein's 1973 book *Hipnologia*. Akstein's contribution to the field of hypnosis in Brazil was sizeable. He was the founding president of the "Brazilian Society of Medical Hypnosis" in 1957. In 1960, he published, *The Ethical, Moral, and Religious Aspects of Hypnosis* which contributed to changing Brazilian law and preventing lay people from practicing hypnosis. He spent many years as an activist working against charlatanism in Brazil.

Akstein developed tests for the concentration reflex and eye roll, publishing about these. In 1992, some of his work was published in *French Un Voyage a Travers La Transe La*

Terpsichore-Transe-Therapie.

He attended and presented at International Congresses around the world and was widely published in a variety of languages including in the *Journal of the American Society of Clinical Hypnosis*. He was an Honorary Fellow of ASCH, taught courses in hypnosis for "The

He was a true scientist.

Brazilian Society of Hypnosis" and the "Society of Medical Hypnosis in Rio de Janeiro." He founded the *Brazilian Journal of Hypnosis* in 1980 and was its Editor until 1993. He remained Editor Emeritus until his death.

Dr. Akstein became interested in trancedancing in the African Brazilian religions in the fifties where he saw their tremendous potential for therapy. He contributed to using the African Brazilian trance states, practiced by more than 50% of the population within the natural religious healing systems, adapting it into a therapy to be used with clients. He

called this technique terpsichore-trancetherapy or TTT – Terpsichore is the Greek goddess of dance and music. According to Akstein, this was a non-verbal group psychotherapy with kinetic giratory movements leading to trance induction, liberation and release through progressive relaxation. Akstein was generous and enthusiastic in sharing his interest in

the African Brazilian religions with many colleagues who arrived to consult from around the world. He permitted me to observe his clients in order to research using hypnosis to make a differential diagnosis.

He also pioneered the work of applying EEG's to mediums' trancedancing in the cult groups.

Akstein was a researcher who wanted to know more about the natural forms of trance states and how they could be applied clinically. He never approached this with a spiritual bias as did so many others when alternate belief systems are so much a cultural way of life. He was a true scientist.

Akstein was born in Minas Gerais, Brazil. He graduated from Medical School at the State University of Rio de Janeiro in 1948 and worked as a general practitioner in the Amazon region. Moving to the United States in 1992, he wanted to bring TTT to populations here as well as to work with his eldest son, Ricardo, a physician in the U.S. His last years were spent writing a book to be published posthumously in Brazil.

A few months before his death, he returned to Brazil with a premonition of his death, wanting to be in his own land. He died of cancer on June 25, 2003.

David Akstein was honored at the *9th PanAmerican Brazilian Congress of Hypnosis and Psychosomatic Medicine* and the *1st Congress of Hypnosis of the Medical Hypnosis of the Society of Rio de Janeiro* in August 2003.

His colorful presentations, sense of humor, and gift for communicating in Brazil made him a culture broker mediating between the medical and cultural worlds. He was a pioneer who will be dearly missed.

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HISTORICAL TIMES

James Esdaile: The Grandfather of Hypnoanesthesia

By Kathleen B. Donaghy, PhD

"What is new is old, and what is old is not new." *Voltaire*

Most people would consider the use of hypnosis as a modern and perhaps even "new age" means of attaining surgical anesthesia. What few people realize is that the practice has been utilized with success since 1845 when James Esdaile, a Scottish surgeon, developed a technique to put patients into trance during surgery (that's 45 years BF, or "Before Freud"). Upon graduating from Edinburgh, he obtained a position with the British East India Company and began doing surgeries on patients using only hypnoanesthesia. As John Elliotson's protégé, Esdaile had more freedom to practice as a medical officer, because he was operating on Indians rather than Englishmen. At that point in time, in addition to physical trauma and shock, postoperative infection occurred in the majority of patients and there was a huge mortality rate. (It was not until the nineteenth century that surgical asepsis became understood as being important.) He would produce a state of trance by stroking the patient's body for several hours, along with mesmeric hand and arm motions (later called the Esdaile State). With his approach, he dramatically improved the surgical success rate; fatal surgical shock and postoperative infections occurred in only 5% of his cases compared with the average 50% mortality rate reported by his fellow surgeons.

During the mid-1800s, surgery was greatly feared – perhaps even more than death – because it was accompanied by incredible pain. Alcohol and opium were the only anesthetics available, and most patients screamed and struggled and had to be held down during their surgeries. Thus, the emotional shock deterred healing beyond the physical loss of blood (sans transfusion) and infection (sans antibiotics). Many patients went into severe shock and depression during convalescence.

After doing 75 surgeries with hypnoanesthesia, Esdaile wrote to the medical board, but the British medical establishment rejected his claims. Undaunted, he contacted the deputy governor of Bengal, who appointed a committee of physicians to review his growing body of work. Subsequently, the governor appointed Esdaile to head a research hospital near Calcutta to continue his work with hypnosis. After one year, and with ongoing success, he was reappointed to Sarkea's Lane Hospital and Dispensary to continue to expand the research into other areas of medicine.

His successful surgery cases included an amputated arm, a radical mastectomy, two amputations of penises, three cataract removals, five cases of removing enlarged toenails by their roots, seven operations for fluid buildup in various body cavities, and the removal of fourteen scrotal tumors, ranging from 8 to 80 pounds in weight.

Still, he received ongoing criticisms of his work from local physicians who were unable to replicate his results, and who speculated that his work was only successful because of patient selection criteria. They labeled his approach crude: "Whereas such a procedure may well be applicable to the Indian, we would scarcely consider it appropriate for a European or Britisher." Esdaile performed more scrotal tumor surgeries in one month than those taking place in all the other hospitals in Calcutta in a year. Fellow surgeons speculated that his patients were merely hysterical, and Esdaile responded in good humor, stating that his report of the cases was still worthy of scientific report if only as an example of an epidemic of insanity!

Esdaile remained in India until 1851, having completed more than 300 painless surgeries with the use of what he called "mesmerism." He was disheartened to learn that the inventor of ether as an anesthetic was awarded \$10,000 – and it was described as the earliest anesthetic. Within two years, ether, nitrous oxide, chloroform, and other chemical anesthetics were widely used in dentistry, and surgery; and anything resembling mesmerism was consigned to the dustbin of history – at least as an approved medical

technique. Indignant, he left his practice in Calcutta and moved closer to his family. He died at the age of 50 in 1859, allegedly from tuberculosis.

Among his many works, *Mesmerism in India* was later published under the title of *Hypnosis in Medicine and Surgery*. This book contains reports of 73 cases of surgery, along with other medical illnesses such as palsy, lumbago, sciatic, convulsions, and tic-douloureux-all treated with "mesmerism." It also contains a summary of his philosophy of medicine, and denigrates the medical establishment who summarily shunned new ideas. He worked tirelessly, one by one, to educate other physicians about the value of hypnosis in anesthesia and analgesia. It was only after his death – 32 years later – that the

British Medical Association finally conceded, recognizing hypnosis (a term coined by James Braid in 1842) as a viable treatment for pain, insomnia, and other functional problems.

Given that the discovery of chemical anesthesia came prior to the widespread application and acknowledgement of Esdaile's approach, it is tempting to wonder how modern medicine would be different if these inventions had waited to emerge until Esdaile had caught on. Once an approach is distrusted, the Universe seems resistant to granting it reconsideration. Perhaps acceptance of medical hypnosis will be fostered over time as it's applied as an adjunct to enhance current surgical practices, rather than as a stand-alone substitute for anesthesia and analgesia.

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Lankton

F A C E T S A N D R E F L E C T I O N S

Jeff Zeig recently sent me a letter he received from Françoise Quélin. Reading it brought me back to a cold, winter day in Phoenix. Some colleagues and I had just had our first meeting with Erickson and he had given us his traditional assignment - "Go visit the Botanical Gardens." We spent many hours looking at strange and familiar plants until we saw the Boojum tree and the creeping devils. It was a surprise that later prepared me for further discoveries about my assumptions of life. But I was not to know that until much later.

Reading Françoise Quélin's letter, I found my heart warming in gratitude for his creating a Botanical Garden for others to explore and discover. And, in his way, extending Erickson's legacy.

Here are some excerpts from that letter:

Paraplegic since I was wounded by a bullet during the Algerian war,... I have had to deal with rather violent fits of pain. This had been going on for forty years, until I was treated with Erickson therapy. After the first session, the pain

On another fresco there is a long violet graffiti that spells out "Erickson," next to his portrait. The idea is to surprise and give a feeling of movement.

was greatly diminished and what was left was not only acceptable, but even seemed mild.

This feeling of well-being that I have experienced during this past year, made me wish to thank Erickson and all those who have worked to pass on his teachings, especially in France, Jean Godin and Olivier Perrot, whose expert care I benefited from in Fontainebleau.

In homage to him, I am dedicating the arboretum, which I have been planting in a two acre prairie, just bordering my own hamlet in the Gatinais - a region 90 km south of Paris - to the memory of Milton Erickson...

...I have also placed a few objects that I chanced upon, to evoke ties, reframing, confusion... an accessory that used to hold wine bottles, now holds short sto-

DALLAS



ries. My sister has strewn poppy and blue flax flower seeds which will germinate next year. A mosaic fresco depicts the relationship between the patient and the therapist: seagulls in flight over a stormy sea. I have written next to the fresco, "The wind carries the seagull, but it is the seagull that flies and dives into the sea." On another fresco there is a long violet graffiti that spells out "Erickson," next to his portrait. The idea is to surprise and give a feeling of movement.

Sunset is especially beautiful here. It is the perfect time of the day to take a walk in the alley that circles round the arboretum. ...When I am watering, I look out at the prairie. I discover wild grasses, some of which I don't know; new species grow and flower there. I often tell myself that, "each blade is a different shade of green..."

I thank Mrs. Erickson for authorizing me to call my arboretum, the Milton Erickson Arboretum, after her husband, and I cordially invite all Ericksonians to pass a moment!

Françoise Quélin
Ceriseaux
email: quelin@wanadoo.fr

And thank you, Françoise Quélin.
Richard Landis

CASE REPORT

continued from page 9

disappointment if they lost the pool, rather than fear and hurt. They also presented more acceptance and enjoyment of Allison's presence since they were no longer in a protective stance, but in a position of curiosity. By the end of the night, Allison was joining in with the relatives, enjoying the post-game banter. She was no longer an outsider, but one of the family.

Jim said that there have been three other get-togethers since then. Each time, Allison entered like a hurricane but soon was quieted by the acceptance and positive attention she received.

A year later, Allison is still somewhat brutal and attacking in the rest of her life, but at family get-togethers,

she is an accepted member of the clan.

When we are negatively anticipating an attack, the amygdale, hypothalamus and reticular activating center in the brain stem all come into play. These are the survival centers of the brain. The entire body is getting ready to protect itself from imminent destruction. However, when we are counting the number of occurrences of something in anticipation of a positive outcome, the left frontal lobe of the cortex becomes activated and the brainstem quiets. We have now placed ourselves outside the scene we are watching and decreased our access to negative emotions. When the body is not preparing to protect itself from imminent annihilation, it can relax and enjoy the show. Breaking the negative interactive loop between the family and Allison made new interactions possible.

UPCOMING TRAINING

DATE	TITLE / LOCATION / LEADER	CONTACTS
2003		
9/5-12/19	15-Week (Friday afternoons) Training: Hypnosis For Psychotherapists / Marin, Calif. / Eric Greenleaf, Ph.D.	1.
12/11-14	The Brief Therapy Conference: Essence and Evolution / San Francisco, Calif. / Invited Faculty	2.
2004		
1/7-11	ZIST - Supervision / Penzberg, Germany / Jeffrey K. Zeig, Ph.D.	3.
1/11-15	ZIST - Comprehensive Training / Penzberg, Germany / Zeig	3.
1/24	The Pain of Human Experience: Parenting, Internal Voices, and Suicide / Los Angeles, Calif. / Edwin Shneidman, Ph.D., Daniel Siegel, MD, Lisa Firestone, Ph.D.	4.
2/6-8	Fundamental Hypnosis Workshop / New York, NY / Zeig	5.
2/7	Creating a Life of Meaning and Compassion / Los Angeles, Calif. / Firestone, Joyce Catlett, M.A., Siegel (Discussant)	4.
2/14-17	Master Class - Intensive Supervision Workshop in Ericksonian Clinical Hypnotherapy / New York, NY / Zeig	6.
2/23-27	Intensive Training in Ericksonian Approaches to Brief Hypnotic Psychotherapy - <i>Fundamental</i> / Phoenix, Ariz. / Brent Geary, Ph.D., Zeig, and Invited Presenters	2.
2/27-29	Fundamental Hypnosis Workshop / Guadalajara, Mexico / Zeig	7.
3/1-5	Intensive Training in Ericksonian Approaches to Brief Hypnotic Psychotherapy - <i>Intermediate</i> / Phoenix, Ariz. / Geary, Zeig, and Invited Presenters	2.
3/11-14	Master Class - Hypnosis Supervision / Brussels, Belgium / Zeig	8.
3/26-28	Challenging Couples, Challenging Therapists / Los Angeles, Calif. / Invited Faculty	2.
4/30-5/2	Intermediate Hypnosis Workshop / New York, NY / Zeig	5.
5/13-14	Anxiety and Depression / Nova Scotia, Canada / Zeig	9.
5/15-18	Master Class - Intensive Supervision Workshop in Ericksonian Clinical Hypnotherapy / New York, NY / Zeig	6.
5/21-23	Voice Therapy Training: Applications to Clinical Practice: Level 1 / Santa Barbara, Calif. / Catlett, Firestone	4.
5/28-30	Intermediate Hypnosis Workshop / Guadalajara, Mexico / Zeig	7.
6/21-25	Master Class - Hypnosis Supervision / Madrid, Spain / Zeig	10.
7/5-8/7	Intensive Training on Ericksonian Psychotherapy [Spanish] (Credits for Masters on Ericksonian Psychotherapy) / Mexico City, Mexico / Invited Faculty	11.
7/26-30	Intensive Training in Ericksonian Approaches to Brief Hypnotic Psychotherapy - <i>Fundamental</i> / Phoenix, Ariz. / Geary, Zeig, and Invited Presenters	2.
8/2-6	Intensive Training in Ericksonian Approaches to Brief Hypnotic Psychotherapy - <i>Intermediate</i> / Phoenix, Ariz. / Geary, Zeig, and Invited Presenters	2.
8/9-13	Intensive Training in Ericksonian Approaches to Brief Hypnotic Psychotherapy - <i>Advanced</i> / Phoenix, Ariz. / Geary, Zeig, and Invited Presenters	2.

Contact Information:

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To submit a listing for Upcoming Trainings, please send dates, title of workshop, venue, city/state/country, list of presenters, and complete contact information ONLY. Information must be sent in the format above. A \$10 fee, per listing, is required. Deadline for the 2004 Spring Issue (March) is January 30, 2004. All workshop submissions are subject to approval by the Erickson Foundation. For more information, please contact the Erickson Foundation at 602/956-6196; or E-mail Production Assistant, Karen Haviley, karen@erickson-foundation.org .

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CONFERENCE NOTES

The Brief Therapy Conference, sponsored by the Milton H. Erickson Foundation, Inc., will be held December 11-14, 2003, at the San Francisco Hilton and Towers, in San Francisco, Calif. The Conference consists of keynotes, workshops, topical panels, supervision panels, dialogues, conversation hours, clinical demonstrations and solicited short courses. The faculty will include Beaulieu, Carlson, Dattilio, Dilts, Dolan, B.A. Erickson, Gilligan, Glasser, Goulding, Hoyt, S. Lankton, Love, Miller, Munion, Norcross, Padesky, Rossi, Shapiro, Short, Wilson, Yapko, and Zeig. Keynotes given by: Albert Bandura, Robin Lakoff, Donald Meichenbaum, and Frank Sulloway. To receive the full conference brochure contact The Milton H. Erickson Foundation, Inc., 3606 N. 24th Street, Phoenix, AZ 85016-6500; Tel, 602-956-6196; Fax, 602-956-0519; E-mail, office@erickson-foundation.org ; Web, www.erickson-foundation.org/brfther.htm

The American Society of Clinical Hypnosis (ASCH) is sponsoring the *46th Annual Scientific Meeting & Workshops on Clinical Hypnosis*, "Hypnosis and the Care of the Soul," March 12-16, 2004, in Anaheim, Calif. The meeting will include an integrated mix of workshops, symposia, lunch presentations and social events. Basic, Intermediate, and Advanced workshops will be offered. For information contact the American Society of Clinical Hypnosis-Education and Research Foundation, 140 N. Bloomingdale Road, Bloomingdale, IL 60108-1017 ; Tel, +630-980-4740 ; Fax, 630/351-8490 ; E-mail, info@asch.net

The *Fourteenth IFTA World Family Therapy Congress*, will be held March 24-27-2004, in Istanbul, Turkey. The Congress theme is, "Families in a Time of Global Crisis." The Congress is organized by The International Family Therapy Association (IFTA), and The Turkish Association of Marital and Family Therapy (TRAMFT). For more information contact: ODS Congress Management, Yildiz Cicegi Sokak, No: 12/1, 80630 Etiler, Istanbul, Turkey; Tel, +90 212 287 58 00; Fax, +90 212 352 26 60; E-mail, info@ifta2004.org; Web, www.ifta2004.org

The Milton H. Erickson Foundation is sponsoring *Challenging Couples, Challenging Therapists*, March 26-28, 2004, at the LAX Marriott Hotel at the Los Angeles International Airport. Organizational assistance was provided by The Couples Institute, Menlo Park, Calif. Faculty includes Daniel Amen, Ellyn Bader, Stephanie Brown, Helen Fisher, Pat Love, Cloé Madanes, Peter Pearson, Esther Perel, Terry Real, Janis Spring, and Jeffrey Zeig. Keynotes will be given by Daniel Amen, Helen Fisher, Pat Love, Cloé Madanes, Terry Real, and Janis Spring. A *Laws and Ethics Track*, presented by Steven Frankl, Ph.D., JD, and *Domestic Violence I and II* workshops, presented by Cloé Madanes, Lic.Psych., will run concurrently with the Conference. For a complete brochure contact The Milton H. Erickson Foundation, Inc., 3606 N. 24th Street, Phoenix, AZ 85016-6500; Tel, 602-956-6196; Fax, 602-956-0519; E-mail, office@erickson-foundation.org ; Web, www.erickson-foundation.org/challenge.htm

The First International Symposium of the Croatian Society for Medical Hypnosis - Magical Fruits of the Mind, will be held April 30-May 2, 2004, in Opatija, Rivijera, Croatia. Topics will include hypnosis in gynecology and obstetrics, hypnosis with children, psychopathology of personality disorders and its therapeutic approach, Aikido-NLP-Hypnosis, hypnosis in oncology and immunology, and others. For information contact CMA-CSMH, Dr. Denisa Legac, Strma 12 Lug, Samobor 10320, Croatia; Tel, +385 91 5057449; Tel, +43 676 585 34 02 A ; Fax, +385 1 3375 666; Fax, +43 316 384 560 6 A ; E-mail, denisa.legac@gmx.net

The *16th International Congress on Hypnosis and Hypnotherapy*, sponsored by the International Society of Hypnosis (ISH) will be held October 17-22, 2004, in Singapore. The Congress will include clinical skills workshops with the final three days including Scientific Papers and Invited Addresses. In addition a limited number of invited workshops will be presented at the post-congress workshop program on the exotic tropical Thai Island of Phuket. For information contact 16th International Congress on Hypnosis and Hypnotherapy, C/- ICMS Pty Ltd, 84 Queensbridge Street, Southbank VIC 3006, Australia; Tel, +61 3 9682 0244; Fax, +61 3 9682 0288; E-mail, 16ish@icms.com.au ; Web, www.icms.com.au/16ish

The *Seventeenth International Congress of Hypnosis of the International Society of Hypnosis* (ISH) will be held in Querétaro Mexico, October 2006. For more information contact Centro Ericksoniano de México, Patricio Sáenz 1205, Col. Del Valle, C.P. 03100 México, D.F., México; Web, www.hipnosis.com.mx ; Email, erickmex@hipnosis.com.mx or congresos@hipnosis.com.mx

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C D R E V I E W

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When I first heard about the series of CDs, "Milton H. Erickson at St. Luke's Hospital," which were recorded during a conference given by Milton H. Erickson, at St. Luke's Hospital in Pasadena California in October 1958, I immediately began wondering what that conference might have been like. One of my first questions was whether students would be taught as they are nowadays, and how things could be done

without the electronic devices, VCRs, and all the things we currently use.

I was amazed as I began listening to Dr. Erickson's voice. It sounded so close, so present. At first, he told his students that hypnosis is a phenomenon that requires participation as a means to encourage them to get involved actively during this training course. It seemed that not all participants were familiar with hypnosis so he began with an introduction: "Hypnosis is a technique, a methodology, an approach to the patient, and I expect you to have that amount of medical knowledge references for you to practice in your own field, and you use Hypnosis to facilitate your contact with the patient, to enable the patient to comprehend you better, and to motivate your patient in the acceptance of medical care, and guidance, and advice, and instruction. You see, hypnosis is primarily a method of communicating ideas to people... in

See ST. LUKES on page 17

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- ▲ *Can We Facilitate Gene Expression, Neurogenesis, and Healing with Therapeutic Hypnosis?* (E. Rossi)

American Society of Clinical Hypnosis

hypnosis you establish, by putting a person into a trance, a state of receptiveness to ideas, and as they are receptive to ideas, then they become responsive to ideas..." The introduction was surely an effective way to provide beginners with information that enabled them to get familiar with the use of hypnosis.

The series of CDs includes a wide variety of ways medical doctors can use this approach in their profession. The first example Erickson gives is about an obstetrical patient who is about to give birth. Here, even though the husband was there, she excluded

states is fundamental, as opposed to asking the person whether they are in trance or not. I liked very much an example of what Erickson did during a demonstration. By using a light trance he promoted a positive hallucination in a woman who did not know that she was in a trance while she talked to Erickson's hallucinated daughter, and kept asserting that she was not in a trance.

In this presentation, Erickson explained that hypnosis also requires a learning process, so people need to learn the type of behavior that is altered during the process.

Erickson explained that hypnosis also requires a learning process, so people need to learn the type of behavior that is altered during the process.

him from the trance. Dissociation occurs during the trance state. As Erickson says: "There is no attention given to pain, distress, or anything of that sort because there is a fixation of the attention to the important things"... here by using this technique we can help the mother figure out whether the baby will be a boy, a girl, will she have green eyes, curly hair? And surely the experience will be much more enjoyable."

In order to explain ideomotor phenomena, Erickson talks about the idea of a motor response, a normal response a mother would show by opening her mouth as she is feeding the baby.

There is also a special focus on how a professional can know whether a subject is in trance state. This is explained by using an example of a person who was spontaneously showing signs of a narrowing and fixating attention during a conference, even though she had not been put into a "formal" trance. Recognizing trance

Another phenomenon that is highlighted is catalepsy, a state where muscle tonicity changes and there is loss of mobility as well. It is emphasized that these are normal phenomena that occur during ordinary waking states. I think this explanation is fundamental since people often believe that hypnosis is an extremely strange phenomenon.

As Erickson explains, it is important that rapport be taken into account. He defines rapport as a: "A state of relationship between the patient and you in which they tend to exclude everything else, and to give their attention to you, and they are responsive to you".

This series also contains a section where Erickson also talks about the case of an 83-year-old man who was dying of cancer and who had extremely acute pain. As Erickson explains, pain is made of three components: memories of past pains, the expectation of a future pain, and present pain. So if the man could devel-

op amnesia for past and future expected pain, then the pain would be cut to only one third and then he could develop amnesia of the present pain too.

I have been reading about Erickson's techniques for some time and I had never found any reference regarding the "Imaginary patient technique" that he used with trainees. By entering trance they could learn ways to induce trance in their clients. One of the aims of this technique is that the trainee finds the right words to say while having enough time to do what is best, for instance working on

working with kids. I liked how Erickson recalled helping when one of his sons fell down and was bleeding. In order to help him deal with the pain better Erickson asked his son to focus on how red the blood was, thus redirecting his attention somewhere else. As I was listening to this anecdote I realized that many times we suffer because we forget "looking at the other side of things" in our lives.

This series of CDs can be very useful both for medical doctors, psychotherapists, and for people who use hypnosis since it provides a wide variety of examples where techniques can be adapted to any particular situation. The language, the use of voice, and the cases can be utilized both by beginners and experienced therapists. While I was listening to Erickson's voice, I also enjoyed letting my right hand levitate for a while, as I was reviewing the series of CDs "Milton H. Erickson, at St. Luke's Hospital in Pasadena, California, October 1958."

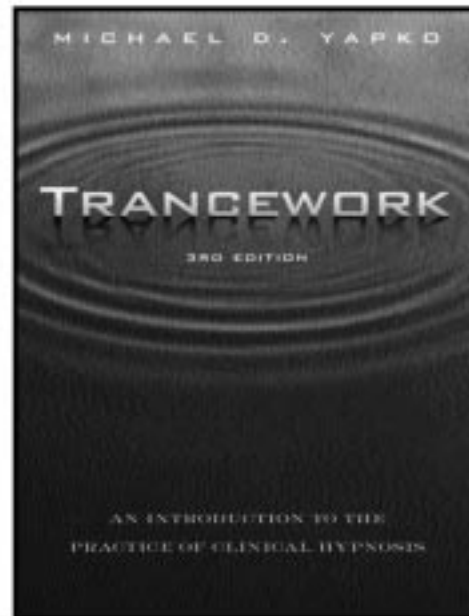
Reviewed By:
Maria Escalante Cortina, M.A., DDS

the intonation and finding the necessary words. As a trainer, many times I have found that students often times are afraid of staring during their inductions. I truly believe that using this technique during courses could help new hypnotists learn more easily, both consciously and unconsciously.

As a therapist, I often find myself

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V I D E O R E V I E W

Constructing New Core Beliefs

By Christine Padesky, Ph.D.

*The Brief Therapy Conference:
Lasting Solutions*

Orlando, Florida, December 2002

Available from The Milton H. Erickson Foundation, Inc.

Videotape # BT02-CDV11, \$59

Audiotape # BT02-CD11, \$11

See page 22 for ordering information

In "Constructing New Core Beliefs," Christine Padesky, Ph.D. presents a clear, straightforward demonstration of a cognitive technique for changing the deeply held destructive beliefs that so often seem immune to therapy. She aims for big game, stating that her method works with chronic depression and anxiety, as well as addictions and personality disorders.

In somewhat of a paradoxical twist, Padesky notes that core beliefs in healthy persons occur as pairs of polar opposites, *e.g.*, "I'm stupid" and "I'm smart," "The world is a dangerous place" and "The world is safe." Trouble develops when we possess only one end of the continuum. A personality disorder might arise, for example, if the individual has only the belief that "I am good." Then all personal behaviors and attitudes will be self-defined as good, and the individual will lack both an ethical compass and the ability to self-correct.

Her demonstration subject, another therapist who convincingly role plays a current client, will sound familiar to most therapists: a teacher whose unrealistically high standards for herself have led to a core belief of "I'm not worthy; I'm a bad person" and a 15-year depression. She occasionally throws Padesky the kind of curve ball produced by real clients, giving the demonstration added verisimilitude.

Padesky's method has three parts: 1) Identify, in the client's own words, the desirable characteristic or state of being: in this case, the client wants to believe herself to be "wonderful." 2) Establish a continuum between having none of the goal characteristic and having it 100%. This is used for global self-rating and also to rate realms of endeavor (work or domestic performance) or individual behaviors. 3) Keep a "core belief log," a homework assignment the client uses to keep track of small, day-to-day examples of the desired characteristic.

Padesky manages to be both warm and task-oriented, leavening her cognitive work with humor and kindness. She gently corrects her client (Linda), who discounts the value of her positive points and demands perfection all the time. Padesky skillfully elicits Linda's own ideas about how to convince someone of her own worth, and we see Linda's surprise as she recognizes that the good ideas are hers.

After the demonstration Padesky adds a dose of realism, discussing the pitfalls encountered by most clients and telling us that new core beliefs generally take about six months to form.

I was sorry that Linda never brought up an example of things she does that she perceives as terrible. She never said, "Yesterday I screamed at my son and said awful things to him." Clients often use these failings, cruelties and venalities to prove that they are awful, regardless of how many good things they may do. I'm certain that Padesky has ways to approach this, and I would have liked to see them. (Answers may be contained in a book to which she refers and to which she contributed: *Cognitive Therapy of Personality Disorders* by Aaron T. Beck and Arthur M. Freedman, et al. [1990], New York, Guilford Press.)

"Constructing New Core Beliefs" gives enough information about this technique that a competent therapist could try it out. The method sounds promising, and Christine Padesky is persuasive. I recommend the tape.

Reviewed by:
Will Handy, LMSW
Dallas, Texas

V I D E O R E V I E W

Facilitating the Creative Dynamics of Gene Expression and Brain Growth

By Ernest Rossi, Ph.D.

The Brief Therapy Conference: Lasting Solutions
Orlando, Florida, December 2002

Available from The Milton H. Erickson Foundation, Inc.

Videotape # BT02-CDV5, \$59

Audiotape # BT02-CD5, \$11

See page 22 for ordering information

No one tape can exhibit depth of skill, a scientifically based construct, a conceptual clinical approach and what is possible in just one clinical hour. Or can it? It can if you are as enthusiastically focused as Rossi in his latest video, "Facilitating the Creative Dynamics of Gene Expression and Brain Growth," on how to recognize and encourage what is possible. Rossi accomplishes this by demonstrating what he has dedicated exhaustive research and writing to clarify for the rest of us: understanding human growth through brain growth via stimulating gene expression.

Does this tape take the place of reading his latest book? No. What it does do is give living dimension to the book's content with skills we would do well to emulate.

Rossi has long been commended by his peers for his grace and skill as a clinician, especially in his delicate and pointed use of pauses and thoughtful silence. His confidence and delight in what is intensely happening within the volunteer is infectious with the audience and encouraging to the volunteer.

What is striking is how Rossi encourages the volunteer just so, and instructs the audience in pithy asides about what is happening internally. The asides keep the viewer informed of his careful observations of what stage of the process of gene expression is occurring. He also lets the viewer know when and how to be silent.

Rossi is also a strong proponent of protecting privacy; he does not feel the need to know everything that is going on in specific detail, even as he is acutely aware of what stage of growth is being experienced by means of the simple declarative verbalizations the subject expresses. Such as informing us, "...audience heard that 'I don't know,' that's very good, that's the growing edge of her consciousness, just where we want to be, wonderful..." when the volunteer earnestly says, "I don't know..."

What could have easily been a frustrating, scattershot or purely intellectual experience for the volunteer, instead became a deeply rewarding therapeutic endeavor. Then, even with only five minutes left, and after telling her five minutes were left, Rossi went on to 'future focus' the gains, doing yet another intense bit of work to defuse potential interference from the past.

A question asked by a conference attendee at the end was, "So you probably wouldn't do this with somebody on their first session, you would wait until you've been working with them for a while to see...?" The kind and firm response was, "Oh, no, right from the very first. Every session is a complete session. If we do not meet again, we have gone right to the creative edge." The lesson that we do not have to know the client to know how to begin working creatively and constructively is invigorating. In not wanting to give away a good ending, just know that Rossi informs us how to elicit something special from a client at the very beginning that establishes the momentum of the creative dynamics of gene expression.

Rossi has made other remarkable demonstration tapes; however, "Facilitating the Creative Dynamics of Gene Expression and Brain Growth," on the heels of his book offers a wealth of learning opportunity and clarification of a rich growth process. Take whatever opportunity you can to experience Rossi at work and then see what is possible to stimulate within yourself and your clients.

Reviewed by:
Deborah Beckman, M.S., LPC
Milton H. Erickson Institute of Dallas

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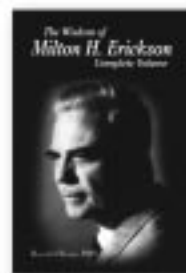


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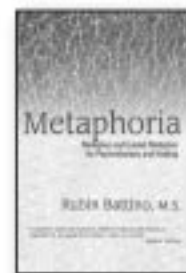
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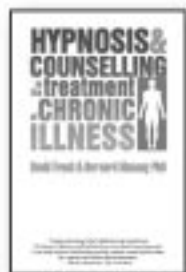
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AUDIOTAPE REVIEW

Building a Better Lullaby

By Deborah Beckman, M.S., LPC

*The Brief Therapy Conference:
Lasting Solutions*
Orlando, Florida, December 2002

Available from The Milton H. Erickson
Foundation, Inc.

Tape # BT02-SC16, \$11

See page 22 for ordering information

Imagine a magnificent spreading oak tree with strong branches, lush foliage and deep roots. Setting the tone for the presentation, Deborah Beckman demonstrates that metaphors can be used to tell an

She recommends beginning with relaxation and self-hypnosis. The relaxation helps the client to sleep better and "when one has better sleep, they look better and they do better." She describes the "near waking state" and the "just falling asleep state" as being natural states of sleep that are close to self-hypnosis. She emphasizes how amazing the brain is in its ability to paralyze the body in order to promote a good night's sleep. She says that this understanding is particularly useful for some patients, especially anxious ones.

Another technique that she talks about is "challenging the 'I can't'" which becomes an unhappy lullaby of its own. She reframes the problem

She emphasizes how amazing the brain is in its ability to paralyze the body in order to promote a good night's sleep.

effective story in more ways than one. She teaches the audience by using an example that can be adapted to a client therapy session.

This audiocassette is a live presentation from the *Brief Therapy Congress* in Florida in 2002, and was one of the best selling audio-presentations at that Congress. I chose this audiotope for review both because the topic was interesting, and also because it was recommended as having clear pronunciation and presentation. These elements of style are important to me because English is not my native tongue.

Building a Better Lullaby presents material to work with people with sleep disorders. During the presentation, Beckman provides theoretical information, and basic principles of working with individuals. Her style of returning to metaphors as a teaching technique is both interesting and effective.

Listening to the audiocassette one notices Beckman's has a soft, nice voice and excellent skill at controlling her inflection and tone. Her skill is especially noteworthy in listening to the examples of the trance induction, and in her review of cases in which she seems to be remembering trance inductions.

for the patient. She also uses regression to a period when the client patient could sleep well. My own experience in therapeutic settings lets me know that her ways of solving problems also would be useful in solving other problems, for example, fear.

Beckman refers to the handout a few times in the tape, which is awkward, but not a huge problem. Overall, I found the presentation to be well organized, in a very informal way. She gives the impression that this is a topic with which she is familiar and comfortable. The explanation of material is sprinkled with humour.

She describes a variety of ways that the client's creative potential can be used to stimulate the patient to find a more satisfactory night's rest. What I found most useful was the way that the presentation could be listened to repeatedly. Her voice is so gently and her stories so filled with ideas that I can learn without fully examining each word. Beckman is modelling a lullaby that clearly adds to her success with sleepless clients.

Reviewed by:

Eugene Don Dnepropetrovsk,
Ukraine

Using Neuro Affective Therapy To Help Couples

By Pat Love, Ed.D.

Couples Conference,
San Francisco, June 2003

Available from The Milton H. Erickson
Foundation, Inc.

Tape # CC03-W11AB, 2 tapes, \$22

See page 22 for ordering information

Neuro Affective Therapy is a fascinating way of describing the physiological changes in the brain, which make psychotherapy effective, and the psychotherapeutic experiences used to elicit the neurological responses that create those changes.

In this presentation, given at the *Couples Conference* in San Francisco, June 2003, Pat Love, Ed.D. describes the development of neural pathways via experience in a way which is systematic, well organized, and understandable, even to

chemical trail, forming a neural pathway. With repetition, neural pathways form the associations that individuals carry into each situation.

Love illustrates first how the associations begin formation in infancy, and are carried through each person's life. Positive associations trigger neurotransmitters that lead to relaxation. Negative associations trigger neurotransmitters that lead to alarm, and fight or flight responses. Love also explains how once an association is formed by experience the inclination will be to make the same association with new situations. This is often the source of difficulty in relationships, and why each person sees events through the lens of their own past experiences.

The process of neuro affective therapy is to make implicit associations explicit, and provide experiences, which will create new neuropathways, and therefore, second order change. Love presents several examples from her personal life, as well as clinical cases. She also pro-

She conveys an enormous amount of information in a way that is relevant, often humorous, and poignant.

those of us with less neurological savvy. Love explains what neuro affective therapy is, offers ways it can be used, and explains why it is called "neuro affective therapy."

There are 28 tenets regarding NAT, which describe how, "In order for change to last past the therapy door, the brain of the client had to experience what happened in therapy as relevant. The brain believes what is relevant is affect, so affect forms new neural pathways." A person may have cognition without affect. This is information that can be understood, and remembered, but will not necessarily elicit an emotional response. There has to be a physiological sensation and experience affectively in order for change to be permanent.

The complex physiological processes involved are broken down in a step-by-step manner that demonstrates how the experienced affect stimulates neurons to fire electric currents, which trigger the neurotransmitters across the synapses leaving a

vides several exercises that one can do individually, or in work with couples.

As the science of physiological changes created in psychotherapy is evolving, explanations like Dr. Love's will continue to increase in their importance. Dr. Love is an outstanding presenter, who gives listeners the experience she is describing. She conveys an enormous amount of information in a way that is relevant, often humorous, and poignant. She offers experiential exercises to the participants, which are easily practiced by the listener. If one has not had the privilege of hearing her speak in person, this tape makes a good introduction. If one has had the experience, this tape offers a great opportunity to reinforce what is challenging to absorb in one afternoon.

Reviewed by:

Sharon McLaughlin, MFT
Lakeport, Calif.

The Art of Strategic Therapy

By Jay Haley and
Madeleine Richeport-Haley

Copyright 2003, published by Brunner-
Routledge, 196 pages

www.brunner-routledge.co.uk

If you have ever wished to broaden your perspective on the interface between clinical problem solving, culture, and human development; if you have wished you could listen in on a training session by one of the

apist will do no harm. Only those therapy procedures will be used that the therapist is willing to experience or have his wife and children experience (p. 13). There is a brief section on how to give directives (which is direct and to the point). There is a ten-step outline on the stages of paradoxical therapy. And there are chapters full of rich information on ethnicity issues in therapy, therapy with couples, instances of violence or compulsory therapy, working with multiple identities, and therapy with a psychotic couple. All these are illustrated with case examples, dialogue

This text is full of insight and fascinating clinical cases that should expand the knowledge of anyone engaged in the task of human problem solving.

founding geniuses of family therapy, or if you have ever wished to know the thoughts of a master clinician with decades of experience to draw from, then *The Art of Strategic Therapy* is a book you will want to investigate. Regardless of whether the reader considers him or herself to be a "Strategic Therapist," the content is likely to be of interest. This text is full of insight and fascinating clinical cases that should expand the knowledge of anyone engaged in the task of human problem solving.

As the originator of Strategic Therapy, Jay Haley is the person most qualified to explain the history and development of this systemic therapy. Also, as someone who has never retired from active involvement in teaching and therapy, Jay Haley is able to describe modern developments in the field and current best practices. The clinical insight that he presents derives extra depth as it is juxtaposed against an anthological background thereby providing a broader understanding of human behavior (these contributions undoubtedly reflect the insights of Madeleine Richeport-Haley who is an accomplished anthropologist). Together these two authors have created a book that is concise and evocative.

One aspect of the book that I most enjoyed is its succinct style. Early in the book there is a section that outlines eight important ethical issues. As one would expect, they are given as directives. For example: The ther-

apist will do no harm. Only those therapy procedures will be used that the therapist is willing to experience or have his wife and children experience (p. 13). There is a brief section on how to give directives (which is direct and to the point). There is a ten-step outline on the stages of paradoxical therapy. And there are chapters full of rich information on ethnicity issues in therapy, therapy with couples, instances of violence or compulsory therapy, working with multiple identities, and therapy with a psychotic couple. All these are illustrated with case examples, dialogue

that takes place behind the one-way mirror, and brief notations that help construct the conceptual framework. Another interesting feature of this book is that most all of the clinical examples also are available in the form of supplemental video materials. In the appendix there is a list of videos by Haley and Richeport-Haley that correspond with various chapters in the book. There are at least 15 different tapes that can be ordered separately. Having seen some of these, I can say that the material in the tapes is supplemented by additional information contained in this book, and visa versa. For those who are interested, it is a unique treat to actually see the therapy that is being described in the book.

In summary, I would say that this is a book I highly recommend. Although not everyone may agree with the interpretations and strategic approach of Haley, practically no one questions the significance of his influence or relevancy of culture, family, and developmental stages. These two authors are uniquely qualified to address these topics and do so in an artful manner. The collaboration between Haley and Richeport-Haley has produced a rich and comprehensive text that is certain to find its way into training programs across the country.

Reviewed by:
Dan Short, Ph.D.
Phoenix, Ariz.

AUDIOTAPE REVIEW

The Ripple Effect: Six Changes to a New Way of Life for a Lasting Solution

By Albina Tamalonis, Psy.D.

*The Brief Therapy Conference:
Lasting Solutions*

Orlando, Florida, December 2002

Available from The Milton H. Erickson
Foundation, Inc.

Tape # BT02-SC29, \$11

See page 22 for ordering information

"The Ripple Effect: Six Changes to a New Way of Life for a Lasting Solution" is an audiotape from the *Brief Therapy Conference*, December 2002 by Dr. Albina Tamalonis. The Ripple Effect refers to a counseling technique that can be used for any vicious cycle, "the self-punitive, self-perpetuating behavior at the heart of all neurosis," including gambling, drinking, drug addiction, even people-pleasing. In this tape, Tamalonis describes herself as a New York City girl who learned much from the college of hard knocks. Theories she learned in school did not work with patients. Four years of psychoanalysis taught her only "the vocabulary." After reading *Uncommon Therapy*, she "saw the big picture and learned different understandings," which she uses to treat patients. Early in her talk, she puts the class into trance, reinforced learning, and then, out of trance, explains her techniques.

First, she gives her patients homework, in the form of four questions:

- 1.) Who are you?
- 2.) What are your needs and wants?
- 3.) Where are you going?
- 4.) What do you want from life?

As she states, "The essence of my treatment is learning. In every single dimension, I teach." She instructs patients to get in touch with their emotions, which can be activating or de-activating. We have options. We can become paralyzed with fear. We can analyze the feelings, which "just cement you into the pathology." Or, we can change our feelings, change the environment that caused them, or

do something about them.

Patients caught in a vicious cycle have learned improper responses to their emotions, including "all or nothing thinking," denial, and dissociation from the body. An obese patient may not recognize that she is hungry or full. Tamalonis teaches patients to re-associate to their body. She puts them into trance and performs age regression to childhood. Then she teaches awareness of signals, such as hunger or thirst, and how they were addressed, such as eating or drinking.

The keys to her therapy are:

- 1.) Be in touch with emotions
- 2.) Be in touch with the body
- 3.) Use flexibility in the response
- 4.) Most importantly,
DO SOMETHING.

Learning means to try and try again to see the whole picture while working on one piece. To improve on a skill, take small discrete steps.

In a vicious cycle, the social world narrows. Initially, the alcoholic seeks out other heavy drinkers. Eventually, the victim drinks alone. A flexible response must expand that social world. How?

In a humorous finale, she explains, "My number one rule is that 90% of the world are jerks." (She uses a more graphic term). She teaches patients to be clear about their boundaries and to develop criteria for who they allow into their lives. "It's not about changing the world. The world is a mess. Your job is to change you."

Tamalonis uses many of Erickson's techniques in "The Ripple Effect: Six Changes to a New Way of Life for a Lasting Solution", including hypnosis, age regression, utilization, flexibility, bodily awareness, self-protection, and action. Her comments are thoughtful and humorous. The quality of the audiotape is good. Her presentation is well worth hearing.

Reviewer:
Michael Grusenmeyer, M.D.
Rocky River, Ohio

INTERVIEW

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in San Francisco, in June, 2003 in this issue.) I have appreciated Love's clinical and professional skills and the wonderful way she captivated audiences throughout the years. For this interview, I was interested in knowing more about Pat Love as a person. This interview is an excerpt from a conversation we had while we were taking a break at the Couple's Conference in San Francisco in June, 2003.

"Listening in on a conversation between Pat Love and Rick Landis."

Landis: What you presented at your "Using Neuro-Affective Therapy To Help Couples" presentation here at the Couples Conference was quite a different

shift in focus from when you first became a motive force in the world of couples therapy. Your ideas seem to be constantly evolving. What do you think accounts for this evolution?

Love: The lack of answers in the existing research and literature led me to look elsewhere. I've always been a skeptic, a person who wants to know: *Why does that work? How does that work?* Literally, when you say, 'be intimate,' what do you mean? What is going on? If we took a video, I'd want to measure it.

It's my intent to understand at a deeper level what was going on and why, in certain techniques, there was still this blank area. All these techniques, all this knowledge, all this theory, and still there are issues that don't get addressed with individuals

and couples.

Landis: So rather than providing definitive answers for you, your training and experiences helped you develop clearer questions.

Love: That's it exactly. When I taught in graduate school, there was a graduate course curriculum for clinical hypnosis. Since I view hypnosis as being physiological, it was a natural fit for me, coming from physiology. It's as though I've come full circle, not just from my medical beginning, but also from my original mindset of slowing everything down, looking at the teeny-tiny, micro level of what's going on between people. And I think that's why I took to the use of hypnosis like a duck to water. It made logical sense to me physiologically and experientially. And I've never lost that perspective.

Landis: It is an exciting thing when someone who has your depth

of understanding about the interactions of couples, overlays that perspective with physiological information. That is a powerful combination.

Love: I have found that one way to cause a paradigm shift in working with couples is to give highly scientific, physiological information that makes sense of their experiences. This information allows them to understand that their actions and reactions are not an indication that they are mad, bad, or there's a problem with *who* they are, but that there's a physical process influencing those interactions, and there is something they can do about it.

Landis: How would you describe this through a Neuro-Affective Therapy lens?

Love: Neuro-Affective Therapy is just a fancy name that means, in

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TAPE ORDER

order for change to last past the therapy door, the brain has to have experienced something relevant in the therapy room. And what is relevant to the brain is affective response. The brain remembers affect more than anything else, good, bad or indifferent. So what I'm trying to do is facilitate and create an atmosphere in which the couples will then have the courage to move into that very vulnerable, yet transformational, state. Because once you move into that, then passion and connection flow. It's those peak moments that Maslow talked about. Those are magical moments, and I get chills, I'm moved to tears, the rug comes three feet off the floor, I mean, we're all in this together, and I just feel like a proud parent.

You know what it really is? I get the sense that I'm sitting in a sacred place when that happens. It's about a true *sacredness* of the moment. And what's interesting about this is, I have always longed to be a believer, but I've never been a believer. However, I have a hunger, and this whole understanding has made me feel like, somehow, I've garnered more faith from it. I don't know. Maybe it's an understanding or a hope or a faith, a hopefulness about the human race.

Landis: So, the Neuro-Affective Therapy perspectives are in the service of increasing affect regulation that quiets the body. When you quiet the body, then we can truly "Be" in the present with another human being rather than being limited to being who we were sometime in our past. And so you're talking about an advantage of understanding things from the perspective of hormonal and neurotransmitter effects, you can safely experience things that transform the meaning of the relationship.

Love: Right. And I think that, for some of us, because of the interaction of genetic pre-disposition and experience, our bodies have altered in a way that makes it so difficult to regulate our emotions long enough to be intimate with someone, to feel happy, even, when those moments happen. I mean, I've had to work so hard just to feel happy, like this conversation, I'm just blissful about our conversation. I just feel it, I could cry with it, it's so exciting to me. However, I've had to work really hard to get to this place, to feel that much emotion.

And it's because I've just left no stone unturned, that's what's led me to this. I looked at my life and said, "I have a good life; why am I not happy? I have good people who adore me, love me. Why can't I feel that?" And it's not intellectual. So, how do I then create a lifestyle that will enable me to feel this much joy and bliss in these moments of learning and synergy that, for me, are what life is about? Our conversation is another form, a collaboration.

So how do I then optimize the probability that this will happen on a daily basis? Because that's what it is. These opportunities happen all the time. It could be with a stranger, it could be someone you know. So how do I put myself into a place where I'm receptive to these moments?

Landis: And that, from my perspective, is the right question. Because an aspect of it being the right question is that the answer is inevitable. It will occur. If it's the right question, the answer jumps up, because it keeps you looking. So the idea of saying, "What do I need to do in order to make this a daily experience, what do I need to know, what do I need to experience that?" - it's an unending quest. And, as far as I'm concerned, unending quests are the ideal ones.

Love: Especially for those of us that curiosity "floats our boat." Discovery is what excites me the most.

Landis: So how do you approach this actually working with clients?

Love: Well, it was a process. I started by doing a lot of therapy. For years, I did couples workshops, these long workshops where I worked with couples intensely, hour after hour after hour after hour. And I think that got me over my fear of making a terrible mistake. I always thought that couples were somehow like an egg. If you cracked it, you could never get it back together. Working intensely with couples got me over my fear of that much intimacy and energy that goes on between couples. As I learned to be comfortable, then I could observe more. Then I really began to understand that I provided the safety that allowed the energy to safely flow between the two of them. My daughter, Kathleen, reminded me this morning of one couple who said to me, "Could we just rent your office as a room? When we're in here, we act so much better." And I realized

that I was more like the safety net for them to experience this intimacy and intensity.

And those moments were just so moving and so sacred and so energizing. I kept moving toward those, intuitively. And then, as a therapist, I realized that people pay us to have the experience. I got paid to convince people that they can do what they can already do. I haven't gone far from that definition. Clients don't come to us with complex problems that need a rocket scientist. I really think they come to us for support and permission. "Let me know that I can do what I really need to do," whether it's in a relationship or whatever.

I don't do therapy. I do consulting. It's mincing words, but it gave me permission to do other than what I was originally taught to do. At first, I just thought I was lazy. I started by just sitting back and saying, "You know, I don't know why, but this is what's coming to me." And I would just free associate in the moment. What came back to me was from the client: *they* made sense out of my reality. I didn't even know why I was saying it. I might just say, "I'm just getting a picture of this," or "I'm just having this feeling," or "What came to my mind was this." I didn't know why, but I quit having to know why and trusted the "inner wisdom" of the client. That happened enough to where I got humbled, humiliated by my prior experience of believing somehow I knew more about this person than they did. I got confronted by the humility of that, and I was just embarrassed that I had even presumed to know. And that humility liberated me. I just started realizing, it's more about how I show up and am attuned to the client. Really, my ability to be present and really ready to be influenced by my client is what I was trying to facilitate between the two people, but I hadn't applied it to myself. I don't know how it came, but I hadn't thought that what's good for them is also good for me.

Landis: This is very reminiscent of how Graham Barnes described Erickson as having a non-theory-centered psychotherapy.

Love: Yes, it is. People kept saying, "What's your model? What's your thinking?" or "What are you?" So finally, I just decided to tell my own ideas. This was a novel idea for a per-

son with my background. Where much of my life I just lied or tried to give *The Answer*, I just started telling the truth. It might sound simple, but for me, it was very difficult, because I wanted to give the acceptable answer, the scared answer. But once I started telling the truth, the people started making sense out of it, like you. It's wonderful.

Landis: It is exciting. We are just chock full of undocumented features. And however we came to be, it's all inside there.

Love: Socrates was right. You just have to ask the right question. For me, people can solve their own problems. People are the only ones who can solve their own problems, and they always can, if they have access to their innate talent and creativity and resources. We're designed where two of our advantages as a species: a big brain, and we help each other. I think the assurance that there is someone there quiets the system and gives access to the neocortex. And I believe that just my presence and just my belief in you - and it's more than a cognitive thing, it's more of an experiential, neuro-physiological thing. I really think that it's the way I sit with you, it's the way I sit with my clients. I think that's why research has always shown the bottom line in effective psychotherapy is the relationship.

Clients sue the therapists that they don't think care for them. So I think that, as many mistakes as I made as a young therapist, I think innately I had this belief in people, and I think that's probably why people gave me a wide berth. *{Laughs}* I think innately they knew, "Hey, she may be stupid, but she's got a good attitude! She has good will!"

And it's only when I tried to lay something on the client, that began to feel more and more dissonant for me. That somehow that didn't - I don't know, I never...

Landis: It moves us out of the trance state.

Love: Yes.

Landis: It moves us out of the I/thou relationship, and it puts us into the mindset of "I know it and you're sick."

Love: Right! Exactly, exactly. And that gave me the courage to go into this profession. At one time I had a huge, major couples' workshop

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where people came when they were in serious distress. And there were all these people who were sitting there with deer-in-the-headlights looks. And I had this flash and I thought, "Who do I think I am, that I can stand up here and hold this energy?" "You're nuts for thinking you're walking into this on purpose." I just had this rare fear that these people are in such pain and agony, and somehow I'm going to help them? It was like, "What are you doing? You're walking into the lion's den." However, somehow, I think change is in the simplicity of good information, explaining, reframing, becoming a holding place for couples to air that sacred space, and not having to do anything wow-ing or technique. Somehow the more I learn, the simpler it gets, and it just frees me.

Landis: You've transformed yourself from *doing* therapy to *being* therapy.

Love: Yes, yes. That's a lovely way of putting it.

Landis: I appreciate your taking the time from the conference for us to talk.

Love: It has been my pleasure. I've really enjoyed it.

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*: Donna Bacic, LCSW, Rubin Battino, MS, Carol Fitzsimons, MS, LPC, Gail Gabriel, MFT, Patrick Litano, LMFT, Mark Mishory, and Ellen Rugg, MA, CSW. Thank you for your continued support of The Milton H. Erickson Foundation and its activities.

The Erickson Foundation also would like to thank Melba F. Vickery and Muriel Kratz for their very generous donation in memory of Earl Vickery and Norma for the Milton H. Erickson Archives. Donations earmarked for the Milton H. Erickson Archives go directly to assisting with expenses for restoring the audio and videotapes from the late Milton H. Erickson, M.D., along with tapes from past Milton H. Erickson Foundation Conferences from 1980 through 2003. This extensive restoration process will make these tapes, CDs, DVDs, and other materials available to mental health professionals around the world for training purposes.

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