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# THE MILTON H. ERICKSON FOUNDATION NEWSLETTER

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## I N T E R V I E W

### INSIDE THIS ISSUE

#### INTERVIEW

Michael Gazzaniga, Ph.D. 1

#### IN THE SPIRIT OF THERAPY

An Interview with Bill O'Hanlon 4

#### THE POWER OF TWO

Preserving the History of Erickson 6

#### CASE REPORT

Tell a Story to a Story 7

#### THEORETICALLY SPEAKING

When Abby Died 8

#### INTRODUCING THE INSTITUTES

The Milton H. Erickson Institute  
of Barcelona, Spain 9

#### INTERVIEW

Interview of Christine Guilloux  
by Kathryn Rossi 11

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#### Evolution Presenter

### MICHAEL GAZZANIGA, Ph.D.

Interviewed by C. Alexander Simpkins,  
Ph.D. & Annelen M. Simpkins, Ph.D.

Michael Gazzaniga has had a long and illustrious career, beginning with his groundbreaking discoveries about the two hemispheres of the human brain. His important research with split-brain patients (people whose brain hemispheres were surgically separated at the connecting corpus callosum to stop debilitating epilepsy), clarified how the two sides function differently and are in communication with each other. Thanks to his many years of careful research, we now have a better understanding of the structure and function of the brain.

Gazzaniga is currently a professor of psychology at the University of Cal-



ifornia, Santa Barbara and director for the Sage Center for the Study of Mind. He has served as a professor, researcher, and administrator at numerous universities from 1967 to the present. An innovator, Gazzaniga founded the Center for Cognitive Neuroscience at the University of California, Davis, and the Neuroscience Institute at Dartmouth College. He also started the *Journal of Cognitive Neu-*

has served as a member of President George W. Bush's Council on Bioethics (another of Gazzaniga's interests) and as Director of the Law and Neuroscience Project, with a mission to study the interface between the two disciplines. Ever busy with many simultaneous endeavors, Gazzaniga is currently expanding on his earlier findings to elucidate the functional interactions of brain systems.

For more than 40 years, Gazzaniga has been devoted to neuroscience. His work has left an indelible mark on the ever-evolving understanding of our amazing mind-brain system.

**Annelen Simpkins & C. Alexander Simpkins: Many of the great discoveries throughout history occurred unconsciously, as in Kekule's discovery of the benzene ring from a dream, or Otto Leowi's realization that came to him in his sleep -- that a chemical was stimulating communication between neurons leading to the understanding we now have about neurotransmitters. What was**

---

*My first project was to study Case W.J., a man who was about to undergo surgery for his epilepsy. It took off from there.*

---

rosience where he now serves as the Editor-in-Chief Emeritus. Gazzaniga has written dozens of books, beginning with *The Bisected Brain* in 1970 and including *The Cognitive Neurosciences*, a 1312-page tome now in its 4th edition which collects the latest advances from top neuroscientists. He has authored hundreds of articles and chapters, chronicling his scientific work through the decades. Gazzaniga

**the inspiration for your early work with split-brain patients?**

**Michael Gazzaniga:** I was interested in studying the nervous system and to that end enjoyed a summer fellowship at Caltech under Roger Sperry. I thought I wanted to study nerve regeneration. When I arrived at the lab, the excitement surrounded the early

See INTERVIEW on page 25

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## EDITOR'S COMMENTS

The Evolution of Psychotherapy Conference, December 11-15, in Anaheim, California, represents the evolution of the art and practice of psychotherapy as seen through the lens of multiple disciplines. Unlike the nine blind men who described the elephant and are left with only their fragmented impressions and conclusions, this Conference brings together multiple current perspectives, and presents them in a forum for all to broaden their understandings and perspectives.

The keywords in the various topics presented at the Conference could fill a gazillion pages in a Google® search--neuroscience, poetry, cognitive behavioral therapy, music, spirituality, psychoanalyses, conscious, unconscious, mindfulness, behavior, reality, community, cultural anthropology, solution-focused therapy, linguistics, relationships, hypnosis, and many more.

This Newsletter represents just a taste of the themes you will find at the Conference; one that has set the gold standard for integrative psychotherapy conferences.

Let's start with our *Featured Interview*. Prolific polymaths, Alexander Simpkins and Annellen Simpkins, interview Michael Gazzaniga\*, the man whose name has been associated with cognitive neuroscience for more than four decades. In 1967, his article for *Scientific American* -- The Split Brain In Man -- dramatically expanded the direction of my own professional studies. Today, functional neuroscience is a central consideration in many of our clinical perspectives. For example, Kay Colbert and Roxanna Erickson-Klein's book, *Engage the Group, Engage the Brain: 100 Experiential Activities for Addiction Treatment*, reviewed in this issue by the Simpkins, presents the practical applications of neuroplasticity. And, John Lentz reviews Russell Meares' biological and research-based book, *A Dissociation Model of Borderline Personality Disorder*. Both these books offer many provocative ideas.

More than a decade ago, Newberg, D'Aquili and Rause presented a neuroscience description for spiritual experience in their book, *Why God Won't Go Away: Brain Science and the Biology of Belief*. They describe how the potential for a spiritual experience is in



each of us. Since then, the number of clinicians who include spiritual questioning in their therapy has logarithmically increased. Bill O'Hanlon\* addresses this aspect in his interview by John Lentz for In *The Spirit of Therapy* column. (O'Hanlon shows his pragmatic side in his book, *Becoming a Published Therapist: A Step-by-Step Guide to Writing Your Book*, also reviewed by Lentz.) Lentz further utilizes the spiritual elements in his three CDs: *Relaxation Techniques for Healing from Trauma*; *Relaxation Techniques for Cooling Anger*; and *Relaxation Techniques for Relieving Loneliness*, all reviewed by Alexander Simpkins and Annellen Simpkins.

The clinical applications of the arts also are represented in psychology's evolution. Susan Reuling Furness contributes her perspectives as a Registered Poetry Therapist in the article, When Abby Died, for our *Theoretically Speaking* column. The DVD, *Child Therapy Case Consultation with Violet Oaklander, PhD\**, reviewed by Maria Escalante de Smith, is a combination of Gestalt and Expressive Arts therapies. *Gardens, Princesses, Porcupine*, by Consuelo C. Casula is a magical book of metaphoric tales whimsically reviewed by Christine Guilloux. Guilloux in turn is interviewed by Kathryn Rossi about the events that led up to the rebuilding of *La Maison des Ormes: A 50 Year Dream of the Elms Growth Center*. The book, *Renaissance de la Maison des Ormes*, reviewed by Marilia Baker, includes essays, artwork, poetry, and stories of

personal renaissance that came out of this not-so-minor miracle.

Our *Case Reports* by Eric Greenleaf and Angela Wu is an astute utilization of age-appropriate meanings. John Dyckman's commentary walks us through the underpinnings of the language and assumptions. It's truly elegant. A companion book for *Case Reports* could be *101 Things I Wish I'd Known When I Started Using Hypnosis* by Dabney Ewin, reviewed by Rubin Battino. The book covers many of the unspoken elements that made Greenleaf and Wu's brilliant intervention work so well.

The range of arts and sciences combine in addressing the themes of anxiety and trauma in several of our book reviews. *The Narrative Journey: An Illustrated Guide to Narrative Therapy Principles* by J. R. Stillman, LICSW, is reviewed by Rubin Battino, and Kay Colbert shares her critical understandings in her reviews of *Anxiety Disorders: The Go-To Guide for*

*Clients and Therapists* by Carolyn Daitch, and *Progressive Counting: Within a Phase Model of Trauma-Informed Treatment* by Ricky Greenwald. Also, John Lentz reviews Irvin Yalom's\* interview with Judith Beck\* in her DVD, *Cognitive Therapy for Weight Loss: A Coaching Session with Judith Beck*.

Given that the Evolution of Psychotherapy Conference is presented by The Milton H. Erickson Foundation, we have included a special article on Dr. Erickson and his wife Elizabeth written by their daughter, Roxanna Erickson Klein. Roxanna expands on the *Power of Two* series to present *The Power of Two -- The Power of Many: Preserving the History of Erickson*, and it is wonderful. For those who would like to explore further, Betty Alice and Allan Erickson and Louis Cauffman produced a fascinating DVD, sharing tales and treasures of what it was like living with Dr. Erick-

See COMMENTS on page 7

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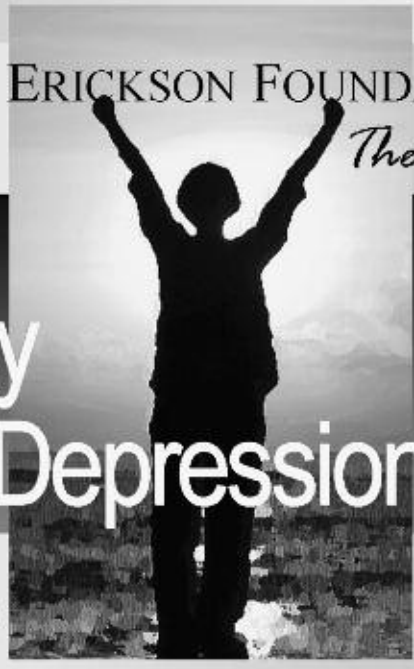
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THE MILTON H. ERICKSON FOUNDATION *presents*  
*The new brief therapy*

# Treating Anxiety Depression & Trauma

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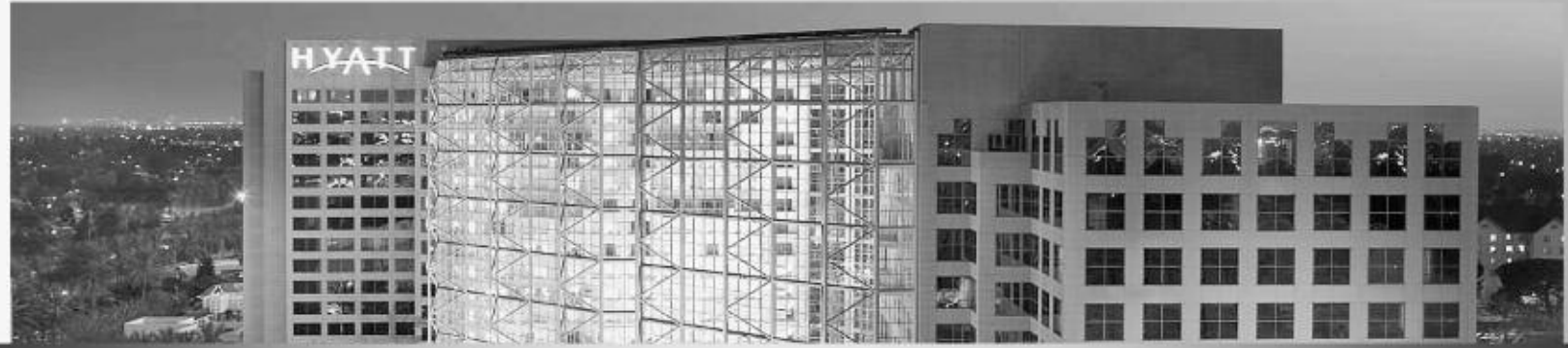


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And  
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come!



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# IN THE SPIRIT OF THERAPY

## An Interview with Bill O'Hanlon

By John Lentz

**John Lentz:** Your book, *Pathways to Spirituality*, offers readers easy ways to help others get in touch with their spirituality, and it does it in such an inclusive way that almost anyone could affirm your definition of spirituality as compassion, commitment, and connection.

**Bill O'Hanlon:** One of the things I took from studying with Milton Erickson was the notion of a "resource-based" therapy, that is, people have resources they are not using at the moment that could help solve their problems or relieve their suffering. One take on those resources is that they are, in the words of one book by the Lankton's in the Ericksonian field, "the answer within." But I think there are also resources beyond the individual -- social, environmental, and spiritual.

**JL:** How do you see spirituality as a part of the therapeutic process?

**BO:** The spiritual has been underemphasized or ignored because therapists are concerned about imposing



their religious beliefs on people. But it is potentially just as impositional to leave out spiritual resources. I wrote *Pathways to Spirituality* to show a simple method of evoking spiritual resources without being imposing -- even with people who don't consider themselves spiritual or religious.

**JL:** With all your success of writing 30 plus books, being on Oprah, teaching around the world and now teaching at the Evolution Conference, how do you keep grounded spiritually?

**BO:** I practice gratitude. I feel incredibly blessed by something that wasn't entirely my doing--to have been able to contribute to the field and to others through speaking, writing, and now online.

**JL:** What spiritual practices do you practice?

**BO:** I have daily spiritual practices that include music, connecting with my cat, Rudy, and my human loved ones. I live in a beautiful place (Santa Fe, New Mexico) that reminds me of the spiritual through nature, and I do work that I think is God-called and contributes positively.

**JL:** In your book, *Becoming a Published Therapist*, you basically inserted a second book showing how to outline a book. Yet that second book is therapeutic for the reader, and you also packed into the text implied positives. Was that part of your intention of being spiritual--by offering so much and giving extra? It comes

across as very loving and generous.

**BO:** Thank you. I do have that sense of a world of "enough" for all has been provided, so I like to give all that I can, having been taught that giving makes room for receiving. It gives me a kick to help others make their contributions in the world, and having been a bad, clueless, reluctant writer in the early years, I am convinced that if I can write a book, almost anyone can.

**JL:** I find your unique blend of confidence and openness to be remarkably healthy. In person, you seem confident, assured, and yet also very open about your past struggles in workshops. Is part of the reason you are so confident because you are so open? Or do you view your openness as being humble, or both?

**BO:** I was absolutely messed up when I was younger. Having been called to a bigger contribution and really saved from my unhappiness through some spiritual interventions, I feel confident that God/The Universe chose me to do this work, and humbled me because I didn't initially feel myself worthy or capable of it.

**JL:** You are so clearly healthy today that you are an inspiration to many. Thank you for sharing this part of yourself.

## BOOK REVIEW

### *Becoming a Published Therapist: A Step-by-Step Guide to Writing Your Book*

By Bill O' Hanlon

Published by WW Norton and Company  
New York and London  
2013, 192 pages, ISBN: 978-0-393-70810-3

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

Not only has O'Hanlon written a useful book on how to become a published therapist, he has done so in a way that keeps you engaged and offers helpful tips for the process. This volume provides far more than most books on how to become published, because O'Hanlon has a unique way of speaking that includes an almost shocking openness. He invites the reader to identify with him; with the mistakes he admits to; and his successes. In short, by way of his personality, the author gives the reader actual assistance and lends his creativity, evident throughout the book.

This book includes an index and an appendix with advice from a nonfiction editor. O'Hanlon has shown himself to be not only a master therapist but also a whiz at publishing, writing, and marketing. His creativity and energy in how he views tasks is helpful, but what makes a difference is his unique ability to distill what is

most important and to say it in very clear language. For instance, he provides the six "Ps" of how to write a successful query letter so clearly that you are likely to feel invited, intrigued, befriended, encouraged, but never lectured. This is no small task, and yet this is how he has written the whole book.

While it is clear in the title of the book that he offers a systematic guide, O'Hanlon actually does more than that. He offers a second book inserted into the first, showing the steps he took in writing a proposal for another one of his books, *Thriving through Crisis: Turning Tragedy and Trauma into Growth and Change*. In reading the proposal you will learn both how to write a proposal, and new tools for thriving through crisis. Writing a book can be a crisis in and of itself, and the ideas from the provided example are useful and inspiring, because they speak to the reader on several levels simultaneously.

I found *Becoming a Published Therapist* to be filled with so many practical ideas that I wished I had taken notes, and will do so the second time around. For example, O'Hanlon recommends writing a proposal as if you were going to attract an agent or large publisher, even if your goal is to self-publish. His reason for this is, is that going through the process clarifies your thinking so that the book will be much more focused. What he doesn't say, is that the book you write will also be better because you will think in terms of marketing instead of just content, and this will make it more readable.

In spite of the fact that I have written several books, I learned a lot about publishing that I didn't realize I needed to know. I have already recommended this book to several therapists who want to write or who have books underway. I wish *Becoming a Published Therapist* had been available before I wrote my first book. It would have made the whole process easier!

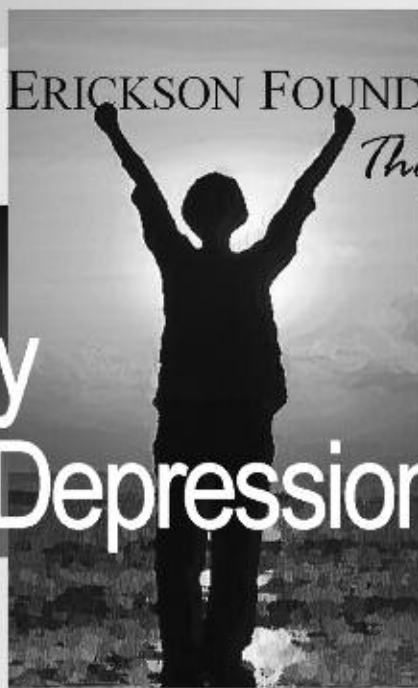
# Call for Proposals

THE MILTON H. ERICKSON FOUNDATION *presents*

*The new brief* therapy

## Treating Anxiety Depression & Trauma

DECEMBER 11-14, 2014  
HYATT REGENCY ORANGE COUNTY  
CALIFORNIA



The Milton H. Erickson Foundation is calling for proposals for the 2014 Brief Therapy Conference, which will be held from December 11-14, 2014 in Orange County, California. Those interested in presenting a Solicited Short Course on the topic of short-term therapy methods (or closely related area), must submit (1) a 200-word presentation summary, (2) a 50 word abstract, (3) three educational objectives, (4) three true/false questions to be used for continuing education purposes and (5) curriculum vitae of all presenters in your program. **Preference will be given to proposals that address the theme “The New Brief Therapy: Treating Anxiety, Depression & Trauma.”** Due to limited space in the program, please submit only one proposal per presenter.

There will be approximately 18 total Solicited Short Courses. One and a half hours allotted for each Short Course on Thursday, December 11, 2014 from 9:45-11:15 AM, 11:30 AM-1:00 PM, and 2:15-3:45 PM. Short Course faculty receive complimentary registration for the Conference, but pay their own expenses for food, lodging, and travel.

**All proposals must be submitted online at [www.brieftherapyconference.com](http://www.brieftherapyconference.com). We no longer accept hard copy submissions.**

**DEADLINE: Proposals must be submitted online by January 24, 2014. Acceptance or rejection will be sent by March 17, 2014.**



MILTON H. ERICKSON  
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# THE POWER OF TWO

## *The Power of Two - the Power of Many*

### Preserving the History of Erickson

By Roxanna Erickson Klein

This column was conceptualized to celebrate the manner in which a partnership generates a synergistic effect. The first column was dedicated to the collaborative efforts of Dr. Milton Erickson and his wife, Elizabeth.

Since then, we have featured other married couples, some of whom have one partner more in the foreground and some of whom are more equally collaborative. Phil and Norma Baretta, Michael and Diane Yapko, Alex and Annellen Simpkins, are among those who have been featured. With each column, we have described how in working harmoniously, *the power of two* extends the reach of both individuals. Also, the potential for influence is compounded exponentially.

While the synergistic effect is both felt and appreciated within a partnership, it is not always recognized by students or the public. In the case of Milton and Elizabeth Erickson, he was established in his profession when they first met she was a student. A team dynamic evolved between them, but professional recognition of Milton's work underplayed the centrality of Elizabeth's role. Together they strove for a change in the horizon -- how psychotherapy is practiced -- to gain acceptance of new ideas they put forth. *Together* they made an impact.

The psychotherapeutic approaches that have come to be identified as Ericksonian, have largely changed how contemporary therapy is practiced

worldwide. Although the ideas and pioneering works are credited to Milton Erickson and Elizabeth gracefully accepted her husband's recognition, between the couple it was acknowledged that she was an important part of the process. And, several of Dr. Erickson's followers, including Jay Haley, recognized this and wrote appreciative dedications to Elizabeth in their books about Ericksonian methodology.

Collaborative effort is a powerful force, even when it is not openly rec-



*Dr. and Mrs. Erickson*

ognized. Great works involve dedication, support, and often behind-the-scenes efforts by others, sometimes many others. With this column, we are extending beyond the reach of a partnership, beyond the *power of two* and instead reaching out to the *power of many*.

The illustration and feature of this column is the Erickson residence. I begin with a little background:

Milton and Elizabeth Erickson moved to Phoenix, Arizona from Detroit, Michigan in 1948. Within a year Dr. Erickson had established a private practice in their first home on Cypress Street near the Phoenix Heard Museum. Already a maverick, he broke with many of the traditional ways of

treating patients. Like the country doctor who had influenced him in his formative years growing up in a rural community, he practiced an informal approach, integrating Erickson family members and local resources into the care of individuals who sought his services.

Stalwart in his ethics of confidentiality regarding his patients, Dr. Erickson treated them as individuals, and even sometimes as neighbors. The natural respect he radiated for his patients gave them a sense of worth and dignity. Although a few chose to remain private about their lives, the majority of patients enjoyed interaction with the Erickson family. While today it may seem incredulous to imagine a patient wandering into a psychiatrist's kitchen for a glass of water, in the Erickson home during the '60s and '70s it was an everyday event. This interaction with a "normal" family and its reciprocal respect for the patient offered a casual atmosphere, and its freedom provided patients with elements of healing.

In 1970, Milton and Elizabeth Erickson moved to a modest ranch-style home on Hayward Avenue in north Phoenix. For the last decade of his life, Dr. Erickson saw patients, conducted teaching seminars, and worked with colleagues with the same sense of interplay between home and office that had worked so well at the Cypress house. Hundreds found their way to his doorstep and came to identify the Hayward home as pivotal in their healing, learnings, and understanding about the power of hypnosis and psychotherapy.

Milton Erickson died in 1980, and in 2008 the Erickson Foundation purchased the Hayward property with the intent that it become a museum destination for the many visitors of the Foundation and students who attend the Intensives Training Program. Master classes in psychotherapy and lectures on Ericksonian approaches have taken place at the museum for several years now. Mrs. Erickson had kept Dr. Erickson's office mostly intact and family members, along with Jeffrey Zeig, have donated or loaned memorabilia to the museum to further ensure



*Milton H. Erickson and  
Elizabeth Moore Erickson*

its authenticity -- just as it was when Dr. Erickson practiced there. The office, and the Hayward home, is an accurate view of the humble lifestyle the Ericksons lived as Dr. Erickson developed his extraordinary work.

On a tight budget and spearheaded with the volunteer efforts of two Erickson family members, the Hayward house Erickson Museum is beginning to blossom. We sincerely hope that many will be moved to work with me and my sister Kristina to further develop contributions of memorabilia and other sources that will add to the current efforts of the museum.

In the morning shadow of Squaw Peak mountain (renamed Piestewa Peak), a visit to Dr. Erickson's simple office, with its modest surroundings and specimens from his cherished Ironwood collection, brings a broader perspective of how much can be accomplished with so little.

We invite you to book a tour to the Erickson Museum the next time you are in Phoenix. <https://erickson-foundation.org/erickson-museum/>

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

## *Erickson's on Erickson*

Produced by Betty Alice Erickson, Allan Erickson, and Louis Cauffman

Published by Louis Cauffman, Genk Belgium  
Copyright 2013

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

What a wonderful gift Betty Alice and Allan Erickson have given us! They have shared memories of their father as a young and vibrant man, as only a child of a parent can do. They also include stories about their family that have been handed down, or that their father, Milton H. Erickson, personally told them when they were growing up. If you have ever wanted to know the more complete picture of Milton Erickson, this DVD will help you understand his personal and professional life.

The DVD is a small portion of a three-day workshop where Betty Alice Erickson and her brother Allan discussed various aspects of their father's life, and how they experienced him. Through skillful editing, music, chapter labels, and family pictures, you get a glimpse of Milton Erickson's entire life--beginning with his birth in Nevada; growing up on a farm in Michigan; and his major life events. This DVD captures a younger, more energetic Dr. Erickson, one who has been left out of many discussions about him. Both Betty Alice and Roxanna knew their father as being active and capable; neither one even knew he was handicapped until later in their lives. His intensity of life and involvement with living simply didn't involve his handicap in any obvious way, so, they didn't think about it until they witnessed an event that opened their eyes. For each of them it was a different event. Understanding that alone and the way it was revealed to them is well worth this DVD filled an incredible wealth of insight, information, family joy, and wisdom.

Beautifully filmed in front of a small select group of professionals, and lovingly edited, this DVD will have you eager for more. Betty Alice and Allan tell stories with such enthusiasm and joy, that you may find yourself laughing right along with them, even as you learn important aspects of Dr. Erickson's life and therapy that will help you be a better therapist. Music has been added to the chapter designations and the life stages they discuss. Transitions are so well done that they provoke your curiosity and draw you in for the next surprise and insight. Early on, a story about a young Dr. Erickson is illustrated with a short film of a boy so that a visual illustrates the lesson even more powerfully. And, pictures of Dr. Erickson's life and family are woven into the content.

Even if you have already seen some of these family pictures, the way they are cast in a different context with others offers a new perspective. Part of the value of this DVD isn't just that it gives wonderful, new insights about Milton Erickson and his work; it also has the universal messages for which Dr. Erickson stood, and for which his family stands. It is the amazing story of Milton Erickson's transformation through his handicaps and hardships that touched his family, friends, patients, and students. *Erickson's on Erickson* is the story of a real person facing real obstacles. Accepting his situation Dr. Erickson creatively turned his trials and tribulations into helping others.

## COMMENTS

*continued from page 2*

son. John Lentz's review brings the energy of this DVD to life.

Also in this Newsletter we pay homage to our international community with Marilia Baker's article featuring The Milton H. Erickson Institute of Barcelona, Spain in her *Introducing the Institutes* column (Welcome back Marilia. You were missed.) and Teresa Robles' News from Centro Ericksoniano de México in her *International Community* column.

Every Evolution Conference has been a piece of history that never duplicates itself and the 2013 Conference is no exception. It will only exist once, as a unique intersection in time with a stellar faculty. I am glad for those who can attend this one-in-a-lifetime experience.

### **Richard Landis**

Orange, California  
\*Presenter at 2013 Evolution of Psychotherapy Conference

# CASE REPORT

## Tell a Story to a Story

By Eric Greenleaf PhD and  
Angela Wu MFTi

### *Chapter One*

Dear Dr. Greenleaf,

This is Angela from your class at MRI. I have a situation at home and I wanted to write to you because I sense you may be able to help me deal with it by using a story for the solution.

This morning my 3 ½-year-old son walked quietly into my room with his favorite stuffed pink pig and comforting purple blanket. Instead of his normal singing, shouting, and jumping in my bed, he looked tired and sad and crawled under my blanket to cuddle with me. I asked him, "Did you have a good night's sleep?" He was solemn and I saw the thousand-mile distant stare in his big brown eyes. He had that stare when he was in a trance.

After a while, he turned to me, and I saw tears running down his cheeks. I kissed him and dried his tears.

He looked at me and said, "Mommy, I want (you) to read books (to me) about death. I do not understand death."

I asked him, "What do you know about death?"

"Mommy, are you going to be old?"

"Yes, I will be old," I said. "We all grow up and grow old, and it's fun to grow up." "When I grow up, then you will be old and die?" he asked.

"When you grow up, I will still be here to love you," I replied.

"Mommy, I do not want you to be old, so I won't grow up and you can always take care of me."

"Bobby, I will always love you and take care of you whenever you need," I said. No matter how big we are, we always need people to take care of us at times. We all take care of each other."

"But Mommy, I don't want you die, so I won't grow up."

"Bobby, it is so much fun to grow up. You can drive cars (he loves cars),

and you can go out at night (he likes to play outside at night). And, I am still here to love you," I told him.

Dr. Greenleaf, I cannot let this conversation with my son continue, as I am afraid I will be trapped with him on the topic of death. I try to distract him with toys and reading books, but what's next? Is he going to need a story about death so he can feel happy about growing up?

Warmly, Angela

### *Chapter Two*

I called Angela and told her that I didn't know what she should say to her son, but I do know what I told my grandson when he was about the same age:

"Grandpa, you're old!"

"Yes, I am."

"And you're going to die."

"Yes, I am. But I intend to live a long time. I want to live until I'm 100 years old."

### *Chapter Three*

Dear Dr. Eric,

Thank you for calling. The story of you and your grandson is very touching and loving, especially when it was told in your soothing voice.

Bobby and I have had more conversations about death and growing up, and he's decided that if he doesn't grow up, then I won't die. He has not wanted to eat or sleep by himself.

"Mommy, feed me, I am a baby."

"Mommy, hold me. Hold me like a baby."

"Mommy, I just want to be your little boy. I don't want to be bigger than you."

"Of course you are always my little boy, and I always love you," I told him.

Last night at bedtime, I adopted your story of living to the age of 100, and then we started to count to 100.

"How big is 100?" Bobby asked.

"Very big number...let's count,"

*See STORY on next page*

# THEORETICALLY SPEAKING

## When Abby Died

By Susan Reuling Furness, M.Ed.,  
LCPC, LMFT, PTR

Frigid rain peppers hard  
blackened snow

You continue to season  
my thoughts

When I saw her in the waiting room last March I knew the lymphoma had recurred. She'd aged. Her shrunken profile barely stirred the air as she walked into my office. Undaunted, she wanted to write more of her memoir. As a Registered Poetry Therapist, I offer healing trances through spontaneous free writing and bibliotherapy, as well as hypnosis.

I met Abby several years ago in my poetry therapy group. To continue the work she began then, we agreed to meet in my office, unless the chemotherapy was debilitating, in which case we'd met at her home.

At first, I brought poems to prompt her writing. She wrote about her wedding, the honeymoon in Provence, and the day her mother purchased the Wedgewood teapot displayed in the kitchen. She actually slipped the teapot story into the teapot so her children would discover it in the future. Writing helped her good spirits stay alive.

Yet, I saw the need for a deeper trance, so I introduced hypnosis. She was wary, in part because she had spent years overcoming dissociation, which began with childhood abuse. Over time she grew to trust herself within the process of hypnosis.

She asked my opinion about wigs versus headscarves. She wanted to model wigs for me before deciding which to buy. One day she walked me through her gallery, showing me her new sketches. She asked me to accompany her to the lithographer's office, where she approved proofs for a book of her art. Was this therapy? I doubted myself and questioned my professional boundaries.

Always kind and eager for a project, she adopted a young artist and sponsored a show of the woman's canvases. In our sessions she talked about her family. Her pen captured the worst of times, but mostly she remembered the best.

Hypnosis was a safety net when she was in pain, or afraid. Each trance became a deeper, more satisfying experience. Still, I questioned the guidance I offered-- how to respond when she despaired. Was I to encourage hope, or acceptance of death? It seemed so important to find the right reflection, and an appropriate suggestion.

By November, the cancer was in remission. She celebrated the end of treatment, but soon caught a cold. The lingering cough suggested she was really not well. In December the doctor declared the cancer had spread to her lungs. She was "given" six months to live. Why this sudden change in prognosis? We discussed getting another opinion.

I visited her after Christmas. My work offered warm imagery to combat her uncontrollable chills. Abby's unconscious mind airlifted her to beaches beside the Aegean Sea. She told me she was waiting for results from another biopsy. When the results arrived, a new treatment protocol was prescribed to begin the following week. For once I had clear vision. I would facilitate a trance-escape from the pain while she waited for that treatment to begin. I remember how she stood up, flashed a grin, and cracked a subtle joke as I left that day.

Abby died two days later. As the reality settled in, I ruminated about the unfinished therapy. We did not do "end of life" work as it is described in textbooks. Had I been helpful? Too cautious, or too casual? Had I lost perspective? Why did I not see she was near death that final day? Abby was at peace, but I was not. I wanted another chance to ease her transition. My work

felt incomplete, insufficient, and far from perfect. I was not Milton Erickson. Damn!

But isn't imperfection the best we can offer? We are deluded if we believe anything else. My colleagues helped me see my way through, and I arrived at a handful of conclusions:

This intelligent, beautiful soul put me in trance--a therapy trance. Her presence and the power of her narrative drew me deeper and deeper into her life and her family. Then death snapped its fingers and the trance was undone. The pink slip arrived without fanfare or certificate of merit. No more planning to get it right. My work with Abby will remain imperfect forever.

Not unlike a love affair, therapy creates a mutual trance as we grow to care about the people we serve. Every client pulls us into the trance. If we resist we remain bookish and stiff, lukewarm, only half there. Who can relate to a pretense of perfection? Clients deserve more. The therapy trance moves us beyond theory to a real place -- one where we may hesitate, stumble, or fall on our faces. Yet when we relax with those frayed edges, they serve as a mirror for the other's living and dying. What better gift can we give than the acceptance of being human and imperfect? What better gift to give ourselves.

## STORY

*continued from page 7*

I said.

"One, two, three," he counted with enthusiasm. He is proud that he can now count to 30.

"There are many more numbers after 30; let's count to 100," I said.

So he followed me, counting, and finally he realized that 100 is a very big number. It took him forever to count, and before he could finish, he fell asleep.

This morning, Bobby came to my bed.

"Mommy, I am very happy!"

"Why is that?" I asked.

"Because you love me," he said.

Take care, Angela

Angela,

What a beautiful outcome for you and your son. I am so grateful that you called and shared your story with me. Waiting while Bobby found his own solution with the help of stories and conversation with you was just right.

Best, Eric

### Commentary by

John M. Dyckman, Ph.D.

It's pleasing to offer comments; explanation is harder, and, as anyone who has ever tried to "explain" a joke knows, not so useful. A good story, like a good joke, draws power from creative ambiguity and is a pleasing departure from the ordinary or the expected. It touches the part of us we call "the unconscious".

The first story the loving mother tells her son to reassure him does not

work. In the child's view, the logic is: If I don't grow up, then mom will not be old; and if mom is not old, she will not die. No appeal to maternal love, or to the competences that come with growing up are successful for the mother in calming her son's fears. So much for attempts to "correct" emotional logic.

Eric's story is a parallel musing. He allies with the mother in an adult reaction to a child's discovery of the connection between aging and death. Eric blurs the line between intention ("I intend to live a long time...until I'm 100 years old") and reality--that he, or any parent, will live to the age of 100. This very confusion of desire and outcome is one of the typical characteristics of thought of 3 to 5-year-olds (see Fraiberg's *The Magic Years*, 1959).

The mother brilliantly uses her

son's pride in his ability to count to get him to count to 100--which is such a high number that he is happily asleep long before he can get there. He awakes secure in his mother's love, and, if we are to explain, with a new syllogism: One-hundred is old; mom is not 100, so I can grow up. But it would be a mistake to point this out to him, or to do more than enjoy the moment of happiness.

We all tell stories, and it is important to note that some stories have more satisfactory outcomes than others. People enjoy each other's stories, especially when they feel that their own story has been accepted. Rather than challenging the logic of a story, we can find a way to utilize its elements in some new and hopeful combination.



# INTRODUCING THE INSTITUTES

## The Milton H. Erickson Institute of Barcelona, Spain

By Marilia Baker

The history of the Institut Milton Erickson de Barcelona has its beginnings in 1989, when clinical psychologists Montserrat Gibernau Balcells and Agustí Camino obtained scientific publications presenting the Ericksonian model and its approaches to clinical hypnosis and psychotherapy. The following year, at the invitation of Walter Bongartz, Ph.D., they attended the 5th European Congress of Hypnosis in Konstanz, Germany. They volunteered to videotape the event as their contribution to the Congress, and they began to fully immerse themselves into the apprenticeship of hypnosis. It was around this time that they learned about the Milton H. Erickson Foundation in Phoenix, Arizona.

In subsequent years Gibernau and Camino offered hypnosis training in Barcelona by inviting distinguished professionals from renowned international societies, such as Josephine Balken (Société Suisse d'Hypnose Clinique); Morris Kleinhaus (Israeli Society of Hypnosis); Camillo Lorio (Società Italiana Milton Erickson); Dirk Revenstorf of MEG, Tübingen, Germany, and Hugo Hirsh, of Buenos Aires, Argentina. In 1993, to make the training official, Gibernau and Camino established the *Asociación Española de Hipnosis Clínica y Psicoterapia*.

In December 1995 they traveled to Tel Aviv to study under Morris Kleinhaus and to visit the world renowned Unit of Pain and Psychosomatic Medicine at the Seeba Medical Center. In Israel they were introduced to Jeffrey Zeig who was teaching in Jerusalem. Gibernau and Camino met Zeig at the Wailing Wall, an ancient and most religious ground. This encounter held a significant meaning to the young psychologists. From that first meeting the relationship with Jeffrey Zeig was firmly grounded on the ideals of the Ericksonian mission. Shortly after, Zeig invited Gibernau and Camino to establish the Milton H. Erickson Institute of Barcelona.



*Jeffrey Zeig with Agustí Camino & Montserrat Gibernau, Institut co-Directors*

The Institute, the first in Spain, was officially inaugurated in January 1996, with Montserrat Gibernau and Agustí Camino as founding members and co-directors. They often invited Jeffrey Zeig to Barcelona to train psychologists, physicians and dentists. In 1998, in collaboration with Zeig, the Institute held a major conference, "Dialogue in Three Voices," with Cloé Madanes, Salvador Minuchin, and Jeffrey Zeig presenting three therapeutic models: Strategic, Structural and Ericksonian to the clinical and academic communities of Spain. At that time, the Institute created and granted their first research award in psychotherapy.

Gibernau and Camino -- a married couple -- are pioneers in Spain of Ericksonian approaches and brief strategic therapy. They have actively contributed to the dissemination of these methods in both private and public sectors. Another major contribution has been their introduction of Ericksonian methodologies to the academic community. In 2003, with the collaboration and coordination of Prof. Dr. Guillem Feixas they established the graduate program of clinical hypnosis at the *Facultad de Psicología*, University of Barcelona, Catalonia: [www.ub.edu/hipnosisclinica](http://www.ub.edu/hipnosisclinica).

The illustrious faculty teaching this academic year, (Oct. '13 – May '14), includes Profs., Drs.: José Sala, Tarragona; Guillem Feixas, Barcelona; Xavier Pellicer, Barcelona; Antoni Castel, Tarragona; Peter Hawkins, Sunderland, UK; Dick Revenstorf, Tübingen; Camillo Lorio, Rome; Antonio Capafons, Valencia; and Agustí Camino and the team at the Institut MHE de Barcelona.

Gibernau and Camino, who also

*Camino primarily specializes in severe mental disorders and Gibernau in community mental health and primary prevention of mental illness. Their committed, high quality work in the public sector skillfully utilizing Ericksonian approaches in hypnosis and psychotherapy, has extended its benefits to underprivileged populations and helped the Institute maintain the credibility of Ericksonian methodologies vis-à-vis the academic community as well.*

trained as couple and family therapists under Cloé Madanes and Salvador Minuchin, are instructors in clinical hypnosis of the above mentioned graduate program, and supervisors of the

mental disorders and Gibernau in community mental health and primary prevention of mental illness. Their committed, high quality work in the public sector skillfully utilizing Erick-



*Workshop with Morris Kleinhaus, MD, of Israel, Graduate Program/Barcelona Institut*

clinical practicum at the University of Barcelona. They also teach other graduate courses in several universities throughout the region (Tarragona, Girona, and Seville) as well as around the country. Besides their clinical work in private practice, each teaches psychotherapy and communication skills at hospitals of the national mental health system -- *Red de Salud Mental Pública de España* -- which aims for education and mental illness prevention. The training is addressed to public health professionals (psychologists, psychiatrists, and family physicians). Camino primarily specializes in severe

sonian approaches in hypnosis and psychotherapy, has extended its benefits to underprivileged populations and helped the Institute maintain the credibility of Ericksonian methodologies vis-à-vis the academic community as well.

The day-to-day activities of the Institut Milton H. Erickson de Barcelona include: 1) private clinical practice; 2) face-to-face and online supervision of trainees; 3) specialized and advanced training; 4) research projects; and 5)

*See INSTITUTES on next page*

# INTERNATIONAL COMMUNITY

## News from Centro Ericksoniano de México

By Teresa Robles, Ph.D.

As a result of an in-depth process of modernization, which lasted practically a whole year, the *Centro Ericksoniano de México* (CEM) has begun in 2013 a new phase in its operations. From a staff of 18 administrative associates, the institution now maintains only five, who manage our daily operations through their laptops from anywhere in the world. On the other hand, we have expanded our academic staff to 25 faculty members and 10 training sites throughout Mexico. Thanks to this modernization process we have been able to commit ourselves to accepting and implementing important projects at the local and national level. Amongst them are the following:

1. An agreement with Hospital Adolfo López Mateos, the second largest hospital in Mexico City, to use their teaching facilities to offer our master's programs in Ericksonian methods and techniques to professionals. In exchange for payment,

the Centro provides training to hospital physicians and residents.

2. This hospital is part of the National Health System for Public Service Workers (ISSSTE). Within the last two years, through this system, the Centro has trained 340 facilitators to conduct stress management groups in their own healthcare clinics.

3. Throughout this year (2013) the Centro has been offering, *pro bono*, two such groups – stress management and personal growth groups – to professionals and workers from the National System for Child Development and Families (DIF) who work with abused children. These workers, who work daily with children victims of abuse, exploitation, and mistreatment, were suffering from severe burnout. In addition, these individuals also work with countrywide migrants, adding to the challenges they face.

Note: I want to emphasize here a moving response from the *Centro Ericksoniano* alumni and our former instructors: Upon learning of our intent, they immediately offered to help us meet the demands for qualified facilitators for such groups. The number of

*These workers, who work daily with children victims of abuse, exploitation, and mistreatment, were suffering from severe burnout. In addition, these individuals also work with countrywide migrants, adding to the challenges they face.*

volunteers far exceeded the personnel needed to conduct the treatment groups. Our thanks to everyone!

4. Starting last year, we initiated a research project to measure the beneficial influence of Ericksonian methodologies and techniques upon subjects suffering from Diabetes Mellitus, type II. This project was conducted throughout the National Health System for Public Workers (ISSSTE) in the Mexico City metropolitan area, from a random sample of 1,400 individuals. The pilot study, with 120 subjects, was measured after three months, six months, and one year. The results were excellent

and encouraging.

5. Master's program online: Of importance and relevance to our work as *Centro Ericksoniano de México*, the Mexican Ministry of Education has accepted our proposal to conduct a nationwide, officially recognized master's degree program in Ericksonian psychotherapy in two parts: 1) the first, *online*, to provide the theoretical fundamentals; and 2) the second, the hands-on, practical experience through two intensive weeks each semester. The first course will take place in the city of Cancún, January 2014.

For further information see: [grupocem.edu.mx/cem/curriculum\\_cem.htm](http://grupocem.edu.mx/cem/curriculum_cem.htm).

Or, go to: <https://www.facebook.com/centro.ericksonianodemexico>

## INSTITUTES

*continued from page 9*

graduate training at the University of Barcelona.

Research and other writings of Gibernau and Camino have been published both in Spanish and English. Their most recent work, *Aportaciones de la hipnosis ericksoniana a la Terapia Familiar* (Contributions of Ericksonian Hypnosis to Family Therapy)<sup>1</sup> is found at <http://ericksonbarcelona.com/>.

With respect to the graduate program in clinical hypnosis at the University of Barcelona, Gibernau and Camino have this to say:

"We want to share with the Ericksonian community around the world our pride and satisfaction with the enduring results of this program. This year of 2013, the Institut Milton H. Erickson de Barcelona celebrates 10 years of significant collaboration with

the academic community. We are happy that our initial objective -- that the Institut Milton H. Erickson de Barcelona attains an influential role and respect in the academic community -- has been realized. Our program -- in grateful collaboration with Dr. Guillem Feixas and the University of Barcelona -- is one of the few in the world that has consistently instructed professionals at the university level, on the campus of a most prestigious public university. We want to express, in this distinguished publication of the Erickson Foundation, our appreciation to Dr. Feixas for his enthusiasm of our mission and his unwavering support since 1996 when we first established the Institute. We also want to express our thanks to all lecturers, instructors, and professors, local and international, who contributed to the expansion and

dissemination of clinical hypnosis and psychotherapy in Spain. Thank you all."

For further information please go to: <http://www.ericksonbarcelona.com/>.

<sup>1</sup>Agustí Camino Vallhonrat and Montserrat Gibernau Balcells Instituto Milton Erickson, Barcelona y Centro de Salud Mental del Baix Emporda, IAS, CatSalut. Barcelona. *Apuntes de Psicología Colegio Oficial de Psicología de Andalucía Occidental*, 2009, Vol. 27, número 2-3, págs. 219-234. Universidad de Cádiz, Universidad de Huelva y ISSN 0213-3334 Universidad de Sevilla.

## Italian Society of Psychotherapy Bestows Award

At the 2nd International Congress of the Italian Society of Psychotherapy – "Modelli Storici e Nuove Sfide," held in Paestum, Italy, September 25-28, 2013, Jeffrey K. Zeig, Ph.D., was awarded the SIPSIC (Società Italiana di Psicoterapia) Award in recognition of his outstanding professional contributions to the field of psychotherapy. Past recipients of this award also are leading figures in psychotherapy and include Leslie Greenberg, Otto Kernberg, and John Norcross.

**The Milton H. Erickson Foundation - Check us out on Facebook and Twitter!**

# La Maison des Ormes: A 50-Year Dream of the Elms Growth Center

## Interview of Christine Guilloux by Kathryn Rossi

**Kathryn Rossi (KR):** Where did your dream come from for rejuvenating hypnosis and psychotherapy to include the arts, poetry and nature?

**Christine Guilloux (CG):** At 9 years old I imagined my perfect place. I would have a warm and caring house where people could come and evolve their creative spirit through writing, painting, exercise, silence, meditation, groups, and more. Everyone could do precisely what they wanted to do. Who would believe this is exactly what I am doing today at La Maison des Ormes?

I was an only child and my family was extremely restrictive, especially my father. I literally wasn't allowed to do anything except go to school and come home. I wasn't allowed to have friends, so the library was my only foray to the outside world. I could only visit the library during school hours because if I was even five minutes late returning home from school, I was punished. I dreamed of living in a library where I could travel the world through my imagination and learn new things. At age 14 I discovered psychology and wanted to become a psychoanalyst to understand why people do what they do. Of course, at that time psychoanalysis was the only route of study. We are much more evolved these days in France and now include Ericksonian work and more.

**KR:** It is interesting you had such therapeutic epiphanies at ages 9 and 14. At the age of 9 I wanted to become a psychiatrist. In my case, it was Halloween

and I had to say what I wanted to be when I grew up in order to get a giant candy bar. *Quelle horreur!?* I didn't know, and had to think about it for an entire year. The only revision I made was to become a psychologist rather than a medical doctor.

**CG:** I think psychotherapy and therapeutic hypnosis chose me. Previously, I also had an interest in becoming a volcanologist to explore active volcanoes in exotic places in the open air of nature. My father put an immediate stop to that idea, as he thought only a man could do such a thing! My passion is visiting the Southwestern United States to see the ancient natural rock paintings, pictographs, and petroglyphs.

**KR:** You really had to circumvent a lot of obstacles to become who you are today.

**CG:** You don't know the half of it! I left home at age 20 to find my way. At first I got along by eating jam sandwiches since I was determined to do what I wanted to do. I had no money so I traded services in order to attend seminars. I paid my way to a training workshop, *Creative Problem Solving*, by writing an article for the organizer. Other opportunities followed. I've made coffee, answered phones, done accounting and counseling and more in order to develop my education as a

*See LA MAISON on next page*

## BOOK REVIEW

### *Renaissance de la Maison des Ormes*

(Renaissance of the House of Elms)

By Christine Guilloux, Editor

Published by La Gazette 89 Éditions  
Égriselles-le-Bocage, France  
2013

Soft cover, 131 pages  
(French language)

ISBN 978-2-916600-22-2

Reviewed by Marilia Baker, MSW, Scottsdale, Arizona

This year, thousands of therapists of all persuasions and from many countries will gather in Anaheim, California to participate in the seventh *Evolution of Psychotherapy Conference*. Two concepts from this meeting--the evolution of therapeutic methods and the cross-fertilization of ideas--fit well with what *Renaissance de la Maison des Ormes* evokes. *Renaissance*, in this context, refers to Christine Guilloux's fulfilled vision by which she restored, renewed, and revitalized an 1860 farm house. Likewise, it refers to the replanting of a new, disease-resistant, stronger strain of a historic, emblematic tree (after its species was nearly deemed extinct due to a fungus). It also refers to human beings who -- like the old house and the trees -- are emerging from something long dormant into something radically alive and vibrant.

Guilloux, an innovative Ericksonian therapist, conceived this inspiring project, and long persevered, taking it into full completion after nurturing a childhood fantasy (see the interview with Kathryn Rossi).

The book is organized around two main characters: The elm trees -- a cherished French symbol of revolutionary hopes, for freedom, justice, and tolerance--and the old farm house, which Guilloux named *Maison des Ormes*, a cherished metaphor for her many objectives. Revered since Celtic times, the elm trees experienced some kind of *renaissance* in the late 1500s when the Duke of Sully ordered that elms be planted by the roads throughout France. The village, in the region of the Yonne River where the Duke married and lived for several years, is

named Les Ormes. This village is also where Guilloux's own *Maison des Ormes* is located, now a Center for personal renaissance, healing, and a place for individuals to achieve their full potential.

To this end, in 2012, Guilloux engaged friends, physicians, therapists, artists, poets, patients, neighbors, and the mayor of Les Ormes, Annie Vivier, to participate in the inaugural "rebirth day" of *Maison des Ormes*. All were invited to contribute their stories of *renaissance*. The result is extraordinary: elegant, poignant, playful, *sui-generis* narratives, drawings and poems, which elicited in me powerful associations from experiences of self-birth, transformation, and triumph.

Some stories evoked compelling parallels with the diseased elm trees. Eric Greenleaf, Ericksonian extraordinaire, who mastered hypnosis first-hand with Milton Erickson, wrote on how he became plagued with serious illnesses, and utilized his skills to repair and rebirth. Like the strengthened, disease-resistant replanted elm tree at *Maison des Ormes*, Greenleaf survived to tell his story. Nicole Buisson expressed her journey through severe illness metaphorically, telling of adventures looking for healthy, fully alive elm trees. A gravely ill Jean-Pierre Desthuilliers offered a poignant poem/prayer to the replanted elm as a hymn to life.

Guilloux has masterfully orchestrated human, material, historic, and collective *renaissance*. My hope now is that she will offer an English version, so that those who speak English will have the privilege and pleasure of learning from this relevant work.

Besides author Christine Guilloux, I wish to honor all contributors for their inspiring work: Guillaume Belouriez; Valérie Boulet; Peter Blystone; Nicole Buisson; Consuelo Casula; Gay Chanler; Jocelyne Cornet; Vincent Coscolla; Agnès Courdavault; Jean-Marc Couvé; Maguelone Damour; Jean-Pierre Desthuilliers; Bernard Devin; Raymonde Doré; Gisela Dryer; Houida Dridi; Maria Escalante Cortina; Isabelle Feldheim; Georges Friedenkraft; Eric Greenleaf; Christophe Gilles; Imelda Haehnel; Hughes Houssin; Brigitte Koessler; Luc Manago; Christian Martens; Tatiana Miralles; Leonarda Nardella; Eléonore Nicolas; Julie Nicolas; Michel Pasteur; Manuel Pires; Danielle Poznantek; Patrick Rana-Perrier; Nicole Ruyschaert; Thierry Servillat; Christian Schmitt; Guadalupe Vallejo Solorzano, and Anne Vivier.

## LA MAISON

*continued from page 11*

psychotherapist and trainer.

**KR: Your mother died in 2009, leaving you a house which you sold in order to make possible La Maison des Ormes. How did you feel when you first laid eyes on it?**

**CG:** Originally built in 1860, La Maison des Ormes—the House of Elms—was a farm house. First, the elms evoked my memory of the famous French hypnotherapist, Marquis de Puységur, who would sit under elm trees in his sessions. Puységur believed that patients healed themselves from their own unique inner resources. Second, this house had enough space to fill my childhood dream. Immediately, in my mind's eye, I redesigned it for my future purposes—personal growth for all who enter. I did not want a house that I had to destroy and rebuild. I wanted to reimagine this home as Milton Erickson would. In other words, I wanted to utilize what was there and *make it better*. The house has a good structure. It sits in front of a small lake and is surrounded by nature—clean air and woods to walk in. With the right help it took only six months for me to recreate the house to fulfill my dreams.

**KR: Wow. Six months to reinvent a 150-year-old house. That is fast! Is this when you became inspired to create the book *Renaissance de la Maison des Ormes* with 40 contributors?**

**CG:** Actually Kathryn, I had the idea of the book right from the very beginning and even before. La Maison des Ormes is about rebirthing to become something new and fresh. I invited people to the grand opening in September 2012 and asked them to contribute something to the event and book about their personal renaissance. Over the years I've developed new expressions for creative psychotherapy, including writing, art exhibitions, and more. I've been developing my philosophy of creative growth for quite some time now—almost 50 years! I've run non-profits and have contributed to professional journals and organizations. I've even written articles for the Erickson Newsletter from time to time.

**KR: Tell us about one of the meaningful contributions in your book. I am so curious about how people could experience a personal renaissance at La Maison des Ormes.**



*Persévérer*  
*Persevere*

*Organiser*  
*Organize*

*Penser Faire*  
*Think and do*

*S'écouter*  
*Listen to Self*

**Figure 1: The 4-stage Creative Process renaissance of artist Eléonore Nicolas©. Images by permission.**

**CG:** *Renaissance de la Maison des Ormes* (Guilloux, 2013) is a book about transformation. It includes essays, short stories, artwork, and poetry. Contributors share their adventures and personal rebirth stories in solving their dilemmas of disease, trauma, etc.. Being true to their spirit, people can and do find their own way to rebirth. I am particularly moved by how Eléonore Nicolas expressed her personal renaissance through four paintings she created. Her growth follows the Rossi 4-stage Creative Process (Rossi & Rossi, 2013, 2014) and she took several months

to complete these works. She titled her paintings: 1) *Persévérer* (persevere) 2) *Organiser* (organize) 3) *Penser Faire* (think and do) and 4) *S'écouter* (listen to self). Each painting has a flowerpot, flowers, leaves, and a woman in a red dress. In the first three, a watering can sprinkles letters of the alphabet, signifying dialogues with her therapist. At first, the flowers are wilted and the woman in the red dress is a crumpled mess. But by the time she creates the fourth painting the flowers are in their full glory and the woman in the red dress holds her own watering can where she can nurture herself.

**KR: Christine, you are right that this series of Eléonore's paintings do follow the 4-stage Creative Process. Imagine all of the natural two-hour, chronobiological, ultradian rhythms (Rossi & Rossi, 2013) she passed through during those months to get to the final painting in her series!**

**CG:** She devoted time and determination to work through her problems. I believe people need to be active, interactive, and cooperative to make changes in their life and in their outlook.

**KR: That's interesting, how you think people change and grow. You know, of course, that we believe people change through activating gene expression which leads to new brain growth and plasticity through novelty, enrichment, and exercise (Rossi, 2007, 2012, 2013; Rossi & Rossi, 2013).**

**CG:** Naturally I believe that too, and I think about growth in terms of people changing their physical posture and opening up their minds to welcome new beliefs. After all, wars with yourself and others are only beliefs. I think people need to create links and connections within themselves, the people around them, and in culture. I try to stimulate people to see new and different ways of life while simultaneously honoring the present. If necessary, I also support the courage to fight for survival. The way I've made personal changes is to take action and feel it in my gut. I think you need a visceral response in order to know that you will make a firm change.

**KR: So you would say that people need interesting stimulation which we call 1) novelty: unusual and unique stimulation, 2) enrichment: an environment with many opportunities for expression 3) exercise: a physical change in posture, and 4) moving from one position to the next?**

**CG:** Yes! I guess we really do agree. I suppose my adherence to a "gut" response comes from a strong conviction of how I've made positive changes. Most important is that La Maison des Ormes is a place that supports change through novelty, enrichment, and exercise.

**KR: What do you see for your future and the future of La Maison des Ormes?**

**CG:** I want people to come to La Maison des Ormes and grow in creative ways; to find the truest sense of themselves and all they can be. It is a place for opening up, be it through silence, conversation, writing, artwork, meditation, or communing with nature. Simply, La Maison des Ormes is a place to find yourself in your own unique way. We hope to expand our training and produce a new book

every three to four years.

**KR: Congratulations on a job well done Christine! I'm sure your center for growth will be very successful, inspiring people to develop and grow in beautiful ways.**

**CG:** As part of our seminar and workshop series we will continue our train-

*See LA MAISON on page 26*

## CONFERENCE NOTES

The **Evolution of Psychotherapy Conference** sponsored by The Milton H. Erickson Foundation, Inc., will be held December 11-15, 2013 in Anaheim, California. For complete information visit the Conference web site: [www.evolutionofpsychotherapy.com](http://www.evolutionofpsychotherapy.com) or contact the Erickson Foundation, 2632 E. Thomas Road, Suite 200, Phoenix, AZ 85016; Tel, 602-956-6196; Fax, 602-956-0519; Email, [office@erickson-foundation.org](mailto:office@erickson-foundation.org)

The International Family Therapy Association (IFTA) is sponsoring the 22nd Annual World Family Therapy Congress March 5-8, 2014 in Panama City, Panama (formerly planned for Izmir, Turkey). The 2014 Congress will focus on Technology, Families and Effective Therapy--on how technology impacts families and, as a result, how it impacts therapists and supervision. It also will feature a scientific program, and keynotes by Gonzalo Bacigalupe and Stan Tatkin.

For complete information and to register visit the website: <http://www.ifta-congress.org> or Email: [info@ifta-congress.org](mailto:info@ifta-congress.org)

The American Society of Hypnosis (ASCH) will hold their 56th Annual Scientific Meeting and Workshops, *Coping with the Hands You're Dealt: Surviving and Thriving after Trauma with Resiliency, Mindfulness, and Resolve*, March 21-25, 2014 in San Diego, California. For complete information contact the Society: Tel, (630) 980-4740, Fax (630) 351-8490; or by Email: [info@asch.net](mailto:info@asch.net).

Information on the Call for Advanced Workshop Submissions is available on the Society's website: [www.ASCH.net](http://www.ASCH.net). The deadline is August 26, 2013.

The Fifth European Congress of Ericksonian Hypnosis and Psychotherapy, *Creativity and Hypnosis*, will be held June 12-15, 2014 in Krakow, Poland. The congress features a large international faculty and also will celebrate the 20th anniversary of the opening of the Polish Erickson Institute. For more information visit the congress website: <http://www.congress2014.p-i-e.pl/welcome/> or contact the organizers: Polish Milton H. Erickson Institute 94-036 Łódź, ul. Wioślarska 27 POLAND; Fax, 0048-42/689-00-47; E-mail: [info@p-i-e.pl](mailto:info@p-i-e.pl); Web, [www.p-i-e.pl](http://www.p-i-e.pl)

The European Society of Hypnosis (ESH) in collaboration with the Italian Society of Hypnosis (SII) will hold the 13th International Congress entitled, *Hypnosis and Resilience: From Trauma and Stress to Resources and Healing*, October 22-25, 2014 in Sorrento, Italy (Amalfi Coast). For more information contact Societa Italiana di Ipnosi, Viale Regina Margherita, 296, 00198 Rome, Italy; Tel and Fax: +39.06.8548205; Email: [ipnosii@libero.it](mailto:ipnosii@libero.it); Web, <http://esh-hypnosis.eu>

CALL FOR PAPERS: If you would like to present a Paper in the Congress Scientific Program, please submit the CALL FOR PAPERS FORM including your Abstract, together with your completed Registration Form, by April 30. Information and forms available at: <http://esh-hypnosis.eu>

The International Society of Hypnosis (ISH) and the Confédération Francophone d'Hypnose et Thérapies Brèves (CFHTB) will hold the 20th International Congress, *Hypnosis: Roots and Future of Consciousness*, August 26-29, 2015, in Paris, France. For information visit their website: [www.CFHTB.org](http://www.CFHTB.org)

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## UPCOMING TRAINING

DATE	TITLE / LOCATION / LEADER	CONTACTS
<b>2013</b>		
12/11-15	Evolution of Psychotherapy Conference / Anaheim, Calif. / Invited Faculty	1.
<b>2014</b>		
1/10-12	Self-Hypnosis for Natural Mind-Brain Transformation / Esalen Institute, Big Sur, Calif. / Annellen Simpkins, Ph.D. and C Alexander Simpkins, Ph.D.	2.
1/23-26	Intensive Supervision Workshop in Ericksonian Clinical Hypnotherapy - Master Class / New York City, NY / Jeffrey K. Zeig, Ph.D.	3.
1/30-2/2	Ericksonian Brief Therapy / Sao Paulo, Brazil / Zeig	4.
3/10-14	Intensive Training in Ericksonian Approaches to Brief Hypnotic Psychotherapy - <i>Fundamental</i> / Phoenix, Ariz. / Brent B. Geary, Ph.D., Zeig, Lilian Borges, M.A., LPC	5.
3/17-21	Intensive Training in Ericksonian Approaches to Brief Hypnotic Psychotherapy - <i>Intermediate</i> / Phoenix, Ariz. / Geary, Zeig, Borges	5.
3/27-30	Intensive Supervision Workshop in Ericksonian Clinical Hypnotherapy - Master Class / New York City, NY / Zeig	3.
5/14-18	Ericksonian Brief Therapy / Beijing, China / Zeig	6.
5/21-25	Ericksonian Brief Therapy / Guangzhou, China / Zeig	7.
6/11-12	Fifth European Erickson Congress / Krakow, Poland / Invited Faculty	8.
7/14-18	Intensive Training in Ericksonian Approaches to Brief Hypnotic Psychotherapy - <i>Fundamental</i> / Phoenix, Ariz. / Geary, Zeig, Borges	5.
7/21-25	Intensive Training in Ericksonian Approaches to Brief Hypnotic Psychotherapy - <i>Intermediate</i> / Phoenix, Ariz. / Geary, Zeig, Borges	5.
7/28-8/1	Intensive Training in Ericksonian Approaches to Brief Hypnotic Psychotherapy - <i>Advanced</i> / Phoenix, Ariz. / Geary, Zeig, Borges	5.
8/4-7	Master Class in Brief Psychotherapy / Phoenix, Ariz. / Zeig	5.

### CONTACT INFORMATION:

1. The Milton H. Erickson Foundation, Inc., 3606 N. 24th Street, Phoenix, AZ 85016 6500; Tel, 602-956-6196; Fax, 602-956-0519; Email, [office@erickson-foundation.org](mailto:office@erickson-foundation.org) ; Web, [www.erickson-foundation.org](http://www.erickson-foundation.org); Evolution Conference: [www.evolutionofpsychotherapy.com](http://www.evolutionofpsychotherapy.com)
2. Website: <http://www.esalen.org/content/simpkins>
3. Stacey Moore; E-mail, [sjmtjm@msn.com](mailto:sjmtjm@msn.com)
4. Web, [www.elsevier.org](http://www.elsevier.org)
5. The Milton H. Erickson Foundation – Intensive Training Program and Master Class: Intensives: <https://erickson-foundation.org/training/intensives/> ; Master Class: <https://erickson-foundation.org/training/master-class/> ; Tel, 602-956-6196; Fax, 602-956-0519; Email, [support@erickson-foundation.org](mailto:support@erickson-foundation.org)
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7. Email, [gracenlp@yahoo.com.cn](mailto:gracenlp@yahoo.com.cn)

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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 \$25 fee per listing is required. Deadline for the 2014 Spring Issue (mailed April) is February 1, 2014. All workshop submissions are subject to approval by the Erickson Foundation. For more information, please contact Karen Haviley – [karen@erickson-foundation.org](mailto:karen@erickson-foundation.org) or [mhreg@aol.com](mailto:mhreg@aol.com) Online Ad Rates/Specs, Reservations, and Payment at: <http://erickson-foundation.org/newsletters/advertising/>

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# IN MEMORIAM

## The Professional World Loses a Friend

On August 23, 2013, Dr. William Glasser died peacefully in his home surrounded by his wife Carleen and his son Martin.

Dr. Glasser founded reality therapy and his groundbreaking book, *Reality Therapy* (1965), created a stir among professionals. The book was the result of his experience and research in a mental hospital and correctional institution. He described how he believed people chose their behavior and could therefore alter it. Dr. Glasser also developed an educational reform program, now known as "The Glasser Quality School."

Throughout his career Dr. Glasser traveled worldwide lecturing to professionals and others who wished to assist their clients more effectively, or who hoped to improve their own lives. Eventually, Dr. Glasser added a theoretical basis to the practical delivery system. He called it "choice theory," and described it as the train track for the train-- reality therapy. Choice theory provides the validation for the application of his ideas to education, parenting, corrections, addictions, and all human relationships

In 1974, Dr. Glasser developed a certification process in reality therapy. Since then, thousands of people have taken training programs and been certified in reality therapy through the William Glasser Institute. Currently, the program exists in more than 20 countries and on six continents.

In his many books, lectures, and conversations Dr. Glasser always stressed the importance of human relationships as central to effective mental health. As a visionary, he wanted to teach his system to the world.

Dr. Glasser was a frequent presenter at American Counseling Association conferences. Beginning in 1989, he served as a distinguished faculty member at the Evolution of Psychotherapy Conference.

In 2004, Dr. Glasser received the Legend in Counseling Award for his development of reality therapy, presented by the American Counseling Association. The state senate of California recognized him on May, 2013 for a lifetime of achievement.

Recently, a woman asked Dr. Glasser for advice on how to deal with her 3-year-old son. He paused for a long time, then said, "Always treat him as if he is good; and set up circumstances where he can *only* succeed." These two sentiments transcend a particular counseling system in that they summarize Dr. Glasser's incredible legacy.

We, Dr. Glasser's followers and members of his organization, still consider him a friend, family, mentor, colleague, visionary, and exemplary human being. Rest in peace, good friend. You will always be with us.

Submitted by  
Robert E. Wubbolding, EdD



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## BOOK REVIEW

### **Engage the Group, Engage the Brain: 100 Experiential Activities for Addiction Treatment**

By Kay Colbert, LCSW

Roxanna Erickson-Klein, PhD, LPC

The Milton Erickson Foundation Press

Phoenix, AZ

2013

356 pages

Reviewed by C. Alexander Simpkins, PhD & Annellen M. Simpkins, Ph.D.  
San Diego, CA

Roll up your sleeves and jump in! *Engage the Group, Engage the Brain* is a hands-on workbook for therapists to get their substance abuse groups actively engaged in recovery. The foundation for the approach comes from the original insight of Milton H. Erickson, MD--that therapeutic change takes place within the experiential world of the patient--so the exercises are designed to elicit *self*-discovery. In addition, they stimulate neuroplasticity (based in Ernest Rossi's theories) by providing novel moments to break the neurological chains of addiction and create a new consciousness. The book gains added efficacy since each exercise was tested on patients at the Nexus Recovery Center of Dallas Texas, an inpatient facility for female substance abusers.

The 100 activities are divided into six sections. Each section provides general and personal comments from the two authors to guide readers in understanding the rationale behind each activity. Then, explicit instructions are given in a consistent format: "Objectives," "Directions," "Discussion," and "Inspired By." To add even more clarity, a box at the top tells you where to perform the activity, what materials you will need, and how long it takes. The discussion section explains how the exercise was applied and what kinds of responses people had. This valuable information supplies you with everything you need to do these activities with groups.

The "Self-Acceptance" section offers clients the opportunity to tell their story using creative devices, such as drawing a picture of the addiction or recalling the comforts of childhood. The authors believe that when clients express their history while learning to accept the good with the bad, they develop compassionate self-acceptance.

"Self-Awareness" guides clients in expressing themselves and developing strengths. A wide variety of exercises, such as crafting a clay pinch pot and creating a brochure about yourself, raise awareness. By focusing attention on triumphs instead of tragedies, resources emerge.

"Self-Responsibility" promotes emotional regulation and self-care with breathing exercises, mindfulness of triggers, and journaling *Aware in the moment*, clients slow down and make more mature choices.

Substance abusers often are engaged in misunderstandings and miscommunications. "Communications with Others" fosters better interpersonal relations and empathy is evoked by means of shared sentence completions and nonverbal partner exercises.

Having a healthy social network is key to recovery. "Being Part of a Larger Community" helps clients expand themselves in a supportive network where they give as much as they receive. Sharing in creating a handmade book--a technique drawn from Puebla, Mexico-- or finding free things to do, can encourage healthy habits.

"Envisioning a Future of Recovery" teaches how to go beyond struggling with abstinence, and how to envision a life without drugs, such as planning a sober recovery party. Holidays can be particularly difficult, so exercises like Easter egg

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*"Being Part of a Larger Community" helps clients expand themselves in a supportive network where they give as much as they receive.*

---

affirmations help clients develop a sense of mastery they can carry with them.

Finally, Five Appendices provide the 12 Steps for AA & NA, feeling words, affirmations, and a facilitator's guide.

The playful, creative, and inspirational activities are drawn from arts and crafts, different cultures, meditation, group process, counseling, and more. Combined with personal reflections from the authors and charming illustrations, *Engage the Group, Engage the Brain* provides a wealth of tools sure to motivate your clients. We highly recommend this useful workbook!

## BOOK REVIEW

### **A Dissociation Model of Borderline Personality Disorder**

By Russell Meares

WW. Norton and Company New York and London

ISBN: 978-0-393-70585-0

(Copyright Russell Meares, M.D.)

395 page

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

Russell Meares, M.D., now a professor Emeritus at Sydney University, has produced an amazing volume you will want to read. Not only does it offer an approach to understanding Borderline Personality Disorder (BPD) in a new way, the book also provides the history, current research, and practical tips, as well as stimulating ideas to help folks with BPD.

What will strike you about this book that also includes an index, is that the author gives a substantial amount of history you didn't know you wanted. He defines "dissociation" as being physically based, and offers numerous examples of research to back up almost everything he says. The volume of research sprinkled throughout the text makes it a valuable read for any clinician. I kept finding myself wanting to list them. Even though I often disagreed with the conclusions Meares drew, I was intrigued by what he was saying and the results he reported from others. I found that the research stimulated my thinking in ways well worth the price of the book.

Tracing how BPD was once labeled as "hysteria," and how it came to be known as BPD, this book offers a different perspective than what you may have learned in therapy school. If you are as impatient as I am, the sheer volume of information may seem like too much. Yet, this was clearly due to my impatience, and not a reflection on how solidly Meares wrote this book. He offers an incredible historical, practical, and imaginative understanding of BPD. At some point you might think, "Wow, this man is knowledgeable," as he offers an amazing perspective that may be different, but has potential and stimulates thinking. He addresses Charcot, Freud, and Janet in a way that only someone who has been teaching and acquired much wisdom can. And, he does it with respect and uses the information in elegant ways.

Meares offers a Jacksonian model of self to explain how the dissolution and failure of coherence has occurred. He explains how BPD sufferers become trapped in a frame of thinking that pushes them away from society and isolates them. What follows is a model of dissociation that includes Janet's writings and addresses

*See MODEL on next page*



memory in BPD, as well as PTSD.

While Meares has a mostly physical understanding of dissociation and a biological and research-based model, he has information to offer everyone, no matter what their orientation, because of the universality of his message and the multiple ways in which the research he offers can be understood. I believe Meares is an intellectual genius, who has only of late allowed the rest of us not living in Australia to grasp.

I am amazed at the depth of knowledge packed into this book. Not only do I recommend it, but I look forward to rereading it and discovering more powerful ideas. Meares has given me a deeper appreciation of Janet, and of our tradition, so that we, as therapists, can move forward even more clear-headedly.

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By John Lentz, D. Min

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2013

Reviewed by Annellen M. Simpkins, Ph.D. & C. Alexander Simpkins, Ph.D.  
San Diego, California

We live in secular times, and yet we hear the echoes of contemporary psychotherapy in the Bible. For example, therapy's teachings of self-acceptance, living in balance, and self-forgiveness have counterparts in religious teachings. John Lentz's *Relaxation Techniques* comes from his unique perspective as both accomplished counselor and experienced minister. These recordings are an outgrowth of his ministry. His rationale is that by combining sound science, concerning emotions, mind, and body, with the time-honored wisdom of the Bible, listeners gain powerful therapeutic tools. And, research confirms this claim, since spirituality has been shown to be healthy and healing. Lentz masterfully weaves the sacred with the scientific through an Ericksonian-style utilization of faith, self-acceptance, and communion with God.

*Healing from Trauma* invites listeners into a pleasant trance by focusing attention on God. Lentz skillfully gives the suggestion to experience the forgiveness God has already given us. Trance is a state whereby people become more aware of revelations from God, and so by working in this way, those who have been through trauma can feel cleansed and safe. They can also allow healthy rhythms by receiving the Sabbath as a day of rest. Lentz suggests that listeners recognize helpful guilt that spurs them to do good, and let go of toxic guilt. With pauses strategically placed, Lentz's indirect suggestions masterfully build an unconscious logic for trauma transformation: To know that God wants you to be forgiven, so that you can have more love, live well, and help others.

*Cooling Anger* begins with a warm welcome and congratulations to listeners for deciding to devote their time to using their emotions in a positive way. Lentz explains that we are born with the ability to be angry, and so it must serve some helpful purpose. Simply trying to control explosive anger does not work. Lentz invites listeners to try something different: To allow their unconscious mind to find a better way to use their God-given emotions. How you treat yourself and others makes a difference. Suggesting "wonder in how wonderfully you are made," people learn to allow God to take care of some of the difficulties. The message is to trust in God and allow Him to heal you. And for the more scientifically minded, we hear suggestions to trust the built-in unconscious processes of the brain.

In *Relieving Loneliness*, Lentz points out the fundamental difference between being alone and being lonely: self-criticism. When people stop being self-critical, they do not feel lonely. Then, being alone can be energizing because it allows for time with God. Each of us is unique, and the pain people feel is their unconscious communicating that they have not recognized their uniqueness. He suggests people internalize the Ten Commandments and listen to advice from The New Testa-

ment to let go of the bad and think about what is true, honorable, and just. Even Jesus felt intense loneliness on the cross. But when he became One with God he was resurrected. We can all identify with Jesus' experience by accepting loneliness, recognizing our limitations, and staying connected with God.

Any experienced hypnotherapist will appreciate the intricately phrased indirect suggestions. And those listening for self-help will respond to the many invitations for transformation. We highly recommend this masterful blending of spiritual and psychological healing to elicit deep inner change.

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

**The Narrative Journey. An Illustrated  
Guide to Narrative Therapy Principles**

By J. R. Stillman, LICSW

Casperson, LLC,  
Minneapolis, MN

2012

108 pages

ISBN 978-0-9828490-1-9

Reviewed by Rubin Battino, MS, Yellow Springs, OH

This is a wonderfully illustrated "narrative" journey of Hai with her guide, Minh. The book was prepared for a meeting of the Catalyst Foundation's social workers and community leaders in Vietnam who are called the Kien Giang. The purpose of the meeting was to share Narrative Therapy-based information for working with people who have had significant trauma. The book is divided into several parts: The illustrated guidebook built around seven Narrative Therapy principles; three appendixes; a review of narrative principles that enlarges on the seven principles; a guidebook for various applications; and word exercises that give a detailed list of questions to guide the client and the therapist in putting the principles into practice.

I found the word exercises that comprise about one-half of the book to be most useful. Michael White, one of the founders of Narrative Therapy, was a master of using questions to effectively move a session along. Pages 16 to 47 offer suggested questions keyed to the seven principles. Two suggested uses of these questions are: Read them to your client in a session and have the client respond; or assign them as homework. The latter makes the most sense to me, as it is an example of structured writing. The written responses serve as a record for both client and therapist, and become the basis of the next session. Since Stillman likes to consider himself (and other therapists) as "guides," then the questions serve to guide the client in his/her journey.

To make the use of questions more explicit, let me cite the instructions for Principle 3A which is on subordinate story development -- repositioning.

*Start by telling me a word or phrase that describes what you do not want in your life. It can be an action such as "yelling" or a meaning such as "procrastination." This word or phrase will be referred to in the exercise as "problem."*

*Now that you have chosen this word or phrase, think of a different word or phrase that describes what you do want in your life, and that is either minimally affected by the previous word or is not affected by it. Again, this can be an action like "reading" or "biking" or a meaning such as "caring for others" or "happiness." This word or phrase will be referred to as "preferred."*

*Insert the word or the phrase in the blank spaces in the following questions.*

In my mind, this exercise is a great variant of the Miracle Question, in that it leads the client into thinking about what will have changed in their life as they give details in their responses. As is usually the case in Narrative Therapy, many of the questions refer to relationships within the client's community.

Stillman's *Illustrated Guide to Narrative Therapy Principles* is easy reading, contains valuable information, and is indeed a useful, practical guide.

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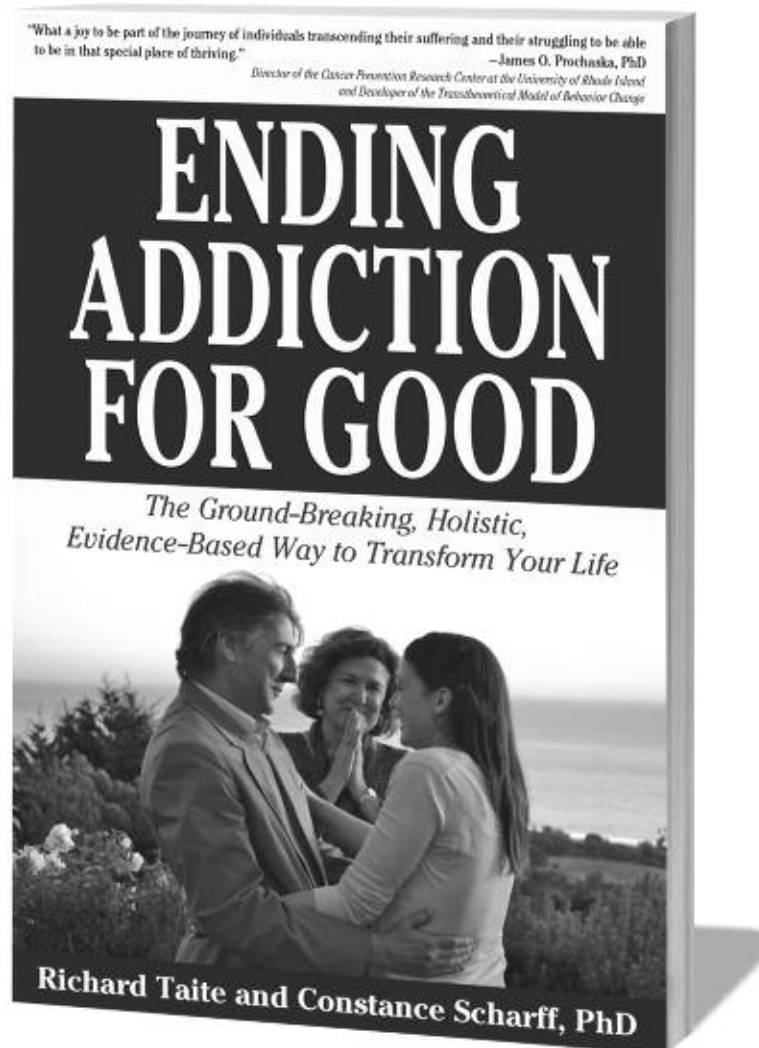
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# DVD AND MANUAL REVIEW

## **Child Therapy Case Consultation With Violet Oaklander, Ph.D. Instructor's Manual for Child Therapy Case Consultation**

Violet Oaklander, PhD and Miller, Ali, MFT

Psychotherapy.net, LLC  
2011

Reviewed by Maria Escalante de Smith MA Cedar Rapids, IA

*Child Therapy Case Consultation* is a delightful DVD from Violet Oaklander, an eminent child therapist, who combines Gestalt and Expressive Arts therapies. The DVD is accompanied by an instructor's manual with tips for using the DVD, transcripts, and a discussion. With this manual, novices using this approach will learn that this is a process-oriented form of therapy to help clients become aware of what they are doing.

Oaklander offers guidance to three therapists struggling with difficult cases. I enjoyed reading about qualities a therapist should display, including authenticity, a non-manipulative demeanor, respect, and being fully present, regardless of the child's behavior. Also explained is the importance of contact using non-threatening activities that brings the child into the present.

Case One: "In Between Two Apartments," is about an 11-year-old boy who was acting out with his peers and not paying attention in class. He had a hard time when teased and would say: "These kids tease me, so I get mad at them." Anger management was addressed, and Oaklander helped him connect with it so that he

could express it appropriately. I very much enjoyed when Oaklander shared her opinion that children of divorce or separation often believe it is their fault. As therapists we should probably keep this in mind and make sure children do not have to bear this burden.

Case Two: "Take Me Away, Take Me Away," narrates how a therapist named Brace, consults with Dr. Oaklander regarding the case of a 6-year-old biracial girl who had been in foster care for three years. One of the first topics Brace addressed was that the girl was having temper tantrums and was in specialized treatment for sexual abuse victims. At the time, she was being treated with trauma-focused CBT, and was put into foster care due to domestic violence in the home. There is strong emphasis on helping this client express her emotions by using a drawing.

Case Three: "The Balloon Inside Me," is about an 11-year-old boy who was brought to a second therapist named Little. The child's mother was concerned about her pre-adolescent son because a neighbor had molested him during childhood. It is interesting to listen to Little's narration about how she utilized (as we Ericksonians do) the story that the boy told her about a little shark who was in distress from his father's death from being eaten by a whale. While telling the story, the boy made some drawings, and he suggested that the mother join them in therapy. This is a good example of how when treating children, we often need to also work with the parental subsystem. The mother was included in some sessions as well.

At the end of the DVD, Victor Yalom's discussions of the interventions are interesting. He tells Oaklander, "You used the drawing exercise, which is an exercise you use with children, and you had one of the therapists do that same exercise." Then, when Yalom asks Oaklander what her goals were when she had the therapist do that, she explains that it is very important therapists experience the same exercises they ask children to do, because that way they can know "how powerful it is" (p. 61). This DVD and manual are excellent and heartwarming. I highly recommend them.

## BOOK REVIEW

### **Jardins, Princesses et Hérissons: Métaphores pour l'évolution personnelle et professionnelle (Gardens, Princesses, Porcupines)**

(Available in French and Italian)

By Consuelo C. Casula

Satas, Collection Le Germe, Bruxelles, 2011  
ISBN 978-2-87293-119-4

Reviewed by Christine Guilloux, Paris, France

Caterpillars growing and processing internal transformations to become butterflies could be the theme for this book. Or, it could be a fairy tale for adolescents or young people. It also could be a novel for curious insects; a thriller with songs and melodies; a self-help book for wise children; or a bible for marketers or musketeers. It could be collected papers for grown-ups, diaries of local quarrels, news-in-brief by the countertop, stories to help us fall sleep or stay awake, or bio-recipes for experimentation. This book can be read from many different perspectives, and the ways we will understand it will be our own unique experience. Let us enjoy being surprised by the author's proposals.

*Gardens, Princesses, Porcupines* is organized in seven parts to provide everything needed to integrate metaphors into your work. Part 1 explains the levels and functions of metaphors in the therapeutic and educational context. Why you should use metaphors is in Part 2. Explicit instructions for how to create metaphors are given in Part 3, and Part 4 delves into the nuts-and-bolts of language use. Parts 5

and 6 offer ways to transform thoughts, beliefs, and emotions. And finally, in Part 7, you will find metaphors to help couples live happily ever after.

Consuelo C. Casula is a philosopher. In private practice, she is a psychotherapist and hypnotherapist in Milan, Italy, a trainer of Ericksonian hypnosis, President elect of the European Society of Hypnosis, and much more. She offers us hundreds of metaphors to wake us up, to stimulate our amazing multitude of neurons, and to push our brains in all directions-- with all of our senses so that our internal resources bloom and our well-being is enhanced. Don't we know that gardeners bring us attentive care; princesses do their apprenticeship; and porcupines express internal conflicts and the will to master instincts and behaviors? The intrigue of metaphors sends multiple embedded messages to our conscious and our unconscious.

Coming from the depths to stimulate an active orientation of our minds, to arouse different meanings for the same reality, metaphors convey the overflow, the surpassing of ourselves, and the transport of joy as a pathway for change. Metaphors create de-contextualizations and re-contextualizations; they activate a search for meanings and explanations. Metaphors describe and reinvent part of reality with categories that are not based on imagination or logic; they help our mind make connections, and combine new associations and differences. *Gardeners, Princesses, Porcupines*... perhaps should be retitled *An Ode to Metaphors*?

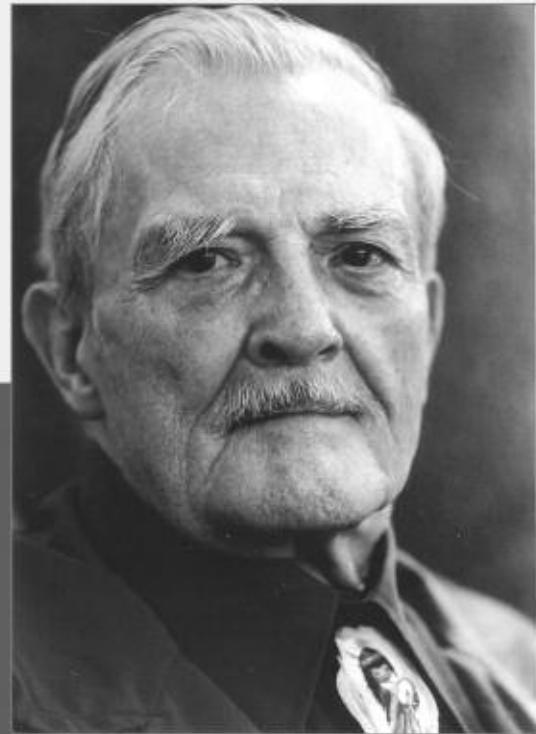
The book helps us to create metaphors, to enrich our repertoire, and to exercise our curiosity. It answers questions, such as to whom the metaphor is delivered; what words we should use; how we can embed stories, and for what purpose, and how we can reframe beliefs and emotions.

This wonderful book is organized in steps and sequences to create metaphors for ourselves, as well as for our patients in accordance with therapeutic goals. We need to remember to tell the stories, not to read them. The voice of Consuelo Casula can go with us, similar to the voice of Milton H. Erickson. We can play with metaphors the same way a gardener plays with seeds. Let us grow as gardeners; let us grow as storytellers. Why? For the pleasure and enlightenment of all.

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# BOOK REVIEW

## ***101 Things I Wish I'd Known When I Started Using Hypnosis***

By Dabney Ewin

Crown House Publishing,  
2009, 2013  
128 pages  
ISBN 978-184590291-9

Reviewed by Rubin Battino, MS, , Yellow Springs, OH

Oh, wonderful Dabney Ewin has authored a small gem of a book! It contains 101 things that I wish I had known when I started using hypnosis. Each “thing” is numbered, short, and to the point. The book is divided into five sections: Words, Smoking Cessation, Pain, Techniques, and the Miscellaneous Pearls of Wisdom (which are indeed pearls).

Since this is such a short and pithy book, I thought I would be reading it in a sitting or two. Not possible! There is so much food for thought, studying, and copying out for future reference, that I could not read more than a few “things” at a time.

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*“Once everything that can be done, and should be done, has been done, pain has no value.”*  
*These quotes are well worth memorizing.*

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In the introduction to the Words section, Ewin writes, “We are treating people with words, so the dictionary and the thesaurus are our pharmacopoeias. What we say, what we omit, and how we say it, matters very much. (Duct tape for warts? If you can influence the patient to believe it, it works!) What we call placebo in the waking state is much enhanced in hypnosis. Ewin emphasizes the utility of several special words such as: seems, yet, stop (not quit), abandon or discontinue rather than “give up,” sense vs. feel, bother vs. pain, “normal” for normalizing, and avoiding “try,” since it implies failure.

Since many clients visit hypnotists for smoking cessation you will find “things” 16-26 full of practical language usage.

The seven “things” in the pain section include the importance of believing what you are saying to the patient: “You will have all the comfort you need,” and “We all know that no pain lasts forever.” Ewin also quotes (thing 30) Kay Thompson’s famous dictum of, “Once everything that can be done, and should be done, has been done, pain has no value.” These quotes are well worth memorizing.

The 23 “techniques” include ideomotor finger signalling because Ewin utilizes this method with almost all of his patients (see Ewin & Eimer, 2006). And, I like his all-encompassing *wipe-out* alerting suggestion for the end of a hypnosis session: “When I say three, you will open your eyes and come back fully alert, sound in mind, sound in body, and in control of your feelings. One (pause), rousing up slowly, two (pause), three.” (p. 64)

Things 59 to 101 are not-to-be-missed “pearls of wisdom.” Ewin recalls from his medical school days that there were keen insights and clever or astute discernments that had to be remembered as “pearls.” You will treasure adding these “pearls” to your repertoire.

This collection of wisdom, its practicality, and its healing language need to be read over and over again—and cherished.

Ewin, D. M., & Eimer, B. N. (2006). *Ideomotor Signals for Rapid Hypnoanalysis: A How-To Manual*. Springfield, IL: Charles C. Thomas.

# BOOK REVIEW

## ***Anxiety Disorders: The Go-To Guide for Clients and Therapists***

By Carolyn Daitch, PhD

W.W. Norton, New York  
2011  
978-0-393-70628-4  
paperback, 243 pages  
[www.wwnorton.com](http://www.wwnorton.com)

Reviewed by Kay Colbert, LCSW, Dallas, Texas

This go-to guide is a practical, easy to understand compilation that explores the full spectrum of anxiety disorders. Carolyn Daitch is a licensed psychologist and director of the Center for the Treatment of Anxiety Disorders in Farmington Hills, MI. She also is the author of several books on anxiety-related subjects. This volume is written for both clinicians who treat anxiety disorders, as well as the person who has anxiety. It probably would be most useful for therapists to use with their clients. Daitch feels that clients will have better outcomes if they are active participants in their own therapy, and if they are educated about anxiety as well as the various treatment options.

Much more than a self-help book, this book provides a thorough overview of the different types of anxiety disorders. Divided into 12 chapters, Daitch explains the causes of anxiety, and evidence-based interventions and relaxation techniques. There is a chapter on medications, maintaining a healthy lifestyle, and a resource section.

Daitch provides a separate chapter for each type of disorder: Generalized Anxiety, Panic Disorder, Specific Phobias, Social Anxiety Disorder, and Obsessive-Compulsive Disorder. The descriptions are engaging and include numerous examples and case studies. Specific treatment options are covered, as well as helpful coping skills the average person can use, such as mindfulness or breathing techniques. Visualization, supportive self-statements, and changing negative self-talk also are included. There is a description of the 4-Step Method developed by Jeffrey Schwartz, MD, to help OCD patients. The chapter “Relaxation Techniques for Everyone” would be very useful for clinicians to share with their clients. Daitch’s tone throughout is encouraging, and the interventions she discusses are accepted evidence-based practices.

Daitch does not cover post-traumatic stress disorder (PTSD) or acute stress disorder (ASD). She states that PTSD is so complex, it warrants a book of its own. Trauma is only given a couple of paragraphs, although the author does mention a connection between trauma and anxiety. This book was published in 2011, so it uses DSM-IV rather than DSM-V as a reference, which in a few cases affects anxiety disorder diagnoses. Hoarding, for example, is now a distinct disorder; in this book, it is listed under OCD.

The chapter devoted to medications and neutraceuticals includes some general advice on psychotropics, and “Do’s and Don’ts” for using medications. Remarkably, benzodiazepines are described as being “ideal to have on hand” for panic attacks or high anxiety situations. Although Daitch calls benzodiazepines more of a band-aid than a cure, she does briefly mention addiction, however a stronger warning should be given due to the compelling link between the use of this class of medication and addiction. The author also includes suggestions for taking vitamins and herbal supplements, and again, she lists cautions and concerns, since these are not approved treatments for anxiety.

The end of the book discusses good self-care; maintaining a healthy lifestyle and balanced diet; and the value of an exercise, good sleep habits, and yoga. The suggestions on exercise and sleep are excellent to give clients.

Overall, Daitch has written a concise and accessible guide on anxiety disorders. The focus on developing skills and evaluating treatment options offers hope to sufferers so that they can take control of their recovery.

# BOOK REVIEW

## ***Progressive Counting: Within a Phase Model of Trauma-Informed Treatment***

Ricky Greenwald, PsyD

Routledge, New York

2013

978-0415887434

paperback, 256 pages (also available as eBook)

[www.routledge.com](http://www.routledge.com)

Reviewed by: Kay Colbert, LCSW, Dallas, Texas

Mental health professionals frequently need effective ways to treat various types of trauma, including post-traumatic stress disorder (PTSD) in both adults and children. The author of this book, Ricky Greenwald, PsyD, is a founder and director of the Trauma Institute & Child Trauma Institute in Greenfield, MA. The TI/CTI is a non-profit organization that provides training, consultation, information, and resources for those who work with trauma-exposed children, adolescents, and adults. Dr. Greenwald presents a new approach to trauma work, which he calls progressive counting (PC).

This book lays out the basic techniques of progressive counting and Dr. Greenwald's approach to working with unresolved trauma in clients. It is divided into 15 chapters. Information is given about understanding trauma and trauma-informed treatment, as well as brief descriptions of other research supported treatments. Greenwald describes the various stages of preparing a client for trauma work and the different approaches available. The author also presents his Fairy Tale Model of Trauma-Informed Treatment, which he previously developed. This is a metaphorical way of describing one's traumatic experience using a narrative based on a traditional fairy tale structure. Directions to the therapist are given, along with many worksheets, scripts, and exercises to use with clients. There are also instructions and advice for clients themselves who may wish to use this book on their own.

Greenwald says the benefits of PC are that it "appears" to be as effective as eye movement desensitization reprocessing (EMDR) and that it is easier for clinicians to learn than EMDR. With only one randomized trial having been conducted with PC using 15 participants, the results are not statistically significant. Greenwald claims, however, that pending further research, PC "appears to be in roughly the same league as EMDR" (p 49). At this point the author's conclusions are preliminary, based on his own experience working with EMDR. It will be interesting to see what evidence emerges from future testing of this interesting method.

The PC technique follows the "phase model," which is stabilization of a client, resolution of traumatic memory, and then reintegration and rehabilitation. Greenwald suggests having clients make trauma lists of the worst things that ever happened to them, then rating each item on a SUDS (subjective unit of disturbance) scale. He discusses how to choose which incident or target with which to start. The therapist could ask the client to imagine viewing a "movie" of the trauma memory in their mind, and as they do this, the therapist counts out loud from one to 10; one to 20; up to 100. A SUDS is taken with each round. Presumably, the SUDS score will lessen progressively each time.

Later chapters provide information on developing coping skills, enhancing attachment, problem-solving, and case examples. In addition, tips are given along the way for adapting the process for children.

Although more randomized controlled trials will need to be done before we can adopt this method into evidence-based practice, Greenwald presents an interesting variation of trauma treatment.

# DVD REVIEW

## ***Cognitive Therapy for Weight Loss: A Coaching Session with Judith Beck, PhD***

Psychotherapy.Net LLC

Mill Valley, California

2010

75 minutes

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

What a wonderful training video! This DVD testifies to both Beck's amazing ability and competence, as well as to Yalom's interviewing and DVD making skills. Overall, they have created a helpful training video that works on several levels, and can assist you in becoming more competent in working with weight issues. It will

---

*She pulls things from the air that come from a storehouse of knowledge, and she does so in such a concerned manner that you feel cared about just watching her be kind and helpful.*

---

give you applicable tools for clients and will speak to you personally.

The video begins with Victor Yalom interviewing Judith Beck about her approach in assisting people to reduce their weight. The interview flows well and provides the necessary knowledge to understand Beck's work and incorporate it into your own style. It even comes with an instructor's manual that includes tips for making the best use of the DVD, an outline of Beck's approach to Cognitive Therapy for Weight Loss, discussion questions, and a session transcript.

Not only will you learn skills that will help you deal with folks wanting to lose weight, you may gain some tools to help you become a better therapist. Some of the techniques she advocates can be applied to other issues. I had three clients last week who benefited from my having watched the video, and none of them were even dealing with weight issues. However, I feel much more competent to assist others in losing weight from having seen this video. This DVD package brought it all together.

When watching Beck work with a woman wanting to lose weight, I was struck by what a genuinely nice person Beck is--one that you would want as a friend because she is authentic. But more than that, Beck is bright and well informed. She pulls things from the air that come from a storehouse of knowledge, and she does so in such a concerned manner that you feel cared about just watching her be kind and helpful. Her competency is displayed in such a gentle manner that I gained even more respect for her.

The video switches back and forth from Beck working with the woman to being interviewed by Victor Yalom, so viewers can see both her actual work and her explanations. The pace was exactly right for learning how to help others reduce their weight. Skills are demonstrated; behaviors discussed with the client; and Beck answers the types of questions you would ask her privately. For example, what could help you become more competent as therapist in this area.

Not only do I recommend this DVD for many reasons, I also lost 15 lbs. after viewing it. I believe this time I'll be able to keep the weight off, and can also now be more helpful with others and their weight issues. Beck and Yalom did an excellent job on this DVD.

# BOOK REVIEW

## ***Focusing in Clinical Practice: The Essence of Change***

By Ann Weiser Cornell

W. W. Norton & Company, New York, NY  
2013, 250 pages

Reviewed by Roxanna Erickson Klein, PhD, LPC, Dallas, TX

*Focusing in Clinical Practice* offers professionals a well-rounded, easy to read text that delineates Focusing as a potential central element for clinical practice. This book clarifies applications and provides a brief overview of the history of Focusing. It can be used as a step-by-step guide to address a broad range of client concerns, and includes a chapter specific to working with trauma, addiction, and depression. The book is supplemented by a generous section of references and index. Of particular interest to clinicians new to this approach, is an appendix that can be used to support clients in their ongoing work.

Eugene Gendlin, PhD, is a pioneer. While still in graduate school in the 1950s, he explored ideas that eventually led to the “discovery” of Focusing. Early on, he worked with Carl Rogers, among other notables. Eventually, he became known for his unique style, and for his classic text, *Focusing*, published in 1978. Interest in his ideas has continued to spread over time. This book is of value in that it expresses the ideas in pragmatic, clear ways that allow clinicians to adopt and refine integration of Focusing within the context of modern practice. On the cover of this book, Gendlin credits the author with working with him for more than 30 years and with “knowing as much about focusing” as he does.

Focusing is at once a philosophy and a technique wherein the path to problem resolution is identified as coming from within the individual. It relies on the process of learning to explore the self; to accept one’s own “felt sense;” and to nourish expression of needs so deeply held within that they might be beyond words or logic.

The practice of Focusing includes developing skills of present-centered orientation and turning attention inward. The term “felt sense” is used to describe a mechanism to discover or direct therapeutic energy. Cornell offers straightforward methodology for setting the stage, nurturing clients through the process, and blending techniques with other therapeutic orientations.

Like other experiential techniques, Focusing goes beyond cognitive explanation. A novice beginning with this book will be well served by supplementing training with contact from other clinicians who use the techniques.

While more akin to Person Centered Therapy than Ericksonian approaches, Focusing shares a deep respect for internal wisdom inherent to both of these schools. A commonality shared by Ericksonian approaches and Focusing, is reliance on a client-generated experiential process to move beyond the present moment in a healthy direction. Acceptance that cognitive insight may or may not accompany change requires self-trust of the capacity for one’s own inner wisdom. Both methodologies nourish an internal search to find a personal, effective, unique, and meaningful direction for transformation. Both approaches rely on individualistic natural processes to generate needed momentum for change.

In *Focusing in Clinical Practice*, Cornell explains the approach in language understandable to those with no background in Focusing, yet can be appreciated by those with a strong background in the techniques. Cornell has earned her reputation as a leading theoretician and international trainer of Focusing. Her ability to express the ideas with clarity and precision give her work an exceptional value. The combination of simplicity and complexities display the elegance of this work.

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## INTERVIEW

continued from page 1

animal work on split-brains. I did a short study trying to put the half-brain of a rabbit to sleep, and then returned to college at Dartmouth. But the seed had been planted. I knew some patients had undergone what amounted to split-brain surgery years before in Rochester. I wrote Sperry and suggested I try to test them for the effects seen in the animals. While that didn't

for an entire field of research! So, with all that you have learned from how the two hemispheres are different and yet interacting, we are curious how you weigh in on the age-old question: Is the brain integrated or localized? In your early book with LeDoux in 1978, *The Integrated Mind*, you addressed those issues. What do you think now?

*The major goal for me is to figure out how all the modules work across different time scales and different spatial locations to produce the unified mind we all enjoy.*

work out, I also applied to Caltech for graduate work and was accepted. My first project was to study Case W.J., a man who was about to undergo surgery for his epilepsy. It took off from there.

**Simpkins:** How interesting that you sensed the importance of this research early on as a student! In many of your papers, you state that your work with surgical disconnection of the two cerebral hemispheres offered you an opportunity to study how key brain systems (sensory, motor, perceptual, and cognitive) are organized. You proposed that the lateralizing of different functions has given us clues to conscious experience itself. As you look back on your many years of exploration, what do you consider your most important finding, and why?

**Gazzaniga:** At the time of the first experiments there was a disconnect that had to be resolved. Animal research revealed the dramatic effects we all now know about. If one half-brain was trained on a visual or tactile discrimination, the other side didn't know about it. It was like there were two mental systems.

The earlier work from Rochester showed none of this. That work was widely reported as showing that severing the corpus callosum had no effect on the transfer of information from one brain to the other. It turns out that work was all wrong, and those results were probably due to faulty testing procedures. By the time we concluded those first experiments, it was clear animals and humans behaved the same way.

**Simpkins:** This was certainly a pivotal insight that paved the way

**Gazzaniga:** It's both. The question is, how all those isolated modules become coordinated into integrated unified action.


**Simpkins:** Yes! We see evidence of both all the time in clinical work—how sometimes making a localized, small change can have a broader ripple effect, or at other times, how a broader generalized alteration can influence a particular habit or problem. Here's another issue: Clinicians often work primarily with the mind. Neuroscience research on the brain is giving us much more information about the mind. We wonder, what is your opinion about the relationship between mind and brain. Do you believe: 1) The mind is the brain (Identity) 2) The mind is a function of the brain (Functionalist), 3) There is only brain; there is no mind; (Eliminativist) or 4) The mind and brain are correlated, but essentially different things (Dualist)? Or perhaps you have another view.

**Gazzaniga:** The brain produces and is the platform for the mind, which in turn constrains the activity of the very system that produced it. Think of layers on how they might interact.

**Simpkins:** So, in effect, mind and brain seem to interact as a network, back and forth. Given that back and forth quality, we wonder what you think about neuroplasticity-- the ability of the brain to reorganize itself. Do you still believe, as you have stated in your papers, that the corpus callosum, as the communication link between right and left hemispheres, has played a role in the plas-

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ticity of the brain to utilize redundant systems for newer functions?

**Gazzaniga:** It is possible and indeed there is new work to support the idea.

**Simpkins:** What role do you think the corpus collosum plays in our experience of being an integrated self?

**Gazzaniga:** In my view, the self is a narrative story line we build using our left-brain interpreter. To the extent there are processes in the right brain that contribute to that activity, the callosum is involved.

**Simpkins:** So, you are implying the right brain is also involved in our sense of self. We have always wondered how you feel about the right-left interaction. You have said the interpreter allows us to feel that we are an integrated self and in charge of our actions. You have proposed that it is located on the left side of the brain. What is the function of those areas in the right hemisphere? And, what is your opinion of people who propose there is also a right hemi-

sphere interpreter which functions in a similarly integrative way, and yet does so in a right hemisphere manner?

**Gazzaniga:** Paul Corballis has proposed that idea and it seems reasonable to me. As you know we have done tests, which suggest that the kind of interpretive functions the left carries out are not done by the right hemisphere. The interpretive functions of the right hemisphere seem to be related to basic visual processes.

**Simpkins:** What are you doing now in your work? Are you consolidating the many years of discovery, or have you moved on to new areas of interest? If so, what are these new areas?

**Gazzaniga:** The major goal for me is to figure out how all the modules work across different time scales and different spatial locations to produce the unified mind we all enjoy.

**Simpkins:** This sounds like a promising pursuit. Modern neuroscience is thinking more in terms of

See INTERVIEW on next page

## INTERVIEW

continued from page 25

systems. We look forward to what you will discover! Finally, could you tell us how you think your work can help clinicians?

**Gazzaniga:** I was once walking through a security check at a courthouse and a policeman asked me why I was going up to a judge's chambers. I told him there was a meeting going on about brain imaging technologies and their possible role in lie detection. He looked at me bewildered. He then said in a New York cop kind of way, "If their lips are moving..."

I guess I find the interpreter to be always at work trying to tell a story to make our actions and feelings fit a story line. Much of it is self-deception.

### Conclusion:

It sounds to us as if Gazzaniga's work implies that Narrative Therapy could be considered to have a neuroscientific basis in the workings of the hemispheres. But this interpretation has not yet been made.

### About the Interviewers:

C. Alexander Simpkins, Ph.D. and Anellen M. Simpkins Ph.D. have been involved in neuroscience since the 1980s. They are authors of 28 books including several specifically on neuroscience: *Neuroscience for Clinicians* (Springer, 2012) and *The Dao of Neuroscience* (Norton, 2010). They also integrate neuroscience into their therapeutic books, which include *Neuro-Hypnosis* (Norton, 2010), *The Tao of Bipolar* (New Harbinger, 2013), *Zen Meditation in Psychotherapy* (Wiley, 2011), *Meditation and Yoga in Psychotherapy* (Wiley, 2010), and *Meditation for Therapists and Their Clients* (Norton, 2009). They are currently presenting workshops around the country titled "Neuroscience for Clinicians," which guide practitioners in integrating the latest brain science into their practice. The Simpkins have long had a special interest in the effects of hemisphere dominance on psychotherapeutic effectiveness. They performed research comparing the therapeutic effects on right or left hemisphere dominant subjects who underwent a six-week course of either Ericksonian Hypnotherapy or Brief Dynamic Therapy.

•••

Some of our readers may be unfamiliar with the split-brain field, so we offer a brief summary to put Gazzaniga's work in context. Hemisphere specialization has been observed since the time of the ancient Greeks. Hippocrates noted that injuries to one side of the head often resulted in impaired function on the other side of the body, concluding that the human brain is double. Later, when the brain was examined under a microscope, the two halves appeared to be structured the same. It is not surprising that throughout most of medical history, researchers believed the two halves of the brain worked similarly. Only in the past 100 years have the different functions of the two hemispheres been revealed, and Gazzaniga has played an important role in that history.

Early scientific research performed in the laboratory of the famous psychologist Karl Lashley (1890-1958), demonstrated hemisphere and region-specific visual learning in pigeons. This idea that learning could be restricted to one hemisphere without active or immediate transfer to the opposite hemisphere was studied further in higher animals. One of the early experiments was performed on a cat at Roger Sperry's (1913-1994) lab at the University of Chicago in the early 1950s. Later, Gazzaniga worked under Sperry's mentorship, with the primary responsibility of initiating human split-brain research. He studied what people could and could not do after their two hemispheres were separated. For example, when split-brain patients were shown an object just to the left of their visual field (which is sent exclusively to the right hemisphere), they were unable to verbalize what they saw. But even though the split-brain patients couldn't name what they saw, they still knew what it was, because they were capable of picking up the correct object out of a group of things. This kind of research has helped us to understand the contribution of each hemisphere to normal brain functioning.

At first, as neurologists recognized the differences between the hemispheres, many were more interested in the left hemisphere, which seemed to control language and complex cognitive abilities. They went so far as to as-

sert that if you only had one hemisphere, the left was the one to have. But evidence gradually emerged to indicate that the right hemisphere was equally important in a different way. Right hemisphere damaged patients were deficient in their ability to organize spatially. They had trouble finding their way back to their rooms at the hospital and even found dressing themselves to be a problem. As it turns out, the right hemisphere serves crucial functions in visual processing, depth perception, gestalt formation, and tac-

tile, somato-sensory skills. Gazzaniga clarified that the left hemisphere is superior in verbal processing of information, and the right hemisphere is better at managing visual-spatial tasks. We now know the left tends to be rational, detail oriented, and logical, whereas the right is more intuitive, holistic, and emotional. Based upon the split-brain findings, Gazzaniga has proposed a left hemisphere interpreter, which regulates much of our executive functioning and builds the narrative we think of as the self.

## LA MAISON

continued from page 12

ing of the Milton H. Erickson Institute Centre-France, bringing forward more of Dr. Erickson's ideas. For more information please go to: [www.christine-guilloux.eu](http://www.christine-guilloux.eu) and also on Facebook at <https://www.facebook.com/maisondesormes89110/>.

**KR:** Thank you Christine. You are a joy!

**CG:** Thank you Kathryn. It is has been a pleasure.

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**Kathryn Rossi, Ph.D.** is a licensed psychologist who recently co-edited the 16 volumes of *The Collected Works of Milton H. Erickson* (Rossi, Erickson-Klein, Rossi, 2008-2014). She is in private practice in Los Osos, CA. [www.KathrynRossi.com](http://www.KathrynRossi.com)

## I N M E M O R I A M

## A Pioneer in the Field of Psychology Passes On

Arnold A. Lazarus, Ph.D., ABPP, died at the age of 81 on October 1, 2013. A resident of Princeton, NJ since 1972, Dr. Lazarus was a clinical psychologist and distinguished professor emeritus in the Graduate School of Applied and Professional Psychology at Rutgers University.

In 1960, Dr. Lazarus began his career as a private practitioner in Johannesburg, South Africa. Six years later he immigrated to the U.S. to serve as director of the Behavior Therapy Institute in Sausalito, California, where he built one of the nation's first behavioral health practices. In the years following, he taught at Temple University Medical School (1967-1970) and at Yale University, where he also served as director of clinical training (1970-1972) before joining the faculty at Rutgers.

Dr. Arnold Lazarus coined the terms "behavior therapy" and "behavior therapist" in the professional literature in 1958. In 1971, he published his seminal book *Behavior Therapy and Beyond*, which remains a groundbreaking text of what would later become known as cognitive behavior therapy (CBT). He went on to further differentiate and expand his clinical approach, Multimodal Therapy, which

is one of the most elegant and comprehensive approaches to psychotherapy.

In the 1970s, Dr. Lazarus founded the Multimodal Therapy Institute in New Jersey, which expanded to other locations both nationally and internationally. Subsequently, in 2003 he founded The Lazarus Institute in Skillman, New Jersey.

Dr. Lazarus has received many honors and awards including the Distinguished Psychologist Award from APA's Division of Psychotherapy, the Distinguished Professional Contributions Award from APA's Division of Clinical Psychology, and the Distinguished Service Award from the American Board of Professional Psychology. He also was the recipient of the first Annual Cummings PSYCHE Award and was inducted, as a charter member, into the National Academies of Practice as a Distinguished Practitioner in Psychology.

The author of 18 books and more than 350 professional and scientific articles, Dr. Lazarus was a much sought after speaker and one of the top-rated presenters at the first Evolution Conference hosted by The Milton H. Erickson Foundation.

Dr. Lazarus is survived by his wife of 57 years, Daphne; a daughter, Linda; grandson, Taylor; and son and daughter-in-law, Clifford and Donna.

He was an ardent supporter of the Erickson Foundation and we offer our sincere condolences to his family and loved ones. Dr. Arnold Lazarus was a pioneer in the field and his contributions will live on.

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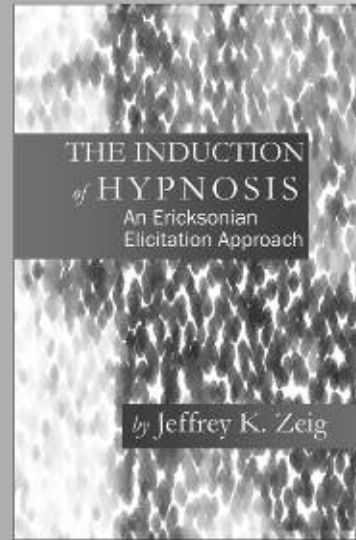


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