

# Utilization

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## SPEAKERS

Stephen Gilligan, Dan Short

### **Dan Short** 00:35

Steve, I want to thank you for coming in and spending time here with us to share from your knowledge from your expertise in training therapists around the world in doing your own therapeutic work throughout the years with other individuals and in having studied with Milton Erickson to help us better understand what this is about this idea of utilization.

### **Stephen Gilligan** 00:56

I'm glad to be here. It's you know, as I think the one thing that everybody. One of the most amazing things about Erickson is how many different viewpoints there are by his different students. Yes. And yet at the same time, the one thing that I think there is uniform agreement that the Hallmark contribution, the really unique thing about Erickson's work, that forged new ground was this principle of utilization. Now,

**Dan Short** 01:25

Yeah, I think so much. So if the person doesn't understand or isn't able to do utilization, they're probably not Ericksonian therapists.

**Stephen Gilligan** 01:31

I totally agree.

**Dan Short** 01:32

Okay. So what it what is it in the simplest terms possible what what is utilization?

**Stephen Gilligan** 01:37

Well, you to me, I mean, there's there's sort of two complementary, complementary dimensions. The first is there's a creative acceptance. Before you start doing something, there's a way of opening up to completely receive and make room for everything the totality of a client's identity. Their emotional identity, their patterns. Then you're sort of sifting through and being curious of all these patterns. Which might be most important to make use of? If we don't include them, they're going to sabotage you. Which would be most interesting and motivational to use those for the positive purpose of furthering the therapeutic game.

**Dan Short** 02:26

Can you give us a concrete example of that?

**Stephen Gilligan** 02:28

Well, one of the great teaching tales from Erickson, it's so lucid about utilization and like many of these Erickson stories, it's funny, so funny that oftentimes, we don't pause to really look into what's happening. Okay. 1950s secretary, here in Phoenix large office comes in, she announces I'm going to kill myself. Erickson says why? She opens her mouth, points to a large gap between her teeth, and says, isn't it obvious? And Erickson says what's obvious? This gap in my teeth means that I'm so ugly, which means no man will ever desire me, which means I'll never get married, which means my life will have no value, which means I should kill myself. Isn't it obvious? Yeah. And Erickson rather than saying, Oh, no, it's not so bad. You know, you have a good personality. Or maybe if you smile, like this... He said, well, before you kill yourself, I'm wondering if you're willing to make a few commitments to follow a few tasks.

**Dan Short** 03:39

Wait a minute, wait a minute, before you kill yourself. So he's even kind of accepting this statement that she's gonna kill herself?

**Stephen Gilligan** 03:45

Yeah. So it's like I trained in the martial art of Aikido for many, many years. The idea that the client is presenting something and you never tried to block it. You're trying to join with it. I think that's, that would be sort of the semantic model of it. She agrees. He said, All right, the first thing I want you to do is I want you to go home after work. And for a couple of weeks every night, I want you to practice taking water glass of water, fill your mouth with it and

learn how to squirt water through the teeth. She was a little bit shocked but he said you've made a commitment. Yeah, she practices for a couple weeks. She comes back and she's a sharpshooter. Erickson finds and here's a comment about you're utilizing in the direction of the therapeutic goals. He has a sense that she would like to have an intimacy relationship, okay. He has a conversation with her and discovers there's a young single man in the office who might be interested in her because every time she goes to the watercooler, guess who shows up? Second task. I want you to watch when that young man goes to the water cooler when you see him making his way there, want you to run up, fill your mouth with water, step behind the wall. When he leans down, you'll jump out and give him a good squirt. Okay? So she does she's getting a little bit shocked. She does it. He leans down, she get jumps out, squirted him nice and runs like the devil.

**Dan Short** 05:24

And run like the devil, he tells her to, okay.

**Stephen Gilligan** 05:27

So he gets, she gives him a squirt. He runs after her. He asked her for a date. And as in a lot of these Erickson stories they get married shortly thereafter, and have six little water squirters.

**Dan Short** 05:41

So this was a very we get the happy ending, but this was a very flirtatious thing she was doing. He was kind of showing her how to get someone to pursue her. And the key element in making it work was the symptom she had brought in, what she considered the symptom was this huge, terrible gap.

**Stephen Gilligan** 06:00

My understanding was, like, I could be wrong, but just from reading it. I don't think she was flirtatious. I don't think she had the belief that she was attractive enough to be able to do something like that. But it was clear from what she was saying, because I will not have an intimate relationship, then my life is meaningless. I think that indicates what the value is. And so he's now, he's now curious. How can we make use of this right? And how can we make use of this that would move her in that direction of possibly...

**Dan Short** 06:36

Yeah, the idea being before then, if she had been flirtatious before then, she wouldn't have a problem. She didn't know how to and she had this huge burden and had no clue how to make this work.

**Stephen Gilligan** 06:48

And yeah, I think she had this self image that this gap in my teeth means on I'm so ugly, that I could never I could never have an intimacy relationship. So, you know, like the, you know, many of those Erickson stories. It's funny. But the interesting thing is he sort of sifting through and one of the most significant emotional parts of the client presentation is capping the teeth. I don't think he really judged whether it was positive or negative, so much as this has emotional value. And therefore, that's the use of that, in terms of a piece of the therapeutic development would really give it motivational value. It would place the change process in the clients own language, which I think makes a big difference. It would interest the client a lot more. And I think there there are other things about it that we can we can talk about, okay. It was a sense of whatever you're experiencing, whatever value you have, whatever life gives to you, it is upon that rock that you shall build a happy life. That, that is I think the really radical, generative attitude that underlies the utilization principle.

**Dan Short** 08:21

So now you're talking to us about what makes the utilization principle, what makes it therapeutic in and of itself. Yeah, this is this is why this is important to do this.

**Stephen Gilligan** 08:31

well because of the values and then you also have the fact that, Okay, here, here's the every client, by definition, there's someplace they want to get to, they might, they might not even be willing or able to clearly articulate that. But there come - the purpose of the of the therapeutic conversation is to move them in a positive direction. But by definition, when they come into therapy, there's something that is blocking them. You know, they could say, well, I like to have an intimate relationship. But as they move towards that important life goal, is that something that's coming up? So the question is, what's your relationship to these inevitable obstacles that arise on the therapeutic path? And Erickson made this very radical orientation to welcome them and be curious about how they can contribute to it so you don't see them as a problem. You see everything as a potential resource.

**Dan Short** 09:40

Everything is a potential resource, including the symptoms including resistance, including fear...

**Stephen Gilligan** 09:48

Everything. Yeah. I mean, you know, his, his, his written case studies are replete with all those things about the you know, the little boy who stomps his foot. And the mother single mother says, You see I can't do anything with them. Yeah, now if that boy were brought into a clinic these days he would in

most clinics he would be mandatorily medicated. And he would be given medicine and the whole approach would be to really snuff out that stomping foot

**Dan Short** 10:22

Now we're going to eliminate this from, from your repertoire behavior if we can.

**Stephen Gilligan** 10:26

Yeah, so Erickson said you know, mother, wait out in the waiting room and said to the boy, is that as hard as you can stomp? You know a big boy would be able to stomp a lot harder. The boy says I'm big boy! And he said, Well, I don't know if you're a big boy. Big boy can stomp that hard at least 50 times. The boy says well, like, I'm a big boy. He says prove it. So now the stomping foot is not seen as the behavior that must be eliminated. But it's how can that, how is that stomping foot a pattern that really can get the movement going towards the therapeutic goal...

**Dan Short** 11:09

And become valuable. This idea of him proving he's a Big Boy, which involves some responsibility, and

**Stephen Gilligan** 11:17

That's right. And I think that is the therapeutic value, okay, that we're trying to transmit, that everything in your life has positive value. What is required is some sort of positive connection to it. So the utilization principle really is such a deep demonstration of that. So not only does it allow you to make use of a specific behavior, a specific value, but I think it's one of the sort of pedagogical things, psycho educational things that we're trying to help our

clients to learn. That everything that life gives you has a potential positive value.

**Dan Short** 12:07

This is a concept with the problem they bring to us we can use this as an opportunity to get this idea across to the family. Absolutely. Okay. And from that I assume comes a life of more abundance and of a readiness to face challenges and thrive.

**Stephen Gilligan** 12:22

Yeah. And you know, I think, I you know, asked people this this question number of times. If you had a reasonable confidence that what ever happened in your life, including some some really nasty stuff, that if if you had a little bit of time, and you could struggle a little bit, you could figure out that what ever this experience was, it could help you to be a happier, better person. Do you think that would change the way that you live your life and I've really never that somebody said, No, no, that wouldn't be a game changer. It's a great question. So then, you know, that is the question yes, but how, you know. And a client develops these beliefs, I can't deal with a lot of life challenges. So I have to, you know, start to defend, disconnect, dissociate, limit myself, not take risks and so forth. So, so that's, I think that attitude that was sort of emanating from that specific, that principle of specifically utilizing certain elements.

**Dan Short** 13:35

Okay, so I'm gonna about to put you on the spot a little bit. When we've got people that are brand new to Ericksonian therapy, they're studying it for the first time. They're reading these brilliant case studies from Milton Erickson, or maybe some other, you know, people that are up there teaching and describing

these very creative, very impressive things they do. And then this new student gets the feeling, oh my God, how am I going to do something like that? And especially when I'm on the spot, so here we are, maybe something serious is going on the person's suicidal or whatever, there's no gap in the teeth for me to talk about. So how am I going to know how to utilize this? So I was wondering, could I just, like, throw something out at you as if I was the client? And then you kind of show us how you utilize something on the spot. Okay. Okay. So we've got a, you were talking earlier about, you want to go to the the, where there's a strong emotional value, or where the person's put a lot of emotional energy. So let's say I'm a young woman speaking to you, and at least three times in the session I throw out I'm so stupid, you know, and then I'm so stupid, and it becomes apparent that this is a big, there's a lot of emotional energy in this. Is that something that can be utilized? And then how do you know what to do with that?

**Stephen Gilligan** 14:47

So, I just want to say to you, this way, of course, say I hear that presence inside of you. That really believes that she's stupid and I want to thank her for introducing herself into the conversation. I just want to say, Hi. I'm really, really appreciative that you have trusted this conversation enough to introduce her.

**Dan Short** 15:15

So the first thing you do you accept that's that's the very first thing.

**Stephen Gilligan** 15:20

Absolutely. And if you notice, you're putting the negative behavior in the third person.

**Dan Short** 15:27

Oh, yes.

**Stephen Gilligan** 15:28

You know, I think it's one of the things we've learned from trance. That experience could be represented in first person, I am stupid. Which sometimes I think that that's the better way to go. I'm claiming this, I'm speaking this. But other times, because they're really they're sort of learned usually, emotionally younger ego states is the term we use. And and to think of it in third person. So among the multitude you know, multiple, contradictory parts that live inside of you. There's a presence that really believes she's stupid. I'm sure that makes sense. And I'd like to say to her welcome.

**Dan Short** 16:08

You said thank you. Yeah. And thank you for bringing her here. And so you're implying there's some value here. So rather than this is something we have to eliminate, and make no longer exist, this is something you're going to help her discover what value there is there.

**Stephen Gilligan** 16:24

And I often will ask after something like that. The person says something like that. So I'm just curious when you heard me say, heard me say, welcome. What happened inside of you? About 90% of the time, people say, something's relaxed. Isn't that interesting? So when we talk to that presence, and somebody that really feels stupid, with respect, and kindness, she relaxes. Isn't that interesting? Don't you find that interesting? So and you notice again, we're talking about we're beginning to differentiate the sort of the, what I would call the competent present age ego self from these different emotional parts, some of which may believe they're stupid or unlovable. And so to me

what we're thinking we're opening this conversational space. And once we realize inside of every human being every client, every therapist there, the whole universe is there, the parts of me that think I'm stupid, the parts of me that love to play that parts of me. And usually if we're just up here, sort of we get one truth per customer, I'm either stupid or I'm not. Okay. But in this conversational space that we're looking to open therapeutically. There's room for for multiple contradictory parts.

**Dan Short** 17:54

And that's more likely to happen in a trance state. Is that what you're saying?

**Stephen Gilligan** 17:58

Trance informed conversation.

**Dan Short** 18:00

Trance informed, okay.

**Stephen Gilligan** 18:01

The idea here if I might just take a moment. I think that underlies this sort of the theoretical underpinning, yes, is that we're really looking at a two level theory of reality or experience construction. We've got this first level of sort of primary process and sort of a almost like a dreamer world in some way.

**Dan Short** 18:24

Now, by primary process, you mean sort of like unconscious thinking and stuff? Or what do you mean by that?

**Stephen Gilligan** 18:29

The term unconscious would be used for it. It's like when you go into reverie, when you go into just letting your imagination, when you go into a dream, that's sort of a nonlinear experiential, symbolic, sort of patterning. We say in that place, things are not fully human yet. So they're in this what you know, in philosophy of language is the difference between a symbol and a sign. A symbol is something that that, you know, Gendlin, Eugene Gendlin used to say is something that has multiple contradictory meanings, a number of which cannot be made explicit. So this part of you that feels, I don't know, it may have 100 different faces, 100 different meanings, some of them positive, and some of them negative. So at this unconscious level, it's not it's not locked into any particular form or any particular value. It takes the second level, the observer level, which says the social cognitive mind is responsible for this reality out here. It's a different world. It's sort of navigating by these certain rules. Originally, that social cognitive world is your family. You don't really have the maturity when you're a kid. So, it's really, you know, how your family and how people when you were a kid defined those parts of you. So, it's the real human connection to that unconscious sort of multi potential symbol that collapses it, or, makes it translates into a single particular sign. Like, I'm stupid, and it's bad. And it's it. It that part of me is not acceptable in the outside world. So my interests would be how can we welcome that part that feels I'm such an idiot. And and realize that's one of the most important parts of your creative self. You know, you realize I don't know. You know, most of the things in the universe I have no idea about. Yeah, you know, most of what I say is what the Irish called blarney. It's, excuse me. I hope it's not too coarse. It's bullshit. Okay. Okay, but you want to be a centered responsible bullshitter. Okay. And realize that most, you know, to me is one of the greatest conspiracies is that people know that they don't know most of anything. Yes, they know that I feel there's a part of me that feels like an idiot. But the conspiracy is nobody else feels that way. Therapists I think especially I'm, I'm,

I've been trained I went to a graduate program, I'm supposed to be, you know, able to do this utilization stuff, supposed to know... But well, the type of language we're working with in therapy. A lot of it is so indeterminate. You have to be able to be comfortable in this not knowing state.

**Dan Short** 18:51

Not knowing Okay.

**Stephen Gilligan** 19:33

And so out of that, if you're comfortable, you can hold those things. And I think if we get back to that Erickson gap in the teeth. I'm very confident, although I didn't ask him about this case directly. But I'm just sure that squirting water through the teeth was not the first thing he thought of. That he was able to take those patterns and hold them into this state of curious not knowing. And sort of like holding a jewel and watching it refract into, you know, so many different waves. Oh, it could be this, it could mean this. It could mean this. It could mean this. And then say, oh, squirting water through the teeth. I have a therapeutic intuition that that might be something that would be an interesting alternate relationship to it. And then you don't know. Because it's got to be ratified. It's a negotiation process. Yes. I think that's something that sort of brings a little twinkle, it brings curiosity. You're not in that sort of conditioned sense of I know what it means. It always means to submit, you know, etc, etc. You want to tweak that understanding. So a therapist, I believe, it's really important to train yourself to be comfortable with not knowing.

**Dan Short** 23:24

You have to be comfortable with not knowing.

**Stephen Gilligan** 23:26

Absolutely.

**Dan Short** 23:27

With the uncertainty that comes with someone coming in your office and you don't know what will work and you don't know exactly what they'll need. Absolutely. But you begin with this position of acceptance. You're looking for what you can utilize. And sometimes in a sort of paradoxical fashion, you may have them do more of something that's the problem such as stomping or whatever. Yeah. But that gets us to a process of change.

**Stephen Gilligan** 23:55

Yeah, it gets us to a process where things aren't being in a rigidly automatic conditioned way. Well, by that I don't know stay, that doesn't mean that you're just sort of wallowing. You need to have this discipline of a balance. So you've done all the training. So you know how to run a basic session, you know how to sort of play the basic chords, you know how to do the basic stuff, but you don't have to open a space to go beyond any sort of basic plots, which is really where the significant transformational work is. And with clients who have significant symptoms, you can't just do manualized treatment. So you have to do that manualized in the sense of, I've got my way that I've trained to be able to conduct a session, but I know that there are going to be these inevitable points in the therapeutic conversation where I don't know. And hopefully you train yourself and then you can train your clients. That's where the interesting stuff happens.

**Dan Short** 25:06

Talking about some modest confidence. And so when you were talking about that space, it made me think of some research that there's many different. It's

not just one study that was done. It's been done many times, many different ways where they look at doctors, MDS, they look at therapists, they look at different people who have to exercise professional judgment and opinion, they look at how confident these individuals are, and how good they are, essentially, and then they measure the outcomes. And the consistent finding is that people who perform worse tend to have the highest opinions of themselves. So I know what to do with this one person, I have all the answers. I have it figured out from A to Z, and this is what will happen. And then, you know, then the person assumes that the therapist was exactly, the therapy was exactly what this person needed. So they're very confident they're the most confident in their outcomes, most confident that they know what to do. And when you look at the outcomes and measure them, they actually perform the worst.

**Stephen Gilligan** 26:01

I've heard Scott Miller say the same thing for sort of researchers.

**Dan Short** 26:04

Second worst is going to be the people who believe they're no good as a therapist, they have very low therapy self esteem. And the people that perform the highest, believe they have modest or moderate ability that they can do average good. And so there's sort of a modest confidence there and they tend to get the best outcomes.

**Stephen Gilligan** 26:25

The melody is endless. You know, so, yeah, it brings up a lot, you know, we have this this brief time here, but I think, you know, it, it goes to say that it's not just some mechanical technique. It's a way of, you know, again, I think you're looking in terms of any sort of creative development. You've got this

period of stability, where you can kind of do versions of what has worked before, but you're always come to these places, where what you've done before, won't allow you to go forward. And those are the times when people are coming to see us. You know, at these these sort of transitional spaces where I'm a different person, I'm divorced or married, or the kids have left home or got this illness or lost a job, or those are the places we know, are the statistically the most likely places where people develop medical and or psychological symptoms. So so they're in a place where their old self can't get the job done. And, and so we're not sure what the new self is going to be exactly. But I think what we can do as therapists is hold a container where we can keep a person connected in a good way to what their positive values are, what their competencies are, and then open this space where there's some sort of creative transformation that needs to occur. And I think that we are experts on how to hold that space in people. And then to invite them to listen to their own creativity not as the the singular thing, but as one element of the therapeutic conversation. And for me, you know, been been doing the the trance work for over 40 years. And Erickson, I think, evolved into this what in his last stage was calling the conversational approach. I do very short chunks. And I like to have the person's sort of cognitive conscious mind involved with a lot of reference to somatic felt sense, which I think keeps the mind body connection going. And then there are these places where they just need to like step back and turn it over to their other creative self, just in a small contained way. And you really want to make sure that especially if there's like trauma history that they don't they, they can't go too far astray. And then they dip in and you ask them what they learn. And, and that is teaching them. I need these little junctures where I don't know the best relationship to this part of my experience, but I can open this little space that I'll need to, where I can say, I, you know, what I say is teach me. You know, teach me. I need to learn some,

some new way of valuing. So, we can talk about a few other things, you know, a few other examples.

**Dan Short** 29:45

We've sort of reached the end of our time. But before we finish, what I really like to do is get at least one or two comments on you. We've been talking about shining the light of utilization on the client. Any room here or anything you want to say about you utilization of the therapist or the therapists own experiences or shortcomings or problem or any of that?

**Stephen Gilligan** 30:09

I believe, I mean, I think what made Erickson such an extraordinary person, this was something my other main mentor, Gregory Bateson would say, is that you are equally and observer and a participant. So everything that you're asking your clients to do you go first. And, and so you're you, you're modeling for them? A lot of different things. So it's not I'm focusing all on you, but I'm looking to connect with you there and allow what's happening to really show up in me. So a lot of times, I'll say, Wow, when I listen to that, this starts showing up in me. And I started feeling this and that, and I just find that interesting. And just wanted to share that with you. And I wonder what's happening for you. So we have this sort of conversation between all the stuff that's going on with me, which includes, you know, some, some not socially, like, front self stuff. You know,

**Dan Short** 31:21

I'm not trying to impress you by saying these things.

**Stephen Gilligan** 31:24

Yeah. There are things that might be, you know, stuff that you wouldn't normally talk about. I mean, there there is therapeutic boundaries that have to be respected, that really vary tremendously from client to client, you know, in therapy, we call this self disclosure. And it's quite a, quite a range. But I always think, if I'm going to ask you to share parts of yourself that are different from your social mask. I need to be willing to do that too. And to know that any genuine authentic therapeutic process requires that I do that first with myself.

**Dan Short** 32:07

Alright. Well, Steve, thank you very much. It's been very interesting.

**Stephen Gilligan** 32:12

Great. Thanks, Dan. And I really, I'm so grateful that you're doing this project because for many of us, you know, I've been a psychologist for decades. And this work has so deeply informed not only my professional work, but how I tried to live as a human being. And because of that Erickson legacy, where it's all sort of creatively unique, it's a little harder to really try to articulate this coherent underlying framework and I know that that's what you're trying to do this in this project. So to all of you I hope you can study it all because it is a such a humane generative approach the hope that you can become part of it too.