



The Milton H. Erickson Foundation NEWSLETTER

Vol. 24, No. 1

SPRING 2004

SM

Inside This Issue

INTERVIEW: <i>Ellyn Bader</i>	1
CONTRIBUTORS OF NOTE: <i>Maria Margarida Moreira</i> <i>Jorge de Carvalho, Ph.D.</i>	4
INTRODUCING THE INSTITUTES: <i>The MHE Institute of</i> <i>the Netherlands</i>	6
SPEAKING OF RESEARCH: <i>Early Hypnotic Research Roots</i>	7
THERAPEUTIC FRAMEWORK: <i>Nonverbal (Contextual)</i> <i>Implication</i>	10
HISTORICAL TIMES: <i>Lev Vygotsky, 1896-1934</i>	11
FACETS AND REFLECTIONS: <i>The Wonderfully Terrible Burden</i>	12

Visit Our Website:
www.erickson-foundation.org

I N T E R V I E W

Ellyn Bader

By Richard Landis PhD

*Dr. Ellyn Bader and her husband, Dr. Peter Pearson, are the directors of the Couples Institute in Menlo Park, CA. They are often considered to be among the leading experts in couples' therapy training in the world today. Dr. Bader spent eight years on the clinical faculty in the Department of Psychiatry at Stanford University School of Medicine. She and her husband are the authors of the classic *In Quest for the Mythical Mate: A Developmental Approach to Diagnosis and Treatment in Couples Therapy* and most recently, *Tell me No Lies*. While she was preparing for this spring's conference, *Challenging Couples, Challenging Therapists*, I spoke with Dr. Bader.*

Landis: In 1995, you and the Couples Institute cosponsored with the Erickson Foundation the "Integrating Sexuality and Intimacy" conference. What was it that stimulated you to connect with



the Foundation to produce such a thing?

Bader: It was a lot of things. First there's my passion for wanting people to get good training in the area of couples therapy. Also my own work had

a lot of emphasis in the area of differentiation, and I knew that there were a number of approaches that were focused more on attachment-related issues. I wanted to have a forum for those disparate orientations to be compared and contrasted. So we invited a number of experts to discuss their approaches.

Dr. Landis: You've always had a passion about working with groups. I found it interesting that you started out with larger groups and came down to focusing on couples.

Ellyn Bader: I started out being politically active, a community organizer, actually getting a degree in community psychology as well as clinical psychology. I worked with a lot of nonviolent, political organizing and with health clinics. And then I

See INTERVIEW on page 22

THE NINTH INTERNATIONAL CONGRESS: *A World of Unlimited Possibilities*

**25th Anniversary of
The Milton H. Erickson Foundation
Phoenix, Arizona - December 2004**

The Milton H. Erickson Foundation, Inc., is sponsoring the *Ninth International Congress on Ericksonian Approaches to Hypnosis and Psychotherapy: A World of Unlimited Possibilities*, December 1-5, 2004 (Wed-Sun), at the Hyatt Regency Phoenix in Phoenix, Ariz. The Ninth Congress celebrates the 25th Anniversary of the Milton H. Erickson Foundation, Inc.

The faculty includes: Abia, Andreas, Araoz, Baker, Barrettas, Battino, Bauer, Beaulieu, Beahrs, Bell-Gadsby, Burns, deShazer, Dilts, Dolan, Edgette, B.A. Erickson, Fisch, Flemons, Geary, Gilligan, Grodner, Greenleaf, Hammerschlag, Hartman, Havens, Hollander, Hoyt, Johnson, Kershaw, Klein, Kratochvil, Landis, S. Lankton, Lynn, Lorigo, Madanes, McLaughlin, McNeilly, Meggle, Miller, Mills, Munion, Nardone, Oster, Parsons-Fein, Phillips, Ray, Ritterman, Robles, Rosen, Rossi, Ruelas, Schwarz, Schefflin, Sherr, Short, Schmidt, Simpkins, Tamalonis, Trenkle, Wilson, Yapko, Zeig. Keynotes will be given by

See 9TH CONGRESS on page 13

RETURN SERVICE REQUESTED

U.S.A.
Phoenix, Arizona 85016
3606 N. 24th Street
The Milton H. Erickson Foundation, Inc.

Non-Profit org.
U.S. Postage Paid
Phoenix, Arizona
Permit No. 813

EDITOR'S COMMENTS

This March, The Milton H. Erickson Foundation is presenting "Challenging Couples Challenging Therapists - The Couples Conference" in Los Angeles, California. This conference will present the perspectives and experiences of some of the top couples' therapists in the world showing us how they look at challenging patients.

The difference between having a *challenging* patient versus having a *hopeless* patient depends more on the perspective and experience of the therapist than it does on the absolute nature of the patient's problems. The world of psychotherapy is made of a finite number of elements, not unlike Lego® pieces. The more elements we have, the more combinations of solutions and interventions we can make. The late Heinz von Foerster coined the term "Second Order Cybernetics" as the study of *OBSERVERS* of systems, which implied that the observers defined the systems. Therefore, how we define the patterns of a person's problem determines what elements we will choose to organize the solution.

This issue's theme is dedicated to presenting those elements that help us be successful with challenging patients. We start with an intimate interview with Ellyn Bader, one of the pivotal presenters at the upcoming Couples Conference. In the interview, Bader tells of some of the experiences that helped develop the lens through which she sees couples and how she sees them differently from working with individuals. Thought that lens, she identifies four major arenas that can impact change in a couple.

In the Theoretical Frameworks column, we asked Steve Andreas to present one of the important elements in working with challenging patients, Nonverbal (Contextual) Implication. Here, Steve elegantly encapsulates its definition, creation and utilization. There are many learnings in this article.

To further expand the therapeutic lens, Eugene Don introduces us to Lev Vygotsky, the Soviet psychologist in the Historical Times column.



Vygotsky worked with challenging children who had a variety of different mental and physical defects. He was known for "the formulation of a new theory of development of the anomalous child." Don furthers emphasizes how Vygotsky contributed to "the understanding of man and the complex system of functioning within a cultural contest..."

Rubin Battino looks at challenging conditions through a fascinating lens. In his contribution to the Case Reports column, he presents a wonderful case study on Guided Metaphor with a woman who had emetophobia (the fear of throwing up). For more detailed information on how he does the magic that he does, please check his recent book, *Metaphoria*.

I usually do not toot my own horn (that much), and I just loved the Facets and Reflections article working with Matt. I combined elements from Battino's *Metaphoria* and Andreas' recent articles on verbal (Vol. 23, No.1) and non-verbal implication (this issue) with a healthy dose of just me. I enjoy creating lenses for others.

This issue's reviews were chosen to provide information about resources that can add to those perspectives and elements.

Michele Weiner Davis, a presenter from the December 2003 San Francisco conference, contributes another lens for working with cou-

ples. Her newest book, "The Sex-Starved Marriage: A Couple's Guide to Boosting Their Marriage Libido" is reviewed by Deborah Beckman.

Alexander Simpkins and Annellen Simpkins present us with a weaving of two reviews and an article that provides a hypnotic tapestry with many lenses and challenges.

Simpkins and Simpkins set the background for the trilogy in their Historical Times column with "Early Hypnotic Research Roots." Here they present the cornerstones of modern hypnosis within which much of modern hypnosis is framed. They present the early assumptions and subsequent revelations about the effects of gender, susceptibility, nationality, intelligence, imagination, and the impact of skepticism.

Their next thread is the review of Michael Yapko's revised edition of *Trancework: An Introduction to the Practice of Clinical Hypnosis*. Simpkins and Simpkins show that Yapko's book is more than just an introduction. It is filled with many different elements and lenses, through which one can view a challenging client, including a section working with ways of viewing resistance that

can facilitate forward movement.

Finally, Simpkins and Simpkins present modern research and perspectives in the "Hypnosis International Monographs." This is a review of a three-part series that covers many articles including the special nature of treating conversion disorders, general trauma and the special challenges in using hypnosis and psychotherapy with HIV, ARC and AIDS patients.

To emphasize the process of continuing exploration, Will Handy presents Francine Shapiro's book, "EMDR as an Integrative Psychotherapy Approach: Experts of Diverse Orientations Explore the Paradigm Prism." This review was chosen for this issue because it is the quintessential example of defining a system through a myriad of lenses. Shapiro asked experts from many realms of therapy to look at EMDR from their specialty's perspective.

I hope to meet many of you at the Challenging Couples Challenging Therapists - The Couples Conference this March. We can have great fun exploring each other's lenses.

Rick Landis, Ph.D.
Laguna Niguel, CA

The Online version of **The Milton H. Erickson Foundation Newsletter** can be found at
<http://www.erickson-foundation.org/news>

The Milton H. Erickson Foundation NEWSLETTER

Executive Editor: Richard Landis, Ph.D.

Managing Editor: Sharon McLaughlin, M.A.

**Review Editors: C. Alexander Simpkins, Ph.D.,
Annellen Simpkins, Ph.D.**

Web Editor: Barry Grossman

Production Assistant: Karen Haviley

Guest Editors: Betty Alice Erickson, M.S., LPC, LMFT, Kathleen Donaghy, Ph.D. Institutes: Marilia Baker, M.S.W.

**Contributor of Note: Roxanna Erickson Klein, R.N., Ph.D.
Historical Times: Eugene Don**

Guest Reviewers: Michael Grusenmeyer, M.D., Deborah Beckman, M.S., LPC, Maria Escalante Cortina, Will Handy, LMSW-ACP

—Board of Directors—
Jeffrey K. Zeig, Ph.D.
Roxanna Erickson Klein, R.N., Ph.D.
J. Charles Theisen, M.A., M.B.A., J.D.
Camillo Loredio, M.D.
Bernhard Trenkle, Dipl.Psych.

The Milton H. Erickson Foundation, Inc.
3606 North 24th Street
Phoenix, Arizona 85016-6500
U.S.A.
Telephone: (602) 956-6196
FAX: (602) 956-0519

Visit Our Website:
www.erickson-foundation.org

9TH CONGRESS

C O N T R I B U T O R O F N O T E

***Maria Margarida Moreira
Jorge de Carvalho, Ph.D.***

Sao Paulo, Brazil

By Roxanna Erickson-Klein, RN,Ph.D.

Professor Dr. M. Margarida M. J. de Carvalho as she is known internationally, has a distinguished career not only in the history of psychology in Brazil but also as a pioneer and indefatigable innovator in the fields of Ericksonian hypnosis and psycho-oncology. Her unique distinction is to have been one of the founders of academic and clinical psychology in Brazil, in 1958, separating the disciplines from the Philosophy chair, and having the profession officially recognized as autonomous. The exponential effect of her actions in the above arenas has been phenomenal: For the past half century, Carvalho has influenced many generations of psychologists and health professionals. She was recently honored by the Federal Council of Psychology in Brazil through its Projeto Historia e Memoria em Psicologia and her contributions were immortalized through film and audiotape.

Her efforts at furthering Ericksonian approaches in hypnosis and psychotherapy throughout Brazil and the Americas have been numerous. For the past two decades, as a result of her clinical applications of Ericksonian hypnosis in cancer pain management and pain control, she contributed, along with esteemed colleagues, to the creation of the Cancer Support and Education Center (CORA), modeled after Maggie Creighton's program of the same name in Palo Alto, CA.

Carvalho established, in 1993, an innovative two-year graduate program in psycho-oncology at the Catholic University of Sao Paulo. This multi-disciplinary program, drawing from state-of-the-art academic and clinical research on the eti-

... "From that time on I plunged head-on into life, to study everything in depth, to commit myself to mitigate human suffering. I have never stopped since."

ology of pain, pain management, pain control, psychoneuroimmunology, the philosophy of hospice, the cancer patient and his/her family; Ericksonian epistemology and practice as well as those of physicians Carl Simonton and Gerald Epstein, has served as model for many others in Brazil and abroad.

From her privileged upbringing in the 1930's and 1940's in Sao Paulo, where she learned French, English, classical dance, painting, humanities and the classics, the young woman went to France, to an ebullient Paris of post-WWII seething with Jean Paul Sartre's Existentialism. She met for the first time, at 16, not only the philosopher but encountered very grave questions of the human existence: poverty, misery, famine, war, death, genocide, destruction. These years were a turning point for Carvalho: "From that time on I plunged head-on

into life, to study everything in depth, to commit myself to mitigate human suffering. I have never stopped since."

Margarida Carvalho learned about Milton H. Erickson through a Chilean colleague, Joyce Riveros, in California, and has attended assiduously the Erickson meetings and the Evolution of Psychotherapy conferences since the early 80's. She brought back to Brazil and vigorously disseminated all she learned with Jeffrey Zeig, Ernest Rossi, Stephen Gilligan, Kay Thompson, Joseph Barber and others. The late David B. Cheek, M.D., Fellow and Past President of the American Society of Clinical Hypnosis, was a dear friend and mentor for many years. In the early 1990's at the invitation of Stanley Krippner, Ph.D., recipient of the 2002 American Psychological Association Award for Distinguished Contributions to Professional Hypnosis, Carvalho developed several teaching and research projects, both in Brazil and the U.S. She lectured on "Trance in Psychotherapy and in Afro-Brazilian Religions" in Berkeley, Palo Alto, San Francisco and New York.

From her research on native Brazilian healing practices she wrote several articles, including "A Healing Journey in Brazil: A case study in Spiritual Surgery," and "An Eclectic Approach to Group Healing in Sao Paulo, Brazil: A Pilot Study," both published in England in the Journal of the Society for Psychical Research, (Vol. 60, n.838, January 1995 and Vol. 61, n.845, Oct. 1996, respectively).

Dr. Carvalho has a busy private practice, is frequently teaching and presenting. She is the author and editor of six seminal books in Portuguese, mostly on psycho-oncology, as well as author of numerous articles. She is a Founding Director of the first Milton H. Erickson Institute in Brazil (1995), having facilitated highly-in-demand Ericksonian study circles for a decade before then.

M. Margarida M.J. de Carvalho was inducted, in 1993, as a member of the prestigious Sao Paulo Academy of Psychology, occupying the distinguished Roger Bastide Chair. She is recognized in this report for her lifelong commitment to alleviate human suffering and for her extensive, in-depth contributions to the fostering of hypnosis and psychotherapy in Brazil and Latin America.

DALLAS INSTITUTE

You know exactly the one I'm talking about. On the mornings of their appointments, you look in the book, remember they are coming in, and you cringe. You even hope they don't show up. And then you feel guilty for hoping they don't show up. Which still doesn't stop you from hoping they don't show up...

When you see them walking up the sidewalk, you feel an anxious churning in your stomach. You hate them. You feel inadequate. You start to hate yourself.

The Issue...

You have two people who don't want to listen to each other. Each one is convinced that the only thing that needs to happen is that you should "fix" their partner. Each one has a death grip on blame, whining, and withdrawal. They show up each week, highly emotionally distressed, fixated upon the problem of the day, and the fight of the week.

Things that work with other couples don't work with them. In fact, even your best efforts are met with nothing more than resentful compliance. The situation is confusing, and out of control.

The Challenge...

You aren't sure whether you should be seeing one partner alone, or working with the couple. You're not quite certain how to balance family of origin issues, intra-psychic conflicts, and the dynamics of the relationship. There are internal conflicts posing as interpersonal problems.

One or both partners have unrelenting negative projections. The rage is palpable, and each partner personalizes everything, and reacts by attacking the other. Often, in the early sessions, inadvertently you are asked to collude with one partner's unrealistic expectations. If you get sucked into this, it's next to impossible to extract yourself later.

If this scenario sounds familiar to you, you are not alone. Thousands of therapists around the world struggle mightily in situations like this. Getting and sustaining positive momentum in couples therapy is not always easy to do, especially with highly emotionally distressed partners. Most therapists are passive and reactive in these situations, getting taken along on the stomach-churning ride. To break through this negative pattern, you have to take a leadership role, and control the therapy to create real change.

The Couple from Hell...

The Solution...

Perhaps no one is better equipped to handle highly volatile couples than Doctors Eilyn Bader and Peter Pearson. They have made a career of reviving dead and explosive marriages. They are the co-founders of the Couples Institute in Menlo Park, California, and are recognized worldwide as the pioneer developers of the Developmental Model of Couples Therapy.

Now they have developed a new resource to help you create success with couples like these. Titled *High Impact Couples Therapy*, this five-CD audio program comes with a follow-

along workbook. It will show you how to get both partners aligned, working toward the same collaborative outcome.

You have to have multiple ways not to react to the problem of the day or the fight of the week. *High Impact Couples Therapy* will help you do just that. You will discover how to create a context for change that includes:

- Illuminating the partners' vision;
- Changing the process for discussing highly charged issues;
- Managing internal reactivity and intra-psychic conflicts; and
- Creating true collaboration between the partners and you.

The result is that you have a structure for your interventions and your clients change faster, with less conflict and greater positive momentum.

A critical component of success is how you position yourself in the early interviews. There you set the tone, establish your credibility, define expectations, and create hope. Partners are quietly testing you to see whether you are strong enough to shift their repetitive negative patterns.

Once you study *High Impact Couples Therapy*, you will discover how to direct the process, control the negative emotions, and foster real progress with your most problematic couples.

Just one listen through the program and you will be able to:

- Jumpstart the therapy before the couple even arrives for the first interview;
- Recognize and implement the five essential tasks during the first interview;
- Shift couples away from destructive/blaming cycles and into positive outcomes;
- Give couples guidelines for getting the most from therapy with you; and
- Define yourself to facilitate real, positive change.

If you would like to purchase this powerful new resource, or want more details, call toll free 1-877-327-5915 or go to HighImpactCouplesTherapy.com



INTRODUCING THE INSTITUTES

The MHE Institute of the Netherlands

Interviewed by Marilia Baker, MSW

Email: info@bennikstrainingen.com

Website: www.bennikstrainingen.com

The MHE Institute of the Netherlands was established in early 2003 and has already undertaken a great deal of activities: training, international guest speakers, an online newsletter with several sections, online memorandums to interested professionals and a recently launched

merce, north of Amsterdam and Haarlem. The *Instituut* reaches both the domestic professional communities and other European countries.

Founding director, psychologist Hans Benniks, reports his first acquaintance with hypnosis started with a course by a local dentist in 1985. "The dentist told me that Ericksonian Hypnosis was too difficult to learn and told me to stay away from it. Now, that was a wrong suggestion... for it made me very curious!" He started reading books on the subject and his interest grew with



Intermediate Hypnosis Course at the Institute

journal, "The Dutch Magazine of Ericksonian Psychotherapy." This magazine features articles on Ericksonian and Solution-Focused Therapy, case discussions, book reviews, and news on training seminars.

time even more, applying some techniques with his patients. "The more I read, the more I wanted to know." Benniks has read "all the books about Erickson" including those by Rossi, Zeig, Lankton, and Yapko. He also has studied materials on Solution-

He also has studied materials on Solution-Focused Therapy, with which insurance companies in The Netherlands are very pleased because of its efficacy and cost containment.

The founding directors and board members are: Hans Benniks, Ph.D., Paula Goossens, Ph.D., Peter Breukers, Ph.D., and Pascal Romkens, Ph.D. The *Instituut* is located in the town of Alkmaar, a vibrant center for trade and com-

merce, north of Amsterdam and Haarlem. The *Instituut* reaches both the domestic professional communities and other European countries.

Founding director, psychologist Hans Benniks, reports his first acquaintance with hypnosis started with a course by a local dentist in 1985. "The dentist told me that Ericksonian Hypnosis was too difficult to learn and told me to stay away from it. Now, that was a wrong suggestion... for it made me very curious!" He started reading books on the subject and his interest grew with



Hans Benniks, Ph.D. and Pascal Römken, Ph.D.

there were so many Institutes around the world and none in the The Netherlands. He contacted colleagues and went into action: two years later the documents were submitted for The Netherlands *Instituut*. Complementing their activities at the *Instituut*, all directors have a private practice seeing a broad range of patients with diverse disorders. In addition:

a) Paula Goossens, coach and trainer, has a specialty certification in Solution Focused Therapy by the Korzybski Instituut in Belgium, under the direction of Louis Caufmann and Luc Isebaert. She works with nonassertive patients helping them to become more assertive. b) Peter Breukers is certified by the Dutch Institute for Solution Focused Therapy (NIKTO), a network across the country of academic therapists; he specializes in relationship therapy, attending couples, families and groups. c) Pascal Romkens is a clinician at the psychological division of a General Hospital in the region, and sees inpatients with a broad range of disorders. c) Hans Benniks is coach and trainer, specializing on job, career and work relations, especially with lawyers.

As part of the *Instituut*'s commitment to excellence in training, international guest Michael Yapko gave a well-attended, successful, two-day

workshop in September 2003, on "Applying Hypnosis in Strategic Psychotherapy: Addressing Issues of False Memory, Skills for Treating Depression, and Doing Effective Therapy Hypnotically." A mini-symposium with board members, Benniks and Breukers, and clinicians Drs. C. Menko, R. Overtoom, and C. Welink, has addressed, among other subjects: Ericksonian epistemology, Ericksonian psychotherapy, Brief Solution-Focused Therapy, Hypnosis and the treatment of Irritable Colon, Hypnosis and self-confrontation methods. There will be two other symposia in 2004 and Stephen Gilligan is scheduled to present in 2005. Four issues of the Newsletter have been produced with several sections: local and international training, workshops, news brief, book reviews, CD's and DVD's, literature, and guest speakers.

The Ericksonian community welcomes the MHEI of the Netherlands and wishes much success in all its endeavors.

ATTENTION INSTITUTES

SPEAKING OF RESEARCH

Early Hypnotic Research Roots

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

*Returning to the Root,
we get the essence. (Zen Saying)*

As modern professionals, we pride ourselves on our state-of-the-art research methods. But when we look back in the history of hypnosis research, we find some of the foundations for our modern understandings.

One of the largest hypnosis studies ever done took place in the late nineteenth century. Most of the hypnosis researchers of the period around the world collaborated together to gather statistics on hypnotic susceptibility. They published the results as "The First International Statistics of Susceptibility to Hypnosis in 1892." (Bramwell, 1903) The data was based on 8705 hypnotized subjects from fifteen different countries. Each participating hypnotist kept track of his results with trance phenomena and induction, and these statistics were correlated. Some of the participants are well known, such as Liebeault, Bramwell, Forel, and Bernheim.

Hilgard combined the statistics reported by Bramwell (1903) along with two other large studies by Loewenfeld (1901) and Schmidkunz (1894) done at this

time for a total of 19, 534 subjects. (Hilgard 1965,) He compiled the following results from these studies: nine percent were unresponsive, twenty-nine percent produced light trances, thirty-six percent showed moderate trances and twenty-six percent went into a deep, somnambulistic trance. These findings clearly indicated that most of the population is responsive to hypnosis, with more than half being able to produce moderate to deep trances with corresponding phenomena.

The nineteenth century researchers also recorded factors that influenced this responsiveness. They noted no influence of nationality across many different countries. For example, some of the researchers had expected that the French would be more susceptible than other nationalities, but subjects in Sweden, Germany, England, Scotland, India, and South Australia were not different from the French in their trance abilities. All participating nations had comparable results.

The misconception regarding differences between men and women was also corrected. At first the researchers believed in the old-fashioned stereotype that women were the 'weaker sex,' and therefore expected them to be more susceptible. Of course they found no such distinction: men and women were equally hypnotizable. For example, Liebeault found that soldiers and sailors, who were usually male, were just as easily hypnotized as his female subjects.

*...Liebeault found that soldiers and sailors,
who were usually male, were just as
easily hypnotized as his female subjects.*

See RESEARCH on page 13

Pioneers of PSYCHOTHERAPY

Have you ever wished you could watch the most celebrated practitioners of our time as they conduct therapy?
Now you can!



Learn more about this exciting collection • www.erickson-foundation.org/pioneers • phone: (602) 956-6196 • fax: (602) 956-0519

1ST HALF - BTC TAPES

2ND HALF - BTC TAPES

T H E R A P E U T I C F R A M E W O R K S

Nonverbal (Contextual) Implication

Steve Andreas, M.A.

Nonverbal implication works by creating a *nonverbal context* that elicits the desired response. Here are a few examples of some different ways Erickson used them in his work.

With several women who were incontinent due to physical reasons, he put them into trance, and then had them experience sitting on the toilet urinating, and then imagine the bathroom door opening and a strange man's face appearing ("Strange man" is a context for not urinating, eliciting an autonomic response of constriction).

A woman was in intractable pain due to inoperable cancer, and drugs and surgery had not helped. After considerable pacing, Erickson asked her, "Now tell me, madam, if you saw a hungry tiger in the next room, slowly walking into the room and eyeing you hungrily and licking its chops, how much pain would you feel?" (Extreme danger is a context for not feeling pain.)

A mother always spoke up and answered for her anorexic daughter when Erickson asked the daughter questions. Erickson told the mother to get out her lipstick and hold it very close to her lips and notice how her lips tended to move when he asked the daughter questions. (Putting on lipstick is a context in which the lips are kept motionless--and therefore unable to speak.)

Contextual implication is a factor in *every* moment of therapy; since the therapist's office, clothing, and especially nonverbal behavior--speech, pauses, tonal patterns, posture, gestures, etc. -- *all* provide a context for the meaning of what the therapist says. For example, a "horribly fat girl," prudent and prudish, consulted Erickson stating that even after she lost weight she would still be about the ugliest girl in all creation. In the first session, Erickson spent most of his time handling and looking at a paperweight, glancing up at her occasionally. At the end of the session he said to her. "I hope you'll forgive me for what I have done. I haven't faced you. I know it's rude. I've played with this paperweight; it's been rather difficult to look at you. I'd rather not tell you, but since it's a psychotherapeutic situation, I really ought to tell you. Perhaps you can find the explanation. But actually I have the very strong feeling that when you get reduced, at least everything I see about you, that's why I keep avoiding looking at you, indicates that when you get reduced you will be even more sexually attractive, which is something that should not be discussed between you and me."* (She is sexually attractive--nonverbal implication supported by verbal presupposition.) Since in the context of therapy, Erickson shouldn't notice or talk about her sexual attractiveness, the fact that he did, along with his rudeness in not looking at her, playing with a paperweight instead, etc. all imply the truth of what he says.

Nonverbal Implication

1. Is provided by the *nonverbal context*, or some element(s) of it.
2. This context can be either real, or imagined/hallucinated, but it must be *compelling*.
3. The context *elicits* the desired response or understanding.
4. Is what Erickson often described as, "What you know, but you don't know that you know"--a dependable involuntary response to a specific context that you aren't consciously aware of.

Creating Nonverbal Implication (Algorithm)

1. Select the *response/outcome* that you want to elicit in the client.
2. Find a *context* that would naturally and powerfully elicit that response/outcome.
3. *Create* that context, either:

- a. Vividly and compellingly in imagination (in or out of trance).
- b. By "tasking," instructing the client to do a certain set of actions in the specified context in the real world.
- c. Behaviorally, by your own actions in the present.

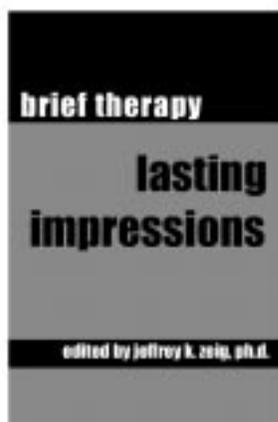
There is yet another aspect of implication, how to create *intensity* of response to an implication through *drama* or *suspense*. Let's take another look at the last example. Erickson apologizes for not looking at her, which she will certainly interpret as a response to her ugliness. He then follows with *five* more statements that she will surely interpret in the same way--each of which will confirm and intensify her unpleasant response. Then he suggests that she do what she is already doing, "Perhaps you can find the explanation," confirming her interpretation yet again, followed by a meandering sentence with five more phrases that seem to confirm her ugliness. Only after this build-up and suspense does he deliver his alternate explanation, which offers her a surprising, and much more pleasing, way to reinterpret the entire situation.

If Erickson had said something about her being sexually attractive without this hour-long nonverbal build-up and suspense, it would have had limited impact, and would probably be understood as yet another confirmation of

her ugliness: "Oh, he's just trying to make me feel better because I'm so ugly." How to create this kind of *intensity* of response will be the topic of a subsequent article.

**Conversations with Milton H. Erickson, Vol. III*, by Jay Haley, pp.18-21

New from the Milton H. Erickson Foundation Press



brief therapy: lasting impressions

Edited by Jeffrey K. Zeig, Ph.D.

Brief Therapy brings together an international collection of experts in this rapidly growing field. A wide variety of topics are addressed in the areas of principles and practice, contemporary perspectives, therapeutic approaches and more. This is an essential resource for today's practitioner.

2002 About 400 pages
Hardcover
List Price: \$44.95
ISBN: 0-9716190-4-2

Foundation Press
Ordering Information

www.erickson-foundation.org/press
Phone: 602-956-6196
Fax: 602-956-0519

ADVANCE ACCLAIM

"This inclusive and up-to-date compendium by renowned experts presents a wealth of clinical knowledge that will inform and advance the practice of brief therapy for both experienced and novice practitioners. Highly recommended."

Arnold A. Lazarus, Ph.D.

Author of *Brief But Comprehensive Psychotherapy: The Multimodal Way*

"Brief Therapy is *de rigueur* in the practice of contemporary psychotherapy. Learn from some of the best in the field and improve your effectiveness. Required reading for the tyro, for the expert, for the professor...for you!"

Cloe Madanes

Executive Director, The Robbins-Madanes Center for Strategic Intervention

Lev Vygotsky, 1896-1934

Written by Eugene Don, Psych.,
Dnepropetrovsk, Ukraine

If you would like to study Soviet psychology I would advise you to begin with four leaders: Vygotsky, Rubinshtein, Leontev and Luria. This article is dedicated to Lev Vygotsky (1896-1934).

An outstanding soviet psychologist, Lev Vygotsky is known for his work pertaining to growth and development, and particularly with developmental delays. He conceptualized ideas about history and culture that he studied in regard to their association to the higher psychical functioning of individuals within society.

Raised in Gomel, Russia, in a large family that was keen on literature and philosophy, he was one of several in the family who have developed a reputation in the field of philosophy. Lev Vygotsky's own favorite philosopher was Benedict Spinoza. Exceptionally gifted in many subjects, he was educated at home until his last two years of high school where he learned German, French, Latin, English, Greek and Hebrew. During the First World War he studied at Moscow University at the law faculty.

Returning to Gomel from Moscow, he began research work on psychology. In 1922 and 1923 he presented five research studies at the second All-Russian Congress on Psycho-Neurology. In 1924, with a recommendation of another young gifted psychologist, Luria, he was invited to the Moscow University of Psychology where he was able to major in psychology and continue his own research studies simultaneously.

There, he began to build a model of behavior that is based on a conception of speech (voice) reaction. The model correlated behavior and conscious decision making with cultural elements. It described the intersection of language and art.

Also, in Moscow, he began to work with children who had a variety of different mental and physical defects. This action laid the foundation for needed services; Vygotsky became the scientific director an institute that is still in operation today. In this period, he formulated new theory of development of the anomalous child.

With his extensive language abilities, he was able to study leading works in world psychology, seeking to develop a new view of psychical regulation. He wrote many prefaces to the Russian translations of acclaimed works of psychoanalysis, behaviorism, and gestalt psychology.

In 1920, he was stricken with tuberculosis and in 1926, he went through a time of severe debility, inspiring him in a new direction of research, "the meaning of psychological crisis." Rejecting the traditional didactic scheme of "stimulus-response" he interjected a "sign" and brought about a scheme of "stimulus-stimulus-response." With the "sign" intermediary between stimulus and reaction, an entire array of functions is elicited in man. Thanks to his work in this area, we have gained much in the understanding of man and the complex system of functioning within a cultural context, and the emergence of a higher level of socio-cultural order. Lev Vygotsky referred to this as "higher psychical function."

In last period of his creative work, he researched the correlation of thought and speech, development, and its significances in the nature of being and egocentrism. He brought forth the concept of zones of proximal development that characterize a process of refinement of psychical development following teaching. The developmental zone is determined by evaluating a task that child can solve with helping of adult. After this experience of joint action, the child becomes able to independently solve a similar task. His explorations in this area are addressed in his work *Thought and Speech* (1934).

The main thesis of his cultural and historical theory is that the base of psychical development within man is brought about through a combination of changes. These include social situations, physiology, teaching and education, and man's own performance in society. Vygotsky taught that through interactions, conversation and joint actions, one learns not only a pattern of social behavior but also forms a basis of psychological structure that determines the

future tendency of all of psychical processes.

One of the greatest leaders in soviet thinking, Lev Vygotsky continues to have a major influence in the manner in which psychology is taught in this part of the world today.

References (in Russian):

http://www.voppsy.ru/journals_all/issues/1996/966/966118.htm

<http://psi.webzone.ru/st/133300.htm>

<http://www.nsk.vspu.ac.ru/person/vygot.html>

http://www.psychology.ru/whoswho/Lev_Vygotsky.stm

For more information in English: www.massey.ac.nz/~alock/virtual/trishvyg.htm

Phoenix Institute of Ericksonian Therapy

The Milton H. Erickson Foundation proudly introduces the Phoenix Institute of Ericksonian Therapy. The Phoenix Institute will offer training workshops, therapy with adult and child clients, and clinical supervision for the Phoenix, Sedona and Tucson areas. The Executive Director is Stephen Lankton, MSW, DAHB (P.O. Box 9489, Phoenix, AZ 85068; E-mail, steve@lankton.com), with Co-Directors Joyce Mills, Ph.D. (6609 N. Scottsdale Rd., Bldg. G-103, Scottsdale, AZ 85250; E-mail, drjoyce@drjoycemills.com) and Kathleen Donaghy, Ph.D. (P.O. Box 9489, Phoenix, AZ 85068; E-mail, kathleen@donaghyconsulting.com).

For more information on the activities of the new Phoenix Institute of Ericksonian Therapy contact: Tel, 602-532-0800 or 602-923-2704; Web, www.phxinstitute.com

Evolution of Psychotherapy IV: A Meeting of
the Minds

PLEASE PULL
FROM LAST
ISSUE:

Page 11 - Bottom left

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

The Wonderfully Terrible Burden

By Richard Landis, Ph.D.

A common theme that I remember Erickson discussing during our time together was his fascination with how the unconscious was able to use current events and experiences to conjure past learnings.

I experienced this first hand dur-

that story Erickson told the daughter that she was about to reach a milestone in her life, her eighth birthday. Erickson instructed the daughter to enjoy sucking her thumb and to memorize it because after her eighth birthday, she will have passed the age of thumb-sucking and move onto more interesting things that are more appropriate for an eight year old. By giving the instructions in the presence of the parents, Erickson was indirectly challenging the parents' assump-

tinued, "Matthew, in returning to the fourth grade, you will be going through this change before others in your class do. This means that your classmates will naturally want to look up to you as a role model. It will be as though you are the older brother that leads the way, showing the younger brothers how to do it right. While you will have the advantage of being familiar with what your teacher is presenting, your mind will be different and you will have to learn it 'brand new' as an eleven-year-old who has had the brain-change."

"Before you turn eleven, I want you to memorize how it feels to not want to do homework and to not be particularly interested in learning. You need to remember how this felt so you can let your classmates know that you understand how some of them might feel. You used to feel that way yourself before you had the brain-change."

I continued for twenty-five min-

utes, repeating the same message in many different permutations. Within the first ten minutes, Matt and his parents were in a comfortable trance state, hearing future-pictures described of Matt moving forward on his own.

That was the last session I had with Matt. His father called to cancel the next session because Matt "discovered" that he got his "brain-change" early, and started taking an interest in schoolwork. They no longer needed my services.

I met the parents two years later for some couple counseling. They reported that Matt had been successful academically and socially in both the fourth and now in the fifth grade. The parents said that they wished that they had known about the brain-change earlier so they would not have had to work so hard to get him to do his work.

I had to take it easy since both parents had a history of taking their son out of therapy if the therapist demanded that the parents change.

ing my second session with Matt, a ten-year-old boy, and his parents. Matt, an only child was going to have to redo the fourth grade because of poor grades. Matt had felt like an outsider in the fourth grade and had no motivation to do school work. The thought of repeating the fourth grade again after "flunking" made him feel even less motivated. His parent tried "everything." Unfortunately, each parent felt that his or her strategy-of-choice had been good enough to motivate each of him or her as a child, so it should motivate Matt. Their unyielding assumption was that if their strategy did not work, the problem was in Matt, not the appropriateness of the strategy. To adapt a key concept from Ellyn Bader's work with couples: "A lot of times, [parents] are so invested in the *other* person changing that they don't want to look at themselves." I had to take it easy since both parents had a history of taking their son out of therapy if the therapist demanded that the parents change.

It was during the second session that I remembered how Erickson would talk to us as a group when he wanted to avoid triggering a specific person's self-protections. In that memory, I heard Erickson tell us his classic story about the parents who could not stop their seven-year-old daughter from sucking her thumb. In

tions that they had to change the daughter. Change was a natural part of life. If you let it, the mind moves forward by itself. And at the same time, the communication to the daughter affirmed that the parents were not the targets of change. (For a verbatim account of this story, see Zeig, J., *A Teaching Seminar With Milton H. Erickson*, Brunner/Mazel, NY, 1980.)

With echoes of Erickson's words in my head, I addressed Matt, "I am so very glad that your parents brought you in to see me at this time. If they had waited until your eleventh birthday in six weeks, you would have taken care of the problem yourself and I would not have been able to get any of the credit."

I told Matt about the significant brain changes that naturally occur as we grow. "One of the most significant changes occurs at the age of eleven when the nerve connections between the right and left sides of your brain become insulated. Nerve signals move quicker and more effectively. At that time, we are better able to see old things with new eyes. And along with this wonderful gift comes a terrible burden. [Long dramatic pause]."

I remembered that Matt had said that he had longed for a younger brother so he could "show him how it was done." With that in mind, I con-

ADVERTISE
HERE

Intelligent, imaginative subjects were more capable with hypnosis than duller, unimaginative ones. People who were mentally passive with poor concentration abilities were not as easily hypnotized as subjects who could direct their attention at will. This distinction helped further to dispel the myth that hypnosis was for the weak-minded.

The researchers did find different susceptibilities at different ages. Children were more readily able to respond than adults. Most children between the ages of three to fifteen years could readily experience trance phenomena. Once of

Hypnotic effects occurred in a majority of subjects no matter what method was used, just as Erickson often taught.

adult age, responsiveness remained fairly steady up to sixty-three years, when susceptibility dropped slightly.

Another interesting finding was subjects who firmly believed that they would be hypnotized did not respond any more strongly than those who were skeptical. These results helped to dispel the assumption that faith was a necessary component. For example, Forel found that people who laughed at the process and considered hypnotized people imposters were often quickly hypnotized without realizing what was happening, a finding which Erickson corroborated many times over!

The sheer magnitude of these early hypnosis studies lends credibility to the findings. However, there were serious problems in the research methods. Even though the nineteenth century researchers collected large numbers of observations of hypnotic phenomenon, they lacked standardization in their induction methods. The same hypnotic technique meant different things to different hypnotists. For example, one researcher gave suggestions forcefully as a command while another offered suggestions gently as a subtle inference. Some made suggestions strictly verbally while other used nonverbal means of suggestion such as touching the subject. We now know that keeping all the independent variables constant gives more reliable results.

These early hypnosis studies show that hypnotic phenomena are not just a product of a particular theory or approach to hypnosis. Hypnotic effects occurred in a majority of subjects no matter what method was used, just as Erickson often taught. Clearly the phenomena of hypnosis are robust. These nineteenth century researchers gave us an early form of a macro-study. From such enduring roots, modern hypnosis research has evolved and flourished.

Bramwell, J. Milne. 1903. *Hypnotism: Its History, Practice, and Theory*. London: Grant Richards.

Hilgard, Ernest L. 1965. *Hypnotic Susceptibility*. New York: Harcourt, Brace & World, Inc.

9TH CONGRESS *continued from page 1*

Stephen Gilligan, Cloé Madanes, Ernest Rossi, and Jeffrey Zeig.

The Congress will consist of two and three-hour workshops, interactive events, and keynote addresses. In addition, an 18-hour course in Fundamental Ericksonian Hypnotherapy will run concurrently with the Congress with presentations by B.A. Erickson, Gilligan, S. Lankton, Rossi, Yapko, and Zeig.

The Congress also will feature Solicited Short Courses by members of our 112 National and International Erickson Institutes and other Ericksonian professionals.

PRE-CONGRESS WORKSHOP!

Wednesday, December 1, 2004 - PROFESSIONAL RESOURCES DAY

Free with full-Congress registration! Learn valuable tips to improve yourself and your practice from our experts including a special guest appearance by Anthony Robbins. Topics will include practice and Institutes building, personal development, coaching, publishing, and organizing.

SPECIAL REGISTRATION FEE FOR NEWSLETTER READERS!

See the registration form on page ___ offering the lowest registration discount available (deadline May 12, 2004). The full brochure will be available in May. To receive the brochure when it is available or for more information contact The Milton H. Erickson Foundation, Inc., 3606 N. 24th Street, Phoenix, AZ 85016-6500; Tel, 602-956-6196; Fax, 602-956-0519; E-mail, mhefvol@aol.com. Be sure to include your complete mailing address with your request. Visit the Congress Web Site for the latest information: www.erickson-foundation.org/intlcong.htm

Come celebrate 25 years of the Erickson Foundation and discover a *World of Unlimited Possibilities!*

EMDR

The Online version of
**The Milton H. Erickson
Foundation Newsletter**

can be found at

<http://www.erickson-foundation.org/news>

UPCOMING TRAINING

DATE	TITLE / LOCATION / LEADER	CONTACTS	DATE	TITLE / LOCATION / LEADER	CONTACTS
2004					
4/30-5/2	Intermediate Hypnosis Workshop / New York, NY / Jeffrey K. Zeig, Ph.D.	1.	7/31-8/3	Master Class - Intensive Supervision Workshop in Ericksonian Clinical Hypnotherapy / New York, NY / Zeig	3.
5/13-14	Anxiety and Depression / Nova Scotia, Canada / Zeig	2.	8/2-6	Intensive Training in Ericksonian Approaches to Brief Hypnotic Psychotherapy - <i>Intermediate</i> / Phoenix, Ariz. / Geary, Zeig, and Invited Presenters	10.
5/15-18	Master Class - Intensive Supervision Workshop in Ericksonian Clinical Hypnotherapy / New York, NY / Zeig	3.	8/9-13	Intensive Training in Ericksonian Approaches to Brief Hypnotic Psychotherapy - <i>Advanced</i> / Phoenix, Ariz. / Geary, Zeig, and Invited Presenters	10.
5/21-23	Challenging Critical Inner Voices: Applications of Voice Therapy in your Clinical Practice / Santa Barbara, Calif. / Joyce Catlett, M.A., Lisa Firestone, Ph.D. (12.0 CE Credits)	4.	8/25-29	Ericksonian Hypnotherapy - Supervision (ongoing) / Guadalajara, Mexico / Zeig	5.
5/26-30	Ericksonian Hypnotherapy - Supervision (ongoing) / Guadalajara, Mexico / Zeig	5.	10/25-29	Intensive Training in Ericksonian Approaches to Brief Hypnotic Psychotherapy - <i>Fundamental</i> / Phoenix, Ariz. / Geary, Zeig, and Invited Presenters	10.
6/21-25	Master Class - Hypnosis Supervision / Madrid, Spain / Zeig	6.	11/1-5	Intensive Training in Ericksonian Approaches to Brief Hypnotic Psychotherapy - <i>Intermediate</i> / Phoenix, Ariz. / Geary, Zeig, and Invited Presenters	10.
7/5-8/7	Intensive Training on Ericksonian Psychotherapy [Spanish] (Credits for Masters on Ericksonian Psychotherapy) / Mexico City, Mexico / Invited Faculty	7.	12/1-5	Ninth International Congress on Ericksonian Approaches to Hypnosis and Psychotherapy - 25th Anniversary of the Erickson Foundation / Phoenix, Ariz. / Invited Faculty	10.
7/10-11	Training Trainers / Rio de Janeiro, Brazil / Zeig	8.			
7/17-18	Ericksonian Psychotherapy / Belo Horizonte, Brazil / Zeig	9.			
7/26-30	Intensive Training in Ericksonian Approaches to Brief Hypnotic Psychotherapy - <i>Fundamental</i> / Phoenix, Ariz. / Brent B. Geary, Ph.D., Zeig, and Invited Presenters	10.			

see Contact Information on next page

MHE INTENSIVES

Contact Information:

1. Susan Pinco; E-mail, SAP64@Columbia.edu
2. E-mail, Louise.Ghiz@dal.ca
3. Helen Adrienne; E-mail, HAMSW@aol.com ; Tel, 212/758-0125
4. Jina Carvalho, The Glendon Association; E-mail, Jina@glendon.org ; Tel, 800/663-5281, ext.29; Web, www.glendon.org
5. Juan Francisco Ramirez Martinez; E-mail, juan_francisco@mac.com
6. E-mail, Teresa.Chi@mailcity.com
7. Centro Ericksoniano de Mexico; Patricio Sanz 1205 Col. Del Valle, C.P. 03100 Mexico D.F.; Tel, (0052) 9116 0606, (0052) 9116 0607; E-mail, erickmex@hipnosis.com.mx ; Web, www.hipnosis.com.mx
8. E-mail, jairo@pnl.med.br
9. Angela Mendonca; E-mail, institut@miltonerickson-bh.psc.br
10. The Milton H. Erickson Foundation, Inc., 3606 N. 24th Street, Phoenix, AZ 85016-6500; Toll-free tel, 1-877-212-6678; tel, 602/956-6196; fax, 602/956-0519; E-mail, office@erickson-foundation.org ; <http://www.erickson-foundation.org>

To submit a listing for Upcoming Trainings, please send dates, title of workshop, venue, city/state/country, list of presenters, and complete contact information ONLY. Information must be sent in the format above. A \$10 fee, per listing, is required. Deadline for the 2004 Summer Issue (July/August) is May 15, 2004. All workshop submissions are subject to approval by the Erickson Foundation. For more information, please contact the Erickson Foundation at 602/956-6196; or E-mail Production Assistant, Karen Haviley, karen@erickson-foundation.org.

WEB News!

THE MILTON H. ERICKSON FOUNDATION PRESS

The Milton H. Erickson Foundation, Inc., has more than 20 years of experience in providing internationally recognized training programs for mental health providers. The Milton H. Erickson Foundation Press is now offering a variety of published resources in the fields of brief therapy and hypnosis. Offering a veritable library of printed, audio, video and CD resources.

www.erickson-foundation.org/press

To view the complete catalog of available resources:

www.erickson-foundation.org/press/catalog.htm

ONLINE NEWSLETTER

The Online version of *The Milton H. Erickson Foundation Newsletter* can be found at <http://www.erickson-foundation.org/news>

NEW! Download the Foundation Newsletter to Palm Pilot or Pocket PC!

Too busy to read the Newsletter at your computer? You can now download each issue to a hand held PC to read at your convenience. All files are formatted for iSilo. For more information visit our web site:

www.erickson-foundation.org/news/archives.htm

JOIN THE ERICKSON LISTSERV!

This Internet discussion group addresses Ericksonian approaches to hypnosis and psychotherapy. Additionally, list members have access to a web site featuring papers, photographs, and a matching service for workshop presenters and those in need of training.

TO SUBSCRIBE:

<http://www.topica.com/lists/EricksonList>

Or send a BLANK e-mail to: EricksonList-subscribe@topica.com

CONFERENCE 2005

LANKTON

CONFERENCE NOTES

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

The 11th Biennial Conference of the North American Personal Construct Network: *Constructivism 3-D: Diversity, Development & Dialogue*, will be held June 16-21, 2004, at the University of Memphis, Memphis, Tenn. The Conference is an interdisciplinary forum for constructivist, social constructionist, narrative and post-modern practitioners to exchange ideas in the context of a congenial and collegial professional conference. Faculty will include Jon Raskin, April Metzler and Devi Jankowicz, Robert A. Neimeyer, Marvin Westfield and Marla Arvay, Joseph Mayo, Hubert Hermans, Paula Caplan, Giancarlo Dimaggio, Lois Holzman and Betty Braun, and Bruce Ecker. For information contact Robert A. Neimeyer, Ph.D., Department of Psychology, University of Memphis, Memphis, TN 38152-6400; Tel, 901/678-4680; Fax, 901/678-2579; Web, www.people.memphis.edu/~napcn

Call for Papers: To submit a proposal that reflects constructivist contributions to psychological research and practice, and for additional information on other requested proposal topics, visit the Conference web site: www.people.memphis.edu/~napcn

The Annual Meeting of the German Society for Medical Hypnosis and Autogenic Training: *The Elderly People - Autogenic Training and Hypnosis Psychotherapy in the Age*, will be held June 18-21, 2004. For information contact Dr. med. W.-R. Krause, Chefarzt der Klinik für Psychiatrie und Psychotherapie mit Tagesklinik, Harz-Klinikum Wernigerode - Blankenburg, Thiestr. 7-10, D-38889 Blankenburg, Germany; Tel, 03944/962186; Fax, 03944/962350; Web, www.dgaehat.de

The IV European Congress will be held June 22-26, 2004, in Krakow, Poland. For more information, E-mail: info@p-i-e.pl

The New Zealand Society of Hypnosis announces the 12th Annual Scientific Meeting, August 6-8, 2004, in Christchurch, New Zealand. Practical-workshop topics include Indirect Hypnosis techniques, metaphors, narrative therapy and hypnosis in life threatening illness. Fundamental workshops also will be included. For information contact Geoff Stephens, Tel, 03 3370772; E-mail, geoff.stephens@caterbury.ac.nz

Call for Papers: To present a paper at the Conference contact Geoff Stephens, Tel, 03 3370772; E-mail, geoff.stephes@caterbury.ac.nz

CONFERENCE NOTES continued on next page

Summer Intensive 2004

Ericksonian Hypnosis W/ Stephen Gilligan, Ph.D.

San Marcos, CA (near San Diego)

July 6-11:

Ericksonian Hypnosis and Extraordinary States of Consciousness

July 14-19:

Advanced Hypnosis & The Generative Self

July 21-25

Hypnotherapy Supervision



Phone/Fax:
760-942-1577
www.StephenGilligan.com
E-mail: selfrelate@aol.com

***Ceus Available**

CONFERENCE NOTES *continued*

The 62nd Annual Conference of the American Association for Marriage and Family Therapy (AAMFT) will be held September 9-12, 2004, in Atlanta, Ga. For information contact AAMFT, 112 South Alfred Street, Alexandria, VA 22314-3061; Tel, 703/838-9808; Fax, 703/838-9805; Web, www.aamft.org

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

The 55th Annual Workshops and Scientific Program Conference of the Society for Clinical & Experimental Hypnosis (SCEH) will be held in Santa Fe, N.M., on November 10-14, 2004. For information contact the Massachusetts School of Professional Psychology, 221 Rivermoor Street, Boston, MA 02132; Tel, 617/469-1981; Fax, 617/469-1889; E-mail, sceh@mspp.edu

Call for Papers: To present a paper or propose a symposium on clinical and/or research issues for the Scientific Program, Friday evening to Sunday afternoon, contact SCEH: E-mail, sceh@mspp.edu; Tel, 617/469-1981; Fax, 617/469-1889. Deadline: April 30, 2004.

The Milton H. Erickson Foundation is sponsoring the Ninth International Congress on Ericksonian Approaches to Hypnosis and Psychotherapy: A World of Unlimited Possibilities celebrating the 25th Anniversary of The Milton H. Erickson Foundation, Inc. The Congress will be held December 1-5, 2004, at the Hyatt Regency Phoenix, Phoenix, Ariz. The Congress features a Pre-Congress workshop on December 1 entitled *Professional Resources Day*; two and three-hour workshops; interactive events; keynote addresses; an 18-hour Fundamental Ericksonian Hypnosis Track (runs concurrently with Congress sessions); and Solicited Short Courses presented by members of the 112 National and International Erickson Institutes and Ericksonian Professionals. The full brochure will be available in May 2004. For information contact The Milton H. Erickson Foundation, Inc., 3606 N. 24th Street, Phoenix, AZ 85016-6500; Tel, 602-956-6196; Fax, 602-956-0519; E-mail, office@erickson-foundation.org ; Web, www.erickson-foundation.org/intlcong.htm

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

SCSEPH

The Erickson Discussion Listserv now moderated by Stephen Lankton

The Erickson Foundation Discussion Listserv is an email list of worldwide students of Ericksonian Therapy. First established by Jim Keim, administration of the list is now in the able hands of Stephen Lankton, steve@lankton.com.

This moderated site is dedicated to discussion of approaches to psychotherapy and hypnosis inspired by Milton H. Erickson, M.D. Members share perspectives and achievements, and query each other about practice, theory and research. Subscribe to the Listserv and network with clinicians who share your interests. Join the Listserv and you will be able to ask questions, discuss cases, share ideas, etc.

Open to mental health and health professionals and graduate students, this discussion group is sponsored by the Milton H. Erickson Foundation. Membership is by registration only. The list is available in digest form so that members receive no more than one email per day. An archive of previous posts is available.

The Erickson Foundation is grateful to Jim for his years of service. We look forward to Stephen's innovations.

To Join the List go to <http://www.topica.com/lists/EricksonList>
or send a BLANK e-mail to: EricksonList-subscribe@topica.com

B O O K R E V I E W

EMDR as an Integrative Psychotherapy Approach: Experts of Diverse Orientations Explore the Paradigm Prism

edited by Francine Shapiro, Ph.D.

published by American Psychological Association, 2002

Francine Shapiro developed her book, *EMDR as an Integrative Psychotherapy Approach* by asking experts from diverse realms of therapy to look at EMDR from the perspective of the specialty. She asked them how EMDR reflects traditional thought in their area; how they perceived its benefits; how it lets them "use what they know;" how it extends or complements their previous work; how they think EMDR could be strengthened; and how it could be used to further research in their modality.

EMDR (Eye Movement Desensitization and Reprocessing) is a startling, controversial technique using rhythmic bilateral stimuli (moving the eyes back and forth or tapping alternate knees). These stimuli are combined with a careful protocol of cognitive restructuring and client-directed chains of association. Research indicates that the method can effect rapid, deep amelioration of PTSD and other trauma-related symptoms.

As in any work of this kind, some articles are better than others, but the group is diverse and of high overall quality. Most use illustrative case material, certainly a boon. Shapiro writes an opening, general chapter on psychotherapy "paradigms" and a second reviewing EMDR itself. Bessel A. van der Kolk adds a well-written chapter reviewing the history of trauma treatment - a subject about which he had written for ten years before a colleague introduced him to EMDR. He effectively blends his personal experience during training, theories of the neurobiology of trauma, and case studies in explaining why he changed from being "highly skeptical" to his current advocacy of the method.

Many modalities are brought to bear: Wachtel writes about psychoanalysis; Jeffrey Young, *et al.* show clear excitement about combining EMDR with schema-focused therapy; Lazarus and Lazarus compare it to multimodal therapy; Gilligan writes from the hypnotic perspective; and Bohart and Greenberg look at integrating it into a variety of experiential therapies. Other articles provide viewpoints from feminist theory, family systems and transpersonal psychology.

The authors frequently note that the technique has allowed them to move past "stuck points" that had proven intractable with their standard methods. They also tend to agree that EMDR, though not always more effective, seems to be more efficient - it gets deep work done more quickly.

Some authors disagree with Shapiro's ideas of what EMDR is and how it should be used. To her credit, she surely knew this would happen when she conceived of the book, and she doesn't try to "tidy up" after her contributors.

Some writers emphasize EMDR's ability, not only to clear away past wounds, but also to help create or "install" new, positive states of being. In their chapter on transpersonal work, Sheila Krystal, *et al.*, describe using it to help people attain advanced states of consciousness, deep joy, and the oceanic sense of non-duality associated with meditative practice.

I found this book to be an exciting read. There are a lot of ideas here, and they are valuable even to those not tempted by EMDR. To be sure, the book exists partly to bolster the image of a technique that often arouses doubt. But more importantly, *EMDR as an Integrative Psychotherapy Approach* is made up of keen minds brought to bear upon the question of what makes therapy good. I was stimulated to think about what I do each working day - and to suspect that EMDR may well be a tool worth learning.

Reviewed by

Will Handy, LCSW

Milton H. Erickson Institute of Dallas

The Sex-Starved Marriage

A Couple's Guide to Boosting Their Marriage Libido

Michele Weiner Davis, M.S.W.

Simon & Schuster 2003 US \$24.00

Can \$38.00

The first question when reviewing a book is, "Who would benefit from reading this?" The first question to ask regarding a book about sex is, "Could anyone actually read it?" And most important, since it is potentially a book to recommend to clients, the question is, "Will they be comfortable reading this book about 'it'?" 'It' being, sex - one of the most intimate issues clients bring to therapy.

Weiner Davis's book *The Sex-Starved Marriage: A Couple's Guide to Boosting Their Marriage Libido* works from a perspective familiar to many therapists. Reestablishing and maintaining sexual intimacy is the responsibility of both partners. Doing so garners enormous benefit for the relationship; not doing so contributes mightily to the destruction of the relationship.

The author presents her views and solutions in ways that speak directly to the reader, adding to the counseling repertoire. It never hurts to have in writing what a client needs to hear. Clients with a low libido first need to hear that to change their sex-starved relationship is a decision. Then they need to hear that to find their untapped sexuality within is a commitment. Clients with a high libido most often need to hear that their feelings of hurt and rejection often lead to defensiveness (not to mention resentment), rather than collaborative solutions.

The author also emphasizes that while a clearer understanding of 'why' helps, it does not take the place of committing to change, nor is it permission to continue blaming each other for whatever 'why' is contributing to the couple's sexual deprivation.

Weiner Davis does an excellent job in confronting both sides of the libido coin with kindness and humor.

It is always a tough balance in

self-help books to provide enough information about 'why' to be genuinely useful without further confusing the reader with too much information. If readers need more information than what is offered in this book, then they probably need to see a therapist. Advice on how to select a therapist and possible referral sources are offered. Suggestions also are given for how to direct the course of therapy.

A tool-kit is offered in clear language to assist clients in implementing their decisions and collaborating on solutions. Chapter 7, *Melting the Ice*, outlines the three criteria for goal-setting and follows with six steps to reach the goal. The chapter then proceeds to offer numerous solutions to implement for both those with high and low libido. Almost all of the solutions involve readers changing their own role in the sexual starvation dynamic. It never hurts a book for couples to include a clear and practical chapter on communication. Chapter 8, *Can We Talk?*, includes important strategies for actually talking with each other. This is a nice lead in for the next chapter, *Sex Talk*, because at some point couples need to find a way to actually talk about 'it.'

Throughout the book, Weiner Davis offers continuous support and encouragement to take action in rebuilding sexual intimacy. There is frequent use of case examples from the author's practice to illustrate important aspects. Real cases offer comfort in that "we're not the only ones dealing with this." Readers will be hard pressed not to find their own situation resolved.

Both the author and Pat Love, who wrote the forward, suggest the reader 'fasten their seatbelt and enjoy the ride.' It is possible to enjoy racing headfirst into libido-altering territory when the tour guide has been as considerate a 'backseat driver' as Weiner Davis in *The Sex-Starved Marriage: A Couple's Guide to Boosting Their Marriage Libido*.

Reviewed By

Deborah Beckman, M.S.

Dallas, TX

Guided Imagery and Other Approaches to Healing

By Rubin Battino, M.S.

Crown House Publishing, 2001

Guided Imagery and Other Approaches to Healing is a book/tape combination written by a rather unusual person - both a chemistry professor and a counselor. Therefore, the combination yields a slightly different perspective on healing techniques than one might ordinarily encounter.

The book explores nontraditional areas, veering from the concept of psychotherapy to explore some new age ideas about the mind-body connection. In it, Battino has daringly posed some important questions: 1) What causes disease?; 2) How do we explain spontaneous cures of untreatable diseases?; 3) What can a psychologist do to enhance physical healing?; and 4) Should we remain within the boundaries of data-driven medical approaches, or remain open to nontraditional healing approaches? Responses to these questions drive us right back to our epistemologies. In these times of encroachment from other fields, psychology is constantly being challenged to answer where we, as healers, draw the line in our work.

Battino's book is written like a college textbook-systematically, from an educational and mind-broadening perspective, incorporating research-yet it remains interesting reading. Battino synthesizes materials from other scientists and leaders in the field fairly comprehensively-although his incorporation of Ericksonian ideas is somewhat sparse, with a heavier emphasis on Neuro-Linguistic Programming. He advocates implementation of Erickson's utilization approach when conducting imagery, but the explication of this is somewhat vague. Perhaps this was on purpose as he later states, "Erickson was a master of the precise use of vague language" (p. 97).

Battino is a hypnotherapist, and he repeatedly discusses the use of both imagery and hypnosis. He suggests/implies that if you have the skills as a hypnotherapist, you are

well positioned to conduct guided imagery. This is a bit misleading, because hypnosis requires a great deal more training and potential to be a much more powerful tool. Hypnosis is not the same as guided imagery. Guided imagery is, itself, a tool of hypnosis. Indeed, guided imagery can be accomplished without the use of hypnosis. More advanced tools of hypnosis result in the ability to distract and entertain the conscious mind while freeing the unconscious mind to process and retrieve personal associations at a deeper level. Therefore, patients who are not responsive to guided imagery due to a difficulty with visualization often will find themselves much more responsive to the use of the advanced tools of hypnosis. Battino does not clarify his understanding of the differences between the two approaches or provide recommendations for choosing one over the other.

This book has something for everyone; it discusses theory and research, and philosophy of healing, yet also yields pragmatic and specific advice. There is a section critiquing some existing popular imagery tapes that provide a level of specificity that therapists can immediately apply and find useful. Battino also includes his own imagery scripts-both written and cassette tapes-to use as examples.

An unusual feature of this book is the inclusion of two guest chapters-one written by nutritionist, Dr. Ira Fritz, and another by Native American healer, Dr. Helena Sheehan. I found the chapter by Dr. Sheehan especially intriguing in that a shaman's approach to healing is nonlinear, and involves secrets and rituals, each of which is designed to match the patients' perceptions regarding the cause of their disease. In other words, the cure is based on a utilization approach (hmmm....sounds rather Ericksonian!)

The target audience is broadly addressed to both professional and nonprofessional therapists, medically ill patients and their families, and anyone else who might be interested. The accompanying imagery tapes are convenient, as they provide examples that can be emulated by budding therapists or immediately used by patients who purchase the book for self-help.

My overall reaction? This was an

ambitious project and is fairly well done. On the downside, it seems a bit unfocused by nature of its attempt to be both overly comprehensive-(including nutrition and Native American healing along with psychotherapy techniques) and exclusionary (the appendix contains Christian-based prayer, which is fine, yet it fails to include prayers for Jews, Buddhists, Muslims, Spiritualists, etc.). But it shines in the important area-providing guidelines for critiquing guided imagery linguistics.

It would provide a good addition to the library of therapists working in behavioral medicine, and also will have appeal as a self-help book for laypersons with medical illness. Guided Imagery and Other Approaches to Healing is written in a manner that is humble, intelligent, and makes a unique contribution to the field of healing.

Reviewed by

Kathleen Donaghy, Ph.D.
Phoenix, AZ

BOOK REVIEW

Trancework: An Introduction to the Practice of Clinical Hypnosis, 3RD Edition

By Michael D. Yapko, Ph.D.

In his newest update to *Trancework*, Michael D. Yapko offers a comprehensive book on the theory and practice of clinical hypnosis. This third edition adds new chapters and new sections. It also updates the earlier 1990 version with current research, theories and techniques.

The book is organized into two general sections. Section One offers a conceptual framework for hypnosis. The chapters cover a broad range of topics beginning with how hypnosis can help and the dispelling of myths. Yapko is careful to present the benefits realistically, thereby correcting overly positive expectations along with the overly negative ones. The book also does a good job of showing people who are new to hypnosis the broad and varied uses hypnosis can add to many professions.

Section One includes a chapter on the different theories of hypnosis, including the classic and modern contributions. Yapko devotes an entire chapter to the social psychological theory. This section also includes separate chapters on brain and mind, doing a credible job of presenting the important issues in both areas.

One of the most enjoyable and unique features of this book is personal commentary from over a dozen renowned modern hypnosis practitioners.

Key neurological studies are described in the brain chapter, showing what parts of the brain are activated or deactivated under hypnosis, and how brain activity compares between hypnotic and waking subjects, hypnosis and imagination, hypnosis and perception. Interestingly, brain activity under hypnosis has been found to be more similar to actual perception than to imagination. Yapko is sensitive to the needs of the practitioner when he says, "To the clinician wanting to apply hypnosis in treatment, however, the more immediate consideration is how a person's brain gives rise to a person's mind." (pp. 151) The mind chapter deals with Erickson's views and unconscious processing. Hypnotic responsiveness, the psychological characteristics of hypnosis, conditions for conducting hypnosis sessions and assessment are other topics included in the first part.

See *TRANCEWORK* on next page

VIDEO REVIEW

Family Therapy in Bali

Triangle Productions
P. O. Box 8094

The video, *Family Therapy in Bali* by Madeleine Richeport-Haley and Jay Haley (Triangle Productions, 2002) summarizes the experiences of Madeleine Richeport-Haley and Jay Haley during their observations on the island of Bali.

The video begins with a quick introduction about Bali. Although it has been invaded several times, the inhabitants have kept their culture. The video shows that family therapy as done in "ancient cultures" has similarities to therapy in modern societies.

Rituals for birth and death are important; the Balinese believe in reincarnation and that they can communicate with their ancestors. There are festivals all year round where people wear colorful ceremonial clothes. As a Mexican, this reminded me of the wide variety of dresses women wear in my country during celebrations.

The Balinese make offerings to their deceased ones and also dance during the ceremonies. One of the offerings consists of a variety of foods that are left on the burial places so that their loved ones can take the essence from these foods. Once the essence has been taken, the Balinese take the food home and eat it. This reminded me of Mexican traditions where food is left on the cemeteries during

*Gods are included as part of the system,
but when medical problems are central,
sufferers go to the hospital.*

the "Día de Muertos," the Mexican Day of the Dead celebration.

The Balinese believe that emotional disorders are the result of witchcraft, and so to overcome problems, the Balinese are taken to the priest. Gods are included as part of the system, but when medical problems are central, sufferers go to the hospital.

Potential healers retreat for months to a lonely place before they start healing people. They are said to be special, and better healers if they also "hear voices" inside their heads, an advantage in this culture. But from a modern psychiatric point of view, if someone "hears voices" they would probably be diagnosed as psychotic. I liked how this feature is seen in Bali as a healing gift, as opposed to being seen as a problem.

A close relationship between the healer and the family who asks for help is important. Healers move in with their client's family and become part of the family system as they do therapy. This reminded me of one of Erickson's interventions where he visited the aunt of one of his clients, who was going through depression (O'Hanlon and Hexum, 1990). During his visits, Erickson observed that this woman cultivated African violets, and he utilized her hobby as a means to treat her.

The case of a woman who was having constant seizures showed how people might develop physical symptoms when a cycle has not been completely finished. In this case, a young woman's father died. Her mother moved in with her new husband before the proper funeral had taken place. So the medium advised them to follow a ritual, and the symptoms disappeared.

Similarly, we sometimes need to help our clients create their own rituals so that they can find ways to heal themselves. In my own therapy practice, I have used ritual with children to overcome symptoms. A little boy I saw was having

nightmares after his puppy died in an accident. Utilizing his own belief system, I suggested he write a letter to the puppy so he could send it to him in a balloon to heaven. He did not like the idea very much. He told me that "Poncho" would be happier if he sent him a drawing instead. So he made the drawing, tied it to the balloon, and then went to the garden to send it to the pup. He was still a little worried because "Poncho" would not have any friends over there. In trance, I asked him to visualize "Poncho's" arrival to heaven where he would meet other pets. Shortly after this session his nightmares ended.

Jay Haley also makes reference to Gregory Bateson's systemic perspective, and the importance of working not only with the client but also with their family members. What one person does is the result of other people's actions. Bateson was developing these concepts when he was working on his research project in Bali. The video shows Bateson and Margaret Mead observing behaviors during ritual ceremonies. These observations helped Bateson develop his theories for psychiatry that are still useful in contemporary practice.

The video further shows interviews the Haleys' conducted with healers and natives three-years later. Another interesting feature on the video is Erickson explaining the differences between schizophrenic and nonschizophrenic behaviors.

I truly enjoyed viewing the video *Family Therapy in Bali* by Madeleine Richeport-Haley and Jay Haley. As a Mexican therapist, I am sure that as professionals, our similarities are greater than our differences.

Reviewed by

Maria Escalante Cortina, DDS

Mexico City, Mexico

TRANCEWORK

continued from page 1

Section Two, Practical Framework, offers a number of chapters that include suggestions, hints, inductions, and techniques for inducing and working with hypnosis. The book addresses clinical practitioners who are using hypnosis as an adjunct to treatment and those who use hypnosis exclusively. Also included are a number of descriptions of actual clients with a variety of problems to help illustrate the different forms of hypnotic suggestion and treatment. A complete verbatim transcript of a woman coping with terminal cancer gives the reader a clear and detailed example of Yapko's approach. He adds useful comments as the text goes along to help the reader understand his rationale.

The book concludes with some of the problems hypnotists encounter: resistance, hazards, and ethical guidelines. The book also includes discussion topics at the end of each chapter to stimulate further thought or for possible application as a teaching text.

One of the most enjoyable and unique features of this book is personal commentary from over a dozen renowned modern hypnosis practitioners. These sections are candid and varied, with each person freely discussing some fascinating aspect of their life, their work, and the field. Many little-known personal details are special treats such as William Kroger's story of how he first became interested in hypnosis when back in 1919 his father hired a professional hypnotist for a publicity stunt to stimulate business. Kroger was immediately fascinated: "So I went around to the kids in the neighborhood and I looked into their eyes and said, "Sleep!" and to my amazement, half of them fell over!" (pp. 111) Or Theodore X. Barber's disclosure of his personal interests: "Like most people, I enjoy my family and friends. I also enjoy the rain and the sun and the beautiful boundless Earth. My unique hobby...consists of literally interacting and communicating (in a "shockingly" intimate way) with the animals in my surroundings." (pp. 142)

Yapko's third edition to *Trancework* is interesting, comprehensive, well written, and filled with solid information. It would be an excellent addition to the bookshelf of anyone who is interested in using hypnosis professionally

Reviewed by

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

San Diego, CA

M O N O G R A P H S R E V I E W

Hypnosis International Monographs

Number 1, 2, & 3

The *Hypnosis International Monographs* are published in Germany, with six having been printed to date. This review covers the first three volumes. The remaining three will be covered in the next issue of the newsletter.

The first monograph, *Jerusalem Lectures on Hypnosis and Hypnotherapy*, published in 1995, is a collection of papers from the Twelfth International Conference of Hypnosis. The sixteen articles are divided into two parts: Historical and Theoretical Issues and Clinical Issues and Applications. Weitzenhoffer's article, "Erickson and the Unity of Hypnotism," based on the Nancy School position that equated hypnosis with suggestibility, claims that Ericksonian hypnosis should not be distinguished from traditional hypnosis. He believes that Erickson's main contribution was to the field of psychotherapy. Zeig in "Direct and Indirect Methods: Artifact and Essence" offers a different interpretation: Indirect hypnosis gives us a new alternative which adds to traditional methods by enhancing responsiveness to minimal cues so that utilization can take place to develop the resources for patient-based change. Rossi's article, "The Chronobiological Theory of Therapeutic Suggestion: Toward a Mathematical Model of Erickson's Naturalistic Approach" shows how hypnosis links to naturally occurring ultradian cycles. Sheehan in "Imagery and its

An inspirational article by Bloom encourages and advises us to find our true voices as artistic and individualistic therapists.

Complex Relationship to Effects" makes an interesting point that responsiveness to imagery may not be directly indicative of hypnotizability nor of talent in hypnotic responding. Differences may be due to variations in capacity for visualization.

A broad range of clinical issues are covered in the second section. Solomon and Kleinhauz give general outlines of treatment for typical traumatic reactions to combat in "The Yom Kippur War Revisited Part I." Part II correlates post-traumatic stress disorder with combat stress reactions, shedding light on this disorder. Another unique application by Livnay is the use of a gong in therapy as a musical stimulus to enhance perception and attention as well as to bring about associations and memories. Sound and music can be used as a nonverbal form of interaction. In Peter's article, "Hypnosis and Psychotherapy with HIV, ARC, and AIDS Patients" hypnosis is used to treat the diverse needs of these patients including depression, fears, decompensation tendencies, and uncomfortable symptoms. An inspirational article by Bloom encourages and advises us to find our true voices as artistic and individualistic therapists.

The second volume, the *Munich Lectures on Hypnosis and Psychotherapy*, published in 1996 contains a selection of English language contributors to the second European Congress of Ericksonian Hypnosis and Psychotherapy held in Munich in 1995. The nineteen articles cover a broad range of current topics.

Some of the articles deal with cases, such as Bloom's article, "Treating Patients with Conversion Disorders." First he describes his successful hypnotic treatment of an adolescent who was paralyzed from the neck down. Then he candidly discloses how the same treatment of a second teenager was unsuccessful until he developed new methods to account for the patient's individuality.

Some of the articles are theoretical, such as, *Hypnosis-a State or a Relationship* by Aleksandrowicz who takes the position that although Erickson used the word "state," his hypnosis was a form of interaction created in the frame of the hypnotic relationship. Another article by Peter systematically explores the difference between instructions and suggestions. He concludes that the *gestalt* of the hypnotic situation enables a simple instruction to be transformed into a suggestive one. Also included is Rossi on ultradian hypnotherapy, Wolpe on hypnosis and behavior therapy, and Gilligan on the relational self in psychotherapy. Some other topics are the use of dreams in hypnosis, and Erickson meets Freud in terms of therapist trance and countertransference.

The Third monograph, *Hypnosis in Dentistry*, published in 1997, describes how hypnosis can be used for a wide spectrum of dental problems. This issue begins with an interesting review of the history by Chaves who points out that hypnosis is underdeveloped and underused in dentistry. Other articles discuss the use of hypnosis for dental anxiety, dental pain, and dental intolerance. Also included are articles showing how hypnosis can be combined with behavioral treatment and with imagery techniques. Case histories also are given. This issue offers valuable insights for anyone interested in applying hypnosis to dentistry.

The *Hypnosis International Monographs* provide a forum for various positions and issues that are central to hypnosis. We found the articles clear and interesting to read, offering thought-provoking views, suggestions for techniques, presentation of theories, and overviews of many different ideas. Therapists will find much to think about in reaction.

Reviewed by

C. Alexander Simpkins, Ph.D.
& Annellen Simpkins, Ph.D.
San Diego, CA

PARSONS-FEIN

I N M E M O R I A M

The Milton H. Erickson Foundation has recently lost three great friends - Gianfranco Cecchin, Judd Marmor, and Margaret Singer. Also, Muriel Whitaker, widow of the late Carl Whitaker, M.D.

Gianfranco Cecchin, M.D., died February 1, 2004, in a car accident outside of Milan, Italy. Dr. Cecchin was a co-founder of the Milan School of Therapy. He was a true pioneer in family therapy, thinking "outside the box" of traditional family therapy. The life and work of Dr. Cecchin was recently celebrated at the International Family Therapy Association (IFTA) Conference in Istanbul, Turkey, in March 2004.

Judd Marmor, M.D., passed away early December 2003, at the age of 93. Dr. Marmor was a pioneer who, with his book entitled, "Sexual Inversion" (1965), helped lead the way in removing homosexuality from the Diagnostic and Statistical Manual of Mental Disorders. Dr. Marmor presented at the *Evolution of Psychotherapy Conferences* in 1985, 1990, 1995, and 2000.

Their progressive thinking have shaped not only contemporary practices and thinking, but the thinking and practice of psychotherapeutic generations to come.

Margaret Singer, Ph.D., known as a leading brainwashing expert, died November 23, 2003. Dr. Singer testified in hundreds of court cases involving cult practices and mind control. She worked on many high profile cases including Patty Hearst and Charles Manson. She was best known for her work on schizophrenia and the characteristic disordered speech patterns of sufferers for which she was twice nominated for a Nobel prize (*The Guardian*, December 2003).

Drs. Cecchin, Marmor and Singer's life contributions have advanced the field of psychotherapy. Their progressive thinking have shaped not only contemporary practices and thinking, but the thinking and practice of psychotherapeutic generations to come.

The Erickson Foundation extends its deepest condolences to their families, friends and colleagues. Their presence will be greatly missed.

INTERVIEW

continued from page 1

moved into doing more family therapy and eventually focusing on couples.

Dr. Landis: You had mentioned that you and Jeff were working with Joan Baez. What was that about?

Ellyn Bader: Well, I strongly encouraged Jeff Zeig to come to California with me in 1969 to attend a program at the Institute for the Study of Nonviolence, which was founded by Joan Baez. And, later on, I strongly urged him to move to California.

Dr. Landis: Where did you meet Zeig?

Ellyn Bader: In Michigan. We both went to Michigan State University together, and actually Steve Lankton was there at the same time, too. Anyway, I convinced Jeff to move to California with me, and I was coming here to work for the Institute, and Jeff came, too. We both ended up working at a psychiatric hospital part-time and working for the Institute the rest of the time.

Dr. Landis: Would you tell me a

bit more about your work with Joan Baez?

Ellyn Bader: Yes. Along with Ira Sandperl she founded the Institute for the Study of Nonviolence. It was set up to teach people the concepts of nonviolent political organizing and also to do nonviolent political organizing. So one of the projects that we did was a community-based medical clinic, and we did a little, tiny bit with the United Farm Workers clinic in Delano, and ran seminars teaching people the concepts of nonviolent political organizing.

Dr. Landis: Did you know you were going to be a therapist then?

Ellyn Bader: Well, I left a PhD program where I had a fellowship, so I'd started in Michigan to become a therapist. I dropped out of school to do some anti-war work for a few years and then went back and finished my degree.

Dr. Landis: It sounds like an interesting journey from that point to the conference in '95. That has stood out as a landmark conference. You got everyone there.

Ellyn Bader: In spite of running those political seminars together all those years, Jeff and I hadn't done anything together since then--until we did the conference. I think it was probably the strength of what we'd done together in our early years that made him feel confident that this format would be successful and that it was okay to co-sponsor this conference.

Dr. Landis: And it was extraordinarily successful. That brings us to the upcoming conference. The original conference was titled "Integrating Sexuality and Intimacy: The Challenge of Treating Couples in the '90s." I

there are many "problems" that couples have to deal with, such as when someone has an addiction or ADHD, or someone in the couple is Narcissistic. These are issues that all of us have learned about in the individual context but there hasn't been a lot done about how do you deal with them in a couple's context. So what I wanted to do, which was different in this context than some of the others, was to take some of those "individual issues" or "individual problems" and look at them in the couple's context.

Dr. Landis: Had you seen this actually done before?

Ellyn Bader: No.

Dr. Landis: I hadn't, either, especially there's one that you're doing about Narcissistic relationships. I have not seen anything written about it within a couples' context.

Ellyn Bader: It impacts the couple's relationship a lot. Another one that you rarely see talked about is somebody who has a significant amount of ADHD. I wanted this conference to specifically isolate various individual presenting problems and look at what happens when they come in as a couple, and how you treat them.

Dr. Landis: How do you differentiate treating a couple from treating an individual?

Ellyn Bader: One difference is that, usually, when someone comes in for individual therapy, they're self-referred and they want to be there. In the couple's context, often people are there because they want to change the partner rather than change themselves. They often come in resistant to looking at themselves. Their process is more finger-pointing than seeking personal change. The thera-

As a therapist you have to be faster on your feet at figuring out those things that are going to give the most leverage, and work with them.

thought the title of it was brilliant, because the pre-supposition under it was that sexuality is often used to avoid intimacy. What brought about the theme for this one?

Ellyn Bader: The theme for this one came about because I think that

pist has to be equipped with a different set of skills to be able to deal with that type of resistance and shift some of the focus.

Dr. Landis: At the previous con-

Continued on next page

ference, you mentioned that in working with couples, if you're dealing with the process, then they wonder why you're not dealing with the content and vice versa. Is that different than in individual work, or does that have a different function in couples work?

Ellyn Bader: In couples' work, the subject changes so fast, because as soon as someone feels like they're

person wants to change him or herself. A lot of times, they are so invested in the *other* person changing that they don't want to look at themselves.

Dr. Landis: There were other differences that you had identified between working with individuals and couples, things that people who work with individuals also need to appreciate.

Ellyn Bader: I think that when you work with an individual, the same skills don't transfer to working with couples. Obviously, some of

I think that when you work with an individual, the same skills don't transfer to working with couples.

"losing," or the other person's more powerful, they change the subject and bring up a different piece of content. If the therapist goes with what the other person brings up, then the client is more likely to complain that they're not getting anywhere. As a therapist you have to be faster on your feet at figuring out those things that are going to give the most leverage, and work with them. You have to be able to switch pretty quickly or find ways to integrate process and content so that the person cannot say to you, "Oh, we're only dealing with *one* of these things."

Dr. Landis: No matter how much somebody has wanted to be in therapy and had an outcome they wanted to achieve, I have yet found patients who actually wanted change; they just wanted to feel better. There's always been some ambivalence surrounding change, because it seems like their definition of change was "to stop doing what you know and grab something you haven't done before."

Ellyn Bader: Right, a risk. It's often the case because somebody has something glaring that's problematic to the other person. They come in *looking* like they want change. But, don't confuse the fact that the person *wants* change with whether or not the

them do, but not all of them. I think that couple's work takes a much higher level of activity from the therapist, a need to structure things more.

Dr. Landis: If there is a way of generalizing it, when approaching the greater need for structure, do you create that structure based on diagnostic categories or some sort of category in your mind, or is there a universal structure of pegs that you would hang things on pretty traditionally, between which the individual differences would fit?

Ellyn Bader: One of the ways I organize my work is to look at the four major arenas where you can push change on a couple:

- Helping them clarify the type of relationship that they want to create and how they want to be as partners in that relationship;
- Changing the process of how they interact with each other around stressful issues;
- Understanding and working to ameliorate intra-psychoic triggers;
- Developing skills that the couple may be lacking.

So couples therapy is an interweaving of these four areas of change.

Dr. Landis: On the intra-psy-

chic triggers, would you ever work with an individual to deal with those?

Ellyn Bader: Yes, but I like to do it in the context of the couple. Occasionally, I will see someone individually, but I like to do intrapsychic work with the other person present because they learn so much. One method that I use a fair bit is Gestalt two-chair work, and that's an example where I think that having a partner observe and understand the struggle, and see what the person is working through, can make a big difference.

Dr. Landis: Do you ever have any difficulty with the partner being willing to be present?

Ellyn Bader: Not too often.

Dr. Landis: On the other side, do you ever have any difficulty with the person who has these triggers being willing for the other person to be present?

Ellyn Bader: Occasionally, but, again, not often. I think I'm good at trying to lay out each partner's triggers before I move into that work. For example, I saw a couple today who are new to me, I don't know them well. Part way through the session, I said to her, "It seems to me like you feel pretty easily criticized by him, and when you feel criticized, you

already can begin to see that they could have more options, and that makes it much more like they're not an Identified Patient, and that they would be helping themselves by doing the intrapsychic work.

Dr. Landis: It also seems as though, by identifying both partners' triggers in the presence of each other, that you are normalizing the process. You're moving away from there being an Identified Patient and towards how to facilitate each other's growth.

Ellyn Bader: Right. Also, more and more, I have come to feel that it is unprofessional and almost unethical to see a client if they're in a committed relationship and you've never met their partner. I think it's detrimental to treat them without knowing their partner.

Dr. Landis: Oh, tell me more about that! That's delicious.

Ellyn Bader: Because you know what the old psychoanalytical position: you would never see the other person. The way I see it, when you have an individual person in the room with you, what they're telling you is their perception of the partner and what they believe to be true about the partner. Probably half of what they're telling you is true and half is not. The only problem is that you have no way

...it is unprofessional and almost unethical to see a client if they're in a committed relationship and you've never met their partner.

move into a spot where you feel like you're not worthwhile," so I laid out her dynamics like that. Then I was also able to lay out his, because he gets volatile and has a hot button about feeling controlled by her. Just laying those out, side-by-side, and saying, wouldn't it be nice if you weren't so easily triggered by these things-- if you had more options? So, by the time you move into that, they

of knowing which half is correct. I do a lot of supervision of therapists and I see a lot of examples where therapists have colluded with the negative view of a spouse and really destabilized marriages that didn't have to be destabilized because the therapist is aligned with the negative projection. And one partner can be very convincing in shifting the blame to the other partner.

See INTERVIEW on page 24

INTERVIEW

continued from page 23

Dr. Landis: Marvelously so. Then, if someone is in a committed relationship, and they come in as an individual, even if the partner has sent them in, you're saying that you'd still like the other person to be there to give feedback.

Ellyn Bader: I at least would like

Dr. Landis: Where did you come up with that one?

Ellyn Bader: I guess out of my years of experience and seeing that I really would cringe at the way that certain therapist's were destabilizing relationships unnecessarily.

Dr. Landis: Was there a point in which there was an "aha!" or is this something that sort of snuck up on you?

I do not want to see individual therapists unnecessarily undermining what partners have already created.

to meet them once, and to hear their view of things. If not, it is often too easy for the client to become too closely connected to the therapist. When that happens, then they will be saying things to the partner at home like, "I don't want to talk to *you* about what I'm doing, I only want to talk to my therapist," which makes the person at home feel even more marginalized and out of control.

Ellyn Bader: I think it evolved. Also, as I began, I sometimes asked people's partners to come in, and realized how differently they presented themselves to me or how differently they viewed things from how the partner presented them. Then I realized how striking those differences are.

Dr. Landis: Irrespective of

whether we identify ourselves as a family therapist or an individual therapist or a couples therapist, if we don't actually meet the primary or secondary support systems with whom the clients are living, we're not really getting all of the information. We can inadvertently drive a wedge between the relationships rather than bringing them closer together.

Ellyn Bader: Absolutely. And we make judgments all the time that are based on what only one person is telling us. Good relationships are precious and partners often have invested lots of time, energy, partnering and parenting in their committed partnership. I do not want to see individual therapists unnecessarily undermining what partners have already created.

Dr. Landis: So, this Couples Conference isn't just for people who are interested in working with couples.

Ellyn Bader: Absolutely. It will also shed insight into working with challenging individual dynamics!

DONATIONS

The Milton H. Erickson Foundation, Inc., would like to sincerely thank the following colleagues for their very generous donations since the last issue of *The Milton H. Erickson Foundation Newsletter*: Rita M. Sherr, CSW, BCD, and Leon Lalsingh, MSW. Thank you for your continued support of The Milton H. Erickson Foundation and its activities.

Donations earmarked for the Milton H. Erickson Archives go directly to assisting with expenses for restoring the audio and videotapes from the late Milton H. Erickson, M.D., along with tapes from past Milton H. Erickson Foundation Conferences from 1980 through 2003. This extensive restoration process will make these tapes, CDs, DVDs, and other materials available to mental health professionals around the world for training purposes.

Subscription
