The Milton H. Erickson Foundation

NEWSLETTER

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INTERVIEW

Helen L. Erickson
Interviewed by Margaret Erickson

Helen L. Erickson, Emeritus Professor at the University of Texas at Austin, is a leader in holistic care. Her work, known as Modeling and Role-Modeling, provides the bases for practice models in a number of health-care agencies, including the University of Texas Health Science Center, San Antonio.

Dr. Helen Erickson entered nursing school in 1954. During her rotation at Ypsilanti State Hospital for the Mentally Ill, she met Lance, second son of Milton Erickson. They married and settled in Midland Texas in fall 1957, where she launched her nursing career as Charge Nurse in the emergency room. Helen and Lance were offered positions at Inter-American University, San German, Puerto Rico. Soon after arrival in June 1961, noting that the university lacked an organized health-care program, Helen drafted a comprehensive proposal for the university and was named Director of Health Services. Four nurses served as primary caregivers; 23 doctors provided medical consultation.

The family returned to the US the following summer. Lance entered a PhD program and Helen worked as staff nurse at St. Joseph’s Hospital. After a two-year hiatus, Helen started work as a staff nurse at The University of Michigan Hospital, Ann Arbor Michigan. There she completed three programs: Her degree in the RN-BSN program at the University of Michigan in 1974; a dual graduate program in psychiatric and medical surgical nursing in 1976; and a PhD in Educational Psychology in 1984.

The Society for the Advancement of Modeling and Role-Modeling (SAMRM) was established in 1985. The Society’s first conference was offered in Ann Arbor Michigan in 1986. Since then SAMRM has offered biennial conferences. The 2010 conference in San Antonio Texas had attendees from as far away as the United Kingdom and Saudi Arabia. After moving to Columbia, South Carolina in 1986, Helen, was appointed Associate Dean, Academic Affairs, School of Nursing, where she was awarded the first state license for Private Practice in Holistic Nursing.

Summer of 1988 they moved to Austin Texas where Helen was appointed Professor and Chair of the Adult Health Division in Nursing. When she retired from the University in 1997, the Endowed Helen L Erickson Lectureship in Holistic Nursing was established.
The boundaries between disciplines are blurring in all of the health-care domains. The medical community is slowly extending the concept of organ homeostasis (bringing individual organs into balance) into the concept of allostasis (bringing the interconnections between all organs into balance). Likewise, mental health research and treatment are now moving toward an allostatic model of cognitive, emotional, physical, and spiritual health using an integration of all domains within a mindfulness model. More and more, it seems that mind, body and spirit are being seen as different manifestations of the same thing.

Our current issue is dedicated to the appreciation of the integration and expansion of the domains that we use in treating people’s quality of life using Ericksonian models and perspectives.

Helen Erickson, in a very personal interview by her daughter, Margaret, epitomizes this integration. Her Featured Interview is both informative and inspiring. Helen Erickson is at the forefront of where many of us are headed.

In the The Power of Two column, Roxanne Erickson Klein introduces Michael and Diane Yapko. Here, the Yapkos further their multi-modal, strength-based philosophy that includes their sociocognitive model of hypnosis. Theirs is a true partnership of minds on the cutting edge of therapies. Diane’s classic book, Understanding Autism Spectrum Disorders is reviewed by Wendel Ray and Courtney Brasher. Michael’s clinical demonstration of Hypnosis to Overcome a Fear of Freeway Driving: The Case of Susan is reviewed by Dan Short.

Our John Lentz interviews Lilian Borges Zeig for In The Spirit Of Therapy. This is a fascinating article with an international and multicultural flavor. The international theme is continued in our Historical Perspectives article with Renzo Balugani’s comparison between Erickson and the composer Sergei Rachmaninoff. Our new Introducing the Institutes editor, Cecilia Fabre, presents The Milton Erickson Institute of Singapore. I enjoyed how Cecilia was able to provide the many aspects of such a unique international institute.

Our reviews encompass this issue’s interconnection themes. We start with Maria Escalante de Smith’s book review of Mindfulness and Acceptance: Expanding the Cognitive-Behavioral Tradition edited by Stephen Hayes, Victoria Follette, and Marsha Linehan. Betty Alice Erickson reviews Stephen Gilligan’s and Robert Dilts’ book The Hero’s Journey: A Voyage of Self-discovery. This is a remarkable offering where Gilligan and Dilts utilize a skillful blend of the intellectual and spiritual aspects of being human to propel us along a voyage of personal self-discovery. Transformational Relationships: Deciphering the Social Matrix in Psychotherapy by Dan Short is reviewed by Alexander Simpkins and Amellen Simpkins. The Simpkins’ own contribution to these interconnections, Meditation and Yoga in Psychotherapy: Techniques for Clinical Practice is reviewed by Kathryn Lane Rossi.

An allostatic perspective is critical when treating a person with Post-traumatic Stress Disorder. We offer a trio of reviews approaching this through different and overlapping portals of entry. John Lentz reviews two DVD presentations: PTSD and Veterans: A conversation with Dr. Frank Ochberg, MD, and Resolving Trauma in Psychotherapy: A Somatic Approach. While providing practical techniques and applications, Ochberg reminds us that the essence of the person is greater than the sum of his DSM-ness. Resolving Trauma in Psychotherapy: A Somatic Approach provides a simple, elegant, and brilliant demonstration by Peter Levine. Alexander and Amellen Simpkins review Daryl Paulson and Stanley Krippner’s informative and evocative book Haunted by Combat: Understanding PTSD in War Veterans.

Please see EDITOR on page 5.

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Michael and Diane Yapko

By Roxanna Erickson Klein

Michael and Diane Yapko are a professional couple whose work is known in two different arenas. Michael, a clinical psychologist, is a 1980 graduate of United States International University; he is acclaimed for his effective integration of cognitive behavioral ideas with Ericksonian approaches to hypnosis and psychotherapy. Especially recognized for his contributions to the strategic, short-term treatment of depression, his clarity as an author and his elaboration of the socio-cognitive model of hypnosis has proved instrumental in bringing hypnosis into more of today’s graduate schools curriculums. Diane, a 1983 graduate of San Diego University, holds a Master’s degree in Speech Language Pathology and Audiology. Her passion has always been in working with children. After seeing her first client with autism in 1980, Diane’s reputation for working effectively with this challenging population grew. Contributing to her clinical successes is her comprehensive assessments; emphasis on the whole child; inclusion of family members in treatment; and respect for the individual rather than devotion to a treatment model. She has advocated tirelessly for the appropriate educational placement and services for special needs children. Diane has blazed new territory with hypnotic and strategic work with children in the autism spectrum. She has conducted clinical trainings domestically and internationally as well as having written on the subject.

While their work focuses on different clinical populations, Diane and Michael share a common strength-based orientation that engages Erickson’s utilization principles. The similarity of their clinical approaches stimulates mutual curiosity and enhances creative problem solving, benefitting both their work and relationship. Their home has separate office spaces divided by a glass doorway, a design that harbors containment while inviting interactive participation.

Sweetharts since their teen years, they committed themselves to grow together and they will celebrate 35 years of joy in marriage this August. Their daily rhythm reflects adaptation, acceptance, and respect for individual differences. Michael likes to immerse himself in music, and Diane enjoys gardening—yet these individual pleasures are pursued in a backdrop of mutual consideration for each other’s time. Both would prefer to share time together, and that is their priority. Love of the outdoors, taking hikes, and the simple pleasure of sitting in their backyard haven are ways they enjoy relaxing together.

When asked what a typical day looks like, they spoke of the good fortune of similar internal clocks, getting up early and sharing the tradition of connecting with each other over a cup of coffee (or two) before the day begins. Morning conversations include touching base about activities, appointments, and the process of planning to navigate the business day as a team. The day ends with a review of what has been done, what is left hanging, and reflections of interactions and activities. On days off, they typically share relaxed time with their lifelong best friends, further allowing them to revel in the reflections of growth and change over time.

While commitment to individual professional pathways fostered strong identities as clinicians and teachers, such dedication often compromised their time together. Six years ago, the Yapkos elected to unite their energies to find a path that would facilitate more time together. Each made the decision to reduce their individual clinical practices and jointly expand their work in the arena of workshops and teaching. As part of the redirection, they chose to increase home-based work. To facilitate that, they decided to leave their long-time home near the ocean and build their dream home in the rural hills of northeast San Diego. The intense collaboration of designing and building a home was one of their greatest pleasures and brought forth artistic expressive elements and a clearer vision of future directions.

At the time, Michael already had a demanding schedule of clinical trainings across the US and abroad, just as he had for the past 20 years. But, his interest turned to conducting longer and more intensive teaching programs than the traditional two or three-day long seminars. Michael and Diane explored various ways to design and try out creative methods of addressing professionals’ needs for both introductory and intensive professional education. The framework they settled on and have now successfully run for four years includes a series of 100-hour workshops in clinical hypnosis and strategic psychotherapy. While the Yapkos’ primary focus is to provide these workshops in Southern California, interest in the uniquely structured training frequently takes them elsewhere. Applying their strength-based philosophy, Diane attends to the administrative and management functions while Michael attends to presentations and teaching.

A new generation of clinicians is being cultivated as the outreach to more countries is expanded and the use of technology is integrated. As Diane has done in the area of developmental disorders, Michael has given generously of his time and resources to address public needs. Through the use of public media and his publications, he has raised awareness of the problem of depression and clinical uses of hypnosis. To view the extent of the outreach, visit their website http://www.yapko.com.

Michael’s passion and interest in clinical hypnosis and depression has been acknowledged by his peers with numerous professional awards. By authoring the first books ever written on the subject of treating depression with hypnosis, he became recognized as an effective change agent. His work took another jump in visibility with his authorship of Suggestions of Abuse, (1994, Simon & Schuster, NY), noisily launching what came to be known as the “Repressed Memory Controversy.” While other professionals did important research and legal groundwork, Michael reached out to clinicians by examining, advising and influencing the needed step-by-step changes within the profession. Perhaps his greatest contribution to the field, though, is his hypnosis textbook Trancework (3rd edition, 2003, Brunner Routledge, NY). Providing a sophisticated guide to learning the skills of clinical hypnosis, the text is among the most widely used by universities.

“She has no-nonsense clarity, and knows how to make ideas functional.” Diane describes Michael as being the “reflective one, goal oriented and gifted in both intelligence and humor”.

See POWER on next page
congress continued from page 1


The Eleventh Congress will include keynote presentations, short course presentations, a Fundamental Hypnosis Track and more.

For complete information contact The Milton H. Erickson Foundation, Inc., 3606 N 24th Street, Phoenix, AZ 85016-6500; Tel, 602-956-6196; Fax, 602-956-0519; Email, office@erickson-foundation.org; Web, www.EricksonCongress.com

Online registration is available or use the registration form on page ___ to register at the lowest rates!

IN MEMORIAM

Professor Keichi Miyata, president of the Japanese Society of Hypnosis, passed away February 10, 2011. Services were held in Kyoto, Japan. Professor Miyata was the pioneer of brief therapy and Ericksonian approaches and hypnosis in Japan. He established the Japanese Association of Brief Psychotherapy and was the founding editor of the Japanese Journal of Brief Psychotherapy.

Professor Keichi Miyata was a great friend of the Erickson Foundation having served on conference faculty. With deepest condolences to his family and the colleagues he impacted. We share your grief. – Jeffrey Zeig, Ph.D., Director, The Milton H. Erickson Foundation, Inc.

Correction:

The Feature Interview with Thomas Szasz (Winter issue, Vol. 30 #3, page 1) should have been cited by Jeffrey A. Schalar, Ph.D. We regret the omission.

power continued from page 4

and hypnosis organizations around the world. Michael is currently working on a new 4th edition, which is expected to come out in 2012. He has written more than a dozen books, the most recent of which is Depression is Contagious (2009, Free Press: NY). That book was reviewed in the spring issue of this Newsletter and the review can be read online. One important aspect of this book is that, like Suggestions of Abuse, it reaches out to both professionals and the public, and clarifies the societal perceptual shift necessary to address this pervasive problem.

While Diane also provides workshops and writes in her areas of expertise, she is quite comfortable in acknowledging that Michael’s contributions are more numerous and well known. She reports, “We’re not in competition with each other. I get as much pleasure and pride out of Michael’s accomplishments, as if they are my own.” Michael describes Diane as being “concrete in the best of ways: pragmatic, even an intellectual anarchist.” He states that she is his “best critic,” “hardest critic,” “most playful challenger,” and “most important contributor”. “She has a no-nonsense clarity, and knows how to make ideas functional.” Diane describes Michael as being the “reflective one, goal oriented and gifted in both intelligence and humor”. In response to questions asked as to whether Diane is ever perceived as submerged or a mere ‘support’ to Michael, both vigorously denied that construct—“The sense of us transcends I or you. It isn’t about me, it is about we.” Their playfulness with each other and the deep love they share is obvious when you’re with them. Michael stated, “When we walk into a room together, people see how I look at her -- she is everything.” Those loving feelings are stated in another way in the dedication of his most current work: “To Diane, whose effortless ability to light up a room just by entering it highlights that love is contagious, too.”

The bond of cooperative communication they live facilitates scaffolding of efforts. Dialogue generated by two intelligent minds, four ears, four eyes and two sets of impressions enhances the process of evaluation, reflection and revision. By knowing themselves and the cooperative underpinnings of who they are as a couple, they create a dynamic marriage that affords them the flexibility to work together on multiple levels that enrich life. They live what they teach—commitment, hard work, dedication, appreciation, and balance of work with pleasure. They bring forth an energy that tells the story of the power of two in a way that words cannot.

editor continued from page 2

Bill O’Hanlon finishes with his pragmatic Quick Steps to Resolving Trauma reviewed by Rubin Battino. O’Hanlon’s books are always filled with precious clinical nuggets.

While our industry continues forward, we are reminded of the usefulness of classic approaches in Dan Short’s interesting and provocative use of automatic writing in his Case Report and in Rubin Battino’s review of Dabney Ewin and Bruce Eimer’s Ideomotor Signals for Rapid Hypnoanalysis: A How-To Manual. Likewise, John Lentz’s DVD review of James Bugenthal’s classic Existential – Humanistic Psychotherapy shows the historical seeds of our modern integrations.

The Brief Therapy Conference this last December in Florida beautifully integrated the developing allostatic models with solid, practical applications. In this issue, I wanted to included a review of all of the keynotes, workshops and panels. Unfortunately, because of space limitations we are only able to present a sample. If you missed the Brief Therapy Conference last year, it will be in Anaheim, California in 2012. You won’t want to miss it. A complete review will be posted www.brieftherapyconference.com

Speaking of gatherings you will not want to miss, please join us at the 11th International Erickson Congress this December in Phoenix, Arizona. As I look at a preview of courses that will be presented, I am fascinated how the process of evaluation, reflection and revision, and two sets of impressions enhances the allostatic model is expressed through the Ericksonian lens. This will be a landmark Congress. I hope to meet many of you there.

Rick Landis
Orange, California
Lilian Borges Zeig, MA, LPC

Interviewed by John D. Lentz, D.Min.

Lilian Borges Zeig, MA, LPC, is a licensed Professional Counselor with more than 18 years of experience conducting and teaching psychotherapy, Ericksonian hypnosis, and brief therapy. She is an invited teacher at the Milton Erickson Foundation for their Intensive Training programs. She is the director of Milton H. Erickson Institute of Brasilia in Brazil, and Singapore. She teaches Medical Psychology and Medical Hypnosis for medical students in Arizona. Lilian has conducted seminars in the US and internationally. She is a licensed psychotherapist both in Brazil and the US. Currently she has a private practice in Phoenix, Arizona. She had worked with the severe mentally ill (bipolar, borderline, and suicidal) for the past few years. Lilian has a vast multicultural knowledge and conducts programs in English, Spanish, and Portuguese.

JL: How do you view spirituality as part of psychotherapy?

LBZ: I think that psychotherapy is spiritual work. It helps people to solve conflicts, to overcome obstacles in life, and to improve themselves. It also helps us cope with life’s limitations and difficulties. As a result we are more able to love and contribute. We are more at peace, and more okay with who we are.

I need to focus on a problem as it appears in the present moment, to be with it, at look into it without judging or criticizing--just taking an accepting attitude. As we accept things as they are, new possibilities appear, and change is possible. Accepting ourselves and our limitations without avoiding them helps us grow spiritually. We model that process for our patients. Erickson remains a great role model because he was respectful and accepting of patients as they were with their limitations and strengths. His utilization principle is a great example of how acceptance of things can elicit new possibilities. Even the patient’s limitations and resistances can be used to help them overcome problems. Utilization represents compassion and humility in a therapeutic posture. As I grew as a therapist and learned Ericksonian psychotherapy, I understood that to accept my patients as they are is to accept them as spiritual beings.

JL: Would you give us an example?

LBZ: When I was living in Brazil I had an eleven year-old child, Pedro, referred to me. Although I usually do not see children I agreed to see this one because the family was so desperate. The child was hearing voices and was very scared because the voices wanted to come and get him. It was disturbing his sleep enough that his family moved him to his grandma’s home. A psychiatrist had prescribed an anti-depressant. When Pedro arrived with his mother and aunt, I learned that his parents divorced recently and that he was closer to his father who had stayed with them during the day while mother worked two jobs as a nurse and arrived home late at night. Since the divorce Pedro and his older sister would come back from school and do the household chores, their homework, and put themselves to bed. Pedro looked really scared especially when I asked him about the voices he was hearing. He told me about the voices and also that he missed his dad and that he was very close to his father and not so close to his mother. The voices were not so clear, but he was afraid of them because he thought they were spirits.

We discussed the voices and a little more about the family situation, and finally I told Pedro that I was not sure that the spirits wanted to get him. They might want to help him. I told him about a doctor, who owned a hospital in the city where I lived who also heard the voices of spirits. The spirits gave him advice including advice for his patient, which was a true story. Since Pedro was the most sensitive member of the family, I thought that the voices were trying to help. I told Pedro that instead of trying to hide and avoid the voices, he should ask for advice. I told other stories about how spirits help humans, especially children. I told him to go home and ask for advice every day. He should wait for mother to arrive home and they would pray together, asking for advice. We rehearsed a little prayer in the office and waited for an answer. Mother said it was okay with her to pray every day with her son for a few minutes because then her son would go to sleep. That was the last time I saw Pedro. He moved back to his mother’s home and did not have problems with voices anymore. He was actually praying for advice every day.

JL: I can see how utilizing a person’s spirituality is important to you today. How come spirituality was so important to you, before?

LBZ: I studied in a Jesuit school and we used to have spiritual retreats. In one of these retreats I found out that I could have a relationship with God, and prayer was not only repeating memorized words, but actually listening to God. This experience affected me deeply; it brought me joy. It is not related to any organized religion. Spirituality is an important driving force in my life. It is also an important driving force for many of my patients as well. It gives them hope, guidance, resilience, purpose and mission in life. Spirituality is very important part of our identity, culture, habits, relationships, etc.

JL: What differences have you noticed spirituality between Brazil and the US?

LBZ: Brazilian religions are very diversified and inclined to syncretism. Religious syncretism is the blending of two or more religious belief systems or unrelated traditions into a new system. As a result I believe that Brazil is more flexible regarding spirituality. In the US people tend to be more rigid in the way they express their spirituality. In the US people don’t blend their traditions much.

JL: How did your attitude toward spirituality change since living in the US?

LBZ: In the US I discovered new Spiritual groups and practices. As I started using new practices, I started becoming more compassionate with myself because I saw how my ego operates. Also, I started traveling around the world and became more aware of different cultures and different religions. I traveled to India, Japan, Singapore, and Latin America. Each country taught me something and expanded my understanding of spirituality and helped me connect even more with mine.

JL: Thank you so much for your openness. I appreciate how willing you are to share your experiences.

Jeffrey K. Zeig, Ph.D.

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The Milton H. Erickson Foundation Newsletter
VOL 31, NO. 1

The Cape Cod Institute, now in its 32nd season, is a summer-long series of in depth, week-long courses taught by leading thinkers and teachers.

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Jeff Zeig
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**Reflections with Dr. Marion Moore & the Hypnotic Handshake Technique**

By Mark S. Carich, Ph.D.

As a young graduate student in 1984, I attended an ASCH workshop. At the workshop, I encountered Marion Moore, MD, who was providing a lecture and demonstration on rapid trance induction. Upon requesting a demonstration subject, a physician came forward. As the subject shook hands with Dr. Moore, Dr. Moore facilitated a cataleptic state and the demonstration subject became immobilized.

Originally, I thought this was staged. However, I soon realized that this was in fact a real trance state because the subject did not move. It seemed magical. Dr. Moore then continued the lecture on rapid induction techniques.

During the break, I sought out Dr. Moore to get further details and insight on the demonstration of the handshake technique. He was kind of enough to spend time teaching me the “hypnotic handshake” method. He spent most of the break showing me how to do it. He also filled me in on the history of how the technique was originally developed by Dr. Erickson.

While that particular interaction lasted perhaps 10-15 minutes, the impact for me was life long. On a personal level, the fact that a well-known authority would actually take time out and provide personal instruction and stories about Dr. Erickson, gave me a perspective into the nature of the Erickson Foundation community. It was a realization that the Erickson perspective was a humanistic perspective that included action as well as ideals. This lesson is something that resonated within me through today.

On a professional level, it leads me to think outside the box. That experience showed me that any verbal or nonverbal response from a therapist could become an intervention, from a simple Rogerian, nonverbal nod to a handshake. That understanding later led me to develop the pulse rate technique with alcoholic clients at a detox and rehab center, which I used as we took vitals on each client. This technique was published in the 1989 ASCH newsletter with Cathy Junge, a graduate student and nurse at the time.

A delayed “thank you” goes out to Dr. Moore, in appreciation for the few minutes of his busy day that he took out for a curious grad student, thus making a life long impact.

Ed. Note: Marion Moore, MD, was a close student of Milton Erickson’s starting in the 1960s and continuing until Dr. Erickson’s death in 1980.
THE MILTON H. ERICKSON FOUNDATION

Presents

2011 INTENSIVE TRAINING IN ERICKSONIAN APPROACHES TO HYPNOSIS

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| ADVANCED     | July 25 - 29        |             |

“And my voice goes everywhere with you and changes into the voice of your parents, and your teachers, your playmates, and the voices of the wind and the rain…”

Wizard of the Desert

A film by Alexander Vesely

Completion funds are needed for Alex Vesely’s documentary on the life and achievements of Dr. Milton H. Erickson.

These funds are necessary to recreate moments in Dr. Erickson’s life.

Be a production angel...!

Donate to the project by going online to the Foundation website Erickson-Foundation.org and clicking on “Donate.”

Or send a check to the Foundation and mark it: WIZARD OF THE DESERT.

See a brief clip from the film at www.youtube.com/user/CLIPWERKCREATIVE

MILTON H. ERICKSON FOUNDATION
3606 North 24th Street • Phoenix, Arizona 85016
FAX: 602-956-0519 • VOICE: 602-956-6196
Toll-Free in the U.S: 1-877-212-6678
The island has a tropical climate, and wonderful characteristics such as delicious food, cleanliness, organization, and respect for diversity within its variety of religions and cultures. You may find one Hindu temple next to both a Mosque and to a Chinese temple. Moreover, the religions are respectful to each other.

Psychotherapy does not have a long tradition in Singapore; however, due to the diligent work of the members of The Milton Erickson Institute of Singapore, psychotherapy is becoming a growing profession on this island. It has been an intense labor of love and work.

At present, The Milton H Erickson Institute of Singapore has three co-directors: the founders, Lucy Heng, her husband, Raymond Ong, and Lilian Borges Zeig. Mr. Ong has an extensive background in Telecommunications. He has great interest in Chinese Traditional Medicine and the practice of Qi Gong and Tai Chi.

Raymond Ong now oversees the running of the Whole Person Centre Pte. Ltd, as well as The Milton Erickson Institute of Singapore.

Lucy Heng graduated from The London School of Commerce and Management and has been the founder and Managing Director of the Whole Person Centre since 1988. For the last 22 years, her organization has provided a diverse range of personal growth training, corporate training, and wellness seminars and courses. Ms. Heng is a trained Brain Gym instructor and consultant for children, adults, and schools. She has been teaching Brain Gym classes in senior homes, as well as consultation work on a volunteer basis.

In 1999, Fr. George Zee, from Hong Kong, an associate of the Whole Person Centre since 1988, introduced Lucy Heng to Dr. Jeffrey Zeig. Since then, Ms. Heng came to learn about the history of Milton H. Erickson’s work in psychotherapy and hypnosis and about the Milton H. Erickson Foundation. Lucy found Erickson’s work and history profound, and decided to introduce Ericksonian psychotherapy and hypnosis to a professional audience in Singapore. The first Ericksonian workshop was held in 2004. Dr. Zeig was invited to conduct it. Not only was it well-received, it also awakened interest in many people in Singapore.

Every year since then, Dr. Zeig has been conducting workshops to help and enrich the professional lives of workshop participants. Lucy mentioned: “He has been a motivator, an inspiration, and a model in teaching Ericksonian psychotherapy and hypnosis. He draws more and more students into this field”.

Not only Dr. Zeig, but also renowned speakers such as Michael Yapko, Bill O’Hanlon, Steven Lankton and Maggie Phillips also have held and conducted workshops. Through the Milton H. Erickson Institute of Singapore these trainers have continued to contribute their teachings and expertise in Singapore.

In July 2008 they established The Milton Erickson Institute of Singapore to continue teaching Erickson’s work for professional students. In the future, Raymond and Lucy have plans to bring more wonderful Ericksonian teachers and trainers to Singapore.

Lucy and Raymond invited Lilian Borges Zeig to be part of the Board after she came to the island with her husband, Jeff Zeig. Both Lilian Borges and Jeff Zeig have been generous with their contributions and work for this Institute. Their work has found an audience that collectively considers Milton H. Erickson a much-loved genius. Also, they have found Dr. Zeig to be wonderful, considerate, and an excellent teacher, as well as being a much-loved person. Our students want to continue that lovely work with him and with his wife, Lilian, so they can be the bridge to connect Milton H. Erickson’s work in Singapore, bringing more teachers and trainers to continue introducing this useful psychotherapeutic work.

The Milton Erickson Institute of Singapore’s great team’s vision is to be a locus point that reaches out to professionals in neighboring countries including Malaysia, Indonesia, The Philippines, and Thailand. Lucy Heng and Raymond Ong also look forward to hosting their first Asia Pacific Regional Conference in the near future.

As described above, The Milton H. Erickson Institute of Singapore is an Institute with great ideals and missionary work, open to further developing appropriate training courses. It contributes in a most definitive way to the expansion of Ericksonian approaches in Singapore.

For further information contact: wpclucy@singnet.com.sg
There are times a distressed individual is desperate to communicate to others yet cannot. Such was the case of 14-year old Michael.

Michael’s therapist, Anita, addressed his failing grades, defiant behavior, drug use, and emotional outbursts. She reflected his concern that homosexuals are treated unfairly. He’d been prescribed Concerta and Paxil. Nothing was helping. Anita wanted me to test him for learning disabilities.

On first meeting the family, I felt their care and concern for one another, and Michael’s sad, gentle demeanor. There was no evident antagonism or criticism. But, they said, Michael had developed a violent temper. He smashed his chair after mother touched his shoulder and asked him if she could help him with his homework. He shouted profanity, seeming hateful. Mother pleaded with her son, “Your father and I love you! We don’t know why you’re acting this way.” Michael couldn’t explain his behavior or why he was so furious inside. He sank into the couch, his face full of shame and remorse. The parents had tears in their eyes: “We always have been close to him. But now, it feels like we have lost our son.”

I interviewed Michael alone. He said all of this trouble began one year ago, and his parents concurred. I asked about significant events preceding these symptoms. Had anything scary or threatening happened to Michael? They all insisted that during his time at home and at school, there had been nothing out of the ordinary.

From testing I learned Michael had average I.Q. and educational achievement. His emotional turmoil wasn’t from struggles with learning. His drug use followed other severe symptoms. Drugs alone didn’t cause his problems.

I asked the parents to think hard about any event of a year ago that seemed unusual. Mother recalled, “There was that strange dehydration he had after the church ski trip.” While returning home on the bus, their son suddenly hyperventilated. His hands and arms retracted and froze in place. He indicated frantically that his heart was hammering. He was rushed to hospital. The doctors couldn’t explain it. I asked Michael about this, but he seemed indifferent, denying any prior anxiety. I asked the parents if I could meet privately with Michael using hypnosis to investigate. Desperate, they agreed to do whatever it took.

I explained why hypnosis might help, and obtained Michael’s consent. After a brief induction, his eyes closed, his breathing slowed, and his head tilted forward. I explained that during trance he’d be able to tell me things that he couldn’t say while awake. Michael developed glove anesthesia and arm levitation. When I asked him what he felt inside, he responded, “Peace and happiness.” As he spoke, his left hand, which was on his leg, writhed violently. I noticed slight movements in his throat but I couldn’t make out what he was saying. I told him that it’s sometimes easier to write things that we cannot say, and placed a clipboard on his lap and a pen in his hand. Michael responded with automatic writing. I assured him I would take the paper away before he awakened from trance. He would not have to see it. Here is what he wrote:
## UPCOMING TRAINING

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## SUBMISSIONS NEEDED!

**NEW COLUMN: “About Milton Erickson“**

The Erickson Foundation Newsletter is searching for professional and personal stories about Dr. Erickson for the new column *About Milton Erickson: Reflections of time spent with him*. Stories about how he influenced your work also are encouraged. For information or to submit your stories please contact:

**karen@erickson-foundation.org**

*(Please include ‘About Erickson column’ in the Subject line)*

**JOIN THE FOUNDATION E-MAIL MAILING LIST!**

Receive Conference announcements and registration specials; information on audiotape/videotape, and CD/DVD specials from the Erickson Press; automatically receive the Online version of the Erickson Newsletter and more. Sign-up on the Foundation’s web site:

[www.erickson-foundation.org](http://www.erickson-foundation.org) - The Erickson Foundation will not sell or rent your E-mail address to any person or organization.
CONFERENCE NOTES

The Cape Cod Institute will hold its summer long series of 28 week-long in-depth continuing education courses for mental health and management professionals, taught by leading contributors to knowledge and practice. Sessions are held Monday-Friday mornings, leaving the afternoons free for leisure and study. The courses are approved for continuing education credit for various professional groups. For Further Information: Cape Cod Institute, Professional Learning Network, LLC, 270 Greenwich Avenue, Greenwich, CT 06830; Tel, (Toll-Free): 888-394-9293; Fax, 203-629-6048; Email: institute@cape.org ; Web, www.cape.org

The European Society of Hypnosis (ESH) is holding their 12th annual Congress Transcending the Mind-Body Bridge by Hypnosis, August 16-20, 2011, at the Sheraton Istanbul Maslak Hotel, Istanbul, Turkey. The Congress will attempt to bridge hypnosis and medicine through East and West synthesis. The Congress consists of keynotes, invited lectures, symposia, panels, workshops and posters. For more information visit the Congress site: www.hypnosis2011.com

The Milton H. Erickson Foundation, Inc. presents the Eleventh International Congress on Ericksonian Approaches to Hypnosis and Psychotherapy, December 8-11, 2011, at the Phoenix Hyatt Regency, Phoenix, Ariz. The Congress is co-sponsored by Southwest Behavioral Health Services. The Faculty include more than 50 presenters from around the globe. A Pre-Congress is offered on December 8 and includes a selection of six workshops: Law & Ethics, Introduction to Ericksonian Hypnosis, Ericksonian Approaches with Children, Anxiety Disorders, Ericksonian Story-Telling, and Advanced Ericksonian Hypnosis. A Post-Congress workshop also is offered on December 12 with Jeffrey Zeig and Michael Yapko entitled, Advanced Hypnosis. For more information contact The Milton H. Erickson Foundation, 3606 N 24th Street, Phoenix, AZ. 85016-6500; Tel, 602-956-6196; Fax, 602-956-0519; Email, office@erickson-foundation.org ; Web, www.eleventhcongress.com A registration form is included in this issue of the Newsletter on page 2. Online registration also is available.

The 19th International Hypnosis Congress of the International Society of Hypnosis (ISH) originally scheduled for Melbourne, Australia, has been relocated to Bremen, Germany. It will be held October 17-21, 2012. Organizer for the Congress is Bernhard Trenkle, director of the Milton Erickson Institute Rottweil (Germany). For complete information visit the Congress Web site: http://www.hypnosis-congress.com/ For Pre-registration information Email: registration@hypnosis-congress.com. The official registration process is starting in January 2011.

BOOK REVIEW

Understanding Autism Spectrum Disorders
Frequently Asked Questions

Diane Yapko, M.A.
Jessica Kingsley Publishers
London, UK
www.jkp.com
2003, 224 pages
ISBN 978 1 85302 577 8
Reviewed by Wendel A. Ray, Ph.D. and
Courtney Brashear, M.S., M.A.
Monroe, Louisiana

Understanding Autism Spectrum Disorders: Frequently Asked Questions is a well-organized and valuable compendium of information about one of the most challenging problems of our day, Autism. Designed as a resource for parents, families, teachers, beginning and seasoned physical/mental health professionals, and people diagnosed on the autism spectrum themselves, this book uses non-technical language with a hope-filled tone to present a broad range of information.

A diagnosis anywhere along the autism spectrum can be devastating for a family. Parents become flooded with feelings of fear, guilt, helplessness, despair, and even panic, as hopes and dreams for their child are shattered by a diagnosis that may seem like a death sentence. Confronted with a maze of overwhelming information, an autism spectrum diagnosis can leave parents, teachers, and even qualified professionals with more questions than answers.

Fortunately, help is at hand in this well-written book by Diane Yapko. Drawing from years of experience and a deep knowledge of autism, Yapko provides tangible assistance and genuine compassion in the form of factual information and practical guidance. Among the most appealing aspects of Yapko’s book is the engaging question and answer format used to present up-to-date information about this complex and often misunderstood topic. The book is organized in related parts: diagnosis and characteristics; causes; medical issues; and treatments, intervention programs and approaches. The Q & A approach allows the reader an easy to use guide to understanding the diagnosis of autism spectrum disorders (ASD), as well as an extensive review of proven treatment approaches.

A veritable encyclopedia, the reader is offered detailed introductions, overviews, and even website information about various treatments, interventions, and support groups. In addition to basic knowledge about ASD, Yapko provides information on many of the disciplines that will be involved in the therapeutic process. She also addresses how each treatment professional (Speech-language pathologist, Occupational Therapist, Physical Therapist, etc.) might provide services to someone diagnosed with ASD and to their family members.

Extremely well researched and of vital interest to parents is the balanced and fact based approach to the “hot topic” of what causes autism. Both reviewers have personal and professional experience living and working with individuals diagnosed with ASD of various severities, and both benefitted from reading this book. Among the most valuable contributions of this book is how it demystifies ASD and offers hope to parents. Persons diagnosed with ASD can be challenging. They desperately need their parents and other loved ones not to despair or give up, but instead to educate themselves about ASD. By learning more about this problem, they will be able to provide the best learning/living context possible for their loved one diagnosed with ASD and help themselves during the long journey toward the best future attainable. In the emotion charged atmosphere of ASD this is much easier said than done. This unassuming book offers just the kind of practical guidance needed by parents, teachers, and professionals to provide the difference that makes a difference in the lives of those diagnosed with ASD and their families.

The Newsletter is Online! www.erickson-foundation.org
The Hero’s Journey: A Voyage of Self-discovery

By Stephen Gilligan and Robert Dilts
Crown House Publishing
Bethel, CT
www.crownhouse.co.uk
2009, 272 pages
Reviewed by: Betty Alice Erickson, M.S.
Dallas, Texas

The Hero’s Journey by Stephen Gilligan and Robert Dilts is truly a voyage aimed at self-discovery. Based on a four-day seminar, the book offers a picture of the authors’ energy and the audience’s receptiveness. They define the hero’s journey: We all have wounds as well as gifts, and we all face the journey of joining the two—healing wounds and giving gifts to ourselves, others, and the world.

Both authors have backgrounds in NeuroLinguistic Programming and use it as an adjunct for describing and explaining. They lay out steps of the journey with clarity, exercises, and even pictures.

Bases for concepts are thoughtful and logical. Lovely and relevant poetry is interspersed throughout the book as well as references to a variety of people—from Bateson to Nijinsky. Part of this book’s appeal is how the authors good-naturedly play off each other’s words leading the reader to feel a real part of that intimacy and warmth.

As the seminar and book draw to a close, Gilligan and Dilts encourage the audience with ways to continue their journey. Their “Self-Sponsorship for Health and Healing” uses a self-hypnosis technique enhancing focus on the inner-self world.

They conclude with a powerful exercise with a volunteer, to find “guardians” to help on the journey. Guardians are entities that really see and hear you and give blessings with the message: You have something special to contribute. Gilligan uses Milton Erickson as an example—a being who really saw him and gave him blessings.

The naturalness and warmth of The Hero’s Journey is a huge asset, and paradoxically, a limitation—the reader is not a true part of this seminar. However, there is much more than a taste of the essence, and readers can easily follow the flow to many of the contained benefits.

Gilligan and Dilts have put together an excellent seminar and a very good book, with high-quality material presented in a pleasing format. Their personalities, enormous abilities, wide-range of backgrounds and genuine caring can shine through the mists of everyone’s journey.

Part of this book’s appeal is how the authors good-naturedly play off each other’s words leading the reader to feel a real part of that intimacy and warmth.

Mindfulness and Acceptance: Expanding the Cognitive-Behavioral Tradition

Edited by: Stephen C. Hayes, Victoria M. Follette, and Marsha M. Linehan
The Guilford Press
New York
www.guilford.com
2004, 319 pages
Reviewed by: Maria Escalante de Smith, M.A.
Cedar Rapids, IA

Mindfulness and Acceptance, Expanding the Cognitive–Behavioral Tradition addresses a new set of behavior therapies developed over ten years. The book covers nontraditional themes such as mindfulness, acceptance, values, spirituality, being in a relationship, focusing on the present moment, and emotional deepening.

Chapter One reviews historical aspects of Acceptance and Commitment Therapy and how this approach “rejected existing clinical theories and technologies that were poorly specified, vaguely argued and little researched” (p.2). It asserts that clinicians should abandon the emphasis on hypothesized unconscious fears and desires and focus instead on direct symptom relief. In Contexts Supporting a New Generation of Behavior Therapy (p.3-4), readers can learn about the emergence of the new behavior therapies, constructivism, and other postmodernist theories.

Chapter Two, “Dialectical Behavior Therapy” addresses how this approach began as a simple application of standard behavior therapy to treat suicidal individuals who did not have the requisite skills to build a life worth living. The idea was to help them build those skills, as Milton H. Erickson would have done, to orient them toward the future. There is also reference to the importance of acceptance and change in the therapy, and hierarchical prioritizing of treatment targets.

Acceptance and Commitment Therapy (ACT) emerged from behavior analysis that “conceptualizes psychological events as a set of ongoing interactions between whole organizations and historically and situationally defined contexts” (p. 7). Contextualists are supremely interested in function over form, because formal events have no meaning.

I also learned that the goal of ACT is to produce more psychological flexibility. The facets of the model are Contact with the Present Moment, Values, Committed Action, Self as Context, Diffusion, and Acceptance.

Novice readers can learn some basic techniques that are part of the ACT model, for example the idea of confronting the Model: Creative Hopelessness and a Transcendent Sense of Self where perspective taking is critical.

Chapter Six addresses “Values Work in Acceptance and Commitment Therapy”. A section of the chapter named “Sources of Suffering” focuses on learning history as pathogen, and the importance of an alternative view.

The book includes chapters for using ACT for specific purposes, for example treating Generalized Anxiety Disorder. This chapter deals with a fascinating topic: Worry, that as T.D. Borkovec and Brian Sharpless explain, “Involves thinking and talking to oneself” (p. 209). Anxious sequences appear upon detection of internal or external stimuli that have a threatening meaning. Anxiety is anticipatory, and a good way to deal with this situation is self-monitoring and relaxation. In my view, ACT and Ericksonian Psychotherapy can be combined during treatment, because by using both, we can address the rational analytic part of the brain and we can also work indirectly with the unconscious component of the symptom.

Chapter Eleven addresses the treatment of eating disorders. Bulimia Nervosa, for example, is characterized by binge eating and recurrent compensatory behavior designed to influence body shape and weight (e.g. self-induced vomiting) and dysfunctional evaluation about shape and weight. The treatment that is recommended in the book for this disease is manual-based, cognitive behavioral therapy, because it typically eliminates binge eating and purging in 40-50% of all cases. The book also states that this therapy is enhanced by the use of antidepressants.

The text also includes a chapter about how to use this approach with couples, where individuals can learn about the importance of labeling emotions and practicing and enjoying living together.

I enjoyed reading this book. I really recommend it.
WITH YOUR HEARTFELT HELP, WE CAN BUILD COMMUNITY IN TWO WAYS

The Foundation was created in part to ensure that the legacy of Milton H. Erickson M.D. continues through education, research, and preservation. Join us as an active partner in this ongoing mission. Be a part of the legacy by donating to the Milton H. Erickson Foundation. Two specific areas are especially in need of your thoughtful generosity.

I. A new “Home” for the Foundation

WE ARE MOVING LATE THIS YEAR!
The offices/archives for the Milton H. Erickson Foundation and the Foundation Press are currently housed in three adjoining “bungalows” built in the late 1940s. Having long outgrown these quarters, the Foundation recently acquired a two-story office complex—not far from the current headquarters. The structure now bears the handsome sign: “The Erickson Building.”

The building budget is $250,000 (or $50 - $60 a square foot). You can assist us in the monumental task of relocating and creating a viable, responsive, and proactive Foundation home for decades to come.

Become:
A FOUNDATION FRIEND. $10 -$99
KEYSTONE PATRON. $100 - $999
GUARDIAN. $1000 - $4,999
BENEFACTOR. $5000 - $9,999
LEGACY CIRCLE. $10,000+

For any contribution, we will send you a handsome certificate of appreciation. For contributions of $500 or more, you will receive a certificate of appreciation, plus your name will be inscribed on a donor’s Wall of Honor displayed in the reception area at the new Foundation offices.

You can also specify how your gift is spent, whether it is to be used for furniture, display cases, archival storage units, office construction, IT equipment, office equipment, and so forth. In addition, Legacy Circle members can even designate funds to be used to finish a room—which will have your name on it.

Another way to donate…

A Monthly Gift
When you provide a monthly gift—no matter what the size—you provide the Foundation with a consistent and reliable source of funding that allows us to plan ahead. The benefit to you is an easy method to donate via your credit card, complete statements provided for tax purposes, the knowledge that your donation is put to work immediately—plus flexibility: You can change or suspend your donation at any time.

Also, if you have memorabilia from or about Dr. Erickson, you can loan these to the museum without giving up ownership. Jeff Zeig will be placing at the museum all personal items he received over the years from both Milton and Elizabeth Erickson.

II. Preserve the Erickson Home

Located in Central Phoenix, the Erickson home sits on a double lot with a detached cottage that served as Dr. Erickson’s professional office and teaching study. In 2010, the Foundation purchased the Erickson family home with the goal of maintaining the property, and especially Dr. Erickson’s office, as a museum to both the man and the place where modern clinical hypnosis was born. Consider a monthly gift to help us meet this ongoing responsibility.

Mail your check to the Foundation, or donate today online at www.EricksonDonations.org
Haunted by Combat: Understanding PTSD in War Veterans

By Daryl S. Paulson, Ph.D., and Stanley Krippner, Ph.D.
London
www.rowmanlittlefield.com
2010, 202 pages
ISBN: 978-1-4422-0391-4

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

With our country still at war, an ever-growing number of people are suffering from PTSD. Stanley Krippner, a distinguished psychologist in hypnosis and consciousness, teamed up with Daryl S. Paulson, also a psychologist and a Vietnam veteran, to create an indispensable guide to understanding and treating PTSD. Their book provides a unique blending of third-person research with first-person narratives, making it both informative and evocative, conveying facts along with personal experiences. You step inside the mind of the sufferer while also gaining the objectivity of years of collective knowledge—an invaluable combination!

Originally written in 2007 and revised in 2010, the book is divided into twelve chapters. It opens with an overview of the effects of trauma on the mind, brain, and body. Next, an instructive tour through the history of the diagnosis and treatment of trauma explains how this age-old problem now has its new name, PTSD, and updated definitions. Chapter Three offers a unique look at the phenomenology of PTSD through personal accounts that light up the darkest corners of combat, giving us beneficial insight for empathic understanding. A chapter on coming home from war includes a historical account of how the U.S. military and society have dealt with returning soldiers from the Vietnam War to the present day. We learn how the social myths of each era have helped and hindered soldiers’ readjustment. Several chapters provide detailed and well-researched information about the unique problems of particular groups, such as reserve soldiers and civilians living in war-torn areas. Traditional treatments for trauma disorders are covered as well.

Chapter Nine, “Keys to Treating Traumas,” and Chapter Ten, “Alternative Approaches to Treating PTSD” detail the authors’ methods, including Energy Psychology. They emphasize the spiritual aspects of PTSD, calling it as much a “soul disorder” as a “stress disorder” (P. 122). Paulson gives a detailed transcript of his personal odyssey as a Vietnam combatant, through which a new approach unfolds. The method draws upon mythology and initiation rites, a specialty of Krippner, to help veterans transform the horrors of war that sickened their soul, into a rite of passage to a meaningful, strong, and healthy identity. Typically, the warrior takes a journey, goes through a series of adventures, and in the process, gains wisdom. Their innovative treatment takes combat veterans through a process that rebalances the detrimental neuropsychological effects of PTSD on the mind, brain, and spirit. Trauma sufferers find new meaning in their lives as they get in touch with the deepest ground of their Being and reconnect with the universe once again. A short chapter on remembrance and then, a final chapter offering help for those who are still in combat provide helpful advice and strategies.

The 2010 edition has been updated with an epilogue, “Still Haunted,” that discusses recent events such as the Fort Hood shooting and new developments for female veterans, suicide statistics, and some steps that are moving treatments toward working with spiritual needs and incorporating hypnotic and existential-humanistic approaches.

Haunted by Combat rings true with perceptive and beneficial ways to meet the needs of trauma sufferers. Woven throughout are touching poems and thought-provoking discussions about war, politics, and culture. We highly recommend this insightful book as an in-depth guide that opens your perception to the deeper nature of this problem and its cure.
The Milton H. Erickson Foundation Newsletter

VOL. 31, NO. 1

VOLUMES 1-10 NOW AVAILABLE!

THE COLLECTED WORKS

MILTON H. ERICKSON

Edited by
Ernest Lawrence Rossi, PhD,
Roxanna Erickson-Klein, PhD,
and Kathryn Lane Rossi, PhD

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The Simpkins are at their best thriving through meditation and yoga psychotherapy. Bridging the gap between Eastern and Western ideologies with ancient foundational teachings and modern neuroscience is an act of pure love. Meditation and Yoga in Psychotherapy offers solid research and techniques for therapists to adapt for use in effective psychotherapy. The ancients knew a thing or two about what was important to bring individuals to a peaceful mental state while cultivating optimal physical health. The Simpkins have bridged the mind-body gap with practical flair. Therapists and clients are able to strengthen their unique and individual basic skills necessary for effective coping with life’s problems and even thrive through meditation and yoga psychotherapy.

The Simpkins focus on the essential issue of most forms of coaching, counseling, and psychotherapy in their introduction. “Clients often lack the tools they need to link their attention to their thoughts, emotions, behaviors, and sensations, and yet, we frequently ask them to do so as a part of therapy… When people are disturbed by conflicts, they have increased difficulty in focusing their attention… the mental skills they lack are the very tools they need to overcome their problem and end their suffering.”

This book is organized in three sections: I. Efficacy and Neuroscience Research (41 pages) describes what is effective with meditation and yoga through research findings. It also contains a primer of current tenants of neuroscience of the brain, body, memory, and learning mechanisms. Section II, What is Yoga? (66 pages) summarizes both history and traditions in yoga and the eight philosophical limbs (ashtanga) from the ancient Yoga Sutra texts. The Simpkins integrate these eight (astao) limbs (anga) into effective psychotherapy. Section III offers applications to help with dis-ease including stress, anxiety, depression, and addictions. This section includes applications of expanding a healthy lifestyle from childhood to healthy aging (136 pages), and it is the heart of the book. There are two appendices, one, Warming Up Practices to Prepare the Body for Physical Exercise, and two, A Quick Tour of the Brain.

Addiction: 5 Steps to Lasing Release (Chapter 9) offers a holistic and compassionate way to work with client’s transitions from substance abuse to health by breaking down the steps in a way in which Eastern philosophy meets Western pragmatics.

1. Pre-contemplation: Are you ready to begin the journey from pain to comfort?
2. Contemplation: What is your deeper truth?
3. Preparing for withdrawal involves letting go of what you don’t want to make room so that the new you can do what it wants to do.
4. Action: Implement your plan both physically and mentally through yoga postures, meditation, and breath.
5. Maintenance: Use your new skills to consolidate gains and open opportunities for future growth.

Meditation and Yoga in Psychotherapy is a reader-friendly book for both people new to these concepts as well as seasoned meditators, yogi or yogini who wants to deepen their knowledge and practice with clients. The authors take special care to include all the schools of meditation and yoga. The Simpkins are at their best in describing how everyone can learn to integrate their own brain, body, and mind to facilitate a creative synchrony of healing and well-being.

Decades of research have firmly established that the therapeutic relationship is one of the key factors influencing therapeutic effectiveness. Therapists are wise to think about this aspect of treatment and use methods that will enhance it. Transformational Relationships supplies a clear analysis of interpersonal dynamics; useful ways to develop therapeutic acumen; and helpful techniques to integrate into practice methods from a well-conceived social-psychological perspective. Dan Short packs this information into a personal format, taking the reader on his own odyssey as he discovers the power and value of relationships. In addition, we get the benefit of the author’s many years of scholarly study of Milton Erickson’s work, as he teaches Ericksonian-style interventions. The entire book is richly illustrated with colorful case histories. And without interrupting the narrative flow, Short includes research as footnotes on each page, so that we can see how his ideas are supported by experimental findings.

The book is organized in two parts with eight chapters and three appendices. Part One: “Principles of Compatibility” explains the contemporary attachment theory model of interpersonal dynamics. We appreciate Short’s attitude of respect for each client’s individuality, described in Chapter One, “Verification.” We are inspired and instructed in perceiving the subtle cues people give, as we learn how to use them to establish immediately a strong rapport. Chapter Two, “Affect Attunement,” describes that unique capacity we all have to relate through our emotional experiencing. We must find an emotional fit, meeting clients where they are. “Reciprocity,” Chapter Three, incorporates the ancient wisdom of the golden rule between self and other, found in every culture. Short encourages reciprocal self-disclosure and explains how to use this in just the right ways to deepen therapeutic trust. The need for a secure attachment is universal, and yet in Chapter Four, we find ways to individualize its enhancement. Chapter Five, “Structure,” reinterprets the social hierarchies of dominance-submission as providing structure to relationships. Therapists who are aware of these power dynamics can flexibly maneuver between roles to elicit what clients need to learn, and know when to take charge and when to step back.

Part Two, “Standards of Therapeutic Relating,” looks at therapy through the lens of the transformational relationship and gives clinicians useful advice and techniques to crystallize this vision. Chapter Six explains how to use the therapeutic relationship to promote the client’s awareness of inner experiences and needs. In Chapter Seven, we learn how to help clients stabilize their self-esteem, which Short points out is a ratio of positive to negative ideas. Chapter Eight teaches how to move clients from dependency to autonomy, as they develop their own sense of personal agency. The conclusion and appendices include helpful charts and forms that will directly enhance therapeutic practice.

Psychotherapy always transpires in the realm of a person-to-person meeting, and so any therapist can benefit from learning more about this encounter. Transformational Relationships focuses our attention on the therapeutic relationship and teaches us how to utilize it most effectively. We highly recommend this book, not just for the vast amount of useful information it contains, but also for the depth of personal sharing from the author who gently invites his readers to grow along with him.
Quick Steps to Resolving Trauma

By Bill O’Hanlon, M.A.
W.W. Norton & Company
New York, NY
www.wwnorton.com
2011, 130 pages
Reviewed by: Rubin Battino, M.S.
Yellow Springs, OH

The wonderful thing about reading a book by Bill O’Hanlon is how he manages to be so concise and so practical in offering new useful and effective ways of working. The title of the first chapter speaks to the essence of the book, “Four New Approaches to Resolving Trauma Briefly and Respectfully.” The book is easy to read and visually interesting, containing many (almost) whimsical line drawings.

In the introductory chapter, O’Hanlon comments on typical approaches to working with trauma that involve long-term treatment with desensitization (p.3):

...the brain adapts to a continually repeated pattern, eventually accepting it as the norm. One of the implications of this finding is that focussing on the trauma over and over to treat it—which is the basis of almost all therapeutic approaches to treating trauma—may inadvertently be burning the trauma more deeply into the brain circuits.

Subsequently, O’Hanlon lists and discusses four myths and misconceptions about trauma and treatment (pp. 4-10):

- All people who suffer from trauma develop post-traumatic stress disorder (PTSD).
- People who develop PTSD only resolve it through therapy.
- Long-term abreactive therapy that helps people relive and assimilate the trauma is the most effective approach.
- There are only negative effects from trauma.

These perspectives are not true, and the next four chapters discuss other orientations.

Inclusive Therapy, the subject of the second chapter, invites (p. 22), “…the person to include, connect to, and gently begin to value and own the missing aspect of the self.” The traumatized person has “disconnected” via dissociation (it is not part of my experience); devaluation (it is not good or it is useless); and disowning (it is not me). There are three levels of inclusion: permission, inclusion of opposite possibilities, and exceptions.

In the chapter on “future pull” O’Hanlon’s intriguing question is, “Did you know that the future can cause the present?” This chapter includes many future-oriented approaches such as the Miracle Question, as-if scenarios, and working backwards from the future (Erickson’s pseudo-orientation in time).

Changing patterns that were shaped by the trauma is to a large extent re-framing and generally involves converting “I can’t” to “I won’t” and converting involuntary behaviour to voluntary behaviour. Erickson’s approach was to get the person to change one small thing, and O’Hanlon offers many examples of this process. The chapter contains useful brief descriptions of EMDR and other contemporary approaches to treating trauma. The author comments on his experience with the effectiveness of these methods.

The last chapter on methods is about reconnection, that is, challenging the dissociation and disconnection that are the wake of trauma. There are seven pathways to connection.

The final chapter goes beyond methods of rapidly resolving trauma to a discussion of the evidence for, and the means of, turning trauma into growth and positive change. Under the heading of the three C’s of posttraumatic success are the usefulness of connection, compassion, and contribution. People can learn and grow from their traumatic experiences. An appendix contains three posttraumatic stress scales.

There are relatively simple and effective methods for helping people who have suffered trauma in their lives, and O’Hanlon’s book is a pragmatic guide and must-read for anyone working with traumatized clients.
It is my pleasure to recommend this DVD, Hypnosis to Overcome a Fear of Freeway Driving: The Case of Susan, to any professional wishing to learn more about work with fear and anxiety or for those wishing to learn more about hypnosis as a clinical tool. This training DVD is expertly done. It provides the type of insightful commentary that normally comes from reading a book, as well as the holistic learning that only comes from watching someone who has mastered his or her craft.

What I enjoyed most about this video demonstration was the introduction in which Yapko clearly defines the objectives he will pursue while working with Susan and the reasoning behind his approach. For example, Yapko outlines the cognitive work he will seek to accomplish, explaining that in cases of anxiety, people tend to overestimate risks while underestimating their personal resources. Therefore, it is the task of the therapist to help clients assess risks more realistically while learning more about their personal strengths. He also describes the problem of avoidant coping and the importance of helping the client form new associations, or new links in awareness. Following these explanations, throughout the interview and formal hypnotic trance, subtitles are used to explain exactly what is happening and why Yapko is responding the way that he does.

In the final section of the DVD program, we listen to Yapko read a series of letters from Susan describing her ongoing progress. This allows us to catch a glimpse of the treatment outcomes at one week, one month, and five months following the recorded interview. This first letter indicates immediate results as Susan takes progressive steps toward exposure to highway driving. At five months, it is clear that anxiety and fear have not only been overcome on the highway, they have been overcome in other areas of her life as well. Through these detailed letters, we see that Susan’s self-discoveries continue to unfold, and learn that she experienced a transformational moment during her time with Yapko.

CASE REPORT continued from page 11

and brief: She ended the call.

The next evening father called, saying, “You spoke to my wife last night and asked if anyone named Jeff had been around my son. She and I talked about him. The truth is the youth minister at church is named Jeff. And he was alone with our son during that ski trip. Michael didn’t feel like skiing, so Jeff said he’d stay at the cabin with him while we were on the mountain. Michael acted strange but we thought he was ill. Then he had that reaction on the bus after three days of being alone with Jeff. Do you believe that this man is sexually abusing my son?”

I told father I believed this was a serious possibility. I recommended that he contact law enforcement, and emphasized that Jeff shouldn’t be allowed to have access to his son. Later I produced two reports, one with test scores went to the schools, another, with information from the hypnotic interview, to the parents, treating therapist, and psychiatrist.

While trying to decide whether or not to report to the police, I looked again at the evidence. It was a bunch of scribbling that to my eyes read, “No more sex toy... I can’t get Free!!!...fucking Jeff.” Though not enough for a court of law, I hoped it could restore alliance between the parents and their child.

IDEOMOTOR SIGNALS FOR RAPID HYPNOANALYSIS: A HOW-TO MANUAL.

By Dabney M. Ewin, M.D., and Bruce N. Eimer, Ph.D.

Charles C. Thomas Publisher, Ltd.
Springfield, IL
www.ccthomas.com
2006, 268 pages
ISBN 0-398-07628-6
Reviewed by: Rubin Battino, M.S.
Yellow Springs, OH

I must admit at the outset to being a long-term admirer of David B. Cheek, M.D., and his pioneering work in using ideomotor signalling, especially finger signals. His presentations, books, and tapes were not only inspiring, his low-key and almost self-effacing personality imbued his work with conviction and believability. The authors of this book studied with Cheek and have systematically built on his work in this properly described “how-to” manual for doing rapid hypnoanalysis. The last term is accurate since their methods (and Cheek’s) depend to a great extent on a search for the origins of the current concerns of clients.

Perhaps the most controversial aspect of the authors’ work (and that of Cheek himself) is their belief that valid memories could be obtained for events not only before the age of three, but also from birth and even intrauterine memories. The many case histories in this book and the transcripts of sessions give some credence to this belief. In my own work I have found this to be useful, although I attribute most of those memories to projections. Regardless, it is a useful method for some.

The book is divided into three parts: Basic Concepts; Basic Applications; and Annotated Clinical Session Transcripts. The first five chapters deal with such basics as ideomotor signals, principles of hypnotherapy, and how to set up ideomotor signals. One thing of practical value has to do with their practice of designating one finger from a group of three fingers to express each response of “Yes,” “No,” and “I don’t know,” or “I don’t want to answer yet.” This makes it easier to remember client responses. They also will stroke a finger to reinforce responses, and always acknowledge a response. Their last signal is, “If anything crosses your mind that you want to talk about, or if you want to ask a question, just raise your hand and we’ll talk.” This enhances participation.

In Part II fundamental applications are discussed and illustrated. Based on the work of Cheek and Leslie LeCron, there are seven common causes of psychosomatic disorders that are explored to find out which ones are probably causative. These are: conflict, organ language, motivation, past experience, identification, and “I don’t know.” or “I don’t want to answer yet.” This makes it easier to reorganize the information from the hypnotic interview, and formal hypnotic trance, subtitles are used to explain exactly what is happening and why Yapko is responding the way that he does.

In the final section of the DVD program, we listen to Yapko read a series of letters from Susan describing her ongoing progress. This allows us to catch a glimpse of the treatment outcomes at one week, one month, and five months following the recorded interview. This first letter indicates immediate results as Susan takes progressive steps toward exposure to highway driving. At five months, it is clear that anxiety and fear have not only been overcome on the highway, they have been overcome in other areas of her life as well. Through these detailed letters, we see that Susan’s self-discoveries continue to unfold, and learn that she experienced a transformational moment during her time with Yapko.

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DVD REVIEW

Existential – Humanistic Psychotherapy

By James Bugental, Ph.D.

Psychotherapy.net
Mill Valley, CA
1997
DVD 1 hour 54 min
Reviewed by: John D. Lentz, D.Min.
Shepherdsville, KY

I have always liked James Bugental as a person. This DVD reminded me of why. He treated people with amazing compassion, insight, and intentional, implied kindness. His wisdom and dedication to helping others improve came through in the intensity of his attention that indicated: You are important.

In this DVD, you see an interview in which Existential-Humanistic Psychotherapy is defined. Then you see it demonstrated, followed by questions asked and answered about the demonstration. The format has Jon Carlson PhD, and Diane Kjos PhD interviewing James Bugental in front of an audience. Then Bugental demonstrates his approach with a volunteer, and finally Bugental answers the audience and interviewers’ questions about how he worked with Existential-Humanistic psychotherapy.

The questions Carlson and Kjos ask about the approach helps the viewer to appreciate this method of enriching the experience of living. Carlson and Kjos use their own expertise to illuminate the interview in ways that also help viewers appreciate how talented they are themselves, while also bringing Bugental’s method to light.

When Bugental demonstrates his approach with Gina, the session becomes more interesting and thought-provoking. While Gina’s personality is engaging, Bugental’s intense and powerful selective attention to the present is compelling. It encourages Gina to speak from her experience instead of about herself. The session engages you by seeing Gina in an intimate conversation where she reveals how she feels in the moment. You know that Gina is being open. On the surface, how Bugental engages Gina might look easy, especially because Gina is such an interview-wise person. However, when you reflect more deeply on what Bugental does, you can appreciate his mastery.

After Gina’s session, Carlson and Kjos ask Bugental questions about what he did and why he did what he did. If you were not able to recognize how masterful Bugental was during the session with Gina, you will understand his depth through the questions and responses about what he was doing. It is like having someone ask Picasso why he used a particular brush stroke that looked easy but was long practiced and reflected tremendous talent.

Finally, the audience asks questions of Bugental, and you are given an example of how genuine and impressive Bugental was. He tells about an African-American client who he had worked with for quite some time before the man’s race came up as a subject that they explored. He tells how the man revealed that Bugental was originally chosen as a therapist because the client wanted Bugental to somehow make him white. In telling this story, Bugental is crying. As the result of the work they did together, the man became able to share with him at a profound level. Bugental’s tears shout how much he cared, and give you an emotional glimpse of a master therapist and a genuinely good man.

I recommend this DVD for the way it will touch your heart; for how it will encourage you to be a better person; and because it teaches important aspects of Existential-Humanistic therapy that you might have forgotten.
In watching PTSD and Veterans, A Conversation with Frank Ochberg MD, and interviewed by reporter, Mike Walters, you get more than you might expect. To begin with, Ochberg was one of the team who wrote the definition of PTSD for the DSM. Second, you are privy to a very knowledgeable interviewer who asks the kind of questions you would ask if you were present. Furthermore, the conversation is punctuated with scenes from soldiers and their families illustrating the topics being discussed. The photography is excellent and emotionally provocative, so that it helps communicate the messages of hope and the profound effect of PTSD for returning soldiers. I watched the version licensed for individual viewing.

On first viewing the DVD, you might be lulled into thinking this is a superficial discussion because of the sophisticated photography and Ochberg’s genial nature. The further you get into it, the more you realize you are being offered an incredible gift. Ochberg affirms for therapists how all of us deal with trauma in general, and he normalizes the problem of soldiers with PTSD in a way that empowers therapists to help them. He does that with domestic pictures of traumatic events that all of us have heard of, and then proceeds to encourage you to realize that you deal with trauma all the time and have your own style of coping that works for you. For this reason, I believe that many schools of psychotherapy could and would want to show the version licensed for teaching purposes. It is affirming to all schools of psychotherapy and can help everyone to recognize that they have paths that are useful and may even be different than the typical ones.

The further you get into the DVD, the more Ochberg teaches you. He has a wonderfully affirming approach that leads you to feel good before he introduces material that is more emotionally difficult.

In a similar fashion, Ochberg offers some of his insights about healing PTSD through what he calls the counting method. Early on, he suggests that at some point the client will probably want to do more healing work, and would benefit from the counting method. It is actually quite sophisticated even though it can be explained simply. When he thinks people are ready, he takes them through this procedure of his counting while re-experiencing the scenes that have been plaguing them in flashbacks. It is surprisingly helpful, and he claims that people only need to go through the exercise once. The more I thought about what he is doing, the more impressed I was. The method does not re-traumatize people, but instead allows them a safe place to experience a flashback, which then helps them to feel okay about themselves and to put the trauma into perspective in a good way.

I recommend this DVD to anyone treating PTSD, and especially to those dealing with returning soldiers.

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In Resolving Trauma in Psychotherapy: A Somatic Approach, Peter Levine demonstrates and explains his somatic approach to resolving trauma. The method is simple, elegant, and brilliant. I watched the version licensed for individual viewing, but there is also a version licensed for teaching purposes that includes an instructor’s manual. CEU’s also are available from Psychotherapy.net.

Levine demonstrates how to use his approach with a returned veteran recovering from the trauma of having two improvised explosive devices blow up near him. The explosions left the soldier with severe PTSD, including a tremor in his head reminiscent of Tourette’s syndrome. He spent almost four months in a series of hospitals where he had to relearn to walk and talk. When you first see the vivid Tourette’s-like tics of the head and his badly shaken confidence, you wonder how this man was ever on patrol! After one session with Levine’s approach that revealed how profoundly the soldier was hurt, the soldier shows remarkable improvement. After two sessions the head tic is greatly reduced and the overall confidence of the soldier is impressively increased. By the fifth and final session you can’t imagine this could be the same soldier. He is so improved and demonstrates such courage, confidence, and connections with his brothers and sisters still in the field, that you are proud to know our country has such people in the military.

It is a blessing that this soldier met and worked with Levine because the transformation is amazing.

Levine masterfully works with the soldier using the somatic-experiencing technique that he developed during the last 40 years. By focusing on the soldier’s physical sensations including the head movements, Levine gives the man back control over his body and returns his self-respect as well. Levine’s knowledge of trauma and how it affects the body is amazing, and he uses it with precision to bring out the trauma and heal the body and mind. It is a respectful and powerful approach. I found myself wishing that Levine’s approach could be used to help many more people with PTSD.

From my Ericksonian perspective, Levine masterfully employs utilization, reframing, and presupposition in ways that supercharge his approach. Levine has developed a profound new tool for therapists who deal with trauma. He deserves much recognition and respect for what he has achieved. This two DVD set offers new tools and perspectives about trauma and healing. I recommend this DVD and I already have told several people about it.
CONFERENCE REVIEW

Brief Therapy: Lasting Solutions
Orlando, Florida
December 9-12, 2010

Reviewed by: C. Alexander Simpkins, Ph.D., Annellen M. Simpkins, Ph.D., Deborah Beckman, M.S., Consuelo Casula, Lic.Psych., Roxanna Erickson Klein, R.N., Ph.D., Maria Escalante de Smith, M.A., John Lentz, D. Min., Carlos Olson, M.S., Nicole Ruyschaert, M.D., and Rye Strader, M.S.

Brief Therapy, Lasting Solutions 2010 provided an exciting forum for state-of-the-art innovators to meet with an informed group of participants, creating a memorable conference. Expertly organized and produced by Jeffrey Zeig and the Milton H. Erickson Foundation staff, this meeting gathered leaders in the areas of hypnotherapy, marriage and family therapy, cognitive therapy, sex therapy, coaching, clinical psychology, mind-body healing, and psychotherapy research. Each faculty member has made important contributions to the field, offering pivotal theories and cutting-edge techniques to enhance anyone’s practice. The faculty offered dynamic presentations on the latest brief therapy research and methods as well as opportunities for hands-on interactive learning. The participants were diverse, coming from 33 countries and all 50 U. S. States. Attendees held various advanced degrees in the fields of psychology, medicine, ministry, social work, and education.

We have gathered together impressions and reviews from people who attended, offering Newsletter readers an experiential glimpse. Attendees report on the varied formats including keynote addresses, short courses, workshops, conversation hours, clinical demonstrations, and topical panels. For those who would like to learn more, look for the DVD recordings that are now available for sale through the Foundation.

GENERAL IMPRESSIONS

Jeffrey Zeig
Phoenix, Arizona

The Conference went off without a hitch due to the efforts of Susan Ve lasco, Foundation Business Manager, and our able staff. Attendees were completely enthusiastic about state-of-the-art methods taught by a stellar faculty. This is the most comprehensive conference on brief therapy in the world and the Foundation has been organizing it regularly since 1998. The next conference will be in California in 2012.

Consuelo Casula, Lic. Psych.
Milan, Italy

The second week of December has become a peculiar “thanksgiving” offered by the Milton Erickson Foundation to the greater family of psychotherapists around the world. The attendees are grateful to the faculty for what they teach. The faculty is grateful to the attendees for their active and stimulating participation, and both are grateful to the organizer and president of MEF, Jeffrey Zeig. In order to select among many workshops to find the ones that guarantee satisfactory learning, it’s necessary to be able to distinguish the differences among ACT, CBT, EAP, AAT, MRI, SFT, ST, SF, SBT, TR, VCR, RBT, EFT, CBBT, IFT. Although each acronym tends to underline its own differentiated uniqueness, they share the same commitment to searching for what really works in psychotherapy—what really helps patients heal their wounds and bring joy into their life. And, each school agrees on the fact that what matters most is the therapeutic alliance between therapist and patient.

Nicole Ruyschaert, M.D.
Antwerp, Belgium

My satisfaction and pleasure started long before leaving Belgium. Confident about the organization, filled with positive expectations, prepared with some handouts, and my program downloaded, I was really in a state of “preparedness.” As a birthday present I afforded myself three days of visiting Disneyland, where virtual and real experiences, magic and reality, regularly brought me in and out of trance states, further increasing my openness for new Conference experiences.

At the Conference, I particularly appreciated the open-minded, friendly, and warm atmosphere, compensating for the cold weather outside. I was happy to be part of this group of therapists and clinicians from different disciplines who were inspiring, enriching, and integrating each other’s methods. The structure of the program created the opportunity for creating reference experiences, the best vehicle for change. I fully enjoyed the courage of the presenters and volunteers in the clinical demonstrations. From my European perspective the “American way” was somehow different: Very short breaks almost timed in seconds, bringing drinks, breakfast, and lunches into the conference rooms. Is this the way to fully utilize time, with many interesting things to share? Or do we adopt a “time is learning and experiencing” rule? Can food for the brain, food for the body, food from socializing, and food from experiences all be ingested and digested simultaneously to increase the impact? To rebalance my mind and body, there was also a gym, to have an energetic start of the day after a long, peaceful night, where all experienced learnings, could be further worked out, making new links and associative processes.

Pre Conference Workshop:
Law and Ethics
Presented by: Steve Frankel, Ph.D., J.D.
Reviewed by: John D. Lentz, D.Min.
Shepherdsville, Kentucky

It was good news as usual for all who attended the law and ethics pre-conference led by lawyer and psychologist, Steve Frankel. Dr Frankel makes the ethics and legal requirement that all of us face for licensure not only helpful, and useful but also interesting. He covered topics that all practicing therapists deal with, and yet kept the discussion interesting, informative, and helpful. Frankel does an amazing job of covering legal issues and ethics in such a way as to avoid scaring the attendees. It is one of the reasons that I look forward to his sessions. Not only did I get my licensure requirements met, I also got practical tips and useful insight about how to deal with situations that often come up in practice.

SC 31 From Arguing to Affirmation: A Brief Therapy Intervention for Lasting Change
Presented by: Richard Hill, M.A.
Reviewed by: Maria Escalante de Smith, M.A.
Cedar Rapids, Iowa

Pat Love showed her proficiency with couples’ relationships. At the beginning, she talked about limbic resonance that is marked with emotion, sensation, and psychological awareness. The opposite can be found in a personally challenging endeavor, where a creative, interactive, socially engaged attitude lets people grow. Growth can be seen as a four stages creative cycle according to Rossi’s practice. Hill introduced two brief therapy interventions. First was a change in mindset, seeing the problem as a message, and questioning: “What can I create from this?” The second was to develop harmony, an acronym for different characteristics, where each component can be scored and developed. Growth takes place between the field of rigidity and the field of chaos in the zone of “harmony.” It would have been great to have more time to fully develop the short therapy methods he teaches.
ness. It was interesting to learn about the two empathic systems: emotional resonance and the TPJS (Temporal Parietal Junction System), and to understand how emotions are processed in the brain. Experiences form neural pathways, and human stimulation occurs through seeing, hearing, tasting, smelling, and touching. New experiences wire together with early experiences, since our limbic system does not know that we have grown up. It is important that couples attend therapy together so that they find points of agreement and things they can share. A precise use of questions such as: “What’s one thing your partner could do that would move you to a better place or that would make you get closer?” was particularly useful. Love’s workshop was filled with memorable quotes such as “It is easier to add positives than to eliminate negatives.” It was nice to hear about the importance of helping couples find points of agreement and things they can share.

Presented by: Maggie Philips, Ph.D.
Reviewed by: Consuelo Casula, Lic.Psych.
Milan, Italy
Maggie Philips showed how the practice of self-acceptance and self-forgiveness brings self-love and creates a wise mind able to clear emotional blocks, heal shame and blame, enhance mindfulness skills, and add spiritual intelligence. The practice is based on an inner journey through the land beyond fear to find freedom from the anxiety of perfectionism. The practice suggests sending breath to the blocked emotion, breathing in gratitude and breathing out compassion, until acceptance of reality and self-love emerge. In order to reach radical self-acceptance and self-forgiveness, it is also helpful to think daily about what we have learned, what we received, and what contribution we give. I left the workshop with the inner sound of the attendees saying aloud, “I deeply and completely love and accept myself!” I think that if we use this as a mantra it will be easier for each of us to find love and peace.

WS 6: Creating a COACHing Container
Presented by: Robert Dilts
Reviewed by: Nicole Ruyschaert, M.D.
Antwerp, Belgium
Diligently and gently, we were introduced to the concepts, necessary to understand the practical work of coaching. Dilts reviewed the concept of “the inner game,” played in the mind of the player against internal obstacles such as fear and self-doubt, and “the outer game” played on an external arena. Coaching is a method to bring yourself and your client into a zone where the inner game and outer game are working together. The first step in the process is to set-up a “coaching container.” Dilts guided the client into a deep process of transformation. He built a working alliance, prepared a checklist and container, and gently shifted the client from dissociating, to associating with the “crash” situation. Asking coaching questions helped to mobilize a resourceful experience and increase the impact of that experience. A progressively visible change in attitude and facial expression was evident, as the client worked through a serious traumatic experience. In a second demonstration the “second skin” was introduced. Having worked with the “bubble” in hypnosis, additional body-work increased the experience, both for the client and the audience.

WS 13 Tailoring the Therapy Relationship to the Individual Client: Evidence-Based Practices
Presented by: John C. Norcross, Ph.D.
Reviewed by: Deborah Beckman, M.S.
Dallas, Texas
“It is not our experience of therapy that matters—it is their’s.” Norcross offers a full range of bold, clear strategies based on a great deal of research that would more effectively tailor a client’s experience of therapy. The research includes a motivational consideration—patients receiving their therapeutic preferences are a third less likely to drop out of therapy. In addition, when any type of client feedback format is used consistently, at-risk clients danger of further deterioration is reduced by one third. A common problem is that most people think “work on it” means moving straight to action. Incorporating the “Stages of Change” provides additional strategies that can help avoid this familiar trap. A question not often asked and worth asking is, “What is the worst thing that can happen here?” Following Norcross’s practice suggestions will not only minimize the possibility of the “worst thing” occurring but also increase the possibility of many more “right things” happening.

WS 22: Empowering the Self Through the Heart of Healing

WS 29: Creative Breakthroughs in Therapy
Presented by: Jeffrey Kottler, Ph.D.
Reviewed by: John D. Lentz, D.Min.
Shepherdsville, Kentucky
In presenting about creativity, Kottler outdid himself in being creative. He used music in his power point presentation that included a short movie, surprises, and much more. Kottler challenged us to think outside of the usual ways and recognize that there are numerous ways to stimulate creativity in our work. He used personal stories, evocative experiences, and exercises to stimulate our thinking and invite us to recognize that great therapy often happens because someone is willing to think creatively. His work was powerful; I did all I could to avoid shedding tears. It was one of the most powerful and thought provoking sessions I have experienced in a long time.

WS 36: The Art of Impact
Presented by: Jeffrey Zeig, Ph.D.
Reviewed by: Consuelo Casula, Lic.Psych.
Milan, Italy
During the workshop Jeffrey Zeig did not merely talk about the art of impact, he showed it. Through his own effective style, he included poignant examples from the world of music, painting, and movies. There were also specific exercises for the audience. His ability to segment a large reality into manageable chunks helped attendees to understand the process and learn it in an easy way. His presentation was full of impact since he offered the audience the opportunity to learn by doing and by modeling several excellent artists. Every sense was involved, with admiration and awe, with curiosity and excitement, with challenge and satisfaction. The many exercises proposed by Zeig gave the audience recipes to learn the art of impact using symbolic and evocative gestures, tone of voice, and eye contact full of admiration and trust. Those who attended Zeig’s workshop now know what to do to add impact to their practice.

CLINICAL DEMONSTRATIONS
Clinical Demonstration 1: Increasing Impact in Experiential Psychotherapy
Presented by: Jeffrey Zeig, Ph.D.
Reviewed by: John D. Lentz, D.Min.
Shepherdsville, Kentucky
Zeig was very good. He helped a professor who experiences anxiety at each semester’s end to become more able to enjoy her students and herself as the capable and bright professor that she is. Using formal hypnosis with Zeig’s version of personal sculpting of the problem and the solution, along with some conversational trance language, Zeig was so smooth that the demonstration might look too easy to duplicate. It would be difficult because he was that adept at helping the woman change her experience. Sitting near enough to see the tightness in her body and the fear in her eyes, I could see that by the end of the session, the woman’s body relaxed and her eyes twinkled with excitement. It was magic.

CD3: Clinical demonstration: A Constructive Narrative Approach to Cognitive Behavior Therapy

K4: Keynote Address, Core Tasks of Psychotherapy: What Experts Therapists Do.
Presented by: Donald Meichenbaum, Ph.D.
Reviewed by: Consuelo Casula, Lic.Psych.
Milan, Italy
Listening to Meichenbaum’s keynote address and watching his demonstration, I could clearly see that he was showing what experts can do when they utilize internal dialogue as a therapeutic tool. The content of his speech can be synthesized with key concepts such as the competent thera-
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TREATMENT OF WORRY, WITH REID WILSON

Stage One of EFT for Couples, with SUE JOHNSON

Crossing Belief Barriers by Creating a Belief Bridge, with ROBERT DILTS

Strength-Based Brief Therapy, with BILL O’HANLON

BRIEF COUPLES THERAPY, WITH JON CARLSON

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Clinical Demonstration 4: Facilitating “The Creative Psychosocial Genomic Healing Experience” in Brief Psychotherapy
Presented by: Ernest Rossi, Ph.D.
Reviewed by:
John D. Lentz, D.Min.
Shepherdsville, Kentucky
Rossi assisted by his wife, Kathryn, was his usual inspiring and profound self. Kathryn, also an accomplished therapist, helped Rossi because of his hearing impairment. Her devotion, affection for him added to the experience. By teaching through demonstration, Rossi involved most everyone in the audience. Many of us experienced along with the volunteer, the process of using the language Rossi offered to make personal shifts in our own lives. Rossi exuded genuineness and a powerful trance of kindness that was focused on the volunteer and the good he wanted the audience to receive. As a result, we got much more than we ever bargained for.

Clinical Demonstration 6: Treatment of Worry
Presented by: Reid Wilson, Ph.D.
Reviewed by: Maria Escalante de Smith, M.A.
Cedar Rapids, Iowa
This demonstration consisted of an excellent combination of strategic techniques and Ericksonian psychotherapy where attendants learned about the main things people worry about such as family/home, finances, work, and illness. Wilson addressed topics such as faulty perceptions where people confuse worrying with efforts to solve problems. It was interesting to learn how worries construct negative models of the future. The speaker also showed some diagrams that illustrated topics such as self-maintenance of worry where “what if” thoughts are essential. We learned why worries struggled with problem-solving because of their perfectionism and elevated evidence requirements. Once attendants understood how worry arises, Wilson showed some techniques such as the “letting go notion,” relaxation, and mindfulness where awareness of here-and-now increases. During an exercise, clients are encouraged to question whether their worry is a signal or just a noise, in order to help them “utilize” the useful worries. The idea of developing perspective is fundamental in this approach as well.

Clinical Demonstration 12: Eliciting the Internal Sequence of a Problem in Detail
Presented by: Steve Andreas, M.A.
Reviewed by:
John D. Lentz, D.Min.
Shepherdsville, Kentucky
Andreas is so polished that he knew many of us would not have printed out the handouts, so he brought copies along with him. His anticipation and being prepared for whatever occurs is a hallmark of his work. His laid back approach reminds me of a master craftsman who is assured, and knows his craft. Andreas knows NLP and how to get the most from simple techniques that free people from unwanted experiences. Andreas likes to offer more than the expected, and so he prepares to teach you as much as he thinks that you can receive. He offered a technique that is a versatile tool for altering unpleasant experiences. Andreas encouraged us to realize how versatile the technique was for alleviating or altering unwanted experiences. What he offered has already proved useful to me in my practice why he is so popular.

CONVERSATION HOURS
Conversation Hour 5: Mating in Captivity
Presented by:
Esther Perel, M.A., LMFT
Reviewed by:
John D. Lentz, D.Min.
Shepherdsville, Kentucky
A woman in the hallway at random asked me excitedly if I had seen Ester Perel. She said, “You have to see her.” As evidence, she told me, “She works in seven languages and speaks nine. She is so bright that you ought to see her.” So I did. She was amazing! Perel, who had presented her ideas in other workshops, was supposed to lead a conversational hour. When she realized that the majority of the audience had not seen her earlier workshops, she gave a dazzling seven-minute synopsis. She said many things that were out of the box about relationships and sex and did so in a matter of fact way. It took me several days to digest all the things I learned.

Clinical Demonstration
Presented by: Bill O’Hanlon, M.A.
Reviewed by:
John D. Lentz, D.Min.
Shepherdsville, Kentucky
O’Hanlon’s casual, and yet focused attention is fascinating to watch. His willingness to speak unpleasant truths about himself invites you to like, admire, and appreciate his example. His work was relaxed and straightforward. Guided by his intuition, O’Hanlon’s style is elegant in its simplicity. He makes it look easy. His intuition is something he honed by rigorous self-honesty and having fun. Not only was O’Hanlon demonstrating his style, he was inviting you to recognize that your style can be as useful and helpful if you let it. He was having a good time and invited you to do so as well. It is clear why he is so popular.

TOPICAL PANELS
TP 7: About Milton H. Erickson
Presented by: Steve Andreas, M.A., Roxanna Erickson Klein, R.N., Ph.D., Stephen Gilligan, Ph.D., William Hudson O’Hanlon, M.A., and Jeffrey Zeig, Ph.D.
Reviewed by: Maria Escalante de Smith, M.A.
Cedar Rapids, Iowa
I had the opportunity to attend this panel, and one more time I enjoyed learning about Milton H. Erickson. Steve Andreas began by recalling how Erickson was able to create very powerful experiences, like when he treated Andreas’ wife.

Roxanna Erickson shared her memories about the Erickson home where students were trained, recalling, “There was an endless club of people coming and going.” She remembered when she was introduced to Stephen Gilligan, and how they talked about karate. It was also nice to remember how Erickson appreciated the creative potential of the unconscious mind. O’Hanlon also helped attendants recall how Erickson helped him shift from being a pathology oriented person to become a resource oriented person. We also remembered how, “He would look at you as if he said, “I am expecting something wonderful from you.” Jeffrey Zeig talked about how Erickson would use destabilization methods to orient to new learnings. This panel was a delightful way to remember Milton H. Erickson’s wisdom… again.
That fall Erickson and colleagues launched the American Holistic Nurses Certification Corporation. More than 1500 nurses have been nationally certified in holistic nursing since then.

Helen’s awards include: Lifetime Certification in Holistic Nursing from the American Holistic Nurses Association; Fellow of the American Academy of Nursing; Excellence in Graduate Teaching Awards from the University of Texas; The Amoco Foundation, Good Teaching Award from the University of Michigan. Her most widely read publications include Modeling and Role-Modeling: A Theory and Paradigm for Nursing (1983); Modeling and Role-Modeling: A View from the Client’s World (2006); and Exploring the Interface Between the Philosophy and Science of Holistic Nursing: Modeling and Role-Modeling at Work (2009). Lance and Helen currently live in Cedar Park, Texas, where she continues to be actively involved advancing holistic healthcare.

This interview was conducted by her daughter, Margaret, who holds a doctorate and masters in nursing and along with her mother, is active in SAMRM. Margaret currently is the Executive Director of the American Holistic Nurses’ Certification Corporation. In the last 30+ years she has worked as a holistic nurse in numerous settings, including but not limited to case management, labor, delivery and newborn nursery, ICU, private practice, teaching at the University of Texas at Austin School of Nursing, and consulting nationally with hospitals or universities interested in implementing holistic nursing theory-based curriculum and practice. Margaret lives in Cedar Park, Texas, with her two sons and husband, Ray.

(Margaret Erickson) Tell me more about your work.

(Helen L. Erickson) My work has primarily focused on clarifying and expanding my interpretation of the concepts Modeling and Role-Modeling, coined by my father-in-law, Milton Erickson. This work is based on the premise that people consist of multiple dimensions, all of which interact in such a way that when we are sad, our body excretes chemicals that influence our biophysics. It is consistent with the work of Candice Pert, Ader, Ross, and others. When Kenneth Pellitier wrote his book, Mind as Slayer, I remember thinking, “Here’s a book that describes what I know.” I would not say I’m an expert in psychoneuroimmunology, but I do know that it is very important in our work. What I am an expert in is using Ericksonian methods to help people heal, grow, and become more fully who they are intended to be, I believe that we are here for a purpose; this is my reason for being.

ME: So, why did you label your work, “Modeling and Role-Modeling”?

HLE: During one of our talks, I remember asking Dad [Dr. Erickson] to tell me in a few simple words, how he described what he did. Previously, when I asked him to tell me how to think about someone, or how to handle a problem, he’d respond with a story or an assignment. On that particular day, he turned to me with that look he had when he wanted you to pay attention, and said, “Cookie, you have to model and role-model.” He went on to say that if you model their world, then you know what they want to do; what they want to be; how they want to live their life; and the roles that they want to fulfill. You help them.” Previously we’d talked about many aspects of human nature such as mind-body interactions, stress, ability to mobilize resources, growth, development, attachment, loss, and grief. I had learned how to think about persons as holistic beings, and how to use communication techniques to help them live their lives more fully, and/or take their last breaths. Yet, it was on that day in the mid ‘70s, I knew, at a new level, that many healthcare providers approach their clients from a sterile perspective. Most model the person’s disease, condition or problem without an understanding of the person that lives in that body. Since that day I’ve called what I do, “Modeling and Role-Modeling.” Dad coined the language. I just put ideas together in such a way as to help healthcare providers understand that the primary source of information is always the client, not the diagnosis, not my knowledge base, not the doctors, but the client.

ME: You started as a diploma nurse. How did you get to where you are now?

HLC: I first met Dad in 1956; I was a nursing student at the time. Although I started integrating what I’d learned from him with some of my own ideas of health and healing, it was not until the early ‘70s that I was ready to speak about what I’d learned. It took another 10 years before I was confident enough to write about it! Although I used what I’d learned, I didn’t report or chart my methods, nor did I talk to colleagues about them. But then, in the early ‘70s I had a series of difficult interactions with the medical residents on the unit where I worked, and I decided I needed to speak out. I couldn’t find the right language to describe what I observed or did, and so I decided to go back to school. After I finished the BSN, I realized it didn’t help much, so I went on for a dual masters degree, and then on to the PhD. I’d become somewhat known for my ideas, and the formal education helped me label my knowing better; the education gave me credibility. Through the years I watched Dad interact with people from various professions, such as Kay Thompson (dentistry), Bob Pearson and Marion Moore (medicine), and Sid Rosen (psychiatry). I learned that it was not only okay, but appropriate for each of us, as individuals practicing within a professional discipline, to use Ericksonian methods in whatever way helped us become better practitioners. I also learned that I, as a practitioner, had the responsibility of practicing with the intent to facilitate the health and well-being of clients, and to pass on what I could to others. I’ve tried to be true to those principles.

ME: Tell us about writing the first book.

HLE: Well, it soon became obvious that it wouldn’t take much for me to become known in the field. If I did that, then I had to give up something else. I decided that I might be more influential by focusing on how Ericksonian techniques could be used to facilitate holistic healing, not by teaching the techniques. It seems that there are many who can teach both basic and sophisticated techniques, but not many understand how to think about people or work with them when there are physio-psychological problems. I also wanted to remain aligned with holistic nursing, not get labeled as a hypnotist or mental health nurse.

ME: Tell us more about what holistic nursing is and how it interfaces with the study of psychology and counseling?

HLE: Holistic nurses are concerned with the dynamic interactions of mind, body, and spirit; they are concerned with how the body affects the mind and spirit, and vice versa. Their practice focuses on the healing, health and well-being of their clients. As such, they use multiple basic and behavioral sciences, such as physiology, biochemistry, psychoneuroimmunology, human growth, and development. They practice in any setting and with any population. Although there may seem to be an overlap between holistic nursing and psychology, there are differences. While the study of psychology might stipulate that mind-body interactions exist, holistic nurses need to understand these interactions, and consider their implications for healing. For example, holistic nurses who work in the critical care unit understand the effects of feelings such as fear, sadness, loss, or anxiety on the biological parameters of the human. They not only understand these dynamics, they are prepared to plan total care that will help their bodies produce chemicals that promote healing. Remember, nurses work with physical, social,
In order for this to happen, healthcare providers will need to reevaluate their views on life and death, value the dynamic nature of mind-body interactions, and learn that they are facilitators, not fixers or controllers.

ME: How did Milton Erickson influence your professional development?

HLE: He was so Socratic in his methods that I don’t think I’ll ever know for sure how he influenced me. He masterfully seeded ideas and let me discover them in my own time, so that I owned the knowledge. That’s different from the usual idea of teaching or influencing one. I do know that he had a great affect on how I think about human nature, health, and how to facilitate people to learn and grow. For example, I abandoned the concept of teaching years ago; I focus primarily on learning. I know that teaching without learning has little lasting affect; focused on the educator teaching is often perceived by the learner as trivial information. On the other hand, learning is contextual and ongoing – formal or informal, planned or not. Seeding, direct and indirect suggestions, and re-framing are extremely important techniques to help people learn. Dad taught me that. He also altered how I think about professionalism, the role of a professional, the purpose of healthcare, and who I am in the larger context of society.

ME: What do you see as the future of healthcare?

HLE: It is my hope that healthcare providers will get off the bandwagon of thinking about disease and condition first and learn how to use Ericksonian techniques to help people live their lives more fully. I think disease and sicknesses are a part of the human journey; my job is not to fix, direct or control people. It is to use what I’ve learned to help them heal and find meaning in their life experiences, to live more fully; and, when it is their time, to pass without fear or pain, but with comfort and compassion. In order for this to happen, healthcare providers will need to reevaluate their views on life and death, value the dynamic nature of mind-body interactions, and learn that they are facilitators, not fixers or controllers. Some people might need to think about why they’re here as humans and why they chose a healthcare profession. The focus of the healthcare profession needs to be on humans and humanity.

ME: What ongoing changes would you like to see in healthcare?

HLE: I’d like to see more emphasis placed on relationships among philosophy, science, and the art of caring. While science may help us understand the what and why of human caring, the art is necessary to individualize our practice so that it best meets the needs of the individual. Unless we attend to our own beliefs first, we fail to understand potential effects of our actions and the implications.

ME: What are your future directions?

HLE: My next project is to edit a book on my last research project, using Modeling and Role-Modeling with persons who have Alzheimer’s disease and their caregivers. Beyond that, I’m waiting to see what is waiting for me.

ME: What advice would you like to give to those entering the field of health care today?

HLE: Be open to learning and growing, know that every mistake is an opportunity to learn--make the most of it! Find love and friendship in your personal life so you know it when you see it. Seek support for your ideas, even as you evaluate their merit. Focus on what you can do, not what you can’t. Respect differences in others, including other professionals; and finding meaning in what you’re doing. You can’t find meaning in what you bring to the well being of others, find a new direction.

ME: Thank you for this interesting interview. It is nice to hear you express ideas about Modeling and Role-Modeling and its evolution.

HLE: And, thank you for contributing in the ways that you do.