Roxanna Erickson-Klein, PhD
By Marilia Baker

Roxanna Erickson-Klein, PhD, a multi-talented, multi-credentialed professional, is a clinician, author, and trainer/teacher who lectures, conducts workshops and webinars in the U.S. and internationally. She is a Registered Nurse, Licensed Counselor, and Licensed Chemical Dependency Counselor in private practice in Dallas, Texas. Roxanna has an impressive body of work, which includes co-editing with Ernest and Kathryn Rossi, the 16-volume set of *The Collected Works of Milton H. Erickson*. Having authored numerous journal articles, book chapters and forewords, Roxanna continues to be an active contributor to the Erickson newsletter, with more than 100 articles to date. She is a member of the Erickson Foundation Board of Directors, and current president of a local chapter of the American Society of Clinical Hypnosis. She is Milton and Elizabeth Erickson’s seventh child, and along with Alan, her husband of 44 years, she has five adult children.

Marilia Baker (MB): Thank you Roxanna, for the privilege of interviewing you. Your many contributions to the Erickson Foundation, the behavioral health field, and this newsletter are much appreciated. You are currently involved in several relevant endeavors, but there is one undertaking that is very close to your heart: *The Collected Works of Milton H. Erickson*. Could you please introduce us to the inner workings of such a massive enterprise?

Roxanna Erickson-Klein (REK): Currently, my biggest project is the ongoing effort to extend *The Collected Works*. My father was a prolific writer, but not so good at the overall assembly of his works. I hope to someday have the written and audiovisual resources organized in such a fashion that a serious student can easily access all the materials, or at least most of them. Fortunately, Ernest and Kathryn Rossi share my interest in preserving my father’s writing. They have worked tirelessly with me and with the Foundation to publish works that were previously out of print. Ernest Rossi made a major contribution by updating materials with discussions about neurobiology and genomics. We are now in the process of digitizing the 16-volume set for download, which will hopefully be available by the year’s end. A search engine is envisioned to be part of the project.

MB: How does this archival endeavor and other volunteer services you offer to the Foundation fit with your professional work in Dallas?

REK: One of my father’s students once remarked: “All [the] Ericksons seem to work hard at their fun.” This is true. All of my siblings are productive individuals. All of us like to make active contributions to education, to the world around us, and to the communities in which we live. While it is challenging to integrate my volunteer services in Phoenix with a professional career at my home base in Dallas, this volunteer work is something I have wanted to do. I recognize that as a child of Milton Erickson I’ve had unique experiences and access to information that others have not. This brings with it a sense of responsibility to contribute to archival efforts. I am fascinated with organizational development; my doctorate degree is in public administration. I have a special interest in how an organization is run, as well as the clinical aspects of medicine. My clinical career has gone further than my administrative career, but that has been
Summer Issue 2018

The Erickson Foundation is gearing up for its 12th Brief Therapy Conference – Anxiety, Depression, and Trauma: Advances in Treatment – to be held this coming December 6-9 in Burlingame, California (https://www.brieftherapyconference.com/).

In the early years of my professional life, it was assumed that all meaningful therapy was due to years of hard and consistent work. The thinking back then was that the impact of therapy was directly proportional to the time the client spent in the therapy office. But, my clients taught me otherwise. For example, just as I was about to start a third session with one client, he told me that after he heard me tell a joke in the front office before our session, he realized that for much of his life he had been trying to solve the wrong problem. During our session, I listened as he talked about his realization, and afterward, I decided not to schedule a future appointment. He said he would get back to me…and he did, three months later. He was ecstatic and reported that life was good. He then said he would call me if he needed anything else. And again, he got back to me…only it was five years later for an unrelated matter.

(By the way, the joke he overheard: A man in a restaurant calls a server over to his table, complaining: “This is the worst pork I have ever eaten. It’s just wrong!” To this, the server replied, “You ordered the lamb, sir.” “Oh,” said the patron, “in that case it’s delicious.”)

The point is -- when you find yourself in the right setting, with the right mindset and right internal motivation, magic can happen. Erickson would often disrupt a person’s habitual pattern to generate the confusion necessary to allow for a new frame of reference to develop. He often did this to change the rigidity of the client’s frame of reference. In learning this, I was introduced to the idea of brief therapy.

The presenters at this year’s Brief Therapy Conference are appropriately described as having provided “seminal contributions to the field of psychotherapy,” and in December they will come together to share their perspectives and learnings.

This edition of the newsletter features major contributors in the field of psychotherapy, and those who more specifically have Ericksonian perspectives. We begin with Marilia Baker’s much anticipated feature interview with the amazing Roxanna Erickson-Klein. When I first spoke with Roxanna more than 30 years ago at the Second International Congress on Ericksonian Approaches to Hypnosis and Psychotherapy, she was alive with delight and wonder. Her smile could light up an entire auditorium. It was as though she were unaware of her own brilliance and seemed only aware of life and being fully in every moment. She is the same today, with the added calm and centeredness of a confident woman who truly knows herself. Roxanna’s unique interests and her multidimensional background projects a deep wisdom that is evident in her contributions to this newsletter, her projects, her work with clients, and in the love she shares with her family. Please carefully read the interview with her because all this shines through.

Also, in this newsletter, is a contribution Roxanna coauthored with her two siblings, Kristina Erickson and Robert Erickson, for the Power of Two column. It is entitled The Erickson Historic Residence: The Power of Two, Three, and Many. In reading this, I could feel the special Erickson family dynamic.

Marilia Baker once again demonstrates her talent in featuring our most unique international community members. For this edition, she writes about the Institut M.H. Erickson de La Réunion (CREER), which is located on a volcanic island in the Indian Ocean and has a population of nearly 870,000. Marilia writes: “Réunion is a most prosperous and culturally diverse island.”

John Lentz interviews Robert Sapolsky for In the Spirit of Therapy. In our last issue, Lentz reviewed one of Sapolsky’s many presentations at the Evolution 2017. This time, Lentz explores how Sapolsky, a self-proclaimed “utter atheist,” can accept others’ concepts of spirituality outside of a theological framework. It’s an interesting glimpse into two different perspectives.

In Eric Greenleaf’s Case Report, Beatriz Pol shares an effective clinical experience she had with Greenleaf. In her article, Exhaling Toxic Feelings, she talks about how that experience later affected her own therapy with clients. It’s an interesting perspective that could have easily been presented in Facets and Reflections, however that honor went to Jeffrey Zeig, who presents Four Erickson Cases: Utilization: The Virtues of Faults, with excerpts from the Milton H. Erickson Archives.

Also in this issue, Jeff Zeig introduces a new column: Inspiring Moments with the Masters. In this column, Zeig will be honoring some of the forbearers who have offered him exceptional experiences. He writes: “I have had many transformative experiences with these masters, and therefore I feel compelled to share them with others—to recycle the wisdom that I gleaned.” This issue features Viktor Frankl.

COMMENTS continued on page 5
THE MILTON H. ERICKSON FOUNDATION
presents
brief therapy

TREATING ANXIETY
DEPRESSION & TRAUMA

faculty

- PATRICIA ARREDONDO (Keynote)
- JUDITH BECK
- CLAUDIA BLACK (Keynote)
- LAURA BROWN
- DAVID BURNS (Keynote)
- ELLIOTT CONNIE
- ROBERT DILTS
- JANINA FISHER
- STEVEN FRANKEL
- BRENT GEARY
- STEPHEN GILLIGAN
- CAMILLO LORIECO
- LYNN LYONS
- SCOTT MILLER
- BILL O’HANLON
- RONALD SIEGEL
- FRANK SULLOWAY (Keynote)
- STAN TATKIN
- BESSEL VAN DER KOLK (Keynote)
- MICHELE WEINER-DAVIS
- REID WILSON
- MICHAEL YAPKO
- JEFFREY ZEIG

-AND MORE TO COME!

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**The Power of Two**

The Erickson Historic Residence

*The Power of Two, Three, and Many*

By Roxanna Erickson-Klein, Kristina Erickson, and Robert Erickson

This column was developed to show that teamwork is often more effective than the singular efforts of an individual. The first Power of Two column featured our parents, Milton and Elizabeth Erickson. We would like to illustrate the value of the collective efforts and joys of working as a team; whether the team is two, or three, or many more. A team creates an energy that extends far beyond the reach of any one member, and it also extends through time and geography. The three of us Erickson siblings -- Roxanna, Kristina, and Robert -- along with Jeff Zeig, Foundation staff members, and others have contributed to the success of the Erickson Historic Residence.

BACKGROUND: The Erickson Historic Residence on Hayward Avenue in Phoenix, has been previously featured in this newsletter, but for those who are unfamiliar, we will summarize and provide an update.

The Erickson Historic Residence is the home that our parents resided in from 1970 to 1980. Milton Erickson, our father, passed away in 1980, but our mother, Elizabeth, stayed in the home until her death in 2008. Though the idea of making the property into a historic site did not come about during their lifetimes, we were aware that visitors from around the world came to this home.

Prior to 1970, we lived in a small home at 32 West Cypress (near downtown Phoenix) that has since been demolished. That was the first home our parents purchased shortly after moving to Arizona in 1948. We three are the youngest of eight siblings; seven of us lived with our parents on Cypress Street as the oldest had already completed high school and stayed in Michigan when the family moved to Phoenix. The Cypress Street residence is where our father developed his private practice, founded the *American Journal of Clinical Hypnosis*, and started to become widely known for his professional contributions.

On both Cypress Street and Hayward Avenue, our parents integrated the home’s living and professional spaces. Our father had an office in both homes and the common living areas served the dual purpose of accommodating both family and patients. In fact, we shared our daily family life with patients, colleagues, visitors, and secretaries. In addition to scheduled appointments, we also welcomed visitors who would stop by to view our home as if it was some sort of tourist attraction. Their often impromptu visits surprised family members who had not yet recognized the impact of our father’s work. Our mother enjoyed the visits, and graciously opened our doors with warmth and kindness.

After our father’s death, the visits at the Hayward home continued, and Mom made the decision to keep Dad’s office where he taught and practiced, intact. She delighted in giving brief tours of the home and invited guests to rest in his office and sit at his desk.

ESTABLISHING A HISTORIC RESIDENCE: After our mother passed away in 2008, the Erickson Foundation purchased the property on Hayward and the three of us volunteered to assist in the development of the home as a destination for those interested Milton Erickson’s personal and professional life. Robert’s wife, Kathy, also contributed many hours. In 2016, our brother, Lance, passed away, and subsequently, his wife, Helen, joined the Foundation’s board of directors and committed herself to helping us preserve the residence. Erickson Foundation staff members spent time helping us preserve the historic home and make it an evocative sanctuary.

Each of us have worked as volunteers and have significantly contributed -- donating memorabilia, time, finances, and resources. Robert has given many tours of the home and worked on the security and development of the property. Roxanna has overseen the property’s maintenance and is in the process of developing a full inventory of all the items on display. Kristina made many donations and significantly contributed to the exhibit displays. Helen stepped forward to help establish a long-term sustainable vision for the property, ensuring there will be future visitors.

OVER THE PAST YEAR: We have entered a time of transition in which Roxanna and Kristina will be focusing on their own family commitments, while passing the management of this legacy to others. In doing so, we established a residential internship to help with fundraising and growth potential. Lana Heckman, a recent business graduate, was selected as our intern to help us actualize a sustainable budget.

Over the last year, we’ve had visitors from 16 countries and given more than 80 tours. Visitors delight in the peaceful, healing energy that still radiates from within the office where Milton Erickson worked, and they often report feelings of comfort and inspiration as they sit in his chair, surrounded by his books and artifacts.

TWO continued on next page

**Erickson Historic Residence Donations**

The Foundation is accepting donations to further develop the Erickson Historic Residence, formally known as the Milton and Elizabeth Erickson Museum. Built in 1952, the 2,239 square foot home is nearly 70 years old. The Foundation purchased the property in 2010 and continues to maintain the residence. Currently, the museum is being spruced up with structural repair, paint, and additional landscaping.

To learn more about this wonderful opportunity to visit the place where Dr. Erickson lived and worked in the last decade of his life, please visit: [https://www.erickson-foundation.org/erickson-museum/](https://www.erickson-foundation.org/erickson-museum/) and read Roxanna Erickson-Klein’s “The Erickson Historic Residence: The Power of Two, Three, and Many,” (above).

To donate to the museum, please visit: [https://www.erickson-foundation.org/donate/](https://www.erickson-foundation.org/donate/).
As siblings, we see our work together as special. It both symbolically and literally demonstrates the values we learned from our parents: to reach out to loved ones in a meaningful way. We are still amazed that so many people come from so far away, making a pilgrimage to see the modest home and office where our father did so much of his work. We now have a broader understanding of the contributions he made, but the home itself has always been simple and ordinary...and perhaps that is the point.

TEAMWORK: As Erickson family members, we were given gifts of learning beyond the ordinary. With our family constellation, we created a gift of harmoniously working together. Robert, Roxanna, and Kristina, alongside Kathy and Helen and with the support of Jeff Zeig and Foundation staff, have made a fine team. We are enjoying the reciprocal energy that comes from working on a project that is simultaneously meaningful and rewarding. We wish to recognize and thank other family members, colleagues, friends, donors, and dedicated volunteers who have generously contributed time and resources to keep our doors open. And to the all the visitors: Thank you for your part in making this historic residence a reality. And thus, the power of two, three, and many have created energy and a future out of what could be deemed quite ordinary. What a joy it has been to have played an active role in this growth!

Please visit the Erickson Historic Residence: https://www.erickson.foundation/erickson-museum/

And for this issue, we brought back a special “old friend”: The Therapeutic Frameworks column, in which Robert Firestone introduces the concept of the fantasy bond in: The Fantasy Bond in Childhood and Intimate Relationships. In talking with Firestone about his recent book, The Enemy Within: Separation Theory and Voice Therapy, I became fascinated with his concept of the fantasy bond and asked him if he would write an article for us. Fortunately, he agreed because his article is interesting and useful.

For our book reviews we begin with Richard Hill’s continuing series for the column, The Beginner’s Mind. He has been reviewing The Collected Works of Milton H. Erickson and for this issue he reviews Volume II -- Hypnotherapy: An Exploratory Casebook. This is difficult book to encapsulate, and Hill does a masterful job.

Hill’s ability to identify the right questions out of a mountain of information is again demonstrated in his conversations with Ernest Rossi in their book, The Practitioner’s Guide to Mirroring Hands. Laurence Sugarman does an excellent job of presenting a readable and informative overview of this complex and internally interactive book.

Rubin Battino reviews Irvin Yalom’s, Becoming Myself: A Psychiatrist’s Memoir. The content of this book was reflected in Yalom’s Evolution keynote speech he presented last December in Anaheim, California. His autobiography is more than just a chronicling of events; it is lens by which to understand the man behind the wisdom.

Maria Escalante de Smith brings her positive energy to her review of Dialectical Behavior Therapy for At-Risk Adolescents, written by Pat Hervey and Britt Rathbone, which contains a library of ideas. My hat comes off to anyone who works with this oftentimes difficult population. (When my currently wonderful daughter was 14 years old, I understood why some species eat their young!) It is a skill and a calling to be an adolescent therapist and Hervey and Rathbone do justice to this specific field.

As Roxanna Erickson-Klein mentions in our featured interview, Jane Parsons-Fein frequently visited Erickson. It was during those times that Fein acquired the material for her excellent DVD series, In the Room with Milton H. Erickson, M.D. We are truly fortunate that these are now available. (https://catalog.erickson.foundation/) Our review editor, Charles Simpkins, reviews Volume 2/Discs 7-12 of this series, and as one would expect, his review is both comprehensive and emotionally rich.

Given that my personal model of therapeutic intervention focuses on an allopathic balance (which is my soapbox – so don’t get me started), I was delighted to see Kay Colbert’s excellent review of The Good Mood Kitchen: Simple Recipes and Nutritional Tips for Emotional Balance, by Leslie Korn. While our genetics do not necessarily predict our destiny (e.g., epigenetics), our biology does. Our bodies are not our vessels; they are our partners. If you want your body to support your mind, you have to support your body. It might not be sufficient in and of itself, but absolutely necessary. (See, I told you – don’t get me started!)

I hope readers notice that many of the elements and philosophies expressed in this issue are also found in brief therapy. There are many ways to alter one’s frame of reference, whether it is a complete paradigm shift or just an expansion of one’s awareness. Believe me when I say that much can be learned about this and more at the upcoming Brief Therapy Conference. I hope to see you there.

Rick Landis
Orange, California
By Marilia Baker

The Institut M.H. Erickson de La Réunion (CREER) and the College of Hypnosis of the Indian Ocean (CHOI) organized the first international congress of the newly established institute under the theme “Our Cultures: Our Treasure in Therapeutic Hypnosis.” This historic gathering took place November 29-30, 2017 at Saint-Gilles-les-Bains, Réunion Island. It brought together 250 participants and 35 faculty representing Brazil, France and other members of the European Union, Russia, and the United States, as well as Réunion Island health care providers. In the words of the Institute’s founder and director, Jean-Claude Lavaud, PhD, “The theme was chosen by Reunionese practitioners of therapeutic hypnosis, in coherence with the multiculturalism and exceptional inclusiveness of our island. The intention was to illustrate how much Ericksonian hypnosis can, and must, be inspired by anthropology. On this subject, and in many others, Milton Erickson showed us the way – he who rightly said that the therapist should be interested in anthropology, that is, in the culture belonging to the patient.”

Part of the French nation and one of its five overseas departments, L’île de la Réunion is a volcanic island in the Indian Ocean, with the same status as metropolitan France. Situated east of Madagascar and southwest of Mauritius with nearly 870,000 inhabitants, Réunion is prosperous and culturally diverse.

Therapeutic hypnosis was implemented at Réunion in the early 2000s. According to Lavaud, “The large number of health care providers who are well-trained, qualified, and conduct hypnosis in clinics, hospitals, and private practice, makes Réunion one of the most effective areas in France for therapeutic hypnosis.” Since 2007, Lavaud and colleagues have been organizing many training workshops and mobilizing not only the local educational and clinical resources, but also inviting renowned practitioners of therapeutic hypnosis, many of them from Erickson institutes in France. The Réunion Institute is also part of a team of institutes promoting multicultural international webinars.

The international congress of 2017 brought together luminaries of hypnosis, including Jean-Marc Benhaïem, MD. In 2001, Dr. Benhaïem established the first university degree in medical hypnosis at the celebrated Pitié-Salpêtrière, the teaching hospital of the Sorbonne (of Charcot, Babinski, Freud, and Janet fame). He is also founder of the highly regarded French Association for the Studies of Medical Hypnosis (AFEHM). Dr. Benhaïem is a clinician who is learned in the philosophical teachings and the practice of the recently deceased François Roustant, an eminent French philosopher and hypnototherapist who cited Milton Erickson, Gregory Bateson, and Léon Chertok among his influences.

Among other illustrious faculty was Prof. Antoine Bioy, a psychologist, hypnototherapist, and author of numerous publications on clinical psychology, psychopathology, and hypnosis. Among his many credentials, Prof. Bioy is on UNESCO’s scientific counsel (chair 918) for Sexual Health and Human Rights. He teaches clinical psychology and psychopathology at the University of Paris-VIII, and clinical and medical hypnosis at the University of La Réunion. He is also advisor and scientific editor of the acclaimed journal, TRANSES, of which Thierry Servillat, MD, is editor-in-chief and Jean-Claude Lavaud, PhD, executive editor. Dr. Servillat, director of the MHE Institute of Rézé, Brittany region, presented with hypnototherapist, Bernadette Audrain-Servillat. Presenters Élise Lelarge, MD, and Elizabeth Prévôt-Stiméc, MD, are also members of the Rézé Institute.

It is impossible to do justice to the lifework and achievements of all distinguished faculty. Along with Roxanna Erickson-Klein, PhD, and Dan Short, PhD, many are well-known in the United States. The former, the congress guest of honor, is on the board of directors of the M.H.E. Foundation, and current president of the North Texas Society of Clinical Hypnosis. The latter, is director of the MHE Institute of Phoenix. The faculty, in addition to the previously mentioned, was composed by physicians, psychologists, and psychotherapists. Faculty members included: Patrick Richard, MD; Isabelle Celestin; Yves Halfon, DDS (MHE Institute of Normandie); Christian Martens, MD (MHE Institute d’Île-de-France); Veronique Burel; Ricardo Feix, MD (MHE Institute BrasilSul); Laurent Gross; Catherine Leloutre-Guibert, MD; Nicholas Gouin; Arnaud Gouchet, MD; Ludovic Breuil, Osteopath; Pascale Cham-D’Aigraves; Guy Chedevu, MD (MHEI du Lenmanique); Idrissa N’Diaye; Morgan Godard, MD; Lolita Mercadier; Constance Flamand-Roze, MD; Josephine Syren; Joelle Mignot (member of UNESCO’s Sexual Health and Human Rights counsel); Teresa Garcia-Sanchez (MHEI Madrid); Vladimir Zelinka, MD; and Rashit Turkaev, MD.

Of note was the Reunionese faculty: nurse-anesthesiologist, Dominique Boye; kinesiologist, Yann Faravoni; Otman Kerkeni, MD; psychologist, Stephanie Maillot; and Yann René, practitioner of traditional medicine and specialist in multiracial cultures in creole lands. Along with the consummate reverence for ancestors, René’s practice emphasizes the importance of nature’s elements in healing, such as the ocean, rivers, waterfalls, and forest. For a preview of the congress film, please visit: https://creer-re/presentation-du-film/

Reflecting on the harmony and unity of the congress, with so many notables gathered on this faraway and historical island, Jean-Claude Lavaud recalled a magical moment. With his vision to bring together bright minds from around the world and work together for the advancement of hypnosis, he sought just the right descriptive name for his newly formed institute. “I let myself be carried by the turquoise waters of the Indian Ocean, and while swimming with the fish in the lagoon, a sort of spark finally illuminated my brain. Voilà! It will be CREER (to create), the French acronym for the Réunion Island Center for Ericksonian Resources and Studies.”

For further information please visit: https://creer-re.

1. “Erickson viewed trance as a normal phenomenon, an extension of everyday behavior. He worked with clients as individuals through careful observation of them, and in this respect he acted like an anthropologist recording and processing naturally occurring behavior from which he developed therapeutic interventions. Most behavior is culturally conditioned, and the knowledge recorded by anthropologists provided materials for Erickson’s understanding of patients from different ethnic groups, for the universality of unconscious processes, for illustrations and metaphors, and for his own world view.” Madeleine Richeport (1985) “The Importance of Anthropology in Psychotherapy: World View of Milton H. Erickson, MD” in Zeig, J. (Ed.) Ericksonian Psychotherapy. Vol. I: Structures. New York: Brunner/Mazel; pp. 537-552.


3. Consult: https://en.wikipedia.org/wiki/Pitié-Salpêtrière_Hospital

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THE MILTON H. ERICKSON FOUNDATION
Interview with Dr. Robert Sapolsky

Robert Sapolsky, PhD, is professor of biological sciences at Stanford University, and in the departments of neurology, neurological sciences, and neurosurgery at Stanford University School of Medicine. His humor and ability to understand science and teach it in memorable way has made him a popular presenter, lecturer, and professor. Sapolsky has written many book chapters and more than 460 articles ranging from the scientifically technical to more popular, such as The Yuck Factor, in the magazine, The Scientist. He has also authored six books: Stress, the Aging Brain, and the Mechanisms of Neuron Death; Why Zebras Don’t Get Ulcers: A Guide to Stress, Stress-Related Disease and Coping; The Trouble with Testosterone and Other Essays on the Biology of the Human Predicament; A Primate’s Memoir; and Monkeyluv: And Other Essays on Our Lives as Animals; and The Biology of Humans at Our Best and Worst.

John Lentz: You were one of the few people who received a standing ovation at the 2017 Evolution Conference. Perhaps your presentation was well received because it was deeply spiritual. Was that your intention?

Robert Sapolsky: Unfortunately, I’m not at all spiritual. It would be nice, but I’m pretty much incapable of it. So no, that wasn’t my intent. What I am though, is a person who is emotional about ideas and their implications, i.e., the sort of things I think about, so maybe that comes through.

JL: Your stance seems to be that positive emotional support and a reduction of stress can offset some childhood trauma, so that the person can be more than okay. I find your work to be encouraging and inspiring. I assume that many people say something similar. How is it that you remain so humble in spite of so many people appreciating your work?

RS: Maybe because I know what actually goes on in my head.

JL: How do you take care of yourself spiritually?

RS: Unfortunately, I don’t. I was raised devoutly religious, highly orthodox, and observant. In retrospect, I see that it did not provide me with spirituality -- essentially none. It was just structure and ritual. Around age 14, all that had evaporated; I had become an utter atheist with no capacity for any form of spirituality and have remained that way since. As I said, it would be nice to be able to believe, but I just can’t.

JL: Your books are so inspiring, I wonder if you’ve ever had a spiritual moment.

RS: Again, I don’t frame anything as spiritual, but I’ve had what might count as an approximation of this several times during my field work with baboons in east Africa. I once had a truly scary close call. I was following the baboons on foot in the middle of the day, which is normally a safe time. Despite that, all 60 baboons and I screwed up and stumbled upon a lion snoozing in a streambed. The lion came bounding into the middle of the troop and everyone, including me, became hysterical, running in every direction. There was this horrifying instant where the lion looked at me -- we even made eye contact -- and he was probably trying to figure out exactly what I was and considering if he should come after me. Instead, he leapt in another direction and caught and killed a sub-adult baboon male. I was in an altered state for days after, where every bit of food tasted amazing, where I felt every breeze and the sun on my arm in the morning -- and it all felt amazing. Everything was coming to me both literally and metaphorically in more vivid colors. It was wonderful, addictive state.

JL: You treat others with respect and kindness. And from my perspective, how you treat others is a lot more important than what you may believe. By treating others as you would like to be treated, you make the world a better place. Thank you for combining science and emotion so well with genuineness and humor.

RS: Thank you for the kind words.
The Fantasy Bond in Childhood and Intimate Relationships

The human experience can be conceptualized as a series of separation experiences ending with death, the ultimate separation. Each successive separation or movement through life -- separating from the mother’s body at birth and later from her breast, beginning to walk, talk, and develop a sense of self, going to school, dating, marrying, and becoming a parent and grandparent -- predisposes an individual to anxiety. The basic tenet of my theoretical system is the concept of the fantasy bond: the core defense against separation, and later, death anxiety. The fantasy bond refers to the forming of a fantasy of connection or fusion, originally with the mother or primary caretaker, and later with other family members and romantic partners, in order to compensate for emotional pain and separation anxiety. The illusion offers the child some relief from primal pain, but at the same time, the fantasy gratification to real satisfaction and love from others. Thereafter, genuine indications of being loved and valued may, at times, arouse anxiety and lead to hostility toward the very people who offer them the greatest satisfaction.

How the Fantasy Bond Develops in Intimate Relationships

People are more likely to become romantically involved at a stage in their lives where they are breaking dependent emotional ties with their families and experiencing some sense of separateness and independence. As they reach out and risk more of themselves emotionally, they attract others. In the first stages of a love relationship, they attempt to let down their defenses and are usually more open and vulnerable. Their positive emotions are intensified, and they feel a heightened sense of joy and closeness.

While this state of being in love feels good, at the same time it can be frightening. The fear of loss or abandonment, together with the poignant sadness often evoked by positive emotions, may become difficult to tolerate, especially for those who have suffered from a lack of love in their early lives. In addition, intimate relationships can become threatening to the core defenses of one or both partners.

When people begin to feel anxious or frightened, many unconsciously retreat from feeling close, and slowly give up the most valued aspects of their relationships. They gradually substitute a fantasy of love or connection for the real relationship, much as they may have done in childhood with a parent or primary caregiver. There is an attempt to replicate the emotional environment they experienced in their childhood and they often use the following three major modes of defense:

1. Selection: People tend to select partners who are similar in appearance or personality to a family member.
2. Distortion: Partners tend to alter or distort their perceptions of each other in a direction that more closely resembles a person in their family of origin.
3. Provocation: If the first two methods fail to establish emotional equilibrium, partners are inclined to manipulate each other in order to replicate familiar parental responses. They may achieve this by acting incompetent, with displays of anger (shown through temper tantrums) and bullying, or through other childish, regressed behaviors. Often, the most tender and intimate moments are followed by provocations that create distance.

Symptoms of a Fantasy Bond in the Couple

Early symptoms of a fantasy bond include diminished eye contact between partners, less honesty and more duplicity, bickering, interrupting, speaking for the other, and/or talking as a unit. And those who spent hours in conversation in the
INSPIRING MOMENTS WITH THE MASTERS

By Jeffrey K. Zeig, Ph.D.

I have been blessed with the opportunity to meet many psychotherapy masters, and their wisdom and influence has been indelible. Among the most notable were Milton Erickson, Viktor Frankl, Salvador Minuchin, Carl Whitaker, Carl Rogers, Jay Haley, and Virginia Satir. By their mere presence, these passionate, inspirational therapists made this earth a better place. And, each could turn a phrase in such a way as to make it into a permanently inspirational lesson.

I have had many transformative experiences with these masters, and therefore I feel compelled to share them with others—to recycle the wisdom that I gleaned. As such, when teaching workshops or offering therapy, I often recount exemplary moments I have had with these therapists.

To further my lifelong mission of honoring forebears, I am initiating this column in the Erickson Foundation Newsletter, so I can memorialize some of the experiences that have changed my life. I am beginning with Viktor Frankl, and the following essay is Part I in a series of encounters with him.

Viktor Frankl: Part I

I met Viktor Frankl for the first time in the summer of 1990. I had invited him to be a keynote speaker at the December 1990 Evolution of Psychotherapy Conference. In the summer of that year I was scheduled to teach in Vienna, and I asked him if if we could meet. He wrote to me and explained that he was not accepting visitors due to medical problems, but that I should call him when I arrived.

When I exited customs in Vienna, there was a pay phone on the wall, and I called Professor Frankl. To my surprise, he said “Come now.” So, I stored my bags and took a taxi to his home. He greeted me enthusiastically, and we sat at his desk. I inscribed one of my books for him, and he inscribed one of his that I had brought with me. He wrote: To Dr. Zeig, with thanks for visiting me in my home in Vienna.” Then he gave me a tour.

In one room there was a wall decorated with 27 honorary doctoral degrees from prestigious universities around the world. Among all his academic distinctions was a quite ordinary certificate for flying solo in a Cessna plane when he was in his 70s, at which time he was in residence as a professor in San Diego.

I explained that I was a glider pilot and I asked, “Why is this undistinguished certificate among all of these honorary degrees?” He told me that when he was younger he was a mountain climber and did not fear of heights. In fact, there were mountain trails outside of Vienna named after him because he was the first to explore them. But later in life he developed an aversion to flying. So, he decided that he and Mrs. Frankl would take flying lessons, and eventually both piloted a plane. When he told me this, I must have had a quizzical look on my face, because he then

FRAMEWORKS

continued from page 9

early phases of the relationship, begin to lose interest in both talking and listening. Also, spontaneity and playfulness gradually decrease. Often the partners develop a routinized, mechanical style of lovemaking and experience a reduction in the level of sexual attraction and satisfaction.

This decline in the quality of relating is not the inevitable result of familiarity, as many assume. Instead, it is due to insecurity, deadening habitual patterns, exaggerated dependency, negative projections, loss of independence, and a sense of obligation. As time goes by, one or both partners generally begin to sacrifice their individuality to become one half of a couple, which tends to diminish their basic attraction to each other. Eventually, many people are left with only a fantasy of love. They preserve this illusion of love through routines, rituals (e.g. birthdays and anniversaries), and role-playing, despite the fact that an objective observation of how they are actually treating each other may no longer resemble any reasonable definition of love.

Implications for Psychotherapy

Unless manifestations of the fantasy bond are identified and challenged, therapeutic progress will not be sustained in the relationship. Therefore, effective psychotherapy would mean that a couple’s destructive bonds are revealed and understood in the context of everyone’s fears and anxieties. Negative aspects of partners’ inward lifestyles, and distortions and projections brought to the relationship from past programming, are faced and gradually relinquished. Each person must challenge the idealization of his/her parents and his/her corresponding negative self-image. The ultimate goal of relationship therapy is to help each partner effectively cope with his/her fantasy bond and associated defenses, find satisfaction in goal-directed behavior, and increase his/her tolerance for love and intimacy.

Reference


Those seeking more detailed information can see The Enemy Within: Separation Theory and Voice Therapy. (Zeig, Tucker & Theisen, 2018), www.zeigtucker.com. Also available as an eBook from Amazon.
New! and only available from

Zeig, Tucker & Theisen

THE ENEMY WITHIN
SEPARATION THEORY AND VOICE THERAPY
ROBERT W. FIRESTONE

CHANGING RELATIONSHIPS
strategies for therapists and coaches
CLOE MADANES

ERICKSONIAN THERAPY NOW
The Master Class with Jeffrey K. Zeig, PhD
CONTRIBUTIONS FROM
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Helen Adams
Suzan Dowell
Carolyn Claibard
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Charles M. Frudden
Weir K. Hung
Sasa Mihailovic
Donna LaBato
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THE HABIT OF A HAPPY LIFE
30 DAYS TO A POSITIVE ADDICTION
Jeffrey K. Zeig, Ph.D. & Joan Neelholl, Ph.D.

The Glass Enclosure
Psychodynamic Exploration through Guided Imagery
by DAViD S. GORDON, PHD & CYNTHIA COSTAS COHEN, MA, MFT
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Four Erickson Cases

Utilization -- the Virtues of Faults

Excerpts from the Erickson Foundation Archives

By Jeffrey K. Zeig, Ph.D.

Case One: The Right “Spell”

My son, Robert, asked me when he was attending grade school, “My two best friends can’t spell; [their papers are] marked 10, 15, or 20, and my spelling [lessons are] marked, 85, 90, or 95. Now, will you teach them how to spell?” I said, “I can’t really do that Robert without consulting their parents… I’ll tell you what to do. You make sure you have your spelling lesson with you and your friends have their spelling lessons with them -- a marked copy corrected by the teacher. I’ll come over and pick you up and drive you home, and I’ll [also] offer to drive the boys home. And, as we’re riding along, you tell me what mark you got on your spelling lesson. I’ll pull up to the curb and go over your spelling lesson. [When Erickson did this, he said to Robert,] “You got this word right, and this word right, and this, this, and this.” And I graded [his lesson] and it was 98. I turned to one of the boys and said, “Have you got your spelling lesson with you? I’d like to see it.” He said, “I’ll tell anybody who stares at my breasts that I brought them along for the homesick boys.” There was no question why [this man would] be accepted. And his composure was excellent.

Erickson: Now my [question] to the woman would have been, “Madam, aren’t you aware that all men [think] curves are wonderful?” If the woman has an extra curve, I’d [ask] the man, “What do you want -- a flattened board? As a man you are supposed to enjoy [all kinds of] curves.” [This puts] him on the defensive, and when he admits liking some curves, [he’ll] admit to a predilection for [all] curves, [therefore viewing] his wife’s scoliosis through different eyes.

Case Two: Appreciable Curves

Hans (a student asking for help with a case): I had a woman client who came in with her husband. She has scoliosis, which means she has a very rounded back and is much smaller than she would be if she didn’t have it. Other than that, she’s a beautiful woman, but the couple has the same difficulty I told you about before: the man is no longer turned on by his wife. He says it does not have to do with her back, but I still think it has something to do with it. He simply tries not to think about it, and the woman gets depressed a lot because she thinks her rounded back is the reason why her husband doesn’t like her anymore -- that he no longer accepts her as a woman.

Erickson: When I wrote a red “A” on the chart, [but] I didn’t find anything wrong with him. I accepted him and [asked], “Now, why were you so afraid I wouldn’t accept you for the Army?” He said, “Well, I’ve got a problem: I can urinate only when sitting down.” The medical students looked concerned, so I said, “All right. When you’re marching and the sergeant says, ‘At ease, relieve yourselves,’ and you squat down to urinate, what are you going to say to your fellow soldiers?” He said, “If they fault me for squatting down, I’ll tell them, ‘Anything good enough for my mother is good enough for me.’”
I recently had a short but effective experience with Dr. Greenleaf that impacted me both personally and professionally.

At the end of a workshop on hypnotherapy, I asked Dr. Greenleaf if he could help relieve my symptoms of allergic rhinitis with hypnotherapy. This condition caused me a lot of discomfort because I could not breathe freely during the workshop exercises. He kindly told me that he did not have enough time for a full session, but he did offer some suggestions.

He began by calmly saying that because of global warming and climate change, respiratory illnesses are now more prevalent. Air pollution has increased, and air conditioners worsen allergic rhinitis because the recycled air is full of allergens. He also said there are more people on the planet, often concentrated in one place, which, of course, means more bacteria. And finally, he reminded me that the university where the workshop was held had been recently fumigated.

Dr. Greenleaf continued looking into my eyes and talking in a gentle manner. He said: “I can imagine how you must feel. It must be hard to breathe with your thin nose blocked. I’ve felt bad even when my big nose was blocked. My wife has respiratory problems, and if she were in this environment she would be sent to emergency services.”

His empathy and compassion were important, and made me feel understood. And, of course, his logical explanation as to why I was experiencing rhinitis also helped because I am a logical, pragmatic person.

Then, Dr. Greenleaf gave me an auto-hypnotic exercise. He instructed me to relax and visualize a place where the air is the purest in the world. I was to inhale pure oxygen and exhale all the toxins from my body, but the latter was most important.

And that was it. I thanked Dr. Greenleaf and told him that I believed my rhinitis was related to my granddaughter’s frequent colds and allergies. One colleague had told me that rhinitis was a “silent cry” when you cannot directly express your feelings. Perhaps I expressed my suffering about my granddaughter’s situation by experiencing rhinitis. But Dr. Greenleaf disagreed. He said, “No, it is not psychological, it is physical, and when this weather passes, the rhinitis will pass too. Do your exercises inhaling pure air and exhaling toxins and you will feel better.”

Later, I had the opportunity to practice the exercises in an interesting way. I have a patient who also has rhinitis. When she came to my office, we both were in the same situation. I told her about my experience with Dr. Greenleaf and asked her to do the visualization. I invited her to go into trance, instructing her to relax her body and visualize a beautiful place where the air is the purest in the world. I said: “Inhale the pure air full of oxygen. And now, exhale all the toxins from your body and your life…slowly.” I suggested this several times until we were both inhaling and exhaling together. Finally, I said: “Now, slowly, you will open your eyes knowing that you can handle your rhinitis with this exercise when you need it, and it is going to pass soon when the weather changes.” When we finished the exercise, we were both relaxed and breathing freely.

It is important to note that my patient came to therapy believing that her rhinitis was related to traumatic events, and symptoms were triggered when something made her remember those events. My hope is that I offered her a new perspective, so that she can separate her allergy from the trauma, as I did with my granddaughter.

Due to my experience with Dr. Greenleaf, I hope that I will be more assertive when I discuss this topic with my own family.

Note: A Spanish version of this Case Report -- EXHALANDO SENTIMIENTOS TÓXICOS -- is available upon request. Email: training.MHEIBA@gmail.com.
The Canoe Diary Audiobook Celebration

On June 30th, Roxanna Erickson-Klein and Robert Erickson hosted an open house at the Erickson Historical Residence (see Roxanna’s article on the residence on page 4), in celebration of the launch of the audiobook of The Canoe Diary.

The Canoe Diary is Erickson’s own account of his adventures down the Mississippi River in 1922. At age 21, with little more than the shirt on his back and a few staples, Erickson embarked alone on a three-month-long journey to build his strength to attend college after enduring more than a year of illness and being paralyzed from polio. By the end of the trip he had increased stamina and strength. This challenging undertaking was a metaphor for the rest of his life, which was truly a hero’s journey.

Robert and Kathy Erickson with Roxanna Erickson-Klein and her daughter, Olivia Klein.

On a hot summer’s evening in Phoenix, approximately two dozen guests gathered at the Erickson home, to enjoy conversation, entertainment, and tours of the historic residence. Guests included Roxanna Erickson-Klein, who traveled from her home in Texas and her daughter, Olivia Klein, from New Orleans; Robert Erickson and his wife, Kathy; Marilia and Michael Baker; Richard Eddleman, a longtime family friend; Leo Sustaita, a former neighbor from Cypress Street; and a woman from Tucson who had studied with Milton Erickson, a man from Europe, and an ER physician. The next morning, Takahito Ko, a donor to the historic residence who was enroute to Japan, visited the home.

In the room where Milton Erickson held his training seminars, guests enjoyed photos of Milton Erickson which were projected on a screen with accompanying narration. This program was created by Roxanna Erickson-Klein and Lance Erickson Jr., grandson of Milton Erickson, who narrates the diary for the audiobook.

To purchase the audio download and CD of The Canoe Diary, please visit: https://www.ericksonmuseum.org/canoe-diary/

Foundation Archives Available to Students and Researchers

The Foundation makes available its archives (at the Foundation’s headquarters in Phoenix) to both students and researchers in the mental health field. The archives contain audio/visual materials from past conferences, including the Brief Therapy Conference, Couples Conference, Evolution of Psychotherapy Conference, and The International Congress on Ericksonian Approaches to Hypnosis and Psychotherapy. The collection also includes audio and video of Milton H. Erickson, MD. Some media can be streamed.

The Foundation also has a library that houses approximately 600 books in the mental health fields and various scholarly journals.

A number of donations from Erickson’s contemporaries have been added to the archives. These donations included books and historical audio and video.

For more details on the Foundation’s archival materials and online store products, please visit: https://catalog.erickson-foundation.org/.

Now Complete: An Empowering Experiential Trilogy!

Jeffrey Zeig’s most recent book, The Anatomy of Experiential Impact Through Ericksonian Psychotherapy (2017) completes an outstanding trilogy that also includes Psychoaerobics (2015) and The Induction of Hypnosis (2014). All three books focus on the development of the therapist as crucial for effective therapy. (To purchase these books please visit: https://www.erickson-foundation.org/store/.)

The Induction of Hypnosis focuses on Ericksonian hypnosis and the phenomenological approach. The goal in this book is to place the art and impact of induction directly into the hands of the reader.

Psychoaerobics presents a series of comprehensive exercises to strengthen the therapist’s orientation so that she can elicit the best ways to convey the possibility of change. Zeig understands that people learn from experience more than they do from receiving information. Trained extensively in the methods used universally by artists, Zeig designed these activities specifically to help therapists elicit, not merely inform. The posture or “state” of the therapist is emphasized.

The Anatomy of Experiential Impact rounds out this three-volume set, which provides scaffolding for creative engagement. Zeig’s meta-model of intervention — honed over decades of study, work with individual clients, and teaching while learning in venues across the globe — is innovative, experiential, and precise. Helping people move from problem states to solution states requires the therapist to be able to efficiently map the client’s landscape and draw upon a variety of tools to attend to the client at each juncture. Zeig’s signature approaches, such as tailoring, gift-wrapping, strategic development, and therapist posture, are taught, and case studies illustrate the art of therapy as a matter of practical application. Throughout the book, readers gain an unparalleled experience of therapist empowerment — a truly fresh and effective way of seeing, doing, and being.

Erickson Foundation Press Offers More Books in Spanish

The Milton H. Erickson Foundation Press recently added more titles to the list of books that have been printed in Spanish. The five most recent translations are written by Jeff Zeig. They include Zeig’s most recent book, The Anatomy of Experiential Impact Through Ericksonian Psychotherapy: Seeing, Doing, Being (La Anatomía Del Impacto Vivencial a Través de la Psicoterapia Ericksoniana: Viendo, Haciendo, Siendo); and also The Induction of Hypnosis (La Inducción de la Hipnosis), Psychoaerobics (Ejercicios Psicoaeróbicos); Experiencing Erickson (Viviendo A Erickson); and Ten Commandments (10 Mandamientos).

All books can be purchased by visiting: https://catalog.erickson-foundation.org/.
**UPCOMING TRAINING**

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**Contact Information:**

1) Cape Cod Institute: 270 Greenwich Ave, Greenwich, CT 06830; Web, www.Cape.org Email, Institute@cape.org; Tel, 888-394-9293 (toll-free) or 203-422-0535; Fax: 203-629-6048

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4) For information: Email, sandra@ccipmexico.com
5) The Milton H. Erickson Foundation: 2632 E Thomas Rd, Ste 200, Phoenix, AZ 85016 6500; Tel, 602-956-6196; Fax, 602-956-0519; Email, support@erickson-foundation.org; Web, www.erickson-foundation.org; Couples Conference: www.CouplesConference.com
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7) For information: Email, c.mang@green-field.at ; Web, www.green-field.at

For **Upcoming Trainings ad rates and specifications** visit www.erickson-foundation.org (click Media > Newsletter). Or contact Karen Haviley: karen@erickson-foundation.org, A $25 fee per listing is required. Deadline for the December 2018 issue (mailed early December) is October 5, 2018. All workshop submissions are subject to approval by the Erickson Foundation.

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In the Room with Milton H. Erickson, M.D.: Volume 2

In the Room with Milton H. Erickson, M.D. is a comprehensive guide to Erickson’s work, spanning 1979 and 1984. The work is divided into two main parts: Volume 1 covers Erickson’s lectures and presentations, while Volume 2 focuses on his written and recorded materials. The book is edited and compiled by Jane Parsons-Fein, L.C.S.W., B.C.D., D.A.H.B., and reviewed by Charles A. Simpkins, Ph.D., San Diego, CA.

**Volume 2**

In Volume 2, the focus shifts to Erickson’s written and recorded materials. The book contains 60 chapters, each presented as a “story,” allowing readers to follow Erickson’s therapeutic process in real-time. The stories are interspersed with Erickson’s own insights and advice, providing a unique glimpse into his thought process and therapeutic approach.

**Volume 2: Chapters**

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- **Reviewed by Charles A. Simpkins, Ph.D., San Diego, CA**

**Chapters Overview**

- **Volume 2, Discs 7-12**
- **251 pages**
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- **Reviewed by Charles A. Simpkins, Ph.D., San Diego, CA**

**Summary**

The book provides a rich, detailed look at Erickson’s therapeutic methods, making it a valuable resource for therapists and students alike. The stories are engaging and insightful, offering practical guidance on how to apply Erickson’s principles in real-world settings. The book is well-organized, with a clear structure that makes it easy to follow along with Erickson’s thought processes. It is a must-read for anyone interested in Erickson’s work and the art of hypnotherapy.
**Book Review**

**Becoming Myself. A Psychiatrist’s Memoir**

By Irvin D. Yalom

Basic Books (2018), 343 pages  

Reviewed by Rubin Battino, MS, Yellow Springs, OH

This book’s jacket has the following: “Irvin D. Yalom has made a career of in-vestigating the lives of others. In Becoming Myself, his long-awaited memoir, he turns his therapeutic eye on himself, delving into the relationships that shaped him and the groundbreaking work that made him famous.” This is an accurate de-scription of the content of this fascinating book which comprises 40 chapters.

Yalom shares with readers that he is the son of Jewish immigrants and had a bar mitzvah, but does not consider himself religious. He writes: “I think of religions and the ideas of the afterlife as the world’s longest running con game.” (p. 36)

When Yalom’s father was dying, the family doctor let Irvin listen to his fa-ther’s chest with a stethoscope, and then the doctor comforted the young Yalom. Regarding this event, he writes: “Then and there I decided to be like him. I would be a doctor and pass on to others the comfort he offered me.” Yalom also shares that he had little to no communication with his mother, and that his father was mostly seen sitting across a chess board. (Incidentally, Yalom is an excellent chess player, and taught chess to his children and grandchildren.) Yalom met his wife, Marilyn, in high school. The couple is especially fond of Greece.

In addition to all the wonderful insights about Yalom’s life which he intimately shares with readers, perhaps his most important professional contribution is in group therapy. His seminal book, The Theory and Practice of Group Psychother-

**Book Review**

**The Good Mood Kitchen:**  
*Simple Recipes and Nutritional Tips for Emotional Balance*

By Leslie Korn, PhD, MPH  
W.W. Norton & Co.  
2018  
978-0-393-71222-3  
hardback, 258 pages  
www.wwnorton.com  
Kay Colbert, LCSW,  
Dallas, Texas

In recent years, practitioners of integrative and functional medicine have par-ticipated in a growing area of research around nutritional science and how dietary interventions can be used in conjunction with traditional medical approaches to help clients regain mental stability. The brain does not exist in isolation, and is in-tegrated and connected with the rest of the body. There is increasing evidence of the importance of gut health and the unwanted symptoms(including emotional) that occur when the body is in an inflammatory state.

Leslie Korn, PhD, is a clinical traumatologist and behavioral medicine ther-a-pist specializing in mental health nutrition and integrative medicine. In The Good Mood Kitchen, Korn presents specific ways to change eating habits to optimize brain function, energy, overall health, and emotional well-being. This is an easy-to-follow guide through the maze of modern day food options. Korn includes recipes, meal planning, cooking suggestions, food modifications, supplement information, functional ingredients, a resource section, shopping lists, and details on particular foods and nutritional protocols for various mood issues. Korn also in-cludes inventive ways to satisfy sugar and carbohydrate desires. There are guides, graphics, and charts to walk the reader through making better and cleaner food choices. Whether there is authoritative research behind all the recommendations is unclear, but certainly making smarter and more balanced food selections can help prioritize wellness and provide general health benefits.

The book is organized into three parts. Part 1 delivers basic information on what Korn calls “mood-savvy nutrition”; Part 2 concentrates on discovering one’s unique needs; Part 3 explains how to put this all together. Food addictions and cravings are addressed, along with practical cognitive and behavioral tips for suc-

When we eat foods that are unhealthy for our bodies, we often feel unbalanced, both physically and emotionally. This book is a helpful resource for learning how to make sensible lifestyle changes that include a nutritious diet and healthful eating habits to enhance wellness.
Dialectical Behavior for At-Risk Adolescents: A Practitioner’s Guide to Treating Challenging Behavior Problems

By Pat Hervey, ACSW, LCSW-C, Britt H. Rathbone, ACSW, LCSW-C
New Harbinger Publications, Inc., 2013
263 pages
Reviewed by Maria Escalante de Smith, MA, Cedar Rapids, IA

Pat Harvey and Britt Rathbone have written an excellent text for professionals who work with adolescents who exhibit at-risk behavior, such as extreme moodiness, aggression, eating disorders, substance abuse, or even self-harm.

The book features 12 chapters. Chapter 1, “Adolescents and DBT,” begins with a vignette about a girl named Maria and her parents’ concerns due to her behavior, which includes cutting. This chapter also addresses practitioners’ responses to specific behaviors, for example, what to do if the client is experiencing shame. If this is the case, the authors suggest providing a comforting, welcoming environment with snacks, drinks, and appropriate magazines. This chapter also includes a chart with “Challenges and DBT-Influenced Responses by the Practitioner.” (p. 12)

Chapter 2, “DBT Orientation,” explains the approach: a structured therapy focused on goals and “target behaviors,” (p. 19) as well as out-of-session coaching via phone or texting when clients are in crisis. In this chapter, we learn that “the theoretical underpinning of the pain and its intensity that the adolescent experiences physiologically, emotionally and behaviorally, is caused by a biologically-based vulnerability to emotion dysregulation.” (p. 20) A graph illustrates the response of a person with emotion dysregulation.

On page 44, the authors write: “DBT treatment focuses on priority targets (Linehan, 1993) and minimizes discussion of ongoing problems of the moment or whatever is bothering the client when she walks into the session.” DBT makes explicit that which is usually implicit and provides professionals with a number of treatment tools and strategies (such as daily logs) for working with adolescents.

Individual therapy addresses “collaborative process between the adolescent and the practitioner.” The client chooses a target behavior, the specific prompting event/trigger, and the links that connect the prompting event to the problem behaviors, as well as their consequences. The client is also encouraged to describe more skillful solutions to the problem.

Chapter 4 explains how sometimes the adolescent’s emotional intensity can interfere with learning behaviors. The authors offer ideas for skills that can be taught in group settings, so that the client can behave in more adaptive ways. This chapter also addresses priority targets, such as behaviors that interfere with treatment.

When working with adolescents, we oftentimes need to think systemically. In Chapter 5, the authors explain how parents (or caregivers) are usually the ones who bring the adolescent to the office, but the parent(s) or caregiver may also be dysregulated, with a sense of hopelessness and helplessness. In this chapter, we also learn how parents are important when their children need acceptance and a structured environment.

Part 3 caught my attention because it includes suicidality and self-harming. Practitioners are advised to take seriously all instances of suicide ideology and self-harming because these may lead to unintentional injury or death.

Chapter 8 is about bingeing and its positive impacts, such as feelings of relief and escape, and the negative impacts, like health problems and shame.

This book is a must-have for therapists, even if the therapist is not proficient in DBT. It is full of priceless resources that can easily be used by practitioners. I highly recommend it.

BIBLIOGRAPHY


Although there is much more to be said about this volume, these two statements are the clearest reasons why readers should enthusiastically delve into every page.

Hypnotherapy: An Exploratory Casebook is a treasure trove of cases. I found that the best quotes come from the early pages -- in the foreword and preface. Rosen clarifies his intention in contributing to the book: “Both Rossi and I have broad but differing clinical and theoretical backgrounds. Neither of us has worked primarily with ‘hypnosis.’ Therefore, neither of us has a vested interest in promoting some hypnotic theory of our own.” He is equally clear when he writes, “We are genuinely devoted to the goal of presenting Erickson’s theories and ideas...” Then he points out, what I believe is important when considering who should be paying attention to Erickson: that this book is directed, “…not only to practitioners of hypnosis, but to the community of psychotherapists and psychoanalysts, which has had little familiarity with hypnosis.” (pp. xi-xii)

Chapter 1 introduces and describes the fundamental elements of therapy. Three stages of a therapeutic approach are proposed that seem almost too simple: 1) a preparation to orient the patient toward therapeutic change; 2) a period of therapeutic trance, through activation and utilization of the patient’s own mental skills; and finally, 3) a period of recognition and evaluation of those therapeutic changes.
In *Mirroring Hands*, psychotherapist Richard Hill converses with Ernest Rossi to explore a powerful and deceptively simple clinical strategy. Beneath this dialog, Hill and Rossi parse the foundations of this technique. With photo illustrations, they detail each step of the clinical approach, making it accessible and practical. Thus, the authors engage us in their conversation, written exposition of a conceptual framework, and skills workshop. This multifaceted approach makes *Mirroring Hands* a satisfying book.

Chapter One starts the conversation. Literally, it is an annotated transcript, best read out loud. Hill asks Rossi to narrate the development of the mirroring hands approach, which provides a natural opening for Rossi to discuss the therapeutic use of ideodynamics, and a great conversation ensues that meanders from Erickson to Cheek, Campbell, Einstein, Jung (of course), and even puppies. Many numinous interviews with Rossi have been disseminated. As a prologue, this one is particularly compelling.

Each subsequent chapter links concept with elements in the full orchestration of mirroring hands. Evident in such titles as, “Thinking IN the Systems of Life – Preparing the Therapeutic Mind” (Ch. 2.), “What Is and What Can Be – Internal Review” (Ch. 6), and “Personal Access to Your Growing Edge – Solo and Personal Use of Mirroring Hands” (Ch. 13), each chapter is structured to enact an empiric principle into hypnotic conversation, including with oneself. Also, the recursive format of the book—presenting the conversation, re-parsing the conversation, deepening relevance to principles (system science, quantum phenomena), and extending it all to richly varied clinical experiences—attend to the readers’ learning about how to process phenomena into application.

The authors composed short chapters that start with key points and end with review. They provide the whole clinical flow of a sample interaction, then a detailed discussion of each step. In all, Hill and Rossi demonstrate that they respect us and care how we learn. There is integrity in this process. The book’s form reflects its content.

The chapter on systems was for me the most valuable. In their conceptual and clinical application of systems science, Hill and Rossi strengthen the case for therapist as gentle “provocateur,” perhaps “evocateur,” but not director, of the client’s inner experience. Their interpretation of “all by itself” phenomena as emergent properties—contrasting the over-simplistic “involuntary” or “nonconscious”—is a useful reframing.

*Mirroring Hands* leaves me wanting more. While “systemology” is well defined and integrated, Hill and Rossi presume consensual understanding of hypnosis and the quantum world. The reader must guess what the authors mean by their arguably colloquial terminology. It is clear that psychology is the clinical focus of a book authored by two psychologists. But the reader might long for extension to the more reductionistic, allopathic medical audience, nudging the authors beyond the categorical, toward holistic and person-based care. Finally, while the authors forewarn that this is a limited strategy, one is left craving utilization of non-hand-based ideodynamics for those with embodied limitations, such as Parkinson’s or paralysis. Imagine the empowerment.

There is nothing wrong with leaving us wanting more. Hill has built an engaging staircase into Rossi’s wonderful mind. There, together, the authors give us a tour, inviting us into the conversation about the craft of becoming an effective and creative clinical evocateur. This book is a treasure.
Readers are then treated to more than a dozen pages of deep exploration into those seemingly simple, fundamental elements.

In reading this, I feel myself being prepared for a book that will not only present the elements and examples of an Ericksonian approach, but also bring it to life with the colors of knowledge, research, experience, and exploration.

I am taken by the sobering comment, “There is no method or technique that always works for everyone or even with the same person on different occasions.” (p.3) This statement begs the question: Why are we learning about all these various elements of Erickson’s therapeutic process? I find the answer in a simple question: Why are there so many keys on a piano? It seems clear that to produce the method or technique appropriate for a client in a particular session, the therapist needs both a wide scope of possibilities in their knowledge base and the ability to improvise appropriately in the moment. Utilization is the term regularly used to describe the flexibility and responsiveness to the uniqueness of every client and every therapeutic session. This concept is dealt with, in detail, in Chapter 3.

This volume delivers not only the “notes” of the process, but also a rich appreciation of the “tone,” “resonance,” and “harmonics,” through the many cases histories and studies that form most of the volume. Other fundamentals are also addressed before we delve into the cases, including indirect suggestion in Chapter 2, utilization is Chapter 3, and posthypnotic suggestion in Chapter 4. Chapter 4, for example, shows how the approach can be applied to patients dealing with pain, or in resolving symptoms or trauma, or to emotionally cope, and finally, in facilitating the patient’s potential to enable their transformative process. The authors are careful to prepare the reader for the task of exploring the cases to come.

In a delightful treat, the final chapter is a revisit of the famous case of the February Man, which is reprinted in full in Volume 9. This is a truncated version of the case, but with fresh and insightful analysis, reflection, and commentary that brings to light new and unexpected insights. Many of the cases in this volume are treated similarly, with examination, reflection, and commentary, which take readers on a deep journey within each case.

The thoroughness of Erickson’s work, both in preparation and spontaneous emergence, is equalled by Rossi’s meticulous attention to transcription and detailed analysis. It never ceases to surprise me that Rossi’s questions to Erickson so often seem to be just what I want to ask. Rossi has been both an extraordinary gentleman, but also a representative of the “everyman” who reads these volumes, seeking both information and meaning for personal and professional development.

This review is my regular “week with Erickson and Rossi” that occurs formally three times a year. But, I also have intermittent special moments throughout the year when I slide one of these volumes out of my bookshelf and become absorbed in another world for a few precious moments, an hour, or even a day to learn from these great two men. I recommend everyone do the same.
Learn from the pioneer of structural family therapy...

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- Homes Without Doors (29 min.)
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FOSTER CARE (38 min.)

Video on Demand now at PsychotherapyVideo.com from Zeig, Tucker & Theisen
simply a matter of time and opportunity.

I have a part-time private counseling practice in Dallas, Texas. The uniqueness of individuals never ceases to amaze me. Since 1982, I have also been active in the North Texas Society of Clinical Hypnosis. Currently, I am serving as president, and I have established a great local teaching program. The value of having a cohort of professionals with similar interests in hypnosis is immeasurable. I am especially committed to co-teaching; it is a way of imparting knowledge that takes extra effort. However, co-presenting can significantly extend the reach of information. I am hopeful that my online work established through international webinars will continue to grow and thrive. My aspiration is to provide face-to-face educational opportunities for distant audiences. I have been successful in setting up a few internet teaching series through the North Texas Society, as well as setting them up on my own. I consider this transition to online availability to be especially important since the original Ericksonian faculty has aged. While I still enjoy traveling, I am now 68 years old, and it is time to work with others in ways that will meet interests a decade from now.

MB: How would you describe your therapeutic approaches to hypnosis and psychotherapy?

REK: Of course, I consider myself to be Ericksonian! Sometimes I joke that “I am Dr. Erickson, just not the famous one.” I also joke that “My reputation precedes me and exceeds me.” This double entendre refers to the expectation of many patients and colleagues that I embody the talents of my father. I learn from him every day of my life. Even today, I can hear his voice and words guiding me with difficult decisions. Most aspects of my therapeutic work are 100 percent based on what I learned directly from my father. However, it is also important to recognize that I am different from him; I sometimes disagreed with him. Now with the benefit of hindsight, the close familiarity I have with his ideas has offered me a freedom to question, and fortunately today there is far more information than was previously available. One of the big differences between my father and me is that I spend more time and effort on cognitive explanations. I trust the conscious mind, as well as the unconscious. We all know that there are limits to conscious capacity to instigate change; a good part of my practice includes those who have tried and failed to consciously overcome a limitation.

People seek psychotherapy generally because they don’t know how to resolve certain issues that exist in their lives. I assess their capacity and readiness for change, based on three pivotal aspects: hope, meaning, and ability. My task as a therapist is to assure that the individual takes responsibility for initiating and maintaining needed changes. I undertake this by supplementing areas of deficit with suggestions, ideas, information, and experiential learning. My forward looking, strength-based, experiential approach that engages trust in one’s unconscious resources, along with a natural tendency to strive for well-being and my integrative look at a patient’s whole life, all come directly from my father. Acceptance of the fallibility of memory, coupled with a strong idea that we can never fully understand the origin of pathology, is also based on his ideas. It is generally more effective to look forward than to look back. Having a professional cohort that includes others who come from different ideological foundations, offers a forum for honest self-reflection and questioning – both of which are essential. Open discussion offers a path for ongoing growth, as well as a context for a realistic evaluation of one’s own work.

MB: How do you integrate your nursing background and interests in medical matters into your therapeutic methodology?

REK: My nursing background, interests in medical matters, and helping individuals overcome addictions, have all shaped my clinical practice. Like many of my colleagues, I work almost miraculously well with some patients, but make little progress with others. I am oriented toward short-term therapy and symptom resolution. And while I recognize that symptom management does not necessarily resolve underlying problems, it repositions individuals to more effectively self-direct. I consider key aspects of my work to be a combination of direct and indirect permissive suggestions, coupled with encouragement and support for patients to assume full self-responsibility for needed change. I constantly review with my patients whether expected progress is made in a timely way, and credit them with the change that has occurred, thus promoting active involvement to further advance in the desired direction.

Hypnosis is my primary therapeutic tool, but I do not use formal hypnosis with every patient. I intentionally use informal aspects of hypnotic conversation to offer impactful remarks; I use more formal hypnosis strategically. Patients expect results from trance, so I capitalize on that expectation. My suggestive style is to invite the patient to listen or not to listen, and to enter a healing state in which they trust their own internal resources. The hypnotic state facilitates exploration of resources within and the building of healthy new associations. On re-arousal, I rarely have subjects recount “what happened” in the trance state. Instead, I invite them to say only what they feel they need to say. I find that the verbal review of the trance experience brings it up to conscious awareness and de-potentiates further work that continues beyond the therapeutic encounter.

MB: Regarding approaches, who has influenced you the most?

REK: Like my father, I seek to learn from everything and everyone. Higher education and science were emphasized in the Erickson family household. There was also much emphasis placed on learning from those who have a different way of doing things. There is no better source of information about one’s value as a health provider than the patients themselves. And some of those friendships that we formed a long time ago are still vital today. I was also quite close to three of my aunts, and deeply appreciated my grandparents.

Professionally, I was influenced by a diverse group. In the 1970s, being of similar age to many of Dad’s most dedicated students, I felt a kinship with many of them. When colleagues or students came to learn, it was a two-way street. He used the opportunity for investigation of the margins of what was clear in his ideas, listening to others’ questions to help revisit, revise, or expand understandings. One of the most important lessons I learned from my father regarded his own professional career. He never promoted himself; he only promoted his ideas. The fundamental premises and ongoing evolution of his ideas took place over his lifetime, and were always being advanced. Now that he has been dead for nearly 40 years, it is his younger colleagues who have continued with the ongoing refinement. The passing of wisdom on to the younger generations must continue!

My father worked closely with many colleagues in the ’60s and his office door was often left open so that I or my siblings could sit in if we chose. Many times, he called on me to demonstrate hypnotic phenomena, but mostly I sat quietly on the periphery of discussions, soaking in the conversations.

Having a professional cohort that includes others who come from different ideological foundations, offers a forum for honest self-reflection and questioning – both of which are essential.

continued on next page
tions among the professionals. After the office discussions, Dad’s colleagues, who were often visitors at our home, sometimes initiated conversations with me about my impressions and reactions.

Drs. Bernie Gorton, Margaret Mead, Marion Moore, Frank Pattie, Leonard Ravitz, Kay Thompson, and T.E.A. von Dedenroth, were among colleagues that serendipitously I had the opportunity to learn from, prior to my awareness that my father’s ideas were of historical significance. Over the decades, I have seen many of the individuals with whom he shared his ideas, rise to a prominence of their own. In the ’60s, I took note of his efforts to promote Bob Pearson and Kay Thompson as emissaries for teaching hypnosis through the American Society of Clinical Hypnosis. In the ’70s, while I was in nursing school and living at home, my father’s work with Jay Haley, Herb Lustig, Jane Parsons, Sidney Rosen, Ernest Rossi, and Jeffrey Zeig occupied much of his time. Around this time, I actively participated in many of his teaching sessions.

For my father, it was the ideas, concepts, principles, and message he carried that were most important. He became committed to entrusting his colleagues as torchbearers who could carry on his uniquely powerful ideas beyond the time in which he himself could carry them. As emissaries of his, those advancements in ideas and principles are what each of us carries forth today.

MB: In addition to your work with the Erickson Historic Residence in Phoenix, described elsewhere in this issue (page 4), you also have a valuable history of significant contributions to this newsletter, which is an influential arm of the Erickson Foundation and reaches thousands of professionals worldwide. Would you describe some of your most meaningful experiences as a volunteer editor and contributor?

REK: The newsletter is indeed influential, with extensive circulation in print and on line. The newsletter has a rich history of skilled volunteerism, which began with Bill O’Hanlon, and has been carried forward by Michael Yapko, Dan Short, and Richard Landis. During the early 1990s, my sister, Betty Alice, and I co-edited the newsletter for more than five years. Since its inception, I have contributed, writing articles, interviews, book reviews, archive news, eulogies, and columns.

The Foundation owes much gratitude to the newsletter’s current executive editor, Richard Landis, and to editors Charles Simpkins for the book reviews, Eric Greenleaf for Case Report, John Lentz for In the Spirit of Therapy, and you Marilia Baker, for The Power of Two and Introducing the Institutes. The Foundation is also appreciative of all other contributors whose ongoing skilled volunteer work continued on next page.
continues to enrich this publication. Being an editor provided me with opportunities to recognize many individuals whom I value for their contributions to the study of hypnosis. I very much enjoy being part of this dedicated team that offers information to professionals worldwide.

MB: How would you like to be remembered?

REK: Erickson’s interchange of ideas was profoundly impactful, but now it has come to my attention that some of his colleague’s and contributor’s names remain prominent, while others are lost to history. We are lucky that some audio and video materials of my father are preserved. In his day, remembrance of one’s specific role in dissemination of ideas was kept through the written word. Those professionals most remembered are those who left written works. While I long to do more writing of my own, right now I am in a career phase where I am focusing on my clinical work and teaching and training.

I enjoy being an active, productive member of society, surrounded by friends and family. I rest at night knowing that I am true to my values and that I give all that I have to give. I appreciate the joy of watching the flowers open in the spring. I love feeling the sun’s heat on my skin in the summer. I feel a spiritual connection within, around me, and through me. Life is not about me. It extends through the generations, past and future. We all have gifts and we all have vulnerabilities; we are here to learn together from the experiences we share.

MB: Thank you Roxanna for this enlightening conversation!

In the desert of Sonora, on the branch of a tree,
Sat a noble eagle gazing to sea.
Wings forged from iron, a shadow was sown
Within was the hope of dreams not yet known.

Eagle readied for flight looking far and away,
Tree branch grew light, the shadow did stay
A journey of discovery into the sun;
The shadow, the eagle, and the tree are one.
With son on our shoulders
Feet fresh with do,
We embrace true friendship
and reach out for new.

Roxanna Erickson-Klein
Interested students and professionals can learn more about Roxanna Erickson-Klein and her projects by visiting: www.erickson-klein.org

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