Syllabus
"Each person is a unique individual. Hence, psychotherapy should be formulated to meet the uniqueness of the individual’s needs, rather than tailoring the person to fit the Procrustean bed of a hypothetical theory of human behavior.”

— Milton H. Erickson, M.D.

**THE MILTON H. ERICKSON FOUNDATION**

**THE MILTON H. ERICKSON FOUNDATION, INC.** is a federal non-profit corporation formed to promote and advance the contributions to the health sciences by the late Milton H. Erickson, MD. In addition to organizing congresses, workshops, the Brief Therapy and Couples Conferences, the Erickson Foundation also organized seven landmark Evolution of Psychotherapy Conferences. The Milton H. Erickson Foundation does not discriminate on the basis of race, color, religion, age, national or ethnic origin, physical challenge, gender or sexual orientation.

**Milton Hyland Erickson** (1901-1980) was an American psychiatrist who specialized in medical hypnosis and family therapy. He was founding president of the American Society for Clinical Hypnosis and was noted for his approach to the unconscious mind as creative and solution-generating. The novel psychotherapeutic strategies Dr. Erickson employed in his treatment of individuals, couples, and families derived from his hypnotic orientation. He affected a fundamental shift in modern psychotherapy. Many elements of the Ericksonian perspective, once considered extreme or avant-garde, are now incorporated into the mainstream of contemporary practice.
Purpose and Objectives

The Brief Therapy Conference: Treating Anxiety, Depression and Trauma is an opportunity for leaders in the field to present and interact, by discussing their individual approaches, and the progress of psychotherapy in general. Presenting at this conference are experts—each of whom has made seminal contributions to the field of psychotherapy. The Brief Therapy Conference 2014 is the tenth comprehensive gathering of master practitioners from major contemporary disciplines.

Attendees will increase their clinical effectiveness by:

1. Applying methods of brief therapy techniques in specific situations encountered in the practice of medicine, psychiatry, psychology, social work and counseling.
2. Comparing basic principles and techniques of contemporary schools of brief therapy.
3. Utilizing multi-level therapeutic communication, and demonstrating brief therapy principles of diagnosis, thereby improving observational skills.
BOOKSTORE
The Conference Bookstore features works by the faculty, as well as volumes on related topics, and will be open each day throughout the Conference. The bookstore is located in the Garden Room 4 — next to Starbucks.

**Bookstore Hours:**
- Thursday, December 11: 7:30 a.m. - 6:30 p.m.
- Friday, December 12: 7:30 a.m. - 7:00 p.m.
- Saturday, December 13: 7:30 a.m. - 7:00 p.m.
  *(Author’s Hour—Book Signing: 5:30-6:30PM)*
- Sunday, December 14: 8:00 a.m. - 3:00 p.m.

EXHIBITS
A select group of exhibits of interest to attendees will be open throughout the Conference. Exhibits are located in Grand Ballroom Foyer.

**Exhibit Hours:**
- Thursday, December 11: 7:30 a.m. - 6:30 p.m.
- Friday, December 12: 7:30 a.m. - 7:00 p.m.
- Saturday, December 13: 7:30 a.m. - 7:00 p.m.
- Sunday, December 14: 8:00 a.m. - 3:00 p.m.

AUDIO AND VIDEO RECORDINGS
Most presentations will be audio recorded, and some video recorded and available for purchase. The Audio and Video Recordings Booths will be located in the Grand Ballroom Foyer, near Registration.

RECORDING AT SESSIONS
No audio or video recording of sessions will be permitted.

SITE, SESSIONS & SEATING
The Brief Therapy Conference:
Treating Anxiety, Depression & Trauma
is held at—

**HYATT REGENCY ORANGE COUNTY**
11999 Harbor Boulevard
Garden Grove, CA 92840
714-750-1234

Attendance at the individual sessions of the Conference is limited by room size. There is no pre-registration. Early arrival to individual sessions will ensure optimal seating. The first row of all meeting rooms is reserved for attendees with physical challenges and for VIPs. Please do not block aisles or sit on the floor in meeting rooms. Strict regulations are enforced. We appreciate your cooperation.

**PLEASE BE CONSIDERATE OF OTHERS:**
*Do not use cell phones and please turn off your cell phone ringers during sessions.*

IDENTIFICATION BADGES
Each attendee is issued a name badge. Please wear your badge at all times. Only persons who wear identification badges will be admitted to Conference sessions.

VOLUNTEERS
A number of volunteers are assisting with the Conference. Volunteers can be identified by special ribbons on their name tags. If you are asked to change seats to accommodate someone who is physically challenged, please comply.

SMOKING POLICY
Smoking is permitted in designated areas only.

LOST & FOUND
Please turn in found items to the Erickson Foundation Registration Desk. At the end of the day these items will be turned over to the Hyatt Regency security.

LITERATURE TABLES
Literature tables are located in the Grand Foyer. There is a charge to display materials. Please ask at the Erickson Foundation desk for information and permission to display literature on these Free-Take-One tables. Unauthorized material will be removed.

SYLLABUS, CE Paperwork & Procedures
This book contains educational objectives, presentation descriptions, location of events and other important information. *Please don't lose it!* Additional copies will be available for $20, but only while supplies last.

INFORMATION & MESSAGE BOARD
An information/message board will be located near the Registration Desk. Notices may be posted, and will be removed at the discretion of the Milton H. Erickson Foundation staff. Emergency Eligibility

The Brief Therapy Conference is open to professionals with a master's degree and above in health-related fields from accredited institutions. Applications are also accepted from graduate students in accredited programs in health-related fields who supply a letter from their department certifying their student status as of December 2014.

Attendees not currently held to the professional Standards of Ethics in the medical and mental health sciences but who, nevertheless, wished to attend as a guest (layperson) for their own interests or edification, have agreed, in writing or electronic assertion that, as a guest, that they will not photograph or in any way record a conference program, or share information with another party in any way. They have committed to the Milton H. Erickson Foundation, its staff, faculty, attendees and all peoples included in the learning process that they will uphold this Code of Conduct.
The Milton H. Erickson Foundation
Policy on Disclosure

The Milton H. Erickson Foundation is proud of the conferences and other educational opportunities it sponsors, taking care that the conduct of these activities conforms to the standards and principles of behavioral and medical sciences, thus ensuring balance, independence, objectivity and scientific rigor in all individually sponsored or jointly sponsored educational activities.

All faculty members participating in a sponsored activity, and those who review and therefore are in control of content, are requested to disclose any relevant financial relationship prior to the CME activity, including but not limited to specific commercial interests, financial remuneration received by faculty member or spouse, and what role or activity was performed for this remuneration. If a conflict of interest exists as a result of a financial relationship it will be resolved prior to the activity. A faculty member will not be allowed to present if the conflict is not or cannot be resolved.

Definitions

Commercial Interest: Defined as any entity producing, marketing, reselling, or distributing healthcare goods or services, used on, or consumed by patients. Providers of clinical service directly to patients are not considered to be commercial interests.

Conflict of Interest: Circumstances that create a conflict of interest when an individual has an opportunity to affect CME content about products or services of a commercial interest with which he/she has a financial relationship.

Financial Relationships: Relationships in which the individual benefits by receiving a salary, royalty, intellectual property rights, consulting fee, honoraria, ownership interest (e.g., stocks, stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit. Financial benefits are usually associated with roles such as employment, management position, independent contractor (including contracted research), consulting, speaking and teaching, membership on advisory committees or review panels, board membership, and other activities from which remuneration is received or expected. An accreditation agency considers relationships of the person involved in the CME activity to include financial relationships of a spouse or partner.

Relevant Financial Relationships: Defined as financial relationships in any amount occurring within the past 12 months that create a conflict of interest. They are considered relationships with commercial interests in the 12-month period preceding the time that the individual is being asked to assume a role controlling content of the CME activity. There is not a set minimal dollar amount for relationships to be relevant. Inherent in any amount is the incentive to maintain or increase the value of the relationship.

Role or Activity: Employment, management position, independent contractor (including contracted research), consulting, speaking and teaching, membership on advisory committees or review panels, board membership, and other activities.

Compensation: Salary, royalty, intellectual property rights, research grant, consulting fee, speaker fee, ownership interest (e.g., stocks, stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit.

Accreditation

A.M.A. The Milton H. Erickson Foundation, Inc., is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians. The Milton H. Erickson Foundation, Inc., designates this live activity for a maximum of 33.0 AMA PRA Category 1 Credit(s)™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

A.P.A. The Milton H. Erickson Foundation, Inc., is approved by the American Psychological Association to sponsor continuing education for psychologists. The Milton H. Erickson Foundation, Inc. maintains responsibility for this program and its content. Credit is provided on an hour-per-hour basis (33.0 hours maximum).

Conflicts of Interest: Circumstances that create a conflict of interest when an individual has an opportunity to affect CME content about products or services of a commercial interest with which he/she has a financial relationship. Inherent in any amount is the incentive to maintain or increase the value of the relationship.

Relevant Financial Relationships: Defined as financial relationships in any amount occurring within the past 12 months that create a conflict of interest. They are considered relationships with commercial interests in the 12-month period preceding the time that the individual is being asked to assume a role controlling the content of the CME activity. There is not a set minimal dollar amount for relationships to be relevant. Inherent in any amount is the incentive to maintain or increase the value of the relationship.

Definitions

Commercial Interest: Defined as any entity producing, marketing, reselling, or distributing healthcare goods or services, used on, or consumed by patients. Providers of clinical service directly to patients are not considered to be commercial interests.

Conflict of Interest: Circumstances that create a conflict of interest when an individual has an opportunity to affect CME content about products or services of a commercial interest with which he/she has a financial relationship.

Financial Relationships: Relationships in which the individual benefits by receiving a salary, royalty, intellectual property rights, consulting fee, honoraria, ownership interest (e.g., stocks, stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit. Financial benefits are usually associated with roles such as employment, management position, independent contractor (including contracted research), consulting, speaking and teaching, membership on advisory committees or review panels, board membership, and other activities from which remuneration is received or expected. An accreditation agency considers relationships of the person involved in the CME activity to include financial relationships of a spouse or partner.

Relevant Financial Relationships: Defined as financial relationships in any amount occurring within the past 12 months that create a conflict of interest. They are considered relationships with commercial interests in the 12-month period preceding the time that the individual is being asked to assume a role controlling content of the CME activity. There is not a set minimal dollar amount for relationships to be relevant. Inherent in any amount is the incentive to maintain or increase the value of the relationship.

Role or Activity: Employment, management position, independent contractor (including contracted research), consulting, speaking and teaching, membership on advisory committees or review panels, board membership, and other activities.

Compensation: Salary, royalty, intellectual property rights, research grant, consulting fee, speaker fee, ownership interest (e.g., stocks, stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit.

Accreditation

A.M.A. The Milton H. Erickson Foundation, Inc., is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians. The Milton H. Erickson Foundation, Inc., designates this live activity for a maximum of 33.0 AMA PRA Category 1 Credit(s)™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

A.P.A. The Milton H. Erickson Foundation, Inc., is approved by the American Psychological Association to sponsor continuing education for psychologists. The Milton H. Erickson Foundation, Inc. maintains responsibility for this program and its content. Credit is provided on an hour-per-hour basis (33.0 hours maximum).

CE Procedures

The Application for Continuing Education and Evaluation forms will be available online beginning Tuesday, December 16th. You can obtain your certificate by going to www.BriefTherapyConference.com and following the link on the home page. Use this password, ?????? and complete the evaluation form and print it out immediately. If you do not have internet access, or prefer obtaining your certificate by mail, please stop by the registration desk and we’ll help you get a paper form. But please be aware that your certificate will take 8-10 weeks to be mailed.

PLEASE NOTE:
Attendees will receive a separate Documentation of Attendance for the Law & Ethics and Master Class post-conference workshops.
The Milton H. Erickson Foundation

Started in 1980, the educational outreach activities of The Milton H. Erickson Foundation have made it a leading provider of continuing education opportunities for mental health professionals.

Training Opportunities

CONFERENCES
The Foundation organizes educational conferences designed to share and explain state-of-the-art methods, while refining and enhancing clinical skills. Currently these conferences include:
• The International Congress on Ericksonian Approaches to Hypnosis and Psychotherapy (begun in 1980 and scheduled every three years)
• The Brief Therapy Conference (begun in 1988 and scheduled approximately every three years);
• The Couples Conference (first held as a stand-alone conference in 1995 and roughly each year thereafter).

The Evolution of Psychotherapy
Apart from other conferences is the celebrated Evolution of Psychotherapy Conference. The Foundation organized the first Evolution conference in 1985 in Phoenix. It was instantly hailed as a landmark conference—“The largest gathering ever devoted to the practice of psychotherapy” by TIME. At the suggestion of Virginia Satir, the conference was repeated every five years. A four-year cycle was initiated with the 2009 conference.

INTENSIVE TRAINING IN ERICKSONIAN APPROACHES TO HYPNOSIS & THERAPY
Since 1987, the Foundation has offered Intensive Training in Ericksonian Approaches to Hypnosis and Psychotherapy. Held three times a year in Phoenix, Arizona, these workshops have limited enrollment for individualized instruction, and are organized into Fundamental, Intermediate, and Advanced levels of training. All of them focus on principles, applications, and techniques of Ericksonian Hypnotherapy.

MASTER CLASS IN BRIEF PSYCHOTHERAPY
New to the educational opportunities offered by the Foundation is the Master Class in Brief Psychotherapy. This program is limited to 12 participants and open only to licensed, experienced mental health professionals. A special aspect of the Master Class is that it is held at the Erickson home, in Dr. Erickson’s office and teaching study, where he conducted his famous teaching seminars.

Since its inception, the Foundation operated out of modest ‘40s style bungalows in central Phoenix.

Recently, the Foundation moved its headquarters and archives into new facilities, and launched a capital campaign to support the headquarters as a center of study for Ericksonian psychotherapy and hypnosis. Funds raised will also be used to create a museum in Dr. Erickson’s Phoenix home: the same home where he conducted his famous teaching seminars.

The new center provides a home base for the Foundation’s dedicated staff, as well as serving as a destination for practitioners. We can now focus our energy in one place, maximize our efforts, expand our rich archives and continue to enhance the skills of students and professionals.

In 2010 the Foundation purchased Dr. Erickson’s last home in Phoenix, Arizona. The Foundation is committed to preserving the legacy of the late Dr. Erickson by transforming the home at 1201 E. Hayward Avenue into a museum. The home, where “the master” both lived and worked in the last decade of his life, will be preserved with integrity to give visitors an emotionally-charged experience. Friends of the Foundation can rediscover the man behind the methods by “experiencing Erickson” in his actual environment.

Audio, Video & The Foundation Press

The Erickson Foundation distributes recordings of lectures by Milton H. Erickson from the 1950s and 1960s, when Erickson’s voice was strong. Releases in our audio series are announced in the Newsletter.
THE ERICKSONIAN MONOGRAPHS
The Foundation is sponsor of The Ericksonian Monographs. The highest quality articles on Ericksonian hypnosis and psychotherapy are included in The Monographs. Ten issues were published under the editorship of Stephen Lankton. The Monograph series evolved into the Annual of Brief Therapy. These are available from Taylor & Francis.

CURRENT THINKING AND RESEARCH IN BRIEF THERAPY
Current Thinking and Research in Brief Therapy; Solutions, Strategies and Narratives. Evolving from the Ericksonian Monographs, this series contains only the highest quality articles on brief therapy, practice and research. Volumes I, II and III are available from Taylor & Francis.

THE FOUNDATION PRESS began by publishing the proceedings of the 1998 Brief Therapy and Evolution of Psychotherapy Conferences. The PRESS makes a library of print, audio and video resources available for mental health care providers. These include classics like The Handbook of Ericksonian Psychotherapy. Also offered are DVDs of Dr. Erickson, discussed by Jeffrey Zeig, such as Advanced Techniques of Hypnosis & Psychotherapy: Working with Resistance. An especially important project is the limited edition Collected Works of Milton H. Erickson, of which Volumes 1 through 16 are already in print.

Institutes, Websites & Newsletter
There are 140 Milton H. Erickson Institutes/Societies in the United States and abroad that have permission to use Dr. Erickson’s name in the title of their organization. Institutes provide clinical services and professional training. There are Institutes in major cities in North America, South America, Europe, Asia, Australia, New Zealand, South Africa and the Philippines.

www.erickson-foundation.org
CouplesConference.com
www.EricksonCongress.com
BriefTherapyConference
www.EvolutionofPsychotherapy.com

The Milton H. Erickson Foundation publishes a Newsletter for professionals three times a year to inform its readers of the activities of the Foundation. Articles and notices that relate to Ericksonian approaches to hypnosis and psychotherapy are included. Submissions should be sent to karen@erickson-foundation.org. Business and subscription matters should be directed to the Erickson Foundation at 2632 E. Thomas Rd., Suite 200, Phoenix, AZ 85016; newsletter@erickson-foundation.org.

NEWSLETTER STAFF
Richard Landis, PhD  Executive Editor
Karen Haviley  Production Manager

Staff
Matthew Braman  Multimedia Specialist
Karen Haviley  Registration & Volunteer Coordinator, Newsletter production
Fred Huang  Marketing Project Specialist
Christina Khin  IT/Operations Manager
Chandra Lakin  Archivist & CME Coordinator
Chuck Lakin  Director of Marketing & Publishing
Marnie McGann  Project Coordinator
Stacey Moore  Finance/Business Manager
Teresa Stratton  Administrative Assistant
Kayleigh Vaccaro  Meeting / Faculty / Institutes Coordinator
Jeffery K. Zeig  Director & Founder

Treating Anxiety, Depression & Trauma
Steve Andreas, MA, has been learning, teaching, and developing brief therapy methods for 36 years. He is the author of six books about brief therapy, and editor or co-editor of six more. Steve has a BS in chemistry from Caltech, and an MA in psychology from Brandeis University. Find him at http://steveandreas.com/

David Burns, MD, is Adjunct Clinical Professor Emeritus in the Department of Psychiatry at Stanford University School of Medicine. He has served as Visiting Scholar at Harvard Medical School and Chief of Psychiatry at Presbyterian-University of Pennsylvania Medical Center. His best-selling books, Feeling Good, and the Feeling Good Handbook, have sold over five million copies worldwide.

Steve Frankel, PhD, JD, is an ABPP Certified Clinical and Forensic Psychologist, as well as an attorney at law. He received his PhD in Clinical Psychology from Indiana University and completed an internship at Columbia University’s Psychiatric Institute. Dr. Frankel has been on the faculty of the University of Southern California for more than 35 years and is currently a Clinical Professor of Psychology. He served as an Adjunct Professor of Law at Loyola Law School (Los Angeles) and is now an Adjunct Professor at Golden Gate University School of Law. He has taught courses on healthcare policy, regulation of healthcare practice and mental disorder and the law. The author of more than 50 articles and book chapters, Frankel won the USC Award for Teaching Excellence early in his academic career.

Stephen Gilligan, PhD, is a psychologist who received his doctorate from Stanford University. Over the past 35 years, he has been a leading teacher in Ericksonian hypnotherapy while also developing his own approaches of Self-Relations and Generative Psychotherapy. He has recently co-founded (with Robert Dilts) the International Association for Generative Change (IAGC), a group dedicated to promoting generative approaches to change at individual and collective levels. He teaches internationally and has published extensively, and has a private practice in Encinitas, California. His most recent book, Generative Trance: The Experience of Creative Flow, explores how creative consciousness can be skillfully activated in therapeutic work. His website is http://www.stephengilligan.com/

Sue Johnson, EdD, is an author, clinical psychologist, researcher, professor, popular presenter and speaker and one of the leading innovators in the field of couple therapy. Individuals, couples and practicing therapists all turn to Sue for her insight and guidance. She is the primary developer of Emotionally Focused Couples Therapy (EFT) which has demonstrated its effectiveness in over 25 years of peer-reviewed clinical research.

Michael F. Hoyt, PhD is senior staff psychologist at the Kaiser Permanente Medical Center in San Rafael, Calif. He, along with Moshe Talmon and Robert Rosenbaum, pioneered the original single session research at Kaiser in the late 1980s. He is the author and editor of numerous books, including Brief Psychotherapies: Principles and Practices (2009) and Therapist Stories of Inspiration, Passion, and Renewal: What’s Love Got to Do with It? (2013). His most recent book is Capturing the Moment: Single-Session Therapy and Walk-In Service.

Pat Love, EdD, is a distinguished professor, Certified Love Educator, and is known for warmth, humor and commitment to learning. For more than 25 years, she has contributed to relationship education and personal development through her books, articles, training programs, speaking and media appearances. Dr. Love has published several professional articles, been featured in many professional books and developed relationships education media and materials being used nationally and internationally. Her ever-popular books Hot Monogamy and The Truth About Love have literally taken her around the world spreading the good news about marriage and committed relationships. She released her most recent book in 2007, coauthored with Dr. Steven Stosny, entitled How to Improve Your Marriage Without Talking About It.


Donald Meichenbaum, PhD, is Distinguished Professor Emeritus, University of Waterloo, Ontario, Canada. Presently, he is Research Director of the Melissa Institute for Violence Prevention, Miami (www.melissainstitute.org) He is one of the founders of cognitive behavior therapy and was voted “one of the ten most influential psychotherapists of the 20th century.” His most recent book is Roadmap to Resilience (http://www.roadmaptoresilience.org).

Scott Miller, PhD, is the founder of the International Center for Clinical Excellence—an international consortium of clinicians, researchers, and educators dedicated to promoting excellence in behavioral health services. Dr. Miller conducts workshops and training in the United States and abroad, helping hundreds of agencies and organizations, both public and private, to achieve superior results.
Bill O’Hanlon, MS, has written over 30 books, appeared on Oprah with his book Do One Thing Different, and has been a top-rated presenter at psychotherapy conferences all over the world. He was a student of the late Milton H. Erickson and created Solution-Oriented Therapy and Possibility Therapy. Find him at http://billohanlon.com/

Christine Padesky, PhD, Co-Founder of the Center for Cognitive Therapy in Huntington Beach, California, is a Distinguished Founding Fellow of the Academy of Cognitive Therapy. Dr. Padesky is a leading cognitive therapy innovator, provides workshops and consultation to therapists worldwide (www.padesky.com) and develops audio CD & DVD therapist training materials (at http://www.store.padesky.com). Her most recent book, Collaborative Case Conceptualization, joins five previous books which are translated into 23 languages. BABCP voted her best selling self-help book Mind Over Mood (www.mindovermood.com), the most influential CBT book of all time. She is recipient of BABCP’s Most Influential International CBT Therapist Award and the California Psychological Association’s Distinguished Contribution to Psychology Award. In 2007, the Academy of Cognitive Therapy bestowed on her its Aaron T. Beck Award for her enduring contributions to the field.

Esther Perel MA, LMFT, is the author of the international best-seller: Mating in Captivity: Unlocking Erotic Intelligence, and winner of the 2009 book award from the Society for Sex Therapy and Research. The book is now available in 25 languages. Fluent in nine of them, Perel brings a rich multicultural perspective to her work on couples therapy, cross-cultural relations, and couples and sexuality. She is on faculty of The International Trauma Studies Program and the Ackerman Institute for the Family, and is a member of the American Family Therapy Academy and the Society for Sex Therapy and Research. She was trained and supervised in family therapy by Salvador Minuchin and serves on the faculties of the Department of Psychiatry, New York University Medical School, and the International Trauma Studies Program at Columbia University’s Mailman School of Public Health.


Francine Shapiro, PhD, is the originator and developer of EMDR therapy, which has been designated as an effective trauma treatment by a wide range of organizations, including the American Psychiatric Association and the World Health Organization. She is a Senior Research Fellow Emeritus at the Mental Research Institute in Palo Alto, California, Director of the EMDR Institute, and founder of the non-profit, EMDR Humanitarian Assistance Programs (HAP), which provides pro bono training and treatment to underserved populations worldwide. HAP is now an international NGO in Special Consultative Status with the United Nations Economic and Social Council (ECOSOC), and has received an award for Clinical Excellence from the International Society for Traumatic Stress Studies. Dr. Shapiro is a recipient of the International Sigmund Freud Award for Psychotherapy presented by the City of Vienna in conjunction with the World Council for Psychotherapy, and the American Psychological Association Trauma Psychology Division Award for Outstanding Contributions to Practice in Trauma Psychology. Her books include the primary text for clinicians, Eye Movement Desensitization and Reprocessing: Basic Principles, Protocols and Procedures, Handbook of EMDR and Family Therapy Processes, EMDR as an Integrative Psychotherapy Approach, and Getting Past Your Past.

Ronald Siegel, PsyD, Assistant Clinical Professor of Psychology, Harvard Medical School; Board of Directors and faculty at the Institute for Meditation and Psychotherapy. He is author of The Mindfulness Solution: Everyday Practices for Everyday Problems; coauthor, Sitting Together: Essential Skills for Mindfulness-Based Psychotherapy; and coeditor, Mindfulness and Psychotherapy and Wisdom and Compassion in Psychotherapy: Deepening Mindfulness in Clinical Practice.
Bessel A. van der Kolk, MD, has been the Medical Director of The Trauma Center in Boston for the past 30 years. He is a Professor of Psychiatry at Boston University Medical School and serves as the Director of the National Center for Child Traumatic Stress Complex Trauma Network. He is past President of International Society for Traumatic Stress Studies. Though he identifies himself primarily as a clinician, he has published well over 100 peer reviewed scientific articles on various aspects of trauma, including his current projects: 1) yoga for treating PTSD, funded by the National Institutes of Health; 2) the use of theater for violence prevention in the Boston public schools, funded by the CDC; 3) the mechanisms of EMDR; 4) sensory integration; and 5) the use of neurofeedback in PTSD. He participated in the first neuroimaging study of PTSD, in the first study to link Borderline Personality Disorder with childhood trauma; was co-principal investigator of the DSM IV Field Trial for PTSD and is chair of the NCTSN DSM V workgroup on Developmental Trauma Disorder. He has written extensively about using neuroscience research to identify appropriate treatments for PTSD and completed the first NIMH-funded study of EMDR. He has taught at universities and hospitals around the world.

Reid Wilson, PhD, is author of Don’t Panic: Taking Control of Anxiety Attacks, coauthor of Stop Obsessing! How to Overcome Your Obsessions and Compulsions, and coauthor of Anxious Kids, Anxious Parents: 7 Ways to Stop the Worry Cycle and Raise Courageous & Independent Children, as well as the free e-book Playing with Anxiety: Casey’s Guide for Teens and Kids. He serves as the Expert for WebMD’s Anxiety and Panic Community.

Michael D. Yapko, PhD, is internationally recognized for his pioneering work in the areas of the strategic and experiential treatment of depression. He is a strong critic of the medicalization of depression and overuse of antidepressants, has authored 13 books (including Breaking the Patterns of Depression and Depression is Contagious) and routinely teaches to professional audiences worldwide. His innovative contributions have been acknowledged through lifetime achievement awards from The American Psychological Association’s Division 30, the International Society of Hypnosis, and The Milton H. Erickson Foundation.

Jeffery Zeig, PhD, is the Founder and Director of The Milton H. Erickson Foundation. Dr. Zeig is the architect of The Evolution of Psychotherapy Conference, the Brief Therapy Conference, the Couples Conference, and the International Congresses on Ericksonian Approaches to Hypnosis and Psychotherapy. He is on the Editorial Board of numerous journals; Fellow of the American Psychological Association (Division 29, Psychotherapy); and Fellow of the American Society of Clinical Hypnosis. He is a Distinguished Practitioner in the National Academy of Practice in Psychology of the National Academies of Practice and an Approved Supervisor of the American Association for Marriage and Family Therapy. A clinical psychologist, Dr. Zeig has a private practice, and conducts workshops internationally (more than 40 countries). He has been an invited speaker at major universities and teaching hospitals, and has edited, co-edited, authored or coauthored more than 20 books on psychotherapy that appear in 14 foreign languages.

Philip Zimbardo, PhD, is one of the most distinguished living psychologists. He has served as President of the American Psychological Association, designed and narrated the award-winning 26-part PBS series, Discovering Psychology, and has published more than 50 books and 400 professional and popular articles and chapters, including Shyness, The Lucifer Effect, The Time Cure and The Time Paradox.
Short Course Faculty

Naji Abi-Hashem, PhD
Norma Barretta, PhD and Phillip Barretta MA, MFT
Bob Bertolino, PhD
Gerald Brassine, MSW
Susan Dowell, LCSW, BCD
Joseph Dowling, MS, LPC
Linda Duncan, EdD
Maria Escalante de Smith, MA
Tobi Goldfus, MSW
Hank Griffin, MA, MFT
Virgil Hayes, DO, MSW
Richard Hill, MA
Debbie Joffe Ellis, MDAM
Robert Johansen, PhD

Paul Koeck, MD
John Lentz, DMin
Richard Miller, LICSW
Michael Munion, MA, LPC
Susan Pinco, PhD
Mike Rankin, MA and Dale Bertram, PhD
Robert Resnick, PhD
Teresa Robles, PhD
Dan Short, PhD
Bart Walsh, MSW
Susan Warren Warshaw, MSW
Robert Wubbolding, EdD
Emily Volden, MSW, LICSW and Dan Booth Cohen, PhD
Foojan Zeine, PsyD, MFT
# My Schedule

<table>
<thead>
<tr>
<th>AM</th>
<th>PM</th>
</tr>
</thead>
</table>
| Thursday
December 11 |   |
| Friday
December 12 |   |
| Saturday
December 13 |   |
| Sunday
December 14 |   |
| Monday
December 15 |   |

Notes
# Short Courses

## 8:30 AM-10:00 AM

### SC 1

**IS IT THE TALKING THAT CURES: UTILIZING SILENCE TO MAKE THERAPY MORE EXPERIENTIAL AND IMPROVE OUTCOMES**  
Sue Pinco, PhD

This experiential seminar will lead attendees in an exploration of mindful silence and its role in the clinical encounter. Our journey will begin with a taste of both structured and unstructured silence followed by a discussion of how both are manifested, experienced, and potentially utilized in the clinical encounter. Research related to silence in psychotherapy and recent findings in neuroscience will help explain why silence is a key ingredient in effective transformational processes.

*Educational Objectives:*
- Describe structured and unstructured silence, expand their understanding of how silence can be used to make therapy more experiential and be able to identify 2 techniques that can be utilized to facilitate this process. Attendees will be able to list 2 outcomes found in the research of Cook, Gendlin, Lovelady & Pinco that support the premise that silence is a key ingredient in resolution of psychological issues.

### SC 2

**USING BRIEF ERICKSONIAN PSYCHOTHERAPY FOR HELPING CHILDREN COPE WITH TRAUMA AFTER LOSS AND PAINFUL EVENTS**  
Maria Escalante de Smith, MA

When children experience painful emotions and anxiety after going through traumatic events they may not be able to understand what is happening to them and thus get depressed. Other consequences may appear, like lack of concentration or academic problems. Attendants will learn how treat these conditions by using brief Ericksonian techniques, assignments, and toys and by including the family members during therapy.

*Educational Objectives:*
- To explain how children develop depression and anxiety if they do not receive emotional support after experiencing trauma. To address how the use of adjuncts and task assignments can enhance the therapeutic process after trauma. To encourage attendants to include family members during the therapeutic process.

### SC 3

**FROM SEXUAL TRAUMA TO SEXUAL EMPOWERMENT USING PERSONAL, ANCESTRAL, AND SPIRITUAL DIMENSIONS OF CONSCIOUSNESS IN BRIEF THERAPY**  
Emily Volden, MSW, LICSW and Dan Booth Cohen, PhD

Family Constellations can be used in therapy as a process for treating sexual trauma. The experiential process accesses the heart as an organ of perception to explore, heal, and release sexual trauma while re-claiming clients’ empowered sexual selves. Employing a light meditation, therapist and client open the doors of awareness to ancestral and archetypal consciousness.

*Educational Objectives:*
- To gain an awareness of the significant role transgenerational trauma plays in the treatment of sexual trauma. To receive an introduction to a brief therapeutic process that transforms and heals the sexual self and ancestral lineage. To experience how heart-centered meditation and heightened intuitive perception can be used to access personal, ancestral, and spiritual dimensions of consciousness.

### SC 4

**AUGMENTING “PILLS NOT SKILLS”: STRATEGIC, SOMATIC AND ERICKSONIAN INTERVENTIONS WITH THE SEVERELY MENTALLY ILL**  
Hank Griffin, MA, MFT

Severe mental illness predominantly strikes the young, derailing normal social, cognitive and emotional development, predisposing to traumatic experience. Brief therapy interventions are particularly apt because they encourage skill acquisition and decontextualization via remedial experiential learning. This presentation will detail the use of strategic, somatic experiencing-influenced and Ericksonian interventions, among them pattern interruption, symptom prescription, ordeals and other Ericksonian elements treating chronically ill clients with attention to the structure and delivery of such interventions.

*Educational Objectives:*
- Describe how mental illness predisposes younger clients towards traumatizing experiences. List and describe three brief therapy interventions suitable for use treating the severely mentally ill. Discuss why brief therapy strategies are particularly appropriate to use with severely mentally ill clients.
Short Courses cont’d

**SC 5**

**THE CURIOSITY ORIENTED APPROACH**

Richard Hill, MA

Curiosity has long been an important element of therapeutic practice, but neuroscience gives us a deeper understanding and allows for curiosity to be more effectively practiced. New techniques that engage curiosity also act to enhance the client-therapist relationship which we now know is the most important element of successful therapy. Being curious about A Curiosity Approach is exactly what is required to seek out and participate in this workshop.

*Educational Objectives:* To understand the new neuroscience of curiosity. To be able to practice 2 new Curiosity Oriented Techniques. To list the 3 fundamental elements of the Curiosity Oriented Approach.

---

**SC 6**

**ZAPPING ANXIETY AND DEPRESSION AND HEALING TRAUMA, WITH VIGOROUS AND COMPASSIONATE APPROACH OF RATIONAL EMOTIVE BEHAVIOR THERAPY**

Debbie Joffe Ellis, MDAM

Rational Emotive Behavior Therapy (REBT), the holistic approach considered to be the grandparent of cognitive approaches, created by the renowned and brilliant pioneer Albert Ellis PhD, is most effective as a brief therapy for lessening, transforming, healing and preventing emotional disturbances. This Short Course includes a live clinical demonstration, and present the main aspects, methods and techniques of this vigorous, bold and compassionate approach, and is presented by Debbie Joffe Ellis, wife of Albert Ellis.

*Educational Objectives:* Describe the main aspects of Rational Emotive Behavior Therapy (REBT) which make it effective as a brief therapy for treating depression, anxiety and additional emotional disturbances—and recognize the characteristics of this holistic approach which distinguish it from other cognitive therapies. State three REBT techniques that can be used to help clients who are suffering from emotional disturbances such as anxiety and depression. Apply REBT's "ABC" tool to their own clinical practice, and to themselves.

---

**SC 7**

**EXPERIENTIAL TECHNIQUE FOR DEALING WITH TRAUMA:**

Re-Visiting the Empty Chair

Linda Duncan, EdD

This presentation teaches an adaptation of the “empty-chair” that targets trauma. Clients enact a dialogue between the “experiencing” and “self-stifling” parts of the self to discover the true impacts of trauma. Through a structured, step-wise process, clients move from less threatening to more threatening material, eliciting emotions, needs, and desires that have been submerged due to trauma. Supportive neuroscience research explains. Includes demonstration.

*Educational Objectives:* Describe the relationship between trauma and emotional dysfunction. Give a scientific rationale for using experiential techniques with trauma. Given appropriate circumstances, use empty-chair dialogue when trauma is the presenting problem.

---

**10:15 AM-11:45 AM**

**SC 8**

**A BRIEF SOLUTION-FOCUSED MODEL FOR INDIVIDUAL**

Robert Johansen, PhD

The presentation introduces a new, solution-focused model for treating individuals/couples. The model proposes specific and clear steps on how to differentiate types of love and how these impact intimacy. Participants will develop lasting strategies on how to effectively manage personal needs in the context of the intimate relationship.

*Educational Objectives:* Learn brief, solution-focused, treatment strategies (model) for treating individuals/couples. Learn how to help their clients analyze the stories each tells about the other in a constructive manner. Learn how to differentiate character-based vs. self-generated forms of love.

---

**SC 9**

**HYPNOTIC SCALING IS AN ERICKSONIAN SOLUTION FOCUSED SELF-HYPNOTIC TECHNIQUE THAT ALLOWS YOUR CLIENTS TO CHOOSE FREELY WHERE TO MOVE ON THEIR SOLUTION SCALE**

Paul Koeck, MD

Hypnotic Scaling is a simple Ericksonian & Solution Focused (self)hypnotic technique, developed by Paul Koeck, MD to help your client self-control and resolve Anxiety and Depression or symptoms of PTSD. You will be able to teach your client to freely choose where (s)he wants to be at a scale from 0 to 10 at any moment or in any context using (Self) Hypnotic Scaling. Your client will be able to choose his emotions, thoughts or feelings when and where (s)he wants!

*Educational Objectives:* Understand the mechanism, theory and principles of Hypnotic Scaling. Be able to apply the hypnotic technique on your clients with anxiety, depression or trauma. Be able to teach them to apply it in the form of self-hypnosis.
<table>
<thead>
<tr>
<th>SC 10</th>
<th>BETTER THAN ZERO: FOCUSED STRENGTHS-BASED STRATEGIES FOR IMPROVING WELL-BEING</th>
<th>Bob Bertolino, PhD</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>As challenges to well-being increase, practitioners are called to move beyond interventions to improve functioning to those that help clients flourish. Doing so will help clients to exercise greater resilience and do “better than zero.” This session offers strategies to develop gratitude, meaning, and character strengths that foster greater overall well-being. Educational Objectives: Describe two ways to evaluate well-being. Describe two elements that increase the effectiveness of strategies to increase well-being. Describe three global strategies to increase well-being.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SC 11</th>
<th>THERAPY BASED ON UNIVERSAL WISDOM FOR TREATING ANXIETY, DEPRESSION AND TRAUMA</th>
<th>Teresa Robles, PhD</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>After a presentation of original, new conceptualizations on Anxiety, Depression, Trauma and Universal Wisdom, presenter will do an exercise to participants for contacting their Universal Wisdom and to learn how to utilize it. She will demonstrate and participants will practice and discuss exercises and how to teach them to clients. Educational Objectives: Learn new conceptualizations on Anxiety, Depression, Trauma and Universal Wisdom. Learn and apply a protocol for working with Universal Wisdom. Apply four exercises for working with Anxiety, Depression and Trauma.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SC 12</th>
<th>FOOTPRINTINGS: SELF STATE THERAPY IN THREE DIMENSIONS</th>
<th>Susan Dowell, LCSW, BCD</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Footprintings is a projective exploratory model, designed to help patients get unstuck from a self-limiting personal narrative. Nine color sets of Footprintings become literal tools to represent and track shifting states of consciousness and to access untapped resources and body wisdom. This workshop will be both didactic and experiential. Educational Objectives: Describe one way Footprintings can be utilized to enhance internal communication between Self States. Describe one way Footprintings can be utilized to facilitate imaginal rehearsals. Demonstrate one way Footprintings can be utilized to track internal experience.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SC 13</th>
<th>ENHANCING RESILIENCY IN SHORT TERM CARE: INTEGRATING THE SOCIAL, EMOTIONAL, CULTURAL, AND EXISTENTIAL FACTORS</th>
<th>Naji Abi-Hashem, PhD</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>This presentation will explore the major themes, dimensions, and conceptualizations of resiliency from communal, psychosocial, cultural, and spiritual perspectives. We will discuss how to mobilize resiliency within the framework of time-limited soul care and use the dynamic interaction among heritages, norms, traditions, and values, to further the coping, surviving, and thriving strategies. We will argue that resiliency, is not only a psycho-emotional and individualistic potential ability, but also a collective foundation, resource, and faculty stored in the community. Thus, resiliency is a clear function of culture, group identity, and generational wisdom. Educational Objectives: Compare a few basic definitions with more complex definitions of resiliency. List several social foundations and cultural mediators of resiliency and discuss three major obstacles to the study of resilience. Identify four psychosocial integrators, list four types of cultural resiliencies, and repeat four therapeutic questions to enhance resiliency in clients.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SC 14</th>
<th>TAPPING INTO RESERVES YOU NEVER KNEW YOU HAD USING YOUR PERSONAL POWER</th>
<th>Norma Barretta, PhD and Phillip Barretta, MA, MFT</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>In the brief treatment of trauma, using hypnosis, not only amplifies the benefits, it also shortens the treatment time. Creating just the right metaphor, choosing the best language patterns, and using the patient’s (as well as the therapist’s) own resources can intensify and direct the deep desire for healing far more quickly than traditional therapy ever could. Tapping into their mutual personal power, enables the intervention. A demonstration of anchoring resources will be part of this short course. Educational Objectives: Learn specific hypnotic patterns, individually designed to provide the maximum benefit for each patient. Identify the patient’s own language patterns which can then be used to enhance the hypnotic experience. Learn the value of using their own resources to elicit the patient’s resources.</td>
<td></td>
</tr>
</tbody>
</table>
1:15 PM-2:45PM

**SC 15**

**ERICKSONIAN TRAUMA WORK AND MEMORY RECONSOLIDATION**

*Dan Short, PhD*

Ericksonian trauma work utilizes the experience of the present to redefine the past, while remaining future oriented. Memory reconsolidation occurs as memories are physically altered and re-encoded with new emotional elements. More than symptom relief, the intentional use of imagination and creative problem solving ensures greater resiliency for future challenges.

_Educational Objectives:_ State three psychological mechanisms by which memory reconsolidation occurs. List three core tasks that facilitate trauma work. State the key difference between therapeutic recall of memories versus potentially harmful recall work.

**SC 16**

**GOLDEN RULES ARISING FROM THE EXPERIENCE OF TREATING THE HEAVIEST CASES OF PSYCHO TRAUMAS WITH INTERACTIONAL/CONVERSATIONAL HYPNOSIS**

*Gerald Brassine, MSW*

Golden rules in treating cases of psychotraumas with interactional / conversational hypnosis. 1) Avoidance of secondary victimisation and reliving. 2) Conversational / interactional hypnosis (active and participative). 3) Zero pain: for this purpose, clearly assumed directivity. 4) Radical and systematic Paradoxical use of hypnotic “Dissociative protections.” 5) Metaphorical co-creation and empowerment of the patient.

_Educational Objectives:_ List 3 principles to have a patient in a state of interactional / conversational trance. Understand the concept of paradoxically use of PTSD symptoms and utilize at least three “Dissociatives Protections” to help the patient to softly desensitize traumas. Apply three techniques for changing memories and current psychosomatics effects while maintaining or regaining the principle of zero pain or state of comfort.

**SC 17**

**CONTEMPORARY GESTALT THERAPY’S VIRTUE AND CURSE: A LIVING SYSTEM IN THE STATIC (MANUALIZED) WORLD OF PSYCHOTHERAPY**

*Robert Resnick, PhD*

Contemporary Gestalt therapy, a powerful, process, deeply dialogic therapy, is solidly theoretical supported, evidenced based and elegantly discussed and demonstrated by Bob Resnick. Personally examined and certified by Fritz Perls (1969) and chosen by Perls to introduce Gestalt Therapy to Europe where he has trained Individual and Couples Therapists, academics and clinicians for 50 years – not all of them friendly. Theory and live demonstrations. Comments, questions, discussions and a sense of humor are welcome.

_Educational Objectives:_ Learn and appreciate the differences between content and process. See Gestalt Therapy as it is today and not as a distorted memory from the 1960’s. Understand how field theory, phenomenology and dialogue are all connected.

**SC 18**

**EXPLORING THE IMPACT OF MILTON ERICKSON AND STEVE DESHAZER’S WORK WITH REGARD TO DEPRESSION, ANXIETY, AND TRAUMA**

*Mike Rankin, MA and Dale Bertram, PhD*

This workshop focuses on the nuts and bolts of providing online Ericksonian Clinical Supervision. It will address how to select an online platform, the major legal and ethical issues in providing online supervision, and a focused discussion on how to utilize the online environment to provide quality supervision. Participants will leave this workshop with a good overview about how to conduct digital (online) supervision in ethical and useful ways.

_Educational Objectives:_ Articulate how to select user friendly online platforms for providing clinical supervision which are HIPAA and compliant. Describe the major ethical issues related to providing online supervision. Utilize the online environment to provide high quality Ericksonian supervision in distance/online environment.
USING CLINICAL HYPNOSIS AS A SEARCH ENGINE FOR ADOLESCENTS AND YOUNG ADULTS LOST IN CYBERSPACE: DEVELOPING THE “INNER SELFIE”

Tobi Goldfus, MSW

Strategic hypnotherapy techniques and approaches can dramatically give adolescents and young adults experiential skills in “unplugging” from cyberspace. This workshop will offer realistic and practical ways to connect both “online identities, profiling and use” with the young person’s “in real life” (IRL) experience, presenting effective tools and interventions that offer “outside the box” emotional impact. Using mobile devices (videos of case examples), cyberspace friendly scripts and ego state work that help to integrate their developing identities, this workshop will provide both induction and post-hypnotic techniques to help down-regulation goals (decrease in anxiety and depression), increase healthy ego boundaries and help the outer “selfie” that is “online” become comfortable with an “inner selfie” (ego strength).

Educational Objectives: Utilize 3 clinical hypnotherapy techniques that contribute to lowering anxiety and down-regulation with adolescents and young adults. Identify and use “online profiling and identities’ as tailoring techniques in both inductions and post-hypnotic suggestions. Implement the strategic hypnotherapy technique (“Ego Resource Strengthening Technique”) using client’s mobile device to improve ego strengths.

HOW TO BECOME SMART ENOUGH TO KNOW WHEN TO STOP THINKING:
A BRIEF, ERICKSONIAN APPROACH TO TREATING ANXIETY, DEPRESSION AND TRAUMA

Joseph Dowling, MS, LPC

Milton H. Erickson, M.D. understood that the conscious (thinking) mind is where symptoms are frequently created and cultivated while the subconscious mind is a limitless storehouse of healing energies, potentials, and solutions. This short course will describe a deceptively simple, Ericksonian approach to becoming powerfully calm. Live demonstrations, experiential zone exercises, and case studies will be facilitated to teach how solution-focused questions, strategic interventions, and formal/conversational hypnotherapy effectively treat anxiety, depression, and trauma.

Educational Objectives: Describe how the symptomology of anxiety, depression, and trauma can be utilized to create solutions and access the healing energy of the subconscious mind. Describe how to facilitate solution-focused, strategic, and hypnotic interventions in the treatment of anxiety, depression, and trauma related disorders.

NEW BRIEF THERAPY APPROACH FROM TRAUMA TO TRIUMPH

John Lentz, DMin

This new advanced brief therapy approach uses positive double binds to do intentionally what happens naturally when everything seems to go right. It transforms trauma’s rigid thinking and can greatly assist your clients to heal, make better decisions and believe more positively in themselves and their future.

Educational Objectives: State at least two ways that negative double binds block a person’s ability to make good decisions, and how they keep a person stuck. List two ways to construct positive double binds. List at least two ways that double positive binds can help their clients.

3:00 PM-4:30 PM

MERGING REALITY THERAPY AND ERICKSONIAN PRINCIPLES:
REPLACING THE EFFECTS OF TRAUMA, DEPRESSION, AND ANXIETY

Robert Wubbolding, EdD

A demonstration and a 12-minute DVD illustrate how to assist clients to make effective choices satisfying their needs, especially power or inner control. Merging reality therapy with Ericksonian principles helps clients discover and choose alternatives to the manifestations of past trauma, the pain of powerlessness due to anxiety and depression.

Educational Objectives: Describe how two Ericksonian principles interface with the WDEP system of reality therapy. Describe three techniques used in reality therapy that empowers clients to replace at least one manifestation of misery with a sense of hope. Analyze three applications of reality therapy for dealing with the effects of trauma.
SC 23  “WHEN YOU CAN EXPLAIN IT SIMPLY” UNDERSTANDING AND TREATING ANXIETY, DEPRESSION, AND TRAUMA
Virgil Hayes, DO, MSW

There are multiple explanations and theories to explain the creation of anxiety, depression and trauma creation. Many emphasize pathology, permanence of conditions and use multi-syllable words and encourage medical interventions to treat symptoms. This paradigm is often not effective for improving the lives of individuals treated. This course looks at non-medical underpinnings to conceptualize the creation of anxiety, depression and trauma. This conceptualization when understood by the clinician; makes them a better facilitator and co-creator in the treatment process. A natural, holistic understanding also empowers the clinician and client and moves all parties involved closer to health.

Educational Objectives: List three common threads of anxiety, depression and trauma. List two questions to elicit hope and optimism for clients. Describe anxiety, depression and trauma in a non pathological way.

SC 24  EFFECTIVE MANAGEMENT OF CHRONIC ANXIETY AND DEPRESSION WITH ESSENTIAL NEUROBIOLOGICAL COMMUNICATION
Bart Walsh, MSW

Learn how to access deep levels of mind-body functioning for remission of chronic anxiety and depression. Essential neurobiological communication (ENBC) incorporates a form of body language known as ideomotor signaling. Affected individuals learn to fully manage these chronic conditions. Resolve past emotion using a non-invasive protocol integrating a progressive ratification sequence for grounding emotional adjustments in thought, perception and behavior.

Educational objectives: Understand the use of ideomotor questioning in resolving emotional experience. Understand a method for accessing and quelling the source of chronic anxiety and depression. Understand one clinical application of a parts model.

SC 25  IMPACTING LIFELONG DEPRESSION AND CO-DEPENDENCY: DYNAMIC EMOTION-FOCUSED THERAPY, AN ACCELERATED TREATMENT
Susan Warren Warshow, MSW

In this workshop therapists will be introduced to a powerful, evidence-based, somatic and emotion focused approach to psychotherapy aimed at helping clients overcome barriers to the change process including defenses and defense driven affects (e.g. toxic forms of shame, anxiety and guilt). Therapists will be introduced to targeted interventions carefully crafted to disarm defenses and facilitate the integration of buried affect central to the treatment of anxiety, depression and other forms of trauma-related suffering.

Educational Objectives: Use moment-to-moment tracking and specific interventions to surmount toxic forms of anxiety, shame and guilt. Utilize targeted tools to effectively reach core feeling. Interrupt defenses while awakening compassion for self.

SC 26  BRINGING DEPTH INTO BRIEF THERAPY WITH AWARENESS INTEGRATION® MODEL
Foojan Zeine, PsyD, MFT

Everyone has the capability and deserves to live a fulfilled life, however, many get caught in the childhood and traumatic experiences that does not allow clarity to learn and sustain new effective skills. Learn about Awareness Integration Model, a structured brief therapeutic approach that synthesizes numerous theories, resulting in higher self-esteem, releasing negative core beliefs and attached emotional charge, setting goals and action plans to reach the desired life results.

Educational Objectives: Describe the theoretical foundation and Principals of Awareness Integration Model. Apply intervention approach. Identify the Integrative aspect of the model.

SC 27  BRIEF TREATMENT WITH THE BORDERLINE PERSONALITY
Michael Munion, MA, LPC

This course examines the nature of Borderline Personality Disorder (BPD), and presents an integrated model for treatment of specific issues in brief, solution-focused episodes. Core elements of a safety plan and development of a community resource network are described. Careful management of the therapeutic relationship is a critical part of this approach. Some specific protocols for common BPD issues, such as suicidal ideation and self-injurious behaviors are elaborated.

Educational Objectives: Describe BPD specific treatment issues. Describe protocols to guide in the process of managing specific treatment issues. Utilize a model to transition long term BPD patients to brief solution focused episodes of care.
EVERYTHING YOU WANTED TO KNOW ABOUT SEX BUT WERE AFRAID TO ASK—
TREATING GAY MEN WITH SEXUAL ISSUES
Richard Miller, LICSW
Attachment, trauma, sexual compulsivity, performance anxiety and community norms make gay sex tricky. Addressing this with clients is difficult too. This workshop defines sexual norms for gay men and teaches interventions and hypnosis scripts to maximize brief treatment.

Educational Objectives: Differentiate healthy sexual norms from sexual compulsivity in gay men. Learn to utilize specific hypnosis scripts for treating sexual issues with gay men. Learn strategies for discussing the specifics about sex with their gay male clients.

4:45 PM - 5:00 PM
Convocation
Jeffrey Zeig

5:00 PM-6:00 PM
Keynote Address 1
WHY I’M NOT A COGNITIVE THERAPIST
David Burns, MD
Most schools of therapy have contributed to our understanding and treatment of emotional distress. However, most function like competing cults, claiming to have the best answers and techniques. Dr. Burns argues that it’s time to leave the schools of therapy behind so we can develop a true, data-driven science of psychotherapy.

Educational Objectives: Describe at least two advantages of joining a school of therapy. Describe at least three potential problems with all schools of therapy. Describe the four central features of T.E.A.M. Therapy

6:00 PM - 7:30 PM
Dinner Break

7:30 PM-8:30 PM
Keynote Address 2
ATTACHMENT SCIENCE:
AN ESSENTIAL GUIDE TO CHANGE IN PSYCHOTHERAPY
Sue Johnson, EdD
There are currently over 400 specific approaches to psychotherapy and many therapeutic tribes. Attachment theory and science with its intrapsychic and relational focus offers the therapist a broad, integrative but systematic guide to the nature of dysfunction and health and how to move individuals, couples and families from one to the other. This presentation will offer a guide as to how this science can help to make our sessions relevant and on target in terms of leading to better affect regulation, cognitive coherence and supportive, stable relationships.

Educational Objectives: Describe the key elements of attachment theory and science relevant to the tasks of therapy. List specifically how these elements connect to key processes and change events. Describe specific interventions that arise from the attachment perspective.

KEEP THIS SYLLABUS!
Make sure to put your name and contact information on the back cover. You will be using it throughout the conference. It will also serve as a reference over the next year.

Treating Anxiety, Depression & Trauma
Friday December 12

Workshops

7:30 AM - 7:00 PM
REGISTRATION
Grand Foyer

7:30 AM - 7:00 PM
REGISTRATION
Grand Foyer

8:30 AM-4:00 PM
Special All-Day Workshop

FH
FUNDAMENTALS OF THE ERICKSONIAN APPROACH TO HYPNOTIC INDUCTION
Jeffrey Zeig, PhD

What is hypnosis? What is the Ericksonian difference? How do you help clients elicit a constructive trance experience? What is the most effective way to strengthen messages? In experiential workshop, participants will learn how to elicit a trance state and how to enhance responsiveness. Powerful hypnotic language forms can be tailored so that a trance is developed in an appropriate and efficient way for each client. Demonstration inductions, and work in small groups to induce and experience hypnotic states. Targeted to the beginner. No previous experience necessary. This is a one-day workshop and attendees are expected to attend all sessions.

Educational Objectives:
- Explain the phenomenology of trance.
- Describe the three-stage “skeleton” of an Ericksonian induction sequence.
- Describe the use of responsiveness to minimal cues.
- List six hypnotic language forms.
- Given a client, indicate how to use hypnotic language forms.
- Given a client, create an Ericksonian induction.

8:30 AM-10:30 AM

THE SHIFT FROM DESPAIR TO SECURE BONDING IN COUPLE THERAPY—KEY EVENTS AND HOW TO SCULPT THEM IN SESSION
Sue Johnson, EdD

This workshop will outline three key change events in EFT: Negative cycle de-escalation, hold me tight bonding conversations and Attachment injury Forgiveness. Each even will be outline, examples given and specific interventions outline and practiced. Throughout the workshop theory, research and practice will be integrated.

Educational Objectives:
- Outline the key change events in EFT.
- Describe how these events impact the construction of experience and interaction.
- Outline the key interventions that shape these events.

WHO’S AFRAID OF ANXIETY?
TWO RAPID METHODS USING UNCONSCIOUS SENSORY PARAMETERS
Steve Andreas, MA

Learn two very simple, rapid, and direct ways to elicit and transform the key unconscious processes that create anxiety. One utilizes changes in the sensory details of the feeling itself; the other changes the tempo of the internal worry voice that generates the feeling. Demonstrations, exercises and discussion.

Educational Objectives:
- Elicit the sensory details of the feeling of anxiety.
- Elicit the verbal dialogue that creates anxiety.
- Adjust and adjust the sensory parameters of the internal feeling of anxiety.

ANXIOUS KIDS, ANXIOUS PARENTS:
7 WAYS TO STOP THE WORRY CYCLE
Lynn Lyons, LICSW

Current research supports the inclusion of both parents and children in the treatment of anxiety in children based on the strong correlation between anxious parents and the subsequent development of anxiety in their children. This workshop will describe seven concrete strategies that teach families to interrupt the worry cycle and its all too common transmission from parent to child.

Educational Objectives:
- Identify the biggest myths, misconceptions, and mistakes that parents make when dealing with childhood fears and phobias.
- List the seven core treatment principles that can be successfully applied to any anxiety-related problem.
- Defend the therapeutic instruction to become unsure and uncomfortable on purpose.

PLEASE BE CONSIDERATE OF OTHERS:
DO NOT USE CELL PHONES AND PLEASE TURN OFF YOUR CELL PHONE RINGERS DURING SESSIONS.
T.E.A.M. THERAPY—
HIGH SPEED TREATMENT FOR SOCIAL ANXIETY DISORDER

David Burns, MD

In this workshop, Dr. Burns will show you how to use a multitude of powerful, fast-acting T.E.A.M. Therapy techniques in the treatment of crippling shyness, public speaking anxiety, performance anxiety, test anxiety, and shy bladder syndrome. The goals of the treatment include high-speed, total elimination of symptoms, with lasting change. Dr. Burns will show you how to integrate Cognitive Techniques, Motivational Techniques, Interpersonal Exposure Techniques, and the Hidden Emotion Technique, and will emphasize the importance of treating the person, and not the “disorder.” We hope you can join us for this dynamic workshop.

Educational Objectives: Describe the five types of social anxiety disorder. Describe the four central features of T.E.A.M. Therapy. Describe four treatment models for Social Anxiety Disorder. Describe at least five types of Interpersonal Exposure for socially anxious individuals.

TOOLS OF GENERATIVE PSYCHOTHERAPY:
HELPING CLIENTS DEVELOP SELF-LEADERSHIP SKILLS

Stephen Gilligan, PhD

His workshop will explore how generative psychotherapy can help clients activate the creative consciousness needed to live their lives in positive, fulfilling ways. This process requires the cultivation of self-leadership (and self-COACH) skills, such that a person’s performance self and observer self-work in a mutually respectful, harmonious pattern. The workshop presents some core methods of this approach, including somatic modeling, self-scaling, and engaging the creative unconscious. A demonstration and multiple case examples will illustrate how such methods can allow psychotherapy to be a deeply positive, effective conversation.

Educational Objectives: Identify three aspects of a self-leadership state. Describe three methods for developing each of these aspects in the client. Describe three ways that self-leadership processes can create positive therapeutic change.

DEVELOPMENTAL TRAUMA

Bessel van der Kolk, MD

Traumatic experiences and disorganized attachment affect people differently at different stages of mind and brain development.

Educational Objectives: To examine specific impacts of trauma during the course of development and examine what that means for effective treatment.

10:45AM-12:45 PM

EMDR THERAPY:
AN INTEGRATIVE APPROACH TO IDENTIFYING AND TREATING
THE UNDERLYING BASIS OF DYSFUNCTION

Francine Shapiro, PhD

This presentation will provide therapeutic guidelines to help identify the source of a wide range of clinical problems, and demonstrate how they can be addressed. EMDR therapy is widely recognized as an effective trauma treatment by organizations such as the American Psychiatric Association and the World Health Organization. In addition, 20 randomized studies demonstrate positive effects of the eye movement component. Research has also clearly demonstrated that certain kinds of life experiences lay the foundation for both mental and physical problems. Clinical and neurobiological research demonstrates that EMDR therapy directly addresses the physiological basis of clinical symptoms and dysfunction. This includes not only the overt symptoms, but also potential problems in relationships and deficits in sense of self. Group exercises, case examples, research, and client videos will be used to illustrate the procedures and comprehensive treatment effects that foster personal and relational development.

Educational Objectives: Explain the basis of a wide range of clinical problems. Demonstrate how positive treatment effects can be efficiently achieved through integrative treatment. Explain the emotional, cognitive, somatic and neurobiological changes that can occur with effective treatment.
Workshops cont’d

**WS 8**
**TREATMENT OF INDIVIDUALS WITH COMPLEX PTSD AND COMORBID DISORDERS**  
**Donald Meichenbaum, PhD**

This workshop will demonstrate ways to implement the core tasks of psychotherapy with individuals with Complex PTSD and ways to provide integrated treatment for comorbid disorders such as Prolong and complicated grief, suicidality and substance abuse disorders. A Case Conceptualization Model will be offered that informs treatment decision making. Specific evidence-based interventions will be examined.

*Educational Objectives:* Describe three core tasks of psychotherapy. Discuss two ways to conduct exposure-based interventions. Enumerate three ways to treat individuals with comorbid disorders.

**WS 9**
**A BRIEF APPROACH TO SEXUAL STYLE AND UNDERSTANDING**  
**Pat Love, EdD**

Human sexual response is a complex system even when attempting to understand one person let alone two people in a relationship. It is helpful, therefore, to have a way to organize decades of research and clinical practice in a manner which can be shared with clients. A practical schema will be presented to educate and motivate clients interested in improving their intimate connection. Lecture, video, original handouts and experiential exercises will be utilized.

*Educational Objectives:* Describe the influence of testosterone on sexual desire. Describe the influence of estrogen on sexual desire. Describe the influence of oxytocin on relationships.

**WS 10**
**THINKING TOO MUCH: RUMINATION AS A DRIVING FORCE IN CO-MORBID ANXIETY AND DEPRESSION**  
**Michael Yapko, PhD**

Rumination involves spinning around the same thoughts over and over again, analyzing endlessly why something happened or what to do about some situation. Rumination increases anxiety and depression levels, and perpetuates itself by the client believing that by ruminating, he or she is “doing something.” In this workshop, we’ll explore rumination and its negative effects, highlight the relationship between rumination and global cognition, and emphasize the importance of developing good discrimination skills. We’ll also consider the role of experiential processes such as hypnosis and mindfulness in treatment didactically as well as with a guided group experience.

*Educational Objectives:* To identify three ways rumination works against anxious and depressed clients. Identify the role of global cognition in perpetuating rumination. Demonstrate a technique of focusing to help encourage a mental “quieting.”

**WS 11**
**FEEDBACK INFORMED TREATMENT (FIT): MAKING TREATMENT FIT CONSUMERS**  
**Scott Miller, PhD**

It’s not a pretty picture. Available evidence indicates that the effectiveness of psychotherapy has not improved in spite of 100 years of theorizing and research. What would help? Not learning a new model of therapy or the “latest” so-called “evidence-based” treatment approach. And no, not attending another CEU event or sorting through that stack of research journals by your desk. A simple, valid, and reliable alternative exists for maximizing the effectiveness and efficiency of treatment based on using ongoing client feedback to empirically tailor services to the individual client needs and characteristics. Research on the approach conducted at multiple sites across a wide range of clients and presenting complaints indicates that clinicians can improve the outcomes of those cases most at risk for failure by as much as 65% without having to change their preferred treatment approach or learn any new treatment techniques.

*Educational Objectives:* Learn systematic ways to assess the clients’ perceptions of progress and satisfaction so that therapy may be empirically tailored to the individuals’ needs and characteristics. Learn simple and reliable methods for evaluating process and outcome in treatment. Learn how to use routine assessment of outcome and alliance to improve the quality and outcome of treatment.
**Friday December 12**

**WS 12**  
**SINGLE SESSION THERAPY**  
**Michael Hoyt, PhD**

Many therapies involve brief lengths of treatment, including a single session. A structure will be presented for organizing the tasks and skills involved in different phases (pre, early, middle, late, and follow-through) of therapy. Numerous case examples, including video, will illustrate brief therapy techniques useful both in initial sessions and in the course of longer treatments.  
**Educational Objectives:** List the tasks and skills involved in different phases of treatment. Describe brief therapy techniques that may be useful in different clinical situations. Consider application to participants’ own cases.

---

**12:45 AM - 2:00 PM**  
**LUNCH BREAK**

---

**2:00 PM - 4:00 PM**

**WS 13**  
**STRENGTHS-BASED CBT IN DEPRESSION: DEMONSTRATIONS AND PRACTICE**  
**Christine Padesky, PhD**

When people are depressed, they often deny having any strengths or positive areas of enjoyment in their life. This workshop demonstrates how to help depressed clients become more aware of their own strengths so these can be incorporated into CBT treatment. Participants are guided through exercises that help clients notice and capture small positive experiences, even when depressed.  
**Educational Objectives:** Practice questions that help depressed clients identify strengths and use these to reach therapy goals. Rehearse strategies that help depressed clients capture positive feelings through pleasure and mastery. Describe four aspects of Strengths-Based CBT.

---

**WS 14**  
**RETHINKING COUPLES THERAPY: INNOVATIVE APPROACHES TO LOVE, SEX AND INFIDELITY**  
**Esther Perel, MA, LMFT**

Through case examples, Esther Perel, MA, LMFT will show how to effectively engage such issues as intimacy, sexuality and infidelity by creating separate spaces where each partner can explore his/her feelings and experiences along with larger relationship dynamics. We will show how to navigate privacy and secrecy, honesty and transparency, stage interventions around sexual impasses, and structure a safe and flexible therapeutic environment to work effectively with infidelity. Provide a multicultural perspective on differing notions of love, marriage and sexual behaviors, and to highlight the relationship between culture and sexuality.  
**Educational Objectives:** Identify the common blocks to eroticism that preclude the pursuit of pleasure. Learn why increased emotional intimacy can lead to decreased sexual desire. Invert the traditional therapeutic priorities using the sexual relationship as a lens into the individual and the couple’s dynamics.

---

**WS 15**  
**MINDFULNESS AND INTIMACY: FOR PARTNERS, PARENTS, AND THERAPISTS**  
**Ronald Siegel, PsyD**

Psychotherapists and clinical researchers are finding that ancient Eastern meditative techniques, originally solitary practices refined by hermits, monks, and nuns, are proving to be remarkably useful for facing interpersonal challenges. This workshop will explore how mindfulness meditation can help our clients and us develop the affect tolerance and capacity to be with and understand others that are critical for successful intimate relationships. You’ll leave knowing the three core elements of mindfulness practice, how to use mindfulness to react less personally to the inevitable ups and downs of interpersonal life, and how interpersonal mindfulness techniques can enhance therapeutic, romantic, and parent-child interactions.  
**Educational Objectives:** Describe how mindfulness practices change our view of self and others. Describe the role of a constructed self in relational difficulties. Identify 3 objects of awareness to attend to in applying mindfulness in intimate relationships.

---

**WS 16**  
**AND THEY CHANGED HAPPILY EVER AFTER: HOW TO CREATE AND TELL COMPPELLING STORIES FOR CHANGE IN BRIEF THERAPY**  
**Bill O’Hanlon, MS**

Stories have the ability to engage people emotionally and to move them to change, but telling the right story and a compelling story, is an art and a skill. In this session, you will learn the structure of compelling stories and how to choose the right story for each individual client.  
**Educational Objectives:** List elements of a compelling story. Create an individualized story for a particular client, Use a story in a clinical setting.
THE STRATEGIC MODEL OF COGNITIVE TREATMENT FOR OCD
Reid Wilson, PhD

The treatment protocol—built out of whole cloth within the first session—directs the entire therapy process. The primary goal is to induce clients to voluntarily, purposely and aggressively seek out and embrace uncertainty and anxiety as their ticket out of suffering. This workshop will define that treatment process and illustrate each stage with professionally-videotaped segments of therapist interaction with an OCD client during the initial session of treatment.

Educational Objectives: Construct a therapeutic, internally-consistent paradoxical frame of reference for an OCD client. Teach OCD clients how to activate that new frame of reference moment-by-moment while approaching and engaging threatening situations. Construct behavioral experiments to test out the reliability and validity of this therapeutic intervention.

AN INTRODUCTION TO THE THERAPEUTIC HYPNOSIS OF MILTON H. ERICKSON MD AS AN EVIDENCE-BASED COGNITIVE BEHAVIOR THERAPY FOR TREATING ANXIETY, DEPRESSION AND TRAUMA
Ernest Rossi, PhD, Kathryn Rossi, PhD, and Roxanna Erickson-Klein, PhD

Ernest Rossi, PhD, Roxanna Erickson-Klein and Kathryn Rossi review the case work of Milton H. Erickson, MD in counseling, psychotherapy, therapeutic hypnosis and rehabilitation as evidence-based cognitive behavior therapy to treat anxiety, depression and trauma. This experiential workshop explores the timeless nature of the work of Milton H. Erickson, who substantially influenced the manner that psychotherapy is practiced in the 21 century.

Educational Objectives: List Milton H. Erickson’s naturalistic case work treating anxiety, depression and trauma. Cite updates on the research and clinical techniques of counseling, psychotherapy and rehabilitation. Practice Erickson’s naturalistic approach to therapeutic hypnosis as an evidence-based cognitive behavior therapy.

EMDR THERAPY: TREATING THE PSYCHOLOGICAL, PHYSICAL AND SOCIETAL EFFECTS OF TRAUMA WORLDWIDE
Francine Shapiro, PhD

The effective treatment of traumatized individuals has profound implications for family, community and the prospects of peace worldwide. This presentation will explore the psychological, physical and neurobiological effects of traumatization and how they can be efficiently reversed. EMDR therapy is an empirically supported trauma treatment. As indicated in the World Health Organization (2013) guidelines, EMDR and trauma-focused CBT are the only psychotherapies recommended for children, adolescents and adults with PTSD. The guidelines note that, unlike TF-CBT, the positive therapeutic outcomes of EMDR therapy are achieved without homework or detailed description of the disturbing event. Efficiency is demonstrated, for example, by research reporting that 100% of single-trauma victims no longer had PTSD after a mean of 5.4 hours of EMDR treatment. Individual and group EMDR protocols will be briefly described. An excerpt of a client session video will demonstrate the rapid transition from dysfunction to psychological health and resilience. Research will also be described to help clinicians correctly identify and treat the sources of PTSD symptoms not caused by major trauma.

Educational Objectives: Explain the psychological, physical and societal effects of trauma. Demonstrate how psychological, physical and societal dysfunction can be efficiently treated.
TREATING INDIVIDUALS WHO HAVE BEEN TRAUMATIZED/VICTIMIZED:
WAYS TO BOLSTER RESILIENCE
Donald Meichenbaum, PhD

Following the exposure to traumatic and victimizing experiences, 75% of individuals will be impacted, but they go onto evidence resilience and in some instances post traumatic growth. In contrast, 25% will evidence PTSD and persistent adjustment disorders. In this presentation, Dr. Meichenbaum will discuss what distinguishes these two groups and the implications for treatment decision making. He will use a Constructive Narrative Perspective to demonstrate how to bolster client’s resilience.

Educational Objectives: Indicate four factors that distinguish resilient individuals from those who evidence chronic PTSD. List three ways to bolster client’s resilience. Provide two examples of the common factors that various treatment approaches of PTSD client’s share.

THE BOOKSTORE IS OPEN

The conference bookstore carries hundreds of titles by faculty authors and related topics! The store is located in Garden Room 4

Bookstore Hours:
Thursday, December 11
7:30 AM - 6:30 PM
Friday, December 12
7:30 AM - 7:00 PM
Saturday, December 13
7:30 AM - 7:00 PM
Sunday, December 14
8:00 AM - 3:00 PM
### Saturday, December 13

**INTERACTIVE EVENTS AM**

#### 7:30 AM - 7:00 PM

**REGISTRATION**

**Grand Foyer**

#### 8:00 AM-9:00 AM

| CD 1 | Clinical Demonstrations 1  
**Utilization: The Foundation of Solutions**  
Jeffrey Zeig, PhD |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Grand Ballroom B-G</td>
<td></td>
</tr>
</tbody>
</table>
| All of Milton Erickson’s cases are based in utilization. It is an “alchemical formula” of turning lead into gold. Utilization is not a technique; it is an orientation that the therapist assumes. Utilization is an orientation of sufficiency that is the opposite of psychological problems, which can be viewed as believed-in insufficiencies.  
**Educational Objectives:** Describe the Utilization Approach. Given a client describe how to utilize context. Given a client describe how to utilize symptom words |

| CD 2 | Clinical Demonstrations 2  
**Transforming Grief into Gratitude**  
Steve Andreas, MA |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Grand Ballroom A</td>
<td></td>
</tr>
</tbody>
</table>
| Most “grief work” involves expressing grief fully, or saying “goodbye” to the lost person, neither of which resolves the feeling of loss. Full resolution reconnects with the treasured felt experience of the lost person, using it as a positive resource to move forward and reengage the world in the present.  
**Educational Objectives:** Identify and distinguish between tears of grief and tears of reunion. Elicit the different locations of grief and presence in the client’s personal space |

| TP 1 | Topical Panel 1  
**Research in Psychotherapy**  
Ernest Rossi, PhD, Scott Miller, PhD, and Michael Yapko, PhD |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Royal Ballroom A&amp;B</td>
<td></td>
</tr>
</tbody>
</table>

| D 1 | Dialogue 1  
**Anxiety Self Help for Kids**  
Reid Wilson, PhD and Lynn Lyons, LICSW |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Garden 1&amp;2</td>
<td></td>
</tr>
</tbody>
</table>

| CH 1 | Conversation Hour 1  
Bessel van der Kolk, MD |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Garden 3</td>
<td></td>
</tr>
</tbody>
</table>

#### 9:15 AM-10:15 AM

| CD 3 | Clinical Demonstrations 3  
**Stage 1 of EFT: The Process of De-escalation**  
Sue Johnson, EdD |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Grand Ballroom B-G</td>
<td></td>
</tr>
</tbody>
</table>
| This DVD of a live session at an EFT Externship shows how the EFT therapist helps a distressed couple grasp and distill both their negative interactive cycle that generates distance and the female partners depression and their underlying attachment emotions and needs. At the end of the session, the couple has begun to create a secure base from which to deepen and restore their emotional bond. Dr. Johnson will comment on the process of therapy and interventions as they are viewed.  
**Educational Objectives:** Outline the key moves of EFT in Stage 1 of this model. Describe the key interventions used. Distill the impact of these interventions and their contribution to the de-escalation of distress |

| CD 4 | Clinical Demonstration 4  
**Psychosocial Genomics: Utilizing the 4-Stage Creative Process Treating Anxiety, Depression, and Trauma**  
Ernest Rossi, PhD |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Grand Ballroom A</td>
<td></td>
</tr>
</tbody>
</table>
| Group and individual demonstrations of psychosocial genomics as the art and science of counseling and psychotherapy that utilizes our natural 4-stage creative cycle for facilitating gene expression and brain plasticity to optimize the resolution of anxiety, depression, trauma and problem solving in everyday life.  
**Educational Objectives:** Demonstrate the psychosocial genomic healing experience. List the 4 stages of the creative process |
TP 2: Topical Panel 2
Post Traumatic Disorders
Francine Shapiro, PhD, Bill O’Hanlon, MS, and Bessel van der Kolk, MD

D 2: Dialogue 2
EXPERIENTIAL APPROACHES: THE POWER OF ILLUMINATION
Jeffrey Zeig, PhD and Steve Andreas, MA

CH 2: Conversation Hour 2
Scott Miller, PhD, PhD

10:30 AM-11:30 AM

CD 5: Clinical Demonstration 5
GENERATIVE PSYCHOTHERAPY: HOW TO CREATE TRANSFORMATIONAL CHANGE
Stephen Gilligan, PhD

This demonstration will show how problems/symptoms may be viewed as attempts by the creative unconscious to bring transformation and healing, and how the development of a generative trance can allow that transformation to be realized.

Educational Objectives: Show how symptoms can become solutions under proper conditions. Show how a creative state can unfold from a client's unique processes and patterns.

CD 6: Clinical Demonstration 6
CONTRACT, CAUSALITY, CONGRUENCE: A BRIEF COUPLES THERAPY APPROACH
Pat Love, EdD

Using the client's goals for therapy as a treatment approach can move the session toward positive outcomes.

Educational Objectives: Create a session treatment plan based upon client goals. Delineate causal obstacles to goal-achievement.

TP 3: Topical Panel 3
HOMEWORK ASSIGNMENTS IN BRIEF THERAPY
Christine Padesky, PhD, Michael Yapko, PhD, and Scott Miller, PhD

D 3: Dialogue 3
THE ESSENTIALS OF CHANGE IN THERAPY
Francine Shapiro, PhD and Sue Johnson, EdD

CH 3: Conversation Hour 3
Lynn Lyons, LICSW

11:30 AM-12:45 PM

K 5: Keynote Address 5
MATING IN CAPTIVITY:
UNLOCKING EROTIC INTELLIGENCE
Esther Perel, MA, LMFT

Based on Perel’s Mating in Captivity, this bold take on intimacy and sex grapples with the obstacles and anxieties that arise when our need for secure love conflicts with our pursuit of passion. We will tackle eroticism as a quality of vitality in relationships extending far beyond mere sexuality and show how reconciling these two competing needs is at the heart of sustaining desire over time. We will address paradoxes of desire and how social forces inhibit erotic expression; attachment history and the erotic blueprint; the transition to parenthood; and the role of fantasy/imagination.

Educational Objectives: Learn innovative strategies to reconcile the need for safety and stability with the need for separateness and passion. Discover how our emotional history translates itself into our erotic blueprint. Learn how love and desire relate, but also conflict.
## Saturday December 13

### Interactive Events PM

#### 2:00 PM-3:00 PM

| CD 7 | Clinical Demonstration 7  
**POSSIBILITY THERAPY**  
Bill O’Hanlon, MS | Grand Ballroom B-G |
|---|---|
|  | This demonstration will show the use of a gentle brief therapy method that uses the best of client-centered therapy and Ericksonian methods to meet the person where he or she is and rapidly invite him or her into new possibilities.  
*Educational Objectives:* List two methods of Possibility Therapy. Use one Possibility Therapy intervention. |
| CD 8 | Clinical Demonstration 8  
**STRATEGIC TREATMENT OF ANXIETY DISORDER**  
Reid Wilson, PhD | Grand Ballroom A |
|  | The therapist will offer a simple, active paradoxical strategy that the client can integrate into their belief system about therapeutic change and then implement in a moment-by-moment to respond to anticipatory worries and the urge to avoid. The therapeutic stance of “seeking out” in this model hits squarely at any person’s tendency to resist.  
*Educational Objectives:* Learn how to treat anxiety disorders within a context of a mental game. Learn how to persuade anxiety disorder clients to engage in provocative homework assignments. |
| TP 4 | Topical Panel 4  
**TRAINING PSYCHOTHERAPISTS**  
Christine Padesky, PhD, Sue Johnson, EdD, and Jeffrey Zeig, PhD | Royal Ballroom AB |
| D 4 | Dialogue 4  
**THE NEUROBIOLOGY OF CHANGE**  
Pat Love, EdD and Ernest Rossi, PhD | Garden 1&2 |
| CH 4 | Conversation Hour 4  
Francine Shapiro, PhD | Garden 3 |

#### 3:15 PM-4:15 PM

| CD 9 | Clinical Demonstration 9  
**PROCESSING TRAUMATIC MEMORIES**  
Bessel van der Kolk, MD | Grand Ballroom B-G |
|  | *Educational Objectives:* Demonstration of how understanding the neuroscience of trauma can help. |
| CD 10 | Clinical Demonstration 10  
**STRENGTHS-BASED COGNITIVE BEHAVIOR THERAPY**  
Christine Padesky, PhD | Grand Ballroom A |
|  | Padesky and Mooney’s CBT clinical innovations introduced over the past 25 years are now unified in the model they call Strengths-Based CBT. Dr. Padesky demonstrates key aspects of this approach including how to identify and integrate client strengths into CBT, use of metaphor and imagery, therapeutic smiling, and the importance of silence for fostering client creativity.  
*Educational Objectives:* Identify three questions that bring strengths into client awareness. Describe two reasons a smile can be therapeutically necessary |
| TP 5 | Topical Panel 5  
**THE GOAL OF THERAPY**  
Pat Love EdD, Stephen Gilligan, PhD, and Jeffrey Zeig, PhD | Royal Ballroom A&B |
| D 5 | Dialogue 5  
**THE MIND AND HYPNOSIS**  
Michael Yapko, PhD and Ronald Siegel, PsyD | Garden 1&2 |
| CH 5 | Conversation Hour 5  
Sue Johnson, EdD | Garden 3 |
Contrary to the popular mythology, what makes hypnosis valuable is its ability as a tool to create a safe and comfortable context for self-exploration. As a direct consequence, people routinely find overlooked or dormant resources that would help empower them to not only feel better but be better. In this demonstration, we’ll explore how hypnosis might be helpful in increasing a sense of personal empowerment.

**Educational Objectives:** Describe the role of hypnosis as a vehicle of personal empowerment. Demonstrate ways to structure hypnosis sessions as tools of enhancing client experience.

This demonstration will feature Feedback-Informed Treatment, a pantheoretical approach for evaluating and improving the quality and effectiveness of behavioral health services. It involves routinely and formally soliciting feedback from consumers regarding the therapeutic alliance and outcome of care and using the resulting information to inform and tailor service delivery.

**Educational Objectives:** Demonstrate the administration of an outcome measure in routine clinical practice. Demonstrate the administration and interpretation of an alliance measure in routine clinical practice.

---

**Topical Panel 6**

**Anxiety Disorders**

Reid Wilson, PhD, Lynn Lyons, LICSW, and Ronald Siegel, PsyD

**Dialogue 6**

**Activating Creativity in Clients**

Stephen Gilligan, PhD and Bill O’Hanlon, MS

**Conversation Hour 6**

Esther Perel, MA, LMFT
Saturday December 13
8:00 PM-10:30 PM  Royal Ballroom C-F

Dance Party!

The Milton H. Erickson Foundation is calling for proposals for the 2015 International Erickson Congress. If interested in presenting a Solicited Short Course on the topic of Ericksonian hypnosis and psychotherapy (or closely related area), please submit (1) a 200-word presentation summary, (2) a 50 word abstract, (3) two educational objectives, (4) two true/false questions to be used for continuing education purposes and (5) curriculum vitae of all presenters in your program. Two copies of each submission, except CVs, should be included in your packet. Send only one CV for each presenter. We are only accepting online submissions. Please submit your proposal at www.ericksoncongress.com.

DEADLINE: Proposals must be submitted online by January 24, 2015. Acceptance or rejection will be sent by March 17, 2015. There will be approximately 40 Solicited Short Courses with one and a half hours allotted for each Course on Thursday, December 10, 2015. Short Course faculty receives complimentary registration for the Congress, but pay their own expenses for food and lodging.
Invited Address 1

Invited Address 1

Evolving Innate Brilliance of the Therapist
Jeffrey Zeig, PhD

Skills and experience, research and theory—each plays a critical role in the development of effective therapy practice. And then there is something else. When we recall the work of such figures as Milton Erickson, Virginia Satir, Carl Rogers and Carl Whitaker, we detect another layer: artistry. Surprisingly, artistry is something that can be taught, or more accurately, expanded or enhanced. Everyone has the capacity. And it is artistry that brings forth all of that skill, experience, research and theory in effective and generative ways. In this lecture, Dr. Jeffrey Zeig will identify the creative patterns of Erickson (and others). He will explain his experiential approach to therapist development, “psychoaerobics”—how the “state” of the therapist can be the starting point for effective clinical interventions.

Educational Objectives: Describe the “states” model. Indicate how the state of the therapist is the progenitor of the technique.

Invited Address 2

Invited Address 2

Eight Homework Ideas for Anxious Kids: Skills, Fun and Connection
Lynn Lyons LICSW

When working with anxious kids, your brilliance in the office means nothing if they cannot take what you offer and use it in their world. This presentation will give you eight homework assignments to engage kids from the start, and will spark your strategic creativity as you develop your own homework ideas.

Educational Objectives: List at least four homework assignments for anxious children and parents. Create a homework assignment that illustrates for a family the strategy of stepping toward anxiety rather than away from it.

Invited Address 3

Invited Address 3

Winning the Anxiety Game: Brief Strategic Treatment for the Anxiety Disorders
Reid Wilson, PhD

The cutting-edge anxiety treatment is now pushing further into the confrontational. You will learn how to help clients purposely to seek out anxiety as their ticket to freedom from crippling fear. Practical methods enable clients to ignore the content of their obsessive worries and to explore the feeling of uncertainty rather than fleeing from it.

Educational Objectives: Explain how to use reappraisal to activate “approach” emotions during exposure. Learn how to shift clients’ orientation from defense to offense.

CE Procedures

You can obtain your certificate online by going to the conference website at www.brieftherapyconference.com and follow the link on the home page: the password you will need is on page 3 of this syllabus. If you do not have internet access, or prefer obtaining your certificate by mail, please stop by the registration desk and we’ll help you get a paper form. But please be aware that your certificate will take 8-10 weeks to be mailed.
Invited Address 4

TREATING DEPRESSION HYPNOTICALLY AND STRATEGICALLY: THE POWER OF EXPERIENTIAL LEARNING IN TEACHING MOOD REGULATION SKILLS
Michael Yapko, PhD

How a clinician thinks about the nature of depression and answers fundamental questions - such as what causes depression - naturally determine what treatment approach he or she is most likely to take. Regardless of one’s preferred orientation, however, depression experts agree that treatment needs to be multi-dimensional and active. Furthermore, the more we learn about the neuroscience of depression, especially neuroplasticity and neurogenesis, the more important well designed experiential learning processes become in treatment. These include the use of task assignments and focusing processes such as hypnosis which we'll explore in this address.

Educational Objectives: Describe the role of social forces in shaping depression. Describe the role of experiential learning in effective treatment.

9:45 AM-10:45 AM

Invited Address 5

THE THREE POSITIVE CONNECTIONS NEEDED FOR TRANSFORMATIONAL CHANGE
Stephen Gilligan, PhD

Generative psychotherapy is an exploration of how individuals can forge positive, therapeutic responses to life challenges. This invited address concentrates on the three core connections that allow clients to do this: (1) Positive intention and goals (What do you most want to create in your life?); (2) Somatic Centering (Where do you feel the deepest resonance in your body?); and (3) Field Resources (What can most deeply support your path of change?). I will describe how these connections are absent in a repetitive problem and, more importantly, how their presence allows positive changes in difficult areas—e.g., a past trauma, a present difficulty, or a future possibility. Clinical examples and technique description will illustrate how such positive transformational states can be practically developed.

Educational Objectives: Show three methods for developing therapeutic change. Describe three techniques for connecting a client to a positive, skill-based state of being.

Invited Address 6

PTSD: WHAT IT IS AND HOW TO RESOLVE IT—AND WHAT IT ISN’T
Steve Andreas, MA

The phobic core of PTSD is a conditioned response to a terrifying event, easily treated with a process demonstrated in an 8-minute video. Learn the key components that combine to make this method so effective. Other co-occurring problems—grief, rage, anxiety, guilt, shame, drugs, etc.—require different processes for resolution.

Educational Objectives: Separate the phobic core of PTSD from other aspects involved in Complex PTSD. Resolve the phobic response by changing sensory parameters of the memory.

Invited Address 7

THREE THINGS A THERAPIST SHOULD “NEVER DO” THAT I DO (AND YOU SHOULD TOO)
Christine Padesky, PhD

It can be hard to unlearn habits, especially when these habits are taught as important components of competent psychotherapy. Offering reflections on several decades as a therapist and supervisor, Dr. Padesky demonstrates how 3 things you were taught in graduate school can limit your client’s progress.

Educational Objectives: Identify 3 common therapist practices that can interfere with client progress. Describe alternative therapist behaviors and the circumstances in which they may be necessary.
9:45 AM-10:45 AM  cont’d

Invited Address 8
YOGA, MOVEMENT AND BODY AWARENESS IN THE TREATMENT OF PTSD
Bessel van der Kolk, MD
Chronic trauma interferes with self-perception and self-regulation. We will discuss effective approaches
Educational Objectives: To show how working with bodily states changes the imprint of trauma.

11:00 AM-12:00 AM

Invited Address 9
THE QUANTUM ENTANGLEMENTS OF COSMOS AND CONSCIOUSNESS: A RNA/DNA EPIGENOMIC QUANTUM THEORY OF THE COSMOS/CONSCIOUSNESS FIELD
Ernest Rossi, PhD
Current research in psychosocial genomics is reviewed to underpin a new evolutionary RNA/DNA epigenomic theory of the quantum transformations of consciousness and creative cognition. The alternating classical-to-quantum and quantum-to-classical transitions on all levels from mind to gene are explored for developing an understanding of how the 4-stage creative process operates in an evolving cosmos/consciousness field theory.
Educational Objectives: Describe current research in the RNA/DNA epigenomic theory of quantum transformations of consciousness. Describe the 4-stages of the creative process in cosmos/consciousness field theory.

Invited Address 10
MINDFULNESS AND THE SCIENCE OF HAPPINESS
Ronald Siegel, PsyD
Everyone wants to be happy. While clinicians and researchers traditionally focused on helping troubled people feel less distressed—moving from -5 to 0 on the happiness scale—more recently they’ve branched out to investigate what actually leads to enhanced well-being. Some research findings point in surprising new directions, while others echo advice heard from wise elders and religious teachers across cultures and centuries. This address will explore the surprising parallels between recent discoveries and insights from ancient Buddhist traditions in providing pathways to well-being for therapists and clients alike.
Educational Objectives: Describe why most habitual attempts to find happiness ultimately backfire. Identify enduring sources of satisfaction that are not subject to the hedonic treadmill.

Invited Address 11
FUTURE PULL: CREATING CHANGE FROM THE FUTURE BACK
Bill O’Hanlon, MS
Most therapy orients to the past. This session will offer an alternative, using “future pull,” a method of engaging people in compelling preferred futures and working backwards to the near future to create change in brief therapy.
Educational Objectives: Use three methods of future pull. Give three examples of positive presuppositional language.
Sunday December 14

INVITED ADDRESSES

11:00 AM-12:00 AM cont’d

Invited Address 12

RELATIONSHIPS 2.0
Pat Love, EdD

Relationships have changed since the dawn of the 21st century. Dating, mating, single-life, sex-life, monogamy, matrimony, cohabitation, co-operation—all look different than a generation ago. As if it weren’t challenging enough to keep up with pathological, technological, ethnic, educational, gender, geographic, socio-economic, and sexual diversity, we now have the largest generational gap in modern history to contend with which means the relationship expectations and mores that made total sense to the Boomers now baffle many Millennials. Cultural shifts can create collateral damage in sex and love. Come take a look at stressors and solutions facing relationships 2.0! A Brief Approach to Sexual Style and Understanding Human sexual response is a complex system even when attempting to understand one person let alone two people in a relationship. It is helpful, therefore to have a way to organize decades of research and clinical practice in a manner which can be shared with clients. A practical schema will be presented to educate and motivate clients interested in improving their intimate connection. Lecture, video, original handouts and experiential exercises will be utilized.

Educational Objectives:
List two characteristics which delineate the millennial generation. Describe the cohort effect.

12:00 PM - 1:15 PM

LUNCH BREAK

1:15 PM-2:15 PM

Keynote Address 6

HOW TRAUMA CHANGES THE BRAIN, AND WHAT THAT MEANS FOR TREATMENT
Bessel van der Kolk, MD

Neuroimaging and EEG measures of traumatized individuals show significant changes that must be taken into account for treatment to be effective.

2:30 PM-4:30 PM

Keynote Address 7

THE SECRET POWER OF TIME:
TIME PERSPECTIVE THERAPY FOR THE TREATMENT OF PTSD
Philip Zimbardo, PhD

For over 20 years, Dr. Zimbardo has researched the power of relationship with time has on our lives. He has co-authored two published books on the topic, The Time Paradox and The Time Cure, and developed the Zimbardo Time Perspective Inventory (ZTPI) which has been translated into over 24 languages and validated globally. His talk will review the major research on time perspective and introduce his work with Dr. Richard Sword and Rosemary Sword on Time Perspective Therapy, a brief therapy intervention to treat Post-Traumatic Stress Disorder.

Educational Objectives: Review current Time Perspective research. Appreciate the intellectual journey from ideas to research to evidence that gets translated into clinical practice, that in turn gets systematically evaluated through new applied assessments. Introduce and explore applications of Time Perspective Therapy for PTSD. Understand the pervasive extent of PTSD that is increasing in its extent to many populations. Consider why most current treatments are not as effective as they should be. Consider how a simple reframing of the core problem from Past to Future-orientation can have major positive effects on reducing symptom severity that approaches a qualification as a “cure.”

4:30 PM

CLOSING REMARKS
WHAT’S THE FUTURE & WHERE TO FIT
This 6-hour program addresses the profound changes that are taking place in the health system in the U.S., the implications for mental health care, and, in turn, the implications for mental health care providers. We begin with a discussion of the role of the insurance industry in health care and how that role has expanded over the past 50-60 years, affecting the licensure and practices of mental health professionals. From there, we move to the current changes themselves, including:
● the Affordable Health Care Act
● Accountable Care Organizations
● Current Procedural Terminology
● DSM vs. ICD
● Electronic Health Care Records
● HIPAA Changes
Also covered are insurance panels for independent practitioners, the Parity Law, “Professional Wills,” alternatives to licensed mental health practice, and licensing board action summaries.

LAW & ETHICS
with Steven Frankel, PhD, JD

Law & Ethics
Many schools of psychotherapy have been derived from the seminal work of Milton H Erickson M.D., including strategic therapy, interactional therapy, NLP and solution focused therapy. In some approaches hypnosis is central; in other approaches hypnosis is more peripheral. This class features two experts personally trained by Dr. Erickson, each of whom approach psychotherapy from somewhat different perspectives. In his approach, Possibility Therapy, Bill O’Hanlon epitomizes the strengths of a solution focused orientation. In his experiential approach, Jeffrey Zeig shades treatment in the direction of developing dramatic reference experiences.

O’Hanlon and Zeig will comment on each other’s work and highlight similarities and differences. The morning and afternoon sessions are quite similar. Each of the faculty members will separately work with a client from the audience who is stuck on a personal issue. After the session, the other faculty member will comment, which will be followed by discussion among the faculty, and interaction with the audience.

Want to improve your practice? This course is designed for therapists at all levels of experience and from all theoretical orientations.
So where’s the coffee?

THURSDAY, DECEMBER 11, 2014
Royal & Garden Ballroom Foyers  8:00 AM-9:00 AM

FRIDAY, DECEMBER 12, 2014
Royal & Garden Ballroom Foyers  8:00 AM-9:00 AM

SATURDAY, DECEMBER 13, 2014
Royal & Garden Ballroom Foyers  7:30 AM-8:30 AM

SUNDAY, DECEMBER 14, 2014
Royal & Garden Ballroom Foyers  8:00 AM-9:00 AM

MONDAY, DECEMBER 15, 2014
Garden Foyer  7:30 AM-9:00 AM

Coffee and Tea Courtesy of
THE MILTON H. ERICKSON FOUNDATION