

The Milton H. Erickson Foundation NEWSLETTER

Michael D. Yapko, Editor / 2525 Camino del Rio S., Suite 265 / San Diego, CA 92108

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

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Interview

An Interview with Ernest L. Rossi, Ph.D.

at
The 10th Anniversary of
The Milton H. Erickson Foundation

By Michael D. Yapko, Ph.D.



Ernest L. Rossi (Ph.D., 1962, Temple University) is in private practice in Los Angeles, California. He is the author of two books, one on dreams and one on the psychobiology of mind-body healing. Rossi has extensive experience as a Jungian analyst and has served on the certifying board of the C.G. Jung Institute of Los Angeles. He has written prolifically on the hypnotic approach of Milton H. Erickson and is the co-author, with Dr. Erickson, of four books. Additionally, Rossi edited four volumes of Erickson's collected papers and co-edited two volumes of Erickson's early lectures. He is editor of *Psychological Perspectives: A Semi-annual Review of Jungian Thought*.

Y — Please share some information about your childhood, your evolving interest in therapy, and basically a "Reader's Digest" version of how you got to where you are now.

R — I was born March 26, 1933, at the end of "The Depression." My father was a carpenter out of work, who was also sometimes a salesman. My grandfather, who is my namesake Ernest, first came to this country from Italy; he couldn't read or write. He was a day laborer digging the subways in New York City. A tragedy happened when I was only about three or four years old — he had a stroke. From his stroke he was permanently handicapped in a wheelchair. So, the rest of the family had to go to work. Suddenly I was left with grandpa who was my first babysitter, and he was mostly paralysed, sitting in a chair. I was like a little monkey — he would tell

me to go and fetch him a glass of water and such things. It worked out very nicely, except he would complain to the family [about me] sometimes at Sunday dinner, saying "But he always escapes." [That was because] every once in a while I would become a pioneer — walk out of the house, and run across the street to the "new land," to new deep, profound explorations of vacant lots and backyards. So, I think that [exploration] is very deep in my nature. Did my early association with my grandfather who was my first babysitter and my namesake set a life pattern for me that led to my association with Erickson in a wheelchair during the last eight years of his life?

When I was seven or eight years old, I began working for a shoe repairman; he was an older fellow, too. So, I began learning the shoe repair trade. I was there for about seven or eight years. Even today, if it comes to a revolution in which I'm stripped of my degrees, I'll be able to fix your shoes! I'm well grounded; I know how to take care of myself. I got a chemistry set when I was a kid, and that led me into the wonders of science in my home lab. That absorbed me more than my regular school classes.

When I finally got to high school, I was never a very good student — only "Cs;"

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Evolution Volunteer Posts Filled

All positions have been filled by full-time graduate students who will serve as volunteers at the Evolution of Psychotherapy Conference in December.

Conference organizers encourage students to attend the meeting. Arrangements have been made with several Anaheim hotels to provide economy housing with the hope that students will be able to attend.

Students also are given a reduced registration fee to enable them to attend the Conference.

Sachi Eng is volunteer coordinator for the Conference.

Evolution of Psychotherapy

Leaders in the field of psychotherapy will have an opportunity to interact by presenting their approaches at the Evolution of Psychotherapy Conference.

The meeting is scheduled for December 12-16, 1990, in Anaheim, California. The subtheme of the meeting is "PsycheScapes: Positions and Projections." The meeting will center around that title.

Presenters at the meeting are Aaron Beck, Murray Bowen, James Bugental, Albert Ellis, William Glasser, Mary Goulding, Robert Goulding, Jay Haley, James Hillman, Helen Singer Kaplan, Arnold Lazarus, Alexander Lowen, Cloe Madanes, Judd Marmor, James Masterson, Rollo May, Donald Meichenbaum, Salvador Minuchin, Mara Selvini Palazzoli, Erving Polster, Miriam Polster, Ernest Rossi, Thomas Szasz, Paul Watzlawick, Carl Whitaker, Joseph Wolpe and Jeffrey Zeig. Viktor Frankl has provisionally accepted.

Obituary —

Bruno Bettelheim, Ph.D.



Bruno Bettelheim, Ph.D., died Tuesday, March 13, 1990, at the age of 86. I only met Dr. Bettelheim once, at the 1985 Evolution of Psychotherapy Conference.

Carl Whitaker, Joseph Wolpe and Jeffrey Zeig. Viktor Frankl has provisionally accepted.

The Conference, the second of its kind in five years, will enable attendees to be exposed to the various disciplines of psychotherapy. Interactive events include supervision panels, topical panels, invited presentations, debates, workshops and demonstrations.

A special private party at Disneyland Park also is planned. The event, open only to Conference attendees and their guests, is scheduled for Thursday, December 13.

A registration form is on page 8 of this issue of *The Newsletter*. For additional information contact The Erickson Foundation, 3606 N. 24th Street, Phoenix, Arizona 85016; (602) 956-6196.

I remember prior to the Conference that some people had described Dr. Bettelheim as somewhat of a curmudgeon with a grizzly attitude. When I first met Dr. Bettelheim, I admit I had to agree. However, I soon changed my opinion. At his Conversation Hour, his persona seemed one of a tempered analyst who had learned the value of establishing boundaries. Dr. Bettelheim was crystal clear with those who asked him questions. He described in no uncertain terms what he would and would not discuss, "No, I will not offer an opinion of Reich's psychopathology. He was my friend. Would you give such an opinion of a friend?" "No, I will not talk about changes in the Orthogenic School since my departure because I feel my views might be biased." "No, I will not offer an opinion of the directions to which future

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Editor's Viewpoint

The last issue of *The Newsletter* contained an interview I conducted with Albert Ellis. Well, I expected *some* reaction, but not quite as much as I actually received. Jay Haley's letter (see Letters to the Editor) represented one end of the continuum of reactions; at the other end were those intrigued by Ellis' comments about Erickson.

Why publish a viewpoint of Erickson that is critical and even condescending? As editor of *The Newsletter* and as an obvious proponent of Ericksonian approaches, I think it is invaluable to provide a jolt to the complacency of those who think the value of Ericksonian approaches is self-evident.

While many of the barbs of Dr. Ellis clearly are rooted in a lack of awareness for Erickson and his methods, he does raise questions worth asking: What is *the* unconscious? Why "trust the unconscious"? What is "unconscious therapy"?

It is obvious I am committed to the value of Ericksonian approaches to hypnosis and psychotherapy, yet I recognize that respected authorities can promote negative views with a casual statement. There is a need for all those who identify themselves as Ericksonian to be able to conceptualize and explain their views with greater clarity and substance than has too often been the case. While clinicians tend not to conduct efficacy studies on their work, the need for hard data to lend support to the assumptions guiding our work is not being well addressed. What about *some* objectivity about Ericksonian approaches? Would it be useful? What do you think?

Corrections to the Albert Ellis Interview

by Michael D. Yapko, Ph.D.

The last issue of *The Newsletter* featured an interview with Albert Ellis, Ph.D. Dr. Ellis was disappointed that he was not given the opportunity to edit the edited interview before its publication, and has asked to have the following changes published as corrections. I have apologized to Dr. Ellis for my inconvenience caused him. The following responses are his newly edited answers to my original interview questions.

Y — You said that, in essence, other therapies besides RET are inefficient.

E — Not only inefficient, many of them are iatrogenic — they cause *therapeutic* disturbance and do more harm than good. Much of this Ericksonian stuff that I heard at this conference today and yesterday is horse_! It leads people up the garden path, away from the hard cognitive, emotive, and behavioral work — yes, *work* — they'd better do to improve. It fails to help them see what they unconsciously or tacitly and consciously or explicitly do to *construct* their disturbances. Effective therapies, such as rational-emotive therapy (RET) presumably is, directly show clients precisely what they do to create their neurotic problems and what they can concretely do to think, feel, and act against their disturbances.

RET and other kinds of cognitive-behavior therapy include direct methods that are becoming the most popular ones used today by all kinds of therapists, including psychoanalytic, Ericksonian, and other irrational therapists. When I first began to do and teach RET in 1955, only some Adlerians, especially Rudolf Dreikurs, favored it. Alfred Adler was a pioneering cognitive therapist, who really plowed through much Freudian nonsense. If therapists are wise, they will throw out most Freudianism — and most of psychoanalytic object relations theory as well, which foolishly insists that borderline and psychotic individuals are created by their mothers looking at them cross-eyed! Most of today's therapies sacralize early childhood upbringing and neglect the strong biological influences on severe disturbance, which are fully acknowledged by RET.

Anyway, I am happy to see that my creation of RET in 1955 led to the later creation and present great popularity of related cognitive-behavior therapies, such as those of Beck, Meichenbaum, and Barlow.

Y — I suppose that a good response from a true Ericksonian is that not everyone responds well to a direct approach, and therein lies the value of an indirect approach.

E — Yes, indirect and even bizarre approaches to therapy sometimes — but I would say rarely and quite inelegantly — work. I would like to see experiments done that test the results of what I call direct, scientific therapy versus indirect, often irrational therapy. I naturally predict that direct cognitive-behavior therapy will bring better results. But I am all for trying direct RET first, and then trying other kinds, even antiscientific, cultish kinds of therapy (like some Ericksonian and NLP procedures) when clients will not work at applying more sensible methods.

I often cite David Barlow, a fine cognitive-behavior therapist, who in 1978 reported the case of a near-psychotic depressed male who insisted that he was really a woman, demanded a transsexual operation, and resisted all Barlow's therapeutic efforts. By accident, this man met a Protestant minister, not a priest, who exorcised his demon — so that he completely gave up his compulsion to become a transsexual and began to feel much better.

Now, once in a while this crazy kind of therapy temporarily works, even though in some respects it is a disturbance in its own right — as, I would say, are certain kinds of devout religious and cultish therapies. But sometimes we therapists had better admit that some of our clients are *so* disturbed that we won't get very far with them by using normally effective, direct, scientific therapy. Then we may legitimately experiment with almost any kind of mumbo-jumbo or religious and cultish drive, even when we know they are sheer rot.

Similarly, we can occasionally use "deep" psychoanalytic, Ericksonian, primal therapy, Reichian, and other indirect cultish techniques when other methods fail. When such techniques do work, I think they somehow, though inefficiently, help people to make cognitive changes that interrupt their irrational thinking and help them think and behave more self-helping. Thus, with all his hocus-pocus and his supposedly speaking to his clients' "unconscious minds," Milton Erickson, both directly (as Jay Haley noted) and indirectly (as the Ericksonian cultists insist) convinced his clients that they *could* change, *could* think and act less self-destructively, and *could* lead symptom-free lives. In his own inimitable way, he was often a quite rational teacher, much more than a practitioner of "unconscious" magic.

Moreover, as Ernest Hilgard, Elgan Baker, Corydon Hammond, and other recent critics have pointed out, Erickson conducted and encouraged no controlled studies of his therapy, but only presented anecdotal accounts of his "successes" and omitted virtually all accounts of what I guess were hundreds of his grim failures. I suspect that many of his stories and "cases" were brilliant fictions, as a good many other scientific critics of the Ericksonian literature have often held. When his clients did improve, as many of them probably did, I would guess that they had self-defeating philosophies, which they held consciously or just below the surface of consciousness, and that he showed them how to become aware of and how to reconstruct those philosophies, and that is how they changed themselves. Thus, using RET, I work with people who tacitly or unconsciously demand that they *must* do well and *have* to be approved by significant others. When I ask them, "Aren't you telling yourself, rationally, that you'd like to do well and be approved, but aren't you also unconsciously, underlyingly, telling yourself, I *must* do well, I *have* to be approved, and it's awful and I'm *no* good if I do poorly and am disappointed?" They almost always immediately reply, "Hey, that's right! That's exactly what I *am* telling myself." So in RET we can very quickly discover people's unconscious, tacit self-defeating philosophies, help them to see and accept them, and then show them how to directly, and very consciously, change these destructive beliefs. RET often takes only a few minutes to reveal and begin to dispute key unconscious ideas that people use to needlessly upset themselves.

Y — It seems apparent that therapists would know that's true [that letting go of pent-up anger by pounding pillows often makes it easier for clients to feel enraged next time] if they'd just look at that resulting increase in anger. Why aren't therapists noticing that happens?

E — Because therapists often think and feel devoutly, stupidly, and disturbedly. My observation is that the majority of therapists — including Ph.D.'s, M.D.'s, and M.S.W.'s — who practice highly emotional, abreactive, magic-seeking therapy (including many NLPers, Reichians, Ericksonians, and New Age therapists) themselves are quite dogmatic and antiscientific. Many of these irrational therapists are not scientists — as are experimental, social, and other

psychologists — and were seriously disturbed to begin with — that's why they got into the clinical field! Partly because of their disturbances — and their own crooked thinking that largely makes them disturbed — they accept Freudian, Ericksonian, Reichian, and other drivel. In my opinion — though I'd better do some controlled studies to confirm this view — crooked thinkers hook themselves on crazy therapies. Some even become devout, antiscientific RETers!

Y — You're saying in your own inimitable way that therapists will get so loyal to a theory as to miss what's happening in front of their eyes?

E — That's right. And they frequently get superloyal to an incorrect theory and a harmful practice. Hopefully, psychologists and other clinicians are now doing theory experiments and discrediting techniques that Freudians, Ericksonians, Gestalt therapists, and NLPers — all of whom do very few outcome studies — have enthusiastically touted for years. In the case of Neuro-Linguistic Programming, for example, about seven outcome studies have been published, all of which show it to be ineffective. But I am afraid that it's going to take another hundred years to do studies that will persuade therapists to stop doing much of what they do today. At that time when people read about Freudian, Ericksonian, transpersonal, and other shamanistic therapies, I think they'll vomit. Not only because the gullible public endorsed them but because professional therapists piously believed in them, too! If therapists, as well as their clients, are often as crazy as I think they are, this tends to substantiate one of my main theories: that most people are innately — yes, biologically — easily disturbable. But, as I have held for many years, and as RET assumes, humans are also innately changeable and self-

actualizing. They are prone to create and construct numerous disturbances. But they are also predisposed to construct and create less disturbed and more enjoyable existences. Otherwise therapy would be useless.

Y — To date, what has been the high point of your career?

E — There have been several high points. First, several polls of psychologists, counselors, and marriage and family therapists have placed me (along with Rogers and Freud) among the most influential theorists. Second, literally hundreds of controlled studies now show that RET and cognitive-behavior therapy (CBT) help people significantly more than do other kinds of psychological treatment. Third, another several hundred experimental studies show that irrational belief and dysfunctional attitude tests, derived from my original list of irrational beliefs, almost always significantly discriminate between disturbed and less disturbed people. Fourth, I have finally, after much previous neglect, received the major American Psychological Association award for professional contributions to knowledge, the top American Association for Counseling and Development award for professional development, and the Teachers College Columbia University distinguished alumni award. More than these, however, I treasure the Humanist of the Year award from the American Humanist Association in 1972. This is *not* the Association of Humanistic Psychology, which I am a charter member of, but which unfortunately is now overrun with "humanists" who are devout transpersonalists and mystics — and therefore are devotees of superhuman rather than humanist ideology.

Letters to the Editor

Dear Sir:

I would like to protest some material in your Winter, 1990, issue where you interview Albert Ellis, Ph.D.


You state in your "notes from the Editor" that "*The Newsletter* continues to be the primary vehicle for maintaining contact among professionals interested in Ericksonian approaches." Could you explain how the interview with Albert Ellis is in any way related to professionals interested in Ericksonian approaches? How could the Milton H. Erickson Foundation encourage such nonsense? As a friend, colleague and admirer of Dr. Erickson I am nauseated by the comments made in a newsletter which supposedly presents Erickson's ideas. It is as bad as advertising past life therapy under his name.

Many of us have seen opponents of Erickson and his work become fans after his death. I am reminded of the meetings honoring Erickson where keynote speakers were people who never admired him in his lifetime and opposed his approach to therapy. Virginia Satir, for example,

somehow became a speaker at meetings honoring Erickson when she practiced a very different therapy and opposed his approach over the years. Carl Whitaker became a keynote speaker at meetings honoring Erickson when Dr. Whitaker does therapy quite differently from Erickson and met him perhaps once in his life time. It would seem the Erickson Foundation is not following a program presenting and expanding Erickson's ideas but is using any therapist who has a name as a way of bringing people to a meeting. However, for an Erickson newsletter to quote Albert Ellis is simply inexcusable.

Let me quote from the interview with Dr. Ellis. Discussing psychoanalysis, which he equates with Erickson's therapy, he said he discovered that psychoanalysis "intensely goes into every irrelevancy under the sun, and misses every relevancy, just as Ericksonian therapy does." Dr. Ellis continues, saying that Dr. Erickson (and others) were great inventors, "but they

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hadn't the foggiest notion of why humans really are disturbed and how to undisturb them. They just accidentally did things which partly worked."

I think that Dr. Erickson focused upon the most relevant issues of a client more than any other therapist. He also spent his life investigating, and teaching why human beings are disturbed and how to undisturb them. To imply that he was an idiot who did not know what he was doing is the statement of an idiot and should draw some comment from the editor of an Ericksonian newsletter.

Let us take another quote. Dr. Ellis says, "Most of this Ericksonian stuff that I heard today is horse_____!" What he heard that day from the new generation of Ericksonian therapists we do not know, but Ellis does not merely attack Erickson's followers but Erickson himself. He says, "So, most of those techniques which dramatically work in the semi-fictional things which we write in the literature only illustrate the cases that work, or (else they) invent cases. I think Erickson invented a good many of his stories and his successes, and forgot the thousands and thousands of failures of his kinds of techniques."

Ellis is saying here that Dr. Erickson was a charlatan who made up his cases. I cannot let such an insult pass, having spent many years investigating Dr. Erickson and his work. The fact that Ellis knows little or nothing about Erickson's therapy is not excusable. Nor is it excusable for the Erickson Foundation to publish this kind of attack on the integrity of Dr. Erickson without comment. Apparently in appreciation of such insults, the Erickson Institute of San Diego advertises in this issue bringing Dr. Ellis in as a keynote speaker to join a faculty he considers to be talking horse_____.

Dr. Ellis characterizes therapists, and therefore himself, as "devout, stupid and disturbed." Even though he might be like that, this interview makes him look worse. A competent interviewer protects his subject, and not only do Erickson followers deserve an apology for this interview, but Dr. Ellis does as well.

Let me make it clear that I am not objecting to the publication of this interview. Everyone has a right to be published, and I am sure there are comic books which would publish it. However, for the Erickson Foundation to bring in anti-Ericksonian speakers and to publish interviews where Dr. Erickson is insulted is simply not acceptable. Unfortunately, Dr. Erickson is not here to defend himself. One can only note how brave people are once the leader has passed away.

Yours sincerely,
Jay Haley

To The Editor:

I will not directly answer Jay Haley's comments on my interview with Michael Yapko, because the interview was, to my great surprise, published without my seeing the typescript and the published version garbled many of the points I made — including those to which Haley objects. *The*

Newsletter is now publishing my revised version of part of this interview and perhaps Haley will incense himself a little less if he reads this revision.

I heartily agree with Michael Yapko's "Editorial Viewpoint" on Haley's letter. In this day of many sectarian psychotherapies, I think that it is highly admirable for the Erickson Foundation to invite dissidents like me to participate in its conferences and to be interviewed in its newsletter. As Karl Popper has indicated, one of the main aims of science had better be its openness to criticism and falsification of "scientific" theories and practices. If Ericksonianism is to remain scientific it had better keep welcoming the kind of skepticism that my interview includes and that Haley so passionately deplores.

Albert Ellis, Ph.D., President
Institute for Rational-Emotive Therapy
New York City

Dear Dr. Yapko:

I do not know whether to be upset, saddened, or just laugh at the interview with the grand old master, Albert Ellis. Even in this day and age Albert still finds it's necessary to emote adolescent four-letter words in his public appearances, and he still seems to hold on to RET as if it were the God of man while condemning the contributions of others. He appears to do all of this in the name of science with little or no statistical data to support his claims. He says that Freud mentions science in every other breath and that he, Freud, was a dogmatist of the worst sort. I chuckle at the pot calling the kettle black. I'm really not impressed with his research study on 50 of his own clients who were successes and 50 who were failures. It would be interesting to know what his criteria is for success and what it is for failure.

Hopefully all of the therapies discovered to date are but a tip of the iceberg and that we can look forward in the years ahead to many scientific advances in psychotherapy. It is far easier to create a therapeutic model than it is to scientifically determine whether there is statistical significance to our work. Dr. Ellis asks us to give up one dogma for his dogma. Perhaps it is a characteristic of grand old masters that they also have to be grand old egotists.

Yours truly,
George C. Anderheggen, M. Div., Ph.D.

Newsletter Business

The Newsletter is published three times per year. The closing dates are April 15, August 15, and December 15. This means all items to be included must be received by those dates. *The Newsletter* is posted approximately six to eight weeks later. As always, send all advertising directly to The Foundation in Phoenix. Training events, announcements and other information should be sent directly to me at the San Diego address on the front page.

Stephen R.
Lankton



Notes From The Monographs

Brunner/Mazel is about to release *The Ericksonian Monograph, Number 7: The Issue of Broader Implications of Ericksonian Therapy*, edited by Stephen R. Lankton. Number 7 has articles and rejoinders by Richard Fisch, M.D., Steve DeShazar, M.S.W., Stephen G. Gilligan, Ph.D., Bradford P. Keeney, Ph.D., William J. Matthews, Ph.D., William R. Nugent, Ph.D., Robert E. Pearson, M.D., Ernest L. Rossi, Ph.D., and additional articles and research by John Gall, M.D., William Nugent, Ph.D., and Akira Otani, Ph.D.

The Ericksonian Monograph, Number 8: "Brief Therapy in Process and Action," edited by Stephen R. Lankton, M.S.W., Stephen Gilligan, Ph.D., and Jeffrey K. Zeig, Ph.D. is in final preparation. Articles can still be submitted and should be sent as soon as possible to Lankton at P.O. Box 958, Gulf Breeze, Florida 32562.

Czech Colleague Writes of Trauma

The following is an excerpt from a letter sent to Mrs. Milton Erickson from Michael Vancura, a faculty member from Czechoslovakia. Dr. Vancura wrote the piece following the revolution in Prague in November 1989.

Workers in Health Services For Purification and Against Violence

Obligated by the ethics of our work and by citizens' conscience, as well as by our academic oaths of caring for the health of Man and disseminating human knowledge, we declare as follows:

Our aim is the revival of Man, social groups, families, and entire society. Only through this revival may we realize our professional work, without it our activities lose their *raison d'etre*. The causes of the social crisis thwart our efforts focused on the health and development of Man. With full responsibility for our patients and clients, we maintain that without the basic morality, freedom, and possibility of participating in public matters the health of both the individual and the nation is unthinkable.

We are against violence, because it destroys the gifts of life that we are expected to protect and develop. We are embittered by the brutality which has recently become the norm of the approach of state organs toward citizens and led to the bloody and tragic events of November 17, 1989. We are afraid that this violence is going to raise further violence, and we are decided to prevent it. At the same time we condemn the methods that threw hundreds of young men in uniforms into this intervention against civilians. Although we do not release them from their personal responsibilities, we do not consider them to be the main culprits.

We support all citizens and groups asking for the extent of the tragedy of November 17, 1989, to be made publicly known and thoroughly investigated, and for all the culprits and responsible authorities to be called to account for it. We express our distrust as regards the present leadership of our state, and request that the installation of a positive political programme [sic] be not obstructed.

We express our sympathy with the theatrical and other artists, with the students, workers and all other citizens to whom our common future is a matter of great concern.

We turn to all workers in health services and social care, calling on them for allegiance to academic oaths, professional ethics and citizens' conscience. Let us look together for what we can do — us, here and now. Let us take part in the general strike and other protests so as not to neglect our fundamental professional duties and jeopardize people's health.

As members and functionaries of Czechoslovak and international professional organizations, we invite both the Czechoslovak and the international professional public to the support of, and solidarity with our efforts.

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a very indifferent student in class. Part of it was because I had to work all the time, but mostly it was because I had come from an illiterate family. I was lost in fantasy a lot. But, I did a lot of studying on my own. When it came time to take college boards, my parents happened to be back visiting in Italy so I borrowed \$50 from my grandfather and took the college boards. I did so well I got a little tuition scholarship that allowed me to go to pharmacy school. So, that's how I escaped, so to speak, into the world of higher education.

I did very well as a college undergraduate, but I felt inadequate socially, so I thought I could compensate by leaving the world of science and going into literature. I was very advanced in science; so very often I didn't have to study. For a few years, I spent all my days in college reading Galsworthy, Balzac, and all the great French novels, all the classical novels. I would spend all day long just reading in my bed. They'd say, "Hey, there's an exam on such and such date. . ." and I'd just go and take it! I'd do well enough to get an "A" or a "B" because I had this rich background of self-study in science since my high school days. When it came time to graduate, I decided I really wanted to go into graduate school, so I got some scholarships. In pharmacy school pharmacognosy was my specialty.

Y — So, in some ways it's sort of a full circle for you to come back to biology as a primary interest. At one point, though, you left that biological realm and got into

psychology. Will you talk about that transition?

R — I finally got to graduate school and lived my dream of science; I did chemical analysis in the agriculture department to support my little scholarship. But I found out I was kind of neurotic — I wasn't dating. One day someone gave me a copy of Freud's *The Interpretation of Dreams*, and that was an incredible revolution in my thinking. Suddenly, I saw psychology as a kind of mental chemistry. I stayed up for three days and three nights and literally couldn't sleep. I was so absorbed in reading this book and the excitement of this whole new world, because it combined literature and the humanities with my inherent interest in biology and molecules. So, I switched to psychology. I got my master's degree and spent a year at the V.A. determining whether or not I really wanted to go on and get a Ph.D. in clinical psychology.

Y — Where was this?

R — This was the V.A. in Coatsville, Pennsylvania. I stayed there two years. I had a U.S. Public Health Pre-Doctoral Fellowship. That allowed me to live at the hospital with no expense. So, all the money I earned I put into my analysis five days a week. I really had a lot of stuff to work out, and it worked! I had a wonderful analysis, a classic Freudian analysis, five days a week. Then I got accepted into Temple University in Philadelphia, and while I pursued my Ph.D. in clinical psychology in the daytime, I secretly studied at the Psychoanalytic Institute at night. I say secretly, because they don't allow you to do

that, but I was determined to be a Freudian analyst at the time. So, I was an "Underground Freudian." I studied with an offshoot of the Theodore Reich Group in New York at a branch in Philadelphia.

By the time I got my Ph.D., I was again very lucky. I got a U.S. Public Health Post-Doctoral Fellowship and I had my choice of a number of places to go in the country. I decided to come to California and study with Franz Alexander. I spent two years studying with Franz Alexander; it was his last class. So, I had a very rich background in psychosomatics. But, at that time, I came in contact with a couple of Jungian analysts who were also my supervisors. I thought the Jungian world was a broader, bigger world somehow. I read Jung, Adler, and Karen Horney. I'd go on these reading jags where I'd just read everything these people would write. Otto Rank was a favorite of mine.

So, I got a very rich background and it usually was by myself in self-study. Usually, I was bored in classes, whether in chemistry or psychology. Most of my learnings were done by myself. The university classes always seemed to be very superficial. So, when I came out and studied with Franz Alexander for two years and discovered the world of Jung, I decided to go into Jungian training. I entered private practice still in Jungian training. As luck would have it, one of my very first clients was a young woman who was referred to me from UCLA Student Health Center. She had incredible dreams, her dreams translated themselves within the dream state itself. Her dreams were like a psychological rosetta stone. Symbols translated themselves in her dreams. She'd dream an ape was climbing a pole, and then suddenly the ape would turn into her, and she would get an important realization. She had a very rare kind of mind, a kind of lucid dreaming. I wanted to present that case to the psychoanalytic forum, a circle of analysts. You present a case to them while you are going through training. But, it was too early in my training program, and they said, "Look, there's plenty of time for that. We don't want you to make a fool of yourself!" Well, I was really frustrated with that; I said, "Okay, the hell with you!" and I wrote my first book instead, *Dreams and the Growth of Personality*. I spent six years studying Divina's dreams and writing that book. Out of that study, I developed what I felt was a new phenomenological approach to dreams: dreams as an experimental theatre in which we created our identity. That was still a fairly original notion back in the 1960s.

It was when that book was published, I happened to have a client who came to me for psychosexual impotence, and to make a long story short, I learned through my work with Divina, to help people go back into the dream and redream their dream so that they could experience some of the kinds of things that Divina would experience. In other words, to have their dreams create a stage for new developments in their lives. Well, this fellow took to it like a duck to water; he closed his eyes and he'd redream his dreams with better outcomes, and sure enough, his symptoms got better. A funny thing was at the end of his sessions, he would wink at me as he walk-

ed out the door. After this happened a few times, I wondered, "What's going on with this transference?" So, I asked him about it; "You always have that sly little look as you leave. What's going on here?" He says, "Oh, I know what you're really doing." Oh? What was I really doing? He felt I was doing Ericksonian indirect hypnosis on him, and that I was so slick a hypnotist that I didn't even use the word, but wow! That really worked on him.

I didn't tell him I never heard of Erickson! Who was he? Later, this patient gave me a section of Haley's selection of Erickson's papers. I took that home and I had the third great crisis of my life; the first was reading Freud's *Dreams*, the second was discovering Jung, and the third was Erickson. Again, I couldn't sleep for two or three days, I just stayed up continuously reading those papers over and over. Erickson was doing 20 or 30 years ago what I hoped to be doing 20 or 30 years from now! Finally, after three days of doing nothing but reading, I'm still laying in bed, I'm trying to put the book down. But I'm trying to finish this one sentence about the confusion technique and trying to understand all of its intricacies. All of a sudden, I feel this dull pain in my stomach. I drop the book and fall into a deep sleep, and wake up about 12 hours later and wonder, "What's this? I feel like I've got a hot poker in my stomach." Well, I'm not a "psychosomaticky" type of person at all, so I go and see a doctor and he says, "What are you doing? You've got an acute gastritis. Stop whatever it is you are doing or you're going to get an ulcer!"

I found out from my client that Erickson was still alive in Phoenix and now I had a symptom, so I had to get a therapist, right? So I called Milton and told him who I was (actually, I sent him a copy of my dream book, first) and why I was interested in his work. I called him and he decided to see me; he was already in retirement — this was in 1972. I saw him four or five times as a patient. Then around the fourth or fifth time, he shook his head at the end of the session and he said, "You better not pay Betty (Erickson's wife, Elizabeth) anymore."

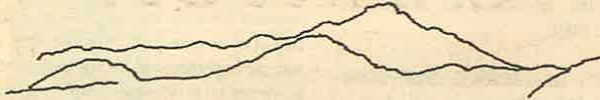
I usually paid his wife at the end of the session. I said, "Why not?" He said, "You're not a real patient, are you? You're here to learn hypnosis, aren't you?" He was staring at me with that intensity. "I am?" Then I confessed that every time I drove from Phoenix back to Los Angeles I was writing papers in my mind with him.

Y — Writing with him, did you say?

R — Yes, in my mind. In other words, I was integrating my concepts, Jungian concepts, and Ericksonian concepts. I'd play a game in my mind to better conceptualize things; I'd write a paper in my mind. So, I said "Well, actually, I'm thinking about writing some papers about your work and my work." He wanted to know what they were. So, I popped out with about a half dozen papers I was writing in my mind. I had no real intention to write them. He nodded his head as if to say he expected as much! He said, "Okay, I want you to write those papers. I just want you to remember one thing: In those papers, I'm

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Announcements

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* * *

Ernest L. Rossi, Ph.D., and Norma Barretta, Ph.D., were honored by the American Society of Clinical Hypnosis (ASCH) at its annual meeting in Orlando, Florida, in March. Both were made Fellows by the Society, achieving the highest status possible within the organization. Congratulations!

* * *

Thomas Wall, Ph.D., a psychologist from Seattle, was installed as the new ASCH President at the recent annual meeting. The Foundation extends best wishes for his administration of the Society.

* * *

Stephen R. Lankton, M.S.W., B.C.D., is President-elect of the American Board of Clinical Hypnosis in Social Work. The ABCHSW confers Diplomate status to those social workers who have appropriate training and expertise in clinical hypnosis and pass the Board's examination.

Obituary *continued from page 1*

psychoanalytic thought is moving. I never talk about the future: There are many ways to make a fool of yourself but only one certain one. And, that is to predict the future."

Dr. Bettelheim indicated clearly where he stood. He would not be induced by those around him. Rather, he was an unbending yet visible pillar; you knew where you could find him. Personally, I found his attitude inspirational and educational. Dr. Bettelheim set boundaries quickly, openly, and unequivocally.

The final academic presentation at the Conference was Dr. Bettelheim's discussion of Rollo May's paper. I gave Dr. Bettelheim a copy of Dr. May's paper on Friday, and he returned it to me at the banquet on Saturday evening.

Rollo May presented an address entitled, "Therapy in Our Day," in which he enjoined therapists to draw from the humanities and speak to the higher aspirations of the human race — integrity, courage, and love — to the values that make life worth living. His scholarly address quoted Plutarch, Sophocles, Binswanger, and Giradoux, to name a few.

I remember being electrified by Dr. Bettelheim's extemporaneous discussion of Rollo May's address. It illuminated the depth of Dr. Bettelheim's intimate knowledge of classical literature and his piercing insight into the contemporary "culture" of The Evolution of Psychotherapy Conference.

Dr. Bettelheim corrected Dr. May about Sophocles, naming Sophocles' three plays and describing the themes of each, emphasizing how unconscious jealousies exist across generations. Whereas May emphasized eternal Eros, Dr. Bettelheim emphasized eternal Thanatos. He traced the theory of existential philosophy to Freud's description of the death tendency of Thanatos, citing the lineage from Freud to Heusserl to Heidegger to Sartre, emphasizing that "eternal Eros is an eternal battle against Thanatos and in individual life Thanatos always wins at the end, since we all die." Subsequently, Dr. Bettelheim pointed out that The Evolution of Psychotherapy Conference was rooted in Freud's contribution and how the entire Conference de-emphasized Freud. Dr. Bettelheim opined, "So the Oedipal killing of the father is still going on." Dr. Bettelheim, a staunch and admiring adherent of Freud, quipped sadly, "The solid wine of psychoanalysis has been watered down to such a degree that everything of its substance and essence has been washed away and only the dregs remain."

In closing, I will quote from a letter I received from Dr. Bettelheim on April 11, 1987:

Dear Dr. Zeig:

I think that the idea of another Conference on the Evolution of Psychotherapy is a good one. Of course, I have no idea whether I shall still be around in 1990, and if so, whether I shall be able to participate. But, if I should, I know I would enjoy it. If you go ahead with planning for this Conference, I hope you will be able to have as distinguished a faculty as you had the last time. In any case, I want to wish you the best success to your enterprise.

Sincerely,

Bruno Bettelheim, Ph.D.

Bruno Bettelheim's contributions are enduring: Much solid wine remains. However, his forceful voice will sorely be missed in December.

Jeffrey K. Zeig, Ph.D.

Director

The Milton H. Erickson Foundation, Inc.

Reference:

Zeig, J.K. (Ed.). (1987) *The Evolution of Psychotherapy*, New York, Brunner/Mazel.

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going to be the senior author and you're going to be the junior author, because I am your senior, you know!" Well, of course he was my senior! So, I did just that. I came back the next week with a paper and read it to him and he suggested certain changes. So, that's how we wrote our first two or three papers together. Then I needed to learn more, so I brought a tape recorder. He'd have patients come, old clients he'd call, or professionals who were just passing through Phoenix might happen to call him up and ask to have an appointment with him. He'd say, "Sure. Dr. Rossi's here, and if you'd let him record, you can have a session because he's writing a book." That's how we began our books together; that's how *Hypnotic Realities* and those first books came out.

Y — Can I back you up a little bit? Would you describe your first meeting with Erickson and what your impression of him was? Then comment a little bit about what it was like for you as his patient?

R — I guess like everyone else, I was a little bit surprised. You see this little old man, mostly paralyzed and in a wheelchair, wearing funny purple clothes. I was surprised at the little tiny office he had; you had to be close to him with only a little desk corner between you. He had a little glass paperweight where he had you focus your attention when he began a classical hypnotic induction with eye fixation. The first time I visited him, prominently displayed on his desk, was a copy of my dream book that I had sent him. So, naturally, I said, "Oh, you looked at it. What do you think?" I'm a proud author, and it had just come out a few months ago. At the time I believed it was the most brilliant book since Freud's *Dreams*. Anyway, I'm hinting [for a compliment] and he looks at it as if he'd seen it for the first time and says, "Oh, yes that... yes... well it's a little elementary, don't you think?" Elementary? I thought this was a most sophisticated phenomenological work! But I said "Well, I guess it is elementary!" [Rossi laughs] I don't know if he did it intentionally. He probably did. Where I am is elementary compared to where he is. Of course, that's why I'm going to see him, but nonetheless, he always had that little edge. In a sense he was a

manipulator. [He was] very gentle, very loving, [so] you didn't mind that he was manipulating you.

Y — Why didn't you react angrily or negatively to his statement about your work?

R — You have to understand my psychology. Erickson was the very archetype of the grandfather, Ernest, who was a very powerful man [to whom] I was the servant, the helper. But if grandpa got mad, he would get up and stagger across the room and threaten to beat me with his cane that was made out of a broom handle. I would have to hide behind the door or something! Grandpa was handicapped but he was a very powerful, very threatening man. Then all those years with Patsy, the older shoe repairman, [who was] more kindly, but nonetheless very demanding. I was used to following orders from kindly but demanding grandfather types.

Y — For you this was a transference situation?

R — Yes, but I never wanted to recognize that. Many times colleagues of Erickson would sit in on our sessions, and afterwards would say, "You know, it's very interesting that he treats you like a son." I'd say, "What do you mean, a son? We're professional colleagues here! I didn't recognize the intensity of the transference until after Milton died. I fell into a lucid state of somnambulism one day (I discuss it in detail in the second edition of my *Dream* book, Brunner/Mazel, 1985). Then it came to me very clearly the connections between my grandfather, Patsy the shoe repairman, the professor I had when I was an undergraduate, and Franz Alexander. All archetypically kindly but demanding grandfather types who somehow motivated me to higher levels of performance than I would have thought possible.

Erickson was just the latest reincarnation of the grandfather archetype, you might say. So, it's been the pattern of my life to study, be humble, just listen, and be the apprentice. I've been an apprentice all my life. So, when [he] said it's elementary, I said, "Yeah, I guess he's right, it is elementary!"

Y — How has that biased your interpretation of Erickson's work?

R — Let me approach it from a personal point of view. People have asked me, "Of all the students, why did he choose you to co-author all these books with and edit his collected papers?" I think the reason that he chose me was that I was just a quiet, eager learner. I think he'd had a lot of back-talk and nonsense from colleagues who just didn't understand him. I was used to being just a quiet, hard working humble student. On the other hand, I have my own inner power striving, and my power thing was "Gee, I can get this great guy to teach me if I write papers with him. If I write a book with him, he will personally teach me!" So, I guess you can say that that was my counter-manipulation: I'd get a high-class teacher, one of the world's best teachers, if I did this work with him. I did not particularly give him a problem with his world view. For example, many people — doctors — would come and he would do wonderful therapy with them. Afterward they would explain their point of view and how Erickson's point of view was incorrect,

and give Erickson all kinds of nonsense! I never did that.

On the other hand, I think I was very critical in a sense because I was always asking him all kinds of questions, making him explain and giving him challenges: I'd say, "Okay, I'd like you to demonstrate hypnotic amnesia and such and such with this client." He would try to fulfill all of those challenges, and when he couldn't, he would try to give some explanations. Since I was never trying to be a "wise guy" he could work with me. I was very dutiful, and I was hard-working. I'd spend a week at his home tape-recording the stuff; I'd go back to my home and I'd get it all typed out. I'd come back the next month and we'd go through the therapy tapes word by word. He appreciated that careful, close attention. His family even said to me at times, "When you come and spend the week with him, it seems like you give him life, you give him energy. Other times, other people come and it seems like he's wasted at the end of the day." I think that was because people wanted to attack but they didn't know how to attack, [because] they were coming out with irrelevancies. At least my challenging questions were without my preconceptions coming in. I did have my preconceptions originally; I was following the idea of Jung, expanding consciousness and so forth. But, it was in my second or third session with him when I saw him look at me slyly, and at one point he said, "That's what you would call growth — synthesis." And I thought, "Wow, this guy is starting to try to teach me within the framework of my own mind." So, I tried to drop my professional prescription stuff. I put my transpersonal humanistic [perspective] on hold for a while, and I went over to his point of view to assimilate it as best I could. I was always exploring his frame of reference, because I wanted to know what the source of his genius was. In that sense, I'd like to believe I got as close to his point of view as possible.

Y — Okay, let me switch gears. You have received the Milton Erickson Foundation Lifetime Achievement Award, you have published so extensively with and about Erickson, and you are professionally very closely associated with him. In recent years, though, your focus has been the mind/body relationship and the biology of attitudinal healing. What I would like you to address in a very deliberate and focused way is this question: Why should any psychotherapist reading this interview have any interest in the mind/gene connection?

R — Because this is his [the therapist's] field, [even though] he doesn't know it yet. The average psychotherapist is profoundly behind the times. The genius of our age is not in psychotherapy. That genius took place in the 1900s with Freud and Jung. The genius of our age is the molecular biology of the gene. The genius of the 1920's and 30's was quantum physics. But, the average psychotherapist is hopelessly behind the times from the point of view of modern biology.

Another way of saying the same thing is that every hypnosis journal — the *American Journal of Clinical Hypnosis*, the *International Journal of Clinical and Experimental Hypnosis* — is they're hopeless-

ly behind the times. They are not publishing the innovative research in hypnosis. The innovative research in hypnosis is being published by journals in neuroscience, but they don't have the word "hypnosis" written in the title. They have titles like "Ritualized Relaxation and Lymphocyte Movement," "Imagery and Monocyte Movement." They are tracing images, emotional states, and their effects on white blood cells and our molecules, right down to the genetic level. We now know that psoriasis is a psychosomatic illness you can sometimes heal with hypnosis. We now know that in psoriasis we can trace the source down to the molecular gene level. So, the new research is going to show that if you deal with psoriasis on an imagery level, [you can show its molecular effect]. I hope to explore the issue with a group at the Mayo Clinic. When we cure the psoriasis with imagery and hypnosis, do we actually change the messenger RNA? If so, we'll have the first definitive evidence of the mind/gene connection.

So, as far as people identifying themselves as hypnotherapists, they don't know it but they have lost the foundation of their field. It's all gone to the molecular/genetic level. A couple of years ago, I tried to get a paper published in the *American Journal of Clinical Hypnosis*, but they were only willing to publish it if I cut out the stuff about molecules. A national expert who wrote the opinion said, "We in hypnosis are not yet ready to deal with its molecular level." I did publish the paper later in *Advances* — it's called "The Mind/Molecule Connection." The people publishing our journals don't know that they've lost their own field. The real innovation is on the molecular level and in mind/molecular communication. It's not something that Ernest Rossi invented. Ernest Rossi just put together a scheme of how the whole thing can fit together in a cybernetic network.

Y — Put it in context. Address the therapist in a community agency dealing with a woman who's been battered by her husband. Why should the mind/gene connection matter at that point to a therapist conducting treatment?

R — Why is she battered? What's going on in that person who battered her? That behavior, that rage that leads to battering, do you realize it's a state dependent memory, learning and behavior condition? When the husband gets into a certain state of stress, do you realize that ACTH stress hormones are flowing through his system and are automatically turning on "battering behavior"? With this knowledge, we can bring the batterer in and help him get some insight as to what are the words, the emotions, and the life triggers that turn on that ACTH, i.e., that whole syndrome that leads to seemingly automatic battering? If you see a person battering, they're not in a normal state; they are having a state dependent behavioral seizure! They're not behaving rationally! They're in an altered state that's medicated by stress hormones! What are these altered states due to? They're due to the different state dependent memory, learning and behavior systems that are turned on by stress related message

continued on page 7

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Interview continued from page 6

molecules. These behaviors are encoded by information substance-hormones, flowing from the body, as well as from the mind. Y — So, now you're going to induce a trance in order to do what?

R — I'm developing approaches to help a person get right to that state where he feels like he needs to batter, help him get more familiar with it, and work out the conflict about it. For another case example, consider the McMartin Case. They're calling it now the most expensive case in U.S. history. The big issue is, were these children molested, or not? Well, what happens is that if a child is molested — that's a special case of excitation, ACTH, and sexual hormones [are activated], so that the memory of the molestation is now tied to certain hormones. When those hormones are metabolized and his system returns to normal, the child often really doesn't know — was it real or not? So, he says to mommy, "Mommy, did they take off my clothes?" "Did that really happen?" Here's where the child's young ego doesn't really know how to access its own state dependent memories!

Y — What do you mean "when the hormones are metabolized"?

R — You're in an excited state because you're turned on by certain hormones or information substances. When the state of excitement ends, you may relax or go to sleep. The hormones are broken down, metabolized, and your system returns back

to normal. That experience is encoded by those hormones aroused by stress. You know something has happened to you, but the vividness of it is no longer present because the vividness of it requires the hormonal level in your blood to be up to a certain level. You go to someone like Erickson who used very provocative methods — he didn't try to put you to sleep or have you relax. He was reactivating your adrenal system! His so-called hypnosis is actually arousing and reproducing that original traumatic situation so that your memory has come back, and suddenly you remember what really happened.

Y — Now, he wouldn't have described it that way. Would he sanction that kind of explanation?

R — I think he would have. When I'd ask him, "What is the psychoneurophysiological basis of hypnosis?" he would sing me a song: "The foot bone's connected to the ankle bone..." Then, he'd talk about adrenalin and so forth; he had some idea it was connected with physiology. Only now today do we have the actual molecular basis of what the geniuses of our field always knew was so. But Erickson did not have the benefit of our modern molecular biology. Now, we have an understanding of the molecular language of the body that matches the phenomenology of the mind. For the first time, we can see a direct translation between imagery, feelings, thoughts, and as words that encode stressful life events and how they are tied in with

the molecular language of the body. Most psychologists are blissfully unaware of this! They've lost the foundation of their field. I believe all of Erickson's so-called "provocative" techniques that some people now criticize as being on the border of ethical practice were ways of provoking the patient's mind-body to access the stress encoded molecular language of emotional problems. It was a brilliant intuitive insight on Erickson's part. He always emphasized to me that to deal with a problem it had to be actively experienced by the patient in the therapy session. He never told anyone to relax — he never programmed anyone, but he always provoked people to help them access and deal with their problems.

Y — How would a clinician's practice change by following your approach?

R — If he [the clinician] became a lot more sensitive to the many body languages, the mind/body languages that his client is manifesting, the therapist would notice a spontaneous shift as the client goes into ultradian rest — rejuvenation phase, those moments when a person is more accessible to the inner world and its problems. Therapists would do a lot less suggesting, a lot less directing, a lot less projecting of what the therapist's theory is. Therapists would focus on helping patients understand their own spontaneous mind-body languages. More genuinely valid, non-biased therapy could then take place. Most therapists still are victims of their own preconceptions. They're still projecting; they're always worried about the patient's transference onto them. Well, how about our idiotic projections onto the patient? Our idiotic theories? I'm developing methods where the whole design is not to project, but rather to create situations (what Erickson called "The Field Experiment") so that which is inherently there can come forth. That's what Freud did when he shifted from hypnosis/direct suggestion to free association, right? He went from a directive to a non-directive, unbiased way of getting information, I presume, to do the same thing with "idiodynamic approaches" that are even more sensitive forms of mind-body communication. Free association is tied to linguistic language, whereas the idiodynamic is tuned into the many more forms of body language: sensation, perception, movement, kinesthetics. The new mind-body therapists will become pioneers in learning how to read the languages that are coming to them from the patient. It's carrying out Freud's idea to new levels of sensitivity receptivity — it's carrying on Erickson's utilization approach to new levels of sophistication. It is extending the field and range of human consciousness itself. We are becoming more deeply human as we learn to tune into our own natural patterns of mind-body communication.

Y — There is an inherent danger associated with talking about mind/body healing, and that is that you have less biologically and less psychologically sophisticated people making a global statement like "the mind can heal the body." They tell their cancer patients "...well, if you visualize this... you'll get well." It's not bad enough this lady has cancer, but now she's being told that it's

because she didn't express her feelings properly. You're in the best position to address this. How would you describe this kind of perspective?

R — With one word — *humility*. Acknowledge that we are in kindergarten. Acknowledge that there are profound connections between mind, emotions, body, molecules, cancer, and every other illness state and state of health that we are only now beginning to understand. Acknowledge that they're there, but they're functioning for the most part on an unconscious level. We're all in kindergarten! We've barely scratched the surface! The tragedy of our current situation is that we know there are all these mind-body connections, but we do not know how to utilize them effectively. I never set myself up as being extraordinarily competent. I do not know how to cure polyps, I do not know how to cure cancer, I don't know how to deal with any mind/body illness, except create situations where I get some of my biases personal out of the way, perhaps some of the client's own learned limitations out of the way just to explore how nature might facilitate itself. We are in kindergarten...

Y — And that's what you have been talking about — as the language of facilitation — rather than putting yourself in the position of being "the healer."

R — That's right. I am *not* a healer!

Y — I appreciate your candor, Ernie. As always, it's a pleasure to have had the chance to talk with you. Thanks for doing this interview.

Hypnosis Course Offered for Physicians

An Introduction to Medical Hypnosis, "The Induction and Utilization of Hypnotic Trance in Medical Practice" is being offered through the University of California, San Diego School of Medicine.

Steven F. Bierman, M.D., is the course director. Dr. Bierman and William Reed, M.D., are the faculty members.

The next offering of the course is November 12-16, 1990, in San Diego. Among the topics during the five-day course for physicians, residents and nurses, are induction, nonverbal suggestions, utilization techniques and demonstrations.

For information contact The Del Mar Health Center, 1321 Stratford Ct., Del Mar, CA 92014; (619) 259-6790.

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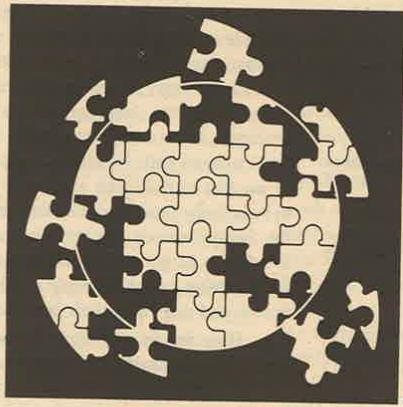
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- FORMAT:** Emphasis will be placed on interaction among the faculty. Supervision Panels, Topical Panels, Invited Presentations, Workshops, Demonstrations, and more!
- WHEN:** December 12-16, 1990
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Cancellation Fee: \$35.00 if received in writing and postmarked by November 16, 1990.
 NOTE: Conference information packet including hotel registration forms and travel information will automatically be sent later this year to those people who remit registration fees.

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U.S. & Canadian Registration Fees:

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- \$425 U.S. (\$325 for graduate students*) for registrations postmarked on or before November 16, 1990.
- \$500 U.S. (\$400 for graduate students*) for on-site registrations if space is available.

Other Foreign Registration Fees:

- \$275 U.S. (\$225 for graduate students*) for registrations postmarked on or before August 31, 1990.
- \$325 U.S. (\$275 for graduate students*) for registrations postmarked on or before November 16, 1990.
- \$500 U.S. (\$400 for graduate students*) for on-site registrations if space is available.

*Students must provide a certifying letter from their school or department on letterhead stationery indicating proof of full-time student status as of December 1990.

Due to the historic nature of this Conference, advance registration is strongly recommended. Advance registration provides the registrants with financial savings and assists the organizers in planning. Enrollment is limited. Please register at your earliest convenience. If space is available, on-site registration will be held. However, on-site registration may not be possible. The meeting is expected to sell out. The 1985 Conference sold out in early September.

MEALS AND EVENTS

- Luncheon package — \$75. Includes luncheons, tax and gratuities for four days (Wednesday through Saturday, December 12-15). Vegetarian available.
- Banquet tickets — \$40 per person. Includes dinner, wine, tax and gratuities and entertainment Saturday, December 15. Vegetarian available.
- Disneyland Park tickets — Each registrant will receive one complimentary ticket to Disneyland Park for the private party Thursday, December 13. Additional private party tickets are \$20 per person (child or adult). Please purchase when registering.

Note: The Erickson Foundation lists workshops as a service to *Newsletter* subscribers. We cannot attest to the quality of training provided in these workshops. A \$10 fee is required for each workshop submission.

DATE 1990	TITLE/LOCATION/LEADER	CONTACT	DATE 1990	TITLE/LOCATION/LEADER	CONTACT
6/8-9	Brief Therapy of Depression, Seattle, WA, Michael Yapko.....	1	9/7-9	Brief Therapy of Depression, Ottawa, CANADA, Yapko.....	13
6/8	Ericksonian Psychotherapy, Mexico City, MEXICO, Jeffrey Zeig.....	2	9/7-17	Ericksonian Hypnosis and Therapy (Advanced), San Diego, CA, Chris Beletsis and Irv Katz.....	14
6/9-10	Ericksonian Approaches to Family Treatment, Mexico City, MEXICO, Zeig.....	2	9/14-15	Brief Therapy of Depression, Cedar Rapids, IA, Yapko.....	15
6/11-23	Two-Week Intensive Training in Ericksonian Hypnosis and Psychotherapy, Phoenix, AZ, Brent Geary, Yapko, Zeig.....	3	9/19-23	Trancework, San Diego, CA, Yapko.....	5
6/13-17	Supervision, West Virginia, Stephen Gilligan.....	4	9/21-22	An Introduction to Ericksonian Clinical Hypnosis, Philadelphia, PA, Janet Sasson Edgette.....	7
6/15-17	Trancework, San Diego, CA, Yapko.....	5	9/21-23	Ericksonian Hypnosis: Advanced Strategies for Beginners, Hamburg, WEST GERMANY, Zeig.....	16
6/21-24	Four-Day Intensive on Ericksonian Therapy, New York, NY, Faculty...	6	9/24-27	Ericksonian Psychotherapy, Warsaw, POLAND, Zeig.....	17
7/11-15	Basics in Hypnosis, San Diego, CA, Gilligan.....	4	9/28-30	Ericksonian Hypnotherapy, Stockholm, SWEDEN, Zeig.....	18
7/12-13	FUNDamentals of Ericksonian Hypnosis and Therapy, Toronto, CANADA, John Edgette and Rodger Kessler.....	7	10/5-6	FUNDamentals of Ericksonian Hypnosis and Therapy, Pittsburg, PA, J.H. Edgette and Kessler.....	7
7/13-15	The Utilization Approach to Ericksonian Hypnotherapy, Santa Cruz, CA, Zeig.....	8	10/12-13	Harnessing Inherent Resources: Intermediate Ericksonian Hypnotherapy, Philadelphia, PA, Zeig.....	7
7/18-22	Advanced Hypnosis, San Diego, CA, Gilligan.....	4	10/19-29	Clinical Hypnosis (Introduction), San Diego, CA, Beletsis and Katz....	14
7/29-8/3	MRI Brief Therapy Symposium, Palo Alto, CA, Faculty.....	9	11/2-3	Fishing for Barracuda in Philadelphia: Strategic Family Therapy, Philadelphia, PA, Joel Bergman.....	7
8/2-8/5	Supervision, Austin, TX, Gilligan.....	4	11/2-12	Ericksonian Hypnotherapy (Advanced/Supervision), San Diego, CA, Beletsis and Katz.....	14
8/10-14	American Psychological Association Annual Convention, Boston, MA, Faculty.....	10	11/12-16	Introduction to Medical Hypnosis, UC-SD School of Medicine, San Diego, CA, Steven F. Bierman, M.D.....	19
8/20-24	Specialization in Brief Psychotherapy: Ericksonian-Focused, Guadalajara, MEXICO, Zeig.....	11			
8/23-26	Healing and Hypnosis, Toronto, CANADA, Gilligan.....	12			

Contact Information

- Family Psychotherapy Practice of Seattle, 2722 Eastlake Avenue East, Suite 300, Seattle, WA 98102; (206) 329-9101.
- Dra. Teresa Robles, Jose Maria Velasco, #72, Dpto. 402, Col. San Jose Insurgentes, C.P. 03900 (Mexico City), MEXICO; Tel: 59 35 875.
- The Milton H. Erickson Foundation, 3606 N. 24th Street, Phoenix, AZ 85016; (602) 956-6196.
- Omega Institute, 1504 Crest Drive, Encinitas, CA, 92024; (619) 942-1577.
- Milton H. Erickson Institute of San Diego, 2525 Camino del Rio South, Suite 265, San Diego, CA 92108; (619) 295-1010.
- The Center for Personal and Family Development, 1221 West Lakeview Avenue, Pensacola, FL 32501; (904) 438-4007.
- John Edgette, Psych. D., Ste. 8, Rosemont Plaza, 1062 Lancaster Ave., Rosemont, PA 19010; (215) 525-0223.
- George Ingram or Colleen O'Driscoll, 740 Front St., Suite 155, Santa Cruz, CA 95060; (408) 427-6610.
- MRI, 555 Middlefield Road, Palo Alto, CA 94301; (415) 321-3055.
- The American Psychological Association, 1200 Seventeenth Street, N.W., Washington, D.C. 20036.
- Ricardo Figueroa Quiroga, M.S., Investigacion Psicologia y Asesoría en Personal, Progreso Sur 271 P.B., Guadalajara, Jalisco, MEXICO; (36) 25 77 22.
- Marilyn Atkinson, Suite 2223, 633 Bay Street, Toronto, Ontario, CANADA M5G 2G4; (416) 977-7810.
- Dorothy MacDonald, 1380 Leigh Crescent, Gloucester, Ontario, CANADA K1J 8E4; (613) 741-3331.
- Clinical Hypnosis Institute, Christopher Beletsis, Ph.D., 4545 Park Blvd., Suite 207, San Diego, CA 92116; (619) 542-0088.
- Families, Inc., 101 West Main, Box 130, West Branch, IA 52358; (319) 643-2532.
- Manfred Prior, Dipl. Psych. or Ortwin Meiss, Dipl. Psych., Milton H. Erickson Institut Hamburg, Eppendorfer Landstr. 56, 2 Hamburg 20, WEST GERMANY; Tel: 040 - 4 80 37 30.
- Krzysztof Klajns, PL-93-582 Lodz, Felsztynskiego 23, POLAND.
- Kjell Waara, M.Sc., Centrum for Hypnos & Psykoaterapi, Sveavagen 76 nb og, S-113 59 Stockholm, SWEDEN; Tel: 08 - 31 26 50.
- S.F. Bierman, M.D., 1321 Stratford Ct., Del Mar, CA 92014; (619) 259-6790.



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March 8-9, 1991

DAY ONE

Principles of Ericksonian Hypnosis and Induction

DAY TWO

Characteristics and Outcomes of Ericksonian Hypnosis and Treatment

FOR MORE INFORMATION CONTACT:

John H. Edgette, Psy.D.
Co-Director, The Milton H. Erickson Institute of Philadelphia
Suite 8, Rosemont Plaza
1062 Lancaster Avenue
Rosemont, Pennsylvania 19010
(215) 525-0223

Conference Announcements

June 13-16, 1990 — The first World Congress on Mental Health Counseling, a 35th Anniversary Celebration of Rational-Emotive Therapy Honoring Dr. Albert Ellis, will be held in Keystone, Colorado. It is sponsored by The American Mental Health Counselors Association. For information, contact: World Congress on Mental Health Counseling, P.O. Box 460635, Aurora, CO 80046; (800) 326-2642.

June 21-24, 1990 — A Four-Day Intensive on Ericksonian Therapy co-sponsored by The Center for Personal and Family Development and The Milton H. Erickson Foundation will be held in New York City. For information, contact: The Center for

Personal and Family Development, Attn: Robin Reizloff, 1221 West Lakeview Avenue, Pensacola, FL 32501; (904) 648-3089.

July 29-August 3, 1990 — The MRI Summer Symposium on Brief Strategic Therapy will be held at Stanford University in Palo Alto, California. For information, contact: MRI Symposium, 555 Middlefield Road, Palo Alto, CA 94301; (415) 321-3055.

August 16-24, 1990 — The European Society of Hypnosis 5th European Congress of Hypnosis in Psychotherapy and

Psychosomatic Medicine. To be held in Germany. For information, contact: Dr. Frank Schmidt, Lake Somerset Drive, P.O. Box 292, Somerset, PA 15501; (814) 445-3503.

October 4-7, 1990 — American Association of Marriage and Family Therapy Annual Conference. To be held in Washington, D.C. For information, contact: AAMFT, 1717 K Street, N.W., Suite 407, Washington, D.C. 20006; (212) 429-1825.

November 5-7, 1990 — The 4th Annual Empowering Families Conference. To be held in Detroit. For information, contact: The Conference Center, 249 IMU, The University of Iowa, Iowa City, Iowa 52242; (319) 335-3231.

December 12-16, 1990 — The Evolution of Psychotherapy. To be held in Anaheim, CA. For information, contact: The Milton H. Erickson Foundation, 3606 N. 24th Street, Phoenix, AZ 85016; (602) 956-6196.

January 3-6, 1991 — The Kentucky Association for Specialists in Group Work, a nonprofit organization devoted to enhancing professional development in the helping fields, will present a three-day conference cruise to the Bahamas. The meeting is entitled "Spirituality, Sensuality, Self Care." Presenters are John Eichenberger, John Lentz, Kathy Saylor, Jane Thompson, Jim Thompson and Jeffrey Zeig.

For information, contact: KASGW, P.O. Box 4094 1387, Louisville, KY 40201; (502) 588-6927.

TRAINING TAPES:

— The Process of Hypnotic Induction: A Training Videotape Featuring Inductions Conducted by Milton H. Erickson in 1964. Jeffrey K. Zeig, Ph.D. discusses the process of hypnotic induction and describes the microdynamics of technique that Erickson used in his 1964 inductions.

LENGTH: 2 Hours Beta or VHS 1/2" - \$150.00 (1 tape) U-Matic 3/4" - \$200.00 (2 tapes)

— Symbolic Hypnotherapy. Jeffrey K. Zeig, Ph.D. presents information on using symbols in psychotherapy and hypnosis. Segments of hypnotherapy conducted by Milton Erickson with the same subject on two consecutive days in 1978 are shown. Zeig discusses the microdynamics of Erickson's symbolic technique.

LENGTH: 2 Hours, 40 minutes Beta or VHS 1/2" - \$200.00 (1 tape) U-Matic 3/4" - \$275.00 (2 tapes)

FROM 1981 SEMINAR:

— Naturalistic Approaches to Hypnosis: Utilizing Hypnosis in Pain Treatment in Psychotherapy, Joseph Barber, Ph.D.

— The Varieties of Ericksonian Hypnotic Suggestion, Stephen Lankton, M.S.W.

FROM 1982 SEMINAR:

— Ericksonian Induction Methods, Robert Pearson, M.D.

— A Fail Safe Double Bind Approach to Hypnotic Induction, Ernest Rossi, Ph.D.

FROM 1983 CONGRESS:

— Hypnotic Alteration of Pain Perception, Joseph Barber, Ph.D.

— A Fail Safe Double Bind Induction Procedure, Ernest Rossi, Ph.D.

FROM 1984 SEMINAR:

— Use of Multiple Embedded Metaphor for Psychological Reassociation, Stephen R. Lankton, M.S.W. & Carol H. Lankton, M.A.

— Using Metaphor and the Interspersal Technique, Jeffrey K. Zeig, Ph.D.

FROM 1985 CONFERENCE:

LIVE DEMONSTRATIONS-

— CP15 The Blind Date Family Interview, Carl Whitaker

— CP19 The Use of Gestalt Technique, Miriam Polster

TOPICAL PANELS-

— P12 The Role of the Therapist/The Role of the Client,

(May, Rogers, Satir, Szasz)

— P1 Schizophrenia, (Bettelheim, Laing, Szasz, Whitaker)

CONVERSATION HOURS-

— CH3 Ronald Laing

— CH4 Carl Whitaker

*THREE HOUR WORKSHOPS-

— WS The Client-Centered Approach, Carl Rogers & Ruth Sanford (includes a live demonstration)

— W21 The Practice of Rational-Emotive Therapy, Albert Ellis (includes a live demonstration)

FROM 1986 CONGRESS:

— D2 Rehearsing Positive Outcomes with Self-Image Thinking, Carol H. Lankton, M.A.

— D1 Enhancing Therapeutic Responsiveness, Jeffrey K. Zeig, Ph.D.

FROM 1988 CONGRESS:

— D6 Deep Naturalistic Hypnotherapy E. Rossi, Ph.D.

— D5 Short Approaches to Heavy Problems: Brief Therapy for Weight Reduction, C. Lankton

PRICES: 1/2" BETA or VHS - \$75.00 each

3/4" U-MATIC - \$80.00 each

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Top Selling Videos From
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The Practical Application of Medical and Dental Hypnosis

by Milton H. Erickson, M.D.,
Seymour Hershman, M.D.,
and Irving I. Spector, D.D.S.

with a new Foreword by Jeffrey K. Zeig, Ph.D.
Published by Brunner/Mazel, Inc., New York, 1990.

Originally published in 1961, this important work makes for compelling reading today. One cannot help but be drawn in by its wise and practical information, while at the same time noting the subtle thread of incongruity which weaves its way throughout the pages, as antiquated phrases, such as "go deeply asleep," and outdated notions like tests for suggestibility appear and disappear.

It is important to note that one is left with much more than the lingering scent of a musty first edition. More lasting, indeed, is the unforgettable awareness of having encountered something genuinely helpful and universally meaningful. Here one discovers hypnotic phenomena applicable to obstetrics, surgical anesthesia, general medicine, psychiatry and dentistry as well as psychology. Of particular interest is the discussion given to the use of hypnosis with children.

For the experienced practitioner, whether a physician, dentist, or psychotherapist, this work provides ample stimulation to pique one's interest and arouse one's creative sensibilities.

— Reviewed by Marian J. Richetta, M.A.
San Diego, California

Media of Note

Brief Therapy: Myths, Methods and Metaphors, the proceedings of the Fourth International Congress on Ericksonian Approaches to Hypnosis and Psychotherapy featuring chapters by leading authorities on brief therapy will be available from Brunner/Mazel publishers this summer. The volume is edited by Jeffrey K. Zeig and Stephen Gilligan.

* * *

Jeffrey Zeig and Michael Munion are editing a new book called *What is Psychotherapy? Contemporary Perspectives*. It will be published by Jossey-Bass, and available in the late Fall. The book features succinct responses to the title questions from leading experts in the field.

* * *

The Instituto de Hipnoterapia Ericksoniana in Buenos Aires, Argentina, under the direction of Edgar Etkin and Silvia Fabian-Etkin, is now publishing a journal, *Rapport*. Articles can be sent to them in English for translation into Spanish. For information, contact the editors at Instituto de Hipnoterapia Ericksoniana, Sanchez de Bustamante 1945 P.B. 1, (1425) Buenos Aires, Argentina.

The Milton H. Erickson Foundation has for sale a wide selection of tapes on a broad array of subjects relating to Ericksonian approaches to hypnosis and psychotherapy. In this and future newsletters, videotapes will be reviewed, allowing readers to obtain more detailed information regarding the content of the tapes as well as their relative quality.

Hypnotherapy with Couples

Stephen Gilligan, 1988.

Videotape of a demonstration at the 1988 Congress in San Francisco, CA.

Copyright 1988 by The Milton H. Erickson Foundation, Phoenix, Arizona.

Gilligan is an artist always worth studying, and this video demonstrates his work with a volunteer couple. The couple has been married for 17 years, and are both therapists. While they seem to be happy and report no problems, Gilligan suggests simultaneous trance is useful in marital therapy, and shows us his approach to working with couples. This is an hypnotic experience, not therapy for a specific problem, since both persons say they want to simply enjoy the experience. The title then is a misnomer, since there is no therapy demonstrated, but rather a complex guided fantasy.

His induction technique of having each person concentrate on the ring finger of the partner sets a stage for a reverie of memories of shared experiences. He develops this theme using a technique of visualizing various events in different crystal balls. The direction is toward the future, suggesting the fantasy of times in which they will "be alone together."

The languaging here is marvelous and I suggest the greatest advantage of this tape is to study the use Gilligan makes of ambiguity, double meanings, interspersal, and a variety of other indirect suggestions. Nobody does it better.

Some questions occur to me:

First, why are we doing this? What advantage does the shared hypnosis offer? Using hypnosis in marital therapy is something I have done very infrequently; it seems not really necessary. My approach to therapy has always been to do the least work possible to achieve a reasonable outcome. This seems like a good deal of work. Gilligan needs to explicate the benefits of this procedure.

Second, are these people really in trance, or are they listening attentively and politely? I suspect they are in trance, but we do not actually see hypnotic phenomena. We know an hypnotic trance is present when we see involuntary behavior. We don't see that here. Gilligan goes for some ideomotor responses of head nodding and finger signals, but the results are difficult to interpret on a videotape. After the experience, Gilligan does not interview or question the couple but thanks them and closes. The demonstration is less impactful because of that. What was their experience? What is their estimate of the time elapsed? Do we have any amnesia, hyperamnesia, or actual pseudo-orientation in time? We just don't know.

Third, what shifts and allowances would Gilligan make with an unhappy couple? These people seem happily paired, so this demonstration can presuppose a good deal of positive shared memories. The same notion couldn't be supported in many of the couples I see in therapy.

I believe an ordinary therapist — like myself — may feel intimidated by this *tour de force*. Gilligan continues without any real input from the couple for an hour, and I would be hard pressed to carry off such a sustained monologue. And again, I wonder about the wisdom of not getting input, ongoing overt responses from the clients. Such a relationship may foster passivity and a lack of involvement on the part of the clients. Like the LSD psychotherapy experiments, something that happens to you is interesting but not particularly impactful; there has to be a feeling of urgency in the client, the notion, "I am making this happen." Gilligan is so good here, that I wonder whether the couple thinks they make anything happen at all, or whether they were just along for the ride.

I recommend this tape for the powerful languaging and the ideas it will stimulate in the observer. It is not entirely satisfying, and would be enhanced by a post-demonstration interview with the couple and also by having Gilligan comment on his thinking and intentions during the work.

— Reviewed by Lynn Johnson, Ph.D.
Salt Lake City, Utah

Brief Therapy for Weight Reduction

Carol Lankton, 1988.

Videotape of a demonstration at the 1988 Congress in San Francisco.

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Weight is a common problem clients present to hypnotherapists. Carol Lankton demonstrates a single interview with this complaint, while cautioning that the actual therapy would probably run much longer and that any positive results coming from the demonstration depend on the resourcefulness of the client.

Lankton's induction techniques are less polished than Gilligan's. The flow of words is uncertain at times, and she appears early on to be searching for a way to connect. I think that is very good. Here you feel you are watching not a great artist, but a very competent practitioner. I like that since I feel more able to model and learn from someone who makes (or appears to make, for strategic reasons) some errors. She talks about hand levitation and begins to use a story (how did we know she would do that?) about listening to a "meditation tape" on hand levitation. She uses the idea of meditation, something the client values, and offers the possibility of either the hand lifting or the client thinking/imagining the hand lifting.

I found myself wondering why she doesn't reach over and disengage the sub-

ject's hands? He has his hands clasped so that hand levitation is unlikely. I was so busy watching for ideomotor responses, I missed what she was actually intending. Then the punch line, "just keep doing it" comes through, and we see how she is setting up an internalized phrase to carry this fellow along when his weight loss program becomes discouraging.

It is a great line, and demonstrates her helping him to reorganize his resources. My bias is still that such lines are better internalized when the client is involved in involuntary behavior. And I think this is a stylistic difference — some therapists value action on the part of the client, and some assume that learning takes place without action. When I have been a subject of storytelling procedures, I have never noticed any personal benefit, nor do I see much from my clients. I use metaphors occasionally as motivators and as ways of dealing with objections. Lankton obviously has experienced great success with the storytelling method, and she is very skilled at it.

In fact, there seems to be a sense of discomfort in her as she does the induction, but a shift into comfort and smoothness as she gets into the metaphors. Is she pacing the client — being uncomfortable and then being more comfortable — or does this reflect a style difference? I enjoy very much eliciting hypnotic phenomena at the beginning of the trance. She seems less comfortable with that.

Lankton's students will enjoy this video. The editing and direction are good, the audio is excellent, and her flow of metaphors is masterful. As with Gilligan's tape, I have similar questions about whether or not the subject is in trance. I don't think he is, although he is in rapport with her. He is responsive, but we have not achieved the kind of automatic operation of the unconscious, uncontaminated by conscious processes, that Erickson spoke of.

Perhaps this is a general problem with these demonstrations. They are done at a conference, in which there is an hour allotted. There is no opportunity to ask the client to practice self-hypnosis, to deepen, to explore which hypnotic phenomena the clients are best at. Lankton's work is more "therapy" than Gilligan's, but I am sure both would want much more time to work with these clients. Thus, we do not see hypnosis demonstrated, but compliance. And while that is useful and interesting, it does not tell the common practitioner like me how to do hypnotherapy.

Again, why not have 20 minutes of discussion after the work, with the therapist discussing case planning and management? Why not one or two other therapists questioning Lankton about her intentions and thinking at various points in the demonstration? In the future, I would like to see such additions to these demonstration tapes.

Lankton does invite us to ask her about her follow up, and so I called and asked her. The client has written several letters to her, reporting on general growth pro-

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Video Review *continued from page 11*

cesses in him, including a much closer involvement with other people, although it is unclear whether or not he has lost weight. Her intention was really to stimulate personal growth in this individual and in that she succeeded.

— Reviewed by Lynn Johnson, Ph.D.
Salt Lake City, Utah



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