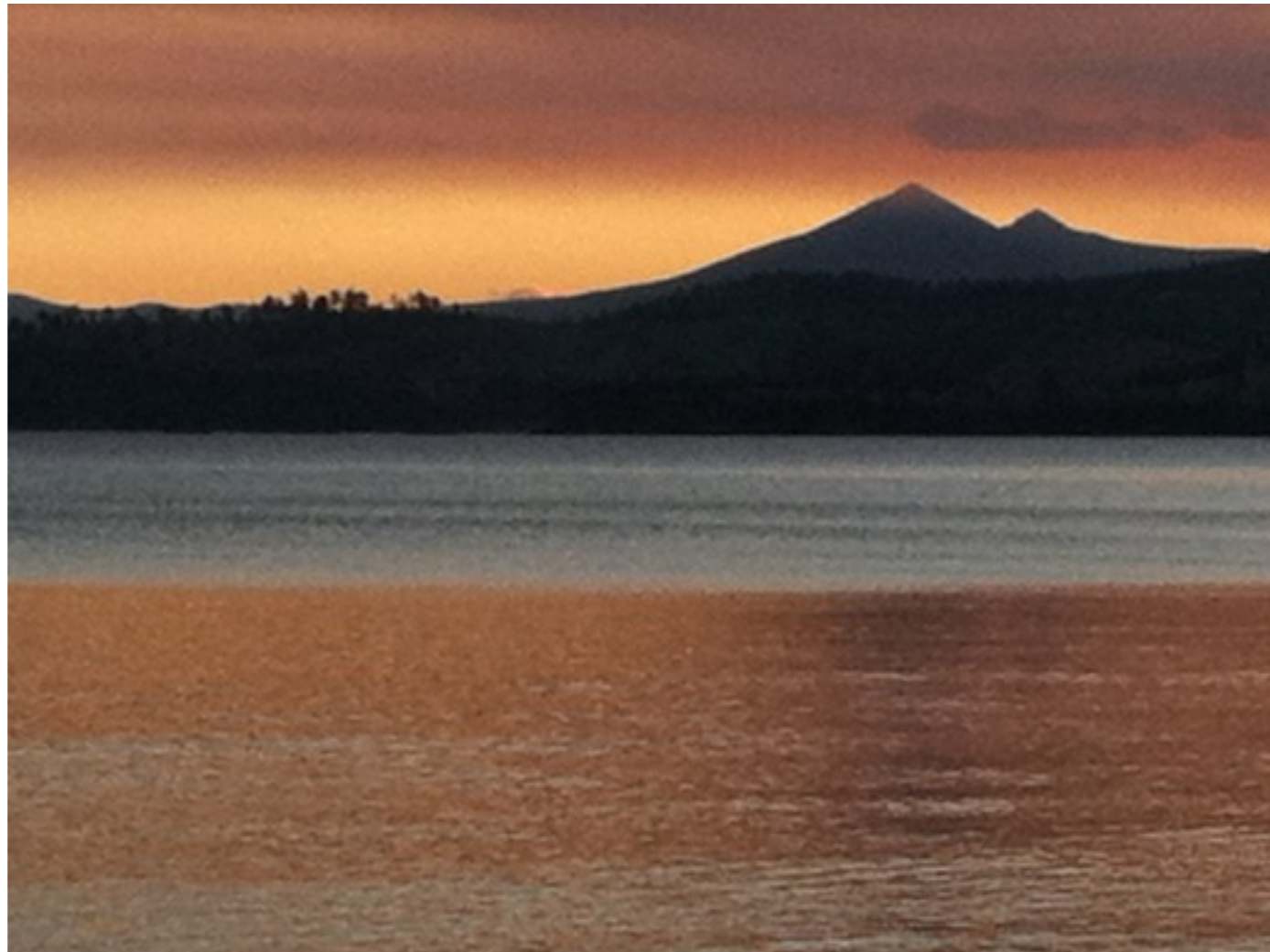

Connecting Hypnosis 1

After Erickson

The Fundamental Principles

Robert McNeilly



Dedication

*This book is offered as a humble gesture of appreciation of the continuation of
Milton Erickson's heritage into the future.*

RM

Foreword

This book evolved from my teaching my interpretation of Milton Erickson's approach to hypnosis.

Erickson told me, and many others, that we shouldn't try to copy him. He said that we couldn't anyhow, even if we tried. Instead, he encouraged people who spent time with him to find their own style, their own way.

Thus book is my attempt to honor that invitation.

I have found over the 30 or so years that I have been doing this, that each year I leave something out, simplify the process, become just a little clearer about what is

going to be useful for someone wanting to learn their own interpretation.

It has become important to me to focus on the experience of learning itself, and people who have shared this learning process with me have commented repeatedly how important experiencing hypnosis is and also how useful it is to observe, practice, and reflect on their experience in a safe, non-judgmental environment. They can play, make "mistakes", adjust, and continue.

That is how this book has emerged, and consists of simple ideas, demonstrations, and guidelines to inform practice with the possibility for anyone who is interested to begin to explore, in their own way, at their own pace, so they can then allow their own voice to emerge.

This first book in this series contains notes related to learning the process of hypnosis, the experiences which occur spontaneously in hypnosis, specific clinical presentations, and how we can adapt hypnotic principles and practices to these presentations.

The second book contains demonstrations with transcripts related to learning the process of hypnosis contained in the notes in the first book.

The third book contains demonstrations with transcripts related to the experiences which occur spontaneously in hypnosis contained in the notes in the first book.

The fourth book contains demonstrations with transcripts related to specific clinical presentations and how we can adapt hypnotic principles and practices to these presentations contained in the notes in the first book.

A further series of clinical demonstrations with transcripts will follow these first four books, to add further texture to the principles. These were recorded in response to many students of this approach who asked for the opportunity to observe this approach with “real” people [clients], not only course participants.

Why this book?

We all want to be helpful in our work; that’s why we are in this otherwise strange way of spending our working life. The jury is still out, though, about *HOW* we can learn to be more effective.

Wampold’s work points away from technique, and towards client factors, and begs the question of how can we tap into these factors?

I am attempting to present one approach which can assist us, and although the main topic of this book is hypnosis, the principles translate across many, if not all other approaches.

What is hypnosis?

Relating to hypnosis, I want to say something about the strange company that hypnosis has kept and is still contaminated by, to offer a working observation of hypnosis so as to avoid the unnecessary detour of trying to make a definitive definition of hypnosis; and to distinguish, as have many other writers, between traditional hypnosis, and Erickson’s revolutionary directions.

How can we learn hypnosis?

In exploring learning hypnosis, I invite us to approach these books by putting aside anything we already know or have experienced for a time, and allow a mood of openness and curiosity.

I invite us to find a way of exploring the different exercises with friends, colleagues and clients to foster our own experience of becoming more sensitive to the therapeutic process, and to develop the flexibility which is central to this Ericksonian approach.

In following these ideas, I invite us to put concerns about our skills aside and focus on the client and their innate resourcefulness as a way of restoring self-trust in the client which will be crucial in any effective healing process.

What can we learn?

There is a minimum of technique in these books. I have noticed that techniques are useful for technical situations like repairing mechanisms [machines], whereas we humans are strange, mysterious, and unpredictable creatures.

Instead, I invite us to be in the experience recurrently so we can become more sensitive, become more astute observers, more open in our listening so we can be more effective in assisting our clients to find and connect with their own individual preferred experiences.

Why hypnosis?

We shall see that hypnosis provides a unique opportunity to explore what we focus on and how we focus on it, thereby opening a whole world of options to shift the “what and how” of our focusing to lead to practical and respectful experiences which can allow the emergence of solutions. These then come from the client’s discovery rather than our “wisdom” and as a result are more achievable and lasting.

A possible learning process.

Introduction to a principle.

Demonstration of this principle.

Reflection on our experience.

Practice.

Reflection on our experience and that of the client.

My invitation.

Enjoy the process, play, and make as many “mistakes” as you can, as early as you can.

Introduction

Ericksonian Hypnotherapy

A personal Introduction

Melbourne, Sydney, Auckland, Tahiti, Honolulu, LA, San Francisco, Dayton, Philadelphia. 36 years old, wide eyed, bushy tailed, and jet lagged.

My first trip to USA.

My first International hypnosis conference.

The second evening, the lights dimmed; a talking head - a long list of hypnotic communication forms, “indirect suggestion, double binds, illusion of alternatives”, on and on All about this Milton Erickson person I’d heard so much about, and was surrounded in a purple mystery.

And suddenly, there he was. Looking benign and harmless enough, but what hope did Monde or Nick, the two clients in the demonstration, have against the slow, relentless, obsessively attentive old man in purple pajamas, sitting in his wheelchair as a legacy of poliomyelitis in his youth. I was fascinated, but the jet lag I opened my eyes as the first reel came to an end, and feeling somewhat irritated with myself for missing it, I was doubly determined to see the second hour.

The lights dimmed again, the same talking head, another series of yet more hypnotic forms of communication ... and there he was again. This time Nick was experiencing the full laser like attention he had previously been only a witness to. I was fascinated, but that damned jet lag again ... wasn’t there anything I could do? Again, I opened my eyes to see everyone shuffling around, talking wisely about their observations at the end of the second reel of the film.

I should have arrived earlier, got over my jet lag, then I would have been able to see and do justice to learning something about this guru of 20th Century hypnosis.

Next morning, half way through a glass of orange juice, it suddenly hit me. It wasn't jet lag at all - it was HYPNOSIS !! And I thought I knew something about this topic. I'd completed a 2 year training programme. I should have learnt some things, but this was something from a different planet, or was it from *this* planet ?

I was hooked.

Erickson's spell had caught me, even from a film. It wasn't just any film - it was Herbert Lustig's "The Artistry of Milton H Erickson MD". The tapes of that film continue to enthrall and delight.

This was my introduction to Erickson, the therapist, and the following year I was sitting at the master's feet. I have never been so frightened of anyone as I was of Erickson that first day. I didn't doubt for one moment his benign intentions, but he was so direct, so penetrating, so open, it was totally disarming for me and my human obsession about looking like I knew some things, terrified that I would be discovered to be the person I am.

I was ushered into his sitting room on that Monday morning. Lee was already there - he was visiting from Canada. Erickson asked me what I wanted to learn, and when he heard my reply he nodded silently. I said I

wanted to learn about the use of hypnosis for pain management. Nothing I'd heard in Melbourne made sense to me. He asked Lee to show me what had happened the previous day, and Lee obligingly began to say that he was sitting in the same chair, listening, getting increasingly comfortable , and ... ! I looked over to see Lee's head slumping forward as he went into hypnosis. This was extremely disconcerting to a well mannered Victorian doctor. Lee had gone into trance remembering his experience of going into trance. This was something I came to recognise as a signature of Erickson's work - his elegant utilisation of what was already available within the client.

I was confused and increasingly uncomfortable. My discomfort increased as I could feel myself beginning to slip into hypnosis, but I hadn't been told to, given suggestions to, even hints to, and yet it was happening. Eventually my Scottish determination wore down and I closed my eyes and surrendered to my experience with huge relief.

Erickson then began a series of stories about this, about that, ... something about a circus painting, about a sculptor and driftwood, about rattlesnakes and Indians and respect, about the uniqueness of an individual

being like their fingerprints, about learning, about un-learning, about nothing, about everything.

As I was attempting to make my own sense of all this my head began to pull on my neck with the weight of a cannon ball, my elbows were digging into my knees, I felt dizzy as if any moment I might fall forward onto my face. After three and a half hours of this I had learnt a lot about pain management. But what exactly? When I asked him for an explanation of what had happened, he stated concisely and succinctly that “what we experience depends on how we direct our attention.” Another signature of his work - an ability to say something in one densely compact sentence, or extend it for hours.

I sat with him each day for the next 2 weeks; sometimes just the 2 of us, sometimes with a client, sometimes other students. Each day I would return to my motel room and make some notes, and reflect. I was enthralled and bemused. I now recognise this emotion as wonderment. I had no idea what was happening, and I liked it.

When I returned home after 2 weeks, I was glowing. I felt like a kid in a lolly shop. I was not to be silenced about my experience, and I may have even lost some friends over this. Certainly people would cross the road to avoid yet another of my enthusiastic outbursts!

Another 2 weeks the following year and another week two years later, just before he died. There is no doubt in my mind that he was a delightful rogue. He enjoyed his life, and brought joy into the lives of many who met him.

All of that was long ago. How is this relevant now? In Los Angeles in December, 1994 his widow, Elizabeth Erickson spoke of his legacy, and invited students of his work to return to his original writing as well as reading what many have written about him. She stated that she felt it was important to recognize that Erickson had a long career and that he evolved and learnt as he went.

I appreciated her comments, as a reminder of the lessons of history as it unfolds, of the need to be inclusive of differences rather than becoming tribal and to foster the continuing evolving of this approach. One of his sons, Allan, told me that he didn't know what all the fuss was about his father. He'd been doing that work for 50 years, so he should be good at it. On the other hand I notice that I can get more entrenched in my blindness which can become deeper with the years rather than wiser.

There was a storm in the Ericksonian camp several years ago about his actions in his middle years, particularly with young women as maybe inappropriate at

best, and downright chauvinist and manipulative at worst. There was talk about his “dark side”.

I see Erickson as an explorer. He immersed himself in the direct experience of living. He had his own journey to learn to deal with his considerable physical disabilities - dyslexia, colour blindness, absent rhythm sense on top of his severe polio, and ever increasing pain. What explorer hasn't taken some wrong turns, gone down some wrong paths, made some decisions which in retrospect seem terribly dumb and stupid, but at the time of making them, how could the future have been known.

It is a pleasure for me to see his human frailties being accepted as a part of the actions of an unusually adventurous pioneer, but still a human being with human limitations. Pioneers don't have the map they bequeath to us. They help to make the map, but of course, who wants to see all the preliminary maps which were thrown away.

Ancient Sources

Somewhere about 500 BC Heraclitus in Greece, Lao Tzu in China and Buddha in India each spoke independently about the mystery of existence, it's flowing transitory nature, it's ineffable quality. Heraclitus wrote

about the river as always the same, always changing; life as always becoming Loa Tzu wrote about there being no absolute reality, only the external manifestations of the internal, eternal mystery. Buddha taught about detachment as an escape from suffering, and the benefit of avoiding the extremes of fundamentalism to choose instead the middle way.

Balancing and perhaps reacting to these were Plato, Socrates, Aristotle & also Confucius. The Greeks searched for an absolute fixed metaphysical reality and Confucius emphasised the need for hierarchical order. Reason and control, with its inevitable fundamentalist consequence became the order of the day, and for the last 2500 years this has been the general direction.

Contemporary Sources.

During this century, there has been another cluster of thinkers - Einstein in physics, Heidegger, Wittgenstein, Austin & Searle in the emerging philosophy of language and Maturana in biology. Their work looks to me very like a return to the time before rationalism took hold and heralds the completion of a two and a half millenia phase in our human history.

Since Einstein and Relativity, we can never now make a detached observation without also including the opposite. His question about whether the next station stops at this train still tickles my brain in a pleasantly disturbing way.

These contemporary thinkers have removed us from the falsely cozy position of being detached observers, and placed us firmly back into the activity of language. Our language is now seen as going beyond a mere description of reality, to a tool we use knowingly or unwittingly to bring our reality into existence, to bring it forth from the “mara” or ground glass background of the void which is full. By making distinctions in language, we are literally creating our world.

Maturana, as a biologist, is impeccable and seamless in his insistence that communication is concerned with coordinating action with others, not transmitting information; that language is concerned with a further degree of coordinating such actions; and that emotions are also primarily to do with actions - allowing or forbidding certain groups of actions. He also states that love is the fundamental human social emotion.

This contemporary return to the ancient way of understanding is only a return for those who left it. The holistic way of living which is intrinsic to the native cultures

of the Australian Koori and North American Indian is much more at home with Einstein or Heraclitus than Newton or Aristotle. The emerging interest in spirituality, getting beyond rigid prejudices and the awful pull to fundamentalism, and the practice of meditation can be seen as part of this return.

How are these relevant to the Ericksonian approach?

In an increasingly technical world, humans are searching out the sacred, the timeless. In a time of escalating rate of change, many are recognising the joy and wonder of dancing with the uncertainty, riding the rapids, rather than attempting to hold back the flood, and celebrating the perennial human aspiration of relating with respect, dignity and good-heartedness.

Erickson’s work, and the direction of the work of many who learnt from him, is consistent with a non linear, holistic, respecting, generating, inviting, and inclusive approach. He said that people with grim problems could do without the added burden of grim therapy. He seemed totally comfortable in expressing opposite opinions within minutes of each other. He told me that to think that there could be a single theory of human behaviour which would adequately explain all situations

for all people of all ages and all races of both sexes for all times was ridiculous. To my observing, he was again a pioneer here, in the very ground of the interactions. It may be that his pride in having Red Indian blood makes sense here.

I would characterise the essentials of the approach Erickson used as a difference of *emphasis* from traditional approaches.

He invited his students to develop in themselves

- A passionate respect for individual differences and
- The legitimacy of these differences
- An attitude of positive expectation towards future
- Emphasising action rather than understanding causes from the past
- The assumption that the client needs to remember forgotten skills or
- Learn new skills or
- Unlearn unhelpful skills
- Rather than being diagnosed and fixed

The issues in therapy are then towards

- Learning rather than correcting
- Creating a mood of lightness to facilitate the learning
- A selfless emphasis in focusing on the client as the source of change and
- Away from the significance and power of the therapist
- An obsessive attention to language - what is said, not said, what is done, not done by client and therapist
- A willingness for the solution to appear at any moment for no good reason.

Erickson said that a person can be walking down the street doing nothing in particular, and a problem arrives seemingly out of nowhere, so why couldn't a solution arrive in the same way? Why couldn't the problem simply go back to where it came from? I value this notion, and like the results of keeping it handy.

To me, a major contribution Erickson made to our relationship with hypnosis was his claim that hypnosis was simply a variation of everyday experience. He stated that hypnotic phenomena are an extension of commonplace phenomena. Disconnection was then like day-dreaming, time distortion was a variation of "time flies when you're having fun", hypnotic analgesia was seen as a development of the anyone anytime occurrence of

not noticing sensations such as a watch on a wrist, glasses on a nose, feet on the ground. This approach does much to demystify hypnosis, and make it a more ordinarily relevant experience, which anyone can have, simply by learning to extend experiences they have already had, or may be having even now.

This is so different from the understanding which appears to give power and control to the hypnotist, since it restores power and control to where it can most effectively be used - to the client.

A key question which guides the Ericksonian process is “what’s missing?”, rather than “what’s wrong that needs fixing?”. This shift in emphasis from pathology to recalling or learning leads in a delightfully different and more useful direction, as well as generating a mood of lightness and openness to what is yet to unfold which will be useful to the client.

Josephine had experienced increasing difficulty signing her name in her executive position. She had had weekly insight oriented psychotherapy for 5 months which she stated had not helped. She had focused on what was wrong that she couldn't perform such a mundane task, and was increasingly concerned about her dilemma. She reported that she loved to walk along the beach early in the morning and that what

was missing for her was an ability to sign her name without being self-conscious.

She was an intensely focused person, looking intently at me when I asked her questions, so as well as suggesting that her intensity may be part of her fixation about the issue, I asked her to focus on me, and then as she readily entered hypnosis, she exhibited the characteristics of light trance - relaxed facial muscles, altered breathing rate and depth, slowing of the pulse, general immobility ... I suggested that she recall the pleasure of walking along the beach, and to be aware in some unselfconscious way that her legs were moving perfectly adequately without her needing to attend to the length and height of each step. She was also able to notice how naturally and effortlessly she was breathing, and that as she increased her pace, her breathing automatically increased correspondingly.

I asked her to recall some time when she had been able to sign her name, and she reported that it was never a problem at the bank. She had no explanation of this, and remained rather puzzled. I suggested that she could pay attention to the experience in the bank, so she could learn this and have the event as a resource she could use at her discretion in the same way her legs walked and her lungs breathed. She was then asked to imagine signing her name comfortably and confidently, as she had in the bank, but this time at the of-

fice. She enjoyed this and was then invited to come out of hypnosis. She reported feeling relieved and satisfied and smiled as she wrote the check and signed it.

A 35 year old woman was referred to me because she had been pulling out her eyelashes [upper lids only] since a car accident 7 years previously in which there had been a laceration of her lid resulting in some distortion of the growth of the new eyelashes. She had begun to pull out these lashes and now couldn't stop. She said that she had always had restless hands, and thought that there must be something wrong with her personality since her hands had always been restless.

I offered an alternative explanation that she just hadn't learnt how to have still hands, and since she requested hypnosis, the induction was initiated by asking her to concentrate on the sensations in her hands as she discovered the ease of letting them rest as they were. The session continued and she entered a medium trance with her hands delightfully immobile throughout.

She was offered the suggestion that she was learning the experience of having still hands, and that she would be able to make her own use of this learning.

She expressed dismay and pleasure with her experience, and was able to sit in the evenings and not even think about pulling at her lashes.

Erickson has been dead for more than three decades, and even though his ashes were spread over a mountain in Phoenix, his recurrent invitation continues. He quoted one of his sons as saying that he would always be grateful to his grandfather who taught him that, sure there were great times in the past, and of course we can make the most of this moment, but the *best times*, they are still to come.

I continue to be grateful for Erickson's example in living what he taught - to have an attitude of gratitude to life for life's sake, not just the obvious benefits. He told me personally that you never know what life will dish up to you, so you take whatever comes, and you make the most of it.

What is Hypnosis?

What Hypnosis isn't:

Hypnosis has been surrounded by mystery and identified with various forms of evil, being regarded by some as the work of the devil. It has been associated with issues of control, and overpowering and too often the computer metaphor has been used, with the assumption that someone's mind can be "reprogrammed", their personality altered, a miracle generated from the power of the hypnotist. A colleague once said that if hypnosis was as powerful as popular understanding assumed, then he would have an army of followers tending to his every need. He didn't have such an army.

These stories have been fostered or even encouraged in the popular media and by the use of stage hypnosis where the hypnotist, usually a male, provides a sense of theatre and enhances dramatic effects with a commanding presence, gestures with the hands, and the issuing of orders that the robot-like subject is bound to follow. When observing such performances, no wonder even intelligent people have reservations. Who would willingly put themselves in a position where they would make a fool of themselves, and behave inappropriately?

It has kept strange, mysterious company over the eons, in particular magic and sorcery. No wonder issues of control, and being overpowered have generated a mood of suspicion and fear.

Magic is seen as a function of a magician, someone wise and mysterious, steeped in knowledge of the occult, specifically astrology, and The Magi of the Christian story were perhaps the most famous members of this exclusive group. I wonder if the star of the story may have had more astrological and less astronomical relevance. The important aspect here is that the mystical power is a function of the person of the magician. It was the magician who performed the magic, and any magic spells were secondary.

Sorcery is different. The effect of sorcery is in the words themselves, and anyone who uses the words, can have an effect. Someone, anyone, could find a book of sorcery and begin to create havoc, hence the need to keep such documents secret.

With a magician, or sorcery, the recipient is irrelevant, and can even experience the effects, either good or evil, without even knowing what is happening. They are the victim of the experience, and are totally powerless, unless they can find some other means of sorcery to protect themselves. The ancient sign where the thumb is placed between the first and second finger is a time-honored way of warding off the effects of “The evil eye”, which can be created either with a certain look, or by extending thumb and little finger of one hand, while flexing the other fingers creating a shape little like horns [of the devil?]. A crucifix provides protection from Dracula, unless he is Jewish, in which case a Star of David is needed, and presumably there would be a Muslim equivalent also. Without the protective objects, the person is powerless.

Hypnosis has been associated with some of the same responses, no doubt from sharing the same company, and so 100 years ago, hypnotists were male, domineering, commanding, had charisma, and demanded obedi-

ence to their will. It was the all-powerful hypnotist that was the source of change. Pretense and fear was palpable in the subject, and present [hopefully hidden] in the hypnotist. The stage was perfect for a dramatic event and entertainment and triviality followed. People continue to express concerns, however jokingly about “I won’t make a noise like a chicken, will I?”.

Others relied on standardised scripts, assuming that the power was in the words of the scripts, and so these needed to be kept out of the hands of unscrupulous power hungry, opportunistic charlatans, and stay safely in the protection of the educated professionals who knew how to administer this potent force. Books of hypnotic scripts are still in use today, and could be recommended if those who were listening were also standard and predictable.

When people are first learning hypnosis they report that when they tell their friends or professional colleagues about their new activities, their friends routinely avert their eyes. It is as if they are frightened that the “hypnosis” will sneak out of the eyes of the hypnotist and into their mind or brain and make some terrifying change without their knowledge.

Thankfully the fear associated with hypnosis is beginning to lessen, even though some paranoid ghosts still

whisper in the wings. It saddens me when someone refuses hypnosis and its benefits, not out of an informed choice, but because of ignorant prejudice.

We are still moving away from this 19th Century notion, and the subject or client can now begin to take their rightful place as the source, the centre, the site of their own experience. They can say “No” to an authority, however well “qualified”, dismiss any incantations as irrelevant, if they so wish. In doing this the client can reclaim their own authority, their own authorship over their experience, and by being an active participant in the conversation, their strength and dignity are restored as a beautiful aspect of any healing process and hypnosis can generate precisely that experience.

Erickson said in Lustig’s “The Artistry of Milton H Erickson M.D.” videotape “Although I am talking, this is your experience, not mine. It is taking place in you, not in me. It belongs to you, not to me. It is for you, and just for you. It’s a learning.”.

Defining hypnosis:

Reading the literature on hypnosis, you’ll you’ll find a wide variety of definitions. I haven’t yet found a totally satisfying one yet. Several years ago The Victorian Psychological Council, as it was at the time, took a stage hypnotist to court because it was not legal to use hypnosis in Victoria for entertainment purposes. The judge threw the case out of court, because she said no-one was able to give an adequate definition of hypnosis.

There are many different opinions about what hypnosis is - a different state, a different way of being - Freud likened it to falling in love. Milton Erickson thought of hypnosis as a special form of communication, or relationship, between the hypnotherapist and the subject. It certainly is very relevant in the areas of relationship and communication. Erickson also spoke about it as being a way of mobilising expectancy and if we can find a way of mobilising expectancy, it will be relevant to any processes of adapting to change.

Although each individual experiences hypnosis individually, there are some recurring descriptions – there is frequently some comfort and relaxation, some altered perception in vision, hearing, physical changes such as heaviness, lightness, or some disconnection.

Time seems to go slowly, or quickly, or stands still, and the descriptions are usually pleasurable.

Rather than trying to define what hypnosis IS, I prefer to explore what we observe when we say that hypnosis is happening.

Hypnosis is an experience of focused attention, leading to increased absorption in that experience, and which is agreed upon by operator and subject to be hypnosis.

I am assuming that “hypnosis” is linguistic, not substantial, and so will exist or not according to the social body of observers defining the situation. If I make a judgement that someone has gone into hypnosis, and they deny it, then, by my definition, there was no hypnosis. If the client says they were hypnotised when I observed no indications of hypnosis, then, again, I assume there is no hypnosis.

This give me the flexibility of maintaining an overriding consideration about whether it is helpful or not to regard any experience as hypnotic, rather than become embroiled in a tussle about some theoretical abstractions about who is right or wrong. This means that if there is any doubt, and hypnosis was stated by the client as desirable, I might offer the possibility that hypno-

sis may have happened without any need for the client to have noticed it. If hypnosis was stated as undesirable, it may be helpful to defuse any conflict by assuring the client that I didn't observe any signs of hypnosis, and although I've been using hypnosis for about 30 years, I might be incorrect; but in any case if they were able to go into hypnosis as a response of what I said that wasn't intended as hypnotic, then they must be skilled in this area, and have hypnotic responsiveness that might be worth exploring at some time in the future.

Clinical Relevance:

We can look at the clinical relevance of how hypnosis generates rapport, allows new observations, generates experience, facilitates learning and provides a socially accepted ritual.

Hypnosis can generate trust and connections:

When we work hypnotically with someone, there is something about the experience which is very special. Some call it sacred. There is frequently a sense of knowing and being known - a very intimate experience - an

experience where there is a sense of being with another person in a very special way, and sometimes that person is oneself.

Trust is present when we are functioning in the world, and with ourselves. When our life is working, we trust ourselves and our surroundings. When we are experiencing a problem, trust is always in doubt – “Can I do it?”, “Is the world safe?”, “Can I rely on my partner?”.

Restoring trust is a consistent element in the generation of any solution, and so trusting someone, in this case a hypnotherapist, can be a delightful beginning to re-establishing of trust in another so this process can then relate back to learning to trust the self again.

Human beings are naturally social creatures, relating beings, and one of the major causes of illnesses at this time in our history is our disconnection from each other, from our experience, and from nature. We live in a mood of overload and are too busy to “Stop and smell the roses”. Our houses have walls around them as if to keep out the imagined enemy [whoever that may be], the extended family is an anachronism, we dream of a country holiday or trip to the bush, but who has the time? To survive this madness, we have learnt to live in our heads, thinking and planning our existence, losing track of the experience of our surroundings – peo-

ple and nature. Finding some way of rejoining the world, re-contacting another person or an experience will encourage healing.

The experience of hypnosis in and of itself can be healing, and can enhance the therapeutic relationship by generating a mood of contactful, respectful, trusting communication so that when we then ask about the problem, the relationship is further enhanced.

Hypnosis can allow new observations:

We have come from a tradition founded in The Industrial Revolution, where everything, including problems are thought of as mechanical, in a “cause and effect” Newtonian world. Consistent with Einstein and Relativity, Erickson thought of problems as being extensions of everyday experiences, even caused by our attempts to solve them. Instead of thinking of a problem as having some pathological psychological or psychiatric cause, he spoke about problems as if they were circumstances that we had somehow gotten into and didn’t know how to get out of. Erickson tended to normalise problems, allowing for a reconnection of the experience to everyday life, where we have better access to our resources that when we are immersed in a prob-

lem. If for example someone was suffering from panic attacks, it may be more helpful to think of their experience as getting frightened and then getting frightened about getting frightened. If we can help the client to get back to being ordinarily fearful instead of trying to fix themselves, they can just get back to what Freud used to call “one of us ordinary neurotics”.

Erickson also linked hypnosis and hypnotic phenomena to everyday phenomena. One of the most weird looking hypnotic experiences for the novice is that of catalepsy. When you see someone with an arm suspended it looks weird and it feels weird. I remember my daughter as a toddler sitting in a high chair in front to the television watching Astroboy. She'd be sitting there feeding herself and Astroboy would be taking off with his red boots and my daughter demonstrated total body catalepsy – no body movement, no blinking, no swallowing – just total absorption in the experience.

Erickson's approach was to take hypnosis out of weirdness and put it back into life. When we see the work and experience of hypnosis from the inside we can begin to make observations about our everyday life from an hypnotic point of view which gives us an additional way of observing with different understandings, different ways of interacting, different ways of being.

A young woman was referred to me to assist with her bulimia. After I asked about how long she had been throwing up, I also wanted to know if she stood or knelt as she did this. Her look of disgust worsened when I asked her how far her mouth was from the water in the toilet just as she was throwing up. She didn't know, wasn't interested, but agreed to make an estimate of the distance any time this happened before the next visit. When she returned, she reported that she hadn't done what I asked, as she hadn't thrown up once. She was puzzled by this, but relieved.

Another young woman told me years ago that she felt out of control with her eating. Her problem was cheese. She couldn't keep cheese in the house without eating it, and would even get out of bed and go to an all-night store, buy cheese and eat it all. Could I hypnotise her so she would have some control? I introduced her to the idea that instead of me hypnotising her, perhaps she could avoid being hypnotised by the cheese. I sent her to the local supermarket to stand in front of the dairy cabinet, and see if she could hypnotise the cheese into staying on the shelf before it forced her to reach out and buy it. She said that after she had hypnotised the cheese, she would stand in front of the sweet shelves. She laughed. And she found that the

cheese and also the sweets were very responsive to her hypnosis!

Instead of her thinking of her issue about weight as being an issue of willpower, looking from the point of view of hypnosis and seeing the similarity between her behaviour and hypnotic behaviour provided a way of interrupting unhelpful patterns.

When we're working with people, the more options we have, the more different kinds of observations we can make, the greater number of distinctions we can make, the more useful we are. If you ask me to look at your car because it's not working, I have few distinctions - the fan belt's broken or you're out of petrol - and that's about it. You take your car to a mechanic because he's got a richness of observational distinctions.

Hypnosis can generate experience:

Hypnosis provides an unusually predictable way of actually getting into experience itself. Much of our work can be *talking about* an experience: "...What is it like? When did it start?" It's just *talking about* an experience. Hypnosis provides a way of actually getting into

the physiology, the emotions, the processes of the experience itself.

If a client is suffering from stress and wants to feel calmer, we can initiate a hypnotic experience inviting them to begin to feel calm, and explore where the calmness begins, how it spreads, what body sensations accompany the calmness, what memories the calmness may evoke - and calmness is generated as an experience. The client actually feels calm there and then, and it is their experience so they are more likely to be able to learn it and use it in the future.

If a client is experiencing pain, they want to learn to experience comfort, and hypnosis can assist by generating disconnection from the pain so it is less intrusive, and connecting to a more enjoyable sensation or experience, or by transmuting the pain to a lesser sensation so that it might be very bothersome instead of agonizing. Someone suffering pain wants an *experience* of comfort, not an understanding of it.

In dealing with migraine headaches, we can relate them to stress, or to release of stress. "It's Saturday morning. At last I have time for a headache". We can look at things that we do that are stressful and ways of relieving the stress - we can be cognitive about it. Another way of looking at such a headache is to look at

the circulatory aspect since migraine headaches are a disturbance of circulation. Neurologists who have a lot of clients with migraines sometimes shake their patients' hands and if the hand is cold when it's not cold outside, they can usually anticipate a migraine. The aura that goes with migraines - the dizziness, the vision disturbances – can all be thought of as circulatory. So one way to work with migraines with hypnosis is to work with circulation. You can ask someone to notice their hands. “See which hand is beginning to feel warm; notices the changes; let me know when you start to feel some warmth.” And as you work with someone in an interactive conversational hypnotic experience their hands may well start to feel warm. If they do, it is possible to increase circulation in conversation and because the client had their own experience of warmth, they can use it.

When a couple seek help with a conflictual relationship, they want resolution, peace, communication, shared experiences. While it can be fascinating to trace the patterns of interactions back to learned family behaviours as well as being extremely useful, hypnosis can also be helpful in a different way by inviting the couple to share a hypnotic experience. This can sometimes be the first time they have been able to be together peacefully, and can lead to other experiences

that they want, without needing to look into causes or origins.

Hypnosis can facilitate learning:

The Ericksonian approach to hypnosis emphasises that people learn to have problems and so can be expected to learn to have solutions. We might ask a client to reflect on the way they learnt many skills as a child, how they have been able to utilize those skills growing up, how all our life we are learning.

In hypnosis, there is frequently some alteration in perception, some greater flexibility of experience so that past, present and future can seem to merge and become somewhat interchangeable. Time can seem to speed up, slow down or become frozen. Memory begins to shift and shimmer so mirage and reality begin to coalesce. Sensations can change, and move in unexpected ways, sometimes to other locations or times. All of these changes sound crazy when spoken about, but make perfect sense in the experience – so called “trance logic”.

This malleability, changeability, flexibility of the experience of hypnosis can facilitate change in the experience

itself rather than in a conceptual realm, perhaps like the comment made when someone first saw a steam train – “I can see it works in practice, but does it work in theory?”. This fluidity of experience works in practice, and provides a basis for change and learning.

The idea of learning brings with it a mood of possibility and growth into the future – very relevant to therapeutic change. Because hypnosis can generate experience, and because it can open the client’s experience to changes, it can lead seamlessly to the experience of learning.

Hypnosis can provide a socially acceptable Ritual.

Human cultures are steeped in rituals down through the ages. Rites of passage, celebrations of birth, coming of age, marriage, death are part of traditional cultures, but are fading from our contemporary western society with its increasing pace and crisis of meaning. The traditional institutions of church, government, and business are all in transition, and we look to television, computers, and shopping as our places of worship and to generate meaning in our lives.

There has been a recent resurgence in rituals in the men’s movement with its sweat lodges and drum beating, and in some aspects of the women’s movement with celebrations of events such as the Summer Solstice. While participants speak of the benefit they have had, these practices are still regarded as somewhat “fringy” and hypnosis can provide a useful experience here.

To be in an altered mood, to sit still and put the cares, pressures and concerns of the daily round aside for a time, to close the eyes, and let thoughts drift in an undirected, passive way while having some particular issue at hand is different from what we might usually do, but not SO different as to be thought of as weird.

The fluidity of thinking and feeling that hypnosis offers can be the source of what I like to call everyday miracles – the kind of changes which feel natural and personally comfortable – and isn’t that what patients are looking for when they are in trouble?

Conclusion:

Hypnosis is not the only way of working that generates rapport. Hypnosis is not the only way of generating a set of observations. Hypnosis is not the only way of directing an experience or fostering learning; hypnosis is not the only way of creating a useful ritual. But hypnosis is one way that can facilitate these experiences intentionally where we can design our conversation and interaction to influence the likelihood of actually doing that and not have it happen as a side-effect – all this in a way that encourages learning and the application of that learning in the client's everyday life.

Hypnosis and Uncertainty

Magic or Science?

Those of us who use hypnosis in our work appreciate the way it can open possibilities for clients, assist them to discover long forgotten abilities, begin to move in areas where they were previously stuck, to literally come back to living a lively life.

It's a joy to be a part of this process, and to see these changes happen in a mood of respect for individual differences, in a mood of openness and trust, with the practitioner being a partner to the process, not a forcefully overpowering control agent.

It's a pleasure to witness the magical way that these changes can happen – without the necessity for painful reworking of previous traumas, without the need for psychological diagnostic categories and fixed treatment

plans, without having to dredge up past memories and work them through.

It is recurrently immensely satisfying to be privileged to observe the respectful, smooth, and natural progression from problem to solution, from painful stuckness to lively mobility, from fearful rigidity to open flexibility. It can be marvelous to watch and to be touched by this it.

With these obvious and recurring benefits, I often find myself with the question – “Why is hypnosis still seen as a fringe method, part of “the alternative approaches” rather than main-stream, usual, expected, as it's benefits would seem to demand?”.

Calls for scientific studies of the clinical effectiveness have resulted in compelling statistics, but a deep suspicion remains. My reflections about the persistence of these suspicions have led me to speculate that hypnosis has remained linked with magic and “hocus-pocus”, with accompanying scorn, and so has been dismissed as a legitimate area for exploration and clinical application.

I want to offer some biological principles to underpin the Ericksonian approach to hypnosis and psychotherapy, as well as linking in some timeless sources of wis-

dom. In offering these, I invite the reader to explore new and additional ways of observing hypnosis, to ground these principles and extend them into new areas of relevance.

It is my wish that this writing might serve to crystalize some of the impediment to the more widespread use of hypnosis as the powerful adjunct to many therapies that we have found it to be. I hope that some of the outmoded ideas, which have fueled misinformation and unnecessary fears, can be brought up to date and hypnosis can be seen as an opportunity to build the therapeutic relationship, to generate a useful experience in the client, to facilitate learning, and provide a socially acceptable ritual – so rare at this time.

Procrustes and the Pull to Certainty.

The resistance Erickson experienced when he began to speak about meeting individual needs of clients rather than applying some artificial psychological or psychiatric diagnostic structure has dissipated from contemporary thought, but the seduction of taxonomies such as DSM with its superficially appealing certainty continues to influence the everyday practices in therapy offices. It takes an act of existential bravery to put such a

tome aside, and use the client in front of us as our reference.

Procrustes was an ancient mythical Greek who not only robbed people, but insisted that they stay the night, sleeping on a special bed [the “Procrustean bed”] which he required them to fit. If they were too short, he put them on the rack and stretched them. If they were too tall he cut off their feet. In the brochure for The First International Congress of Ericksonian Hypnosis and Psychotherapy [1980], Erickson was quoted: “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.”

While the horror of tailoring the individual seems totally repugnant, how to tailor our observing to look for the resources relevant to a unique individual client remains as one of our most rewarding challenges. Tailoring the individual generates certainty for the therapist, but can be agonising for the client. Tailoring our approach leads therapists into an uncertain future, but one which has possibilities for the client, and the potential for creativity and satisfaction for the therapist.

Walter Truett Anderson in “Reality Isn’t What It Used To Be” reminds us of our particular difficulty, writing that in times of massive change, such as we are presently experiencing at this time in our history, there is a terrible pull to fundamentalism with its tranquilising certainty.

This is the choice – certainty or satisfaction. But even if we choose satisfaction, with its accompanying effectiveness, the question remains – “How do we do it?”

In “The Tree of Knowledge”, Maturana & Varela write [p245 – 246] “... If we want to coexist with the other person, we must see that *his certainty – however undesirable it may seem to us – is as legitimate and valid as our own* because, like our own, that certainty expresses his conservation of structural coupling in a domain of existence – however undesirable it may seem to us. A conflict is always a mutual negation. It can never be solved in the domain where it takes place if the disputants are “certain”.”

They write further about competition – [p197] “... the existence of living organisms in natural drift ... is not geared to competition but to conservation of adaptation, in an individual encounter with the environment that results in survival of the fittest.” This directly relates to the challenge of how to conserve our adapta-

tion to our individual client, while remaining sane and integrated.

Before we explore the historical relationship between hypnosis and magic, let’s first explore the history of magic itself.

Magic in the Past.

The Concise Oxford Dictionary defines magic as “an inexplicable or remarkable influence producing surprising results” which we could translate into a phenomenon for which we have no adequate explanation. In “The Tree of Knowledge” Maturana writes with Varela [p28] “Magic, for instance, is as explanatory for those who accept it as science is for those who accept it.” Magic has been an integral part of many cultures throughout time, and even in our modern age of rationality and science, it exists as a sub-culture, and is emerging in “New Age” practices.

In the area of magic, witchcraft is distinguished from sorcery. Witchcraft relates to particular practitioners and their individual abilities, while sorcery refers to ordinary persons employing deliberate techniques. Neither allow any influence by the recipient, although “Witchcraft worked in Salem because the persona in-

involved believed in it” Encyclopedia Britannica 1978 19:899.

The horrific and barely believable witch-hunts in the Middle Ages took much of their legitimacy from the *Malleus Maleficarum* [The Witches’ Hammer] which was written in 1486 by 2 Dominican Monks – Johann Sprenger & Heinrich Kraemer. It is shameful to discover that there were 28 editions between 1486 & 1600, and that these were accepted by Catholics and Protestants alike as an authoritative source on Satanism. It was used as a text for recognising witches so they could be killed, but also justified torture to extract ‘confessions’ providing “proof” of their guilt.

Like our present era, the Middle Ages were a time of fundamental social change, and the pull of certainty literally flamed the fires of fundamentalism. Torture led to certainty for the clerics, and burning the witches provided some certainty for the church and general population who then KNEW the source of their suffering.

I was interested to discover that magic derives from the practices of a Magus – a member of the ancient Persian priestly caste who were skilled in Oriental magic and astrology, an ancient magician or sorcerer. Magi, the plural of Magus, is familiar to us in the Christian story of

the Three Wise Men from the East who followed the star, or were they following their astrological charts?

I was astonished by an experience in Phoenix in 1978 when I attended a Native American Festival. The blistering heat was transformed into a soaking afternoon half way through a series of rain dances sung by a group of Hopi Indians. The rain seemed to come out of nowhere, and they stopped their singing out of their concern for the gathering. Was it magic? Would the rain have happened anyhow? I doubt if anyone then or since could provide total certainty about that question, but the result was unexpected, in time with the singing, and had no other apparent explanation.

When Anton Mesmer’s miraculous cures were investigated by the scientific community of the day led by Corvoisier, he was thrown out as a charlatan after his magnetic theories were disproved by substituting his magnetic iron rods with wooden rods which could not be magnetic. The investigation completely missing the fact that people continued to be cured of their afflictions! This has a ring of the *Malleus Maleficarum* about it.

Perhaps it is because hypnosis continues to be linked with the devil, with witchcraft, and the occult that it

has remained outside the inner sanctum of science, and a prejudice of skepticism and suspicion persists.

Power and Hypnosis

In the *Traditional* style of hypnosis, the power is in the hypnotist, as is the “TRUTH”, and this brings with it a demand for obedience to the hypnotist as in witchcraft. Mesmer thought that some people, including himself, were stronger “magnetisers” than others, and stage hypnotists who are traditionally male, present a compelling, dominating style. Perhaps the most extreme case is “The fastest hypnotist in the west” who only needed to allow the power of his gaze rest on the subject for a moment to produce the overpowering hypnotic effect.

“You will listen to me, and follow my instructions. You are in my power. Your eyes are getting sleepy. They are closing. You are relaxing more and more. You are going deeper and deeper into hypnosis. You will feel better and better after this experience. You will not be able to help yourself. You will feel stronger, more confident and better in every way. You will forget everything I have said. You are getting ready to open your eyes. Open your eyes. Now !!!”

This style is likely to promote fear in the subject, who naturally becoming concerned about being taken over or controlled by the hypnotist. This is a major deterrent for people considering hypnosis, even today. Some clients I see express a compulsion to empty their bladder before hypnotherapy, presumably as preparation for really “letting go of everything”, and express concerns such as: “Will I be able to drive afterwards” or “Will I be able to go to work after hypnosis?” or “What will you make me say?”.

In the *Standardised* style of hypnosis, the power and the TRUTH are in the script, and the demand for obedience is a demand to obey the script as in sorcery. Books are written full of hypnotic scripts, suggesting that all that is required is to somehow get the client into a receptive state, then read the words. Carrying it even further, we could generate a computer programme so a client could press 1 on their phone for stress, 2 for depression, 3 for pain, etc, and a disembodied voice could then deliver the required verbiage.

“What’s your problem? I’m looking it up in my book. Go into hypnosis and I’m now going to read what you need to hear. When you open your eyes, the script will go with you”

This promotes the idea of techniques and mechanistic interactions which is hardly human, and denies any individuality in the client, or any wisdom in the therapist.

In the *Ericksonian* style of hypnosis, the power and the “truth” is with the individual client and offers an invitation to learn in a mood of mutual respect.

“This is your experience, not mine; it is taking place within you, not within me; it belongs to you, and just to you; it’s a learning. As you are experiencing what you are experiencing, I’d like you to recognise that who I am doesn’t matter at all, and my words are much less important than the way you can make your own understandings – the ones that relate to you”.

Ericksonian hypnosis thus generates rapport, allows new observations, generates experience, facilitates learning and provides a socially acceptable ritual in which the power and authority are returned to the client as they are invited to get past trusting the therapist or the therapist’s words and “trust your unconscious”.

Is it legitimate for the therapist to appear powerful? I say that it is, if the power is used to reconnect the client with their own power. Is it legitimate to use scripts? Again the answer is yes, provided they are accompa-

nied by care and humanity as a step towards the client listening to their own helpful internal scripts.

Even if we like this, we are left with the dilemma of how to foster it.

Hypnosis can Create Helpful Uncertainty

One of the joys of working hypnotically is the way a client can experience feeling safe enough to risk some changes. When a client is frightened of losing control, and they can go into hypnosis and allow themselves to discover their inability to stand up or move their body, in a situation of exploration and support, their uncertainty about their experience can be transformed into a therapeutic change. The previous certainty which kept them stuck in their familiar but rigidly imprisoning problem can disperse. I value generating safe uncertainty as one of the most helpful aspects of hypnosis.

“As you sit there, you can be very comfortable not knowing which hand is going to lift, but knowing that one is.”

“And it’s always a pleasure to know that you know more than you know.”

“You don’t need to know when the problem will go, but you can know that it will go.”

“I don’t need to know how you will overcome this difficulty, and you might not know even after you will have dealt with it with a sense of personal achievement and satisfaction.”

Problems can be regarded as rigid unhelpful patterns of thinking, feeling, or behaving, and so creating uncertainty around these rigidities and disrupting them is one of the corner-stones of the Ericksonian approach. When Erickson was helping a woman to overcome her bulimia and asked her to go to her bedroom and put on her best red shoes, he disrupted her vomiting ritual, and created uncertainty about the whole issue. As I mentioned previously, this inspired me to ask a woman also wanting to stop her bulimic behaviour to estimate the distance between her mouth and the water in the toilet just before she vomited. This interruption and feeling of disgust created enough uncertainty to stop the unwanted activity.

Asking “What’s missing?” brings a mood of uncertainty to both sides of the therapeutic conversation and allows the client and therapist to look together for what can be helpful in each individual situation. Discoveries are frequently a delight as they lead to a now obvious and doable resolution of the dilemma.

Other Sources of Uncertainty

Wittgenstein’s closing words of his *Tractatus Logico-Philosophicus* [1921] are his most famous - “Whereof one cannot speak, thereof one must be silent” and offer the relief of not trying to speak about what we cannot speak about. This can lead to a doubly delightful experience of peace – not trying to do the impossible, and also not having to pretend that we can.

In the beloved Tao Te Ching, Lao Tzu writes:

“The ancient masters were subtle, mysterious, profound, responsive.

The depth of their knowledge is unfathomable.

Because it is unfathomable, all we can do is describe their appearance.

Watchful, like men crossing a winter stream.

Alert, like men aware of danger.

Courteous, like visiting guests.

Yielding, like ice about to melt.

Simple, like uncarved blocks of wood.

Hollow, like caves.

Opaque, like muddy pools.

Who can wait quietly while the mud settles?

Who can remain still until the moment of action?

Observers of the Tao do not seek fulfillment.

Not seeking fulfillment, they are not swayed by desire for change.”

#15

And also

“Give up learning, and put an end to your troubles.
Is there a difference between yes and no?
Is there a difference between good and evil?
Must I fear what others fear? What nonsense!
Other people are contented, enjoying sacrificial feast of
the ox. In spring some go to the park, and climb the ter-
race, But I alone am drifting, not knowing where I am.
Like a new born babe before it learns to smile,
I am alone with a place to go.
Others have more than they need, but I alone have
nothing.
I am a fool, Oh yes! I am confused.
Other men are clear and bright,
But I alone am dim and weak.
Other men are sharp and clever,
But I alone am dumb and stupid.
Oh, I drift like the waves of the sea,
Without direction, like the restless wind.
Everyone else is busy,
But I alone am aimless and depressed.
I am different.
I am nourished by the great mother.”
#20.

and again:

“In the pursuit of learning, every day something is ac-
quired.
In the pursuit of Tao, every day something is dropped.
Less and less is done
Until non-action is achieved.
When nothing is done, nothing is left undone.
The world is ruled by letting things take their course.
It cannot be ruled by interfering.”
#48.

Biology and Hypnosis a Scientific Connection

The delightfully radical Chilean biologist, Humberto Maturana offers a unique biological perspective that allows for hypnosis to have a scientific basis without alienating the “Magical” or “New Age” connections.

Maturana speaks of a living organism as being characterised by the way they are continually self-producing or autopoietic. He also writes that as one living organism drifts in some environment it will encounter other living organisms, and as a consequence of these encounters, various changes will happen in each of these organisms as well as in the environment they are all drifting in. This is simple enough, but his radical next step is to say that these changes in one organism are not caused by the other, but rather, any changes are merely “triggered” by the encounter. These “triggered”

changes can only be released if they have the potential to be released, and this range of possible releasable responses will be a function of the recipient organism rather than the other.

I like his observations, because they open a way of viewing many interactions, including hypnotic interactions, so that we can begin to explore hypnosis from a reputable, solid scientific model. It provides a place from which to make observations, to test ideas, to try new approaches, and to investigate effectiveness.

His ideas allow us to observe a client and a therapist as living organisms who, as they drift together in the environment of a hypnotic conversation, trigger changes in each other – the client in the therapist and environment, the therapist in the environment and the client, and the environment in the client and therapist.

When we think of these changes as “triggered” if they are potentially present within the structure and possible responses of the other and not “caused” by an intervention, it invites a different mood – one of uncertainty and respect – and we can begin to ask a very different series of questions.

“How can the therapist be in a recurrent interaction so the client can make their own adaptive changes over time so that learning happens in the client consistent with their individual structure?”

This might include their embodied emotions, stories and experiences. It might also include their anatomical structure. The plasticity of the nerve cells’ connectivity in a human being’s central nervous system is being recognised, and breaking the previously held premise that brain cells were fixed and unchangeable.

“What changes can we observe in the client, that will be useful for their future?”

This can lead to us observing, making a small intervention, observing further, making another small intervention, etc. If we ask “What’s missing?” rather than “What’s wrong?”, we can also become alert to the client, their response, our response to them, etc., so we can more usefully keep track of the changes, and help to ensure that they are relevant to the client’s needs.

“What environment can we create to facilitate these possibilities in the client?”

This can have us wonder what mood in us might be most useful. A mood of respect, safety and trust seem already to be essential. Our approach is likely to “trigger” very different responses in a client if we offer an invitation rather than issue an instruction, and the whole issue of indirect communication appears as a way of assisting a client to respond in a way that they might wish.

This has led me to say that the therapist says what the therapist says, the client hears what the client hears, and the client does what the client does, without there being an obvious relationship between any of these components.

When approached from this position, the awful certainty that problems, and problem-focused approaches can bring can allow us to welcome any uncertainty as an invitation to design, to create, to generate a more satisfactory and satisfying result.

“Even Pigsy knows that certainty is just another illusion”

from “Monkey” Wu Ch’eng-en

Ericksonian Connections

Working in the Ericksonian Approach, we all share a concern for effectiveness in our work in the face of immense complexity and individual differences in ourselves, our clients, their problems. The temptation is either to follow the seductive pull to fundamentalism with its self-satisfied righteousness or somehow resign ourselves to learn to live in the mess. The former invites elitism and isolation while the latter invites overwhelm and despair.

This is a concern which has occupied thinkers over the millennia. Heraclitus understood language as a means of dealing with chaos and used the metaphor of fire, and spoke of the transience of experience; the metaphysicians concerned themselves with the essence of being, perhaps as a reaction to Heraclitus; contemporary

philosophers are examining language anew, and the conversation is turning the full circle back to becoming, emerging, evolving.

One way of dealing with the uncertainty which is increasing exponentially is to codify or classify the variations and there are many examples from the DSM which classifies conditions or through Myers Briggs which classifies personality types. Classifications are appealing because they give us some direction, but there is also the risk of limiting our options in the same process. Another way is to regard the individuals and their experiences as phenomena and observe them rather than try to explain them. This involves us in ontology rather than epistemology.

Erickson invited us to “Observe, observe, observe” and this observing of phenomena brings a different emotion from explaining. Observing requires uncertainty, ignorance, curiosity, respect for what is observed, with the possibility of wonder and joy. Classifying people into categories, we find people who are either fit our categories or not and so are compliant or resistant, whereas working with phenomena we find infinite variety and interest that can be a source of learning for us as well as our clients.

How could we begin to look for a middle ground between the technician who requires rigid structures and sequences, and the artist who abhors these set structures and sequences and requires creativity?

Design

This may provide an opportunity for us to explore design, which requires an observation of the existing situation and an idea of the final desired result. The design process is then concerned with the journey between these 2 points. It is a process which demands accurate observations of the 2 points and a continuing observation as the process unfolds.

Although the shortest distance between 2 points is said to be the straight line joining them, in the world after Einstein, we can be informed by the Irish notion the “Sometimes the longest way round is the shortest way home.” E.g. 2 points on the Earth’s surface are travelled best by following a great circle, not a straight line. The curve is shorter than the straight line.

The Observer

Maturana tells us the we human beings are observers, observing, in the praxis of life, explaining. Also whether we ask a particular question or not will take us

down 2 very different explanatory pathways. This question is “How come I observe what I observe?”. If we do not ask this question, the observer is irrelevant, and the explanations are a function of the REALITY being explained. The world leads, and the explanation follows. If we do ask the question, the observer is placed as the source of the explanation and the observer’s structure, history, viewing will be primary. The observer and the explanation lead and the world follows.

The first explanatory pathway brings an emotion which demands obedience to the speaker of the REALITY and since the observer is irrelevant, and Truth prevails, anyone disagreeing will by necessity require correction. The concern is compliance with this TRUTH.

The second pathway is very different. It allows for the legitimacy of more than one observer, more than one set of observations, and so, more than one “reality”, each legitimate in its own right. The emotion here is respect and there is a concern for living together.

This allows the old argument about whether atoms are waves or particles to be an opportunity to examine the internal coherences of each explanation or ‘reality’, and the possibility of mutual learning between the previously opposing viewpoints. It emerges that atoms show up as particles at any particular point in time,

and as waves when observed over the passage of time. How the atoms show up is a result of the kinds of instruments through which they are observed and the concern then shifts from which is “right” to which is useful.

Matristic Principles

In his wonderful videotape “Proposition for Understanding the Origin of Patriarchy” Maturana speculates about a time when society was mutually nurturing, supportive, connecting and sharing and calls this a “Matristic” society. He speculates that this society succumbed to the issues of ownership, competition and the resulting enmity as Patriarchy emerged, bringing control, aggression and hierarchy.

The Ericksonian Approach is in itself Matristic, and that is one of the reasons I appreciate it so much personally and professionally.

Structural Determinism and the Drift

Maturana reminds us that the activities of an entity are limited by its structure. We would hardly expect a washing machine to make toast, or a toaster to wash clothes. Their structure would not permit it. To extend the

range of possible actions, we may need to alter the structure. For us humans, this involves learning.

Maturana also claims that life happens in a drift, and that in the experience of drifting together, we encounter other entities and interact with them. As a result, our internal structure can undergo change. We know that in learning to be frightened of a dog, our body learns a different response, and our structure alters in the process. In learning to be secure around dogs again, there is further learning and further structural alterations.

This raises the question “How can we best drift together with our client to influence their experience, facilitate an alteration in their structure, allow them to learn, so they can be more how they want to be?”. It relieves us of the burden of telling or controlling and enhances the opportunity to be respectfully curious about how the client may change in a way that is useful to them.

The Clearing

Heidegger spoke of “lichtung” or lightening which also brings a mood of lightness and is translated as “the clearing”. As we walk in a forest, and see the forest as the forest, we are in a clearing – not a clearing like an

absence of trees, but rather seeing that all the trees are there as part of the forest. For me this is an experience where I disappear as an observer, and there is nothing between me and the forest. It is as if I, as an observer, am not there. I am so present that I become part of the forest, and it doesn't make sense to speak of me or the forest – I and the forest become “I-in-the-forest” to follow Heidegger. I become transparent.

Each clearing brings with it a unique set of assumptions, emotions, distinctions and observations, as well as its blindness, and there are as many clearings as there are observers. For different people, in different clearings, a room that they are in show up very differently. An electrician may notice the lights, switches, power points. A decorator may notice the colour scheme, the style of the furniture, the ambience. A musician may notice the room's acoustic properties, while a building inspector may be more interested in beams and position of fire extinguishers. Each will bring a coherent set of observations and look within that set, often unaware that there are other sets of observations or distinctions, and usually unaware of the particular observer that person happens to be, i.e. the particular clearing that individual is standing in. In any clearing, the assumptions are given, obvious, unquestioned and so, transparent.

There was much talk of “intentions” as a way of understanding what directs or moves us as human beings. Intentions have an emotion of force and driven-ness that I don't like. “Concerns” are more human and supportive in my experience and bring an emotion of connection, respect, care. We could say that intentions direct us to act according to our concerns and the arena of action, the space or collection of possibilities that are created is the clearing. The “lightening” not only illuminates, but also lightens our mood.

A Learning Clearing

Learning can be a clearing in itself. In a learning clearing, that is to say when learning is happening as a transparent phenomenon, a whole variety of assumptions are operating in the background, usually unquestioned. To learn, we are already assuming that we don't know something, and are willing to learn. We give authority to the teacher, putting our trust in the teacher, we put aside any prejudices we may have about the subject, our abilities, what we already know. This provide the opportunity for a new observer to emerge as a result of the learning - as an expression of it.

The Problem Oriented Clearing

This clearing brings an observer who assumes that pathology exists as a cause of problems, and that causes will need to be enunciated so that a diagnosis can be made and a treatment plan implemented. Often the therapist is in a position of relatively more power, having control of the process which is often spoken about in a mechanical metaphor. Problems need to be fixed, treated, secondary gain and resistance are issues to consider, and recurrences are anticipated. “If you look for the evil in man, you will most certainly find it.” Emerson.

The Solution Oriented Clearing

It also follows that “If you look for the resources in man, you will most certainly find them.” A solution oriented clearing assumes competence and the possibility of spontaneous resolution of a problem, for no good reason, at any time. This clearing brings the expectation of learning, and invites the use of hypnotic language with its ambiguities and “trance logic”, hypnotic conversations so full of possibilities, and questions which are intentionally presuppositional – presupposing imminent solutions.

As this clearing clears itself, the learning is embodied from recurrent practice allowing transparency. Erickson’s invitation to “Trust your unconscious” make perfect sense in this context.

How can we Design a Solution Oriented Clearing?

Just as we can put ourselves in a situation where we are more likely to feel this way or that, we can put ourselves in this solution oriented clearing and allow the ongoing interactions. We can assume competence and ask “What’s missing?”.

Such an experience might begin by allowing ourselves to become more attentive to external experiences – sights, sounds, smells – and at the same time less aware of internal experiences – we don’t need to notice our feet on the floor, our increasing comfort, the easy rhythm of our breathing.

We could then recall the way we first began to learn to walk, or write, or ride a bicycle when we were able to give less and less attention to the mechanics of the process, and begin to allow the walking, etc., to become a more automatic function as we attended more fully to where we were walking, what we were writing, the journey as we rode the bicycle.

I have noticed that when we first begin to use hypnotic language, or presuppositional questions, that it is easy to lose track of the client, but as the learning settles in, the way of speaking just happens and we don't need to plan our sentences, our session – it begins to flow.

A professional violinist was contemplating giving up his career because of increasing tension in his shoulders. He was comforted to be reminded that he had been playing that music for long enough to learn it thoroughly, so the next time he played publicly, he could tuck the violin under his chin and let the violin play the music. He could enjoy listening to the result, without any effort.

A professional golfer overcame his putting problem by imagining that there was a groove in the green and the ball could easily roll along that groove into the hole. Perhaps he wouldn't even need to hit the ball, the ball might somehow get the club to hit it. Several years later, he was able to extend this learning and hit two holes in one at the one tournament.

When I was a discussant at the first International Ericksonian Congress, the third speaker began his presentation by announcing that although he had prepared a paper, he was not going to talk about it. This threw me into a panic since my prepared comments suddenly be-

came irrelevant. When he sat down, and I stood facing a sea of 2000 faces of world experts and had nothing to say, I could only open my mouth and listen to the words that emerged. Several people complimented me afterwards about the helpfulness of my comments.

We are, after all, all connected – all part of this universe.

We can then wonder about how we can let go into this wonder, allow ourselves to trust ourselves to make the mistakes we can learn from, and explore the infinite possibilities our experience offers us.

This may be one way we could explore the experience of “the clearing”.

Conclusion

One way of approaching the complex issues of working with people is to create a clearing which is ethical, respectful, human, matristic so we can share the process of enhancing our clients' experiences so that we are also nurtured.

What's Wrong or What's Missing?

“If you look for the evil in man, you will most certainly find it.” Emerson.

We humans by nature seek out problems - even our biology is structured so that our Central Nervous System is stimulated by change, and tranquilised by steady states. We are not able to smell a smell for more than a few seconds. If we sit with our legs crossed at the ankles and our eyes closed, after a few minutes it is impossible to know whether our legs are crossed or not. Our nervous system accommodates to the situation. So it is only natural that we notice problems. It makes evolutionary sense to notice danger, changes which might need our attention – to notice a movement in the bushes, not the stillness surrounding. The movement

may be a sign of danger, or even potential death if we were in a primeval swamp, wanting to avoid a sabre-toothed tiger.

Even now, if we are to safely cross a road, we need to be alert to moving cars, not still ones; we need to listen to cries of distress in our young children, or their unexpected silence. This natural problem orientation has allowed us to survive, and continue to do so, but at a cost to our wellbeing. The result of surviving is just that – survival – and while it is necessary, it is insufficient and can limit our liveliness.

A problem orientation requires looking for what's wrong, so we can fix it, or replace it, or avoid it. Our car mechanic is more interested to listen to some abnormal sound from the engine. It's his job to fix it. We are more interested to notice some problem in our body, our relationship, our family, our community since noticing alerts us to what needs fixing.

Asking “What's wrong that needs fixing?” is part of our heritage coming from the industrial revolution, where machines were the supposed savior of humanity [or at least some sections of humanity]. The language of medicine still reveres pumps, whistles, levers and fluid mechanics, hence our talk of pent-up emotions needing re-

lease, problems of stress, the brain becoming overloaded, or even our mood becoming “depressed”.

While asking about what’s wrong will be required in situations which require fixing, this question also creates a blindness by limiting our viewpoint. Like a pub with no beer, a Mr Fixit without a problem is also lonesome and drear.

When we ask another question – “What’s missing?” – we generate a whole new direction of looking, a whole new world of observations, a whole new mood, and most important, a whole new cluster of possibilities.

A woman was concerned because she was about to get married, and all previous relationships had ended unhappily. She told me that she knew what the trouble was – she had always had a bad relationship with her parents who fought all the time. She had been in therapy for some time trying to increase her understanding of her problem, but trying to fix a relationship with her parents who were already dead was a challenge.

When I asked her about what was missing for her so that she could feel more confident about her approaching marriage, she became thoughtful. This was a new question for her, and she was interested. After some

time, she said that what was missing was knowing that her marriage COULD be successful. She knew that there were no guarantees, but if it were POSSIBLE – then she could approach it with the normal mixture of trepidation and excitement.

Realising that the POSSIBILITY had been missing for her was already such a help – her eyes sparkled, her mood lifted – but we decided to use some hypnosis to make this possibility more concrete.

I asked her to go into hypnosis, being certain that she only went deep enough to learn what would be helpful for her, and to imagine that she could travel into the future in her mind, and visit herself 10, 20, 30 years into her marriage, and to be curious to notice what discoveries she could make. I reminded her that it wasn’t important to remember afterwards what those experiences were, just that they existed.

I also offered the idea that some of those future memories could trickle back into the memories and dreams of her childhood, as if she could imagine herself as a child looking forward to her 30th wedding anniversary.

She looked peaceful, and satisfied as the experience continued.

When she came out of hypnosis, she had a collage of experiences, some of which were vivid, others had a dream-like quality, and others were too vague to remember at all.

As she left, she told me, without me asking her, that she knew she would be OK.

By focusing on what was missing for her, she was able to find it and make use of it in a way that trying to fix her problem had not.

This change in focus, in orientation, in direction of looking seems obvious, but is also contrary to our formal training and even seems against our nature. Because it can be so helpful, it is our obligation to our clients to investigate it.

What's Missing?

If we ask ourselves or our client what's missing for them that if it were present, they would be OK, we might discover this to be some experience they aren't accessing in the problem circumstance, which is why the situation is problematic. This experience may be an emotion, a missing conversation, or perhaps an action.

A man wanted help with his "depression". I asked him what was missing, so that if he had it, he would no

longer be depressed. He was very clear that he needed more time. He had young children, a demanding boss, and money worries. Because of feeling overloaded, he hadn't made a start to organise himself, and particularly his time, so he could get in control of his life. He was agitated, tense, and fidgety. I asked him if he would like to learn to be more relaxed in his approach, and he was interested as long as this wouldn't slow him down, and get him even further behind.

I asked him to close his eyes, to let his mind drift to some pleasant place where he had been in the past - perhaps as a child, perhaps as a teenager, perhaps on his honeymoon - but some place when he was active, achieving, satisfied, and peaceful. He was able to describe an experience to me, while in hypnosis, when he had been helping a school-mate tidy up a large back garden over a weekend when he was about 16. There was a lot to do - the lawns to mow, rake, and edge; the vegetable patches to weed. Even though it was a hot weekend, he achieved a lot, with a sense of satisfaction, and importantly, he enjoyed the experience.

When he recalled the enjoyment, his mood changed, he visibly relaxed in the chair, and he stated - that's what's been missing for such a long time - enjoyment!

I asked him to memorise the feeling of enjoyment and the relaxation that went with it, and offered the idea that he could take that enjoyment with him into any number of activities, and he offered the opinion that he would now be able to get more done, with less worry, and greater satisfaction. he was pleased with his experience and was confident that he would be able to translate it into his life.

There may be some uncertainty about which particular experience will be THE RIGHT missing experience. We can speculate, wonder, ask and then correct if necessary before, during or after the session, as happened with the young man above. We began looking for more time, and discovered that it was more enjoyment that would be helpful.

Once a missing experience has been identified, we can immediately begin to introduce it into the conversation. If the client is tense, and relaxation is missing, then even before the hypnosis begins formally, we can begin to speak in a more relaxed manner, and in the induction, we can alert the client to noticing different feelings of relaxation as they occur spontaneously, remind the client they learnt it as a child, offer metaphors about others who learnt to relax, and present a variety of ideas that this particular client can use to find their

own way of learning their own experience of relaxation – the one they will be able to make best use of.

If on the other hand a client is bored, and stimulation is missing, we can alert them to the many different stimuli in their present surroundings – sounds, sensations, pictures – and invite them to explore the variety to discover which will be most interesting to them. Will they find the sound of my voice somehow fascinating? Will there be some other sounds present or remembered that will be more interesting? Will there be some images from their past which they can become engrossed in and want to be curious about? This sense of engagement and interest can be the resource that we can assist them to learn, so that the boredom will no longer be an issue.

If there are multiple resources missing, we can ask about which is the easiest and simplest, and look for that, and then suggest it can spread to other areas.

Asking “What’s missing?” can lead to an obvious experience, but sometimes it is more obscure, particularly if the client is used to a problem-saturated life. Just to contemplate such a question can be a challenge at times, and other ways of identifying such an experience include:

We can ask “How will you be different when we have finished here?” When the client identifies that experience, we can explore what it is about it that was not obvious at the beginning. We can then look for the experience that might have allowed the desired change to happen.

We can ask about how the client was before the problem began, wondering what that was like for them, what they were doing, thinking, feeling then, before they had the problem, and this might lead to some clarity about what experience was present then.

We can ask “the miracle question” – If a miracle happened and your problem disappeared, what would be different for you? This can be a place to look for future experiences – ones that would be present if the “miracle” happened, so that we can then go looking to find that experience in other areas of the client’s life.

We can ask the client to go into hypnosis, imagine going into the future when the problem has been solved, and ask “What’s different?”. This will be “What’s missing” in the present problem situation.

The answer to any of these questions can sometimes lead directly to the missing resource, and might include “I’d feel calmer”, “I’d be more confident”, “I’d be hav-

ing more fun”. These answers gives us the direction to explore with the client in the hypnotic experience – in the induction, metaphors and suggestions.

Even without using hypnosis, this direction of inquiry can often lead in directions which are complimentary to problem solving, and frequently preferable. Clients are usually only too glad to discover what they can do, so they can get on with their lives, instead of spending unnecessary time and money with us.

In these rapidly changing times with escalating demands, multiple pressures from all directions, there are enough problems without us adding to them. Milton Erickson stated that people have trouble enough with their grim problems without having to put up with grim therapy as well. I find my clients mostly agree with him.

If we take Emerson’s quote seriously [see above] then it follows that if we look for the useful experiences in people we will most certainly find them. My strong personal and ethical preference, given the choice of looking for problems or looking for resources is to look for and assist in finding useful experiences.

I like to tell my clients that the less they have to do with me and people like me, the better off they will be. They

sometimes look surprised, but predictably relieved. I expect to feel personal and professional satisfaction myself from working this way.

Hypnosis and Learning

Learning is such an integral part of life that we can so easily overlook it, take it for granted, allow it to be something in the background of our life, transparent. And yet, with all the changes implicit in living in a world of escalating change, the necessity of dealing with the changes becomes important if we want to survive, and imperative if we are to thrive. Erickson's comment that all our life we are learning juxtaposes living and learning with his usually incisive clarity.

Lao Tzu reminds us in Chapter 76 of his Tao Te Ching:
A man is born gentle and weak.
At his death he is hard and stiff.
Green plants are tender and filled with sap.
At their death they are withered and dry.

Therefore the stiff and unbending is the disciple of death.

The gentle and yielding is the disciple of life.

Thus an army without flexibility never wins a battle.

A tree that is unbending is easily broken.

The hard and strong will fall.

The soft and weak will overcome.

Learning Hypnosis

“It is no measure of health to be well adjusted to a profoundly sick society”. J. Krishnamurti

Although problems are not the substance of the solution orientation, they are the substance of living and are a result of the breaking of a transparency, an interruption to the smooth flowing of our life. They require a different response, change, adaptation, or learning. Problems are interruptions or breakdowns which we don't want. There are other kinds of “problems”, other kinds of interruptions, ones that we do want. Fernando Flores calls them breakdowns, or after Heidegger, a breaking down in the transparency of living. These positive problems or positive breakdowns are the raw material of the solution approach.

Whenever there is a breaking down of a transparency, we either suffer or adapt through learning. The suffering is the content for traditional counselling with the hope of lessening or dissolving it, whereas adapting and learning are the content and even the context of the solution orientation.

Any lingering difficulties in adapting to change can be viewed as a lack of learning or a blindness to the specific learning, or to learning itself. Where the individual feels that the learning required is beyond their capacity, there is an additional preliminary step to assist this person to get past their resignation and connect them with the possibility of their learning. We can assist a client to learn by associating them with their resourcefulness, remind them of examples from their own life where they already have learnt so much. We can offer stories about other people, other situations where this learning has happened. This can create the possibility of learning and allow the client to accept the invitation to learn whatever the change invites them into. This approach has these concerns as an obsession.

We humans can avoid learning by assuming that we already possesses The Truth, The Right Way, The Answer, remaining “right” in the face of an experience which deviates from our ideal. This assumes that to go

along with the changes we face would betray our beliefs. To solve a problem by adapting and learning would then create an even worse problem - this time a moral or ethical one. This solution would then become the problem, instead of keeping the problem as the solution. As long as the problem remains, one’s moral or ethical stand is in place. Prometheus thrives here. He stole fire from the gods, and willingly bore the agony which resulted. He was the quintessential example of Noble Suffering, advocating maintaining the problem rather than solving it by surrendering to the ways of the devil, the flesh, the world, or something definitely evil and to be avoided. Fear and certitude are the predominant emotions.

We could define any problem as some difficulty experienced in learning to adapt to a change. This definition is only one of many, and is offered as one way of inviting anyone who is suffering into the space of normality, and creates the possibility of learning. It follows that any problem, whatever its form or magnitude can then be viewed as an invitation to learning. Some invitations will be soft, others imperative. Curiosity and trusting are the predominant emotions.

Several years ago, when the Middle East was in yet another escalation of conflict, Stoltenberg, a Scandina-

vian diplomat, set up a secret meeting between the chief negotiators from both sides of the crisis and allowed them to each express their love of their country, their concern for the security of their people, and their hatred of the other. After each had heard the other saying the same as they had said, they are reported to have fallen into each others arms and wept. Peace was imminent.

Some learning requires the application of a learning which has already been learnt in another area of experience, like transplanting a bush from one location in a garden to another. Others will require learning something new, like seeking out a plant from a nursery and bringing it into the garden. In the former, we can think of a problem as a circumstance in which a specific resource is not being utilised, that if it were, there would be no problem, and which is being utilised in another area of the client's life which is not problematic. If the latter, then we can ask "how have you learnt previously?" or "how do you prefer to learn?" so setting up the conversation of learning from past learnings - learning to learn.

Learning requires a mood of curiosity, possibility, and trust. Without learning we are condemned to merely surviving - to endlessly repeating a loop of past behav-

our. With learning comes the opportunity to explore, wonder, adapt, experience liveliness, joy, and passion. Bill O'Hanlon quips that problems are the same damn thing over and over, while solutions are one damn thing after another. With solutions, at least there is "another".

Learning hypnosis then transforms into assisting someone to learn. Learning for a therapist then requires learning to facilitate learning in others. How different this is from attempting to fix some defective person!

A solution oriented therapist will then need to learn to generate a mood which would foster learning in their clients. This invites a watchful expectant respect for the client, and demands a putting aside of any of the therapist's certainties, prejudices, opinions, and expectations. It's not so much a matter of learning how to be, but also how to not be; not only what to do, but also what to not do.

Lao Tzu asks "*Who can remain still until the moment of action?*" [#15]

Learning Sensitivity

How we are relating to learning is changing. Until recently, we thought of knowing as acquiring information, arranging or computing that information to create an understanding or a model of understanding which we could then act on - something like making a map of an area of country and then using the map to find our way around.

We can appreciate learning as a difference in capabilities occurring over time. If at one time we can't do something, and at a later time we can, we say that learning has occurred. It is crucial to distinguish education from training here. Education – from the Latin “educare” – “to draw out” is very different from the imparting of information requiring that it be taken in, memorised and regurgitated. Training requires complying with some predetermined behaviour. Imparting information and training require a passivity by the student, and happen in a mood of fear with a concern for control. Education is a creative experience requiring active participation by the student, and brings a mood of legitimacy, curiosity, and openness.

There is a crisis in learning at this time in our history, due in part to the assumption that learning is linked with information; and dissatisfaction, frustration, and

resignation are part of the “education” system from primary through to post-tertiary. These approaches allow for coping or managing situations, but prevent moving beyond them. Learning as we are exploring it allows the possibility of moving past or beyond any limiting situation and creating a different preferred experience.

A map maker would be expected to get to know an area to be mapped; to wander around in it, not necessarily knowing what he was looking for, and then beginning to notice certain patterns – hills, rivers, flat areas for cultivation. The value of the map is that it allows those who follow to go more directly or to look with specific concerns in mind, and avoid the need for repetitive exploration with its necessary blind alleys, false hunches, mistakes.

Once the map user begins to use the map, they soon stop referring to it, and begin to find their own way around, perhaps referring to the map from time to time if they are uncertain or wish to explore something different. They may even make their own map, which they use as a reference until they no longer need to.

Any map becomes less and less important, except for historical interest, and then traveling becomes transparent, automatic, outside of awareness, habitual.

When we move into a different house, we begin to discover which room is which; where to sleep, where's the bathroom, toilet, kitchen, etc. Later in the day, we begin to explore light switches, power points, and door locks. As we continue to live in this house, we begin to discover more about the house, and also more about what is to be discovered that we didn't even think to look for at first – perhaps an extra storage cupboard we overlooked at first, perhaps a rose that comes into bloom that we previously overlooked. We may also discover tasks to attend to – squeaky hinges, badly fitting doors, weeds in the garden – none of which were apparent when we first moved in. We may even rearrange the rooms, repaint them, perhaps even pull down a wall, or extend the house. Living in this new house allows us to become more sensitive to the house as we are in the experience of living in it, and we feel at home when the experiences become transparent.

Over time, we learn the house. We move around without needing to think about where the light switch, the wardrobe, or the kitchen is. When we are not even aware that we are not thinking about these is when we have settled in and feel at home.

When we are learning something new, such as solution oriented hypnosis, we can put ourselves in the experi-

ence, not knowing what we should be looking for, not knowing what to ask, what to say, how to respond, and yet as the process continues, we begin to discover, each individually, how to find our way round this new territory.

Wittgenstein wrote: *“My propositions are elucidatory in this way: he who understands me finally recognises them as senseless, when he has climbed out through them, on them, over them. [He must so to speak throw away the ladder, after he has climbed up on it.] He must surmount these propositions; then he sees the world rightly. Whereof one cannot speak, thereof one must remain silent.”*

The one map maker could make many different maps of the same area – topography, soil types, vegetation – for different map users – builders, gardeners, farmers – but the process of map making involves making distinctions or creating ways of referring to the area which would have already become transparent to the map maker.

What is the experience for the map maker, before he makes the map? How does he get to know the area so that he can begin to map it – not just in one way, but in a variety of ways? We could say that he gets to know the area, becomes familiar with it, experiences it, gets

used to it. In this writing I am going to use the notion of “sensitivity” as used by Spinoza, Flores and Dreyfus in “Disclosing New Worlds” [p39] Their writing is a gem – revealing a whole new world or ‘discloses” it as they would say.

“This book, then, is attempting to develop sensitivities, not knowledge. Once one has a sensitivity to something such as food, decency, certain kinds of beauty, or even the pleasure of hiking, one is already on the path of refining and developing that sensitivity. One sees food, decent behaviour, beauty, and hiking trails in a new light. They draw one to them in a way they did not before. As one is drawn, time and time again, one then continuously develops one’s skills for dealing with what one is sensitive to.”

The idea of developing sensitivities is so elegant. It describes so accurately our raw experience of learning. Developing sensitivities allows us to reconnect with our own experience, with our individual ways of experiencing, and so, reconnects us with the heart and soul of learning itself.

We could say that the map maker learns the area by becoming sensitive to it over time and recurrent experience. Each recurrent experience allows for increased or new sensitivities – increased sensitivity in the ways of

observing what has already been created and new sensitivities as a result of new ways of observing that might suddenly appear – as if from nowhere. In looking for the direction of river flow and steepness of land for grazing or crop cultivation, the map maker might notice tall, straight trees which could be used for house construction, or a new kind of bird or animal which could create the possibility for research or tourism.

The experience of becoming sensitive can also allow an increasing sensitivity to the process of being sensitive itself. As we develop more sensitivity to a particular way of observing, we begin to sense more ways of observing, and so on.

We can now say that learning, becoming more competent, finding our own way around some area – either physical or intellectual such as learning hypnosis - can be approached with the questions – “What would be useful for me to develop sensitivity to?” and “How could I develop these sensitivities?”.

We know from our everyday experience that if we want to learn something like riding a bike, another language or a new computer programme, that we get on the bike, into conversations in the new language, or in front of the computer and begin to “play”. This translates into

any area of learning and invites us to get into the experiential soup of whatever we are wanting to learn.

Our everyday experience also teaches us that early on we will make many mistakes – fall off the bike, say the wrong foreign word, press the wrong computer key – and that making these mistakes provides us with the actual experience of learning what we are wanting to learn. Mistakes are expected, welcomed, even encouraged. How different from the mood of most of our schooling, and post-school “education”! We were punished for our mistakes, felt fear which limited our development of sensitivity, openness and learning itself.

Learning for the Observer

This process can begin as an intentional interruption to our automatic activity. We can intentionally create an opportunity to step aside from our habitual behaviour, and be glad to find ourselves being uncertain, not knowing what to do, where to go, what to say. We can recognise that we didn’t know what to do, and ask for another to teach us. This will only happen if the issue is important to us, if something is missing for us and will require a willingness to open or soften to learning, perhaps observing others more skilled in this particular

area, with a willingness to allow time and learning plateaus to happen.

Listening and curiosity are central here so that the observer we are, our way of observing, can undergo a change, can learn, so we can again be less self aware as transparency returns. It can be helpful to reflect on what will facilitate this process, what can usefully be cleared out of the way so that we can be more “in touch with ourselves”, more centred, more together, less reactive, more available, more transparent.

Learning Learning

One approach to problems is to think of them as rooted in lack of adapting to change, or lack of learning, and that solution oriented hypnosis is concerned with providing opportunities for clients to learn. It is then of central concern to observe ongoingly what skills our clients may demonstrate in learning, and what additional assistance they may require to learn what they need to learn.

Sometimes therapy IS finding the area of learning to be explored. “If you don’t know where you are going, you might end up in a different place” where knowing

where to go might be what's missing. Once the area of learning is defined, the conversation can help to recall previous learnings, or previous attitudes to learning which can then allow the learning to proceed, and the solution to emerge.

Every human is blind to some area of experience, and if this blindness interferes with our functioning, we experience a problem. Problems can be resolved by recognising these areas of blindness, so we can literally begin to see or distinguish what was previously transparent. We can only intervene in a world we can see, sense and that we can become sensitive to.

Hypnosis and Learning

When we have a problem, a mood of fear can be identified, and an assessment of lack of trust in the background.

When we ask "What's missing?", we will see the contrast with the experience when learning went well. If trust is missing, and in my experience self trust is always damaged in any problem situation, then we can invite a prudent exploration of the possibility of learning to regain trust – again we find ourselves in the expe-

rience of learning. Other issues which may emerge may include humility if arrogance what blocking learning, or confidence if wariness of criticisms by others was problematic.

Maturana said that learning is an emotion, not a matter of information and that learning begins when the student takes the hand of the teacher. For this to happen, trust is a prerequisite, and instead of naively hoping, thus inviting betrayal, trust can emerge again, through an experience of learning. In this circularity, prudence brings with it the possibility of relearning to trust in a grounded, solid, manageable way. Trust as a resource which we need to live fully in the world is a core resource that will call us – a call from our soul to our soul and that of others. This relates to the exterior issue of the teacher and through that person to the world, and even more importantly, the interior – the reinstatement of trusting the self. Our own self is the one inescapable and recurrently present companion for any of us humans.

Conclusion.

We can now consider learning as the process of actively and fully engaging in living, and so learning will be an

area of interest and concern for any human being wanting to more than survive - wanting to thrive.

Invitations into Hypnosis

I am describing hypnosis as an experience of focused attention, leading to increased absorption in that experience, and which is agreed to be hypnosis by operator and subject.

This means that anything can serve as a focus for a client's attention. Any of the senses can provide a focus. A visual focus might be a spot on the wall, corner of a picture or a light. Sounds such as music, breathing, the hypnotist's voice; smells; or sensations like the feelings of the feet on the floor, skin awareness, the movements of breathing can also offer something to focus on. More internal experiences can also be useful e.g. a memory, an imagined place, colour or image. If someone has had an experience of meditating, then meditation experience itself can be a focus.

Whatever the focus, once established, a client wanting to experience hypnosis only needs to allow themselves to become increasingly absorbed in that focus to generate a hypnotic experience.

This process will be different for different individuals, and different in differing situations. Traditionally, standard scripts were used and required a memorising of a sequence of suggestions to which the client responded with individual variations. Those who responded as expected were classed as good hypnotic subjects, and those who didn't were classified as resistant to varying degrees.

Continue doing what you are doing ...

When we link hypnotic experiences and hypnotic invitations with every day life experiences, we can notice how an individual client is attending to their experience and then suggest that they continue to do that, and with validation, whatever they are experiencing can be encouraged, and the absorption increases, resulting in the experience of hypnosis. There is a North American Indian saying – “It's easier to ride a horse in the direction it's already going” and this reminds us again that when we find a way of tailoring our approach to each

individual client, we are more likely to reach the client's goal than if we try to insist that they follow any standard methodology.

This also avoids any concern about whether this client can be hypnotised. Since they are already doing what they are doing, they must be able to do it, so continuing is a given, resulting in relief for client and therapist.

I wonder if it would be OK for you to continue doing whatever you are doing right now. This might be looking at me, listening to background noises, or letting your mind wander. It's not important to do anything in particular, but rather just continue with whatever you happen to be doing. And as you continue to do that, you could allow yourself to become more absorbed in your experience, whatever it happens to be. And I can notice [describe any physiological changes that are observable - stillness, change in blinking, smoothing out of facial muscles].

What do you like doing?

When we do something that we like to do, we have all the resources at hand to manage any potential interrup-

tions without creating a problem, otherwise we wouldn't like the experience.

So asking someone to begin to focus on the experience that they like is a reliable and respectful place to invite focus, and then absorption ... The experiences that are central to hypnosis.

Recall Previous Trance or Relaxing Experience:

If we ask a client to recall a previous hypnotic experience, they can have the opportunity to remember more than the occasion. The experience can be recreated in its totality including the mood and physiology. It is a recurrent delight to observe the beginning of a hypnotic experience simply by asking someone how they went into hypnosis last time, whether the previous day or 20 years ago, and then, by commenting on and encouraging any change that is along the way of experiencing hypnosis, a natural development is allowed, and feels so natural to the client since it is their experience, generated by them, with us merely commenting on the changes as we observe them.

If there has been no previous experience of official hypnosis, asking how they like to relax or enjoy themselves

can provide a similar opportunity. If the client meditates, we can ask them if it would be agreeable for them to begin to meditate and allow our voice to be part of their meditation. Once any changes are observed, they can be validated explicitly by saying, for example, “Your eyes look like they are getting ready to close”, “The muscles of your face are smoothing out”, “There is an increasing stillness in your body”. Alternatively, any hypnotic behaviour can be marked out by saying “That’s good”, “That’s right”, “Good” or “Uh huh”. This validates a naturally occurring, therapist supported, individual experience and avoids any external imposition.

Conversational Induction.

In the hypnotic context, when a client has requested hypnosis, or the use of hypnosis is permitted implicitly or explicitly, the therapist can engage the client in a conversation. As the conversation unfolds, the therapist can validate any observable changes consistent with the development of hypnosis, and the client can then be invited to focus more fully on these experiences, and become increasingly absorbed in those experiences.

When hypnosis can be encouraged in this way, a client is more likely to connect with the experience, since this emerges as a natural extension of a conversation they were in, and is a gentle, respectful experience which comes from them, is experienced by them, and can be connected within themselves so it becomes more naturally available to them as a learning experience.

Interaction in Hypnosis.

A century ago, when general anaesthetics were becoming popular, a hypnotised subject looked anaesthetised or unconscious, with the hypnotist instructing the passive recipient about future behaviour. There is still some persistence of this notion of reprogramming someone’s mind using hypnosis, like some kind of mental surgical operation happens after the client has been “put under” or made “unconscious”. In this millennium it is becoming more usual for a client to be more active in their problem solving, solution finding and processing in their life, and so more often active and interactive in their hypnotic experience.

Some clients dislike conversing in hypnosis, but most find it increases the degree of absorption in their experience, particularly if that possibility is offered by the

therapist. We have come to see that hypnosis is not some delicate state which has to be vigilantly protected, but rather a robust, self sustaining state which is resilient if given support.

Catalepsy.

Catalepsy can be thought of as a non-verbal conversation between the therapist's hand and the client's arm. It has been described as a waxy flexibility - the arm seems to be suspended effortlessly and can be placed in many different positions, without effort or strain. Catalepsy can be used to provide evidence of hypnosis, to introduce a focus and increase absorption, to introduce disconnection, analgesia, anaesthesia, or as a physical metaphor in clinically relevant situations.

If we lift a client's hand gently, and then gradually loosen our grip, the client has an opportunity to discover the experience of their hand feeling as if it can remain in that position. This frequently generates a mood of wonderment which is so useful as a source of new learning and flexibility.

It is usual for some changes in physiology to occur. There may be signs of decreased circulation as the hand becomes cooler. There can be some alterations in sensations, normally numbness or tingling. Reports of

disconnection are usual with the hand being experienced as if it is "a hand" rather than "my hand".

Because the experience of catalepsy is so unusual, it can provide useful evidence if a client doubts their ability to experience hypnosis, and can be offered as an invitation into hypnosis, a focus for further absorption during hypnosis, or even ratification after hypnosis.

After a hypnotic session, a client was unsure if he had experienced hypnosis as he had heard everything I said, and wondered if he had just been sitting there with his eyes closed. To avoid him disqualifying his experience, I told him that I was relieved that someone was listening, and I hadn't been talking to myself, and then reached over and gently lifted the nearest hand and left it cataleptic. I asked him if he felt as if he was hypnotised now, and when he said "No", I could offer the idea that he didn't need to feel hypnotised, but his hand certainly was demonstrating that something was interestingly different, and he didn't need to know about everything that he was learning. Perhaps he had learnt more than he realised. He was satisfied with this experience.

Catalepsy can provide a useful physical metaphor. For someone who has difficulty concentrating while studying, or trouble persisting with a task, an experience

which allows them to discover how easily and naturally they can “keep it up” can be so useful. The relevance to male potency concerns is as obvious, and as helpful.

We can introduce some interesting variations here. The hand can be placed in a position to express a desired outcome – a clenched fist for strength or determination, an open hand for learning to be more accepting or receptive, or in a “stop” position to assist someone learning to say no.

Catalepsy is a very useful learning experience for a therapist also, since it gives us an opportunity to become more sensitive to each individual client’s experience. If we let the hand go too soon, it will fall. If we lift it too forcefully, a client is likely to resist. If we are gentle in our lifting, expressing non-verbally that we are respectfully supporting and guiding only, and never pushy, this will enhance rapport by generating trust in the therapeutic relationship.

Arm Levitation

Arm levitation can be facilitated by asking the client to arch their fingers so the tips are almost touching the arm of the chair or their thigh, or even from a position

of catalepsy. The idea that the hand or hands can tend to move up towards the face can be offered, and any minuscule evidence commented on, and encouraged, always with an air of expectancy.

Arm levitation can provide a useful physical metaphor for letting things happen, for creating greater distance by allowing them to watch or experience the independent movement of a part of themselves, in this case their arm.

It was Erickson’s *lief motif*. He used it frequently in therapy, and it was important to him as a way of exploring his own potential mobility after polio drastically reduced his previous physical learning. By remembering how his hand used to move, he is reported to have been able to facilitate movements in his paralysed limbs by accessing these sense memories. This can be a reminder to us and to our clients that we all have many abilities that we are unaware of, and sometimes life happens best when we let it happen. Lao Tzu says that “Things are ruled by letting them take their course, not by interfering”

A woman was uncertain about whether she should go ahead with her upcoming marriage or not. There were many reasons for and against. As she previously had an experience of hypnosis, it was easy for her to

let herself recall that experience and become absorbed in the memory. I offered her the idea that she had already decided what action she was going to take, and was keeping the decision from herself until she was ready to accept the consequences of that decision. I then invited her to attend to the sensations in her hands and to wonder which might begin to change in an interesting way. Would the hand that was going to lift begin to feel light, or not press down on her leg as it had, or would some unexpected upward movement begin? Would she be able to sense the movement before it happened, would she notice it as it was already beginning, or would the hand lift and then allow her to notice that it was lifting? One hand began to lift in a characteristically jerky manner and allowed her to begin to wonder what the decision was that she had made. Perhaps she would only know what that decision would be after the hand had lifted all the way to her face, although it was likely that she may have at least some hint of the answer at any moment. As the upward movement continued, her facial expression altered and she became animated. "It's Ok. It's OK" she said quite excitedly, and as the hand reached her face, she became peacefully still. After a few minutes she opened her eyes and was visibly relieved and grateful.

The Language of Hypnosis

As you read this, it might be interesting for you, if you were to be interested, to begin to wonder, to wonder, ... how what is written, ... what you read, ... can in some way, ... begin to relate to you, your learning, your experience, ... as you continue.

We are living in the information age, traveling the information highway, and yet increasingly we suffer from information overload. Busy professionals face a daily dilemma about what to read and what to put in the bin. There is no shortage of information, and yet we are experiencing a crisis in communication. We see couples, families, teenagers, in pain over not being heard, understood, listened to – a breaking down of communication.

Humberto Maturana reminds us that communication is a co-ordination of action, not transmission of information, and we see that in our clients all the time. So much suffering happens when someone doesn't listen to their own body, partner, child, parent, employer, employee. Clearly this communication difficulty happens in a sea of information - sometimes problems are information-soaked, but as long as there is no connection, no effective interaction, then no communication has happened.

We humans are linguistic beings, immersed in language, but all too often ineffectual in our use of this precious gift.

How many times have we found ourselves trying to sort out what a couple's argument is *really* about? How many times has our well-meant attempt resulted in the argument worsening? We sense that we could help if we could find the right words, the right phrase, the right communication ... but what would be helpful in these kinds of all too common situations?

A couple came for counselling because they were having difficulties communicating. She said he didn't understand. He said all she did was nag. She explained how frustrated she was being at home with the kids all day, just waiting for some adult conversation. He com-

plained that he had been talking all day at work, trying to sort out problems there. The last thing he needed was to hear about more problems, even about his own kids. He wanted a bit of peace and quiet.

The more each explained to the other, the more frustration and resentment was produced, and the worse the situation became.

The last thing either of them needed was yet another individual telling them what they should be doing, so I began to speak indirectly to both of them. “I wonder how you might be able to resolve this? Wife, how could you deal with this so you could have the conversation you need without alienating your husband. Husband, what could you do that would take care of your need for some peace, and at the same time talk with your wife, who you care so much about? Both of you, what could you begin to do together that might be fun? Who would be the first to notice when things had started to improve? Looking back after you have solved this dilemma, what would you think? It would be so satisfying to both of you if you could ... make a beginning as soon as you return home.”

By speaking indirectly, not directing them, they were able to explore, together, how they could begin. This was all that was needed to get them back on track –

back in communication. But it was not information – they had plenty of that – it was re-opening them to solving this together – a coordination – which helped. By being indirect, there was the possibility of them responding. Directly ordering them to do something would have prevented this possibility.

Anyone with teenage children has ample experience of the ineffectiveness of issuing orders. Direct communications such as “Clean up your room NOW!” or “Go to your room and don’t come out until you have finished all your homework!” are likely to be greeted with a sneer or a response such as “You can’t make me!”. When attempting to get a younger child to eat their greens, attempting to force the food on the child is usually totally ineffective, since even if we manage to get the food down the throat of the increasingly rebellious child, there is no guarantee that it will stay there.

Concerns about how to speak to children and parental frustration from failed attempts to communicate with their children stem from a position of parental power, righteousness and force. This is the cause of the problem! When a parent begins to be less directive and more indirect, the mood changes. If the child is invited rather than told, they can refuse without anyone losing their dignity, and the future relationship remains in

place. We parents are usually the ones who struggle with this issue. “Just because what I’m doing isn’t working, why should I do something different. I’m right. I’m the parent after all!” These positions cause and perpetuate conflict and prevent even the possibility of effective communication.

Indirect Communication Forms.

The Sufis remind us that sometimes we must speak to the window so the door may hear. Indirect communication styles can sometimes help where a more direct approach can’t. My colleague Jeffrey Zeig PhD claims in Zeig’s first law that “The degree of indirection is directly proportional to the degree of anticipated difficulty.”

If a client arrives and informs us that 15 of their friends have previously been helped by us, and they are expecting to be the 16th, then we hardly need be indirect. Some straight talking is likely to be what is required. If a client arrives, and informs us that they have been to 15 therapists previously, none of whom were any damn use, and they are not expecting us to do any better, then it’s time to get indirect.

If a client could respond to direct suggestion such as “Do this”, “Don’t do that”, then they would most likely have got over their problem and not be seeking therapeutic help. Many of us don’t like being TOLD what to do, and find ourselves automatically responding with a polar reaction of “Don’t tell ME what to do!” It is with this human tendency in mind that we find the use of indirect forms of communication to have an important place in therapy.

We all use these indirect forms of communication from time to time, and as you read what follows, it could be instructive to recognise some of the ways you are already using so that you can be more effective in using these forms of communication and enhance their effectiveness.

There are a number of indirect communication forms which can be useful here, and I will mention only four – softening directives, presuppositional links, creating alternatives, and saying nothing. Later we will explore the use of stories as therapeutic metaphors as even more indirect communications.

Softening Directives.

When someone comes with a problem, it is not helpful for us to say “Don’t do that, do this” or “Don’t do it that way, do it this way” or “Instead of not doing it, just do it”. While that may be the message the client needs to hear, simply saying that is most unlikely to create the desired result.

It can be more useful to soften the message with a gentle, permissive, open ended invitation such as “Perhaps you could ...” or “I wonder if you might ...” or “How will you decide when you are ready to ...” and then follow with the suggestion. It can be even more helpful if the two components of the message are separated by a pause, which adds dramatic impetus.

The communications in the above paragraph might then translate into: “I wonder when you will be ready to [pause] not do that, and how you will feel when you [pause] do this instead”, or “How would it be for you if you were to [pause] not do it that way, and who would be the first to notice when you do [pause] do it this way” or “You don’t need to know when you’ll be ready to [pause] just do it.”

Each of the above examples contain the original suggestion, but instead of them being heard as a command, to

be obeyed or resisted, they can be heard as invitations to be taken up, or not, and if the taking up of the suggestions is in the direction desired by the client, they are very likely to follow along.

Formula: Permissive invitation ... [pause] ... directive.

E.g. You could ... [pause] ... go into hypnosis.

You might enjoy ... [pause] ... letting your eyes close.

Perhaps you are already beginning to ... [pause] ... let your mind drift.

I wonder how soon you’ll notice ... [pause] ... your comfort is increasing.

Presuppositional Links.

These forms of communication are variations on “While you’re on your feet, would you put the cat out” or “Since you are going down the street, could you get a loaf of bread?”. If we examine the relationship of the two components of those statements, there is no logic in the linkage, but the fact that the first utterance is un-

deniable – “You are on your feet” or “You are going down the street” – adds to the credibility of what follows “Would you put the cat out” or “Could you get a loaf of bread”. This juxtaposition of phrases doesn’t guarantee that the cat will be put out or that the bread will be bought, but it makes that result more likely, and in a mood of cooperation.

“Tell me about your problem” can translate into “Since you are here, you could tell me about the problem”.

“What’s the solution for your present problem?” could become “Because you want to solve this dilemma, it will be interesting for you to find ways of recognising those solutions”.

“Now that you have arrived, what could we speak about that would be helpful to you?” or “As you are beginning to speak about your trouble, I wonder what you can discover that will be useful to you?” can be so helpful to ease the conversation into a beginning and overcome any initial reticence. As the session progresses, it can be helpful to ask “We have been talking about your situation for a while now, and you might be interested to reflect on what is already becoming clearer to you.” In accessing resources and directions for a couple we might inquire “You have been together now for ... years. What is it about your relationship that has been most impor-

tant to you?”. This inquiry shifts the direction and intensity away from a circular discussion about any problems and towards actively searching for useful, relevant, practical solutions. I want to emphasise that asking this kind of question has the potential to change the outcome.

Formula: Because [something undeniable] is happening ... then ... [something desirable] can happen.

E.g. Since you’re on your feet, could you put the cat out.

Because you’re here, you can go into hypnosis.

While you’re here, you can learn what you need.

As we’re talking, you can already begin to relax.

Creating Alternatives.

If we were to ask a meat eater to a vegetarian smorgasbord lunch, with more than a hundred choices, few would ask “Where’s the meat”.

Telling a client to stop smoking, lose weight, exercise more, relax, be calm, stop being afraid of spiders or

speaking in public will only escalate fear and worry which is likely to be present anyhow. There is another way of offering the same ideas.

The generic form is “Will you get over your problem quickly, slowly, suddenly, intermittently at first?”, “Will you notice the changes before they happen, as they are happening, after they have happened, or will it take someone else to notice that you don’t have that problem any more? Will it go without anyone noticing?” “Will you lose the problem at home first, or at work, or will it just go from all areas of your experience?” When a client hears such a range of alternatives – all of which are in the direction of solutions, none of which allow for the continuation of the problem – they are more likely to take up some of the momentum which is generated by such a plethora of options. Any uncertainty remaining is about which alternative will be acted on, and since each is in the direction of the client’s solution, any option will be useful.

A wide variety of alternatives can be generated for the client. This includes time [now or later], speed [slowly or quickly], awareness [notice or not, by client or other], emotional response [surprise, relief or joy], location [here or there] and consistency [constant or inter-

mittent at first] to name some. The delight for the therapist also adds to the pleasure and satisfaction of all.

Formula: Think of a solution a client has identified and suggest that this can happen in as many different ways as you can invent.

E.g. Would you prefer to go into trance before you close your eyes or after?

Will you solve your problem as we’re talking, after you leave here, in your dreams, just as you wake in the morning, watching television, or won’t you even need to notice you’ve solved that problem. Perhaps it will just fade from your awareness.

Will your body relax so your eyes can close, will your eyelids relax so your muscles can let go of their tension, will they both change together, or will you experience something quite different as you go into hypnosis?

Saying Nothing.

Sometimes it is helpful to provide some padding, some free time, so the client has an opportunity to let the learning “set”. Silence can be screamingly loud at times so if we can make sounds which are sufficient to hold

the client's attention and prevent them from intellectualising away a suggestion we may want them to sit with, we can make some "white noise" – some sounds to allow that process to proceed.

This is achieved by speaking specifically without specifying what is specifically spoken about. When we speak seriously without specifying the topic, the meaning is left unclear. The client is likely to try to make sense of the message. Mild confusion is created, keeping the client's attention as they look for any hint of resolution or meaning.

Politicians learn this style of speaking and hope to appear sincere, keep the listener's attention, and yet avoid saying anything that might offend anyone. Speaking without saying anything substantial was highly developed by Humphrey in the TV series "Yes Minister".

Formula: Identify an object and speak about that object without identifying what the object is. It can be a shoe, a pen, a mat – anything real or imagined.

A person can sit, and as they begin to think, they can continue to notice many experiences. They can feel various sensations, see a number of things, have what-

ever thoughts they are having at that time, and as their experience continues to evolve, any number of possibilities can happen. They can continue to do what they are doing, they can find themselves preparing to do something totally different, or there may be some combination of these. Thoughts can come and go, ideas can be there and then not, attention can vary from this point to that, from this time to the other, from any to any other without there having to be any particular awareness of what it is that is outside of their awareness.

These indirect communication forms can be very powerful in assisting clients to move in a direction they want to move in, and extremely powerless if they are used in an attempt to manipulate a client in a direction we think would be to their or our benefit.

When I try these ways of speaking to attempt to manipulate my teenage children to tidy their room, or do their homework, or anything I think they should, their characteristic reply is. "I can't be bothered" or even "No". Because the suggestions follow my agenda, they produce very little useful movement.

When this approach is offered to someone who is keen to achieve an outcome but is hesitant, unsure of how to begin or is self doubting, they are likely to move to-

wards that outcome – but it is not the therapist's outcome, it's the client's.

As you are attending to your experience in any way that you are, you could ... continue doing that. Now that you are doing that, there may be some changes already happening. It's so unimportant that you ... notice the stillness ... first, or some flattening out of your facial muscles. Perhaps it will be the changes in the colour or temperature of your skin that will be most noticeable. It may be that the deepening and slowing of your breathing, and even a tendency for you to... close your eyes ..., if they haven't already, can assist you to ... learn something useful here.

As you are continuing with your experience, you could ... become even more absorbed ... in whatever you are already experiencing, and as a part of that, there may be something pleasant or useful that you could ... notice, ... memorise, and then when you are ready, and only when you are ready, you could ... bring that experience back with you as you ... reorient yourself to your external experience.

How Could We Begin?

When we assume that hypnosis can happen when a client is invited to focus on something and then become absorbed in it, we are faced with the dilemma of identifying what will be useful for a client to focus on. Is it going to be more helpful to ask a client to look at a point, or close their eyes and remember some pleasant experience, or roll their eyes? Would it be more helpful to offer a conversational approach? Would inviting an experience of increasing focus be preferable, or would letting thought meander be better? Should we be direct, or indirect?

These questions appear once we let go of a desire to have one standard script, which will only fit where it touches, and move towards designing a process for each individual client.

If we invite a client to continue doing what they are already doing, that experience will feel natural and unintrusive, since they are already doing that, and will provide a fitting and respectful place to begin.

To attempt this, we will need ways of observing the client, “the direction the horse is already traveling”. Following Erickson’s lead, Zeig, Yapko and Lankton have outlined several polarities of observing phenomena that help to be more specific about this beginning.

These polarities are:

- | | |
|-----------------------------|---------------------|
| 1. Internal or External | attention direction |
| 2. Focused or Diffuse | attention style |
| 3. Linear or Mosaic | thinking patterns |
| 4. Compliant or Independent | behaviour |
| 5. Past, Present or Future | time orientation |

1. Internal or External Attention Direction

If a client is attending to their experience with a predominantly internal orientation, they might be looking

off into the distance or be absorbed in their own experience as in a day dream.

Hypnosis could begin with the invitation *“As you look off into the distance or let your thoughts go anywhere they do, and as you allow yourself to become more absorbed in that experience ...”*.

If a client is attending with a predominantly external orientation, they will be looking at objects in the room, or at the therapist.

Hypnosis could begin with the invitation *“Could you continue looking at that object, at me, or whatever you happen to be looking at, and as that continues ...?”*.

2. Focused or Diffuse Attention Style

If a client is focused, we can observe them concentrating their attention on some external object or some internal experience which will look very different from a client whose attention is wandering.

If a client is focused internally, hypnosis could begin by inviting them to *“really focus on that thought, that ex-*

perience, and as you do ...”, but if we observe that the focus is external, we could offer *“You could look at that bottom left-hand corner of the picture ...”*. A client who is attending with an externally diffuse style can be invited to *“let your eyes wander around the room until they find some point, and then ...”*, but if the observed style is internal and diffuse offering *“You can let your thoughts wander in any random way that they are...”*.

3. Linear or Mosaic Thinking Patterns

Some clients give us a story with a sequential series of events which are logically linked in time and place – this happened, then that, then the next, and so on. When we invite such a client into hypnosis, we will want to be linear in our speaking. *“You can look at that point, then you can let your body relax, then you can close your eyes, then you can become more absorbed in the experience.”*

Others will give an account which is a piece here, a piece there, a piece from another place. They begin to build a picture like creating a mosaic rather than a line drawing. It is like someone doing a tapestry who might fill in all the red, then the orange, then the green, etc.. The tapestry takes shape in blocks or areas which only

become linked as the process continues. With a client like this, we might say *“Perhaps you could let your legs get comfortable so your eyes can rest where they do. And as your arms become more relaxed, your thoughts can begin to wander. The tendency for your eyes to close can somehow add to your increasing comfort which can spread in any way that it is already beginning”*.

4. Compliant or Independent Behaviour

If a client says *“Thank you for seeing me, and I’m looking forward to your helping me”* they are letting us know that they are ready and willing to go along with us, so we can begin hypnosis *“It would please me if you would close your eyes, and I’d be glad if you let your body get comfortable so you can become increasingly absorbed in the experience”*.

Another client might let us know that they don’t like to be told what to do. *“How do you propose to hypnotise me?”* invites us to begin *“As you begin to pay attention to something of **your** choice, you could take **your own** time to allow this experience to evolve in any way that feels right to **you**. It’s not what I say that’s*

*important. It’s the way that **you** can make your own learnings that will be much more important to **you**.”*

5. Past, Present or Future Time Orientation

When someone is stuck in the past, ruminating about their memories as they tell us about their situation, we ask them as they go into hypnosis, to go to some pleasing experience in the past, and by revisiting that experience, bring some pleasant emotions into their present situation.

A typical teenager will speak only about their present circumstance, with no recognition of any past learning or future possibilities. It will fit their experience if we begin hypnosis by inviting them to notice whatever might be happening at any present moment, and then ask *“What’s happening now?”*

If a client is constantly talking about the future, their fears, worries, and anxieties, how things will turn out [usually badly] we can offer the idea *“As you go into hypnosis, perhaps you could begin to wonder how you might begin to solve this dilemma. And as the experience progresses, you could be increasingly curious to*

discover just how helpful this can be in different ways.”

When we join a client’s attention direction, style, behaviour and time orientation, we are speaking their language, matching their experience. As we shift our mode towards theirs, it can make it easier for the client to go along with the process, which is more fully theirs, and then become absorbed in an experience which is respectful and natural since we are attending to their individual manner of experiencing.

Incorporation

Hypnosis used to be thought of as a rather delicate state, something to be protected, and so should happen in a quiet, climate controlled environment, with soft lighting and peaceful music playing in the background. We now see that hypnosis is not like an anaesthetic, and more like an experience of focused attention, familiar to all of us in our everyday life, and so we can look to see how we can facilitate attentiveness and absorption rather than avoiding any minute potential distraction.

While some find focusing on reading, learning, etc is easier in a silent environment, others don't mind or even prefer some background activity. My son does his homework better while watching TV. Also the quieter the environment, the louder *any* noise seems, so it can

be useful to have everyday experiences including potential disruptions and noises be part of the hypnotic experiences. If someone comes in from a hot day into an air-conditioned office, enjoys the coolness and has to return to the heat, how long does the coolness last. My preference is to connect the hypnotic experience to everyday life as much as possible, and for most of us, this includes noise, concerns and a multitude of potential distractions.

Incorporation is a wonderful expression of the underlying principles of the Ericksonian approach – accept what the client brings and use it – and extends the acceptance and utilisation to include potential external distractions, client and therapist concerns.

It is a process which can achieve an acceptance and inclusion of external sounds, and concerns of the client and therapist. Instead of being disruptive, they can become part of the hypnotic experience. When more potential disruptions are included as legitimate components of the hypnotic session, the experience becomes fuller and rounder, making the translation and transportation of the experience with us into their own living smoother and more real. This can keep the therapist alert, and so add to their attentiveness and delight.

Incorporating externals:

Those who have watched Joseph Barber demonstrating hypnosis will recognise his invitation. “Every sound that you can hear every sensation you can feel every feeling you can notice, can become more and more a part of your comfort and well being, with nothing to worry and nothing to bother, as this experience is continuing.”

More specifically we can offer a direct suggestion that the louder the external sound becomes, the more absorbed the client can be in their experience of hypnosis. This can be helpful when we know something is disturbing, but risks introducing a disturbance by bringing a client’s attention to it when they may not have noticed it. We can be more indirect and playful by alluding to an experience [phone ringing, plane overhead] with comments such as “This experience can ring true to you”, “Your learning can go to a higher plain [plane].”

Incorporating client concerns:

Clients have concerns which can distract them from their experience. They might be thinking “Am I doing the right thing?” or “How should I be behaving?” or “Is this hypnosis?”. We can reassure individuals if these concerns are expressed or we can pre-empt them by suggesting “Feel free to do what you need to do at any time, recognising that you will at any moment be doing exactly what you need to do to achieve what is useful to you.” or “Hypnosis is different for different individuals. It’s more important for you to have the experience you are having so you can learn what you need to learn, so you can be unconcerned”.

Should a client say they don’t understand, we can say “Your understandings are yours, and you can reach them in your own time, at your own pace, in any way that feels right to you.”

If a client expresses fear about losing control, we can offer “I’m talking, but this is your experience, and you can respond in any way that is helpful to you. I can suggest that you close your eyes, but you can let your eyes close when you are ready.”

If someone is worried they might not remember the content of the session and so lose any benefit, we can

suggest “You can be unconcerned knowing that you will only recall what is relevant to you and your learning.”

Concerns about going deeply enough can be addressed with “You won’t go any deeper than you need to.”

Incorporating therapist’s concerns:

As therapists we find ourselves getting stuck, having doubts, feeling uncertain. We could just suffer, stutter, and hope; we could say “I’m stuck”, or “I’m uncertain” etc, and while this may provide some personal respite, it is hardly helpful to the client. It can, however, be extremely helpful if we express out concern, externalise it, but in a way that can aid the process rather than hinder it.

If we are thinking “What do I say next? “ we can say “I don’t need to talk all the time.”

If we are stuck on what to do next, we can offer “What I do is much less important than the way you can use this experience for your own benefit and betterment.”

If we feel uncertain about how we are doing, articulating “You don’t need to attend to me except [accept] in

ways that can be useful to you.” or “This is your experience, not mine; is happening for you, not for me; so you can look forward to discovering how you can make your own good use of this experience.” can be a relief to us AND benefit the client.

Incorporation is not meant to be a disclaimer for the therapist to abrogate responsibility for what they say and do, but rather to take care of the mood, so a potential block is averted, doubts are averted, and the hypnotic process can proceed towards the client’s goal with mutual satisfaction.

Softening Rigidities

“In the beginner’s mind there are many possibilities; in the expert’s mind there are few” [Suzuki 1970].

When we are expert at what works in our lives, we would hardly want to change anything, but when we are expert about the problem areas of our experience, as long as we are experts, we preclude any possibility of learning since we already have the answer.

In the process of learning, recognising that we don’t know is the first step, but the emotion of uncertainty that must accompany this realisation can inhibit learning, and sometimes even lead to avoidance, and so the problem persists. It is an expected aspect of any learning that some confusion will occur, and it can be a central part of our work to generate confusion to soften up any rigidity which may be keeping the problem stuck.

Someone’s first hypnotic experience is often described as confusing – hardly surprising when it is a new experience – and confusion can be recognised as a constitutive part of any hypnotic experience and includes anything which disrupts the client’s experience. It is used when a client’s cognitive processing is the problem, to disrupt a sequence of actions in a problem behaviour.

Just as nature abhors a vacuum, humans abhor confusion, and will do almost anything to resolve the feeling of being left incomplete – up in the air. Any suggestion which follows some confusion is more likely to be accepted as if after all that chaos, the client will take anything rather than the mess. Confusion can be an asset here in building up a dramatic tension which can be released with the offering of a useful suggestion.

Even though we may hate confusion, we are captured by it. Confusion takes and holds our attention, as a kind of compulsion, and anything that we can find to attract and hold our clients’ attention will be useful.

Naturally, confusion is to be avoided when a client is already confused.

Distraction

Any time we are distracted, confusion follows. If we are reading a book and the phone rings, we can return to the book and be confused about what page we were reading or what was happening in the story. We can be working with a client, and they say something unexpected, lose the plot, and have to somehow scramble back to some familiar place so we can continue, or we could ask “where were we?” but until we regain the plot, we are confused.

We can distract a client with a sudden change of subject. While a client is talking about their problem, the therapist might ask “did you have a problem parking?” and then continue with the conversation. If a client is absorbed in a rambling description of their experience, an unexpected interruption by the therapist can disrupt the rambling and be a relief to all.

Double negatives

The mental process of unravelling a series of negatives can create preoccupation so that while we are trying to count the pairs of negatives to see if they cancel each other out or not, the suggestion which follows is likely

to be subject to less scrutiny as the thought process is otherwise engaged.

When we say “You don’t need to prevent your eyes closing.”, there is a simpler message “Close your eyes”. Saying “It’s not necessary to be unaware that you are becoming more comfortable.” Invites awareness; “You don’t need to not notice that your mind isn’t noticing a lot of things.” Suggests noticing and “Who would insist on avoiding the experience of not finding a satisfying solution to their problem?” generates the allowing and finding of a solution.

Bounce off 2 pairs of opposites

In playing with this process and in a teaching setting, I like to picture a game, where there is a team on either side of a net, and the ball can be passed to players on the same team, on the same side of the net any number of times and then played over the net. Each team is a pair of opposites, and can play a match with any other team or pair of opposites.

Examples of such teams or pairs of opposites include tense / relaxed, now / later, aware / unaware / problem / solution, better / worse, know / not know.

The game can be extended to larger teams such as past / present [gift] / future and more than 2 teams.

Tense / relaxed + now / later

“You could be tense now and relaxed later, or you could later relax knowing the tension is gone. The relaxation of the tension can be an experience which now makes you relax, but later, when you look back, any tension you feel now, can be an indication to relate to your ability to relax in any situation *and with that knowledge, you really can ... let that relaxation happen*”

Aware / unaware + problem / solution

“As you become aware of the problem, you might notice you are unaware of the solution, and yet the awareness that you are unaware of the solution makes you more aware . That awareness can help to solve the problem, and as you become less aware of the problem the solution can come into your awareness without you needing to be aware of just how so *why not just let the solution arrive and enjoy it.*”

know / not know, past / present / future, better / worse

“Anyone can know that in the past they felt better, and that from that past which was then the present, they can not know that even though they are better, the future memory of what will then be the future past and was the past’s future can now be the present that the past gives as a gift that we can know is a gift and not know that it was a gift from the past, and so *it can be such a relief to simply let your mind drift and really learn that experience that will be so helpful to you*”

Misspeak

If we speak seriously and misspeak a word, the client can be distracted in wondering if we made a mistake, or did they mishear, and this diversion can be an interruption and create a moment of confusion and opportunity.

“It can be very pleasant to [mumble] let your comfort increase.”

“It can be verint plesnant to let your comfort increase.”

“And you know why ... I’m waiting for”

“That’s a lovely watch the way your hand can begin to lift.”

“I don’t know Harold [how I’ll] help you.”

Rhymes

“This time is fine for you to go into hypnosis.”

“Your eyes can close when your hand touches your nose.”

“The comfort you feel can become really real.”

Bringing some confusion into a session can be so helpful in adding impetus to what follows while also lightening the mood. It can feel like being gently and pleasantly tickled. And like tickling, too much can be painful and lead to lashing out, so it is important to not overdo it. Just the right amount of seasoning can enhance the flavor of a meal.

Example:

*As you are attending to your experience in any way that you are, you could ... continue doing that. You may be aware that you are aware of your experience, or you may be aware that you are unaware of some of your experience. Whether you are more aware of your awareness or more unaware of just where your awareness is, you can allow yourself to ... **do what’s best for your learning.***

Now that you are doing that, there may be some changes already happening. It’s so unimportant that you ... notice the stillness ... first, or some flattening out of your facial muscles. Perhaps it will be the changes in the colour or temperature of your skin that will be most noticeable. It may be that the deepening and slowing of your breathing, and even a tendency for you to... close your eyes ..., if they haven’t already, can assist you to ... learn something useful here.

As you are continuing with your experience, you could ... become even more absorbed ... in whatever you are already experiencing, and as a part of that, there may be something pleasant or useful that you could ... notice, ... memorise.

*It's not important to know that you are memorising the experience, because you can experience memorising an experience without needing to know that ... **you are memorising it.***

And you can remember remembering an experience or not need to remember that you have remembered it, so that when you are ready, and only when you are ready, you could ... bring that experience back with you as you ... reorient yourself to your external experience.

Early Learning

When we first begin to learn anything new, we have our own individual ways of beginning to make sense of that experience. If there is any initial struggle, it usually falls away, and before long we find ourselves making good use of the learning, with ease, and even pleasure, with no need to be burdened with the memory of any past difficulty we may have had. Milton Erickson used to say that the learning dropped into the unconscious, and we could say that it becomes an automatic learning, not requiring that we even recognise that we are using that learning, even though we are.

An early learning story is an indirect form of communication in which a client is invited to recall a childhood experience, or acknowledge that such an experience may have occurred, in which a relevant and desired experience was learnt. It can be useful in a general sense to seed the idea of learning itself, and so help to set up the mood of learning in the hypnotic experience.

Even if a client can't recall the memory of learning to walk, if they walked into the session, they are demonstrating that this skill has been learnt by them, and if they can't recall its learning, then there is a strong implication that there are many other skills that have been learnt without the need to recall the experience of learning them either.

It can be helpful, in choosing an early learning story, to ask about the client's likes. If they like walking, then it will be safe to speak about learning to walk. If they like swimming, then learning to swim will be relevant. Asking about likes avoids the pitfall of talking about learning to do something which has not been learnt, or which may be associated with a trauma. Mentioning learning to swim to someone who almost drowned will be unhelpful, and learning to ride a bike won't connect with anyone who never learnt that skill.

So if we were to

Ask the client “what’s the problem?”

Ask ourself “what experience is missing?”

Ask the client “what do you like?”

We can then

Generate an early learning story

We can use examples from when you first learnt to crawl, walk, write your name, numbers and letters, ride a bike, swim, etc. derived from the client’s likes, in which the desired resource was undeniably learnt by this particular client.

If a client wanted to overcome anxiety in a performance, they might distinguish that the missing experience as confidence in the presence of a potentially critical audience. If the client tells us they like reading, we can safely and usefully speak about the experience of learning letters and numbers. So we might say “When you wanted to learn to write your name, you had to get used to making some mistakes and correcting them. When a stranger came into the room, it may have felt impossible to write your name even though you had just written it by yourself. It didn’t take long before you

were feeling very confident about your ability to write your name, no matter who was there, no matter where you were, no matter what the circumstances, because you realised that that ability was within you, and had nothing to do with anything outside yourself. It felt so good to discover that, and can feel good now to use that discovery in any way you need to or want to.”

If a client wanted to go to the supermarket without panicking, they might identify the missing experience as a sense of security in previously distressful circumstances. If they enjoy going for walks in the country, we can safely and usefully speak about walking as a relevant skill which has already been learnt. We might say “When you first learnt to walk, you probably did some falling over. Falling over is an important part of learning to walk for any individual. How did you get past that falling? How did you get past the fear of falling? Did you just forget about it? Did you persist until it became easier? Then you were able to feel secure within yourself knowing even if you did fall occasionally, you could cope with that, you could handle that with a sense of achievement and accomplishment because everyone has their own ways of overcoming difficulties.”

The use of an early learning story is yet another way that we can work respectfully and coherently with clients, to speak to their competences, since they have already learnt many skills, and evoke the mood of expectancy which can be so delightful as a way of generating change which is fitting and relevant to the individual client.

By asking about their likes, we are inviting more of them into the therapeutic conversation, and the more of the client is present and available for conversation, the more resources we have access to, and the smoother the learning to embody the solution can be.

*As you are attending to your experience in any way that you are, you could ... continue doing that. You may be aware that you are aware of your experience, or you may be aware that you are unaware of some of your experience. Whether you are more aware of your awareness or more unaware of just where your awareness is, you can allow yourself to ... **do what's best for your learning.***

When you first learnt to do something that you now enjoy, it may have been difficult or burdensome, but now that you have learnt it, it is so much a part of you, that any difficulty that you may have had can so easily and naturally be left in the past where it be-

longs, and you no longer need to have any concern about the ease and value of that learning. All that's important now it to enjoy the experience.

Now that you are doing that, there may be some changes already happening. It's so unimportant that you ... notice the stillness ... first, or some flattening out of your facial muscles. Perhaps it will be the changes in the colour or temperature of your skin that will be most noticeable. It may be that the deepening and slowing of your breathing, and even a tendency for you to... close your eyes ..., if they haven't already, can assist you to ... learn something useful here.

As you are continuing with your experience, you could ... become even more absorbed ... in whatever you are already experiencing, and as a part of that, there may be something pleasant or useful that you could ... notice, ... memorise.

*It's not important to know that you are memorising the experience, because you can experience memorising an experience without needing to know that ... **you are memorising it.***

And you can remember remembering an experience or not need to remember that you have remembered it, so that when you are ready, and only when you are

ready, you could ... bring that experience back with you as you ... reorient yourself to your external experience.

Speaking of Stories ...

Scientists wanted to use a supercomputer to find the meaning of existence. They gathered data from every possible source – historical, biological, anthropological – having explored every possible avenue. They fed in all this accumulated data, taking many days and nights, sometimes wondering if their task would ever be finished. Finally, when the last bite of information was entered, they set the computations going, and left the mega machine to do its work. After what seemed like an eternity, the computer completed its superhuman task, and printed out the answer to the problem that had been alluding philosophers from the earliest times. The words appeared on the printout – “That reminds me of a story.”

Stories are an ancient and deep part of humanity. Human beings are deeply embedded in stories and archaic explanations of our place in life and what it all means to humans to be human. Our individual and social identities are constructed and perpetuated in the stories we tell about ourselves and live individually and socially. We are our stories and our stories are us. They give meaning and purpose to our lives.

Indigenous cultures are everywhere in their death throes and can only have the chance to rise out of their own ashes like a phoenix by breathing new life into the ashes. By giving voice to the indigenous stories and sharing them with the young people, their culture can be reconstructed.

Choices

The Swami Beyondanada writes in Beyondanews -- December, 2002 “One of my favourite stories recently is about a Native American grandfather talking to his young grandson. He tells the boy he has two wolves inside of him struggling with each other. The first is the wolf of peace, love and kindness. The other wolf is fear, greed and hatred. “Which wolf will win, grandfa-

ther?" asks the young boy. "Whichever one you feed," is the reply."

This is very different from simply saying that we have a choice about our future. The message is there, but when we read what we read, we make our own conclusion, and don't feel instructed or preached to about what we should do.

At the same time that stories are so crucial to us humans, and as they shape our very being, they are also "just stories". In the presence of a story, we take and leave what we want. We can relate the story to our own individual circumstances, perhaps in a compelling way, but there is nothing forced or imposed. It is this powerful combination of a compelling invitation to relate to the story with an openness to take up the invitation or not, that provides such a relevance to the hypnotic experience in particular and learning and experience in general.

Stories are also entrancing by their nature. From childhood we have been spellbound by stories of magic and heroic adventure.

Monsters

A long time ago, before humans walked on the earth, all the animals lived in harmony with one exception. Nose Monster was causing increasing fear because he would walk up to an animal and stick his hard spiky proboscis into their soft underbelly and suck out all their blood, leaving a shriveled up bag of skin.

Desperate to find a way of protecting themselves from this monster, the other animals called a meeting and coyote was elected to take charge because he was so cunning and clever. Coyote ordered the animals to go into the forest and bring back garlands of prickly bushes and spiky branches, He ordered other animals to cook up two huge vats of blood soup, which he placed, steaming hot in the meeting hut. He organised the animals to decorate the doorway with the garlands of prickles and the spiky branches, and then went looking for Nose Monster.

Before long coyote found Nose Monster who was looking wide eyed with hunger and wanted to get close to coyote. Coyote told him about the two huge vats of blood soup and offered to escort Nose Monster to the hut. Nose monster was very keen.

In the hut, Nose Monster rushed up to the first vat of steaming blood soup and greedily stuck his spiky proboscis into noisily sucked it dry. He looked pleased, and was beginning to feel full, but the other vat was too tempting so he stuck his proboscis into that vat and noisily sucked up every last drop of blood soup.

He was so full he could hardly move. He was so bloated, that he could hardly stand. But he was Nose Monster and so, greedy for blood as ever, he turned towards Coyote. "Now it's your turn" he said, lunging clumsily at Coyote who deftly stepped aside so that Nose Monster rolled onto his round bloated stomach.

He struggled to get to his feet and lunged at Coyote again, and again Coyote easily stepped aside. Each time Nose Monster lunged, Coyote moved closer and closer to the doorway of the meeting hut, until, just as Coyote stepped into the doorway, and Nose Monster feared that his next blood meal might get away, he made a super huge attempt to get Coyote and his body, hugely bloated with all the blood soup, fell onto the prickles and spikes lining the doorway, and exploded into a million pieces.

And that is how the mosquito came into existence.

Is this story about overcoming fear, dealing with problems before they become large, starting small with any endeavor, finding the right strategy, working together, being realistic, giving up greed, lightening up? It might be about any of these, or a combination, or something totally different. The story is a story, and each individual has the opportunity to remind themselves of anything that is relevant to their individual situation. The speaker might even find out what the story was about after the listener responds.

Creating Possibilities - Indirectly

An adolescent may have been inspired by Superman, Mighty Mouse, or Grace Kelly.

An adult might be moved by modern heroes like Nelson Mandela, Mahatma Gandhi, Stoltenberg or ancient heroes like the Buddha, Moses, Jesus, Mohammad, Lao Tzu. Reading stories about these people creates the possibility for a listener. Something which may have seemed impossible becomes possible. If they did it, it must be possible. Perhaps I can do it also. When we hear the stories of these people, we may change the direction of our own lives. When Mandela spoke the importance to him of his small patch of garden in prison,

anyone listening may spend more time in their garden and feel more gratitude as well.

Leaders are strong leaders by creating strong stories to make sense to their followers. Unfortunately not all stories are helpful, and some of the worst atrocities have happened from atrocious stories about ethnic differences whether they claim superiority or inferiority.

The Experts - A Sufi Tale

A man thought to be dead was taken by his friends for burial. When the coffin was about to be lowered into the grave, the man suddenly came to life and began to bang on the lid of the coffin.

The coffin was opened; the man sat up. "What are you doing?" he said to the assembled crowd. "I am alive. I am not dead."

His words were met with stunned silence. Finally one of the mourners said, "Friend, both the doctors and the priests have certified that you are dead. The experts can hardly be wrong."

So the lid was screwed on again and he was duly buried.

Wisdom?

The American investment banker was at the pier of a small coastal Mexican village when a small boat with just one fisherman docked. Inside the small boat were several large yellow fin tuna. The American complimented the Mexican on the quality of his fish and asked how long it took to catch them.

The Mexican replied, only a little while. The American then asked why didn't he stay out longer and catch more fish?

The Mexican said he had enough to support his family's immediate needs. The American then asked, "but what do you do with the rest of your time?"

The Mexican fisherman said, "I sleep late, fish a little, play with my children, take siesta with my wife, Maria, stroll into the village each evening where I sip wine and play guitar with my amigos, I have a full and busy life."

The American scoffed, "I am a Harvard MBA and could help you. You should spend more time fishing and with the proceeds, buy a bigger boat with the proceeds from the bigger boat you could buy several boats, eventually you would have a fleet of fishing

boats. Instead of selling your catch to a middleman you would sell directly to the processor, eventually opening your own cannery. You would control the product, processing and distribution. You would need to leave this small coastal fishing village and move to Mexico City, then LA and eventually NYC where you will run your expanding enterprise."

The Mexican fisherman asked, "But, how long will this all take?"

To which the American replied, "15-20 years."

"But what then?"

The American laughed and said that's the best part. "When the time is right you would announce an IPO and sell your company stock to the public and become very rich, you would make millions."

"Millions.. Then what?"

The American said, "Then you would retire. Move to a small coastal fishing village where you would sleep late, fish a little, play with your kids, take siesta with your wife, stroll to the village in the evenings where you could sip wine and play your guitar with your amigos."

General steps in the construction of metaphors

Decide what resource is missing for the client

Look at their likes to find areas where this resource is being used already

Invent a story about finding that resource.

Clinical Metaphor

"I had a client not unlike yourself who ... [describe client's problem] ... and [describe solution]"

Life Metaphor

look in the client's hobbies or competences to find resource. Construct and speak the metaphor which includes the resource from the hobbies or competences.

Example:

*As you are attending to your experience in any way that you are, you could ... continue doing that. You may be aware that you are aware of your experience, or you may be aware that you are unaware of some of your experience. Whether you are more aware of your awareness or more unaware of just where your awareness is, you can allow yourself to ... **do what's best for your learning.***

Now that you are doing that, there may be some changes already happening. It's so unimportant that you ... notice the stillness ... first, or some flattening out of your facial muscles. Perhaps it will be the changes in the colour or temperature of your skin that will be most noticeable. It may be that the deepening and slowing of your breathing, and even a tendency for you to... close your eyes ..., if they haven't already, can assist you to ... learn something useful here.

When you first learnt to do something that you now enjoy, it may have been difficult or burdensome, but now that you have learnt it, it is so much a part of you, that any difficulty that you may have had can so easily and naturally be left in the past where it belongs, and you no longer need to have any concern

about the ease and value of that learning. All that's important now is to enjoy the experience.

A client came to see me who was not unlike yourself. He had this problem, and in spite of his best attempts, he felt stuck, and unable to resolve it. After he experienced a pleasing and useful hypnotic session, he was delighted to discover that he had many more resources to draw on than he had previously recognised, and he was able to begin to make the adjustments that lead to the resolution of his problem, with a sense of relief and satisfaction.

A man told me that he was having trouble getting some of his vegetables to grow. Peas were fine; tomatoes did well; but the lettuce ... such a disappointment. He discovered that the lettuce he had planted were from the wrong climate, and when he planted a variety that suited his climate, the new lettuces were so lovely, and there was enough to share with neighbors. They could hardly believe the difference finding the right kind of lettuce made.

As you are continuing with your experience, you could ... become even more absorbed ... in whatever you are already experiencing, and as a part of that, there may

be something pleasant or useful that you could ... notice, ... memorise.

It's not important to know that you are memorising the experience, because you can experience memorising an experience without needing to know that ...
you are memorising it.

And you can remember remembering an experience or not need to remember that you have remembered it, so that when you are ready, and only when you are ready, you could ... bring that experience back with you as you ... reorient yourself to your external experience.

Constructing a session

1. What do you like? What do you like about that?
2. What's the problem? What's the problem about that?
3. What's missing as a resource?
4. Invitation using the missing resource.
5. Generate an early learning story from "likes" and where the missing resource was learnt.
6. Offer metaphors in which the missing missing resource is found.

clinical metaphor

"I had a client who [problem] and learnt to [missing resource]

life metaphor

A story [not clinical] about the client, the therapist, life, traditions when [problem] led to missing resource.

7. Suggest to the client that they find the missing resource in their "likes".
8. Ask the client to learn this missing resource.
9. Ask the client to connect this missing resource to the problem experience.
10. Invite the client to come out of hypnosis.
11. Ask the client "What's different now?", looking for and commenting on any signs of the missing resource being expressed already.

The experience of hypnosis

Introduction

We have all had the experience of looking out the window, forgetting where we are, letting the time go by without a sense of its passing. We can all look at a school photo or a photo of a long gone holiday and find ourselves transported back to the classroom or holiday experience. Memories bring experiences with them, and we are all familiar with this happening to us without need to comment. People who wear earrings, glasses, shoes, have had years of experience of not noticing them even though the sensations of the earrings, glasses, shoes may have been so intrusive when they first appeared that they might have wondered if they could continue with them, and yet now it's as if they aren't there.

All of the classical hypnotic phenomena, including disconnection, time distortion, etc., can be seen as extensions of such everyday experiences. Disconnection and connection are extensions of not noticing and noticing; time distortion is an extension of our experience of time flying when we're having fun and drags when we're bored. Connecting these phenomena with everyday happenings helps to remove their weirdness, and makes them more available to any client for their learning experiences.

Deciding on which phenomenon to use can be informed by the kind of problem presented and the way an individual client speaks of their dilemma. If a client wants help with pain, then anaesthesia might seem most suited, although if the particular client demonstrates a flexibility in experiencing time, or forgets appointments, then time distortion or amnesia will be relevant, since they are already being demonstrated by the client as something they are skilled at.

By listening for, and using whichever phenomenon any client demonstrates facility with, we can further connect and individualise the process to best fit each individual client.

When we ask the client “What’s missing?”, we can have a closer appreciation of which hypnotic experience might best fit the client’s needs. We can ask ourselves about what phenomenon are they demonstrating which is part of their problem, or which might be more useful as part of their solution? We can further connect the client with the **process** of their individual solution learning experience.

We could say that “What’s missing?” gives a destination and direction to find a solution, while “What phenomenon?” provides the vehicle which will get us there.

What follows are some notes, reflections and hints that could assist you, the reader, to explore your own observations, and observe more closely whatever is happening in each individual client.

Connection / disconnection

As anyone focuses on or connects to one part of their experience bringing it into the foreground, they defocus or disconnect from everything else as that becomes more peripheral, more background. As anyone becomes more disconnected, focused away from something, there is the opportunity to connect with or focus on something else.

Disconnecting is the prime hypnotic phenomenon and is expected in every hypnotic situation. We can anticipate that a client will report some sort of altered perception – a separation from time, awareness of their body, our voice, time passing

We assist someone going into hypnosis by offering a disconnecting experience – *“You can sit in the chair, and even though you can hear what I’m saying, you*

don’t need to listen to me, [hearing, not listening] or perhaps you could listen to the words I’m speaking without needing to give any particular attention to their meaning. [listening, not giving meaning]. As this experience is continuing, your breathing can change, but you don’t need to pay attention to that [change, not noticing] , just as your physical comfort can continually increase without any effort on your part. [comfort, not effort]”. The repetitive splitting of experience produces the disconnection or dissociation from a person’s usual way of attending, and this alteration is a change point, an opportunity to shift their experience, and learn an alternative experience – one they prefer.

Disconnecting will be indicated clinically if the client’s problem is overly connecting. If there is some aspect of a client’s problem which acts like a hook, and snares them into an unwanted experience, we will want to unhook them from this potential snare. If a client experiences panic, or any other overwhelming emotion in a specific situation, it will be helpful to create some distance from the experience of that overwhelming emotion so they can have an opportunity to deal with their situation and create and learn a different and more desirable experience.

Disconnecting is a process of sorting and repetitively distinguishing one set of experiences from another set - aware from unaware, thoughts from feelings, ideas from actions, past from present or future.

In situations where there is an unhelpful linking [connecting], breaking that unwanted link [disconnecting] when it is limiting and unwanted. “Every time I think of chocolate, I just have to eat some” can become “I can think of chocolate, and I don’t have to eat any”. “Every time I recall the accident I become overwhelmed by fear” can become “I can recall the accident and feel peaceful”. “I always had problems sleeping in the past so I know I will have problems in the future” can evolve into “I may have had problems sleeping in the past, but I can sleep well now, and I will be able to sleep well into the future”. The disconnecting creates the break in the rigidly limiting experience and allows for a new and more beneficial experience to happen.

Any problem is a problem because of some response we have to the situation. We suffer pain because we don’t want it. We want to feel confident because we don’t like the experience of feeling unconfident. By removing or distancing the response to the situation, there is more opportunity to create, to move, to gener-

ate alternative experiences, and different actions if relevant.

“Your feet can settle comfortably on the floor, while your arms can become interestingly light” can allow a separation of different parts of the body so that a painful foot can be in one place, but the rest of the body can be in a different and more pleasant place.

“Your body can relax, as your mind begins to drift” could help to release the connection between a tight body and repetitively intrusive thoughts.

“You don’t need to attend to your increasing comfort, because your thoughts can focus on what is helpful to you” might create the possibility of learning without discomfort.

“Your eyes can close, so your mind can open to these new leanings which are just for you” speaks the possibility of learning without need to see what that is.

Example of a session:

Invitation You can become comfortable and not attend to me; you can allow your eyes to close all by them-

selves; your breathing can slow without any effort on your part.

Early learning story Writing your name could happen while you were daydreaming.

Stories Draw from everyday examples such as watching TV, driving automatically and arriving with little memory of the journey, reading without noticing sounds, listening to music, traveling e.g. in a plane.

Suggestions you can ... without needing to ...

Connecting

Connecting is the obverse of dissociation. When we focus away from something, we have the opportunity to focus on something else. When we focus on something, everything else can drift into the background as if not there, or at least without intruding.

It will be indicated for problems which have disconnecting as a central component. Any automatic habit such as compulsive eating, gambling, smoking or unwanted behaviour which is experienced as if it has a life of its own will be an invitation to associate. Connecting with or being more fully present to activities such as eating can provide an opportunity for learning just as attending to a lesson on history can allow the possibility of learning about history that would not be available if we were to daydream and look out of the window thinking about a holiday, a girlfriend or boyfriend, an ice-cream or winning the lottery. If a teacher notices such behaviour and shouts out the student's name, that student is likely to find themselves back in the classroom with a jolt as they reconnect with their external reality and re-associate with it.

A connecting hypnotic experience might begin *“As you sit in the chair, perhaps you could really ... begin to notice ...how comfortably your feet are on the floor.*

Would it be pleasing for you to ...pay attention ...to the increasing ease of your breathing? You might really enjoy ...learning ...how you can ... hear every word I'm saying, and ...find your own connections with those words."

Example of a session:

Invitation You could notice the sensations of your feet on the floor, breathing, listen to sounds, smells, tastes, general awareness.

Early learning story Walking noticing the sensations which allowed balance to develop.

Metaphors From everyday examples of noticing: becoming aware of car keys, shopping list, burning toast.

Suggestions You can notice [your breathing] instead of [disconnecting].

Time distortion

Time distortion will be useful if a client is concerned about time – a long journey, prolonged discomfort, insufficient time to prepare for an exam, AND demonstrates an ability to experience time flexibly. They might be surprised at how quickly the appointment time came around, or how slow the traffic seemed. They might comment on how long or short the first hypnotic experience seemed.

Example of a session:

Invitation: Take your time, how long you take [e.g. to close your eyes] is unimportant

Early learning story With an approaching birthday, time slows down.

Metaphors From everyday examples of variations between experiential and clock time including rubber time in India, Indonesia; time flies when you are having fun; time before holidays drags, time on holidays rushes by.

Suggestions you can stretch or compress time. Everyone has had the experience of wondering where the last year went, and yet there are some moments which feel as if they will never end. A small child knows that Christmas will **never** come, and then suddenly it's time to go to bed after opening those presents. The closer a holiday is, the more we seem to need it, and the time can really drag, but how is it that once the holiday begins, it's already nearly over?

Age Regression

Memories can be potent sources of experience. Visiting or looking at a photograph of a childhood house or school of can trigger not only images, but associate emotions and body experiences. Many adults report a surprise at how such a building seems to have shrunk. There is a double take – the body memory of being small and the present experience as a larger adult – and the dissonance creates surprise. It is usual for adults looking at photographs of a school class to look younger as they recall their playmates. Some memories are more potent than others at “taking us back” or re-creating the experience of when we were there. This experience of being “taken back” to some earlier time as if we are actually there is the extension of a memory that age regression can provide.

Age regression is like remembering an event with the added component of experiencing the memory as if it is happening in the present moment, as if we are in the experience now, with the possibility of looking around, and adding richness to the experience with all of our senses. It’s like the memory comes to life and is experienced as more real and complete.

Age regression can be useful to recover forgotten resources, memories, experiences or to rework or alter the experience of the past.

Erickson spoke of a woman who had been washing her hands compulsively for 14 years. He said he was very interested to find out with her what she did with her hands 15 years ago!

Some clients who have had a significant trauma some time in their past will suffer from a nagging blankness around the event, and want to remember details so they can then let it rest. Like any experience of remembering, reliability is always uncertain, and going back to the memory of some previous experience can provide some clues, some additional options, so the client can follow them up, or not, as they wish. Sometimes just having the freedom, the possibility of doing this is sufficient without needing to follow through with the actions.

If strong emotions are anticipated or if the client is fearful of being overwhelmed, dissociation from those emotions is likely to be useful. If revisiting or re-experiencing a potentially traumatic time, it is useful to find a happy, useful memory, BEFORE the problem event.

In the solution oriented approach, age regression is viewed as a way of DEALING with the past, not getting information. Since memory is reconstructed rather than replayed, hypnosis is NEVER useful for validating a memory, and is more likely to contaminate it. We can make use of this by assisting a client to contaminate their remembering in a more useful, functioning way.

A man wanted help to find out if recent intrusive images from his childhood were real or not. He was experiencing images of an old man and a shed, accompanied by physical sensations around his anus. He wondered if there had been some sexual experiences that he had repressed and was certain that if he could find out if they had happened or not, that he would be able to let the experience go. He accepted my saying that hypnosis was not a truth drug, and that I couldn't guarantee the validity of any memories that he recalled hypnotically. He was able to "remember" a num-

ber of incidents around that shed and involving an old man which were upsetting to him, and with my reminding him that he was experiencing what he was experiencing, and that was more important than whether it was true or not, he was able to add enough texture to the "memories" to make them seem as if they were real while knowing that he had created them. In this case, this man's age regressive experience was sufficient to satisfy him, and the intrusive memories and discomforting body sensations dissipated. For others, something very different may have been required.

A woman wanted help with her approaching marriage. She told me she had had several relationships which had all ended in tears. She insisted that this was a result of her childhood experiences of being brought up by parents who were in constant conflict. She was adamant that she had learnt this behaviour and was repeating it. She readily experienced an example when she was hiding under the kitchen table while her father threatened her mother with a knife. I asked her what she would have preferred, and since this was her own imagined experience, she could have any experience she chose, she said she would have preferred a

cuddle from both of them. So ... with little encouragement, she imagined this. She recalled another time when her father was driving, with her in the back seat, arguing loudly with her mother. She said she would have rather had an ice cream - and she imagined having her favourite flavour. After this she was clear that she had imagined those preferred experiences, that she had “made them up” as she said, and then realised that, although the fights had been real and distressing, there had probably been some good times as well. She stated that she was now confident that her marriage could have a different beginning.

The process of using age regression might be:

What resource seems scarce or missing?

In hypnosis - what was it like for you as a child to experience having this resource?

In a hypnotic conversation - what **is happening now** that we are in this experience?

Memorise the experience.

Imagine using the experience in the future.

Out of hypnosis, comment on evidence of the resource being present now.

Example of a session:

Invitation Perhaps get involved in a guided image from early childhood

Early learning story Earlier than any anticipated trauma. If in doubt, use something very early e.g. when you first learnt to roll over, or focus your eyes, or find where your hand or toes were.

Metaphors

Suggestions: Interaction will be helpful here – see above – although a preliminary session to set the work up could involve suggestions of remembering only what is relevant, in a way that is useful, forgetting again anything not yet ready.

Age Progression can be useful when a client has no sense of future except with resignation and hopelessness which can be diagnosed as depression. Sometimes a client is aware that something is wrong, something needs to be different in their life but they may be unsure of just where they want to go, what direction to

take, what their solution would be. We can assist such a client to have the experience of going into their future memory and seeing what that might be like, and clarifying their hopes and desires in the process. If a clear destination was missing, then discovering one might be enough for the client to make a beginning.

Imagining a variety of alternative futures can help someone stuck in indecision. They can explore several options, and get into the experiences of all the possible outcomes. This gives them an opportunity to experience their various futures, which is much more helpful than merely thinking, wondering, or talking **about** them. From those futures, they can also look back and discover what they needed to learn, so that when they return to their present experience, they can then set about learning that resource which they now know will get them to where they want to go.

Imaging a desired future can also be useful as a place to connect with resources which seem unavailable.

A 29 year old woman was despairing about her future, She wanted a family but she saw no prospects - no possibilities. In hypnosis she was able to have a conversation, as a grandmother, with an imagined 29 year old granddaughter who was despairing about her prospects of having a family. The advise she gave

her “granddaughter” was so helpful for herself to hear and respond to. She was able to replace her paralyzing resignation with a healthy wondering.

Example of a session:

Invitation You can look forward to letting this experience unfold, wondering what you might discover that will be useful to you and your learning.

Early learning story When you first went to kindergarten, the idea of going to high school was something you could only dream about, and yet, you can now look back on those high school days and they seem so long ago.

Metaphors

Suggestions interaction and questioning about what is happening in the future experience looking for the solution, resource to bring back into the present time.

Amnesia

Some clients will tell us “I just can’t forget it” or “I wish you could wave a magic wand and get that thought right out of my mind”. This might be helpful if someone has had some horrible experience and has trouble with intrusive memories or nightmares.

Others try too hard to achieve a goal, and trip themselves up in the process. Trying too hard to memorise facts for an exam, trying too hard to play a sport or a musical instrument well can result in recurrent dissatisfaction. If we can assist such a client to forget about it, they might then be able to just let a more spontaneous behaviour emerge with relief and satisfaction.

Some clients report that there was a benefit from a previous session, but as they thought about it, they began to realise that it probably wouldn’t last, or maybe they

just imagined the improvement. By helping them to forget the content of the session, their experience is likely to be left more intact, protected from their well meaning but shredding dissection.

Forgetting is a singular experience compared with others. We can focus, attend to, recall, anticipate an experience, but any attempt to forget something requires the paradoxical requirement to remember just what it is that we are wanting to forget. Introducing the experience of forgetting as an everyday phenomenon can then be helpful. We can remind a client that any person has had many experiences of forgetting someone’s name, where we put the keys, what we came into a room for, even where we might have parked the car ... so hinting at the possibility of forgetting.

Example of a session:

Invitation You don’t need to worry about the colour of your socks, you can forget about that. In this experience, you don’t need to worry about the day of the week, you can forget about that.

Early learning story When you first learnt to walk, it was so difficult, but you soon forgot the difficulty and began to enjoy the experience. When you first

learnt to write your name, you soon forgot to add the extra letters that you didn't need.

Metaphors Forgetting names, dreams, the reason we came into a room, car keys, what we ate for lunch 33 days ago, a shopping list.

Suggestions It's so good to know that forgetting is a skill we have already had plenty of practice in, and one we can use. We can enjoy discovering the pleasure of forgetting to have that problem, of forgetting to have that unwanted thought or behaviour, that unwanted feeling. Forgetting can be such a pleasure.

Structured Amnesia:

We can offer the idea to a client that they don't need to notice something, that time might go surprisingly quickly, or that a memory can fade into the background can be expected to be acceptable to many clients in their learning experience.

If we offer the idea of forgetting, though, there is a strangely different situation. If we ask someone to forget what we have said, in order to even consider the possibility, they have to remember what it is that they are being asked to forget. This creates a paradox and requires us to be more indirect if we are to be helpful.

In "The Answer Within" Steve & Carol Lankton have designed a format which can allow forgetting to be a more likely outcome. This makes it more likely, but not totally certain.

If we are reading a book, and the phone rings, we can take a message for someone, but if we don't write it down, it is easy to forget the message if we return to the reading. It is as if the phone message is muddled in with our experience of reading, and will be forgotten.

If we talk "aaaa" then "bbbb" then "aaaa" again, the "bbbb" tends to get lost from awareness, or "buried" somehow. We can forget it as if we didn't hear it.

By structuring a session in steps, there is a likelihood that the middle section will be less available for reflection, and so "forgotten".

Steve and Carol Lankton have designed as an extension of Erickson's communication style which often had a more rolling circularity to it.

Hallucinations

Positive Hallucinations

We have all mistaken someone, mis-recognised someone we know. When driving, we can see an injured animal on the road and then discover that it is a piece of paper. Maturana says that at the time, we cannot distinguish between reality and illusion. The distinction is made afterwards when we say “I was right” or “I was mistaken” but the mistake only shows up afterwards, not at the time of observing.

Example of a session:

We have all had or heard of children who have had invisible playmates. Children talk to them, walk with them, feed them, worry about them – it is as if they are really there as real people, and for the child they are.

We have all had dreams at night that felt real at the time. We talk to someone, revisit our past school, travel through space and time, and all the time it feels as if we really are there, and in the dream, we are.

We can offer indirect suggestions involving any of the senses to validate any therapeutic change. I was working with a girl to help her overcome her fear of dogs, and at the conclusion, I asked her to pat an imaginary dog, and she really enjoyed imagining that she was patting the dog. The dog was imagined, but the pleasure was real.

Negative Hallucinations

We have all had the experiences where we have not seen keys, a book, glasses, even though they are right there in clear vision. Am I the only person who has said “I’ve looked on the desk, and the paper is definitely not there” only to be shocked when someone says “Well, what is this!”

Example of a session:

We can offer such everyday examples of not seeing, not feeling, not noticing and invite a hypnotic experience of

experiencing something as if it is not there – a limb, an object, a sound, or even a taste or smell.

Anaesthesia and Analgesia

Anaesthesia refers to lack of sensation, and analgesia to lack of suffering about the sensation and will be relevant with pain - acute or chronic, physical or emotional.

Example of a session:

Invitation You don't need to notice the increasing comfort, you don't need to attend to ...You don't need to be bothered by the sound of the traffic ...

Early learning story When you first wore shoes, the discomfort was soon in the background as you enjoyed running and skipping or playing on the slide ...
When you were a child, a band aid, or your mum kissing it better, the pain disappeared. The pain was soon forgotten when a friend arrived.

Metaphors When soldiers were going to war, their girlfriends might say "Kiss me until you make my lips bleed, hug me until you break all my ribs". Erickson's tiger. Computer talk - deleting, archiving, etc. Electrical circuits with switches, dimmers, etc. Princess and the pea - building calluses. Childbirth can result in joy and celebration. The value of pain building courage and pride.

Suggestions not noticing, not being bothered, distractions; future pacing. It's OK to let the pain go. Send it back, take it back to where you got it.

Sometime later today, I don't know whether it will be 1 minute to 4 or 5 past 6 or just as you are going to sleep, or perhaps when you wake in the morning, it can be such a pleasure, or will it be a relief or a surprise to discover that you have no pain, and you really can't remember when the pain went away.

Clinical applications

We are *never* dealing with anxiety, depression, phobias. We are *never* dealing with clinical conditions. We are *always* dealing with people.

Rather than treating a “condition” I prefer to explore with each individual person, just what their experience is, and to explore with them what might be missing for them that if they had it, they would be as they want.

I find that this leads to a more trusting relationship, more respectful interactions, and a more direct connection with what was missing for this individual so they can create their own solution, and because it is theirs, it is more likely to last.

Introduction

A woman wanted help with her confidence. She was having difficulty speaking with her child's parents at school functions, and was beginning to have trouble conversing with workmates. I listened to her situation, and concluded that lack of confidence fitted the problem, and that if she had more confidence, her life would continue more satisfactorily.

After 2 or 3 sessions, she was aware of enough improvement to not need more assistance. As she was preparing to leave, she told me that she had had 2 "psychotic episodes" after the birth of her second child. Rather than accepting her diagnosis, I asked for details. She said that she had felt overwhelmed, trapped, nowhere to go for help, and had lost touch with reality.

I asked her if she recalled a fire engine which had disrupted our first session, informed her that a house had burnt to the ground because of some electrical fault, and expressed my speculation that if a fuse had blown, the house might have been OK. I then asked her if she had had a "psychotic episode" or if she might have "blown a fuse". She was thoughtful, then profoundly relieved as she stated that she had blown a fuse.

She was indignant that she had been labeled so unhelpfully, and had been carrying that stigma, with its associated fear, for years. I asked her what she might do if she became overloaded again in the future, and she was delighted to say that she would make sure she "blew a fuse".

Even though I haven't seen her since, I would anticipate from her mood as she left that this re-labeling allowed a tremendously important shift in her, and that instead of fearing another "psychotic breakdown" with its associated terror, she might be able to "blow a fuse" and be OK.

We are *never* dealing with anxiety, depression, phobias. We are *never* dealing with clinical conditions. We are *always* dealing with people.

Remembering this keeps us connected to the client as a uniquely individual human being living in their uniquely individual worlds of experiences and avoids any drift towards theoretical abstractions.

If we look for an emotion that is being expressed – fear, insecurity, uncertainty, confusion – then what’s missing is likely to be another emotion – comfort, security, certainty, clarity. If the problem is expressed somatically, we can ask what other somatic sensations might be preferable. If the expression is behavioral, we can investigate alternative behaviours. This further matches the client’s solution to their own personal style of experience and add to the effectiveness of the process. By dealing with the experience directly, we can avoid the unnecessary, time-consuming, and sometimes harmful path of labeling pathologically.

We have learnt to gather as much information as possible, so we can make a map, and then we are ready to start. But so often we only discover what information we need after we have already begun.

On a teaching trip to Copenhagen, I was unable to use the automatic teller at the bank because there were numbers and no letters on the keypad, so my pin number was useless. I only discovered this when I was there, as I would never have thought to find such infor-

mation before I left home. When we are going on a holiday, is it best to pack for all eventualities, running the risk of not fitting everything in the boot of the car or on the plane, or should we pack almost nothing and risk the consequences? No matter how thoroughly we research the weather patterns of the destination, we only discover how the weather is after we arrive.

Because individual clients are individuals with individual differences, the therapeutic conversation can be most effective if we allow it to unfold so that as a client responds to our questions, we can respond with questions that emerge in a way we couldn’t have predicted. Without this conversational flexibility, we might as well hand our work over to a computer.

Instead of working with the diagnosis of “anxiety”, “depression”, etc., we can begin by unpacking the label for each individual client. We can ask “What other words could you use instead [of the label]?” or “How could you describe your experience?” and this will lead us to addressing “What’s missing”. A theme can emerge which will inform and shape the therapeutic conversation and guide it in a relevant, helpful and healing direction.

Cloe Madanes wrote an article “Rebels with a Cause – Honoring the Subversive Power of Psychotherapy” in

the July/August 1999 Family Therapy Networker in which she warned about the dangers of pathological labels such as in DSM IV. She reminds us that if normal human suffering is approached as a disease to be “cured” by drug therapy, there can be shocking consequences. She writes of a man who was still grieving for his father 8 weeks after his death, was diagnosed as suffering from depression, prescribed antidepressants, and when his grief persisted was hospitalised which only added to his distress since he was now separated from his family. Cloe advised that he be told that his experience was a normal response and to let the healing happen, perhaps over a year or two. He was mightily relieved to be told that he wasn’t suffering from a mental illness, and was able to return home and go back to work.

While there is no doubt that the label of depression is helpful for us to manage some situations, we should always remember that the label has been created by us, and for us, and has no existence outside of the labeling process. Also no-one would doubt the usefulness of antidepressants, but to assume that they are the cause of improvement, or even a source of “cure” is an unfortunate and demeaning assumption which runs the risk of damaging the dignity of such clients.

We human beings are naming, labeling beings. We name every object we encounter and label every experience automatically, mostly without being aware. When we hear a noise, we want to name the noise, so we can either attend to it or ignore it. When we listen to someone speaking their problem, we are automatically assessing, naming, labeling their experiences as normal, weird, familiar, dangerous, funny, disgusting, etc..

Given this unavoidable tendency, how can we use it to the benefit of someone seeking our help?

In AA, there is a requirement that someone assumes and permanently owns the label of “alcoholic” and when AA succeeds, this is an important first step. The woman I mentioned earlier was labeled as “psychotic” and the man Madanes wrote about as suffering from “depression” provide disturbing examples of labeling being actively harmful.

If someone has trouble sleeping, then they will not benefit from also carrying the burden of a label of “insomnia”. This added burden is even worse, since it make the experience seem more severe, and needing the help of experts. If someone is worried about their approaching exams, it is enough to cope with them without also having to cope with “stress” or “anxiety”. These labels serve no useful purpose to the sufferer, in

fact only add to their troubles. Anyone who has been through a disaster, doesn't need the additional disaster of a label such as "PTSD" – much more helpful to reassure them that any normal who had been through such an abnormal event would be expected to be as they are.

By labeling their response as normal in the face of abnormal situations, they themselves are validated, and so more able to begin to deal with their personal horror. This sort of labeling also links the sufferer with their own everyday resourcefulness, as compared with the jargon of pathology which only serves to distance them from these precious and healing potentials.

If the label is useful to the client, or if it is helpful to us, then there are two very different processes happening. If the client asks for a label, and we can give it – whether it is optimistic or pessimistic, then this can allow a wonderful relief. When Ian Gawler discovered that his sarcoma had a prognosis of nil, he realised that "I needed to do something different" and this awful diagnosis gave him something solid to deal with. In "Change", Watzlawick, Weakland and Fisch write about a man who was dying of an unknown condition, and told that if a diagnosis could be made, then he would be OK, was able to suddenly begin this recovery when a visiting diagnostician made the pronouncement

"moribundus!". It was the labeling, not the label that was helpful, and it was helpful to the listener, not the speaker.

A newly married woman was upset by difficulties with her husband - she was frustrated with herself, and particularly her bitchiness which she felt powerless to stop – she loved her husband, and wanted the marriage to continue. In general conversation, she recalled that she had a recurring tendency to sabotage anything she wanted – her education, her workplace, her friendships. When we speculated together about where such behaviour might have come from, she recalled that her mother had said on one occasion that she was "a poisonous child", and somehow that label had stuck and contaminated so many of her experiences. This poisonous label, once recognised as a label, could be seen, and put aside, and we were able to find another experience – one in which her mother held her close and told her how much she loved her – and we were able to label this experience as the antidote to the "poison" and she could use this herself any time she wanted.

It is when the label is used for our benefit, our comfort, to guide our actions, that they can be so destructive. I once heard a comment that chilled me to the bone. "I

woman came to see me suffering from manic depression. When she first came to see me, she did not know that she was suffering from manic depression, but after I had treated her for 2 years, she came to recognise that she was". For me, this is an abuse of authority and labels and verges on the criminal.

The main characteristic of a label is that it limits options. This can assist us in a complex situation, and in a person who is overloaded, this can be so helpful, but the limitations persist, and can become outmoded, and if the problem is one where options are already restricted, this can add to the trouble. Anyone with a work-related disability is open to added insult if they dare to show anything but immediate and full response to the help that is offered. They can be labeled as malingerers, making it up, wanting a pay-out, or suffering from a psychosomatic disorder. How often are these labels used to tranquilise the provider of such help, to help them cope with their own inadequacy? I have seen such sufferers weep when their pain and suffering is acknowledged and validated, and labeled as a normal response to a series of extremely abnormal circumstances.

This process of creating labels that are of maximum benefit to the client also adds to the therapeutic relationship by engendering a mood of trust and expectancy, and is so much more satisfying to the practitioner. Thankfully, the days of experts handing out diagnostic labels and technical treatment is being replaced by an approach that recognises the primacy of experience over explanations, of future possibilities over past damage, of clients' autonomy and authorship over control and predictability – the primacy of concern for a fellow human being over a limiting taxonomy, of appreciation of the mystery of existence over scientific certainty.

Anxiety

We live in an age of anxiety. Given that anxiety is an emotion associated with change, and that our society is undergoing change at an escalating rate, it's not surprising that anxiety is a major experience for us. With such rapid and fundamental changes, the traditions and their reassuring presence are crumbling, and many people are experiencing a crisis of identity – “Who am I? What am I doing?” and a crisis of meaning – “What's it all about? Why am I here? What's the purpose of it all?”.

All these changes and their accompanying uncertainties are the environment that creates anxiety ... and the disturbing seduction of being pulled into the certainties that fundamentalism offers.

If someone isn't anxious at this time in our history, might that be an indication of psychopathology that requires treatment?

With that in the background, how can we best assist someone who asks for our help with their anxiety? Some may be relieved to hear that some anxiety is normal, healthy, even desirable, but many will not be satisfied and will want more from us.

Rather than attempting to treat anxiety, it is likely to be more respectful and more useful to explore what anxiety is for each individual. Some may feel out of control, others may feel overwhelmed, sad, unsure about their future. Each individual experience will require individual responses from us if we are to assist in a meaningful and respectful way.

If we ask what might be missing for each person, we can begin an exploration, with them, of how they might best reconnect with that seemingly elusive resource.

We can encourage them to recall times in the past when they experienced that resource; we can assist them to recognise times in the present when they may have overlooked the presence of that resource; we can ask them what might be different in the future when they will have reconnected with that experience, and in these ways assist them to have their own individual ex-

perience of their own individual needs. This will support them in moving towards their own individual solutions.

A man reported increasing anxiety which was interfering with his sleep and his ability to concentrate at work. His family complained that he was distant and remote. When asked about his particular experience of anxiety, he reported that he felt inadequate as a provider for his family. His traditional upbringing taught him that as a man it was his place to support the family, and his wife's recent return to work was worrying him. We discussed his experience and he recognised that what was missing for him was an acceptance that he was a human being with human limitations. He was able to recall many times in the past when he had come to terms with the reality of the world, and said that at the times when he felt more OK, he was more appreciative of his family and the pleasure of being with them, and that if he were to resolve his problem, he would be more accepting, more grateful, and have more fun with his family and workmates. Recognising this allowed him to begin to put this into practice, and he was easily able to resolve his problem, and his work and sleep also improved.

Stress

Stress is an engineering term implying a distortion or potential distortion, existing in an entity, generated by some external force. It is a state of potential energy, and points to the possibility of movement or fracturing being generated from the release of this energy.

Psychological stress could be said to be the expression of conflict between an existing state and a desired or required state.

A client complains that something which is so, should not be so, or something which is not so should be so. It is the dynamic expression of the more passive “tension”.

Resolution of stress is achieved by encouraging acceptance of the unchangeable, or mobilising possibility and action to create the desired change.

Ask “What other words could you use to describe your stress?”.

Common concerns related to stress:

Economic: income / expenditure
job satisfaction / unemployment

Personal: performance anxiety / study
confusion / unresolved
worry / poor sleep
resentment / resignation

Interpersonal relationships
children

Working definition -

conflict between intellect and emotion,
 between facticity and acceptance,
 between possibility and resignation.

Desired outcomes:-

not doing -> doing
doing -> not doing
doing -> differently.

Phobias

A phobia is said to exist when the anxiety is so overwhelming in a specific situation that it leads to avoidance of the situation. It is too huge to even begin to deal with, and can be described in terms of feelings of life threatening intensity.

Therapy necessarily addresses issues of motivation to change as well as the change process itself. Clients are frequently “complainants” [see Steve de Shazer].

A phobia can be thought of as a “bad trance” with an induction, dissociation, sensory distortion, and learning post hypnotic cues.

A phobia usually has a dramatically memorable beginning, although the initiating stimulus is usually a minor, normal, but misinterpreted experience such as diz-

ziness, faintness, etc. These symptoms are experienced as frightening, and the physical symptoms of fear become further stimuli for more fear which escalates into panic.

Hypnosis is the treatment of first choice for phobias.

[A]

1. Ask “what is missing?”, “what would you rather feel?”
2. Look for that resource within the client.
3. Ground that learning.
4. Associate that learning with the original incident, revisited in dissociation.

Project the resource into future situations.

[B]

Ask for the sequence of the phobia as a “bad trance”.

E.g. think of flying -> body sensations -> emotion of fear.

Generate alternatives at any level.

E.g. Think of secure experience -> associated body sensations -> emotion of security -> take that emotion and body sensations of security -> think of flying.

Out of hypnosis test the experience - e.g. think of flying.

[C]

Produce a hypnotic disconnection.

View dreaded situation.

Reconnect with preferred emotion e.g. security.

Depression

Depression is said to be the next major epidemic of the western world. It is even being institutionalised in Victoria in a way that while legitimising the human suffering associated with the crisis of purpose and meaning that we are experiencing in our present time, can also sentence people to a bleak and limiting future in which the best that can be hoped for is managing or coping with "it".

Depression is such a depressing word. Like so much of our language, nothing comes innocently, but always with present associations, past memories, future worries. When someone suffers from depression, there is so often a globalising of negating experiences: "My life has never been any good. I'm no good. I never will be. There is no solution. It's always been like this, and it's

always going to be like this." The total generalisation of the experience can overwhelm a client as well as us as a potential helper, and we can all too easily be pulled into the person's downward spiral of despair and hopelessness.

Some people arrive with this label already firmly in place. We can unpack this by asking "What other word could you use to describe your experience?" or "I know that you know what you mean by depression, but it would help me to understand better if you could tell me about what actually happens to you?" The response might include frustrated, helpless, sad, angry, overloaded, worried about the future. As well as being more individual descriptions these are also more everyday, and so can lead more readily to connecting with everyday circumstances and resources. Having made the connection, we can explore "What's missing?" for each individual and assist the reconnection with the specific individual resource.

By normalising the situation, the dimensions of the problem shrink relative to the client and instead of being overwhelmed to the point of paralysis, a beginning can be made and the progression can follow naturally with appropriate support.

Others arrive without the label, and the question appears as to whether we should use a label or not. Our decision can best be informed by a further question – “For whose benefit are we using the label?”. If it is for us and our security, then we could pause before inflicting this on any client. If it is for the client’s benefit and leads to relief for the client to have a diagnosis, so they can move on, then we can use the label with a clear conscience. Watzlawik, Weakland and Fisch in “Change” tell of a dying man who was able to begin to recover after receiving a diagnosis – even though the diagnosis was “moribundus”.

We can expect “depression” to be accompanied and even constituted by a mood of resignation - nothing will help - and is characterised by lack of effective action. There may be paralysis or repetitive, ineffective activity which only leads to greater frustration, despair, etc.. Situations are spoken of as global. EVERYTHING is terrible. NOTHING is possible.

One way of preventing our enmeshment in the client's unwanted mood is to remind ourselves [though not the client] that depression is a diagnostic label invented to classify a pathological state so that the treating professional can better know what specific drugs or activities to use. All too often, we forget that we invented the la-

bel, and act and interact as if the label were an actual condition. This reification of depression has the effect of congealing and concealing. Congealing a mixed bag of experiences and coalescing them into a pseudo-homogeneous mass, which however well intended, can be inhumanly destructive to some people, and negate their potential to learn to have a different experience. Concealing because the label hides the potential for change, for learning, for healing, for the possibility of a different future.

The absurdly reductionist notion that depression is "caused" by an imbalance of chemicals in the brain might suit the sales figures of the drug companies, but is hardly helpful to someone experiencing what has been labelled as depression. That such a condition even exists is worth questioning, as anything that can soften the grip of hopelessness that such a fatalistic life sentence can inadvertently invite is worth exploring. It seems rather obvious that if I drop a brick on my toe, that it would be laughable to claim that the problem was due to an imbalance of chemicals in my feet, and that a tablet would help reverse this hereditary permanent condition. No one would doubt that there are chemical changes, but to assume that they are the cause, and not the result ...

Reminding ourselves of the generative aspect of language gives some freedom here, and room for everyone to move. If using a label is helpful, let's use one. If not, then let's not. Also if we are using a label we have an ethical and professional responsibility to use one that is helpful to the client not to our petty system of classification. The issue is one of usefulness, not evidence using a label, and never confusing it with what is being labelled!

If we refrain from the temptation to label and diagnose, and work with the raw experiences that clients bring, we are likely to be dealing with experiences such as sadness, a feeling of hopelessness, being overwhelmed, or an unbearable sense of blankness and pointlessness. With any of these experiences we can ask an individual client how they would rather feel, what experience they would prefer to have, and then go searching, with that individual, for times in their past when they did feel that way, or had that experience and connect them with that past resource so they can bring it forward to their present dilemma. We can ask the miracle question and help to connect them with the possibility of a future time when they would feel that way

or have that experience and assist them to bring that back to the present time to make use of it.

If a client comes already labelled as suffering from depression, we can ask for an individual description of their depression and work with that.

If there is a sense of what is missing we can add depth and texture to this so it becomes more memorable, more accessible, more useful by inviting a hypnotic experience in age regression or progression, or invite them to become absorbed in the imagined experience so they can learn it, and own it to allow the experience to be embodied and incorporated into their resourcefulness.

Therapy is oriented towards reconnecting the client with their own resourcefulness and then generating specific, concrete, future possibilities which lead to specific, concrete **action**.

1. Unpack the label
2. Look and see what is missing.
3. Search hypnotically for that missing resource.

4. Rework the past actions, interpretations how it felt then as contrasted to how it is or looks now.
5. Learn it.
6. Project the client's experience into the future – looking for specific **actions**.

A woman wanted help with her depression, and was able to describe her experience as being overloaded in her work as a manager in a large retail store. Like so many these days, she was required to do more with less, shoulder increasing responsibilities and show greater autonomy. She felt unsupported and overburdened. In hypnosis, she readily recalled times when she had coped well by lightening her mood, asking for help, and recognising peacefully to herself that she was only human. She was able to imagine being like that at some future time when a crisis happened, and in imagining the situation, she was able to settle into that preferred experience and learn how it felt, to get comfortable with it, and own it as hers. After the hypnotic experience she reported feeling relieved, and her face and body showed this. By connecting her with her resources, the need to treat her depression " became totally irrelevant, and she was able to continue with a

healthy anticipation of her abilities to deal with other future crises.

Post trauma

We have all experienced trauma, some grossly more than others, yet some manage to live a full and satisfying life, and other times there is some significant residue which interferes. Erickson stated that polio was the best teacher he ever had, and that he learnt because of it, not in spite of it.

Rather than ask details about the trauma, or rigidly encourage reliving it or emotion about the trauma, we can respectfully ask what part of the trauma is still around, and in what way that part may be inhibiting the client to get on with their life in an “ordinarily dysfunctional” manner.

Viktor Frankl wrote of a widower who was devastated by the death of his wife of many years. He could not find any reason to go on living without his lifelong soul mate. Frankl asked him if he would rather that he died first, since one of them had to, so that his wife would have to go through this?

His despair dissolved and he was able to leave peacefully, even gratefully. How was this possible? There had been no change in his circumstances, no insight into his dilemma, no outpouring of repressed emotions, and yet the impasse was able to be resolved totally.

When a client comes to us for help with a trauma, they usually bring a mind set that their circumstances need to change. History needs to be re-written, the incident needs to be erased so that they will then be OK. Hypnosis can offer the possibility of re-experiencing their past as if it had happened the way they wanted. Erickson’s “February Man” is a delightful example of this.

Other times a client may have some recognition that the traumatic events can’t be undone, and yet that recognition is insufficient for them to let it go. It is as if the trauma is stuck in their body and reason alone is insufficient to shift it.

This may be that the client is haunted by memories, or by a strange blankness. There may be visual flashbacks or powerful unwanted emotional responses or a painful numbness which can extend into other unrelated areas. Because we are always dealing with individual people with individual and idiosyncratic responses, we can ask about the situation with this particular individual, and so discover what we might begin to do to get this individual client back into their life in a way that is satisfying to them.

When we ask the client or ourselves about what is missing, what we need then to do becomes rather obvious. If there are disruptive visual or emotional flashbacks, we might want to explore the relevance of amnesia. If there is numbness, then we might want to encourage gradual return of the emotions or physical sensations. If there is dissociation, re-association will be wanted, if there is panic because of the intensity of emotions with the memory, then recalling the experience in a dissociated state will be what the client requires.

A colleague told me that he was assisting a client to come to terms with her trauma, and was wanting her to see the difference between pain and suffering. He explained to her that we experience pain is a result of the stimulation of nerve endings, whereas suffering is

a function of what meaning we attach to the painful sensations. She couldn't get it until later that day, she approached her dog which was resting in the shade of a tree recuperating from a recently broken leg. As she began to pat the dog, it bit her, and she reported that at that moment she suddenly recognised that the dog had the pain, and she had the suffering.

It is this capacity for suffering that transcends rationality and concerns of the mind. This is the human soul at work. No amount of reasoning will convince a client until we address their soul – their individual way of being that is at the core of who they are. That part of us that like a dog with a bone when where the bone goes, the dog goes. Our soul is our “bone”, and if we try and remove a bone, we are likely to increase everyone's suffering in the struggle that will inevitably be created.

I continue to be grateful for Milton Erickson's contribution here. Two of his comments seem particularly relevant: *“Because each person is an individual, we need to tailor our approach to meet the individual's needs rather than tailor the person to fit some Procrustean bed of psychological theory”... and ...“To think that there can be one psychological theory that would fit every individual of both sexes, of all ages, all races and religions, in all circumstances is ridiculous”.*

I like his implied invitation for us to look beyond the external circumstances that a client brings to us, beyond any diagnostic label, and focus instead on the person, their experience, and their individual response which is the source of their suffering and the source of the nascent solution. Shifting the focus from and inquiry into what's wrong, and towards what might be missing for each individual client is not a trivial matter. It may be worth the existential discomfort of letting go of **our** need for certainty, of us not knowing what's best for the client, and daring to look, with the client, for what will be most helpful to them.

My medical training had me learn to gather information to make a diagnosis to create a treatment plan and then begin to implement it. While this approach will be useful or even necessary in dealing with some problems, physically based ones particularly, there is another approach which is worth exploring.

If we begin with the question of what's missing for this individual client, we can begin to explore with them what resource they may have lost track of. If we can assist them to reconnect with that experience, they may then be ready to deal with their dilemma and even solve it.

A patient in a psychiatric hospital was in an art class, and the teacher was impressed with the quality of the paintings. She said to him "You're a painter". This was news to him. He thought he was a psychiatric patient! He was able to leave the hospital and earn a living painting and making furniture. Many people view his work as strange, but he is a functioning member of society, living independently, and no longer requiring psychiatric care. His change happened in language. When the art teacher said he was an artist, a whole new future was created in that moment, and he was able to live into THAT future rather than the one he had been anticipating. We could say that he was dissociated from many possibilities, and when he heard "You're a painter", he came out of hypnosis and re-joined the wider external world.

We can begin with the assumption, and it can only be an assumption, that each client has what they need to move on in their life, and that they are stuck because they have lost track of that capacity. We can then begin to explore, with them, what that experience may be. For someone who has a nagging incompleteness around the event it might be remembering the event. Others who are haunted by flashbacks might rather forget the trauma or at least have it more in the background as part of their total experience. Obviously

there will be many clients who will be between these two extremes.

A woman was driving to work, and lost control of her car as it went round a bend in the road. The car rolled over several times, and although she stepped out of the car unhurt, every time she thought of driving, memories of the car spinning and emotions of fear – fear that she was about to die – came flooding into her mind. She said, almost as a throw away line “I wish I could get the accident right out of my mind. I just want to forget it” but thought that would not be possible. In a hypnosis session I asked her about how she had dealt with other crises in her life, and she said that after some time she always came to a decision, and told herself that enough is enough, and then she could move on. She was then able to tell herself that it was time for her to do that with the accident. After that experience she was able to get into her car and drive, with minimal and decreasing discomfort.

Asking about likes can be a delightful way of lightening the mood which can be therapeutic in itself. Speaking about likes also helps to evoke a resourceful state since we only like activities that we feel adequately resourceful about. Bringing lightness and resourcefulness into the conversation can be such a delightful relief for all.

It is as if there is more of the client in the room, more of them available to deal with their situation.

A bank teller loved his garden, and his roses in particular. He had a wide variety and was proud of his garden which was widely admired. He was delighted to tell me about the importance of watering the plants without overdoing it, pruning any dead blooms and unwanted branches. He considered himself something of a self taught expert. He wanted help with his sleeping since he and his bank had been held up by an armed robber. He was waking with nightmares reliving the robbery, and creating additional scenes of horror imagining what might have happened. Nightmares can have a hypnotic effect by creating an expectancy which then happens. I asked him to go into hypnosis, and imagine he was in his garden. Which thoughts could be pruned, which fed, which ignored. He obviously enjoyed the experience, and expressed relief. He then told me that he would be OK. Two weeks later he was sleeping well, and told me that he was enjoying reading gardening books just before he went to sleep, and that he knew that this was helping. His skills as a gardener could be transplanted to the problem area and simply grafted on so that he could be an active participant in his own healing.

Asking about how they will be different when the trauma is resolved can assist to create the possibility and also the direction of a resolution. This recognition can be such a relief for a client stuck in a mind set of having to “learn to live with it”. De Shazer’s miracle question can also move the conversation in a useful direction. *“If when you go to sleep tonight the problem were to disappear, what would be different when you woke up in the morning?”* Articulating the possibility can feel like a miracle to someone stuck in the mire of resignation and despair.

A man was suicidal after being made redundant at work. He was having trouble applying for other jobs, and couldn’t see the point in it all. I asked him what would be different if a miracle happened and all his problems were solved. His mood lifted obviously, and he said that he would have a job again. When I asked him about how that would feel, he reported that he would feel worthwhile, knowing that he could support his family who were so important to him. I commented on how different he looked even talking about the possibility, and he recognised that change in mood also. He appeared to have woken from a daze and was then able to recognise that he had all he needed to continue, and he had always wanted to have his own business instead of working for someone else. He had

enough money put aside to pay a deposit on a truck and he could begin his own taxi trucking enterprise. He left optimistic, and ready to start his business.

Childhood abuse

Childhood abuse, whether sexual, physical, verbal, emotional ... whatever the form, even the idea is headshakingly repulsive to most of us. The long term consequences can be so devastating to those children when they grow up, and have been the focus for specialised group of helpers. The abusers are traditionally vilified and threatened with vengeful acts, including incarceration.

No one would want to even attempt to minimise the horror of such experiences, and yet some people survive and even thrive without any apparent scars.

How can this be? It is one of life's mysteries that in response to similar circumstances, there is a wide variety of results in different people, and the resilience of some

is to be admired, and learnt from as a source of inspiration for us all.

Because each person is an individual, there will be a wide variety of experiences which are interfering with an individual's life. The past events may be known, suspected, or feared as a possibility. They may present as vivid memories, or emergent fears or flashback memories, or intrusive sensations or uncomfortable numbness, difficulty trusting in relationships, and many other human responses

There is no consistency between the severity of the trauma and the severity of the symptoms. Severe trauma may be coped with without interfering with the living of a full life, and a relatively minor incident may be almost overwhelming in its effect.

Memories themselves are notoriously unreliable [note Elizabeth Loftus's book "Witness for the Defence", and the false memory debate]. We note that memories are not replayed like replaying a videotape but rather reconstructed newly with each act of remembering. A search for what "really" happened will be profoundly influenced by the bias already present in the client and / or therapist.

This recognition is of central importance to the use of hypnosis in this situation, since some people still think of hypnosis as a kind of truth drug. We know from our clinical experience that one of the joys of hypnosis is its ability to bend the memories of the past into a more useful and healing form. It never leads directly to the truth by uncovering it. Never.

Rather than a search for the TRUTH, a more useful direction is questioning what is missing which would allow the client to get on with their living their life with resolution and satisfaction rather than justice or vengeance.

What is missing may include:

Telling of the previously secret story - the telling IS the therapy

If stuck with a feeling of:

Shame, unworthiness, being unlovable, powerlessness, resentment, fear or untrusting,

Then the following approaches become available:

Forgetting intrusive memories;

Coping with emotions without being overwhelmed;

Experience [imagined] of justice;

Getting revenge [again imagined to avoid the litigation of real revenge];

Creating the possibility of a close and trusting relationship.

Therapy involves searching with the client for the missing resource and grounding that resource as a learning. It can be helpful to take the experience back hypnotically as an adult, and provide the child with the needed experience, and then project the healed experience into a future without the previous problem.

This resource may include holding the child, affirming its worth, having the client imagine they are telling it they love it, witnessing the child's suffering so the suffering doesn't happen alone, offering support to get the child through the experience, getting vengeance, telling it that the horror will end or whatever is incomplete or missing.

Because everyone is different, it is important that we listen for what is missing for each individual so we can look with them to find ways of reconnecting them with their resources, and heal.

Pain management

“Experience is not what happens to us, but rather what we DO with what happens to us.” Aldous Huxley

Pain can have a time element – past / present / future.

Pain has a signal value – We may or may not need to continue attending to it now.

Pain exists and at any moment it can change or go.

The client has the ability to achieve this.

Insight is not emphasised.

Having no attachment to the outcome

Pain may be mainly physical with emotional consequences or may be mainly emotional with physical consequences.

We are always working with a person, not pain so LANGUAGE is foundational

- | | |
|------------|---|
| Sensations | Decreased intensity |
| | Alteration of sensations |
| | Displacement |
| | Numbness |
| | Alteration of colour, size, shape, position |
| Attention | Not noticing |
| | Forgetting |
| | Time distortion |
| | Focus ON sensations |
| Suffering | Accepting |
| | Softening around the pain |
| | Disconnecting |
| | Expectancy of change |

Do something different.

“Emotional” pain:

Concentrate ON the sensations to experience the physical sensations as manifestations of unexpressed or unexperienced emotions.

Work WITH the emotions to ventilate or with presuppositional solution oriented questioning.

Habits

Unwanted habits are described as uncontrollable [the “controllable” ones have already been controlled], and even though the component actions are controllable, the habit nevertheless is experienced as having a life of its own.

The actions happen in a disconnected state, so the therapy is connecting.

Smoking:

Why do you want to stop? [motivation]

What have cigarettes done for you? [benefit of non-smoker to explore what’s missing]

Therapy is connecting of all the benefits of smoking with being a non-smoker, with emphasis on the motivation.

Weight loss, eating control

Ask what has been tried. Don’t do that. [e.g. diets]

If a client can’t imagine being thin, then we can create this imagined experience hypnotically.

If a client can’t stop eating, we can implement strategies around the eating of extra food.

If a client hates their body, we can encourage acceptance, perhaps with the aid of a mirror.

We can connect the emotion or experience of thinness or not eating in a balanced way with the previous benefits of being fat or over eating.

If a client has never learnt to eat as an experience, we can invite them to eat, remaining connected with the experience of eating.

It may be useful to prescribe a relapse instead of a client dreading it.

Sleeping problems

General relaxation

Ordeal or task based on questioning about “What do you hate doing most?”

Nail biting:

Almost biting, arm levitation or catalepsy.

Teeth grinding:

Almost grinding, relaxed jaw muscles, unconscious releasing of emotions.

Hair pulling:

Arm levitation, catalepsy, strategies e.g. “each time you pull a hair from the usual place, also pull one from a different place.”

Obsessions and compulsions

Our learning about hypnosis provides a unique vantage point to view obsessions and compulsions.

If a client comes with a label such as OCD, we can unpack the label by asking for an action description which normalises and depathologises the situation.

As with phobias, we can observe so called obsessive behaviour and recognise trance-like behaviour. Often the client talks about and demonstrates an automaticity which we can call dissociation. This provides us with a plethora of options to add to the limiting behaviour.

We can ask for details about the doing of the behaviour to create a map for the client and us. This can be instructive to the client to see the repetitiveness of the situation, sometimes for the first time. Occasionally

this is sufficient to dissolve the dilemma. The details can help us to design strategic homework assignments for the client to break the pattern by disrupting the sequence, adding additional elements [eg Erickson's red shoes], or deleting some elements.

These details can also give us a rich variety of options to suggest in trance, as each step has previously led rigidly to the next step for the client, but we can now suggest a whole range of additional steps which become possible in the suggesting. Instead of a compulsive hand-washer washing with a particular soap in a specific basin, we can offer a wide range of options of the types of soap, place of washing, means of washing, times of the ritual, sequences, etc. The abundance of options can shift the mood from being trapped to one of confusion and the possibility of change.

I have frequently found that asking about what might have been successfully avoided by the obsessive behaviour – an action, emotion, thought – and also to ask tactfully about shame. I ask “Is there something that you have done in the past that you feel some shame about?” The answer can be useful sometimes.

A 16 year old boy said he was suffering from OCD and described his experience as being controlled by a series of habits. He had to perform specific rituals if he thought about failure. These involved shaking his hands, going back to the place where the thoughts occurred, stamping his feet. These actions helped to “get the thoughts out of my head”. His father had died several years before, and he was obsessed with the thought that if he didn’t “get my head right” that the teachers would take some power from him, resulting in them having “the power” and this might cause them to take over the role of his father figure which would betray his loyalty to his dead father.

He stated that he knew about hypnosis and had even successfully hypnotized his mother. He was studying media at school and expressed his disgust at the way companies manipulated people to make profit.

He was able to go into hypnosis with the reminder that he knew the experience, and didn’t need my help to do that. As he was a strongly independent person, readily taking charge of the conversation, I also stated that he could be hypnotized or not, by situations of his choosing, and never had to feel under any obligation that didn’t suit him. After some time, I introduced the ideas that the habits had been hypnotizing

him, and were trying to take the power from him, trying to supplant his father as a father image. I also offered the idea that OCD had been trying to con and manipulate him for its own benefit in a disgusting way, and that he might take pleasure in not letting it do that to him in the future.

He was very delighted with the experience, reported that he felt back in control again, and that he wasn’t going to let the problem control him any more. I reminded him that learning happens at its own pace, and although he was a bright and fast learner, he didn’t have to get it perfect the first time. The way his eyes flashed let me know that he was going to be obsessive about not being controlled by the previous dilemma.

Enhancing relationships

Most couples bring conflict for resolution, and yet so much of their problem stems from the very attempt to resolve their difficulties. Concerns about fairness and unmet expectations appear early in relationships and boredom or grumbling resentment [tolerance] appear in the middle years.

Although talking through a problem can be a relief and a source of a solution for a couple, sometimes talking only makes the conflict worse.

The stereotypical couple consists of the woman as a complainant [“What’s the problem?”. “He is! Who wouldn’t have a problem with him!”] and the man as a visitor [“What’s the problem? Don’t ask me. She dragged me along here. Fix her up and everything will be OK”]. Acknowledging the situation for the woman,

and for the man, in the presence of the other can be affirming and clarifying for both, especially if the smallest possible changes are explored.

A breakdown in communication is almost a cliché with couples, and instead of pursuing the frustrating option of talking *about* the issues, if we follow Maturana’s lead that communication is coordination of action, we can ask a couple to sit facing each other and match their breathing or blinking. We can suggest they stand facing each other and place their raised hands so their matching fingertips are lightly touching as they move their hands, keeping the fingers in contact.

I have suggested to a father and son that instead of a recurrent verbal conflict, they might want to grip each others hands and move them back and forth in a sawing fashion so they can dissipate their energy staying connected. With younger children playing at wrestling or tickling can provide a welcome alternative to verbal and physical conflict.

We can offer a couple the experience of going into hypnosis together, perhaps facing each other and noticing the beginnings of trance in their partner, maybe attending to when the other seems ready to close their eyes so each observing partner can match this. This experience

of coordination and connection can be such a useful experience.

It can be such a relief for a couple who argue recurrently to have an opportunity to sit together in silence, and share a pleasant hypnotic experience. This can be an experience to reconnect them with their almost forgotten pleasure of sharing enjoyment instead of boringly disagreeing with the other.

We can ask a couple about what they like to do together, how they have fun together, what they enjoy together as a couple. We can interact with the couple as an entity – the couple – not two individuals. When we ask them what the problem is that they want to address as a couple, we can then explore what's missing for them, again as a couple so we can look with them to reconnect them with that missing experience.

We can invite them to go into hypnosis together, to sense the presence of the other, offer early learning sets about how they learnt to deal with other issues in their individual and shared paths, and then provide metaphors, ideas, and interactions, in much the same way in which we might interact with an individual, only here we are working with an individual couple.

Moods of relationship include **resentment, tolerance, love, and in love.**

Resentment is a mood in which we claim there has been past damage which was important, and a silent promise for revenge.

Tolerance is created when we withhold our resentment until some later time.

Love is a mood that is generated by acceptance. Maturana defines love as the granting of legitimacy to another to live in the world beside us.

In love is a mood where we actively appreciate or even celebrate the other.

The most usual emotion that I see missing in couples in trouble is fun, and I like to ask them what they do for fun. Sometimes there mere mention of the “f” word is enough to have them puzzle about what they used to do, and opens a conversation about how they might do some more of that again, in whatever minimal a way at first.

Shifting moods of relating can be pivotal to the process. We can ask someone who is resenting if the damage which happened in the past is still a damage in the present, or if it is still important. We could respectfully

challenge the resentment by pointing out that the resenter's life has been on hold during the process – “You must feel that the other is much more important than you, since you have sacrificed your life and your experience to get back at them.”

An exercise can help here. If a couple are actively resenting each other, we can ask them to stand facing each other, clasp hands, and begin to push the hands of the other in a coordinated and respectful manner. The resentment is not altered, but it is shared, and because it is expressed in a mutual manner, there is often a dramatic shift in the couple's mood.

We can generate a mood of love or even in love with a couple by being in that mood ourselves – by actively accepting them, or even expressing our appreciation of them, and then lead the hypnotic experience according to those moods. We could even shift our own mood from resentment, through tolerance, love to in love as the hypnotic session progresses.

We can invite each to recall how they fell in love, how they first decided that the other was the one for them, and share that with their partner. We can invite them to imagine a future event where the relationship is as they wish, and share that with their partner. The recalling of past and future experiences can be brought to

the present and serve as useful resources to heal the relationship, and allow them to continue living and learning together.

There is a general benefit for a couple when they have a pleasant experience which they can share and the mood of this experience can be healing in itself. If there is a specific theme in their conflicts – arguments, complaints about lack of fairness, imbalance, then these can be addressed in the induction, in an ELS about making friends in kindergarten, and stories about discovering and using the missing resource.

Relationships are so important to us humans, as we are relating beings, and finding a variety of conversations, emotional flexibility, and body moves can be a relief to the couple, and satisfying to the therapist.

Sexual issues

Male sexual dysfunctions include problems with producing or maintaining an erection and premature ejaculation. Such clients are often caught in the process trying too hard to produce or not to produce a physiological response which is spontaneous. Therapy will involve examples of learning such skills as allowing natural processes to occur such as breathing, writing, walking. Strategies such as trying to prevent or lose an erection while strictly forbidding sex, or trying to ejaculate as rapidly as possible can make a delightful alteration in mood and result. Arm levitation or catalepsy can provide a physical metaphor to enhance the learning, and time distortion, dissociation from intense sensations similar to how we might work with pain are the phenomena we might employ.

Female sexual dysfunctions include difficulty in reaching orgasm, dryness or discomfort during intercourse and difficulty saying no or in taking the initiative.

Guided imagery including scenes of sensual pleasure, orgasms during sleep which can be rehearsals and forgotten on waking, and suggestions of general or specific relaxation can be useful. Assertiveness and the legitimacy of saying no or initiating other interactions can usefully be explored hypnotically.

Resources

Websites

www.cet.net.au

<http://globalmultiversity.com>

<http://robmcneilly.com>

Email

rob@cet.net.au



Other enhanced ebooks by Robert McNeilly

Utilisation in hypnosis - building on an Ericksonian approach

Utilising hypnosis with children - a girl returns from a dog phobia

Hypnosis in psychosomatics - utilisation after Erickson

Listening for Solutions in Hypnosis - utilisation after Erickson

The Poetry of Therapy - Creating effectiveness after Erickson

Coaching for Solutions

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