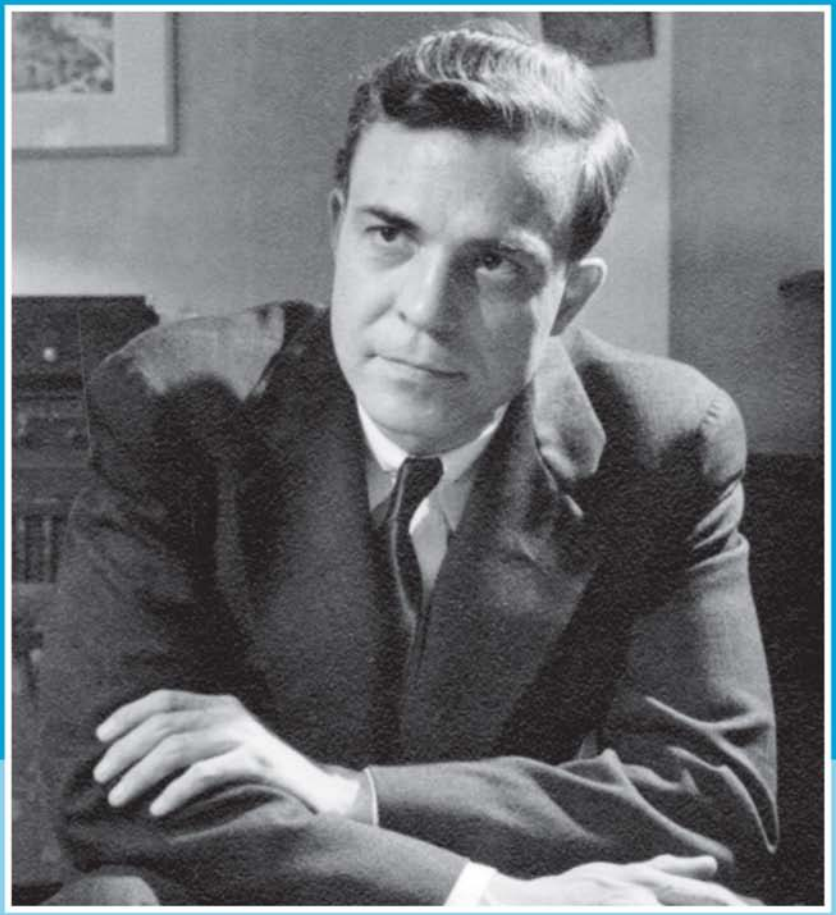
Milton H. Erickson M.D. | Ernest Lawrence Rossi Ph.D.

THE FEBRUARY MAN

EVOLVING CONSCIOUSNESS AND IDENTITY IN HYPNOTHERAPY



ROUTLEDGE

THE FEBRUARY MAN

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Milton H. Erickson, M.D.
&
Ernest Lawrence Rossi, Ph.D.

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Present for 1979 *Commentaries*: Dr. Milton H. Erickson, Dr. Ernest L. Rossi, and Dr. Marion Moore.

Session I, Part 2

Present in 1945: Dr. Milton H. Erickson, Dr. Jerome Fink, the subject ("Miss S" or "Jane"), and the subject's friend, "Ann Dey."
Present for 1979 *Commentaries*: Dr. Milton H. Erickson, Dr. Ernest L. Rossi, Dr. Marion Moore, Dr. Robert Pearson, and an unidentified visitor.

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Present in 1945: Dr. Milton H. Erickson, Dr. Jerome Fink, the subject ("Miss S" or "Jane"), and Mr. Beatty.
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Foreword

Sidney Rosen, M.D.

How good it is to hear Erickson's voice again! And our reliable and steady guide, Ernest Rossi, after more than 15 years of studying and practicing Erickson's approaches, brings us his mature understanding, while allowing us to witness the process by which he came to this understanding. As in his previous books with Erickson, Rossi does not intrude himself between Erickson and the reader. He presents a transcript which allows us to actually witness Erickson at work, in 1945. Then, in his typically modest fashion, he acts as an inquiring student, encouraging Erickson to explain the thinking behind his therapeutic approaches. He and Erickson also discuss many other interesting subjects, including the nature of therapy, human nature, the development of consciousness, and even the evolution and function of slang and obscenity.

Perhaps because Erickson, one year before his death, was ready to explain himself more than he had previously, Rossi was able to get almost direct answers to some of his questions, rather than the colorful and metaphorical responses which Erickson seemed to prefer. Certainly those metaphorical and "guru-like" answers have stimulated the thinking and growth of hundreds of his students, but we appreciate some simpler, more easily grasped formulations as well. Even Margaret Mead (1977) wrote about the pleas which she and other students of Erickson made "for simpler, more repetitious, more boring demonstrations . . . ." Rossi, with his patience and persistence, was able to evoke some simpler, clearer explanations to help us understand the essence of Erickson's work.

In this book we can see the amount of work which Erickson put into preparing his patient for changing. Even though it was done in a

playful, and sometimes offhand manner—playing games with words, having her write upside down and with both hands at the same time, and getting her to agree "absolutely," in advance, that she would be cured—it is apparent that he felt that this preparation was essential. At the same time he was fine-tuning the therapeutic relationship, maintaining a challenging and yet trusting tone. As Rossi points out, he was mostly concerned with encouraging and stimulating the *processes* which will enable the patient to change. Insight seeking was only one of these processes, perhaps one of the least important. When we observe Erickson guiding his patient towards insights and connections with the past, we may, indeed, speculate that this was done largely in response to *her* conviction that understanding of the past would be necessary before she could be cured.

Erickson would say to us, "It is the patient who does the work. All that the therapist does is provide conditions in which this work can be done." Erickson worked thoroughly and carefully to provide the necessary conditions. He explored and utilized all conceivable elements in communication and education in order to do so. He emphasized, for example, the importance of utilizing the evocative powers and the multiple meanings of words—the patient's and his own. A beautiful example of his respect for words is seen when he notices, in the patient's automatic writing, that she has written a word which can be read as either "living," "giving" or "diving." He uses this observation as a basis for organizing the therapy around the patient's swimming phobia ("diving"), with the belief that, when this phobia is overcome, she will also be freer in "living" and "giving" and will be relieved of her depression. Some readers may feel that he was arbitrary about the interpretation of this one word or of others. In fact, Rossi, himself, accuses him at one point of making "inferences." But we cannot help but be impressed by his painstaking attention to every expression of the patient, as well as to each of his own communications.

We witness, in addition to his deft and careful use of words, many forms of indirect suggestion—phrasing suggestions as questions, for example. While doing this "manipulating," he was constantly asking the patient for *permission* to intervene and was always ready to change his interventions in response to the patient's reactions. Thus, he

demonstrated the respect which was a hallmark of his way of dealing with patients. In fact, we must comment at this point that, although much of the writing about "Ericksonian techniques" emphasizes the brilliance and ingenuity of the therapist, when we observe Erickson, himself, at work, we are impressed more by the presence and the unique creativity of his patients.

What is the value of utilizing regression as the dominant feature in this therapy? While I was reading this book, it became clear to me why Erickson tended to treat almost everyone like a child! I suddenly understood why, at least in his later years, he seemed to be so enamored of corny jokes, childish puzzles and games. I now feel that he understood, probably from having learned it from working with adult patients in the hypnotically regressed state, that it is precisely in this "child state" that we are most open to learning, most curious, and most able to change. In order to intensify the patient's experience of regression, Erickson worked consistently to create a remarkably convincing illusion that he really was an older person talking to a young child. He had the "child" reenact and abreact to traumatic experiences and, through discussions, guided her through a reeducation process. As a result, the "child" had new experiences to add to her memories—positive experiences with a caring and understanding adult. These "corrective regression experiences," as I have called them, exerted a long-lasting effect on the patient, even after she returned to her "adult self."

Among the reeducation experiences which the "child" underwent in her discussions with "The February Man" (Erickson "visited" her, in hypnotic age regression, for "several years" in February), were some which have become known as "reframing." There are some beautiful examples of reframing in this book. For example, the patient had been feeling guilty over death wishes towards her younger sister and had blamed herself for the sister's near drowning experience. Erickson's "reframe" of this led to his saying to her, "All of these years you have been condemning yourself, have you not? . . . Why? Perhaps so that you could reach a still better and larger understanding of yourself." (Self-condemnation is reframed as a step toward self-understanding.) Sibling rivalry is reframed as follows: "Being jealous of Helen when you were a little baby had one meaning. Now, when you are grown up,

it has another meaning entirely. Wouldn't you want a little baby to appreciate its own worth, its own personality and its own needs enough to defend them in any way it understood?"

At one point, Rossi suggests to Erickson that the basis of his hypnotic therapy is "abreaction and a restructuring of the patient's mental processes." Erickson corrects him, saying, "It is not restructuring. You give them a more complete view." Rossi is then able to sum up his understanding with the comment, "It (hypnotic therapy) simply facilitates a more complete, comprehensive point of view and frees one from the limitations and literalism of childhood." This is a far cry from the belief of many therapists that hypnosis involves some kind of reprogramming.

In the treatment of this case we see the beginning of an approach which Jay Haley was to call, "prescribing the symptom." When the patient was apparently ready to try to swim, Erickson forbade her from doing so. He explains, "I place *my* inhibition on her swimming." After doing this, he points out, "I can change mine!" And, of course, he withdrew *his* inhibition at the time of his next session with her.

Erickson also gives an interesting rationale for having other people present during therapy. "... This fear, this anxiety about swimming, is observed in relation to other people.... You need to get over some of these fears and anxieties ... that are manifested in relationship to other people and concealed from other people ... by bringing them out so that it can be realized that one can live even if others do know. We like people best when we know that they are real in a lot of little things." Group therapists have known this for a long time, but we must remember that group therapy was not much used in 1945.

I admit that, like many others, when I first read the "February Man" case as it is presented in the books, *Hypnotherapy* (Erickson & Rossi, 1979) and *Uncommon Therapy* (Haley, 1973), I was excited by the idea that this appeared to be the first instance in which a therapist had actually changed the history of a patient. I now understand that this change, like many other changes in therapy, actually consists of "widening the frame," or expanding awareness, in the present, not in the past. In fact, I remember Erickson's frequent comment that "understanding the past will not change the past." The "reality" of age

regression has been, justifiably, questioned. I believe that, in addition to an "opening up" to actual memories, a large element of fantasy is frequently involved. But regression does not need to be "real" in order to be helpful. Simply the subjective feeling of being young may make it possible for a patient to view matters from different perspectives. It may also intensify the therapist-patient contact and lead to therapeutic abreactions.

Before terminating the therapy, Erickson helped the patient to ventilate hostility towards him. He reasons that this is important because patients often are angry at the therapist for taking away their symptoms and may express their anger by destroying their therapeutic work. Here, again, he shows exquisite concern for maintaining all therapeutic gains.

The time is approaching when we will see more critical reviews of Erickson and his work. Even those of us who were "hypnotized" by him will evaluate our experiences differently with the passage of time. At this point, however, when I think of him, it is with love—even though he was not a particularly "loving" person, in the usual sense of the word. He conveyed his love and his respect, for me and for countless others, by "telling it like it is." For example, once, when I told him that I wanted to be able to experience rather than to intellectualize, he responded, "Your behavior indicates otherwise. You prefer to understand rather than to experience." Typically, he followed this incisive comment with the suggestion, "but you can intellectualize in different ways." Finally, he led me, in trance, into an experience which combined thinking *and* feeling. He began with a hypnotic induction which started with "In my way of living I often like to climb a mountain—and I always wonder what's on the other side." Thus he role-modelled a different way of intellectualizing—by *wondering*. And it is only now, eight years later, while writing this foreword, that I realized that he had done that!

For those of us who have worked with Erickson, there is always much more to learn from him as we peruse and study his work—especially the verbatim accounts of his work and thinking as presented here. For the vast majority of readers, for whom this may be the first or second book they have read about Erickson, it will prove well worth-

while to read it either quickly or slowly. If read quickly, it will lead to an appreciation of why so much interest has been devoted recently to Erickson. If studied slowly, it will stimulate ideas which will enrich the work of any therapist. Thank you, Ernest Rossi, for bringing us this gift.

Sidney Rosen, M.D., President,
New York Milton H. Erickson Society
for Psychotherapy and Hypnosis.
Author, *My Voice Will Go With You: The Teaching Tales of Milton H. Erickson.*

Introduction

Ernest Lawrence Rossi, Ph.D.

This volume on the "February Man" transcends the typical case report one finds in the literature of psychotherapy. It goes beyond the usual forms of analysis and psychotherapy to focus on the possibility of facilitating the evolution of new developments in consciousness and identity. The late Milton H. Erickson, M. D., who is widely regarded as the most creative hypnotherapist of his generation, originated the unique approaches documented in this book. What is most noteworthy and valuable about this material is that it is the only complete, verbatim record of an entire hypnotherapeutic case dating from the middle of Erickson's career when his innovative genius was in full flower.

In addition, we are fortunate in being able to add Erickson's own detailed commentaries on this case, recorded in 15 hours of discussion that provide an unparalleled understanding of his thinking and methods.

The February Man is a fascinating case study illustrating the use of profound age regression in the treatment of a depressed young woman. In addition to chronic depression, the young woman had a severe and dysfunctional water phobia stemming from a deeply repressed and traumatic memory of being responsible for the near drowning of her infant sister. In treating her case, Erickson assumes the supportive role of the "February Man" who "visits" the woman many times during the course of four lengthy psychotherapeutic sessions. During these sessions, he utilizes classical hypnotic phenomena such as age regression, time distortion, automatic writing, amnesia and others, to explore the patient's entire childhood and youth. As the "February Man," he provides her with the seeds for new developments in her adult personality.

It is unlikely that any more complete verbatim records of Erickson's work from this time period will ever surface. Even if such records were somehow found, still we would not have Erickson's own detailed commentaries on what he did—and without his commentaries, it is almost impossible to understand his work. This volume is thus the last of vintage Erickson: There can be no more of his most enlightening commentaries on human nature, the evolution of consciousness, the essence of psychotherapeutic work, and the essence of his own innovative hypnotherapeutic approaches.

The History of This Volume

This volume has a long history; it has slowly evolved over more than 40 years. It began back in 1945 when Erickson informally demonstrated his unique approach to hypnotherapy, using a nurse as a subject for a small group of professional colleagues and students.* There were only four hypnotherapeutic sessions with this nurse, whom we call "Miss S" and "Jane." The sessions were recorded verbatim in stenographic notation by Miss Cameron and typed up with only a few unimportant omissions. Many years later in 1986, I was able to contact Miss Cameron and ask her for her recollections about Erickson during that time period. She responded with the following letter.

Miss Cameron: A Secretary's Recollection

> While taking a meeting one must concentrate almost exclusively on one's work, but I do recall a feeling of almost unbearable tension in Dr. Erickson's office at Eloise when the subject faced up to her feelings of extreme hostility toward her family. I thought at the time it was emotional surgery. The last session at which I was present was definitely lighthearted, with the subject laughing frequently and looking relaxed and happy.

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*Jerome Fink, M.D., Mrs. Mary Fink, Mr. Beatty, and the subject's friend, Miss Ann Dey.

Dr. Erickson was a really great boss. He understood other people's limitations better than they themselves did, which naturally translated to consideration. My first few days in the office were memorable. Apparently he had had no secretary for a time. In one corner there was a table loaded with books, papers, and paraphernalia. The stenographer's desk was covered with reprints, letters, and all manner of items waiting to be filed or answered. I began to read and sort.

During the first two days Dr. Erickson dictated only one letter. I read, stacked, and tried to keep questions to a minimum. One thought kept recurring: This may be a case of biting off more than one can chew. But as Dr. Erickson left the office at the end of the second day, he remarked that he was going to enjoy having me work in his office. It was a moment to stand tall—all five feet of me.

A few days later he asked if I could draw. I was frank: not even a straight line with a ruler. So he set me to copying an illustration he used in lecturing to his medical students. The result was an abomination but he said it was "adequate" and proceeded to use it. My ears grew red every time he took it from the office.

Frequently Dr. Erickson would send me to take verbal productions of a patient. He used these later in teaching his medical students to distinguish different types of mental problems. One woman who had been a patient at Eloise for many years spoke constantly in single words or brief phrases which appeared to be totally unrelated. She was a dear little lady and talked to me for several minutes. During that time she spoke only one complete sentence: "Chase and son is the name." It would have been easy to believe that she had been listening to radio ads for Chase and Sanborn coffee, a highly advertised brand name at that time. Dr. Erickson went to the heart of the matter. A social service worker learned that many years earlier the patient, never married, had given birth to a child—a dire event when she was young. This was typical of his understanding of the crises in the lives of people he worked with and treated.

The people who came to study and work with Dr. Erickson made the job especially rewarding. The visiting doctors and the medical students at that time appeared to be tremendously interested in hypnosis and in Dr. Erickson's methods of treating patients, especially those who had recently developed problems. Any time that he was scheduled to speak, the designated area became filled to capacity. Whenever he told his students he would meet with them at a specified time

in the afternoon or evening, word seemed to spread around Eloise with a speed that completely outclassed smoke signals or jungle drums. It was amazing. At the appointed time the room would be filled not only with students and people from Eloise, but with a fair quota of strangers. Always, Dr. Erickson's control of a crowd was unbelievable. As a long-time theater buff and one-time theater employee, I marvel whenever I recall it. Most performers watching him would have turned completely green.

One of Dr. Erickson's hobbies appeared to interest many people who came to his office. The windowsill behind his desk held containers of various shapes and sizes which he had made, and each one held different varieties of cacti. He explained that children didn't bother them so they made excellent houseplants.

An occasional dinner with the Ericksons was always an enjoyable event. Mrs. Erickson was a charming hostess; each of the children had a distinctly individual style. You may have heard this—if so, bear with me. The children were encouraged to work and save money. When I was at Eloise, Bert and Lance gardened and the family bought their produce, and each youngster was paid for work which was done around the home. At the end of the year they received a bonus equal to whatever had gone into the savings accounts. This idea has always seemed like such a winner to me that I keep relating it to young people I know who have children.

Working as Dr. Erickson's secretary was a privileged opportunity to observe and learn. It was, in fact, the high point of my experience in offices. I am happy to know that his work is being so widely recognized—obviously much of this is due to your efforts—and will become an important part of the world of tomorrow.

Miss Cameron's typescript of the case study of Miss S rested quietly in Erickson's files for about 30 years, until he gave it to me for private study when I began working with him in the early 1970s. During these early years, however, I simply was not able to understand the significance of this case and why Erickson kept referring to it in order to illustrate this or that unique feature of his work. My puzzlement about this case is easy to understand in the light of the views of Jerome Fink, M.D., who was actually responsible for Erickson's original meeting with the patient.

Dr. Jerome Fink's View of Erickson's Work

The other member of the original small group who witnessed this therapeutic case was Dr. Fink, who was a medical intern at the time. Following is an account of the development of the therapeutic situation:*

Fink: The patient, Miss S, was an unusually talented and intelligent 19-year-old student nurse who was invited to my home originally because of her interest in psychiatry. The purpose of the evening visit was that she see and participate in hypnotic behavior, with an eye toward a better understanding of elementary psychodynamics.

In the preliminary discussion of hypnosis, at which time the "average" behavior patterns of the trance state were discussed, it was noticed that Miss S was paying extremely close attention. I immediately recognized both the development of an intense transference and her keen desire to be put into a trance. She therefore was told that she would have the honor of being the first subject.

A profound trance was easily induced by the hand levitation method and, because of the limited time available, she was rapidly introduced to the various hypnotic phenomena. Less capable subjects often refuse to cooperate when adequate time is not allotted. It was my practice with naive subjects to allow them to write something during their first trance experience. Most subjects refrain from writing anything which might betray an old conflict—for example, they usually write their name. In this case, however, Miss S wrote: "This damn war." To avoid any premature psychodynamic confrontation, the paper was removed and she was awakened with the suggestion that she have an amnesia for events of that trance. It was also demonstrated, to her amazement, that she was capable of automatic writing. This latter fact was soon to be of further value to the patient.

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*These remarks by Dr. Fink are summarized from several conversations with Ernest Rossi and Margaret Ryan.

Several days later, upon meeting Miss S on a hospital ward, I was questioned about events which had occurred during her period of amnesia. I gave her only indefinite and evasive answers. She persisted in her questions, adding an apparently unconscious statement of her "fear of water." I suspected this was an indirect plea on the part of her unconscious for psychotherapy. Her answers to my questions, worded so as to be understood only by her unconscious personality, confirmed my suspicion. Not long thereafter, I was approached by Miss S's friend, "Ann Dey," and a second evening of hypnotic experience was requested. Arrangements were made accordingly.

Dr. Erickson was brought into the situation because I was not a staff doctor; I was an intern, and all of a sudden this young woman had come to me with a phobia. I had worked with Milton every year since my sophomore year in medical school. Under his auspices I had given the senior medical students lectures in hypnosis when I was only a junior. Milton and I were very, very close.

I always had a need to be accepted, and I became exceptionally proficient in hypnosis—probably because it was so dramatic. Then people began referring to me as Svengali and became very much afraid of me because they thought Erickson's intuition was rubbing off on me and that I could "see through them." There was a big movement in our psychoanalytic group, and the message was, if you want to be a psychoanalyst, you had better reject Erickson. I don't have time for all those details, but the conflict ultimately resulted in the dissolution of the Detroit psychoanalytic society.

Ryan: Were they against his personality or the type of work he did?

Fink: I think it was the way he worked. He was *so* intuitive. I went out to the Menninger Clinic to talk to a group of medical students, and I remember the Chief of Staff telling me that Erickson was damnably intuitive. He'd been studying a case for three months (the patient was a female catatonic schizophrenic). Erickson was out visiting, saw the patient for 30 seconds, and said, "Well, this girl's a catatonic schizophrenic." I asked him how Erickson had come to this

conclusion. He recounted that Erickson had said, "Well, if you noticed, this girl was moving her thumb from the palm of her hand to the end of her fingers, just unconsciously. She didn't know where her ego boundaries were. She didn't know whether she ended up at her elbows or outside of her body."

I worked with Erickson on the psychiatric examination staff at the army induction station during World War II, and I saw so many things like that. He was brilliantly intuitive. But I don't honestly believe that he was sufficiently organized at this stage in his professional life that he was conscious of all the things that are discussed in the case presentation as it was discussed with Rossi in this book.

Ryan: You believe that Erickson was doing something that he knew how to do on an intuitive level. Later on, after the fact, you can discuss it from any theoretical point of view, but it doesn't mean that is what Erickson saw at the time.

Fink: *Exactly.* That's exactly what happened.

Ryan: What this comes down to is that Erickson did much of what he said he did, just not for the reasons everyone is figuring out *post hoc.*

Fink: Exactly! Everyone seems to have 20/20 vision in retrospect. The difficulty I felt was that in many, many instances in the transcript of this book Dr. Rossi would say, "Did you do such-and-such?" And Erickson would say, "Uh-huh." In my way of thinking, it's barely possible that Erickson probably never thought of a particular viewpoint until Rossi asked him, and then he answered yes.

It was between July 1st of 1945 and the first of May of 1946 that Erickson gave me this stack of transcripts (the originals on which this book was based).

Ryan: Do the transcriptions strike you as representative of what transpired in the sessions? Or do they feel falsified to you?

Fink: I'm not quite sure yet. There is a point early on in the transcript when Dr. Rossi asks: "Are you actually doing such things with planned intent? Why?! I cannot believe you actually did this! I've been studying with you for seven years now and I still find it hard to believe you're not pulling my leg with all sorts of involved *post hoc* intellectualizations about a case like this. Yet this evidence from over 30

years ago is right here before us. Why do I find it so hard to believe?"

I believe Dr. Rossi was correct in that he almost dares to question the Master. I think Erickson always had this need to be right at all times, and Rossi, in my opinion, was "right on" in his feeling of doubt; many of the psychodynamics discussed were *post hoc* intellectualizations. Erickson was an exceptionally intuitive fellow, and that he cured this girl there is no doubt. What I'm questioning is whether Erickson actually thought everything out ahead of time.

I knew Erickson very well in his younger days. Any number of times he and Betty came up to our home for social visits. I was Erickson's protégé for about four years. Sometime during 1942, when I was a sophomore in medical school, Erickson began his lectures to us on hypnosis. We became very well acquainted, and he took me under his wing, so to speak.

Through the years I've had this absolute block about going into hypnosis myself. Erickson made several very serious attempts, including one or two with my consent—and for some reason, I was never able to go into a trance with him. I don't know why I didn't. I suppose I had enough resistance and enough disbelief. I became a good operator despite the fact that I could not go into a trance for anyone.

I think this book is very worthwhile, but some of the concepts developed herein need to be taken "with a grain of salt." As I said, Erickson was exceptionally intuitive, but he couldn't have consciously figured out all the psychodynamics at the time. He had never met the subject before the first long session.

Ryan: Is it possible that some of the concepts developed in this book might still have validity? Whether or not Erickson planned them consciously, he may still have been executing them on an intuitive level.

Fink: Oh, there's no doubt about that! He operated in that way, but I think he was the only man in the country who *could* operate that way!

This engaging, frank interview with Dr. Fink points out the limitations of this or any other *post hoc* case analysis. We simply don't know

to what degree the highly intuitive therapeutic engagement of a brilliant clinician can be understood in the light of a later cognitive analysis. There is much recent research, in fact, that strongly suggests that the later rationalizations of the "left hemisphere" are simply stories to make any kind of comfortable sense of the "right hemisphere's" nonconscious processes (Gazzaniga, 1985). Even with these limitations in mind, I still persisted in my efforts to understand Erickson's approach.

The February Man Approach

Between 1973 and 1981 I coauthored a number of papers (Erickson & Rossi, 1974, 1975, 1976, 1977, 1980) and three books on hypnotherapy with Erickson (Erickson, Rossi & Rossi, 1976; Erickson & Rossi, 1979, 1981). I also edited four volumes of his collected papers (Erickson, 1980). Throughout this period, I gained more and more insight into his ways of thinking and gradually was able to comprehend something of the vast scope of what he called the "February Man approach." In 1979 we published a short version of the February Man as the final chapter of our book, *Hypnotherapy: An Exploratory Casebook.* In that example, I emphasized how Erickson had used the February Man to facilitate the creation of new identity and consciousness in patients who had experienced several levels of deprivation in their early life experience. This approach was a significant step beyond all previous forms of therapy that focused on the analysis and working through of psychological problems from the past.

With this preparatory background, I was finally ready to explore in greater detail the four sessions presented in this volume. Erickson and I recorded about 15 hours of commentaries on these four sessions,* going over each word, phrase, and sentence in repetitive and tedious detail to ensure that we were reaching an adequate comprehension of the fine points of his ways of working. A number of other professionals trained by Erickson (Marion Moore, Robert Pearson,

*These audiotapes are available for research and study at the Milton H. Erickson Foundation, 3606 N. 24th St., Phoenix, Arizona, 85016.

Sandy Sylvester) informally wandered in and out of one or another of these commentary sessions, asking questions and adding their perspectives to our developing understanding. I edited these commentaries and read most of them back to Erickson in a second set of commentary sessions for his final points of clarification and approval.

This state of the manuscript was completed between the Spring and Fall of 1979, the year before Erickson's death. The volume was to have been our fourth, co-authored project. It required only an introduction to make it suitable for publication. But with Erickson's passing in the Spring of 1980, I fell into a state of mourning and was not able to look at the manuscript for another eight years. During these years I distracted myself outwardly by quietly coediting a series of volumes on Erickson's seminars, workshops, and lectures (Rossi & Ryan, 1985, 1986; Rossi, Ryan, & Sharp, 1984), and by making a few independent forays into the psychobiology of what Erickson called the psychoneurophysiological basis of therapeutic hypnosis (Rossi, 1986b; Rossi & Cheek, 1988).

Inwardly, I had a series of dreams in which Erickson always appeared to me as a teacher about 40 or 50 years old. This was surprising since I did not know him until he was in his seventies. However, Erickson was in his 40s and 50s when he was creating the February Man approach, and giving the lectures, seminars, and workshops I was editing. Apparently, my inner mind was assimilating Erickson's teaching from that earlier phase of his career before I knew him.

I was finally able to return to this manuscript in 1987 with a fresh perspective, eager to learn if it still made sense and had anything of value for a new generation of students who were being overwhelmed by the sheer volume of books and papers that have been published about Erickson recently. As I reviewed the evidence of his carefully detailed thought, I realized that this volume could be an important corrective to those who describe Erickson's work as entirely intuitive and idiosyncratic. Erickson certainly was intuitive in the sense that he frequently relied on his spontaneous unconscious associations to initiate the psychodynamic exploration of a new case. He might even appear to have been idiosyncratic in some of his unorthodox ways of setting up "field experiments" to assess the phenomenological reality of hypnotic experience. Erickson always insisted, however, that his

carefully prepared verbal and nonverbal procedures for facilitating hypnotic experiences were essentially rational in utilizing the patient's unique individuality and potentials. His commentaries in this volume are a testament to the depth and innovativeness of his thinking and therapeutic work with this utilization approach to widening consciousness and facilitating the development of new identity in hypnotherapy.

SESSION I: PART 1*

Approaches to Therapeutic Hypnosis

The first few sections of this presentation are very difficult to appreciate 40 years after they were recorded by a stenographer. Without the vocal tones and body gestures that gave important nuances of meaning to the jokes, puzzles, and games contained in these sections, the transcribed word alone is very confusing. The general thrust of this initial conversation between Erickson, Dr. Fink, and the subject is to indirectly attract, motivate and engage her attention (stage one of the microdynamics of trance induction, Erickson & Rossi, 1976/1980), and then to depotentiate her habitual conscious sets via confusion, shifting frames of reference, distraction, cognitive overloading, and non sequiturs (stage two of the microdynamics of trance induction). If the reader feels confused and overloaded trying to make sense of these first few sections, there can only be the consolation and wonder of how much more bewildered the subject must have felt—even though she tries to keep up a brave front in the face of the associative verbal onslaught going on about her.†

1.0 *Confusion: Associative Games and Puzzles to Initiate Response Readiness and the Hypnotic Process*

Erickson: . . . Getting away from the cockle shells, how do you like Gene Autry?

Fink: I certainly ought to be able to ride a horse like he can. Or

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*Present in 1945 for this portion of Session I: Dr. Milton H. Erickson, Dr. Jerome Fink, Mrs. Fink, the subject (who is also referred to as "Miss S" and "Jane"), and the subject's friend, "Miss Dey." Present for 1979 commentaries: Dr. Milton H. Erickson, Dr. Ernest L. Rossi, and Dr. Marion Moore.

†Words or sentences printed in bold type are referred to in the commentaries that follow.

doesn't that make horse sense? I'm off on the wrong foot! How do I like Gene Autry?

Erickson: **What's that got to do with a garden?**

Fink: Well, it contributes fertilizer to a garden.

Erickson: **How do you get from tumbled to garden to Gene Autry?**

Fink: Purely schizoid.

Erickson: Can you hum it? [*Dr. Fink hums* Drifting Along with the Tumbling Tumbleweed.]

Fink: Tumble . . . tumbling tumbleweed . . . Gene Autry.

Erickson: Yes, that's it. He's not tumbling. I inquired about his garden—Gene Autry sings, *The Tumbling Tumbleweed.*

Fink: It's a song to remember.

Erickson: It's not a song—just a horse of another color!

Subject: **Here I was trying to connect it up with. . . !?** [*Subject blocks in confusion.*]

Fink: And yet I missed it.

Erickson: I'm very certain he doesn't remember it. And your remark should have refreshed his memory. But his memory wasn't refreshed. Therefore he didn't hear you. [*Subject moves closer to Miss Dey.*]

Fink: Well, that's one on me.

Subject: What's she doing?

Fink: She's writing a letter. To a friend.

Rossi: [*In 1987*]* The session begins with an apparently irrelevant conversation wherein Milton Erickson asks Dr. Fink if he likes Gene Autry (a popular singing cowboy in that time period).

Dr. Fink replies spiritedly but with poor puns about horse sense and getting off on the wrong foot. Erickson then introduces an associative game by asking the non sequiturs of, "What's that got to do with a garden?", and "How do you get from tumbled to garden to Gene Autry?"

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*When commentaries were written by Rossi in 1987, they are indicated by the bracketed information [*In 1987*].

The outcome of this initial word play, however, is immediately evident in its effect on the subject's consciousness: she is obviously confused but does not realize that Erickson is doing it to her *indirectly.* It seems as if Erickson is not even addressing her; he knows she is listening but he acts as if he is engaging only Dr. Fink.

The subject soon shows evidence of trying to join the puzzling associative game going on around her when she says, "Here I was trying to connect it up with [she blocks in confusion]." She thereby indicates that she is confused—an ideal state for initiating hypnosis, because her attention is apparently focused within the ongoing dynamics Erickson is initiating, yet she needs a clarifying direction which she hopes to receive from either Erickson or Dr. Fink. This need for clarification indicates that she is now in a state of *response readiness:* she is ready to respond by accepting any clarifying suggestions. Erickson regards this state of response readiness as an ideal preparation for initiating a hypnotherapeutic experience.

1.1 *Questions, Confusion, Not Knowing, and Non Sequiturs to Facilitate the Microdynamics of Trance Induction*

Erickson: What color is that brown?
Subject: I haven't any idea. All I know is that it is brown.
Erickson: What study was mentioned?
Fink: Obviously a study in brown.
Subject: I'm glad I know what that word is.
Erickson: Who's in a brown study?
Fink: I am—a billowy, dark brown.
Subject: Does that mean anything?
Erickson: No. He's just fascinated by the sound of words.
Mrs. Fink: Dr. Erickson, how can you tell brown?
Erickson: It was easy, after I was formally introduced to him.
Fink: That was sort of a bilious green.
Erickson: **Why did Jerry challenge you with automatic writing?**
Subject: **I must think up an appropriate answer here.**

Erickson: Now let's give Jerry some excellent help. What was my question?

Subject: I don't think I can help him. **I was lost three or four blocks back.**

Rossi: It's difficult to follow these passages but one thing is abundantly clear. The subject, Miss S, is again admitting confusion when she says, "**I was lost three or four blocks back.**" In this we see the typical five stages of the microdynamics of trance and suggestion (Erickson & Rossi, 1976/1980, 1979) beginning to take place:

(1) her *attention has been focused* on the topics you [Erickson] are introducing;

(2) her own *habitual mental sets have been depotentiated* and she becomes *confused* as she desperately tries to follow the conversation;

(3) she is, without quite realizing it, being sent on *creative inner searches* within her own mind;

(4) the inner searches are *activating unconscious processes* which

(5) establish a *readiness for a creative hypnotic response.*

Indeed, it is in this context that you bring up the first hint of the hypnotic work to come by asking, "**Why did Jerry challenge you with automatic writing?**" The subject responds with perplexity ("**I must think up an appropriate answer here**"), whereupon you immediately compound her confusion by presenting yet another non-sequitur about giving Dr. Fink help and answering your question.

Erickson: Into each life some confusion should come—also some enlightenment!

Rossi: Confusion is necessary to break down her learned limitations so that the new can be received into consciousness. You continue this confusion approach in the next section with a series of questions and statements that evoke a further sense of *not knowing*. This not knowing sets in motion the unconscious processes of inner

search which may evoke the hypnotic response of automatic writing.

1.2 *Enigmas, Puzzles, and Cognitive Overloading; Activating the Subject's Potentials; The Ethics of "Mind Games"*

Fink: This isn't a warm brown, is it?
Erickson: I'll give you the help you want. All you have to do is take it. Now here's the help. St. Peter ought to catch halibut. Why?
Miss Dey: We'll let you figure it out. That will give you the clues.
Fink: Will you fill in two missing letters for me?
Subject: Now comes the dawn. It's so simple, isn't it?
Erickson: My error, Jerry.
Fink: Maybe it should be St. Andrew.
Erickson: My error. I'll correct it. But that will be a dead giveaway if I correct it now.
Subject: Are you going to let it go on like that?
Erickson: Some poor lad over the canyon hollered, "Why?"
Subject: Now I'm straightened out, too.
Erickson: Mary, if you're suffering so much, I'll take you out to the kitchen and tell you about it.
Fink: That's why he's a genius and I'm not.
Miss Dey: It's really an enigma, isn't it?
Fink: Would you answer one question?
Erickson: Yes.
Fink: Are you giving me the letters with which to spell the word?
Erickson: I've already answered your question. You asked me if I would answer one question and I said, "Yes." Do you recognize that?
Fink: I do, only too well. Let's see, how can I reword that? Is each word a clue to a letter?
Erickson: Do you suppose he is trying to get me to answer a second question now that I have answered one?
Fink: Uh-huh!
Erickson: That's right. Now how late was that train?

Fink: About twenty minutes.

Erickson: I thought you never would get around to it.

Fink: It's so simple! Does that mean anything that is very important related to something that should be known now?

Subject: God! Wow! Now answer that one!

Fink: You answer it.

Erickson: [*Taking a clipboard*] But you're the one that was looking.

Fink: The word was *splotchy.*

Erickson: Well, what's that got to do with this page?

Fink: Oh, gee!

Erickson: How would you describe that page?

Fink: Do you mean to tell me that all the time I was trying to figure out that word—

Erickson: I was just describing to you by that sentence the appearance of the page, and you are still over there and not here.

Fink: No, I'm right over there now!

Erickson: All right. Now what's that got to do with Ella Fink?

Fink: I guess we're both dumb animals.

Erickson: That was simple.

Fink: Very simple.

Erickson: How did you like his process of figuring that out?

Subject: It was beautiful.

Miss Dey: Why did you take *s-t* from *saint* and leave the rest?

Fink: *Saint* is abbreviated to be *St.*

Erickson: I used St. Peter to remind him of the enigma, and I **began with the reminder and ended with the reminder to mess him up in his thinking.**

Fink: I was following the pattern you had followed there.

Erickson: There were four things there. That's why he couldn't figure it out. If I had only thought of: "St. Peter's lady ought to catch halibut," you might have caught on.

Fink: St. Peter didn't have a lady. Oh, me! Because if he had, he would be ruler of the other domain!

Miss Dey: Do you have proof of that?

Fink: No, and I don't care to pursue that statement any further, either.

Subject: I still want to get that four-letter detail.

Erickson: Constantinople is a long word. Can you spell it? Does "that" mean something? There are four letters, aren't there?

Subject: It's so simple—once somebody else works it out for you.

Fink: That was very good.

Erickson: You have been a very willing worker tonight, Jerry.

Subject: You're joking, of course.

Erickson: I'll bet it doesn't look that way.

Subject: No, it doesn't. **It's so complicated, though.**

Rossi: [*In* 1987] The degree of confusion and non sequitur is so great in this section that one gets the feeling of a rather chaotic mental ping-pong game. A sense of play can be detected as we watch Erickson go back and forth merrily between Dr. Fink and Miss S. Indeed it was no small part of Erickson's charm that he would tell people at carefully selected times just what approach he was using to play mind games even as he was doing it. There usually was a rather sweet yet hyperalert and questioning expression on his face as he offered these explanations. As usual, there were many levels of meaning in his behavior, and he would carefully observe which levels were being picked up by the subject.

On one level he was genuinely having fun playing mind games that shifted people's associative processes about in ways that they usually could not discern. On another level these games were an important form of *field experimentation** wherein he was doing exploratory research on the nature of consciousness and the hypnotic process. On still another level his seeming ingen-

*See "The 'Surprise' and 'My-Friend-John' Techniques of Hypnosis: Minimal Cues and Natural Field Experimentation," in Erickson, 1964/1980.