

Erickson Native Hypnosis - Acts 8

Intro - Pastor's Duties

Jeremiah 23:1-4 Woe be unto the pastors that destroy and scatter the sheep of my pasture! saith the LORD. 2 Therefore thus saith the LORD God of Israel against the pastors that feed my people; Ye have scattered my flock, and driven them away, and have not visited them: behold, I will visit upon you the evil of your doings, saith the LORD. 3 And I will gather the remnant of my flock out of all countries whither I have driven them, and will bring them again to their folds; and they shall be fruitful and increase. 4 And I will set up shepherds over them which shall feed them: and they shall fear no more, nor be dismayed, neither shall they be lacking, saith the LORD.

Mark 16:14-18 Later He appeared to the eleven as they sat at the table; and He rebuked their unbelief and hardness of heart, because they did not believe those who had seen Him after He had risen. 15 And He said to them, Go into all the world and preach the gospel to every creature. 16 He who believes and is baptized will be saved; but he who does not believe will be condemned. 17 And these signs will follow those who believe: In My name they will cast out demons; they will speak with new tongues; 18 they will take up serpents; and if they drink anything deadly, it will by no means hurt them; they will lay hands on the sick, and they will recover.

Jeremiah 3:15 And I will give you shepherds (pastors) according to My heart, who will feed you with knowledge and understanding.

James 5:14 Is any sick among you? let him call for the elders of the church; and let them pray over him, anointing him with oil in the name of the Lord:

Worldly Alternatives

Wikipedia has an article on Milton Erickson and his methods.

Beginning in the 1950s, Erickson's use of interventions influenced strategic therapy and family systems therapy practitioners including Virginia Satir and Jay Haley. He was noted for his ability to "utilize" anything about a patient to help them change, including their beliefs, favorite words, cultural background, personal history, or even their neurotic habits. Erickson also believed that it was even appropriate for the therapist to go into trance. He said "I go into trances so that I will be more sensitive to the intonations & inflections of my patients' speech. & to enable me to hear better, see better." Erickson maintained that trance is a common, everyday occurrence. For example, when waiting for buses and trains, reading or listening, or even being involved in strenuous physical exercise, it's quite normal to become immersed in the activity and go into a trance state, removed from any other irrelevant stimuli. These states are so common and familiar that most people do not consciously recognise them as hypnotic phenomena.

The same situation is in evidence in everyday life, however, whenever

attention is fixated with a question or an experience of the amazing, the unusual, or anything that holds a person's interest. At such moments people experience the common everyday trance; they tend to gaze off to the right or left, depending upon which cerebral hemisphere is most dominant (Baleen, 1969) and get that faraway or blank look. (1000 yard stare) Their eyes may actually close, their bodies tend to become immobile (a form of catalepsy), certain reflexes (e.g., swallowing, respiration, etc.) may be suppressed, and they seem momentarily oblivious to their surroundings until they have completed their inner search on the unconscious level for the new idea, response, or frames of reference that will restabilize their general reality orientation. We hypothesize that in everyday life consciousness is in a continual state of flux between the general reality orientation and the momentary microdynamics of trance.

Because Erickson expected trance states to occur naturally and frequently, he was prepared to exploit them therapeutically, even when the patient was not present with him in the consulting room. He also discovered many techniques for increasing the likelihood that a trance state would occur. He developed both verbal and non-verbal techniques and pioneered the idea that the common experiences of wonderment, engrossment and confusion are, in fact, just kinds of trance.

Clearly, there are a great many kinds of trance. Many people are familiar with the idea of a "deep" trance, and earlier in his career Erickson was a pioneer in researching the unique and remarkable phenomena that are associated with that state, spending many hours at a time with individual test subjects, deepening the trance.

That a trance may be "light" or "deep" suggest a one-dimensional continuum of trance depth, but Erickson would often work with multiple trances in the same patient, for example, suggesting that the hypnotised patient behave "as if awake", thereby blurring the line between the hypnotic & awake state. Erickson believed there are multiple states that may be utilized. This resonates with Charles Tart's idea (put forward in the book *Waking Up*) that all states of consciousness are trances and that what we call "normal" waking consciousness is just a "consensus trance". NLP also makes central use of the idea of changing state, without it explicitly being a hypnotic phenomenon.

Indirect techniques

Where classical hypnosis is authoritative and direct and often encounters resistance in the subject, Erickson's approach is permissive, accommodating and indirect. For example, where a classical hypnotist might say "You are going into a trance", an Ericksonian hypnotist would be more likely to say "you can comfortably learn how to go into a trance". In this way, he provides an opportunity for the subject to accept the suggestions they are most

comfortable with, at their own pace, and with an awareness of the benefits. The subject knows they are not being hustled and takes full ownership of, and participates in, their transformation. Because the induction takes place during the course of a normal conversation, Ericksonian hypnosis is often known as Covert or Conversational Hypnosis.

Erickson maintained that it was not possible consciously to instruct the unconscious mind, and that authoritarian suggestions were likely to be met with resistance. The unconscious mind responds to openings, opportunities, metaphors, symbols, and contradictions. Effective hypnotic suggestion, then, should be "artfully vague", leaving space for the subject to fill in the gaps with their own unconscious understandings - even if they do not consciously grasp what is happening. The skilled hypnotherapist constructs these gaps of meaning in a way most suited to the individual subject - in a way which is most likely to produce the desired change.

For example, the authoritative "You will stop smoking" is likely to find less leverage on the unconscious level than "You can become a non-smoker". The first is a direct command, to be obeyed or ignored (and notice that it draws attention to the act of smoking); the second is an opening, an invitation to possible lasting change, without pressure, and is less likely to raise resistance. Richard Bandler and John Grinder identified this kind of "artful vagueness" as a central characteristic of their 'Milton Model', a systematic attempt to codify Erickson's hypnotic language patterns.

Confusion technique - "In all my techniques, almost all, there is a confusion. A confused person has their conscious mind busy and occupied, and is very much inclined to draw upon unconscious learnings to make sense of things. A confused person is in a trance of their own making - and therefore goes readily into that trance without resistance. Confusion might be created by ambiguous words, complex or endless sentences, pattern interruption or a myriad of other techniques to incite transderivational searches."

Scottish surgeon James Braid, who coined the term "hypnotism", claimed that focused attention was essential for creating hypnotic trances; indeed, his thesis was that hypnosis was in essence a state of extreme focus. But it can be difficult for people racked by pain, fear or suspicion to focus on anything at all. Thus other techniques for inducing trance become important, or as Erickson explained:

"... long and frequent use of the confusion technique has many times effected exceedingly rapid hypnotic inductions under unfavourable conditions such as acute pain of terminal malignant disease and in persons interested but hostile, aggressive, and resistant..."

Handshake induction

Among Erickson's best-known innovations is the hypnotic handshake induction, which is a type of confusion technique. The induction is done by

the hypnotist going to shake hands with the subject, then interrupting the flow of the handshake in some way, such as by grabbing the subject's wrist instead. If the handshake continues to develop in a way which is out-of-keeping with expectations, a simple, non-verbal trance is created, which may then be reinforced or utilized by the hypnotist. All these responses happen naturally and automatically without telling the subject to consciously focus on an idea.

Richard Bandler told people that Erickson had taught him this handshake technique. However, it is clear that Bandler embedded some parts in it that were, in fact, impossible for Erickson such as "gradually lessening the pressure with his right hand", which of course was impossible for Erickson since he was almost completely paralysed in his right hand. Bandler talks about this in one of his videos Creating Therapeutic Change.

This induction works because shaking hands is one of the actions learned and operated as a single "chunk" of behavior; tying shoelaces is another classic example. If the behavior is diverted or frozen midway, the person literally has no mental space for this - he is stopped in the middle of unconsciously executing a behavior that hasn't got a "middle". The mind responds by suspending itself in trance until either something happens to give a new direction, or it "snaps out". A skilled hypnotist can often use that momentary confusion and suspension of normal processes to induce trance quickly and easily.

The various descriptions of Erickson's hypnotic handshake, including his own very detailed accounts, indicate that a certain amount of improvisation is involved, and that watching and acting upon the subject's responses is the key to a successful outcome.

Erickson described the routine as follows:

Initiation: "When I begin by shaking hands, I do so normally. The "hypnotic touch" then begins when I let loose. The letting loose becomes transformed from a firm grip into a gentle touch by the thumb, a lingering drawing away of the little finger, a faint brushing of the subject's hand with the middle finger - just enough vague sensation to attract the attention. As the subject gives attention to the touch of your thumb, you shift to a touch with your little finger. As your subject's attention follows that, you shift to a touch with your middle finger and then again to the thumb.

This arousal of attention is merely an arousal without constituting a stimulus for a response. The subject's withdrawal from the handshake is arrested by this attention arousal, which establishes a waiting set, and expectancy.

Then almost, but not quite simultaneously (to ensure separate neural recognition), you touch the undersurface of the hand (wrist) so gently that it barely suggests an upward push. This is followed by a similar utterly slight downward touch, and then I sever contact so gently that the subject does

not know exactly when - and the subject's hand is left going neither up nor down, but cataleptic."

Termination: "If you don't want your subject to know what you are doing, you simply distract their attention, usually by some appropriate remark, and casually terminate. Sometimes they remark, "What did you say? I got absentminded there for a moment and wasn't paying attention to anything." This is slightly distressing to the subjects and indicative of the fact that their attention was so focused and fixated on the peculiar hand stimuli that they were momentarily entranced so they did not hear what was said."

Utilisation: "Any utilisation leads to increasing trance depth. All utilisation should proceed as a continuation of extension of the initial procedure. Much can be done nonverbally; for example, if any subjects are just looking blankly at me, I may slowly shift my gaze downward, causing them to look at their hand, which I touch and say "look at this spot.". This intensifies the trance state. Then, whether the subjects are looking at you or at their hand or just staring blankly, you can use your left hand to touch their elevated right hand from above or the side - so long as you merely give the suggestion of downward movement. Occasionally a downward nudge or push is required."

Richard Bandler was a keen proponent of the handshake induction, and developed his own variant, which is commonly taught in NLP workshops. Any habitual pattern which is interrupted unexpectedly will cause sudden and light trance. The handshake is a particularly good pattern to interrupt because the formality of a handshake is a widely understood set of social rules. Since everyone knows that it would be impolite to comment on the quality of a handshake, regardless of how strange it may be, the subject is obliged to embark on an inner search (known as a transderivational search, a universal and compelling type of trance) to identify the meaning or purpose of the subverted pattern.

Resistance

Erickson recognised that many people were intimidated by hypnosis and the therapeutic process, and took care to respect the special resistances of the individual patient. In the therapeutic process he said that "you always give the patient every opportunity to resist". Here are some more relevant quotes pertaining to resistance:

"Whatever the behaviour offered by the subjects, it should be accepted and utilized to develop further responsive behaviour. Any attempt to "correct" or alter the subjects' behaviour, or to force them to do things they are not interested in, militates against trance induction and certainly deep trance experience."

"If the patient can be led to accept one suggestion, they will more readily accept others. With resistant patients, it becomes necessary to find a suggestion that they can accept. Resistance is always important, and should

always be respected, so if the resistance itself is encouraged, the patient is made to feel more comfortable, because they know that they are allowed to respond however they wish."

"Many times, the apparently active resistance encountered in subjects is no more than an unconscious measure of testing the hypnotist's willingness to meet them halfway instead of trying to force them to act entirely in accord with his ideas.

Although the idea of working with resistance is essentially a hypnotic one, it goes beyond hypnosis and trance."

Ericksonian therapy

Erickson is most famous as a hypnotherapist, but his extensive research into and experience with hypnosis led him to develop an effective therapeutic technique. Many of these techniques are not explicitly hypnotic, but they are extensions of hypnotic strategies and language patterns. Erickson recognised that resistance to trance resembles resistance to change, and developed his therapeutic approach with that awareness.

Jay Haley identified several strategies, which appeared repeatedly in Erickson's therapeutic approach.

Encouraging Resistance

For Erickson, the classic therapeutic request to "tell me everything about..." was both aggressive and disrespectful, instead he would ask the resistant patient to withhold information and only to tell what they were really ready to reveal:

I usually say, "There are a number of things that you don't want me to know about, that you don't want to tell me. There are a lot of things about yourself that you don't want to discuss, therefore let's discuss those that you are willing to discuss." She has blanket permission to withhold anything and everything. But she did come to discuss things. And therefore she starts discussing this, discussing that. And it's always "Well, this is all right to talk about." And before she's finished, she has mentioned everything. And each new item - "Well, this really isn't so important that I have to withhold it. I can use the withholding permission for more important matters." Simply a hypnotic technique. To make them respond to the idea of withholding, and to respond to the idea of communicating.

Some people might react to a direction by thinking "why should I?" or "You can't make me", called a polarity response because it motivates the subject to consider the polar opposite of the suggestion. The conscious mind recognizes negation in speech ("Don't do X") but according to Erickson, the unconscious mind pays more attention to the "X" than the injunction "Don't do". Erickson thus used this as the basis for suggestions that deliberately played on negation and tonally marked the important wording, to provide that whatever the client did, it was beneficial: "You don't have to go into a trance,

so you can easily wonder about what you notice no faster than you feel ready to become aware that your hand is slowly rising....."

Providing a Worse Alternative (The 'Double Bind')

Example: "Do you want to go into a trance now, or later?" The 'double bind' is a way of overloading the subject with two options, the acceptance of either of which represents acceptance of a therapeutic suggestion.

Communicating by Metaphor

This is explored extensively in Sydney Rosen's My Voice Will Go With You. Erickson's metaphorical strategies can be compared with the teaching tales of the Sufis (those of for example the Nasreddin) and the Zen tradition of Koans, each also designed to act on the unconscious mind.

Encouraging a Relapse

To bypass simple short-lived "obedience" which tends to lead to lapses in the absence of the therapist, Erickson would occasionally arrange for his patients to fail in their attempts to improve, for example by overreaching. Failure is part of life, and in that fragile time where the patient is learning to live, think and behave differently, a random failure can be catastrophic. Deliberately causing a relapse allowed Erickson to control the variables of that failure, and to cast it in a positive therapeutic light for the patient.

Encouraging a Response by Frustrating It

This paradoxical approach acts directly on the patient's own resistance to change. Obese patients are asked to gain weight, or in a family therapy session, a stubbornly silent family member is ignored until the frustration obliges them to blurt out some desperate truth. Once again, this approach has its roots in Erickson's hypnotic language patterns of the form "I don't want you to go into a trance yet".

Utilizing Space and Position

Hypnosis and therapy are experienced subjectively by the patient, and any part of their total experience can be used to reinforce an idea. The physical position or even the posture of the patient can be a significant part of the subjective experience. Manipulating these factors can contribute to a therapeutic transformation.

"If I send someone out of the room - for example, the mother and child - I carefully move father from his chair and put him into mother's chair. Or if I send the child out, I might put mother in the child's chair, at least temporarily. Sometimes I comment on this by saying, 'As you sit where your son was sitting, you can think more clearly about him.' Or, 'If you sit where your husband sat, maybe it will give you somewhat of his view about me'. Over a series of interviews with an entire family, I shuffle them about, so that what was originally mother's chair is now where father is sitting. The family grouping remains, and yet that family grouping is being rearranged, which is what you are after when changing a family."

This may be directly compared with Fritz Perls' use of an "empty chair" as a context for imagined interactions (where the client was often invited to occupy the chair and thus take on the role of the person imagined to be sitting there); Bert Hellinger's approach, which requires the client to arrange family members (played by volunteers) in a row or pattern which matches the client's internal understanding, and then to reorganise the row; and Virginia Satir's work with tableaux and posture.

Emphasizing the Positive

Erickson claimed that his sensory "disabilities" (dyslexia, colour blindness, being tone-deaf) helped him to focus on aspects of communication and behavior which most other people overlooked. This is a typical example of emphasizing the positive.

Erickson would often compliment the patient for a symptom, and would even encourage it, in very specific ways. The subject of dozens of songs, "emphasizing the positive" is a well known self-help strategy, and can be compared with "positive reformulation" in Gestalt Therapy.

Prescribing the Symptom & Amplifying a Deviation

Very typically, Erickson would instruct his patients to actively and consciously perform the symptom that was bothering them usually with some minor or trivial deviation from the original symptom. In many cases, the deviation could be amplified and used as a "wedge" to transform the whole behaviour.

Seeding Ideas

Erickson would often ensure that the patients had been exposed to an idea, often in a metaphorical form (hidden from the conscious mind) in advance of utilizing it for a therapeutic purpose. He called this "seeding ideas", and it can be observed to occur at many levels both coarse and fine grained, in many of his case histories.

Avoiding Self-Exploration

In common with most brief therapy practitioners, Erickson was entirely uninterested in analysing the patient's early psychological development. Occasionally in his case histories, he will briefly discuss the patient's background, but only as much as it pertains to the resources available to the patient in the present.

Erickson is famous for pioneering indirect techniques, but his shock therapy tends to get less attention. Erickson was prepared to use psychological shocks and ordeals in order to achieve given results.

(As you have seen, these methods are playing mind games on the people. They are manipulating them, without the victims even realizing it. He used alot of trance ideas.

If you were checking out the various strategies, you would find some interesting partners.)

Commonalities Between Ericksonian Psychotherapy and Native American Healing

Journal of Mental Health Counseling Volume 31/Number 4/October 2009

Pages 351-362 Timothy C. Thomason

There are many commonalities between the techniques used in Ericksonian psychotherapy and the healing rituals used by traditional Native American tribes. Erickson had some Indian heritage and may have derived some of his therapeutic techniques from his study of tribal healing practices. A review of the literature shows that both approaches emphasize symbolic healing through the use of story-telling, metaphors, ambiguous tasks, ordeals, and rituals. Both also use direct and indirect hypnosis to relieve psychological distress.

INTRODUCTION

Mental health counselors are probably somewhat familiar with the therapeutic methods of Erickson, who has become a highly respected figure in the field of counseling and psychotherapy. Erickson's methods, while perhaps hard to understand and replicate, are fascinating because they are so unusual— sometimes even perplexing (O'Hanlon, 1987). In contrast, most counselors are probably not very familiar with the therapeutic methods of Native American healers. However, a review of both of these approaches reveals significant similarities, and a few differences. Erickson himself was very interested and involved in Native cultures in his home state of Arizona, and he may have based some of his methods on what he learned about Native American healing. This review revealed that the psychological healing process that occurs in Ericksonian counseling and psychotherapy is similar to the healing process that occurs in Native American treatments for psychological distress. Both rely on a somewhat authoritative healer/therapist who uses symbolic methods and rituals to facilitate receptivity to change in the client. Both often utilize hypnotic trance to facilitate healing. There is some evidence that being in a state of trance can have a healing effect in the sense that trance states can reduce psychological suffering, whether or not they affect a client's physical illness (McClenon, 2002). In the trance state the individual is more likely to suspend rational thought and is typically more open to considering a counselor's suggestions, such as therapeutic reframing of the problem (Waterfield, 2002). This review describes Milton Erickson's therapeutic approach. Native healing practices that resemble his use of hypnosis, and similarities between the two models of psychological healing. The procedures and tools used in both Ericksonian therapy and Native healing are entirely symbolic.

Although clients often resist change, Erickson demonstrated that there are ways to utilize resistance to promote change (O'Hanlon, 1987). Both Erickson and Native American healers have shown that change can be facilitated by

attributing the power for change to subconscious forces (in the case of Erickson) or spiritual forces (in the case of Native healers). While different cultures use different symbols in healing, the reason the symbols have healing power is that the client believes in them (Frank & Frank, 1991). This review provides support for the need to individualize treatment based on the client's culture and understanding of how change occurs. It evaluates the literature on Erickson's methods that seem related to or similar to Native American healing methods.

ERICKSON'S THERAPEUTIC APPROACH

Erickson is generally considered one of the most innovative psychotherapists of the 20th century (O'Hanlon & Weiner-Davis, 1989).

Erickson was an expert in traditional directive hypnosis, but he created an indirect style of hypnotic induction that contributed to the development of strategic psychotherapy and solution-oriented counseling. Psychotherapists and counselors have incorporated aspects of Erickson's methods without actually using formal hypnosis (Gurman & Messer, 2003). Erickson emphasized the importance of helping clients resolve their problems by using the assets they already have (Hoyt, 2003). He focused on the presenting problem, did single-session treatments when possible, and did not make interpretations or provide insight. He prescribed homework activities that were meant to promote change and often prescribed ambiguous tasks or ordeals. He used hypnosis, indirect suggestions, paradoxical directives, reframing, metaphors, and story-telling (Lankton, 1990). His general approach was to engage the client's interest and then direct subliminal suggestions to the client's unconscious mind (Rosen, 1982).

For many years Erickson used traditional forms of hypnosis in counseling, but he also created methods for hypnotizing people indirectly. Instead of a formal hypnotic induction he would simply talk in such a way that clients would go into trance (Haley, 1986). For example, he might tell a meandering story that seemed ambiguous and illogical on a conscious level. The client might struggle to understand the story for a while but then give up and lapse into a receptive state of suggestibility (Zeig, 1985). Erickson's indirect style of hypnotic induction resembles the type of trance induction used by some traditional Native American healers. While these healers do not formally hypnotize clients, they often use a style of communication that could have the effect of inducing trance (Winkelman, 1992).

NATIVE AMERICAN HEALING PRACTICES & HYPNOSIS

In traditional Native American societies there are at least two kinds of healers (although some healers embody both kinds). One kind uses plants and natural remedies to treat common ailments, such as wounds and stomach distress. The other uses spiritual healing methods, such as ceremonies and rituals, to holistically treat the patient's body, mind, and

spirit (Walsh, 1990).

Native American healers use in healing sometimes use methods that induce hypnotic trance, either in themselves, the patient, or both (Winkelman, 1992). The use of altered states of consciousness, such as trance, is one element that some methods of Native American healing and Erickson's psychotherapeutic approach have in common. Based on a review of numerous cases of Native American healing ceremonies, it has been hypothesized that ritual healing is sometimes facilitated by clients going into trance (Hultkrantz, 1992; Sandner, 1991). The Native American healer often creates a "sacred space" by conducting ceremonies in very specific ways, and the healing may incorporate drumming, singing, chanting, smudging, rituals, and other components that mark the healing encounter as a special event (Kalweit, 1992). Ceremonies, rituals, and rhythmic sonic stimulation can have the effect of hypnotizing the patient, who after all is desirous of healing and willingly participates in the ceremony. The healer knows that whether or not the client understands exactly what the ritual involves or how it works is irrelevant (Mehl-Madrona, 1997). Clients' faith in the power of the healer and of the healing ritual can be sufficient to reduce suffering (McClenon, 2002). Traditional healers and shamans report that they sometimes go into a self-induced trance to contact the spirit world and channel what they describe as healing energy (Winkelman, 1992). Rosen (1982) quoted Erickson as saying, "I go into a trance so that I will be more sensitive to the intonations and inflections of my patients' speech. And to enable me to hear better, see better. I go into a trance and forget the presence of others." While the intention is different in the two processes, both use trance to facilitate healing.

Erickson defined hypnosis as "a cooperative experience dependent on the communication of ideas by whatever means are available" (Waterfield, 2002, p. 307). Being in a trance state is not necessarily healing in itself, although since it involves quieting the body and mind it may have benefits similar to meditation or relaxation. Certainly voluntarily participating in hypnosis or a tribal healing ceremony facilitates the client's openness to psychological change (Hultkrantz, 1992).

It could be hypothesized that tribal healers have been using therapeutic methods similar to hypnosis for hundreds of years. McClenon (2002) said, "I hypothesize that shamanic rituals constitute hypnotic inductions, that shamanic performances provide suggestions, that client responses are equivalent to responses produced by hypnosis, and that responses to shamanic treatment are correlated with patient hypnotizability." Dennett (2006) has proposed that the ailments tribe members go to the healer for are those that are particularly likely to benefit from symbolic treatment (for example, stress and the symptoms of stress). Ceremonial healing rituals can

help the participants reduce their psychological distress, give them a sense of belonging to the group, and restore a sense of balance and harmony. The various forms of symbolic healing (including psychotherapy, counseling, hypnosis, and tribal healing ceremonies) are all aimed at reducing psychological distress and demoralization rather than healing a physical illness (Frank & Frank, 1991). Of course, the relaxation resulting from reducing stress and distress can contribute to physical healing (Rakel & Faass, 2006). The next section establishes that Erickson used healing techniques that could be considered shamanistic if they were practiced within a Native American culture.

ERICKSON'S SIMILARITY TO NATIVE AMERICAN HEALERS

According to Hammerschlag (2001), "Erickson had Indian blood, possessed a medicine bundle, and was very proud of his Indianness." The medicine bundle was the kind that some Indian healers carry as a powerful healing tool, and it contained a gazing crystal. Elsewhere Hammerschlag said, "Erickson was proud that he had Indian blood. He sponsored a scholarship at Phoenix College for Native American students. He was the keeper of a Navajo medicine bundle which contained the medicine man's most sacred healing totems" (Erickson & Keeney, 2006). Erickson filled his waiting room and office with magical symbols to create a sacred space. He often used "secret words" and Indian fetishes, such as masks and dolls. Zuni fetishes, which are usually carvings of animals in stone or shell, are said to contain a spirit that can provide supernatural assistance to the owner (familiar spirits).

Hammerschlag (1988) described his meeting with Erickson where he was surrounded by Seri Indian carvings: "Erickson was like a medicine man in his hogan. He was a storyteller capable of spinning magic" . Story-telling as a method of healing psychic distress is one major commonality between Erickson's approach and Native American healing. Tafoya (2000) also commented on Erickson's Indian heritage, saying "Erickson, by the way, was of American Indian ancestry" . It is unclear how distant the Indian ancestor was, but most likely it was more than three generations. Erickson's daughter, Betty Alice Erickson, stated that because of his dark eyes and hair and his deeply tanned skin, "He was often mistaken for a Native American Indian" (Erickson & Keeney, 2006). Of course, like many Americans, Erickson could well have had an Indian ancestor, but there is no evidence that he claimed to be Indian or Native American. Parke suggested that Erickson's interest in nonverbal, indirect influence was related to his exposure to Native American cultures; he said, "Of all the oral traditions I have reviewed, Erickson's work bears closest resemblance to that of the American Indians" . Erickson had ample exposure to and extensive knowledge of American Indian cultures, including direct experience (Parke). Gilligan (as cited in Erickson & Keeney, 2006) said that Erickson was like "an incredible wizard, an amazing healer"

whose "hypnotic presence was really very strong—like an old shaman" (p. 20). Likewise, Lankton considered Erickson "one of the true shamans in America" (Erickson & Keeney, 2006, p. 293). The anthropologist and psychologist Teresa Robles also compared Erickson to a shaman: "Like traditional healers, he met his clients in the waking dream he developed with them, the hypnotic trance. Then ... he helped them to change" (Erickson & Keeney, p. 306). Keeney (2006) asserted, "Rest assured, Erickson is a shaman. ... We insult him when we say he was anything less than a shaman or healer" But although Erickson may have incorporated traditional Native American healing ideas and practices into his own approach to psychotherapy, he never claimed that he was a shaman (Keeney, 2006). Betty Alice Erickson (Erickson & Keeney, 2006) likened her father to a shaman, saying that "my father shares the traditions of many of the world's indigenous healers" in the sense that he used nature as a teacher, as a healing metaphor, and as a resource for working with clients." He often quoted Chief Seattle, collected Hopi Kachina bolo ties, and "used the wisdom of the totem, an amulet" to teach his children lessons (Erickson & Keeney). He "had a love for Indians as well as Native art (Erickson & Keeney) and owned the largest collection in existence of ironwood carvings by the Seri Indians of Mexico. Jim Hills, the trader who sold the carvings, said that Erickson loved to hear about the Seri Indians' use of songs and dance, and what the Seri shamans taught. Of Erickson, Hills said, "He was definitely an American shaman ... he had spirit power(demon power)" (Erickson & Keeney, p. 268). Like many shamans Erickson faced significant ordeals early in his life, including being told he would not survive having polio. When he did survive, Erickson paddled a canoe down the Mississippi River by himself to restore his strength (Erickson & Keeney, 2006). Later, as a therapist, Erickson sometimes prescribed ordeals and rites of passage for his clients, which could be seen as similar to the Native American vision quest and other rituals, such as the sweat lodge ceremony. In fact, Erickson may have borrowed the practice of prescribing an ordeal for therapeutic purposes from Native American traditions. Today Ericksonian psychotherapists accept that homework assignments for clients "should involve ordeals, trials, tribulations, and 'shamanic tasks,' none of which have to make sense to the person" (Kottler, Carlson & Keeney, 2004, p. xi). In a speech Hammerschlag (2001) said that the same features that are found in Ericksonian psychotherapy are found in the methods used by shamanic healers. Hammerschlag concluded, "That is Ericksonian psychotherapy," and "A shaman has the capacity to combine stories with rituals that alter people's consciousness". There are several apparent similarities between Erickson's techniques and some of the ritual healing methods of traditional Native American healers.

ERICKSONIAN PSYCHOTHERAPY & NATIVE AMERICAN HEALING: SIMILARITIES

Traditional Native American healers use a wide variety of diagnostic methods to determine what is wrong with a patient. A Navajo medicine man, Ben Silversmith (1994), said. The five ways of contacting the Spirit are hand trembling, star gazing, fire listening, crystal gazing, and hot charcoal study. Star gazing and crystal gazing are the Navajo X-rays. The healer selects a certain star and concentrates on it, or looks into a crystal and concentrates on it. Before long the star or crystal will yield a detailed picture of the organ within the patient which is diseased. In his therapeutic work Erickson sometimes used crystal gazing with clients who were hypnotized (Rossi, 1980). The client would be asked to look into a natural crystal, a crystal ball, or a mirror and see what images appeared. Some clients saw extensive imagery of, for example, themselves walking down a street and doing various activities (Erickson, 1954; Haley, 1967). Modern psychologists often consider crystal gazing a new-age practice with little therapeutic value (Norcross, Koocher, & Garafalo, 2006), but the use of a crystal as a source of ambiguous stimulus could be likened to the use of ink blots in psychological assessment. The crystal or crystal ball is simply an aid to visualization. Eventually Erickson went beyond the use of a physical crystal and asked clients to visualize a crystal ball in which they could picture past experiences or images of future activities (Zeig & Munion, 1999). According to Battino (2006) Erickson asked people to visualize a crystal ball, look into it, see themselves in the future after they had solved their problem, and then report how the changes occurred. Erickson found that he had better results with imaginary crystal balls than with a real one (Waterfield, 2002). He said he considered external devices like crystal balls, mirrors, metronomes, and flashing lights incidental aids to be discarded as soon as possible in favor of utilization of the client's behavior (with visualization) (Erickson, 1980). Steve de Shazer borrowed Erickson's crystal ball visualization technique and made it an important component of Solution-Focused Therapy (de Shazer, 1985; 1978). Both the Ericksonian psychotherapist and the Native American healer avoid direct interpretation because most people can consciously defend against it; what is needed is a way to influence the client's unconscious mind, such as indirect suggestion. Both the Ericksonian approach and Native American healing emphasize the use of metaphors and stories. Native Americans often use myths and stories to teach their children their place in the world and how they should behave. Erickson believed that metaphors and stories slipped beneath the client's defenses to speak to the subconscious. According to Combs and Freedman (1990,), "Because metaphor involves multiple dimensions and random elements, people often find different, but relevant, meanings than therapists intend."

Hammerschlag (2001) claimed that "all therapy, essentially, takes place in trance," and that both Ericksonians and tribal healers utilize the patient's symbols and stories in making strategic interventions.

This is the hallmark of all shamanic healers" (Hammerschlag). Tribal healers utilize traditional symbols and stories in some of their healing ceremonies, and these symbols and stories are presumably shared by the client. However, Ericksonian counselors cannot always assume that the clients share the counselor's symbols and stories about health, illness, and healing. One of Erickson's contributions to counseling was his emphasis on the necessity for the counselor to understand and enter the client's belief system rather than imposing a belief system from a theory outside the client's experience. What matters is that the healing ritual has credibility to the client and fits within the client's belief system. When talking about psychological healing, what matters most is the client's beliefs about how healing occurs, rather than the counselor's. Hammerschlag (1988, p. 114) stated that "the process of psychotherapy is, in a sense, a kind of witchcraft made complicated. The therapist removes 'spells' by assisting the patient to discover a power within him- or herself that is greater than the power that produced the symptom." The implication is that if the client believes in evil spirits, the counselor can use that to call on the power of good spirits. Symbols used in counseling must have meaning for the patient.

DIFFERENCES BETWEEN THE TWO APPROACHES

Erickson utilized symbolic communication and therapeutic rituals in his counseling. According to Zeig (1997), "Erickson did not discuss spirituality ... he was a rationalist and did not use transpersonal explanations. He maintained that what he did and experienced could be described in concrete, scientific terms without the necessity of using esoteric reasoning" (n.p.). Although he had no interest in the supernatural, Erickson believed there was a role for the irrational in psychotherapy. He said that "sometimes . . . therapy can be firmly established on a sound basis only by the utilization of silly, absurd, irrational, and contradictory manifestations" (as cited in Combs & Freedman, 1990). Presumably Erickson believed that symbolic healing methods worked, when they worked, due to the client's belief in their power to heal. This process may be poorly understood, but it is well established that a wide variety of healing rituals can relieve suffering and demoralization (Frank & Frank, 1991). Rationalists assume that there is a good scientific explanation for how various forms of symbolic healing work, and that there is no need to resort to supernatural explanations. But the supernatural or spiritual beliefs of clients can be utilized to promote their psychological healing, whether or not those beliefs can be proven to be true. Betty Alice Erickson (2004) has noted that while traditional psychotherapy seeks theory, explanations, and hypotheses,

shamanic traditions welcome mysteries and use prayer, music, and dancing to create altered states of consciousness and new possibilities. Just as many of Erickson's homework tasks for clients made no logical sense. Native American healers sometimes give their clients tasks that make no logical sense but that are meant to operate on a spiritual, or what Euro American psychologists might call an unconscious, level (Duran & Duran, 1995; Gustafson, 1997). For the most part the Ericksonian psychotherapist operates within the traditional individualistic Euro American therapeutic model. The therapist talks with the client and the relief of suffering results from the client being guided by the therapist, directly or indirectly, in how to think, feel, or behave differently. In contrast, the Native American healer operating within the context of a tribal society shares a belief system with the client. The ceremonies and rituals are presumed to have healing potential due to their linkage with the supernatural world. In both situations, the psychological healing that is hoped for can be explained rationally as the result of the healing power of nonspecific factors, such as belief in the process, faith in the healer, and the expectation of benefits (Frank & Frank, 1991). Erickson was expert in establishing rapport with his clients; he felt that good rapport was essential. Of course, when strangers like counselor and client meet, establishing rapport is usually a prerequisite if the client is to be receptive to counseling. Native American healers, on the other hand, may do little to establish rapport with their patients since they are usually already known by the members of the tribe who are likely to call on them. Normally only people who believe in the power of tribal healers would ask for their help. While there may be limited discussion of the problem with the client or the client's family, treatment typically follows soon after the diagnosis has been established. Rapport is also less important in Native American healing than in psychotherapy because the tribal treatment is rarely a talking treatment (Duran, 2006). Healing rituals and ceremonies typically require little talk on the patient's part; it is usually assumed that the healer can diagnose the problem and administer a healing ritual without much verbal sharing of intimate personal concerns (Hultkrantz, 1992). If the client believes in the credibility and power of the healer, is open to change, and participates in the healing ritual, that is often sufficient for the suffering to be relieved (Cohen, 2003).

Martin & Dedrie Bobgan have online books with the Christian view of Hypnosis. John Ankerburg has some writings also.

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