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Erickson-Derived or - Influenced Theories: Overview

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To appreciate the depth of foundation supporting the many emerging psychotherapies inspired by Milton H. Erickson, M.D. (1901–1980), and how these contrast with other contemporary therapies, it is necessary to step back from the myopic view of post-Freudian thought and consider principles and practices that have withstood the test of time. Thus, this entry first examines the historical roots of hypnosis, which was foundational to Erickson's understanding of the change process and which he [p. 351 ↓] modified in his use with clients. It then goes on to discuss Erickson's use of pragmatism, constructivism, holism, and paradox in his work with clients.

Historical Context

Because Erickson's approach to healing was deeply rooted in the practice of hypnosis, any therapy influenced by Erickson is best understood against the backdrop of the history of hypnosis, which is intertwined with the history of healing and medicine. While the demarcated use of hypnosis for psychological problems is a more recent development, the elicitation of hypnotic phenomena is associated with history's greatest healers.

The earliest record of medical hypnosis dates to 2600 BCE with Wong Tai, the father of Chinese medicine. He taught a method of healing that involved passing hands over a patient's body while speaking words of curing. Ancient Hindu and Egyptian writings describe the use of "temple sleep" for religious and medicinal purposes; however, it was in Classical Greece that people sought to invoke Hypnos, the god of sleep, who was thought to bring healing and prophetic dreams. From this tradition, in 400 BCE, the Greek physician Asclepiades devised a formal hypnotic procedure in which he stroked his patients' hands, leading them into sleeplike states. They were then left to sleep and dream in a healing room, which he called *abaton*.

Later, Hippocrates, the father of Western medicine, more precisely defined hypnosis as a means of accessing the body's natural ability to correct itself and grow healthy. He believed that "the natural healing force within each one of us is the greatest force in getting well" and that, "the affliction suffered by the body, the soul sees quite well with the eyes shut." Plato recognized the profound implications of Hippocrates's approach

to medicine, pointing out that Hippocrates treated the body as a whole rather than as a collection of parts.

The next pivotal figure in the history of medicine is the Persian physician Avicenna (*Ibn Sina* in Farsi). He wrote *The Canon of Medicine* (1025), one of the most widely read books in the history of medicine. It is in the *11th Book of Healing* that Avicenna made the first recorded distinction between sleep and hypnosis, referring to hypnosis as *al-Wahm al-Amil*, “the pleasant dreamy imagination.” Avicenna not only made use of psychological techniques for physical healing, such as confusion, shock, and therapeutic ordeals, but he also recognized that with hypnosis one could create the conditions that lead to the acceptance of a new reality orientation.

Five hundred years later, the connection between imagination and healing was further elaborated by the Swiss physician Paracelsus (1493–1541). Now recognized as the father of modern psychiatry, Paracelsus was not only the first European physician to advocate for the humane treatment of the mentally ill, seeing them as “brothers ensnared in a treatable malady” rather than creatures possessed by evil spirits, he also recognized that imagination played a pivotal role in healing. He emphasized that a patient’s beliefs and will were able to affect health and that all cures involved some degree of imagination. For this reason, he stressed the importance of suggestion, using signs and amulets to help form mental images, which then translated into profound physical cures. He was also the first physician to theorize an unconscious aspect to cognition (*About Illnesses*, 1567). In this regard, Paracelsus anticipated by nearly 500 years the modern expectancy-based theory of hypnosis, including the conscious and unconscious dimensions.

Although most historical accounts mistakenly credit Franz Anton Mesmer (1734–1815) with the discovery of hypnosis, Mesmer did revolutionize the provision of health care as one of the first European physicians to advocate low-cost health care and traveling medical clinics. In 1784, a French Royal Commission appointed by Louis XVI studied Mesmer’s theory of magnetic fluid under the light of scientific investigation. This is considered the first well-designed and published psychological experiment. The conclusion of this team of investigators was that it was the use of imagination that achieved physical healing, rather than a special magnetic fluid, as believed by Mesmer.

Other important advances in the history of hypnosis were made by John Elliotson (1791–1868), who was the first to promote the use of hypnosis as a surgical anesthesia. Later, James Esdaile (1808–1859) discovered that by using a “mesmeric coma” the death rate in surgery dropped from 95% to 5%. Using hypnosis to reduce fear and pain, Esdaile was able to alter the patient’s [p. 352 ↓] physiological response to surgery. The significance of this finding was made more apparent when Jean-Martin Charcot (1825–1893) documented the curative effects of hypnosis for hysteria, a disorder that had previously been assumed to have physiological origins. This important discovery gave birth to the modern practice of psychosomatic medicine. Now regarded as “the founder of modern neurology,” Charcot is also credited with the discovery that psychological states can produce lasting physiological consequences.

The modern study of hypnosis as a form of suggestive therapeutics began when James Braid (1795–1860) recognized that after staring at his lancet case, his patients would accept suggestions aimed at a cure. In 1853, he replaced the concept of magnetism with “hypnotism.” After further study, Braid came to the conclusion that hypnosis is really a fixation of attention on a single idea, rather than actual sleep. Ambroise-August Liebeault (1884) convincingly argued that cures could be achieved with suggestion alone, but the notion of mystical sleep remained popular, so the namesake of the Greek god of sleep remains in use to this day.

Having studied hypnosis under Charcot, Josef Breuer (1842–1925) found that during hypnosis some patients would *spontaneously* recall past events, and after talking about these memories in a state of heightened emotional arousal, their hysterical symptoms would subsequently disappear. He called this his “talking cure,” which was later renamed by Sigmund Freud as “abreaction therapy.” Working together, Breuer and Freud came to the conclusion that a deeper, unseen level of consciousness could determine an individual’s conscious conduct. Then, in a dramatic turn of events, Freud dismissed hypnosis as a way of merely “suggesting away” symptoms rather than eliminating their cause. Contrary to its long history of success, Freud insisted that the use of hypnosis would inevitably result in symptom substitution.

Breaking from the traditions of the day, the French pharmacist Émile Coué (1857–1926) promoted the idea of autosuggestion, or self-hypnosis. Known for his discovery of the placebo effect and as the “father of self-help,” Coué taught that hypnosis is something

that individuals participate in rather than something that is done to them by a hypnotist. He believed that imagination played a central role in solving problems. He gave hope to his clients by praising each remedy's efficacy, often leaving a small positive note with the medication. He is the originator of the phrase "Day by day, in every way, I am getting better and better," and contrary to Freud's emphasis on conscious insight, Coué argued that curing some of our troubles requires a change in our unconscious imagination. He also found that eye closure was not necessary for hypnotic suggestion to be effective and that self-suggestion could decrease dependence on doctors. When applauded for his healing, Coué reportedly retorted, "I have never cured anyone in my life. All I do is show people how they can cure themselves."

One of the most talented premodern practitioners of hypnosis was Pierre Janet (1859–1947), a French psychologist, neurologist, and lead protégé of Charcot. Janet's contributions to hypnosis were vast, including extended hypnosis (using the passage of time as a suggestion for healing without the use of specific suggestions), utilizing the temporary absence of symptoms during hypnosis (e.g., letting anorexic patients eat and drink), giving symptom-oriented suggestions, identifying fixed ideas that were operating at subconscious levels (by using dissociative techniques such as "automatic writing" and "automatic talking"), and the practice of introducing new ideas to the unconscious as a curative measure. In a seminal conference paper (1896), Janet described the subconscious transmission of the clinician's ideas to the patient and the dramatic results in terms of dependency and indirect hypnotic suggestion—a phenomenon that 100 years later was discovered to occur across all social contexts and came to be known as the Pygmalion effect. Janet also convincingly argued for designing individualized treatment strategies and treating patients as individuals.

From these discoveries, achieved by some of the most brilliant practitioners in the history of medicine, Erickson began to craft his approach to healing. Looking beyond the pop psychology of his day, Erickson used experimentation and his exceptional powers of observation to further his knowledge of how to help individuals. As the "father of modern hypnosis," Erickson demonstrated that the artifacts of tradition, such as eye closure, formal trance induction, and direct suggestion, are not needed for hypnosis to be effective. Operating [p. 353 ↓] outside the limitations of contemporary talk therapy, Erickson demonstrated how verbal and nonverbal techniques, including metaphor, symbol, gesture, and innuendo, as well as symbolic and experiential events,

including shock, confusion, imagined experience and physical ordeals, can be used to promote healing and growth. Any attempt to parcel Erickson's therapy into hypnotic versus nonhypnotic work is futile. Hypnosis is the approach that Erickson fathered—something so elemental to healing that its practice and principles permeated all other aspects of his work. Similar to how children of a genius father often exemplify one or two characteristics of his total personality, the therapies inspired by Erickson embody one or two aspects of his numerous contributions to the modern practice of hypnosis.

Theoretical Underpinnings

Ericksonian-influenced therapies are a uniquely diverse group of approaches that represent an endless variety of techniques and treatment milieus. This group of therapies are united not so much by philosophical doctrine as by the fact that they were inspired by the pioneering casework of Erickson. Because Erickson had a preference for experimentation and ideological flexibility, versus orthodoxy and protocol, it seems appropriate that the continually evolving class of Ericksonian-influenced therapies continues to defy distinct lines of classification. While any number of ideologies can be projected onto Erickson's casework, and used to structure future teaching and training, the following sets of ideas come closest to positioning this approach relative to a larger philosophical discourse.

Pragmatism

Above all else, therapy inspired by Erickson is pragmatic. True to the philosophy of pragmatism, Erickson did not embrace conscious thought or any intellectual construct as a mirror of reality. Like William James (a pragmatist philosopher, psychologist, and hypnotist), Erickson sought to evoke thought (both conscious and unconscious) as a tool for prediction, action, and problem solving. In this regard, strategy is a key tool of the pragmatist, optimizing chances for success by readily accepting what is, while maximizing progress through resourcefulness and divergent problem solving. Strategically speaking, having the greatest number of options available maximizes the chances of accomplishing one's goals, thus the classic axiom in Ericksonian therapy:

“Use whatever works.” Of course, this can result in controversial practices that others consider unorthodox or dangerous, regardless of the positive outcomes achieved.

From the intellectual background of pragmatism, Erickson developed the specialized strategy of *utilization*, which is reflected in another axiom: “Use whatever the client brings to therapy.” Within the context of therapy, utilization is founded on the premise that each person already has the intellectual and behavioral tools needed to achieve success in therapy. Thus, it is the job of the therapist to recognize these tools and use them to achieve some desirable end. This concept is considered to be Erickson’s greatest contribution to psychotherapy.

Constructivism

Constructivism is based on the premise that all people learn most effectively through experience. Typically, a constructivist approach to psychotherapy emphasizes the importance of human relationships for well-being and development. Thus, a healthy supportive relationship between the client and the therapist is considered to be a core healing experience. More specific to the work of Erickson, and the hypnotists who came before him, is the experience of a new reality orientation that is created through the use of suggestion and imagination.

For Erickson, the central activity of therapy is the process of constructing new possibilities by working within an individual’s repertoire of experience and the individual’s belief system. This is an approach to learning known as *scaffolding*, in which new knowledge is introduced by building on existing knowledge or experience.

This open process demands collaboration and ideodynamic treatment, rather than the use of protocol or manualized treatment. In this approach, all interactions are tailored to the needs of the individual seeking help. Erickson went to great lengths to see the world from the client’s point of view. His general strategy was to help each individual construct his or her own goals and [p. 354 ↓] solutions, rather than imposing an outside theory of how to attain personal well-being.

Self-organizing change is another subcomponent of constructivism, which maintains that the client is the best person to determine the course of his or her recovery. This philosophical position is reminiscent of Hippocrates's recognition of the patient as the primary healing force. It is a principle of healing that is antithetical to a medical model in which the patient becomes a target for interventions by powerful exogenous agents.

To act as a catalyst for self-organizing change, Erickson developed the techniques of permissive suggestion, open-ended direction, and hypnotic strategies for evoking the creative imagination. Symptom elimination often occurred, but that was not the primary objective. Erickson viewed problems as a process of learning, in which symptoms played an important role in developing the ability to exercise free will. To this end, he developed techniques that allowed a person to change the intensity, frequency, or location of a symptom; to keep some of the symptom; or to end its use. Erickson insisted that therapy should be permissive and maintain the highest respect for a person's capacity for innate healing and self-determination.

This ideology is expressed differently in each of the therapy approaches discussed in the "Short Descriptions of Ericksonian-Derived or -Influenced Therapies" section. For example, the Ericksonian approach embraces a dynamic dualism in which the unconscious mind and conscious mind possess different resources and serve different functions. During therapy, hypnotic techniques are used to bridge the gap between the part of the mind that needs answers and the part that holds those answers. In Haley's strategic family therapy, psychodynamics are set aside in favor of systems dynamics. In this approach, strategic directives are used to uncover resources within the family, as family members become "healers of one another." The main point is that it is this solicitation of self-determination, and thus self-organizing change, that characterizes not only Erickson's casework but also any closely related theory of healing.

Holism

First expressed by Hippocrates, the philosophy of a unified and interconnected mind and body is a foundational principle that continues to permeate the use of modern hypnosis and modern holistic approaches to healing. More than a recognition of the link between a person's state of mind and his or her state of health, holism rejects the

atomistic or reductionist tendencies associated with formal systems of classification (i.e., diagnosis) and mechanistic rituals (i.e., treatment protocols). It is the humanistic perception that everything is interconnected and ecologically interdependent. Thus, in therapy, it is not just the client who is persuaded by the therapist, but both are equally dependent and vulnerable to influence. Since Charcot, most have come to agree that psychological states are connected to physical states, such that a change of mind will produce physiological consequences. However, Erickson took this ecological principle further, demonstrating that thoughts and behaviors are interconnected, as are family members and members of society, and a change in one small place can lead to changes throughout the system. Referred to by some as the domino effect, this idea is seen in therapies that incorporate pattern interruption or the use of elaboration and paradox.

Paradox

The role of paradox in philosophy and mathematics has been to expose errors in definitions, leading to new axioms and improved logic. In Erickson's work, both paradox and confusion are used as catalysts for the acquisition of new ideas and beliefs, which otherwise remain suppressed by habit or by a rigid mind-set. Erickson's therapy often demonstrated that things are not always as they seem. For example, a chronically depressed individual may be surprised to learn that he has forgotten to be depressed after being instructed to practice his depression daily. The very nature of the change process, as inspired by Erickson, is presumably paradoxical because it begins with absolute acceptance of everything the client is thinking, doing, and experiencing. Naturally, when asked to summarize his theoretical position, Erickson suggested a paradoxical philosophy of change in which there are no preconceived notions of how change must occur.

Short Descriptions of Ericksonian-Derived or -Influenced Theories

Brain Change Therapy

Brain change therapy integrates principles from hypnosis, biofeedback, meditation, and brain technology while seeking to help clients learn to achieve positive, resourceful mind states.

Couple and Family Hypnotic Therapy

After establishing negotiated goals with families, this approach to couples and family treatment uses family hypnotic induction techniques to achieve the agreed-on goals. Therapy is successful when each member involved in treatment is satisfied with his or her achieved goals and there is reduction or elimination of dysfunctional behaviors.

Directive Therapy

Directive therapy facilitates the strategic use of behavioral assignments to interrupt cognitive, emotional, and behavioral patterns, while also utilizing natural resistance to change.

Ego State Therapy

This psychodynamic approach explores the internal conflicts existing beneath conscious awareness. This is achieved using either hypnosis or other methods designed to quickly access and integrate dissociated parts of self.

Ericksonian Therapy

Ericksonian therapy embraces any style of intervention that can be ethically employed in service of the client's goals and objectives. An atmosphere of permissiveness and acceptance is used to paradoxically activate a self-defined process of growth and change.

Impact Therapy

Impact therapy facilitates creative processes using visual and tangible props, such as signs, chairs, or a whiteboard, as well as movement, experiential activities, pictures, metaphors, and other multisensory techniques to stimulate new awareness.

Improvisational Therapy

Improvisational therapy seeks to use creativity, imagination, and playfulness to create a resourceful experience for the client. There are no established clinical methods, strategic protocols, diagnostic instruments, or interpretive frameworks to dictate how the therapy ought to be conducted.

Interactional Therapy

In keeping with communication and systems theory, this approach examines how individuals behave in systems and works with individuals, couples, and families to achieve identified goals. Generally, change is evoked through direct behavioral prescriptions, paradoxical interventions, and positive connotations (reframing).

Metaphors of Movement Therapy

This approach uses metaphor to creatively define problem situations and to enable clients to use their imagination to generate solutions.

Nature-Guided Therapy

Nature-guided therapy employs ecopsychology research on how contact with nature can have therapeutic benefits. Its interventions seek to increase the client's connection to nature.

Neuro-Linguistic Programming

Neuro-linguistic programming facilitates a change in the structure of the client's conscious and unconscious experience by employing imagery, movement, and auditory changes in the scope of experience, and it examines how that scope of experience is categorized to rapidly change the client's emotional response to it.

Possibility Therapy

Possibility therapy uses the principles of acknowledgment and possibility to resolve the client's problems in the present or future.

Psychosocial Genomics

Psychosocial genomics utilizes the natural four-stage creative cycle for facilitating gene expression and brain plasticity to optimize problem solving in everyday life, as well as the resolution of stress-related psychosomatic issues with a variety of cognitive-behavioral techniques.

Self-Relations Therapy

Self-relations therapy seeks to activate a person's creative consciousness that can be utilized in all aspects of his or her life. The therapist explores the harmonious and balanced conversations between the client's multiple parts of self.

Solution-Focused Brief Therapy

Solution-focused brief therapy begins with the identification of a specific problem and proceeds by identifying exceptions to the problem and the times when the problem was less severe or absent. It is strength based and hope oriented and elicits the imagination, while drawing attention to underutilized resources within the established repertoire of behavior.

StoryPlay Therapy

This approach creatively uses interactive play, metaphor, and exercises in creativity to address problems caused by trauma and loss.

Strategic Therapy

Strategic therapy uses strategic tasks assigned by the therapist to resolve the client's presenting problem. The therapy focuses on the social context of human dilemmas and the potential for growth and healing within closely connected interpersonal systems.

See also [Brain Change Therapy](#); [de Shazer, Steve, and Insoo Kim Berg](#); [Directive Therapy](#); [Ego State Therapy](#); [Erickson, Milton H.](#); [Ericksonian Therapy](#); [Feedback-Informed Treatment](#); [Haley, Jay](#); [Impact Therapy](#); [Improvistational Therapy](#); [Madanes, Cloe](#); [Metaphors of Movement Therapy](#); [Minuchin, Salvador](#); [Nature-Guided Therapy](#); [Neuro-Linguistic Programming](#); [O'Hanlon, Bill](#); [Palo Alto Group](#); [Possibility Therapy](#);

[Psychosocial Genomics](#); [Satir, Virginia](#); [Self-Relations Psychotherapy](#); [Solution-Focused Brief Therapy](#); [Strategic Therapy](#); [Whitaker, Carl](#); [White, Michael](#)

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Further Readings

Haley, J. (1993). *Uncommon therapy: The psychiatric techniques of Milton H. Erickson, M.D.* . New York, NY: W. W. Norton. (Original work published 1973)

Short, D., Erickson, B. A., & Erickson-Klein, R. (2012). *Hope and resiliency: Understanding the therapeutic strategies of Milton H. Erickson, M.D.* . Norwalk, CT: Crown House. (Original work published 2005)

Zeig, J. K. (2014). *Teaching seminar with Milton H. Erickson* . New York, NY: Taylor & Francis. (Original work published 1980)