

Erickson in the Context of Time

Foreword for *Collected Works of Milton H. Erickson MD, Volume 8*

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By Dan Short

Director—Milton H. Erickson Institute of Phoenix

Any serious student of the writings of Milton H. Erickson, M.D., will be familiar with his seemingly endless capacity for compassion, acceptance, and creative problem solving. Affectionately known as the father of modern hypnosis, Erickson has inspired many generations of care providers, most of whom are seeking a deeper connection with their clients and a more personally fulfilling approach to the therapeutic endeavor. Descriptions of Erickson's work with clients have an intimate quality and poetic elegance that when subjected to technical analysis are inadequately represented. It is as if Erickson possessed a higher consciousness and greater powers of perception than are available to ordinary people.

This mythos has left multiple generations of practitioners, inspired by Erickson's work, wondering how to learn to engage others in such a remarkable way. In this volume, we discover the simple answer to that complex question. Erickson developed his extraordinary talents through many years of dedicated practice, systematic experimentation, and contemplative trial-and-error learning. Unlike some who embrace the comfort of pride over the ache of growing pains, Erickson remained dedicated to a lifetime of learning from mistakes while seeking to rectify his faults. As I recall Erickson saying in a 1962 recording, "To hell with my pride."

This volume of the *Collected Works* offers a historical review of Erickson's intellectual and emotional development starting in the 1930s, with Erickson making his first contribution to the psychological literature in 1929. While writing about the relationship between intelligence and crime, Erickson comes to the conclusion that, "Indeed, while but 14.5% of the population at large is of foreign birth, 47.57 % of the low grade moron delinquents are of foreign birth, which places their portion of crime, as determined by population ratios, at 327% of their fair quota. That this high incidence of crime may be due in part to the inability of the mentally deficient alien to adapt himself to the new social order of his adopted country, rather than entirely to inherent criminal propensities, does not alter nor palliate one iota the fundamental fact of his desirability. Particularly in this table is the need made evident of intelligent and selective system of immigration with adequate and complete facilities for culling the undesirables who constitute both a detriment and a menace to the social and economic welfare of the whole country" (p. 362).

In summary, Erickson concludes that, "There appears to be an increased proportion of mixed percentage, one native-born, one foreign-born, among criminal classes thereby suggesting the probability of an unfortunate social result of such a home" (p. 366). As can be plainly seen, there is an extraordinary contrast in values and attitudes between Erickson the neophyte and the older, beloved pioneer of competency-based mental health care. Young Erickson's thinking was influenced by the ethos of his time. This is the era of the Great Depression when resources were scarce and nativism was on the rise throughout America.

For example, the government, under Herbert Hoover, issued the Mexican Repatriation Act, which targeted people of Latin descent for immediate deportation. During this period of racial targeting, government officials were told that they could use any method they pleased to get rid of "the

deportables.” The general attitude shared by those in power was that any person who wasn’t a white American born citizen did not deserve to be in the country. While some Americans hold these attitudes to this very day, Erickson’s perspective evolved. Later, he would proudly celebrate his interracial, foreign born granddaughter, show loving kindness to those who had been marginalized as “criminals,” and act as a devoted patron of indigenous peoples (Short et al., 2005).

The other great force impacting Erickson’s early intellectual development was the dominance of Freudian psychoanalysis. In 1931, Erickson writes his first case study as he describes, from a developmental perspective, the evolution of a severe psychosis that results in suicide. In his final sentence, Erickson ends the article stating, “Hence, in a psychotic effort to stay the inevitable actualities of life and to secure herself from further difficulties and changes, she attempted to kill herself and her son, thereby symbolically saving her life from wretchedness, despair, loneliness, and adding to his an everlasting continuance of mother love” (p. 303). This analytic interpretation is reminiscent of Freud’s belief that symbolism is utilized in symptom-formation. For example, in Freudian psychology a paralyzed limb can represent impotence or castration. During the 1930s and 40s, the prevailing view within the psychiatric community was that the understanding and interpretation of unconscious symbols represented one of the most important instruments of the psychoanalyst.

Towards the end of his career, Erickson would continue to embrace the foundational principle of depth psychology, which is that there are mental mechanisms operating outside of conscious awareness that have functional purposes and sometimes come into conflict with conscious goals and understandings. While describing his life’s work in books co-authored with Ernest Rossi (Erickson & Rossi, 1979, 1981), Erickson continues to discuss the psychodynamics of everyday human behavior. However, in one essential detail, Erickson made a paradigmatic shift away from Freud’s theory. Whereas Freud searched the unconscious mind for evidence of psychic damage, Erickson viewed the unconscious as a reservoir of unrecognized potentials and practical solutions to problems. In other words, while Freudian insight was squarely focused on what is wrong with the individual, Erickson learned how to uncover solution-oriented insights.

As we enter into the 1940s, we come to an important paper titled, “Early Recognition of Mental Disease,” in which Erickson for the first time starts to layout the conceptual foundation on which he will later build his pioneering theory of utilization. While seeking to define the parameters of abnormal psychology, Erickson writes that, “... a generally satisfactory yardstick of normality concerns the purposefulness and usefulness of behavior. While we agree that all human behavior is necessarily purposeful, the usefulness of normal behavior is clearly recognizable, understandable, and effective so far as a reasonable achievement of personal goals and aims is concerned” (p. 179). After offering a brief example, Erickson distinguishes mental dysfunction stating, “Hence, it becomes abnormal because of its definite lack of a useful purposeful character” (p. 180).

In these statements we see the philosophical influence of Jamesian pragmatics and the beginnings of Erickson’s clinical imperative. Those who are familiar with the *principle of utilization* (Short, 2020, p. XX), recognize that as soon as extemporaneous action is put to use, as a means to an end, it gains practical value. Thus, in the context of Ericksonian therapy, utilization communicates the idea that who you are and what you are doing has real, practical value and can even be the means by which we achieve important therapeutic outcomes. In this same 1941 paper, Erickson maps out his future focal points for clinical intervention: 1) attitudes toward the body, 2) general habits, such as eating, sleeping, and playing, 3) social adjustment, such as marriage and parenting, and 4) emotional reactions (pp. 182-186). The point of the paper was to assist general practitioners in the early identification of mental illness for more proactive treatment. Two decades later, as he starts to formally describe his utilization approach

to psychotherapy, Erickson will use this same intellectual road map to guide his identification of behaviors to be utilized towards some subjectively and culturally meaningful end.

Early in my studies of Erickson, I was advised by one of his universally respected proteges, Kay Thompson, to focus most carefully on Erickson's clinical work during the 1960s. Thompson explained that during this decade Erickson had fully developed his own unique approach to therapy and that his mental acuity, dynamic style of engagement, and expressive language capabilities were at their peak. She contrasted the 1960s with the last decade of his life, when most of his disciples came to study his work. Thompson said that by this time Erickson was so wrecked with chronic pain, physical disabilities, and exhaustion that these clinical demonstrations are a meager representation of his former clinical acumen.

Following Thompson's advice, I have paid careful attention to Erickson's writings during this period. In my opinion, it is his 1964 paper, *The Burden of Responsibility in Effective Psychotherapy*, that marks the beginning of Erickson's fully developed approach to the care of human consciousness. While that paper is not included in this volume, we do see a 1965 case study contained within a chapter on *Brief Clinical Reports*. This chapter had multiple authors, so it is important to recognize that the first few case descriptions are not Erickson's work. When we get to Erickson's case work, p. 168, we find the type of strategic approach for which Erickson eventually became famous. Specifically, Erickson explains the usefulness of encouraging overly perfectionistic test takers to intentionally strive for a lower grade. While some would classify this as the use of reverse psychology, Erickson explains the approach in terms of achievement. He argued that it is important to motivate the patient towards the "comfortable" achievement of lesser goals. Here we see Erickson's signature goal-oriented approach to therapy within the context of a collaborative working alliance.

The papers I have described thus far are located at the back of this volume, with Erickson's earliest writings placed at the rear of the book. Moving to the front of the book, there are numerous encyclopedic descriptions of hypnosis written by Erickson (1934-1961). These concise descriptions of Erickson's conceptual modeling of hypnosis mirror the numerous recordings of Erickson's teaching seminars housed in the Milton H. Erickson Foundation's archives. After listening to nearly 1500 hours of archival recordings, I came to the conclusion that Erickson's definition of hypnosis was two-tiered. At one level there is the intrapersonal dimension that involves developing an intense inward focus of attention. From this perspective, Erickson summarizes the essence of hypnosis saying that, "It is primarily a psychological state..." (p. 21). Elsewhere, he elaborates stating, "Thus you can induce a trance by directing patients' attention to processes, to memories, to ideas, to concepts that belong to them. All you do is direct the patients' attention to those processes within themselves" (p. 38).

However, in other places, Erickson seems to contradict himself, stating that, "Essentially, hypnosis is a relationship between two people..." (p. 7). Erickson then goes on to identify cooperation as the most essential element in hypnosis. As Erickson states, "without full cooperation between the subject and the hypnotist there can be no hypnotism" (p. 9). This second tier addresses the interpersonal dimension of hypnosis. Rather than viewing hypnotism as a unilateral, mechanical act, Erickson viewed it as a relational exchange that, "depends on the situation and on the motivation of the patient" (p. 39).

These principles become more cohesive if we consider modern theories of identity that suggest without others it is impossible to develop a sense of self. If you view the hypnotic protocol as a device that intensifies the psychological connection between two individuals, *then the cooperative interplay that takes place during this special state amounts to one person guiding another to a more capable version of self*. I am reminded of an analogy Anne Lamott made about her own psychotherapy, saying, "My mind is

like a (bad) neighborhood I try not to go into alone.” In Ericksonian hypnosis, the client journeys inward to the farthest reaches of the mind accompanied by a guardian.

As mentioned earlier, Erickson’s legacy is one of tremendous compassion, acceptance, and creative problem solving. You too can conduct the craft of mental healing in the Ericksonian style but you must be ready to dedicate yourself to years of practice, tireless self-scrutiny, and an unshakable faith in the potential for goodness and productivity in all human beings.

References

- Erickson, M. H. (1964). The Burden of Responsibility in Effective Psychotherapy. In E. Rossi, R. E.-K. & K. Rossi, & K. Rossi (Eds.), *Collected Works of Milton H Erickson: Volume 3: Opening the Mind* (Vol. 3, pp. 67–72). Milton H. Erickson Foundation Press.
- Erickson, M. H., & Rossi, E. L. (1979). *Collected Works of Milton H. Erickson, Volume 11: Hypnotherapy: An Exploratory Casebook*. Milton H. Erickson Foundation Press.
- Erickson, M. H., & Rossi, E. L. (1981). *Collected Works of Milton H. Erickson, Volume 12: Experiencing Hypnosis: Therapeutic Approaches to Altered States* (Vol. 1–12). Milton H. Erickson Foundation Press.
- Short, D. (2020). *From William James To Milton Erickson: The Care of Human Consciousness*. Archway Publishing from Simon & Schuster. <https://www.bokus.com/bok/9781480891623/from-william-james-to-milton-erickson/>
- Short, D., Erickson, B. A., & Erickson-Klein, R. E. (2005). *Hope & Resiliency: Understanding the psychotherapeutic strategies of Milton H Erickson MD*. Crown House Publishing.