

**Summary of a Workshop in Development and the Basis for
THE LITTLE HANDBOOK OF MICHELE KLEVENS (RITTERMAN'S) TRADEMARK:
INVISIBLE COUPLES THERAPY**

By MICHELE RITTERMAN, Ph.D.

PREFACE

This little handbook is intended to be the busy therapist's guide to conducting an effective interview with even the most challenging couple. Beginner and advanced clinician alike will benefit from the ten steps offered here. The book is based on workshops I gave in Mexico, Israel, Germany, Switzerland, and various places in the United States since the turn of this century. It includes transcriptions from live couple interviews I conducted.

I call the way I work Invisible Therapy, because couples leave a session feeling as if they've had a delightful chat with a nice person. Afterward, they often find that their relationship had shifted sometimes after one session. This book explains how this shift can occur. The methods described involve a diligent collaboration with the unique patterns of each couple as a one of a kind, not as representatives of some category or diagnosis.

I chose this format of short text and little chapters because it is simple to read, to digest and to apply. Academic writing provides thorough conceptual underpinnings but is slower on the how-to. With the little handbook the reader can flip through the 100 pages, ten pages per section, in one or two sittings, and then return to a favorite ear-marked page as needed.

**Maximizing the Healing Power of Human Connection
Michele Ritterman, Ph.D.
Sept-Nov. 2006 for MHEIBA**

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Workshop Overview:

In this workshop, therapists, educators, body workers and other mental health professionals will learn how to track couple induced trances.

Trances are broken down into the subtle, naturally occurring sequences of conscious and unconscious behaviors in client interactions, both with the therapist and with each other, in couples or families.

Attendees will learn how to help clients awaken their own successful ways of relating in other arenas of their lives, and to introduce them as alternatives to their troublesome habits. They will then learn how to guide clients - individually and as couples - toward spontaneous healing states.

Throughout, there will be special emphasis on the power of others in inducing trance in symptom-bearers, and the special reciprocal harmful or healing powers possessed by couples or dyads.

Michele's premise is that just as a driver of a car can shift from first to neutral, therapy can help a client or a couple at a precise moment, to shift from a troubled set of mental associations into a calm creative, resourceful working-meditation.

She will demonstrate that there is a stream of life that runs through even the worst human dilemmas. If therapists enter that flow, like Goldsworthy does with art, or like a chi master does with the body, therapists may help individuals, couples and families to re-balance their behaviors and feelings, naturally.

Workshop attendees will learn that truly every human challenge is unique, and that it is in the details of this uniqueness that they will discover what Borges called the astonishment and the wonder needed for their clients (and themselves!) to produce transformation and healing.

Many hard problems can be resolved, while clients feel comfortable, laughing and chatting. This workshop will consist of lecture and theory, experiential group inductions and couple inductions, and role-playing practice opportunities.

Biographical:

In 1983, Dr. Michele Ritterman heralded the systematic integration of Ericksonian Hypnotherapy and Systemic Family Therapy, with her pioneering text, Using Hypnosis in Family Therapy. This cutting-edge work, continuously in print in English, Italian and Spanish since 1983, is now published with a new introduction by ZeigTucker press and has been called "a classic book filled with seminal ideas."

One of Milton H. Erickson and Salvador Minuchin's foremost students, Dr. Ritterman is also a human rights activist. Her second book, **Hope Under Siege: Terror and Family Support in Chile** with a foreword by Isabel Allende, and translated into German, as **Liebe und Terror**, is a testament to the power of the loving family, to awaken torture survivors from the most evil of social trances, what Dr. Ritterman calls the Counter-Therapy by the State. Dr. Ritterman has also just produced the first CD on **Trance for two, Shared Couples Trance**, based on a form she's developed called a poetic induction, that emphasizes the importance of closeness in part one and of separation within-

relationship in part two, to help couples know whether they wish to rejuvenate their love on the deeper levels.

An expert on naturally occurring trances in couples, families and societies, in her master classes across the globe, she teaches that transformative psychotherapy produces counter-trances. These newly formed states offer a powerful and long-lasting medicine with no harmful side effects to the organs, especially not the sacred brain!

Her inspiring workshops are filled with comedy and heart. Above all, people describe their time with her as fun and a chance to explore just what they really want to know. Her papers on subjective time, torture, family therapy and Ericksonian Hypnotherapy may be downloaded from her website at www.micheleritterman.com. Handouts will be distributed at the workshop.

Maximizing the Healing Power of Connection: Structure and Focus

This is an eight-week workshop. On Friday afternoons from 12:30 to 3:30. A total of twenty-four hours of training in maximizing the healing power of connection.

The workshop starts the fourth week in September and will include the following eight Friday dates: September 22, 29; October 6, 13, 20, 27; November 3rd and 10th. Meetings in Michele's home office in Berkeley.

All levels may attend. If you wish to receive a certificate of completion or continuing education credits, let me know.

The focus is upon work with states of mind awakened in a variety of two-person couplings. We will learn to track interactional and often unconscious suggestions, especially the ones below the ordinary threshold of perception, the subtle ones that can drive people out of their own minds. We will learn ways to intervene into those naturally occurring spontaneous processes in a way that helps people to amplify the healing power of their interactions.

Each class is three hours and is divided into three parts, approximately one hour each: lecture, or discussion of key concepts of a paper or chapter of book; demonstration of a clinical technique or key therapeutic concept or showing of a DVD that demonstrates the technique or idea through experiential role-play and guided practice.

Come ready to treat each other well and enjoy this unique learning experience together.

Class Outline and Syllabus by Week for Eight Weeks:

Sept. 22 - Class One

Didactic: Introducing the idea of hypnotherapy and couples' work. Review of "A family induction of symptom components" from *Using Hypnosis in Family Therapy*.

Establishing a broad definition of couples that includes any two-person system. The concept of hierarchy in naturally occurring couple interactions will be emphasized. Discussion of what is a suggestion and what is the role of receptivity in two-person suggestion.

Interactive Component: Demonstrations with role plays by group members.

Experiential exercise: students practice tracking a two-person suggestion of a symptom. Our goal in this class is to learn how to perceive *therapeutic healing as a collaboration with nature*, to work with what is naturally occurring between people, to literally follow closely or track their flow, so that we enter our interventions directly into the natural stream of their own consciousness and behavior, instead of entering something alien or foreign into our clients/patients/or students' lives. Our second goal is to understand power dynamics at various levels in relationships and how to track shifts in the power balance as couples begin to deal with their hot issues of expertise, responsibility and need. In this way pairs learn to hear each other and feel each other, instead of talking over each other in the crossed wires of different levels of communication.

Sept. 29 - Class Two

Didactic: To utilize subjective time distortion and stopping the clock technique in a two-person intervention reading "Stopping the Clock in Psychotherapy."

Trance is characterized by *an absence of preoccupation with clock time*. Helping couples enter subjective time is not dissimilar to entering into a kind of meditative state. Two people can learn how to shift directly from their stuck state into *a transformative meditation or working trance state* and expand their behavioral options from this creative source.

Interactive: Demonstration of subjective time induction.

Experiential Exercise: Group practice of subjective time induction for two.

Oct. 6 - Class Three

Didactic: Lecture and demo on the symptom as a gift in psychotherapy. Reading of "Exchanges of Power in the Therapeutic Relationship." Teaching people in light trance exactly when *how and where they have the power over themselves to pick up or not pick up something someone offers them, i.e. the emotional gift*.

Interactive: Demonstration or group induction

Experiential Exercise: To practice immunizing one member of a couple from the destructive suggestions of the other.

Oct. 13 - Class Four

Didactic: To learn *an induction that uses sensual memory*.

Interactive: Attendees will learn to recall stories of their own about each of their faculties and senses and learn to use these stories to help two person units enter into a different frame of mind from the one they are stuck in, awakening memories, feelings and sensations they may not have experienced for a long time. This induction, like many others, can then be used in a technique called *de-pairing* and *re-pairing* in two person dynamics. When couples are stuck each reacts predictably to the cue of the other, whether that cue is intentional or not. In de-pairing, hypnotic techniques may be employed to help the member as he/she is triggered by the other, to immediately become aware of many alternative responses.

Experiential Exercise: Students practice de-pairing technique, using the senses.

Oct. 20 - Class Five

Didactic: To practice carrying out a shared reverie for two people we begin by listening to the CD on Shared Couples Trance, tracking the micro-steps of this induction. How do we use our own counter-inductions of symptoms to help to *break the spell of a dysfunctional rapport*? A handout will be provided to attendees for this process.

Oct. 27 - Class Six

Didactic: To practice a *separate track trance for two people*, listen to the CD on Separate Track Trance.

Experiential Exercise: Form groups of three to practice these inductions.

Nov. 3 - Class Seven

Didactic: reading of the publication from The Handbook of psychotherapy, "The stance of the Ericksonian Psychotherapist" with:

Experiential exercise: demonstration and experiential practice on this stance as it applies to couples.

Nov. 10 - Class Eight

Didactic: The cardinal features and strengths of two-person systems, for healing power: reciprocity and synchronicity. Discussion of these two forces and demonstration of the practice of cultivating them. When two people meditate together, studies have shown they may develop a special empathic and intuitive connection, what Deepak Chopra calls a similar vibration, even when they are non-local, not in the same place at the same time. This level of feeling the other, rather than working to enhance verbal communication skills is part of what we are after in maximizing the healing power in two person units.

Wrap-up: Culmination of the class...it will be what unfolds naturally.

Goals and Objectives:

A primary goal of the training is to teach attendees how to track two-person symptom inductions, go to the heart of the problem, the exact moment it is triggered, to interrupt the pattern and to invite the couple, the pair, or the family members (mother/daughter, etc.), to introduce new physiological states and interactive patterns into their tricky moments.

Ultimately therapists will study how to help a dyadic unit, right while they are in the middle of their nightmare loop, to shift into new ways of responding they couldn't imagine while they were trapped in a certain unintentionally suggested physiological state. Their new physiological behavioral sequence is a psychological equivalent of yoga: part of a new invigorating daily practice.

Readings will be drawn primarily from **Using Hypnosis in Family Therapy**, recently republished by ZeigTucker as a classic, from Dr. Ritterman's CD on shared and separate track couples' trances, and other relevant papers on couples and trance, including.

"The Philosophical Position of the Ericksonian Psychotherapist," from the **Handbook of Ericksonian Psychotherapy** and "Stopping the Clock," published in the **Family Therapy Networker**.

This book is part of a series of little handbooks. One is *The Stance of the Ericksonian Psychotherapist: Ten Steps*. Another is *Clinical Spiritual Aphorisms for Therapists and their Clients*. I hope you will like the whole series.

I would like to thank the following people who encouraged me in this work: Susan Dowell, Peter Weiss, Electra Reed, Miranda Ritterman, Judah Ritterman.

Introduction:

Guten Tag mein herrin und damen. That's about the end of my German, and that start of where you can use your trance skills, so that you can imagine that I'm speaking to you in German. I wish I could. But maybe next time.

I'm very pleased to be here with you today. It's a long trip for me, and an interesting experience to be here with you at a congress, and I know that there are not many Americans invited these days, so I consider this invitation a compliment. I do not come here with the idea of conquering the world. I come in peace. to cooperate and to collaborate, and that's what I teach about with couples and families as well. Whatever content or subject matter that I'm talking about, I'm always talking about how we can create a world where we all can live together and cooperate and share the planet Earth. I have always been interested in how we can promote the kind of couple, family and social relationships that will help us collaborate on this still wet planet.

As a former student of Dr. Erickson's, I think that the greatest importance that Dr. Erickson's work has, for example, is not to create a society of Erickson clones. When I first studied with Milton, in imitating his hypnotic inductions, I observed from watching a video tape of a family therapy session I conducted that at twenty-eight, I spoke as if I were a partially paralyzed older male. Later I asked Dr. Erickson, are you telling me to use my intuition? He said, "I certainly hope so. Because intuition is your science of observation that you've been conducting your whole life." The point of digesting and taking to heart his beautiful work based on his life experience and talents, is to be uniquely what you are, based on your experiences and talents.

Imagine if everyone can be uniquely what they are, and not have to fit into some form of what they should be, then perhaps people would feel the happiness that comes from a loosened belt and free breathing and would be able to accept even embrace the charming and mysterious differences of the other.

I think we live now in the generation, and certainly my children do, they're in their 20's, where we need to really understand how to embrace difference. The peoples of the world have been displaced and scattered throughout all the countries of the world. There are no pure nation states. Warring countries threaten to destroy the world as we know it. Working with couples that are fighting is a perfect place to begin. But I want you to please understand that always my interest is in this: how do we create the circumstances under which people can cooperate, and change, spontaneously, tilting toward good. And notice we do not make people change. They change themselves, when the conditions both inside and outside of them are right. We help create those conditions.

I need to briefly introduce my work to you, so you have some idea where I'm coming from with the techniques, I'll teach you today.

This is my first book, *Using Hypnosis in Family Therapy* (1), continuously in print since 1983 in English, Italian and Spanish, and recently published by ZeigTucker as a classic. It

is the first book to study how families hypnotize their members and how therapists can make healing therapeutic counter-inductions.

This CD is work that I have done recently. It's also a first of its kind, on *Shared Couple Trances (2)*. It consists of two tapes for couples to play as they sit or lay down together, and one trance is to share in a special journey together, if you will. Another is to go on what I call separate tracks, in which they can go off separately from each other, while side by side, to learn to have separation within the relationship.

The two are very important. Often, we think of helping relationships heal in terms of enhancing couples' closeness and fostering their togetherness. Sometimes couples need to make their world bigger by focusing less on each other or to simply respect their differences, accept their different needs. When I inquired about the secrets of Dr. Milton Erickson's happy marriage and the management of disagreements within it, only months before he died, with his wry smile Milton said to me, "Betty has her problems and I have mine. We're always hopeful the other will change. Neither has yet, but we're always hopeful." Thirdly, sometimes couples need not try to be everything to each other.

There's a beautiful book, (Title 3) the latest I think, by Kurt Vonnegut. Have you ever heard of Kurt Vonnegut? He's an American sort of old hippie writer and social critic. Here he stands now at his height, in his 80's, writing about everything including marriage, and he said, "I think the biggest problem in relationship, if we were honest, would be that I would say to my partner, 'You know, my dear, you are not enough people.'" [Laughter]

With that in mind, you know, we cannot always - couples come to us, and they cannot always expect to change each other or find every treasure with each other. We don't have to help them find everything with each other, just enough good stuff that is there and a willingness to let or encourage the other somehow to respectfully adventure out to get the rest.

Before I exclusively address couples, I want to give you a little bit of background on the relationship between trance states in individuals and shared trances in both couples and families.

I studied with Erickson the last seven years of his life, during the same period as Drs. Jeffrey Zeig and Ernest Rossi. At the same time, I was a psychology intern at the Philadelphia Child Guidance Clinic, where I studied structural and strategic family therapy with Salvador Minuchin, Jay Haley, Harry Aponte and Braulio Montalvo. I traveled to Phoenix Arizona to study with Dr Erickson. I learned from family therapy that by working with the family, and I'm sure you all know about that, that if there's a problem with the child, whether the child is bedwetting having temper tantrums, or suffering school phobia or even super-labile diabetes, if you help the parents to agree on how to manage the child, the family begins to reorganize its structure, even at the level

of blood chemistry (4) and *le voila*, the child can automatically spontaneously change. You know, instead of asking what is wrong inside the mind and body of the child for their first step, the family systems thinker, at least at first, helps the family to realign, and then the child usually spontaneously begins to change, whatever the symptom. You're familiar with all this? Yes, from Gunther Schmidt (5) and Bernhard Trenkle (6). Erickson also did some work with families, but mainly he taught how to enter the unconscious processes of a person, help them to reorganize their own objective and subjective experiential realities, and then to observe them as they spontaneously make changes in their relationships with other people.

When I came back home to Philadelphia from these trips to study with Dr. Erickson, I began to employ hypnosis with a family member during a family session. But I did not understand how the two seemingly opposite approaches of hypnotherapy and family therapy really fit together. I knew that if truly family therapy is describing any kind of reality, and if the hypnosis was describing reality, somehow, they had to come together in some integrated way. But to just use hypnosis with family members was not really making sense to me. I knew there was family members was not really making sense to me. I knew there was something more to it than that.

Part One:

Suggestibility In Couples Therapy - Who is the Hypnotist? The Negative Trance State

I want to ask you before I go on, a question that you can come back to often. Who do you see as the hypnotist when you work with people? If you will get into what you really think that guides you automatically in your work, it will be good for me. I hope it will be good for you, too. I will ask afterwards, Was it good for you? Yes, yes. That's the thing, this teaching dynamic, it's a relationship, too. But I just want you to become aware of your ideas and assumptions, so we can have a happy little conversation that you can continue later with yourself. You look puzzled. But - do you - Michael, any thought on how do you see - who is the hypnotist, or what is a hypnotist?

Yes, the patient is hypnotizing as well. Michael says the patient is the hypnotist of the therapist. Surely that is a rich area for study as we look at the importance of our shared rapport with clients. And as each of you continues to go deeper into this question, let me ask you the question another way. Suggestibility. You know, there are scales of **suggestibility to hypnotic induction**. How suggestible is a person is a question that comes from certain assumptions. And I'm asking you to bring forth your assumptions and then consider the possibility of putting them away for the moment, because I'm talking about something very different.

Suggestibility, for example, have you heard about the Spiegel (6) eye-roll techniques, is this something you ever think about? Is this person suggestible to me as the hypnotist? Can I get them to go deep enough into trance? You see, there are all kinds of

suggestibility. Laboratory suggestibility has no necessary relationship with real life suggestibility, in my humble opinion. Zero. Nada. Niet. You know? And where did I learn this? I learned this in South Africa in the veld.

My then husband and I were bringing humanitarian medical aid to South Africa while Mandela was in jail. And we didn't want the police to watch us too carefully. We went on a safari one day as part of our plan to be good tourists. South Africa is very beautiful. On the safari, we saw this big elephant, named Van Gogh. He was named Van Gogh because his ear was badly torn. And so, you know, the artist Van Gogh cut off his own ear? Yeah, so they called the elephant Van Gogh. I asked, "Well, how did the elephant's ear get damaged?" They replied, "there's a fence we put between our safari and the other safari. The elephants (pride?) have been broken up by this fence. Their friends and relatives are on the other side. Every few nights all the elephants line up against the barbed wire, and they stomp down the fence." Now, they up against the barbed wire, and they stomp down the fence." They get torn up. They get cut up. And poor Van Gogh, here, he lost his ear."

In the laboratory the consistently punished rat in the box will get the message of hopelessness, become despairing, and give up trying. Trained Helplessness. But in real life, out in the wild, if you can break down that fence, even if you will be punished and aversively conditioned, you will still tear down the fence to get to your friends and relatives on the other side. I learned from Van Gogh the Pachyderm that suggestibility in the wild and reactivity in the wild is different from the laboratory.

Now, we might say, "Oh, this person, he cannot be hypnotized," but bring in his mother. [Laughter] and now we will see if he can be hypnotized, right? There's an old joke about a lawyer, a very distinguished lawyer. Mike Nichols and Elaine May, two comics do this routine. Mike is the attorney, and he calls his mother, who is Elaine. In his most stately and formal tone, he says into the telephone, "Hello, Mother. How are you?" She says, "Oh, my son, it's so good to hear from you." And he says, "Yes, Mother. It's good to hear from you too. I hope you're well and Father is well." "Oh, Honey, it's so good - I heard it's been raining where you are. Have you been wearing your raincoat? You know how susceptible to colds you are." Yes, Mother, I've been wearing my raincoat. Uh. Um. You know, uh, it's all right. Estelle and the kids and I, We're all, fine. "That's so good, sweetheart. You know, and have you been successful with that dreadful lawsuit you had to handle all by yourself," "Yes, Mother," and by the end he's going, "Da da, Mama. Goo goo, Mama. Yah yah, Mama." You know?

There is **special suggestibility to the family**. And I learned the power of suggestion by the family, and I learned to understand that the family hypnotizes its members, especially its children, who dwell often in states of naturally occurring trance, daydreams and imaginative reveries, and so are very receptive.

When we talk about suggestibility, what are we talking about? We're really talking about who is the hypnotist. OK? Who is the hypnotist. The powerful, the more powerful hypnotist is the person who is more intimate with the person than the therapist. That's why we need skilled therapists, because therapists may be granted, may earn the power, to come in and help break the spell of the problems that people are having with other people (8 Breaking the Spell of Dysfunctional Rapport).

We know what hard work it can be to facilitate a healing trance. But why is it such hard work? Because whatever we do, our clients go back to the intimate hypnotists who know the cue words and the suggestions that the client may not like and that may not be useful to them right now. Maybe these same intimate messages were once useful, and they're not useful now.

I learned this watching a tape of my own work. (See ref.#7 for transcripts), I was working with a family. The young man came to my session. I worked very hard. He was a very difficult case. Dr. Minuchin assigned him to me when I was an intern so I would learn that I was entering a difficult is this field.

David came in with the presenting complaints that he could not think from one thought to the next thought and that he was having chest pain. I helped him in the context of his family, a small, quiet, retiring, ill father and a bigger domineering talkative mother, and now he will register tomorrow morning for college. The crowning moment of success for the therapy is about to take place.

I am watching a videotape I made of the session with David and his parents on the day before college registration, because I must use this tape from a year earlier to teach a group. I'm watching the videotape, and I'm very upset to see it. Why? When David strolls into the room, he is normal and fine. He has no problem. But during the interview for the first 15 minutes, his mother starts like this: "Now, David does not need to feel guilty that he will register for college, even though his father's health condition, his Parkinson's, has deteriorated." That's how it opens. Then the father says, "That's right. David does not need to feel guilt." OK? Now, - these are the first two steps of the Rossi-Erickson hypnotic induction paradigm (ref 9), Step One is to direct the person's attention inward, away from what's going on outside of them. Mother did that by directing all our attention to the father's health condition. We're now inside the father's body. We're inside the body of the family and by extension inside the young man's body as well.

Now over here is external reality. The boy must register for college tomorrow. This is what we should be talking about. As Michael in the audience mentioned, our poor therapist is also hypnotized for the moment, so now we're all in the body of the father. The second step of a hypnotic induction is to help guide the feeling tone of the internal search. Here comes the second family message, this one from the father: "David does not need to feel guilt."

If I tell you do not to think of the color red, please do not think of the color red, OK, just anything else, but not red. Don't think of red. To not think of red, you must think of red, at the very least, to make it go away. It's a problem I have with a lot of meditation training. They say, "Empty your mind of thoughts." Well, of course, there they are. More thoughts than you could ever dream of. This young man's mother is a good hypnotist, she's compelled fully her receptive son's attention, and she's directed it inward into the body and the father hypnotist has now given that search a feeling tone guilt or a negative trance state. Thirdly, Mother says, "And, you remember, my son, when you registered for school when you were a little boy, and we sent you to a private school, and you failed." Mother is now opening the psycho-physiological, time travelling, past-based, visceral memory file, but in a destructive way, and at a bad time for David to rivet his attention to college registration.

You start to see here that what I understood from this session, and I won't go on with it long because I want to focus today on couples, is that the family hypnotizes its members. You can read in my book how this family followed precisely the Rossi-Erickson induction paradigm before their model was ever published.

How do these two schools of therapy, interactional or family and individually based hypnotherapy come together? How do we begin to understand at once what couples are doing to each other on the unconscious or automatic levels, both within themselves and with each other? Remember, it's not that they're doing it on purpose, and it's not that anyone necessarily has a bad intention. People can - people's intention is usually good. They wish to help each other, and they wish to love each other. David's parents said, "All we want is for him to be happy and to go to school." But what happens is they begin to give each other suggestions, and these suggestions they give are very powerful, and then the person, the other person, enters faster than the speed of light, into a certain state of mind.

What happened in David's family was that within 15 minutes David said to me, "There is something wrong with my mind. I cannot think from one thought to the next. My chest, my heart hurts." In other words, I watched the family make suggestions that cued the young man to leave his happy state of mind and enter a state of near panic. That was when I understood, OK, they hypnotized him. I watched this a thousand times. Fortunately, I did wake up and help break the trance but without yet having fully understood what I was doing.

What happens when you work with a family or a couple is that you want to begin to see what the family does not see, because for them it's just automatic. Knee-jerk. Daily life. It's just what happens when they are together. Because for us, we do not see the things that we do; we just live it. Even as we strive to be mindful, our relationships can be as invisible as the air we breathe. But we are still affected by that air.

What you begin to see is that the people make suggestions to each other without intending to do it and that these suggestions culminate in the symptoms of one or more members what happens is the person, enters a certain ego state, a certain state of mind. When they are in that state of mind, they act a certain way, they think a certain way, they feel a certain way, they remember certain things, they know certain things, and they have a complete amnesia for other things. They are in a symptomatic trance state. In 1983 I coined the phrase for all this as "the negative trance state." (See Breaking the Spell, 1983 Ref 9).

What I began to understand is that we go to Ernie Rossi's work perhaps, that people go in and out of trance 20 minutes of every hour naturally. Our brain has biorhythms, just like our digestive system and our respiratory system. We are a symphony of rhythms. We eat, and then everything gets processed, and then we keep what's good, and we throw away what's bad. Or we try to get rid of as much pollution as we can. Some things we can't get rid of, so we say, "Oh, I'm sorry, dear tummy, liver and spleen." But the brain also has these rhythms. During this, think of the power of the couple or the family. While we make suggestions to each other in the family, each of us if going through these rhythms in which our focus is inward and dreamy, then planning, and then prepared to execute plans. Each of us is naturally going into these states of mind of varying degrees of receptivity to external input. Then the other speaks giving us virtual suggestions. These suggestions are given at moments of spontaneous natural and automatic receptivity. And in a family system or in a couple, what happens is **we get stuck in certain patterns of suggestion and reception. We get stuck in certain states of mind, behaviors and roles with each other. This is what we want to be able to observe, experience, and track as the therapist.**

We saw this in the example of a couple who came in a workshop I just gave in Germany. If a couple has become stuck in certain roles with each other, and when the wife describes him as boring, dragging her down with family burdens, denying her romance, the husband automatically goes into a certain trance state, and he acts like what she says he is like. He becomes his mother's dutiful responsible son, and that then triggers the wife, who wants to set the embers of their youthful love on fire, into a despair that that embers are dying out.

Do people here work with couples? A little bit? Some. You know this is what happens. And if you don't, this is OK too. You can take these understandings to your work with individuals or with families or - or your own relationships, your own life. It's very interesting to begin to see these things in your own life. I think it's very important as therapists to look at our own lives as well, and to be open to that. So many therapists, I feel, present to their clients an artificial view of what is happening in life, as if their whole life is perfect. "My life is perfect, poor client, but your life isn't." No, it's not like that. We're all in this evolutionary soup together. Every couple is a microcosm of the world, a telescope through which we see the constellation of relationships today. Across the world now relationship paradigms are shifting. There're shifts in understanding of

what a good relationship is, what does it mean to connect, to commit. So, you know, we're all in the same boat. I like to talk about it in that way, across, you know, we're all in this together, and how will we make relationships better. I'm not into top-down therapy. But what happens is go back to this question, my little questions: who is the hypnotist? The hypnotist, I would say also for the - I have so many things I want to tell you, I'd better slow down. "Despacito por las piedras." Right? That's a Chilean – Maribe, she is of Chilean descent - that's a Chilean saying, and it means if you are in a very big hurry, slow down. What it really means is if you want to run across the Andes mountains, there are many rocks [Spanish], so you'd better watch out so you can go fast.

For the first part of therapy, I am interested in the family or the couple as the hypnotist. I see them as the hypnotist. They are actually hypnotizing each other, but they don't know that they are or intend consciously to do so. The very complaints they have about each other may serve as suggestions to the other person that trigger a certain state of mind they don't like, or a negative trance state.

Part Two:

Resistance in Psychotherapy vs. the Symptom

Its Induction as a Gift and Speaking in the Couples' Language

Blame vs. Responsibility

One woman was constantly saying to her husband, "You hate me. Look at you. You hate me." This is how she feels, we could say. But I would say to you let's look at that as a suggestion. She is telling him that. You know, when couples get stuck, they say, "You don't care about me anymore." We saw this in the tape of the session in Germany. "You don't care about me anymore," says the wife, "because you don't romance me and take me on trips." Those two things are stuck together, in her mind. Because he does not do this, he does not care about me. Not necessarily do those go together. The husband says, "But I work long hours to pay the bills and I want you to be with me and our children and my family on Christmas, and I am loyal to you." Those things do not match up for her with caring about her. But her description works as a suggestion. The person is saying, "You don't care about me," is like a directive. It's like a direct suggestion. But it's not intentional. We can **see it is followed by the husband shutting down and withdrawing and seeming as if indeed he does not care.**

I want to go back to this concept, because this is very important. We talk a lot **about RESISTANCE in therapy.** What does it mean to you, what is resistance.

You will not speak. Here it is. A living example of Resistance. Is anyone in a bad position to respond? [Laughter] I don't want to put anyone in a bad position. I accept that you do not feel comfortable yet. To me resistance is pretty simple. It reminds me therapy is making love. You feel it. Thank you, Stefan. It is a palpable force. . .that's right. There is a

force that you do feel when you come in contact with another person. I'm sure you're very sensitive to that, and that's good.

Resistance is information that the offer you were making was not the right one. You take this force, you feel it, and it tells you, uh, you're going the wrong way. It's like a sign. It's like a road map. I talk about this in my book, that the symptom is actually a gift.

THE SYMPTOM IS A GIFT. I think I work more like shamans than like a medical professional, although I like aspects of Western medicine, I am really interested in the symptom that's a gift. I was saying that to me therapy is like making love. You know, and sometimes someone will - I have couples come in, and they're having a hard time now with each other, and so they will say - the wife will say, or the husband will say, "I don't like when he or she touches me like this." And the other one will say, "See, that's the way she is. There's no way," or he is, "there's no way to touch him or her." They criticize the other one. Now, if I don't like you to touch me a certain way, then don't touch me like that. But instead, no, there is something wrong with the person because they don't like to be touched like that. This is what we do in therapy. This therapist in our audience, Stefan, he does not, and many of you here do not do that, and that is very important. It's extremely important and not adequately understood. If the person doesn't like it, don't do it and you won't incur resistance.

You know, the other thing is people - just because people come to us for help, I think this is another idea that we - at least in America - have been trained with **diagnoses**, - do you have all these diagnoses, the DSM whatever version it is updated to? I'm here to learn what you have, too. To me any book that is bigger than the Old Testament plus the New Testament plus the Koran, that has been developed over 30 years, I don't trust it. Thirty years is not enough. Maybe after twenty generations I feel a little more comfortable with some of the ideas. But these diagnostic categories, this way of freezing people, does not help us understand that when individuals and couples come to us for help. There may be nothing wrong with them that a little experiential rearrangement can't change. I like to think of my work as the anti-DSM.

It's like a car. It might need a little this and a little that, but it's a good car. I have a 1988 BMW. I love my BMW. I was told by one man, a mechanic, "Oh, get rid of it. Get rid of it. It's nothing but trouble." But I went to another man who was willing to put a little time into it, and he said, "You could have this BMW for another ten years. It's in perfect condition. Just needs a little this, a little that. There's nothing basically wrong with the car." But when people come to us for help, the first thing we do is treat them like there's something wrong with them? I think that's just terrible. That's a rejection of their unique gift.

What do I mean by the symptom is a gift, in terms of hypnosis, in terms of suggestion? (See Exchanges of Power in the Therapeutic Relationship, 1983 ref 10). You begin to see a whole sequence of interactions between people. You begin to see this person says this

about the problem, and the other goes into a certain state of mind. From that state of mind, they say or do certain things. The other person, then also goes into a certain state of mind, and they say, "You see, Doctor, this is what happened, and this is where we are stuck."

Let's say that you get this. The first thing we're trained to do as therapists is to reassure the couple, "Don't worry about a thing. We'll get rid of this nasty little problem. Don't worry. We'll take that away. **We can eliminate that problem.** We're going to make it go away." At the least, I consider that very rude. If you say to me, "This is what's going on. My husband says this, and I go here, and I say this, and he goes to this place, and we're stuck," now, well, what do you - what might you as the therapist do with this offering? What do you do when someone presents and shows you this problem, shares with you so intimately the problem that they have?

I would like to invite you as the therapist to begin therapy by admiring the problem. I call it admiring the gift. If somebody gives you a gift, what is the first thing that you do with it? Do you say, "Give that to me," to you know, and take it out of their hands? Do you grab it and throw it in the trash because it's not good enough? Or what do you do? You know, typically wouldn't you say, "Oh. Look at this gift"? Wouldn't you take some time, before you even pick it up, to admire the gift, to appreciate from many different angles the gift. This is very important in therapy.

If you understand this idea as a therapist, you'll also see it in the couples, in the way they have come to treat each other. Especially long-term couples who are stuck, usually, they're not admiring the gift of the other. They're trapped in certain states of mind, and they're just doing everything automatically with each other. Now, usually they worked a long time to get there for the, one of them to make more money than the other, and one of them to focus more on taking care of the children. They've worked a long time to get into these roles. But now, they're stuck in these roles, and they can't get out of these roles. They attack each other for what they once cultivated in each other. "All you care about is the kids." "All you do is work." They're not really appreciating each other for those roles anymore because they're tired of those roles. That's often part of a failure to admire the gift. When they come to us for help and we, the therapists, do the same thing, we say, "Oh, well, we can get rid of that." That really is an insult to the people and will create resistance. They will respond better if you admire where they are stuck now and appreciate that probably a lot of hard work went into getting them there and it is OK they are there, and we will see how this will flow.

Normally, what any kind of resistance is, when a person tells you, "Don't go here and don't go there," that does not mean that they're pushing you out. It means they're telling you what they like and what they don't like. They're not rejecting you. They're telling you how they like or don't like to be touched.

Same thing with couples. The couples are meeting resistance with each other because they're not listening to what the one likes now and what the other one likes now. Especially long-term relationships. People come together in the beginning for one reason. Now when they're ten years in a relationship, they have changed. But they are not able to admire the gifts each other are bringing now. They don't even actually see them yet. They're caught in a kind of negative suggestive process when they come to you. But this is their gift to you. If you go into changing them, changing it, you are colluding with this disapproval of the gift. You will meet resistance. At every front they will say, "Not here, not here, not this, not this, not this." Why? Because you have not first admired what they have brought to you. They can't trust you. You are experienced as a taker, not a giver.

If somebody gives you something and you say thank you and you admire it, then they will feel comfortable to give you more. Sounds simple and obvious, yet it is rarely done. It will save you twenty years of error to start this way.

When you leave this room, I would like you really to remember, you don't need to incur negative resistance or see it as a bad thing.

Part of the way **to admire the symptom gift is called tracking**. Imagine the symptom is a territory, a realm you travel, to, you need to carefully track this new world, see where it goes and where it takes you.

TRACK WHAT? THE INDUCTION OF THE SYMPTOM OR PROBLEM WHEN REGARDED AS A TWO OR MORE PERSON PROBLEM.

Couples are often a stuck nightmarish sequence. You can see them fasten their seatbelts as the other one starts to say or do something that brings on the inevitable interaction.

Seek the hypnotic moment as intimate as they will let you get with them.

Symptom components ratify receptivity to the suggestion of the other. What do you call foreplay? Give case example.

Utilize the spontaneous reveries rather than do what? What do other methods do? What is the difference between other inductions and utilization of those occurring within the flow? Steve Martin in "The Jerk" God give me a sign! After the new induction what do you do?

Encourage them to wake up and do something new, go right back into the old loop, which was put on pause when you stopped the clock, and insert something new, or deepen the state.

Or use material reviewed to trigger new behavior, a new smell, a physical sensation in the palm of the hand, a cue. Observe the other as if for the first time. See them through their eyes.

Remember whomever you talk to you talk to both. It is easier to listen to critical feedback when it is not said to you. You can talk empathically about the other to one in a manner which identifies how the other triggers upset in the one. The other is listening and not threatened.

Instant replays are practice time. Could you run that by me again? Take that from the top. You can bring in humor. Now we are PLAYING with their old nightmare loop. If you miss the chance to enter the flow, remember Rumi. Don't grieve for what is lost, it will come again in another form.

I had a gay male couple who have one of the best relationships of all the clients I've worked with, and they've worked very hard on their relationship. They had a sexual problem when they came in. One of them wanted to have sex frequently, and the other one didn't. I asked the man with the complaint that he wanted more frequent love making if he was experienced at foreplay. He said, he'd always been a good lover. I said I thought he knew nothing about it. Now I had his attention.

I told him, how many times has your partner asked that you help to clean the bathroom, or that when you come home from work you do not slam the door, race to the refrigerator and slam that door, often breaking a jar of condiments that falls from the side, while recounting your troubles at the office, and all in an atmosphere of frenzy?" "What's that got to do with our sex life?" he asked. To the deep sigh of relief of his partner I explained "That's his foreplay."

What? What did that dashing couple in the audience say over there? Are you together? See. They are laughing. And the answer is? It's true, right? Everything to do with the foreplay. You see, this is the secret. This is the secret. Now you know. Yeah. It's a one-session cure. It's a five-minute cure.

There was a couple that I was seeing that I talked about at the workshop. They'd been married five years, and had raised three daughters together, and now the children are leaving home. This is a very common problem. They wanted to talk about their sex life, as many people do, but they didn't really - they felt - it was an early session and they felt very shy to discuss sexuality too openly. We knew that that was one of the subjects at hand. Every time he approached her, he felt that she pulled away from him. He felt very rejected because he's also prided himself on having been a good lover before they met. She felt that she was just longing for him to come after her, and he never - he never did it the right way. They were stuck in this dynamic.

Something that I learned from Erickson is once you told him your deepest problem, he used to say, "And now, we can talk about whatever you like." We sometimes think **the content is so important.**

I know I still get lost in some content. Even now in teaching. My dream is to find a way to teach without content. That's where we just sit quietly. I love these gurus that people come en masse to sit with. I want to be one of those. You just sit, and my good energy just spreads around, and you leave imbued with wisdom. But I'm not there yet. I must use content. But what is important to know is that the content, say to talk about sex, need not be about sex per se.

Erickson talked about once you know what is going on, it doesn't matter what you talk about, because the difficulty that a couple's having is in everything they do. Direct discussion isn't always the most direct route to the issue. It's not that they're being resistant about talking about sex. It's that we know the problem we're talking about, but we can talk about it metaphorically through any subject they want.

The wife comes in the next week, and she says that she, who is French, baked a special platter of Tapas for her Spanish husband. She was really being the wife kind of thing. She's a working woman a breadwinner, but she really was doing a special wife thing for him. She baked all these different kinds of Tapas, each beautifully formed and with different fillings.

Now it's on the kitchen table. He comes in the house from work, in a very bad mood from his very bad boss, who's a woman. [Laughter] We all thought that when women became bosses, they would be so much nicer than the men. But, no, they're the same, because it's the system that needs to change.

Anyway, the mean boss is bothering him, rrr rrr rrr. He comes home in a mood that I refer to as Crankenstein, and he sees the Tapas, and he just goes up to the plate, and he eats three or four. While he is stuffing himself on these delicacies, he mumbles something that sounds like, "Oh, they're so good." Guess what her reaction is to all this? She said at that moment, she wanted to what? She wanted to kill him. It was very serious. We had to report this to the police immediately.

She was not feeling turned on. She was not feeling like making love to him. She was feeling like killing him. And he felt crushed. Here he is. He's had this horrible experience with this woman at work. He comes home to his beautiful wife, and the sweet-smelling savory Tapas of his childhood, and he's so excited. This is for him. Something good for him. And he takes it. Well, it's so natural. It's such a natural thing. Instead, he feels absolutely rejected and devastated. He said basically this is it, this is how I feel all the time. I don't know how to approach her.

Let's admire the gift. You know, what happened here with him? What do you see happened with the two of them?

Now, the other thing that happens is about blame versus responsibility. When you're with a couple and they go into one of these loops, the tendency is going to be to take sides. Well, I can identify with that husband. It's pretty natural if the wife is baking your favorite delicacy that you'll want to eat it. I mean what is her problem? Get a grip. It's not like he came in and didn't notice the Tapas or like he threw them on the floor. Or you will take the wife's side, and you'll say, "Well, of course, she was upset, because he didn't approach her properly. What kind of guy is he?" You know, the tendency is that you must take a side. This, in my opinion, is our bad training.

There is a time when you must take a side in therapy. I mean if one person really is going to kill another person, not like this couple that adores each other, or if there is violence and danger, yes, you must take a side in the sense you must stop certain things before you can go on, because it's impossible to receive their gift. Some gifts you must not receive. If the client wants to give me a bomb, I say, "Thank you so much. Goodbye." **I don't want your gift.** I had a client once who wanted - she changed in the therapy, and now she wanted to just scream and yell and do, what do you call it? Primal scream work at me. I said, "I'm sorry. I don't accept that gift." I don't do therapist abuse. But I'm sure you can find someone else who would accept this gift.

With the couple you do not need to make any rigid alliances. In fact, it's not helpful. Even in most political conflicts, in the world, it is not necessary or useful to take sides. People have had ancient conflicts and hatred for each other for a very long time. You are coming in with your nice little helper thing, you may not understand what's going on. The best thing is to provide some kind of loving situation in which you can "hold" both members of the couple and help each of them activate within themselves those parts of themselves that can mingle to create a workable connection, if only at first, in your embracing presence.