

# ONE-SESSION THERAPY: FAST NEW STANCE USING THE SLO-MO THREE-MINUTE TRANCE<sup>1</sup>

MICHELE RITTERMAN

Since the late 1980s, I have taught and written that the world has changed in ways that our therapies must catch up to. The key issues today are in present-time, present-space and synchronicity. Space is about personal space and our reduced sense of freedom, especially within intimate relationships, manifested in the often-heard colloquialism, "I need some space." Synchronicity is about the need for many related things to happen at once in a concurrent and cooperative manner toward the same result for experiential change to occur. Time and the experience of time is perhaps most important in life and healing today. Changing how a person feels inside is not strong enough medicine. If there are no mirrored or corresponding changes in their interactional realities of love/work/etc., the social environment will tend to dominate. Therefore, affecting our use of experiential time and producing the proper stance for action in the world becomes paramount.

My primary work experience is in the clinical world, so I will speak to that here. How can we use special skills of our mind to maneuver through the world today? The big secret as I wrote in *The Tao of a Woman* (Ritterman, 2009) comes from a Chilean saying: *Despacito por las piedras*. "If you are in a big hurry, slow down." But we must know EXACTLY WHEN AND HOW to slow down while living in a machine-fast world. So let's see how THE SPEEDING UP OF SOCIAL TIME impacts the TIME PRESSURES upon our STATE OF MIND and UPON THE STANCES we take in our life.

I will explain how I learned that TIME sense is as important a variable in therapy as the past and memories, sensations and perceptions in general, and I will explain what TIME has to do with TRANCE STATES or STATES OF MIND and WHAT IT HAS TO DO with our problems and how we handle them. It pertains especially to the kind of therapy we are called upon to do today. I will discuss and illustrate, in single-session interventions and within those sessions, the significance of what I call THE SLOW-MO STATE and the three-minute trance. We'll begin with a beginning, then four explanatory and demonstrative parts, then a conclusion.

## To Begin at a Beginning...

It was in the late 1980s that I realized that the human experience of time had changed forever and that psychological methods and most long-term therapies hadn't caught up with that change. This became clear to me in my own home, the first night I was to use a brand new microwave. Until that night, I had cooked a nice three-course dinner for my family of four and we had enjoyed meal time as family time no matter what else we all had done apart each day. That fateful night, my eight-year-old son was playing Nintendo in the living room and he asked me, "Mom, when will dinner be ready?" and I looked at this new dial on the microwave oven, and instead of saying "half an hour" as I always had, I said, "35 seconds"... and he said, "That's too long!" And I understood, even as I unplugged the bulky microwave and lugged it out into the backyard in protest--complete with the defrosting "healthy choice" meal inside and my son calling upstairs, "Dad, Dad, Mom's flipped!"--that my son was already living in a dimension of time that was different from what I had known and that if this new perception of time was not part of the understandings in my own life and my own field of psychotherapy, then the field of psychology was off the mark (Ritterman, 1995). It was apparent then that crude technological time was destroying the delicate rhythms of home time, leaving families like little orchestras in which each musician plays at a different beat, and all of them are out of sync. I later wrote "A Five-Part Poetic Induction in Favor of Human Decency (Countering the Hate Movements" in which I concluded that it was easy to hate and harm quickly, but that "Love and healing take time" (Ritterman, 1994, p. 481).

NOW, this issue of time is even more evident. Come with me in your mind to one week ago in my therapy office. A couple comes in, and no sooner had they settled into their places on the couch than each of them SIMULTANEOUSLY pulled out their cell phone from their jackets, as if drawing guns from their holsters. Each one had a saved text to read quickly about what had irritated them about the other the week before. Before they could read their texts to me, the husband hurried to say to his wife:

<sup>1</sup> Based on keynote speech, "The Three-Minute Trance to Adjust Your Stance and Avoid Medications," presented on November 18, 2011, at the annual convention of the Mexican Psychological Association, held in Puebla, Mexico.

“Listen, I don’t like how my mom is treating you on FACEBOOK. I want you to know that it is OK with me if you UNFRIEND my mother”—a many years long relationship between daughter-in-law and mother-in-law, to be dismantled with the click of a box on a screen!

Today, in this world of nanoseconds, economic pressures and social and political upheaval, our longer slower therapies do not always address the URGENCIES our clients feel in the moment. For all of us TIME, TIMING and our SENSE OF TIME is NOW. This is perhaps the central issue in determining the therapies we need.

*Perhaps we have learned to swim in the river,  
but suddenly we come to a rapids and we have no  
idea how to handle it,  
or a sink hole appears,  
and we have no idea  
how to be in the moment with this new challenge.  
And this new time urgency  
that began as minds competing with technology,  
and leaves us open to quick fixes  
like the dream of the magic pill,  
rather than what we need  
which is new skill  
at making quick shifts:  
Quick but wholistic shifts inside  
and quick but informed interactional shifts.*

It is my dream that psychologists and some psychiatrists, even working individual-by-individual, can help the people of the world to deal with the pressures of time without jumping without just cause to medications, as if there is something defective about our brains. What I call “brain-blame” ought to be our last recourse. First let us create a more human-friendly society, and when we can’t, let’s help people use their creativity to respond to the madness outside of themselves. This means having tools to help our clients be present in this moment. Every day in my office I watch the beauty of minds, like flowers with time-lapse photography, opening.

## PART ONE: TRANCE AND STANCE OR THE ‘SLO-MO’ THREE-MINUTE TRANCE

I will tell you how I first learned about the idea for this tool and I will demonstrate it with you the reader, and I will show how I used this tool with several clients. I call this tool or technique my Prozac without addiction or side effects (such as shrinking of the brain organ). It is designed to deal with the present fast pace of life, both internally and externally and it is a friend of one-session intervention and therapy to help people get UNSTUCK FAST.

It was 1975, and I was a 28-year-old Psychology student, starting to conduct my four-year Ph.D. dissertation research, which was one of the first controlled studies comparing a new drug, just out, called Ritalin, with placebo and family therapy for a group of boys now identified with a vaguely defined syndrome that was hypothesized without evidence-based research to make young boys jumpy in their classrooms. I was doing this as a student of Jay Haley, Salvador Minuchin, and Bernice Rosman at Philadelphia Child Guidance Clinic and Children’s Hospital of Philadelphia. A young psychiatrist from my clinic came back with a first professionally produced video (Erickson & Lustig, 1975) of the father of hypnotherapy, Dr. Milton Erickson, to show to Dr. Salvador Minu-chin, one of the fathers of family systems therapy. Sal, who was my boss and mentor, invited me into this private viewing. And, as they say, the rest is history...

Dr. Erickson’s subject in the video was Mondy, a beautiful African-American woman in her twenties. She reported to Dr. Erickson that she became overwhelmed entering social situations, her heart racing, her mind spinning. (If Mondy were seen by most North American psychiatrists today, she would probably be given a ten-minute interview without any blood tests or x-rays, and she would leave the office with a medical diagnosis as if she were part of some diseased cohort and suffered certain biochemical brain deficits needing to be medicated. Mondy’s medical records would state that she suffered Social Anxiety Disorder and she would likely be prescribed Paxil or Zoloft or Celexa— which is like assuming fevers are caused by taking too little aspirin.)

Dr. Erickson was an M.D. psychiatrist, but one who was very cautious in the prescription of medications because he preferred to work with the whole mind and body. He was also an M.S. psychologist with a pragmatic problem-solving approach to human difficulties. Let’s see how he treated this problem with Mondy in one session, in the video I watched with Sal.

He asked her EXACTLY what situations made HER feel anxious? She got nervous when she had to walk into a room with other people in it. She became self-conscious.

He went deeper and deeper into the specifics of this state for her: the unique details of HER anxiety. In short, he slowed time down with her, in their rapport, in order to be invited to rapidly enter into the world of THIS MOMENT BEFORE SHE ENTERS A GROUP, THE WORLD OF THAT MOMENT FOR HER. To do so, he used trance to help her turn to the channels in her mind that could help to explore what exactly went on inside of her mind, in order to connect with her emotionally so that he could establish A RAPID AND POWERFUL THERAPEUTIC RELATIONSHIP with Mondy, and to identify what was going on inside of her that was then seemingly automatically producing AN AGITATED STANCE in

certain social situations. THIS PARTICULAR ANXIETY: He did not look at her complaint as if all people who feel anxiousness suffer the same underlying unitary defect. He pondered: What's THIS anxiety making her feel, think and do that isn't working for her NOW? IN THIS MOMENT? (Just as Walt Whitman called his book of poems Leaves of Grass because every leaf of grass is a different color of green.) He maintained a deep emotional rapport throughout as he gathered the unique details to identify two things:

- (1) HER CURRENT TRANCE and
- (2) THE RESULTING (maladaptive) STANCE

He used the trance state TO HELP HER BRING HIM INSIDE OF HER MIND. When she revisited the feeling she got approaching a group, he learned quickly that she was showing herself many disturbing memories like old T.V. shows in her mind. The worst old program was a beating she got with a hairbrush by her mother for doing something naughty when she was a child. Erickson had her relive and memorize that most terrible experience of humiliation and shame that was unconsciously triggered for her when she thought of entering a group. He learned that JUST BEFORE entering a group, she imagined the group as big and powerful like her mother was, and herself, small and beaten, as a child. She showed physical changes, such as an altered rate of respiration, she grimaced and winced and her body tightened and contracted during the reliving of the beatings.

Now Erickson KNEW what was triggering HER social anxiety. Not someone else's anxiety, as if it were just a brain problem with no mental or emotional content. Now, still in THE WORLD OF THE MOMENT SHE ENTERS INTO BEFORE GOING INTO A GROUP, he then--only minutes into this single session--had her turn to a DIFFERENT CHANNEL in her OWN mind where she remembered herself feeling quite the opposite, the brain channel of her happy times. She remembered playing with abandon chasing ducks. She was the big powerful force and she was laughing and dancing and clapping her hands as they were flapping their wings and hopping about to escape her. She was playing with abandon, without self-consciousness.

During the reliving of these memories, she smiled, opening her eyes, still in trance, her face radiant with a child's mischief and delight. When she did, he beamed approvingly at her, giving her a heavy dose

of unconditional love to look at and to use to project onto groups. STILL IN THE MOMENT BEFORE SHE WOULD NORMALLY BECOME ANXIOUS, he had her go back and forth from one state to another: From the shameful and humiliated state of Mommy's bad girl taking a painful beating with the brush again and again, to the happy child playing with abandon, chasing ducks. And he taught her to move quickly to the good one.

Then he taught her how to take that beating, the imagined disapproval of others, that everyone was looking at her with disapproval and judgment, like her mother had done and have that trigger her to switch to her happy self and instead project onto the faces of the people in the group a loving look. The kind of look people might give to a happy child playing with abandon. The kind of look he was giving to her. They were playing with her usual trance and stance followed automatically by her new trance and stance. He trained her to open her eyes, feel triggered with upset, close her eyes and literally in the blink of an eye, to add into her old natural sequence a feeling of playing with abandon, a new internal and external trance, a projection of love. He taught her a skill instead of giving her a pill.

I don't have long-term follow-up on Mondy, but after watching this video, at age 28, I decided to work personally and directly with Erickson for the next five plus years, until he died in 1980. (See Ritterman, 2013, for a further account of my time with Erickson.) I knew I'd witnessed something I was not being taught in graduate school! Erickson's one-session therapy with Mondy was and remains the single best piece of clinical work I've ever witnessed. All of this went into my own unconscious mind, where I would be developing my one-session interventions, and then the tool of the three-minute trance.

Although I finished my four-year research on Ritalin, I had already concluded that jumpy little boys needed to learn how to concentrate. They needed skills not pills<sup>2</sup>. I began to understand that instead of a diagnosis and a hypothesis of underlying brain damage, which was becoming the model of choice for the American Psychiatric Association and was pressuring the field of psychology as well, Erickson gave Mondy the tools to discover THE AUTOMATIC TRANCE she was entering unconsciously in social situations, and to switch to the TRANCE STATE AND STANCE needed to spontaneously handle social situations. He offered her a way to be present in the moment and to give this moment a chance to be different from what she'd anticipated it would be.

<sup>2</sup> For more on the overemphasis of neuropsychiatry and medication at the expense of social and psychological factors with "ADD" clients, see Mate (1999). page10 image13376

## PART TWO: THE VALUE OF TRAINING IN TRANCE AND STANCE: SUBJECTIVE TIME AND THE SLO-MO BRAIN.

For more on the overemphasis of neuropsychiatry and medication at the expense of social and psychological factors with "ADD" clients, see Mate (1999).

Even when our clients take yoga classes, study meditation, or learn to use trance states, they do not know how TO BRING THOSE PAUSES PRECISELY INTO the challenging sequences of automatic responses and interactions specific to their own fast-paced daily lives. If they cannot ACT or TAKE THE BEST STANCE in the moment, automatically, drawing on these learnings, using their meditations and trances at the moment of need, they will be chronically overwhelmed and break down one way or another at their own point of biophysiological fragility. For the past 36 years, I have developed these methods I first observed in Erickson's work with Mondy, and have used them with considerable success with a variety of clients:

- \*survivors of Hurricane Katrina in New Orleans, and of domestic violence;
- \*a wife depressed after her husband left her;
- \*a breadwinner denied the life-long pension promised by his job;
- \*a couple in which the wife's drug addiction is ravaging the whole family;
- \*a little boy who becomes wild and out of control at school;
- \*a man who has panic attacks when he goes out dancing with beautiful women.

I also use Slo-Mo in my own life to learn ever more about being present here, now, in this moment we share.

I assume that most of us would like to try simpler possibilities first, before we refer the students we see or our clients or ourselves to the psychiatrist for the magic pill--or even for longer-term thereapies. Let's say we ourselves would like to live more in the moment and be able to have a wider range of responses available to us than the ones we usually use. So, HOW did Erickson accomplish this important practice for Mondy, something she will need to do again and again and again, until it is automatic, just like tai chi, or sun salutation in yoga, or practicing the piano, or learning to sing a new song in a new way? How did he help Mondy SHIFT from a bad trance and an unhelpful stance to a good trance and a helpful stance? But first, I'd like you to experience subjective time for a few minutes of clock time.

## PART THREE: EXPERIENCING SUBJECTIVE TIME AND SLOW-MO

I have talked about entering into the world of this moment. Now I will tell you how to do it. Remember, though, that just as important as this shift is that people "wake up" and "do something different" afterward in their social context.

Erickson only wrote half of one book, *Time Distortion in Hypnosis: An Experimental and Clinical Investigation* (Cooper & Erickson, 1959/2002). The rest were his articles or books others wrote about his work. This one book, however, was about subjective time or experiential time. I see this work as the most important thing Erickson understood. Erickson had his finger on the pulse of how people have control over themselves and how they lose control over themselves. He worked with what I will call SLOW-MO. SLOW-MO comes into play in shock. Many people have experienced SLOWMO in an upsetting experience, like a car accident. It is a capacity of mind that makes us REALLY BE PRESENT and to remember and observe in an incredibly detailed way.

I call this SLOW-MO. Subjective time. When EXPERIENCED TIME DOES NOT MATCH THE CLOCK TIME. THIS BECOMES A SKILL WE CAN USE TO DEAL WITH THE RUSH OF TIME IN MANY WAYS. It happens in a heartbeat. IN THE BLINKING OF AN EYE. In a specific instant. In a moment, time opens up like a huge chasm for a person and there one's whole sense of life can be up for grabs. On the negative, this opening of time can happen when one is sad, and it can feel like "forever." I know of a young woman, a teenager, a friend of a client of mine, who drank too much at her San Francisco condo, and in a moment shifted from happy-party mode to deeply despondent and jumped off her deck to her death! I also worked with a young woman who, in trance, revealed how she had responded to a post-hypnotic suggestion she had not known she had received and thus saved herself. She had many years earlier taken one self-defense class for women and a wise teacher said: "If you are ever being attacked from behind, when you need this method, you will remember it." Right before she came to see me, a would-be rapist had entered her apartment. He forced her at gunpoint into her bedroom. The rest happened without her awareness, an automatic seeming stance: Looking in a mirror out of the corner of her eye, she saw the assailant behind her, momentarily distracted as he undid his pants. And automatically, in the blink of an eye, she recalled the lesson, scraped his shin with her shoe, elbowed him in the ribs and punched him in the head and escaped! So let's think how this works. The mind is like cable television. There are many channels and you can turn on one or the other of the channels. Hypnosis depends upon this activation of several different channels within the programming of what the

Western world calls the “unconscious mind.” In the method I am describing, we want to pinpoint the moments that make a person automatically turn on a certain channel in their mind, a certain state that I am calling a trance state, and from that place that they automatically or unconsciously adopt a certain stance that does not work for them--such as Mondy taking a fearful stance approaching new groups as opposed to a stance of curiosity or playful anticipation.

Before I describe six cases of the three-minute trance or the Slow-Mo Mind in single-session therapies, I would like to demonstrate three minutes of clock time versus three minutes of slo-mo time. I want to take 3-6 minutes of egg-timer time<sup>3</sup> to show you experientially how dramatically our minds can change states into a positive state. To have the effect of a positive meditational/ hypnotic experience, right within the flow of your life right now, allow our 3-6 minutes, one or two turns of an egg-timer, to help you right here and now to feel a bit of what it means to shift into an alternative state of mind. <sup>3</sup> Here is another example of how the times they are a’changing! An “egg timer” is an “oldschool” analogic hour-glass device a cook uses, turned upside down with sand running through it, to measure how long to boil an egg. Nowadays modern cooks might just set their Smart Phone alarm for 3 minutes! When I teach, I hand out egg-timers to the students to take home as a post-hypnotic cue for themselves after our class has ended.

Slo-mo is where our brain has the most play to relax and let the mind shift. **FIRST WE MUST STOP THE CLOCK.** Please consider these two verses from The Tao of a Woman (Ritterman, 2009, p.139), designed to help stop the clock and enter into the slow-mo mind, where we can practice shifting stance quickly.

#### **Your Mind<sup>4</sup>**

Just as your respiratory system  
does the best it can  
to take in the air that is useful to you  
and let go what is not,  
and just as your digestive system  
does the best it can  
to take in what is digestible from what you eat  
and eliminate when is not,  
so also your mind has the right to take in what is  
helpful to you and let go what is not, with each breath

Is some heavy energy spinning your way? Observe its course. Step aside. Allow yourself now to attain the calm that is helpful (but not essential) in searching your brain for the memories and experiences most useful to you in this moment.

#### **To Attain Calm<sup>5</sup>**

Breathe in, and then exhale slowly and deeply. Remind yourself: “I have done what I can for the moment about everything outside of me. [Breathe in. Looooong exhale. That’s right. Now let yourself know:] I have all the time I need in the time that I have.”

As your body naturally inhales again, daydream. Watch how the clouds change shape.

Here alone with me while you are reading this suggestion, this wish from me to you, as your lengthened exhales continue, you may have a moment when you feel you do not belong, you are not as smart as someone else, or your job is not as good, or you do not feel as special or informed or qualified....From that place, from that precise moment, you may have a series of memories you don’t like or recognize a tendency to behave in a way you do not like. These are a default setting in your mind. But your unconscious mind knows the way to shift to another state! I want you to take two minutes of clock time to relive a time you felt unconditionally loved for who you are, more than for your job or your education or your status, loved for your very being. Appreciated. In one moment of your life. Allow yourself to enter into that place in which you felt totally acceptable and worthy just being who you are. Memorize that moment. Were there the smells of food cooking or flowers, the sounds of music or ocean, was some person or favorite dog or cat looking deep into your eyes, was the temperature warm or cool? Feel that moment in which you knew in the core of your being that you were as valuable on this planet as anyone. Your Unconscious Mind can continue this search for you at ease inside your skin, the trillions of cells inside the galaxy of your being shining inside you, and you can memorize these feelings just like you did the letters of the alphabet, learning what gets dotted and what gets crossed, shaping your way into your future. And through the many years and channels of your mind when you brush your teeth tonight or when you wake up tomorrow and brush your teeth, and throughout the rest of your life, so that you will spontaneously feel appreciated. And you can unconsciously shift from feeling less-then to feeling good-enough. Shift from the road that leads you backward to sorrow to the track that leads you forward to well-being and good dreams, and the stance you need for this moment. What is inside of you is most important. And you can then work to actualize your inner state in the outer world, even without conscious intention.

<sup>3</sup> Here is another example of how the times they are a’changing! An “egg timer” is an “old- school” analogic hour-glass device a cook uses, turned upside down with sand running through it, to measure how long to boil an egg. Nowadays modern cooks might just set their Smart Phone alarm for 3 minutes! When I teach, I hand out egg-timers to the students to take home as a post-hypnotic cue for themselves after our class has ended.

<sup>4</sup> From M. Ritterman (2009). The Tao of a Woman. Berkeley, CA: Skipping Stones Editions (p. 139). ©Michele Ritterman 2009. Used with permission.

<sup>5</sup> From M. Ritterman (2009), The Tao of a Woman. Berkeley, CA: Skipping Stones Editions (p. 135). ©Michele Ritterman 2009. Used with permission.

## PART FOUR: SIX SINGLE-SESSION CLINICAL EXAMPLES OF THE THREEMINUTE TRANCE

Here are six one-session client vignettes in which I used Slow-Mo Trance and Stance tools.

**Case #1.** A handsome young Asian-American man in his late thirties came to me in a deep depression. He'd gone to the family psychiatrist who saw him for ten minutes and prescribed anti-depressants and then he heard about me and decided to work with me instead.

My goal was to find out what was making him sad. He reported that he just couldn't seem to do anything. He barely could get out of bed in the morning. He'd always been a happy guy. "What was the immediate cause?" I asked, hoping that he would STOP CLOCK TIME AND BEGIN TO LET ME INTO HIS MIND. His beautiful young wife, the love of his life, had just been diagnosed with terminal cancer. He could understand her being paralyzed with sorrow, but why him? He was supposed to take care of her. She was the one with the disease. His sorrow was compounded with shame.

Clearly all of this would be cause enough for depression. But I wanted to know about HIS DEPRESSION, to go inside of the moment in his mind where he got lost and incompetence became his stance. So we used STOP THE CLOCK AND GO INTO SUBJECTIVE TIME. We can NEVER KNOW WHAT WE MAY FIND WHEN WE USE SLOW-MO TO ZOOM INSIDE A PERSON.

In trance, he reported that what was hard for him really was he felt helpless. He felt that once she died he could not take care of himself. He couldn't go on without her. This report was different and deeper, underlying the sorrow and shame. Now we had the problem identified. The so-called depression (the unrelenting streaming of sad shows on that cable channel of his mind) was on top of his deeper fear channel in which he saw programs in which he was unable to take care of himself.

Using the SLOW-MO time trance induction, I asked him to search for a moment in his life when he had felt he could take care of himself. He recalled "THE COLOR BLUE." "BLUE?" What could that mean? I asked that he look closer. "BLUE WHAT?" (If I asked each reader what does the color blue bring to your mind, we would all have a different answer: sky blue nail polish, my dad's favorite shirt, the color of a sailboat....As therapists we might think: "Oh, blue, that's sad, that's the blues" but don't go there--see what the client thinks of as "blue.")

"Ah, a blue glass pitcher," he said.

"WHERE?" I asked.

In the refrigerator of his childhood home. At first he and I were both surprised. When I asked him to tell

me more about the blue glass pitcher, he revealed that he was four years old and the fridge was very big and on a shelf, his mother had left him the blue bottle filled with milk and a box of cereal, because he had said he was a big boy and he could wake up and make breakfast for himself. It is Saturday morning. Everyone is asleep but him. He goes to the fridge and sees the big blue glass milk pitcher and he knows he can make his own breakfast and he feels proud and competent. This memory alone did the job for him. The entire slow-mo experience lasted for about ten minutes. He required one session. No meds, ever. And he got the tool that he needed.

So let's track what happened. He imagines his wife is gone. That is where his anxiety starts. Not in the caretaking. He is afraid he can't go on. He is powerless, helpless without her. He is regressed from the current pain back to before the age of 4. We introduce a rest as in music, a pause, and help him shift to a different mental state based on his own experiences that are on a different "channel" of his mind--his own memory of competence. He comes up with the medicine that is the antidote. And what do you think it is? A blue glass pitcher of milk! This memory allows him to alter his stance toward his situation.

**Case #2.** A couple in a long-term relationship comes in complaining about a many-years-long problem with their sex life, but they are shy to discuss it. I tell them we can talk about whatever they like. (Other subjects will automatically metaphorically address this underlying issue.) She says she baked him a platter of Christmas cookies and there were many varieties. She'd prepared all day. He walked in the door, saw the platter, raced over with enthusiasm and began downing some of them. After working all afternoon to prepare this treat for him, she felt enraged and wanted "to kill him" when he grabbed the cookies!

Next step in the faster-than-the-speed-of-light reaction sequence that happens with them: He felt absolutely baffled. What did she want him to do? Ignore the gorgeous cookies? Did she not want HIM to be the one to eat them? Was he not GOOD ENOUGH for the cookies?

Looking at the man and woman, we could see how she might call him self-centered and he might accuse her of offering and then withholding. But what if we just look at the hypnotic sequence? What is making her suggestion to him unclear? We stopped the clock, using the slow-mo, three minute trance to suggest the wife let the husband know AT JUST THE RIGHT MOMENT what she really wants, which she reveals calmly, is to hear how much she would like him to ADMIRE her cookies. What if the husband finds within himself the pause button that lets him locate trust that the wife does want him to enjoy the cookies, but that she needs him TO SLOW DOWN, APPROACH MORE SLOWLY and ADMIRE THE

COOKIES before he touches them? Different way of thinking and observing--think about it!  
This couple went home and made love after the cookie story three-minute trance provided a sequence of delicious interactions.

**Case #3.** I had a single session in front of a large group with a country-and-western singer who had never recovered from over-dosing on the stage. In a three-minute trance, I helped him remember before he had his overdose so vividly that he could wake up and face the audience and feel fully comfortable. Then flip into the post-drug memory, in which with open eyes he stared in panic at the audience, frozen like a statue, and then, close his eyes, opening them again to the comfortable space of singing before his overdose. He learned quickly how to move out of the debilitating state and back into his channel of thousands of moments when he felt confident and connected to both his guitar and the audience.

**Case #4.** I saw a man who'd married a woman who'd not resolved her sexual conflicts after prolonged incest with her father and hadn't wanted a marriage with sex. After her therapy, she wanted sex. He then came in for a single session. He had no recollections of early childhood affection. No happy physical memories. In the three-minute trance, he recalled floating through the air on giant hands. I think of the Netter (2006) books of medical drawings of the body. There is an illustration of the representation in the brain of information from the hands and feet alone. They take up much of the brain. I realized that even a single memory or sensation can occupy our brain for better or worse and carry much weight. In the negative, an obsessional thought can rule our lives! In the positive, a single memory can be used to transform a person's experience of him/herself. From this single memory of being held as a baby by his mother, he recalled that he'd received much maternal affection until he was five and became a "big boy," and that his mother's mother had disapproved of coddling a "big boy." From these memories that came out like scarves from the magician's sleeves, he was able to remember his body and move rapidly to enjoying his manhood and sexuality.

**Case #5.** I worked with a mother and daughter. For years the daughter had harbored hatred of the mother for an affair she had over many years with a man in another state. In this one session, I helped them stop the clock, and let the mother reveal her husband's--the girl's father's--lifetime of infidelities, her hidden desire to protect the family and preserve it, by having a supplementary affair of her own, and helped the daughter identify her own longing to be number one for her mother.

They had then identified within themselves all the experiential feelings needed from the various channels of their minds, to create a different stance toward one another. The family continued on a different footing all the way through to the death of the father, who was considerably older than the mother, five years later. They did this without the need for other intervention.

**Case #6.** In Puebla, Mexico in November, 2011, I worked therapeutically (speaking in Spanish) with a woman who had only a week before experienced a bus hijacking. I was ill at that time, and actually had been resting in bed at the home of a therapist who'd offered to care for me before I left town. So the client and I had under an hour to accomplish anything before I needed to return to sleeping.

My years of experience working with torture and trauma before the diagnosis of PTSD had been created taught me that the closer in time the treatment to the traumatic assault, usually the more effective. She had already talked to many friends about it, but no one had stopped the clock, helped her enter into what I now call Slow-Mo, and found out what bothered her?

What bothered her was not that the driver could have been in on it, not that a gun was held to her neck, not that they stole her cell phone. She had digested and eliminated those poisons.

What bothered her was that she heard an older woman behind her on the bus cry and she couldn't help her because she had to sit statue-still with her head down. She knew that there were two children up front and she feared that they would cry out and get killed. As soon as the hijackers left the bus with the passengers' money and cell phones, she was the person who took charge of the situation and got everyone calmed down.

The undigested part of the trauma, obtained only by my withholding the idea that I understood or could guess what bothered her, and by stopping the clock to enter into her meticulous recounting of the micro-moments of the event, revealed that this woman felt bad that she couldn't be who she is, during the assault. In half an hour of talking with me, she was a bit improved and less depersonalized. As she finally cried with release, she told me, "You came inside. You got it. You helped me get to the real injury underneath the obvious." I also read her a poem from *El Tao de Una Mujer* (Ritterman, 2009; translated beautifully into Spanish by Leandro Wolfson):

#### **My Teacher's Last Gift<sup>6</sup>**

My teacher received a visit  
From a very old Japanese man.  
The visitor told my teacher that he saw his life  
As he stood on the top of a mountain

<sup>6</sup> From M. Ritterman (2009), *The Tao of a Woman*. Berkeley, CA: Skipping Stones Editions (p. 157). ©Michele Ritterman 2009. Used with permission.

Looking down over the climb that he had taken.  
The jagged rocks and sharp weeds  
That cut him along the ascent  
Had become overgrown with moss  
And wildflowers.

## CONCLUSION

When I met Erickson in my late twenties, he said that I was too young and too pretty to be taken seriously and that I needed to wait until my hair was as white as his to express my opinions. Well, if it weren't for my hairdresser, Frank, clearly my time has come! At this point in my life, I am old enough to say that my life's work has been about the power of human interactions to heal people mentally and emotionally or to make them sick or even to die, as in voodoo. I have studied human interaction at many levels, from family interactions that drive children or members of a couple mad in my book *Using Hypnosis in Family Therapy* (1983/2005); to social forces and torture by the state in my book *Hope Under Siege: Terror and Family Support in Chile* (1991); to spiritual levels of interaction among people, *In The Tao of a Woman* (2009).

We need to help clients learn to bring their trance states, their SLO-MO, their rest notes, right in-to the ongoing interactions in their lives, right into the environments that would otherwise trigger them FASTER THAN THOUGHT to get stressed and overwhelmed. The martial arts teach us that we need to know many stances in life that we can move to quickly to handle any challenge at hand. We as therapists now need to teach our clients how to UTILIZE their SLOW-MO states to attain the PROPER STANCE for any one moment. This is a tall order. But it is as necessary as understanding their early childhood relationships or processing their feelings. If they cannot ACT on these learnings, they will be chronically stressed and overwhelmed and may break down one way or another.

You might want to propose that they become non-violent urban warriors, people who have the skills necessary to stand up to the challenges of this moment to save their own minds and hearts, and to heal with unconditional love. So I close saying to you: OCCUPY YOUR MIND. IT IS YOUR FINAL AND OWN TERRITORY. DON'T LET ANYONE CONQUER YOUR MIND.

## References

- COOPER, L.F., & ERICKSON, M.H. (1959) *Time Distortion in Hypnosis: An Experimental and Clinical Investigation*. Baltimore, MD: Williams & Watkins. (Reissued 2002 by Crown House Publishing, Williston, VT.)
- LUSTIG and ERICKSON, 1975, Video
- MATE, G. (1999) *Scattered: How Attention Deficit Disorder Originates and What You Can Do About It*. New York: Dutton.
- NETTER, F.H. (2006) *Atlas of Human Anatomy* (4<sup>th</sup> ed.). Philadelphia: Saunders Elsevier.
- RITTERMAN, M. (1991), *Hope Under Siege: Terror and Family Support in Chile*, (Foreword by Isabelle Alende). Norwood, NJ: Ablex.
- RITTERMAN, M. (1994), *A five-part poetic in-duction in favor of human decency (countering the hate movements)*. In J.K. ZEIG (Ed.), *Ericksonian Methods: The Essence of the Story* (pp. 465-481). New York: Brunner/Mazel.
- RITTERMAN, M. (1995, January/February) *Stopping the clock*. *Family Therapy Networker*, 19(1). 44-51.
- RITTERMAN, M. (2005) *Using Hypnosis in Family Therapy* (2nd ed.). Phoenix, AZ: Zeig, Tucker & Theisen. (Work originally published 1983).
- RITTERMAN, M. (2009) *The Tao of a Woman: 100 Ways to Turn*. Berkeley, CA: Skipping Stones Editions. (Available in Spanish as *El Tao de La Mujer*).
- RITTERMAN, M. (2013), *The tao of a woman*. In M.F. HOYT (Ed.), *Therapist Stories of Inspiration, Passion, and Renewal: What's Love Got to Do with It?* (pp. 217-231). New York: Routledge/Taylor & Francis Group.