

chapter 7



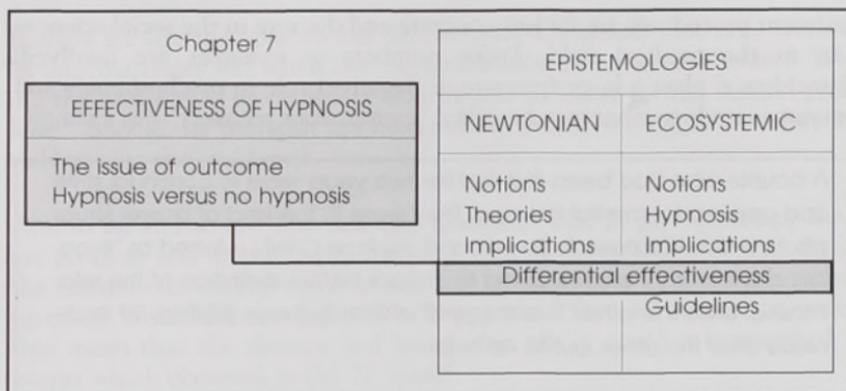
Differential

effectiveness –

an

ecosystemic

view



Differential effectiveness embodies a comparison between different approaches and techniques to ascertain which is the most effective and under what circumstances. In the field of hypnosis this refers to two central issues: the question of outcome and, linked to this, the effectiveness of hypnosis as compared to no hypnosis.

THE ISSUE OF OUTCOME

Outcome is important in any endeavour. There is no sense in having an appliance repaired if the repairwork is such that the appliance still does not work. And one would not easily take a sophisticated electronic apparatus to a repairman who still works with hammer and tongs. In the same way psychotherapists and hypnotherapists are expected to use methods and techniques which have been shown to be effective.

In medicine/dentistry this is often not too difficult to do. If the symptoms disappear, then the treatment was effective. If the symptoms disappear more quickly and/or the side effects are less severe with Treatment A than with Treatment B, then A is more effective than B. For instance, there is no doubt that vaccines (eg against polio) are effective.

In the social sciences, though, it is much more difficult to establish the effectiveness of a particular procedure and even more of a problem to compare the effectiveness of different procedures. Both outcome criteria and

treatment procedures are far less concrete and discrete in the social sciences than in the medical field. Large numbers of variables are involved. 'Coincidence' plays a large (positive or negative) role in psychotherapy and sometimes leads to what may be called 'spontaneous recovery'. An example:

A couple who had been married for two years were in continual strife and applied for marital therapy. They were in the kind of power struggle to which Watzlawick, Beavin and Jackson (1967) referred as 'escalating symmetry': each wanted to impose his/her definition of the relationship onto the other. The therapist attempted one strategy or technique after the other, but to no avail.

After about ten sessions of therapy the couple arrived one day claiming that their relationship had taken a turn for the better and was now the way they wanted it to be. What had transpired was that the husband had read a doctoral thesis on marital dysfunction in which it was 'proved' that such dysfunction, in marriages of shorter than five years' duration, was always to be blamed on the husband. Whereas the therapist would have had grave doubts about such 'proof', the husband immediately applied it to himself: he was the problem in the marriage. He stopped arguing with his wife, began to treat her with consideration. She responded to this by being less demanding and quarrelsome. The symmetry was broken. This improvement in their relationship was sustained at a follow-up session six months later.

This example raises many of the questions found in research into therapeutic outcome. Can this be regarded as a successful therapy even though no therapeutic technique had worked? Was the outcome all that positive? The couple claimed that it was, but was the husband not merely pretending and not being spontaneous? How long would the husband have been able to keep up the act, if it had been an act? Can the reading of a book or thesis by the husband be viewed as a new and effective form of bibliotherapy? Should books be prescribed for other husbands in similar marriages? Or should it be this specific thesis? What would have happened if the wife (or both) had read the thesis? Was the reading of the thesis coincidental or did the husband become interested in, or ready to read, the thesis because they were undergoing marital therapy? Did he perhaps become so frustrated with the unsuccessful therapy that he was ready to clutch at any straw in order to save the marriage? This would mean that the therapy was successful precisely because it was unsuccessful! Could it then be a useful technique in marital

therapy for the therapist to fail deliberately? Or would that only work in 'young' marriages and when the therapist's failure was not deliberate? Why did the husband so easily accept that he was to blame for the marital problems? Should the therapist tell husbands in 'young' marriages that they are to blame for the problems?

And so on and so on. This example illustrates that in psychotherapy there are no clear and unambiguous outcome criteria. Even if it is accepted that the marital relationship did improve, was six months a long enough follow-up time? Would the marriage still be happy after 20 years? And if not, would that mean that the therapy had failed after all, or could it be ascribed to events which occurred in the 20 years?

It is also not clear what 'caused' the successful outcome. Effectiveness cannot be ascribed to any technique or even to any combination of techniques. In fact, success cannot even be said to have been coincidental.

As we have seen, science is still firmly embedded in Newtonian thinking. Application of such thinking to situations of which this case is an example would tend to reduce the complexities to make it possible for measurement to take place. For instance, one could compare the number of cases of marital therapy in which the husband read something with those in which he did not read anything, and see in how many of each the couple felt satisfied with the relationship six months after the last session of therapy.

Because of the reductionistic effect of such a research design, chances are that no significant differences would be found. And even if such differences are found, they would often be of little clinical relevance to the practitioner confronted by a fighting couple. Also, while the statistics might look good, in this fictitious research example they would reflect only one aspect of the therapy, namely whether or not the husbands read. The choice of reading by the husband as the independent variable is more or less arbitrary and depends on the researcher's conceptualisation of the case. It is therefore not 'objective', as this type of research is often claimed to be.

This kind of reasoning is not new and does not necessarily flow from an ecosystemic perspective. It is one of the reasons that researchers and clinicians often find themselves at loggerheads with each other. The clinicians feel that research is so reductionistic that it makes the findings almost worthless in practice. On the other hand, researchers are often of the opinion that clinicians are so muddled that they do not see the 'really' important variables.

It is interesting that both these opinions are often correct. Ironically they are correct because researchers and clinicians usually follow a Newtonian mode of thinking, albeit two different forms of it. Clinicians and researchers both tend to observe people (clients or subjects) as if this observation were objective. They do not see themselves as part of what they observe. They are both concerned with what is supposed to happen inside the clients/subjects. They 'observe' reified entities at work inside the clients/subjects. They both try to influence these in a direct or linear fashion. The difference between them lies in the researchers' commitment to measurement and to the control of 'extraneous' variables, a commitment not shared by the clinicians.

An ecosystemic way of thinking would circumvent this researcher/clinician dichotomy to a large extent. It does not regard any observation as more 'true' than any other; nor does it view any technique or way of working as 'better' or 'more effective' than any other. In fact, it does not even see ecosystemic thinking itself as 'better' than Newtonian thinking. It views it all as context-dependent and the most that can be said is that a particular observation or technique can be seen to fit a particular context better than another. And even this would be an opinion only. For instance, it is an opinion that Newtonian thinking would fit the context of a car refusing to start in the morning much better than ecosystemic thinking. In that context it would be effective to think in terms of linear influences between entities such as batteries, carburettors and sparking plugs.

In the same vein, it is the author's opinion that ecosystemic thinking fits the complicated socio-cultural situation called 'hypnosis' better than Newtonian thinking. This does not mean, though, that an ecosystemic approach to psychotherapy would necessarily be more effective in terms of outcome. The therapist's way of conceptualisation is but one aspect of the total situation. In Maturana's (1975) terms it is part of the therapist's 'structure' at that time. This 'structure' has many other aspects, such as the therapist's state of health, his/her financial situation and his/her emotional equilibrium (eg did he/she argue with a colleague or with another client just before the therapy, or did he/she have a pleasant surprise of some sort?).

In the same way the client (or each family member) has a particular 'structure'. Each of these 'structures' reacts (in different ways) to contextual variables such as the time of day, the weather, the particular venue and/or institution. Each 'structure' has physical elements, such as the person's size, and attributional elements, namely the person's ideas about himself/herself, the venue, the weather, etc.

When the therapist and client/family meet, these 'structures' couple (Maturana, 1975) with each other in ways determined or allowed by each

'structure'. If to the therapist the client looks like his/her favourite uncle, for instance, this might have an effect on the process of structural coupling. However, it is unlikely that the client's 'structure' would allow the therapist to call him 'dear Uncle Bob'.

This kind of reasoning is the language of second-order cybernetics, where the emphasis is on the autonomy of each system. The 'structure' of every system determines how it will couple with every other system. The particular technique or approach used at a particular time by a therapist or a researcher is part of that person's 'structure' at that moment, to which the recipient (client or subject) will respond in a way determined by his/her own 'structure' (Simon, 1990). This means two things:

- In no two situations can a technique be the same, even if it is routinely applied by the same therapist/researcher. This is so because in each situation a different structural coupling takes place.
- No two recipients will respond in the same way to the same technique or approach. Their 'structures' differ and therefore the structural couplings would be different.

What does all this mean in practical terms for the issue of outcome? It means that the idea of one unequivocal positive or negative outcome is a Newtonian myth. There are as many possible outcomes of similar situations as there are 'structures' involved in the situation. For one member of a couple the decision to obtain a divorce might be a positive outcome, while for the other it might be the opposite. 'Success' for one therapist might be 'failure' for another.

Therefore, one cannot evaluate 'the' outcome of ecosystemic hypnotherapy (or any other brand of therapy). What Therapist A does in Situation X cannot be compared in terms of outcome with the actions of Therapist B in Situation Z, even though both therapists may subscribe to the same school of therapy. Each therapeutic ecosystem is different because different 'structures' are involved and the circumstances are different. The ecologies of ideas in the different situations therefore are completely different even though the presenting problems might be similar.

Up until now outcome research has been of two types. One is where reductionism has been taken so far that hardly anything has been found. Or, what was found could be easily counted: token-economy procedures lend them-

selves to this, for instance. If a person is given a privilege for making his/her own bed, it is easy to see whether or not he/she makes the bed more often.

In the other type of outcome research the researcher's outcome criteria are implicitly taken to be the only criteria considered valid. Case studies often fall into this category.

Auerswald (1987) has suggested a design for outcome research which is consistent with ecosystemic thinking. In doing so, it focuses on ideas, attributions and connotations. It consists of a mapping of

- clients' original ideas about their problem situation
- what steps were taken by whom (including the therapist) to remedy the situation
- the clients' subsequent ideas about the situation and the steps taken.

These three phases can be repeated to cover lengthy therapies.

If the therapist/researcher were to do this mapping himself/herself, then the research would reflect his/her opinion only, much like a case study. Ideally then, the mapping should be done consensually by the therapist/researcher *and* the client(s)/family. In this way the client(s) become(s) participants or co-researchers rather than guinea pigs who are ostensibly 'objectively' observed by a researcher. It should be remembered, though, that such a procedure, defined as research, with client(s) as co-researchers, can in itself have a therapeutic impact, as illustrated by Wright (1990).

This kind of research is descriptive and does not claim to 'prove' anything. It is therefore coherent with ecosystemic thinking.

THE ISSUE OF HYPNOSIS VERSUS NO HYPNOSIS

The very existence of this issue reflects a Newtonian mode of thinking. It is as if this is equivalent to the issue of vaccines versus no vaccines. But there is no such equivalence. A vaccine is a concrete substance with known chemical/biological functioning. Acting as if hypnosis were equivalent to this is to reify hypnosis into an entity of some sort, which could be physically absent or present and which has fixed characteristics.

Following this type of reasoning many studies were done to show the unique impact of hypnosis as compared to no hypnosis. This led to the simulation design which, as we have seen, showed very clearly that hypnosis depends on the way it is mutually qualified.

Ecosystemically seen, therefore, hypnosis has no unique impact. Its impact and effectiveness are a function of the way it is mutually qualified in a particular situation, and this in turn fits with the idiosyncratic ideas of the people involved as well as with the particular sociocultural definition of hypnosis in the specific community.

From this perspective then, one cannot say that (ecosystemic) hypnosis is (always or even mostly) more effective or less effective than some other technique. Consider the example in the block below.

A sophisticated middle-aged woman made an appointment to undergo hypnosis to stop smoking. When she arrived for the appointment about two weeks later, she said that she was actually very fearful of hypnosis. Because of this fear, she had read up about smoking treatment in the two weeks since the appointment had been made, and found a better alternative treatment. This was autosuggestion and she wondered whether this could not be used with her rather than hypnosis. Whereas many people would not see autosuggestion as all that different from hypnosis, it was clear that this woman regarded these two modalities as completely different. The therapist accepted this definition and qualified the procedure which followed as autosuggestion.

This case illustrates the difficulties around the hypnosis/no-hypnosis issue. Was the procedure which was followed hypnosis? Some might say it was, because it involved behaviours traditionally called 'hypnotic', such as arm levitation.

Ecosystemically seen, it was *not* hypnosis, because it was clearly defined as not hypnosis. Would the outcome have been different if the procedure had been defined as hypnosis? The client stopped smoking for a while, but lapsed later. Did that mean that autosuggestion was ineffective or that hypnosis was ineffective? Or both? Or neither? Would the outcome have been different had the therapist convinced the client that hypnosis, rather than autosuggestion, should be undertaken? And what would have happened if the therapist had convinced the client to undergo a third, completely different, type of treatment, for example aversion therapy? If this third type of treatment did turn out to be effective, would it have been because of the nature of the specific treatment, say aversion, or because of the client's relief at not having to undergo hypnosis?

These questions indicate that it is extremely difficult to make claims regarding the effectiveness of (ecosystemic) hypnosis and to compare this effectiveness with that of other procedures. This is in line with ecosystemic thinking, which emphasises the complicated interrelatedness of people's ideas, attributions and conceptions in any given situation. In fact, any attempt to 'prove' the generic superiority of hypnotic procedures can be seen as in conflict with ecosystemic epistemology. 'Proof' is a Newtonian fiction. Ecosystemic research does not set out to discover reality as if it existed objectively, but to make sense of events (Fourie, 1996).

If we then accept that it is difficult, if not impossible, to make claims regarding the differential effectiveness of hypnosis, what are the indications and counter-indications for the (therapeutic) use of hypnosis?

The main indication, regardless of the approach to hypnosis, is the practitioner's interest in hypnosis. As far as is known, nobody as yet has clearly stated this, maybe because it is regarded as self-evident. Nevertheless it is true that practitioners use hypnosis because it interests them. If it does not, that is a counter-indication: do not use hypnosis if you do not want to use it.

A second indication for the use of hypnosis lies in the client's attributions. If the client has an interest in hypnosis, this mode of treatment can be considered, provided, as we have previously seen, that he/she does not see it as a miracle cure. Conversely, if for religious or other reasons the client or family objects to the use of hypnosis, that is generally a counter-indication for its use. Of course, as was seen, in such cases it might sometimes be fruitful to threaten to use hypnosis.

It should be noticeable that, in contrast to some other approaches to hypnosis, ecosystemic thinking does not link indications or counter-indications to certain types of problems or to certain personality types. Neither does it invoke the concept of hypnotic susceptibility. At some stage there was consensus that people showing psychotic behaviour could not be hypnotised. This opinion is no longer held. Neither is it true that hypnosis necessarily exacerbates psychotic behaviour. Naturally hypnosis should be used with circumspection, not only when dealing with 'psychotic' people, but with all clients. Kossak (1989), in a comprehensive discussion of indications for the use of hypnosis, is quite rightly adamant that hypnosis should be used only after a thorough investigation into all aspects of the client's functioning, including his/her ideas about hypnosis.

In the same vein it is not true, as was earlier believed, that hypnosis would tend to increase dependency in people who tend to be dependent. If hypno-

sis is conducted with the kind of foresight advocated by Kossak (1989), that is, if the therapist is aware of the client's propensity toward dependent behaviour, then there is no reason that hypnosis would foster or exacerbate such behaviour. Even in hypnosis, dependence – like any other interaction – comes from both sides.

CONCLUSION

Ericksonian hypnotherapists tend to see the value of hypnosis in its ability to reach the 'unconscious' with relatively little interference from 'consciousness', and mobilise dormant resources there (Feldman, 1988; Kirmayer, 1988). This means that hypnosis has an intrinsic power or potency which forms the rationale for its use.

From an ecosystemic perspective this is not the case. Hypnosis is not regarded as embodying any special power; nor, for that matter, is the 'unconscious' viewed as anything but a descriptive concept which does not physically exist. From this point of view hypnosis is not conducted because it is so potent, or because it circumvents conscious censorship or distortion, but because it interests the practitioner and because it might carry the connotation of power for the client or family. These people might expect hypnosis to help solve their problems and they might act according to this expectation, as Kirsch (1991b) shows. Or they might expect hypnotic age-regression to bring to the fore the 'real' cause of the problem, paving the way for a convincing new understanding or reframing of the problem. The 'power' of hypnosis lies in the belief in such 'power'.

It is clear, then, that the effectiveness of hypnosis is not inherent to hypnosis, but has to do with the way in which its use can perturb the evolving ecology of ideas in the therapeutic system and in such a way as to exclude the problem behaviour. Sometimes, because those involved believe in the 'power' of hypnosis, hypnosis can play a central role in this process.

In the same vein adherence to an ecosystemic perception of hypnosis does not necessarily mean that the practitioner would enjoy a higher rate of success. It is not the therapist's conception of hypnosis that is of prime importance, but the client's or family's. Naturally, the more acute the practitioner's awareness of the dynamics of the process of mutual qualification, the more likely it is that he/she could calibrate his/her own behaviour in the situation so as to achieve the maximum impact. In the absence of such awareness the impact is often more by default than by design, though it is debatable whether one is necessarily more effective than the other.

If an Ericksonian therapist attempts to reach the 'unconscious' of a client and to mobilise its resources, then certainly he/she is part of the process of mutual qualification in that situation, but his/her contribution to that process is not deliberate and planned. In contrast, the participation of the ecosystemic hypnotherapist would revolve around precisely such planned, deliberate perturbation of the qualification process, even though in doing so he/she might act quite similarly to the Ericksonian.

It is impossible to prove which of these two approaches (or any other) is more effective. Both ways of thinking and acting are valid and both achieve what is qualified as 'success'. Adherence to one or the other (or any other approach) is largely a question of personal taste, which, according to Colapinto (1979), is the real reason that anybody adopts a particular perspective.

chapter 8



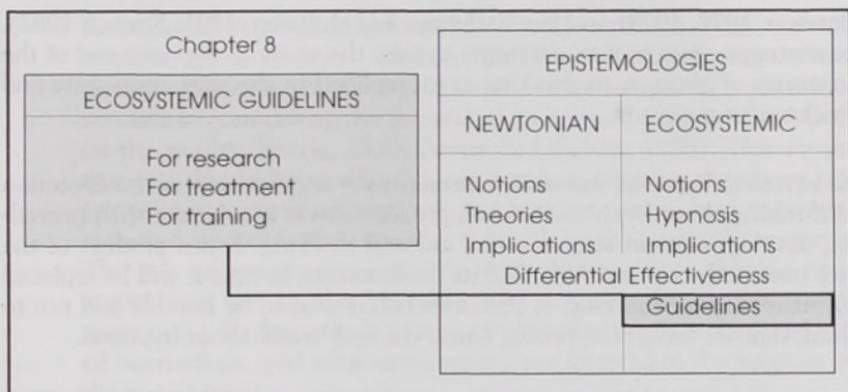
Ecosystemic

hypnosis:

past,

present

and future



The development of science is characterised by changes in thinking which occur as reactions to previous ways of thinking. This was also the case with hypnosis. Each change in thinking about hypnosis was coherent with the prevailing mode of conceptualising at that time. In earlier centuries, for instance, what today is called hypnosis was virtually indistinguishable from the mysticism of that time. Mesmer's theory of animal magnetism retained much of the mysticism, but also linked with the awakening interest in the natural sciences which occurred at about that time. His theory had a 'scientific' flavour because it utilised a metaphor from physics, namely magnetism. This can be seen as a reaction against the superstition which prevailed in earlier times.

In turn, state theory may be seen as having developed as a reaction to the magnetism theory, utilising Freud's newly 'discovered' idea of the 'unconscious'. In this it fitted perfectly with the emerging depth psychology.

The manner in which non-state theory evolved as a reaction against state theory is well known. In a way which was coherent with the developing learning theory/behaviorism, which in turn linked well with the burgeoning natural sciences, non-state theory attempted to prove, through experimentation, that hypnosis was not a special state.

Now, in line with the developing 'new science' (Capra, 1983), with its offshoots into biology (eg Maturana & Varela, 1980), anthropology (eg

Bateson, 1972, 1979) and family therapy (eg Hoffman, 1985; Keeney, 1982), ecosystemic epistemology attempts to take the study of hypnosis out of the strictures of Newtonian thinking as exemplified in the state, non-state and Ericksonian positions.

Ecosystemic hypnosis therefore represents yet another step in the evolution of thinking about hypnosis. Like its predecessors it is coherent with prevailing developments in scientific and cultural thinking. It is a product of the late twentieth century. Also, like its predecessors, in time it will be replaced by other ways of thinking. It therefore behoves us to be humble and not to think that we have now, finally, found the real 'truth' about hypnosis.

This does not mean, however, that the insights and opportunities offered by an ecosystemic approach to hypnosis are any the less profound and exciting. Let us summarise the most important of these as guidelines in the areas of research, treatment and training.

ECOSYSTEMIC GUIDELINES FOR RESEARCH

GUIDELINES FOR RESEARCH

- Research takes place in a social setting
- Attributions of meaning affect research outcome
- Attributions of meaning are variables for research
- Ecosystemic research is descriptive/narrative
- Ecosystemic research is constructivistic
- Ecosystemic research constructs consensus

- Research takes place in a social setting. When people get together in a laboratory for research, they are involved in a complicated social situation. Any manipulation of variables constitutes a social action, and as such consists of verbal and/or non-verbal language. The principles of dialogue therefore pertain, which means that the ideas, conceptions and attributions of all parties present play a role in the evolving ecology of ideas in the situation. While Newtonian thinking would require that these be largely ignored, an ecosystemic perspective emphasises their importance.

- Participants' attributions affect the research outcome. From an ecosystemic point of view subjects' attributions of meaning to the research situation and to hypnosis need to be known and taken into account in considering the research data because they have an effect on the results (Fourie, 1990; Fourie & Lifschitz, 1988). This means that one should know who the subjects are, whether they have had any prior experience of hypnosis, and of what nature, how they were recruited, and what they know or think about the particular research. The role of experimental actions in confirming/disconfirming their attributions should also be taken into account: for example what meaning(s) do they attach to susceptibility testing or to tape-recorded instructions, and what expectations are fostered in the subjects by these activities?
- Attributions could be treated as research variables. Not only should subjects' ideas and attributions be taken into consideration, but they can be actively manipulated. Ecosystemic hypnosis does not work with intrapsychic entities, but with ideas, meanings and connotations. With this subject matter it stands to reason that the outflow of attempts to change meanings and ideas would be of interest to ecosystemic researchers. It should be remembered, though, that researchers do not have the power to change subjects' attributions unilaterally and directly. All that can be done is to change the context and/or the researchers' own activities in the hope that this will perturb the ecology of ideas in the situation to such an extent that the subjects can come to think differently about the situation and/or about themselves.
- Ecosystemic research is descriptive. It does not aim to prove anything in a Newtonian fashion, but to describe a process of investigation. The idea is to make sense of the total process and not to reduce it to independent and dependent variables which are assumed to influence one another in a linear way. This does not mean, though, that ecosystemic research is anti-empirical or even anti-statistical. These are ways of describing which can produce a wealth of material. The only proviso is that statistical analysis, for instance, should not be used because it is fashionable to do so, but to generate a holistic as opposed to a reductionistic understanding.

Any research technique is acceptable, provided that the assumptions on which it is based, and the implications of these assumptions, are clearly understood and are considered in drawing conclusions. So, for instance, although ecosystemic hypnosis does not give credence to

the reified concept of hypnotic susceptibility, and although it opposes the routine application of susceptibility testing, such testing is acceptable as a technique to define the situation in a particular way. However, it is not acceptable as an 'objective' measurement of a supposedly relatively stable individual trait or ability. In utilizing susceptibility testing there should be a clear description of its possible influence on subjects' attributions and on the process of mutual qualification. Susceptibility testing is a strategic intervention rather than a neutral measurement, and this should be reflected in the research description.

In this sense then, any technique which can clarify the particular research issue, and which can broaden the researcher's understanding of it, is acceptable in an ecosystemic approach. Note that the emphasis is on a broadening of understanding and not on a reduction of complexity. The aim is to make sense of complexities and not to prove anything, as adherence to the Newtonian notion of objectivity would dictate (Atkinson & Heath, 1987).

- Ecosystemic research is acknowledged as constructivistic. In saying that the aim of ecosystemic research is to make sense of events, the emphasis is on the word 'make'. Sense does not exist objectively out there, waiting for the researcher to find it. The action of 'making' sense is a cognitive one, with the researcher actively constructing an understanding of the situation based on his/her acquired knowledge about the situation. This sense or understanding is therefore built or constructed and reflects the researcher's way of thinking and his/her assumptions (Keeney & Morris, 1985). This of course does not refer only to ecosystemic research; all research conclusions, regardless of the approach which was followed, are constructed or invented (Keeney & Morris, 1985). But Newtonian thinking demands that the researcher pretend to consider only 'objective' facts and therefore most researchers do not acknowledge that they construct their research conclusions. In contrast, ecosystemic research is acknowledged to be constructivistic.
- Ecosystemic research constructs consensus. The sense that a researcher makes of an event cannot be just anything, a flight of fancy. It has to fit with available knowledge of such types of events; it must be logical in its deductions and coherent in its presentation. Whether it conforms to these criteria is something to be judged by others. The understanding which is constructed is therefore a consensual one. Even when no other people are physically present when

the researcher builds his/her understanding of a researched event, his/her cognitions have to consider previous research findings and the published opinions of other researchers/theoreticians in the field. Also, possible questions and concerns which others could raise have to be anticipated and attended to pre-emptively.

Again, this is the case in any research, but it is not often acknowledged in other approaches. This is because the traditional scientific method, based on Newtonian thinking, provides a common language of (often unquestioned) assumptions for researchers, so that they do not actively have to consider what their peers might think of their constructions. For instance, if a Newtonian researcher were to say that a particular group of subjects scored low on a susceptibility test, then it is to be expected that his/her peers would accept this as objective fact, and the researcher would not have to explain why he/she assumed this group of subjects to be unhypnotisable in any context. Ecosystemic researchers do not have this luxury. Not only do they have to convince other ecosystemic thinkers of the logic of their conceptualisations, but they often come up against a brick wall in trying to communicate their ideas to their Newtonian colleagues. Nevertheless, their research conclusions have to reflect reasonable consensus in the particular field of study. This does not mean that research conclusions should not be controversial, only that they should not be posterous.

ECOSYSTEMIC GUIDELINES FOR TREATMENT

GUIDELINES FOR TREATMENT

- The object of treatment is the situation
- Treatment focuses on the ecology of ideas
- Ecosystemic therapy does not blame anyone
- The individual is confirmed in therapy
- Hypnosis perturbs the ecology of ideas
- Hypnotherapy is a narrative process
- Treatment capitalises on clients' beliefs
- Hypnotherapy is not an independent mode of treatment
- In medicine a pain-free zone can be defined

- The object of treatment is the situation. Ecosystemic treatment does not focus on an illness, or a condition, or a person, but on the total context in which certain behaviours are qualified as troublesome. It therefore does not reduce the context to symptoms and the symptoms to diagnostic categories. In this regard it aligns itself with Dumont's (1987) brilliant, although sometimes biting, criticism of DSM-III-R.
- Treatment is focused on the ecology of ideas in the system. An ecosystemic therapist would attempt to assess how the client(s) define the problem and what meanings they attach to themselves, each other, their different life contexts, the problem, and treatment (Mauksch & Roesler, 1990). He/she will then attempt to perturb this ecology of ideas in such a way as to facilitate its evolution in a direction which could be mutually qualified as positive. In doing so, he/she will be very aware that he/she is part of the system and that his/her own idiosyncratic attributions and ideas can help or hinder the evolution of the ecology of ideas.
- Ecosystemic therapy does not blame anybody. If any person is designated as the 'cause' of a problem, it is assumed that that person has a linear influence on others or the behaviour defined as troublesome. This is a Newtonian conceptualisation. In ecosystemic therapy, even when family therapy is undertaken, there is no implication that the family is the 'cause' of the problem or that the family functioning is defective.
- The individual is confirmed. Not only is nobody blamed for the problem, but an ecosystemic therapist believes that each individual does only what he/she is capable of doing in the circumstances. This is second-order cybernetics in which the autonomy of systems and sub-systems is emphasised (Hoffman, 1985). The client/family member uses those means of which he/she is capable to conserve his/her autonomy. If symptomatic behaviour is understood as a way of simultaneously conserving the autonomy of the individual and the family, then blame falls away and each individual can be confirmed as autonomous. In the same way 'resistance' in therapy can then also be seen as a way of conserving autonomy. The presence of 'resistance' in this sense is an indication that the individual or family feels their autonomy to be threatened and needs to be approached differently.

- Hypnosis is used to perturb the ecology of ideas in the system. As we saw, hypnosis can be used in a variety of ways in treatment. All of these, however, have one aim only, namely to perturb clients' and families' ways of thinking about themselves, each other, and the problem. This is so whether hypnotic age-regression is used to facilitate the evolving of a convincing reframe, externalisation or some other procedure is used to create a sense of mastery, or post-hypnotic suggestion is employed to disrupt entrenched patterns of interaction in the family, etc.
- Ecosystemic hypnotherapy is a narrative. According to Hoffman (1990b) therapy involves (a group of) people having a conversation about a problem. The conversation is carried by verbal and non-verbal language (Anderson & Goolishian, 1988). Hypnosis is part of this linguistic process and is used to convey novel ideas.
- The use of hypnosis capitalises on clients' belief in hypnosis. Hypnosis has no inherent 'power'. Its effectiveness in perturbing the ecology of ideas in a particular system rests on the system members' attribution of 'power' to hypnosis. They expect change to occur when a technique is used which they believe to be 'powerful'. This and the therapist's interest in hypnosis are the only indications for the use of hypnosis in therapy.
- Hypnosis is not an independent treatment modality. Hypnotherapy is part of a therapeutic conversation and does not stand on its own. Ecosystemic hypnotherapy is therefore one of many techniques which could be used in ecosystemic psychotherapy/family therapy. It can assist in the co-evolution of a particular ecology of ideas, but is only one element in this evolution.
- In medicine/dentistry an ecosystemic conceptualisation of hypnosis does away with one of the main stumbling blocks which have traditionally kept hypnosis from being fully utilised in these fields, namely the idea that hypnosis is difficult and time-consuming. If the whole situation is purposefully defined as one of comfort and painlessness (a pain-free zone), no lengthy hypnotic induction procedure is necessary. Also there is no necessity to be concerned about patients' supposed hypnotic susceptibility.

ECOSYSTEMIC GUIDELINES FOR TRAINING

GUIDELINES FOR TRAINING

- Training emphasises ecosystemic conceptualisation
- Creativity in entering ecologies of ideas is stressed
- Ways of organising mutual qualifications are taught
- Hypnosis is one of many techniques which are taught
- Trainees learn to describe and substantiate treatment

- Training would emphasise ecosystemic conceptualisation. Students are trained to think about problems and treatment in an ecosystemic way. They learn to consider clients' and subjects' attributions of meaning and to think in terms of evolving ecologies of ideas.
- Students are encouraged to enter existing ecologies of ideas in creative ways in order to perturb these ecologies. However, they are taught to do this in such a way as to simultaneously confirm the individuals or family concerned. Great emphasis is placed on helping the trainee to utilise his/her own interpersonal style in doing so.
- No formal hypnotic induction methods are taught. Rather trainees are taught ways of qualifying behaviour as hypnotic, as well as ways to mobilise hypnosis onlookers to partake actively in the mutual qualification of behaviours as hypnotic.
- A variety of psychotherapeutic techniques are taught, not only hypnosis. These include family therapy techniques, such as circular questioning, and techniques which originated from other schools of psychotherapy, such as behaviouristic techniques. However, in teaching these techniques the ecosystemic rationale for their use is stressed.
- Trainees are actively encouraged to find and explore novel and creative ways to qualify behaviour as hypnotic, as well as to utilise this to perturb existing ecologies of ideas.
- First and foremost, though, students have to become proficient at describing, in ecosystemic terms, problem situations, the way(s) in which they entered those ecologies of ideas, and the subsequent evo-

lution of the ecology of ideas. Ecosystemic hypnosis is not an 'anything goes' approach and students have to learn to explain the ecosystemic rationale behind their interventions, however creative these might be.

CONCLUSION

At first glance many people are disappointed with an ecosystemic approach to hypnosis. If hypnosis is only what one thinks it is, then a lot of the mystery and intrigue around hypnosis disappears. How can one work with hypnosis if it does not exist? But then one realises that we constantly work with 'things' which do not exist: 'things' like parties and meetings and chess games and funerals. All of these, like hypnosis, exist only in the way they are defined. The difference between a picnic and an examination, for instance, lies solely in the definition of the situation, as carried by such elements as the venue, the participants, the props (a picnic basket versus an examination paper), the preparation, and the qualifying actions of all concerned. In this sense hypnosis is no different from any of these 'things'. And this is where the disappointment comes in: we *expect* hypnosis to be different, a little mysterious. Once we realise that this is only an attribution, but one which is as valid as any other, we can happily, and in my opinion much more effectively, work with hypnosis as a particularly defined ecology of ideas without experiencing the anticlimax of working with 'nothing'.

This is the beauty, and the frustration, of constructivism. What we qualify and define becomes really 'real', not only to ourselves, but to all people concerned. Just consider how 'real' the hypnotic 'state' had become: so 'real' that its opponents, the non-state theorists, actually tried to prove that it did not exist!

Ecosystemic hypnosis capitalises on this human propensity to create 'something' on the basis of our expectations and attributions. This particular 'something' could profoundly, and – so we hope – positively, affect our lives.

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