rhythms. Los Angeles: Tarcher.
Sturgis, L. & Coe, W. (1990). Physiological responsiveness during hypnosis. The International Journal of Clinical Hypnosis, 38, 3, 196-207.
Waldrop, M. (1992). Complexity: The emerging science at the edge of order and chaos. Simon & Schuster, New York.
Wallace, B., Turosky, D. & Koloszka, A. (1992). Variability in the assessment of imagery vividness. Journal of Mental Imagery. 16, 221-230.
Wallace, B. & Kokoszka, A. (1995). Fluctuations in hypnotic susceptibility and imaging ability over a 16-hour period. The International Journal of Clinical and Experimental Hypnosis, 43, 1, 7-19.

Capitalizing on Concepts in Hypnotherapy

The Theory of Ecosystemic Practice

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■ *When people go to treatment agents they have particular, sometimes idiosyncratic ideas about the process of treatment. These ideas influence the treatment either directly or indirectly. The ecosystemic approach to hypnotherapy focusses, more than most other approaches, precisely on these client ideas and attributions as they come to the fore in the concepts used by the client. In this paper the theoretical rationale underlying this work is explained and a case study is presented to illustrate the practical application in hypnotherapy of this ecosystemic way of thinking.*

There is the joke of a person saying: "When I am ill, I go to the doctor, get a prescription and pay the fee, because the doctor must live. Then I take the prescription to be filled out by the pharmacist and I pay for the medication, because the pharmacist must live. When I get home, I throw the medication away, because I must also live."

This joke illustrates that when people go to treatment agents they have particular ideas about the process of treatment. And these ideas influence the treatment either directly or indirectly, sometimes in ways which the treatment agent would not expect. While the medical model has been reluctant to accept this fact (see, e.g., Engel, 1992; Limacher, Dahler, Bösch & Egli, 1991), most practitioners of psychotherapy are keenly aware of it. The ecosystemic approach to psychotherapy and hypnotherapy, perhaps more so than any other, focusses precisely on these client attributions and ideas in treatment. It is the purpose of this paper to explain the theoretical rationale underlying this work and to give some indication as to its practical implementation.

From first- to second-order cybernetics in systems thinking

When systems approaches developed in the middle of the nineteen-fifties, two of the three central assumptions of a traditional, Newtonian view of science were discarded. These were the notions of reductionism and lineal causality.

Reductionism refers to the traditional view that objects and processes need to be reduced to, or split up into their basic components, so as to make it easier to study and understand them. The assumption here is that, once the components are analysed, an

understanding of the whole can be achieved through a process of re-synthesis (Schwartzmann, 1984). However, early systems theorists realized that in human systems processes are too complicated and too interlinked to make this kind of analysis viable. The Gestalt principle that the whole is greater than the sum of its parts typifies the rejection of the Newtonian notion of reductionism.

Lineal causality has to do with the connections between the components to which objects or processes are reduced. Traditionally these connections are conceptualized in terms of cause and effect. Components are seen as influencing each other in a direct, unidirectional, lineal way. Systems theorists rejected this notion in favour of the idea of circular causality, meaning that sub-systems influence one another in an ongoing, reciprocal way (Hoffman, 1981). This view of causality fitted more clearly with the complications of social situations.

While the emerging systems view of the early theorists therefore challenged the traditional scientific ideas of reductionism and lineal causality, another central Newtonian notion was implicitly retained, namely that of neutral objectivity. Systems were observed as if they were separate from the observer and as if the observation were objective (Colapinto, 1979). What was perceived in the study of systems was assumed to be real and uninfluenced either by the observation itself, or by the observer's epistemology or way of thinking about systems. Early family therapists, for instance, "saw" boundaries between systems and sub-systems, and they "saw" family rules in operation, not realizing that, what they "saw" were concepts in their own minds and not objectively real at all.

Based on this "objective" approach to human systems, early systems theory, closely linked to Wiener's (1961) cybernetic view of inert systems such as ballistic missiles, was quite mechanistic. Family systems were studied in terms of positive and negative feedback processes occurring between sub-systems and in terms of homeostasis, which referred to a state of equilibrium families were supposed to strive towards (Dell, 1982).

Dissatisfaction with this cybernetic or interactional approach started coming to the fore in the early nineteen-eighties. Dell (1982), in one of a series of papers by various authors which all appeared in the same issue of the prestigious journal, Family Process, and which questioned the prevailing state of systems theorizing, showed that the concept of homeostasis was theoretically flawed. Earlier Elkaïm (1981) had argued that family systems seen in therapy were by and large what he called "systems far from equilibrium," and that homeostasis was an inappropriate concept in working with such families.

In moving away from what was now called first-order cybernetics, systems theorists finally relinquished the traditional notion of objectivity. The observer was now seen as part of the observed (Watzlawick, 1990). No statement could be made about a system, for instance, without taking into account the observer's idiosyncratic ideas and ways of thinking. This implied a higher order of observation, namely observation of the observation, and came to be known as second-order cybernetics (Hoffman, 1985).

The change from first- to second-order cybernetics was, however, not as simple as merely taking into account the influence of the observer. The whole view of system functioning changed. No longer were systems seen as mechanistically interacting with one another through the means of feedback across boundaries so as to reach a state of homeostasis. A number of influences culminated in a completely different view of systems.

The first of these influences originated in the work of two Chilean biologists, Maturana (1975, 1983) and Varela (1979; Maturana & Varela, 1980). In a classic experiment they found that the way a frog catches a fly, depended on the way the frog`s eye functioned, and not merely on the presence of the fly. This and other similar observations led them to postulate what has become known as the doctrine of structure-determinedness (Maturana, 1975). This means that the actions of a living system are determined by the structure of the system concerned, and not by occurrences outside of the system. Living systems are therefore seen as self-organized and autonomous (Maturana, 1975), a point subsequently also made by authors such as Kenny (1989), Kruse, Stadler, Pavlekovic and Gheorghiu (1992) and Loos and Epstein (1989). Outside influences can "perturb" the system, but the reaction of the system to such perturbation is determined by the system itself (Kenny, 1988).

From this perspective, when two or more living systems get together, they couple with each other, as determined by the structure of each system, to form a composite system which in turn is autonomous in determining its own actions. In human systems this coupling is by means of the exchange of ideas, as Anderson and Goolishian (1988) showed. As autonomous and therefore closed systems, human systems can exchange nothing but ideas, even though these might be symbolized by concrete objects. From the perspective of linguistics Reddy (1986) showed very clearly how only ideas can be exchanged between systems, and how even these are not really "exchanged." Strictly spoken, symbols, such as verbal and other sounds, visual stimuli, and marks on paper are presented by one system to another. From these symbols the second system does not extract precise meanings, but it autonomously creates its own, often idiosyncratic meanings, which might resemble the original, intended meanings only superficially. The presented symbols perturb the receiving system and this system then autonomously creates its own meanings regarding the perturbation.

A second, very important influence on the movement away from first-order cybernetics came from the work of anthropologist Gregory Bateson (1972, 1979). He saw the functioning of family systems as revolving around what he called an "ecology of ideas." According to this view, a family develops an unspoken network of interlinked ideas about themselves as a family, about each family member, about their place in the world, and about life in general. This does not necessarily mean agreement between family members, in fact, the very disagreements form part of the shared ecology of ideas. For example, if a child always tries to make peace when his/her parents argue, one could say that there is a shared idea that the child is part of the process of arguing,

whether or not one or both parents dislike the child`s peacemaking efforts. Attributions regarding arguing, parenting and the role of children would then probably form part of the particular ecology of ideas in the specific family.

A third influence in the development of second-order cybernetics was that of constructivism. Von Glasersfeld (1984), von Foerster (1981) and others (eg. Efran, Lukens & Lukens, 1988; Feixas, 1990; Watzlawick, 1990) argued that it was impossible for human beings to observe reality as it really is, even assuming that a fixed reality existed. When an observation is made, what is represented in the brain, is not the object itself, but ideas about the object. These are generated by the perceiver and are therefore coloured by his/her existing ideas and attributions (Kenny, 1989). The notion of an objective or neutral observation of reality is therefore replaced by the concept of constructivism. Initially, this concept implied that no "real" reality existed and that all "realities" were constructed by the observer. This view came to be known as "radical" constructivism. Later, theorists such as Hoffman (1990a) and Speed (1991) modified this position to an understanding that what is observed is co-constructed by the observer and by the observed. From a modern constructivist perspective then, what is observed in living systems, is constructed partly by the observer and partly by the observed (Speed, 1991). This construction is done in language, both internally by the observer to him-/herself, and externally, in communication with others (Efran et al, 1988). Internally, the observer has to make distinctions between what is observed and what is known (Feixas, 1990; Kenny, 1989). This involves the use of personal constructs, i.e. meanings (Feixas, 1990). If one sees an apple, one can only know what one sees by distinguishing it from other known objects. The idea of "apple" and the ideas of all other known objects are meanings, that is language (Loos & Epstein, 1989). Externally, meanings are exchanged through verbal and non-verbal language (Anderson & Goolishian, 1988).

In social systems this exchange of meanings in time leads to the co-construction of a particular shared reality for that system (Feixas, 1990; Loos & Epstein, 1989). This happens in research as well as in clinical practice. However, adherence to the notion of objective observation requires that this be ignored or denied. Both researchers and clinicians therefore often act as if their observations reflected a true or fixed reality, while in fact what is observed is co-created or co-constructed by everybody involved.

From this brief history of the development of systems thinking it should be clear that where first-order cybernetics focussed on the "objective" observation of interaction within and between systems, the current, second-order approaches emphasize the autonomy of systems. This is evident from theoretical work such as that of Hoffman (1985; 1990b) and Kenny (1989), from therapeutic efforts such as those of Retzer (1991) and Griffith, Griffith and Slovik (1990), and from research like that of Kruse et al. (1992). Furthermore, because second-order approaches focus on ecologies of ideas within systems, they are often called "ecosystemic" perspectives (Auerswald, 1987).

Ecosystemic hypnosis as a second-order approach

From an ecosystemic perspective hypnosis is not seen as objectively "real" (i.e. a state of consciousness). It is a definition given to a particular shared "reality" by everybody involved in that "reality." In this sense it is equivalent to shared "realities" with other definitions, such as a party, a meeting or a ball game. What makes a ball game "real" and different from a meeting? The different actions of all parties involved in the game, together with the physical layout of the venue, interlink in such a way that the game is mutually defined as a (particular) ball game. This happens in diverse ways: the players are unlikely to turn up dressed in tuxedo`s, neither are the spectators likely to wear the same clothes as the players. There would be the appropriate numbers of players and referees, and the venue would also be appropriate: ice hockey is not played on a grand prix track. The game would take place on the field and not on the stands. The players would not applaud the spectators, neither would the latter be seated on the field. All these and other elements together would define the occurrence as a "real" ball game and not a meeting, for instance.

In a similar way would certain actions, enacted in appropriate ways by certain people, be considered appropriate to a situation designated as one of hypnosis (Fourie, 1994). By the occurrence of such behaviours the situation is mutually defined as hypnosis. Conversely, in a situation thus defined, certain actions get mutually qualified (Fourie & Lifschitz, 1985, 1989) as appropriate to the situation, i.e. as hypnotic behaviours. There is therefore a continuous circular flow between the definition of the behaviours and that of the situation. From a second-order perspective it needs to be remembered, though, that these definitions are nothing but ideas in the minds of the participating parties, the continuous and mutual exchange of which, verbally and non-verbally, creates the "reality" of hypnosis in the particular system. For instance, the usual silence of onlookers in the hypnotic situation helps to define the situation as different from, say, a meeting or a party. The tone of voice of the hypnotist and the fact that he/she usually talks only to the person designated as subject, also helps to define the situation as one of hypnosis. In turn, the "unusual" way in which the subject would often carry out ordinary acts, such as the lifting of a hand or the closing of the eyes, is part of the process of mutual creation of the "reality" of hypnosis in the situation. All these actions by the various participants, synchronized as they usually are, and appropriate as they are to the role played by each participant, continually exchange the idea that what is happening, is hypnosis.

While the ideas of the participating parties can change in the course of the hypnotic session, it is a given fact that everybody enters the situation with particular, often idiosyncratic ideas about hypnosis and about his/her connection with hypnosis. It is in fact impossible not to have ideas and conceptions about any situation one enters, even though these might be factually wrong or even bizarre. In this regard the work of Kirsch (1991, 1994) has shown that the expectations with which people enter a hypnotic situation profoundly influence their reactions to the situation.

The theory of ecosystemic practice

As is the case with any other situation when clients or families enter a therapeutic situation, they have certain ideas, attributions and conceptions about the particular circumstance, about themselves and each other, about the presenting problem, and about the expected mode, venue and agent of treatment. If the situation is one of hypnotherapy, their ideas about hypnosis and about their own position with regard to hypnosis also come into play. These ideas are presented in verbal and non-verbal ways to the therapist, who, in turn, has his/her own ideas and conceptions about all these and other concerns.

From an ecosystemic perspective the task of therapy is for the therapist simultaneously to link with the presented ideas and to perturb them (e.g. Hoffman, 1990b; Keeney & Ross, 1985; Loos & Epstein, 1989). The therapist cannot influence the client(s) in a lineal way, he/she can only present ideas which could perturb the existing client ideas. The reaction to the perturbation is determined by the client system itself and is mostly unpredictable.

Traditionally, client ideas were largely ignored in therapy. The therapist was regarded as the person with the knowledge about the particular problem and he/she had to tell the client or family what to do in order to solve the problem. Client ideas could merely help or hinder this process. If the process was hindered by client ideas, i.e. if the client did not agree with the therapist, this indicated "resistance" by the client and the therapist had to eliminate this "resistance." In hypnotherapy "resistance" could also be circumvented by correcting the client`s "misconceptions" about hypnosis prior to the actual therapeutic work, as is advocated in many handbooks of hypnosis (e.g. Baker, 1990; De Betz & Sunnen, 1985; Kossak, 1989).

The work of Erickson and his followers changed this traditional way of working. Utilization of the client`s idiosyncratic ideas and behaviours, rather than attempts to change them, became one of the central tenets of Ericksonian hypnosis (e.g. Dolan, 1985). However, even in Ericksonian hypnosis one finds attempts to "train" clients to think in specific ways about the treatment. For instance, Nugent (1989), in reporting on therapeutic work involving a so-called "implied directive," emphasizes that a description of "unconscious" thinking is presented to the client prior to the induction of hypnosis. In this manner the client is indoctrinated beforehand into a specific way of thinking about the treatment process. Although there is nothing wrong with doing so, an ecosystemic hypnotherapist would tend not to do this, but rather would explore and then capitalize on the way the client already thinks about the process. This is because, unlike traditional approaches, and unlike even an Ericksonian approach (see e.g. Fourie, 1992), ecosystemically seen there are no "misconceptions" of hypnosis. All client conceptions are seen as equally valid and usable.

This means that if a client or family enters the treatment situation with the idea, say, that hypnosis would afford a "magic" cure, then the therapist would explore, with the client(s), what kind of "magic" cure can be brought about. Or if the client(s) see(s) hypnosis as very dangerous, then the therapist might either agree but in a benign way

threaten to use hypnosis if some other strategy were to fail (Fourie, 1991a), or he/she might use circular questioning (Penn, 1982) to investigate how hypnosis could have solved the problem if it were not too dangerous to use. This latter method might bring to the fore other possible ways to solve the particular problem, so that hypnosis becomes "unnecessary." The language used by the therapist would therefore be that of the client(s): if a client thinks of hypnosis as having to do with the "unconscious," the therapist would talk about the "unconscious" and its functioning, even though the "unconscious" does not form part of an ecosystemic view of hypnosis (Fourie & Lifschitz, 1985). As an aside, it can be mentioned that this is one reason why an ecosystemic approach to hypnosis seems so amenable to application in non-Western cultures. In the same way in which a client`s use of the concept of the "unconscious" can be accomodated, the use of concepts such as spirit possession or forefather influences can be utilized to devise treatment which fits with the ideas of the specific client(s) and the specific culture.

One implication of this view is that hypnosis is not seen as the treatment in itself, as if hypnosis possessed some intrinsic cure. On the contrary, hypnosis is but one way in which a situation can be defined, a way which, depending on the client`s conceptualization, can have positive, neutral or negative consequences. Hypnosis in this sense is but part of a wider therapeutic process, part of the linguistic co-creation of a "reality" in which the presenting problem hopefully has no place, precisely the kind of process described by ecosystemic theorists such as Anderson and Goolishian (1988), Griffith et al (1990), Loos and Epstein (1989) and Hoffman (1990b). These ideas will be illustrated in the following case description.

Case description

Anita (pseudonym), a 40-year-old professional woman, applied for psychotherapy to alleviate her fear of the dark. Although she had been suffering from this fear for a long time, it had become worse in the last year. She could no longer go out at night and in her house all the lights had to stay on all night. This frustrated her husband and had a negative effect on their marital relationship.

Anita suspected that the fear originated from a traumatic event which took place when she was four years old. Her mother had left her in the care of an older couple when the mother was at work. All Anita could remember was that one day she had refused to go back to this couple, but she had no idea why she did so. As an adult she suspected that the man had tried to molest her sexually, but she had no recollection of such an occurrence. A year ago she had visited another psychotherapist who, on hearing of Anita`s suspicion, attempted to use hypnotic age-regression in order to help her remember what "really" happened when she was four years old. This attempt failed because in hypnosis Anita became so frightened that she terminated therapy. After this experience her fear of the dark became much worse. Now she was very apprehensive of therapy, but felt that she had to do something about the fear of the dark, which was increasingly incapacitating. She entered therapy under one condition: no hypnosis was to be attempted.

The approach followed in the psychotherapy with Anita was an ecosystemic one in which Cecchin`s (1987) concept of curiosity played a major role. This meant that the therapist was simply curious about Anita`s life, her way of thinking and her history, and that he did not have pre-

conceived ideas about the etiology of her fear of the dark. The following is a synopsis of the information gained from her:

Anita was the clever one of her family; she outperformed her siblings at school. But this made her the odd one out in the family, and she was mostly excluded from sibling coalitions. Also her father seemed to be distinctly jealous of her achievements. He was stuck in a job where he had received no promotion in 20 years. Many of his very aggressive outbursts were directed at Anita, especially at times when she had received academic accolades at school, of which there were many. She experienced her father as very unpredictable, never knowing when he would blame her for something or attack her, which, fortunately, happened only verbally. Her mother, she said, was never "there" for her, never stood up against the father to defend Anita, even when the mother knew that the blame was unfounded.

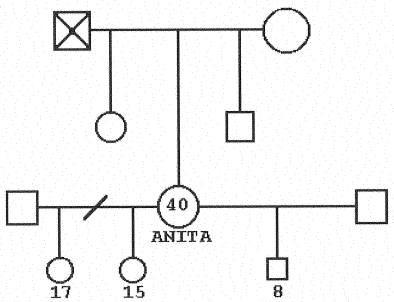
Anita said she married her first husband mainly because he was so unlike her father. He was soft-spoken and interested in her opinions and in her achievements. However, according to her, this changed dramatically from the very day of the marriage. In his soft-spoken way her husband tolerated no opposition from her. He prescribed how she should dress and how she should behave. This change in the husband came as a rude shock to Anita. Soon she found that she was interacting with him in the same way she used to deal with her father, namely by avoiding him as much as possible and by trying to do as was expected of her. But she became increasingly resentful and eventually opted for a divorce, vowing to herself that she would never again put herself in a position where she was under the control of somebody else.

She remarried, but warned her prospective husband beforehand that she would do what she wanted. At the time of therapy she had been openly involved in an extramarital relationship with another man for some years. When her husband complained about this, she threatened to leave him unless he accepted the situation, which he did reluctantly. The man with whom she had the relationship was also married and Anita said that this suited her since she had no wish to marry him.

At work, where she occupied a fairly senior position, Anita was known as someone who made her own decisions and who never blindly followed company policy. Also interesting was the fact that she had a reputation at work as always being immaculately prepared for unforeseen circumstances; in meetings, for instance, she would always have answers ready for difficult questions which might be put to her. She did not like to be caught off guard. In fact she disliked all surprises, even pleasant ones.

Based on this information, it became clear that the concept of early sexual molestation with which Anita entered the therapy, was embedded in a complex of other ideas about herself and her place in the world. Other pertinent concepts in this complex were unpredictability of people and events, control of herself by others, and preparedness for unforeseen circumstances. Regardless

FIGURE 1: GENOGRAM



of whether the molestation actually took place, in her mind it was another instance where she had no say about, and no control over events, another indication that life was unpredictable and full of unpleasant surprizes against which she had to be on the lookout. The concept of such molestation underscored the idea that, if she relaxed her vigilance, something terrible, over which she had no control, could happen. And this is where the fear of the dark came in. The dark was potentially full of horrible surprises; she had to see what was waiting for her, she had to be prepared.

Based on this understanding of Anita`s ideas, therapy could now concentrate, not on the suspected sexual molestation, but on devising a circumstance in which she could get herself to be comfortable with uncertainty and unpredictability. She was defined (mutually) as her own therapist, thereby linking with her conception that she had to have control of whatever happened to her. The therapist was merely a consultant, highlighting the principles according to which therapy could take place, but Anita was the one who decided how to operationalize the principles and how the operationalization should be timed - she wanted the process to be slow.

Secure in this definition of therapy, suddenly Anita felt free to experiment with bringing in small changes in her life, the outcome of which she could not predict. She enjoyed this process and felt herself gradually becoming comfortable with various uncertainties. So, for instance, did she deliberately stop prescribing to her teenage daughters how they should dress. In fact, she changed her own clothing style from a rather severe, conservative mode to a more feminine look. She also practised gradually switching off more and more lights in the house, until she could be quite comfortable sitting in the dark.

About halfway through the therapy, she was introduced, by mutual consent, to "self-hypnosis" as a way, not to delve into the past, but paradoxically to practice the relinquishing of control in a controlled and dignified manner. As we have shown elsewhere (Fourie, 1994; Fourie & Lifschitz, 1985) "self-hypnosis" is different from hetero-hypnosis only in that it is defined differently, i.e. as under the control of the subject/client, rather than that of the hypnotist. In the light of Anita`s ideas about control and surprise, this different definition was crucially important for her. In the situation defined as "self-hypnosis," Anita practised, for instance, to let her hand become so heavy that she could hardly lift it (defined as "giving up control") and then to lift it deliberately (defined as "taking back control"), whereupon the heaviness disappeared. In this way she could experience that, even in a situation which ordinarily would have been anxiety-provoking, she could feel calm and comfortable. In the "self-hypnosis" situation she learnt to look forward, actually, to unexpected reactions, such as a sudden feeling of coldness, defined as originating from her "unconscious."

In these ways Anita came to realise that she was capable of handling unexpected situations, that she did not always have to be on the lookout for unpleasant surprises. She understood that, even in the time when she was always alert, it was impossible to be prepared for all eventualities. She could just as well relax, knowing that she had the skills to deal with unpredictable situations. Her outlook on life changed, and with it the fear of the dark disappeared. At follow-up after six months no recurrence of symptoms was reported and she described herself as calmer and more confident.

Conclusion

The first therapy which Anita underwent, seems to be a good example of what Watzlawick, Weakland and Fisch (1974) called a "terrible simplification," leading to a worsening of the problem. This refers to an instance where the therapist focusses on technique (in this case hypnotic age-regression) as if it possessed an inherent curative ability, rather than on the totality of the client`s life as a "reality" existing in language and

as expressed in his/her conceptualization of this life.

The holistic perspective characteristic of an ecosystemic approach (Fourie, 1991b) helps to avoid this type of situation by paying specific attention to the idiosyncratic way in which the client views him-/herself and his/her specific life circumstance. The concepts used by the client to describe this circumstance give an indication of what the pertinent issues are for him/her.

Once it is clear what these concepts are, then they can be therapeutically utilized to co-create, with the client or family, a "reality" in which the problem is no longer viewed as a problem. Whereas previously Anita had to be a "watchdog," controlling her life so that nothing unexpected could occur, the therapy capitalized on her concepts of control and unpredictability to help her reach a situation where she could be excited about exposing herself, in a controlled way, to various unpredictabilities.

Hypnosis has no inherent curative "power," but it can sometimes be fruitfully utilized, as illustrated in this case, in the process of co-creating a different "reality" for the client or family. In this process, which arguably underlies all psychotherapies of whatever persuasion, client conceptualizations of their own lives and of the world play a crucial role. By capitalizing on these client ways of thinking, rather than by opposing them, the therapist not only builds rapport with the client, which in itself is of utmost importance (see, e.g., Peter, 1996, in this volume), but enhances the effectiveness of the treatment. As the concept of hypnosis carries different meanings for different clients/families, these meanings can be fruitfully utilized in the process of co-constructing a different, symptom-free "reality" for the client/family.

References

Anderson, H. & Goolishian, H. A. (1988). Human systems as linguistic systems: Preliminary and evolving ideas about the implications for clinical theory. Family Process, 27, 371-393.

Auerswald, E. H. (1987). Epistemological confusion in family therapy and research. Family Process, 26, 317-330.

Baker, R. A. (1990). They call it hypnosis. Buffalo, NY: Prometheus Books.

Bateson, G. (1972). Steps to an ecology of mind. New York: Ballantine Books.

Bateson, G. (1979). Mind and nature: A necessary unity. New York: Dutton.

Cecchin, G. (1987). Hypothesizing, circularity, and neutrality revisited: An invitation to curiosity. Family Process, 26, 405-413.

Colapinto, J (1979). The relative value of empirical evidence. Family Process, 18, 427-441.

De Betz, B. & Sunnen, G. (1985). A primer of clinical hypnosis. Littleton, MA: PSG Publishing Company.

Dell, P. F. (1982). Beyond homeostasis: Towards a concept of coherence. Family Process, 21, 21-41.

Dolan, Y. M. (1985). A path with a heart. Ericksonian utilization with resistant and chronic clients. New York: Brunner/Mazel.

Efran, J. S., Lukens, R. J. & Lukens, M. D. (1988). Constructivism: What's in it for you? The Family Therapy Networker, 12(5), 27-35.

Elkaïm, M. (1981). Non-equilibrium, chance and change in family therapy. Journal of Marital and Family Therapy, 7, 291-297.

Engel, G. L. (1992). How much longer must medicine's science be bound by a seventeenth century world view? Psychotherapy and Psychosomatics, 57, 3-16.

Feixas, G. (1990). Personal construct theory and systemic therapies: Parallel or convergent trends? Journal of Marital and Family Therapy, 16, 1-20.

Fourie, D. P. (1991a). The withholding of hypnosis in family therapy. Journal of Family Psychotherapy, 2(1), 41-53.

Fourie, D. P. (1991b). The ecosystemic approach to hypnosis. In S J Lynn & J W Rhue (Eds.). Theories of hypnosis: Current models and perspectives. New York: Guilford.

Fourie, D. P. (1992). From Erickson to attribution: Attaching meaning to hypnosis. Perceptual and Motor Skills, 75, 1155-1167.

Fourie, D. P. (1994). Hypnose. Ein ökosystemischer Ansatz. Munich: Quintessenz.

Fourie, D. P. & Lifschitz, S. (1985). Hypnotic behaviour: Mutual qualification. South African Journal of Psychology, 15, 77-80.

Fourie, D. P. & Lifschitz, S. (1989). Ecosystemic hypnosis: Ideas and therapeutic application. British Journal of Experimental and Clinical Hypnosis, 6, 99-107.

Griffith, J. L., Griffith, M. E. & Slovik, L. S. (1990). Mind-body problems in family therapy: Contrasting first- and second-order cybernetics approaches. Family Process, 29, 13-28.

Hoffman, L. (1981). Foundations of family therapy: A conceptual framework for systems change. New York: Basic Books.

Hoffman, L. (1985). Beyond power and control: Towards a "second-order" family systems therapy. Family Systems Medicine, 3, 381-396.

Hoffman, L. (1990a). Constructing realities: An art of lenses. Family Process, 29, 1-12.

Hoffman, L. (1990b). A constructivist position for family therapy. In B. P. Keeney, B. F. Nolan & W. L. Madsen (Eds.). The systemic therapist. Vol.I. St Paul, Minnesota: Systemic Family Press.

Keeney, B. P. & Ross, M. (1985). Mind in therapy. Constructing systemic family therapies. New York: Basic Books.

Kenny, V. (1988). Autopoiesis and alternativism in psychotherapy: Fluctuations and reconstructions. In F. Fransella & L. Thomas (Eds.). Experimenting with personal construct psychology. New York: Routledge.

Kenny, V. (1989). Life, the multiverse and everything: An introduction to the ideas of Humberto Maturana. In A. L. Goudsmit (Ed.). Self-organization in psychotherapy: Demarcations of a new perspective. Berlin: Springer.

Kirsch, I. (1991). The social learning theory of hypnosis. In S J Lynn & J W Rhue (Eds). Theories of hypnosis. Current models and perspectives. New York: Guilford.

Kirsch, I. (1994). Hypnosis and placebos: Response expectancy as a mediator of suggestion effects. Paper presented at the 2nd International Symposium on Suggestion and Suggestibility. Rome, Italy, 25-28 Oct.

Kossak, H. C. (1989). Hypnose. Ein Lehrbuch. Munich: Psychologie Verlags Union.

Kruse, P., Stadler, M., Pavlekovic, B. & Gheorghiu, V. A. (1992). Instability and cognitive order formation: Self-organization principles, psychological experiments and psychotherapeutic interventions. In W. Tschacher, G. Schiepek & E. J. Brunner (Eds). Self-organization theory and clinical psychology. Berlin: Springer.

Limacher, B., Dahler, E., Bösch, J. & Egli, N. (1991). Color me multicolored: A note on problems in clinical research methodology. Family Systems Medicine, 9, 65-68.

Loos, V. E. & Epstein, E. S. (1989). Conversational construction of meaning in family therapy: Some evolving thoughts on Kelly's sociality corollary. International Journal of Personal Construct Psychology, 2, 149-167.

Maturana, H. R. (1975). The organization of the living: A theory of the living organization. International Journal of Man-Machine Studies, 7, 313-333.

Maturana, H. R. (1983). What is it to see? Archivos Biologia Medicina Experimentales, 16, 255-269.

Maturana, H. R. & Varela, F. J. (1980). Autopoiesis and cognition: The realization of the living. Boston: Reidel.

Nugent, W. R. (1989). Evidence concerning the causal effect of an Ericksonian hypnotic inter-

vention. In S. R. Lankton (Ed). Ericksonian hypnosis: Application, preparation and research. Ericksonian Monographs No 5. New York: Brunner. Mazel.
Penn, P. (1982). Circular questioning. Family Process, 21, 267-280.
Peter, B. (1996). Normal instruction or hypnotic suggestion: What makes the difference? Hypnosis International Monographs, 2.
Reddy, M. J. (1986). The conduit metaphor - A case of frame conflict in our language about language. In A. Ortony (Ed). Metaphor and thought. Cambridge: Cambridge University Press.
Retzer, A. (1991). Love`s labour lost: Systemic therapy for a couple with somatic symptoms. Journal of Family Psychotherapy, 1 (4), 1-27.
Schwartzman, J. (1984). Family theory and the scientific method. Family Process, 23, 223- 236.
Speed, B. (1991). Reality exists O.K.? An argument against constructivism and social constructionism. Journal of Family Therapy, 13, 395-409.
Varela, F. J. (1979). Principles of biological autonomy. New York: Elsevier North-Holland.
Von Foerster, H. (1981). Observing systems. Seaside, California: Intersystems Publications.
Von Glasersfeld, E. (1984). An introduction to radical constructivism. In P Watzlawick (Ed). The invented reality. New York: Norton.
Watzlawick, P. (1990). Münchhausen's pigtail, or psychotherapy and "reality." New York: Norton.
Watzlawick, P., Weakland, J. & Fisch, R. (1974). Change: Principles of problem formation and problem resolution. New York: Norton.
Wiener, N. (1961). Cybernetics. Cambridge, M.A.: M.I.T. Press.

Psychodynamic Interactions in Overt and Covert Ego-States

John G. Watkins and Helen H. Watkins

Overt ego states, which can appear spontaneously and are called "alters," are seen in cases of multiple personalities. Covert ego states generally require hypnotic activation to be observed. Their differences lie primarily in the rigidity or permeability of their separating boundaries, a condition which exists on a continuum. Psychodynamic interactions between ego states, either overt or covert are similar, such that studies of either can apply to the other. Thus, we can learn much about many less pathologic conditions, such as are found in normal and neurotic personalities, through the study of psychodynamic processes in MPD alters, and vice versa. Examples will be given in this presentation.

Many years ago when I (JGW) was a young college student, our old professor wanted to convince us that psychology was a science, and in fact could become an exact science. He had one of us sit on his desk, and then with a rubber mallet struck the young man just below his knee cap. Sure enough, every time he did that the foot would kick. "See," he said, "all you need to find out is the right stimulus to elicit the desired response and you can both predict and control human behavior." What an exciting possibility to an adolescent boy. I decided there and then to become a psychologist.

Unfortunately, after working both in research and in counseling with subjects I found that one couldn't always find the "right stimulus," and that the response often came out differently than anticipated. I am reminded of an old song published then with a picture on the front of a heavy-set man in lederhosen puffing on a tuba. The words said, "You push the first valve down. The music goes round and around, and it comes out here." It seems that there are valves being pushed down somewhere between the stimulus and response, valves inside the individuals about which we know little or nothing. I determined to study this "round and around," and thus began a life-long interest in "psychodynamics," the internal "round and around" which determines what behavior will emerge from an initial stimulating situation.

At that time, behavioral psychologists were not much interested in the internal "round and around." If a certain set of stimuli produced a given response, and could be