

EGO STATE THERAPY INTERNATIONAL

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ESTI

Dear Ego State colleagues and friends,

We are already in the second half of the year and in a couple of months ESTI will celebrate its 2nd birthday. Guidelines for national and international accreditation in Ego State Therapy have been set and guidelines for professionals interested in becoming supervisors and trainers are currently being drawn up. Please contact your EST country representative for further information.

From the President's Pen

ESTI has been in existence for almost 2 years and although interest is surging, we are also experiencing growing pains. But first the good news: 14 countries are currently represented in ESTI and most have been very active in promoting Ego State Therapy, building ego state associations and encouraging research in the domain of Ego State Therapy and spreading Ego State Therapy as a treatment modality. However, we also need to turn our attention to the growing pains, which in ESTI's case, is a lack of sufficient funds. To accomplish all our goals, we need financial support.

To date we have set up a website that is up and running, thanks to our Secretary-Treasurer Eva Ferstl from Austria and a remarkable logo thanks to the efforts of Dr Maggie Phillips (USA) and Dr Silvia Zanotta (Switzerland). Our international bibliography, which can be accessed via our website contains all the latest references in Ego State Therapy. Many professionals from all over the world contributed references. Thank you to our editor Jenny da Silva (South Africa) for assisting in in compiling this enormous project.

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We are currently working tirelessly to formulate a vision and mission statement and to finalize the requirements for trainers and supervisors in Ego State Therapy. We are also currently considering registering as a Non-Profit Organization. All these activities and decisions take time, but we endeavor to keep all up to date on latest developments. A big thank you to our Vice-President, Susanna Carolusson (Sweden) for meticulously scrutinizing the suggestions for our Vision and Mission statements, enabling us to consider a final draft which will be sent to you shortly.

I would also like to take this opportunity to remind all participating countries to finalize their acronyms for their specific countries, for example, EST-SA for South Africa. Please forward your acronyms to Eva Ferstl at <u>office@eva-ferstl.at</u> and to Jenny da Silva at jennysilva.edpsych@gmail.com

All those with a keen interest in Ego State Therapy are invited to continue sending us references for our international bibliography as well as to send us any research papers and publications.

Finally, I would also like to remind all member countries who have already accredited and certified ego state therapists in their respective countries to

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publish the names of these therapists on their national ego state websites. Please send the names of these individuals to Eva Ferstl to be published on the ESTI website. A reminder to those interested in attending workshops and courses in Ego State Therapy to ensure that said courses are accredited by ESTI for national and international certification.

ESTI interviews...



Susanna Carolusson, M.Sc Vice-President of ESTI

Susanna Carolusson

This new segment in our newsletter titled "ESTI interviews..." will interview a prominent psychologist/psychotherapist that has contributed to the advancement of Ego State Therapy in their country and abroad. In this newsletter, we interview Susanna Carolusson, Vice-President of ESTI.

Jenny da Silva: How long have you been in practice for?

Susanna Carolusson: I started my psychology university programme in 1972 and in 1973 I was employed to teach "Parent Effectiveness Training", a Carl-Rogers-inspired teaching programme, for parents. At this time I was teaching, taking care of my sons and studying.

From 1978 to 1982, I was employed by the community to create and document methods to help children with learning disabilities, cooperate with teachers, parents and social workers, I planned and implemented treatment and support. This made me delay my studies, so I did not finish my Master's degree until 1984. By then I had a lot of experience

with the most challenging clients and parents. Well, to answer your question, if I may count that early practice, while still a student, I have been practicing since 1973, which is 40 years. I experience those years before my M.Sc as extremely important for promoting my competence.

JdS: How did you hear about Ego State Therapy?

SC: I attended the Watkins' seminars at an ESH congress in the early 90's and then invited them to teach at SSCH (The Swedish Society for Clinical Hypnosis). Maggie Phillips and Claire Frederick also contributed to our education in EST in Sweden, as lecturers in our hypnosis programmes. Before this I had learnt similar approaches by Marlene Hunter, Onno van der Hart and Richard Landis, I noticed the similarities between the techniques with which I was acquainted from Gestalt therapy and psychodrama in the 70s, and techniques I had learnt in my Body psychotherapy training between 1983 and 1987.

JdS: So, before learning EST, you had some knowledge of this kind of clinical approach. Can you give me more examples?

SC: Joseph Shorr's work, e.g. "dual imagery" had similarities with EST, as had Eric Berne's Transactional Analysis. In my training in hypnosis from 1978 to 1982, our teacher Bengt-Göran Fast taught us a "new" technique of working with intrapsychological parts in conflict; very much like Ego State Therapy, although I cannot remember if Watkins was referred to then. Meanwhile, we studied Hilgard's "neo-dissociation theory", the theory of a hidden observer. In my opinion, EST excellent clinical was an implementation of phenomena that had been experimentally demonstrated by Hilgard (although Jack Watkins got his clinical inspiration from E. Weiss). Not to forget David Cheek and Dabney Ewin who easily convinced me that I have parts inside of myself who know so much more about myself than I am aware of.

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Ideomotor signaling is one of the most convincing techniques to prove the existence of hidden parts, or states beyond awareness. Theories that mirror my observations and clinical experience and thus equip me with a reasonable map work for me. In 1982, I studied Harry Guntrip's literature, of which I now find high relevance to EST, in that it provides me with the theory of how to make sense of "schizoid phenomena, object relations and the self". The Watkins' roots in psychoanalytic theory attracted me; this was a method that did not ignore deep psychology and unconscious forces lurking behind the presented symptoms!

JdS: Why did you choose to use EST in your own practice?

SC: The EST interviews address separate states more distinctly than I had ever done before, and make it possible to create a therapeutic relationship between the therapist and to each one of the separate ego states of the client. I found this impressive. I still find myself surprised by the effectiveness of EST, especially in those clients who dissociate. I also enjoy that EST enhances my own therapeutic creativity and capacity to improvise. What fascinates me the most, however, is the positive response from patients who have tried all kinds of therapy to no avail, and for whom EST works immediately. I am not saying that EST is a quick fix; therapeutic processes take the time they need. But quick results are possible, as when there are strong resources within the client and his/her relationships, EST can be a short, intensive therapy. I helped a patient recently who had suffered from severe abdominal pain for ten years, in one EST session of 60 minutes. Other patients need years of therapy. It has to do with their degree of basic trust or, as you say nowadays, the quality of early attachment.

JdS: Tell us a bit about your training with the Watkins'.

ESH and ISH congresses made me invite them to the psychotherapy-hypnosis programme of which I was the director within the Swedish Society of Clinical Hypnosis. I actually cannot remember the exact year, but it was in the early 90's and then in the late 90's as well, and also in the beginning of 2000. They had three days and two evenings training, and I joined as their host and learned from them, each time I invited them. That gave me the opportunity to also have them as guests in my home, and we discussed many topics, such as their didactic choices and I also learned how they had personally found their motivation to develop this method.

JdS: Tell us about your role in the Swedish Society of Hypnosis.

SC: I joined SSCEH in 1979. A year prior to this I had started my basic hypnosis training at the University, as part of the Psychology programme. But, as I was a student, wife and mother, I could not afford travelling to congresses until 1979, when I attended the ESH congress in Malmő. In 1985 I was asked to take over the 3 year programme in Hypnotherapy of the SSCH-Western component in Göteborg. I was elected chair of the western component and stayed in that position for six years. I was teaching hypnosis, I was active in the educational committee of SSCH, aiming to make our curriculum an accredited university programme. I was diligent in my activities with the secretary of the National Board of Health, presenting, discussing, and improving the programme. Finally in 1993, we received the right to offer а university exam in Psychodynamic Psychotherapy including hypnosis. I was the SSCH director of this programme from 1994 to 2005. In 2003, the SSCH president retired in the middle of her term of office. I had been asked to be presidentelect for years, but had refused. However, as the situation was now critical, I accepted the presidency for 2002 and then was formally elected by the annual meeting the following year in 2003. As president I made our bylaws more explicit regarding

membership criteria, and arranged for balloting at two consecutive annual meetings, in order to make our criteria more exclusive to professionals employed within the law of patient security. On our website, www.hypnosforeningen.se, I regularly answer questions about hypnosis from the public; questions like: "I have problems with ... Do you think hypnosis could help?", or "What is the difference between a hypno-coach and a psychologist doing hypnotherapy?" and so on. I have also been a reviewer and co-editor of "HYPNOS", as well the European Journal of Hypnosis in recent years. Today I am the assistant-editor and chair of the electing committee for the SSCH board. What else? I am regularly interviewed in papers, radio programmes and television about clinical hypnosis and I am always referring to the SSCH. I have made a website link about hypnosis to the community health care of Western Sweden and I lecture at congresses in psychology and medicine on the topic of hypnosis.

I founded the training curriculum for professionals wanting to become supervisors and teachers of psychotherapy some years ago, and we will announce our second training programme next year. This education programme has a high status in Sweden, and several institutes offer fairly similar programmes, although SSCH specializes in using imagery in the art of supervising. I also introduced a 2 year hypnosis training workshop specifically tailored for psychotherapists in 2010, and we will offer it again soon. I started the SSCH's year first Ego State Therapy training on an advanced level in September 2013, and I have managed to have it accepted by the psychologists' Union as part of their training to become specialists in clinical psychology. Nowadays, I am invited to all Board meetings of SSCH, as a senior advisor.

JdS: What would you consider your major

contributions to psychology /EST?

SC: In my heart, I have always been loyal to my practical background; my father was highly intelligent, but never had a chance to study. His critical attitude to academic studies provoked me to study psychology from a practical-logical perspective. This made me appreciate the dialogue-pedagogics, radical South American pedagogics, Montessori and play, Jerome Bruner's focus on motivation, Carl Roger's client orientation, Virginia Satir's practical sense of humor and reframing interventions, and - to finally answer your question, I believe that my contribution is to be genuine, to be myself, to be honest and therefore reliable, and to never hide behind authorities - in combination with learning as many kinds of therapies as possible, in order to know what works for me and what doesn't. I am eclectic in the integrative sense. Although I am in full-time private practice and need to earn my living, I always take on a few psychology students for a lower fee, for their own mandatory student therapy, so that they can experience from within, how integrative psychotherapy with hypnosis, EST and imagery evokes their creativity and self-respect. I hope that will inspire them to study hypnosis and EST. It may be a contribution to hypnosis and EST that I was in charge of the clinical part of a study on IBS (Irritable Bowel Syndrome) in Sweden, documented by Magnus Simrén in 2004. After four years of intensive work with IBS, I found that functional somatic complaints can be diagnosed and analyzed and/or reframed with EST. For those with a more dynamic function of symptoms, I recommend EST. For others, I recommend directive gut-focused interventions.

JdS: What are your impressions of EST as intervention strategy?

SC: The application of EST still takes me by surprise although I am so experienced having done this for so many years! I often feel as if I am a novice in some EST interventions, and do not really expect anything in particular to happen. I then realize over and over again

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that it works beyond expectations! I mean, now that I accept the possibility of dissociation, patients dare to speak from various selves, like "she's opposed to that" or "the teenager says you are phony" or "the one on my shoulder despises this" – and it offers therapeutic possibilities.

The EST way of dealing with resistance is so constructive. I can welcome signs of resistance as parts with necessary information. I can make therapy contracts even with the resistant parts. EST interventions are concrete and therefore effective. Change occurs on all levels: visual, sensory, in behavior, attitude and feeling in the whole system.

JdS: How do you use EST and with which conditions?

SC: I test EST with most patients. But not with those who only need help through a crisis; who just need to talk through their situation, with no aim of changing core beliefs, defense systems, character patterns or manner of dealing with relationships. The same with pain; for those whose pain serves no psychological function, I rarely use EST. But for patients who need their pain, something I can investigate with ideomotor signaling, EST is a way to explore further the function and resolution of pain.

When there is resistance or ambivalence towards healing, I use EST to explore and deal with the resistance. I really enjoy negotiating with a resistant part and find something we can agree on for the benefit of vulnerable and resourceful parts!

My answer to "which conditions?" is: always those patients who have symptoms that make me suspect trauma, DID or dissociation.

But it also sometimes happens that patients with no present dissociative symptoms eventually reveal covert selves in hypnosis. It is not that I invent or suggest states, alters, parts or selves. I am rather taking the role of a respectful, open-minded witness and helper, who just accepts and what I meet is often the existence of "states" from various ages, who never grew up, who halted there and then, and cause problems in the here and now; problems like social phobia, anxiety, addiction and depression – common diagnoses...

Ego State Therapy across the Globe

The latest news and developments in Ego State Therapy across the globe:

South Africa (EST–SA)

A new surge of interest has once again sparked demand for Ego State Therapy in South Africa. To meet the need, Dr Woltemade Hartman hosted an interactive 3 day workshop in which participants' knowledge of Ego State Therapy was upgraded to current academic levels. This included a revision of the SARI Model, expansion on the levels of integration in Phase 4 of the SARI Model as well as focusing on new strategies of ego state assessment. Participants were also exposed to a new method combining Ego State Therapy with Creative Expressive Arts in Therapy presented by Jenny da Silva and Dr Elzette Fritz in a practical demonstration. More than 50 professionals attended this free workshop. Callie Hattingh conducted a similar workshop in Cape Town which was also well-attended.

Switzerland (EST-CH)

Ego State Therapy in Switzerland is growing. Training courses are usually fully booked, as well as supervision days. The special seminars offered in Switzerland are highlights. Dr Maggie Phillips presented a workshop on birth-trauma in September of this year and Joy Nel will be presenting a workshop on self-injury in March 2014.

Australia (EST-AU)

Professor Gordon Emmerson has been running training courses in Ego State Therapy in Australian and Asian capital cities since 1995. AESTA (Australasian Ego State Therapy Association) has been a functioning association for over three and a half years now. We started in Dec 2010. We have members throughout Australia and Asia and have built affiliations/relationships with several other Australian professional associations and have had a fully functional website for the last year and a half. Please view the website at <u>www.aesta.com.au</u>

From mid-2010, due to Prof Emmerson's workshops in our Southern Pacific region, we also now have members in Indonesia, Hong Kong and Malaysia and we expanded our name to Australasian Ego State Therapy Association, to allow our new members to be included in our professional body.

AESTA research into Metaphoric Symbolised Imagery (MSI) and Ego State techniques is ongoing and we are working in conjunction with Professor Gordon Emmerson on Retro States and Vaded States for presentations and workshops for the European Society of Hypnosis Conference, Sorrento, Italy, Oct. 2014.

Our aim is to meet the highest professional and ethical standards. We are now a government registered organisation with a constitution, ethics policy, board members, committee and documented training criteria with ongoing professional development and supervision requirements for members.

In the last year AESTA has run 5 Foundation (Certificate level) courses and 2 Clinical (Diploma level) courses and we are currently progressing our Ego State Therapy courses toward recognition by the Australian Government as part of the National Skills Framework. This will ensure our courses are government accredited (along with others of a as similar nature such Psychology, Clinical Hypnotherapy and Counselling. This will be at both Foundation and Clinical Practitioner level that will eventually allow our members to progress toward other studies at degree level, subject to approval and articulation arrangements.

Germany (ESTA-D)

In Germany we are happy to have certified more than 40 people as Ego State Therapists. Consequently, we have now added four hours of personal Ego State Therapy to our requirements. The trainings are still well-accepted and the number of people who want to study EST is growing.

Our group met in Marburg in May to discuss requirements but also topics such as how the "Greater Personality" has been defined and whether this entity can be addressed as a whole or whether one can only speak to respective ego states who represent different parts of the Greater Personality. If the Greater Personality can be addressed, who gives the answer? Could it be someone like an inner wise person who is not an ego state but comes from the conflict free zone of the Ego? As we all would appreciate to have more time for creative discussions such as these, we decided to meet twice a year. Our next meeting is scheduled for October in Berlin.

United States of America (EST-NA)

The ESTNA committee now comprises 13 members and has been working toward completing our curriculum standards. Going forward, several of our committee members will be teaching Ego-State Therapy courses this fall through EMDRIA (EMDR International Association) and SCEH (Society for Clinical and Experimental Hypnosis). Wendy Lemke and Maggie Phillips will be teaching an advanced Ego State Therapy course at ISSTD (International Society for the Study of Trauma and Dissociation) in November 2013. Our hope is to begin actual certification programmes in early 2014.

Claire Frederick will be teaching a 1 day Foundations of EST workshop for the SCEH conference in Berkeley, CA, in early October. The American Journal of Clinical Hypnosis will feature, in its next edition which will be coming out shortly, publications devoted entirely to EST. Several of our members have publications. Claire Frederick's work features "The Center Core in Ego State Therapy and other Hypnotically Facilitated

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Psychotherapies" and (with Joan Hageman), "Phenomenological and Evidence Based Research in Ego State Therapy: Recognized and Unrecognized Successes and Future Directions." Maggie Phillips' article in that same issue is "Mending Fences: Repairing Boundaries through Ego-State-Therapy."

Israel

The Israeli Society of Hypnosis consists of about 400 active members - MD, DMD and professional Psychologists. As a part of usual monthly meetings, organized several lectures about clinical we indications and the efficacy of EST in the areas of PTSD, Dissociative and Somatoform disorders. Because of great interest of many society members, we dedicated the last Israeli Society Congress of Hypnosis "Hypno - 2013" (Akko, 2013) only to EST. A three day Congress included lectures and live demonstrations, didactic (4h) workshops and Master classes (8h). At the final assemble survey, we found a big interest of most members for serious EST education, and decided to organize the 1st Level Seminar at December 2013. Our future plans include further education programme with W. Hartman, Ph.D. in February 2014 (Advanced Level).

Denmark (EST-DK)

Once a year, the Danish Society of Clinical Hypnosis provides a two day course in Ego State Therapy as part of our one year diploma education in hypnosis.

The course consists of the theory and the methods of EST which is given together with demonstrations and hands-on practice. Also on a basis of smaller group settings EST is and has been practiced and supervised by professionals throughout Denmark for the past 20 years.

Austria (EST-AT)

Training in Ego State Therapy in Austria is fairly young and we see quite an interest surging in technique as well as in theory. We have certified the first participants with more to follow. A re-launch of our website can be found at <u>www.egostatetherapie.at</u>. The new Austrian logo has been designed as well as brand new certificates with logos, the OESTA logo and the international logo.

Eva Ferstl, M.Sc. held some introductory workshops in Austria in ÖGATAP and Dr. Woltemade Hartman from South Africa will present a Keynote Address as well as a workshop at their conference in March 2014 in Salzburg, Austria. Special workshops are being organized through the Milton Erickson Gesellschaft Austria (MEGA), in Vienna, where participants can learn, amongst others, how to work with children (Dr. Hartman) or couples (Eva Ferstl, M.Sc.) with the use of Ego State Therapy.

New Book on Ego State Therapy

Brächter, W. (Ed.) (2014): *Der singende Pantomime. Ego-State-Therapie und Teilearbeit mit Kindern und Jugendlichen.* Heidelberg (Carl-Auer)

In spring 2014, a book on Ego State Therapy and Parts Therapy will be published in Germany, edited by Wiltrud Brächter. The idea for the book was conceived after the 4th world conference on Ego State Therapy in Heidelberg in November 2011, where Wiltrud presented her ego state-orientated work with Sandplay therapy. The title of the book ("The singing pantomime") refers to a resourceful Ego State that a bov (a client of Wiltrud's) discovered as a part of himself in order to cope with difficult life events. The book provides insight into the way personal parts can be addressed in child and youth therapy, using therapeutic modalities such as hand puppets (Siegfried Mrochen, Hiltrud Bierbaum-Luttermann), expressive arts therapy (Elzette Fritz), psychodrama (Peter Allemann), storytelling (Charlotte Wirl) and Sandplay therapy (Wiltrud Brächter).

Following an introduction into Ego State Therapy by Kai Fritzsche, the main focus of the book is on therapeutic practice. It includes challenging case studies of Ego State Therapy with children and adolescents, added by Jenny da Silva, Eva Ferstl, Woltemade Hartman and Silvia Zanotta. Malene Budde and Bärbel Benzel describe how they combine the techniques of Ego State Therapy and EMDR.

Some of the authors describe how Parts Therapy can also be applied in settings such as family therapy. Alfons Aichinger, for example, describes his psychodramatic work with animal figures in cases of divorce. Zita-Stoltenberg-Zehnder adds a chapter on group therapy with children.

Readers will gain more knowledge on how to get in touch with ego states, how to help them develop and become more balanced while working with children, adolescents and families.

10 Year EST Jubilee Workshop in Germany

To celebrate Dr Woltemade Hartman's 10 years of teaching in Germany, a special jubilee workshop will be held from the 21st to the 23rd November 2014 in Rottweil, Germany. The focus will be on Ego State Therapy – past, present and future, and will consist of invited addresses, panel discussions, conversation hours and live demonstrations. The workshop will be conducted in German. For more information regarding registration please contact Daniel Bass at the Rottweil Institute at <u>danielbass@meg-rottweil.de</u> Space is limited.

International Conferences

Please take note of the following international congresses:

2013

- Kindertagung (Child Psychotherapy Congress)
 31 October -3 November 2013, Heidelberg, Germany <u>kontakt@meg-rottweil.de</u>
- Evolution of Psychotherapy Congress 11-15 December 2013 Anaheim, California, USA www.erickson-foundation.org

2014

- Milton H. Erickson Institutes of South Africa (MEISA) 2nd Congress on Trauma: Contemporary Approaches to the Management of Trauma 11+12 April 2014, Stellenbosch, South Africa <u>www.meisa.biz</u>
- XIII International Congress of the European Society of Hypnosis: "Hypnosis and Resilience. From Trauma and Stress to Resources and Healing" 22-25 October 2014, Sorento (Amalfi Coast), Italy http://www.societaipnosi.it/
- 10 Year German Ego State Therapy Jubilee Congress 21-23 November 2014, Rottweil, Germany kontakt@meg-rottweil.de

2015

- 20th International Congress ISH-CFHTB (International Society of Hypnosis) 26-29
 August 2015, Paris, France www.cfhtb.org
- 12th International Conference on Ericksonoian Approaches to Hypnosis and Psychotherapy. 10–14 December 2015 www.erickson-foundation.org

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Hot off the press!

We have just been informed of the ego state acronyms to be used for the following countries:

South Africa: EST-SA North America: EST-NA Australia: EST- AU United Kingdom: EST-UK Austria: EST-AT Sweden: EST-SE China: EST-CN Germany: ESTA-D Switzerland: EST-CH Denmark: EST-DK Israel: IL

As a matter of urgency we ask all other representative countries to send their acronyms to Eva Ferstl at <u>office@eva-ferstl.at</u> and Jenny da Silva at <u>jennysilva.edpsych@gmail.com</u>

Thank you

Once again a big thank you to our colleagues, friends and especially to the representatives of our member countries for tirelessly promoting Ego State Therapy in their own countries and abroad. We once again invite all interested in the furthering of Ego State Therapy to share your ideas, comments and input. Enjoy the rest of 2013!

Our warmest regards,

Woltemade Hartman, Ph.D President of ESTI

Jenny da Silva M.Ed Psych Newsletter Editor: ESTI

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