

February in Guatemala

Hypnotic subjects can be directed to watch themselves at an earlier age while retaining and engaging with the hypnotist with their adult intellect and identity fully intact. This technique has been referred to elsewhere as a two-state dissociative regression ([Erickson & Rossi](#), 1979, pp.364, 369). This technique allows the hypnotic operator to engage either the adult or the child or both in the revivification of important life events and memories. This two-state type of regression is referred to as partial as opposed to complete, in so far as the adult intellect is still being employed and interacted with. An important therapeutic goal of this approach can be a reorganization of the subject's current reality understandings including a change in their beliefs and values. This can lead to corrective changes in the core personality issues, such as the chronic undervaluing of the self often seen in the adult personality who was emotionally and/or physically abused as a child. (See: [Undervalued Personality](#) in Educational Materials section on this website).

Milton Erickson M.D., in a case entitled: "[Creating an Identity: Beyond Utilization Therapy?](#)" (Erickson & Rossi, 1979 pp. 401-415), went beyond two-stage dissociation and inserted himself into the life of his hypnotic subject via an assumed identity he called the "February Man". The underlying premise of this approach was that Milton Erickson was not present in the life of his subject when they were a child. Not until they reached a certain adult age and had met him did they come to know him as Dr. Milton Erickson. In order to insert himself in their earlier lives without disrupting or invalidating the age-regressed state, he developed an assumed identity or a "fantasized identity". With considerable care and training in age-regression and revivification of recent and past events, Erickson's subject became an excellent hypnotic subject and learned to readily accept Erickson as her "father's friend". Via numerous age-regressions to various earlier ages, Erickson introduced new ideas and understandings with which the subject reorganized her overall understandings of important life experiences and events leading to a much-improved overall personality adjustment.

The author recently conducted a seminar in Guatemala City with 30 Guatemalan psychologists in February of 2011. The author's remarks and hypnotic demonstrations were translated by a colleague and his co-presenter Ms. Fabiola Palacios who was born in Guatemala and earned her B.A. and M.S. in the U.S. On the second day of the seminar, the author was unexpectedly

presented with the opportunity of introducing himself into the childhood memories of a volunteer subject.

The subject, a 36-year-old psychologist we will call Anna, had never experienced hypnosis. She had volunteered to be a subject and had wanted the author to help her with a problem from her childhood. She was expecting her second child in three months and she wanted help in learning to be a good mother. In her first hypnotic session, the author's goal was to demonstrate a two-stage dissociative regression approach with Anna. He first taught her ideomotor signaling (see: [*Treating Psychosomatic Disorders*](#) on this website for more on ideomotor signaling) by which she could unconsciously signal the author "yes" and "no" when asked "yes" and "no" questions. Anna first learned to signal with a finger on her left hand for "yes" and a finger on her right hand for "no". She then quickly learned to nod her head for "yes" and shake her head for "no".

Once the author was confident that Anna was in a sufficiently deep enough trance, he asked Anna, the adult, if her desire to correct her problem had been there before the age of 10? Anna nodded "yes". He then asked her if the desire had been there before the age of 5. Anna shook her head "no" and then replied, "She was nine". "Look at that little Anna," the author suggested. "Where is she when she has her first thought that she wants to fix her problem? Is she alone? Is she at home? Is she walking down the street? Is she at school?" After much searching Anna replied: "She's in her room". It was then suggested: "you can feel what she's feeling. You can know what she's thinking. But you're not her. Do you like that little Anna?" Anna shook her head "no". "Why don't you like her?" the author asked." "She's lonely", Anna replied.

Further questioning revealed that Anna was not allowed to go out. Her father told her that she was too important and asserted that she wasn't like her sister. The author then asked Anna: "Is it true? Are you too important to go out?" Anna shook her head "no. "Why did they not let you out", the author asked? "They don't want me to get hurt", Anna replied. "Do you believe that", the author asked? Anna shook her head "no". "What do you believe", the author asked. "They loved me", Anna replied.

At this point in the conversation the author began to wonder if Anna was completely regressed to age nine and asked her: "Who am I? What's my name?" Anna hesitated, struggled, appeared confused and then asked, "Dave?" "Dave? Who's Dave? How old are you?" the author replied. "Nine", Anna

replied. "And who am I? You're nine. And who am I?", the author asked. "Papa", she responded as tears and emotions well up. "Are you sure I'm Papa?" Shaking her head "no", Anna offered, "Mama". "I'm not Papa. I'm not Mama. I'm a doctor who's come to help you. I'm the February Man. I come in February every year. Today is the 12th of February. And every February I come back to see how you're doing. And you're nine years old and I'll be back when you're ten. And I'll be back when you're eleven. And I'll be back for as long as you need me." Anna began to compose herself and then nodded her head. "I found out that you needed a February Man and so here I am", the author said.

At this point Anna began to smile. "So what do you think of the February Man? Is there something that you want me to learn? Is there something that you want me to understand? You can wait until next February when you'll be one year older. And I might come to you on the twelfth or the thirteenth. Somewhere around then. Is that okay? And every time I come I'll put my hand on the back of your hand like this (demonstrates). You'll know it's the February Man." Anna began nodding her head and smiling. "Where are you now? Are you still in your room?" Anna shakes her head "no" and a long pause ensues. The author then says to Anna:" When I'm talking to you, you'll know I'm talking to you, and when I'm talking to other people, you'll know I'm talking to other people. You'll can hear it in my voice." Anna "nodded" her head. The author then turned to the seminar members and invited a discussion of what they'd just seen.

During a four-hour hypnotic trance, the author carried on several different conversations with Anna as she progressed to various ages. Anna appeared to have accepted the author as "Dave" or "Dr. Dave" with each progression. This suggests that the age-regressions were not complete but rather some combination of her current adult self and earlier identities. Despite this admixture of age-identities, Anna interacted with the author in a genuine and sincere manner and appeared to be incorporating the ideas presented at different stages. Had the author spent more time training Anna in age regression along with various other hypnotic phenomena, it is quite possible that Anna could have performed complete age-regressions resulting in a different therapeutic outcome. None-the-less, Anna proved to be an excellent hypnotic subject, learned rapidly and was a pleasure to work with.

An essential component of the seminar dynamic was the author's interaction with the other seminar participants. At the end of a conversation with Anna, the author would turn to the audience and invite discussion of certain points and issues that had arisen. During audience participation, Anna would remain

silent; appear at times to be listening and other times to be deeply self-absorbed in thought. When the author would turn back to Anna he'd reengage her by repeating the earlier clue to engage (his right hand over her left hand) and then ask: "How old are you now?" Each time the author reengaged Anna in this way she chose a different time and age in her life. In all, Anna chose age 9, 13, 14 and age 24. With the progression of ages, Anna's vocabulary and body language changed accordingly, as did her thinking. In her last trance conversation, at the regressed age of 24, Anna engaged the author as she rode on a bus the day she left home for the University.

The above-described approach does not lend itself to all therapy situations equally. In the case of Anna, her own personal motivation played an important role. In addition, Anna had witnessed at least two other demonstration trances in which a similar process had been employed. When combined, these factors may account for the ease in which Anna spontaneously navigated various age-regressions. As far as the author knows, no direct or indirect suggestion was given for her choice of age regressions. The author also thinks that the seminar environment may have played a critical role in facilitating Anna's trance experiences. The author's seminar presentation style is to illustrate hypnotic phenomena and treatment approaches while he is actively working hypnotically with a volunteer subject from the audience. As mentioned earlier, the volunteer subject is told that when the author is speaking to them, they will be able to recognize he is talking directly to them, but when he is talking to the audience, the subject will recognize that his comments and the responses to the audience are not necessarily directed to the subject. This allows the subject the choice to listen and learn as they choose or ignore whatever they wish.

Over the years, the author has discovered that indirect suggestions can intentionally or unintentionally be given to a subject while talking to the audience. It appears that many subjects, under these circumstances, switch back and forth between being the subject and being an audience member. For example, in Anna's case, the author encouraged discussion with the audience about the therapeutic implications of encouraging the reorganization of the child's perceptions of her parents' motivations for their parental patterns. In this way, audience's responses and insights may have also been incorporated by Anna during the sometimes lengthy audience discussion process. During this seminar in particular, Anna was exposed to a rich source and variety of ideas from her colleagues about possible parental motivations and childhood

developmental needs from which she could pick and choose the ideas that made the most sense to her.

Very few direct suggestions were made by the author to Anna. Sometimes the author would respond to one of Anna's statements with: "Are you sure?" Other times, during earlier life stages when Anna would attribute a "love motive" to a parental act that was clearly self-serving for the parent, the author would turn to the audience and ask them what they thought of her parent's motivation. In so doing, the author attempted to avoid taking an authoritarian posture or approach which might be more easily rejected by her as a child caught in the bind of protecting her perception of her loving parents. Not until Anna was 24 could she comfortably discuss her parents' limitations.

In summary, consistently good results in hypnotherapy depends upon adequate training of the hypnotic subject in the hypnotic phenomena that will be employed in the therapy. Anna's age-regressions were not complete but rather somewhat partial in nature as evidenced by her referring to the author as "Dr. Dave" or "Dave". Despite her lack of previous hypnotic experience and training, including training in age-regression, Anna was able to achieve partial age-regressions that proved very useful to her therapy experience. Like all good hypnotic subjects, Anna was highly motivated, very cooperative and learned quickly.

In general, the expectation of the hypnotist towards the subject and their ability to respond adequately to the ideas and directives offered by the hypnotist plays a critical role in successful outcomes in hypnotherapy. In Anna's case, the author approached Anna with the full expectation that she could respond adequately. Anna's own elaborations upon the suggestions and directives provided were rather creative and appeared to adequately meet her personal needs.

Postscript:

Upon the birth of her second child, Anna contacted the author. She reported that she had been "facing" the difficult episodes from her childhood and adolescence which she believed were helping her reorganize her thinking about her sibling and her parents. Her reorganization of her childhood led to a new set of understandings regarding her family of origin. She reported that she was learning how not to let her family hurt her anymore. She also reported feeling more secure as a mother to both her children, and she had stopped the destructive parenting patterns that she learned from her parents.

Professionally, she reported that she was working with six of her patients hypnotically and achieving, in her words: “incredible results”.

Erickson, M.H. & Rossi E.L. Hypnotherapy An Exploratory Casebook. *“Creating Identity: Beyond Utilization Therapy?”* New York: Irvington Publishers, Inc. 1979