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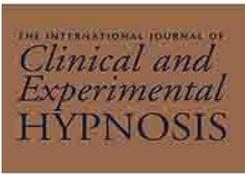
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Eitan G. Abramowitz & Moshe S. Torem

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THE ROOTS AND EVOLUTION OF EGO-STATE THEORY AND THERAPY

EITAN G. ABRAMOWITZ

*Hypno-Campus Institute for Hypno-Analysis, Modiin and Hebrew University Medical School,
Jerusalem, Israel*

MOSHE S. TOREM

Cleveland Clinic–Akron General and Northeast Ohio Medical University, Rootstown, Ohio, USA

Abstract: The purpose of this article is to elucidate the origins of ego-state theory and therapy and to discuss the concept of human personality as a structure comprising numerous ego states. The historical roots of ego-state theory and therapy are reviewed. Also, the evolution of ego-state therapy from classic hypnotherapy to modern methods is identified. The article notes that these methods of ego-state therapy have been described by different authors and under different names. It is suggested that core concepts related to ego-state theory and therapy of guided hypnotic dissociation may underlie the core of clinical effectiveness in many contemporary psychotherapeutic methods.

Ego-state theory conceptualizes the human personality as comprising a family of separate but integrated ego states. Ego-state therapy is a therapy system that uses hypnotic and nonhypnotic techniques designed to create greater awareness of the ego-state system, improve internal communication among the various ego states, and achieve better adaptive functioning with the activities of daily living by learning and practicing new skills of intrapersonal conflict awareness and conflict resolution (Barabasz, Barabasz, Christensen, French, & Watkins, 2013; Barabasz, Barabasz, & Watkins, 2011). The purpose of the present article is to elucidate the origins of ego-state therapy and to discuss the concept of understanding human personality as a structure comprising numerous ego states.

The term *ego state* refers to “a body of behaviors and experiences which are bound together by some common principle and separated from other such states by a boundary which is more or less permeable”

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Address correspondence to Eitan G. Abramowitz, Hypno-Campus Institute for Hypno-Analysis, Emek Haelah 91, Apt. 3, Modiin, Israel. E-mail: citan@hadassah.org.il

(Watkins, 1976, 1978; Watkins & Watkins, 1979; Watkins & Barabasz, 2008). Ego-state therapy has been defined as:

The application of group and family therapy techniques to the resolution of conflicts between ego states which constitute a "family of self" within a single individual. ... Ego state therapy seeks to render the boundaries between ego states more permeable, to increase communication between these entities, and to establish greater unity for the entire person. (Watkins & Watkins, 1979, p. 7)

Paul Federn, who was a close associate of Sigmund Freud, was the first to apply the concept of ego states in his attempt to provide a psychodynamic understanding to the phenomenon of multiplicity (Federn, 1952). He hypothesized that a physical or mental process was experienced as a part of the self (I or me) or as an object (he, she, or it) and was determined by the nature of the energy (ego or object) that activated it. Federn also recognized that an individual's personality is the product of that person's multiplicities, which he termed *ego states*. Federn went on to state that ego states can be created by trauma or through identification with significant people in one's life. For example, nuclei of ego states are created through an amalgamation of object representations and introjects forming the nuclei of self-representations. These later evolve into full introjects and, through identification, into an identity in the form of an ego state that is charged up with ego energy (cathexis). When an ego state becomes activated with energy, it is then the executive ego state that is perceived by others as representing that individual person.

Edward Weiss (1950) extended many of Federn's theoretical concepts to the clinical setting and therapy. However, neither Federn nor Weiss fully recognized the significance of ego states in their treatment procedures (Watkins & Barabasz, 2008, pp. 236–237). Although Federn was likely the first to view a person's personality as the product of his or her ego states, he considered only elements that were ego cathected and energized as belonging to an ego state. Watkins (Watkins & Barabasz, 2008) was the first to recognize this limitation, noting that experience consists of both ego and object representations interacting within a coherent pattern. Ego states were redefined more broadly:

[A]n ego state is an organized system of behaviors and experiences whose elements are bound together by some common principle and separated from other such entities by a boundary which is more or less permeable. Ego states may be large, encompassing broad areas of behavior and experience or small where they include only very specific and limited reactions. (Watkins & Barabasz, 2008)

Watkins modified and extended Federn's conceptualizations and developed the basics of ego-state theory. Ego-state theory includes ego-

energized and object-energized elements. When such elements have become organized together in a coherent pattern, the ego state may represent a time of a relationship in an individual's life, which may have been developed to cope with certain situations, including traumatic events (Watkins, 1978; Watkins & Watkins, 1979, 1997). We believe that this became one of J. G. Watkins's greatest contributions to the science and practice of psychotherapy.

Although Edward Weiss (1950) is credited with the creative ideas that provided the seeds and roots for the development of ego-state theory and therapy as described later by Watkins (1976, 1978), Watkins and Watkins (1979–1980, 1991, 1997), Frederick (2005, 2013), Frederick and McNeal (1993), and Hilgard (1973, 1974, 1976, 1977), Hilgard observed an ego state he termed "the hidden observer" that could be aware of a subject's perception of pain even though the subject reported no pain in response to a posthypnotic suggestion.

EARLIEST ORIGINS OF EGO-STATE THEORY AND THERAPY

Mystical-spiritual methods of therapy date back thousands of years and cross many cultures and nationalities. These methods were based on some universal assumptions, such as a sick person is basically a victim of the invasion of external evil forces (demons, spirits, etc.) into the body and soul. Treatment was based on rituals involving the expelling of such evil forces and restoring health. These treatment methods were characterized by several universal steps that included identification of the evil force, communicating with it, overpowering its influence, and eventually expelling it from the sick person. Rituals describing the expulsion of a so-called satanic spirit are well known in Jewish-Kabalistic healing practices (Bilu & Beit-Halahmi, 1989). Methods involving exorcism of so-called evil spirits have been supported by many professionals who were inspired by the authority of the Catholic Church. Scholars of the history of psychotherapy found similarities between the methods of exorcism and connecting with more pathological parts of the self, which serves as a foundation to our current of ego-state theory and therapy.

A well-known therapist in the 18th century was a priest named Gassner Josef (1774), who employed a specific method of exorcism that included an introductory procedure he called *exorcismus probaticus*. In this introductory phase, he conducted a dialogue with the patient, gathering information as to the nature of suffering and assessing to what extent the symptoms were the result of a satanic/demonic possession. He would ask the satanic spirit to prove its power by aggravating the patient's symptoms. If an aggravation was not observed, Gassner would rule out possession and declare the case to be the result of a medical problem requiring conventional medical treatment. If an

aggravation was observed, Gassner would proceed with his method of exorcism. He would ask the “demon” to identify itself by name and then proceed by engaging it in a power struggle. Gassner demonstrated creativity and perseverance, which made him a successful therapist and a target of envy and sarcasm by contemporary physicians. The height of Gassner’s popularity occurred in the seventh decade of the 18th century, a time also characterized by the spread of Mesmer’s theory of “animal magnetism.”

In the last 40 years, we have learned that the use of hypnosis as a tool to connect with separate ego states within the self began with the work of one of Mesmer’s students, the Marquis de Puységur, who would induce a dissociative state he called “the royal somnambulism” (Puységur, 1809). Once a patient was in this state, Puységur would communicate verbally with unconscious parts of the patient’s personality, including the activation of new wisdom and guidance in problem solving and conflict resolution, and all this was initiated in a state of hypnotic trance (Puységur, 1809).

From 1785 to 1788, a society calling itself Harmonia was active in the city of Strasbourg, Germany (Schouler, 1788). This society was involved in producing hundreds of reports documenting the treatments using the methods of Puységur, and this included follow-up results of such therapeutic interventions. This signified the beginning of a psychotherapy-focused society encouraging and documenting the treatment results of a humanistic–egalitarian approach whereby the therapist and patient are equal partners in the healing process. The therapist was not viewed as superior to the patient. However, the French Revolution brought about a new generation of therapists who were more authoritarian, using hypnosis to direct concrete suggestions, clearly believing that the therapist knew what was in the patient’s best interests. The patient’s role was to go into a “trance state” and accept the therapist’s suggestions without any hesitation or resistance.

In the first half of the 19th century, there were numerous writings that supported the idea that human consciousness is a unified and homogeneous single system. It was referred to as *mono-psychism* (Dessoir, 1890). The competing model was called *di-psychism*, referring to the structure of human consciousness as comprising at least two or more separate entities (Ellenberger, 1970). The European literature defined human consciousness as a cluster of subpersonalities or *poly-psychisms*. The term poly-psychisms was introduced as a common concept by Durand (1885), an experienced and effective clinician who believed that the human body comprises anatomical segments that are characterized by their own ego state. Durand believed that all these segments report to one central ego, which he called the “ego-in-chief,” that provides humans with their experience of consciousness. Durand believed that each ego state was capable of acquiring and retaining its

own memories and establishing its own subconscious mind, which allows such ego states to engage in complex executive activities in day-to-day living. The integration of all these subego states allows our minds to maintain a functional subconscious even though we do not have full conscious awareness of it. Durand studied human behavior under hypnosis and believed that when surgery is performed under hypnotic trance, even though consciously the person does not report any pain or suffering, there are ego states that experience the pain, fear, and suffering, even if the rest of the individual's personality is not aware of it. During the hypnotic trance, the ego-in-chief is neutralized from the pain and suffering.

The use of hypnosis may allow for studying subego states more effectively (Durand, 1871). During the time that Durand published discoveries, there were other clinicians who were using hypnosis to study the phenomena described by Durand. During that time, the philosopher Maine De Biran (Delacroix, 1924) stated that the reason for mental illnesses is connected to the phenomenon of "ego-disintegration" and the switch to behaviors that are executed automatically without executive control of the higher self. He elaborated in his discussions about the concept of free will, which can only come with the involvement of the executive brain in a state of full consciousness. This was described in detail by Delacroix (1924).

CONTRIBUTIONS OF F.W.H. MYERS TO CONTEMPORARY EGO-STATE THEORY AND THERAPY

In the 1880s, British philosopher and scientist Frederic W. H. Myers (1885a, 1885b) published several articles communicating his ideas that came about as a result of his research into spiritism. He stated that the sources of a person's mental life and consciousness originate in the subconscious mind, which is not controlled by the conscious mind. The conscious mind perceives the effects of the subconscious mind as being automatic and not requiring any focused thinking. It was the first time that automatic actions and behaviors of human beings were connected to parts of the mind that were unconscious to regular awareness; however, those parts of the personality had a powerful influence on day-to-day thinking, feeling, and actions. Myers (1903) developed the concept of "subliminal self," which is the center of mental life that exists beyond conscious awareness. According to Myers, such parts of an individual's personality are responsible for wide physiological activities and mechanisms in the human body, which are in fact physiological correlates of specific parts of the subliminal self and require their own research efforts to reach greater understanding of their power and functioning in human behavior. Myers believed that the use of

hypnosis, which he called hypnotism, and automatic writing of mediums during trance state were sources of additional information of the subconscious mind. In his opinion, these were clear examples of the existence of the subconscious mind and its power to affect human behavior and actions. In an article published in 1885 titled "Human Personality," he clarified that automatic activity of personality centers that are not recognized by the conscious mind occur even in normal and healthy people in a variety of situations in our daily life and are not limited to psychopathological states or situations and activities that are brought on by hypnotic trance (Myers, 1885a). He described the human mind as comprising many different small centers of consciousness. In 1889, Myers (1903) elaborated further on the functions of the subconscious mind, stating that the conscious mind is not aware of the numerous activities that occur in the subconscious mind, and he referred to such activities in the central nervous system as "mental reflexes." Myers differentiated between two types of automatisms. The first is the "sensory automatism," which occurs when a message from one center of the personality is experienced as an emotional event, including hallucinations and dreams. The second is "motor automatism," relating to automatic speech and automatic writing. In his numerous publications, Myers proposed a newer and deeper understanding of automatisms that should rely not only on physiology but also on psychology, including a new understanding of consciousness, meaning, and purpose (Myers, 1885b). Kelly (2001) provides an excellent review of Myers's contributions to psychology.

CONTRIBUTIONS OF PIERRE JANET

Pierre Janet, who was a student of the famous neurologist Jean Martin Charcot, published extensively his work with patients suffering from hysteria (Janet, 1907). After publishing his famous case of Lucie, a young woman described as having symptoms of dual personality and somnambulism, (Janet, 1886), Myers came to visit Janet in France (Yourievitch, 1901). It is likely that they discussed the phenomenon of psychic automatisms and exchanged views about the subliminal self and the unconscious mind. Pierre Janet delineated three groups of mental automatisms: catalepsy, somnambulism, and suggestions. In one of his numerous clinical reports, he described the protocol of treating Lucie, who suffered from chronic hysteria. After a formal induction of hypnosis with additional deepening suggestions, Janet (1886) suggested that Lucie respond to his questions with automatic writing as follows:

Janet: "Do you hear me?"

Lucie responds: "No" (in writing).

Janet:

"You are supposed to hear me in order to give me the written response."

Lucie: "Yes, of course" (in writing).

Janet: "How do you do this?"

Lucie: "I don't know" (in writing).

Janet: "There must be something in you that hears me."

Lucie: "Yes" (in writing).

Janet: "So, who is it?"

Lucie: "Another one. Not Lucie" (in writing).

Janet: "Another one? Do you want for us to choose a name for you, the other one?"

Lucie: "No" (in writing).

Janet: "But it will be more simple for our communication."

Lucie: "OK ... Adrienne" (in writing).

Janet: "Adrienne, are you able to hear me?"

Lucie: "Yes" (in writing).

Janet explored the unconscious mind of the patients he treated and was willing to research not only thoughts, feelings, and emotions but also physiological changes as part of the phenomenon of psychogenic amnesia, suggestibility, and exploration of personality parts that were compartmentalized following traumatic events. During his experiments, he discovered that many patients who suffered from hysterical paralyses, psychogenic amnesia, anxiety, and depression had somatic symptoms. These somatic symptoms were malleable and constantly changing, depending on the energy with which they were cathected. Janet discovered that even mentally ill patients were able to preserve compartmentalized and dissociated parts of their personality (ego states) that came across as normal and healthy functioning in day-to-day living. He referred to these as the healthy layers and centers in the patient's personality that became available to the patient when he or she recovered from the control of the hysterical and neurotic parts of his or her personality. Later, Janet (1907) tried to explain how hypnotic suggestion helped both the patient and the clinician get in touch with the unconscious parts of the human mind. In many cases, a hypnotic trance allows for the connection with such unconscious centers of the mind. Janet (1886, 1887, 1888) elaborated that even healthy people have parts of the mind that are not conscious to them, and these parts express themselves in softer forms of dissociation, which he called semiautomatisms.

Ellenberger (1970) stated that Pierre Janet was one of the leading pioneers who discovered in a systematic way different ego states and described the relationship between these ego states, even though they were part of the unconscious. Janet described a model of the

unconscious that could be referred to as the *dissociated unconscious* comprising ego states that may not be aware of one another and the conscious mind may not be aware of them. These ego states may be dissociated from each other in compartments that are separated by vertical boundaries. This model is different from the model of Freud, who described what he called the repressed unconscious separated from the conscious mind by a horizontal boundary. In Freud's structural model, the Id, parts of the Ego, and parts of the Super Ego reside in the unconscious. Janet developed the concept of dissociation to help us better understand its adaptive function in coping with traumatic events and episodes. He explained that during the trauma, the integrated forces of synthesis become weak, and parts of the personality become compartmentalized, storing the events of the trauma and keeping those separate and hidden from the individual's conscious mind until they are uncovered during the process of psychotherapy or hypnosis. The pathological ideas found in such ego states are referred to by Janet as *idée fixe* (Janet, 1894). These ideas can only be changed with the therapeutic interventions with hypnosis, suggestion, and working through. A helpful review of Janet's contributions was provided by Van Der Hart and Horst (1989).

THE SELF AS A SOCIETY OF MIND: DIALOGICAL SELF THEORY

The composite concept of *dialogical self* goes beyond the self-other dichotomy by infusing the external to the internal and, in reverse, to introduce the internal into the external. By functioning as a "society of mind" (Minsky, 1985), the self is populated by a multiplicity of *self-positions* that have the possibility of experiencing dialogical relationships with one another. Dialogical Self Theory (DST) was inspired by William James (1890, 1891) and Mikhail Bakhtin (1981), who worked in different countries (the United States and Russia, respectively), in different disciplines (psychology and literary sciences), and in different theoretical traditions (pragmatism and dialogism).

In DST, the self is considered "extended"; that is, individuals and groups in the society at large are incorporated as positions in the mini-society of the self. As a result of this extension, the self includes not only internal positions (e.g., I as the son of my mother, I as a teacher, I as a lover of jazz) but also external positions (e.g., my father, my pupils, the groups to which I belong). William James (1890) proposed a distinction between the *I* and the *Me*, which, according to Morris Rosenberg (1979), is a classic distinction in the psychology of the self. James proposed a view in which the self is "extended" to the environment. This proposal contrasts with a Cartesian view of the self, which is based on a dualistic conception

not only between self and body but also between self and other. With his conception of the extended self, which is defined as going beyond the skin, James paved the way for later theoretical developments in which other people and groups, defined as *mine*, are part of a dynamic multivoiced self.

Inspired by the original ideas of William James and Mikhail Bakhtin, Hubert Hermans and Harry Kempen (1993) wrote the first psychological publication on the *dialogical self*, in which they conceptualized the self in terms of a dynamic multiplicity of relatively autonomous *I* positions in the (extended) landscape of the mind. In this conception, the *I* has the ability to move from one spatial position to another in accordance with changes in situation and time. The *I* fluctuates among different and even opposed positions and has the capacity to imaginatively endow each position with a voice, so that dialogical relations between positions can be established. The voices function like interacting characters in a story, involved in processes of question and answer, agreement and disagreement. Each of them has a story to tell about its own experiences from its own stance. As different voices, these identities exchange information about their respective sense of self, resulting in a complex, storyline-structured self.

CONTRIBUTIONS OF ASSAGIOLI, JUNG, PERLS, AND BERNE

Roberto Assagioli (1971, 1972, 1976), a Jewish Italian psychoanalyst who branched out of classical psychoanalysis to develop his own unique system of psychosynthesis, conceptualized human beings as comprising a family of subpersonalities that are equivalent to what is later referred to as ego states. Assagioli attributed the origin of subpersonalities to the "tragic contrast between thoughts and feelings, between reason and faith, between conviction and adoration" (Sliker, 1992, p. 12). This means that, according to Assagioli, subpersonalities arise from opposites in experience. As Assagioli developed his system of psychosynthesis, he argued that integration of the different and conflicted parts within an individual's personality produces a state of harmony when "all energies cooperate with the objective of reciprocally completing one another" (Sliker, 1992, p. 12). Apparently, Assagioli wrote and lectured about these ideas before he met Carl Jung and before Jung had begun to formulate his own ideas on this subject. Later in Assagioli's writings, he pointed out the specific psychological dynamics that have the qualities of subpersonalities, and these are (a) subpersonalities are states of awareness, (b) subpersonalities contain fused intellectual and emotional elements, (c) the energy of subpersonalities is self-contained in powerful concentrations, and (d) subpersonality function can be observed in external action within the environment in which an individual lives. In his book, *Psychosynthesis*, he wrote:

[I]t is imperative for each man and woman who wants to live consciously to be well aware of the elements or components of their personality not a dim, passive awareness, but a deliberate assessment, valuation, understanding and control of them. (Assagioli, 1965, p. 68)

He went on elaborating on the subject:

One should become clearly aware of these sub-personalities because this evokes a measure of understanding of the meaning of Psychosynthesis, and how it is possible to synthesize these subpersonalities into a larger organic whole without repressing any of their useful traits." (Assagioli, 1965, p. 75)

These writings elucidate Assagioli's understanding of the makeup of human personality of what is later called a "family of ego states."

Carl Jung devoted much of his clinical work to studying subpersonality elements in the patients he treated. He described the function and purpose of these subpersonalities, and later he even described two subpersonalities in himself. Jung observed four basic psychological functions related to subpersonalities—thinking, feeling, sensation, and intuition—which are the origins of four psychological types (Jung, 1960, 1966, 1970, 1971a, 1971b, 1972). Jung believed that the human mind has a strong drive for balance. This drive for balance between the different parts within the human mind results in the creation of a center. When an individual has reached a new level of wholeness, it indicates the creation of a balance between the forces of the conscious and the unconscious mind.

Eric Berne (1957a, 1957b, 1961), who is well known for his writings and his descriptions of the ego states—*child*, *parent*, *adult*—which are found in all of us and represent internalized ego states. The literature of transactional analysis is based on such concepts and provides a therapeutic system to deal with and resolve intrapsychic conflicts (Berne, 1961; James & Jongeward, 1971).

Frederick Perls (1969) described in detail the theory and practice of Gestalt therapy, which is based on bringing into the open verbal and behavioral expression of various ego states that need to be recognized and accepted as part of the self. The proper resolution of conflicts among such ego states brings about greater internal harmony and peace. Yet this concept itself has been used by most clinicians who have written about working with people in psychotherapy.

EVOLUTION OF THERAPEUTIC TECHNIQUES AND USE OF HYPNOSIS

Hypnosis has a rich history of contributions to the field of psychology and therapy and yet is very controversial. Since its beginnings, hypnosis has been wrapped in myths, idealizations, devaluations, skepticism, and even disdain. Slowly, these attitudes are changing

and being replaced by publications that shed new and positive light on the old knowledge so valuable to the practice of psychotherapy and the exploration of the human mind. (Elkins, 2017). In the last 30 years, we have seen a trend to popularize cognitive behavioral methods of treatment that are more amenable to scientific tools of measurement. This development has earned a new respect for other therapeutic approaches, such as short-term therapies, crisis-intervention methods, gestalt and psychodrama-based therapies, transactional analysis, somatic experience, cognitive- and dialectical-behavior therapies, and biofeedback (Elkins, 2017). At the same time, hypnoanalytic treatment methods have evolved with positive results, including their use in medical settings, as described by Cheek (1960) and later by Rossi and Cheek (1988).

John and Helen Watkins have reported on detailed methods of ego-state therapy, which became an inspiration to strategic therapeutic interventions by other clinicians, such as Rossi (1993), Alladin (2013), Appel (2014), Comstock (1987, 1991), Emmerson (2003, 2011, 2013), Ferrucci (1982), Fraser (1991), Elkins (2017), Frederick (2005, 2013), Frederick and Kim (1993), Frederick and McNeal, (1993), Frick (1993), Gainer and Torem (1993), Galin (2003), Ginandes (2006), Halttunen (1988), Haronian (1975), Hilgard and Hilgard (1975), James (1986), Kluft (1989), Levitsky and Perls (1970), McNeal (2008), McNeal and Frederik (1993), Morton and Frederick (1997), Oppenheimer (2002), Ornstein (1995), Phillips and Frederick (1992), Phillips and Frederick (1995, 2010), Rosik (1992), Torem (1986a, 1986b), Torem (1987, 1989, 1992, 1993, 1997, 2006, 2007, 2011, 2017), Yapko (1986, 1997, 2002, 2006, 2016, 2018), Zeig (2015), and many others. The development of neolinguistic programming (NLP) has popularized such hypnosuggestive interventions and made them useful in many other arenas of life, such as commerce, marketing, industry, entertainment, and communication sciences (Bandler & Grinder, 1975, 1982).

The last two decades of the 20th century were characterized by developing treatment methods that use communication techniques with parts of the personality that are in conflict with certain behaviors and are responsible for certain symptoms. This has been described in a variety of methods, such as internal family systems (Schwartz, 1995), parts therapy (Hunter, 2005), internal dialogue (Fernyhough, 2016), imago method (Brown, 1999), and schema therapy (Turner, 2017). The common elements in these methods are greater than their differences and involve principles of family therapy, with dissociation and suggestion techniques. A review of the evolution of psychotherapy intervention techniques shows us that psychotherapies that use hypnotic approaches integrate dissociative phenomena to understand and later connect personality parts beyond the conscious awareness of the patient.

Throughout more than 250 years of evolving clinical psychology, hypnotic approaches have not disappeared but, rather, have changed and evolved, especially in the practice of therapy. While we continue to see the introduction of new modern therapy methods, the value of hypnotic techniques continues to be appreciated with the recognition that its foundation and roots are found in the work and writings of clinical and philosophical giants from the 18th century.

CONCLUSION

This article reviews the foundation and roots of ego-state theory and ego-state therapy dating back to the dawn of discovery of the unconscious mind. The article delineates the contributions of clinicians and philosophers such as Gassner, Myers, Janet, Assagioli, Jung, Perls, Federn, Weiss, Watkins, Berne, and others to the evolution of psychotherapy, and the value and therapeutic benefit in conceptualizing human behavior as a reflection of an internal family of ego states. Moreover, we also show how the use of hypnosis as an explorative and therapeutic tool has contributed to our current formulation of ego-state theory and ego-state therapy. It is hoped that future reports on ego-state theory and therapy will integrate knowledge and intervention techniques from the past to improve the contemporary therapeutic intervention strategies.

DISCLOSURE STATEMENT

No potential conflict of interest was reported by the authors.

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Die Wurzeln und die Entwicklung von Ego State Theorie und Therapie

EITAN G. ABRAMOWITZ UND MOSHE S. TOREM

Abstract : Die Absicht dieses Papiers ist, die Ursprünge von Ego State Theorie und Therapie zu erläutern und das Konzept der menschlichen Persönlichkeit als Struktur zu diskutieren, die zahlreiche Ego States umfasst. Die historischen Wurzeln von Ego State Theorie und Therapie werden untersucht. Außerdem wird die Entwicklung der Ego State Therapie von klassischer Hypnose bis zu modernen Methoden aufgezeigt. Das Papier diskutiert, daß diese Methoden der Ego State Therapie von verschiedenen Autoren und unter unterschiedlichen Namen beschrieben wurden. Es wird angenommen, daß Kernkonzepte, die mit der Ego State Theorie und Therapie mittels geführter hypnotischer Dissoziation verknüpft sind, der Basis der klinischen Effizienz in vielen heutigen psychotherapeutischen Methoden zugrundeliegen.

STEPHANIE RIEGEL, M.D.

Origines et évolution de la théorie et de la thérapie des états du moi

EITAN G. ABRAMOWITZ ET MOSHE S. TOREM

Résumé : Cet article cherche à élucider les origines de la théorie et de la thérapie des états du moi et à aborder le concept de la personnalité humaine en tant que structure comprenant de nombreux états du moi. On y aborde les origines et l'évolution de la théorie et de la thérapie des états du moi. On y décrit également l'évolution de la thérapie des états du moi depuis l'hypnothérapie classique jusqu'aux méthodes modernes. Cet article traite du fait que ces méthodes de thérapie des états du moi ont été décrites par des auteurs différents et sous des noms différents. On y pose l'hypothèse que les concepts fondamentaux relatifs à la théorie des états du moi et que la

thérapie de dissociation hypnotique guidée pourraient être au cœur de l'efficacité clinique dans de nombreuses méthodes psychothérapeutiques contemporaines.

* Dans ce document, le masculin est employé comme genre neutre.

JOHANNE RAYNAULT
C. Tr. (STIBC)

El comienzo y evolución de la teoría y terapia de los estados del yo

EITAN G. ABRAMOWITZ Y MOSHE S. TOREM

Resumen: El propósito de este artículo es dilucidar sobre los orígenes de la teoría y terapia de los estados del yo y discutir el concepto de personalidad humana como una estructura constituida por varios estados yoicos. Se revisan los comienzos históricos de la teoría y terapia de los estados del yo. También se identifica la evolución de la terapia de los estados del yo desde la hipnoterapia clásica hasta los métodos modernos. El artículo discute que estos métodos de terapia de los estados del yo han sido descritos por diferentes autores y bajo nombres distintos. Se sugiere que los conceptos nucleares relacionados con la teoría y terapia de los estados del yo en donde realizan disociaciones hipnóticas guiadas pueden sustentar la eficacia clínica nuclear de muchos métodos psicoterapéuticos contemporáneos.

OMAR SÁNCHEZ-ARMÁSS CAPPELLO
Autonomous University of San Luis Potosi, Mexico