Diploma in

Professional Hypnotherapy

Module 1

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Welcome to Module 1

Welcome! I hope you're excited to start your hypnotherapy training journey. During this module, you'll learn about hypnotherapy's fascinating history and discover that its roots go back thousands of years. We'll then go on to explore how and why hypnotherapy is so effective for so many people by examining the physical and psychological changes which take place when someone is in a state of hypnosis. You'll also discover how to tell when someone is in a state of hypnosis.

Hypnotherapy has many specific terms, and we've provided you with a Hypnotherapy Dictionary e-book. You also now have access to an MP3 which will allow you to experience hypnosis for yourself and PowerPoint Presentations to enhance your learning experience.

Your Task Workbook is located at the end of the module and contains a series of questions for you to consider. It also provides space for you to take notes and journal your ideas as you go through the module.

We have deliberately only used illustrations where necessary in order to save on ink should you wish to print this module.

What is Hypnotherapy?

Hypnotherapy is a therapeutic approach which helps people in a positive manner by working with them when they are in a special state of mind – hypnosis. A hypnotherapist uses various techniques – including positive suggestion and visualisation – to encourage positive change in a client's life. Whilst the client is in a state of hypnosis, they are more likely to accept and act upon these positive experiences.

In addition, the hypnotherapist fosters a good rapport and creates a supportive therapeutic relationship between him or herself and the client, so that the client benefits from hypnotherapy in a similar manner to which they may benefit from other forms of talking therapy.

Hypnotherapy is completely focused on producing a good therapeutic outcome for a client, in contrast to stage hypnosis, where a hypnotist will work with a client when they are in a state of hypnosis for entertainment purposes.

History of Hypnotherapy

Hypnotherapy in non-Western cultures

When you think of hypnotherapy, it's likely that the first thing that comes to mind is a hypnotherapist in an office or a stage hypnotist. However, when we're exploring hypnotherapy's history, we need to think of it in the context of traditional, non-western culture.

Hypnosis represents a particular state of consciousness where people may be more susceptible to suggestion or belief and many traditional societies have ceremonies or procedures which induce particular states of consciousness as a means for healing and self awareness.

Documents from the Ancient Egyptians, Greeks, Romans, Indians, Chinese, Persians and Sumerians show extensive studies in hypnosis, altered states of consciousness and parapsychology.

The Egyptians were utilizing the healing method of `incubation`, or `temple sleep` as early as 3,000 B.C. The priests considered the `sleep` to have special healing powers and that the person in the sleep was in an enlightened state. The **Temples of Imhotep** were popular for `sleep therapy` and `shrine sleep` which is still found in some areas of Africa and the Middle East.

The Hebrews utilized breathing exercises, chanting and meditation to produce an `ecstasy like state` which they called Kavanah. Their practices were similar to what we now know as `self hypnosis`.

The Greeks and Romans used The Aesculapian Sleep Temples, where patients would be put in a trance-like sleep for healing. The priests would prepare their `patients` and interpret their dreams. This practice was called Asclepian dream healing. The Greeks and Romans

believed that the bond of physical and emotional health was necessary for well being and Moses, Jesus, Mohammed, Ghengis Khan, Richard the Lionheart and Napoleon all practiced forms of hypnosis.

Shamanic and Native American healers have utilized methods to produce altered states of consciousness in themselves and their patients for thousands of years. These methods include sonic driving and other means of changing consciousness.

History of hypnotherapy in western culture

The history of hypnotherapy in western culture can be traced back to the eighteenth century and the development of a movement called 'Mesmerism'. By the late nineteenth/ earlier twentieth century, hypnotherapy had reached a peak of popularity in terms of being accepted in medical and psychological circles. However, as psychotherapy gained in popularity, interest in hypnotherapy lessened. More recently, it has been accepted by medical and psychological bodies as being a useful approach for conditions such as anxiety, phobias and pain management.

Franz Anton Mesmer (1734 – 1815)

Mesmer was a physician from Vienna who believed that illness was caused by disturbances in the natural tidal flow of animal magnetism in the body and that he could restore this and heal the patient by developing a technique of making slow passes with his hands over the patient's body from head to toe. Moving to Paris in 1778, Mesmer became increasingly popular with the wealthy members of society, enjoying the patronage of Marie Antionette. Louis XIV offered him 20,000 francs simply to remain in Paris.

Mesmer's treatment required patients to sit around a bath of dilute sulphuric acid in an atmospheric, perfumed room with dimmed lights. The patient would grip iron bars which protruded from the bath, or would hold other patients' hands if they were in a group. Mesmer would then touch each patient in different places on the body which resulted in his patients shaking, crying, laughing or falling into a trance like state. Whilst they were in this state, Mesmer would suggest their pain had gone and, for many, their pain did seem to

disappear to the extent that Mesmer was seen as a miraculous healer. To others, particularly in the medical world, he was seen as a quack or a charlatan and when a commission comprising men from the Academy of Medicine and the Academy of Science was established to examine his work it concluded, "Nothing proves the existence of magnetic animal fluid; imagination without magnetism may produce convulsions; magnetism without imagination produces nothing."

The commissioners' results suggested that the critical factors in mesmeric practice were the *patients' belief and imagination*. Frans Mesmer the verb "mesmerise", which means to hold someone's attention to the exclusion of anything else so as to create a trance state, in other words to hypnotise that person.

Marquis de Chastenet de Puysegur (1751-1825)

Mesmer had a number of followers who continued his work after his death, including Armand de Puysegur who discovered that the spoken word and direct commands induced trance easily and noticeably faster than "mesmeric passes".

From 1784 Puysegur began offering magnetic treatments to the peasants on his estate. Victor Race was a young man with a respiratory disease, treated by Puysegur. He responded to his treatment by falling into a kind of sleep after about eight minutes, during which he was able to hold a perfectly sensible conversation, answer questions, sing songs, mimic shooting, and dance to imagined music. On waking up, Race did not remember any of these things.

Puysegur began to use instructions to encourage 'sleep', which he called 'artificial somnambulism' (the medical term for sleepwalking) and moved away from magnetism as an explanation for what took place during his treatments towards a psychological explanation. Following on from Puysegur, artificial somnambulism was understood to be therapeutic in several ways. Firstly, the trance state itself was thought to be beneficial because it possessed the same properties as any restorative or satisfying sleep. Secondly, when

entranced, individuals were suggestible to the extent that certain symptoms could be removed by way of a simple command.

The Abbe de Faria (1756-1819)

The Abbe de Faria was a Goan Catholic monk who introduced hypnosis to Paris and who understood that a hypnotic state was achieved through the power of suggestion. He proposed that magnetism was only a form of sleep which might be brought about by means such as intense concentration.

'Animal magnetism' was replaced by 'concentration'. The 'operator' or 'magnetiser' became 'the concentrator'. Faria believed that anything which came out in hypnotic sleep was natural and that some people reach a hypnotic state more easily than others. He attached more importance to the person being hypnotized than to the hypnotizer.

John Elliotson (1791-1868)

Dr. John Elliotson, was a professor of theory and practice at University Hospital in London whose interest in magnetism developed through contact with Richard Chenevix, a student of Faria´s.

Beginning his experiments in 1837, he discovered that his patients could undergo major surgery without agony and applied his techniques where possible. His fellow colleagues believed that pain was a necessary for healing and Elliotson was generally discredited, particularly because he also believed in clairvoyance. However, he gained a considerable following and even performed many of his operations in the hospital amphitheater so that those who wanted to watch his work could do so.

James Esdaile (1808-1859)

Stationed in Hoogly, India, Dr. James Esdaile used hypnosis in surgery with astounding results. Reports submitted at the end of 1846 showed that he had performed several thousand minor operations and approximately 300 major ones, including 19 amputations, all painlessly. Using hypnosis to prevent his patients from experiencing post-operative

shock, the mortality rate was reduced from 50% to less than 8%. However, Esdailled was unable to achieve the same incredible results after returning to England, probably due to different cultural expectations and the fact that his patients in India would have been malnourished and prepared to be submissive to their doctor.

James Braid (1795-1860)

James Braid, a Scottish surgeon, broke with the idea of animal magnetism and moved hypnotherapy in a different direction. He coined the phrased 'hypnosis' in 1843 which referred to Hypnosis, the Greek God of Sleep.

Impressed by mesmerism after witnessing a public demonstration of it in 1841, Braid sought to discover why mesmerized patients acted as they did – for instance, being unable to open their eyes. Braid believed the sleep state resulted from fatigue of the eyes and experimented with his wife, a friend and a servant, instructing each to gaze steadily at an object. He discovered that by doing so he could produce a trance like state.

At first his technique was to hold a small bright object between 8 to 16 inches (20cm-40cm) in front of his subjects' eyes so that the eyes became strained, after which the eyelids would often close spontaneously. As he continued with his experiments however he found he achieved trance states by suggestions alone.

After much experimentation, Braid formed the idea that hypnosis was a state of mind induced primarily by suggestion which eventually led to the association of hypnosis with hypersuggestibility.

Braid identified many key features of the trance state itself, such as the greater sensory awareness that subjects display. He estimated, for instance, that hearing in the trance state is about twelve times more acute than in everyday consciousness, since the ticking of a watch that could not be heard more than three feet away was audible from thirty-five feet when the subject was in trance. This was an important finding, distinguishing hypnotic

trance from ordinary sleep. He also observed that autonomic bodily processes, such as heart rate and blood circulation, can be controlled to a remarkable degree whilst in trance.
By 1846, mainstream medicine favoured the use of nitrous oxide in surgical operations and hypnotic anaesthesia fell out of favour. Mesmerism remained popular as a form of parlour entertainment and in conjunction with spiritualist séances.

Jean Martin Charcot (1835-1893) and Hippolyte Bernheim (1837-1919)

Braid's theories failed to gain popularity in England but were popularised in Europe. Charcot's career and 'The Saltpetriere School', Paris, took off after 1862, where he was Director of Medicine at the Saltpêtrière Women's Asylum. Charcot was interested in studying female 'hysteria' which he believed was a mental disorder with physical manifestations. 'Hysteria' could, it was believed, be triggered by a traumatic event such as an accident and was then progressive and irreversible. Charcot believed that a hypnotized state was very similar to a bout of hysteria, and so he hypnotized his patients in order to induce and study their symptoms. He did not plan to cure them by hypnosis - in fact, he felt that only hysterics could be hypnotized.

Hippolyte Bernheim, a professor of medicine at the University of Nancy,France, developed an interest in hypnotism after becoming aware of a practitioner called Liebault, a philosopher and philanthropist, who successfully treated his patients through induced sleep. He believed that the most important factor in hypnosis is the expectation of the subject and that this expectation could be heightened by the appropriate intervention of the hypnotist.

Whereas Charcot insisted that hypnosis was an abnormal state of mind found in the mentally ill, Bernheim demonstrated that the entire range of hypnotic phenomena could be elicited in 15% of the normal population.

Pierre Janet (1859-1947)

Janet began his career as a philosopher, who used hypnosis to explore the dissociative propensities of the human mind, establishing a laboratory at the Saltpetriere where he conducted research into the nature and treatment of dissociative conditions, using hypnosis

as an investigative tool and therapeutic intervention of choice because he believed that hypnosis was a form of dissociation.

Janet's study of the nature and treatment of dissociative disorders paralleled Freud's work in the same field. However, unlike Freud, who often used vivid images and intimate stories of his patients to illustrate or support his ideas, Janet's explanations were often very mechanical and dry. Because of this, Janet did not generate as many followers as other pioneers of psychoanalysis, notably Sigmund Freud, Otto Rank, Adolf Meyer, and Carl Jung.

Furthermore, Janet remained faithful to hypnosis as a tool in the investigation and therapy of mental illnesses. Even though hypnosis ceased to be used in clinical practice at the beginning of twentieth century, Janet continued advocating for its usage. This contributed to his name fading into obscurity.

Milton Erickson (1901-1980)

Dr Milton Erickson was an American psychiatrist who used hypnosis in the 1960s in his treatments and developed what is known as "Ericksonian hypnotherapy". Erickson developed the use of "therapeutic metaphor" and stories in hypnotic trance and used the phrase "brief therapy" to describe his approach of helping his patients make important life enhancing changes in only a few sessions. Erickson suffered a number of health conditions from an early age, including polio induced paralysis, which led him to carefully observing people around him and studying people's communication patterns. He also developed theories of how the mind works. Erickson's work had a huge impact in shifting the direction of hypnotherapy in the mid-twentieth century.

Decline in popularity

In terms of medical acceptance, hypnotherapy probably reached its peak during the The Saltpêtrière phase in the late nineteenth/ early twentieth century. Freud was initially very interested in hypnosis and recognized the existence of the unconscious mind. However, he abandoned trance inducing techniques in favour of 'free association' and, as psychoanalysis grew in popularity, hypnosis declined.

However, practitioners did continue using hypnosis – albeit on a smaller scale. A revival of interest occurred in 1933 with the publication of Clark Hull's book 'Hypnosis and Suggestibility which used statistical and experimental analysis to study the phenomenon. Ernest Ropiequit Hilgard and his wife, Josephine, were also central figures in applying scientific study to hypnosis.

In 1955 the British Medical Association appointed a sub-committee of the Psychological Medicine Group to report on the use of hypnosis and concluded that 'it is definitely an effective technique in the psychotherapy of neurosis, psycho-somatic conditions and in the alleviation of physical pain'. In 1958 Hypnotherapy was recognised as a valid medical procedure, by both the American Medical Association and the American Psychological Association. Since 1995 hypnotherapy has been recommended as a treatment for chronic pain by the National Institute of Health.

Conscious & Unconscious Mind

In order to understand how hypnotherapy works, you need to have an understanding of the conscious and unconscious mind, a concept which was popularised by Sigmund Freud.

There are two metaphors which beautifully describe the conscious: unconscious divide.

Iceberg metaphor

The tip of the iceberg – the part which is visible above the water – is the conscious mind. This is the part which we are aware of – we know what's going on in there – just as we are aware of the visible part of the iceberg. The unconscious mind is by far the biggest area – in the same way that most of the iceberg is beneath the water – and, like the most voluminous and important part of the iceberg, it remains invisible and inaccessible.

Ship and captain

Another useful metaphor is that of the ship and the captain. The captain is visible on the deck and appears to be in charge of decision making and steering the ship. And yet, it is really the crew below – largely unseen as they are – who are responsible for determining the course of the ship.

Conscious mind

Your conscious mind is your objective, or thinking, mind. It includes those perceptions, memories, feelings, fantasies and sensations which we are **fully aware of**. Your conscious mind is approximately 5% of your mind. Your conscious mind is involved when you learn something new and really have to concentrate on the task in hand. It can process 40 environmental stimuli per second.

Unconscious mind

Your unconscious mind is responsible for keeping you alive and takes up 95% of your mind. It consists of deeper mental processes which are not readily available to the conscious mind. The unconscious mind contains our stored memories and is responsible for automatic skills,

intuition, fantasy and dreams. The unconscious mind can contain fears, beliefs and attitudes which affect behaviour.

Whilst the iceberg metaphor is a useful starting point to explain the conscious: unconscious divide, it's important to remember that there isn't a neat separation between the two minds. Instead, we have a single mind which shifts between more 'conscious' modes of operation, including analysis and slower, more deliberate thinking and 'unconscious' modes of thinking which responds in a fast and instinctual manner.

Why is the conscious: unconscious mind important to hypnosis?

From a therapeutic perspective, it is believed that many of our actions – from choosing a car to a partner – are controlled by our unconscious minds, even though we feel that we are making a controlled, conscious decision based on analysis of the situation.

Here's an example:

Mary is in a relationship with a man who is emotionally abusive. Her previous three relationships have all been with emotionally abusive men. Mary doesn't understand why – she feels she is choosing these men based on their attractiveness and earning potential. Mary's father was emotionally abusive to her mother and he criticised Mary continually when she was a child. Mary's *unconscious* mind is causing her to enter into relationships with emotionally abusive men because it believes that's the way life is and she is acting upon the learning, memories and experience contained in her unconscious mind.

When we are working hypnotherapeutically with clients, we assume that a state of hypnosis can help clients to **access what is usually hidden** in their unconscious mind. We can help them gain awareness by communicating with their unconscious and we can **override the conscious mind** by using a variety of techniques so that we can begin to change what is happening in the unconscious.

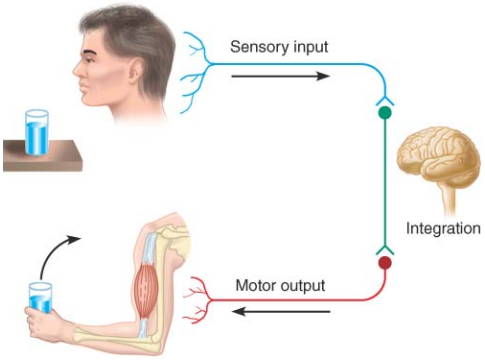
Autonomic Nervous System

It's important to understand how the Autonomic Nervous System works because hypnotherapy can help us to gain control over responses which are usually completely automatic and which are outwith the realm of conscious thought.

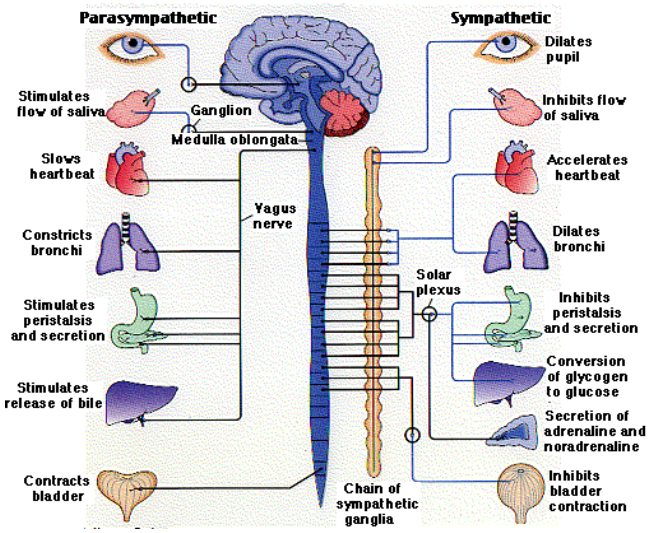
In humans, as in all mammals, there are two nervous systems:

- the central nervous system
- the autonomic nervous system

The central nervous system regulates motor responses to sensory impressions via the brain and spinal cord.



The autonomic nervous system regulates the internal systems. These internals systems are usually not under our voluntary control. They include the heart beat, pulse, glandular activity and digestive processes.



Within the autonomic system are two divisions - the sympathetic division and the parasympathetic division - which are in direct opposition to each other.

Sympathetic System (Fight or Flight)

We may not have come across the term 'sympathetic system' before but we will be familiar with the metaphor that is commonly used to describe it – Fight or Flight. The sympathetic system is there to mobilise the body into an emergency state whenever we need it. Humans have needed this emergency response since their earliest days. Let's imagine that a small team of hunter-gatherers is out sourcing food and they come across a dangerous, aggressive animal who is protecting her young. The most obvious response is to run away fast! Their sympathetic system is activated and causes the heart to beat faster and stronger, the blood pressure rises and their breathing becomes more rapid. Blood sugar and adrenalin are released into the body and oxygen and blood are directed towards limbs.

All of these processes allow the hunter-gatherer to get away as fast as they can by allowing the limbs to work at their maximum, strongest capacity. If the situation was slightly different and the band of hunters had come across an enemy group, the same processes would have allowed them to fight at their most effective level.

It is useful to think of the sympathetic system as representing an emergency room - you don't want to spend much of your time there, but it is an essential resource when a real emergency occurs.

Stage fright is a common example where the sympathetic system is activated. It includes the following physical responses: knees and hands shake, heart beats faster and faster, perspiration increases on the palms and face, the stomach has unpleasant fluttering or hollow feeling.

Parasympathetic System – Rest & Digest

The parasympathetic system operates in direct opposition to the sympathetic system. In contrast to the fight or flight situation, the parasympathetic system can be thought of as a "rest and digest" system, where the body is operating at a level which encourages relaxation and aids digestion. It is useful to consider the parasympathetic nervous system as a "healing

room". Ideally, we would spend about. 95% to 98% of our time here - only visiting the emergency room when it was really necessary.
In order to aid rest and digestion, the parasympathetic division slows the heartbeat, reduces blood pressure, produces visceral responses typical of periods of rest and relaxation. The parasympathetic responds in such a way as to restore the calm operation of the organism. It conserves the body's energy.

It is useful to think of the parasympathetic system as a 'healing room' where, ideally, we would spend between 95% - 98% of our existence.

The sympathetic and parasympathetic systems cannot be active in the same body at the same time. Through hypnosis - **utilising the brain's capacity to imagine and experience situations in a relaxed state** and maximising the potential of the brain to work in an imaginative and creative way - **it is possible to activate a parasympathetic response of relaxation BEFORE the sympathetic response of arousal can occur.**

Returning to the example of stage fright, the client would be encouraged to imagine looking at the stage in a state of calm relaxation - encountering the experience with the parasympathetic response strongly activated. The client may then be asked to imagine experiencing aspects of being on stage - all without the need to activate the sympathetic response which would usually be associated with that experience. Hypnosis can allow us to work with the autonomic system, triggering new responses and reactions to situations in a very realistic manner.

Neuropetides & Mind-body Connection

In order to understand how the Parasympathetic System or Sympathetic System is activated, it is useful to understand how neuropeptides work.

Imagine the miles and miles of fibre-optic cables that run under our streets. Days and night, millions of televised and telephonic messages flash at incredible speeds, letting people strike deals, give instructions, share a laugh or learn some news. Miniaturise it, multiply it many fold, make it much more complex and you have the brain. Neurons are the great communicators, always in touch with their neighbours.

During any one moment, millions of these signals are speeding through pathways in the brain, allowing the brain to receive and process information, make adjustments and send out instructions to various parts of the body.

What is a neuropeptide?

Neuropeptides are small protein-like molecules used by neurons to communicate with each other. Neuropeptides are produced in response to an emotion - neuropeptides are sometimes called the molecules of emotion. Neuropeptides release chemicals in response to the emotion. Emotion can be produced by a mere thought.

- Thought produces an emotion
- that emotion produces the corresponding neuropeptide
- that neuropeptide produces a state

The mind is able to modify the functioning of the brain in order to bring about the physical changes in bodily functions.

Neuropeptide receptor molecules receive messages that are triggered to be released by emotions and thoughts. It used to be believed that the cells' receptor sites for neuropeptides were located only in the brain and nerve tissue but it is now known that they are found throughout the body, activating receptor sites located in the body's endocrine and immune system cells as well as in nerve cells. Not only that, body organs such as the

kidney and bowel also have receptor sites for these so called brain chemicals. These chemicals are part of the way in which thoughts and emotions affect our physical bodies directly.

Our modern understanding shows that the gut, for instance, possesses many of the neurotransmitter receptors that the brain does and other organs, including the gut, are able to manufacture these chemicals so that the idea of brain-body communication being one way is now outmoded. With the discovery of neuropeptides in the 1980s it was found that two way communication is the norm – your gut knows when you are happy and sad, in love or stressed.

In addition to physical organs containing receptor sites for the neuro chemicals of thought and emotion, our organs and immune systems can themselves manufacture these same chemicals. What this means is that our entire body feels and expresses emotion - all parts of us 'think' and 'feel'. White blood cells, for instance, can produce morphene like pain relieving substances, and they in turn contain receptor sites for the same substances. This gives a person the capacity to modulate her own pain without medication.

If the organs throughout the body all make the same chemicals as the brain when it thinks, where in the body is the mind? The answer is, the mind is located throughout the body Every thought we have has a biochemical equivalent. Every emotion that we feel has a biochemical equivalent. The mind can be considered as the space between the cells (6).

Under normal circumstances, these neuropeptides go into the cells then go out again and are excreted in the normal way. When you have a traumatic, painful or prolonged negative experience, those neuropeptides get stuck in the cells and then become part of the cellular memory. The negative experience from then on is held in the body and can cause many emotional issues which can greatly affect our mental/ emotional and even physical life. These old emotions can be triggered by experiences in the now. Hypnotherapy can address these old cellular neuropeptides and allow them to be released from the body after which you no longer feel the old negative emotion.

In a state of hypnosis, it is possible to become aware of and change the ways in which the body responds to certain situations and experiences. In addition to activating the parasympathetic system when imagining stressful situations, hypnosis can allow people to become aware of what is happening in their body in a way in which they rarely get the opportunity. When deeply relaxed, and using the creative part of their brain, they can become are of how and where feelings and stored and work with this level of awareness. They can work with activating the parasympathetic system in response to a thought or emotion, instead of allowing the sympathetic system to become activated. When neuropeptides have failed to be released, hypnosis can allow this greater sense of awareness and connection to allow a positive release.

Brainwaves

Brainwaves are generated by neurons – those individual cells which communicate with each other by electrical charges. Brainwaves are measured in Hertz (Hz) (cycles per second) and it's possible to see those electrical charges in the form of 'brain waves' in an EEG (electroencephalogram). The brainwaves show the amount of activity in the brain and range from the highest level of activity to the lowest level. There are five basic types of brain waves that range from very fast to very slow. Each brainwave is essential to particular tasks and states of mind. During a state of slower brainwaves, we may feel tired, slow and dreamy. When we're experiencing higher frequencies, we may feel hyper/ highly activated.

A useful metaphor for brainwaves is musical notes where the low frequency waves are similar to a deeply penetrating drum beat and the higher frequency brainwaves are more like a high pitched flute. Just like a symphony, higher and lower frequencies link and interact through harmonics. There are five types of brainwaves.

Gamma

These are the fastest brain ways and are produced when you're involved in processing information, learning, concentrating and solving problems. They measure upward of 35 Hz.

Beta

You produce these brain waves when you're wide awake, focused, alert and going about your daily activities, including decision making. They measure between about 12 and 15 Hz.

Alpha

You produce these brain waves when you're not focusing too hard on anything and are probably feeling quite relaxed and calm. They measure between 8 and 12 Hz.

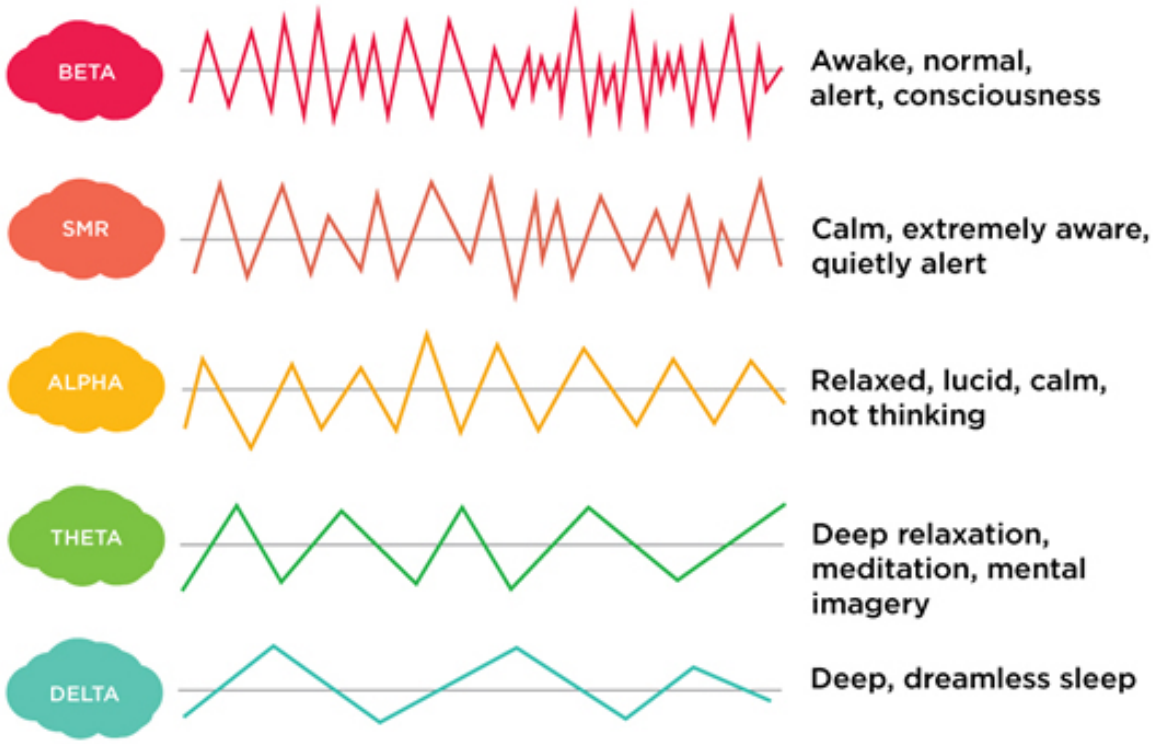
Theta

When you're extremely relaxed or are in a very light state of sleep, your brain produces these brain waves which measure between 4 and 8 Hz.

Delta

This is the slowest form of brainwave activity and is produced when you are in a deep, dreamless state of sleep. They measure between 0.5 and 4 Hz.

During a state of hypnosis, you are somewhere between the Alpha/ Theta state. This state is also the optimal state for visualisation and using the creative power of your mind. In this slower state, the brain is also less likely to over-question everything which it hears and experiences and so suggestions made during hypnosis will be more likely to be accepted.

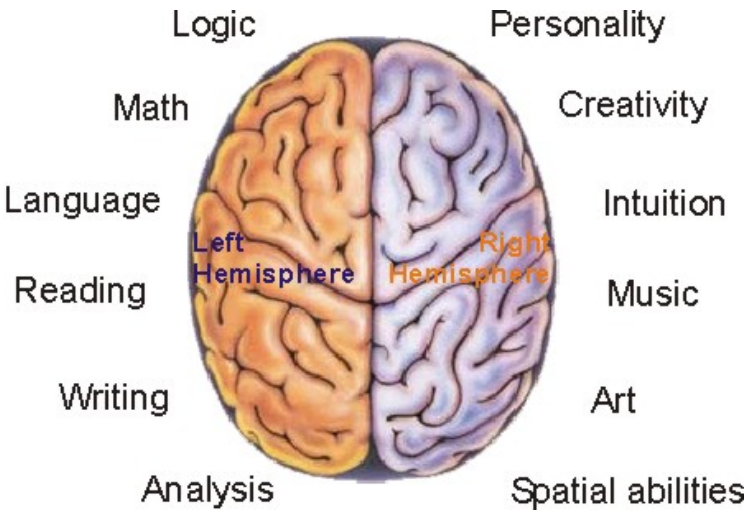


Right & Left Brain Hemispheres

During hypnosis, research has shown that the right hemisphere (side) of our brain becomes more active in comparison to the left hemisphere. This allows the right side to become more receptive to suggestion and to using the imagination, whilst the left side's leaning towards analyzing and questioning events is less in evidence.

Let's imagine that you're working with a client who has a driving phobia. In their state of hypnosis, you can provide them with positive suggestions and enhance these suggestions by asking them to imagine they are feeling and looking confident whilst they drive. Because the right hemisphere is more active, they will be able to imagine this new, positive scenario clearly and will be more likely to accept it as possible because the left brain isn't questioning things as much (or at all).

Whilst it is far too simplistic to explain the process in such a clear cut way, research has shown that the **right side of the brain does show signs of greater activity** than the left side of the brain during hypnosis, whilst allowing rapid alteration between the two hemispheres when required. In non-hypnotic states, although the brain hemispheres are specialised to perform particular functions, it is crucial that this communication between the hemispheres occurs as necessary.



State of Hypnosis

So far we've seen that neurological changes happen during a 'state of hypnosis', but what exactly *is* the state of hypnosis?

The first thing it is important to remember – and to explain to your clients – is that hypnosis is a completely natural state which we have all experienced regularly for instance when day dreaming, when watching a film, when about to fall asleep. It can be useful to think of it in terms of a state when we are not pre-occupied with the 'normal' things that our minds tend to focus on – such as what plans we have for the day, what we'll buy at the supermarket and whether to ask for a pay rise at work. In fact, we're almost dissociated from these things and in 'another place'. Imagine you've been on a lovely holiday in Paris and a few days later you're walking down a wet street in Glasgow – but you're immersed in the heat, the smells of food and the atmosphere of an Parisian boulevard. It's as if your mind has gone somewhere else – somewhere which is very realistic to you.

Examples of states of hypnosis:

Daydreaming

Being 'in love'

Being engrossed in a book or film

Drifting off during a work meeting

Meditation

Just before we drop off to sleep

When we are beginning to wake

Feeling very deeply relaxed and sleepy

When you are explaining what hypnosis is to a friend or client, use the above examples to stress the point that hypnosis isn't 'weird' in any way and it's a state of mind that they have undoubtedly experienced on a regular basis.

Who can be hypnotized?

As long as someone is **willing to enter into a state of hypnosis** a hypnotist – or hypnotherapist – can learn induction techniques to induce this state with most people. The person has to be willing – anyone can resist entering a state of hypnosis.

Some people are more susceptible to entering hypnotic states than others. Stage hypnotists perform susceptibility tests in the early stages of their routine and select people from the audience who have displayed higher levels of susceptibility. Graded from high to low, it is estimated that about 10% of the population are highly susceptible, 80% are medium and 10% have low susceptibility.

Research is beginning to show differences between brain activity of people who can and cannot be easily hypnotised, as well as personality differences. Research led by David Spiegel of Stanford University showed that people who found it easy to immerse themselves in new projects and ideas and were easily distracted by a sunset or view found it easy to be hypnotised. Research also showed higher levels of connectivity between some parts of the brain in people who were easily hypnotised, than people who were not easily hypnotised (3).

Some people who might not be able to enter a state of hypnosis include drunk people, drug addicts, people with educational special needs, people in a state of psychosis or very young children.

To some degree, being hypnotised is a learned skill and one which people can improve with time given a willingness to engage with the process. People often have more resistance during a first encounter with hypnosis and, when any anxiety surrounding the process is removed, they find it much easier to enter a state of hypnosis.

Recognising a State of Hypnosis

How do you know when your client is in a state of hypnosis? The simplest and most effective way of doing so is to simply observe your client. Any form of testing – which is another method sometimes used by hypnotherapists – risks taking your client out of their state of hypnosis and is unnecessary when you employ close observational skills.

You will notice some of the following when your client is in a hypnotised state:

- Relaxed face
- Slowed breathing
- Increased swallowing
- Slowed heart rate
- Changes in brain waves
- Changes in body temperature
- Feelings of floating or sinking
- Feelings of tingling
- Lack of mobility
- Attention absorption

Your client may also tell you about some of the mental changes they experienced during their session with you, including:

Heightened state of awareness

Deep relaxation

Drifting off

Sound distortion

Time distortion

Seeing colours

Seeing images and symbols

By asking your client what they have experienced, you will gain a good idea of how they have experienced hypnosis. It is important for you and your client to understand that hypnosis is a completely unique experience, in exactly the same way that daydreaming is. There is no 'right' or 'wrong' way to experience experience hypnosis and it is important to reassure your client that, whether they simply felt more relaxed or they experienced signs of being more deeply hypnotized – such as feeling as if they were floating and moving – they have experienced hypnosis at a level which is right for them.

Summary

Hypnosis is a difficult phenomenon to explain but it is evident that, whilst people experience a state of hypnosis in their own, unique manner, hypnosis is a state which is characterised by certain changes in brain activity. Due to these changes, people are in a more receptive, imaginative state of mind so that when they hear and experience positive things from you – their hypnotherapist – they are more likely to accept them at an unconscious level. In the same way that the unconscious mind is responsible for communicating old, negative ideas and thoughts to the conscious mind, it is possible to change our unconscious thoughts using hypnosis. This makes it an incredibly powerful tool at a therapeutic level.

Task Workbook

Below are a series of questions which you are encouraged to answer to help improve your understanding and a space for you to take notes from module 1 for future reference.

1. If you have experienced a state of hypnosis during a hypnotherapy session, how did you feel physically and mentally?

2. What 'natural' states of hypnosis have you experienced?

3. Think about a time of day when you might experience an 'alpha' brainwave state.

4. How has your understanding of hypnotherapy changed since reading this module?