



MISCONCEPTIONS OF HYPNOSIS

*Gathered and taken in large part from the lectures on tape of
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- 1. First misconception of hypnosis is that you can learn hypnosis from a stage hypnotist.** What you can learn from a stage hypnotist is how to work on the stage and not in your office. Clinical hypnosis requires a great deal of study and sincere effort on your part.
- 2. Second misconception is that to be a hypnotist you must have special abilities.** The reality is, is that anyone that can communicate with another person can learn hypnosis and utilize it in clinical practice as long as they're willing to spend the time and practice learning it.
- 3. Hypnosis works miracles.** It does not work miracles. It is an discipline of learning and effort that when properly understood and applied can bring about excellent results in many cases where other treatments have only marginally succeeded or failed altogether.
- 4. To become hypnotized you must become unconscious:** On the contrary. You don't need to become unconscious at all. Hypnosis requires that you utilize your ability to hear, to see, to think, to understand and to feel in a certain controlled way. And it doesn't require unconsciousness. The hypnotic subject is a responsive person as is the operator and no unconsciousness is required.
- 5. Surrender of the will:** Hypnosis is a cooperative process between the subject and the operator. There is no surrender of will. You don't necessarily surrender you will to let someone else drive your car whether you're a good driver or not. It's a matter of the assignment of roles in a given situation.
- 6. Weakening the mind:** There is no weakening of the mind any more than there can be a weakening of the mind from everyday living. You don't have the power as an operator to reach into the mind of your subject and so alter his brain cells that you weaken his mind. You can only bring about a stimulation of his thinking and feeling so he can function more adequately or less adequately as the situation requires.
- 7. Hypnotizability and gullibility:** Suggestibility is the capacity to respond to ideas. Anybody who has the ability to respond to ideas is a suggestible person. In their ability to respond, they use all of the understandings, their critical understandings in particular.



8. The fear of talking and telling secrets: Hypnosis is a cooperative arrangement and there is no undo or miraculous disclosure of secrets. Anyone who's had practice with hypnosis knows how extremely hard it is to get the patient who comes to you seeking therapy and wants to tell you everything and yet is reluctant to tell you what they need to tell you. Hypnosis can aid in their telling you the things they need to tell you but can not force them to tell you something that they don't wish. The misconception is that the hypnotic subject is horribly at the mercy of the operator. Actually, it's a cooperative affair.

9: Fear of not awakening from hypnosis: Going into a trance is a learned piece of behavior. Although rare in clinical practice, a given subject may be unwilling to awaken for their own purposes, their own choice. You induce a trance by going through certain verbalizations like counting from one to twenty and you can reverse that same procedure for awakening from the trance. If you suggested that they go deeper and deeper into a trance, you reverse it by suggesting that they are getting lighter and closer to awakening. On one occasion a very neurotic subject refused to respond to my suggestions to awaken and so I explained that the time was up and that I would be soon leaving my office to have lunch. As soon as I got out of my chair and opened the door the subject rather quickly awakened. That was only one subject out of about 4000.

What would happen in the hypnotic situation if I dropped dead of heart failure? Well, now that would really end the cooperative relationship between myself and the subject and soon the subject would awaken wondering why I'd stopped attending to them. I suppose you could hire someone to agree to stay in a trance for 24 hours but that's an arrangement...a cooperation on the part of the subject.

PHENOMENA OF HYPNOSIS:

1. The hypnotized subject is literal: Communication or words are the tools of the hypnotist just as sutures, sponges and scalpels are the tools of the surgeon and any surgeon should really be familiar with the tools they use in surgery. So, it is also true with the hypnotist in regards to the use of words and the communication of ideas and understandings. Understanding what you are saying to your subject and why you are saying it, taking note of your inflections, pauses and words and the sequences is very important for the hypnotist. For example, if I were to ask you to raise your right hand, most of you would raise right arm, as well as your right hand. If however, you were in a hypnotic trance, just the hand would lift because that's what you asked for: the hand and not the arm. So the hypnotic subject is very literal. And this is often a good way to find out if your subject is in a deep trance by asking them to raise their right hand. I also use this same idea in asking the subject to nod or shake their heads in response to the question: Do you mind if I ask you the question: what is your name? If they answer by giving me their names instead of nodding "yes" or "no", then I know they're not in a deep trance. Because if you listen carefully to the question and respond directly to the question: "Do you mind if I asked you your name", the answer is either "yes" or "no". But in the waking state we are conditioned to respond to the behavioral implications of the question and not literally the question. So you want to understand what your subjects are hearing.



2. All hypnotic phenomena occur in everyday life: The reverie, the abstraction and the absorption of an idea and the forgetting of a lot of things. For example, a lot of you here today have forgotten temporarily the feeling of sitting on a chair and you've forgotten about your feet in your shoes on the floor. And when I mention these things to you, you can now feel your bottom in the chair and your feet in your shoes on the floor, but you were really capable of feeling your feet and your rear end before I mentioned them, but they were "out of mind". In your normal consciousness you have a relationship with external realities in which you live. In hypnosis you have a channeled awareness of things which is much more concentrated. For example, I could ask each one of you to imagine yourself in your home in your favorite room and you could think about it, but you would also be aware of where you are right now with people sitting in front of you, behind you, etc. but, at the same time, you could also be thinking about your room at home. But the hypnotic subject in a trance state could really be thinking about their favorite room and sense it and feel it and literally see the walls and feel the air there and see the pictures on the wall. So, the hypnotic subject is not concerned with external realities. In other words, the primary mark of the hypnotic trance is the capacity of the person to limit his thinking and feeling to his conceptual life, his memory images, his auditory memories, and sensory images of all kinds-his experiential life rather than the unimportance of that window, or that light there of which I'm aware because I am conscious right now and not in a good hypnotic state.

3. Trance: What is a trance? A trance is a certain psychological state of awareness that you can learn to recognize that differs from the ordinary everyday conscious state of awareness.

4. Induction vs. trance state: I don't want you to ever confuse the inducing of a trance with a trance state. So I took an airplane flight from Chicago to Mazatalan. My presence here in this room is a totally different thing, to be utilized to the best of my ability. The airplane trip is like the induction and my presence here and what I do here is like the utilization of a trance state.

5. Cooperation in hypnosis: In order for successful hypnosis to be used in any situation, the subject's cooperation with you and your cooperation with the subject is primary. You can't induce an anathesia in the subject if at the time you're thinking to yourself, "I'm not sure this is going to work" because you're going to convey, through the intonations of your voice that it won't work and your hypnotic subject is going to hear the doubt in your voice and not respond. Because the hypnotic subject is paying more attention to the inflection than they are the mere words. A woman can say to her friend, "what a beautiful hat you're wearing", and the other woman looks at her and wants to commit murder because the inflection happened to be wrong.

6. Subject is the important person: Your orientation should concern your subject and not yourself. What's important is what your subject is doing and experiencing and wondering what next he can do. For example, would he really like to levitate his hand, close his eyes or nod his head. Your orientation should be around your subject and not around your words.



7. Rapport: That special relationship between the subject and the operator. It's based on trust and confidence in the operator so that they are willing to be in rapport with you and respond to your ideas. Therefore, the subject's attention is directed towards the operator and the operator's attention is directed towards the subject. And, as a result of this rapport, the subject tends not to pay attention to anything in the external world except the operator. But recognize that the subject is entitled to be in rapport with whomever they choose. They are not compelled to only be in rapport with the operator. So the hypnotic subject can single out anything in the hypnotic situation anything that he wants to include. He also has the right to exclude anything he wants to exclude. So if I were working now with someone, they could be aware of Dr. Yolanda and not Fabiola here and not anyone else except me. That rapport can be transferred from one person to another. Thus I could ask my subject to be in rapport with Fabiola here and hand over the hypnotic operation to her.

8. Catalepsy: that special state of balanced muscle tonicity so that a hypnotized subject can remain in an awkward position for an indefinite period of time. You can lift a subject's arm and it stays up there. Catalepsy can appear in the light trance, deep trance or medium trance. And I should mention here that the different hypnotic phenomena don't necessarily belong in any particular stage of hypnosis. It could be present in the light stage and absent in the deep stage or the other way around. Every subject is a law unto themselves. Catalepsy is not necessarily manifested in just the arm levitation. Look at the eye balls and see what kind of eyeball movements your subject is making. Look at their face and see what sort of facial rigidity you see. The frozen face...that loss of mobility. Look at the way the hypnotic subject walks, the economy of movement. When you watch someone do automatic writing in the trance state and not the economy of movement in the hand movements. The loss of reflexes, the loss of swallowing, all those kinds of things, the lack of automatic response. For example, if I were in a trance with Dr. Yolanda and not with Fabiola and Fabiola called out: "Hola Dave", my tendency in a normal waking state would be to turn my head rather quickly, my lips to hesitate momentarily, my shoulders to move, my eyeballs to move to look around to find the voice calling me. But the hypnotic subject does not do that because there is a certain muscle tonicity throughout the body that prevents the subject from doing that immediately.

9. Time lag: Suggest to the subject that his hand is going to lift up and sooner or later it's going to lift higher and higher and then give a little jerk. You said the word jerk and a few seconds later the jerk occurs because there is a time lag during which the subject mentally digests, understands and puts into action the idea presented. And it takes a little time for the response to be made. If I wanted a subject to have a negative hallucination for the audience here I could say: The audience has left the room and it's just you and me. We're all alone. And then the subject looks out over the audience and sees everyone, but if I'm willing to wait a few minutes, maybe five or ten, maybe twenty, my subject can look and say: "Where did they go?" Because they have had time for the psycho-neuro-physiological processes necessary to block out the visual stimuli presented by the audience. Hallucinations, both positive and negative. Positive, where you see something that isn't there, and negative, where you don't see something that is there.



10. Intermodality of sensory experience: when you induce a visual alteration in your hypnotic subject, you are very likely to unknowingly alter their auditory experiencing too because the experiential life of any individual is pretty well connected. So, if you're having difficulty in bringing about visual hallucinations, you accelerate that by bringing about auditory hallucinations or alterations in their sensory experience. Some dentists use a technique with children where they have them look at an imaginary TV screen or a window with a patterned curtain on it and see things there, hallucinates things there and automatically develops an dental anathesia. There is an interrelationship of the modalities of experience.

11. Amnesia: In everyday life we forget a lot of things that seem impossible for us to forget. Therefore, when you tell the hypnotic subject that they can forget this or that, you're relying on their own experience of forgetting things in everyday life. You're utilizing their own capacity to forget and then you're directing it to some one experience or event. Amnesia can be induced or amnesia can spontaneously manifest. We all show amnesia. For example, you can be talking on the phone having a conversation in one direction of another and someone walks in and wants your attention so you interrupt your phone conversation and take up the another conversation and then when your finished with that conversation and you go back to you phone conversation you've completely lost your place-amnesia. The best way of producing an amnesia is by distracting the subject's attention.

12. Not all hypnotic phenomena can be induce in every subject: for example it would be impossible to develop color hallucinations in MiltonErickson because he was color blind and lack the experiential backgroundnecessary to manifest visual colors. You have to induce phenomena accordingto the actual capacity of the individual subject. The subject that is tone deaf cannot be induced to hear a favorite melody because they just don't hear melodies and never have. They can be induced to hallucinate voices andthings common to their experience.

13. Hypernesia: Related to amnesia is the phenomena of hypernesia, or the increased ability to remember. It's quit amazing to realize how much detail a subject can remember. Memories belonging to the remote past can be recalled with tremendous accurate detail and clarity. Beware however, not to ask your subject to recall impossible things. For example, ten years ago or more past life memory was apart of the pop psychology culture in the United States. I've had people who've told me that they were induced to remember intrautero conversations where they heard their father insisting that their mother should get an abortion, or that sort of thing. In order to remember things you have to have some kind of a conceptual foundation. Intrautero you have no language. You have no sensory experience except those through pressure or mechanical wave sound.