



MULTIPLE HANDS AND OPEN ARMS

David H. Clayton Ph.D.

The author will present and demonstrate a hypnotherapeutic technique for accessing and repairing previously unknown and consequently, “life-limiting” events and experiences. This approach features the integration of “induction” with trance, utilizing a two-stage regression and multiple dissociations. The aim of this approach is to facilitate objectivity in the service of reorganizing and resynthesizing certain experiential learnings that have led to self-limiting emotional “sets” with their corresponding expectations and behaviors. The author will discuss the implications of this approach for brief, symptom-focused hypnotherapy as well as for other treatment outcomes. A demonstration of the approach with volunteers will be featured for interested participants.

About the Author:

Dave Clayton has been studying and employing hypnosis since entering his doctoral internship in 1976 and his private practice. In 1978 he began a student relationship with Milton H. Erickson until Dr. Erickson's death. Dave has taught and lectured internationally about the use of hypnosis in psychotherapy and medicine for the last 25 years. He has been published three times in European journals. Dave's early emersion in the study and practice of family systems oriented therapies is also reflected in the approach being presented at the 6th

Frontiers of Hypnosis conference here in Halifax.

Of his other interests, Dave recently submitted an original screen-play and music to Nicholas Cage's firm, Saturn Film. The theme of his screen-play entitled, “Fly the Pack”, set in the Quetico of northeastern Ontario, is the study of seven father-son relationships and how they predict leadership in a wilderness crisis. Dave also has written, performed and recorded 39 original songs. Currently Dave lives and works out of his home in Wood Dale Illinois where he and his wife Nancy raised two daughters who are now in their late twenties. Dave



and Nancy are currently at the stage of family life where they're beginning to plan their retirement.

I'm prepared to talk to you today about three different ideas and how they have lead to the development of a hypnotherapeutic technique that I'm calling the ***Multiple Hands and Open Arms*** approach. The three ideas are: ***Undervalued personality; dissociation and motivation.***

Undervalued personality:

In the last ten years I come to the conclusion that there ought to be a broader diagnostic category called **undervalued personality. I Imagine it on** a continuum from under-entitlement to over-entitlement. So often we see these individuals presenting themselves for therapy with a host of complaints ranging from issues of low self-esteem, self-contempt and self-pity, to grandiose ideas about their importance, usually in the form of guilt. They're complaints range from people not liking them, they keep losing their jobs and they might be estranged from their family or origin or some of it's members. In most of these cases, after talking for a session or two with them, a picture starts to emerge which suggests that they've never really ***been valued*** just for being themselves or valued consistently. They really don't seem to have any idea about how it feels to be valued and so you're talking a foreign language when you talk about them needing more self-esteem. In fact I've noticed that the mention of low self-esteem

just makes them feel worse because they know they've got none. If you could have these individuals see a little girl or boy who's just been told by their mother or father that putting up decorations at their 4th birthday party was expecting too much... like they're a burden on their birthday.

And then you have them watch another scene in which they picture a somewhat older boy or girl being rejected at school and told they are stupid or ugly or fat. And then that teenage boy being rejected by that pretty girl for a date. Finally you have them see a young adult becoming increasingly depressed and maybe even suicidal after a relationship break up. Asked what they thought would happen if that guy was rejected ***one more time*** and they say he might commit suicide or do something violent. So you have them seeing a whole series of pictures from different life stages and then you can talk about whether you think that that guy or gal ever had anyone really value them and then you can have a good discussion about what effect not being valued could have on people at different life stages- boys or girls from different stages of life, all in meaningful emotional situations. But you've been having a nice discussion with an adult intellect, objective intellect. One that could think openly about these new perspectives. Of course you don't want them to know that they're really been looking at themselves, projecting onto those self-invented characters until they've built up a good understanding of the "undervalued-ness" of those hallucinated individuals (you can give those dissociated selves a name starting



with the same first letter of their name.

Then, depending on their individual ability and need, you figure out ways to make these understandings known and utilized in the everyday conscious world of that individual.

This leads me to my second idea: dissociation

DISSOCIATION:

Traditionally dissociation has been studied in one of its pathological manifestations, such as hysterical paralysis. In its more common garden variety, dissociation can be viewed as a more common everyday mind-state, which can be employed hypnotherapeutically to achieve greater or lesser degrees of detachment with a resulting greater or lesser objectivity.

Hobson's work has helped me to think about dissociation in a new way. He first talks about the physiology of consciousness. He suggests that we have 100 billions brain cells grouped in component modules with specialized functions. That way, then consciousness can be viewed as a patterned, coordinated and well integrated interaction of several these component brain modules each module with a hundred million neurons talking to each other. So these unities of consciousness and ultimately of personality, can be seen as the result of a dynamically negotiated balance, coordination, and cooperativity between populations of neurons.

This pattern of interaction between modules we're calling consciousness is then slightly different for each individual and develops over time into a

relatively steady state for most people. In the state of "Consciousness" the brain can be aware of its own activity, including perception, memory, thinking, and feeling, each of these having some degree of anatomical localization or functional specialization. In other words for an "everyday" state of consciousness to exist, there must be a unified and internally consistent set of properties that are synchronized and integrated, remaining ultimately unique to each individual. What would be an everyday state of consciousness for you, might feel to me to somewhat disorienting and might lead eventually to a rather profound dissociation. **Dissociation**, then be viewed as a separation or alteration of those patterned associations or modular interactions- like dividing the waking mind into two or more separately operating compartments. In this way we can think about micorsleeps, attentional lapses, fantasy states, sleep walking and even lucid dreaming, among others. Sleepwalking is a good, rather profound example of dissociation. The sleepwalker is in two states of mind simultaneously. The upper part of his mind, the cognitive part, is in deep sleep, while the lower part, the motor part, is awake. Interestingly enough, the sleepwalker is apparently not in REM sleep, rather, he is in NON-REM. Part of the explanation might be is that during NON-REM the motor centers are not entirely turned off as they are in REM where the muscles are atonal.

The processing of external data and the orienting response to those stimuli depend on the posterior (rear)



region of the cortex. We might suppose that during hypnotic induction, the hypnotic subject is somehow slowly but surely modulating the activity level of the posterior region of the cortex so that it eventually, and to one degree or another, subsides or falls off, as in normal physiological sleep.

With external reality dimmed, other modules of the brain, such as the anterior (forward) region, which directs attention, thought, and action, might gain more dominance. And once the activation falls below a certain point, the thalamus, the central filter that during waking blocks the cortex from being swamped with random signals, loses control and the cortex is bombarded with powerful stimuli that further disorganize its activity. Normal physiological sleep usually follows.

Dissociation arises neurobiologically most clearly and dramatically in the split brain. When the corpus callosum is cut, each of the two half brains are conscious but neither is fully conscious of the other. Two states of consciousness co-existing independently in the same brain. On the more mundane, everyday level there are different more subtle states of dissociation we commonly call multi-tasking. For example as I'm writing this I've got a small window open of the Bears/Greenbay game active at the top of the page splitting my consciousness. It's hard to estimate how much that splitting aids in original ideas and thoughts. As clinicians however, we see it everyday in the many different ways in which our clients separate their cognitive and emotional processes

and what happens when they connect their emotions and their intellect. By the way, have you noticed that people tend to defend their emotions with their intellect. In other words, they don't necessarily know why they're reacting emotionally the way they are but they'll give you some sort of explanation that satisfies them. I read a research project recently that was studying REM sleep and brain blood flow. During REM they identified shifts in the flow from those brain structures and their colonies of neurons involved with analytical thought and working memory to the emotion-driven brain structures like the Amygdala.

So, when we wake in the morning, and throughout the day, our mindsets subtly fluctuate in the normal course of the day. However, imagine what would happen if any sub colony of cells were to become rebellious and unruly-become hyperactive or attempt to secede and provoke a civil war? What would happen to the rest of the cells? Would they either go about their business and ignore the renegades or would they caucus and set up the prospect of unconscious dissociation and deal with the rebellious colony by "splitting off". Epilepsy can be seen an extreme case of neuronal rebellion in which some degree of chaos ensues. In grand mal there is complete chaos, in petit mal there are lapses or temporal seizures fugues.

Thank goodness however that at any given moment each brain cell communicating with at least 10 thousand others therefore reducing the chances of neuronal schisms. The unities of conscious-ness and



of personality are seen as the result of a dynamically negotiated balance, coordination, and cooperativity between populations of neurons.

During REM sleep studies of brain blood flow, shifts have been identified in which blood flowed from those brain structures and their colonies of neurons involved with analytical thought and working memory to the emotion-driven brain structures like the Amygdala.

Within a range, can dissociation be understood as part of “normal” brain function? Might it be seen as a kind of athletic ability of the brain to perform introspection, speculation and otherwise reflect upon itself, even correct itself? All of this can safely take place within the brain during REM sleep.

More than twenty years before a physiological theory of dissociation had been advanced, Milton Erickson (1979) described a hypnotic approach which utilized the brain’s propensity to divide its awareness for therapeutic advantage. **Distance lends enhancement to the view.** Erickson taught that dissociation could be utilized with the hypnotized subject to help them realize different experiential states. Furthermore, if those different experiential states don’t know each other, he believed, the observation of them can be all the more objective. Once his hypnotized subject was detached, Erickson coached his detached/objective observer to recover their childhood perceptions with an adult’s understandings and then helped them alter and change those childhood realities so they were no longer limiting the individual. He made the detached

“adult” observer a center pole and a fixed reality about which his hypnotized subject could explore many of their childhood experiences in adult words and understandings.

So, when you become aware of hypnotic dissociation, and learn how to use it, you can take up other physical problems as well: the patient with cancer pain, the patient with sexual problems. You can watch how that person might behave if he were to be kissed by some appropriate person. The patient can become an objective observer watching himself or herself. She can watch those lips being kissed by a father or mother or brother or sister or cousin or grandmother or grandpa.

You can ask a woman who complains that she’s never had an orgasm to watch for the possible responses of her body to intercourse and discover that perhaps there might be a nice feeling. A pregnant woman who fears delivery can be induced to watch it in her own mind..to just watch it and not experience it. She can watch the growth of pregnancy. She can speculate about her abdominal size and the process of childbirth and remain free and unconcerned because it’s merely interesting to watch. You emphasize the observer modality to help a person get through whatever is bothering them. It removes the questionable aspects of the experience from the patient’s awareness. It allows them to objectify that thing and then they can be curious about it as an objective phenomenon. You remove



the subjective values and keep only the objective values of the experience. You are taking something that is a personal, subjective matter with all its fears and biases and rendering it into an objective matter apart from any fearful associations to the experience. You have a total freedom for exploring and solving problems when you put the patient in the observer modality.

The dissociation of intellectual content from emotional significances often facilitates an understanding of the meaningfulness of both.

Motivation:

I heard Erickson say that our patients don't need us to give them a direction for where they ought to go. They need our help finding a motivation. I talked at Vancouver about life events, unconscious plans and motivation. I've done some more thinking about it since then.

Multiple Hands and Open Arms

The technique begins with several suggestions for dissociation or "segmentalizing". It is also an isolation phenomenon. You're trying to get the subject to look at their own hand without a sense of ownership or a sense of personal identity. You're trying to isolate it in an objective fashion. You're both looking objectively at that hand.

I want to get your permission to lift your left hand an

*arm and just so you know what I want, I want you to pay attention to **four different parts** of your left hand and arm as I lift it. May I lift it? Thank you. (Begin to lift gently at the wrist) Now imagine that your hand and arm are divided into **four segments or sections**. Your fingers are one segment; (operator touching subject's fingers) your hand from the knuckles to the wrist is the second segment (now touching the back of the hand as words are spoken); from your wrist to your elbow...and let the elbow bend...just let it relax..is the third; and from the elbow to the shoulder..your upper arm...that's the forth. (operator now touches top of shoulder.) Now I don't know what kind of sensations you're gonna experience in each of the segments as I lift. Your fingers might feel light or heavy while your hand feels tingling or cool or will your upper arm get a certain wooden feeling? I don't know. Some people feel a **feeling-less-ness**. I just want you to tell me how **they** feel as I lift here. (pressing up with the thumb under the wrist while alternately touching the top of the hand and wrist area with forefinger and little finger).*

The operator now intently focuses on the back of the hand emphatically instructing the subject to "*just look at the back of your hand*". "*Don't look at me. I won't consider it impolite if you don't look at me when I'm talking 'cus I know that's what you've been taught ever since you started school and had to learn the letters of the alphabet.*" "*Just look at the back of your hand and tell me, **in your own words**, how it **really** feels.*" A different tonal



emphasis can be placed on the bold/italicized words as they are further indirect suggestions to dissociate.

As the arm becomes directed by the operator and not really lifted, (becoming cataleptic), the operator begins to place the subject's hand, wrist, arm in different, increasingly more awkward positions in an attempt to secure the subjects rapt attention. *“Now! In this position here, do your fingers now feel the **opposite of light**?”* The operator should keep up a steady set of questions, moving to the next segment before the subject can answer any question. This should be done not too fast to avoid alarming the subject. Important to this questioning process is the use of an ever more softening, gentle tone in the operator's voice.

When the subject's eyes become fixed or “heavy”(cataleptic) ,eye closure can be suggested or requested: *Now! I want you to close your eyes and tell me: Can you see a picture of your hand?* (if affirmative, then....) *Is it from today...an adult hand, or from an earlier time in your life?* If affirmative, then the operator should make the following suggestion: *We're really many different Daves or Helens, each from a different developmental time in our lives. Each Dave or each Helen had a different hand, a different are. You can line up a whole series of those hands from different (girls/boys). Each hand is connected to a different arm, to a different shoulder, to a different body, to a different (girl/boy). I don't know if you want to line up all those (girls/boys)*

from small to big, left to right or right to left? Is the littlest (girl/boy) over on the right? How did you line them up... or did you put them in some kind of a circle or terraced in some way?

At this point you can suggest to the subject that one of those boys/girls knows something about the problem you have come here to correct. You remind the subject that they are the adult intellect looking at the situation. They can understand ideas as well as emotions but they are just an observing, comprehending adult intellect. Next, you explain to the subject that one of those boys or girls will signal you in some way to let you know they have something to show you or explain to you regarding the problem. *If it's a little boy or girl they might not want to talk. Take them by the hand and they'll take you back to some scene or situation that they know about so you can learn something important about the problem. If they're older, they might explain something in words you can understand.* Provide the subject time to respond to this suggestion and then ask them what they're seeing or thinking. Usually they will begin to explore the problem and you can begin to form an understanding in your own mind as to the nature of the problem. Some important material will begin to emerge that will probably have an emotional element that signifies its importance. Take care to not allow the subject to become overly distressed. Remind them they are the adult intellect and while it's important to understand the younger one's emotions, it also



important to develop the bigger picture. You can also remind them that, in the future, the two of you can return to these “selves” and learn more or just review. Whenever you think it’s necessary, you can remove the subject from the situation and reorient them to a more neutral, less emotional situation. You can move back to the same scene or related issues later in the same trace or in another future trance. Don’t press on to the end and fatigue or distress the subject. They might be much less cooperative in future trances. Take your time and help your subject feel safe and protected. Unconsciously they will appreciate your consideration of their conscious abilities and limitations.