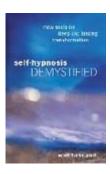
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CONTEMPORARY PSYCHOLOGY: APA REVIEW OF BOOKS

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Can Self-Hypnosis Be Learned From a Book?

A Review of



Self-Hypnosis: New Tools for Deep and Lasting Transformation by Adam Burke Berkeley, CA: Crossing Press, 2004. 166 pp. ISBN 1-58091-136-6. \$14.95, paperback

Reviewed by **Bruce N. Eimer**

- Self-hypnosis is the process by which a person intentionally self-initiates a hypnotic trance state. Heterohypnosis is the process by which a qualified clinician helps a patient enter and experience a hypnotic trance state. The specific method used to enter and deepen the hypnotic state in hetero- or self-hypnosis is called an *induction* (Eimer, 2002). Both heterohypnosis and self-hypnosis can be useful clinical tools.
- In general terms, the purpose for entering a hypnotic state is to relax or quiet the conscious analytical mind and open the doorway to the more impressionable, intuitive, and feeling unconscious mind. During this relaxation (or quieting process), the unconscious mind may become more receptive to suggestions if they are delivered in a language and form that the unconscious can accept. Once the unconscious mind accepts the suggested information, it cannot ignore it. It has to act on it and begin to change the behavior that the hypnotized person wants to change (Zarren & Eimer, 2002).

- In a clinical setting, self-hypnosis is taught to give the patient self-control that can be continued through self-administration, thus reducing the patient's dependence on the clinician. Practicing self-hypnosis helps patients experience a greater sense of personal power over something they previously felt powerless about.
- Experts on clinical hypnosis provide arguments that both support and discourage this idea.
- Clinical hypnosis pioneer David Cheek (1994) thought it unlikely that people who had never experienced formal hetero-hypnosis would be able to teach themselves formal self-hypnosis. He believed that efforts to learn self-hypnosis without live training tended to evoke Emil Coue's (1922) Law of Reversed Effect—that is, the harder one tries, the more difficult it becomes—thus making it harder to learn.
- Other experts on self-hypnosis (Spiegel & Spiegel, 2004; Zarren & Eimer, 2002) also agree that self-hypnosis is best learned in a competent hypnosis practitioner's office as a continuation of the patient's experience of heterohypnosis. The skilled hypnosis clinician designs an individualized self-hypnosis exercise or ritual that takes into account the patient's information-processing style and specific goals for using self-hypnosis. The selfhypnosis ritual should be simple so that the patient's conscious mind is not overloaded. The patient gets an idea about how hypnosis feels, overcomes any fears of failure, learns how not to try too hard, and builds confidence in being able to go back into hypnosis unaided.
- En Cheek (1994) also wrote that whenever people become deeply absorbed in what they are doing, they slip into informal hypnosis, even though they may not label that mental state as such. Thus, a form of self-hypnosis

can result from becoming immersed in reading a book, doing work, watching a movie, listening to an interesting talk, experiencing strong emotions, and even participating in some religious ceremonies. Automatic, unplanned, informal, and naturalistic self-hypnosis states, as opposed to formal self-hypnosis states, are therefore quite commonplace (Spiegel & Spiegel, 2004).

- Lan a motivated reader learn formal self-hypnosis from a book? The answer appears to be yes. However, the written instructions for entering the self-hypnosis state (i.e., the induction ritual) and the suggestions for therapeutically using this state would need to be simple to carry out and repeat so that the reader's conscious mind is not overloaded and so that imprinting into the unconscious mind can occur.
- Although it may be preferable to learn self-hypnosis from a live hypnosis clinician, if one cannot get to a qualified clinician, a good book on the topic may be the next best thing. In addition, carefully chosen self-help books can be useful adjunctive aides in psychotherapy, hypnotherapy, and other forms of treatment (Joshua & DiMenna, 2000). They also provide a useful source of ideas for clinicians who work with patients. Adam Burke's *Self-Hypnosis:* New Tools for Deep and Lasting Transformation is one of the best books on this topic.
- The book is well organized into three sections. The chapters in Part 1 present the author's theory about why self-hypnosis provides an optimal tool for promoting self-change and transformation and provide a clear and convincing rationale for learning self-hypnosis from the book.
- Part 2 prepares the reader for learning the steps that constitute self-hypnosis as the author teaches it. It covers the appropriate

mindset, attitude, and setting and summarizes the author's conceptualization of the steps. Each of the five chapters in this section explains and guides the reader in learning each successive step of the self-hypnosis process in detail: (a) visioning, (b) focusing, (c) deepening, (d) transforming, and (e) concluding. The author's metaphors and examples for explaining each step of the process are enlightening.

- ► Visioning involves envisioning and setting crystal-clear goals for the self-hypnosis session. These goals should be consistent with the reader's core values. Only then can one expect to commit to a realistic plan of action.
- Focusing means self-inducing the focused and absorbed inner mental state called selfhypnosis, wherein the conscious mind is quiet and calm and the unconscious mind is receptive to suggestions. Focusing involves centering one's attention to take oneself inside—from conscious mind to deep mind. Burke compares the self-hypnosis induction process to "coming home, entering our house, and standing in the vestibule. We have entered the house and are no longer outside, but we have not yet begun to move deeply into the structure" (pp. 53-54). Another vivid metaphor the author uses is to view the induction of self-hypnosis as calming the waters of a rapidly moving river (the mind) so that one can cross to the other side. Ample choices of induction exercises are provided.
- The author compares deepening the self-hypnosis state to "taking off your coat and shoes and settling into a comfortable chair by the fire to relax" (p. 63). The deepening process promotes greater absorption to increase one's creative potential. The author provides various deepening techniques. He skillfully teaches how to induce and use various classical hypnotic phenomena (i.e., sensory, perceptual, and motor changes) in

both the induction and deepening process (e.g., mental imagery; mental and physical relaxation, proprioceptive distortion, eye catalepsy, limb catalepsy, age regression, time distortion, amnesia, analgesia, anesthesia, automatic behavior, dissociation, positive and negative hallucination, ideomotor behavior, and posthypnotic suggestion). This is the basic self-hypnosis *induction* formula:

- First, set the context for desired physiological changes to occur and build expectancy that they will occur. Tell yourself what will happen as you relax.
- When the expected changes begin to occur, notice them, and suggest that, as they continue, other desired changes will occur.
- 3. As these physiological and mental state changes are experienced, add on suggestions for additional hypnotic phenomena (that are now more likely to be experienced) to deepen the inner journey and further help let go of conscious effort and control.
- Along the way, set up simple challenges to prove to yourself that experiences are in fact changing. This ratifies and deepens the hypnotic experience.

while in the receptive mental state, one self-administers a few simple, preplanned, personalized, therapeutic suggestions (realistic and consistent with one's values and goals) for desired change and transformation. When nearly ready to bring oneself out of self-hypnosis, one self-administers a few, simple, posthypnotic suggestions. These suggestions set up the unconscious expectation that in the normal waking state of consciousness when certain typical things happen, certain other (desired) things will happen.

- Concluding occurs when one terminates the self-hypnosis trance experience by self-administering suggestions that (a) reinforce the outcomes being worked on, (b) set up the expectation that future self-hypnosis sessions will go faster and be deeper, and (c) cancel out the temporary sensory and perceptual changes of the trance experience so that one returns fully to the waking state.
- Part 3 encompasses the final two chapters in the book. Chapter 11 provides information to help the reader integrate the five steps for self-hypnosis into a sequential flow. Chapter 12 is the longest chapter because it contains templates for constructing self-suggestions for specific applications, such as habit control, weight management, anxiety, childbirth, health and healing, insomnia, pain, procrastination, and performance issues.
- The book is brief but packed with a lot of useful information, theory, and metaphors. It contains well formulated self-hypnosis trance scripts that the reader either can use to read himself or herself directly into a self-hypnosis state or employ as a model for constructing his or her own self-hypnosis exercises. The author provides numerous choices of self-hypnosis induction methods, and most serious readers should be able to find methods that suit them. He also provides enough choices of suggestions and imagery such that most readers should be able to find some they can use.
- My only major criticism of the book is that the author provides too many choices, which can be overwhelming and confusing for some people. Too many choices can overwhelm the conscious mind and cause it to defensively close the doorway to the unconscious mind. Most patients present to therapists and hypnosis clinicians because they feel trapped in their presenting problem. The clinician's job is to break the problem into workable

components and reframe the patient's belief that he or she is trapped by inducing the expectation that new choices and change are possible (Zarren & Eimer, 2002). Presenting too many choices all at once can paradoxically bring back feelings and fears of being trapped. Then again, this is a book and not a live therapy session, so by providing numerous options the author has produced a useful reference work.

In addition, in my opinion some of the author's trance scripts are overly complicated. This can also result in the conscious mind becoming overwhelmed and the unconscious mind becoming prematurely closed off to suggestion. If the reader finds the trance scripts to be a bit too complicated, the reader can do one of several things depending on his or her level of personal experience with heterohypnosis and self-hypnosis.

The experienced reader can simplify the trance scripts for his or her own personal use. If the reader happens to be working with a hypnosis practitioner (which is recommended), then the reader can obtain the clinician's help in doing so. If the reader is a hypnosis clinician, the job of simplifying should be no problem.

This is an excellent book that I will recommend to friends who are curious about hypnosis, to colleagues, and to some patients. Among the many things I like about this book is that the author makes clear that self-hypnosis cannot be learned in a day. It requires commitment, repetition, and practice, and Burke provides readers with a clear, step-by-step program for practicing self-hypnosis and imprinting conscious and unconscious skills. In my clinical practice, I do not teach self-hypnosis to patients who are being seen for a single session (Zarren & Eimer, 2002).

In sum, Self-Hypnosis: New Tools for Deep

and Lasting Transformation will be a useful guide for people who want to learn how to do self-hypnosis. It provides a clear and accurate explanation of hypnosis for intelligent people who are curious about hypnosis and who want to educate themselves so as to demystify it. However, although I still believe that selfhypnosis is best learned live from a qualified hypnosis practitioner, I also believe that serious readers who want to try learning selfhypnosis from a book will get something out of this book. Furthermore, this book could serve as a useful adjunctive tool for a patient working with a qualified hypnosis practitioner, and the book is a good source of ideas for the practicing hypnosis clinician as well.

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February 9, 2005 Vol. 50, 6, No. 6, Article 16

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