

Frequently Asked Questions About Hypnosis

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Q: What is hypnosis?

A: That's a difficult question to answer quickly and precisely. Some people think that it is an 'altered state of consciousness', but since there is currently no agreed definition of consciousness this argument can go around in circles. When we talk about hypnosis we often tend to be either talking about the relaxed, focussed, absorbed feelings associated with a 'trance state' (although some people don't like the term trance), or we tend to be talking about the interesting things people can do when hypnotised - these are the products of 'suggestion'. For more detail a good place to start reading is the definitions page, otherwise follow the links on the left for more information about the research in hypnosis and its uses.

Q: Can anyone be hypnotised?

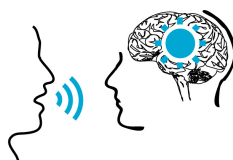
A: Yes, everybody is hypnotizable to some extent - some more than others. Susceptibility to hypnosis can be measured with a hypnotic susceptibility scale (see 'measurement of hypnosis'). Researchers tend to classify people as 'highs', 'mediums', or 'lows'. About 80% of people are in the 'medium' band - meaning that they can experience many of the effects of hypnotic suggestion, and are likely to benefit from its clinical use if necessary. Approximately 10% of the population are considered highly hypnotizable - meaning that they can readily experience quite dramatic changes in sensation and perception with hypnosis. Roughly 10% are classified as 'low' - meaning that they have not responded strongly to hypnosis (although there are some skills programmes which aim to increase susceptibility to hypnosis).

Q: Is hypnosis dangerous?

A: Hypnosis is not in itself a dangerous procedure, but there are concerns that if it is not used properly then it could lead to negative reactions. The risks associated with hypnosis (for example, participants very occasionally experience a mild headache) have been shown not to differ from those associated with attending a university lecture (Lynn, Myer & Mackillop, 2000). Complications may occur due to faulty technique on the part of the hypnotist or because of misconceptions on the part of the subject regarding hypnosis. For a fuller discussion on the potential dangers of hypnosis read this section of Campbell Perry's discussion of hypnosis on the False Memory Syndrome's website.

Q: Can hypnosis make me do things I don't want to do?

A: The simple answer is no, you can't be made to do anything you don't want to do in hypnosis. In hypnosis you retain power over your ability to act upon suggestions, although if you do allow yourself to act upon a suggestion you may feel as though the effects are happening by themselves. Orne & Evans (1965) conducted a study to find out if they could make hypnotised subjects perform antisocial acts, such as throwing a jar of acid in the face of a research assistant (for safety the jar didn't actually contain acid, but the subjects in the experiment didn't know this). They found that 5 out of 6 high hypnotizable participants did throw the 'acid', but that 6 out of 6 low hypnotizable participants who were asked to simulate being in hypnosis threw the 'acid' too. This experiment shows that it's not something special about being in hypnosis which could make people perform antisocial acts, but rather something about the social situation the experiment was conducted in. The logic of the experiment is that if you can get people to commit antisocial acts without hypnosis (the low hypnotizables who were being asked to pretend) then there is no need to use hypnosis to explain what people are doing (for more information on experiments involving authority read about Stanley Milgram's famous experiment here).



Q: Is hypnosis like sleep?

A: The short answer is no. Although the word hypnosis is derived from the Greek god of sleep, Hypnos, studies have shown that hypnosis and sleep differ. Studies of brain activity have shown that although there are characteristic patterns of brain activity associated with sleep the same has not been demonstrated of hypnosis. To observers hypnosis might appear to be like sleep because suggestions of relaxation are commonly given as part of a hypnotic routine, but hypnotised people are in a state more similar to wakefulness (and hypnosis has even been induced in people riding exercise bicycles - so called 'active alert' hypnosis).

Q: What does hypnosis feel like?

A: The answer is that hypnosis probably feels different for everybody. Many hypnotists (researchers & clinicians) use elements of relaxation procedures, so people commonly associate a feeling of relaxation with hypnosis. Different people have all sorts of bodily responses to relaxation instructions - some feel as though their body is very heavy, whereas some can feel very light, almost as if they were floating. Mentally, again people have all sorts of responses. People typically report feeling very focussed or absorbed, often effortlessly so. Since instructions for imagery are often used people can have very vivid imaginative experiences - many report feeling 'as if they were there'. Erika Fromm wrote a great book on self-hypnosis, based up the results of extensive research, which contains a lot of interesting descriptions from participants in her studies.

Q: Can I get 'stuck' in hypnosis?

A: There is no evidence that anybody can become stuck in hypnosis. The worst that might happen could be that you fall asleep - and wake up un hypnotised! Orne & Evans (1966) conducted a famous study where participants were hypnotised, and the experimenter leaves the room under the pretense that there is a problem he has to attend to, the participant is then observed (without his knowledge) to see what happens. The result was that participants spontaneously woke up, the high hypnotisables taking slightly longer to do so.

Q: I would like hypnosis to be part of my treatment, who can I see?

A: Different countries regulate hypnosis and psychotherapy in varied ways and in many countries no specialist training is required in order to call oneself a 'hypnotherapist'. The International Society of Hypnosis recommends that the only therapists using hypnosis should be those who are already qualified in a professional discipline (such as medicine, dentistry, psychology or psychotherapy). To quote Martin Orne: "If a person is not professionally qualified to treat something without hypnosis, then they're not qualified to treat something with hypnosis, either. First you look for that professional certificate on the wall -- physician, dentist, clinical psychologist, or whatever. Then you look for the certificate of hypnosis."

Q: Is NLP like hypnosis?

A: NLP, or Neuro-linguistic programming, is a set of techniques that are intended to promote personal development. Some of these techniques were developed from the work of successful hypnotherapists, notably Milton Erickson. NLP remains scientifically unvalidated and is not a part of mainstream academic psychology. There is a great account of NLP on Skepdic, the skeptic's dictionary. More skeptical accounts of NLP are available at Michael Heap's website and on wikipedia.

