

# **HYPNOSIS FOR INDIVIDUALS TOO SUSCEPTIBLE TO SUGGESTIONS**

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*Lack of assertiveness may be related to over susceptibility to suggestions. According to Janet, the essential characteristics of an effective suggestion are belief in both the suggested event and in the power of the suggestion. This article describes a hypnotic procedure, based upon cue-conditioning, that is intended to help clients learn to believe in their ability to counter undesired influences from other people.*

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Although the term "sub assertiveness" has not been popular for very long, Janet pointed out as early as 1893 (Janet, 1893, 1909) that it can cover a multitude of problems. It referred to docile, obedient individuals who are inclined to think others are more intelligent or more experienced than they do, as well as to "weak" personalities who wish to avoid complicated conflicts and prefer to obey right away on points considered unimportant. No matter whether the problem is credulity or conflict avoidance, in both cases the individual accepts the view of others. As Janet pointed out, the lack of self confidence of still other individuals may be due to the fact that they are too susceptible to suggestions. That is, another person's opinion or advice has an effect on them similar to that of a hypnotic suggestion. In other words, the opinion or advice of another starts to lead a life of its own outside of the recipient's own will or consciousness.

Spiegel (1974) gave an example of this. An extremely intelligent and outstanding scientist sometimes found himself in the following situation. On entering a department store, he would be approached by an enthusiastic salesman who would talk him into buying a new refrigerator, and as in a reflex he would order one. When the purchase was delivered to the scientist's home, however, his wife was left with the chore of returning the goods.

Spiegel's example illustrates an aspect of effective suggestion Janet, in fact, considered to be the most essential characteristic (Janet, 1927; cf. Kroger, 1977). When listening to the salesman, the man apparently developed a belief that his family needed a new refrigerator and this belief, was based on the statements of the salesman. He did not verify the statements the salesman made. This sentimental faith, as Janet (1936) called it, is a very tempting and dangerous kind of faith. How many credulous individuals have been ruined because they were led to believe an inventor who promised to transform the desert sand into zinc, Janet asked. What Bowers (1977) remarked about hypnotized subjects could also apply to these individuals. It is "easier" to follow up on suggestions than not to. Not believing and not carrying out suggestions would demand a mental exertion which they were not up to at that point.

It should be remarked, however, that Spiegel's (1974) patient also used his ability to develop and sustain unlikely beliefs in a positive way. Specifically, he was very much successful at his hobby, which was the commodities market; this is a market in which faith plays an essential role. In this situation, his tendency to believe transcended the level of sentimental faith, and it became an asset rather than a liability.

## Hypnosis and Hyper suggestibility

Are individuals who are too susceptible to suggestions also excellent hypnotic subjects? In Janet's view, they must be because they are individuals who take opinions or advice given under ordinary circumstances as if they were hypnotic suggestions. Spiegel's patient, for instance, obtained a maximum score on a hypnotizability scale, but this does not constitute empirical evidence. In fact, the scientific literature is equivocal on this point. Hull (1933) found a positive relationship between response to direct, verbal suggestions and hypnotizability, but he found no significant relationship for indirect forms of suggestion. Moore (1964), on the other hand, found hypnotic suggestibility was unrelated to a measure of social suggestibility. Graham and Greene (1981) demonstrated a connection between hypnotic suggestibility and alumni contributions to a college, but could not show that alumni gifts were a result of waking suggestibility.

Several studies have shown a positive relationship between hypnotic suggestibility and waking suggestibility, or responsiveness to suggestions for motor and sensory alterations when hypnosis is not involved (Barber, 1965; Evans, 1967; Hilgard & Tart, 1966; Weitzenhoffer & Sjoberg, 1961). After a thorough analysis of these studies, Bowers (1977) concluded that although there are individuals who show little or no response to suggestions (whether or not hypnotic induction has taken place), that no individual who is high in waking suggestibility is entirely unresponsive in hypnosis.

Spiegel (1974; cf. Spiegel & Spiegel, 1978) raised the possibility that, from this perspective, the problems experienced by some clients are because of their susceptibility to suggestions. The therapeutic approach described in this paper is based on this possibility, and has two components. The first one is that individuals who go into a "waking trance" too easily can learn to have better control over such experiences via hypnosis. Erickson and Rossi (1979) gave an example of a woman who often went into trance spontaneously and unintentionally. Erickson trained her to become aware of this altered state of consciousness whenever she wanted to, and to use this awareness constructively. The second related component is that individuals who are too susceptible to suggestions can learn in hypnosis to protect themselves better against unwanted outside influences. That is, faith in another person's power and in the power of her or his suggestions-and thus in their own helplessness-can be converted into faith in their own capabilities (cf. Beahrs, 1982). It has been my experience that these clients often describe their problem in terms of "energy". For instance, they say they feel helpless against the power that others exert over them, that they feel "hypnotized by" the power emanated by others. By adopting the terms used by the clients, then, the solution can often be expressed in terms of "energy" as well.

### An Outline of the Procedure

The general procedure to be described here, based on the principle of cue conditioning (cf. Rosenblatt, Walsh & Jackson, 1976) is by no means new. Several variations which are used in hypnotherapy are described, for example, by Stein (1963); Bandler and Grinder (1979); Alman (1983), and Cladder (1984).

The procedure involves the following phases:

1. *Assessment.* The issue here is recognizing the situations in which unwanted influence is exerted, and by which individuals.
2. *Identifying the desired behavior, attitude and mental state.* Once the situations are known, then the client's desired attitude (i.e., how he/she can best counter the unwanted influence) is determined. The client can give consideration to this prior to hypnosis or in hypnosis, and the trance may bring up new possibilities.
3. *Retrieving inner sources.* Here we have two options: (a) the client recalls a past situation in which she/he reacted in the way she/he desires and forms a clear mental image of that situation in hypnosis; while in hypnosis she/he practices calling up the desired attitude *apart* from the situation; (b) if no past experience presents itself, the client pictures the desired attitude without preliminaries. The first case to follow shows an example of this, although the position this client adopted was related to other experiences.

4. *Hypnotic conditioning.* Once the client has successfully imagined the desired attitude in hypnosis several times, then during such an experience a particular gesture can be made or a particular position adopted. Once a link has been established between the situation and the gesture or position, we may speak of *cue-conditioning*: by making the gesture or adopting the position, the desired attitude is automatically achieved. The client practices this a number of time in hypnosis.
5. *Mental rehearsal.* This can be done in two ways: (a) the client achieves the desired attitude or position through the gesture or position of the body and then she/he forms a mental image of the problematic situation and imagines her or himself reacting adequately in the same situation; (b) the client first visualizes the problematic situation, then makes the gesture, and thus achieves the desired attitude. Suggestions can be given to confirm and strengthen what has been learned.
6. *Self-hypnotic practice.* If necessary, the client can receive instructions, after coming out of hypnosis, for practicing the procedure at home in self-hypnosis, (e.g., one or two times daily for a period of two weeks).

## CASE STUDIES

### The Screen

Willem, aged 26, entered psychotherapy to work through a number of traumatic experiences, some of which caused depression and phobia disorders. He appeared to go into trance very easily; not only during therapy but at other times, too, and he frequently operated on an altered level of consciousness. After his first formal experience with hypnosis he remarked: "If this is trance then I am in trance most of the time." After a few months Willem showed obvious improvement. He then mentioned two more problems, which he wanted to work on in hypnosis: the anxiety he felt when riding in a car (which developed after a car accident he was involved in), and his high susceptibility to suggestions.

When Willem was in hypnosis he was asked to bring himself into a mental state of calm and self-confidence he considered appropriate to riding a car. Once he had achieved this, he nodded his head. He was then asked to choose a gesture which could be linked to this mental state. The gesture he chose was having his hands resting in his lap. When it was evident that by adopting this position, the state of mind was indeed achieved, the therapist had him experience a neutral state of relaxation. Then he asked Willem to imagine himself in a moving car. Willem did so and became more and more anxious. The therapist asked him to assume the position described and Willem began to feel more and more at ease. This procedure was repeated with a different setting.

During the next session, three weeks later, Willem reported that he had successfully put the procedure into practice. He had sat in a car with someone who drove much too fast. Folding his hands had caused him to regain much of his needed calm. The fact that he did not ask the driver to reduce his speed was related to the second problem: he was so receptive to the wishes and needs of others that what was good for himself often came in second place. He automatically imagined what others wanted, and his own desires were pushed into the background. He felt he was unable to assert himself when people wanted something from him that he did not want.

The success of the therapy for his anxiety about riding in a car made him hope that something could also be done about this second problem. He wanted to learn to keep people at a distance when necessary.

In trance, Willem was asked by the therapist to call upon his "creative subconsciousness" (an expression that appealed to him very much) to achieve a mental state that would enable him to keep people at a distance when he chose to and to block unwanted outside influences. Willem began to feel he was surrounded by an energy field of increasing strength which was becoming an impenetrable screen. When Willem indicated that the screen was as strong as possible, the therapist asked him to link this state to an appropriate gesture. He chose to move his hand back and forth before his face. When he felt this link (*cue-conditioning*) had been established, he was asked to let the

experience of the screen fade away and undergo a neutral type of relaxation. By picturing situations in which he needed protection, he practiced the shielding gesture and the screen would surround him again.

The therapist asked him cautiously whether the shielding gesture would be appropriate in all situations. Willem's first reaction was "yes," but after thinking it over for a while he came to the conclusion that it might be better to make a casual gesture with his thumb at times. After practicing this gesture, it appeared to work just as well. The therapist remarked that Willem both consciously and unconsciously was capable of knowing that he did not have to depend on certain gestures to bring about things he felt were important, the gestures are only there to help him.

The therapist also asked Willem to imagine a situation in which he had a good relationship with another person and wished to protect the relationship from influences of third persons. After some hesitation, Willem did, and was happy when in his imagination he managed to pull up a screen around both of them.

### **Follow-Up**

One month, and five months later, Willem related that he had practised the exercise repeatedly and successfully. He always made the gesture with his thumb. Sometimes his reactions were inadequate, but then he imagined the same situation later in self-hypnosis and corrected the gesture. Thanks to these hypnotic corrections, in later situations his reactions became more and more adequate. Three years later, the therapist telephoned Willem. He was doing well in many respects. He still used the gesture regularly, when he needed it, not only when others demanded too much from him, but also in situations that might cause him anxiety or demand too much of him, such as a visit to the hospital where he had had some bad experiences. The gesture had become almost automatic. However, he was also better able to express to others what he wanted from them, and what he did *not* want.

### **The Sun**

Nelly, aged 30, had been in hypnotherapy for some time for grief-related problems. She was an excellent hypnotic subject and, like Willem, she was increasingly bothered by her responsive attentiveness and docility towards others. She would go to almost any length, even doing things she found offensive. If a friend called her in the middle of the night with a heart-breaking story, Nelly would visualize her friend's misery and automatically go to him. She felt that she simply could not resist.

The therapist suggested to her that she search, while in hypnosis, for the best attitude to adopt in such a case. Nelly's immediate reaction was one of skepticism: She thought that she would never be able to find the right attitude. The therapist told her about Willem and she immediately cried out that once, years ago, she had become so angry with someone who had gone too far that she had projected a burning sun at him from her solar plexus. She described how the man had backed away when she did that.

In hypnosis, Nelly could easily recall the image of the sun. She experimented with the power of the sun, for surely there were situations in which she could be nice and warm towards others like a shining little sun. The power of the sun could be adjusted by a switch-consciously or unconsciously. When she felt she could operate the switch well enough, she began to concentrate on learning how to adjust her voice, her facial expression, gestures, and position of her body to the power of the sun.

Contentedly, she completed these exercises. She intended to practice self-hypnosis daily at home. The therapist also gave her post-hypnotic suggestions to strengthen her belief that everything she had learned could continue to be of effect. Because of the coming holidays, an appointment was made for six weeks later.

### **Follow-Up**

One week later Nelly wrote the therapist a long letter. She related how she had practiced operating the switch for the sun, that the device had given her courage to go further and be firmer in her reactions than before.

Wednesday morning Peter [a neighbour and ex-boyfriend who often bothered her when he was drunk] called me. The connection was very bad and so I hung up on him.

Fifteen minutes later the doorbell rang. I opened the door without thinking and there stood Peter. Drunk. I turned on the switch and asked Peter to leave! To my surprise I kept telling him to leave and face up to his personal problems.

Peter kept looking at me in astonishment. Then he began to frighten me with talk about bombs. His telephone, he said, was adjusted in such a way that others could speak to him, but he was unable to answer. In short he acted like a psychotic. Once more I told him to leave and gave him an old telephone, which still worked. And he left!

Peter was invited to a party I was giving that evening. I also told him that if he was still drunk that evening I would not let him in. He arrived at six that evening, sober, friendly and well dressed!

After describing a few pleasant situations in which she turned down the power of the sun, Nelly wrote:

The sun device has a function in all of this. This power within myself, which I can turn on when needed, helps me to think and see without all those restrictions. I can be more open, because if need be I can put a screen around myself. The peace I so much longed for, I can find at times. I have watched several TV programs I wanted to see without jumping up fifty times because I urgently needed to take care of something.

During several follow-up sessions Nelly reported more successes with her sun device. She also described a situation in which it had failed her. This happened when she got a telephone call at 4 a.m. The person who called was rude to her and the sun device deserted her because it had been automatically switched off when she fell asleep. The solution to this problem was to unplug the telephone before going to bed.

Two years later the therapist called Nelly for follow-up data and to ask her permission to publish aspects of her case. She had been using the device regularly and successfully, not only to steer clear of people who demanded too much from her, but also to keep her composure. Her asserting herself was not welcomed by everyone in her environment. A few friends who had quite often taken advantage of her suggestibility in the past became angry and began to gossip about her. When this news reached her ears she called them and told them to stop it. The fact that she had been able to bring herself to do this had done her a world of good, she said.

Nelly had learned to use the device with care, for she felt it was sometimes better to have an open quarrel without using the device. In such cases she had to be open to the arguments of the other person. She also felt that such a device was only useful if a person had a certain measure of restraint and self-confidence. Otherwise there is the danger that the device serves the same purpose as alcohol and drugs-isolation. The crux of the matter is not isolation, but defining a private space and allowing yourself to utilize it pleasantly in an affirmative way.

## DISCUSSION

This paper described a form of sub assertiveness which is based on hyper suggestibility, a condition recognized long ago by Janet. Janet came to see *belief* as the kernel of the susceptibility: not simply belief in an event, but more essentially, belief in the power of suggestion, and belief that the one who made the suggestion has power. The procedure for solving this problem utilizes this client characteristic. If clients attribute power to the therapist, it is used to teach them to believe in their own power and capabilities. This means, in terms of Janet (1936), that these clients are assured that they can call upon their powers and this gives them courage and self-confidence. This faith-in essence, the summary of a future action also brings about an actual increase in their personal powers, thus paving the way for success. .

Finally, it was considered that the clients in the case examples described individuals who are susceptible to suggestions in their daily life-were excellent hypnotic subjects. It should be noted, however, that this assertion was not confirmed by obtaining scores on a hypnotizability scale. Thus, to make the indication for the procedure described here more objectively, in future work the therapist should use a test to measure hypnotic suggestibility rather than trusting her or his clinical judgment.

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