

## L2 Training in Clinical Hypnosis – Skills and Applications

ISSTD, Arlington, VA      October 20 – October 21, 2023

Chair: Reinhild Draeger-Muenke, PsyD, LMFT

Faculty: Wendy Lemke, MS

Small Group Facilitator: Toby Goldfus, LCSW-C

**DAY 1                      FRIDAY, October 20, 2023                      7.5 CREDIT HOURS**

9.00 am – 10.30 am      BLOCK 1      Orientation to L2  
Review and Practice of Formal Evocation Techniques  
RDM, WL

### *Content*

Discussion of utilization of clinical hypnosis and challenges to offer hypnosis in participants' clinical settings. Discussion of indications and contraindications and how to tailor elicitations to individual clients/clinical concerns. Demonstration of hypnotic elicitations/inductions. Practice of elicitations in Dyads.

### *Learning Objectives*

- Name two hypnotic elicitations, their individual indications and contraindications.
- Discuss one indication and one contraindication for utilizing a specific elicitation.
- Facilitate at least one intermediate level elicitation.
- Evoke, deepen/intensify, utilize, and reorient from a trance experience.

### *References*

- Barabasz, A., & Watkins, JG. (2005). *Hypnotherapeutic Techniques 2E*. New York, NY: Brunner-Routledge.
- Lankton, S. (2017). Training in therapy – induction without scripts. *American Journal of Clinical Hypnosis*, 59 (3), 276-281.
- Meyerson, J. (2017). Self-talk monitoring and utilization for enhancing hypnotic induction. *American Journal of Clinical Hypnosis*, 60 (2), 149-158.

10.30 am – 10.45 am      Break

10.45 am – 12.15 pm      BLOCK 2      Hypnotic Language: Creating Metaphors and  
Indirect Suggestions for Change                      RDM

### *Content*

Demonstration and experience of principles of constructing therapeutic metaphors. Demonstration and practice of formulating effective therapeutic suggestions.

### *Learning Objectives*

- Demonstrate the construction of a therapeutic metaphor to be used as an indirect hypnotic suggestion.
- Provide at least two examples of effective therapeutic hypnotic suggestions to aid in facilitating therapeutic change
- Describe the process of collaboratively creating metaphors and suggestions to promote desired change.
- Formulate a therapeutic metaphor based on a clinical case.

### References

- Lankton, C., & Lankton, S. (1989). *Tales of Enchantment. Goal-Oriented Metaphors for Adults and Children in Therapy*. New York: Brunner Mazel.
- Rosen, S. (1982). *My Voice Will Go With You. The Teaching Tales of Milton H. Erickson*. New York: Norton.
- Wallas, L. (1985). *Stories for the Third Ear. Using Hypnotic Fables in Psychotherapy*. New York: Norton.
- Handel, D.L., & Neron, S. (2017). Cancer palliation: layered hypnotic approaches mending symptoms, minding hope, and meaning. *American Journal of Clinical Hypnosis*, 65 (2), 33-49.

12.30 pm – 1.30 pm      Lunch      On Your Own

1.30 pm – 2.30 pm      BLOCK 3      Ideomotor Signaling as an Exploratory Technique  
WL, RDM

### Content

Discussion of ideomotor movement and demonstration of ideomotor finger signaling and use of a pendulum. Introduction of Cheek & LeCron's exploratory ideomotor keys.

### Learning Objectives

- Identify at least 3 components of ideomotor questioning/exploration.
- Introduce ideomotor signaling to a patient.
- Discuss indications and counter-indications for the use of ideomotor exploration.
- Dyadic practice of ideomotor signaling

### References

- Cheek, D.B., & LeCron, L.M. (1968). *Clinical Hypnotherapy*. New York, NY: Grune and Stratton.
- Ewin, D. M., & Eimer, B.N. (2006). *Ideomotor signals for rapid hypnoanalysis*. Springfield, IL: Charles C. Thomas.
- Cheek, D.B., (1994). *Hypnosis: The Application of Ideomotor Techniques* Boston, Massachusetts, Allyn and Bacon.
- Watkins, J.G. (1992). *Hypnoanalytic Techniques*. New York, New York, Irvington Publishers.

2.30 pm – 2.45 pm      Break

2.45 pm – 4.45 pm      BLOCK 4      Small Group Practice 1  
Eye Blink Evocation-Intensification-Ideomotor Signaling

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Suggestions for Change- Reorienting      ALL

#### *Content*

Participants practice techniques to elicit, intensify, utilize, and reorient from trance. Utilization of ideomotor signaling, metaphors and hypnotic suggestions for ego strengthening. Faculty and participants will give feedback.

#### *Learning Objectives*

- Practice at least once being the facilitator, subject, and observer.
- Elicit trance offering the eye blink hypnotic phenomenon.
- Utilize at least one ideomotor signaling technique.
- Construct at least one indirect suggestion for ego strengthening.

#### *References*

- Alladin, A. (2013). Healing the wounded self: combining hypnotherapy with egostate therapy. *American Journal of Clinical Hypnosis*, 56 (1), 3-22.
- Kluft, R.P. (2012). Approaches to difficulties in realerting subjects from hypnosis. *American Journal of Clinical Hypnosis*, 55 (2), 140-159.
- Barabasz, A., & Barabasz, M. (2016). Induction technique: beyond simple responseto suggestion. *American Journal of Clinical Hypnosis*, 59 (2), 204-213.

4.45 pm – 5.00 pm      Break

5.00 pm – 6.30 pm      BLOCK 5      Hypnotic Strategies Based on Ego State

Therapy-  
Principles for the Treatment of Trauma      WL

#### *Content*

Accessing/communicating with unconscious ego states, working with ego states for symptom management and improved functioning, and affect regulation, and managing traumatic memories.

#### *Learning Objectives*

- Name at least three principles of Ego State Therapy.
- Describe at least two hypnotic applications based on those principles.
- Participants will be able to construct three hypnotic suggestions for accessing ego states.

- Participants will be able to formulate two Ego State Therapy based suggestions for affect regulation.

#### References

- Lemke, W. (2005). Utilizing Hypnosis and Ego-State Therapy to Facilitate Healthy Adaptive Differentiation in the Treatment of Sexual Disorders. *The American Journal of Clinical Hypnosis* 47(3):179-89.
- Phillips, M., & Frederick, C. (2010). Empowering the self through ego-state therapy. Available at <http://www.reversingchronicpain.com/prof.html>
- Watkins, J.G., & Watkins, H.H. (1997). *Ego states theory and therapy*. New York, NY: Norton.
- Watkins, J.G. (1971). The affect bridge: A hypnoanalytic technique. *The International Journal of Clinical and Experimental Hypnosis*, XIX, 21-27.

#### **DAY 2                      SATURDAY, October 21, 2023                      7.0 CREDIT HOURS**

9.00 am – 10.00 am              BLOCK 6              Insight-Oriented and Exploratory Hypnotic Techniques  
Creativity, Playfulness and Safety for Self-Discovery  
WL

#### *Content*

Discussion of therapeutic considerations/indications for the utilization of insight-oriented and exploratory hypnotic techniques.

Description and demonstration of hypno-projective techniques (Frazer's Dissociative Table, Approach and Distancing techniques)

Invitation to experience a hypno-projective technique.

#### *Learning Objectives*

- Discuss indications and contraindications for using an insight-oriented hypnotic approach in the exploratory phase of the treatment of trauma and dissociation
- Describe at least three exploratory hypnotic techniques.
- Participants will be able to construct a hypno-projective suggestion facilitating approach.
- Participants will be able to formulate a hypno-projective suggestion facilitating distancing.

#### References

- Brown, D.P., & Fromm, E. (1986). *Hypnotherapy and hypnoanalysis*. Hillsdale, NJ: Lawrence Earlbaum.
- Hammond, D.C. (1990). *Handbook of hypnotic suggestions and metaphors*. New York, NY: Norton.
- Martin, K.M. (2012). How to use Fraser's Dissociative Table Technique to access and

work with Emotional Parts of the personality. *Journal of EMDR Practice and Research*, 6(4), 179-186.

- Frederick, C. & McNeal, S. (1998). *Inner Strengths: Contemporary Psychotherapy and Hypnosis for Ego Strengthening*. New York: W.W. Norton.
- Hunter, M.E. (1994). *Creative Scripts for Hypnotherapy*. New York: Brunner/Mazel.

10.00 – 10.15 am      Break

10.15 am – 12.15 pm      BLOCK 7      Small Group Practice  
2

Arm Levitation/Catalepsy/Drop Evocation – I  
Intensification – Utilization of an Exploratory Technique  
Reorienting      ALL

*Content*

Participants practice techniques to elicit, intensify, utilize, and reorient from trance. Utilization of ideomotor signaling, metaphors and offering of an exploratory technique for resource development and ego strengthening. Faculty and participants will give feedback.

*Learning Objectives*

- Practice at least once being the facilitator, subject, and observer.
- Demonstrate at least one intermediate-level elicitation technique.
- Facilitate deepening of the trance experience.
- Demonstrate utilization of ideomotor signaling, utilization of metaphors and indirect suggestions for exploration of a resource.

*References*

- Frederick, C. (2014). The center core in ego state therapy and other hypnotically facilitated psychotherapies. *American Journal of Clinical Hypnosis*, 56 (2), 39-53.
- Howard, H.A. (2017). Promoting safety in hypnosis: a clinical instrument for the assessment of alertness. *American Journal of Clinical Hypnosis*, 59 (4), 344-362.
- Woody, E., & Sadler, P. (2016). What can a hypnotic induction do? *American Journal of Clinical Hypnosis*, 59 (2), 138-154.

12.15 pm – 1.15 pm      Lunch      On your own

1.15 pm – 2.45pm      BLOCK 8      Hypnotic Strategies for Pain Management and Somatic Concerns      RDM

*Content*

Information on the interplay of physical and emotional pain. Information, demonstration, and

experience of altering physical sensations with hypnosis (hand warming/cooling, glove anesthesia, controls, etc.) and the importance of ego strengthening suggestions. Discuss exploratory techniques for addressing unconscious contributing factors to the experience of pain. Discuss contraindications for using clinical hypnosis for pain.

### *Learning Objectives*

Identify at least two contraindications for hypnotic pain management.

- Formulate at least two suggestions for the alteration of sensations.
- Construct at least two metaphors appropriate for pain management.
- Name at least one hypnotic application for exploring unconscious contributing factors to the experience of pain.

### *References*

- Jensen, M.P. (2011). *Hypnosis for chronic pain management: Therapist Guide*. Oxford, UK: Oxford University Press.
- Palsson, O.S., & Van Tilburg, M. (2015). Hypnosis and guided imagery treatment for gastrointestinal disorders: Experience with scripted protocols developed at the University of North Carolina. *American Journal of Clinical Hypnosis*, 58, 15-21.
- Patterson, D.R. (2010). *Clinical hypnosis for pain control*, Washington D.C.: American Psychological Association.
- Vega, de la, R., Mendoza, M.E., Chan, J.F., & Jensen, M.P.(2019). Case Study: Cognitive restructuring hypnosis for chronic pain in a quadriplegic patient. *American Journal of Clinical Hypnosis*, 61, (4), 15-21.

2.45 pm – 3.00 pm      Break

3.00 pm – 5.00 pm      BLOCK 9      Small Group Practice 3      ALL  
Hypnotic Pain Management Techniques  
Elicitation of Trance - Sensation Alteration/ Glove  
Anesthesia-Intensification-Suggestions for Pain  
Management - Reorienting

### *Content*

Participants practice Intermediate-level techniques to elicit, intensify, utilize, and reorient from trance. Utilization of ideomotor signaling, metaphors and suggestions for alteration of a physical sensation. Faculty and participants will give feedback.

### *Learning Objectives*

- Practice at least once being the facilitator, subject, and observer.
- Demonstrate at least one technique to elicit, intensify, utilize, and reorient from trance.
- Construct at least two metaphors for alteration of a physical sensation.
- Formulate suggestions for utilization of ideomotor signaling in the process of pain management.

- Offer hypnotic suggestions for pain management/enhancing comfort.

*Reference*

- Lang, E. (2017). Pain control -acute and procedural. In: G. Elkins (Ed.), Handbook of Medical and Psychological Hypnosis (pp. 333-340). New York, NY: Springer Publishing.
- Meyerson, J. (2017). Self-talk monitoring and utilization for enhancing hypnotic induction. *American Journal of Clinical Hypnosis*, 60 (2), 149-158.
- Yapko, M.D. (2017). The induction of hypnosis: an invitation to the client to engage.....deeply. In: M.P. Jensen (Ed.): The Art and Practice of Hypnotic Inductions (pp.14-32). Denny Creek Press.
- Varga, K. (2017). Suggestive techniques without inductions for medical interventions. In: M.P. Jensen (Ed.): The Art and Practice of Hypnotic Inductions (pp.100-121). Denny Creek Press.

5.00 pm – 5.30 pm

Processing the Day’s Learnings

ALL

*Content*

Participants refocus after a 2-hour experiential small group practice and cognitively reorient to appraise new learning in a discussion format. Participants will have the opportunity to clarify and consolidate information.

*Learning Objectives*

- Name at least two new pieces of hypnosis related information received on Day 2.
- Identify at least two new hypnotic skills practiced on Day 2.

*References*

- Baker, E.(2017). Yearning for the vastness of the sea: Reflections and commentary on professional training in hypnosis. *American Journal of Clinical Hypnosis* 59 (3), 311-315.
- Linden, J. & Anbar, R. (2017). Hypnosis training and education: Distinctive features of training hypnosis educators. *American Journal of Clinical Hypnosis* 59 (3), 260-275.

**DAY 3**

**SUNDAY, October 22, 2023**

**5.5 CREDIT HOURS**

9.00 am – 10.30 am

BLOCK 10

Hypnotic Interventions for Trauma and Dissociative Symptoms

WL

*Content*

Discussion of hypnotic interventions for phase 1 trauma treatment such as affect regulation, ego strengthening, establishing safety and skills. Discussion of methods of titration for

managing traumatic material via slow leak/fractionated/distancing techniques to assist in gaining sense of mastery of traumatic memories/triggers/emotions.

### *Learning Objectives*

- Identify two salient features of managing the intensity of hypnotic exploration.
- Name two hypnotic interventions for resourcing/sense of safety.
- Formulate at least two suggestions for hypnotic exploration via slow leak techniques.
- Construct at least two metaphors to support hypnotic exploration within the patient's window of tolerance.

### *References*

- Fine, C. (1991). Treatment stabilization and crisis prevention. Pacing the therapy of the MPD patient. *Psychiatric Clinics of North-America*, 14, 661-676.
- Kluft, R.P. (1980). On treating the older patient with Multiple Personality Disorder: "Race against time" or "Make haste slowly?" *American Journal of Clinical Hypnosis*, 30(4), 257-266.
- Kluft, R.P. (1990a). The fractionated abreactive technique. In: C.D. Hammond (Ed.), *Handbook of hypnotic suggestions and metaphors* (pp. 527-528). New York, NY: Norton.
- Kluft, R.P. (1990b). The slow leak technique. In: C.D. Hammond (Ed.), *Handbook of hypnotic suggestions and metaphors* (pp. 526-527). New York, NY: Norton.
- Lemke, W. (2007). Fostering internal cooperation through the use of imagery in the treatment of dissociative identity disorder. *Journal of Trauma & Dissociation*, 8(4), 53-68

10.30 am – 10.45 am Break

10.45 am – 12.15pm BLOCK 11 Working With Children and the Child Within RDM

### *Content*

Adaptation of hypnotic interventions to developmental age of the child / child part. Discussion of child-specific hypnotic language and strategies. Special considerations of working with child parts of the personality.

### *Learning Objectives*

- Define at least three ways in which working with children is different from working with adults.
- Identify at least two hypnotic strategies for the different developmental levels of children and adolescents.
- Name at least two considerations in working with younger parts of the mind.
- Construct hypnotic imagery suitable to support self-regulation in children and child-parts of the mind.

### *References*

- Anbar, R (Ed.) (2011 June). Special Issue: Pediatric Hypnosis. *American Journal of Clinical Hypnosis*, 54, 1.
- Etzrodt, C. M. (2013). Ethical considerations of therapeutic hypnosis and children. *American Journal of Clinical Hypnosis*, 55 (4), 370-377.
- Gregoire, C., Chantrain, C., Faymonville, M.E., Marini, J., & Bragard, I. (2019). A hypnosisbased group intervention to improve quality of life in children with cancer and their parents. *The International Journal of Clinical and Experimental Hypnosis*, 67 (2), 117-135.
- Kohen, D, Olness, K. (4/2011). *Hypnosis and Hypnotherapy with Children*. New York, NY: Routledge.
- Kluff, R.P. (2012). Hypnosis in the treatment of Dissociative Identity Disorder and allied states: an overview and case study. *South African Journal of Psychology*, 42(2), 146-155.
- Spiegel, E. B. (2016). Attachment-focused hypnosis in psychotherapy for complex trauma: attunement, representation, and mentalization. *The International Journal of Clinical and Experimental Hypnosis*, 64 (1), 45-74.

12.15 pm – 1.15 pm	Lunch	On Your Own	
1.15 pm – 2.15 pm	BLOCK 12	Hypnotic Interventions for Anxiety and Habit Disorders	WL

*Content*

Discussion and demonstration of affect bridge, split screen technique, imaginal exposure, mental rehearsal, future template/success imagery, hypnosis assisted systematic desensitization.

*Learning Objectives*

- Identify two salient features of hypnosis in affect regulation for anxiety and habit disorders.
- Name two hypnotic interventions for future template rehearsal.
- Formulate two hypnotic suggestions for hypnosis assisted systematic desensitization.
- Construct hypnotic language facilitating an affect bridge.

*References*

- Alladin, A. (2016). Cognitive hypnotherapy for accessing and healing emotional injuries for anxiety disorders. *American Journal of Clinical Hypnosis* 59 (1), 24-46.
- Kohen, D.P. (2016). Nail biting. In Gary Elkins (Ed.), *Handbook of medical and psychological hypnosis, foundations applications, and professional issues*. New York, NY: Springer.
- Yapko, M.D. (2004). *Trancework. An introduction to the practice of clinical hypnosis*. (3<sup>rd</sup> ed.). New York, NY: Brunner/Mazel.
- Zarren, J.I.& Eimer, B.N., (.,(2002). B.N. *Brief cognitive hypnosis. Facilitating the change of dysfunctional behavior*. New York, NY: Springer.
- Brann, L., Owens, J., Williamson, A., (2011). *The Handbook Of Contemporary Clinical*

- Hypnosis: Theory and Practice. John Wiley & Sons.

2.15 pm – 2.30 pm      Break

2.30 pm – 4.00 pm      BLOCK 13      Ethical Integration of Hypnosis into Practice      RDM

### *Content*

Ethical considerations and applications in the integration of hypnosis into practice through collaborative discussion utilizing case material.

### *Learning Objectives*

- Identify at least two ethical considerations in offering hypnosis.
- Identify at least two criteria for whether the use of hypnosis is appropriate.
- Plan a treatment strategy that incorporates hypnotic applications based on a given case
- Differentiate when to utilize hypnotic applications for symptom management versus symptom exploration

### *References*

- Brand, B. L. & McEwen, L. (2016). Ethical standards, truths and lies. *Journal of Trauma & Dissociation*, 17, 259-266. doi: 10.1080/15299732.2016.1114357
- Brown, D., Scheflin, A.W., & Hammond, C.D. (1998). *Memory, Trauma Treatment, and the Law*. New York, NY: Norton.
- Loewenstein, R.J., Brand, B.L., & Gilbert, L., Camins, J., Pyne, Z., & Dressel, C. (October, 2014). Treating complex trauma survivors. *Psychiatric Times*. Retrieved from <http://www.psychiatrictimes.com/cme/treating-complex-trauma-survivors>
- Scheflin, A. (1997). *Risk management in dissociative disorders and trauma therapy*. Retrieved from <http://members.tranquility.net/~rwinkel/CKLN/HTML2/transc19.htm>
- Scheflin, A.W., & Shapiro, J.L. (1989) *Trance on trial*. New York, NY: Guilford. The International Society of Hypnosis (ISH) Code of Ethics (2018). <https://www.ishhypnosis.org/wp-content/uploads/2018/08/ISH-CODE-OF-ETHICS-final-v4.pdf>

4.00 pm – 4.15 pm      Next Steps, Wrap-Up, Certificates

RDM