Foundations for Integrating Hypnosis into Your Therapies for Treating Anxiety, Depression, and Pain



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Relaxation Training for Anxiety: A 10 Year Review and Meta-Analysis

 In a meta-analytic review of studies published between 1977 and 2007 regarding various forms of relaxation training, including self-hypnosis, for anxiety, it was found that:

There is a "consistent and significant efficacy of relaxation training in reducing anxiety"
Both psychological and psychosomatic patients gain more benefits from relaxation training than medical patients

The potential of the training increases with its intensity; the most effective trainings are long-lasting and include at-home practice exercises

Manzoni et al., BMC Psychiatry, www.medscape.com/viewarticle/575821

Hypnosis to Manage Anxiety

- Relaxation inductions can (temporarily) replace feelings of anxiety with relaxation
- Anxiety affects more than 19 million Americans; common co-morbid
- condition with depression, substance abuse, eating disorders, etc. • Social anxiety is the most common form, but also GAD, phobias and PTSD
- Hypnosis targets anxiety-producing patterns of thought, behavior

Examples of Cognitive Style Patterns

- Global vs. linear cognition
- Expectancy
- "Believed-in imagination" (Sarbin, Hilgard)
- Tolerance for ambiguity
- Abstract vs. concrete thinking
- · Cognitive flexibility vs. rigidity



Examples of Global Style in Client Self-Reports

- "I just want to be happy"
- "I just want to feel normal"
- "I am my anxiety"
- "I'm just so overwhelmed"
- "I get so bad I just can't think" • "The symptom just happens to me"

Global Thinking *in the Symptom Context* Virtually Precludes the Ability to:

- •Compartmentalize (e.g., contain anxiety)
- Think linearly, sequentially
- Maintain good boundaries
- Make key discriminations

The Cognitive Cornerstones of Depression and Anxiety Comorbidity

Negative thoughts involving an:

Overestimation of danger, threat and fear and an Underestimation of one's abilities to cope with threats

This is true both for adults and children

Key Point:

Hypnosis can be used especially well to help people make key distinctions and lead them through *specific effective sequences* of thought, feeling and behavior for applying these sequences skillfully

Depressing and Anxiety-Provoking Questions

• "What's wrong with me?"

- "When will I ever...?"
- "Why can't I ever...?"
- "What if I fail?"
- "Why is this happening to me?"
- "What am I going to do with my life?"
- "What if I never get better?"

Any other such questions you can think of?

Asking "what if?" can lead to catastrophizing. The problem, though, isn't asking "what if?" It's not answering the question!

Ambiguity is a Risk Factor in Both Anxiety and Depression

• People strive to understand and make "meaning"

- Ambiguity raises, while certainty lowers, anxiety; projection as a coping device
- Cognitive distortions represent efforts to reduce, eliminate ambiguity
 A therapeutic goal is to learn to both RECOGNIZE and TOLERATE ambiguity

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The Skills That Go Into Tolerating Ambiguity

- Recognizing ambiguity in and across situations
- Recognizing multiple possible meanings (flexibility in perspective)
- Recognizing no clear evidence is obtainable or readily forthcoming
- Accepting "I don't know" as a valid, blameless conclusion

A *Generic* Structure for Hypnotically Facilitating Recognizing and Tolerating Ambiguity

- Orient client to hypnosis
- Induction process
- Build a response set regarding uncertainty ("You don't know what I'm going to say...")
- Introduce the process of inference ("We all make guesses about the meanings of things we observe or experience")
- Suggestions/metaphors regarding inferences ("When you were told the classic stories, did you wonder what they meant?")

A Generic Structure for

Hypnotically Facilitating Recognizing and Tolerating Ambiguity

- Introduce the value of knowing ("It can inspire confidence to know you made a good decision based on the facts")
- Suggestions/metaphors regarding "knowing" ("I wanted to buy a car with really good gas mileage so I read studies comparing models…")
- Introduce the value of not knowing ("There are some questions we cannot answer, fortunately...")
- Suggestions/metaphors regarding "not knowing" ("When I began college and I didn't know what I wanted to do with my life, it allowed me an openness...")

A *Generic* Structure for Hypnotically Facilitating Recognizing and Tolerating Ambiguity

- Reframing and reinforcing "not knowing" as desirable in some contexts; the merits of saying "I don't know"
- -Cues for identifying when "not knowing' is desirable (e.g., there is no way to know)
- Post-hypnotic suggestions for integration ("So when you find yourself making an interpretation about the meaning of some event, you can remind yourself...")
- Closure
- Disengagement

The ability to detach from your own thoughts and other aspects of your internal experience is essential to transforming it

The dissociative qualities of hypnosis provide a means of therapeutic detachment

Consider the Role of Compartmentalization in Different Therapies

Detach from:

- the pain in order to manage it
- the emotion and be more rational
- the past and be more present
- the fear and do it anyways
- situational triggers and react differently
- the wish and be more accepting of the reality
- the inner critic and be more compassionate

Thanks for your kind attention!

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