Patient/Client Assessment, Introducing the Patient/Client to Clinical Hypnosis

CLINICAL WORKSHOP

LEVEL 1

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Continuing Education & Accreditation Statement

- This program has been approved by the American Society of Clinical Hypnosis Standards of Training Committee to be used toward Membership and Certification requirements.
- The American Society of Clinical Hypnosis-Education and Research Foundation (ASCH-ERF) is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.
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- ASCH-ERF is approved by the American Psychological Association to sponsor continuing education for psychologists. ASCH-ERF maintains responsibility for this program and its content.
- This session is approved by the American Society of Clinical Hypnosis and as such is an approved continuing education course.

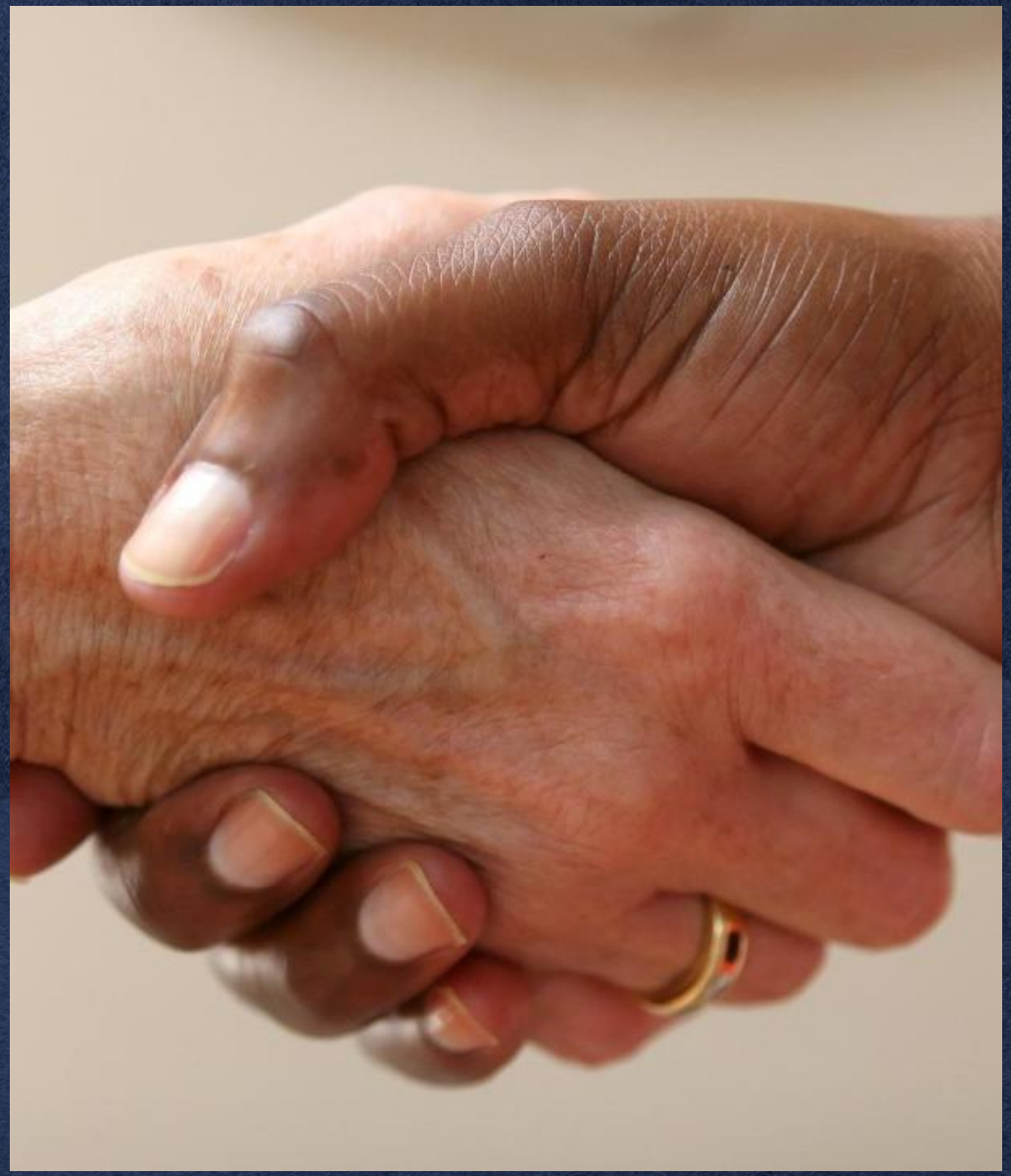
Disclosures

- ASCH and ASCH-ERF jointly provided this program.
- No staff or committee members involved in the development, planning or execution of educational content have any financial relationships or conflicts of interest to disclose.
- _____has no significant financial relationships or conflicts of interest to disclose.

Learning Objectives

At the conclusion of this session the participant will be able to:

- Summarize at least three key points about hypnosis to discuss in a non-technical manner with a client or patient/client
- Review important elements and recommended procedures in obtaining informed consent regarding the use of hypnosis clinically
- Discuss the fallibility of Memory



Start at the Beginning: Everything is a Suggestion!

Most hypnosis is conducted in a Social Context. Be sure to introduce yourself, offer to help, build rapport and trust, and build positive expectancy from the very start. Patients need to feel safe, respected and understood. They also need to feel that you are the one they can trust.

Suggestions

Before

During

After

The trance elicitation.

Better Assessment=Better Treatment

Complete a full evaluation

Obtain past records when possible

Give the client time to explain

Create a safe environment and climate for change

Sell “hope” and determine what the client really hopes to achieve by coming to see you.

Know your Client

- Hypnosis assessment includes learning about the client's interests, strengths, fears.
- What do they do for a living? What do they like about it? What makes them good at it?
- What do they do for fun? What kind of music do they like? Movies? Food?
- Any physical abilities, hobbies, talents?
- Favorite places? Pets? Activities with family or friends?
- What makes a good day for them?
- Any fears, phobias?

Know your Client

Visual: Will describe what they see in favorite place first; use words like “see, look, imagine, visualize, clear/foggy, bright/dark, etc.” Often look up when they are thinking of something.

Auditory: Will describe words or sounds they hear in favorite place; use words such, “Listen, sounds, hear, voice, noise, tune out, or quiet.” They often look to side when thinking to “hear their thoughts.”

Kinesthetic: Will describe what they can feel or touch in favorite place; use words like “Touch, feel, sense, cool/warm, soft/hard, tight/loose, gut feelings, doesn’t sit well with me” Often look down at body when thinking so they can sense how they feel about something.”

Know your Client Key Questions

- Have you ever been hypnotized?
- Have you ever seen someone hypnotized in real life?
- Do you have any questions or concerns about hypnosis?

What Hypnosis IS….

A natural ability

Safe and enjoyable

An evidence-based treatment

A way to explore your potential

A path to self-discovery

What Hypnosis is Not:

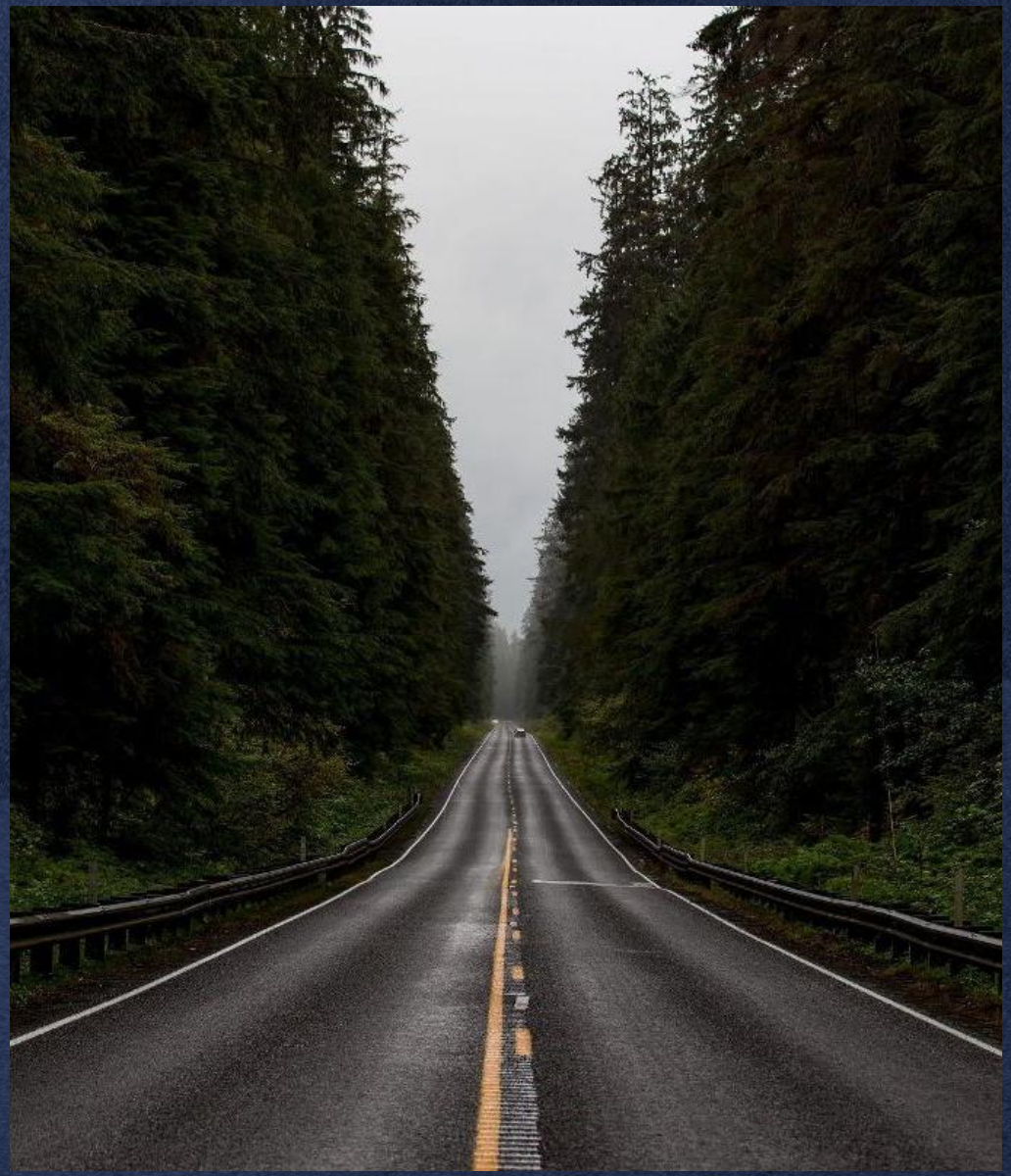
Mind Control

Dangerous

Satanic

Magic

Embarrassing



Provide Examples

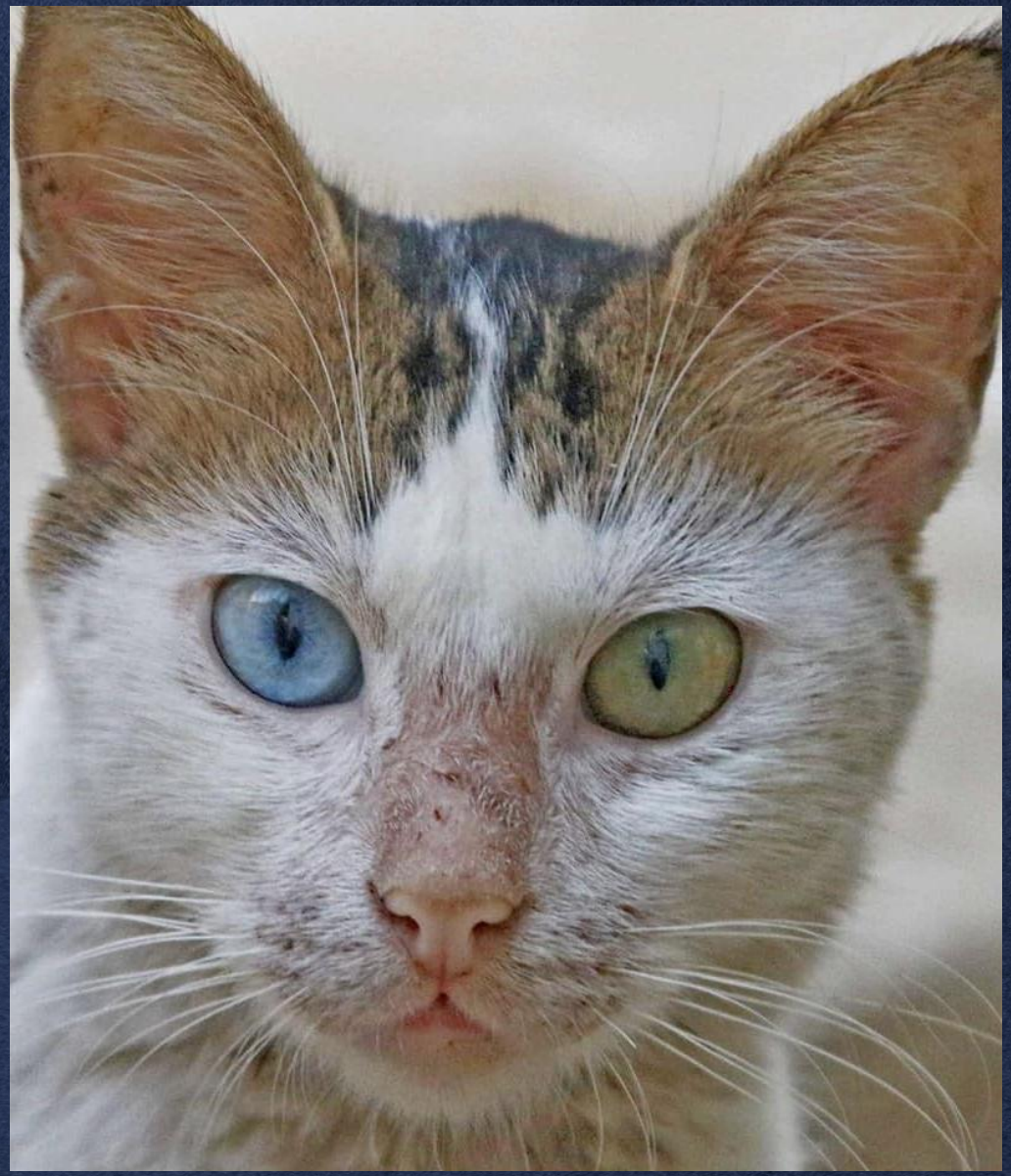
Day Dreaming

“Road Hypnosis”

“Flow”

Absorbed in a good book or movie

“Loosing track of time”



Potential Words…..

- *"A tool/skill that I think you could find very helpful is clinical hypnosis. Hypnosis is a state of relaxed concentration that is similar to meditation or guided imagery.*
- *When we enter these more relaxed, focused states of concentration, we are better to calm the nervous system, ease pain, and access more positive thoughts and emotional states.*
- *Have you experienced clinical hypnosis, meditation, or guided imagery before?"*
- If not-- Have you ever had the experience of being so absorbed in a book or a movie, that you lost track of time, or tuned out something? That's an example of a hypnosis. It's a natural state we go in and out of all the time.

Informed Consent: A Controversy

Verbal vs. written informed consent?

Unique consent for hypnosis?

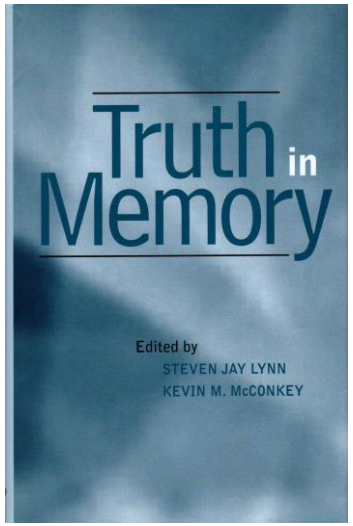
What “suggestion” does a separate consent make?

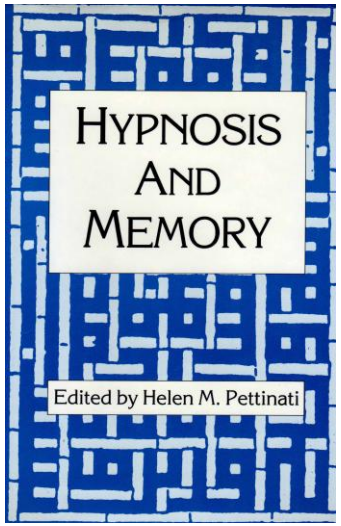
What are the risks?

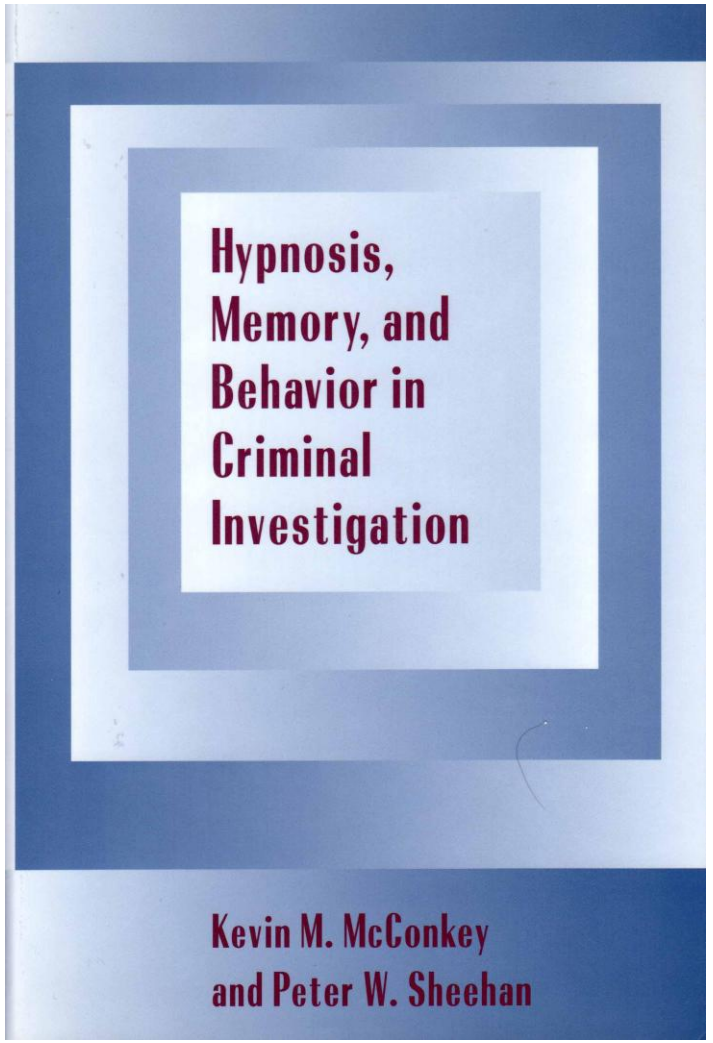
The story of the unfortunate psychiatrist

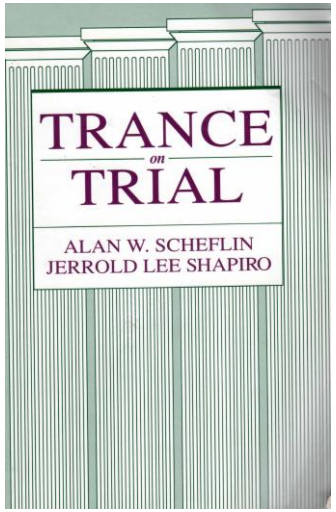
Finding Consistency/Options

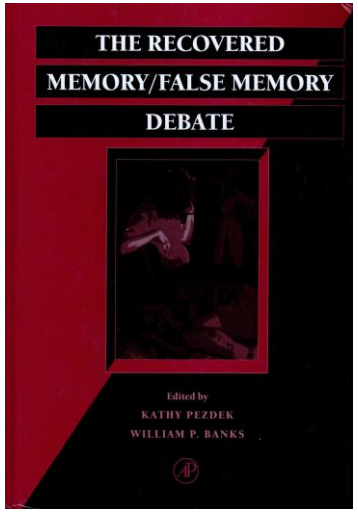
Hypnosis and Memory











Memory

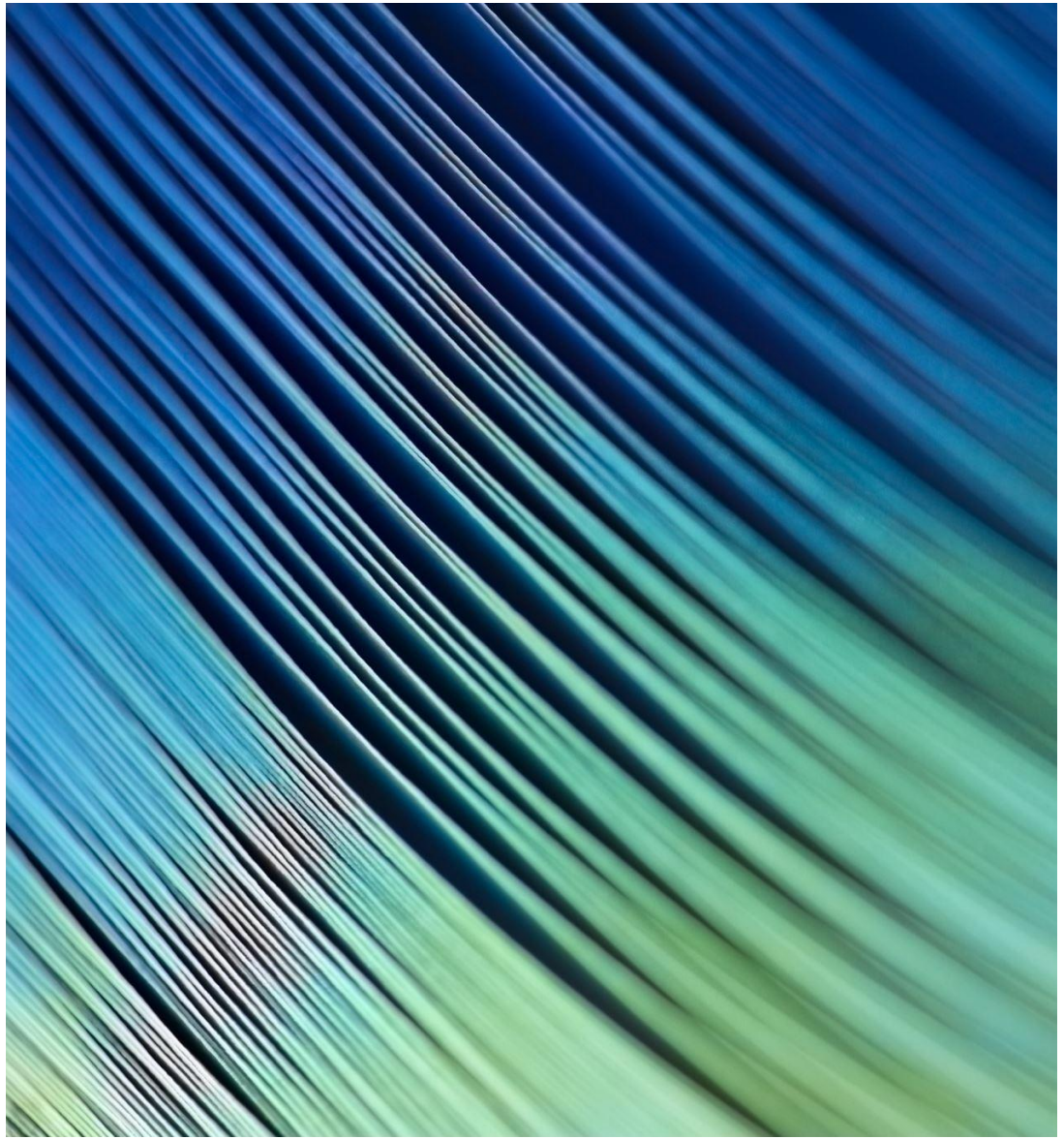
With or without hypnosis, memory is:

- Imperfect
- Adaptive
- Reconstructive not Reproductive
- Variable among individuals
- Recall can be improved under some conditions….including hypnosis.

Memory

With or without hypnosis, problems can occur at any of the primary components of memory:

- Encoding
- Storage
- Retrieval



Memory

- Normal memory is malleable
- Always a chance of inaccuracy
- Only dependable with corroboration.
- Emotional memories may be encoded differently
- Emotional memories may be stronger, more accurate.
- Emotional memories may be more stable over time.

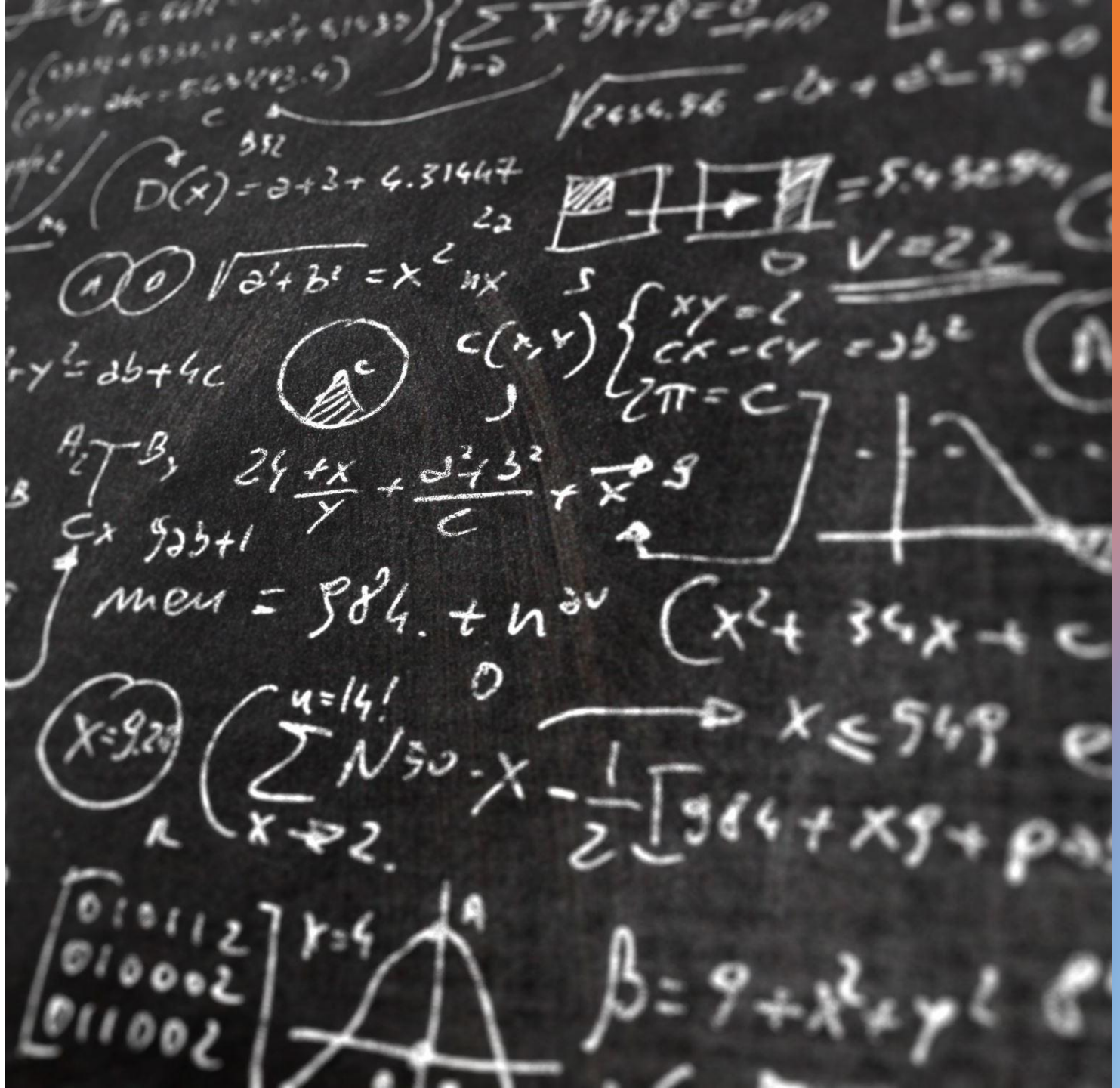
Hammond et al. 1994

Trauma and Memory

- Trauma may cause amnesia and robust repression.
- Traumatic memory may be encoded differently than memory for more ordinary events.

Hypnotic Memory

- Hypnosis may increase memory production
- Hypnosis does not increase the accuracy of memory
- Hypnotically retrieved memories may be more believed both by the individual and by the jury.
- Asking someone to remember is suggestive by itself.



The False memory debate

The False Memory Debate

- Hit a peak in the 1990's
- Primary issue related to the accuracy/existence of represses childhood memories of incest or child abuse.
- Children and adult survivors of came under suspicion of fantasizing or lying about their abuse.
- Therapists began to be taken to court with civil lawsuits charging them with malpractice for suggesting or implanting false memories of past abuse.
- Hypnosis became the victim of the much larger issue of memory.

Questions

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