OHA Board Spotlight

Carole Ockert, OHA Vice President

OHA has an excellent team of people on the board of directors working to support the ongoing health and vitality of our organization. Howard Hamilton, long time member of OHA, well known and respected throughout the hypnosis community, has taken on the role of OHA President. Patrick Glancy now serves as our secretary, Rosemarie Eisenberg and Robert Reid are newly seated board members, and Nancy Wheeler, Joseph Bennette, Debbie Vaughan and myself, Carole Ockert, are continuing board members. I have added the role of Vice President to my board responsibilities, providing coordination and support as needed.

We are so excited to have Rosemarie and Robert on board as they bring with them a depth of experience and high level of organizational skills.

Each of us on the board have our own areas of interest and focus relating to hypnotherapy. My interest is in the unfolding science of the brain and the interconnectedness of mind/body. I finished my Bachelor of Science at Portland State taking classes in the structure of the brain and the interplay in disease states. I have also been taking classes on interpersonal neurobiology through their Graduate School of Education.

In all of these learning opportunities, I search for links to hypnosis and newly emerging research. I see a growing body of research supporting the validity of what you each see in your practices. I am also focused on the growing Complementary and Alternative Medicine (CAM) movement and I want to help create more inclusion of hypnosis and hypnotherapists.

As I work on the OHA board, I hope I can contribute with this perspective; updating the membership on what I have gleaned from reading current research, staying aware of developments in the larger CAM movement and networking on behalf of OHA with other organizations. I will also encourage another board member to step forward in the next journal and introduce themselves. We are a diverse board and are eager to serve. Our contact info can be found on the OHA web site, www.hypnosis-oregon.com.

Your Board of Directors is moving forward on a number of important issues and projects designed to bring greater value to your membership in the Oregon Hypnotherapy Association. Among the various projects we are currently engaged in are creation of a membership handbook, online renewals, social activities, and acceptable criteria for CE units. If you would like to participate on a committee, provide assistance, or would like to offer a presentation or have an idea for one of our meetings, please contact a member of the Board of Directors.

More at www.hypnosis-oregon.com
BOOK REPORT FOR HYPNOTISTS

By JANIE MARTIN, C.HT.

The first non-hypnosis book I would like to report on as being a valuable aid to the hypnotist is The Astonishing POWER of EMOTIONS; Let Your Feelings Be Your Guide by Esther and Jerry Hicks based on the (The Teachings of Abraham). Esther and Jerry Hicks are the best-selling authors of The Law of Attraction.

For those who are not already fans of the Abraham materials, Abraham is not the Abraham of the Bible. Abraham is a non-physical Being; a collective consciousness that channels information through Esther Hicks, who just uses the name Abraham. Least you be put off by the phenomenon of Channeling, let me say that it matters not so much where valuable, usable information comes from, but rather the message itself.

This particular book represents only a tiny facet of the Abraham teachings, but can be valuable to the Hypnotist working with clients because of its clear cut, no nonsense, common sense way of helping a client who is emotionally tied up with a dilemma.

The premise is that Emotions are a guidance system of the soul and is even more important than thoughts. Through the emotions we are having, we can learn how to effectively utilize a new awareness of them. We can then begin through a series of steps to reach for a better thought. Many people try to go from A to Z in an effort to change their reactions and feelings to make them feel better, which is ineffective; when in fact we can guide them from A to B then to C. etc. which is more practical and achievable.

Each chapter is a different personal conflict that is addressed and moved through by examples of what Abraham calls Upstream thoughts or Downstream thoughts. In my day we used to call these, rationalizations. Perhaps this is a good thing. Just by reading each chapter and its conclusions, you have a readymade set or idea formula for taking your client through these steps by helping them to realize which thoughts are taking them upstream against the current going nowhere, and which thoughts will help them let go of the oars of their boat and go downstream to feel better sooner.

An interesting thought here for gaining clients: Start a book club using this book and from there the people taking your class based on the title of the book can be readymade clients who not only now understand the objectives of the book, but will, by utilizing your talents as a Hypnotist, be able to reach resolutions to their own life problems much quicker. You can’t lose with this book….check it out. Next newsletter, I have another non hypnosis book a hypnotist can use that you will find ever so fascinating; stayed tuned!

Janie Martin
www.hypnosisforhealing.net

Transformation?

By Joseph Bennette, CHt

Why do you want to transform your life? Just what is it you think is going to be better than what you are experiencing now? Why do you think transformation is what you want? Why do you think that transformation is the answer? And what is the question that you feel transformation will answer? And where did you get your question - did you come up with it yourself or did you inherit it from someone else - an authority perhaps?

What do you intend to transform into? Will you be richer? Taller? Shorter? Have a slimmer body? A better job? Will you look like a super model? Maybe you will have that “perfect” relationship? What is your standard you feel you don’t meet? Is it your standard or did you inherit it from someone else - an authority perhaps?

How will you know that you have transformed when you do? What measuring device will you use? Will you simply satisfy some animal need to feel pleasant or escape pain? Will you achieve some diploma or certificate that tells the world that you have “made it”? Will you wear the robes of authority or possess the trappings of success? What is your measuring device - is it yours or did you inherit your measuring device from someone else - an authority perhaps?

Do you have some purpose in life that you must attain in order to feel that you have succeeded? What is that purpose? How do you know if you are on the path of that purpose? What are your indicators? Can you fake that purpose until you make it? If you look like you have achieved your life purpose does that mean you have achieved it? And once you have achieved your life purpose does that mean you can stop pursuing it? Where did you come up with the idea that you have a life purpose? Did you establish this by yourself or did you inherit it from someone else - an authority perhaps?

What if the journey is the destination? Could it be? And if it were so that the journey of life is the ultimate destination of life, then could you say with surety that transformation is necessary? Do you think you can know the destination of life - where it should go? And where did you get your should, your knowledge? Did you make up your shoulds yourself or did you inherit them from someone else - an authority perhaps?

Are you good enough for transformation? How do you know?

I wonder… and I question… until I’m sure… I don’t know… anything at all…

The beginning of knowing is also the end.
The Scotoma Solution

A scotoma is a mental situation in which one locks on to one idea and excludes all others - known as the “lock on lock out” principle. We all do it - it’s our human way of avoiding overwhelm when faced with too many choices. However, a scotoma can get you into trouble as we shall explore here.

In a Spongebob Squarepants cartoon, Spongebob gets up one morning and thinks he’ll create a fantastic dessert for himself. Unfortunately, his choice of ingredients cause him to have horrific halitosis (bad breath). Spongebob proceeds to go outside, where he meets several people, all of whom scream and run away from him as soon as he opens his mouth and says, “Hello.”

His conclusion - “I must be terribly ugly!”

Based on his erroneous conclusion, he weighs all evidence only in light of his conclusion (scotoma) - and discounting evidence to the contrary. Every experience he encounters only tends to strengthen his belief that he is ugly rather than stinky. His scotoma causes him to feel less and less self-confident until he at last introverts and avoids others.

Spongebob’s close friend, Patrick, who as a starfish, has no nose, can’t smell the bad breath and so assumes his friend is correct in his assumption that he is ugly. Together, Spongebob and Patrick attempt to overcome the “ugliness” through a series of humorous, yet reasonable, methods. They try positive affirmations, “I’m ugly and I’m proud!” etc. Again, all their efforts are aimed at correcting what they believe to be the fundamental problem - that Spongebob is ugly.

At long last Patrick tries some of Spongebob’s “dessert” and finds that he, too, has become “ugly.” Everyone runs away from them whenever they open their mouths. When Patrick then speaks to Spongebob and Spongebob gets a whiff of the odorous mouth, he finally gets it that he’s not ugly - his breath stinks - and together Spongebob and Patrick celebrate the fact that “we stink!”

This is a fine example of what happens when we make an erroneous conclusion from the data we observe. Compounding the problem of erroneous conclusions is that we make many of our life-determining decisions based on data we evaluated and made conclusions on when we were VERY YOUNG or in our infancy - a time in our lives when we were physically and psychologically poorly equipped to make such conclusions. Further, we did not have sufficient data to make such life-determining conclusions. And so we find ourselves living our lives based on erroneous conclusions of ambiguous data (life experience) we made long ago - so long ago we don’t recall them - but we are living them out nevertheless.

So, what do we do about it? How do I become aware of that of which I am unaware. I’m even so unaware that I’m unaware that I’m unaware. Egad!

Here’s what I recommend:

Develop a healthy skepticism about your own decisions and decision making processes. Question yourself often, “Am I sure about this?” “Could I be wrong about this-that-them-you-me-us?” etc.

LISTEN to those closest to you. Consider criticism as golden nuggets of awareness about that which you are unaware. Spouses especially are goldmines for such info. Especially if you feel threatened - the surest sign that gold is afoot. Defending yourself against your loved ones shuts the doors and windows of awareness.

LISTEN to your “enemies” - they will tell you what you don’t want to hear. As such, they can be your best friends - at least when it comes to information about you. You don’t have to give in or give up - just pay attention. “Could what they say about me be true - to some extent?”

Speak the words, “Thank you” to those you feel are attacking you. Be genuine - no sarcasm or brushing off. They are doing you a favor - it’s just good manners to show appreciation. Besides, it shifts your thinking mode from emotion to reason - a good thing during communication.

Deal with your emotional triggers. I recommend you get help with them - to avoid missing those that hide from you. Seek out a therapist who works holistically - treating the entire being - someone skilled in rooting out those hidden emotional “secrets” that come forward when triggered.

Source: PowerStates.com— Used with permission.
Deeper and Deeper

Patrick Glancy, BCH

A couple of years ago a professional acquaintance referred their adult niece for stress management. This puts a little pressure on me. I have a growing business and referral partners are important to take care of - especially a member of their family. In hindsight, I’m glad I did not know what was really in store.

When the young lady, whom I will call, Jill, arrives for her appointment, she looks a little stressed - maybe a little on-edge. I go through my pre-talk and we begin to review her intake form. Most notably:

1. What issue(s) are you here for? Panic attacks, anxiety, loss of loved ones (Grief), depression, agoraphobia, PTSD.
2. What is your goal through the use of hypnosis? To reduce anxiety and panic attacks - maybe stress.
3. Previous efforts to address your issue(s)? Counseling, psychiatrist, psychologist, medication.
4. Are you currently being treated for these presenting issue(s)? Being treated for bipolar disorder by family doctor. Recently prescribed the drug, Lamictal.

I’d only been NGH certified for a couple years - this sounds a little deep for someone who still feels pretty new to hypnosis. I ask Jill if she would consider seeking further treatment from a psychiatrist and re-starting counseling. She says, “No. I’ve been medicated and under treatment, of one kind or another, for most of my life. It hasn’t helped me and I won’t go any more.” She’ll try the new drug her MD put her on and she’ll try hypnosis. During this time, from Jill’s words and body language, I see a drastic sense of intelligent desperation from her. She is scared and needs some hope, and, I’m honestly afraid of what she might do if I turn her away. I feel a little more pressure. I’m thinking to myself, “Maybe reducing her stress with hypnosis will make her more comfortable about getting back into counseling.”

I explain to Jill that I cannot work on diagnosed issues until after the Release of Information and Doctor Referral forms are filled-out and returned. But, we can sure work on her stress management until then. She happily explains to me that the agoraphobia is not diagnosed; she just has fear that turns into panic attacks when in any public places and figures that is what this reaction is called. She tells me she would really like to be able to go grocery shopping by her apartment for longer than five minutes at a time. I say OK - we’ll see what we can do for her fear.

In her highly stressed emotional state, we easily breezed through an Elman type of induction, some brief deepening, and achieve muscle catalepsy via an eye-lock, and suggested amnesia via fading numbers. I ask her to imagine the bit of fear she has described when shopping. She understandably has some reluctance and hesitation to this. I explain to her that, “many people with uncomfortable emotional reactions like this learn ways to control it, and contain it, but in here, for just a short time, we would like to experience the bit of fear that comes up so we can take care of it and fix it. Letting yourself feel this fear feeling does not give it any more power than it normally has, it is just you letting yourself look at it with the intent of understanding it.”

Using an affect bridge age regression she finds herself remembering a moment in time when eight years old. Her grandfather is telling her that her mother has shot and killed herself. This is pretty big, but what did this have to do with a fear of being in public places?

After briefly exploring this memory, we find the eight year old girl felt guilt and shame. She also believed her grandfather could see her guilt and knew this little girl was at fault for her mother’s death.

Continued on Next Page
Deeper and Deeper (cont.)

We age regress this guilt/shame feeling and she describes being five years old with her mom and dad fighting. The little girl is standing between them – “trying to get them to stop fighting, and I COULDN’T.” Her parents got divorced. She lived with her mom, and mom would talk about how tight money was and how difficult it was to be a single mom. To Jill’s eight year mind she failed at stopping her parents fighting and this failure results in divorce. And then, this little girl is such a burden on her mom that mom kills herself. Perception really is everything.

Jill and I quickly work through these issues. Forgiveness, gestalt and reframing are key components in addressing the incorrect emotional associations Jill has had attached to these memories.

We take a break - we both needed it at this point.

That is just the beginning of Jill’s story. After what we uncovered in this first session, Jill fills in some of the blanks for me. Dad does not want to care for an eight year old girl so Jill is passed from family member to family member. Several years later Jill ends up with an aunt, her mom’s sister, with whom she becomes very close. She has anxiety and trouble keeping a job. Then, three years prior to Jill’s first visit with me, her aunt kills herself with a gun. Now, Jill’s own daughter is eight years old. I get the sense of a little more pressure.

This first session was good, insightful, and productive. Jill says she feels a little better, like maybe a weight has been lifted. At the same time, she says she feels a little apprehensive about it. She has been through all kinds of talk therapy that has sometimes given her short-term relief, sort of like she currently feels. Now I understand this as the typical “wait-and-see” thoughts a first time hypnosis client has. What I do not tell her then is that I was holding my breath with these same thoughts.

We schedule the next session for the next weekday, a Monday. I ask Jill to contact me over the weekend if ANYTHING comes up or she gets ANY concerns.

When Jill comes in on Monday she has a smile. This is good. I take a breath. We settle in to talk and I ask her how things went? “Did you notice any differences?” She says, “Yes! I went to the store after our session Friday and I was OK! I was in the store over 10 minutes and nothing happened. I kept looking for the signs of a panic attack and they didn’t come.” I say, “That’s very good, anything else notable?” After a moment she quietly says, “Yes. I didn't feel like killing myself. I THOUGHT about it, like I always do, but I didn't FEEL like it, you know?” I say, “OK, that’s good too.”

Jill gives me the completed Release of Information and the Doctor Referral form signed by her MD, and we get to work.

I worked with Jill over several sessions. Not every appointment was as smooth as the first one, but she continued her progress. When we finished, I didn’t hear anything from Jill for 18 months or so. Then, she calls to say “Hi” and to tell me she had moved to another state and had a job. She sounded happy.

Working with Jill gave me a lot of confidence in my abilities. More importantly it gave me confidence in the capabilities of the techniques I had been taught. Since seeing Jill, I have worked with a good number of clients with these “deeper” problems. It has turned into my favorite type of “presenting issue.” I might even get a little bit of a smile when I see “anxiety and PTSD” on the intake form.

The Confirmation Bias

I like to think of myself as a very grounded, pragmatic person open to possibilities. I like evidence and supporting research that is non-biased. I used to think that double blind studies were the way to go because they seemed so objective - now I find that these, too, can be tainted and unreliable. I also like to try things out myself to get a more personal testimony of a process’ efficacy - if it works well on me, I’ll endorse it.

I have come to realize that scientific knowledge is not the same thing as understanding the scientific method. In the scientific method, one observes a phenomenon, like RET, for example; then applies a possible theoretical hypothesis to that observation; tests the hypothesis in such a manner as to prove or disprove the hypothesis - making both results (proof or disproof) possible and viable; and then reevaluates in light of this new evidence.

The theoretical hypothesis is meant to be a notion - one that can be dismissed easily upon evidence to the contrary - weighing the evidence pro and con, choosing the most logical and reasonable explanation, regardless of what we previously believed. Testing must be as objective as possible and reproducible by others - making the testing process free from flukes and biases. Finally, analysis of the results of testing and reevaluation of the initial hypothesis must be done solely in light of the data extracted from objective testing - open equally to proof or disproof - free of political, social, economic, or other outside influences.

Then comes the rub - the “Confirmation Bias”. The confirmation bias is defined as “sorting a body of data and selecting those that most confirm what we already believe, and ignoring or rationalizing away those that do not.”

Our confirmation biases are based on teachings from our past - especially from our early childhood - from our earliest authorities - our parents! Where did they get their biases? Most likely from the same place you got yours - from your parents! This is how we instill and sustain our traditions, our superstitions, and our basic personal preferences - from our ancestors. Even when we are trained to do otherwise, we tend to fall back on our “DNA” - our family patterns of belief. It’s even built into our physiology - our basic brain structure - and down into every cell.

Especially when it comes to issues relating to survival, we tend to confirm what we already believe and disregard or rationalize away the rest - our underlying subconscious belief being that our survival depends on keeping the status quo rather than releasing the old to investigate or consider something new and possibly better. Further, we will defend with our very lives our old “principles” based on those biases.

We tend to seek to prove to ourselves what we already believe rather than being truly open to surprise - no matter how pleasant the surprise may be. Further, we tend to taint our experiences to fit our biased world view. We simply cannot be truly objective. As humans, we carry within us the human trait of bias - and that bias is subconscious, deeply held, and strongly defended personally, culturally, and globally as a specie. We taint every aspect of our lives with our own biases - it’s natural and normal.

So, what do we do when we encounter a deeply held bias that seems to be destructive or, in some cases, fatal? Is there a way to beat the confirmation bias?

Fortunately, there is a relatively simple and effective technology available now. Rapid Eye Technology (RET) addresses this basic human issue in a process called “scrambling” designed specifically for dealing with these deeply held biases - opening our biases, scrambling them like scrambled eggs, and then releasing them - leaving the client free to investigate and objectively reevaluate their life experience based on evidence untainted by their own confirmation bias. Once the basic belief is released, there is no bias to confirm. When done thoroughly, the RET process can free the mind from old beliefs based on traditions and biases rather than on real data and evidence.

I feel very excited about the possibility of releasing my own confirmation biases in favor of openness and true scientific thought - the ability to actually observe, theorize/hypothesize, test, and reevaluate with a much more open mind - open to the possibility of being wrong in my theory and being okay with that - open to new and much more exciting possibilities previously considered impossible, or not considered at all.

Food for thought.

Source: PowerStates.com—Used with permission.
OREGON HYPNOTHERAPY ASSOCIATION

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Scheduled Presenters

June 20, 2009

Gloria L. Henricks - Rapid Eye Technology in Practice
Certified Alcohol and Drug Counselor in Oregon, Nationally Certified Addiction Counselor, Master Rapid Eye Technician and Licensed Marriage and Family Therapist shares how she found out about Rapid Eye Technology, why she feels it is a good fit for the work she does, how she uses it in her practice and why, how she charges clients in her private practice, why she recommends RET to a healing practitioner or counselor, how she integrates RET with other therapies, connects with other clinics, and networks with other healers. Gloria works in Addiction Medicine and has a private practice in Albany, Oregon.

Terry Pennington - How to Keep Sales Up in a Down Economy
Including what to do and what not to do when it comes to marketing and promoting your firm during these harrowing times. He will provide tips on how to make your sales and marketing efforts more successful and how to improve your skills when it comes to making your promotion do more for less. Don’t miss this opportunity to learn from a practicing professional with 40 years of experience in developing and directing the marketing efforts of firms of all sizes.

Tech Talk - How to make your own recordings and more
Learn from those who have done it—make your own recordings using your computer or learn who to go to for professional help making your own recordings. Learn how to make and sell professional quality CDs. A discussion lead by Carole Ockert, Patrick Glancy, Joseph Bennette.
Next Meeting

Saturday, June 20, 2009

Fairfield Inn, 6100 SW Meadows Rd,
Lake Oswego, Oregon

10:30-11:30 - Board Meeting
11:30 - 12:00 - Registration
12:00 - 1:00 - Catered Lunch
12:00 - 5:00 - General Meeting (5 CEUs)
5:00 - 5:30 - Membership Discussion

Members $45, Non-Members $55, Students $35
Add $10 if paid at the door

See registration form on reverse side of this page