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# American Journal of Clinical Hypnosis, Vol. 64, Number 4 Special Issue on Unconscious Intelligence

Guest Editorial by Dan Short

The Aim of Clinical Hypnosis—Intelligence or Compliance?

#### **Abstract**

The use of suggestion is a defining feature associated with most forms of hypnosis. Historically, suggestion has been utilized for suggestion's sake, with suggestive procedures, such as trance induction or trance deepening, used to theoretically increase responsiveness to suggestion. Accordingly, the oldest hypnotherapeutic models attribute positive clinical outcomes to compliance with suggestion. However, discoveries in social psychology and neuropsychology bring into question the uniqueness of hypnotic phenomena or the existence of special states of heightened suggestibility. More importantly, new evidence highlights the role of unconscious intelligence (implicit learning and decision making) in everyday life, as well as the importance of self-organizing change for neurological health and emotional thriving. In order to keep up with this growth in the broader field of psychology, scholars of hypnosis must address foundational questions such as: Is the exercise of intelligence more crucial to long-term thriving than compliance?; If the use of suggestion is merely ancillary to the activation of unconscious intelligence, then what strategies are best suited for that?; Can hypnosis activate intelligent mental operations that are not dependent on conscious intention?; If so, what are the limits of this implicit intelligence? This special issue includes five articles that address some of these questions while highlighting the unique contributions of hypnosis to the modern therapeutic milieu. Emerging perspectives and future directions for research and applied practice are also presented throughout this issue.

## The Aim of Clinical Hypnosis—Intelligence or Compliance?

The turn of the century brought with it a mini-revolution in the cognitive sciences. Equipped with impressive new technology and methodology, researchers are now able to systematically observe and measure unconscious processes, resulting in what Hassin and others (2004) call the New Unconscious. While some scholars, such as Rodolfa and Schaffer (2021), argue against the underlying assumption of "the existence of the unconscious as a specific and modifiable entity" (p. 293), the well-established use of hypnosis to mediate goal-oriented processes, without conscious oversight (e.g., post-hypnotic suggestion), implicates the involvement of higher cognition (i.e., evaluating circumstances and implementing goal-oriented behavior). Though we could attribute these automatic behaviors (that are novel, purposeful, and contextually relevant) to the conscious intelligence of an external operator (absolute compliance), it is doubtful that enough instructions from a therapist could be offered to cover every possible contingency associated with a complex life problem. If experts define intelligence as the creative use of knowledge to overcome problems (Kaufman, 2013), then might the creative use of suggestion to solve problems (without conscious involvement) be recognized as unconscious intelligence?

This brings us to Milton Erickson who was one of the first to argue that the therapeutic agency of hypnosis cannot rest entirely on compliance with suggestion. Instead, Erickson emphasized the importance of achieving an inner re-synthesis of the patient's behavior (self-organizing change) as achieved by the patient him or herself (see Lankton, 2020; Short, 2021). Another important innovator in hypnosis, Theodore Sarbin, similarly argued that the future of hypnosis depends on redefining hypnosis as a dialogue in which patients participate as agents of their actions, rather than as objects of suggestion (Sarbin, 1999). In other words, intelligence and a sense of *internal* agency are more crucial to individual thriving than is compliance. If the use of suggestion is to be redefined as an ancillary element in clinical hypnosis, then we need to recognize and develop strategies for use as primary therapeutic devices. More specifically, can hypnosis activate intelligent mental operations that are not dependent on conscious intention? And if so, what are the limits of this special intelligence?

To address questions about the relevance of hypnosis within the rapidly evolving fields of cognitive neuroscience and clinical psychology, I enlisted the help of leading researchers and clinicians who have shared their perspectives, research, and recommendations for applied practice. In this special issue, we include five articles addressing the potentials of unconscious intelligence. This discussion begins with a cross-disciplinary review of literature on unconscious intelligence and the implications for hypnosis.

# **Normative Unconscious and Hypnosis**

Having recognized the power of situational suggestion, James Braid (1852) pointed to the contagious nature of hysterical epidemics, such as tarantism (uncontrollable fits of dancing following a tarantula bite). Braid (1852) tells the story of the Bishop of Folingo, who after allowing himself to be bitten by a tarantula (to show there is nothing to fear), found that he was seized by fits of "dancing." Braid warns that being a skeptic is not enough to prevent one from succumbing to situational influences. What Braid termed the "powers of *sympathy* and *imitation*," researchers in social psychology now study in terms of social mimicry and attribution theory (i.e., people's reasons for acting are often not known to conscious awareness). Rather than having behavior guided by conscious intention, it has been repeatedly shown that intentions are constructed in response to behavior (confabulation). In other words, choices framed in conscious awareness – often referred to as "intention" or "will" – are for identity formation or preservation rather than the intelligent implementation of motives (e.g., Assagioli 1973; May 1969). Similarly, social psychologists Baumeister and Masicampo (2010) make the argument that because of its severe limitations, the function of conscious will is not to organize behavior for solving problems but rather to associate our actions with a feeling for the sake of identity formation.

Against this backdrop, we turn to the invited paper by Joel Weinberger and colleagues (this issue) that essentially turns a longstanding assumption of hypnosis on its head. Rather than hypnotic phenomena serving as evidence of interruptions to ordinary conscious control, these authors argue that *unconscious* regulation of behavior is normative. Accordingly, an essential point in neuroscience research is that we come to understand ourselves the same way that others do—by studying our actions and searching for plausible explanations. If it is normative for people to search for explanations for their behavior, and the hypnotic situation is designed to maximize external attributions, Weinberger and colleagues (2022) ask why should we be surprised when individuals (who participate in hypnosis) feel that they are not responsible for their actions and that their imagined experiences are real? After all, experienced subjects responding to hypnotic suggestion know what is supposed to happen (during hypnosis) and so they attribute the ease of

processing to compliance with suggestion. With continued practice, the ease of production increases and suggested attributions become more compelling (Weinberger et al. 2022).

Thus, Weinberger and colleagues (this issue) conclude that from a theoretical perspective, there is no need for special states or unique characteristics of hypnotic phenomena. Rather, hypnosis outcomes are readily explained using normative unconscious processes and situational factors. This conclusion reminds me of Nash (1987) who argued that once we strip away the showmanship and compelling jargon (e.g., "age regression" versus "recall" or "hallucination" versus "imagery") what remains is ordinary human behavior. In other words, groundbreaking discoveries in social psychology and neuropsychology bring into question the uniqueness of hypnotic phenomena or the existence of special states of heightened suggestibility. More importantly, new evidence highlights the role of unconscious intelligence (implicit learning and decision making) in everyday life; as well as the importance of self-organizing change for neurological health (Merzenich, 2013) as well as emotional thriving (Haidt, 2006).

# **Limits of Unconscious Intelligence**

In a landmark paper, Martin Orne (1979) made the argument that while hypnosis may be helpful in circumstances involving functional memory loss, its use does not ensure that confabulations will not be substituted for actual memories. Twenty years later, Spanos and colleagues (1999) demonstrated that false memories of infancy can be easily generated during hypnotic age regression (in 87% of subjects). Because of findings such as these, hypnosis is no longer seen as having privileged access to otherwise inaccessible memories. The subjects' strong beliefs in the reality of their recovered memories too often proved to be an illusion.

Similarly, Gyorgy Moga and Zoltan Diene (2022) tested the extent to which ideomotor signaling provides access to special knowledge not readily available to conscious awareness. As these authors point out, different varieties of ideomotor communication have been embraced in psychotherapy since the time of Pierre Janet, who pioneered the use of automatic writing during therapy. The technique was later simplified by Leslie Lecron using close-ended questioning to elicit 'yes', 'no', 'I don't know', or 'I don't want to answer' based on defined finger movements. Milton Erickson further simplified the process by suggesting automatic head movements to indicate "yes" or "no" (see Moga and Dienes 2022). These small automatic movements (microexpressions) have also been studied in the field of emotion research and found to be meaningful (Ekman 2007). However, the research reported in this special issue does not question the potential meaningfulness of ideomotor communication but rather the assumption that a popular technique, known as Chevreul's pendulum, can gain privileged access to a greater fund of general knowledge. The results provided no evidence of special unconscious knowledge that was not available to ordinary conscious review.

This finding does not refute the clinical utility of ideomotor communication. While coming to the conclusion that ideomotor responses do not necessarily indicate special knowledge the authors also posit that during therapy indirect methods of expressing sensitive knowledge could lessen the burden of responsibility (Moga and Dienes, 2022). As an example, think of the emotional crisis experienced by a client who as a childhood sexual abuse survivor was told to never speak to anyone about what happened. In my clinical experience, I have had clients tell me they are not feeling suicidal (when asked directly) but given a sheet of paper with the sentence stem "I wish..." the same person writes "...that I could die!" Thus, hypnosis may be one of many useful methods for protecting the client while collecting emotionally charged information. But,

just as Orne (1979) warned investigators to treat hypnotically recovered memories as possibilities rather than certainties, information collected through ideomotor communication should not be prioritized over other self-knowledge that is collected using skillful open-ended prompts and adequate time for careful conscious reflection.

## **Imagery**

While it is difficult to imagine the practice of modern hypnosis without the use of imagery (the pun suits my point), the question considered in this special issue is whether imagery has value beyond compliance with suggestion. More specifically, does hypnotherapeutic imagery (HTI) uniquely target unconscious intelligence? To address such questions, I offer a conceptual model constructed from a multidisciplinary review of literature that outlines a variety of HTI available for research and therapeutic application (Short, this issue).

Possibly the smallest unit of meaning within unconscious thought, an image is analogous to the phoneme, which in language enables us to distinguish one word from another. This minor structural change prepares us to make sense of more complex language structures. Similarly, a salient mental image seems to be bound up with attitudes and emotions that can facilitate new meanings for a given situation. Just as the meaning of a word transforms after changing a single letter (e.g., knot vs. not), I have found in clinical practice that a single image can radically alter the felt meaning of past experiences and/or future expectations. As a brief example, a woman in great distress, over intrusive images of her recently deceased friend, lamented that she should have never looked inside the open casket. She was having panic attacks at bedtime and insomnia. I asked her, what is the most beautiful flower you can imagine? She said that she adored white lilies. Next, I suggested she close her eyes, see her friend in the casket, and then see a beautiful shower of white lilies fall gently around her. The woman loved the experience. After this, no further therapy was needed. The addition of a single image seems to have radically transformed the meaning of her experience.

In other words, emotionally salient images, such as those that come from clients' dreams, or from powerful memories, or from symbols that are closely associated with a system of values (e.g., religion or culture) can be strategically utilized resulting in a cascading change of meaning and understanding. My clinical experience suggests that this cognitive and emotional reorganization is processed at a level of awareness that can be viscerally felt but only partially encoded in conscious thought. My general premise is that because imagery has nonlinear and multidimensional qualities it can be used as a type of language uniquely suited to unconscious processing (Short, 2021b).

## **Metaphor & Storytelling**

Also in this special issue, Consuelo Casula (this issue) makes the argument that, within the context of therapy, metaphors are used to initiate a process of unconscious exploration that opens up new horizons and new orientations. As a simple example, Casula refers to a client sharing that he "fights his illness," or that he lives "in a minefield;" to which the therapist responds by inviting the client to discover "faithful allies" or choose the "winning strategy" (all war-related metaphors). Presumably, these metaphors interact with the associational reasoning of unconscious intelligence and thus function as a unique system of language that facilitates understandings contained within embodied experience and tacit knowledge. Casula adds that by using metaphors to communicate new ideas, the therapist invites the individual to further explore a symbolic world of references.

This meeting of the minds is taken to a deeper level when, after the client's narration of his or her problem, the therapist responds with a relevant story (reciprocal narrative engagement). As Casula (this issue) states, "The therapist uses stories to enter into assonance and resonance with the recipient's inner world, to strengthen the therapeutic alliance, and also to transmit values without any attempt to impose them" (p. x). In any story, there are unspoken meanings, things to be inferred, dominant images, metaphors, and innumerable implied associations. Thus, during the process of reciprocal narrative engagement an altered state of knowing is achieved. Borrowing a term from William James, these states have a *noetic* quality. As James puts it, "They are states of insight into depths of truth unplumbed by the discursive intellect. They are illuminations, revelations, full of significance and importance, all inarticulate though they remain" (Short, 2020, p. 81).

The mental state described by James is reminiscent of comments from Milton Erickson who seemed to equate trance with a special state of mind during which unconscious problem solving is more likely to flourish. As stated by Erickson and Rossi (1976), "Trance is a special state that intensifies the therapeutic relationship and focuses the patients' attention on a few inner realities; trance does not ensure the acceptance of suggestions. Erickson depends upon certain communication devices (including metaphors and stories) to evoke, mobilize, and move a patient's associative processes and mental skills in certain directions to sometimes achieve certain therapeutic goals" (p. 171).

Another interesting point made by Casula (2022) is that stories can utilize different types of thoughts (intuitive, scientific, magical, philosophical, mystical, experiential, or utilitarian) in a harmonious, integrated, and complementary way. In other words, stories temporarily destabilize critical conscious awareness as the listener is virtually transported to other places in time and space. As explained by Milton Erickson and Ernest Rossi (1976), "Depotentiating the limitations of the individual's usual patterns of awareness thus opens up the possibility that new combinations of associations and mental skills may be evolved for creative problem solving within that individual" (p. 170). In cross-disciplinary studies, narrative transportation has been found to influence central aspects of the mind, such as self-concept, and impact expectations for the future (Green and Sestir, 2017). This represents an important advantage if we consider creativity, cognitive flexibility, and autonomy (all being elements of intelligence; Kaufman 2013) to be beneficial to clinical problem-solving.

## **Embodied Experience**

In our final invited paper, Cecilia Fabre (this issue) describes the role of embodied experience and/or the manipulation of objects in physical space during hypnosis and its impact on unconscious intelligence. While Milton Erickson is well known for his use of metaphors in the form of stories, anecdotes, tasks, and rituals; Fabre cogently argues that any object to which the patient gives meaning (what Fabre calls a metaphoric object) represents something of greater importance in the context of a particular person's life. As Fabre points out, the advantage of working with these personal objects is that it does not require the use of spoken language or conscious deliberation. Rather than depending on words to encapsulate the meaning of a metaphoric object, Fabre uses movement and spatial reorientation to process new opportunities for learning and growth.

Accordingly, neuroscience, which has long recognized the cerebellum's role in motor function, now supports the nature of its concurrent role in cognitive and emotional functions. The

cerebellum is now described as a "supervised learning machine," intricately connected to neurocognitive development, language function, working memory, executive function, and the development of cerebellar internal control models (Koziol et al., 2014), as well as learning that involves multiple timescales, protection from erasure, and spontaneous recovery of memory (Shadmehr, 2020). If purposeful movement is how unconscious intelligence begins to integrate emotional and cognitive signals, produced in different regions of the brain, and if implicit learning is radically empirical (Weinberger and Stoycheva, 2019), then the natural question for practitioners of clinical hypnosis is how to intervene with physical experiences (i.e., the client's physiological capabilities--breathing, standing, holding objects, pushing away objects, moving to a new space, etc.) to stimulate psychological adaptation and growth. To this end, Fabre offers a detailed case description with analysis to illustrate the clinical application of metaphoric objects and movement within a hypnotherapeutic context.

#### Conclusion

I imagine most will agree further research on all the topics covered in this special issue is warranted. The goal of this project is to inspire more evidence-based exploration of the role of unconscious intelligence in producing positive outcomes during clinical hypnosis. The interdisciplinary research presented in this special issue provides practitioners with firmer theoretical grounding for the use of *arational interventions* (procedures that are not intended to engage conscious logic; Weinberger and Stoycheva, 2019). Therapeutic approaches that incorporate imagery, metaphors, narratives, and embodied experience are known to be effective. Yet, these are difficult to justify without having the conceptual structure and empirical evidence needed to explain why they work as well as they do. Hopefully, this special series takes us one step further in that direction (metaphorically speaking).

In closing, I wish to express my gratitude to each of the authors who gave their time and energy, making this special issue possible. I also wish to thank the dedicated team of reviewers whose insights and attention to detail resulted in valuable feedback for the writers. My hope is that the information presented here furthers dialogue between researchers and practitioners of hypnosis as we seek to better understand the intelligent use of clinical hypnosis.

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