



The International Society of Hypnosis NEWSLETTER

Building Bridges of Understanding
2022, Volume 46, No. 2

CONTENT

- 1 -
LETTER FROM
THE PRESIDENT
- 21 -
NOTES FROM
THE EDITOR
- 23 -
BOD MEETING
- 24 -
2022 ISH AWARDS
- 28 -
MAIN INTERVIEW
Silvia Zanotta
- 31 -
BUILDING BRIDGES OF
UNDERSTANDING
Ethics, Law, and Hypnosis
- 37 -
IJCEH
- 42 -
HYPNOSIS RESEARCH
VIDEO SEMINAR
Enrica Laura Santarcangelo
- 45 -
XXII WORLD
CONGRESS OF
MEDICAL & CLINICAL
HYPNOSIS
- 45 -
BOD SITE VISIT
- 48 -
EVENT CALENDAR
- 49 -
MEMBERSHIPS
- 50 -
LIST OF
CONTRIBUTORS

JUNE 2022

A LETTER FROM THE PRESIDENT



MARK JENSEN

Our community's inspiring response to the crisis in Ukraine

Dear ISH members:

For many of us, the images from and stories about the invasion of Ukraine have been heart breaking. It does not appear that the crisis will end soon. Certainly, the effects of the trauma experienced by those on the front lines will echo for decades to come. At the same, I have been deeply inspired by our community's response to the crisis. Within hours after the invasion began on February of this year, colleagues from around the world started talking about how we could pull together resources and training opportunities to be of assistance to care providers in Ukraine and – as refugees started to

flow out of Ukraine into bordering countries – care providers in the neighboring nations of Poland, Rumania, Moldova, Hungary, and Slovakia.

We know both from our clinical experience and research that hypnotic approaches are an effective way to treat the effects of trauma (cf. Lesmana et al., 2009; O'Toole et al., 2016; Watkins, 2000). Given this, the depth of experience in the treatment of trauma and its effects in clinicians who use hypnosis as a part of their practice, and the generosity of the healers in our world community, it is not surprising that so many initiatives to help deal with the crisis began. Among the initiatives was one that began during one of our online "Coffee with the President(s)" event on March 3. This event was co-sponsored by ISH and the The British Society of Clinical and Academic Hypnosis (BSCAH). Although BSCAH's president, Jane Boissière, and I were originally planning on facilitating a discussion about what BSCAH has been doing and questions that BSCAH members may have that other ISH members could address, we very quickly pivoted to discussing the invasion and how our community could be of help.

As noted in the "Building Bridges of Support" article in the previous ISH Newsletter, after the coffee event, Dr. Kathleen Long from the European Society of Hypnosis, in discussions with Dr. Jane Boissière of the British Society of Clinical and Academic Hypnosis, suggested that ISH and the European Society of Hypnosis (ESH) collaborate to support those affected by the war. Dr. Woltemade Hartman came up with the idea of a Crisis and Intervention Committee (CIC). This idea was then enthusiastically supported by everyone involved, and so the CIC was formed, co-chaired by Callie Hattingh and Kathleen Long.



Under Callie's and Kathleen's leadership, the CIC is working to do whatever might be possible to (1) provide support, training, and resources for health care professionals supporting the people affected by war and disaster and (2) provide support and resources directly for people affected by war and disaster. They have recruited a panel of international experts in the use of hypnosis for addressing trauma and its effects as members of the committee, including Woltemade Hartman (South Africa). They first met on March 15. At that meeting, the committee were informed about the situation in the Ukraine from Alexander Tokhtamysh (professor of the Faculty of Psychology, Taras Shevchenk National University of Kyiv, and current Head of the Ericksonian and Brief Psychotherapy Society of Ukraine). Krzysztof Klajns gave an update on the needs of the Polish Ericksonian Society. They are involved in the training of health care workers supporting the displaced people of Ukraine seeking refuge in Poland. Bernhard Trenkle is compiling trauma papers and research from various countries. Dr Lisa Lombard (USA) from NPTHI developed a website in Ukrainian with resources, including the comfort kit from Dr Karen Olness to support children in crisis.

Many people have contributed to this effort, including (but not limited to) Alexander Tokhtamysh (Ukraine), Gillian Smith, (BSCAH), Ali Özden Öztürk (Turkey), Nicole Ruysschaert (Belgium), and Fitoussi Gerard (France), among many others. Cecilia Fabre (Mexico), Kasia Mirska (Poland) and Nadine Hartman (UK) will manage social media in the future. Julia Graßhoff (Germany) has also been putting in a tremendous effort to keep the resources updated.

Already the committee has achieved a great deal. They have coordinated many opportunities for free to health care providers in Poland and Ukraine, including a series of six 3-day online seminars to specialize in ego state therapy for trauma. These seminars are presented by Dr Woltemade Hartman and Carl Hattingh and two have already been completed. Please contact Carl Hattingh from AICHP for more information about this seminar series if you or someone you know could benefit (info@aichp.com.au) or <https://www.aichp.com.au/ego-state-therapy/>). Two webinar workshops specific to the topic of treating individuals who have experienced trauma have also been organized and presented by Drs Enayat Shahidi and Julie Linden. Access to recordings of these two webinars is currently available to any ISH or ESH member by contacting Shady Tonn at info@ishhypnosis.org. They will also soon be available on both the ISH and ESH websites.

Future training programs are being developed by Dr Julie Linden and a group of trauma experts in collaboration with Professor Borys Ivynev, MD, Rector of Kyiv Medical University and Vice-president of the Ukrainian Association of Psychotherapists and Psychoanalysts (Head of Department of Hypnotherapy) and Viktor Vus, the head of Mental Health in the Ukrainian Psychological Association. Hypnosis Skills For Self-Care, Self-Hypnosis, Building Agency and Resilience will be a series of short training events on the use of hypnosis with trauma management, self-care, regulation, and building resilience for health care providers to pay it forward to other providers, patients and clients who may be experiencing stress associated with these significant needs. The plan is also to develop an individual mentorship program. Please contact Julie Linden (julie@drjulielinden.com) for more information about the self-care webinars planned.

In addition, the committee has arranged for audio recordings of hypnosis scripts in Ukrainian for health care workers and people affected by war and disaster. By the time this letter goes to print, these will already have been posted on both the ISH and ESH websites. We envision the CIC as a standing committee, which will continue to provide resources for people affected by trauma and war worldwide. Accordingly, we aim to include more translations of the audio recordings in other languages in the future.



An important task of the committee has been to create a resource hub that would provide access to important resources, such as lists of books, scripts, and other material. These include the following:

Audio Recordings

- **You can find peace within yourself** - Aleksandra Nowak
- **Wisdom of your body** – Katarzyna Szymańska
- **Relaxation in challenging times** - Urszula Sołtys-Para

Resources for Children

- **A tale of rays of hope** - The fairy tale aims to support children outside Ukraine whose parents have remained in the country. It inspires hope and keeps spirits up. - Agnieszka Bleja
- **Before you say "goodnight" to your child** - tips on how to take care of a child's anxiety before going to bed. - Agnieszka Bleja
- **Difficult topics: War** - A book contains tips on how to talk to children about war. - Bianca-Beata Kotoro, Wiesław Sokolu
- Polish fairy tales to support children who have difficulty falling asleep (free PDF)

Other resources and links the committee has compiled include:

- **Website:** Helping Children Cope with the Challenges of War - <http://www.h3cw.org> - Dr Lisa Lombard (NHPTI)
- **Comfort kits for Children** / Mini-exercises to quickly show/teach troubled children - Dr Karen Olness
- **Self Aid for Refugees** Polish Resources - <https://www.p-i-e.pl/wsparcie-dla-ukrainy>
- **Apps on Google Play** - Comfort Talk Pro - Dr Elvira Lang (Think she is making it available for free to Ukrainians)
- **Audio Recordings:** <http://www.voice4comfort.com/> - Dr Carla Frankenhuijs
- **Guides** - WHO: [Doing What Matters in Times of Stress \(who.int\)](https://www.who.int)

Again, these resources – or information about where you and your clients can find these resources – are posted on the ISH and ESH websites.

And the future? First, and as noted previously, there is agreement that the committee can and should be a standing committee. The need for resources and services for individuals who have or are experiencing war and disaster will continue. ISH and ESH will therefore continue to work closely together to build on the resources that have already been pulled together. To facilitate this, and in addition to information about these resources available to our members via our individual websites, there is also serious discussion and plans to develop a special joint-website where people who could benefit from these resources could access them. The committee also plans to organize opportunities for ongoing supervision of clinicians doing the direct work in this area.

Finally, the committee plans to initiate a project to invite ISH and ESH members to share scripts that would be useful to both children and adults who have experienced trauma. These scripts would be translated and then audio recorded into a variety of languages. Please keep your eyes open for the invitation to submit these scripts. In the meantime, if you already have one or more scripts you believe would be of particular help, please feel free to send a file with the script to one or both of the committee's chairs: Carl Hattingh at calliehattingh@gmail.com and Kathleen Long at kathleen@maxamind.co.uk

Let me end this note by expressing my deep sense of gratitude to Callie, Kathleen, the members of the CIC, and all of our other colleagues who have so quickly come to the aid of the people of Ukraine and people everywhere who have experienced or who might experience trauma in the future. Even in the midst of a crisis, the work that you are doing is inspiring and gives me hope. Thank you.



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The first in-person meeting after 3 years of virtual contact.
ISH Board members from left: Cecilia Fabre, Katalin Varga, Krys Klajs, Giuseppe De Benedittis & Mark Jensen.



EIN BRIEF DES PRÄSIDENTEN

ÜBERSETZT VON SHADY TONN

Die inspirierende Reaktion unserer Gemeinschaft auf die Krise in der Ukraine

Liebe ISH-Mitglieder:

Für viele von uns sind die Bilder und Berichte über den Einmarsch in der Ukraine herzerreißend. Es sieht nicht so aus, als würde die Krise bald enden. Sicherlich werden die Auswirkungen des Traumas, das die Menschen an der Front erlebt haben, noch jahrzehntelang nachhallen. Gleichzeitig hat mich die Reaktion unserer Gemeinschaft auf die Krise tief beeindruckt. Schon wenige Stunden nach Beginn der Invasion im Februar dieses Jahres begannen Kollegen aus der ganzen Welt darüber zu sprechen, wie wir Ressourcen und Schulungsmöglichkeiten zusammenbringen könnten, um den Pflegekräften in der Ukraine und - als die Flüchtlinge aus der Ukraine in die angrenzenden Länder zu strömen begannen - den Pflegekräften in den Nachbarländern Polen, Rumänien, Moldawien, Ungarn und der Slowakei zu helfen.

Wir wissen sowohl aus unserer klinischen Erfahrung als auch aus der Forschung, dass hypnotische Ansätze eine wirksame Methode zur Behandlung der Auswirkungen von Traumata sind (vgl. Lesmana et al., 2009; O'Toole et al., 2016; Watkins, 2000). In Anbetracht dieser Tatsache, der umfassenden Erfahrung in der Behandlung von Traumata und deren Auswirkungen bei Klinikern, die Hypnose als Teil ihrer Praxis einsetzen, und der Großzügigkeit der Heiler in unserer Weltgemeinschaft ist es nicht überraschend, dass so viele Initiativen zur Bewältigung der Krise entstanden sind. Eine dieser Initiativen wurde während einer unserer Online-Veranstaltungen "Kaffee mit dem/den Präsidenten" am 3. März ins Leben gerufen. Diese Veranstaltung wurde gemeinsam von der ISH und der British Society of Clinical and Academic Hypnosis (BSCAH) gesponsert. Obwohl die Präsidentin der BSCAH, Jane Boissière, und ich ursprünglich vorhatten, eine Diskussion über die Aktivitäten der BSCAH und Fragen der BSCAH-Mitglieder zu führen, die von anderen ISH-Mitgliedern beantwortet werden könnten, sind wir sehr schnell dazu übergegangen, über die Invasion zu sprechen und darüber, wie unsere Gemeinschaft helfen kann.

Wie im Artikel "Building Bridges of Support" im letzten ISH Newsletter erwähnt, schlug Dr. Kathleen Long von der European Society of Hypnosis nach dem Kaffee-Event in Gesprächen mit Dr. Jane Boissière von der British Society of Clinical and Academic Hypnosis vor, dass die ISH und die European Society of Hypnosis (ESH) zusammenarbeiten, um die vom Krieg Betroffenen zu unterstützen. Dr. Woltemade Hartman hatte die Idee eines Krisen- und Interventionskomitees (CIC). Diese Idee wurde dann von allen Beteiligten begeistert unterstützt, und so wurde das CIC unter dem gemeinsamen Vorsitz von Callie Hattingh und Kathleen Long gegründet.

Unter der Leitung von Callie Hattingh und Kathleen Long arbeitet der CIC daran, alles Mögliche zu tun, um (1) Unterstützung, Schulungen und Ressourcen für Fachkräfte des Gesundheitswesens bereitzustellen, die den von Krieg und Katastrophen betroffenen Menschen helfen, und (2) Unterstützung und Ressourcen direkt für die von Krieg und Katastrophen betroffenen Menschen bereitzustellen. Sie haben eine Gruppe internationaler Experten für den Einsatz von Hypnose zur Behandlung von Traumata und deren Auswirkungen als Mitglieder des Ausschusses gewonnen, darunter Woltemade Hartman (Südafrika). Die erste Sitzung fand am 15. März statt. Bei dieser Sitzung wurde der Ausschuss von Alexander Tokhtamysh (Professor an der Fakultät für Psychologie der Nationalen Taras



-Schewtschenk-Universität Kiew und derzeitiger Leiter der ukrainischen Gesellschaft für Ericksonianische und Kurzzeitpsychotherapie) über die Lage in der Ukraine informiert. Krzysztof Klajs gab einen Überblick über die Bedürfnisse der Polnischen Ericksonian Society. Sie ist an der Ausbildung von Gesundheitspersonal beteiligt, welche die Vertriebenen aus der Ukraine unterstützt, die in Polen Zuflucht suchen. Bernhard Trenkle stellt Traumapapiere und Forschungsergebnisse aus verschiedenen Ländern zusammen. Dr. Lisa Lombard (USA) vom NPTHI entwickelte eine Website in ukrainischer Sprache mit Ressourcen, darunter das Trostpaket von Dr. Karen Olness zur Unterstützung von Kindern in Krisen.

Viele Menschen haben dazu beigetragen, darunter (aber nicht nur) Alexander Tokhtamysh (Ukraine), Gillian Smith, (BSCAH), Ali Özden Öztürk (Türkei), Nicole Ruyschaert (Belgien) und Fitoussi Gerard (Frankreich), neben vielen anderen. Cecilia Fabre (Mexiko), Kasia Mirska (Polen) und Nadine Hartman (Vereinigtes Königreich) werden sich in Zukunft um die sozialen Medien kümmern. Julia Graßhoff (Deutschland) hat sich ebenfalls sehr bemüht, die Ressourcen auf dem neuesten Stand zu halten.

Der Ausschuss hat bereits eine Menge erreicht. Sie haben viele kostenlose Angebote für Gesundheitsdienstleister in Polen und der Ukraine koordiniert, darunter eine Reihe von sechs dreitägigen Online-Seminaren zur Spezialisierung auf die Ego-State-Therapie bei Traumata. Diese Seminare werden von Dr. Woltemade Hartman und Carl Hattingh durchgeführt, zwei davon sind bereits abgeschlossen. Bitte kontaktieren Sie Carl Hattingh vom AICHP für weitere Informationen über diese Seminarreihe, wenn Sie oder jemand, den Sie kennen, davon profitieren könnte (info@aichp.com.au) oder <https://www.aichp.com.au/ego-state-therapy>. Zwei Webinar-Workshops speziell zum Thema der Behandlung von Menschen, die ein Trauma erlebt haben, wurden ebenfalls organisiert und von Dr. Enayat Shahidi und Julie Linden präsentiert. Zugang zu den Aufzeichnungen dieser beiden Webinare können derzeit alle ISH- und ESH-Mitglieder erhalten, indem sie sich an Shady Tonn unter info@ishypnosis.org wenden. Sie werden in Kürze auch auf den Websites der ISH und der ESH verfügbar sein.

Zukünftige Trainingsprogramme werden von Dr. Julie Linden und einer Gruppe von Traumaexperten in Zusammenarbeit mit Professor Dr. Borys Ivynev, Rektor der Medizinischen Universität Kiew und Vizepräsident der Ukrainischen Vereinigung der Psychotherapeuten und Psychoanalytiker (Leiter der Abteilung für Hypnotherapie) und Viktor Vus, dem Leiter der Abteilung für psychische Gesundheit in der Ukrainischen Psychologengemeinschaft, entwickelt. Hypnosis Skills For Self-Care, Self-Hypnosis, Building Agency and Resilience wird eine Reihe von kurzen Schulungsveranstaltungen über den Einsatz von Hypnose bei der Traumabewältigung, der Selbstfürsorge, der Regulierung und dem Aufbau von Resilienz für Gesundheitsdienstleister sein, um anderen Dienstleistern, Patienten und Klienten, die möglicherweise unter Stress im Zusammenhang mit diesen wichtigen Bedürfnissen leiden, zu helfen. Es ist auch geplant, ein individuelles Mentorenprogramm zu entwickeln. Bitte kontaktieren Sie Julie Linden (julie@drjulielinden.com) für weitere Informationen über die geplanten Webinare zur Selbstfürsorge.

Darüber hinaus hat der Ausschuss Audioaufnahmen von Hypnoseskripten in ukrainischer Sprache für Mitarbeiter des Gesundheitswesens und Menschen, die von Krieg und Katastrophen betroffen sind, zusammengestellt. Wenn dieser Brief in Druck geht, werden diese bereits auf den Websites der ISH und der ESH veröffentlicht sein. Wir stellen uns den CIC als einen ständigen Ausschuss vor, der weiterhin Ressourcen für Menschen bereitstellt, die weltweit von Trauma und Krieg betroffen sind. Dementsprechend streben wir an, in Zukunft weitere Übersetzungen der Audioaufnahmen in andere Sprachen aufzunehmen.

Eine wichtige Aufgabe des Ausschusses war es, eine Ressourcendreh-scheibe einzurichten, die Zugang zu wichtigen Ressourcen wie Listen von



Büchern, Skripten und anderem Material bietet. Dazu gehören die folgenden

Audio-Aufnahmen

- Du kannst den Frieden in dir selbst finden - Aleksandra Nowak
- Die Weisheit deines Körpers - Katarzyna Szymańska
- Entspannung in schwierigen Zeiten - Urszula Sołtyś-Para

Ressourcen für Kinder

- Ein Märchen mit Lichtblicken" - Das Märchen zielt darauf ab, Kinder außerhalb der Ukraine zu unterstützen, deren Eltern im Land geblieben sind. Es weckt die Hoffnung und hält die Stimmung aufrecht. - Agnieszka Bleja
- Bevor Sie Ihrem Kind "Gute Nacht" sagen - Tipps, wie man die Ängste eines Kindes vor dem Schlafengehen abbauen kann. - Agnieszka Bleja
- Schwierige Themen: Krieg - Ein Buch enthält Tipps, wie man mit Kindern über den Krieg sprechen kann. - Bianca-Beata Kotoro, Wiesław Sokół
- Polnische Märchen zur Unterstützung von Kindern, die Schwierigkeiten beim Einschlafen haben (kostenloses PDF)

Weitere Ressourcen und Links, die der Ausschuss zusammengestellt hat, sind:

- Website: Helping Children Cope with the Challenges of War - <http://www.h3cw.org> - Dr. Lisa Lombard (NHPTI)
- Trostpakete für Kinder / Mini-Übungen, die man besorgten Kindern schnell zeigen/beibringen kann - Dr. Karen Olness
- Selbsthilfe für Flüchtlinge - Polnische Ressourcen - <https://www.p-i-e.pl/wsparcie-dla-ukrainy>
- Apps auf Google Play - Comfort Talk Pro - Dr. Elvira Lang (ich glaube, sie stellt es den Ukrainern kostenlos zur Verfügung)
- Audio-Aufnahmen: <http://www.voice4comfort.com> - Dr. Carla Frankenhuijs
- Leitfäden - WHO: Doing What Matters in Times of Stress (who.int)

Auch diese Ressourcen - oder Informationen darüber, wo Sie und Ihre Kunden diese Ressourcen finden können - finden Sie auf den Websites der ISH (<https://www.ishhypnosis.org/crisis-and-intervention-committee>) und der ESH.

Und die Zukunft? Erstens besteht, wie bereits erwähnt, Einigkeit darüber, dass der Ausschuss ein ständiger Ausschuss sein kann und sollte. Der Bedarf an Ressourcen und Diensten für Menschen, die Krieg und Katastrophen erlebt haben oder gerade erleben, wird weiter bestehen. ISH und ESH werden daher weiterhin eng zusammenarbeiten, um auf den bereits zusammengetragenen Ressourcen aufzubauen. Um dies zu erleichtern, und zusätzlich zu den Informationen über diese Ressourcen, die unseren Mitgliedern über unsere individuellen Websites zur Verfügung stehen, gibt es auch ernsthafte Diskussionen und Pläne, eine spezielle gemeinsame Website zu entwickeln, auf der Menschen, die von diesen Ressourcen profitieren könnten, Zugang dazu haben. Der Ausschuss plant auch, Möglichkeiten für eine kontinuierliche Supervision von Klinikern zu organisieren, die in diesem Bereich direkt arbeiten.

Schließlich plant der Ausschuss, ein Projekt zu initiieren, bei dem ISH- und ESH-Mitglieder aufgefordert werden, Skripte zur Verfügung zu stellen, die sowohl für Kinder als auch für Erwachsene, die ein Trauma erlebt haben, nützlich wären. Diese Skripte sollen übersetzt und dann in verschiedenen Sprachen aufgenommen werden. Bitte halten Sie die Augen offen für die Einladung, diese Skripte einzureichen. Wenn Sie in der Zwischenzeit bereits ein oder mehrere Skripte haben, von denen Sie glauben, dass sie besonders hilfreich wären, können Sie gerne eine Datei mit dem Skript an einen oder beide Vorsitzende des Ausschusses schicken: Carl



Hattingh unter calliehattingh@gmail.com und Kathleen Long unter kathleen@maxamind.co.uk.

Abschließend möchte ich meine tiefe Dankbarkeit gegenüber Callie, Kathleen, den Mitgliedern des CIC und all unseren anderen Kollegen zum Ausdruck bringen, die den Menschen in der Ukraine und überall sonst, die ein Trauma erlebt haben oder in Zukunft erleben könnten, so schnell zu Hilfe gekommen sind. Selbst inmitten einer Krise ist die Arbeit, die Sie leisten, inspirierend und gibt mir Hoffnung. Ich danke Ihnen.

Herzlichst,
Mark P. Jensen

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**The BOD of ISH:
some in person, some online on the screens**
(From left to right: Giuseppe De Benedittis, Enayatollah Shahidi, Katalin Varga, Mark Jensen (with Callie Hattingh) Kris Klajs, Bernhard Trenkle (with Brian Allen), Cecilia Fabre, Anita Jung (with Woltemade Hartman))





LA LETTRE DU PRÉSIDENT (FR)

TRADUCTION NICOLE RUYSSCHAERT

La réponse inspirante de notre communauté à la crise en Ukraine

Chers membres de l'ISH:

Pour beaucoup d'entre nous, les images et les récits de l'invasion de l'Ukraine nous ont brisé le cœur. Il ne semble pas que la crise se termine bientôt. Il est certain que les effets du traumatisme subi par ceux qui se trouvent en première ligne se feront sentir pendant des décennies. En même temps, j'ai été profondément inspiré par la réponse de notre communauté à la crise. Dans les heures qui ont suivi le début de l'invasion en février de cette année, des collègues du monde entier ont commencé à discuter comment nous pourrions réunir des ressources et des opportunités de formation pour aider les soignants en Ukraine et, au fur et à mesure que les réfugiés commençaient à quitter l'Ukraine pour se rendre dans les pays voisins, les soignants dans les pays voisins (Pologne, Roumanie, Moldavie, Hongrie et Slovaquie).

Nous savons, tant par notre expérience clinique que par la recherche, que les approches hypnotiques sont un moyen efficace de traiter les effets du traumatisme (cf. Lesmana et al., 2009 ; O'Toole et al., 2016 ; Watkins, 2000). Compte tenu de cela, de la profondeur de l'expérience dans le traitement du traumatisme et de ses effets chez les cliniciens qui utilisent l'hypnose dans le cadre de leur pratique, et de la générosité des guérisseurs de notre communauté mondiale, il n'est pas surprenant que tant d'initiatives pour aider à gérer la crise aient vu le jour. Parmi ces initiatives, il y en a une qui a commencé lors d'un de nos événements en ligne "Café avec le(s) président(s)" le 3 Mars. Cet événement était coparrainé par l'ISH et la British Society of Clinical and Academic Hypnosis (BSCAH). Bien que la présidente de la BSCAH, Jane Boissière, et moi-même avions initialement prévu d'animer une discussion sur les activités de la BSCAH et les questions que les membres de la BSCAH pourraient avoir et auxquelles les autres membres de l'ISH pourraient répondre, nous avons très vite décidé de discuter l'invasion et à quelle manière notre communauté pourrait être utile.

Comme indiqué dans l'article "Building Bridges of Support" de la précédente Newsletter de l'ISH, après le café, le Dr Kathleen Long de la Société Européenne d'Hypnose, en discussion avec le Dr Jane Boissière de la Société Britannique d'Hypnose Clinique et Académique, a suggéré que l'ISH et la Société Européenne d'Hypnose (ESH) collaborent pour soutenir les personnes affectées par la guerre. Le Dr Woltemade Hartman a proposé l'idée d'un Comité d'Intervention de Crise (CIC). Cette idée a ensuite été soutenue avec enthousiasme par toutes les personnes impliquées, et le CIC a donc été formé, coprésidé par Callie Hattingh et Kathleen Long.

Sous la direction de Callie et Kathleen, le CIC s'engage à faire tout ce qui est possible pour (1) fournir un soutien, une formation et des ressources aux professionnels de la santé qui aident les personnes touchées par la guerre et les catastrophes et (2) fournir un soutien et des ressources directement aux personnes touchées par la guerre et les catastrophes. Ils ont recruté un panel d'experts internationaux dans l'utilisation de l'hypnose pour traiter les traumatismes et leurs effets comme membres du comité, y inclus Woltemade Hartman (Afrique du Sud). Ils se sont réunis pour la première fois le 15 mars. Lors de cette réunion, le comité a été informé de la situation en Ukraine par Alexander Tokhtamysh (professeur de la Faculté de psychologie) et Taras Shevchenk de l'Université nationale de Kiev, et actuel chef de la Société de psychothérapie Ericksonienne et brève d'Ukraine). Krzysztof Klajs a fait le point sur les besoins de la Société Ericksonienne Polonaise. Ils sont impliqués dans la formation des pro-



professionnels de santé qui soutiennent les personnes déplacées d'Ukraine cherchant refuge en Pologne. Bernhard Trenkle est en train de compiler des documents et des recherches sur le traumatisme provenant de différents pays. Le Dr Lisa Lombard (USA) du NPTI a développé un site web en ukrainien avec des ressources, y compris le kit de confort du Dr Karen Olness pour soutenir les enfants en crise.

De nombreuses personnes ont contribué à cet effort, notamment (mais pas exclusivement) Alexander Tokhtamysh (Ukraine), Gillian Smith, (BSCAH), Ali Özden Öztürk (Turquie), Nicole Ruysschaert (Belgique), et Fitoussi Gerard (France), parmi beaucoup d'autres. Cecilia Fabre (Mexique), Kasia Mirska (Pologne) et Nadine Hartman (Royaume-Uni) géreront les médias sociaux à l'avenir. Julia Graßhoff (Allemagne) a également déployé des efforts considérables pour tenir à jour les ressources.

Le comité a déjà réalisé beaucoup de choses. Il a coordonné de nombreuses possibilités de formation gratuite pour les professionnels de soins en Pologne et en Ukraine, notamment une série de six séminaires en ligne de trois jours pour se spécialiser dans la thérapie des états du moi pour les traumatismes. Ces séminaires sont présentés par le Dr Woltemade Hartman et Carl Hattingh et deux d'entre eux ont déjà été réalisés. Veuillez contacter Carl Hattingh de l'AICHP pour plus d'informations sur cette série de séminaires si vous ou quelqu'un que vous connaissez pourrait en bénéficier (info@aichp.com.au) ou (<https://www.aichp.com.au/ego-state-therapy>). Deux ateliers en ligne spécifiques au traitement des personnes ayant subi un traumatisme ont également été organisés et présentés par les docteurs Enayat Shahidi et Julie Linden. L'accès aux enregistrements de ces deux webinaires est actuellement disponible pour tout membre de l'ISH ou de l'ESH en contactant Shady Tonn à info@ishhypnosis.org. Ils seront également bientôt disponibles sur les sites Internet de l'ISH et de l'ESH.

Les futurs programmes de formation sont en cours d'élaboration par le Dr Julie Linden et un groupe d'experts en traumatisme, en collaboration avec le professeur Borys Ivynev, MD, recteur de l'Université de médecine de Kiev et vice-président de l'Association ukrainienne des psychothérapeutes et psychanalystes (chef du département d'hypnothérapie) et Viktor Vus, responsable de la santé mentale au sein de l'Association ukrainienne de psychologie. Hypnosis Skills For Self-Care, Self-Hypnosis, Building Agency and Resilience sera une série de formations courtes sur l'utilisation de l'hypnose pour la gestion des traumatismes, l'autosoin, la régulation et le renforcement de la résilience, destinées aux prestataires de soins de santé, afin qu'ils puissent en faire profiter d'autres prestataires, patients et clients qui peuvent subir un stress lié à ces besoins importants. L'objectif est également de développer un programme de mentorat individuel. Veuillez contacter Julie Linden (julie@drjulielinden.com) pour plus d'informations sur les webinaires d'autosoins prévus.

En outre, le comité a pris des dispositions pour obtenir des enregistrements audios de scripts d'hypnose en ukrainien pour les travailleurs de la santé et les personnes touchées par la guerre et les catastrophes. Au moment où cette lettre sera imprimée, ces enregistrements auront déjà été publiés sur les sites Internet de l'ISH et de l'ESH. Nous envisageons le CIC comme un comité permanent, qui continuera à fournir des ressources aux personnes touchées par les traumatismes et la guerre dans le monde entier. Par conséquent, nous souhaitons inclure davantage de traductions des enregistrements audio dans d'autres langues à l'avenir.

Une tâche importante du comité a été de créer un centre de ressources qui donnerait accès à des ressources importantes, telles que des listes de livres, de scripts et d'autres documents. Il s'agit notamment des éléments suivants

Enregistrements audio:

- Vous pouvez trouver la paix en vous - Aleksandra Nowak
- La sagesse de votre corps - Katarzyna Szymańska



- La relaxation dans les moments difficiles - Urszula Sołtys-Para

Ressources pour les enfants

- Un conte de rayons d'espoir" - Ce conte de fées vise à soutenir les enfants hors d'Ukraine dont les parents sont restés dans le pays. Il inspire l'espoir et permet de garder le moral. - Agnieszka Bleja
- Avant de dire "bonne nuit" à votre enfant - Conseils pour soigner l'anxiété d'un enfant avant d'aller au lit. - Agnieszka Bleja
- Sujets difficiles: La guerre - Un livre contenant des conseils sur la façon de parler de la guerre aux enfants. - Bianca-Beata Kotoro, Wiesław Sokolu
- Contes de fées polonais pour soutenir les enfants qui ont des difficultés à s'endormir (PDF gratuit)

Voici d'autres ressources et liens que le comité a compilés:

- Site Web : Aider les enfants à gérer les défis de la guerre - <http://www.h3cw.org> - Dr Lisa Lombard (NHPTI)
- Kits de confort pour les enfants / Mini-exercices pour montrer/enseigner rapidement aux enfants en difficulté - Dr Karen Olness
- Ressources polonaises d'auto-assistance pour les réfugiés - <https://www.p-i-e.pl/wsparcie-dla-ukrainy>
- Apps sur Google Play - Comfort Talk Pro - Dr Elvira Lang (Je pense qu'elle le met gratuitement à la disposition des Ukrainiens)
- Enregistrements audio: <http://www.voice4comfort.com> - Dr Carla Frankenhuis
- Guides - OMS: Faire ce qui compte en période de stress (who.int)

Encore une fois, ces ressources - ou les informations sur les endroits où vous et vos clients pouvez trouver ces ressources - sont affichées sur les sites Web de l'ISH et de l'ESH.

Et l'avenir ? Tout d'abord, et comme indiqué précédemment, il y a accord sur le fait que le comité peut et doit être un comité permanent. Le besoin de ressources et de services pour les personnes qui ont vécu ou vivent une guerre ou une catastrophe va continuer. L'ISH et l'ESH continueront donc à travailler en étroite collaboration pour bénéficier des ressources qui ont déjà été rassemblées. Pour faciliter cela, et en plus des informations sur ces ressources disponibles pour nos membres via nos sites web individuels, il y a également une discussion sérieuse et des plans pour développer un site web conjoint spécial où les personnes qui pourraient bénéficier de ces ressources pourraient y accéder. Le comité prévoit également d'organiser des opportunités de supervision continue des cliniciens qui font le travail direct dans ce domaine.

Enfin, le comité prévoit de lancer un projet visant à inviter les membres de l'ISH et de l'ESH à partager des scripts qui seraient utiles aux enfants et aux adultes ayant subi un traumatisme. Ces scripts seront traduits puis enregistrés dans plusieurs langues. Gardez les yeux ouverts pour l'invitation à soumettre ces scripts. Entre-temps, si vous avez déjà un ou plusieurs scénarios qui vous semblent particulièrement utiles, n'hésitez pas à envoyer un fichier avec le scénario à l'un ou aux deux présidents du comité: Carl Hattingh à calliehattingh@gmail.com et Kathleen Long à kathleen@maxamind.co.uk

Permettez-moi de terminer cette note en exprimant ma profonde gratitude envers Callie, Kathleen, les membres du CIC et tous nos autres collègues qui sont venus si rapidement en aide au peuple ukrainien et à tous ceux qui ont subi ou pourraient subir des traumatismes à l'avenir. Même au milieu d'une crise, le travail que vous faites est une source d'inspiration et me donne de l'espoir. Je vous remercie.

Chaleureusement,
Mark P. Jensen



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The BOD visited the site of the 2024 ISH meeting: Jagellonian University, Auditorium Maximum, Krakow



LETTERA DEL PRESIDENTE (IT)

TRADUZIONE IN ITALIANO DI CONSUELO CASULA

La risposta stimolante della nostra comunità alla crisi in Ucraina

Cari membri di ISH:

Per molti di noi le immagini e le storie dell'invasione dell'Ucraina sono state strazianti. Sembra che la crisi non finirà presto. Di certo, gli effetti del trauma subito da coloro che si trovano in prima linea riecheggeranno nei prossimi decenni. Nello stesso tempo, sono stato profondamente ispirato dalla risposta della nostra comunità alla crisi. Poche ore dopo l'inizio dell'invasione, nel febbraio di quest'anno, i colleghi di tutto il mondo hanno iniziato a parlare di come mettere insieme risorse e opportunità di formazione per fornire assistenza agli operatori sanitari in Ucraina e, dato che i rifugiati hanno iniziato a uscire dall'Ucraina verso i Paesi confinanti, anche agli operatori sanitari delle nazioni vicine: Polonia, Romania, Moldavia, Ungheria e Slovacchia.

Sappiamo sia dalla nostra esperienza clinica che dalla ricerca che gli approcci ipnotici sono un modo efficace per trattare gli effetti del trauma (cfr. Lesmana et al., 2009; O'Toole et al., 2016; Watkins, 2000). Alla luce della profonda esperienza nel trattamento del trauma e dei suoi effetti da parte dei clinici che utilizzano l'ipnosi come parte della loro pratica e della generosità dei terapeuti della nostra comunità mondiale, non sorprende che siano nate così tante iniziative per aiutare a gestire la crisi. Tra queste iniziative ce n'è una che è nata durante uno dei nostri eventi online "Coffee with the President(s)" del 3 marzo. Questo evento è stato co-sponsorizzato dall'ISH e dalla British Society of Clinical and Academic Hypnosis (BSCAH). Sebbene la presidente della BSCAH, Jane Boissière, e io avessimo inizialmente pianificato di facilitare una discussione su ciò che la BSCAH sta facendo e sulle richieste che i membri della BSCAH potrebbero avere e che gli altri membri della ISH potrebbero soddisfare, ci siamo rapidamente orientati a discutere dell'invasione e di come la nostra comunità potrebbe essere d'aiuto.

Come si è detto nell'articolo "Building Bridges of Support" (Costruire ponti di sostegno) della precedente Newsletter ISH, dopo il caffè, Kathleen Long presidente della European Society of Hypnosis, discutendo con Jane Boissière della British Society of Clinical and Academic Hypnosis, ha suggerito che ISH e la European Society of Hypnosis (ESH) collaborino per sostenere le persone colpite dalla guerra. Woltemade Hartman ha proposto l'idea di un Comitato di Crisi e Intervento (CIC). L'idea è stata sostenuta con entusiasmo da tutti i partecipanti e così è stato costituito il CIC, co-presieduto da Callie Hattingh e Kathleen Long.

Sotto la guida di Callie e Kathleen, il CIC sta lavorando per fare tutto il possibile per (1) fornire sostegno, formazione e risorse agli operatori sanitari che assistono le persone colpite da guerre e disastri e (2) fornire sostegno e risorse direttamente alle persone colpite da guerre e disastri. Hanno così reclutato un gruppo di esperti internazionali nell'uso dell'ipnosi per affrontare il trauma e i suoi effetti come membri del comitato, tra cui Woltemade Hartman (Sudafrica). Il comitato si è riunito per la prima volta il 15 marzo. In quell'occasione, il comitato è stato informato sulla situazione in Ucraina da Alexander Tokhtamysh, professore della Facoltà di Psicologia dell'Università Nazionale Taras Shevchenk di Kiev e attuale responsabile della Società di Psicoterapia Ericksoniana e Breve dell'Ucraina. Krzysztof Klajs ha fornito un aggiornamento sulle esigenze della Società Ericksoniana polacca. La



società è impegnata nella formazione di operatori sanitari a sostegno degli sfollati ucraini che cercano rifugio in Polonia. Bernhard Trenkle sta raccogliendo documenti e ricerche sui traumi provenienti da vari Paesi. Lisa Lombard (USA) del NPTI ha sviluppato un sito web in ucraino con risorse, tra cui il kit di conforto di Karen Olness per sostenere i bambini in crisi.

Molte persone hanno contribuito a questo impegno, tra cui (ma non solo) Alexander Tokhtamysh (Ucraina), Gillian Smith (BSCAH), Ali Özden Öztürk (Turchia), Nicole Ruyschaert (Belgio) e Gérard Fitoussi (Francia). Cecilia Fabre (Messico), Kasia Mirska (Polonia) e Nadine Hartman (Regno Unito) gestiranno i social media in futuro. Anche Julia Graßhoff (Germania) si è impegnata a fondo per tenere aggiornate le risorse.

Il comitato ha già ottenuto molti risultati. Hanno coordinato molte opportunità gratuite per gli operatori sanitari in Polonia e Ucraina, tra cui una serie di sei seminari online di tre giorni per specializzarsi nella terapia dello stato dell'Io per i traumi. Questi seminari sono presentati dai Woltemade Hartman e Callie Hattingh e due sono già stati completati. Contattate Carl Hattingh dell'AICHP per ulteriori informazioni su questa serie di seminari se voi o qualcuno che conoscete potrebbe trarne beneficio (info@aichp.com.au) o <https://www.aichp.com.au/ego-state-therapy/>). Sono stati inoltre organizzati e presentati da Enayat Shahidi e Julie Linden due webinar specifici sul tema del trattamento di persone che hanno subito traumi. L'accesso alle registrazioni di questi due webinar è attualmente disponibile per qualsiasi membro ISH o ESH contattando Shady Tonn all'indirizzo info@ishhypnosis.org. Saranno presto disponibili anche sui siti web di ISH ed ESH.

I futuri programmi di formazione sono in fase di sviluppo da parte di Julie Linden e di un gruppo di esperti di traumi in collaborazione con Borys Ivynev, medico, rettore dell'Università di Medicina di Kiev e vicepresidente dell'Associazione ucraina degli psicoterapeuti e degli psicoanalisti (capo del dipartimento di ipnoterapia) e Viktor Vus, responsabile della salute mentale dell'Associazione psicologica ucraina.

Hypnosis Skills For Self-Care, Self-Hypnosis, Building Agency and Resilience sarà una serie di brevi eventi formativi sull'uso dell'ipnosi per la gestione dei traumi, l'autocura, la regolazione e la costruzione della resilienza per gli operatori sanitari, in modo da poter dare una mano ad altri operatori, pazienti e clienti che potrebbero vivere lo stress associato a questi bisogni significativi. Il piano prevede anche lo sviluppo di un programma di *mentorship* individuale. Per ulteriori informazioni sui webinar sull'autocura in programma, contattare Julie Linden (julie@drjulielinden.com).

Inoltre, il comitato ha predisposto delle registrazioni audio di testi di ipnosi in ucraino per gli operatori sanitari e le persone colpite da guerre e disastri. Quando questa lettera verrà stampata, saranno già state pubblicate sui siti web dell'ISH e dell'ESH. Pensiamo che il CIC sia un comitato permanente, che continuerà a fornire risorse alle persone colpite da traumi e guerre in tutto il mondo. Di conseguenza, ci proponiamo di includere nel prossimo futuro altre traduzioni delle registrazioni audio in altre lingue.

Un compito importante del comitato è stato quello di creare un *hub* che consenta l'accesso a risorse importanti, come elenchi di libri, script e altro materiale. Questi includono

Registrazioni audio

- Puoi trovare la pace dentro di te, di Aleksandra Nowak
- La saggezza del corpo, di Katarzyna Szymańska



- Rilassarsi in tempi difficili, di Urszula Sołtys-Para

Risorse per i bambini

- Una fiaba di raggi di speranza. La fiaba mira a sostenere i bambini fuori dall'Ucraina i cui genitori sono rimasti nel Paese. Ispira speranza e mantiene alto il morale, di Agnieszka Bleja
- Prima di dare la "buonanotte" a tuo figlio. Consigli su come prendersi cura dell'ansia di un bambino prima di andare a letto di Agnieszka Bleja
- Argomenti difficili: Guerra. I libro contiene consigli su come parlare di guerra ai bambini, di Bianca-Beata Kotoro, Wiesław Sokolu
- Fiabe polacche per aiutare i bambini che hanno difficoltà ad addormentarsi (PDF gratuito).

Altre risorse e link che la commissione ha raccolto sono:

- Sito web: Helping Children Cope with the Challenges of War, <http://www.h3cw.org>, di Lisa Lombard (NHPTI)
- Kit di conforto per bambini / Mini-esercizi da mostrare/insegnare rapidamente ai bambini in difficoltà, di Karen Olness
- Risorse polacche di auto-aiuto per i rifugiati, <https://www.p-i-e.pl/wsparcie-dla-ukrainy>,
- Applicazioni su Google Play, Comfort Talk Pro di Elvira Lang (Penso che lo stia rendendo disponibile gratuitamente per gli ucraini)
- Registrazioni audio: <http://www.voice4comfort.com/>, di Carla Frankenhuijs
- Guide: OMS: Fare ciò che è importante in tempi di stress (who.int)

Ancora una volta, queste risorse, o le informazioni su dove voi e i vostri clienti potete trovarle, sono pubblicate sui siti web di ISH e ESH.

E in futuro? In primo luogo, come già detto, c'è accordo sul fatto che il comitato possa e debba diventare un comitato permanente. La necessità di risorse e servizi per le persone che hanno vissuto o stanno vivendo esperienze di guerra e disastri continuerà. ISH ed ESH continueranno a lavorare a stretto contatto per costruire sulle risorse che sono già state raccolte. Per facilitare ciò, oltre alle informazioni su queste risorse disponibili per i nostri membri attraverso i nostri siti web individuali, si sta discutendo seriamente e si sta pianificando lo sviluppo di uno speciale sito web congiunto in cui le persone che potrebbero beneficiare di queste risorse possano accedervi. Il comitato prevede anche di organizzare opportunità di supervisione continua per i clinici che svolgono un lavoro diretto in quest'area.

Infine, il comitato intende avviare un progetto per invitare i membri dell'ISH e dell'ESH a condividere materiale che potrebbe essere utile sia per i bambini che per gli adulti che hanno subito un trauma. Questi testi saranno tradotti e poi registrati in diverse lingue. Tenete gli occhi aperti per l'invito a presentare questo materiale. Nel frattempo, se avete già uno o più script che ritenete possano essere particolarmente utili, non esitate a inviare un file con lo script a uno o a entrambi i presidenti della commissione: Callie Hattingh a calliehattingh@gmail.com e Kathleen Long a kathleen@maxamind.co.uk.

Concludo questa lettera esprimendo il mio profondo senso di gratitudine a Callie, Kathleen, ai membri del CIC e a tutti gli altri colleghi che sono intervenuti così rapidamente in aiuto del popolo ucraino e di tutte le persone che hanno subito o potrebbero subire traumi in futuro. Anche nel bel mezzo di una crisi, il lavoro che state svolgendo è fonte di ispirazione e mi dà speranza. Grazie.

Cordialmente,
Mark P. Jensen



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**Board of Directors Meeting
June 2022, Kraków**



CARTA DEL PRESIDENTE(ES)

TRADUCIDO POR TERESA ROBLES

La inspiradora respuesta de nuestra comunidad a la crisis de Ucrania

Estimados miembros de la ISH:

Para muchos de nosotros, las imágenes y las historias sobre la invasión de Ucrania nos han roto el corazón. No parece que la crisis vaya a terminar pronto. Ciertamente, los efectos del trauma experimentado por los que están en el frente resonarán durante décadas. Al mismo tiempo, me ha inspirado profundamente la respuesta de nuestra comunidad a la crisis. Pocas horas después de que comenzara la invasión en febrero de este año, colegas de todo el mundo empezaron a hablar de cómo podíamos reunir recursos y oportunidades de formación para prestar asistencia a los proveedores de atención en Ucrania y -cuando los refugiados empezaron a salir de Ucrania hacia los países fronterizos- a los proveedores de atención en las naciones vecinas de Polonia, Rumanía, Moldavia, Hungría y Eslovaquia.

Sabemos, tanto por nuestra experiencia clínica como por la investigación, que la hipnosis es muy eficaz para tratar los efectos del trauma (cf. Lesmana et al., 2009; O'Toole et al., 2016; Watkins, 2000). Teniendo en cuenta la amplia experiencia en el tratamiento del trauma así como de sus efectos en los clínicos que utilizan la hipnosis como parte de su práctica, y la generosidad de los sanadores en nuestra comunidad mundial, no es de extrañar que surgieran tantas iniciativas para ayudar a tratar la crisis.

Entre estas iniciativas se encuentra una que comenzó durante uno de nuestros eventos online "Café con el Presidente" el 3 de marzo. Este evento fue copatrocinado por la ISH y la Sociedad Británica de Hipnosis Clínica y Académica (BSCAH). Aunque la presidenta de la BSCAH, Jane Boissière, y yo planeamos originalmente facilitar una discusión sobre lo que la BSCAH ha estado haciendo y responder las preguntas de los miembros de la BSCAH y de la ISH, rápidamente cambiamos a discutir la invasión y cómo nuestra comunidad podría ser de ayuda.

Como se indicó en el artículo "Construyendo puentes de apoyo" del anterior boletín de la ISH, después del café, la Dra. Kathleen Long de la Sociedad Europea de Hipnosis, en conversaciones con la Dra. Jane Boissière de la Sociedad Británica de Hipnosis Clínica y Académica, sugirió que la ISH y la Sociedad Europea de Hipnosis (ESH) colaboraran para apoyar a los afectados por la guerra. El Dr. Woltemade Hartman propuso la idea de un Comité de Crisis e Intervención (CIC). Esta idea fue apoyada con entusiasmo por todos los implicados, y así se formó el CIC, copresidido por Callie Hattingh y Kathleen Long.

Bajo el liderazgo de Callie y Kathleen, el CIC está trabajando para hacer todo lo posible para (1) proporcionar apoyo, formación y recursos a los profesionales de la salud que apoyan a las personas afectadas por la guerra y (2) proporcionar apoyo y recursos directamente a las personas afectadas por la guerra.

Han reclutado como miembros del comité a un grupo de expertos internacionales en el uso de la hipnosis para abordar el trauma y sus efectos, entre ellos Woltemade Hartman (Sudáfrica). Se reunieron por primera vez el 15 de marzo. En esa reunión, el comité fue informado de la situación en Ucrania por Alexander Tokhtamysh (profesor de la Facultad de Psicología de la Universidad Nacional Taras Shevchenk de Kiev y actual director de la Sociedad de Psicoterapia Ericksoniana y Terapia Breve de Ucrania).

Krzysztof Klajs nos informó sobre las necesidades de la Sociedad Ericksoniana de Polonia. Están involucrados en la formación de los trabajadores



de salud que apoyan a las personas desplazadas de Ucrania que buscan refugio en Polonia.

Bernhard Trenkle está recopilando documentos e investigaciones sobre traumas de varios países. La Dra. Lisa Lombard (EE.UU.) del NPTI ha creado un sitio web en ucraniano con recursos, incluido el kit de confort de la Dra. Karen Olness para apoyar a los niños en crisis.

Muchas personas han contribuido a este esfuerzo, incluyendo entre otros muchos a Alexander Tokhtamysh (Ucrania), Gillian Smith, (BSCAH), Ali Özden Öztürk (Turquía), Nicole Ruysschaert (Bélgica), y Fitoussi Gerard (Francia). Cecilia Fabre (México), Kasia Mirska (Polonia) y Nadine Hartman (Reino Unido) gestionarán las redes sociales en el futuro. Julia Graßhoff (Alemania) también ha realizado un gran esfuerzo para mantener los recursos actualizados.

El comité ha tenido muchos logros: Han coordinado muchas oportunidades de formación gratuitas para los proveedores de atención médica en Polonia y Ucrania, entre ellas una serie de seis seminarios en línea de 3 días para especializarse en Terapia de estados del Yo para trabajar el trauma. Estos seminarios han sido impartidos por el Dr. Woltemade Hartman y Carl Hattingh y ya se han realizado dos. Por favor, ponte en contacto con Carl Hattingh de AICHP para obtener más información sobre esta serie de seminarios si tú o alguien que conoces los necesita (info@aichp.com.au) o <https://www.aichp.com.au/ego-state-therapy/>). También se han organizado dos seminarios web específicos sobre el tema del tratamiento de las personas que han sufrido traumas, impartidos por los doctores Enayat Shahidi y Julie Linden.

Cualquier miembro de la ISH o de la ESH puede acceder a las grabaciones de estos dos seminarios web poniéndose en contacto con Shady Tonn en info@ishhypnosis.org. También estarán pronto disponibles en los sitios web de la ISH y la ESH.

Los futuros programas de formación están siendo desarrollados por la Dra. Julie Linden y un grupo de expertos en trauma en colaboración con el profesor Borys Ivynev, MD, Rector de la Universidad Médica de Kyiv y Vicepresidente de la Asociación Ucraniana de Psicoterapeutas y Psicoanalistas (Jefe del Departamento de Hipnoterapia) y Viktor Vus, jefe de Salud Mental de la Asociación Psicológica Ucraniana.

Hypnosis Skills For Self-Care, Self-Hypnosis, Building Agency and Resilience (Habilidades de hipnosis para el autocuidado, la autohipnosis, la regulación y la creación de resiliencia) será una serie de formaciones breves sobre el uso de la hipnosis en el manejo de traumas, el autocuidado, la regulación y la creación de resiliencia para que los profesionales de salud lo transmitan a otros profesionales, pacientes y clientes que puedan estar experimentando estrés asociado a estas importantes necesidades. El plan es también desarrollar un programa de tutoría individual. Ponte en contacto con Julie Linden (julie@drjulielinden.com) para obtener más información sobre los seminarios web de autocuidado que están planeados.

Además, el comité ha organizado grabaciones de audio de guiones de hipnosis en ucraniano para profesionales de salud y personas afectadas por guerras y desastres. Cuando esta carta se imprima, ya se habrán publicado en los sitios web de la ISH y la ESH.

Nos imaginamos el CIC como un comité permanente, que continuará proporcionando recursos para las personas afectadas por el trauma y la guerra en todo el mundo. En consecuencia, pretendemos incluir más traducciones de las grabaciones de audio en otros idiomas en el futuro.

Una tarea importante del comité ha sido crear un centro de recursos que proporcione acceso a listas de libros, guiones y otros materiales. Entre ellos se encuentran los siguientes:



Grabaciones de audio

- Puedes encontrar la paz dentro de ti - Aleksandra Nowak
- La sabiduría de tu cuerpo - Katarzyna Szymańska
- Relajación en tiempos difíciles - Urszula Soltys-Para

Recursos para niños

- Un cuento de rayos de esperanza" - El cuento pretende apoyar a los niños que se encuentran fuera de Ucrania cuyos padres se han quedado en el país. Inspira esperanza y mantiene el ánimo. - Agnieszka Bleja
- Antes de decir "buenas noches" a tu hijo: consejos para calmar la ansiedad del niño antes de acostarse. - Agnieszka Bleja
- Temas difíciles: La guerra - Un libro con consejos para hablar con los niños sobre la guerra. - Bianca-Beata Kotoro, Wiesław Sokolu
- Cuentos polacos para ayudar a los niños que tienen dificultades para conciliar el sueño (PDF gratuito)

Otros recursos y enlaces que el comité ha recopilado son

- Página web: Helping Children Cope with the Challenges of War - <http://www.h3cw.org> - Dr Lisa Lombard (NHPTI)
- Kits de consuelo para niños / Miniejercicios para mostrar/enseñar rápidamente a los niños con problemas - Dra. Karen Olness
- Recursos polacos de autoayuda para refugiados - <https://www.p-i-e.pl/wsparcie-dla-ukrainy>
- Aplicaciones en Google Play - Comfort Talk Pro - Dra. Elvira Lang (Creo que lo está poniendo a disposición de los ucranianos de forma gratuita)
- Grabaciones de audio: <http://www.voice4comfort.com> - Dra. Carla Frankenhuijs
- Guías - OMS: Doing What Matters in Times of Stress (who.int)

Una vez más, estos recursos -o la información sobre dónde puedes encontrarlos tú y tus clientes- están publicados en los sitios web de ISH y ESH.

¿Y el futuro? En primer lugar, y como se ha señalado anteriormente, estamos de acuerdo en que el comité puede y debe ser un comité permanente. La necesidad de recursos y servicios para las personas que han sufrido o están sufriendo la guerra y el desastre continuará. Por lo tanto, ISH y ESH seguirán colaborando estrechamente para aprovechar los recursos que ya se han reunido. Para facilitar esto, y además de lo ya realizado, y plasmado en nuestros sitios web para nuestros miembros, se está discutiendo seriamente y se planea desarrollar un sitio web especial conjunto donde las personas que puedan beneficiarse de estos recursos puedan acceder a ellos. El comité también planea organizar oportunidades para la supervisión continua de los clínicos que realizan el trabajo directo en esta área.

Por último, el comité tiene previsto iniciar un proyecto para invitar a los miembros de la ISH y la ESH a compartir guiones que sean útiles tanto para los niños como para los adultos que hayan sufrido un trauma. Estos guiones se traducirán y se grabarán en varios idiomas. Por favor, permanece atento a la invitación para presentar estos guiones. Mientras tanto, si ya tienes uno o más guiones que crees serían de ayuda, no dudes en enviar un archivo con el guión a uno o ambos presidentes del comité: Carl Hattingh en calliehattingh@gmail.com y Kathleen Long en kathleen@maxamind.co.uk.

Permítanme terminar esta nota expresando mi profundo sentimiento de gratitud a Callie, Kathleen, los miembros del CIC y todos los demás colegas que han acudido tan rápidamente en ayuda del pueblo de Ucrania y de las personas de todo el mundo que han sufrido o podrían sufrir un trauma en el futuro. Incluso en medio de una crisis, el trabajo que están haciendo es inspirador y me da esperanza. Gracias.

Cordialmente,
Mark P. Jensen



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Moments of Board of Directors Meeting
June 2022, Kraków





NOTES FROM THE EDITOR



Katalin Varga

Dear Colleagues,

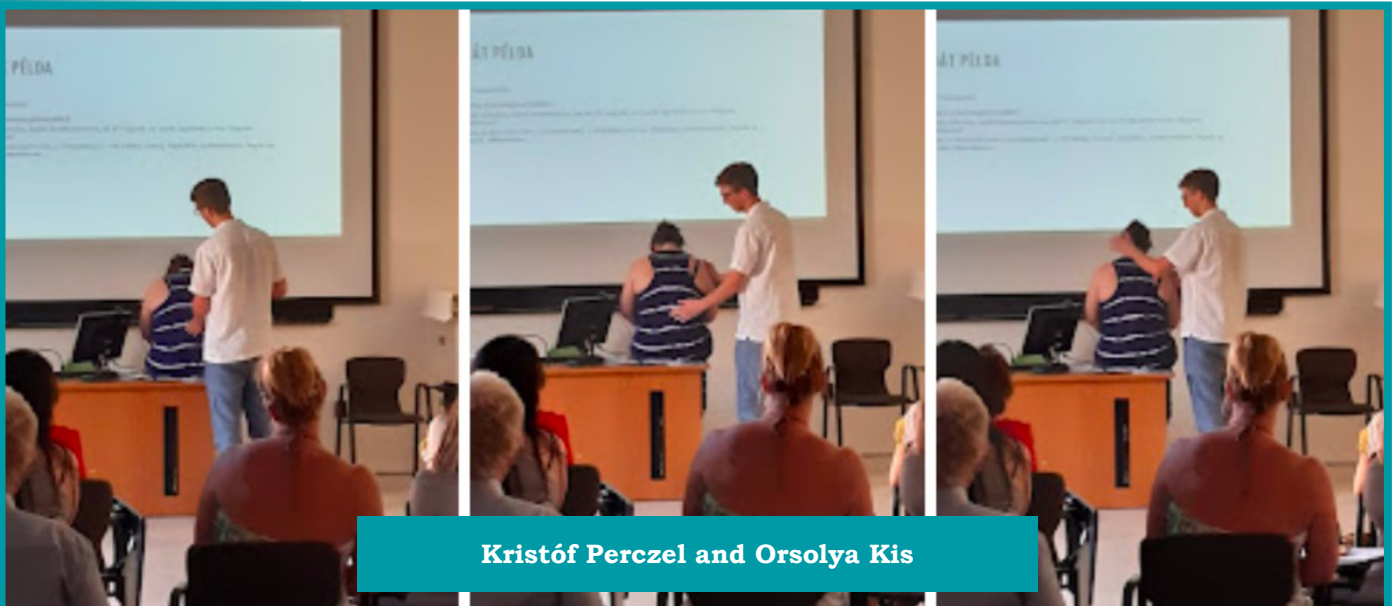
Recently, both the national and international hypnosis scene has brought some great experiences.

Among the workshops of the Hungarian Association of Hypnosis, which I attended, it was particularly heartwarming for me to see the next generation of hypnosis in an area that is closer to my professional field: how hypnotic communication can be applied to critically ill patients.

Kristóf Perczel, an anaesthesiologist and intensive care physician, demonstrates how he uses hypnotic communication to guide the performance of a spinal anaesthetic on his colleague, Orsolya Kis.

Kristóf Perczel, an anaesthesiologist and intensive care physician, demonstrates

how he uses hypnotic communication to guide the performance of a spinal anaesthetic on his colleague, Orsolya Kis.



Kristóf Perczel and Orsolya Kis

We held a meeting with the ISH board in Krakow, finally live for the first time in three years, although even so, only a few could join in zoom. In total, those present travelled 35046 km and 99 hours to get here. It is hard to put into words how pleasant it was to hug each other again and to enjoy the constructive, attentive, empathetic atmosphere that characterizes the work of the BOD.

Beyond the practical aspect, it is also intellectually interesting to reconcile the views of people from different professional backgrounds and cultures on what we mean by *'student'*, what *'spiritual'* means to whom, and whether it is worth using the term *'suggestive communication'* rather than *'hypnotic communication'*.

Krakow itself is beautiful, and perfect for the wander-lusting tourist like myself, with an inexhaustible range of sights. It is particularly interesting to do all this with Kris's local explanations.

For the first time in many years, I was able to meet Cecilia Fabre in person and enjoy each other's company informally, in addition to the official



Cecilia Fabre in action - taking pictures and posting on Social Media

business. As a member of the social media committee, she immediately posted the news on the ISH FB and Instagram platforms.

The official business was opened by the BOD meeting, where we mainly discussed the material of the 'Standard Committee': what topics and for whom hypnosis can be taught. The COR meeting is the most important forum for contact with member societies. Here Wollie Hartman reported on the work of the board. Of particular importance was the report of the Crisis Intervention Committee (CIC), a project jointly managed with ESH. The aim of the CIC is to bring together and publish hypnotic-suggestive methods, training and texts for victims of traumatic events.

In this issue Nicole Ruyschaert interviews **Silvia Zanotta** who integrates hypnosis, Ego State therapy and somatic approaches and teaches this holistic approach in several countries.

Subas Amjad reviews some paper on Hypnosis in Legal Context.

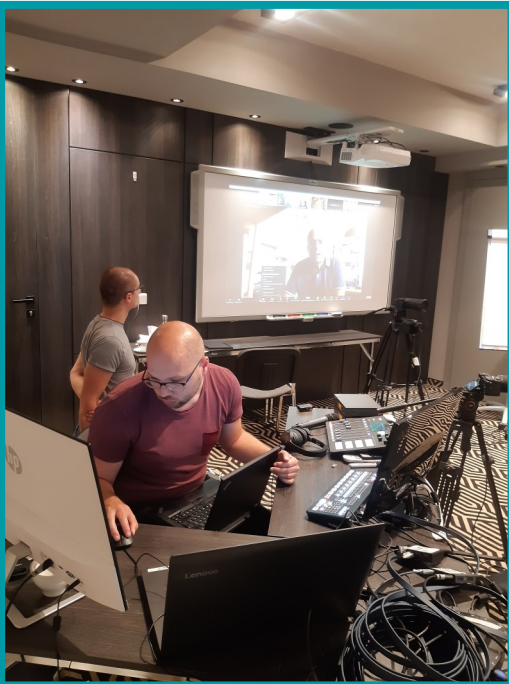
The report of **International Journal of Clinical and Experimental Hypnosis** summarizes the papers of the most recent issue of the IJCEH, including guidelines for the assessment of efficacy of clinical hypnosis applications, the impact of virtual reality hypnosis on pain and anxiety.

This is a selection of recordings from the Methodology of hypnosis research course: **Enrica Santarcangelo's** An Evolutionary Approach to Hypnotizability. In addition to the author's description, a short summary of the original article in plain English is also available.

I hereby ask our fellow members to let us know about you: the newsletter, the ISH Facebook and Instagram are free opportunities for all our fellow members to publicize their events. And vice versa: please use your own online platforms to disseminate ISH posts to as many lay and professional persons as possible.

We are interested to see recordings of no more than 1 minute in the field of hypnosis research or application: be it an experimental lab or a treatment. What may be mundane for some, may give others an interesting insight into the real world of hypnosis.

Katalin Varga
PhD, DsC



**Board of Directors Meeting
June 2022
Kraków**





THE 2022 ISH AWARDS

2022 AWARDS COMMITTEE

CAMILLO LORIEDO (CHAIR)

GIUSEPPE DE BENEDITTIS

WOLTEMADE HARTMAN

NICOLE RUYSSCHAERT

KATALIN VARGA

AWARD	ISH's highest honor
PRIOR AWARDEES	Benjamin Franklin Gold Medal 1976 - Milton H. Erickson, MD 1979 - Ernest R. Hilgard, PhD 1982 - Martion. T. Orne, MD and Emily C. Orne 1985 - Josephine R. Hilgard, MD, PhD 1997 - Per O. Wikstrom, DDS 2000 - Graham D. Burrows, AO, MD 2004 - Peter B. Bloom, MD 2006 - Jack G. Watkins, PhD 2009 - Karen N. Olness, MD 2012 - Camillo Lorioedo, MD, PhD 2015 - Éva I. Bányai, PhD 2018 - Julie Linden, PhD
AWARDEE 2022	Bernhard TRENKLE Distinguished leader, creative clinician, brilliant and effective teacher. You exemplify a lifelong dedication to spreading the knowledge of hypnosis all over the world, actively overcoming barriers, moving across boundaries, and building bridges internationally to enhance and nurture scientific practice, culture, and human beings.
AWARD	Ernest R. Hilgard Award for Scientific Excellence
PRIOR AWARDEES	1997 - Kenneth S. Bowers, PhD 1998 - Andre M. Weitzenhoffer, PhD 1999 - Peter W. Sheehan, PhD, AO 2000 - Vladimir A. Gheorghiu, PhD 2001 - Helen Joan Crawford, PhD 2002 - David Spiegel, MD 2003 - Irvin Kirsch, PhD 2004 - John H. Gruzelier, PhD 2009 - Giuseppe De Benedittis, M.D., PhD 2012 - Elvira V. Lang, MD 2015 - Marie-Elisabeth Faymonville, MD 2018 - Pierre Rainville, PhD
AWARDEE 2022	Enrica SANTARCANGELO Your rigorous experimental work has substantially advanced the understanding of the process of hypnosis.



AWARD

PRIOR AWARDEES

AWARDEE 2022

Helen H. & John G. Watkins Award for Excellence in Teaching

2015 - Jeffrey K. Zeig, PhD
2015 - Claire C. Frederick, MD
2018 - Bernhard Trenkle

Susy SINGER-FISHER

You exemplify excellence as a teacher and mentor of hypnosis worldwide.

AWARD

PRIOR AWARDEES

AWARDEE 2022

Jay Haley Early Career Award for Innovative Contributions to Hypnosis

2009 - Claude Virost, M.D.(France)
2009 - Woltemade Hartman, Ph.D. (South Africa)
2012 - Amir Raz, PhD. (Canada)
2015 - Mark P. Jensen, Ph.D. (USA)
2018 - Katalin Varga

Zoltán KEKECS

As an early career scientist, your writing, teaching, and leadership have made important contributions to the understanding and practice of hypnosis.

AWARD

PRIOR AWARDEES

AWARDEE 2022

Kay F. Thompson Award for Clinical Excellence in Dentistry

2009 - Albrecht Schmierer, Dr. med. Dent.
2012 - Ali Eşref Müezzinoğlu, DDS
2015 - Ashley A. Goodman, DDS
2018 - Claude Verreault, DDS

Randy ABRAHMSSEN

Your research, clinical work, and teaching has substantially advanced the understanding of the uses of hypnosis in obtaining effective results in dental practice.

AWARD

PRIOR AWARDEES

AWARDEE 2022

Pierre Janet Award for Clinical Excellence

1997 - Erica Fromm, Ph.D.
1998 - Moris Kleinhauz, M.D.
1999 - Helen H. Watkins, M.A. and John G. Watkins, Ph.D.
2000 - Herbert Spiegel, M.D.
2000 - Dirk Revenstorf, Ph.D.
2001 - Peter B. Bloom, M.D.
2002 - Dabney M. Ewin, M.D.
2003 - Michael D. Yapko, Ph.D.
2004 - Burkhard Peter, Ph.D.
2009 - Richard P. Kluft, M.D. (USA)
2012 - Daniel P. Kohen, M.D. (USA)
2012 -- Bernhard Trenkle, Dipl. Psych. (Germany)
2015 - Teresa Robles, PhD (Mexico)
2018 - David Wark (USA), Matthias Mende (Austria)

Consuelo CASULA

Your clinical excellence and lifetime of published clinical experience has advanced our understanding of the uses of hypnosis in obtaining effective results.



Awardee: **Susy SINGER-FISHER**

You exemplify excellence as a teacher and mentor of hypnosis worldwide.



Awardee: **Zoltán KEKECS**

As an early career scientist, your writing, teaching, and leadership have made important contributions to the understanding and practice of hypnosis.



Awardee: **Randy ABRAHMSSEN**

Your research, clinical work, and teaching has substantially advanced the understanding of the uses of hypnosis in obtaining effective results in dental practice.





Awardee: **Consuelo CASULA**

Your clinical excellence
And lifetime of published
clinical experience has
advanced our understanding of the uses
of hypnosis in obtaining effective results.



Awardee: **Enrica SANTARCANGELO**

Your rigorous
experimental work has
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Awardee: **Bernhard TRENKLE**

Distinguished leader, creative
clinician, brilliant and effective
teacher. You exemplify a lifelong
dedication to spreading the
knowledge of hypnosis all over
the world, actively overcoming barriers, moving
across boundaries, and building bridges
internationally to enhance and nurture scientific
practice, culture, and human beings.





MAIN INTERVIEW

WITH SILVIA ZANOTTA BY NICOLE RUYSSCHAERT

NICOLE RUYSSCHAERT INTERVIEWS SILVIA ZANOTTA

Thank you, Silvia for accepting our invitation to be interviewed for our ISH NL!

How did you first encounter hypnosis – when / where?



Silvia Zanotta

I first saw hypnotized people crawling on the floor in a TV show as an adolescent. I felt sorry for these individuals who seemed to have lost their free will and moved like puppets on the strings of a show hypnotist. Many years later, I was introduced to therapeutic hypnosis through Congresses and seminars initiated by Bernhard Trenkle. I was immediately inspired and eager to learn clinical hypnosis and completed the training with Bernhard Trenkle, Gunther Schmidt, and Manfred Prior at the Milton Erickson Institute in Rottweil, Germany. I was astonished and continue to be impressed by the effectiveness of working with the unconscious and also by the possibility of accessing our inner wisdom.

Can you give a brief overview of your career, and your work and the place hypnosis has in it?

My first profession was as a translator / interpreter. When I became a mother, my interest in psychology grew and I studied psychology at the university of Zurich, specializing in neuropsychology and psychopathology of children and adolescents. My dissertation centered on migration and its psychological effect on children, adolescents, and families in Switzerland. After I finished my studies at the university I worked as a school psychologist in outpatient clinics for children and adolescents. Since 2003, I am in private practice for children, adolescents, and adults in Zurich. I have completed various therapeutic trainings but will only mention the ones that are connected to hypnosis. After clinical hypnosis I delved into Ego State Therapy which opened the door for me to treating complex trauma and dissociation more efficiently. In 2011, I founded Ego State Therapy Switzerland, and I still lead this institute together with my colleague Max Schlorff. My teachers were Maggie Phillips and Woltemade Hartman who both encouraged me to start teaching myself. My mentor Maggie Phillips inspired me to get trained in Somatic Experiencing, a somatic trauma treatment invented by Peter Levine. Even today, hypnosis, Ego State therapy and somatic approaches remain the three important pillars of my work. I teach this holistic approach in Switzerland, Austria, Germany, Poland and France.

How do you see the connection between ego-state therapy and hypnosis?

John and Helen Watkins, founders of Ego State therapy, were psychoanalysts using clinical hypnosis. While treating dissociative identity disorder (DID) clients they discovered that working directly with their parts/Ego States was most useful. Later, they found this approach to be appropriate for many symptoms.

Being trained in therapeutic hypnosis is a prerequisite for the Ego State Curriculum. Students need to know how to work with the various states of consciousness. Especially destructively acting unconscious personality parts or ego states can often only be accessed through hypnosis.



Since EST practitioners are familiar with hypnosis and since hypnosis is part of the EST training, what is the purpose of having a separate ESTI community?

Hypnosis is not integrated into the EST curriculum in every country, and not every hypnotherapist necessarily wants to learn or work with EST. The ESTI community was founded in order to coordinate international requirements for EST-training and as a network specifically for the EST approach.

What do you personally see as your most important contributions to the field?

I think that my most important contribution is my hypno-somatic ego state therapy approach, that is, combining hypnosis and ego state therapy with somatic approaches as started by Maggie Phillips more than 20 years ago. This combination is most useful with preverbal phenomena and attachment trauma, where there are often no words and where the therapist needs to work with the nervous system response.

What motivated / stimulated you to write a book?

It was not my idea. Executives of the German publisher Carl Auer contacted me after my keynote / workshop on a Congress and invited me to write a book. I was surprised and honored. My most important motivation was the fact that there was no book I knew of on trauma healing with Ego State Therapy, hypnosis, and somatic approaches. I think it is important to disseminate and pass on new developments in psychotherapy, especially if they are helpful in the treatment of trauma and pain and have the power to alleviate suffering. I am still overwhelmed with the positive feedback I get for “Wieder ganz werden” (“Whole again”) of which the 3rd edition will be published in October.



The English translation is currently being edited. I am still looking for a publisher and I would be happy for the English version to be released.

Who are / were your mentor(s)? people who influenced your way of thinking and working?

Maggie Phillips, who sadly passed away last autumn, was my most important mentor and a pioneer in the field of psychotherapy. I had the opportunity to assist at her workshops and travel with her many times. I am grateful for this. Another important teacher was Woltemade Hartman as well as Claire Frederick, and of course my German hypnosis teachers. In the field of Somatic Experiencing, I still learn a lot from Peter Levine. Gordon Emmerson influenced my work, too by providing structure and clarity.

How do you see the future of hypnosis? in the medical field? In the psychotherapeutic field?

I think clinical therapeutic hypnosis should be made public even more. Lay hypnotists promote themselves more eagerly; therefore, they appear more often in mass media. This of course also has to do with the fact that confidentiality is required with clinical therapists whereas lay hypnotists tend to openly promise miracles.

Any recommendations, hints, or advice you would like to give to young(er) colleagues?



Stay curious, get inspired by many teachers in order to find and develop your unique way of working with patients/ clients. Connect with colleagues.

Do you see some important contributions of hypnosis in dealing with the Covid 19 pandemic?

Anxiety and depression have increased with the pandemic, climate issues, and the Russian-Ukrainian war. Hypnosis is the perfect tool to slow down arousal and give hope and new perspectives to people in shut down, frozen states.

Thank you so much Silvia for giving your time to this interview!



BUILDING BRIDGES OF UNDERSTANDING

CLINICAL RELEVANCE OF RESEARCH FINDINGS

In each section of the NL we introduce you to a summary of recent research with short and easy explanations of some research concepts. Scientific reports are more and more complex and complicated; only a small portion of hypnosis experts enjoy them. For the majority of professionals it can even be frightening or boring. The aim of these letters is to bring researchers and clinicians closer together, to highlight the clinical relevance of research findings of hypnosis in a very simple user-friendly way. Clinicians are also encouraged to propose questions to be studied, clinically relevant phenomena to analyze, and hypnotic processes to be understood. Let's build the bridges of understanding together...



Subas Ali has completed her Bachelors of Arts degree in Psychology at the University of Pécs and is currently enrolled in the Master of Arts program in Clinical and Health Psychology at ELTE University.

Her interests are predominantly centered towards issues relating and concerning gender equality, women's rights and activism, with an emphasis on South Asian and Eastern practices. During her BA studies, her research focused on religiosity and its effects on social cognition, narrative social identity formation and meaning-making.

As a future prospect, she is concerned with research based in ethnic segregation, social and religious practices in non-Western majorities and psychoanalytical therapies. She has participated as a youth worker in an Erasmus Plus program in Serbia on "Promoting equality through gender sensitive journalism and blogging".

ETHICS, LAW AND HYPNOSIS - A SUMMARY REVIEW ON HYPNOSIS IN LEGAL COURTS SUMMARY AND CRITICAL ANALYSIS: A BRIEF HISTORICAL BACKGROUND ON HYPNOSIS:

Summary by Subas Ali

Institute of Psychology, ELTE Eötvös Loránd University

The history of hypnosis has never really been an easy one, in fact, it remains to be one of the most criticised and controversial branches of psychological assessment and treatment. Accused of being contaminated by peripheral movements, notably phrenology and spiritualism. Hypnosis, despite its status in the modern world, roots from practices that come from ancient India (Lionel & Patricia, 2008), who took upon the act for the purpose of healing the sick by hypnotic suggestion through meditational self-observance and communication with the gods called *Nidra* in Sanskrit (Shifu, 1994). In the modern day, there have been several prominent figures such as Frank Mesmer (1734-1815) and James Braid (1795-1860), who have dedicated their life's work to the study of hypnosis (previously known as Mesmerism).

In the legal court system, hypnosis was a contentious method used for the enhancement of memories as an aid in the investigation of crime (Schefflin



& Shapiro, 1989). The concerns that centred around the hypnotic usage in courts was over the likelihood that poorly qualified persons could unintentionally or otherwise implant faulty memories in a receptive subject. Furthermore, normal memory is now understood to be a reconstructive process in which confabulation is typically encountered (Melvin, 1995).

It is impossible to include every dimension of the debate or research in the field of forensic hypnosis but this review aims to cover some of the historical elements, usage in the early court system, different perspectives, and major criticisms.

The First Use of Hypnosis in an Investigation:

Termed forensic hypnosis, these applications date in modern times to 1976 when the abduction of a busload of California school children was unravelled by the hypnotically facilitated recall by the adult bus driver of a license tag identification of a vehicle driven by one of the perpetrators (Kroger & Douce, 1979). One of the first undocumented accounts of the initial use of hypnosis in the investigation of a crime occurred in 1845 (Gravitz, 1983). That case involved a store owner who discovered that money had been taken from his cash drawer in his absence. Since in those days' hypnosis (then termed mesmerism) related to supposed extra-sensory phenomena, the proprietor went to a neighbour who allegedly was proficient at assumed hypnotic clairvoyance. Such claims of supposed clairvoyance and telepathy were then tolerable in certain circles. In the state of "mesmeric sleep," the subject described a teenage male as the culprit, and the youth confessed to having taken the money.

Not too long after this occurrence, however, there was another criminal case that was documented in a legal proceeding in the United States, and that appears to have been the first illustration in which hypnotically obtained testimony was admitted and acknowledged, speciously without objection, in a court of law. The facts of this 1846 case were reported in the Binghamton (NY) *Courier*, a local newspaper, and subsequently published in the April 1848 issue of the *American Journal of Insanity* (later became the *American Journal of Psychiatry*) (Anonymous, 1848).

Since its initiation, forensic hypnosis has been a subject of several opinions, ranging from being hailed as a key method of probing for repressed or forgotten memories of witnesses and victims (Arons, 1967; Kroger & Douce, 1979) to those who deem it as an ineffective and harmful device, one that constitutes of "side-effects" (Wilson, Greene, & Loftus, 1986) for the legal system through the confabulation of memory recall (Dywan & Bowers, 1983; Sheehan & Tilden, 1983; Stalnaker & Riddle, 1932).

The Three Positions Concerning the Use of Hypnosis for Investigative Purposes:

In the field of forensic hypnosis, there are three standing perspectives on the phenomenon and its usage (Perry & Laurence, 1983):

1. In some countries, such as France, hypnotically elicited testimony is prohibited by the courts, and has been for almost a century. The embargo seems to have been the consequence of several late 19th-century court cases in which abuses of hypnosis in the investigative context became apparent to the judiciary (Laurence & Perry, 2008). Of late, Diamond (1980) has come autonomously to the same inference. He argues that the prospect of memory contamination is so inordinate, when hypnosis is used to acquire investigative leads, that *"the only sensible approach is to exclude testimony from previously hypnotized witnesses as a matter of law, on the grounds that the witness has been rendered incompetent to testify"* (p. 349).

2. Representative of the second position, the American FBI (Ault, 1979) and the criminal investigation branches of the U.S. army, navy, and air force (Orne, Soskis, & Dinges, 1984) believe that hypnosis has some value



in investigative work. When it is employed, however, the policy of these organizations is that it should be attempted only by professionally trained personnel such as physicians, psychiatrists, and psychologists who also have formal training in hypnosis. Further, the hypnotic interview should follow strict safeguards proposed by Orne (1978), which include videotaping of all interactions between hypnotic interviewer and subject (including the pre and post-hypnotic contact), the exclusion of all others from the room during the interview, and the writing down of all information given to the hypnotic interviewer so that any inadvertent bias communicated to him or her can be evaluated independently at a subsequent time. A recent revision of the guidelines can be found in Orne, Soskis, and Dinges (1984). This position is shared by the Society for Clinical and Experimental Hypnosis (1979) and the International Society of Hypnosis (1979), which have passed identical resolutions.

3. A third position is that of Reiser (1980). His interpretation is that hypnosis is a benign and effective method of provoking recall of memories that are not uncovered by standard non-hypnotic police interview procedures. In addition, he asserts that human memory is akin to a tape recorder, and that much material that is unavailable to consciousness is filed accurately in the subconscious. He believes that therefore hypnosis accesses additional detail that standard police interview procedures do not; it taps into the subconscious level of mental processing. He recognizes the existence of confabulation — that is, the tendency in the hypnotized person to inadvertently fill in memory gaps with fantasized material which then comes to be believed as a true memory. He equates it, however, with deliberate lying and distortion, and does not believe that it represents a problem in the investigative situation. He asserts also that forensic hypnosis represents a specialized area of the investigative sciences and should, as such, be restricted to members of law enforcement agencies who have been specially trained in interrogation techniques.

Arguments and Criticisms on Forensic Hypnosis:

The three stances, as mentioned earlier, give insight to the different arguments that are presented in favour of or against the usage of Hypnosis and its conducts in legal spaces. More so, even if the question of its validity is hypothetically resolved, there is still the ethical aspect of this system which is in a grey territory.

The subjective nature of memories and recall builds an unstable ground for a legal case proceeding with hypnosis creating a form of “pseudo-memory”, leading to the irretrievable loss of the original recollection. Despite this, some researchers still argue through clinically replicated studies that hypnosis in a clinical setting can prove to be useful at deriving additional information and explanation for behaviour (Schafer & Rubio, 1978). These studies further give reasons for hypnotic recall to originate from numerous factors such as, the emotional trauma surrounding an event (Goldstein and Sippelle, 1970), hypnosis in facilitating recall after physical trauma that cause retrograde amnesia (Raginsky, 1969), and the feelings of guilt about the traumatic incident itself as an aiding factor in recall (Swiercinsky and Coe, 1970). A major criticism for these studies nevertheless was the laboratory situation under which “real life” circumstances were stimulated and therefore could not verify the impact and effect in a real case scenario (Mutter, 1990). Furthermore, it is also vital to note the hypnotist’s intent which can never truly be eliminated (Orne, 1959).

On the grounds of ethical misconduct and the misuse of hypnosis during the investigative stage is a matter that courts have addressed with concern. As noted in the United States u. Adams et al. (1978):

We are concerned, however, that [the] investigatory use of hypnosis on persons who may later be called upon to testify in court carries a dangerous potential for abuse. Great care must be exercised to ensure that statements after hypnosis



are the product of the subject's own recollections, rather than of recall tainted by suggestions received while under hypnosis [Pp. 198-199].

In his review of the use of Hypnosis in the legal systems, Warner (1979) discusses how the practice can be implemented in the four areas of Criminal Law. The four areas measured were: (a) *preliminary investigative stage*, (b) *pretrial, hearing stage*, (c) *trial stage*, and (d) *sentencing stage*. For instance, in the pre-trial stage of a court-room hearing, "suppression" motions take place; this is when prior to the commencement of the trial and the selection of the jury, a defendant is entitled to make a motion for the purpose of suppressing evidence which is either in the form of confessions or statements allegedly made by him, eyewitness testimony identifying him, or physical evidence of any kind (Warner, 1979). The protocol for suppressing a confession is either that it was involuntarily given or that it was otherwise in violation of a defendant's constitutional rights (Miranda u. Arizona, 1966; Jackson u. Denno, 1964). Fascinatingly, hypnosis has at times been found to be the cause of involuntary confessions especially in the absence of proof that the accused did not confess under the influence of a posthypnotic suggestion.

Additionally, one of the utmost barriers to the expanded use of hypnosis in the courtroom has been the fear, on the part of the judiciary, that juries will be unduly influenced by the techniques and appearance of the hypnotic trance situation and be unable, as a consequence, to evaluate the testimony itself objectively (Warner, 1979). Researchers also caution that hypnotized witnesses may be inappropriately confident in the accuracy of hypnotically elicited memories (Putnam, 1979; Sheehan & Tilden, 1983; Wester & Hammond, 2011), thereby inflating their credibility and their resistance to cross-examination (Orne, 1979; Worthington, 1979). They further assert that testimony elicited by hypnosis may have an untoward impact on the jury (Warner, 1979).

Another factor that correspondingly calls for attention is the violation of confidentiality where hypnosis-induced testimony derives from an examination by a third-party witness's private physician.

Overall, with many aspects considered, it can be agreed upon that hypnosis in courts is still in its infancy and regardless of its usage, legal courts are not the frontrunners in the acceptance and presentation of scientific material. It appears that courts are in a desperate need of being acquainted with the current researches and be more aware of the changes in scientific knowledge rather than being simply appreciative of it (Giannelli, 1995). Observed by one court (State v. Sinnott, 1956):

Perhaps it may be said with some measure of truth that over a period of years the law has lagged watchfully, inquisitively, maybe critically, behind an adaptable recognition of the progress being attained in psychiatry. It is, however, a natural characteristic of the law, resting as it does upon established precedents and attitudes that have received general acceptance, to follow rather than lead in the initial introduction of probationary advances of science [p. 428].

On a concluding note, as with everything, information received under hypnosis should be considered delicately and not be equated directly with accuracy of an account presented. The world of hypnosis is a strange one. It remains both suspiciously curious and heavily investigated and yet, there are more questions regarding its process than answers. The future of research in this field is wide and rich with possibilities and its life term in the legal court systems is far from over with the ongoing developments in the study of hypnosis and hypnotic states.



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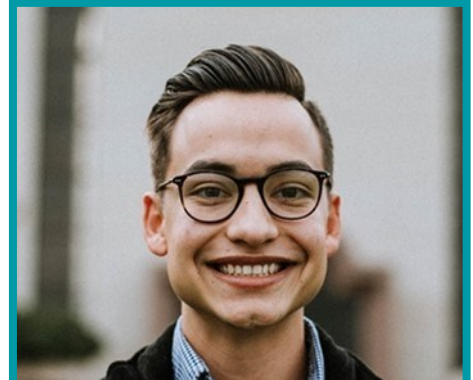
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CLINICAL HYPNOSIS FOR PAIN REDUCTION IN BREAST CANCER MASTECTOMY: A RANDOMIZED CLINICAL TRIAL

DIANA MORENO HERNÁNDEZ, ARNOLDO TÉLLEZ, TERESA SÁNCHEZ-JÁUREGUI, CIRILO H. GARCÍA, MANUEL GARCÍA-SOLÍS & ARTURO VALDEZ

Surgical procedures for breast cancer treatment are commonly followed by pain. Clinical hypnosis has been shown to be effective in reducing pain during and after surgery, but most of the studies have used analogical scales, which only measure pain intensity. The aim of this study was to evaluate the effect of clinical hypnosis on pain intensity and its interference in daily activities in patients before and after mastectomy. The patients were evaluated using the Brief Pain Inventory. Forty patients were randomly assigned to an experimental or control group and evaluated 5 times: 1) baseline, 2) after clinical hypnosis session, 3) before surgery, 4) 1 day after surgery, and 5) 1 week after the surgery (follow-up). The results showed that after surgery the hypnosis group had a statistically significant reduction in pain intensity, less interference of pain with daily activities, sleep and life enjoyment compared with a control group. Clinical hypnosis may be recommended as a complementary treatment procedure for post-mastectomy pain reduction and improving the quality of life of these patients.

**EVIDENCE-BASED PRACTICE AND CLINICAL HYPNOSIS (EDITORIAL)
OPEN ACCESS**

GARY ELKINS

The lead article of this issue of the *International Journal of Clinical and Experimental Hypnosis* (IJCEH) is a landmark report from an international task force that provides contemporary guidelines for evaluating the efficacy of clinical hypnosis interventions. This is a very important article that can inform clinical practice as well as future research. Further, this issue of the *IJCEH* includes a study of the role of hypnotizability in well-being and health which has implications for positive psychology interventions integrating clinical hypnosis. Also, another study in this issue of the *IJCEH* reports the impressive results from the one year follow-up from a randomized clinical trial of self-hypnosis and self-care among cancer patients. The findings from these studies point to the role of clinical hypnosis in well-being and self-care. Additional articles provide insights from virtual reality hypnosis in pain research and the relationship between beliefs and hypnotizability. The final article presents new research on the feasibility of an on-line hypnosis intervention for women with persistent pelvic pain.

**GUIDELINES FOR THE ASSESSMENT OF EFFICACY OF CLINICAL HYPNOSIS APPLICATIONS
OPEN ACCESS**

ZOLTAN KEKECS, DONALD MOSS, GARY ELKINS, GIUSEPPE DE BENEDITTIS, OLAFUR S. PALSSON, PHILIP D. SHENEFELT, DEVIN B. TERHUNE, KATALIN VARGA, & PETER J. WHORWELL

Research on the efficacy of hypnosis applications continues to grow, but there remain major gaps between the science and clinical practice. One challenge has been a lack of consensus on which applications of hypnosis are efficacious based on research evidence. In 2018, 6 major hypnosis organizations collaborated to form the Task Force for Establishing Efficacy Standards for Clinical Hypnosis. This paper describes a Guideline for the Assessment of Efficacy of Clinical Hypnosis Applications developed by the Task Force, which makes 10 specific recommendations. The guideline is intended to be a tool for those who want to assess the quality of existing evidence on the efficacy of clinical hypnosis for any particular indication.



The paper also discusses methodological issues in the interpretation and implementation of these guidelines. Future papers will report on the other products of the Hypnosis Efficacy Task Force, such as best practice recommendations for outcomes research in hypnosis and an international survey of researchers and clinicians on current practice and attitudes about hypnosis.

WELL-BEING IN HIGHLY HYPNOTIZABLE PERSONS

EDITH BISCUOLA, MARIANNA BONGINI, IACOPO BELCARI, ENRICA L. SANTARCANGELO, & LAURA SEBASTIANI

Both hypnotizability and well-being are relevant to health. This study aimed to investigate whether high hypnotizability was positively associated with well-being and whether the latter was related to the activity of the behavioral inhibition/approach system (BIS/BAS). ANOVA revealed significantly higher scores on the General Well-Being Index (PGWBI) in highly hypnotizable (highs, $n = 31$) compared with low hypnotizable participants (lows, $n = 53$), with medium hypnotizable participants (mediums, $n = 41$) exhibiting intermediate values. This finding was discussed in relation to other hypnotizability-related traits, such as morpho-functional brain characteristics, equivalence between imagery and perception, and interoceptive sensitivity. A secondary finding was a nonsignificant gender difference in scores on the PGWBI. The highs' higher well-being could be considered a favorable prognostic factor for physical and mental health.

RANDOMIZED, CONTROLLED TRIAL OF AN INTERVENTION COMBINING SELF-CARE AND SELF-HYPNOSIS ON FATIGUE, SLEEP, AND EMOTIONAL DISTRESS IN POSTTREATMENT CANCER PATIENTS: 1-YEAR FOLLOW-UP

CHARLOTTE GRÉGOIRE, MARIE-ELISABETH FAYMONVILLE, AUDREY VANHAUD-ENHUYSE, GUY JERUSALEM, SYLVIE WILLEMS, & ISABELLE BRAGARD

Cancer can provoke fatigue, sleep disturbances, and emotional distress. Hypnosis interventions have shown positive short-term effects on these symptoms. However, less is known about their long-term effects. This study assessed the short- and long-term effects of a group intervention combining self-care and self-hypnosis on these symptoms in posttreatment cancer patients. Ninety-five female cancer survivors were randomized to either a hypnosis group intervention or wait-list control. Results showed significant decreases in fatigue, sleep difficulties and emotional distress after intervention for the hypnosis group intervention in comparison to the wait-list control. Most of these positive effects were maintained at 1-year follow-up. Most participants received the hypnosis group intervention approximately 10.65 months after diagnosis, and it is possible that delivering the intervention earlier after diagnosis could have achieved a more robust impact. Further studies are needed to replicate these results in comparison to an active control condition and investigate the best time postdiagnosis for initiating the intervention.

THE IMPACT OF VIRTUAL REALITY HYPNOSIS ON PAIN AND ANXIETY CAUSED BY TRAUMA: LESSONS LEARNED FROM A CLINICAL TRIAL

SHELLEY A. WIECHMAN, MARK P. JENSEN, SAM R. SHARAR, JASON K. BARBER, MARYAM SOLTANI, & DAVID R. PATTERSON

This randomized, controlled trial tested the impact that hypnosis delivered through immersive virtual reality technology on background pain, anxiety, opioid use, and hospital length of stay in a sample of patients hospitalized for trauma. Participants were randomly assigned to receive either virtual-reality-induced hypnosis, virtual reality for distraction, or usual care during the course of their hospitalization. Mean number of treatment sessions was 3. A total of 153 patients participated in the study. Results indicated no significant differences between the experimental and control conditions on any outcome measures. This study used an early version of virtual reality technology to induce hypnosis and highlighted several important lessons about the challenges of implementation of this technology and how to improve its use in clinical settings.



GOD LOCUS OF HEALTH CONTROL, PARANORMAL BELIEFS, AND HYPNOTIZABILITY

JOSEPH P. GREEN & SPENCER R. HINA

Belief in the paranormal (e.g., spirits, extrasensory perception, fortune telling, extraterrestrials) is common. Extraordinary and magical beliefs have been linked with hypnotizability. A total of 167 undergraduates completed measures of paranormal and magical beliefs, locus of control, absorption, fantasy proneness, expectancy about being hypnotized, and the God Locus of Health Control scale (GLHC) and were hypnotized with the HGSHS:A. High and medium hypnotizable participants more strongly agreed with statements reflecting paranormal and magical beliefs and the assertion that God directly controls their health, relative to those less responsive to hypnosis. Using stepwise regression, we found that expectations about hypnosis along with scores on the GLHC scale accounted for 26% and 30% of the variance in behavioral and subjective scores on the HGSHS:A, respectively. The authors discuss paranormal beliefs and the link between the GLHC and hypnotizability.

POTENTIAL FEASIBILITY OF AN ONLINE HYPNOSIS INTERVENTION FOR WOMEN WITH PERSISTENT PELVIC PAIN

TIFFANY BROOKS, REBECCA SHARP, SUSAN EVANS, SONIA SCHARFBILLIG, JOHN BARANOFF, & ADRIAN ESTERMAN

This study aimed to examine the potential feasibility of an online hypnotic intervention for women with persistent pelvic pain. The secondary aim was to explore the effect of the hypnosis intervention on anxiety, depression, pain severity, coping, pain catastrophizing, and pain disability in comparison to a no-intervention control. Twenty women with persistent pelvic pain completed assessment questionnaires and were recruited from a variety of social media sites related to persistent pelvic pain and randomized to either control or hypnotic intervention groups. The intervention group completed a 7-week online hypnotic intervention. Results found a 30% dropout rate and modest compliance (90%-40%) with practice of audio recordings. Comments from the 7 participants who completed the hypnosis intervention indicated it was acceptable. Significant reductions in screening measures of anxiety and depression were found; however, there were no significant effects shown for pain severity, avoidant coping, pain catastrophizing, or pain disability. The intervention is potentially feasible, but further refinement and optimization is needed to increase retention, compliance, and potential effects.



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PHYSIOLOGICAL CORRELATES OF HYPNOTIZABILITY AN EVOLUTIONARY APPROACH TO HYPNOTIZABILITY: A SUMMARY

Summary by Mohamed Ali

Institute of Psychology, ELTE Eötvös Loránd University

Around fifteen years ago, a team of researchers led by Dr. Enrica Santarcangelo from the University of Pisa in Italy published a systemic review suggesting that hypnotic susceptibility, as a dispositional trait, was in fact an adaptive one. This suggestion was based on two primary observations. Firstly, highly hypnotizable individuals are easily able to influence and change their mental and bodily states. Secondly, these same individuals exhibit vascular functions with characteristics which have been associated with a better cardiovascular prognosis. More importantly, individuals with high susceptibility seem to be able to modulate their heart activity during relaxation through specific cognitive strategies to characterize the autonomic correlates of their subjective experiences.

In contrast to individuals with low hypnotic susceptibility (lows), flow mediated dilation (FMD) in the brachial artery amongst highly hypnotizable individuals (highs) is not significantly affected by mental stress and scarcely affected by tonic nociceptive stimulation (Jambrik, Santarcangelo, Ghelarducci, Picano, & Sebastiani, 2004; Jambrik, Sebastiani, Picano, Ghelarducci, & Santarcangelo, 2005). In addition, the parasympathetic component of the highs' heart rate variability during long-lasting relaxation is greater than lows' (Santarcangelo et al., 2012). These findings are both relevant to the prognosis of cardiovascular health and may have been relevant in an evolutionary perspective

Among the cognitive characteristics associated with high susceptibility to hypnosis, the capacity of mental imagery, especially the strong functional



equivalence (FE) between imagery and perception (Ibanez-Marcelo, Campioni, Phinyomark, Petri, & Santarcangelo, 2019; Santarcangelo & Scattina, 2019) may have been relevant to survival. FE regards both sensory and motor mental images and is often defined on the basis of the observed brain activations during the two activities. Recent advanced analyses of the EEG correlates of visual and kinesthetic imagery have contributed to defining the equivalence between actual and imagined perception based on regional coactivations (Lee, Chung, Kang, Kim, & Lee, 2011) and on the dynamic structure of cerebral networks (Petri et al., 2014;). These analyses have shown that the dynamic structure of the cortical networks involved in actual and imagined sensorimotor conditions are more similar in highs than in lows (Ibanez-Marcelo, Campioni, Phinyomark, Petri, & Santarcangelo, 2019). Finally, the above cited EEG study showed that highs display a distributed mode of information processing (Ibanez-Marcelo, Campioni, Phinyomark, Petri, & Santarcangelo, 2019; Ibañez-Marcelo, Campioni, Manzoni, Santarcangelo, Petri, 2019), which characterizes the individuals with greater cortical excitability (Bassett & Sporns, 2017). Since greater excitability facilitates brain plasticity (Keller et al., 2018; Ni et al., 2018; Minzenberger & Leuchter, 2019), this style of information processing may have contributed to make highs less vulnerable than other individuals to the cognitive and behavioral effects of injuries and favored their survival.

Another important characteristic of highs is their ability to control sensations of pain through cognitive strategies (Brugnoli, 2016; Jensen et al., 2016; Wortzel & Spiegel, 2017; Santarcangelo & Consoli, 2019). Analgesic suggestions may be accepted by healthy and chronic pain patients through different cognitive techniques, i.e. hypnotizability-related strategies and placebo mechanisms, not necessary alternative between each other (Santarcangelo & Consoli, 2019)- Highs, however, respond better than lows and medium hypnotizables (mediums) to explicit suggestions for analgesia but also to conditioned analgesia (diffuse noxious inhibitory control) (Fidanza, Varanini, Ciaramella, Carli, & Santarcangelo, 2017). Importantly, the highs' mechanisms of response to suggestions for analgesia does not involve the release of endogenous opiates, in contrast to the placebo response to expectation of pain relief observable in the general population and associated with opiate release. Thus, the team hypothesized that part of our ancestors with an inefficient opioid system may have developed alternative cognitive strategies to control pain to compensate for their inefficiency to develop placebo responses. In fact, good placebo responders have an efficient endogenous opioid system (Petrovic, Kalso, Petersson, & Ingvar., 2002), whereas scarce placebo responses have been observed in the people exhibiting the highs' most frequent polymorphism (Peciña & Zubietta, 2014; Trescot, & Faynbom, 2014).

Thus, the ability to accept suggestions for analgesia through non opioid mechanisms, which characterizes highs, may have been a factor promoting survival, as pain can be associated with several alterations (autonomic activity, inflammation, non-adaptive coping behavior).

Finally, highs have a better relationship with their body with respect to lows and mediums (Diolaiuti, Huber, Ciaramella, Santarcangelo, & Sebastiani, 2019). They exhibit greater proneness to be aware of bodily sensations, concentrate on and interpret them as aspects of emotional states, to cope with distress by attention to body sensations, and to consider the body as a safe place. Nonetheless, these same individuals exhibit a lower tendency to withdraw from possibly unpleasant situations with respect to mediums. Hypnotizable-related interoceptive sensitivity could be sustained by differences in the brain regions involved in interception such as the insula, which processes interoceptive signals and integrate them in conscious experience (Critchley & Garfinkel, 2019; Critchley & Harrison, 2013; Strigo & Craig, 2013) through connections with the cingulate and prefrontal cortex and with subcortical nuclei (Kühn, Mueller, Lohmann, & Schuetz-Bosbach, 2016).



In conclusion, theoretically, highs may have survived to natural selection owing to their cardiovascular advantage, greater cortical excitability reducing their vulnerability to the consequences of brain injuries, ability to control pain in the absence of an efficient opioid mechanism, and greater interoceptive sensitivity. Unfortunately, the research hypothesis cannot be experimentally tested. However, it places the trait of hypnotic suggestibility in a reference frame more complex than a merely psychological one. It also suggests that, from an evolutionary perspective, the proneness to accept suggestions could be just a side effect of other physiological features, which were instead directly relevant to survival during human evolution. It emphasizes the importance of hypnotic-related physiological correlates in everyday life and indicates the relevance of hypnotic assessment as a predictor of treatments outcome in clinical fields, from cardiology to neurology.

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XXII WORLD CONGRESS OF MEDICAL & CLINICAL HYPNOSIS

“COOPERATION IN HYPNOSIS. CHALLENGES & BENEFITS”

WHAT: XXII World Congress of Medical & Clinical Hypnosis
“Cooperation in Hypnosis. Challenges & Benefits”

WHEN: **!!! POSTPONED TO 2024 !!!**

WHERE: Krakow, one of the most beautiful medieval cities in Europe. Auditorium Maximum Conference Center of Jagiellonian University, the oldest Polish university

WHO: International Society of Hypnosis (ISH),
The Polish Milton H. Erickson Institute

CONTACT: fundacja@p-i-e.pl ; info@p-i-e.pl

POSTPONED TO 2024

Dear Colleagues,

Although we are really willing to make the Congress happen in 2022, the pandemic situation is getting more and more serious. Many countries in Europe are experiencing significant increases in the number of people who are having COVID. Probably the situation will improve by June, but some say that the June 2022 regulations in Poland will allow a maximum of 150-200 people to hold a meeting.

Additionally it was clear that participants from some countries like China or Australia are not able to come because of travel restrictions. It is very important to us that specialists from all over the world could meet in Krakow.

That is why, the ISH BOD decided to postpone the congress once again to 2024. (2023 there will be an European plus an Asian Hypnosis Congress)

XXII WORLD CONGRESS WILL TAKE PLACE IN KRAKOW IN 2024.

Both participation and speaking submissions will be transferred automatically to 2024.

Kind regards,
Kris Klajs

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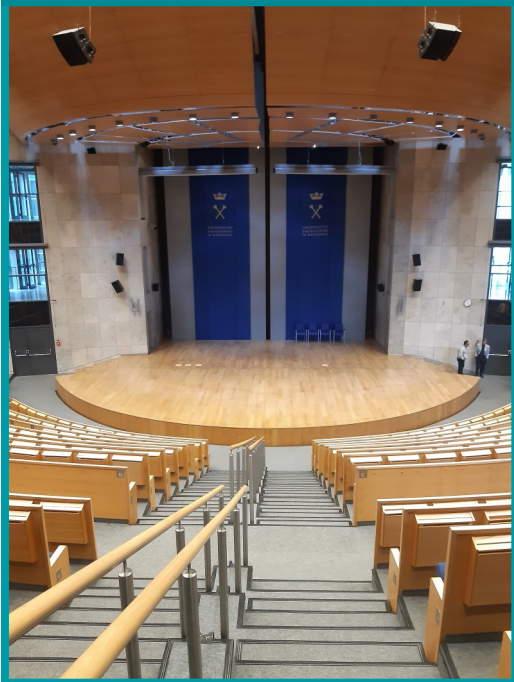
BOD SITE VISIT

**THE BOD VISITED THE SITE OF THE 2024 ISH MEETING:
JAGELLOW UNIVERSITY, AUDITORIUM MAXIMUM. KRAKOW.**





University of Kraków





EVENT CALENDAR

[HTTPS://WWW.ISHHYPNOSIS.ORG/EVENTS/](https://www.ishhypnosis.org/events/)



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PROFESSORS, WORKSHOP TRAINERS, COLLEAGUES:
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FREE MEMBERSHIP OFFER FOR STUDENTS

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This **free membership** allows students to receive reduced fees for the ISH World Congresses as well as other member benefits such as the newsletter, membership directory and video library. Interested students may also purchase a one-year online access to the International Journal of Clinical and Experimental Hypnosis (IJCEH) at the cost of \$35.

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The ISH is a non-profit organization of members in the health professions. Its membership is comprised of both individual members and society membership from all over the world who meet the qualifications for membership. Individual membership draws from those who are members of ISH constituent societies (CS), those who are non-CS members, and representatives to the ISH Council of Representatives (COR). Constituent Societies of the ISH have similar missions and by-laws to those of ISH. Read about the ISH mission and its By-Laws to learn more about the ISH.



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