



Entrancing News

December 2016

A SPECIAL HOLIDAY ISSUE

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Letter from the President

The Cave of Brahma: A Powerful Intrapsychic Healing Technique

The very center of the brain is the third ventricle – one of four connected fluid-filled cavities comprising the ventricular system within the brain. It is filled with cerebrospinal fluid, and sits in the center of the brain below the corpus callosum, the bridge of fibres connecting the left and right hemispheres of the brain.

In ancient traditions, the third ventricle is referred to as the Cave of Brahma or the Crystal Palace and is considered the source of our so-called Third Eye - through which we obtain intuitive insights.

According to Osteopathic surgeon Dr. John Upledger, the founder of Cranial Sacral Therapy, the cerebrospinal system is the seat of all experience in the body. The cerebrospinal fluid is in constant motion through the Cave of Brahma (the third ventricle), the other ventricles and throughout the complete cranio-sacral central nervous system. The fluid is crystalline in nature meaning that ions can move freely within the matrix. Thus, communication or information is moving through the fluid and all information is some form of somatosensory experience.

By becoming aware of this information, we can begin decoding the meaning of symptoms or subconscious blockages to healing.

The third ventricle of the brain is lined with cilia that are constructed just like the light sensitive rods in the eye. According to Dr. Upledger, they literally “see” this information. This adds a new meaning to the term “Look within” and the term “The Third Eye”.

Shamans, mystics, healers and visionaries of many cultures have gone “into” the Cave of Brahma for many healing and transformative experiences. In deep meditation, as one’s eyes look upwards and within, with practice, in the center of the Cave of Brahma one can begin to sense a “scintillating white star” which will become brighter and brighter as one goes into a deeper meditative state – a deeper octave of consciousness.

(Letter from the President ... continued)

As an aside, when Einstein was asked - what is light? His response – “light is the shadow of God”. Many mystics, long term meditators and even Dr. Upledger have suggested this brilliant light in the Cave of Brahma could be the spark of the Divine or Divine Love within all of us – waiting to be potentiated.

However, I will leave that delicate issue to be decided by your personal metaphysics or belief system.

Of interest, perhaps it that the young very gifted healer Adam (Dreamhealer) prepares for a healing session by going into a fairly deep trance and following a spiral of light that rapidly increases it's spinning circular motion. He then projects his awareness into his third ventricle, the Cave of Brahma and then proceeds with intention to focus healing energy to his target, or person – regardless of distance since the mind is non-local.

Technique

Once I get my client into a medium level of trance (which is ratified by the yes finger going up on its own) I ask them to gently, without effort “focus on the space in between your ears”.

Having already provided background on the Cave of Brahma, I then ask them to go into the third ventricle (intuitive – not anatomical knowledge is implied) and connect with the “scintillating white star” within. If someone cannot “see” it – I ask them to pretend to see or sense it. (I have rarely had anyone not able to do this).

I then suggest making the inner light brighter and brighter and “out of this brightness will emerge your inner physician (inner wise person, inner guide, inner source, inner healer)” or whatever metaphor seems appropriate for your client. The inner source may take any form – light, animal, person, colour, - or occasionally – a cartoon, playful figure. I add that this inner essence or “innergy” (intelligent energy) “is connected to every cell and system of your body.”

I have also prepared the client by explaining that “symptoms” are a message from our subconscious that

- a) we should be making a change in our life that we are avoiding
- b) that there is a part of us that needs strengthening that is needed in order to heal or –
- c) the symptoms could be a “lesson” that we need to learn at this time of our lives.

In addition to dialoguing the above questions with our inner physician, I will include some of the following statements or questions depending on the issue:

- Ask your inner physician to tell you something very important about yourself that you need to know at this time in your life. (wait for an answer)
- Ask your inner healer – “what is the most important change in my life that I need to make at this time in order to begin the healing process?”
- Is there any form of self-punishment involved in my symptoms?
- Does your inner source know that you can get well?
- What is the most important first step I need to take to begin the healing process?
- Is there a limiting belief that is keeping a part of me trapped in the past? (If the yes finger goes up....”Let a resourceful thought or answer to that question float to the surface now-w-w”
- Is there another part of you that has a different perspective on yourissue...symptoms, etc. that would be helpful to consider? (if the yes finger goes up...”let that thought come forward or float up from you deeper mind”
- What do I need to do to begin strengthening my inner confidence in order to overcome my issue?

And of course, you may have additional questions that can be added or interwoven to the above.

Alternative Technique

Once the inner physician or inner source has crystallized into form (person, animal, energy, colour, etc.) I ask that the symptom, problem or issue will also crystallize into some form (again, could be metaphorical or concrete).

Next, I have the inner physician and symbolized “problem” go into the Cave of Brahma and the instructions are: “Allow these two images (healer and issue or problem) to interact...like a psychodrama...let the script write itself and when the interaction has come to the end – or resolution – your yes finger will lift”

For many of the clients I have done this with the internal psychodrama has become a very powerful, insightful and empowering experience. This will often lead into the opportunity to utilize EMDR, hypnosis, EFT, One Eye Integration or good old-fashioned talk therapy.

Utilizing Future Orientation

Another possible approach with selected clients is to take them into a fairly deep trance, then ask them to orient into the optimal future where their issue, symptoms or problem has been resolved (to be signaled by the yes finger lifting)

Ask for an approximate month and year when this has been accomplished (or “picture a calendar on the wall where you can see the month and year”)

Next, suggest that the client look back from the future to see or sense what they did or what worked best for resolving their issue. Then – “Now – give yourself the helpful suggestions – repeat them several times... that will help you deal with or overcome your issue in the best, wisest and safest way possible”

I then orient the client back and on some occasions will take them back in trance and reinforce the same suggestions the client came up with.

Enjoy!

References

Adam. Intention Heals. (2008). Dreamhealer. Com. Vancouver, B.C.

Cheek, David (1994) Hypnosis: The Application of Ideo-motor Techniques. Allyn & Bacon, Needham Heights, Mass.

Pulos, L. (2011) Visions of the Future Mind: The Story of Adam-Dreamhealer will be published in E-Book.

Upledger, John. (2003) Cell Talk. North Atlantic Books, Berkeley, CA.

Respectfully,
Lee Pulos, Ph.D. ABPP
President

Monthly Meeting Reviews

**FOR OUR MEMBERS OUTSIDE OF VANCOUVER, you can now participate in our
invaluable monthly meetings by Skype. Please contact us in advance.**

Monthly Meeting Review: A Workshop on Ideomotor Questioning and Deep Trance Identification with Dr. Lee Pulos

Wednesday, September 21st, 2016

Reported by: Davidicus Wong, MD

Our president, Dr. Lee Pulos presented a fascinating and practical workshop on two topics, ideomotor questioning and deep trance identification.

Ideomotor Questioning

The purpose of ideomotor questioning is to provide vocal cords to the subconscious. Lee uses it for all of his patients. He has found that 70% of the population gets a response to the finger technique. For the other 30%, Lee uses applied kinesiology which works 100% of the time.

After entering trance, the subject is asked to indicated which finger the subconscious chooses to give a “yes” response, a “no” response and finally an “I don’t want to answer” response. A subtle quivering raising of a finger is more indicative of a genuinely subconscious response than a quick definitive rise.

Lee suggested the following questions based primarily on the work of Dr. David Cheek:

Does your inner mind know you can get well and stay well?

Is there a deeper part of your mind that has another insight?

Is there a part of you that doesn’t want to get well?

Is there a part of you that is using your symptoms to punish yourself or someone else?

Is there something or someone you need to forgive in order to heal? (Lee pointed out that all healing has to go through the door of forgiveness).

Is your subconscious aware of a critical incident that set you up for this symptom? belief? Illness?

Is there more than one past experience or incident connected to this condition?

Now . . . orient yourself back in time to before the symptom, problem or issue first appeared (Wait for the finger response). Now, come forward to the first critical incident (trauma, setup, root cause) that planted the seed for your issue, symptom or problem (Wait for the finger response). Now orient forward in time to when the symptoms, issue or problem was reinforced (Wait for finger response) and forward again to when it was reinforced again . . .

If there were an emotional issue for your problem, what would it be?

If your problem or issue were to be the title of a chapter or a book, what would that title be?

Lee has used **Pseudo-orientation into the Future** to help the client orient to a future time when there is good health and total freedom from pain or the psychological issue being worked upon. He asks, “Looking back from the future, what was it that you did that was most effective to heal yourself?” (The yes finger will lift). He then asks the client to “give your subconscious that prescription, that suggestion from your optimal future to the here and now.” He repeat this suggestion several times and then asks the subconscious, “Did you understand and accept that suggestion?” (The yes finger almost always lifts at this point).

Lee also suggests **Remembered Wellness**. He asks, “Can your body or subconscious remember what it feels like to be well?” (finger response) “Is your body and mind willing to rediscover and reconnect with the resonance of remembered wellness?” “Think of a time when you had optimal health, wellness, vitality: mentally, physically and spiritually. Lift your yes finger when that image of you and time comes to mind.” “Now orient back in time and blend, becoming one with that body and mind and the resonance of remembered wellness. Your yes finger will lift once the blending has taken place.” “Now let the younger you become the teacher and teach the older you how to rediscover the resonance of health, the vibrations of optimal health, vitality, wellness in all levels of your being.” “Once your subconscious mind and optimal future self agree that they will work together as partners to help you rediscover and continue blending and incorporating the optimal amount of wellness resonance into your spirit, body and mind of today, your yes finger will lift.”

Lee reminds his clients that it is the future (not the past) that creates the present.

References

Cheek, David B. (1994) Hypnosis. The Application of Ideomotor Techniques. Boston. Allyn & Bacon
Rossi, Ernest and Cheek, David B. Mind-Body Therapy: Ideodynamic Healing In Hypnosis. New York. W.W. Norton & Company

Deep Trance Identification

Lee pointed out that we are normally only aware of 10% of the brain’s potential. By awakening the subconscious, we can expand our bandwidth of awareness. Three essential tools are desire, expectation and imagination.

Lee presented the work of Vladimir Reichoff who used Deep Trance Identification to maximize human potential. In one case, he hypnotized an engineer untrained in art to identify with a famous artist. Over a number of months, he achieved great painting skills.

Lee's workshop included ample discussion and opportunities to practice all of these techniques. The evening was enjoyed by twenty of our members – including two via Skype! Lee was thanked for a very practical and inspiring evening.

Monthly Meeting Review: Hypnosis with Aspects of Insecure Attachment For Issues Such as Trauma and Anxiety with Dr. Wayne Emery

Wednesday, October 19th, 2016

Reported by James Stabler, MSW, RCC

Dr. Emery gave an overview of attachment theory and provided the participants with two hypnotic trance journeys. When using hypnosis with clients with insecure attachment issues an understanding of two essential qualities of secure attachment is necessary. Those qualities are a Safe Haven and a Secure Base. Additionally, the three-stage ARM approach from Mentalization-based treatment is helpful in working with issues of insecure attachment (ARM comes from articles by Eric Spiegel).

Safe Haven

In times of adversity, the individual's attachment system becomes activated and the individual will seek out the comfort of a safe haven. This should result in stress reduction, better coping capacity and greater feelings of security and influence both physical and psychological wellbeing.

Secure Base

In times of adversity when the individual's attachment system becomes activated and if the individual has secure attachment, the individual does not question the security and availability of a secure home base and does not experience fear or distress. Therefore, the individual does not have to move toward the secure home base. A sense of a secure base is about exploring with confidence to risk and learn, where there may be some distress that is not overwhelming. When a person is overwhelmed, he or she could return to the safe haven, real or internalized (as part of a healthy and normal response).

The ARM Approach

The ARM treatment approach is elaborated into three stages: Attunement, Representation and Mentalization.

Attunement

Attunement has to do with the psychotherapeutic relationship and the therapist's ability to create sensory and relational awareness and anchors. Attunement tasks:

1. Act as a "scaffold" for the patient to build self-directed attention. By creating togetherness, hypnotic attunement and phenomena occur allowing corrective symbiotic experiences where the patient absorbs and experiences feelings of safety, soothing and security.
2. Provide the patient with the opportunity for somatosensory experiencing so as to increase awareness of emotional, physical and contextual integration of the here-and-now phenomena.
3. Provide the opportunity for the patient to experience sensorimotor anchoring, the ability to notice and create positive sensory experiences and contain affect.
4. Help the patient establish, repair, and maintain boundaries and gain a sense of awareness, control and mastery over boundaries.
5. Attunement also requires the psychotherapist to actively engage in contingent and marked mirroring.

Contingent Mirroring

The attachment figure, parent/therapist matches the facial or vocal expressions of the infant/patient validating emotional experiencing. Affirming infant/patient experiences through contingent mirroring builds self-other empathy.

Marked Mirroring

The attachment figure, mother/therapist interacts to contain distress and provide boundary demarcation helping to guide toward reality-based responses. The mother/therapist initially matches the patient's distress and then hypnotically paces slightly ahead helping to build a sense of perspective and boundaries/containment.

Representation

Representations are information-bearing structures of one kind or another that help individuals define themselves in relation to others and the world around them. Representations enable the individual to retain some aspect of consistency despite moment-to-moment changes, linked to consistency of self or other across changing affective and cognitive states.

As representational capacities develop, the patient can move from immediate experiences (attunement) to “fantasy-based” representations that assist with physical and emotional regulation, affect expression and establishing boundaries (extending attunement), and internalizing adaptive relationships, controlled reprocessing of trauma memories, identify development or integration of diffuse ego states.

Three examples of therapy representational techniques:

1. Representation in a therapeutic relationship
2. Imagined parental figure representation
3. Ego State representation

Mentalization

Mentalization is a metacognitive activity of “holding mind in mind” or “thinking about thinking”. Rather than viewing the attachment process solely as a means towards secure attachment (internalized representations of attachment figure), mentalization researchers believe that the process of attachment also serves the purpose of creating a representational system that is useful for survival and adaptation. Secure attachment builds reflectiveness and openness to experience and desire to understand one’s own and others’ minds. Insecure attachment on the other hand limits or reflexively shuts off mentalization (foreclosure) where underlying mental experiences are not taken into account in reacting to observable behavior with a focus on concrete, surface, literal, rigid or intellectualized aspects.

Monthly Meeting Review: Integrating Ego State Therapy (EGS), Cognitive Behavioural Therapy (CBT) and Eye Movement Desensitization Reprocessing (EMDR) Into Your Practice

Wednesday, November 16th, 2016

Presented by James Stabler, MSW, RCC

- (1) Trance is a natural and necessary part of our daily life. EGS, CBT and EMDR utilize trance phenomena to shift the client from a self-devaluing trance to a self-valuing trance. An example of a self-valuing trance is a jogger’s “second wind”, it might be reported as “my whole body was just moving in an effortless way”. In a symptomatic or self-devaluing trance a person may complain that the processes like overeating “just happen” automatically despite best efforts to control or suppress them consciously.
- (2) Self-devaluing trances result from unresolved critical past experiences being triggered in the present. For example, a 35 year old woman’s experience of childhood was of abandonment. Now married when her husband gives her “that look” she immediately regresses to being a five year old abandoned child. A 25 year old relives the trauma of his time in Afghanistan every time he hears loud noises out of nowhere. A 30 year-old gay man is incensed that his American relatives voted for Donald Trump. He is so mad he deleted them from Facebook and will no longer talk to them on a regular basis.
- (3) These three examples of self-devaluing trances can all be alleviated by hypnosis, and hypnosis is distinguished by the general experience of trance by the mode or ritual used to induce trance. For the 35 year old woman with abandonment, the ritual mode of Ego State Therapy would probably be appropriate. For the 25 year-old veteran, the mode or ritual of EMDR would may be appropriate. For the incensed gay man, the mode or ritual of CBT would probably be appropriate.
- (4) EGS, CBT and EMDR all use the same five-step hypnotic mode or ritual to induce trance:
 - A specific goal is identified
 - Education or Suggestion is used
 - Achieving an altered state of consciousness
 - Bypassing the critical mind

- Allowing the subconscious mind to bring about the conditions to achieve the goal requested by the conscious mind
- (5) EGS, CBT and EMDR utilize hypnotic ritual to induce trance in the five-step mode outlined in (4) above. CBT is really Cognitive Behavioral Hypnotherapy (CBH) whether or not the therapist is aware of it.
- (6) CBT/CBH creates trance because it is goal specific and utilizes education/suggestion that your negative conditions are not caused by your situation but rather your interpretations and beliefs about the situation. After this, come deeper hypnotic suggestions through metaphorical language (You are like a computer). The critical brain is further bypassed by metaphorical suggestions to alter consciousness. This sets the stage to bring to awareness the actual thinking that will be changed through the pen and paper cognitive restructuring exercise. Further suggestion and metaphorical language is used, such as upgrading the files in the computer of your mind and eliminating your thinking errors.
- (7) CBT/CBH also utilizes the behavioral hypnotic ritual/mode of the Relaxation Response.
- (8) EMDR utilizes the five-step mode or ritual to induce trance. The modified EMDR protocol is as follows and I often eliminate half of the steps most of the time when I use EMDR.
 - Identify the problem (target)
 - Install or evoke a safe place
 - Identify the worst part (image/picture) of the memory or event
 - Identify emotions
 - Identify negative cognitions
 - Desensitize-bilateral stimulation
 - Install the positive cognition

Ego State Therapy

Ego State Therapy can be conducted using the following seven-step model that is consistent with the five-step trance process.

1. The concept of Ego States and Goal/Target Setting
2. Ideomotor Signalling and Affect Bridge
3. Critical Experience Set Up
4. Ideomotor Questioning and Regression
5. Integration & Progression
6. Integration & Trance Termination
7. Closure

What follows is the above seven step process the way I would present it to and conduct the process without confusing the client with the academic language. The process below is presented in a linear fashion but setting the stage for hypnosis requires interweaving goal/target setting, explaining the concept of ego state, creating environmental safety and using education/suggestion/metaphor to create a light trance before formal hypnosis begins. This may done in a single session but usually I do this over several or more sessions depending on the client's readiness.

The Concept of Ego State

- As we go through life, especially when we are young, we experience "critical" events that remain with us emotionally. Most of the time, we are unconscious of these critical events and they remain dormant until something triggers them in the present. Critical events are often emotionally hurtful or traumatic but they can also be neutral or non-hurtful. These critical events can also be called sensitizing events.
- An example of a critical sensitizing event was the four year old left at the beach while the parents and siblings drove away for two hours before realizing he was missing. The parents return for him, soothe him and over the years the family with laughter retells the story of forgetting him at the beach. It would seem this critical sensitizing event did not affect the boy and did not follow him into adulthood. But it did especially when his wife and children would be busy and "forget" to let him know where they were at "all" times, much to the ire of his wife and children.

- An example of a neutral or non-critical but sensitizing event is the boy who was “protected” by his older brother. Now an adult, he is successful and has a very good and loving relationship with his older brother. However, there are times in his adult life when he does not stand up for himself and afterwards wonders why.
- In both of these examples the individuals repressed their protective emotions. The boy who was left behind probably stuffed his fear and anger. The overprotected boy probably stuffed his anger of being overprotected.
- When the present unconsciously resembles the past, both individuals automatically return to being children emotionally and while in this “trance-like” state of mind, reflexively stuff their protective emotions. Once the present event is over, they “wake up” and wonder why they responded the way they did.

Goal/Target Setting

- Educating the client about the concept of Ego State and Goal or Target Setting over several sessions or a single session is a process of having the client shift into trance and experience trance phenomena.
- During the Education/Goal Setting journey what is important is to “utilize” what the clients bring to the table; their stories, their words/metaphors, and what they want to achieve.
- Goal/Target Setting is critical to a successful hypnotic session. As you help the client identify the goal he or she wants to achieve in the session, the client is gradually going into a light trance. This is important so that when it comes to ideomotor signalling, the client is not resistant because of the “silly” request to talk through the fingers.
- As the process of goal/target setting proceeds, I ask questions that require a Yes response from the client. Yes responses further deepen the trance before ideomotor questioning. I ask the question, “Do you think there is an emotional component that maintains your current problem?” “Would you like to begin to reduce or begin to eliminate the emotional component that is maintaining the current problem?”
- Explaining the concept of ego states and goal/target setting is really Cognitive Reframing. The client “reframes” the symptoms and abnormal behavior (affect) that is being played out in the present by an ego state or younger self that experienced a critical sensitizing event that has not been emotionally metabolized. Thus the process of having the client involved in Cognitive Reframing is really a hypnotic induction trance process.

Ideomotor Questioning

- Ego State Therapy, from my perspective, is permissive Eriksonian hypnosis. For efficiency sake and time consideration and personal style, I am directive so I can guide the client through the process allowing (permissively) the client’s unconscious to do the work.
- I establish ideomotor signalling by requesting clients to place a hand on the knee (I usually do this physically myself without directing telling them to put the hand on the knee). Compliance is an important indicator of trance.
- Next I say and lift my finger, this is your Yes finger (Index), this is your No finger (middle) and this is None of Your Business (thumb).
- Note: once the client has agreed to do “ideomotor talking” the hypnotic trance induction has been formally ratified.

Regression

- At this point the client is asked to go to a special place (safe place) in their mind or imagination and feel the feelings, hear the sounds, taste the tastes, see the sights and smell the smells. This is a fail safe by directing the client visually, auditorily and kinesthetically.
- Have the client verbally describe their special place and what they are feeling. Explain, before going to that special place that the client has to verbalize their special place because it is hard to do it with the fingers and the special place will be used as an anchor. This explanation deepens the trance as they are imaginatively in a special place and still in the office in the here and now, and they will be moving back and forth between the past, the present (office) and their special place (out there).

- Now ask the client what they are feeling in their special place (happy/secure/strong etc.) and say to him or her that “when you are ready and your deep inner mind is ready, the unconscious that knows all is ready go back to a memory, an experience when you were younger that is unlike the feeling you are feeling in that special place, and when you get back to that memory experience when you were younger that is unlike that feeling, let me know with your yes finger.”
- Client indicates yes with the finger. Now say some verbal patter as follows. “Now help that younger self experience the experience he or she experienced at the age he or she experienced it, and this time help that younger self will experience the experience he or she experienced at the age he or she experienced it the way that he or she should have experienced it if you had been there to help. Help that younger self finish off that experience so it is no longer baggage and it is history, and when you have done that let me know with your yes finger.”
- Client lifts yes finger. Then ask “Is that younger self younger than 5?” If yes, ask “Is he or she younger than 4?” If yes, keep going until there is no response. If the response is made by the no finger, then ask if the younger self is younger than 10 and if the response is yes keep going down in age until a no response is given. Start with 5 and add 5 years each time a no is given to the question “Is the younger self younger than 5, 10, 15” and so on. If the client and or therapist gets lost with this process just ask how old the younger self is.
- Now say to the client when that younger self has joined you in that special place and is feeling (whatever the feeling is) and ask the client to let you know with the yes finger. When the yes finger is lifted and say now you and your 5 year old (whatever age the younger self is) just enjoy being in that special place (describe it briefly in the client's own words) and the feeling (whatever that feeling is); and “when that younger self is feeling the feeling and is happy and content let me know with your yes finger”. When the yes finger is lifted, follow this by the instruction for the client “you and your 5 year old just enjoy the special place (pause).
- Next say to the client when you are ready, your deep inner mind is ready, the unconscious that knows all is ready go back in time to another memory, an experience that is unlike that feeling in the special place. When you get back to that memory or experience, let me know with your yes finger. Yes finger is lifted and once again direct the client to help the younger self experience the experience that he or she experienced. Continue with the verbal patter noted above. When finished and the memory or experience is history and no longer baggage, have the client take the younger self to the special place and lift the yes finger when the younger self is feeling the feeling of the special place.
- Keep up this process going until the client lifts the no finger as the regression is now finished with regard to the emotional component of the goal/target. If the client continues to have memories and some have many, end the regression according to your clinical judgment.
- When the regression process is finished have the client enjoy the special place with his or her younger self. Be silent for a short while.

Freedom from The Repressed Emotions

- When the regression process is terminated, it is time to solidify freedom from the repressed emotion (ego state). The client does this by taking each of the younger selves, one at a time, back to where the younger self was found. Say to the client: “now take the five year old (whatever the ages are) back to where you found him or her to make sure there are no leftovers, that the experience is history and no longer baggage. And as you do let the five-year old know this is the last time he or she will be where you found him or her, and from this day forward he or she will be with you today and all the tomorrows. And when you have done that and the five year old is back in the special place and is feeling happy (whatever the feeling) let me know with your yes finger. Direct the client to do this for each of the younger selves.

Integration & Progression

- Now it is time to do ego strengthening with the client to secure freedom from future symptom producing stimuli by a progression process or a future trance rather than a regression trance. The verbal patter is as follows.

- Ask when you are ready and the 5 year old is ready (and all the other ages are ready), I want all of you to go forward in time, a year, a 1,000 years however far you want to go. And when you go forward in time I want all you to experience similar experiences that you experienced when you were 5 (and all the other ages) but this time these experiences will not be distressing, they will be like water off a duck's back, they will be easy to deal with. And when you have finished your future trip let me know with your yes finger.
- Good, now return to your special place and when you and your five year old (and the other ages) are happy (whatever the feeling) let me know with your yes finger.

Integration and Trance Termination

- Now it is time to integrate the ego state into the present and to terminate trance. This is done with the following verbal patter.
- Good. When you are ready and the five year old is ready (and the other ages) are ready I want you to integrate them inside you, put them inside asleep so to speak. You can put them in your heart, rib cage, abdomen or anywhere in your body that you and they like.
- And when you have them inside you and before you put them to sleep, I will say some things that you may wish to say to them before they are integrated or asleep. You can say what you want to say to them silently.
- You say to them I love, I am here for you, I will protect you, I am the adult. Adult stuff is my job and you can just be 5 (and the other ages). And what is most important is to let them know that you are their new mother or father and you will be there for them and they can get you anytime they want.
- When the five year old (and the other ages) are fully integrated within you and you are ready, take a deep breath, stretch your arms and open your eyes.

Closure

At this point I give the client time to reorient to the present to make sure the trance is fully terminated. I usually don't discuss the critical/sensitizing experiences or the insight that the client has gained. This is in line with Erikson's concept of utilization of the client's own wisdom and inner resources.

Also not discussing the critical sensitizing events reinforces the "Silent Abreaction" of the regression. The silent abreaction is a gentle and less fearful process of trance regression for the client. At the end of the session, I reinforce with clients that they will now be able to help their younger selves without my assistance and describe various options to them. By not discussing their critical sensitizing events, I am implying that they can have safe and silent abreactions by themselves. Most clients with unresolved past critical events try to avoid these events for fear they will make a fool of themselves or go crazy. The silent abreaction takes that fear away and gives them the power to heal themselves.

Membership Renewals for 2017

It's that time of year again when you must renew your membership to take advantage of monthly events, discounts to workshops and seminars, and to have your profile listed on our website.

Please visit our website before December 31, 2016 to renew your CSCH membership. Please note you can pay for two years in advance or one year at a time. The choice is yours.

[ONLINE MEMBERSHIP RENEWAL](#)

Our Annual Two-Day Workshop in February 2017

Mark your calendars! The February Workshop is just around the corner.

Please visit our website for information about the new and different sessions.

This time, the workshop will take place on Saturday, February 26th and Sunday, February 27th, 2017 at the **Nikkei Centre**, a beautiful location in Burnaby.

Visit the Training Opportunities section on our website www.hypnosis.bc.ca for more information including registration.

**We warmly thank Mavis Lloyd for her many years of service
to our organization as an inspiring teacher
and member of the executive council.**

On

**Welcome to Our Newest Member
Randa Megharief**

***behalf of the executive council, we wish you and
yours a very happy and healthy new year!***

Happy Holidays!

**Save the date! On Saturday, April 29th, 2017,
Dr. Harry Stefanakis
will present a special workshop.
Details to come.**

Canadian Society of Clinical Hypnosis (BC Division)
2036 West 15th Avenue, Vancouver, B.C. V6J 2L5
Phone: 604-688-1714 Fax: 604-683-6979
www.hypnosis.bc.ca admin@hypnosis.bc.ca