

Hypnosis for Couples

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What's Hypnosis?

- ▶ State of Focused Attention
- ▶ State of Dissociation
- ▶ State of Altered Consciousness
- ▶ State of Relaxation
- ▶ State of Enhanced Suggestibility

Hypnosis

Many professionals approach hypnosis as something to be “done” to someone else, a technique.

Hypnotic scripts and many definitions focus on the hypnotic induction, the procedural aspects, the hypnotizability and intrapersonal capacity for subjects to develop a trance state



Relational Aspects of Hypnosis

- ▶ Ericksonian therapists have placed a primary emphasis on the relational aspects of attunement, and utilization in treatment (Erickson, 1959, 1982; Gilligan, 1987; Zeig, 2014; Borges, 2021)
- ▶ In recent years the development of neuroscience and impact of attachment has lead the field of hypnosis to consider the relational aspects of hypnosis
- ▶ Utilization is an Ericksonian concept that is a central strategy for working hypnotically with people. Using the patient's values, language, body language, even the symptom we attune to the patient's world like a parent would do with their child.

Relational Aspects of Hypnosis

- ▶ “Utilization is the readiness of the therapist to respond strategically to any and all aspects of the patient or the environment” (Zeig)
- ▶ Therapist is always observing how the patient responded after each suggestion. Is it a “yes” response or a “no” response. We are observing facial micro-expressions, breathing, relaxation, deepening in the trance state, etc.
- ▶ Hypnosis can increase the sense of contingency
- ▶ “...contingency refers to a relational experience in which you feel understood by another person. You have a felt sense that this person is attuned to you... You feel they “get” you” (Heller, 2016)
- ▶ **Attunement is essential in co-regulation**



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“...the relational field of hypnosis is about utilizing the immediate experiential and relational process that emerge in the intersubjective matrix, combining with a deep and abiding conceptual understanding of the mutative processes of relationally informed attachment and development, and harnessing this interaction to facilitate patient healing through therapeutic treatment relationship.”

“...in hypnosis the relationship is both the container and the conduit of those processes that promote change”

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Spiegel, et al. (2019). Hypnosis and The Therapeutic Relationship: Relational Factors of Hypnosis in Psychotherapy. *American Journal of Clinical Hypnosis*, 61: 119-122. Routledge.

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“...hypnosis is ultimately and primarily a relational experience because of ...its capacity for attunement not only in a phenomenological ...or a psychological sense but very much in a somatosensory capacity as well... that sense of being with the other in a particular way that can address the various developmental failures in relationships... that can provide a safe place for engaging difficult affects... that can create a paradigm for new way of being in the relationship that feels secure and gratifying make it for the essence of any kind of hypnotherapeutic intervention.”

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Spiegel, et al. (2019). Hypnosis and The Therapeutic Relationship: Relational Factors of Hypnosis in Psychotherapy. *American Journal of Clinical Hypnosis*, 61:122. Routledge.

Symptom as a Negative Trance

- ▶ Hypnosis experts understand that patients can get stuck in negative trances, and use hypnosis to help them out of negative state
- ▶ Family Negative Trance: The family is a hypnotic unit and the parents are hypnotists who themselves were hypnotized as children
- ▶ Family messages can be transferred from generation to generation
- ▶ Each partner bring transgenerational imprints into the relationship

Milton Erickson's legacy

- ▶ Erickson helped couples to individuate themselves out of transgenerational family imprints
- ▶ Erickson believed that patients have the resources and the capacity to move towards health
- ▶ Erickson believed that is possible to generate one small strategic change that would have a ripple effect
- ▶ Erickson was precise in his use of hypnotic language
- ▶ Used direct and indirect conversational hypnosis
- ▶ Erickson gave couples experiences to break patterns and establish new ones

Couples therapy

- ▶ Attachment Theory: Bowlby, Ainsworth, Fonagy, etc
- ▶ Developmental Neuroscience: Shore, Porges, Dan Siegel
- ▶ Arousal Regulation: Shore, Porges, Siegel
- ▶ Psychoanalytic/psychodynamic: Masterson, Freud, Scharff, etc
- ▶ Family Systems: Whitaker, Papp, Satir, Minuchin, etc
- ▶ Psychodrama: Moreno, Dayton
- ▶ Trance: Erickson, Zeig, Gilligan, O'Hanlon, Rossi, Phillips, Watkins
- ▶ Social Justice: Carol Gilligan, Boszmormenyi-Nagy
- ▶ Body therapies: Levine, Ogden, Fosha
- ▶ Trauma: Van Der Kolk, Fisher, Levine

Polyvagal Theory

- ▶ During non-threatening times the ventral vagal social engagement system is dominant, helping us to engage with the environment, relate with ourselves and others
- ▶ When we process cues as safety the muscles of our faces loosen, we become engaging, and enter in an expansive, non-defensive relational space where we use self and co-regulation utilizing eye contact, facial expression, and vocalization
- ▶ Porges points out that the only reliable effective treatment for trauma is safety

Polyvagal Theory



When we re threatened, the vagal dorsal engagement is overridden by the activation of the sympathetic/adrenal system



The “alarm” is activated by amigdala and cortisol, epinephrine, and adrenaline helps to mobilize energy to meet the threat



Blood flow is increased to fuel fight/flight/freeze response



Decrease the brain cortex activation

Attachment

- ▶ How we were held as infants, is going to be the way we will “hold” ourselves as adults and the way we let others “hold” us in romantic relationships
- ▶ Our nervous system learns to co-regulate by receiving information directly from caregivers, and that regulation becomes who we are on a neurological level
- ▶ How we felt when we were held, nursed, rocked, and the qualities of the attachment figure impact the baby’s nervous system, and get imprinted into their nervous system and body through **implicit, non-conscious memory**
- ▶ We get hurt in relationships and we heal in relationships

Attachment

Early attachment blueprint

Acts on Autonomic Nervous System (ANS) in face of interpersonal stress

Raising or falling of arousal states

Cs or UCS activation of body muscles (face and body) as expressive efforts to move

Toward or Away from primary figure

Autonomic Nervous System (ANS)

- ▶ ANS controls visceral organs, effectors in skin, cardiovascular system that out of voluntary direction
- ▶ Insecure/Avoidant infants: parasympathetically biased
- ▶ Insecure/Anxious infants: sympathetically biased

- ▶ Sympathetic dominance- fight engagement with external environment and high levels of energy mobilization
- ▶ Parasympathetic dominance- disengagement from external environment, and low levels of internal energy.

(Tatkin, 2013)

Polyvagal informed approaches

- ▶ Porges helps us to identify and develop strategies that can be used to support ventral vagal safety in therapeutic and everyday relationships
- ▶ The need for connection with others is a biological imperative to achieve co-regulation and self-regulation
- ▶ PACT teaches Secure Functioning as in psychoeducation and experientially so couples can understand and experience the benefits of deep connection and Safe/Security

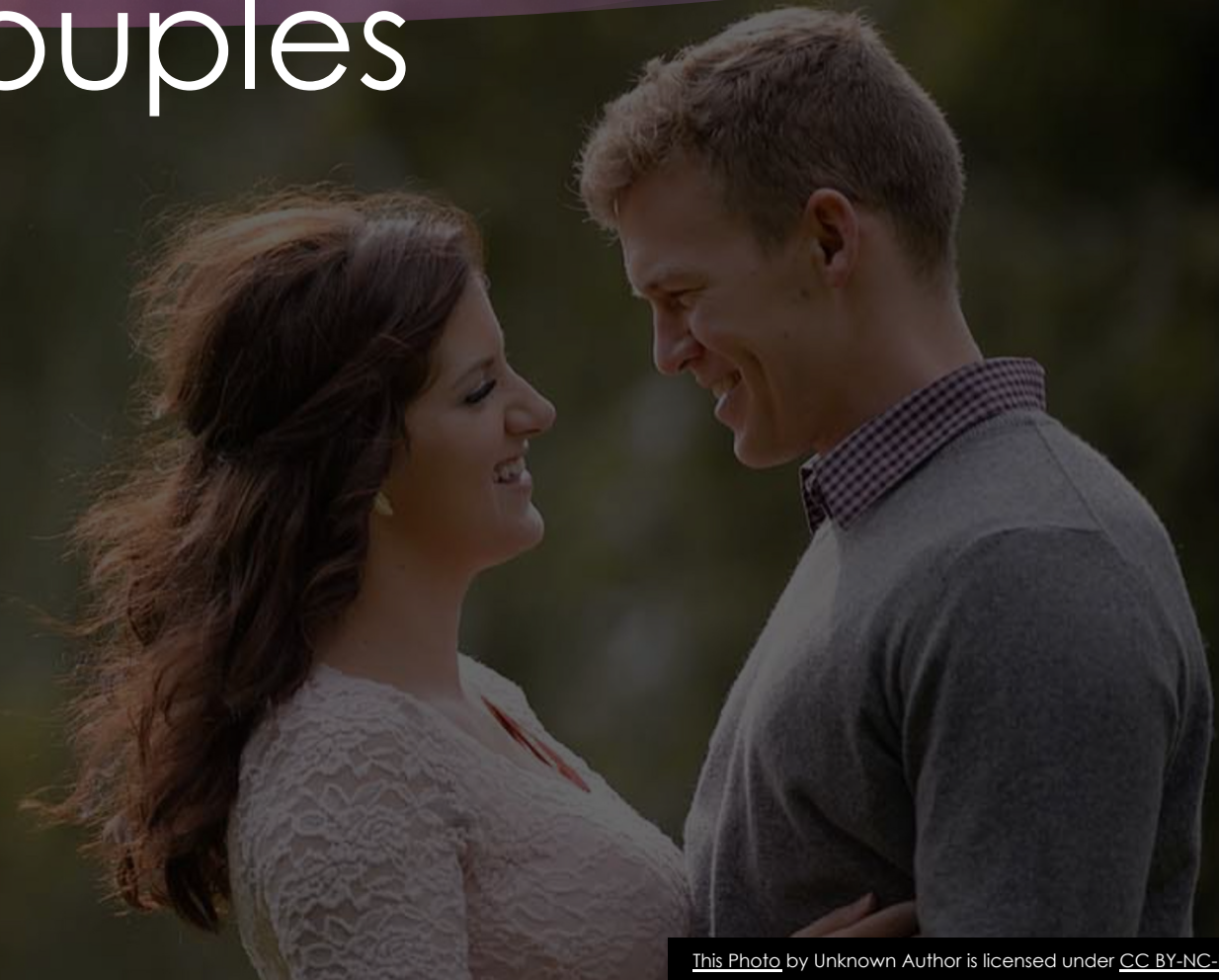
Hypnosis for Couples

EYES GAZING

AGE PROGRESSION

AGE REGRESSION

CENTER CORE INTEGRATED SELF





Eye Gazing Technique

DEMO

Eyes Gazing Technique

- ▶ **Instructions:**
- ▶ Turn to each other in a way that you are completely facing your partner. Not only your face but your body too. Get as close as you can, knees touching if possible.
- ▶ Rest your gaze into your partner's eyes. Take a few moments to look at your partner's eyes...quietly. (Therapist can be quiet for a few seconds, and observe a light naturalistic trance develop)
- ▶ You can be curious about how it feels to you as you look at your partner's eyes? Do you normally look at your partner like this? You may answer but keep the gaze on your partner
- ▶ Who is more comfortable with this? How do you know?

Eyes Gazing Technique

- ▶ What do you see? Do you like what you see? Be curious about your partner facial expression, breathing, and other signs of comfort or any shift.
- ▶ Is your partner comfortable? How do you know? (Therapist tries to get physical evidence of comfort or discomfort: shallow breathing, body tension, or smile, and relaxation, etc)
- ▶ What do you think is happening with your partner? (As the partners answer the question you corroborate): Is that true? Did he/she get it?
- ▶ (Therapist may notice one of the partner's behaviors like a smile, difficulty looking at the partner's eyes, frowning, etc. In those cases as the opposite partner): Did you notice that? What does it mean?
- ▶ Observe secure and insecure behaviors

Secure Behaviors

- ▶ Grooming behavior
- ▶ Relaxed with partner
- ▶ Eye contact maintenance
- ▶ Gestures of sweetness
- ▶ Friendliness
- ▶ Silliness
- ▶ Approaching partner when in distress, etc

Insecure Behaviors

- ▶ Look away
- ▶ Pierce lips
- ▶ Body tension in general or localized
- ▶ Chin up
- ▶ Puff chest
- ▶ Shaking or tensing legs, feet or hands
- ▶ Keep Looking at the therapist
- ▶ Avoiding answering a question
- ▶ Being angry and attacking
- ▶ Not following the task at hand

Eyes Gazing

- ▶ Serves as an assessment tool as well as intervention
- ▶ Show partner's attunement to each other
- ▶ Partner's attachment style
- ▶ How comfortable they are with each other
- ▶ How knowledgeable they are about their partner
- ▶ Teaches partners attunement, co-regulation, differentiation, etc

Suggestions of Secure Functioning

- ▶ Safety, protection
 - ▶ Attunement, feeling seen , understood, sensitive to each other
 - ▶ Comfort, Soothing , physical affection
 - ▶ Delight, partner is happy to be with you
 - ▶ (Brown & Elliott, 2016)
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- ▶ Partner Attachment Inventory (PAI)

Center Core Integrated Self

- ▶ Beneath all the scars and mal-adaptive behaviors, we all have this attachment system that's oriented to trust and togetherness with loved ones. And the more we encounter an ideal situation..., the more our inherent design for secure attachment will flourish" (Heller, 2016)
- ▶ Example: Kind Eyes
- ▶ Wise part, Higher Self, Wisdom Figure, etc

Age Regression

Age Regression examples:

1- Utilization of patient's spontaneous regressed state: e.g. What age are you?

2- Remembrance of a positive state:

Go to a time when you enjoyed sex and find out what you missed from having sex with your partner.

Couple's song

Age Progression

- ▶ Example: Time when your problems are solved
- ▶ Suggestions
- ▶ Safety, protection
- ▶ Attunement, feeling seen , understood, sensitive to each other
- ▶ Comfort, Soothing , physical affection
- ▶ Delight, partner is happy to be with you

(Brown & Elliott, 2016)

- ▶ Partner Attachment Inventory (PAI)