

DOCUMENT RESUME

ED 137 670

CG 011 256

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**TITLE** Mutual Group Hypnosis: A Social Interaction Analysis.  
**PUB DATE** [76]  
**NOTE** 20p.; Paper presented at the Annual Conference of the American Psychological Association (84th, Washington, D.C., September 3-7, 1976) ; Not available in hard copy due to Author's restrictions

**EDRS PRICE** MF-\$0.83 Plus Postage. HC Not Available from EDRS.  
**DESCRIPTORS** \*Communication (Thought Transfer); Group Dynamics; \*Group Therapy; \*Hypnosis; \*Interaction Process Analysis; Intercommunication; Nonverbal Communication; Problem Solving; \*Psychotherapy; \*Social Relations; Thought Processes

**ABSTRACT**

Mutual Group Hypnosis is discussed in terms of its similarity to group dynamics in general and in terms of its similarity to a social interaction program (Role Modeling) designed to foster the expression of warmth and acceptance among group members. Hypnosis also fosters a regression to prelogical thought processes in the service of the ego. Group pressure in Mutual Group Hypnosis is utilized positively in that the group members tend to interact in a noncompetitive manner, sharing images, positive feelings and providing support for each other to help each other find acceptable solutions to problems. Viewing group hypnosis in this framework helps remove the stigma of mystery from hypnosis by placing it more clearly within observable ways of interaction. (Author)

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**Mutual Group Hypnosis:  
A Social Interaction Analysis  
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**(Social Analysis of Hypnosis)**

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## Social Analysis of Hypnosis

### Abstract

Mutual Group Hypnosis is discussed in terms of its similarity to group dynamics in general and in terms of its similarity to a social interaction program (Role Modeling) designed to foster the expression of warmth and acceptance among group members. Hypnosis also fosters a regression to prelogical thought processes in the service of the ego. Group pressure in Mutual Group Hypnosis is utilized positively in that the group members tend to interact in a noncompetitive manner, sharing images, positive feelings and providing support for each other to help each other find acceptable solutions to problems. Viewing group hypnosis in this framework helps remove the stigma of mystery from hypnosis by placing it more clearly within observable ways of interaction.

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### Mutual Group Hypnosis: A Social Interaction Analysis<sup>1</sup>

Mutual Group Hypnosis has been described as a catalyst in fostering creative problem solving (Sanders, 1976). While in trance, every participant in Mutual Group Hypnosis contributes to the group, including group leadership. Suggestions and solutions to various problems are given by one hypnotized group member to another, thus minimizing dependence on only one individual. Mutual Group Hypnosis is a modification of mutual hypnosis as described by Tart (1969).

Mutual Group Hypnosis parallels to some degree the advantages of any type of group psychotherapy (Johnson, 1963) in that (1) the group members are not in a state of isolation because they can recognize that others feel the way they do; (2) group members learn to accept others and to be accepted; (3) group members obtain support from both the other group members and from the group leader. As in any group, there is a need for an explicit group contract outlining the goals and the composition of the group. Likewise, in the early sessions of mutual group hypnosis issues are faced such as (1) establishing one's identity in the group; (2) defining one's own personal goals and needs; (3) dealing with the issue of power, control, influence

and intimacy.

Unlike other groups, the environment of mutual group hypnosis is different. An analysis of the group hypnosis environment reveals that the methods employed explicitly foster (1) the expression of warmth and acceptance among group members; and (2) a regression to prelogical thought processes in the service of ego (Hartmann, 1958). We shall discuss each of these.

1. The methods of fostering warmth and acceptance are similar to those employed in a role-modeling program designed to teach parents and children to express more positive attitudes towards each other. This paradigm, design for the improvement of Parent-Child Interaction (Sanders, 1975), appears quite appropriate for the description of mutual group hypnosis. This paradigm teaches the use of (1) modeling cues; (2) acceptance of feelings; (3) fostering of spontaneous responses; (4) focusing on choice and alternatives; (5) providing feedback. It appears that these techniques are taught in the mutual hypnosis situation where all the group members are comfortable and relaxed, thus fostering a direct line of communication between group members (Reardon, 1971), and the group members are alert to cues given by others (Rosenhan, 1967). See Table 1 for definitions and codes.

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Place Table 1 about here

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This process is important because it brings into relief the mutual reciprocal responding among group members. The mutual interaction occurs very quickly in a supportive, empathic and solution-directed atmosphere.

The leader models appropriate behaviors by providing examples to the group, and the participating members explain, define and share common images, feelings and ideas (Devoge, 1975). The leader demonstrates brainstorming alternatives to ongoing behavior, and the group members participate in the task of brainstorming for each members' problem. The group members sort out possible consequences as a preliminary step towards making independent choices based on reality factors.

The leader encourages and supports the expression of warmth and acceptance by providing feedback to the group members. She may provide neutral feedback in which she simply describes an activity, feeling or behavior of the group member. For example, the leader may describe "lightness" as the subject's arm apparently floats upward. The leader may provide positive feedback by

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approving of an image or behavior. Milton Erickson, for example, expressed delight when his patient carried out a suggestion with his famous "That's right."

The leader minimizes negative feedback. Indeed, off target behaviors are followed (described) and utilized. Erickson (1959) called this technique a utilization technique. Stolar (1976) discussed the powerful impact of positive feedback on therapeutic outcome. See Table 2 illustrating a social interaction analysis of an hypnotic induction.

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Place Table 2 about here

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Throughout the hypnotic induction and the hypnotic interaction, there is a constant interplay between the therapist and the group members, between who is initiator and follower. At times, the therapist instructs and the group member responds; at other times the group member initiates a spontaneous behavior and the therapist follows. Any hypnotic interaction can be analyzed in terms of these categories. In this analysis, the author has arbitrarily adopted the format of the therapist being the social stimulus for the group member's behavior. In this view, the member is

seen as the respondent to the social stimulus. This format provides a consistent way of punctuating the social interaction which is in effect mutual and reciprocal.

Group pressure in Mutual Group Hypnosis is utilized positively in that the group members tend to interact in a non-competitive manner, sharing images, positive feelings and providing support for each other. The group pressure appears to help each person find a compatible solution to his own individual problem. Therefore, in group hypnosis there is considerably more support and enthusiasm resulting from the combined effort of all group members than in a non-hypnotic group. The support and enthusiasm often serve as a catalyst in generating hope and optimism that the problem can indeed be solved. This solution seeking is further increased by the utilization of the principles of creative problem solving which are essentially prelogical thought processes in the service of the ego.

## 2. Regression in the Service of the Ego

Hypnosis provides an environment which produces comfort, and maximizes the operation of creative thinking. There is considerable evidence demonstrating that hypnosis fosters images of all types: visual, auditory, kinesthetic, olfactory and tactile. Sheehan (1972) reports impressive data. The emphasis on a



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noncritical environment, imagery, and other principles of creative thinking are essentially pre-logical thought processes which are aspects of a controlled regression in the service of the ego (Kris, 1952; Hartmann, 1958; Gruenewald, Fromm and Oberlander, 1972).

### Discussion

Mutual Group Hypnosis is viewed as a social interaction between hypnotized group members who are supportive, empathic, and oriented to finding solutions. Group members make use of the principles of modeling, looking at alternatives, providing feedback and structure. The interaction generally tends to be a sharing cooperative one rather than a competitive aggressive one.

A second aspect of Mutual Group Hypnosis is the focus on finding acceptable solutions. The emphasis on a non-critical environment, imagery, and other principles of creative thinking appear to be aspects of a controlled regression in the service of the ego. Emotional and creative restructuring best occur under these conditions (Fromm, 1976).

There is a constant interplay between group members and therapist, between who is initiator and follower, instructor and respondent. Viewing hypnosis in this framework helps remove the

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stigma of mystery from hypnosis by placing it more clearly within  
observable ways of interaction.

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**Footnote**

<sup>1</sup>This paper was presented at the annual meeting of the American Psychological Association in Washing, D.C. September, 1976.

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**Table 1**

**Definitions of Therapist (Tx) and Patient (Pt)**

**Behaviors during Hypnotic Induction**

<b>Tx behaviors</b>	<b>Code</b>
Demand (instruction, suggestion)	D
Modeling (demonstrating, setting example)	M
Positive Feedback (positive evaluation)	PF
Negative Feedback (non-acceptance or negative evaluation)	NF
Following (neutral feedback- describing, reflecting)	F

  

<b>Pt behaviors</b>	
Correct Response (expected, appropriate response)	CR
Incorrect Response (inappropriate or omitted response)	IR
Emotional Response (laughing, crying)	ER
Spontaneous Response (evoked by Pt)	SR

Table 2

## Social Interaction Analysis of an Hypnotic Induction

Therapist stimulus	Code	Patient response	Code
Sit back and relax and allow yourself to get comfortable.	D	Patient responds by sitting back into chair.	CR
		Spontaneously takes a deep breath.	SR
Therapist follows (describes) the patient's behavior, e.g. "you are relaxing and taking a deep breath."	F		

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<b>Therapist stimulus</b>	<b>Code</b>	<b>Patient response</b>	<b>Code</b>
Therapist models behavior by taking a deep breath.	M		
Therapist instructs patient to take an even deeper breath.	D		
		Patient takes another deep breath.	CR
Therapist recognizes response and provides positive feedback (very good).	PF		
You are becoming more comfortable (describes behavior).	F		
		Patient spontaneously blinks.	SR



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<b>Therapist stimulus</b>	<b>Code</b>	<b>Patient response</b>	<b>Code</b>
Now your eyes are becoming heavy and tired and you are beginning to blink (therapist describes patient's behavior).	F		
Now just close your eyes.	D	Patient closes eyes.	CR