SCEH Annual Conference

HYPNOSIS TO
ENHANCE & AUGMENT
TREATMENT OUTCOMES

OCTOBER 14-18, 2020

Moving ONLINE for 2020

71st Annual Workshops & Scientific Program

Conference Program

Your official guide to our 2020 Conference

**Co-sponsored by the Society for Experimental and Clinical Hypnosis
and The Institute for Continuing Education.**

Acknowledgements

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Table of Contents

Introduction

SCEH is very excited to be celebrating its 71st anniversary – and our first online Annual Conference – this year. The conference continues the proud tradition of SCEH meetings to focus on the evidence base of clinical hypnosis. This year's event will explore some new and varied topics, while providing attendees the opportunity to gain CE credits, engage in vibrant debate and learn best practices and tools from instructors and colleagues.

All Presenters and Attendees are asked to familiarize themselves with SCEH Confidentiality Statement for Attendees and Presenters.

Agenda is subject to change. SCEH reserves the right to cancel any workshop due to insufficient registration.

Conference Theme

Our conference theme for 2020, *Hypnosis to Enhance and Augment Treatment Outcomes*, puts a focus on patient and client results and the power of hypnosis to positively impact patient care.

During these unprecedented and challenging times, our 2020 conference will focus on teaching skills, creative interventions, and applications of clinical hypnosis. Workshops across three levels (Introductory, Intermediate/Skills and Advanced) will review the utilization of hypnosis as an adaptable adjunct to other therapeutic interventions for enhancing treatment outcomes. Consistent with prior SCEH conferences, participants can also attend the Scientific Program, a Poster Session and Networking Sessions. The Scientific Program will offer keynotes, symposia and research presentations with speakers from across the world, addressing the scope of hypnosis in both psychological and medical settings.

Conference Times

Please note that all listed times are in Pacific Daylight Time (PDT). *Click here for help converting time zones.*

Conference Breaks

Break times are noted under the each specific section of the conference.

If Posting on Social Media

Please follow and engage with us on our social media channels. Click on the link to go to the SCEH account.

Website www.sceh.us/sceh-on-social-media

Please use conference hashtag: #SCEH2020

Getting Prepared to Attend our Virtual Event on Zoom

We ask all attendees to kindly review this section before the conference so that you can be fully prepared to participate in our online event, get comfortable with the platform and are able to maximize your experience.

Navigating this Document

Be sure to use the Table of Contents which allows you to find quickly all the details you need.

Zoom Links for Your Conference Selections

SCEH will send you an email with the meeting links you will need to participate in each of the selections you made when registering. These links are essentially your ticket to each session.

For the Workshops and Networking Sessions, we will be using Zoom Meetings.
For the Scientific Program, we will be using Zoom Webinar.

Using the Zoom Online Platform

If unfamiliar with the Zoom online meeting platform, please visit the Getting Started page to do a quick practice session and learn more about Attendee Controls: https://support.zoom.us/hc/en-us/categories/200101697

We suggest using the Zoom desktop app for Windows, Mac OS or Linux for the best experience. You are also encouraged to test your internet connection speed, audio and video prior to presentation, by clicking here: https://support.zoom.us/hc/en-us/articles/115002262083-Joining-a-Test-Meeting

SCEH 2020 Attendee Quick Guide

We also suggest reviewing our **SCEH 2020 Attendee Quick Guide** for some tips about how to get the most from your conference experience. The guide is a visual, quick read and should save you time.

Technical Support

As a small organization, we regret we are not able to provide you with technical support, so please be sure to test your connectivity in advance. We also ask all attendees to log into the meeting 10- 15 minutes prior to the start of the Workshop(s) and Scientific Program sessions you are attending, using the links we provide.

Session Start Times

We will open our session a few minutes early each day so that you can adjust your Zoom settings and are ready to go. We will also take a few minutes at the end of each session to make a few brief announcements about the conference.

Slides and Additional Handouts

Presenter slides and additional handouts may be provided at the discretion of the Presenter. A link to these materials may shared during the live presentation or made available on the SCEH website.

Session Recordings

We hope to share selected recordings with attendees after the conference. We plan to make these recordings available to attendees for a period of three months after the conference. Not all sessions will be available. Our plan is to send out links to the recordings approximately a week after the event. Note that CE is available only for live attendance of sessions.

CE Packet & CE Code Announcements

Your confirmation email includes a link to a Continuing Education Packet (download and print it to record your CE in real time).

The CE code for each session will be announced twice during each session (Workshops and Scientific Program). Please be sure to make a note of it on your CE Packet, as we will not be able to provide these outside the live presentation. Please use the chat box during the presentation if you need to have it repeated.

Live Attendance Required for Continuing Education (CE) Credit

The Workshops and Scientific Program may be recorded, but please note that you must attend the live event to earn CE. It is your responsibility to complete your CE form DURING the session, when CE codes will be announced live to participants. See Continuing Education section for more information.

Questions for Presenters

For the Workshops, please use the chat feature in the Zoom Meeting to pose your questions. The session Host will convey them to the Presenter.

For the Scientific Program, please use the Q&A feature in Zoom Webinars to pose your questions.   The session Host will convey them to the Presenter.

Logistic Questions about the Conference

Please direct these to us at info@sceh.us.

Conference Schedule at a Glance
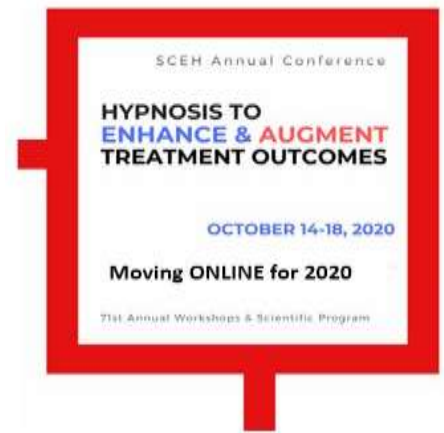
	Introductory Workshop (taken as a cohort)	Intermediate/Skills Workshop (taken as a cohort)	Advanced Workshops (mix & match Advanced & Intermediate/ Skills topics)	Scientific Program (taken as a cohort)	Networking Activities
Wednesday	8:00 AM – 2:00 PM PDT	8:00 AM – 2:30 PM PDT	8:00 AM – 1:45 PM PDT		General Networking Session 3-4 PM PDT
Thursday	8:00 AM – 1:30 PM PDT	8:00 AM – 1:30 PM PDT	8:00 AM – 1:45 PM PDT		SCEH Member Meeting 3-4:30 PM PDT
Friday	8:00 AM – 1:30 PM PDT	8:00 AM – 1:15 PM PDT	8:00 AM – 1:45 PM PDT		
Saturday				8:00 AM – 2:00 PM PDT	Student/ ECP Networking Session 3-4 PM PDT
Sunday				8:00 AM – 2:00 PM PDT	Female Identified Attendees Networking Session 3-4 PM PDT

Networking Sessions

Hosted by Janna Henning, JD, PsyD, FT, President and Ciara Christensen, PhD, Incoming President.
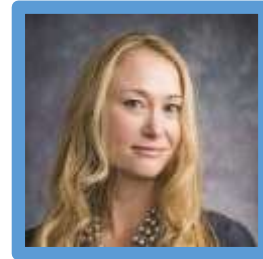
General Networking Session

Session 600 – Wednesday -- 3-4 PM PDT

All attendees are cordially invited. Have your favorite beverage at your side and join us for some online networking!

Mix and mingle with SCEH leaders, fellow members, conference presenters and attendees

Students and Early Career Professionals Networking Session

Session 603 – Saturday -- 3-4 PM PDT

For students and early career professionals.

Join your peers and SCEH leaders to learn more about the Society's activities and programs, and how you can benefit from membership. Share your ideas about how SCEH can better serve your needs.

Female Identified Attendee Networking Session

Session 604 – Sunday -- 3-4 PM PDT

For female-identified conference attendees.

This session provides a space for women to discuss their professional goals, interests and concerns. Join us for some open-ended networking and community building to strengthen our inclusion and support for one another.

(See next page for info on our Membership Business Meeting and Networking Session.)

Membership Business Meeting and Networking Session

Session 601 – Thursday -- 3-4:30 PM PDT

Open to members and prospective members.

Join SCEH leaders and your fellow members for an update on SCEH activities and a chance to network with your colleagues in the hypnosis community. We invite your feedback about how the Society can best meet your needs while advancing its mission to promote excellence and progress in hypnosis research, education and clinical practice.

Brief remarks will be offered by Janna Henning, JD, PsyD, FT, and SCEH President, joined by members of the SCEH Executive Committee.

Not yet a member? Learn more: www.sceh.us/apply-for-membership

Keynote & Invited Speakers

Complete details appear under Scientific Program Agenda and Session Descriptions.

Above, in order of appearance, from left to right: Amir Raz, PhD; Amanda Calhoun, MD, MPH; Olafur Palsson, PsyD; Zoltan Dienes, DPhil, and Amanda Barnier, PhD.

Keynotes (listed in order of appearance)

Saturday, October 17, 9:45-10:45 AM, PDT
Exploring the Neuroscience of Suggestion: from Words to Higher Vision
Amir Raz, PhD, Professor, Director, Institute for Interdisciplinary Brain and Behavioral Sciences, Crean College of Health and Behavioral Sciences; Psychology School of Pharmacy, Chapman University, Orange, CA, USA

Saturday, October 17, 12:00-1:00 PM PDT
Invited Address - Hypnosis and the Sunken Place: How Jordan Peele's 2017 Movie, Get Out, Illustrates the Dehumanization and Silencing of Black Americans by White Society
Amanda Calhoun, MD, MPH, Yale Child Study Center/Yale School of Medicine, New Haven, CT, USA

Saturday, October 17, 1:00-2:00 pm PDT
Making Clinical Hypnosis a Mainstream Component of Healthcare for Physical Problems: Perspective and Lessons from 25 Years in GI Hypnosis
Olafur Palsson, PsyD, Professor of Medicine, University of North Carolina, Chapel Hill, NC, USA

Sunday, October 18, 9:45-10:45 AM PDT
Phenomenological Control as Cold Control
Zoltan Dienes, DPhil, University of Sussex, Brighton, UK

Sunday, October 18, 1:00-2:00 PM PDT
Unravelling the Mysteries of Hypnotizability: A Componential Approach
Amanda J. Barnier, PhD, FASSA, Fellow SCEH, Pro Vice-Chancellor (Research Performance) and Professor of Cognitive Science, Macquarie University, Sydney, Australia

CONTINUING EDUCATION - CE

The SCEH Annual Conference is co-sponsored by the Society for Experimental and Clinical Hypnosis and *The Institute for Continuing Education*. The program offers continuing education credit as listed below. Continuing education credit is awarded on a session-by-session basis with full attendance required for the sessions in which you participate. Partial session credit is not offered. There is no fee to apply for continuing education credit.

<u>Course Completion:</u> To qualify to receive continuing education credit, participants must complete the CE materials and comply with Attendance Monitoring. CE verification is mailed to attendees within 30-days following the receipt of completed CE materials.

<u>Questions:</u> If you have questions regarding continuing education, the program, faculty, or for a listing of learning objectives, comprehensive speaker bios, please contact *The Institute* at: 800-557-1950; e-mail: <u>instconted@aol.com</u>.

<u>Commercial Support:</u> The Institute for Continuing Education receives no funds from any commercial organization for financial support of its activities in providing continuing education sponsorship. The Institute's sponsorship of this Conference does not imply endorsement of featured exhibits.

<u>Note:</u> It is the responsibility of attendees to determine if continuing education credit offered by The Institute for Continuing Education meets the regulations of their licensing/certification board.

<u>Continuing Education Offered:</u>

Psychology: The Institute for Continuing Education is approved by the American Psychological Association (APA) to sponsor continuing education for psychologists. The Institute for Continuing Education maintains responsibility for this program and its content. Not all sessions may offer psychology CE credit. CE materials will indicate any non-credit sessions; or you may contact The Institute for Continuing Education within 30-days of the Conference at: instconted@aol.com

Social Work: Application for social work continuing education credits has been submitted. This website will be updated regarding accreditation.

<u>Skill Level:</u> Due to the interdisciplinary nature of this Conference, workshops have not been ranked for skills level (beginning, intermediate, advanced). Participants are urged to review session description for appropriateness for professional and personal development.

<u>Instruction Methodology:</u> May include lecture, audio-visual, demonstration, experiential practice of techniques.

<u>Ethics Hours / Academic Credit:</u> The Conference offers no "academic" credit and CE hours awarded are not eligible toward fulfillment of a degree. No "ethics" hours are offered.

<u>Continuing Education Hours Offered:</u>

Introductory Workshop:	12.50 hrs.
Advanced Workshops:	13.50 hrs.
Intermediate/ Skills Workshops:	13.00 hrs.
Scientific Program:	9.00 hrs.

* Hrs. are awarded based on actual participation.

CME NOTE: Medical CE credit is not available for this conference. We welcome any inquiries from members, colleges or universities who can work with us to obtain CME for future meetings.

WORKSHOP PROGRAM OVERVIEW

SCEH workshops teach participants hypnotic theory and practical techniques for immediate use in professional practice. Workshops are scientifically based and of the highest teaching quality. Most workshops include demonstrations and/or practica or other experiential components. Workshops meet accepted Standards of Training in Clinical Hypnosis and count toward SCEH Certification.

SCEH offers **Introductory**, **Intermediate/Skills** and **Advanced** level workshops.

- *Introductory (Basic) Workshop in Clinical Hypnosis*
  (Taken as a cohort)

- **Intermediate/Skills Workshops** *in Clinical Hypnosis*
  (Taken as a cohort, or Advanced Workshop registrants can choose from a selection of sessions.)
  This workshop can be used toward intermediate certification or simply to refresh hypnotic skills.

- *Advanced Workshops in Hypnosis*
  (Choose from a selection of full or half day concurrent sessions or mix and match with Intermediate/Skills Workshop sessions.)

Introductory Workshop in Clinical Hypnosis - 12.5 CEs

Wednesday, October 14 through Friday, October 16, 2020

Co-chairs: *Barbara S. McCann, PhD and Tova Fuller, MD, PhD*

Faculty: *Barbara S. McCann, PhD, Tova Fuller, MD, PHD, Catherine McCall, MD, Vivek Datta, MD, MPH and Donald Moss, PhD*

Introductory (Basic) Workshop Overview

This class is taken as a cohort. This workshop meets accepted Standards of Training in Clinical Hypnosis and count toward SCEH Certification.

For hundreds of years, hypnosis has been a powerful tool that has allowed medical and psychological providers a means to assist patients or clients to effect meaningful changes in mental and physical health. This course follows established Standards of Training to provide students with a basic background and understanding to begin using hypnosis within the context of their own scope of practice.

In addition to reviewing a brief history of hypnosis, this course will introduce students to the steps to facilitate a hypnotic state along with various types of suggestions for positive therapeutic change. Emphasis will be placed on how to integrate these skills into clinical practice or apply to research models. Due to the COVID-19 pandemic and the need to offer this training online, there will be limited live demonstrations and unfortunately, no opportunities for participants to engage in supervised hands-on practice. We hope to be able to offer supervised hands-on practice in the near future, but these are uncertain times.

Introductory Workshop Agenda and Learning Outcomes

NOTE: All times are listed in Pacific Daylight Time (PDT).   *Click here for help converting time zones.*
Agenda subject to change.

Wednesday, October 14, 2020

8:00-8:30 AM PDT	Introduction to Clinical Hypnosis (30 minutes) Faculty: Barbara S. McCann, PhD	Learning Outcomes ● *Provide at least one commonly accepted definition of clinical hypnosis.* ● *Explain three hypnosis terms and how they apply to the clinical hypnosis experience.* ● *Define two commonly held misperceptions concerning hypnosis and give an accurate rebuttal for each.*
8:30-9:15 AM PDT	Neurophysiology of Hypnosis (45 minutes)) Faculty: Tova Fuller, MD, PhD	Learning Outcomes ● *Describe how hypnosis affects the autonomic nervous system and the stress response.* ● *Detail three implications of neurophysiological research on the practice of clinical hypnosis.*
9:15-10:00 AM PDT	Anatomy of the Hypnotic Experience (45 minutes) Faculty: Barbara S. McCann, PhD	Learning Outcomes ● *Describe the steps in a formal hypnotic encounter.* ● *Identify two characteristics of trance exhibited by the subject.* ● *Define three changes the facilitator made during the reorientation phase of trance.*
10:00-10:15 AM PDT	Break	
10:15-11:30 AM PDT	Principles and Process of Rapport, Attunement, Trance Elicitation and Reorientation (75 minutes) Faculty: Barbara S. McCann, PhD	Learning Outcomes ● *Describe three effective ways to build and reinforce rapport.* ● *Describe at least four observable physiological and 4 psychological/ behavioral signs of trance.* ● *Discuss the importance of removing suggestions.* ● *Demonstrate at least three methods of reorienting.*
11:30 AM-12:00 PM PDT	Group Hypnosis Experience (30 minutes) Faculty: Barbara S. McCann, PhD	Learning Outcomes ● Experience clinical hypnosis and identify three aspects of their individual experience of trance.
12:00-1:00 PM PDT	Break (continued on next page)	

1:00 -1:45 PM PDT	Hypnotic Phenomena (45 minutes) Faculty: Barbara S. McCann, PhD	Learning Outcomes ● *Explain five different hypnotic phenomena.* ● *Describe how the concept of trance logic and other hypnotic phenomena can be used therapeutically.* ● *List three principles of eliciting phenomenon.* ● *Define abreaction and describe how it can be addressed therapeutically.*
1:45-2:00 PM PDT	Wrap-Up – Day One (15 minutes)	

Thursday, October 15, 2020

8:00-9:00 AM PDT	Intensification of Hypnotic Experience (60 minutes) Faculty: Barbara S. McCann, PhD	Learning Outcomes ● *Describe three methods of trance intensification.* ● *Demonstrate the ability to intensify the hypnotic experience in ways best tailored to their patient/client.* ● *Identify how fractionation can be used to intensify trance.*
9:00-9:45 AM PDT	Fundamentals of Hypnotic Communication and Formulation of Suggestions (45 minutes) Faculty: Barbara S. McCann, PhD	Learning Outcomes ● *Explain at least two ways hypnotic communication creates positive expectancy.* ● *Discuss Erickson's Principle of Individualization and Utilization as it pertains to language and suggestion.* ● *Name four commonly used words/phrases to reinforce the patient's hypnotic experience.* ● *Differentiate between direct and indirect suggestion.*
9:45-10:00 AM PDT	Break	
10:00-10:45 AM PDT	Ego Strengthening (45 minutes) Faculty: Donald Moss, PhD	Learning Outcomes ● *Define what is meant by ego strengthening and how it might be used in clinical practice.* ● *Identify three different types of ego strengthening.* ● *Describe at least three strategies for ego strengthening in clinical hypnosis practice.*
10:45-11:30 AM PDT	Self-Hypnosis: How and What to Teach Patients (45 minutes) Faculty: Catherine McCall, MD (continued on next page)	Learning Outcomes ● *Define self-hypnosis and explain the difference between self-hypnosis and heterohypnosis,* ● *Describe at least three therapeutic applications of self-hypnosis in clinical practice and* ● *Explain how to teach self-hypnosis to a patient.*

11:30 AM-12:30 PM PDT	Break	
12:30-1:15 PM PDT	Strategies for Managing Resistance (45 minutes) Faculty: Vivek Datta, MD, MPH	Learning Outcomes ● *Describe three types of resistance.* ● *Identify four strategies for bypassing or working through resistance.*
1:15-1:30 PM PDT	Wrap-Up – Day Two (15 minutes)	

Friday, October 16, 2020

8:00-8:45 AM PDT	Patient/Client Assessment, Introducing Hypnosis to the Patient/Client (45 minutes) Faculty: Barbara S. McCann, PhD (	Learning Outcomes ● *Summarize at least three key points about hypnosis to discuss in a non-technical manner with a client or patient/client.* ● *Review important elements and recommended procedures in obtaining informed consent regarding the use of hypnosis clinically.* ● *Discuss the fallibility of memory.*
8:45-9:45 AM PDT	Treatment Planning, Strategy and Technique Selection in Clinical Hypnosis (60 minutes) Faculty: Barbara S. McCann, PhD	Learning Outcomes ● *Execute a thorough case assessment to elucidate the information necessary to develop a quality treatment plan.* ● *Design a treatment plan for a patient/client who presents with anxiety.* ● *List 4 hypnotic techniques/ applications that may be best suited to achieve the specific therapeutic goal in the case presented.*
9:45-10:00 AM PDT	Break (15 minutes)	
10:00-10:45 AM PDT	Hypnosis with Children (45 minutes) Faculty: Barbara S. McCann, PhD continued on next page)	Learning Outcomes ● *Identify three developmental characteristics that make children particularly hypnotizable.* ● *Describe how hypnotic approaches vary according to the developmental age of the child.* ● *Describe the therapeutic benefits and applications of using hypnosis with children.*

10:45-11:30	Integrating Hypnosis into Clinical Practice (45 minutes) Faculty: Barbara S. McCann, PhD	Learning Outcomes ● *Describe situations of uncertainty that might occur as clinical hypnosis is included in practice, and identify strategies for managing/resolving such.* ● *List three uses of hypnosis to your discipline that you have been taught and are ready to apply and three applications of hypnosis that require more training.* ● *Describe three ways you will begin to incorporate hypnotic commun-ication, hypnosis and hypnotic techniques into your practice.*
11:30 AM-12:30 PM PDT	Break	
12:30-1:00 PM PDT	Ethical Principles and Professional Conduct and Professional Conduct (30 minutes) Faculty: Donald Moss, PhD	Learning Outcomes ● *Describe two ethical-legal issues.* ● *Discuss standards for professional conduct in using hypnosis clinically.*
1:00 -1:15 PM PDT	Membership and Certification in SCEH and ASCH (15 minutes) Faculty: Barbara S. McCann, PhD	Learning Outcomes ● *Discuss ASCH and SCEH clinical hypnosis standards of training, levels of training, and requirements for ASCH and SCEH certification.* ● *Describe available opportunities for further training, membership and certification.*
1:15-1:30 PM PDT	Wrap-Up and Workshop Concludes (15 minutes)	

Intermediate/Skills Workshops - 13 CEs

Wednesday, October 14 through Friday, October 16, 2020

Skills Workshop Co-Chairs: Alexandra Chadderdon, PsyD and Deanna Denman, PhD

Faculty: John Alexander, PhD; Carol Ginandes, PhD, ABPP; Janna Henning JD, PsyD, FT; Patrick McCarthy, MMB CHB; David Patterson, PhD; David B. Reid, PsyD; Shelby Reyes, PhD and Michael D. Yapko, PhD

Taken as a cohort. If you wish to take the Intermediate/Skills Workshops to satisfy Intermediate level requirements for certification, please note that you must take all the Intermediate/Skills Workshops as a cohort, requiring full attendance for the duration of the Intermediate/Skills Workshops, Wednesday through Friday.

Advanced Workshop participants may mix and match with Advanced Workshops.

Intermediate/Skills Workshops Overview

Intermediate/Skills Workshops consist of sessions that feature a variety of hypnotic techniques, for induction, deepening, and therapeutic application. These Workshops are designed to refresh and expand skills. These Workshops are offered at the intermediate level, and will serve for persons seeking certification. They will also provide useful opportunities for advanced professionals to refine hypnotic technique.

This workshop meets accepted Standards of Training in Clinical Hypnosis and count toward SCEH Certification.

Intermediate/Skills Workshops – Program Agenda

Wednesday	TOPIC	PRESENTER	SESSION	ALTERNATE HOST
8:00-9:30 AM PDT	**Hypnosis and the Management of Acute and Chronic Pain**	David Patterson, PhD	201	Ali Chadderdon, PsyD
9:45 AM – 12:00 PM PDT	**Ethics and Clinical Hypnosis**	David B. Reid, PsyD	202	Deanna Denman, PhD
12:15-1:15 PM PDT	**The Nature of Hypnosis and Memory: Principles and Techniques of Age Regression**	Janna Henning JD, PsyD, FT	203	Ali Chadderdon, PsyD
1:30-2:30 PM PDT	**Hypnotic Interventions to Augment Working Through of Traumatic Stress-Related Symptoms**	Janna Henning JD, PsyD, FT	204	Ali Chadderdon, PsyD
Thursday				
8:00-9:30 AM PDT	**Applications of the Dialectical Method for Creating Change with Hypnotically Augmented Psychotherapy in the Treatment of Common Clinical Concerns: Habit Disorders: Anxiety; Insomnia; Phobias and Pain**	John Alexander, PhD	205	Deanna Denman, PhD
10:00-11:00 AM PDT	**Hypnosis Application for Anxiety Disorders**	Shelby Reyes, PhD	206	Deanna Denman, PhD
12:15-1:30 PM PDT	**The Magnifying Glass Metaphor**	Patrick McCarthy, MMB,CHB	207	Ali Chadderdon, PsyD
Friday				
8:00-9:30 AM PDT	**Seeding Metaphors to Fertilize and Grow Therapeutic Changes**	Carol Ginandes, PhD, ABP	208	Ali Chadderdon , PsyD
9:45 AM-1:15 PM PDT	**Integrating Hypnosis into the Treatment of Depression**	Michael D. Yapko, PhD	209	Deanna Denman, PhD

Intermediate/Skills Workshop Breaks

➢ *9:30-9:45 AM PDT*
➢ *10:45-11:30 AM PDT*
➢ *12:00-12:15 PM PDT*

> Note:
> Some breaks take place **within conference sessions.**
> Other breaks take place **between sessions**.

Wednesday, October 14, 2020

8:00-9:30 AM PDT

Hypnosis and the Management of Acute and Chronic Pain

David Patterson, PhD

1.5 CE

This 1.5 hour presentation will discuss how hypnosis can be applied to help manage acute and chronic pain. The differences between acute and chronic pain will be discussed in terms of diagnosis and treatment. Paradigms will be provided for using hypnosis to treat pain crisis (e.g. emergency room), procedural pain and chronic pain. Demonstrations of these paradigms and approaches will be provided.

Learning Outcomes:

• Describe the difference between acute and chronic pain and how hypnosis is integrated into treatment
• Demonstrate knowledge of three different inductions for pain
• Articulate how chronic pain is best managed through a biopsychosocial model and how using Ericksonian multiple choice suggestions is often an efficient way to cover the layers of suffering that occur with such disorders.

9:45 AM-12:00 PM PDT

Ethics and Clinical Hypnosis

David B. Reid, PsyD

1.5 CE

This workshop will provide an overview of relevant ethical issues as related to the use of clinical hypnosis.

Learning Outcomes:

• Describe potential contraindications for using hypnosis in clinical settings.
• Describe the implications of using hypnosis via remote (i.e., teletherapy/telemedicine) means.
• Describe the importance of informed consent when including hypnosis in treatment.
• Articulate potential conflicts of interest when using clinical hypnosis.
• Become familiar with clinical hypnosis standards of training, levels of certification, and professional clinical hypnosis societies Ethical Principles.
• List at least two ethical issues that may arise during the use of clinical hypnosis and appropriate ways to address/resolve them

12:15-1:15 PM PDT

The Nature of Hypnosis and Memory: Principles and Techniques of Age Regression

Janna Henning JD, PsyD, FT

1 CE

This session will review the nature of hypnosis and memory, and describe the principles and techniques of age regression interventions.

Learning Outcomes:

• Describe current literature on hypnosis and memory, and its implications for clinical work.
• Describe the legal implications of the "constructive" nature of hypnosis and memory.
• Identify three techniques for facilitating age regression.
• Identify how to facilitate therapeutic abreaction and methods for modulating affective intensity in age regression.

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1:30-2:30 PM PDT

Hypnotic Interventions to Augment Working Through of Traumatic Stress-Related Symptoms

Janna Henning JD, PsyD, FT

1 CE

This session will describe the different symptom profiles associated with exposure to a single traumatic event versus chronic interpersonal violence, and discuss evidence-based treatment approaches for both. The use of specific hypnotic interventions and techniques to augment and enhance the evidence-based overall treatment approaches for symptoms of traumatic stress in adults will be described and explained.

Learning Outcomes:

• Describe and differentiate between common post-traumatic reactions to chronic interpersonal violence exposure (complex/Type II trauma) vs. single-event trauma exposure in adulthood (PTSD/Type I trauma).
• Identify at least one hypnotic intervention to augment an evidence-based overall treatment approach for PTSD/Type I trauma reactions in adults.
• Identify at least one hypnotic intervention to augment an evidence-based overall treatment approach for complex/Type II trauma reactions in adults.
• Describe how to apply several research-supported traumatic stress treatment approaches to develop customized treatment plans for clients.

Bibliography

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Intermediate/Skills Workshop, continued)

Thursday, October 15, 2020

Note scheduled breaks:
  ➢ *9:30-9:45 AM PDT*
  ➢ *10:45-11:30 AM PDT*
  ➢ *12:00-12:15 PM PDT*

8:00-9:30 AM PDT

Applications of the Dialectical Method for Creating Change with Hypnotically Augmented Psychotherapy in the Treatment of Common Clinical Concerns: Habit Disorders: Anxiety; Insomnia; Phobias and Pain

John Alexander, PhD

1.5 CE

The workshop will provide an understanding of the dialectical method for creating change that can be used to formulate hypnotically augmented treatment strategies to address a variety of common psychological and medical concerns.

The dialectical method is a time-honored procedure in eastern and western philosophies and spiritual traditions for overcoming obstacles, resolving conflicts and transforming lives. Philosophers in the 19th century, expanding upon earlier theories and practices, described a systematic dialectical method for creating social and personal transformation. Dialectical hypnotherapy (DHT) makes use of the dialectical method for creating change in short-term hypnotically augmented psychotherapy, a method first introduced into hypnotherapy by Herbert and David Spiegel and described in their landmark text on hypnosis, Trance and Treatment (1978, 2004). The Spiegels refer to their method of dialectical therapy as restructuring and they use it in conjunction with the Hypnotic Induction Profile (HIP), their method for inducing hypnosis, assessing hypnotizability, and teaching self-hypnosis for therapeutic purposes.

The purpose of this workshop is to: 1) describe the HIP and demonstrate a digital application of the exam which streamlines both learning and utilizing the exam, the HIP/App; 2) describe the application of the dialectical method for creating change in psychotherapy; 3) demonstrate how hypnosis as experienced with the HIP relates to the dialectical method for creating change; 4) show how the hypnotic phenomena evoked by the HIP can be used to leverage hypnotherapy, and 5) describe the application of dialectical hypnotherapy in the treatment of common clinical concerns, including habit disorders, stress and anxiety disorders, insomnia, phobias and pain.

Learning Outcomes:

• Describe the dialectical method of change adopted by Herbert and David Spiegel and introduced into hypnotherapy as "restructuring" for creating change.
• Describe how hypnosis as experienced with the Hypnotic Induction Profile relates to the dialectical method.

- Explain how the hypnotic phenomena achieved with the Hypnotic Induction Profile can be used to leverage dialectical hypnotherapy.
- Describe how hypnotically augmented dialectical therapeutic strategies can be applied in the treatment of common clinical concerns including habit disorders, anxiety, insomnia, phobias and pain.
- Explain the historical origins of the dialectical method for creating change with its roots in the history of philosophical and spiritual traditions.
- Describe how the three developmental stages of the dialectical method, most commonly referred to as thesis-antithesis-and synthesis operate to overcome problems and resolve conflicts;
- Describe how the dialectical method of change maps onto the hypnotic state of consciousness achieved with the HIP to leverage psychological strategies to enhance therapeutic outcomes in medical and psychological applications.
- Demonstrate how to formulate basic dialectical restructuring strategies for the treatment of common clinical concerns including habit disorders, stress and anxiety disorders, insomnia, phobias and pain.

10:00 -11:00 AM PDT

Hypnosis Application for Anxiety Disorders

Shelby Reyes, PhD

1 CE

This session will explore the clinical components of anxiety to establish the various points at which hypnosis can be utilized as an intervention technique. The purpose of this session will be to discuss a variety of different types of inductions and suggestions, for generalized anxiety, situational anxiety, specific phobias, and anxiety-related medical conditions. There will also be time given to practice generating in-the-moment suggestions utilizing case examples and working in small groups.

Learning Outcomes:

- Understand the psychological and physiological components that make up anxiety disorders.
- Identify research literature that demonstrates efficacy for the utilization of hypnosis in the treatment of anxiety disorders.
- Identify at least five different types of techniques or hypnotic suggestions that can be utilized to treat generalized anxiety and phobias, along with their rationale.
- Engage in suggestion generation based on case material and practice at least one hypnotic technique for anxiety disorders

12:15-1:30 PM PDT

The Magnifying Glass Metaphor

Patrick McCarthy, MMB, CHB, Wellington, New Zealand

1.5 CE

This workshop explores the microanalysis of the structure of a generic hypnosis session embedded with many hundreds of hypnotic suggestions.

This is the first session of hypnosis for virtually ALL of my patients irrespective of presenting problem. I believe that the first experience of hypnosis should be learning how to experience profound hypnosis, and how to enter and to leave it rapidly.

Learning Outcomes:

- Describe the importance of language and specific words to enhance the transition to hypnosis.
- Demonstrate rapid self-hypnosis to create this state in less than 60 seconds
- Describe amnestic loop metaphor as applied in hypnosis.
- Describe yes sets and truisms as applied to hypnosis

Friday, October 16, 2020

8:00-9:30 AM PDT SESSION

Seeding Metaphors to Fertilize and Grow Therapeutic Changes

Carol Ginandes, PhD, ABPP

1.5 CE

The purpose of this 90- minute session is to overview the strategic use of therapeutic metaphors and stories in the context of both hypnotic induction and utilization. Also included will be a hypnotic practicum exercise focused on generating original imagery- based metaphors to stimulate therapeutic healing.

Intermediate/Skills Workshop, continued)

Learning Outcomes:

- Describe the benefits of integrating metaphors and storytelling along with more direct methods of hypnotic induction and suggestion.
- Discuss methods of constructing metaphors to match a specific client's context and resources.
- Demonstrate the use and creation of metaphors to introduce reframing of current dilemmas and to access possible alternate solutions.
- Participate in a practicum exercise in generating hypnotic metaphors to enhance mind/body healing.

9:45 AM – 1:15 PM PDT
Note: two breaks, 10:45-11:30 AM PDT and 12:00-12:15 PM PDT)

Integrating Hypnosis into the Active Treatment of Depression

Michael D. Yapko, PhD

2.5 CE

Depression is the most common mood disorder in the world, one that is still growing steadily in both prevalence and severity. How a clinician thinks about the nature of depression and answers fundamental questions - such as what causes depression - naturally determine what treatment approach they are most likely to take. Regardless of one's preferred theoretical orientation, however, depression experts agree that treatment needs to be both multi-dimensional and active. Whether someone calls a focused, experiential treatment approach hypnosis or calls it by some other name, the therapeutic merits of helping people shift their focus in meaningful and empowering ways is evident.

In this workshop, the valuable role hypnosis can play in empowering what may be among the most disempowered people – depression sufferers – will be considered as a vehicle for imparting the skills and perspectives known to not only reduce but even prevent depression. In the first half of the workshop, some of the key patterns of subjective experience that serve as depression risk factors will be identified as primary targets of treatment with hypnosis. In the second half of the workshop, a video demonstration will be provided of a single session intervention featuring the use of clinical hypnosis with a woman suffering chronic depression.The session provides explanatory subtitles as to the structure of the intervention as well as long-term follow-up information about the session's enduring impact. A debriefing of the session and Q&A session will conclude the presentation.

Learning Outcomes:

- Identify common risk factors for depression and discuss their implications for treatment planning with hypnosis.
- Describe the role of a client's cognitive style in the onset of depression and how hypnotic treatment might be used to address it.
- Identify the role of global cognition in impairing the ability to make key contextual distinctions.
- Describe the role of selective attention in the onset and course of depression and how hypnosis might be used to create an internal shift in both the quality and direction of focus.
- Describe the role of hypnosis in enhancing skill acquisition and personal empowerment in a clinical intervention.

Advanced Workshops – up to 13.5 CEs

Wednesday, October 14 to Friday, October 16, 2020

Co-chairs: Ciara Christensen, PhD and Catherine McCall, MD

Faculty: John Alexander, PhD; Gary Elkins, PhD, ABPP, ABPH;Janna Henning, JD, PsyD, FT; Jessie Kittle, MD; Donald P. Moss, PhD; Nicholas Olendzki, PsyD; Charles Pace, MFT; Lynae Roberts, MA; Elizabeth E. Slonena, MSCP, PsyD; Katy Stimpson, BS; Jeff Sugar, MD and Maureen Turner, MEd, LCMHC, RNBC, LCSW.

Advanced Workshop registrants may select a mix of individual topics from either the Advanced Workshops or Intermediate/Skills Workshops selections.

Note that the start and end times for workshops include any scheduled breaks during that time period.

Advanced Workshops – Program Agenda

Wednesday	Topic	Presenter	Session	Alternate Host
8:00 AM-12:00 PM PDT	**Introducing Innovations in Clinical and Research Applications of the Hypnotic Induction Profile (HIP)**	John Alexander, PhD, Jessie Kittle, MD and Katy Stimpson, BS	301	Ciara Christensen, PhD
8:00 AM-12:00 PM PDT	**Principles and Techniques of Age Regression Augmenting Symptom Reduction: Theory, Cases, Demonstrations, and Practice!**	Maureen F. Turner, MEd, LCMHC, RNBC, LCSW	302	Catherine McCall, MD
12:15-1:45 PM PDT	**Hypnosis Research Workshop: Designing Case Studies and Clinical Trials and Preparing Papers for Publication**	Gary Elkins, PhD, ABPP, ABPH and Lynae Roberts, MA	303	Ciara Christensen, PhD
Thursday				
8:00 AM-1:45 PM PDT	**Floating Hands and Flying Fingers: Ideomotor Processes in Hypnotic Theory, Assessment and Treatment**	Jeff Sugar, MD and Charles Pace, M	304	Catherine McCall, MD & David Reid, PsyD
8:00 AM-12:00 PM PDT	**Combining Clinical Hypnosis and Chakra Balancing: Inductions, Techniques, Cases and Practice**	Maureen Turner, MEd, LCMHC, RNBC, LCSW	305	Ciara Christensen, PhD
12:15-1:30 PM PDT	**Mindful Hypnotherapy: Principals and Practice**	Nicholas Olendzki, PsyD and Elizabeth E. Slonena, MSCP, PsyD	306	Ciara Christensen, PhD
Friday				
8:00-10:15 AM PDT	**Adjunctive Therapies for Use with Clinical Hypnosis and Psychotherapy**	Donald P. Moss, PhD	307	Catherine McCall, MD
11:30 AM-1:45 PM PDT	**Not Just Surviving, but Thriving: Hypnotic Interventions to Support Helping Professionals and their Patients in Challenging Times**	Janna Henning, JD, PsyD, FT	308	Ciara Christensen, PhD

Advanced Workshop Breaks

➢ *9:30-9:45 AM PDT*
➢ *10:45-11:30 AM PDT*
➢ *12:00-12:15 PM PDT*

Note:
Some breaks take place **within conference sessions.**
Other breaks take place **between sessions**.

Wednesday, October 14, 2020

8:00 AM - 12:00 PM PDT

Introducing Innovations in Clinical and Research Applications of the Hypnotic Induction Profile (HIP)

John Alexander, PhD, Kent, OH, Jessie Kittle, MD and Katy Stimpson, BS

3 CE

There are few hypnotizability tests that have proven reliable and validated measures of testing an individuals capacity to experience hypnotic trance; the HIP has proven to be among the most widely used in these assessments. The unique capability of the HIP to be performed in a short time period allows it to fill a niche when efficiency in testing is required.

Since the HIP is a manualized test of hypnotizability it can be learned by any competent clinician or researcher, although mastering it from a text form alone can be challenging. In an effort to make the HIP easier to learn initially, with the intention of making it an entry level test of hypnotizability for students new to hypnosis, a digital application of the exam has recently been developed, the HIP/App. For those already familiar with the HIP, the digital format makes the exam easier to administer, score accurately, and store and retrieve results conveniently.

Another recent modification to the HIP has been made to allow for a test of hypnotizability to be completed over the telephone. This remote measure of hypnotizability, the remote Hypnotic Induction Profile (rHIP), adjusts the needs for physical touch and direct observation by the administrator that is required by the original, in-person HIP. The utility of using the rHIP includes improving patient expectancy prior to scheduling a hypnosis session, increasing access to hypnotizability testing for remote interventions, and obviating resource-intensive in-person hypnotizability screening for trials that exclude subjects with certain scores.

Bibliography

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o   International Journal of Clinical and Experimental Hypnosis, 24 ,1976 Spiegel, H.: The Hypnotic Induction Profile (HIP): A review of its development. Annals of the New York Academy of Sciences, 1977.
o   Stern,Herbert Spiegel, and Nee:. The Hypnotic Induction Profile: normative observations, reliability and validity., American Journal of Clinical Hypnosis 21.2-3 ,1978
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o   Spiegel,H. & Greenleaf,M. Commentary: Defining Hypnosis. American Journal of /Clinical Hypnosis 48,111-116, 2004 Spiegel H.
o   The Neural Trance: A new look at hypnosis. Internal Journal of Clinical and Experimental Hypnosis, 55,387-410, 2007

Learning Outcomes

- Describe the utility in clinical practice and research of the Hypnotic Induction Profile (HIP) and define its utility in clinical practice and research and the value of adapting hypnotizability assessments to changing delivery modalities and advancements in technology.
- Describe the digital application of the HIP, the HIP/App, how it simplifies administration of the exam, computes summary scores and stores data and the utility of the HIP summary scores, the Profile Grade and the Induction Score, in clinical research and practice.
- Define the modifications that were made to the HIP to adapt it to a remote delivery platform, the Remote Hypnotizability Induction Profile (rHIP) and its utility in clinical practice and research protocols.

8:00 AM - 12:00 PM PDT

Principles and Techniques of Age Regression Augmenting Symptom Reduction: Theory, Cases, Demonstrations, and Practice!

Maureen F. Turner, MEd, LCMHC, RNBC, LCSW, Isle La Motte, VT, USA

3 CE

An Age Regression technique is any technique that connects present beliefs and behaviors to the past, or the past to the present. Positive past experiences can be harnessed, anchored, and utilized for self-hypnosis and self-management. Age regression techniques utilized for trauma can elucidate the possible causes of symptoms and provide a strategy and therapeutic control for treatment, including symptom reduction, and in many cases, symptom extinction. This strategy is diametrically opposed to causing destabilizing and therapy-interfering manifestations of spontaneous abreactions. It will instead, reduce painful revivification of trauma and obviate the use of still commonly practiced de-sensitization. This allows the clinician to create blueprints for intervention, paths for transformation of harmful beliefs and symptoms, and offers new opportunities for ego-strengthening.

While age regression hypnosis has been utilized for trauma-release intuitively cross-culturally for centuries (Harms, 1967), there has been a scarcity of research. Lynn and Cardena (2007) reviewed empirically supported evidence-based principles and practices that suggested hypnosis is a useful adjunctive procedure in the treatment of posttraumatic conditions. They concluded that more research on hypnosis, hypnotic suggestibility, and posttraumatic conditions is urgently needed. Current age regression hypnosis research will briefly be reviewed (Rotaru & Rusu, 2016; Turner, 2016, 2017, 2018; Grogan, Barabasz, & Christensen, 2017).

The main focus of this workshop will be to teach and demonstrate applications of novel inductions, and provide the opportunity to practice trauma-release and stabilizing techniques adapted and developed by the presenter, who has been practicing, teaching, and researching age regression protocol for over 25 years.

Bibliography

o   Grogan, G, Arreed Barabasz, A., Barabasz,M. Christensen, C., International Journal of Clinical and Experimental Hypnosis 2017, 65 (1): 32-42.
o   Rotaru, T-A., and Rusu, A., Meta-Analysis for the Efficacy of Hypnotherapy in Alleviating PTSD Symptoms, 2016, 64(1):113-136.
o   Turner, M., World Congress of Medical & Clinical Hypnosis 2018, Montreal, CA
o   Age Regression: Novel Approaches utilizing clinical hypnosis: Theory, Techniques, and Applications to addictions, ADHD, anxiety, depression, habit change, OCD, ODD, and PTSD.

Learning Outcomes

- Identify three methods of Clinical Hypnosis inductions utilized for age regression depths
- Discuss the role of age regression hypnosis in enhancing the augmentation of symptom reduction
- Review and discuss 3 cases of successful clinical hypnosis age regression symptom reduction

12:15-1:45 PM PDT SESSION

Hypnosis Research Workshop: Designing Case Studies and Clinical Trials and Preparing Papers for Publication

Gary Elkins, PhD, ABPP, ABPH and Lynae Roberts, MA, Department of Psychology and Neuroscience, Baylor University, Waco, TX, USA

1.5 CE

This workshop is intended to provide foundational knowledge regarding hypnosis research. Topics include discussion of the evolving body of research into clinical and experimental hypnosis. Also, key considerations in design of case studies and randomized clinical trials of hypnosis and related concepts (relaxation, mindfulness, suggestion methods, etc.) will be discussed. Topics will also include assessment of hypnotizability and cognitive expectancies, participant selection in clinical and experimental studies, experimental designs and control conditions. Empirically-based research will be discussed and preparation of papers for submission for publication. This workshop will be of interest empirically minded clinicians, researchers, experimental and clinical graduate students, interns, fellows, and residents, as well as professionals in the field who wish to learn more about the potential of hypnosis research to inform clinical practice.

Advanced Workshops, continued

Bibliography

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o   Elkins, G, Marcus, J, Sterns, V., Perfect, M, Rajab, H, Ruud, C, Palamara, L, Keith, T. (2008) Randomized trial of a hypnosis intervention for treatment of hot flashes among breast cancer survivors. Journal of Clinical Oncology. 26(31):5022-5026. doi: 10.1200/JCO.2008.16.6389. Epub 2008 Sep 22. PubMed PMID: 18809612; PubMed Central PMCID: PMC2652097

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Learning Outcomes

•   Identify key components of well-designed case studies of hypnosis interventions.
•   Discuss purpose and design of pilot studies and randomized clinical trials.
•   Discuss process for submitting manuscripts for publication.

Thursday, October 15, 2020

8:00 AM – 1:45 PM PDT

Floating Hands and Flying Fingers: Ideomotor Processes in Hypnotic Theory, Assessment and Treatment

Jeff Sugar, MD, El Segundo, CA and Charles Pace, MFT

4 CE

This hands-on workshop is about automatic connections between somatic (bodily) and cognitive (brain) processes that cause the altered sense of agency fundamental to hypnotic experience. We begin with a brief overview of these ideomotor processes, and how they fit within an interpersonal theory of hypnosis.

We demonstrate (live and with patient video): Chevreul Pendulum, Finger Signaling, the Hypnotic Induction Profile, and "Mirroring Hands". Examples are drawn from clinical work with Dissociative and Somatic Symptom Disorders, including Conversion. Participants practice from scripts. Improvisation is encouraged.

Measuring hypnotizability provides a seamless path from assessment to treatment of conditions including Dissociation (frequently misdiagnosed as Psychosis) and Conversion. For misdiagnosed psychosis, treatment can then focus on dissociated experience and therapy, rather than on antipsychotic medication. For Somatic Symptom Disorders, including Conversion, hypnosis helps patients become aware of their own symptom process, gaining a sense of control and symptomatic relief. We use the Hypnotic Induction Profile (HIP) as a model, because it is brief, involves direct and indirect suggestion, fosters therapeutic relationship, and in a controlled study differentiated within and between patient and non-patient groups. Separating subjects' willful initiation of action from the action itself means the hand is not raised, but "levitates". These same, "non-willed" bodily movements as ideomotor signals are fundamental to Rossi's clinical mind/body work described in Mirroring Hands. This technique will also be demonstrated.

Hypnosis experience is required, though not necessarily with the conditions described above. Participants will learn about all these techniques and practice some of them.

Bibliography

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o   Prinz, W. (2006). What Re-Enactment Earns Us, Cortex, pp 515-517
o   Rossi, E. & Cheek, D., Mind-Body Therapy, WW Norton, New York

Learning Outcomes

- Describe the fundamental place that ideomotor processes have in the theory and practice of hypnosis.
- List four hypnotic methods that use ideomotor suggestions.
- Describe three of these methods with a plan to become proficient.

8:00 AM-12:00 PM PDT

Combining Clinical Hypnosis and Chakra Balancing: Inductions, Techniques, Cases and Practice

Maureen Turner, MEd, LCMHC, RNBC, LCSW, Isle La Motte, VT, USA

3 CE

Practices of hypnosis date back to most ancient cultures. In India, as early as 1500-500 BC, the Sanskrit book known as the Law of Manu described different levels of hypnosis in terms of sleep. Around the same time, India's Vedas texts described the origins of yoga and documented the chakras (Sanskrit for wheel or disk - vortexes of energy located throughout the body). Our body has 7 major and many minor chakras (Shiv Samhita, 2012). Chakra balancing has become central to numerous mind-body-spirit healing therapies. Over the past 20 years, the presenter has developed hypnosis induction techniques based on the chakra system. These have been well received by patients and have become the most requested mode of induction and treatment. The anchoring of the chakras provides the patient with guidance, encourages confidence, enables agency, and facilitates the practice of self-hypnosis. Simultaneously, the clinician can tap into the positive strengths of the chakra system, and use the framework to suggest healing images in therapy. This workshop will explain the qualities and functions of the chakras, introducing the attendees to relevant theory and background. Techniques and tools for chakra inductions and treatments, utilizing trance states and self-hypnosis, will be demonstrated. Case studies will be reviewed, handout guides will be provided, and experiential opportunities will be integrated. This novel approach of combining hypnosis and chakra balancing offers attendees innovative options to weave into their practice.

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o   Patel, M. (2016). Healing chakras. Journal of Traditional Medicine & Clinical Naturopathy, 5: e122. Naragatti, S. (2020). Yoga for Balancing Chakras. India: Lambert Academic Publishing

Learning Outcomes

- Identify the qualities and functions of the seven basic chakras Identify the qualities and functions of the seven basic chakras
- Utilize a chakra induction with a patient, and teach them the application for self-hypnosis;
- Understand how the chakra system framework can enhance imagery and treatment

12:15-1:30 PM PDT

Mindful Hypnotherapy: Principals and Practice

Nicholas Olendzki, PsyD, Dartmouth, MA and Elizabeth E. Slonena, MSCP, PsyD, Asheville, NC

1 CE

Mindfulness has become a significant and popular treatment modality among mental health providers, and yet research and specific recommendations for integrating mindfulness and hypnotherapy are still in their nascency.

This workshop presents a specific model for integrating mindfulness and hypnotherapy into clinical practice, and offers opportunities for experiential learning. In the first part of the session, principals of mindfulness and initial empirical support will be discussed. The session will also include practical strategies for incorporating mindfulness suggestions into hypnosis. The second portion of the session will offer opportunities for experiential learning, practice, and discussion.

Bibliography

o   Olendzki, N., Elkins, G. R., Slonena, E., Hung, J., & Rhodes, J. R. (2020). Mindful hypnotherapy to reduce stress and increase mindfulness: A randomized controlled pilot study. International Journal of Clinical and Experimental Hypnosis, 68(2), 151-166.
o   Daitch, C. (2018). Cognitive behavioral therapy, mindfulness, and hypnosis as treatment methods for generalized anxiety disorder. American Journal of Clinical Hypnosis, 61(1), 57-69.
o   Elkins, G. R., & Nicholas Olendzki, P. (2018). Mindful hypnotherapy: The basics for clinical practice. Springer Publishing Company.

Learning Outcomes

- Learn core principals of mindful hypnotherapy
- Increase their comfort with integrating mindfulness suggestions into hypnosis

Friday, October 16, 2020

8:00-10:15 AM PDT

Adjunctive Therapies for Use with Clinical Hypnosis and Psychotherapy

Donald P. Moss, PhD, Chair, Mind-Body Medicine, Saybrook University, CA

2 CE

This workshop is designed for delivery in virtual (online) format. Adjunctive therapies are interventions that combine well with clinical hypnosis and psychotherapy. These adjunctive techniques augment the therapeutic effect of the hypnosis and psychotherapy. The combined therapeutic effect of hypnosis and adjunctive skills together is often greater than the effect of either intervention alone. Regular home practice of adjunctive relaxation skills improves basal autonomic nervous system regulation and reduces the onset of problematic symptoms. This Webinar introduces seven adjunctive therapies, including progressive muscle relaxation, autogenic training, paced diaphragmatic breathing, guided imagery, meditation, mindfulness, and expressive writing. Three to four of them will be demonstrated, as time allows, and brief clinical vignettes will illustrate the use of the adjunctive techniques with clients. Each of these skill sets can be administered on its own, with therapeutic effect, or provided in combination with clinical hypnosis as a treatment package.

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Learning Outcomes

- identify appropriate moments in therapy for introduction of an adjunctive technique.
- List and compare four or more adjunctive therapies for combination with frequently used and personally preferred hypnotic interventions and protocols.
- Describe evidence-based therapeutic benefits of two or more adjunctive therapies.

11:30 AM-1:45 PM PDT

Not Just Surviving, but Thriving: Hypnotic Interventions to Support Helping Professionals and their Patients in Challenging Times

Janna Henning, JD, PsyD, FT, Adler University, Chicago, IL

2 CE

The stressors and challenges associated with clinical work can result in negative responses in professionals in all types of work settings, including medical centers and mental health treatment facilities. Stress responses such as burnout, compassion fatigue and vicarious traumatization are associated with: reduced empathy for patients; lower quality of care; impaired physical health; decreased morale and job satisfaction, and higher work absenteeism and turnover. These responses may be heightened in the context of external stressors such as a global pandemic and political unrest. Professionals must be able to address these stress reactions not only in their patients, but also in themselves. Recommendations for professional self-care and coping strategies to prevent stress-related conditions often include short-term, materialistic and transactional approaches such as taking a vacation or getting a massage. However, these strategies may not be realistic choices in the face of crisis-related workload increases and mandated physical distancing. Furthermore, there is little objective evidence of their effectiveness in preventing burnout or other stress reactions, particularly over time. Interventions for patients and the self of the professional should ideally address the whole person, including: physical; psychological; emotional; interpersonal, and spiritual domains. Hypnotically-enhanced interventions can be uniquely useful in enhancing effective, customized self-care approaches to manage and prevent stress-related conditions. This workshop will describe ways to identify stressors and needs in professionals or patients, and utilize hypnotic interventions to reduce stress reactions and increase perceptions of thriving in each domain of functioning. Clinical case material will be provided to illustrate their use.

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o   Simionato, G., Simpson, S., & Reid, C. (2019). Burnout as an ethical issue in psychotherapy. Psychotherapy, 56(4), 470-482.

Advanced Workshops, continued

Learning Outcomes

- Describe the changes in workload expectations, severity of patients' clinical needs, and impacts on the self of the professional in the context of a global pandemic and political unrest that may be associated with increased burnout and other stress responses in professionals.
- Identify broad self-care and coping approaches and strategies that have been associated with decreased levels of burnout and increased stress management.
- Select hypnotic intervention strategies to foster and facilitate thriving in professionals and their patients that they can adapt for use in their own work setting.

Scientific Program - 9 CE

Saturday and Sunday October 17-18, 2020

Co-Chairs: Barbara S. McCann, PhD and Vivek Datta, MD, MPH

Faculty: Amanda J. Barnier, PhD, FASSA; Amanda Calhoun, MD, MPH; Vivek Datta, MD; MPHZoltan Dienes, DPhil; Gary Elkins PhD; Janna Henning, PsyD, JD; Mark Jensen, PhD; Mathieu Landry, PhD; Elvira V. Lang, MD, PhD; Barbara S. McCann, PhD; Donald Moss PhD, Hyeji Na, PsyD; Olafur Palsson PsyD; Amir Raz, PhD; Morgan Snyder, MA; Madeline Stein, MA and Nathan Wofford, BS

The Scientific Program is a general session.

The Scientific Program features keynotes, research presentations or symposia that address empirical issues in hypnosis research and practice and related areas. Research presentations shine the light on novel empirically based findings, including experimental studies, case reports, clinical trials, meta-analyses, and systematic reviews. Symposia bring together top-notch researchers as they critically discuss empirical findings pertaining to a specific theme of relevance to the hypnosis community. Many symposia integrate research and practice or draw upon research in psychology, psychiatry, or neuroscience to highlight issues that improve our understanding of hypnosis. Our poster session provides another glimpse into the latest research in the field.

Scientific Program Agenda

Saturday, October 17, 2020

Note scheduled breaks:

- ➢ 9:30-9:45 AM PDT break
- ➢ 11:00 AM 12:00 PM PDT break and Poster Session

8:00-9:30 AM PDT   **Presidential Symposium**

Hypnosis to Enhance and Augment Treatment Outcomes

Faculty: *Janna Henning, PsyD, JD; Mark Jensen, PhD; Gary Elkins, PhD*

Discussant: *Donald Moss, PhD*

1.5 CE

The theme of this year's conference is hypnosis to enhance and augment treatment outcomes. In this symposium, ways in which hypnosis enhances the treatment of traumatic stress, pain, and sleep problems are presented. The evidence base for these interventions will be examined as well.

Specific presentations within this symposium include:

- **Hypnotic Interventions to Enhance Evidence-Informed Treatment for Traumatic Stress Disorders**

- **Using Hypnosis to Enhance the Benefits of Cognitive Therapy on Pain Outcomes**

- **Hypnosis Intervention for Sleep Disturbance: Surprising Results from a Clinical Trial**

Learning Outcomes:

● Describe three recent developments in the application of hypnosis to clinical problems.

● Describe the evidence base for using hypnosis to address trauma, pain, and sleep problems.

● Identify key areas needing further development of an evidence base.

9:30-9:45 AM PDT   **Break**

9:45-10:45 AM PDT   **Keynote**

Exploring the Neuroscience of Suggestion: From Words to Higher Vision

Amir Raz, PhD, Professor, Director, Institute for Interdisciplinary Brain and Behavioral Sciences, Crean College of Health and Behavioral Sciences; Psychology School of Pharmacy, Chapman University, Orange, CA, USA

1 CE

Cognitive science has scantily exploited suggestion as an experimental tool. This keynote address will outline how, for example, we can use suggestion to hinder lexical processing, language-based processing, and the modulation of speech parameters. This approach challenges dominant views (i.e., that word recognition is obligatory for proficient readers) and provides dramatic insights into top-down influences of suggestion on cognition, emotion, thought, and action.

Learning Outcomes:

• Articulate the difference between bottom-up and top-down processes.

• Identify the functional neuroanatomy and brain circuitry underlying suggestion.

• Describe how to relate basic science on suggestion to clinical applications involving neural deficits.

10:45-11:00 AM PDT   **Poster Session Blitz (15 minutes)**

No CE

Each poster presenter will present a 5-minute overview. Following this, during the break, participants will be able to view each poster, and poster presenters will be available to answer questions via a Chat feature.

- **Managing Chronic Pain with Hypnosis: Possibilities for Patients on Opioid Maintenance Treatment**
  Casey Applegate-Aguilar, MA, MS

- **Feasibility of Attention Restoration Theory-Driven Hypnotherapy for Fatigue in Cancer Survivors**
  Mattie Biggs, BA; Joshua Rhodes, BS; Britini Hester; Gary Elkins, PhD and Kimberly Zimmerman, PhD

- **Theoretical Model of a Hypnosis-Based Intervention to Increase Physical Activity Behavior among Aging Women**
  Morgan Snyder, MA and Gary Elkins, PhD

11:00 AM 12:00 PM PDT   **Break and Poster Session**

Following the Poster Blitz (immediately preceding), participants can view each poster. Poster presenters will be available to answer questions via a Chat feature.

12:00-1:00 PM PDT   **Invited Address (60 minutes)**

Hypnosis and the Sunken Place: How Jordan Peele's 2017 Movie, *Get Out*, Illustrates the Dehumanization and Silencing of Black Americans by White Society

Amanda Calhoun, MD, MPH, Yale Child Study Center/Yale School of Medicine, New Haven, CT, USA

1 CE

This presentation will discuss the movie, Get Out, and its use of hypnosis and the Sunken Place as a symbol of the silencing and dehumanization of Black Americans by the white majority. The presentation will go on to discuss the effects of racism on the mental and physical health of Black Americans and ways in which the mental healthcare system plays a role in promoting institutionalized racism. Finally, the presentation will discuss actionables for mental health providers seeking to promote anti-racism in their clinical spaces.

Learning Outcomes:

• Articulate the greater message in the movie, *Get Out*, beyond the controversial use of hypnosis in the media.

• Cite two examples of existing research on the effects of racism on mental and physical health.

• List three ways that mental health providers can play a role in providing an anti-racist space for patients.

1:00-2:00 PM PDT   **Keynote**

Making Clinical Hypnosis a Mainstream Component of Healthcare For Physical Problems: Perspective and Lessons from 25 Years in GI Hypnosis

Olafur Palsson, PsyD, Professor of Medicine, University of North Carolina, Chapel Hill, NC, USA

1 CE

Hypnosis is perhaps the most powerful psychological tool known to humankind for directly influencing physical symptoms, but it is extraordinarily under-utilized for that purpose. It remains a rarely used exotic intervention technique for most medical problems. A notable exception is the treatment of functional gastrointestinal disorders, where clinical hypnosis has become a recommended option for patients with certain characteristics in standard clinical treatment algorithms and guidelines, and is supported as effective by multiple systematic reviews in leading journals in the field.

Evidence-based hypnosis treatment for gastrointestinal problems is now practiced in most of the top U.S. GI specialty centers, and also offered by hundreds of therapists in the community across the nation and internationally. Reaching this level of mainstream utilization has been a long and meandering path for GI hypnosis. It is vital for the future success of hypnosis as a clinical tool for medical problems to achieve similar mainstream integration for other major health problems where it has shown therapeutic promise. In this presentation, Dr. Palsson will summarize key lessons from GI hypnosis regarding how this can be brought about, and will discuss how it could be achieved much faster in the future. In the process, he will also give the audience insights into how clinicians can best achieve reliable therapeutic impact on physical disorders with hypnosis.

Learning Outcomes:

• Outline the main steps required for integration of clinical hypnosis into mainstream healthcare.

• Summarize the current status of hypnosis treatment for gastrointestinal disorders.

• Name at least three ways to make a hypnosis intervention reliably effective for treatment of a physical disorder.

Sunday, October 18, 2020

Note scheduled breaks:

- ➢ 9:30-9:45 AM PDT - break
- ➢ 12:00-1:00 PM PDT - break

8:00-9:30 AM PDT

Research Presentations

1.5 CE

Note: Four research presentations will be presented during this session. We will take questions at the end via the chat feature.

8:00-8:20 AM PDT -- A Survey of Clinicians' Attitudes and Interest in Hypnosis

Madeline Stein, MA, Saybrook University, Denver CO and Barbara S. McCann, PhD, University of Washington, Seattle, WA USA

Hypnosis has a long history of use among healthcare professionals. Yet, at the time of this publication, the major hypnosis professional organizations are experiencing a decline in membership and event attendance. This begs the question "are healthcare providers no longer interested in hypnosis?" This survey examined healthcare provider's attitudes, experiences, interest, and knowledge concerning the use of hypnosis in clinical practice. Participants (n=41) were physicians (31.7%), social workers (12.2%), physician assistants (2.4%), psychologists (7.3%), and professional counselors (12.2%) in Washington state who were enrolled in weekly Psychiatry and Addiction Case Conferences offered by the University of Washington. Of the participants, 70.3% had no prior experience with hypnosis education or training and 51% had never experienced hetero-hypnosis. Survey respondents indicated they were interested in learning more about hypnosis (80.6%), and to a lesser extent, were interested in being able to provide hypnosis to their patients or clients (61.5%). The results suggest a significant proportion of healthcare providers need for more education about hypnosis training, credentialing and referrals amongst healthcare providers.

8:20-8:40 AM PDT -- Willingness and Accessibility of a Mind-Body Intervention for Anxiety among a Culturally Diverse, Low Socioeconomic Status Population

Joshua Rhodes, BS, Baylor University, Waco, TX, Mattie Biggs, BA, Baylor University, Waco, TX, Gary Elkins, PhD, Baylor University, Waco, TX USA

This survey study aimed to investigate the willingness and accessibility of a hypnosis intervention for anxiety for culturally diverse, low socioeconomic status patients in a primary care setting. In this study, participants were asked to complete a one-page survey during a scheduled office visit with their

primary care provider. Survey questions included participants' interest in hypnosis as a treatment for anxiety, how many sessions they would be willing/able to attend, how they would prefer access to a recorded hypnosis intervention, and items relating to anxiety, including the GAD-7 measure. Over half (54.6%) of the survey participants reported that they experience anxiety, and 74% of the participants indicated that they would be interested in hypnosis if it were recommended by their provider for anxiety. These results demonstrate the acceptance of hypnosis as a possible intervention for anxiety in a primary care setting and a need for an effective and accessible treatment.

8:40-9:00 AM PDT - Exploring the Relationship between Absorption and Spiritual Transcendence

Morgan Snyder, MA, Baylor University, Robinson, TX and Gary Elkins, PhD, Baylor University, Waco, TX USA

Spirituality involves many imaginative experiences. As spirituality is not a tangible concept, it must be experienced through states of consciousness, prayer, or other activities. Becoming absorbed in spiritual experiences has been suggested by case examples. Absorption is a trait that is characterized by a tendency to become engaged in imaginative experiences. Therefore, individuals who score highly on absorption might demonstrate deeper connection to a spiritual being. The current study explored the relationship between absorption and spiritual transcendence. This study included 213 participants who completed questionnaires assessing absorption and spiritual transcendence. The hypothesis of a relationship between absorption and spiritual transcendence was not supported as results failed to find a significant relationship, r (211) = -.005, p = .943. This could indicate that spiritual transcendence is not dependent upon trait absorption. This study did not examine state absorption, therefore the relationship between absorption ability or state and spiritual experience remains unknown.

9:00-9:20 AM PDT -- A Pilot Study of Hypnotic Relaxation Therapy to Enhance Well-Being in College Students

Hyeji Na, PsyD, Baylor University, Waco, TX and Gary Elkins, PhD, Baylor University, Waco, TX USA

The purpose of this study was to investigate the feasibility, acceptability, and potential effect of a novel hypnotherapeutic intervention, informed by positive psychology, to enhance well-being in college students. The present study investigated adapting Hypnotic Relaxation Therapy for enhancing well-being (denoted as HRT-WB) in a non-clinical college sample. Twenty-seven college students were enrolled in a five-week intervention of HRT-WB and instructed in daily home-practice of self-hypnosis using audio recordings. Participants completed baseline and endpoint measures of well-being and symptoms of psychological distress. Results suggest that

HRT-WB is a feasible intervention, with high rates of retention, compliance with home-practice, and satisfaction. In addition, participants experienced improvements in subjective well-being as well as reductions in symptoms of psychological distress. Based on these promising results, further research into HRT-WB is warranted. HRT-WB could be a well-accepted, easily administered, and effective means of enhancing well-being.

9:20-9:30 AM PDT　　　　　　**Q&A**

Discussant: *Vivek Datta, MD, MPH*

Learning Outcomes:

- Describe recent research on attitudes toward, and interest in, hypnosis among health care professionals, and among primary care patients experiencing anxiety.
- Describe strengths and limitation of recent research on absorption and hypnotic relaxation therapy.●

9:30-9:45 AM PDT　　　　　　**Break**

9:45-10:45 AM PDT　　　　　　**Keynote**

Phenomenological Control as Cold Control

Zoltan Dienes, DPhil, University of Sussex, Brighton, UK.

1 CE

The presenter will first review recent work from his research lab that construes hypnotizability as an example of a more general trait of capacity for phenomenological control, which people can use to create subjective experiences in many non-hypnotic contexts where having those experiences fulfill people's goals. Second, he will review some recent work that construes phenomenological control as a specifically metacognitive process, where intentional cognitive and motor action occurs without awareness of specific intentions (cold control theory). In terms of the reach of phenomenological control, the presenter will argue that various laboratory phenomena, namely vicarious pain, mirror-touch synesthesia and the rubber hand illusion are to an unknown degree a construction of phenomenological control. The argument can of course be extended in principle to other experiences people have in the lab and outside of it. For example, the experience of the absorptions in states of concentration meditation may to an unknown degree depend on phenomenological control.

Learning Outcomes:

- Describe whether hypnosis is a purely metacognitive phenomenon
- Describe the potential role of hypnotic response in psychological experiments that are not apparently about hypnosis
- Describe the pros and cons of dropping the label "hypnosis" for phenomenological control

10:45 AM PDT -12:00 PM PDT

Research Presentations

1 CE

Note: Three research presentations will be presented during this session. We will take questions at the end via the chat feature.

10:45-11:05 AM PDT -- The Hypnotic Induction Reorganizes Information Processing in the Brain: A Connectomic Approach

Mathieu Landry, PhD, École Normale Suprieure, Paris, France; Jason Da Silva Castanheira, PhD, McGill University, Montreal, QC, Canada; Amir Raz, PhD, Chapman University, Orange, CA, USA; Jerome Sackur, PhD, École Normale Suprieure, Paris, France

Evidence intimates that the hypnotic induction enhances the efficiency of forthcoming responses to suggestions by facilitating information processing. Relying on the emerging field of connectomics, the current study examined this viewpoint by assessing how widespread changes in brain activity following an induction corresponds to variations in information processing amongst different networks. To this end, we recorded resting-state electroencephalography in low, medium, and high hypnotizable individuals before and after a hypnotic induction, and then applied graph theoretical analytics to model the functional reorganization of neural systems. Our results show that changes in connectivity for slow oscillations in high hypnotizable individuals reflects a global increase in efficiency and decrease in modularity. This pattern is consistent with the idea that the induction procedure yields important changes with respect to the sharing of information amongst functional brain networks and informs current views regarding the functional role of the induction within the process of hypnosis.

11:05-11:25 AM PDT -- What Makes an App "Hypnotic" and Effective for Pain Management?

Elvira V. Lang, MD, PhD, Hypnalgesics, LLC, Brookline, MA, USA; Paul Senn, EdM, MSCMHC, Hypnalgesics, LLC, Brookline, MA, USA; William Jackson, PhD, Tufts Medical Center, Boston, MA; Grahm Conway, BS, Hypnalgesics, LLC, Brookline, MA, USA; Thomas Corino, BA, Hypnalgesics, LLC, Brookline, MA, USA; Aroni Donavon-Khosrow, DMD, MS, Tufts University School of Dental Medicine, Boston, MA, USA; Matthew D. Finkelman, PhD, Tufts University School of Dental Medicine and Ronald J. Kulich, PhD, Tufts University School of Dental Medicine

Despite an explosion of mobile offerings for management of pain and anxiety, the evidence for effectiveness is scarce. Placebo-controlled trials are the most desirable, but designing inactive apps can be challenging. For a prospective randomized clinical trial with 72 patients in a craniofacial pain center, we created one app with hypnotic (H) and one with white noise (WN) content for use with iOs and Android systems, using the same internal architecture and looks. Both H apps by themselves and in comparison to the WN group significantly reduced pain and anxiety during the waiting room time. The Android WN app significantly reduced anxiety, but not pain. The iOs WN app was the only true control app affecting neither pain nor anxiety. Usage analysis revealed that different default approaches of the iOs and Android devices accounted for the difference of results.

11:25-11:45 AM PDT -- The Effects of a Brief Nap on Stress, Affect, and Working Memory

Nathan Wofford, BS, Baylor University, Waco, TX, USA; Carmen Westerberg, PhD, Texas State University, San Marcos, TX, USA, Natalie Ceballos, PhD, Texas State University, San Marcos, TX, USA; Gary Elkins, PhD, Baylor University, Waco, TX, USA

Napping has been shown to have a physiological stress-reducing effect and also interacts with many of the same systems that stress and sleep do. However, the effects of napping on acute stress in non-sleep restricted populations is currently unknown. The purpose of this study was to determine the influence of a 40-minute nap on stress, affect, and working memory. Anticipatory anxiety/stress was triggered by administering a modified Trier Social Stress Test (TSST). Participants then took a 40-minute break in which they either watched a neutral video or took a nap. Negative affect did not differ between groups before the break; however, it was significantly lower in the nap group compared with the wake group after the break. Both groups showed lower anxiety/stress after the break than before. Working memory also improved after the break compared with before, and this increase was specific to male participants.

11:45 AM-12:00 PM PDT   Q&A

Discussant: *Barbara S. McCann, PhD*

Learning Outcomes:

- Describe research on electroencephalographic changes in people undergoing hypnotic induction.
- Describe studies examining the effects of hypnosis on craniofacial pain, and on napping as a means of decreasing stress and improving working memory.

12:00-1:00 PM PDT   Break

1:00-2:00 PM PDT   **Keynote**

Unravelling the Mysteries of Hypnotizability: A Componential Approach

Amanda J. Barnier, PhD, FASSA, Fellow SCEH, Pro Vice-Chancellor (Research Performance) and Professor of Cognitive Science, Macquarie University, Sydney, Australia

1 CE

In hypnosis, mere words can have remarkable effects on some people and deliver important therapeutic benefits. But despite over two centuries of clinical and scientific practice and investigation, our understanding of this fascinating cognitive capability remains incomplete. I describe a "componential" approach that has helped practitioners and researchers better understand other cognitive abilities such as reading, and discuss how and why this approach might be useful in our intrinsic, instrumental and applied work with hypnotizability and hypnosis.

Learning Outcomes:

• Describe historical approaches to individual differences in hypnotic ability across clinical and scientific contexts.

• Describe the relevance of "componential" approaches to individual differences in other cognitive skills such as learning to reading.

• Differentiate the ways in which a componential approach to hypnotizability and hypnosis might assist our hypnotic practice and research.

2:00 PM   **Conference Adjourns**

See you again next year!

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A GPS Guide for Clinical Hypnosis Treatment Planning

Presenter: David Reid, PsyD, Augusta Psychological Associates, Virginia and Saybrook University

November 13, 2020

Applications of Hypnosis in Integrative Medicine

Presenter: Lindsey C. McKernan, PhD, MPH, Asst. Professor, Dept. of Psychiatry & Behavioral Sciences, Physical

Medicine & Rehabilitation, Osher Center for Integrative Medicine, Vanderbilt Univ. Medical Center, Nashville, TN

Coming in 2021

Hypnotic-Like Practices in Tibetan Yoga and Meditation

Presenter: Ian Wickramasekera, PsyD, Naropa University

Details and registration: https://www.sceh.us/webinars

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