

ANDREW **PARR**  
Practitioner Academy

**Welcome**

**Week 12 – Module 5 (Part 1)**

Presented by Debbie Moores

# Aims of Today

- **Recap of Module 4 – What do you have learned**
- **Learning Objectives for Module 5**
- **Introduction to Analytical Hypnotherapy (Hypno-Analysis) & the Library Model**
- **Suppression and Repression**
- **Types of Hypno-Analysis**
- **Methods & Aims of Hypno-Analysis**
- **Different Schools of Thought on Hypno-Analysis**
- **Using the Specific Past-Present Tense**
- **Simple Regression Script**
- **Regression to happy Place Theory – DEMO with Vounteer**

# Recap – Module 4

## Overview

- Hypnosis, Science or Art?
- The Differences Between Feelings & Emotions
- Code of Ethics & Your main duties as a Hypnotherapist
- Accompanied Clients
- Andrew Newton Induction and Deepener
- David Grove and Clean Questioning
- Andrew Parr's Natural Clean Questions and Fluid questioning
- **FLUID QUESTIONING:** Natural Clean Questions, Unfinished Sentences, Client Language Feedback and Linking Phrases
- **Accessing Happy and negative states.**
- Putting a while **solution based session** together using, Fluid Questioning, **DWDW** and hand-crafted suggestions.
- **GAP** (Goal & Achievement Plan)

# Learning Objectives For Module 5

BY THE END OF THIS MODULE YOU WILL:

- Have an understanding of the **basic principles of Hypno-Analysis**.
- Have an understanding of the key terminology used with Hypno-Analysis.
- Have an understanding of **Hypnotic Regression** & how this is used within a **Hypno-Analysis session**.
- Have an understanding of **Abreactions** and their role in Hypno-Analysis.
- Be able to carry out a **basic hypnotic regression**, gather basic information and return the client to their normal, everyday awareness.

# Analytical Hypnotherapy (Hypno-Analysis)

## TREATS THE CAUSE, NOT THE SYMPTOM

A form of hypnotherapy that aims to **resolve symptoms** and **issues** by uncovering and treating the **cause** of the problem.

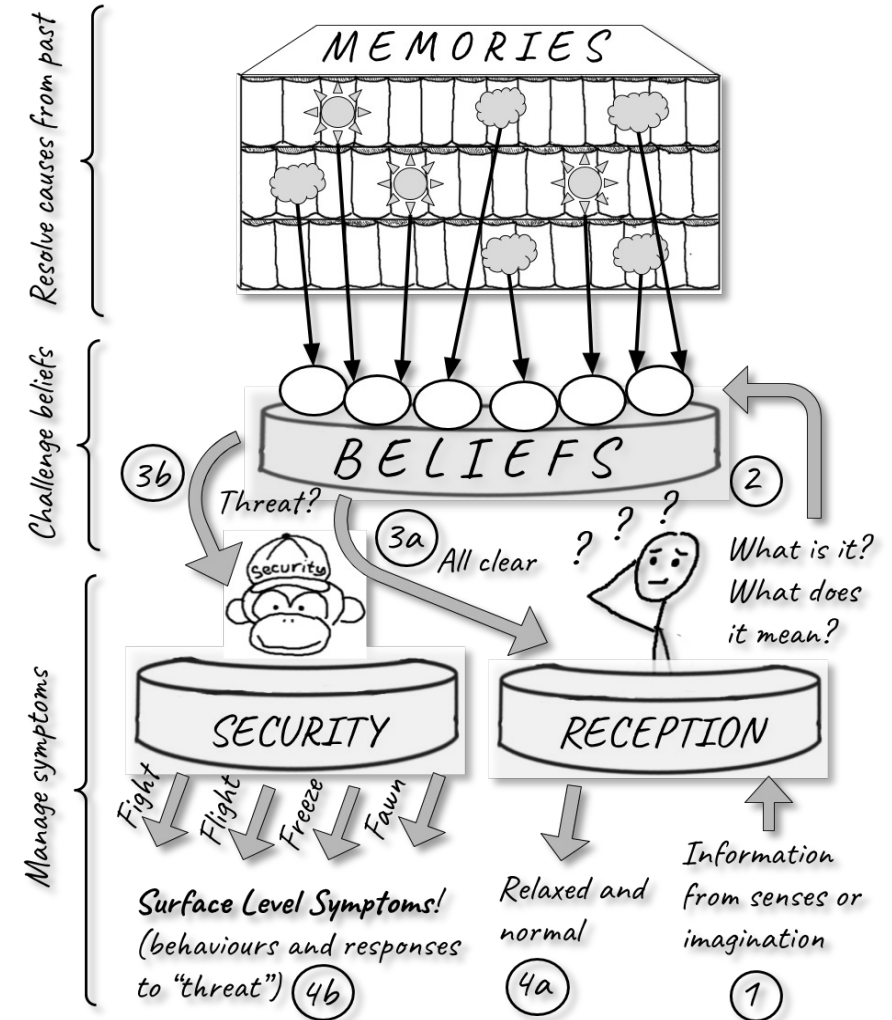
- By uncovering the **true cause** we aim to bring about a **sense of liberation** and **enlightenment** whereby the client is then freed of any **associated symptoms** that originated from that cause.
- In order to bring about the **symptom release** there usually must be some kind of **Cathartic Effect**.

# CATHARTIC EFFECT

- From Greek **katharsis** meaning “**Purification**” & “**Cleansing**” - this often means a **release** or **purging** of suppressed or repressed emotions around an idea, leading to a sense of **enlightenment & renewal**.
- A full **Catharsis** will often bring about such a **change** that the client is able to get on with life as if the traumatic experience had never happened - hence the sense of ‘**renewal**’.
- **A Cathartic Effect** will usually entail the **release of emotion** – hence why we pay particular attention to emotions when working with clients, because any time we can access those, we can often get to the **root causes** more quickly.
- **Intellectual understanding alone will rarely achieve this**. Many people spend years in traditional therapy and could write a book on their issues, but they still have them! It must be an emotional release as well.
- Their **understanding/insight/catharsis** must be sufficient to bring about a **change in BELIEF** within the client, otherwise, the symptoms or problems will persist.

# Hypno-analysis & The Library Model

- Using the **Library Model**, this typically means going through the **“bookshelves”** of **memories and life experiences** in order to find **emotionally charged events** or ideas that have been **‘fuelling’** their **beliefs** that have been **creating the symptoms**.
- Once brought into **conscious awareness** and **fully experienced**, **catharsis occurs**, whereby the **emotions are released** and the client experiences a **new perspective** with **new beliefs**.
- Will often lead to an **Abreaction**.
- These can be **dramatic and powerful therapeutic tools**, as the client typically **re-experiences feelings, emotions** and even **bodily sensations** from previous traumas or emotional experiences.



# Hypno-analysis & The Library Model

**IMPORTANT:** One of the main aims of **Hypno-Analysis**, within the framework of this course, is to help you **trigger abreactions** to bring about a **Cathartic Effect**.

- Some therapists **avoid abreactions**, as they don't know how to handle, or appreciate the benefit. During an **abreaction**, the subject will appear to be **reliving** some or all elements of a **particular memory or experience** - or **the idea** of it.
- Can be unnerving and people are often tempted to try and calm the patient down and bring them out if it.
- Andrew, and others, - feel that **abreactions** are one of the quickest and most effective way to bring about a **Cathartic Effect**, and hence **liberation** from any **associated symptoms** or **issues**.
- An **abreaction** is usually seen as an extremely **positive outcome** and the client/subject **should be encouraged through it**, to **purge** as much **emotion** as possible. A good abreaction will essentially de-hypnotise the client from their previous, negative belief.

Abreactions therefore form an integral part of **Catharsis & the Cathartic Effect**.

## KEY TERMS:

**Abreaction:** The expression and consequent release of a previously suppressed or repressed emotion, achieved through **reliving the experience** that caused it – or the idea behind it - (typically through hypnosis or suggestion).



# Suppression and Repression

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For the purposes of this training and the application of these teachings, we will use the following definitions:

## SUPPRESSION:

- To prevent the expression of, to *consciously* inhibit an unpleasant idea or memory to prevent the considering of it. ie A deliberate *conscious*, process, the client is *consciously* aware they are doing so.

## REPRESSION:

- To suppress a thought, idea or memory so that it becomes or remains unconscious. ie The material has been 'filed' into the unconscious and the client is no longer consciously aware.
- With regards to **Hypno-Analysis**, the client may **suppress** or **repress** both memories and emotions - or a mixture.
- For example, they may remember an event full well - but have **repressed the emotion** of it - so it seems neutral when they think of it.
- Or they may have **repressed a memory** - but not the emotion. The emotion is being triggered, as per our **Pyramid and Library Models**, but the client wonders why they feel the way they do

## PRACTICAL TIP

As a general rule... If a client is **suppressing information** or **emotion**, you can usually elicit it fairly simply with the right questioning. If they are **repressing it**, you may have to 'dig a little deeper'.

# Different Schools of Thought on Hypno-Analysis

- Some people believe that all problems are caused by repressed memories and emotions and that you have to find the repressed memory in order to bring about a resolution.
- Some say you have to find the very first memory (also known as the **ISE - Initial Sensitizing Event** –ie. the moment where the ‘repression’ or ‘suppression’ occurred.
- Others say you only have to uncover the repressed emotion.
- Others, still, claim that no examination of the past is required and that **reprogramming of the conscious or unconscious mind from the present** is all that is required.
- From Andrew’s experience, the common factor in ALL these approaches, is the **changing of a client's belief system, along with associated release of any emotion.**
- Andrew terms this as an **“ABREACTIVE MOMENT”**

## PRACTICAL TIP

Your real aim in Hypno-Analysis, therefore, is to use **regression** and other **analytical techniques** to help the client uncover previously **‘invisible’ beliefs** and **release** or **express** any associated **suppressed** or **repressed emotions.**

It is this process that creates

**The Abreactive Moment.**

# Methods & Aims of Hypno-Analysis

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In **Traditional Hypno-Analysis** (and standard psychiatric analysis) we are trying to find out, 'what happened' to cause the issue, which means an examination of the past.

In Hypno-Analysis we employ **hypnotic techniques** to facilitate this, and these usually involve some form of '**Regression Therapy**'.

## REGRESSION THERAPY

Simply means '**regressing**' the client, (ie taking the client back), to an earlier time in their life /past lives, in order to. :find the cause of the problem

Usually this is achieved in one of the following ways:

- **Regression To Cause**
- **Progressive Age Regression**
- **Free Regression**
- **Free Association.**
- **Spontaneous Age Regression.**
- **“Past Life” Regression**

All usually occur in the previously **induced hypnotic state**, except for '**Spontaneous Age Regression**', which may occur at any time.

# Types of Hypno-Analysis

## Regression To Cause

- The hypnotherapist aims to directly take the client back to the specific scene or memory that is the cause of the problem.

## Progressive Age Regression

- The hypnotherapist will take the client back, year by year, and ask for some kind of signal to indicate when the right time has been reached.

## Free Regression

- The hypnotherapist initiates some kind of idea of regression, but allows the client's unconscious to direct what happens next

## Free Association

- The hypnotherapist induces the hypnotic state and then asks the client to free-associate ie allow one thought to link to the next, without any guidance from the hypnotherapist

## Spontaneous Age Regression

- In conversation or during the induction, the client may suddenly 'remember' something that triggers emotion, and in such cases, it may be possible to proceed from that moment, without any other formal induction/regression procedure.

## “Past Life” Regression

- Past life regression assumes that the problems caused by events from a previous life and so a regression process to access the 'Past Life' memories is used.

# According to Andrew Parr

## PRACTICAL TIP

*“While **traditional Hypno-Analysts** (and Psychoanalysts) believe that the problem lies in the past and therefore your job is to play psychological hide and seek in order to find it ..... I would strongly urge you to consider/remember that it is **Emotionally Charged Beliefs** that cause problems, not the past.*

*Therefore, when using **Hypno-Analysis** and **Regression techniques**, remember that what you are REALLY looking for are **Emotionally Charged Beliefs**.”*

# Using the Specific Past-Present Tense

When people **recall memories**, they will often generalize, and use the past tense or variations of it. E.g.

***“I wasn’t very good at school.”*** (Generalisation).

***“My dad came home drunk and hit my mother and I was in my bedroom.”*** (Past tense)

***“I felt very alone compared to my older brothers and sisters, who all had each other”.*** (Generalisation)

***“I messed up my speech and just froze on stage. I couldn’t get my words out.”*** (Past tense)

This is what we do in **normal conversation** and what most people do in **traditional therapy** and **counselling**.

# Using the Specific Past-Present Tense

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If you use what Andrew calls, **Specific Past-Present Tense**, you will typically be able to elicit a much greater abreactive or cathartic effect, in a shorter space of time.

## Why?

- Because, the **past tense** and generalizations will nearly always have an element of *emotional dissociation*.
- Sometimes, complete emotional dissociation, as the client has become so accustomed to telling their story, or compartmentalising it, they have actually forgotten (*suppressed or repressed*) what they were really feeling.
- However, if we ask the client to describe something that occurred in the **past** ... but **using the present tense**, as if they are there, we help them sink more into the feelings.
- And if we ask them to describe **specific details**, instead of generalizing ... they will tend to sink deeper still ...

# DESCRIBING THE PAST SPECIFICALLY, USING THE PAST, PRESENT TENSE

## Example 1

✗ *“I wasn’t very good at school and didn’t like the teacher.”* (Generalisation)

✓ **SPPT** *“I’m in the classroom and the teacher is telling me not to bother doing maths as I will probably fail. I feel embarrassed and humiliated and really stupid. I feel so angry that I am deciding that I am going to work really hard and prove them all wrong.”*

## Example 2

✗ *“My dad came home drunk and hit my mother and I was in my bedroom.”* (Past Tense)

✓ **SPPT:** *“My dad is coming in downstairs and I can tell he’s been drinking. I can hear him shouting at mum and there are smashing sounds. I’m in my bed under the covers and I just want it all to go away. I want to help mum but I’m too scared and I don’t know what to do. I’m just crying and feel so helpless. I think he might kill mum and then I’ll be all alone.”*



# DESCRIBING THE PAST SPECIFICALLY, USING THE PAST, PRESENT TENSE

## Example 3

✗ *"I always felt very alone compared to my older brothers and sisters, who all had each other."*  
(Generalisation)

✓ **SPPT:** *"All my brothers and sisters are the same age and they are playing together but they are ignoring me. I feel lost, detached, lonely and scared. I feel there is no security and I am just drifting in space."* (real comments from client attending for fear of flying ...!)

## Example 4

✗ *"I messed up my speech and just froze on stage. I couldn't get my words out."* (Past Tense)

✓ **SPPT:** *"I'm on stage and suddenly there's a word I don't know how to pronounce. I am trying to say it but the word is stuck and everything has gone quiet and everyone is looking at me and I feel embarrassed and stupid and want to hide away but I can't so I'm just standing there and then someone is laughing and I feel even worse and I'm trying to speak but the words are all jumbled and I'm going red and I see people's faces looking at me as if there's something wrong with me and I think there must be."*

- Take note of the **extra emotive content** to the **same scenes** and **memories** when described using the **Specific Past-Present Tense**.

# APPLYING IT PRACTICALLY:

**You:** *“That’s good, now just pretend you are there once again and describe it as if you are there, once again, using the present tense. Be there in your mind...”*

- **Client:** *“I was walking along the road to school ...”*
- **You:** *“I am walking along the road to school ...”*
- **Client:** *“I am walking along the road to school ...”*
- **You:** *“Good, I am walking along the road to school and ...?”*
- **Client:** *“I am walking along the road to school and I see my father talking to someone else who I don't know, etc.”*

## PRACTICAL TIP

When you can encourage the client to be **specific** about **scenes** or **memories** and ask that they describe them as if they are there once again ie using the **present tense ...** they will tend to **drop into the feeling** of the time much more, and therefore be far more likely to experience an **abreaction**, along with the associated **cathartic effect**.

# Simple Regression Script

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First induce a reasonably relaxed hypnotic state using your preferred induction, including any deepener. When the client is sufficiently relaxed and compliant, begin the following

## 1. Focus/Intensify the feeling you are looking to explore.

*“And now, as you continue relaxing with each exhaling breath, I’d like you to focus on that feeling ...*

[happy/safe/calm/free] or [fear/worry/guilt/shame] etc.

*... Just focus on that feeling and thinking about what it feels like to be you when you have that feeling, that emotion. Just allow yourself to go deeper into that feeling. You can’t make yourself feel it, but allow yourself to think about feeling it, as best you can.”*

## 2. Regression

- *“And now I’d like you to allow your mind to let that feeling take you back in time. Just drifting back in time. Back in time as if there is no such thing as time. Sliding back through the days, the weeks, the months and the years. Back through the memories, back through the life experiences. Just allowing that feeling to take you down and down, and back and back in time, allowing that feeling to take you right the way back now to somewhere where you’ve felt that feeling before, or wherever your mind wants to take you to.*

*“Imagine the idea of getting younger and younger, your body getting smaller and smaller, as you are sliding back in time. Right the way back to wherever your mind seems to take you to. And soon you begin to find yourself thinking of something, remembering something, sensing something, just being there once again in your mind. And whatever that may be...”*

### **3. Begin the Recall**

*“...You can easily speak to me now, and I’d like you to let me know where you seem to be in your thoughts. Indoors? Or outdoors? Or wherever. Just take your time, and when you’re ready, let me know wherever you seem to be first of all.”*

**[Brief pause]**

*“So what would you say, indoors, outdoors, whatever it may be ... ?”*

**Wait for response, then ...**E.g. *“I’m indoors”*

*“OK, you are indoors. Now just describe the scene or situation to me - Whereabouts indoors do you seem to be?”*

*“I’m in the living room where I grew up...”*

*“Ok, you are in your living room where you grew up. Whereabouts in the living room do you seem to be?”*

*“I’m by the door”*

*“Ah, ok, you are by the door. And is there anything happening by the door?”*

*“I’m just looking at my mum in the kitchen”*

*“You’re looking at your mum in the kitchen?”*

*“Yes, she’s cooking dinner. I like it when she does that, it feels safe, it feels warm”.*

## PRACTICAL TIP

If we put this into simple steps it is:

### Focus on a feeling

Follow that feeling back in time (or wherever the mind goes to) Use **Fluid Questioning** to initiate flow of information.

# Regression to “Happy Place” Theory

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The aim of this exercise is to allow you to practice **hypnotic regression** on a subject without having to deal with anything too emotional or dramatic at first. (Though of course this cannot be guaranteed).

The idea is not to do anything with the happy memory – it is just to practice getting the client to recall. It can be one memory or several memories. When you do this exercise you may get a **variety of responses**, including:

- Quite **dissociated memory recall** - ie describing an event as if it is in the past without any real feeling or emotional connection.
- **Complete regression** - the subject will speak as if they are actually there and may exhibit **physical and emotional signs** to this effect. This could be **facial expressions, change of voice, change of vocabulary, change of body posture**.
- **Somewhere in between** - quite connected to the memory and feeling it, but still describing from current perspective.
- **Blank mind** - subject says they can't think of anything - usually because they are worried about not being able to and so the **'pressure' causes anxiety** and fills the mind with those thoughts.
- **Can't think of happy memory** - the client may become upset or emotional if they find themselves unable to remember happy times.
- **Remembering unhappy times** - the subject may find themselves actually remembering an unhappy or unpleasant memory and become emotionally upset.

# Regression to “Happy Place” Theory

- **If the client is blank** - just be reassuring, tell them to relax, take the pressure off, let go of trying, do a deepener and then repeat the regression but this time more slowly.
- **If the client can't think of a happy memory** - and becomes upset about that, just say, *“It's ok, just let go of these thoughts for now, relax, let your mind gently come back to the present, just relax, etc”* and release them from the trance when they are ready. Then have a little chat about what happened, just listening without needing to fix anything.
- **If they are remembering an unhappy or unpleasant memory** - say, *“You can tell me about it if you want to, but you don't need to right now. Just notice what comes to mind and very gently, as you breathe out, just blow it away for now, just blow it away and blow the feelings away, and let your mind come all the way back to the present, allowing those thoughts and feelings to dissolve into the present. Coming all the way back now, counting from 1 to 5 in your mind, opening your eyes when you are ready ...”*
- And then have a quick chat about the experience - again listening, without needing to fix anything just yet.

## PRACTICAL TIP

As the client speaks, **repeat back** to them whatever they say and then use **fluid questioning** to prompt, or if already in good flow, just **simple acknowledgements** of what they are saying.

Encourage the client to use the **present tense** (as in **past specific tense**),  
as if they are actually there.



# Regression to “Happy Place” (Demo)

- Debbie with volunteer