

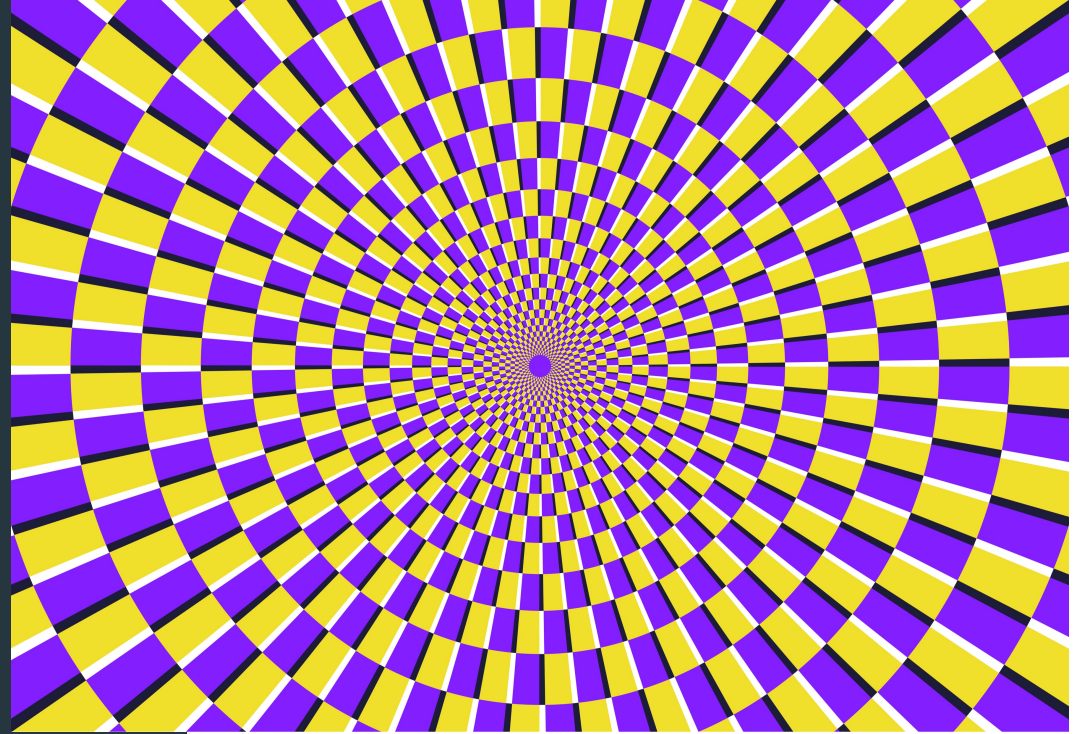


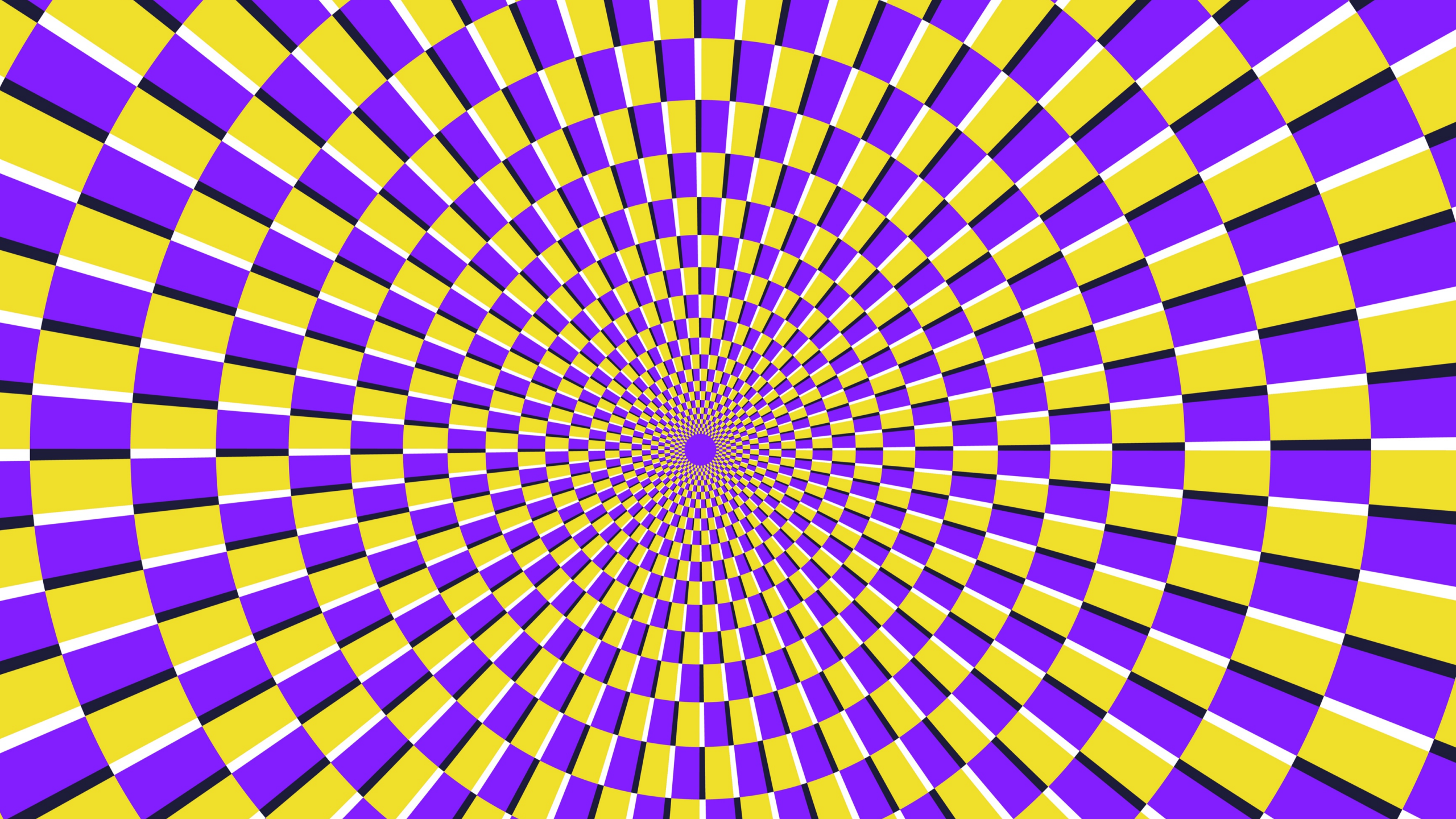
CORE WELLNESS

Welcome to  
Clinical Hypnotherapy  
in Action: 3 CE

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Joseph Tropper, MS, LCPC, CCTP,  
Certified Hypnotherapist









## CORE WELLNESS

## About Core Wellness

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Core Wellness is a dynamic training group offering evidence-based, practical workshops via live, webinar and home study delivery. Our passionate and knowledgeable trainers bring engaging and inspiring CE trainings that stimulate the heart and mind for client care and effective clinical skills.

Core Wellness LLC is authorized by the Board of Social Work Examiners in **MARYLAND** to sponsor social work CE programs (for LMSW, LCSW, LCSW-Cs) and maintains full responsibility for all content. The trainings qualify for Category 1 continuing education units (whether taken in person or via live interactive webinar). Our credits are also accepted by the Board of Professional Counselors of Maryland (LGPC, LCPC and MFTs) and Board of Psychologists of Maryland. Additionally, Core Wellness, LLC is recognized by the **NEW YORK** State Education Department's State Board for Social Workers #SW-0569 and the **NEW YORK** State Board for Mental Health Practitioners, #MHC-0167. For **other states**, contact your board & let us know if we can help!

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## About the Presenter

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**Joseph Tropper, MS, LCPC** holds a Master's degree in mental health counseling and is a highly sought-after trauma therapist, trainer & business consultant. As a Certified EMDR Therapist and Certified Clinical Trauma Professional (IATP) Joseph brings the art ad skills of trauma counseling and client motivation to life in his unique upbeat, hands-on approach that will engage, inspire and empower you as a therapist. Joseph is a full-time clinical supervisor and director and sees clients part time.



# Course Schedule

## Clinical Hypnotherapy in Action: 3 Hour CE

### General Schedule: 3 CE

**Part 1:** History and Theory of Hypnosis

**Part 2:** Clinical Hypnosis Process for depression, anxiety, trauma and more

**Part 3:** Hypnosis Interventions; Q & A





## **Think and Share**

Take a moment to consider your experiences and kindly share them with us.

## About the Presenter

### ***Joseph Tropper, MS, LCPC, CCTP***

- *Master's degree in mental health counseling*
- *LCPC Clinician and Supervisor*
- *Director of Operations of RCC and Core Wellness*
- *Sought-after trauma therapist and trainer*
- *Certified EMDR Therapist (EMDRIA)*
- *Certified Clinical Trauma Professional (IATP)*
- *Certified Hypnotherapist and Professional Coach*
- *Training in Somatic Experiencing, Sensorimotor Psychotherapy*
- *Training in Gottman, EFT, Imago and IFS modalities*





# 4 Goals for Today

- Learn history of hypnosis
- Understand neurobiology and theory of hypnosis
- Carry out full hypnosis session
- Apply for depression, anxiety, trauma and more

# Course Schedule

Clinical Hypnotherapy in Action: 3 Hour CE

General Schedule: 3 CE

**Part 1: History and Theory of Hypnosis**



The image features three silver pocket watches hanging from chains against a dark, blurred background. The watches are arranged horizontally, with the central one being the most prominent and in focus. Each watch has a white face with black numerals and hands, and a small sub-dial at the bottom. The chains are made of small links and are attached to the top of each watch. The overall lighting is soft, highlighting the metallic surfaces of the watches.

## What is hypnosis?

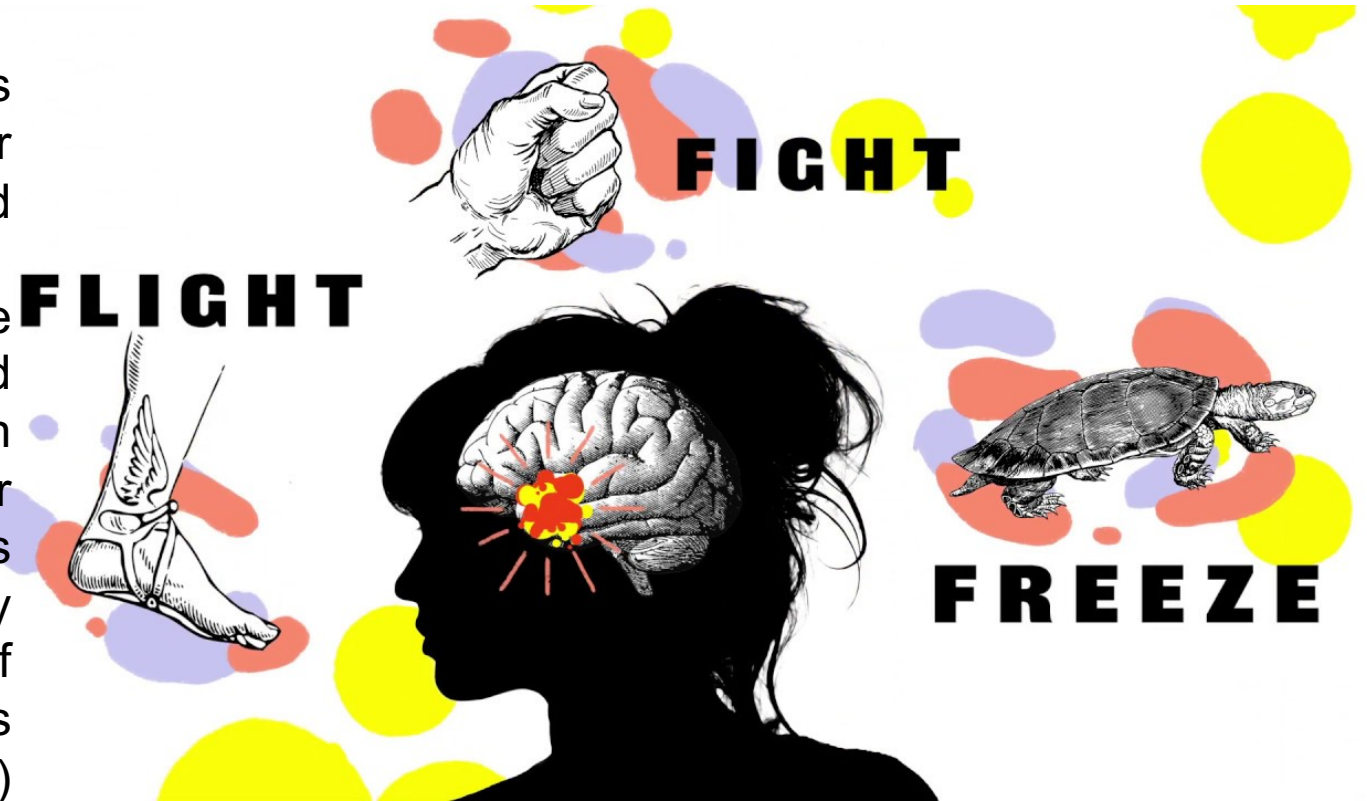
Hypnosis is created by an overload of message units, disorganizing our inhibitory process (Critical Mind), triggering our fight/flight mechanism and ultimately creating a hyper-suggestible state, providing access to the subconscious mind.

## Fight-Flight-Freeze Mode

### Definition:

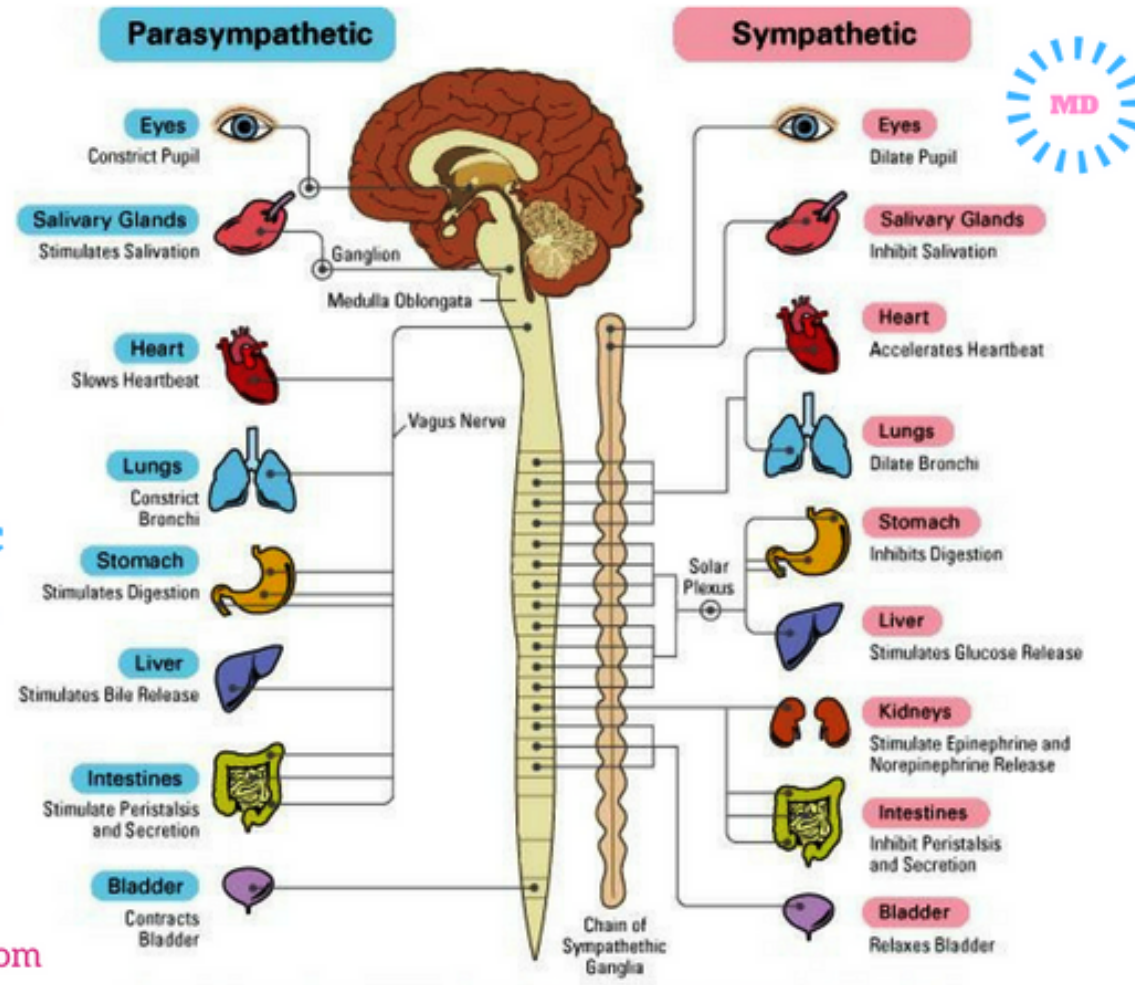
A primitive and involuntary reaction that is triggered by a perceived sense of danger or during a state of anxiety, in order to defend oneself or to escape from danger.

Primitive man survived by developing three basic instincts. These instincts are called Fight, Flight and Freeze mechanisms. Man (and some creatures) had developed greater strength and aggression (fight) while others developed speed, agility and sensitivity toward their surroundings using their sense of smell, hearing and sight (flight). Sometimes playing dead is most effective (freeze). Creatures that were able to develop both fight and flight abilities survived to evolve, others became extinct.





**Sympathetic  
Nervous System**  
VS  
**Parasympathetic  
Nervous System**



There are two divisions of the autonomic nervous system:

**Sympathetic:** Activated during fight/flight/freeze mechanism.

**Parasympathetic:** A self-regulating stabilizing system that brings us back to a state of balance.

During sympathetic arousal, physiological changes occur, preparing the body for fight/flight/freeze. After the danger has passed, the parasympathetic system takes over to create a homeostasis (balance).



Myth 1: Hypnosis is like sleep  
**FALSE**



**Sleep and Hypnosis:**

Sleep is a state during which you are unconscious of what is going on. Hypnosis is a state during which you are consciously aware of what is happening around you.

Another important difference is that during the sleep state we do not learn.



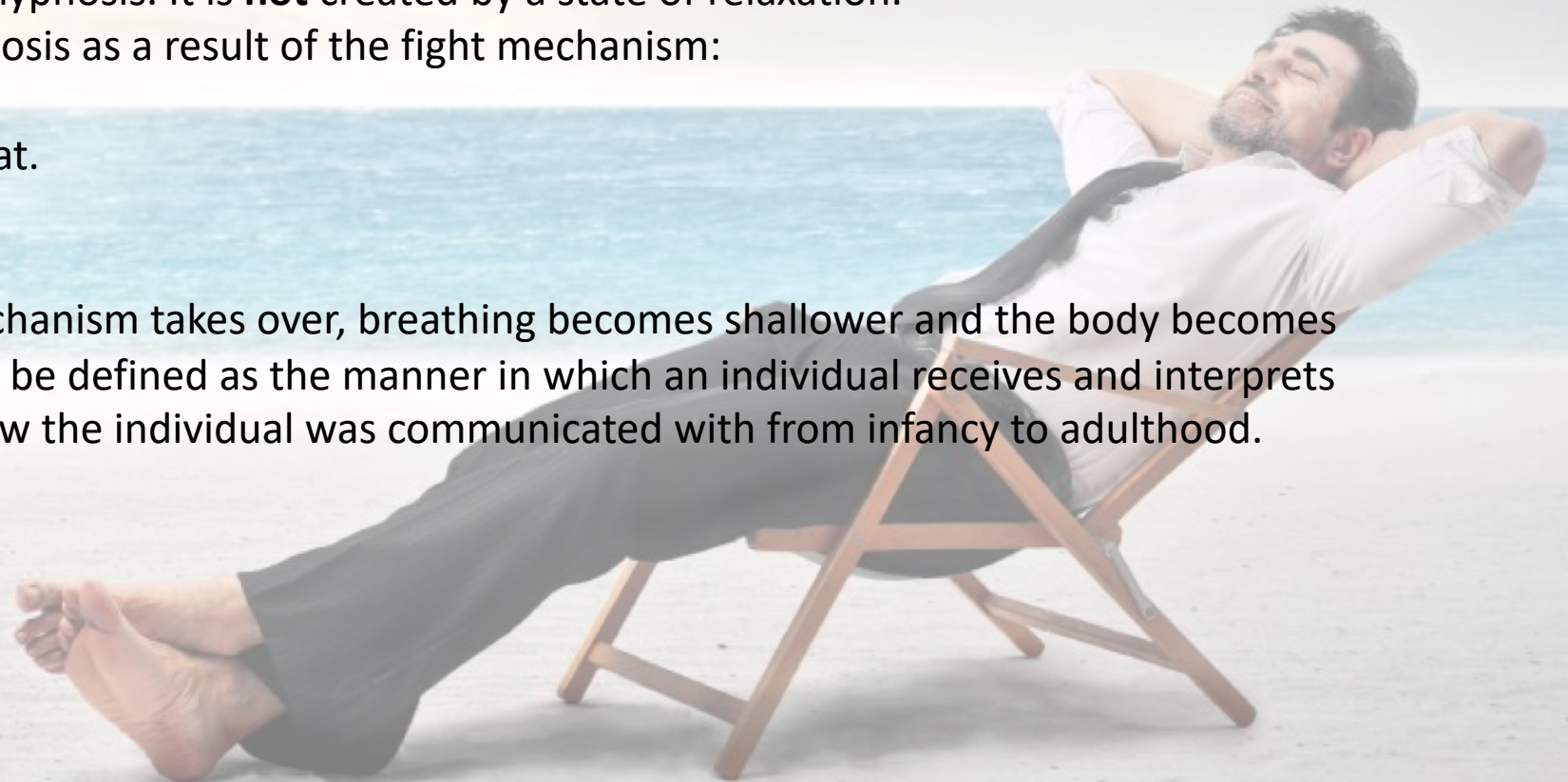
## From Anxiety to Relaxation

Hypnosis is created by the hypnotist in much the same way as the environment. The hypnotist uses a state of anxiety which leads to hypnosis. It is **not** created by a state of relaxation.

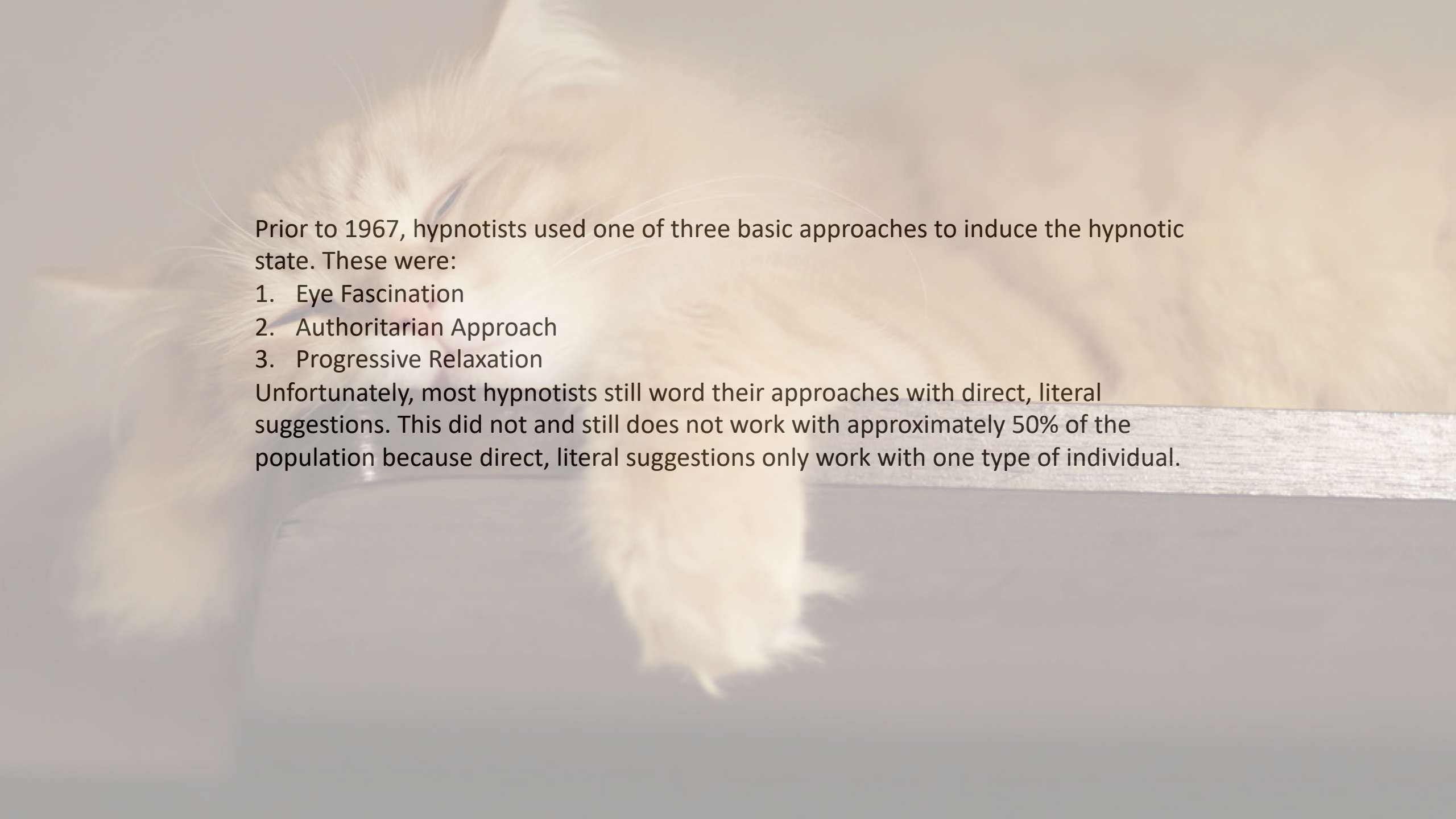
Changes that occur during hypnosis as a result of the fight mechanism:

1. Changes in breathing.
2. Dryness of the lips and throat.
3. Rapid eye movement.

Once in hypnosis, the flight mechanism takes over, breathing becomes shallower and the body becomes more relaxed. Suggestibility can be defined as the manner in which an individual receives and interprets input (i.e., message units) or how the individual was communicated with from infancy to adulthood.





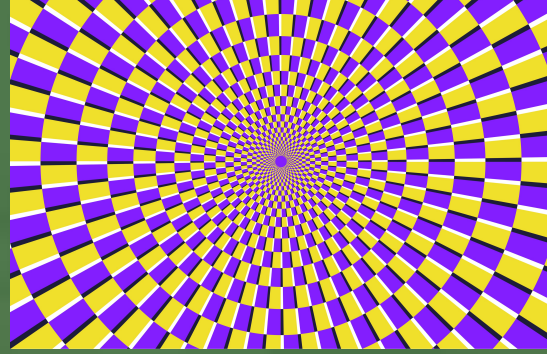


Prior to 1967, hypnotists used one of three basic approaches to induce the hypnotic state. These were:

1. Eye Fascination
2. Authoritarian Approach
3. Progressive Relaxation

Unfortunately, most hypnotists still word their approaches with direct, literal suggestions. This did not and still does not work with approximately 50% of the population because direct, literal suggestions only work with one type of individual.





How To...

Hypnotize Guide



# 3 Step Induction



**INGREDIENT #1: AUTHORITY/ONE-UPS-MANSHIP**



**INGREDIENT #2: DOCTRINE/PARADIGM/TRANSLOGIC**



**INGREDIENT #3: OVERLOAD/INTERNAL EXPERIENCE**

## INGREDIENT #1: AUTHORITY/ONE-UPS-MANSHIP

The first ingredient necessary in order for any hypnotic modality to be effective is “**authority**”. The subject must perceive the presenter of the hypnotic modality as an authority figure in order for him to even consider the acceptance of the message being presented. “*Authority*” is achieved through the process of “***one-ups-man ship.***”

The **first** process of “one-ups-manship **is establishing control over the environment.** Many times a social struggle exists between presenter and subject over control of the environment and the establishment of authority. If the presenter fails to prevail in that battle of “one-ups-manship” then the modality will be ineffective.

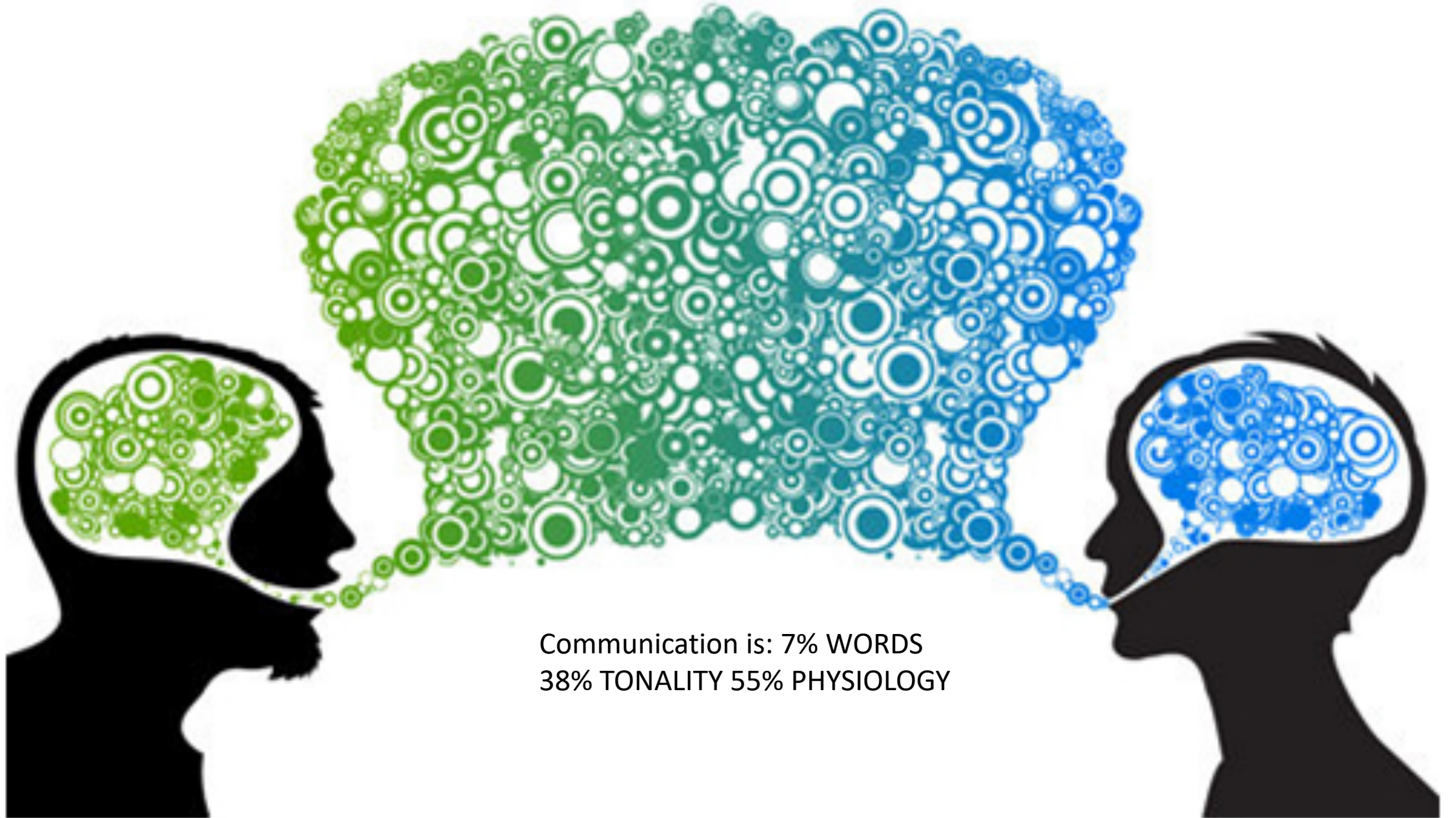


## 5 General Concepts

- 1. The Law of Reverse Action.**
- 2. The Law of Repetition.**
- 3. The Law of Dominance.**
- 4. The Law of Delayed Action.**
- 5. The Law of Association.**



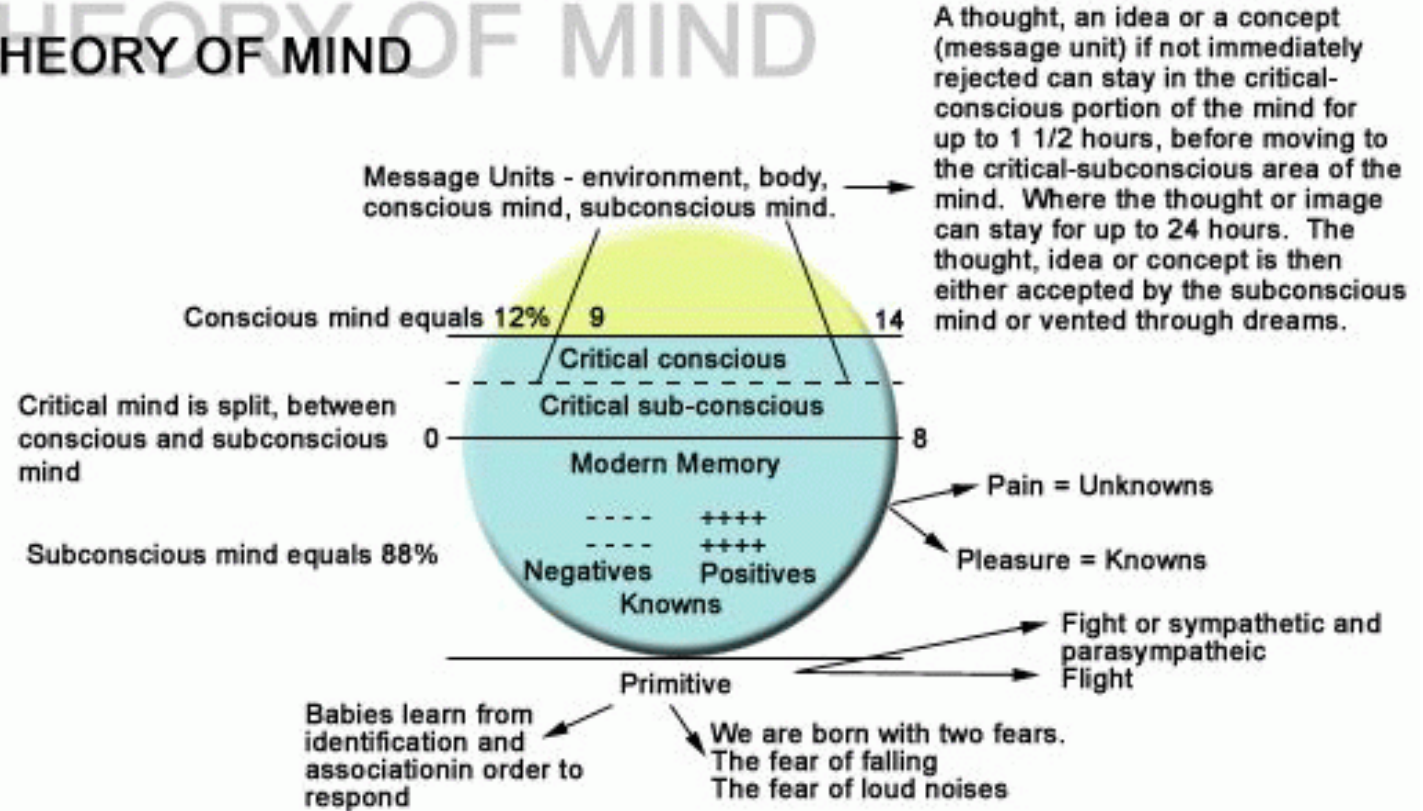
1. **The Law of Reverse Action** - Your eyes are stuck. You cannot open them.  
The harder you try, the more difficult it becomes
2. **The Law of Repetition** – multiple avenues of instruction
3. **The Law of Dominance** – instructions to reach deep sleep
4. **The Law of Delayed Action** – inferred later action
5. **The Law of Association.** – Stimulus and practice



Communication is: 7% WORDS  
38% TONALITY 55% PHYSIOLOGY

**“POWER WORDS” FOR THE ARM AND HAND TO MOVE UP:**  
 ex: “lifting, rising, higher,  
 lighter, pulling, jerking, moving  
 up, with every breath now”

# THEORY OF MIND





## INGREDIENT #2: DOCTRINE/PARADIGM/TRANSLOGIC

Ingredient #2 can be presented in any of the following three formats.

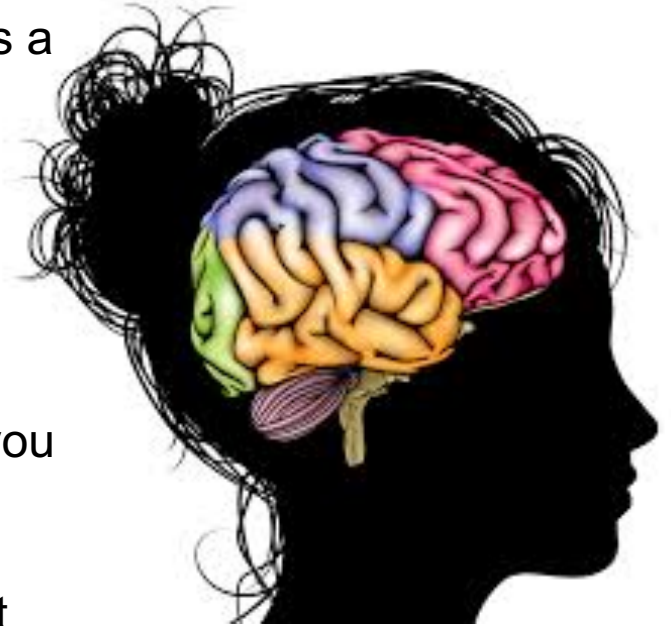
“**doctrine**”. The *doctrine* is the written form of a theory or message.

The next lower format below the “*doctrine*” is the “**paradigm**”. A *paradigm* is a theory or model of how something works.

**Translogic** is not quite as evolved as a paradigm or a doctrine. In fact it is called translogic because it is transitory (temporary) logic.

Regardless of whether the modality relies on a *doctrine*, *paradigm*, or *translogic*, ingredient #2 is essential for satisfying the critical area of the mind’s need for a logical reason. In order for the message to be accepted you must satisfy the need for logic and reason in order for the message to be accepted.

The *doctrine/paradigm/translogic* used by the presenter must be made to fit the existing belief systems of the subject and not vice versa.



## INGREDIENT #3: OVERLOAD/INTERNAL EXPERIENCE

Ingredient #3 is the most important ingredient.

The purpose of element #3 is to create an overload of message units so as to gain access to the reactive part of the mind (sub-conscious overload is to create an internal emotional and a physical experience within the subject.

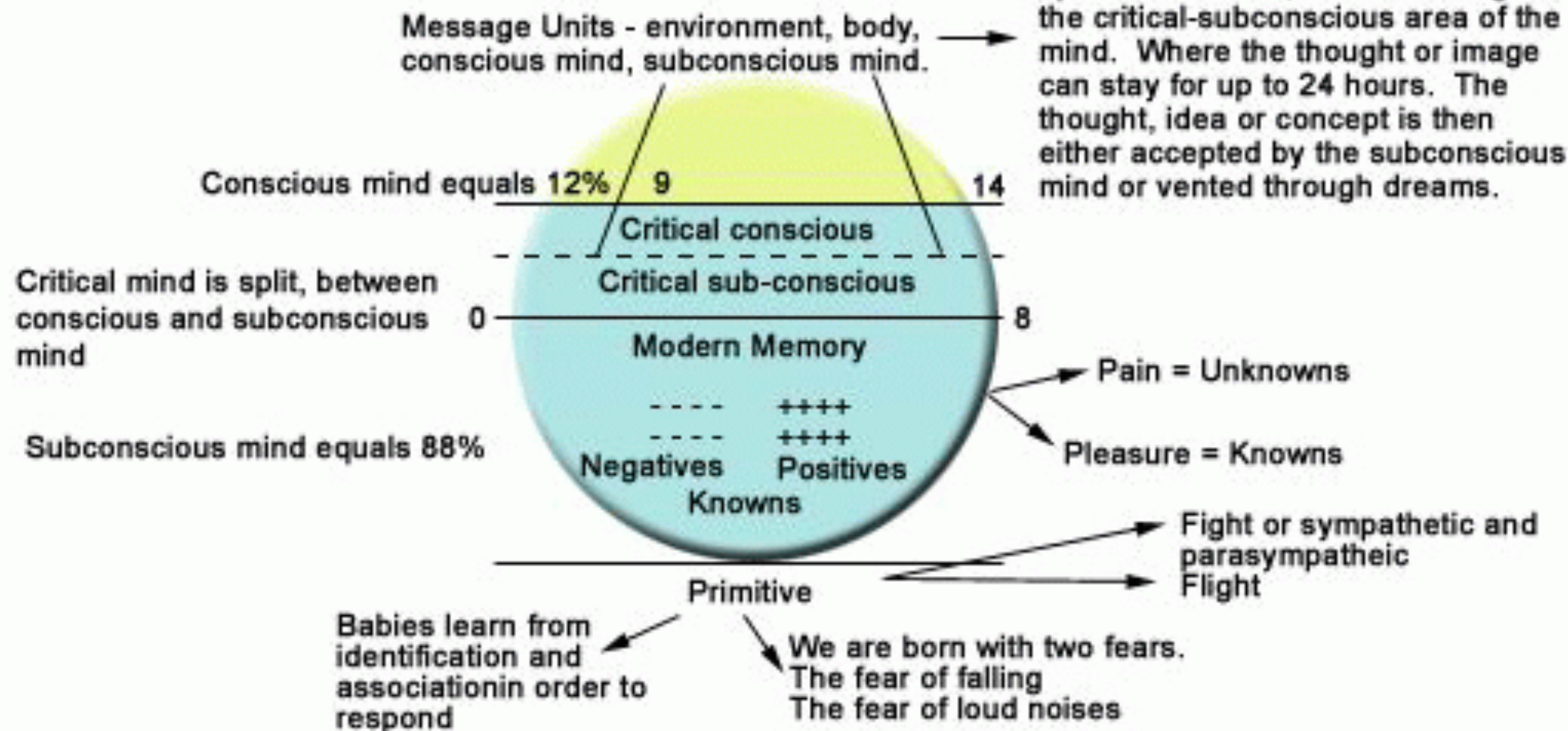
The most important thing that could be said about this element is that the subject must **FEEL SOMETHING!**

Once the subject “**feels it**” then they experience it as “real” and must believe it.

How do we get the subject to feel it? We get the subject to “feel it” by creating an overload of message units, triggering an internal experience and attributing that internal experience to the message being presented via the paradigm.



# THEORY OF MIND



# 3 Step Induction



**INGREDIENT #1: AUTHORITY/ONE-UPS-MANSHIP**



**INGREDIENT #2: DOCTRINE/PARADIGM/TRANSLOGIC**



**INGREDIENT #3: OVERLOAD/INTERNAL EXPERIENCE**



# 3 Step Induction



## **INGREDIENT #1: AUTHORITY/ONE-UPS-MANSHIP**

- I'm an experienced hypnotherapist and we're going to succeed together.



## **INGREDIENT #2: DOCTRINE/PARADIGM/TRANSLOGIC**

- Here's what you're going to feel and what we're going to do together.



## **INGREDIENT #3: OVERLOAD/INTERNAL EXPERIENCE**

- Notice those sensations that I told you about, you are going into a hypnotic state.

**Deepening Techniques (use as many as you can for greater depth)**

- Challenges: (the hand is stuck to the face (or) the eyes are stuck together)
  - \* Progressive Relaxation: (head to feet when sitting up / feet to head when in recliner)
- \* Staircase: (Counting down from 20 to 0 with two secure handrails)
  - \* Reactional Hypnosis: (eyes open – deep sleep – eyes open – deep sleep)



**Myth 2: You can get stuck  
in a hypnotic trance.**

**FALSE!**

### **Count Out of Hypnosis**

*“It is now time to come back up out of the state of hypnosis feeling very calm and relaxed.*

*I will reverse the count from (0 to 5) and with each count you begin to feel more alert and awake with a positive sense of well being.”*

**Zero** – *Let’s shut that door to the subconscious mind to block all negatives*

**1** – *slowly and calmly coming up out of the state of hypnosis now* **2** – *physically aware and mentally alert*

**3** - *coming up even higher now*

**4** – *eyes beginning to open and*

**5** - **EYES OPEN and WIDE AWAKE 1-2-3-4-5 EYES OPEN and WIDE AWAKE**



**Milton H. Erickson, MD (1901 – 1980) was a pioneer in the field of hypnotherapy. He is widely recognized as the father of modern hypnosis and brief strategic therapy, and did more to legitimize the field of hypnosis in the modern era than any other practitioner. He was both a Psychiatrist and a Psychologist. He was the founding President of the American Foundation of Hypnosis. Erickson was also a pioneer in the field of hypnosis for the deaf by using nonverbal methods of communication. Erickson had polio when he was seventeen and was told that he would be disabled for the rest of his life. However, during the course of his illness he noticed how the small babies in his family learned to move their hands and legs, and he modeled these behaviors in an attempt to cure his disabled body. He spent the next year learning how to tell the position of his arms and legs and was able to walk again, even to the point of being able to control his limp. Although unaware of it at the time, he was utilizing hypnotic principles to cure himself. Due to his intense observations, he was made aware of acute sensory perception at the level of non-verbal communication, and this helped him later in inventing non-conventional “Ericksonian Hypnosis.”**





Dr. John Kappas was the eldest son in a Greek immigrant community based in Chicago. Such communities operate very much as a “closed system”, requiring heads of families (and eldest sons particularly) to play certain roles of leadership, both in terms of siblings and other community members. Those who were already successful within the community were expected to help the people who had newly immigrated in areas of work and housing and finding marriage partners. Should the relationship founder, those involved in putting the couple together would assist in resolving problems.

John Kappas followed in this way and as the eldest son of a successful family people looked to him for advice. Unlike conventional therapy, he would provide the people with insight and solutions regarding their behavioral problems, based on the way his family had resolved such matters all along. Having developed an interest in hypnosis as a child, he used this tool to assist in changing people’s behavior. Further experience as a stage hypnotist gave him insight about preparing a subject to experience maximum hypnotic depth and also believe that hypnosis would work for them.

Florence Henderson  
married hypnotherapist  
John Kappas in 1987 after  
seeking treatment for  
depression, and inspired  
by him, became a  
licensed hypnotherapist  
herself.





Kappas combined information from stage hypnotism, psychologists and doctors to form the basis of his hypnotic model. He did this because he wanted to emphasize a therapeutic setting rather than an entertainment setting, yet he needed aspects of his work as a stage hypnotist for the therapy to be effective. In this setting, the waiting room and the paperwork became the same expectation-producing mechanisms as the smoke and mirrors of stage hypnotism.

Stage hypnosis works on the basis of the hypnotist having the “one-ups- manship” and power, never allowing the subject to tell the hypnotist/therapist what to do. Contrary to contemporary “Humanistic” methods of that time (1960’s), Kappas wanted to capitalize on the subject’s initial anxiety about therapy and hypnotic procedure instead of attempting to immediately reduce their fears, thereby maximizing the potential for their hypnotic suggestibility in terms of the “flight/fight “response. This is the key to the Kappasinian model.

In the Kappasinian model the first session is the most important because it provides the hypnotherapists with the opportunity to lay the hypnotic groundwork for therapy. The first session is a unique opportunity because everything is an unknown for the client. The office, the interview, and the expectations of hypnosis and therapy are all unknowns in the first session.

This environment bombards the client with message units that will not be present in subsequent sessions.

It is the goal of the hypnotherapist to capitalize on all of these unknowns and use them to maximize the presence of message units through the prescribed procedures of the Kappasinian model. This creates the largest mental overload possible.

The purpose for creating this overload condition in the client is to then be able to trigger an *escape* from this overload condition (i.e., hypnosis = an escape from an overload of message units). This escape creates an association to the hypnotic state and the post-hypnotic suggestion for re- hypnosis in the client’s mind. The larger the message unit overload we are able to create in the subject the more dramatic (i.e., hypnotic depth) the escape mechanism will be. It is through this process that the hypnotherapist establishes both depth in hypnosis and the client’s potential for therapeutic resolution.

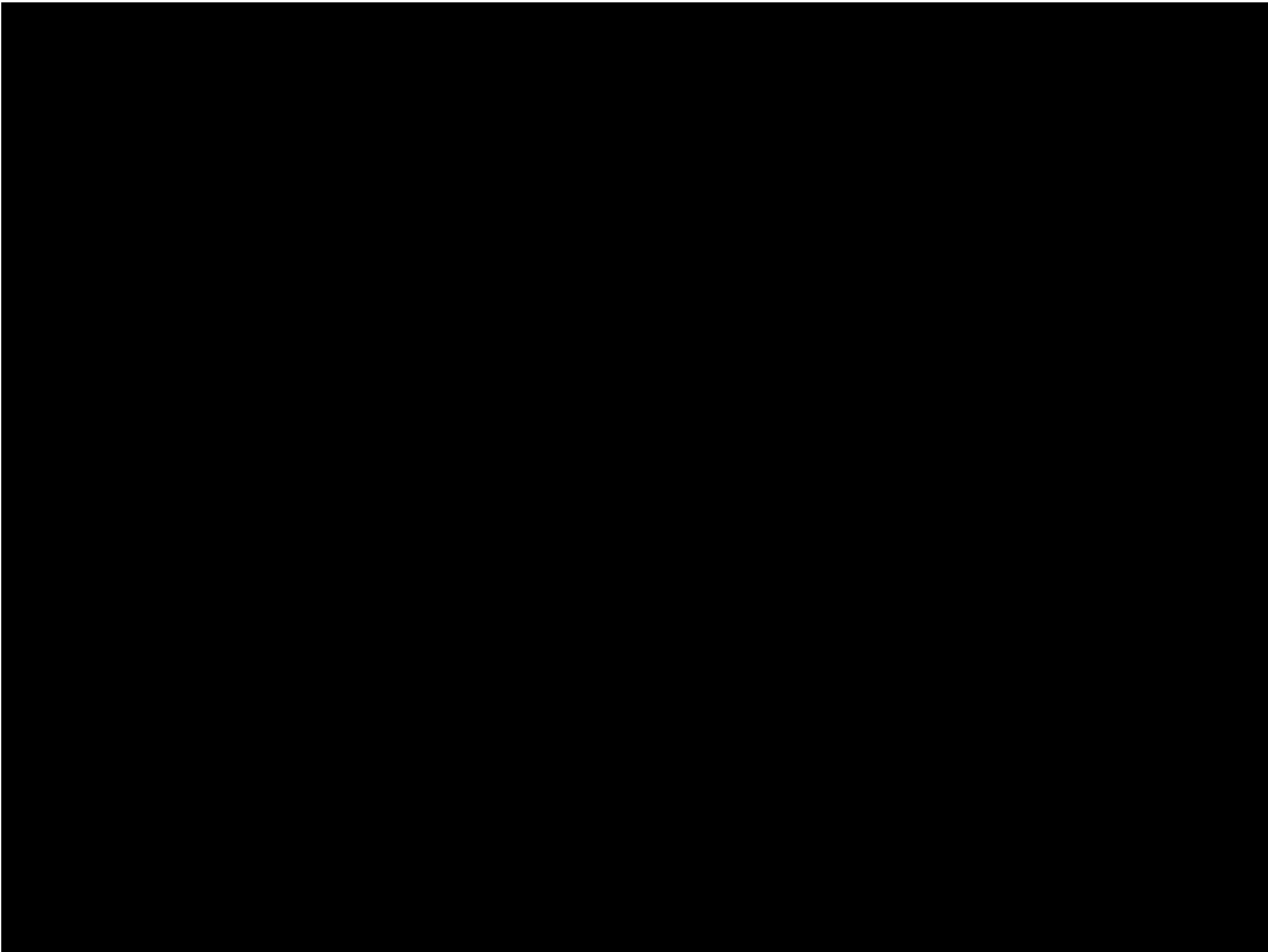
In the Kappasinian model “depth” = relative change. That is, the bigger the difference between the client’s peak overload and the escape from that overload, the more the client will experience that difference as depth and associate that depth to the hypnotic state and the post-hypnotic suggestion for re-hypnosis.

Another key factor in the Kappasinian model is the arm raising induction. When the hypnotist is successful in causing the client’s arm to lift and rise and become stuck to their head (i.e... “The challenge”) then it strongly

Myth 3: Hypnosis is  
about manipulation.

FALSE!



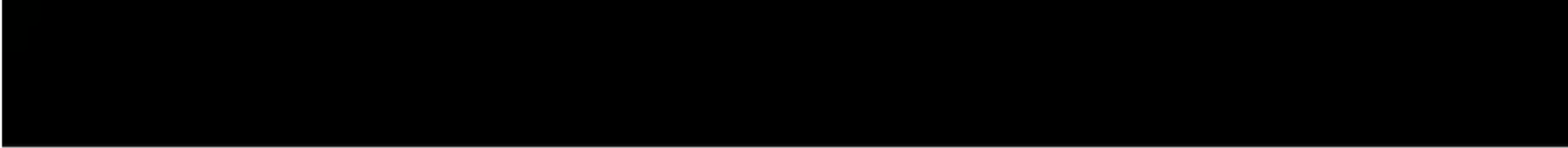




Hypnosis is about  
creating your own  
reality

Your mind is  
a powerful thing.  
When you fill it with  
positive thoughts,  
your life will start  
to change.





# Course Schedule

Clinical Hypnotherapy in Action: 3 Hour CE

General Schedule: 3 CE

**Part 2:** Clinical Hypnosis Process for  
depression, anxiety, trauma and more





# 3 Step Induction



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## **INGREDIENT #3: OVERLOAD/INTERNAL EXPERIENCE**

- Notice those sensations that I told you about, you are going into a hypnotic state.

***Sit back in your chair. Uncross your legs. Close your eyes. Now begin breathing very deeply, taking five deep breaths, and with every breath you exhale, you will become more deeply relaxed.***

***After the fifth breath, concentrate on the weight of your shoes. Your shoes, being foreign to your normal body weight, will begin to feel heavy, and this heavy relaxation, from your toes to your heels to your ankles, will become very prominent. You are now feeling this heavy relaxation moving upward into the calves of your legs...feeling the weight of your legs pushing down, heavier, and heavier...and feeling your legs relaxing deeply...deeply relaxing...and this heavy relaxation moves into the knees, as you concentrate only on my voice.***

- ***Pay no attention to any sound outside except for the sound of my voice, for these sounds are everyday sounds of life and cannot distract or disturb you, but will tend to relax you and allow you to go even deeper into this deep, heavy relaxation.***
- ***Now feel the relaxation moving upward into your thighs and hips and through the mid-section of your body...feel the stomach muscles relaxing...deeply relaxing...and the entire chest area becomes saturated with the relaxation. Breathing becomes very deep, gentle, and rhythmic, and the drowsy, sleepy, daydreaming feeling of relaxation takes over... LETTING GO!...drifting down, deeper and deeper, and your arms, hand and fingers are relaxing...feeling a numb, pleasant, tingling feeling through your fingers, as this relaxation grows deeper and deeper.***
- ***Neck muscles are relaxing, and all the little muscles in the scalp are letting go, feeling as if the blood is circulating very close to the skin. This relaxation moves down over your forehead and down over your eyelids and your jaw muscles relax deeply...deeply relaxing...and growing heavier.***
- ***And as I count from five down to zero, each count will represent deep relaxation, and you will feel the body relaxing even more and letting go...deeper and deeper...and when I reach zero, you will go deep asleep. Now, FIVE...letting go...FOUR...THREE...TWO...ONE...ZERO...[snap your fingers] DEEP ASLEEP!***



### **Count Out of Hypnosis**

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## Stages of Hypnosis For First Session

1 – Establish Rapport

2 – Get history

3 – Set Goals – capture their words

4- Give hope and confidence

5- Willingness

6- Induction

## Stages of Hypnosis For First Session

7 – Establish hypnotized

8 – Deepening

9 – Relaxation

10- Hypnotic Suggestion(s)

11- Repeat/Deepen



## Stages of Hypnosis For First Session

12 – Awaken

13 – Encourage

14 – Sometimes Re-hypnotize

15 – Follow up

## Stages of Hypnosis For Next Sessions

1 – Check in regarding progress

2 – Answer questions

3 - Troubleshoot

4 – Repeat process, induction, relaxation, deepening  
Suggestions, reminder, bring out, encourage.

## My Favorite 4 Inductions

1 – Hand rise, to face, then move to chair

2 – Falling Hands

3 – Relaxing Place

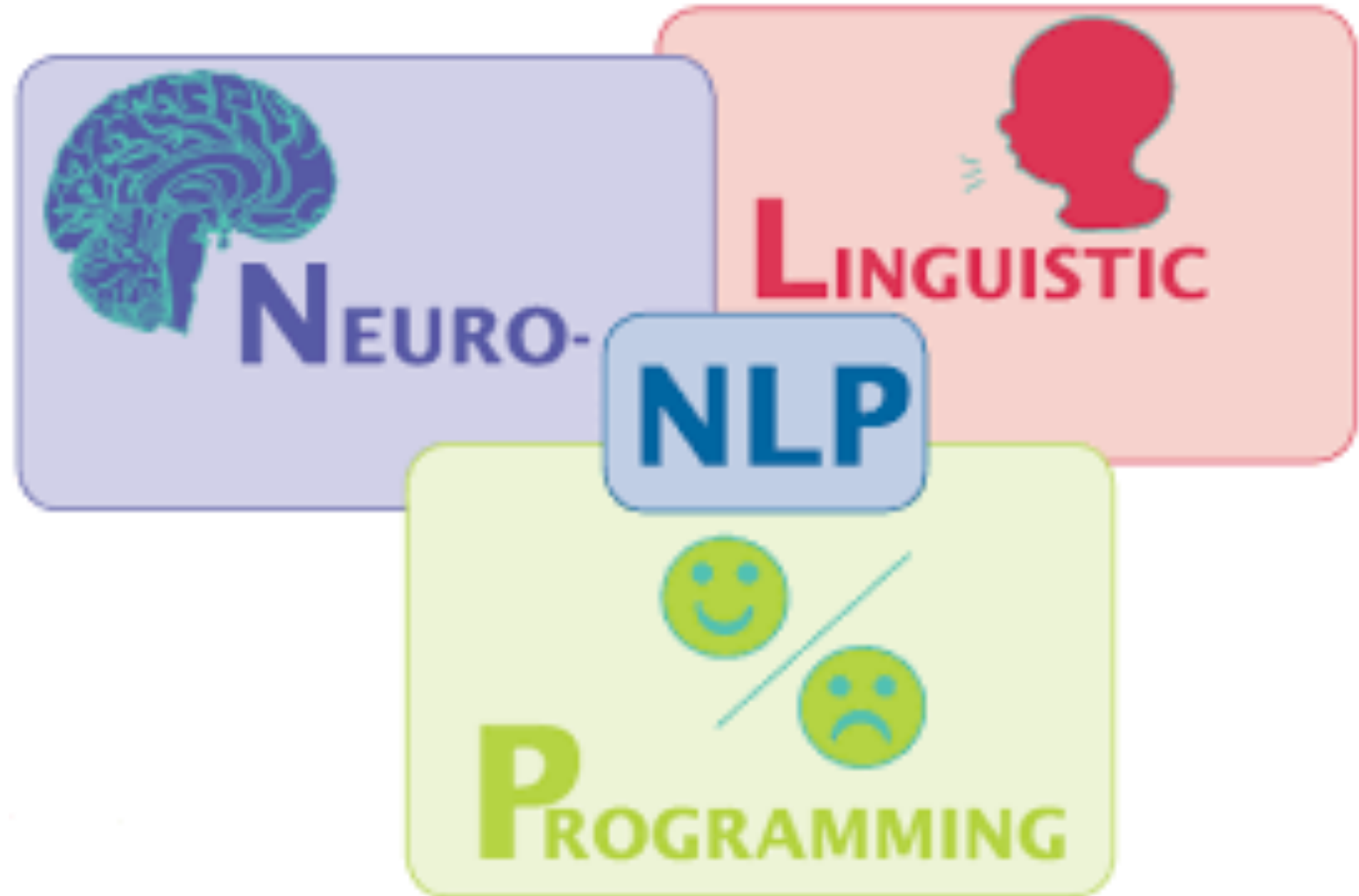
4- Anything creative



**Let's  
Practice!**



# NLP At Work



## **Neuro**

The nervous system (the mind), through which our experience is processed via five senses:

- Visual
- Auditory
- Kinesthetic (feel)
- Olfactory (smell)
- Gustatory (taste)

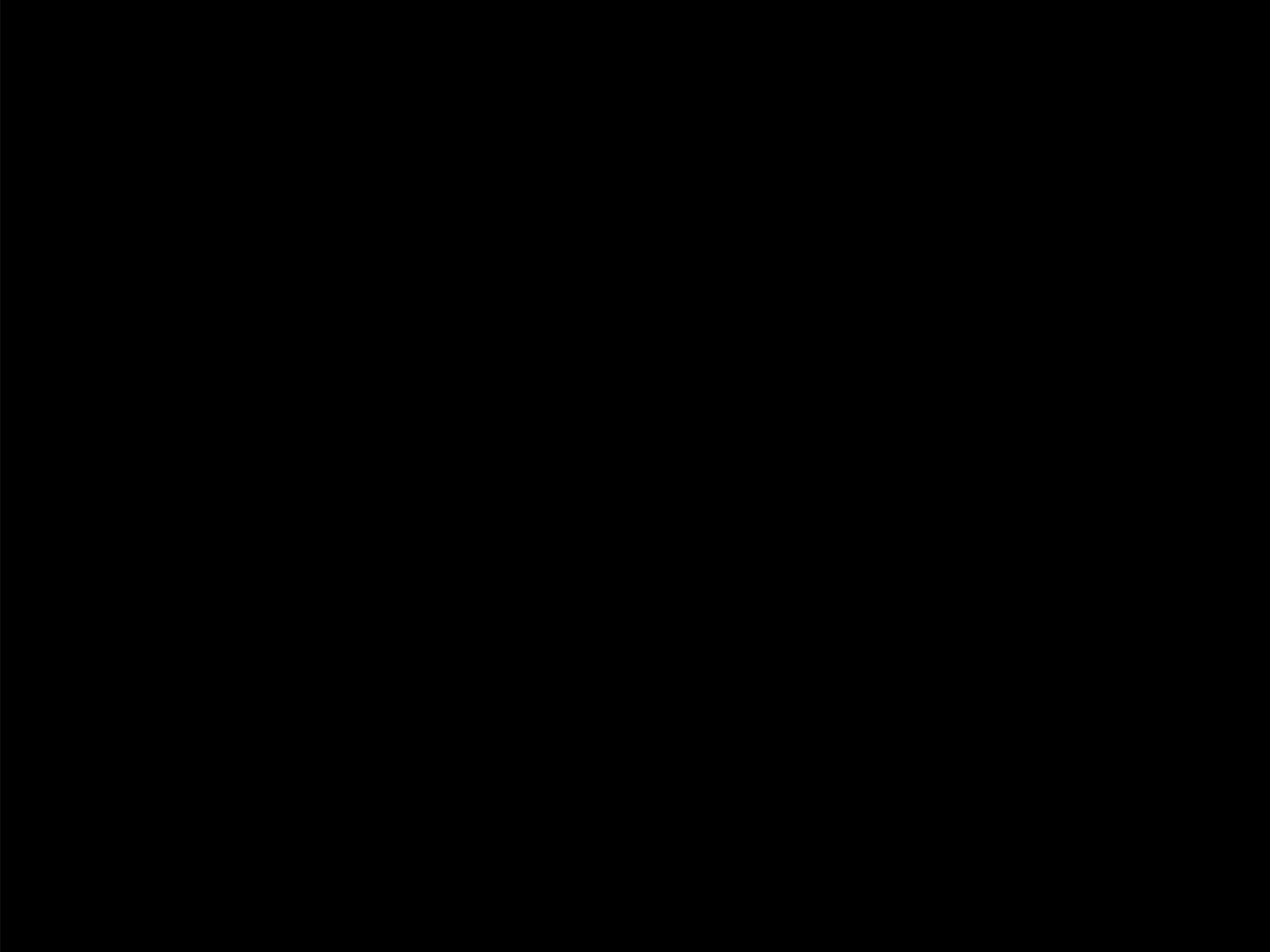
## **Linguistic**

Language and other nonverbal communication systems through which our neural representations are coded, ordered and given meaning. Includes:

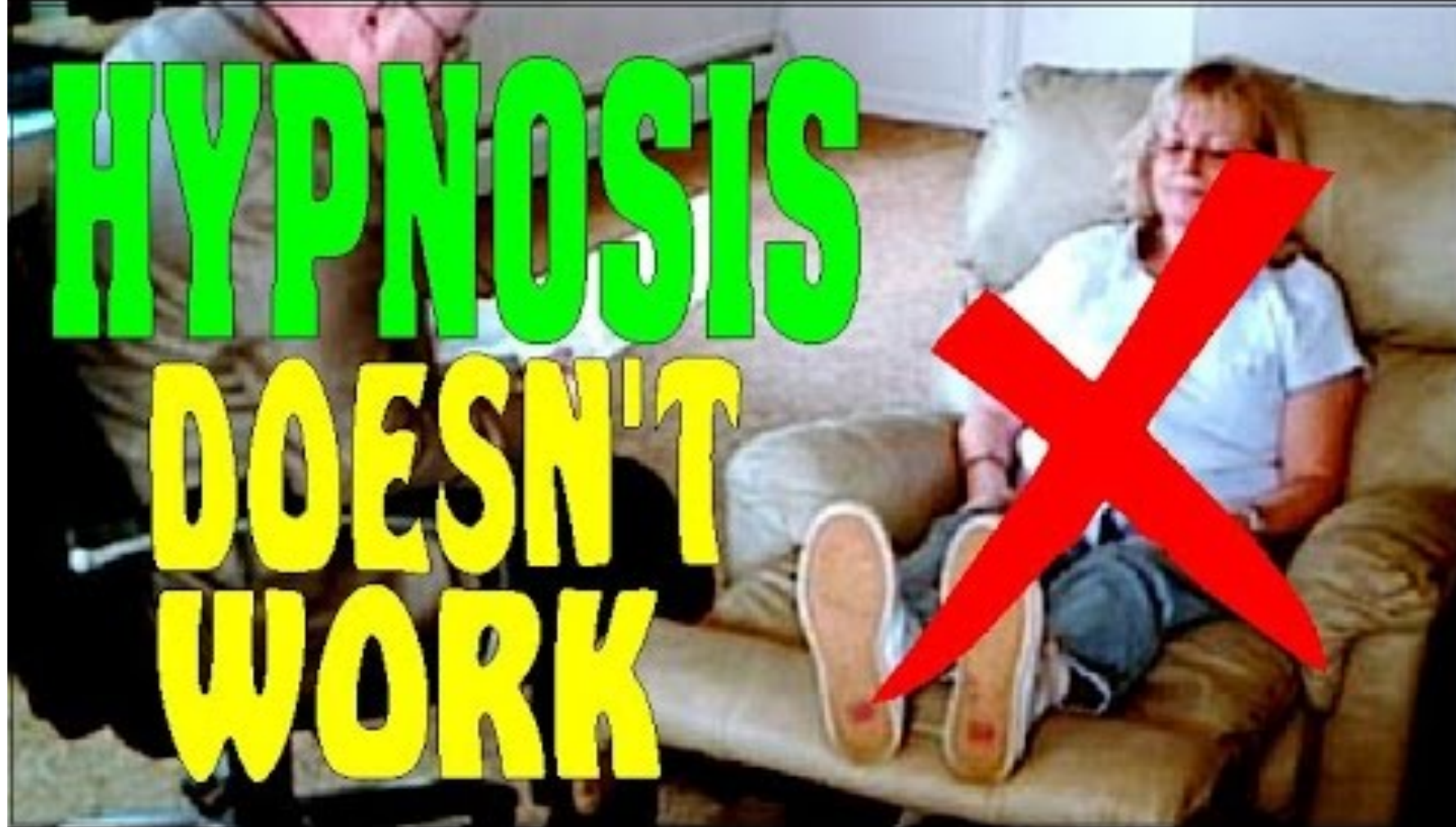
- Pictures
- Sounds
- Feelings
- Tastes
- Smells
- Words (Self Talk)

## **Programming**

The ability to discover and utilize the programs that we run (our communication to ourselves and others) in our neurological systems to achieve our specific and desired outcomes. In other words, NLP is how to use the language of the mind to consistently achieve our specific and desired outcomes.



Myth 4: Hypnosis Doesn't Work - FALSE!







Myth 5: Hypnotherapists Don't Allow Recording.  
FALSE!



Myth 6: Hypnosis can control you!



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Myth 7: Hypnosis is only for the stage. FALSE!



# **Breakdown of a Hypnosis Session for Exercise Motivation**

by Luke Chao of The Morpheus Clinic for Hypnosis

Myth 8: Hypnosis Requires Extensive Training & Certification.

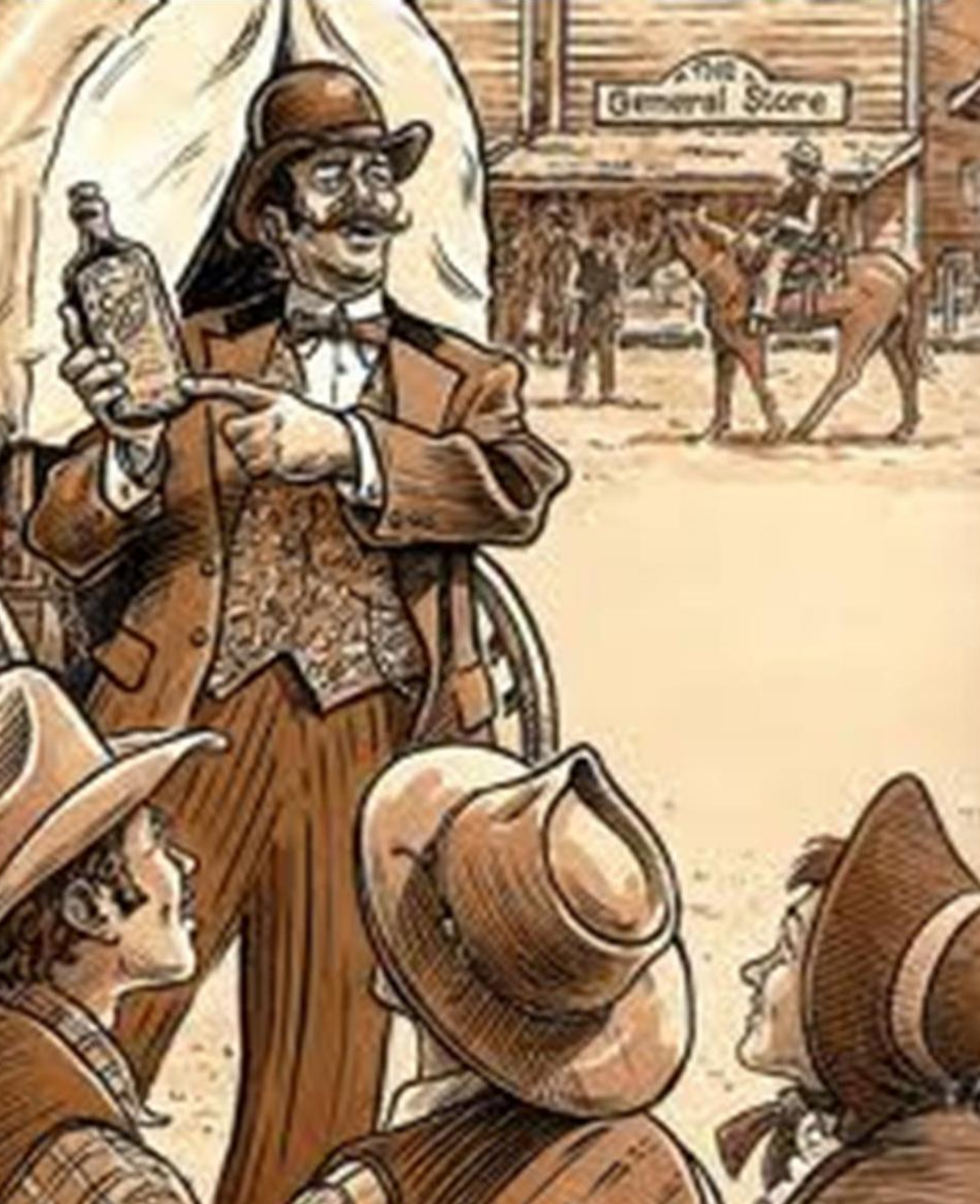
FALSE!



Myth 9: Hypnosis can make you forget  
EVERYTHING!







Myth 10: Hypnosis  
is a miracle cure!  
FALSE!





# Uses

- General Relaxation
- /confidence



# Uses

- Depression



# Uses

- Anxiety







## Uses

- **Relationship Counseling**

# Uses

- Vocational Counseling





# Uses

- Drug & Alcohol





**Uses**

- **Smoking Cessation**

# Uses

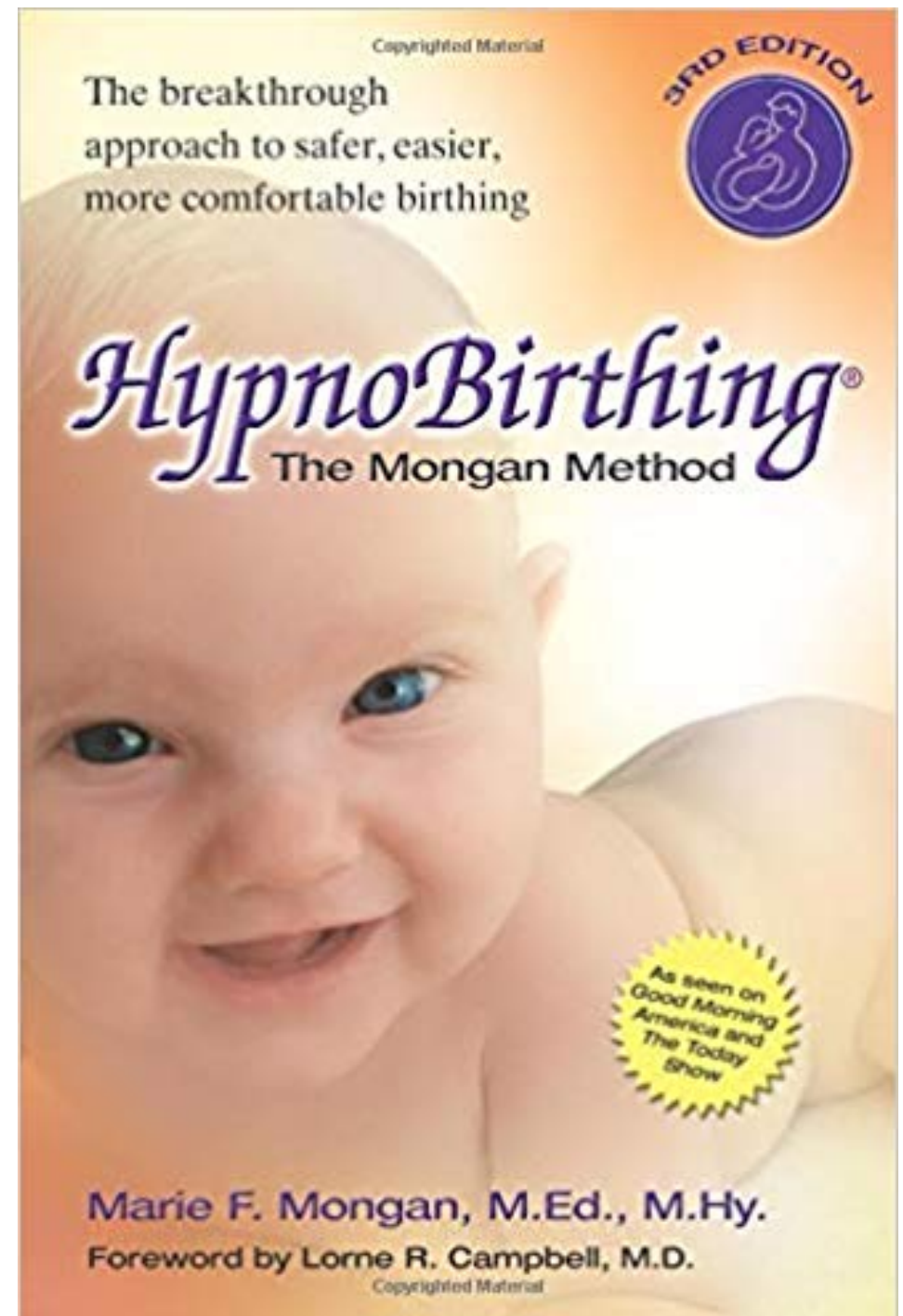
- **Weight Loss**

Always with  
medical supervision



# Uses

- Hypnobirthing





# Uses

- Dentistry





# Uses

- Travel



# Uses

- Fears and phobias



# Uses

- Trauma



# Q & A – Wrap Up

Questions/Comments and Wrap up session





## **Resources for further study:**

**Introductory Training Video. Hypnosis Motivation Institute (HMI) of Tarzana, California.**  
Hypnosis.edu

### **Handbook of Clinical Hypnosis**

by Lynn PhD, Dr. Steven Jay, Rhue PhD, Dr. Judith W., et al. | Jan 15, 2010

### **[The Handbook of Contemporary Clinical Hypnosis: Theory and Practice](#)**

by Les Brann, Jacky Owens, et al. | Jun 22, 2015







CORE WELLNESS

Thanks for joining  
Clinical Hypnotherapy  
in Action: 3 CE

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