PREFERENCES FOR DESCRIPTORS OF HYPNOSIS: The International Point of View

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Abstract: Despite the apparently definitive findings of the Christensen (2005) survey of published members of the Society for Clinical and Experimental Hypnosis (SCEH), disagreement about which term best describes the capacity to experience hypnosis and theoretical preference has continued. SCEH, although international, represents primarily North Americans. Preferences of international clinicians and researchers were inadequately represented, so the authors surveyed preferences from attendees of the International Congress of the International Society of Hypnosis in 2012 in Bremen, Germany. The term trance, translated as trance capacity or trance ability for this study, was overwhelmingly preferred over the other options. Hypnosis was recognized as an identifiable state by 88.46% of respondents, whereas only 11.54% viewed it as a sociocognitive phenomenon (role-play, expectancy, etc.).

Christensen (2005) examined articles in the foremost journal in the field of hypnosis, the International Journal of Clinical and Experimental Hypnosis (IJCEH) from January 1999 to January 2004 and found that the capacity to experience hypnosis (responsiveness to hypnosis) had been variously described as hypnotizability, suggestibility, hypnotic suggestibility, and
trance. Remarkably, the descriptor hypnotic susceptibility still appeared in a few articles. More than 3 decades ago, Hilgard (1979) pointed out that the term susceptibility is inaccurate, because it erroneously implies that responding to hypnosis involves some sort of weakness on the part of the participant. Qualitative comments from respondents to the present survey revealed that the term suggestibility is perhaps even more egregious than susceptibility. Several respondents equated suggestibility/hypnotic suggestibility to gullibility. One respondent asked “Have you ever seen a patient wanting to be described or thought of as suggestible?”

An absence of agreement among professionals continued beyond the Christensen survey regarding which term to use when describing the capacity to experience hypnosis or the phenomenon of hypnosis. Our painstaking review of articles in the hypnosis literature with attention to the context of theories about hypnosis revealed that authors’ personal preferences for terms become grafted on his or her representations of the work of others. The result of such grafting may be that original work by others becomes misrepresented to inaccurately convey the intent of the original author. Attempts to reconceptualize the work of others by grafting terminology can become intense. In the process of my (Gallawa) familiarization for the position of Assistant Clinical Editor of the IJCEH, I learned that recently authors of an article to be published in the journal became so insistent in grafting the term hypnotic suggestibility to the work of more than a dozen authors represented in nine different articles that when the grafting was detected at the copyedit stage they withdrew their article insisting that hypnotic suggestibility must be used, even though none of these other authors had used the term in the articles that they cited.

A similar inaccuracy was revealed by Christensen (2005) in her discussion of an article by Milling and Costantino (2000). The authors provided empirical support for the use of hypnosis with children and reviewed literature including the American Psychological Association (APA) award-winning paper of Smith, Barabasz, and Barabasz (1996), who compared hypnosis versus distraction for the reduction of pain and anxiety in children who were repeatedly exposed to painful medical procedures. Smith et al. used the Stanford Hypnotic Clinical Scale for Children (Morgan & Hilgard, 1979) to test for “hypnotic ability” and exclusively used the term hypnotizability to refer to hypnotic responsiveness. The term suggestibility was never used. However, Milling and Costantino replaced hypnotizability with the term suggestibility to conform to their sociopsychological conceptualization of hypnosis. By changing the term from hypnotizability to suggestibility, Milling and Costantino altered the original intentions of Smith in an attempt to recast the results to their personal theoretical orientation.
The theoretical bias was then further perpetuated by the failure to mention that Smith found support for Hilgard’s (1992) neo-dissociation (state) theory of hypnosis; arguably that finding might be considered the most important contribution of the study to the field of hypnosis. Finally, Smith found no support for the sociocognitive stance that pain relief through hypnosis is due to distraction. That finding was also omitted in the Milling and Costantino review. This selective use of information, beginning with the grafting of an alternative term for hypnotic responsiveness, raised the question as to whether or not alterations to original work occur because of a perception that the general state conceptualization of hypnosis was still unresolved (Sarbin, 2005).

In search of an answer, sociocognitive proponent Irving Kirsch (1993) surveyed members and fellows of Division 30 of the APA (The Society for Psychological Hypnosis). He found that most agreed that hypnotic inductions produce an altered state of consciousness. Consistent with that finding, Christensen’s (2005) survey overwhelmingly found a significant preference for the conceptualization of hypnosis as an identifiable state. Identifiable state was chosen more than four times more frequently than sociocognitive phenomena. Similarly, the preference for the descriptor for the capacity to experience hypnosis revealed hypnotizability to be preferred by more than four times over hypnotic suggestibility and greater than 10 times more than suggestibility. The term trance was preferred by only 13% of the respondents. Christensen concluded that the essentially negligible support for the descriptors suggestibility and hypnotic suggestibility indicated that such terms should be used only for those studies focused on suggestibility rather than hypnotic responsiveness per se\(^1\) separate from hypnotic phenomena. As Killeen and Nash (2003) explained, “Hypnotic responsiveness does not correlate with most types of suggestibility” (p. 204). Later, Christensen, citing Barabasz and Watkins (2005), noted that the late, widely published Campbell Perry (2004) described response to placebo as probably an index of suggestibility.

Despite the contribution of the Christensen (2005) findings to the field, which revealed consensus among published members and fellows of the Society for Clinical and Experimental Hypnosis (SCEH), an international society, the question remained as to whether or not these findings could be generalized worldwide without a sufficient sample of international clinicians and researchers in hypnosis. The purpose of this study was to fill that gap in information by focusing on attendees of the International Congress of Hypnosis held in Bremen, Germany, in 2012.

\(^1\)Suggestibility and suggestion without hypnosis studies are regularly reviewed and accepted by the JCEH for publication.—Ed.
METHOD

Participants

Attendees of the International Congress of Hypnosis 2012 held in Bremen, Germany, and members of the Swiss Hypnosis Society were asked to volunteer to complete a 1-minute survey via e-mail. The Swiss Hypnosis Society included members from Gesellschaft f. Hypnose Schweiz (Swiss Hypnosis Society; GHypS) and the Société Medicale Suise d’Hypnose (Society of Medical Hypnosis; SMSG). Two thousand of the nearly 3,000 Bremen Congress attendees were e-mailed as well as 200 from the Swiss societies. The sample represented hypnosis clinicians and researchers from more than 44 countries worldwide.

Instrument

To facilitate a direct comparison with the SCEH study of Christensen (2005), we used essentially the same questions. Completion of the simple survey took about 1 minute. Because we were interested in the opinions of practicing clinicians in the field who may or may not have journal publications and/or national/international presentation records, Christensen’s first question asking for such verification was not used in our study. Our first question asked for the participant’s preference for a descriptor of the capacity to experience hypnosis from the following five choices: (a) hypnotizability (the ability to experience hypnosis, talent); (b) hypnotic susceptibility (legacy term from the 1950s Stanford Scales); (c) trance, translated from English into German as trance capacity or “trance-ability”; (d) hypnotic suggestibility; and (e) suggestibility. The second question asked the participant to choose their “primary” theoretical conceptualization of hypnosis that “most closely fits” (a) an identifiable state (with physiological correlates brought upon by a social interaction) or (b) a sociocognitive phenomenon (a nonstate, no trance condition entirely wrought from social agreement, social interaction, expectancy, etc.). Christensen (2005) explained that the use of the words primary and most closely fits were used for the theory preference question so as not to convey a merely dichotomous or absolute forced choice. She noted that even the most prominent proponents of an identifiable state basis include not only the necessity of a biological capacity but also psychosocial responsiveness (H. Spiegel & Spiegel, 2004, p. 20). As in the Christensen study, participants were also invited to provide any additional comments.

The solicitation, invitation, and e-mails were presented in German and French. It was also available in English upon request.
Procedure

The survey was electronically mailed to participants in early 2014 using the 2012 e-mail addresses available through the International Congress of Hypnosis in Bremen and the Swiss societies. The survey was sent as a Microsoft Word document. Participants were asked to mark their answers to each question on the document and to save their changes as a revised Word document or PDF. Respondents then attached their surveys to an e-mail and sent their responses to a secure e-mail address that was created to exclusively receive responses to this study.

Results

Although approximately 2,200 surveys were originally e-mailed, we estimate the survey was accessible to approximately 1,100 professionals due to the age of the e-mail database used and the fact that only those who could access Microsoft Word were able to access the survey. We also recognized that potential participants’ e-mail “junk mail” filters likely reduced the surveys available for access. Responses were received from 298 subjects, 12 were unusable because more than one answer choice per question was selected or unique nonsurveyed answer choices were added. Two were unusable because they could not be opened, and another respondent failed to attach the survey to their e-mail response. The number of usable surveys was 286, which we estimated represented a return rate of about 26%, exceeding the typical 20% return rate found in general survey data collection.

To determine whether or not a significant preference for the descriptor of the capacity to experience hypnosis existed, a chi-square analysis was performed on the frequency of responses received for each of the five descriptors. Dependent variables included: (a) hypnotizability, (b) hypnotic susceptibility, (c) trance, (d) hypnotic suggestibility, and (e) suggestibility. The result, $X^2 = 182.32$, $df = 4$, shows a preference for trance capacity, which is highly significant ($p \leq .001$). The trance capacity descriptor was chosen by 60.84% of the respondents whereas the next most popular choice, hypnotizability, was chosen by only 15.73%. Given that the trance capacity choice was favored more than four to one over the next most popular choice, no further statistical analyses were performed on Question Number 1. The percentage of responses for each descriptor appears in Figure 1.

To determine whether or not a significant preference for primary theoretical orientation existed, a chi-square analysis was performed on the frequency responses to the two alternatives provided in Question
2. Dependent variables included: (a) an identifiable state (with physiological correlates brought upon by a social interaction) and (b) a sociocognitive phenomenon (a nonstate, no trance condition entirely wrought from social agreement, social interaction, expectancy, etc.). The result, $X^2 = 169.26$, $df = 1$, showed a significant preference for the conceptualization of hypnosis as an identifiable state ($p \leq .0001$), which was endorsed nearly eight times more frequently than sociocognitive phenomenon. The percentage of responses for both theories appears in Figure 2.

**DISCUSSION**

The overwhelming preference for the term trance capacity contrasts sharply with Christensen’s findings, which found hypnotizability to be the preferred term for published/presented members of SCEH drawn primarily from the United States and Canada. International clinicians and researchers apparently view the term trance capacity as better understood—perhaps by patients or research subjects—as a descriptor of the ability to experience hypnosis than the more abstract term hypnotizability. The issue of translation may also have influenced this finding.

Consistent with the Christensen study, conducted 10 years earlier, the descriptors suggestibility and hypnotic suggestibility had little support. It may be that such terms should be logically limited only to those studies devoted to suggestibility, that is, suggestion without
hypnosis and placebo separate from hypnotic phenomena per se. Indeed, as Christensen highlighted, several researchers have demonstrated the inadequacy of the suggestibility terminology from Barabasz (2000; Barabasz et al., 1999) to Killeen and Nash (2003) to Perry (2004). Christensen also pointed out that the matter of suggestibility accounting for hypnotic responsiveness had been settled as early as 1969 by McGlashan, Evans, and Orne in their SCEH and APA award-winning study that contrasted hypnoanalgesia in high and low hypnotizables in both hypnotic and placebo conditions. Only the high hypnotizables in hypnosis were able to obtain significant pain relief. What is more, the highs showed a small pain-response increase in the placebo condition. This led Perry to note, “This study demonstrates unequivocally that hypnosis is something other than suggestibility. Otherwise the high hypnotizables would have obtained pain relief from the suggestion placebo condition comparable to what they experienced in hypnosis” (2004, p. 224; see also D. Spiegel & Kraemer, 2001). Our survey findings support these statements as recognized internationally by clinicians and researchers. Consistent with Christensen’s findings, our survey overwhelmingly supported the theoretical conceptualization of hypnosis as primarily an identifiable state. The notion that “the debate goes on” (Kirsch, 2003) or that the issue is “unresolved” (Sarbin, 2005) is apparently now shared by few.

The present survey was the first to systematically obtain important views from the international community rather than being driven by researchers primarily from the United States. The findings appear clear. We recommend that hypnosis journal editors join the editors of the
“hard science” journals who insist on consistent terminology and, therefore, consider these preferences in the development of consistent journal policies for the descriptors of hypnosis.

REFERENCES


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Die Vorlieben von Beschreibern von Hypnose: Der internationale Blickwinkel

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Abstrakt: Trotz der offensichtlich endgültigen Ergebnisse des Christensen (2005) survey über publizierte Mitglieder der Society of Clinical and
Experimental Hypnosis (SCEH), geht die Diskussion darüber, welcher Ausdruck die Fähigkeit, Hypnose zu erleben am besten beschreiben würde, und die theoretischen Vorlieben, weiter. SCEH repräsentiert primär Nordamerika, obwohl sie international ist. Die Vorlieben internationaler Kliniker und Forscher wurden inadäquat repräsentiert, sodaß die Autoren die Präferenzen der Teilnehmer des Internationalen Kongresses der International Society of Hypnosis 2012 in Bremen, Deutschland, untersuchten. Der Ausdruck ‘Trance’, der für diese Studie mit Trancefähigkeit ersetzt wurde, wurde mit überwältigender Mehrheit anderen Möglichkeiten vorgezogen. Von 88,46 % der Befragten wurde Hypnose als ein zu identifizierender Zustand beschrieben, während 11,54 % sie als sozio-kognitives Phänomen sahen (Rollenspiel, Erwartung, etc.).

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**Préférences en matière de descripteur(s) de l’hypnose: le point de vue international**

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Résumé: Malgré les conclusions apparemment définitives de l’enquête Christensen effectuée en 2005 auprès des membres auteurs publiés de la Society for Clinical and Experimental Hypnosis (SCEH), le désaccord au sujet du terme décrivant le mieux la capacité de faire l’expérience de l’hypnose, et la préférence à accorder au concept théorique, s’est poursuivi. Bien qu’internationale, la SCEH, représente principalement des Nord-Américains. Les préférences des cliniciens et chercheurs internationaux y ayant été insuffisamment représentées, les auteurs ont sondé celles des délégués au congrès international de l’International Society of Hypnosis, tenu en 2012 à Brême (Allemagne). Le mot « transe » (trance), traduit par « capacité de transe » pour les besoins de cette étude, a été préféré de loin à tous les autres. L’hypnose est reconnue comme un état identifiable par 88,46 % des répondants, alors queseuls 11,54 % la considèrent comme un phénomène sociocognitif (jeu de rôle, expectative, etc.).

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**Preferencias por los descriptores de hipnosis: El punto de vista internacional**

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Resumen: A pesar de los resultados aparentemente definitivos de la encuesta a los miembros publicados de la Society for Clinical and Experimental Hypnosis (SCEH, por sus siglas en inglés) de Christensen (2005), el desacuerdo sobre el término que mejor describe la capacidad de experimentar hipnosis y la preferencia teórica ha continuado. SCEH, a pesar de ser internacional, representa principalmente a norteamericanos. Las preferencias de clínicos e investigadores internacionales estuvieron inadecuadamente representadas, por lo que los autores encuestaron a los asistentes del Congreso Internacional de la Sociedad Internacional de Hipnosis en 2012 en Bremen,
Alemania sobre sus preferencias. El término *trance*, traducido como capacidad de trance o habilidad de trance para este estudio, fue abrumadoramente preferido sobre otras opciones. El 88.46% de los participantes reconocieron a la hipnosis como un estado identificable, mientras que solo 11.54% la consideran un fenómeno socio-cognitivo (juego de roles, expectación, etc.).

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