

100 Hour, Tri-Phase Comprehensive Training in Clinical Hypnosis and Strategic Psychotherapy with Dr. Michael D. Yapko

Learning Objectives

Phase One:

1. Participants will be able to identify the suggestions inherent in conducting psychotherapy regardless of which specific model of (verbal) psychotherapy under consideration.
2. Participants will be able to identify and offer multiple examples of specific forms (structures) of suggestion.
3. Participants will be able to identify and offer multiple examples of specific styles (relational positions) of suggestion.
4. Participants will be able to list and describe at least three different models or conceptual frameworks for understanding hypnosis.
5. Participants will be able to list and define types of “automatic” or unconscious responses collectively known as “ideodynamic responses.”
6. Participants will be able to describe at least one recent neuroscientific findings about the brain mechanisms associated with selective attention and hypnotic responsiveness.
7. Participants will be able to name and describe two forms of amplified memory structures in hypnosis commonly used in the course of psychotherapy.
8. Participants will learn and be able to describe key principles about the nature and functioning of memory.
9. Participants will be able to list and describe the inappropriate suggestive methods most likely to lead to confabulations or false memories.
10. Participants will learn methods of neutral questioning in order to avoid the use of inappropriate suggestions that may contaminate a client’s memories.
11. Participants will learn and be able to describe relevant social psychological research about conformity and obedience to authority that can influence hypnotic responsiveness.
12. Participants will be able to list and define the so-called “classical hypnotic phenomena” that can be elicited in hypnosis (such as analgesia, time distortion, etc.).
13. Participants will learn about and be able to apply both the verbal and non-verbal aspects of suggestion formulation and delivery.

14. Participants will learn about and be able to describe the potential applications of hypnosis in a variety of contexts, including psychotherapy, education, and behavioral medicine.
15. Participants will be able to list and describe at least two empirical studies affirming the benefits of employing hypnosis as a complement to other established treatments.
16. Participants will be able to list and refute common misconceptions about hypnosis that may hinder optimal treatment outcomes.
17. Participants will be able to list and discuss the personal, interpersonal and situational variables that affect an individual's level of hypnotic responsiveness.
18. Participants will be able to list and discuss at least two pros and cons of employing formal testing for assessing hypnotic responsiveness.
19. Participants will be able to list and describe specific ways people respond differently to suggestions given in hypnosis to those given outside of hypnosis.
20. Participants will be able to define and discuss the concept of "trance logic" and its implications for hypnotic interventions.

Phase Two:

1. Participants will be able to list and discuss ways a person's expectations influence both hypnotic and treatment responsiveness.
2. Participants will be able to define and discuss the characteristics of interventions that are content-based versus process-based.
3. Participants will be able to organize and define a generic sequence for conducting a goal-oriented hypnosis session.
4. Participants will be able to structure at least two specific types of post-hypnotic suggestions.
5. Participants will be able to list and discuss the relative advantages and disadvantages of direct versus indirect forms of hypnotic intervention.
6. Participants will be able to identify and discuss the role of symbolism in suggestion formulation.
7. Participants will be able to identify and discuss the role of paradox in suggestion formulation.
8. Participants will be able to list and identify specific methods of direct and indirect induction and utilization.
9. Participants will learn and be able to apply at least two different strategies for eliciting classical hypnotic phenomena.

10. Participants will be able to list at least two specific online resources for gaining access to published studies in treating specific clinical populations.
11. Participants will be able to name and discuss two factors affecting client expectancy.
12. Participants will be able to list and discuss specific methods for fostering an unstable attributional style as a catalyst to treatment responsiveness.
13. Participants will be able to identify and describe two different generic structures for producing hypnotic amnesia.
14. Participants will be able to list and discuss at least two factors indicating the appropriateness of hypnotic interventions in both acute and chronic phases of treatment.
15. The participant will be able to identify and apply methods of solution-oriented and motivational interviewing in establishing a treatment plan.
16. The participant will be able to identify and discuss how hypnotic phenomena may feature in the onset and course of client symptoms.
17. The participant will learn and apply the method of “seeding” homework assignments during hypnosis as a means of increasing treatment benefits.
18. The participant will be able to apply hypnotic strategies designed to enhance greater cognitive flexibility and independent problem-solving in the client.
19. The participant will be able to structure and deliver skill-building homework assignments to the client.
20. The participant will be able to list, recognize and discuss key patterns of self-organization that regulate symptom formation and clinical response.

Phase Three:

1. The participant will be able to identify common, repetitive themes of therapy and discuss their implications for treatment planning.
2. The participant will be able to describe the role of a client’s cognitive style in the onset and course of major depressive disorder and how hypnosis might be used to enhance it.
3. The participant will be able to describe the role of selective attention in the onset and course of major depressive disorder and how hypnosis might be used to create an internal shift in the quality and direction of focus.
4. The participant will be able to identify at least two specific overlapping points between hypnosis and cognitive-behavioral therapies in order to integrate hypnosis with CBT in specific goal-oriented ways.

5. The participant will be able to cite at least one recent research study providing evidence for the merits of applying hypnosis in the relief of pain and demonstrate a technique for doing so.
6. The participant will be able to cite at least one recent research study providing evidence for the merits of applying hypnosis in habit control and demonstrate a technique for doing so.
7. The participant will be able to identify at least two specific styles of metaphor and discuss how they may apply in treatment.
8. The participant will be able to discuss and demonstrate at least two ways applying hypnosis with children might differ from applying hypnosis with adults.
9. The participant will be able to identify and demonstrate how hypnosis might be applied in the treatment of anxiety disorders.
10. The participant will be able to identify and demonstrate how hypnosis might be applied in the treatment of the sequelae of trauma.
11. The participant will be able to demonstrate the use of sensory-based interviewing questions to elicit salient information for designing hypnotic pain management strategies.
12. The participant will be able to describe and demonstrate the appropriate use of illogic and confusional methods in hypnotically based psychotherapy.
13. The participant will be able to describe and employ “check-in” feedback strategies with the client during the course of a hypnosis session.
14. The participant will be able to use information from post-session de-briefing to adapt subsequent interventions accordingly.
15. The participant will be able to structure specialized suggestions in order to employ hypnosis in group therapy contexts when deemed appropriate to do so.
16. The participant will be able to demonstrate an ability to incorporate spontaneous client responses and spontaneous environmental events into the flow of the hypnosis session as a means of enhancing the quality of the intervention.
17. The participant will be able to generate at least three ways of wording a specific suggestion as evidence of both cognitive and verbal flexibility in applying hypnosis.
18. The participant will be able to identify and discuss the role of dissociation and attentional subsystems in hypnotic responding.
19. The participant will be able to list and describe ways hypnotic phenomena can be employed in his or her own style of treatment.
20. The participant will be able to design, structure and deliver goal-oriented hypnosis sessions based on client assessment and mutually agreed-upon therapeutic goals.