

Hypnosis—Yes; SDAs Should Use It

An Adventist psychologist believes Ellen White would prefer that members use hypnosis rather than tranquilizers.

by John Berecz

I GREW UP ADVENTIST. CHURCH POTLUCKS, door-to-door Ingathering, and boarding academy were as much a part of my boyhood as the Milwaukee Braves and Green Bay Packers. Daily study of the Sabbath school lesson and twice-daily family worship were simply givens, like washing hands before meals. My devout parents taught us not only to seek God, but also to avoid Satan. Ouija boards, tarot cards, or anything even remotely smacking of Satan has always received a wide berth from me.

In more than 20 years of practicing psychotherapy, I had never utilized hypnosis in therapy because, like many fellow Adventists, I felt it was a form of mind control having more in common with spiritualistic seances than with science.

Imagine my surprise when early on I came

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across the following opinion regarding mesmerism (the forerunner of modern hypnosis):

Phrenology and mesmerism are very much exalted. *They are good in their place*, but are seized upon by Satan as his most powerful agents to deceive and destroy souls.¹

The phrase “They are good in their place,” suggested to me that Ellen White saw a legitimate place for such techniques—crude though they were in 1862 when she made the statement. As a clinical psychologist, I seek to use the best treatments available to assist my patients, so I wanted to find out what the legitimate place for hypnosis might be. Consequently, I decided to carefully study the historical development of hypnosis, evaluate Ellen White’s counsels, and investigate how modern clinicians employ hypnosis in their work.

Hypnotism, officially approved by the American Medical Association in 1958 as a therapeutic technique, is today used by an increasing number of psychologists as one among other

therapies. Hypnotism is used to treat a variety of problems such as anxiety, phobias, eating disorders, and the management of chronic pain, to name but a few applications. Children who have been abused, traumatized, or who have difficulty learning often benefit from hypnotherapy. In physical medicine, hypnosis is often used to assist in the control of bleeding, burn therapy, dermatology, and pain management when side effects or potential addiction prevent the use of analgesics or anesthesia. Dentists utilize hypnosis to allay fears of dentistry, in the treatment of bruxism (the grinding of teeth during times of stress or sleep), gagging, and even saliva control.

In many such cases, hypnosis, like relaxation or biofeedback training, consists of learning to gain control over what used to be thought of as “unconscious” processes. Sometimes hypnosis is utilized to maximize athletic performance or other behaviors that have been sabotaged by anxiety.

I have concluded that it is consistent with God’s purpose that we utilize hypnosis in developing our own inner resources and in assisting others in their growth or healing—so long as we do not maintain that this is the *only* or most important source of power (thereby eliminating the need for Christ within). It is time to reconsider our avoidance of this valuable technique. I think this is especially the case where hypnosis can be utilized as an alternative to drug therapies.

Historical Roots of Modern Hypnosis

Hypnosis, under various names, has existed for as long as records have been kept. Indeed, suggestive therapy is one of the oldest therapeutic methods. By all accounts, it was the Austrian physician Franz Anton Mesmer (1734-1815) who is generally considered the “founding father” of modern hypnotism. Little

is known of Mesmer until 1766 when he received his doctorate from the University of Vienna.

Mesmer practiced medicine only sporadically, but possessed a genuine interest in keeping abreast of new developments. Magnetism—along with recently discovered electricity, gravitation, and gases—seemed to be a mysterious “fluid” with marvelous powers. Mesmer became embroiled in controversy when he claimed to have restored a girl’s sight by magnetism. Her parents charged that Mesmer was a charlatan and were supported by orthodox physicians. Mesmer found it expedient to flee Vienna for France.

There, on the eve of the French Revolution, Parisian society—particularly ripe for fads or “crazes”—provided a favorable climate for the charismatic Mesmer. At the zenith of his popularity with the nonscientific community, Mesmer founded a series of quasi-religious, mystical schools where wealthy students were taught how to “magnetize” patients. Mesmer’s use of group dynamics was ingenious, and today we understand much of what occurred in terms of *social contagion* or *group hysteria*. But in 18th-century France, social psychology didn’t yet exist, modern understandings of group dynamics were still far in the future, and excitement about magic fluids was fanned into full flame by the flamboyant Mesmer and his suggestible followers. Mesmer’s early success was short-lived. He came under the scrutiny of a blue-ribbon scientific commission appointed by the king himself, and chaired by the distinguished investigator of electricity, Benjamin Franklin. Others on the panel included the renowned chemist Antoine Lavoisier, as well as Joseph Guillotin (inventor of the “humane” execution device to which so many would lose their heads during the French Revolution). This panel unanimously concluded that animal magnetism was unproven, without utility, and bogus science.

James Braid resuscitated mesmerism, re-

naming it “hypnosis” (based on the Greek root *hypnos* meaning “sleep”) in 1841, and bringing it back into the mainstream of British science. Braid was one of the first to realize that the most important hypnotic factors lay in the subject, not the hypnotist. Today, many major research areas such as persuasion, attitude change, suggestibility, obedience, conformity, and social facilitation are concerned with how one person can influence the thoughts, behaviors, or feelings of another.

Mesmerism began to become acceptable to the medical community through its ability to induce anesthesia. In the late 1840s, James Esdaile (1808-1859), a Scottish physician practicing in India who trained his assistants to hypnotize patients before operations, became the first person to tabulate the results of hypnotism on a large scale. At this time, Esdaile hypnotized over three hundred patients before operating on them. He reported that the mortality rate dropped from 50 percent to five percent! Hypnotism ranks among the first successful anesthetics to be systematically used in Western surgery, and would likely have won wide acceptance had it not been for the independent discovery of *chemical* anesthetics. In 1844, an American dentist, Horace Wells, extracted teeth painlessly from patients put to sleep by nitrous oxide, and within three years chloroform and ether were discovered by physicians.



Ellen White's Attitude

The word *hypnosis* never appears in the writings of Ellen White. However, she frequently referred to mesmerism, phrenology, animal magnetism, psychology, and spiritualism. “Soon it was reported all around that the visions were the result of mesmerism, and many Adventists were ready to believe and circulate the report . . .”² Apparently, Ellen White even had fleeting moments when she wondered if mesmerism was influencing her. “While at family prayers one morning, the power of God began to rest upon me, and the thought rushed into my mind that it was mesmerism, and I resisted it.”³ Ellen White had some negative things to say about mesmerism, but she seemed primarily concerned that her visions not be attributed to its influence. She was also concerned that people using such techniques might become inflated with their own self-importance: “They think there is such power in themselves to accomplish great works that they realize no necessity of a higher power.”⁴ In summary, when studied in historical context, Ellen White's cautions reflect concern (1) that mesmerism might be seen as the “driving force” behind her visions and (2) that practitioners of mesmerism would become so inflated with self-importance as to forget Paul's observation that “In him we live and move and have our being.” I would like to alert the reader to three common errors when applying Ellen White's counsels to modern hypnosis.

The first danger is guilt by association. Ellen White used terms such as *mesmerism*, *phrenology*, *psychology*, *spiritualism*, and *animal magnetism* in close conjunction—often in the same phrase. Unfortunately, this led many of her readers to lump these diverse phenomena together. An important aid in understanding her writings is to look carefully at each phenomenon, and try to understand what comprised that particular movement at that par-

ticular time in history.

The second danger is judging present techniques by their origins. In order to understand her counsel, we must disentangle each of these diverse movements from one another, and try to understand both their historical beginnings and the changes that have occurred in the intervening 130 years. In general, we ought not to judge modern disciplines on the basis of their origins. We don't reject current chemistry because it began as medieval alchemy—the "science" of changing base metals or stones into gold. Neither do we despise our family physician because a few short years ago blood-letting was a common treatment. We ought to be careful that we don't repudiate modern hypnosis solely on the basis of its origins.

The third mistake is to avoid something because we are told it has been "seized upon by Satan." An appropriate response to the burgeoning drug problem is not to ban the use of all drugs in all circumstances. That would deprive millions of a higher quality of life made possible by antibiotics, insulin, anesthetics, etc. Christians don't seriously propose eliminating telephones because they offer opportunities for "dial-a-porn."

The modern Christian does well to avoid nostalgic yearning for simple times or wishing to turn the clock back on modern technology merely because Satan—as always—uses the most efficient ways to promote his evil kingdom. The challenge for Christians is to use positively what the evil one attempts to monopolize exclusively for evil.

Modern Hypnosis

Modern hypnosis, like all contemporary disciplines, emerged from primitive beginnings. Today, however, hypnosis consists of careful procedures designed to create a state of mind that is highly receptive to learn-

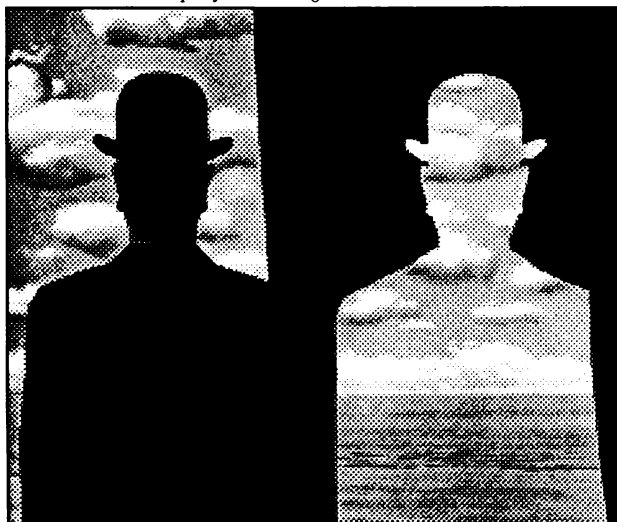
ing new skills or improving performance.

Simply defined, hypnosis is a state of heightened awareness in which the patient's mind is focused and receptive to therapeutic suggestion. Hypnotized patients do not lose control of their will, nor do they reveal secret information. Today most professionals avoid direct suggestions and seldom tell the patient what to do. Instead, the professional functions much like a coach or teacher, assisting the patient to achieve agreed-upon goals. This is facilitated by a relaxed, focused state of mind.

Many Adventists fear that once you have been hypnotized, it becomes easier and easier to "succumb," and like taking that first snort of cocaine, you begin risking loss of control. While it is true that ease of the ability to relax and focus increases with practice, this is not because of a weakening of the will or a loss of self-determination. Rather it is because hypnosis is a skill that does improve with practice. Much like the experienced tennis player, who easily returns a serve, or the professional golfer who seems to "effortlessly" plop the ball onto the green near the flag, the patient experienced in hypnosis easily achieves a state of relaxed concentration.

Some worry that when hypnotized you become like a limp human puppet, whose psychological "strings" can be manipulated at

Adapted from René Magritte's "Decalomania"



will by the hypnotist-puppeteer. This is simply not possible. When hypnotized you do *not* lose control of your will, you do not become unconscious, and you do not lose your ability to communicate with others. You can talk at any time, you are completely aware of everything that is being said; however, you actively work to achieve a state of mind where some things are in very sharp focus, while others fade into insignificance.

There is little danger in the use of hypnosis because all hypnosis is self-hypnosis. The professional only assists you, he or she does not dominate or manipulate you against your will. It's a bit like being the pilot in a plane with dual controls; you may allow the copilot-pilot to "steer" as much or as little as you wish, but ultimately you are in control, you "call the shots," and the flight proceeds according to your flight plan.

This is very much like what happens when you become "lost" in a good book, "carried away" by a great piece of music, "immersed" in a good movie, or "caught up" in a moving sermon. In all such cases—as in hypnosis—you could at any time decide to "get up and walk out," but usually you don't. Because at such times of intense concentration your conscious and unconscious mind resonates in harmony, you are likely to learn more "deeply." This is how hypnosis works. There is no devilish voodoo, no spiritualistic seance, just quiet, calm focus, which is enhanced by the therapist, much as your learning to play the piano is enhanced when you cooperate with your instructor in the quest for better performance.

By restricting our past discussions of hypnosis to caricatures—in the form of the carnival hypnotist who supposedly gets you on stage, and soon, against your will, has you clucking like a chicken and running around naked—we've failed to consider the many hypnotic phenomena with which we are confronted on a daily basis. We're reminded periodically of the power of the media in influencing us, but we fail to realize that some of the most skilled hypnotists in society are the clergy. When creating a heightened state of suggestibility in the form of the traditional altar call, they creatively utilize music, emotions and imagination to help the parishioner focus

on a particular scene such as the day of judgment or Christ's second coming. This is not to say that the Spirit cannot work through clerical endeavors or clinical efforts that utilize hypnosis, but merely to point out how pervasive are the efforts to influence people by suggestion.

One of my favorite pastors typically begins sermons with the following prayer: "Oh

Lord, now as your people wait, let them hear only *your* voice. Let all other voices be silent as *you* speak to us this morning." Then the pastor speaks for the next half hour. Unwittingly, I think both pastor and parishioners have entered into a "hypnotic contract" of sorts, that minimizes critical thinking and blurs the boundaries between the very human voice of the pastor and the divine voice of the Almighty God. A less "hypnotizing" prayer might be a paraphrase of David's: "May the words of my mouth and the meditation of my heart be pleasing in your sight, O Lord, my

Today, Ellen White would be contemporary in her concern about drug use. Americans require caffeine, Valium, Xanax, or Prozac to wake them in the morning, make it through the day, or fall asleep at night. It is more "Christian" to teach people self-hypnosis than to prescribe tranquilizers.

Rock and my Redeemer" (Psalm 19:14, NIV). This invites God's presence without suggesting to the listener that what follows is a direct message from the throne.

Obviously, whenever one chooses to become less censoring and more assimilating, it is important to consider ahead of time what ideas one will be ingesting, what goals one will seek to achieve. Thus, it makes sense to carefully choose a hypnotherapist from among the ranks of well-trained, respected professionals. This same sort of careful judgment is also important when choosing books, movies, teachers, daycare centers, a family physician, and even clergy.

Instead of acting like gurus, or "sources" from which patients draw wisdom, healing, or magical powers, most hypnotherapists work to help the hypnotized person get in touch with his or her own deepest resources. Will-power, courage, and motivation are seen within the patient, not as flowing from the hypnotist. Acting as "coach" or "midwife," the hypnotherapist *assists* the patient in recruiting or releasing inner potential and learning new coping strategies. Well-trained clinicians use hypnosis as an adjunct to other methods of treatment. It is only one "instrument," not the entire orchestra; but in the hands of a professional, it is a very useful instrument.

Beware of clinicians who advertise themselves as "ethical" hypnotists; they usually aren't! Also be wary of professionals who only do hypnosis. Hypnosis is best used in conjunction with other well-recognized methods, and when someone promises to "cure depression, smoking, or obesity" in one 45-minute session, you should treat it the way you treat

a flyer in the mail announcing that you have won a totally free Caribbean cruise for two (with just a few service charges for booking, etc.).

Although some hypnotists make extravagant claims—most states do not regulate them by law—there are two reputable professional societies which can provide membership lists: The American Society of Clinical Hypnosis (Des Plaines, Illinois) and The Society for Clinical and Experimental Hypnosis (Liverpool, New York).

Conclusion

Ellen White had the same concerns expressed by the 18th century French king's commission, chaired by Benjamin Franklin. She was also in essential agreement with 20th century social psychology in pointing out that the power in hypnotism does not exist in the person of the therapist. Ellen White would also be a genuine contemporary in her concern about the use of drugs. Today, millions of Americans require caffeine, Valium, Xanax, Prozac, or some other mind-altering drug to awaken them in the morning, make it through their work day, or fall asleep at night. I personally think it is more "Christian" to teach people self-hypnosis to facilitate relaxation than to prescribe tranquilizers. It is time that our medical and dental schools give serious thought to training physicians, dentists, and other professionals to deal with pain, anxiety, and depression with something besides prescriptions for drugs. It's time to reconsider the technique of hypnosis.

NOTES AND REFERENCES

1. Ellen G. White, *Testimonies for the Church* (Mountain View, Calif.: Pacific Press Publ. Assn., 1948), Vol. 1, p. 296. (Italics mine.)

2. _____, *Early Writings* (Washington, D.C.: Review and Herald Publ. Assn., 1882), p. 21

3. *Ibid.*, p. 22

4. *Testimonies*, Vol. 1, p. 297.