



THE INTERNATIONAL HYPNOSIS RESEARCH INSTITUTE

The Five Core ANNH Concepts

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Advanced Neuro-Noetic Hypnosis™ is designed as a system that is solidly supported by scientific research, which then logically progresses to specific protocols. The intent is to create a system with a strong evidence-based rationale that provides more efficient and effective techniques. Previously, I covered its origin and guiding principles. In this article I will continue my discussion by giving brief explanations regarding the five core concepts upon which it is based. These are patterns, balance, inhibition, plasticity, and entrainment.

Before getting into these I want to again give you some of my reasoning. During my initial certifications and the beginning of my doctoral courses, I was constantly exposed to a variety of script writing techniques, which were to be used to produce guided imagery for different things such as habit cessation and healing. The presented rules were rather simplistic. I was instructed to use positive words and phrases and a mixture of metaphor and direct suggestion. In turn, this was justified in terms of “whole brain thinking” clichés and even more advanced concepts such as Robert Sperry's left-right brain and the triune brain. From that point, it was hoped that the wonderful entity called the *subconscious mind* would somehow miraculously figure out a solution and change the subject's life. This was pretty much how I started my career as a clinical hypnotherapist. While I was pleased by the results that my clients experienced, later when medical doctors began challenging my rather anecdotal claims, it was through efforts to find research evidence and my pursuit of neurology, quantum physics, and energy modalities that my way of thinking suddenly changed.

Although I do not read scripts during sessions, the techniques that I use and the scripts that I produce for my commercially available products are a far cry from the instruction just described. By understanding more about how intelligence works, how the brain and body function, and how change happens in nature, I began to radically alter how I composed a script. For instance, I now consider things like creating antithetical imagery, shifting cognitive-limbic orientations, changing space-time perceptions, and using the brain's anticipation and simulation powers. While I will not cover these individual ideas either in much detail or possibly even at all in these series of articles, I list them here merely to let you know that there is so much more to writing ANNH scripts than most hypnotherapists currently realize. So for now let's get back to the ANNH core concepts.

Early during my investigation into the credibility of hypnosis, I stumbled on several influential ideas. The first was a rather recent statement by NLP founder Richard Bandler, PhD, who said that our survival instinct is not as important as our drive to maintain the familiar. Then I was exposed to the ideas of Wayne Perry, a California sound therapist, who focuses on rhythm and entrainment. Next, I remembered an artificial intelligence textbook that I had recently acquired. Together these ideas came to be what I call *Pattern Theory*.

This collection of attributes and characteristics sum up the basis of how things work and change. Realizing that everything around us and in us is made up of interconnected patterns, without understanding their nature you will never be able to effectively direct transformation. Artificial intelligence researchers, who have attempted to model the human mind, state that all patterns have structure, encoding, and recall attributes. Considering Bandler and Perry's influence, I came to the conclusion that a pattern's first instinct is to resist change and then adapt or entrain when resistance is futile. On top of that I realized that the clinician's primary role is to change pattern encoding by representing an antithetical stimulus sufficient to create an adaptation.

I know that this sounds complex and rather daunting. However, consider this statement: "Change in a subject will never occur until it is realized in the mind of the clinician." I want to rephrase this yet again as, "Be the change that you want to see in others." By creating a stimulating (i.e. antithetical) entity, the clinician will be inspiring an adaptation in the subject. Likewise, by inserting into a script positive, emotionally vivid imagery, you are creating an antithetical situation, which encourages transformation.

A final note about Pattern Theory involves the concept of multiple intelligences. As I looked closely at the true definition of consciousness and intelligence, which involves an awareness of the environment and an ability to adapt, I realized that each and every one of the patterns in the interconnected matrix has a significant level of intelligence. The obvious question then was where is there a *subconscious mind*? If so, where is it and does it have a scientific basis. This led me to the earth-shattering conclusion that our blindly indoctrinated concept of the subconscious mind was a myth. In its place I came to respect the existence of a virtual orchestra of intelligences just waiting to be directed by the conscious mind – or the clinician. This, not the subconscious mind concept, seemed to better explain what was actually happening.

Starting with my exposure to and multiple classes and courses that I took with California psychiatrist Daniel Amen, MD, I started appreciating the importance of energy in the brain and how its distribution activated, idled, or inhibited the functioning of the various neural substrates. This detailed understanding led me to understand the importance of *balance* and how hypnosis can be used to shift energy and thus affect which functions of the brain were available or altered at any given time. Of course, my interest in neurology did not stop there. I began passionately digging into neurology textbooks and research articles. This led me to conclude that there is no way that a hypnotherapist could even think about claiming credibility lest he or she had at least a fundamental appreciation of neurophysiology.

My studies soon led me in slightly a different direction as I began showing interest in the Savant Syndrome. Wisconsin psychiatrist Darold Treffert, MD, has made a lifelong study into people who both suffer from autism and display prodigious savant abilities. What he found was that due to trauma or genetics the brains of these individuals had areas that were dysfunctional and therefore demanded less energy. The resulting shifting of the energy to other neural substrates was considered by Treffert a sound theoretical justification for their amazing abilities. My conclusion was that if areas of the brain could be *inhibited* merely by selective thinking, then it is possible to enhance the certain brain-based skills. Furthermore, for most of us all it takes is an activation of an area of the brain by using specific thought patterns to shift energy away from areas unnecessary for a specific activity. This is another way of looking at inhibition. When you couple this concept with the "use it or lose it" theory of the late-Canadian psychologist Donald Hebb, PhD, then you can easily conclude by repetitively activating certain areas strengthens capabilities. This is the foundation of my mastery program as it explains how to rapidly improve reading comprehension as well as golf scores.

My interest in brain inhibition took me down another avenue. Allan Snyder, PhD, at the

University of Sydney, and Alvaro Pascual-Leone, MD, at the Harvard Medical School were using Transcranial Magnetic Stimulation to inhibit parts of the brain to see what would happen. When they used TCM (or other techniques) to inhibit parts of the subject's brain, they noticed enhanced performance in specific areas – a fact that supported my mastery theory. In turn, this tended to agree with brain *plasticity* theorists who insisted on the brain's capability to reorganize after strokes or other trauma. Then I stumbled upon the work of Edward Taub, PhD, the University of Alabama Birmingham, psychologist who uses a unique concept called "constraint therapy" to help stroke victims recover. Taub says that the brain has a tremendous untapped resource of "spare tires" just waiting to be called upon. Again, my mastery theory takes advantage of this resource.

All in all, these studies supported the evolution of my thinking. In order to help someone improve their mental happiness, improve performance, and even affect personal health, a clinician must understand how the brain functions, uses energy, and can reorganize. This quickly emerged as a major consideration when I looked at how clinical hypnotherapy is – and should be – practiced. However, I felt something was missing. How can a neurology-based form of hypnotherapy most effectively address transformation? In a sudden flash of the obvious, this took me full circle back to Pattern Theory and especially Wayne Perry's comments about *entrainment*. A system – or pattern(s) – adapts to remain harmony with each other. However, such transformation needs to overcome a pattern's natural tendency to resist change. Therefore, like an emerging fashion statement that is met with initial disdain, eventually there comes a state of enthusiasm that results in an inevitable adjustment – i.e. a new fashion trend. Thus, this is how I came up with the concept of antithetical – to borrow German Idealist Fredrick Heigel's term – change.

When a subject comes to a clinician, they are normally in a situation where a previously stimulated transformation failed to create a harmonious situation. Therefore, the clinician's role is to create another antithetical condition, which will result in a new process of entrainment with a more functional harmony. Milton H. Erickson, MD, was a master of this. He sometime called this "symptom substitution." Provided that the antithetical situation is created – such as through the use of specifically designed imagery – the intervention should work. Of course, if this is done by a clinician who has more of an appreciation for the dynamics of the brain, then it stands to reason that the intervention will be more effective. (However, clinicians who are still mired in the subconscious mind mode will also benefit their subjects despite the fact that they have little appreciation of what is really happening.)

This is a rather cursory explanation as to what I mean by patterns, balance, inhibition, plasticity, and entrainment. In the next article, I will go one further step by explaining in more detail just how these are used in a system for transformation.