

Guided Imagery or Hypnosis

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by Tim Brunson, PhD

Frequently I hear or read therapists and members of the media loosely using the terms hypnosis and guided imagery. Rarely do their comments reflect any knowledge of the definition, similarities, or differences between the two. This gives the public the impression that they are two separate concepts. This is partially true and partially false.

Hypnosis has been defined many different ways. Many authorities, such as the American Medical Association, explain that hypnosis is an altered state in which the subject is highly suggestible. Others talk about increased access to the *subconscious mind*, a term which I often object to as an inaccurate concept. One of the definitions that I prefer is that hypnosis is a state where a person's critical faculty is bypassed and selective thinking can occur. This was David Elman's definition. There is another definition that I like even better - one that is based upon traditional thought as well as recent innovations in mind/body health and neurology. According to this train of thought, hypnosis is the process whereby resistance to change is reduced and selective thought becomes more efficient. It seems that final definition more closely explains why the phenomenon produces results. Note that with this view an altered state *may* occur. However, it is not a requirement.

So where does guided imagery fit in? First, let's define it. Guided imagery is a process as well. In this case, a therapist - or a person using their imagination without assistance - experiences a series of imagined images. This experience may be more than just visual. They may also incorporate sounds, smells, and tastes. It can be reasonably assumed that the series of images have a general theme such as losing weight, dealing with pain, stopping bad habits, increasing wound healing rates, etc. The images can be very direct and specific - such as visualizing a wound healing faster - or metaphorical - such as visualizing a garden growing as a parallel communication symbolizing health or many other topics.

Hypnotherapists and other hypnosis practitioners are very familiar with guided imagery as they use it frequently during a session. Once they have their subjects to the point that resistance to change has been reduced, which is a byproduct of the induction step, then they may eloquently use guided imagery to suggest alternatives. Then they may choose to add specific and direct suggestions. When I was first taught by Topher Morrison, DCH, and Richard Nieves, PhD, I was instructed to start with a brief induction and then do extremely long guided imagery sessions. My subsequent study of the works of David Elman and Milton H. Erickson, MD, quickly weaned me off this method. However, I still incorporate meaningful guided imagery within much shorter sessions.

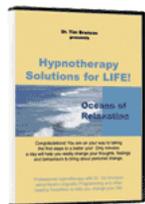
So what is the difference between the two? To many people it is merely a matter of semantics. Many clinicians believe that using the term guided imagery will make their clients and patients more acceptable to the process. What they are doing is hypnosis and misrepresenting the process so as not to scare them. Others will use guided imagery and totally leave out any hypnotic variables. In fact, I know of one popular licensed professional counselor who sells a series of very professional guided imagery CD's claiming to resolve a myriad of ailments - both mental and physical.

Here is the bottom line. Guided imagery without the advantages of a hypnotic process is a weaker alternative. The mind - and body - will resist change. If you don't believe me, ask yourself how many times after New Years Day you still date checks with the previous year. Your body resists contracting illnesses - just like it resists healing. Once any pattern, such as a habit, has been established, it will resist change. Therefore, although the ideas, concepts, and intentions presented during a guided imagery can be wonderful, unless a pattern's resistance to change is eliminated, it will be largely ineffective. What I have discovered is when a subject's resistance is reduced, any suggestion given - provided that it is not contrary to the subject's will, ethics, or morals - will be quickly accepted. Yes, those suggestions can be given at that time through the use of guided imagery. However, often a quick suggestion is more efficient. For instance, if I want to help an emergency room patient with an acute pain, quickly bypassing their resistance and giving them a quick suggestion is more powerful and efficient than having them visualizing walking through a warm, colorful meadow. When guided imagery is done well it is relaxing and highly effective. Clearly, there are times when it is appropriate - such as for many highly resistant subjects, for mental issues, chronic pain, and long-term healing - and times that it is not.

Whether using guided imagery with yourself or others, you have a powerful tool that can lead to wonderful changes. If coupled with hypnosis, the speed and depth of potential changes may present a level of intensity not available when it is used alone. There are times that non-hypnotic guided imagery is more appropriate. Most hypnotic strategies - to include waking hypnosis - present the risk that a person's ability to sense space and time could cause an unsafe condition. Therefore, using hypnosis while driving or operating machinery is not advised. However, playing non-hypnotic guided imagery in the background while doing other activities could reasonably reinforce desired mental programming. Nevertheless, the user should still be warned that such use still may lull them into a mental state other than full awareness.

The ability to use the imaginative powers of a human's superior frontal lobe is an amazing asset. It is available as a powerful tool that can affect both the mind and body. Individuals who properly use this technique should be aware that it is available as a very intensive tool for change, provided that it is used in conjunction with hypnosis or as an adjunct when not.

[The International Hypnosis Research Institute](#) is a member supported project involving integrative health care specialists from around the world. We provide information and educational resources to clinicians. Dr. Brunson is the author of over 150 [self-help and clinical CD's and MP3's](#).



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