

Hypnotherapy Training

**An Investigation into the Development of
Clinical Hypnosis Training Post-1971**

Shaun Brookhouse PhD DCH

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*An Investigation Into The Development
Of Clinical Hypnosis Training Post-1971*

by

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Introduction

One of the main obstacles to the emergence of Hypnotherapy as a unified, discrete profession in its own right has been the plethora of available training courses and the concomitant absence (ie. until recently) of any agreed standards on training criteria.

This has effectively resulted in the reluctance of General Practitioners and other relevant third parties responsible for patient care, to refer suitable patients to hypnotherapists, due to an inability to determine which practitioners may be adequately “qualified”.

Shaun Brookhouse’s investigation, and subsequent report on his findings, is therefore an essential preliminary to the work which our fledgling profession must undertake if it wishes to mature into the fully developed “respectable” occupation so desired by practitioners and deserved by the public who seek our services.

Shaun’s has been an unenviable task, given the historical suspicion that exists among training course providers for anyone attempting to research their essential structure and ethos, yet a task which has been carried out with his customary fortitude and tenacity.

The report’s findings are, in many respects, encouraging, not least by demonstrating the commitment displayed by some of the main training providers both to offer a thorough tuition to students and to voluntarily submit to external validation by one or more respected professional bodies.

This is a decisive move, by responsible course providers, away from the rather narrow and insular philosophy that has previously prevailed and one that can be further advanced by this timely and authoritative report by a practitioner, trainer, and now researcher, who justifiably enjoys a well-earned reputation as one of the most knowledgeable members of this most complex profession.

*William Broom, FNCP, MNCH (Acc)
Secretary, National Council for Hypnotherapy*

Chapter 6

Discussion

This paper has given me the opportunity to look historically at the situation with regard to the training in Clinical Hypnosis in this country. It is my belief that this research will serve as a jumping-off point for other researchers in this field to ascertain the status of this profession from public and professional perspectives. Most important of all, I believe that this work could become Chapter One in a history of the evolution of the hypnotherapy profession from the early 1950s to today. Of course, this would probably be in the distant future, and my hope would be that future researchers would see this as an important period of development, but by no means an ending in itself.

Sadly, there is a mistrust in this field with regard to sharing information between training bodies (Berg and O'Sullivan, 1997). In fact, there is practically no sharing of information or research between training colleges (BMA, 1993). I can only hope that, after this publication, others involved in this field will take a greater interest in researching the training provided to hypnotherapists in the UK. In some ways, this point is already being looked at through an organisation founded just after the start of this research. The Hypnotherapy Research Society (UK) has set out to:

"...encourage practising hypnotherapists and researchers of clinical hypnosis to publish or write papers of their theories, experiences, and any practical research they have undertaken in the field of clinical hypnosis or hypnotherapy." (HRS, 1997, p.2)

The coming into existence of a research society for hypnotherapy seems like a huge step forward when one compares the level of hypnotic research now with what was done in the early fifties, with this paper beginning to look at those four key points: Growth of Associations, Training, Quality Assurance, and Politics and Culture.

One question that remains unanswered after my research is the issue of National Vocational Qualifications (NVQs) in hypnotherapy. Whilst in many of the prospectuses I received these are mentioned, only one openly embraces them as the way forward (UK College, 1997). It would appear that many trainers are treating NVQs as an inevitability rather than as a step forward (Care Sector Consortium, 1997).

Another issue that I feel is unanswered by my research is why there still remains a hostility between physicians and psychologists with regard to the professional lay hypnotherapist.

Based on the training hours of the main courses approved by the British Society of Experimental and Clinical Hypnosis and the British Society of Medical and Dental Hypnosis and those courses provided for professional lay hypnotherapists, the hours are comparable.

Also, the teaching staff in many of the professional lay schools are similar, and in some cases arguably superior, to those on the main medical and psychological courses. Over fifty percent of the professional lay schools that responded have at least one psychologist or physician on their training faculty.

Though one can see that this is not the same as a Medical School education, one must ask, "Would a medical or psychological practitioner endanger his or her reputation by being involved with an unethical or unprofessional training provider?"

I have identified six main barriers to the acceptance of lay hypnotherapy training by the medical and psychological communities. The first is that there is no common curriculum taught by all schools. The diversity of training courses and their content leads to confusion when trying to assess the differences between the skills possessed by the hypnotherapists and other mental health professionals. Many fields that have achieved "recognised status" with the organisations like the BMA or the government went through a period of harmonisation before this recognition was achieved (BMA, 1993). However, this process of harmonisation within hypnotherapy does not seem to have yet begun, based on the prospectuses sent to me.

The second is that entry requirements vary greatly, with some courses requiring a degree for entry, while others have no academic requirement. Many professions accept the idea of a graduate level of entry. This requirement is based on the belief that a university education is a good grounding for a professional to have, even if the undergraduate study bears no relation to the field a graduate chooses to enter (UKCP, 1997). The lack of university interest in the field of hypnotherapy leads me to deduce that it will be some time before undergraduate courses in hypnotherapy will be made available.

The next is that length of course study ranges from one or two weekends of training, to home study courses, to three-year courses with clinical supervision and personal therapy requirements. For many professions outside hypnotherapy, this seems anathema. How can a person train to be a hypnotherapist, on the one hand, in two weekends, while others take three years of part-time study? Ironically, the organisation with the shortest requirement as far as training is concerned is the British Society of Medical and Dental Hypnosis. Their certifying course is two weekends (BSMDH, 1997). However, they explain that the reason for this is that their graduates have all undergone a rigorous medical or dental training. Leaving the BSMDH out of this, most of the other training requirements advertised in the prospectuses I received had a minimum of 1 year part-time training requirement, with additional requirements for Clinical Supervision and In-Service Training, for full qualification (CTS, 1997).

Then there is a range of qualifications offered (e.g. DHP, CHP, Dip CAH, Dip THP) with no way of assessing their relationship with each other or their relationship with higher awards (e.g. University Degrees, HNDs, etc.). For a student this is problematic. If one wants to study to be an osteopath, for example, there is one main qualification

so there is less room for being confused (BMA, 1993). In many cases, hypnotherapy qualifications can sound more impressive than perhaps they really are. For example, a correspondence course prospectus I received stated that, upon successful completion of their diploma, one would be eligible to join an “international association” whose membership is the largest in Europe (IAH, 1997).

When one actually looks into this society, it is shown that it is not the largest association in the UK let alone Europe (Mills and Peacock, 1997). Also, the only persons who are eligible for membership of this association are graduates of the school in question. It would be like Manchester University having its own professional society for psychologists open only to graduates of their psychology programme (Brookhouse, 1995). From what I have seen in the prospectuses sent to me, most training organisations are giving a fair definition of their qualifications. However, it is still difficult to determine how they equate with each other and whether one qualification based on the designating letters requires any more or less time of study than another.

This leads to the fifth barrier. Since there is no standard of education for “lay” hypnotherapists, the medical and psychological communities have sought to ban their practice (Heap and Dryden, 1991). There is a case for this, as physicians and psychologists go through a rigorous course of undergraduate and graduate study, but the same cannot be said of the “lay” hypnotherapist. In the literature of the British Society of Experimental and Clinical Hypnosis, it even goes so far as to ban any member from teaching a non-qualified person hypnosis:

“A student shall not give courses involving the teaching of hypnotic techniques to lay individuals. A lay person here is defined as one who is not a member in good standing of a therapeutic or scientific profession. Lectures informing lay individuals about hypnosis are of course admissible providing they do not include demonstrations or didactic material involving the induction of hypnosis.” (Centre for Psychotherapeutic Studies, 1997, p.12)

Though many “lay hypnotherapists” are university educated, there are a number of practitioners who have completed only a two-month correspondence course to allow them to practise. Because of the UK’s legal tradition of common law, anyone can set themselves up as a hypnotherapist without any training at all. Training colleges that responded to my letter who provide a live part-time training seem to be in agreement on the undesirability of this situation (NSHAP, 1997).

The sixth, and final, barrier has been getting Universities to validate training for “lay” hypnotherapists. Since the mid 1950s the British Medical Association has endorsed the training of hypnosis to physicians. There are currently two degree courses at graduate level for “applied hypnosis” in the UK. These courses are run at University College London and Sheffield University. These courses are restricted to psychologists, physicians and dentists. The “lay” hypnotherapist is left out in the cold. Some practitioners have sought university qualifications from the United States. However, not all of these courses are properly regulated and there has recently been a backlash

A comprehensive investigation into the development of hypnotherapy, written by one of the foremost experts in the field. It provides an in-depth review of the development of the profession outlining all the issues which are faced by the modern hypnotherapist.

“Those of us who have been in the field for many years are pleased to know that all this carefully researched information is now available for reference. Hypnotherapy is only now being accepted as a discrete profession. Congratulations, Dr Brookhouse, on your most timely accomplishment.”

Ray Keedy
Director, National School of Hypnosis and Psychotherapy

“A must read for therapeutic organisations, trainers, serious therapists, and anyone interested in the profession. The HRS had no hesitation in awarding this work the 1998 Special Award For Contribution to the Profession of Hypnotherapy.”

Dr Chris Forester
Editor, HRS Journal

Shaun Brookhouse PhD DCH holds advanced degrees in Psychotherapeutic Counselling, Clinical Hypnotherapy, Education Studies and Behavioural Science. He holds several certifications and diplomas in hypnotherapy, psychotherapy, NLP, and Time Line Therapy™, from both the UK and the USA. He is a Certified Instructor of Hypnotherapy and a Certified NLP Trainer. He is on the Governing Board of the UK Council for Psychotherapy and the Governing Council of the Centre Association of Psychotherapists. For his contributions to the field of hypnotherapy he has received six Fellowships and several special awards including one for hypnosis research. Shaun runs seminars on various aspects of hypnotherapy internationally.

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