

SECRET, DON'T TELL

THE ENCYCLOPEDIA OF HYPNOTISM



induction

Mind
Control

HELP

Research

by

Carla Emery

Illustrated by
Corey Smigliani



The



ONE NIGHT IN 1995, about two o'clock, I woke from deep sleep. A thought was nudging me: "Unplug the computer."

"Why?" I wondered. There were no sounds of electrical storm outside, and I had a surge protector. I was not in the habit of unplugging my computer except when I moved (which was frequently). No answering idea came. So I didn't know why.

I obeyed the thought anyway, fumbled my way out of bed in the darkness, walked across the few feet from bed to desk. Kneeling down, I groped under the desk for the thick cable that plugged into the upper wall socket. It was the main connector from whose source of power all my other significant computer connections branched off (printer, monitor, and the mechanical brain itself). My fingers found it, yanked it out of the socket. Then I felt my way back to bed and gratefully plunged down again, back under the warm covers, back into deep sleep.

As was my habit, I awoke early the next morning. I jumped out of bed, dressed, and sat before my computer. Time now was so precious, every day borrowed against my unknown quantity of remaining days. Every home I lived in was a

borrowed home, a place to fire up that computer and make yet a little more progress on the book by day, a bed for my weary body at night. Because the only way I could finish this project was in hiding, and there was no way to know how long I could stay hidden.

I flipped the computer's ON switch, and the monitor's. They should have instantly whirred to life. But this morning neither one did. I flipped each back to the OFF position, then once more to ON. Still no sign of response.

Something was wrong.

I sat staring at the screen, baffled. Then I remembered that I had unplugged the computer in the middle of the night. I bent down and plugged it into the usual place. I flipped the switches to ON again. And again. They still didn't work. I tried plugging into the other, lower set of holes on that outlet. This time, when I flipped to ON, each component machine commenced the sudden chatty sequence of clicks and hums that told me all were now awake and running.

Now I was not nearly so interested in getting back to work on the book as in finding out why the upper socket hadn't worked. I crawled under the table on my hands and knees with a lamp to get a closer look.

And gasped in horror. A smudge of black defaced the outside of that entry way for two metal prongs of connector. Suddenly I understood. A terrible jolt of electrical power had silently blasted into that line some moment after my night waking. Its energy had melted down the wires and left that tell-tale black trace on the white plastic's socket's outside. If the cable had been plugged in, that zap would have also fried all the circuits of the hardware half of my writer's brain.

Ever since that night I have had peace of mind about whether writing this book is really God's will for me. After that, I knew for sure that all I had to do to complete this immense project was the necessary work. God would provide the

necessary miracles.



Not by
might, nor
by power,
but by my
SPIRIT,
saith the
Lord of
hosts.

Zechariah 4:6



Secret, Don't Tell

The Encyclopedia of Hypnotism



by Carla Emery

Illustrated by Corey Smigliani

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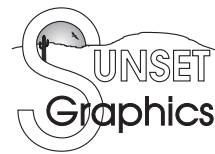
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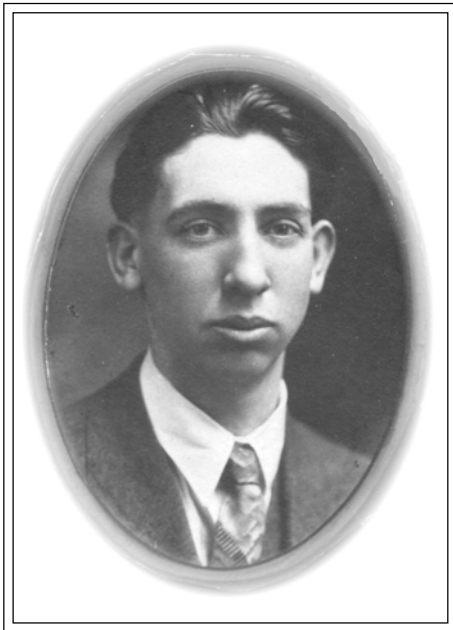
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To my father, whose example of gentle strength and fierce devotion to principle, First showed me what a loving and just God must be like.



To my mother, who made me learn the rules for using words,
Then set me free to roam in joyful literacy.

This Book Is For You

Thank you for choosing to spend time with this book. I send my love and all I've learned. May every sleeper hear this call to wake and tear the wall of silence down!

Yes, you! It is not just hypnotic subjects¹ who sleep. Ignorance and apathy have lulled so many into somnolence. So this book is for general readers who want to be well informed. Knowing real facts about hypnosis will help you make wiser choices. It is also for those courageous individuals who are trained in hypnosis and who believe truth and justice are more important than professional solidarity, lobbying postures, income protection—even personal safety. And it is for legal specialists who may some day use this information in court to fight for justice.

Especially, this book is for all survivors of abusive hypnosis: past, present, and future. May every sleeper who yearns to wake and struggle toward freedom of mind find the courage to seek help in that waking and the blessing of achieving it.



Thanks

Thank you, God, for the task, for the opportunity to accomplish it, and for mercies and miracles along the way.

Thank you to every person who ever bought a book of mine. You encouraged my spirit and enabled me to be a full-time researcher and writer. Thank you to all who have read my writings or listened to my talks in person, on audio, or video. You saw my soul and I hope you became my friend.

Thank you to my many, and precious, personal friends. Over the years I've struggled to become able to talk, read, and write about this difficult subject, you listened with compassion. Every time you listened, you took into yourself a part of my heavy burden and it became lighter and more manageable for me. You supported me with firm arms, lovingly, even when you couldn't see where we were going. You critiqued, scolded, counseled, raged, comforted, tried your best to light up my dark places. I could never have done it without you.

1. A "subject" is a person who is, or who ever, in the past, has been, hypnotized.

Thank you to all the librarians who helped me research, especially those anonymous angels working in the Seattle Public Library interlibrary loan system. You faithfully searched out my hundred of requests for books and articles on hypnosis and other mind-control technologies—and never charged a cent. Thanks to Laurel Warg for special research assistance. You helped find answers to my many questions.

Thank you to previous authors who struggled to collect, record, and disseminate information about mind-control technologies and their abuses. Each writer added nuggets of precious knowledge to the public store and, thereby, made my work easier. Their books were carefully, even tediously, researched—not easy to write. Few sold well. Most passed quickly out of print and were soon forgotten, the author’s hard work neither financially nor socially rewarded. They all battled against the attitude of “Secret, don’t tell.” I am so grateful (However, the inclusion of one or more quotes from any author should not be taken to mean that I agree with every statement by that person.)

Thank you to all the friends who put a roof over my head and set a place at the table for me, no questions asked, during the years I lived in hiding to complete this book. Thanks to all who nagged me to make backup



copies until I did it, to you who fixed my ancient hardware or helped me shop for bargains in newer models, who explained software to me, or cleaned up my word processing messes. Thank you to the legion of volunteers who, over the past dozen years, have listened to or read versions of this manuscript and tried to help me overcome mental blocks against writing on this subject. Gradually, we transformed it from gibberish to sense.

Thank you to all who helped me accomplish the press-ready version of this manuscript. You did editing, layout, printing, binding, the web site, and distribution. Each of you courageously fulfilled a step of getting this book into the hands of the people. You know who you are and you know how humbly grateful I am. Without you this massive project could never have been completed.

I especially thank Nora O., another survivor of criminal hypnosis. She paid the heavy price of a heart attack for editing this book on a subject that always made her heart go too fast.

Thank you also to Corey Smigliani. She carefully read every word of this litany of human sin and tragedy, though it sometimes made her cry. Then she eloquently communicated the mute pain of victims of abusive hypnosis in the many illustrations of this book.

It is funny and it is a little bit scary. The stage hypnotist at your local high school auditorium has just hypnotized your friend and perhaps some of your neighbors. The hypnotist has made them sweat from imaginary heat, shiver and shake from imaginary cold and put themselves in pretzel-like shapes or suspended from chairs. Before returning to their seats they were told by the hypnotist, "You will remember nothing" about being on stage and, sure enough, they never did remember the events.

This book tells us that unethical hypnosis can destroy lives. Conventional wisdom states that under hypnosis you cannot be made to do something that morally you would not ordinarily do. The well documented case histories compiled in this book remind us that this assumption is false. Once induced into hypnosis, either for nefarious reasons or for "fun," return to hypnosis is easier each time. Induction can then be caused by visual or single-word cues. Then, by a simple command, the victim can be made amnesic for the event and will have no memory for what has happened.

If carried to an extreme, a life can be destroyed by this technique. The victim's only clue as to what has happened is that chunks of time have mysteriously disappeared and unexplained evidence of physical and/or emotional trauma begin to surface. If the victim or the family ever realizes the peculiar things that are happening could be caused by unethical hypnosis, then there can be hope that the hypnotic control can be broken and control of one's life reestablished. Otherwise, the abuse can continue for a lifetime.

The writer of this book is a mother of seven children and author of a bestselling *Encyclopedia of Country Living*. She is well known to her wide reading audience and to those who have met her by means of her television appearances, radio talks, and personal speaking appearances across the United States. Anyone who knows Carla is immediately impressed with her honesty, her credibility, and her intense intellect.

Years ago, her life began to be bizarre. As with many of the victims in these stories, time chunks mysteriously disappeared. She found herself acting in strange ways in certain situations and discovered evidence of unremembered physical abuse. Through sheer determination, diligent research on what was known about hypnosis, and detective work to put the pieces of her life back together, she escaped from the bondage of a modern-day Svengali.

Little has been written about unethical hypnosis—and basically nothing by a victim of unethical hypnosis. The reason is clear: one cannot write about something one cannot remember. The doors open to these memories only with great difficulty and often with great pain. Her purpose for writing the book is to alert the general public to the fact that unethical hypnosis can and does occur, and that it is potentially life-destroying.

Ray H. Dunkelberg, M.D.

January 4, 1998

INTRODUCTION

For there is nothing hidden which will not be revealed, nor has anything been kept secret but that it should come to light. If anyone has ears to hear, let hem hear.
- Mark 4: 22-23 NKJV

One night in 1989 I dreamed I reached out and grabbed a hair from the tail of a running, disappearing donkey as it melted back into a tangled, dense, dark, convoluted forest. I managed to grab only one hair of the tail before it was gone. As in that dream, again and again, I have captured another single strand of this long, complex, and tragic tale, the history and technology of unethical hypnosis. Working with each single hair, I have struggled to create the form and essence of the original donkey.

It is hard to explain a subject so complicated, unfamiliar, and controversial. I wrote this book out of a fierce desire to restore and defend true facts about mind control technologies. This is the only book, or even article, in this field ever written by a subject. Up to now, only hypnotists, psychologists, psychiatrists, journalists, and historians wrote of these things—with rare quotes from clients, patients, or subjects. There is a big difference between how they view this data and how a subject does.

By quoting from many sources (often rare and difficult-to-find), I have tried to provide in this book an honest print dialogue on the previously stifled topic of mind-control technologies. Here, the good-guy hypnotists are heard warning of potential misuses of hypnosis. The mind-controllers talk to one another in assumed privacy, as in CIA memos. And voices of the mind-controlled cry out—wounded, confused, angry, pleading for help.

Defining Unethical Hypnosis

Old-time research hypnotists called unethical hypnosis “antisocial hypnosis.” Since modern hypnotists deny that criminal hypnosis is possible, they do not have any name for it at all. Whatever the name, it causes a hypnotic subject to do something unethical, or to submit to something unethical.

“Isn’t all hypnosis unethical?” my friend Jerry, a former hypnotist who “got religion” and swore off, asked as we stood talking about this in a convenience store one night.

“Most people do not understand how their brains work, and what ‘trance’ is and what ‘hypnosis’ is—and is not,” I replied. “Trance management is used benevolently in many situations. Women have babies by LaMaze. Cancer and AIDS patients fight for their lives by visualizing more active white blood cells. If you go to a hospital emergency



room with a migraine headache, you will probably be treated with a relaxation induction followed by visualization deepening and then given suggestions for pain relief.”

“Four distinct negative elements come together in the most clearly evil usage of trance—and I call that **criminal hypnosis**. Those four elements are **Deceit, amnesia, chronicity, and abuse**. The combination of those four is clearly unethical and ungodly. That definition of criminal hypnosis is sufficiently narrow that it should be acceptable to anyone with an ounce of moral sensitivity and no vested interest in criminal uses of trance. There have also been cases which involved fewer than all four elements, cases which were also obviously unethical, if not criminal. Any unethical trance manipulation fundamentally violates the Golden Rule: the hypnotist makes a subject do things, and live a life that the hypnotist would not choose for himself.”

Jerry nodded agreement. Our conversation wandered to other topics.

History of Criminal Hypnosis

Criminal hypnosis cannot be studied in normal experiments, because the experiment would be unethical. Perpetrators do not write books about the crimes they committed. Part I of this book contains four major case histories of criminal hypnosis which have been researched either by psychiatrists or investigative journalists. Each of those case histories is a clear-cut, well-studied, detailed cases of hypnotic abuse—deceitful, amnesic, chronic, and damaging. Scattered throughout the book, many other significant cases involving criminal mind control are also described.

For example, “Z,” in Germany of the 1920s, finally figured out what hit him and never quit trying to get the truth out. Mrs. E. suffered in Heidelberg until her husband called the cops and Dr. Mayer established the evidence which sent two predatory hypnotists to jail. A “guru” hypnotized his cellmate, Palle Hardwick, in a Danish prison, making him a puppet who would later rob banks and murder because of hypnotic conditioning. Palle’s police psychiatrist, Dr. Reiter, solved the case and sent the criminal hypnotist to jail. Candy Jones, a popular model and World War II pinup girl, was trapped into becoming an unknowing guinea pig in CIA experiments on narcohypnosis, personality-splitting, and torture—until her unconscious revolted and began to serve truth and freedom instead.

The case histories in this book also illustrate the development of mind-control technologies over the past two-hundred and fifty years. The personal characteristics of an unethical hypnotist also evolved over those years. Low-class predators looking for easy profit by a super-scam are always around. The free-lance scientific researchers of 19th century Europe, however, have been joined by anonymous secret agency hirelings, or graduate school bad boys directed by covert organization-man MDs and PhDs. All have sought the unholy grail of absolute control in absolute secrecy for personal profit, or for whoever is paying.

Part II of this book provides a partial history of U.S. government research in mind-control technologies. I began to actively research the subject of the abuse of hypnosis and development of modern mind-control technologies a dozen years ago. At that time, I had no idea that the trail of clues which I was following would inexorably lead me to recognition of 1950s and 1960s CIA research into the making of unknowing hypnoprogrammed subjects whose personalities had been artificially split. The book became even more painfully personal when a subject of military brainwashing whom I interviewed warned me, “If they knew what you’re trying to do, they wouldn’t hesitate to kill you.” Nor could I have imagined that my research would culminate in 1996 in a frightening encounter with a NSA agent who was using astonishing modern electronic applications of that ancient-rooted technology.

This book also covers the essential facts about important hypnotic phenomena, induction methods, and legal and therapy aspects of abusive hypnosis—how to identify and help a victim of this black art.

Secrecy and Denial

Several recent journalists writing about government research in the field of unethical hypnosis concluded that the human spirit is just too fine and noble ever to be forced into a role of a helplessly subjugated machine-being doing whatever an operator commands. I wish that was true, but it is not. The technology of criminal hypnosis was developed, does exist, and is tragically effective.

Suppression of the facts about unethical hypnosis has resulted in textbooks and manuals that contain myth as well as truth on the basics of hypnosis—and less and less mention of it at all. Almost all clinical and forensic specialists nowadays heatedly and sincerely deny the possibility of unethical hypnosis. Because texts and teachers all say this particular problem cannot exist perpetrators know their technology well but the good guys do not.

Public ignorance of this evil technology denies its victims sympathetic, knowledgeable help. It facilitates a criminal's collection and abuse of yet more victims. It is difficult for a victim of unethical hypnosis to overcome his artificial amnesia and remember. It is even harder for him when no shred of the remembering makes sense in terms of any familiar or accepted knowledge. Nothing in library, bookstore, or psychology texts will explain his fuzzy, fragmented, mysterious knowings. Friends and relatives find it all too easy to believe that he is imagining things. (Mental illness with delusions of hypnotic control does exist. Unfortunately, criminal hypnosis also exists. Therefore, each individual's situation must be studied on its own merits.) Because of the information blackout, to seek help, saying you are a victim of exploitative trance manipulation, is to challenge a nearly unbroken facade of sincere professional denial with your fragile, personal, unprovable truth.

Information Control Is Mind Control

True understanding of the present requires true records of the past. The disappearance of certain books, of certain information, impacts the collective mind of society the same way hypnotic forget-commands act on individuals. It represses, even extinguishes, information from the historical record. It disrupts the democratic decision-making process.

The essence of mind-control is information control. You are most free when you have the most complete access to information. "Secret, don't tell" is the beginning of enslavement, individual or social. "Classified" information makes an entire society amnesic. A lie in the "news" deceives an entire society. For either an individual or a large democratic society to best function, there must be complete and accurate information.

Repression of information about unethical hypnosis puts predation by the knowing upon the unknowing in an optimal position to grow. Sceptics provide the perfect cover for this nearly perfect crime. It is not a valid argument to say persons can only be forced under hypnosis into immoral behavior "if the subject imagines this to be possible." None of the case histories in this book involved a subject who imagined what was to happen to them could be possible. Playing ostrich encourages abuse of this technology to increase.

The good news is that clear self-knowledge of your vulnerability makes you less vulnerable. R. R. Blake, a 60s U.S. military brainwashing expert, wrote that a mind controller's "success...depends heavily on the ignorance of his victims." (Blake in Biderman & Zimmer, p.9) The purpose of this book is to replace ignorance with knowledge about both old and modern mind-control technologies. If you read this book, or listen to it on tape, you will be far less vulnerable than you were before doing so. Your unconscious (which is where the mind-control predator seeks to attack you) will be defended with a supply accurate information instead of being desarmed by myths. Reading this book will protect you. It will cause your unconscious to ignore subliminal sales pitches. It will reject covert induction attempts.

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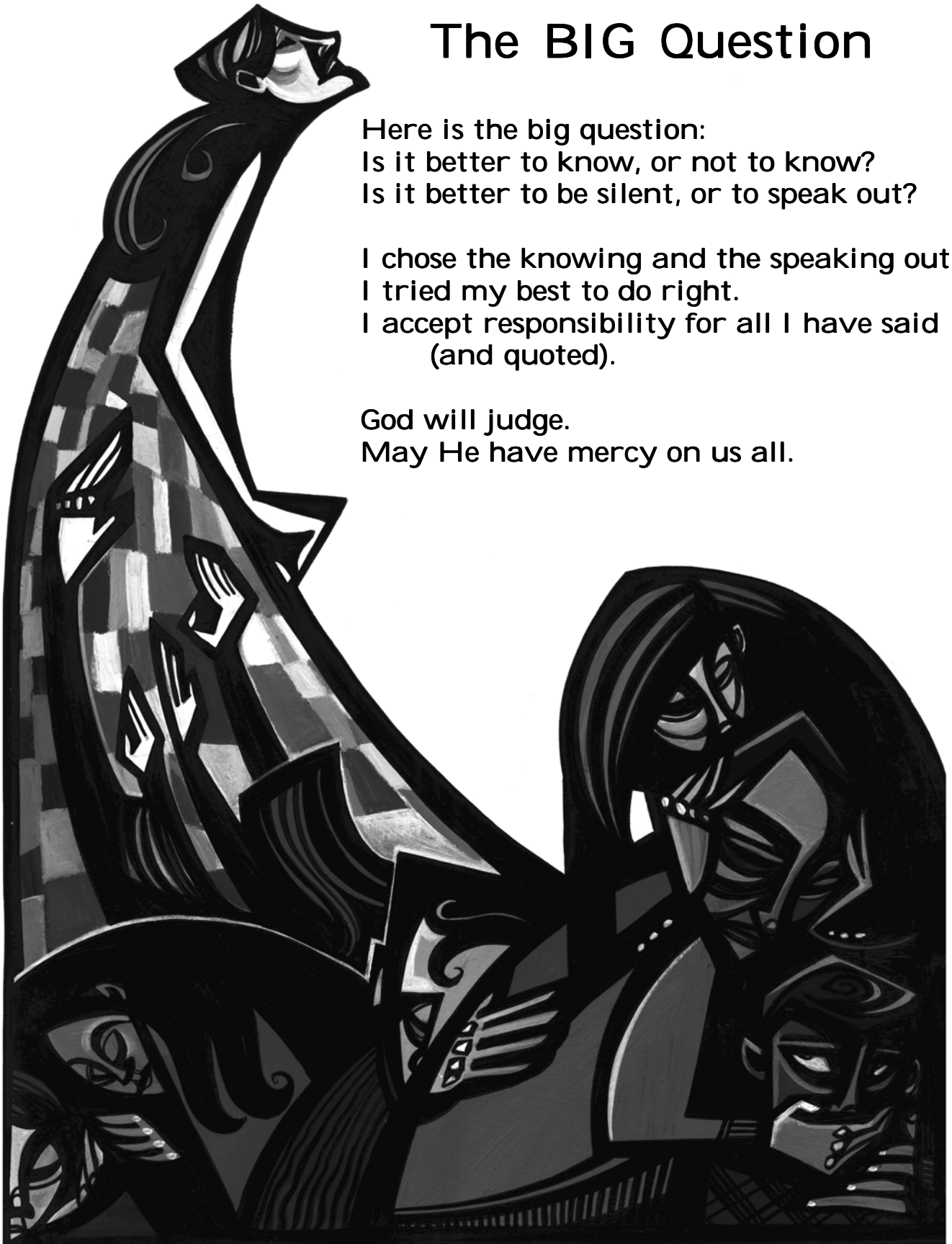
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The BIG Question

Here is the big question:
Is it better to know, or not to know?
Is it better to be silent, or to speak out?

I chose the knowing and the speaking out.
I tried my best to do right.
I accept responsibility for all I have said
(and quoted).

God will judge.
May He have mercy on us all.







PART I

Case Histories of Criminal Hypnosis

Svengali: Unethical Stage Hypnosis in Literature and Life

Case History: “Z” Kantor

Case History: Mrs. E

Case History: Palle Hardwick

Case History: Candy Jones



“Mr. Kantor, don’t do anything stupid!”

Svengali: Unethical Stage Hypnosis in Literature and Life



The hypnotist can be erotically fascinated by the sight of his inanimate, plastic, unresisting subject. In this, hypnotists share a dream world with undertakers.

- Robert Marks, p. 119

An Englishman with a French name, George Du Maurier (1834-1896), wrote his last and most famous novel, *Trilby*, about hypnocontrol. It was the first “best seller.”

Du Maurier got the idea for his tale of Svengali’s cruel domination of his hapless hypnotic subject from viewing a demonstration of a subject’s complete, amnesic **dissociation** in a hypnotist’s office. In the late 19th century, both natural split personalities and artificial personality splitting (by suggested amnesia under hypnosis) were hot new items in psychological research.¹ The young female whose hypnotic submission was demonstrated to Du Maurier was an unknowing, chronic, hypnotic subject, an **artificially-split personality**.

The novelist watched her be hypnotized, made to obey commands under trance, then awakened. He saw her obedience to posthypnotic commands and her rationalization of them as being freely willed choices. He observed her total unawareness of the previous trance state. He realized the tragic potential for abuse of such a long-term, unknowing, hypnotic subject.

Svengali and Trilby

The novel, *Trilby*, published in 1894, contained some minor technical errors. Nevertheless, it introduced the basic, sordid facts of hypnotic exploitation to a mass readership.² By the vehicle of fiction, it presented important facts about abusive hypnosis. DuMaurier’s tale of poor Trilby stimulated a much needed public awareness,

1. Stevenson’s tale of Dr. Jekyll and Mr. Hyde was another literary representation of this type of research.

2. Readers now need better technical explanations and plainer speaking on this subject than any novel can provide. They need facts, stated as facts, to combat the flood of lies, claimed to be truth.



and discussion, of unethical hypnosis. What Svengali did to Trilby has never quite been forgotten, despite ceaseless efforts by the hypnosis lobby to discredit the basic facts.

In the novel, Svengali, a middle-aged, unsuccessful musician, captured Trilby by a disguised induction, then hypno-trained her into a split personality (and a brilliant singer). Thereafter, she kept her puppetmaster, Svengali, living in luxury, supported by her concert performances. She always sang in an amnesic trance.¹

He began Trilby's conditioning by persuading her to agree to a Mesmer-style induction by passes:

Svengali told her to sit down on the divan, and sat opposite to her, and bade her look him well in the white of the eyes.

“Recartez-moi bien tans le blanc tes yeux.”

Then he made little passes and counterpasses

1. In reality, subjects cannot be so totally metamorphosed by hypnotic suggestions from talentless to skilled. It is not possible to make somebody who croaks like a frog into a concert-quality singer by means of hypnosis. Du Maurier wasn't all wrong, however. Any training is enhanced by adding a trance component. Trainers, from sports psychologists to motivational specialists, now use visualization-relaxation inductions to create trance and then give suggestions to their students.

on her forehead and temples and down her cheek and neck. Soon her eyes closed and her face grew placid. (Du Maurier, p. 69)

In the novel, as with real-life subjects, Trilby did not understand how a seemingly harmless first submission to hypnosis can develop into a terrible longterm mind slavery. Svengali gradually transformed her from a proud, independent person into an obedient hypno-tool. Now she lived a cruel, secret life in addition to the “real” life that she consciously lived.

*Conceited, derisive, and malicious, he alternately bullies and fawns in a harsh, croaking voice...Though Trilby is repelled at first by his greasy, dirty appearance and regards him as a spidery demon or incubus, she becomes completely his creature under his hypnosis....Gecko...[is] a young fiddler, small, swarthy, shabby, brown-eyed, and pock-marked; a nail-biter. Though he loves Trilby he helps Svengali train her...so that Svengali may exploit her. (Magill, *Masterplots*, p. 1158)*

At the story’s end, foul Svengali dies. Trilby dies a few hours after. (DuMaurier’s presumption that a mind-controlled victim cannot survive without the puppet master is false.) The novel concludes with Gecko, Svengali’s assistant, trying to explain to Trilby’s grieving former friends what happened to her—and how a hypnotic split personality functions:

Gecko sat and smoked and pondered for a while, and looked from one to the other. Then he pulled himself together with an effort, so to speak, and said, “Monsieur, she never went mad—not for one moment!...She had forgotten—voilà tout!”

“But hang it all, my friend, one doesn’t forget such a...”

“...I will tell you a secret. There were two Trilbys. There was the Trilby you knew...But all at once—pr-r-r-out! presto! augenblick!...with one wave of his hand over her—with one look of his eye—with a word—Svengali could turn her into the other Trilby, his Trilby, and make her do whatever he liked...you might have run a red-hot needle into her and she would not have felt it...”

“He had but to say ‘Dors!’ and she suddenly became an unconscious Trilby of marble, who could...think his thoughts and wish his wishes—and love him at his bidding with a strange unreal factitious love...When Svengali’s Trilby was singing—or seemed to you as if she were singing—our

Trilby was fast asleep...in fact, our Trilby was dead...and then, suddenly, our Trilby woke up and wondered what it was all about...” (Du Maurier, pp. 456-459)

Trilby is now back in print (Everyman, 1994), an old fable that refuses to be forgotten. Svengali, the name that DuMaurier gave to Trilby’s evil hypnotist, is the author’s best known character. The mere word is resonant with sinister implications. A **Svengali** is “one who attempts, usually with evil intentions, to persuade or force another to do his bidding.” (**Webster’s Ninth New Collegiate Dictionary**)

Exploitation of Female Stage Mediums

The publication of DuMaurier’s novel wound up a century of European hypno-abuse of genetically susceptible persons, especially young women. *Trilby* spotlighted the specific problem of hypnotic exploitation of women (and men) in the theater world.

The use of somnambulist (highly-conditioned) mediums on stage, or in **seances** serving smaller audiences, was common in that era. The **medium** tended to be young, female, and attractive. She was a highly susceptible hypnotic subject, of course—and not protected by strong and prosperous family connections.

The use of hypnotized women on stage for entertainment emerged from eighteenth century scientific demonstrations of trance and medical hypnosis. Scientific researchers regarded their subjects as means to an end, as useful objects whom they manipulated like laboratory rats to prove, or disprove, their competing hypotheses. Medical hypnotists who were followers of Charcot viewed their patients being treated by hypnosis as disgusting neurotics. Their mechanistic mind manipulations respected only the knowledge and will of the operator. Unethical hypnotists viewed subjects as possessions destined by inborn genetic susceptibility to be ruled by the power of any master who made the effort to acquire and manipulate them. Most hypnotists scorned their subjects for the very quality they worked hardest to develop in them: mindless obedience.

Du Maurier may also have read the autobiography of Charles Lafontaine before he wrote *Trilby*. Lafontaine failed as an actor, but then became wealthy as a stage hypnotist. The secret of his success on stage was not his own talent, but that of his female hypnotic subject. Lafontaine

*...taught her a theatrical role that she then performed beautifully on the stage before a large audience and of which she could remember nothing in her waking state. (Ellenberger, *The Discovery of the Unconscious*, p. 157)*



He might have read Auguste Lassaigne's autobiography. Lassaigne was French, born in 1819. He was just a touring solo juggler the day he watched an 18-year-old girl named Prudence receive treatment from a magnetizer. Observing her somnambulist behavior, he became fascinated with the possibilities of hypnosis. Perhaps, he also suddenly envisioned a more prosperous professional future for himself. He courted and married Prudence. Thereafter, she traveled with Auguste, and his act became a stage show in which he hypnotized her.

Offstage, Auguste used hypnotic suggestions to sexually arouse Prudence, which produced "heavenly voluptuousness." His control, however, was imperfect; an angry Prudence could resist induction! (*Ibid.*)

In 1894, the same year that *Trilby* was published, a legal case involving a disreputable psychic healer, Ceslav Lubicz-Czynski, was reported. He had a chronically abused medium:

He made use above all of a method which nowadays is hardly ever applied and which was called "Psychic Transfer." He hypnotized a female employee who served him as a medium (and at the same time as a lover) and suggested to the patient sitting nearby that his pains and sufferings would be transferred to the medium. (Hammerschlag, p. 35)

In deep trance, the young woman was caused to experience other people's ailments, daily acquiring her mental version of their pains and suffering. How cruel! The sexual exploitation was also objectionable, for Czynski was at that time pursuing a rich aristocratic client, the Baroness Hedwig von Zedlitz, with the hope of marriage to her. He conducted his "courtship" during his hypnotic services to her. That is what caused the legal case (not his psychological and sexual abuse of the medium), for the Baroness said "Yes" under hypnosis—and her relatives reported the matter to the police.

"Voodoo Death" on Stage

In 1894, another hypnotist, Franz Neukomm, also made European news. Ella first was hypnotized by two doctors who were hired by a "relative" to treat her for a "nervous ailment." Their power of suggestion temporarily suppressed the symptoms, but then she got even worse. Neukomm happened to be passing through, and her relative took Ella to be mesmerized by him. He also achieved an effective cure of her problem. Neukomm then saw opportunity knocking. He convinced Ella's relative that the som-

nambulist girl might again relapse in the absence of his hypnotic influence and therefore should remain in his care. He would look after her without charge. Her relative then abandoned Ella to Neukomm. Thereafter, she traveled with the hypnotist as his medium. Neukomm was "effective," to say the least. One day, he suggested to Ella that a cold needle, which he placed on her hand, was red-hot. Its touch then produced a real burn on her hand (a known somnambulist phenomenon).

During each show, Neukomm invited an ailing volunteer from the audience up on stage. Then he would hypnotize Ella and give her a suggestion to place herself in the mind of the patient and provide information about his or her state of health. The night that Ella died, Neukomm, to increase the audience's sense of drama, had changed his hypnotic instructions in a small, but significant way. He told Ella, "Your soul will leave your body in order to enter that of the patient."

Ella showed an uncharacteristic, strong resistance to that hypnotic suggestion. She tried to deny it.

Imperious master Neukomm deepened her trance, and firmly repeated the "leave your body" command. Once more, she resisted. He further deepened the trance and repeated the command again.

Ella Salamon died. The postmortem stated that heart failure, caused by Neukomm's hypnotic suggestion, was the probable cause of her death. Neukomm was charged with manslaughter and found guilty. (**Schrenck-Notzing, 1902**) Ella's death was similar to what anthropologists call "voodoo" death, death by suggestion.¹

Hypnotic Subject Killed on Stage

In another case of that era, a stage hypnotist named Flint was performing in Switzerland, when his program went terribly wrong:

One of his acts was to lead on to the stage his wife, who was his partner in the show, and bring her to a state of rigidity. He would then place a heavy piece of rock on her stomach and invite volunteers from the audience to come and smash the rock with a hammer. One night a member of the audience misjudged his blow with the hammer and, instead of smashing the rock, he hit the performer's wife and caused internal injuries from which she died shortly afterwards. (Magonet, pp. 19-20)

1. Numerous cases of death by suggestion are recorded in G. Frazer's classic, *The Golden Bough* (N.Y.: Macmillan, 1931, p. 204, etc.). More deaths caused by suggestion, "belief," are described in W. B. Cannon's article "'Voodoo' Death" (*American Anthropologist* XLIV (1942), 169-81. Reprinted, abridged, in *Reader in Comparative Religion An Anthropological Approach*, W.A. Lessa and E. Z. Vogt (eds.). N.Y.: Harper & Row, 1965.)

Abusive Hypnosis in Literature

When novelists write about unethical hypnosis, they deal with issues of dominance versus submission, the predator's technical expertise versus the subject's ignorance, and betrayal versus trustworthiness. In storyland, however, the mind-controlling villain never enjoys a final victory.

In the late 1800s, the subject of hypnosis dominated in French nonfiction publishing. Some years, every book published in France was about hypnosis. French fiction writers also wrote about it. Alexander Dumas, author of *The Three Musketeers*, wrote six novels which involved mesmerism, "The Marie Antoinette Series." De Maupassant's last short story, "Le Horla," featured a man who realizes he is a victim of predatory hypnosis. E.T.A. Hoffman was another European writer who was fascinated by hypnosis. His fiction is saturated with every aspect of it. He viewed deep trance as true penetration of the hypnotist's mind into the subject's mind. Hoffman said that hypnotism

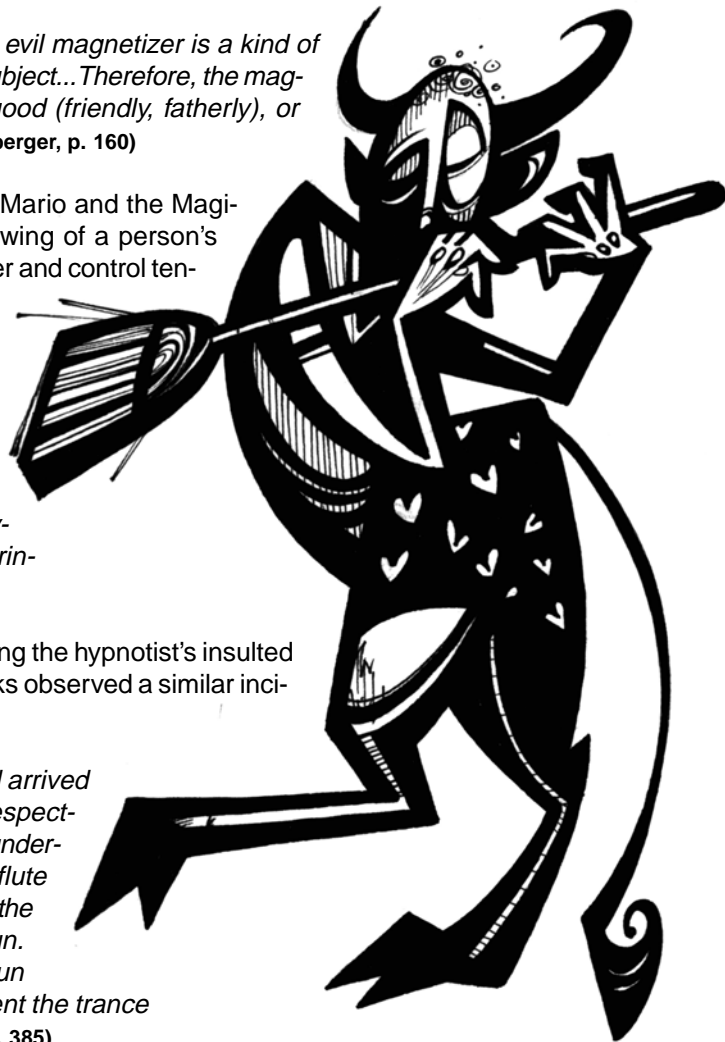
...can be either good or evil. The evil magnetizer is a kind of moral vampire who destroys his subject...Therefore, the magnetic relationship can be either good (friendly, fatherly), or evil (demoniacal). (quoted in Ellenberger, p. 160)

Thomas Mann's 1931 story, "Mario and the Magician," sees hypnotism as an overthrowing of a person's normal duality and balance of surrender and control tendencies:

...the capacity for self-surrender,...for becoming a tool, for the most...utter self-abnegation, was but the reverse side of that other power to will and to command. Commanding and obeying formed together one single principle, one indissoluble unity.

Mann ended that story by letting the hypnotist's insulted subject hit back. Dr. George Estabrooks observed a similar incident in real life. He...

...attended a stage exhibition and arrived late. He was horrified to see a respectable acquaintance stripped to his underwear with a broom handle for a flute gamboling around the stage under the delusion that he was a Greek faun. Highly gratified also to see the faun knock the hypnotist flat the moment the trance was removed. (Young, in LeCron, p. 385)





Case History: “Z” Kantor



No controllable force for good ever existed that was not used, at times, for evil, simply because man has a free will.

- Melvin Powers' Foreword to Hammerschlag's *Hypnotism and Crime*, 1957 edition, p. 5)

“Zebediah” Kantor sat in jail, in shock, his life in tatters (his left elbow also in fragments), trying to comprehend why he had “confessed.”¹ A jail guard, killing time on the other side of the bars, was chatting with the depressed former school teacher. The guard was talking about Zebediah’s friend and next-door-neighbor, Adam. He said Adam had told police that he robbed Zebediah’s house and set it on fire because Zebediah had caused him to do so using hypnosis. Zebediah, puzzled, insisted to the guard that he had never hypnotized anybody in his life; He did not know how and never had any interest in learning. The

officer left to tend to duties.

Zebediah sat and thought about **hypnosis**. He remembered that one night the hands of the big old clock in his living room had suddenly, inexplicably leaped forward several hours. He recalled the times he had met with Adam and let him empty his wallet—and afterwards he couldn’t understand why he had allowed it. He remembered other mysterious events. As Zebediah reviewed the past seven years of his life, inserting hypnosis as the missing piece, all those formerly inexplicable incidents made sense. Now

1. Researchers don’t know “Z” Kantor’s real first name, nor do they know any name for the man who victimized him by hypnosis. They have called Mr. Kantor “Z,” and his hypnotist, “A”—as in “A” hypnotized “Z.” I choose to call them “Zebediah” Kantor and “Adam”—as in Adam hypnotized Zebediah.



Zebediah knew: Adam had victimized him using hypnosis!

Zebediah Kantor

At college, Zebediah had been a conscientious student. He enjoyed sports and was popular with the other students. After graduation, he took a teaching job in the German province of Thuringia. He looked forward to a secure, comfortable, respectable life as their village school teacher. As was the custom, he lived in the school house.

It was the best time of his life. He liked his job; his students liked their teacher; the community respected him. He gave piano lessons on the side and soon fell in love with one of his students, the station master's young daughter. She cared for him also, and they became engaged. In the meantime, he had inherited a little house and a general-goods store, which provided additional income from house rental and sale of merchandise in the store. He handled his money well and invested spare income in stock.

Being sensible, practical, happy, friendly, and in love, Zebediah seemed to have a good life ahead. He made one big mistake, however, that destroyed his life. The mistake was his friendship with Adam.

Adam Begins the Hypnosis

Adam was Zebediah's next-door neighbor. Adam was a 38-year-old groundskeeper for an adjacent estate. He had no formal education, no wealth, and no morals. He was "a primitive, vulgar criminal type from a low social level" (Reiter,

Missing Time

Two early European research hypnotists considered the missing time of amnesic hypnotic subjects and said:

*The subject is unable to measure the length of time she has slept, and if she attempts to do so she makes the gravest mistakes... The hypnotic subject has no land-marks by which to measure the void which this sleep produces... (Binet and Fere, **Animal Magnetism**, p. 365)*

Years later, an experimental subject in the U.S., like Zebediah, figured out he was missing time. He also reasoned from his discovered circumstances something of what had been done to him during that missing time:

When I sat down for you to hypnotize me I pulled out my watch and it said 6 o'clock. I started to put it back, and then I took a second look at it and it said 10 o'clock. But before I could figure that out, I noticed that it was dark outside, my coat and tie were off, my sleeves rolled up, and I was just about exhausted, and it really was 10 o'clock... I could lose consciousness like that, and it's happened lots of times... (In M.H. Erickson, 1938, "A Study of Clinical and Experimental Findings on Hypnotic Deafness: I," p. 144)



1958, p. 60). He had been in prison several times, and he was on his second marriage.¹ Unknown to Zebediah, one of Adam's areas of criminal expertise was hypnotism.

Adam started out with small acts of seeming kindness. He began to drop by Zebediah's house, on some pretext or other, almost every evening. The bachelor school-teacher always welcomed him, treated him like a prince, and shared the best he had (wine, cigars, liqueurs). Zebediah lived alone, but he kept his home neat, and he enjoyed company. It helped to pass the time after work in that era before radio, television, and tapes. Zebediah was also a gentleman, and, as such, did his best to enjoy and to respond politely to the older man's conversation.

To Zebediah, Adam seemed only to be a rather long-winded and boring speaker who droned for hours on obscure and confusing subjects. The teacher, weary after his hard day's work, and sated with dinner and wine, tended to fall asleep during his guest's monotonous, meandering monologues.

Adam noted Zebediah's developing habit of falling asleep while he talked. Every time Zebediah fell asleep in his presence, he began to murmur specific **suggestions** designed to further transform the teacher's normal sleep into an operator-managed hypnotic trance. Adam had combined two methods of **disguised induction**. One was his typical boring, confusing monologue, a **conversational induction**, which would literally put Zebediah to sleep. The other technique took advantage of the natural light hypnotic state all people pass through when in transi-

tion from waking to sleeping, a **sleep induction**.

Zebediah happened to have inborn **susceptibility** to suggestion. His unconscious responded to Adam's persistence and coaxing and it became ever more trained and more vulnerable to further training. Adam suggested that Zebediah would have amnesia for all time under hypnosis. Each time that Adam hypnotized Zebediah, he reinforced the amnesia by repeating that suggestion.

When he tired of giving suggestions, Adam would go home, leaving Zebediah asleep, and/or hypnotized, in his chair. Zebediah would wake up later, alone in the house, with no idea that anything unusual had happened.

After the fourth successful sleep induction, Adam gave Zebediah a post-hypnotic suggestion that he would wake up the next time his clock struck the hour. Zebediah did that. He did not remember falling "asleep." He had no awareness of missing time. It seemed to him as if the hands of the clock had simply leaped ahead several hours. He saw that Adam had gone home.

Zebediah now was Adam's unknowing hypnotic subject. He was a trained somnambulist. Adam no longer had to go to the trouble to bore him to

sleep. Now Adam could instantly drop Zebediah into an amnesic trance, at any time, simply by presenting a predetermined cue.

Exploitation

Adam's hypnotic exploitation of Zebediah began



1. It astonished class-conscious Europeans when they later heard that such a common man had made an obedient hypnotic subject out of a gentleman. The European upper classes had eagerly experimented with hypnosis for over a century before this case happened. The upper class had hypnotized whoever was handy: mental patients, medical patients, hysterical young females, peasants on the estate, ignorant people from the village, troops in the brigade. Some entrepreneurs trained talented subjects to be "mediums" for profitable "medical" consultations, or to give parlor somnambulist performances, called "seances," or even public stage shows. After the same scenario of "low class" predator/higher-class victim repeated in the cases of Mrs. E. and Palle, the idea did not seem so preposterous.

in 1921. It continued for 12 years, until 1933. When Adam first exploited his secret power over Zebediah, he started with small things. If Zebediah noticed, it probably did not seem very strange to him to be giving, or “lending,” money, wine, cigars, and so forth, to his neighbor. Adam never paid Zebediah back. The hypnotist demanded ever harder and crueler amounts of money from his subject. Once Adam got his hook into Zebediah’s unconscious, he extracted every possible dollar from him.

Adam also made Zebediah shoot himself using **posthypnotic suggestion**. The hypnotic instruction was: if Zebediah heard Adam say “Herr Kantor: Machen Sie keine Dummheiten!” (“Mr. Kantor, don’t do anything stupid!”), then Zebediah was to rush home, get his gun, and shoot himself in the left hand. Ten days later, Adam actually spoke that cue sentence to Zebediah.

It was a Sunday. Zebediah was happily strolling through the town streets, with his sweetheart on his arm, when he happened to encounter Adam. We all have cues we respond to. In Adam’s case, perhaps it was the sight of Zebediah being respectable, successful in his occupation, and happily in love—despite all Adam’s predations so far. The sight led to the thought, and the thought is parent of the deed. In a joking tone, Adam called out to Zebediah as they passed, “Herr Kantor: Machen Sie keine Dummheiten!”

When Zebediah heard the cue phrase, his response was automatic. The reflexive level of his mind began to carry out the sequence of tasks as specified (go home immediately, get the gun, and shoot himself in the left hand). Zebediah told his fiancée that he needed to change clothes (a **rationalization**). He then he rushed home, leaving her standing, bewildered and alone, in the middle of the road.

When he got home, however, Zebediah did not change clothes, because getting home cued the next step in his unconscious instructions. Instead, he searched for his revolver, found it, and took it out of the drawer. Then “the gun went off and he was hit in the left elbow joint.” (Reiter, p. 61) The bullet shattered his elbow. From then on, Zebediah’s left arm was crippled.¹

After the incident, Zebediah again rationalized. He said that his hand cramped, and that the cramp had caused him to release the safety and pull the trigger. He believed it was just an accident.

Zebediah’s unconscious, however, knew the whole story. It was becoming overburdened with painful experi-

ences repressed by Adam’s amnesia suggestions. As a result, Zebediah “became nervous and irritable and carried out his work absentmindedly and automatically.” (Reiter, 1958, p. 62) All the teachers had to take—and pass—a standard examination given by school authorities every year in order to keep their job. In the spring of 1925, Zebediah, unable to concentrate, failed the test. He now had no teaching job. He could not do manual work because of his crippled left arm.

The next time Adam visited Zebediah, he suggested that Zebediah sell his home (Zebediah still owned the house and store) and share the money with him. Adam made that suggestion to Zebediah without first hypnotizing him.

Zebediah said “No.” He was not consciously aware of his hypnotic victimization by Adam, but he sensed intuitively that there was a problem. He felt controlled by him, and had tried, unsuccessfully, to end their relationship.

Again without hypnotizing Zebediah, Adam next proposed that they should together set fire to his house and collect the insurance money. Despite his financial problems, Zebediah also indignantly rejected this proposal.

Adam then hypnotized Zebediah. He compelled him to draw a house plan to be used as proof to the insurance company of the house’s interior design and its valuable contents. Later, Adam set Zebediah’s house on fire. Zebediah did not know that Adam had done that. When Zebediah received his insurance payment, Adam used his hypnocontrol to acquire the larger part of the money from Zebediah. He let Zebediah have just enough cash to repair his scorched house.

It is the nature of things that greed is never satisfied. Adam hypnotized Zebediah and caused him to write a household inventory which included non-existent possessions and which greatly over-estimated the values of his real household goods. Then Adam gave Zebediah a post-hypnotic suggestion to take a vacation trip.

When Zebediah returned, he discovered that his house had been burglarized and some belongings stolen. He reported the thefts to the police. He gave the false inventory to the insurance company. He had no conscious knowledge that the information was false. He did not know that Adam had committed the thefts. The insurance company paid and Adam ended up with the money.

1. In a Norwegian case, the hypnotist suggested his subject’s arm had no feeling, then instructed him to shoot himself in that arm. The subject did so. The goal was insurance money. (Polgar, *The Story of a Hypnotist*, 1951)



Adam decided to repeat the scam. He again hypnotized Zebediah, caused him to write an inflated, false inventory of his household possessions, and gave a post-hypnotic suggestion for an out-of-town trip. While Zebediah was gone, Adam again broke into his house. Zebediah came back, saw what had happened, and again called the police and the insurance company. The insurance company again paid out a large sum. Again the money ended up in Adam's pocket.

Arrests and Jail

It came to the attention of the police that Adam had much unexplained prosperity—and goods stolen from Zebediah's house in his house. The police accused Adam of the two burglaries of Zebediah's house, arrested him, scheduled a court date, and then turned him loose until the trial. Adam then went to Zebediah's house, hypnotized him, and gave a very complex posthypnotic suggestion.

The cue for enactment would be Adam saying, "Herr Kantor! It's no use any longer—tell them everything!" Upon hearing that cue, Zebediah was to "confess" that he, himself, had thought up all the criminal schemes. He was instructed to declare that he was the guilty one. And he should be the one on trial. Zebediah was to explain that his criminal idea was caused by money problems and that he had persuaded Adam to help him carry out his plans.

Adam figured that, after Zebediah confessed to setting up the whole thing, and to tempting and entangling his poor, ignorant neighbor with money to commit the burglary—the law would come down hard on Zebediah and lightly on him.

Mr. Kantor (amnesic, as usual, for the hypnosis), knowing nothing of the self-incriminating posthypnotic

suggestions awaiting cue in his unconscious, went to visit his fiancée's parents. They told him of Adam's arrest and court date. Zebediah believed the police were mistaken. He told his hosts that he hoped the real thief would soon be identified and arrested.

While Zebediah was visiting with his in-laws-to-be, Adam returned to the police station. There he announced that he had decided to confess the whole story. He said they were right: he committed the burglary—but only because Herr Kantor had persuaded him to do it. The police then found and arrested Zebediah. They said that his accomplice, Adam, had fully confessed. Zebediah, now with a felony charge against him, was astonished. He indignantly protested to the police that he was innocent.

Karl du Prel

Karl du Prel was a German hypnosis researcher. In an 1889 book (*Das hypnotische Verbrechen und seine Entdeckung*), he predicted that the developing technology of hypnosis might create a new and very dangerous type of criminal. He said it, in such a case, it might be very hard to find evidence because of hypnotically-suggested amnesia, suggested false memories, and/or hypnotic manipulation of the testimony of witnesses. He said that suggested amnesia for events under hypnosis would be the biggest problem for criminal investigators. Du Prel also worried about the possibility of sealing suggestions, which would prevent easy rehypnotization of the victim.

Du Prel felt that the growth of hypnotic technology required a parallel increase in knowledgeability on the part of lawyers and jurists. He suggested that police authorities should be prepared to use hypnotism to detect crimes involving hypnotism. He urged that the public be warned that anybody who allows himself to be hypnotized takes a chance. He wanted to prohibit hypnotism, except with clear safeguards.¹

The police then brought Adam into the room to confront Zebediah, as Adam (having experience with the judicial system) knew they would. Adam then...

...confidently, almost triumphantly, brought out the cue. It caused a lightning change in Zebediah, as if he received a shock. He collapsed completely and confessed, exactly as he had been ordered to do under hypnosis. (Reiter, 1958, p. 62).

Zebediah was held in jail. Adam was allowed to return home. Before he left, Adam thought of a way to make Zebediah look even worse and himself look even better. He

told police that Zebediah had been hypnotizing him and had used hypnosis to make him commit the crimes.

After the jail guard passed that information on to Zebediah, he finally recognized what his problem really was. From his jail cell, Zebediah then wrote letter after letter to both the authorities and to his defense attorney. He passionately begged for a careful investigation of his case in

1. In "Hypnosis in Criminology" (*Brit. J. Med. Hypn.*, Summer 1950, 1, 17), Alexander Cannon surveyed some European writings on unethical hypnosis and cited Karl du Prel at length.

the light of his new understanding. He obtained an examination by a medical doctor with some training in hypnosis, hoping that the doctor would offer the court proof of his victimization by Adam, but the doctor refused to get involved.

Trial

Zebediah went bravely to his trial, secure in the knowledge that he was innocent. He now knew what had really happened and he felt that he could explain it. He trusted that the truth would be enough.

But the judge did not believe him. Even his own defense lawyer did not find Zebediah’s version of the facts credible.

It was unthinkable that a primitive and uncultivated type of person such as Adam would be able to hypnotize an intelligent, educated man such as he and, what is more, turn him into a slave and automaton for his own criminal ends. (Reiter, 1958, p. 63).

Furthermore, even if it were true that Adam had hypnotized Zebediah, everybody in that courtroom believed in the “**dogma of moral integrity.**” According to that legal concept, it was the subject’s fault if he obeyed a self-injurious or criminal suggestion given by a hypnotist because only an evil person obeys an evil suggestion. Not all hypnotists believed the dogma of moral integrity, but no disbelievers testified at Zebediah’s trial.

Losing on the dogma issue, Zebediah then pinned his hopes on his legal right to confront the accuser. He demanded a face-to-face confrontation with Adam in court. He was sure that he, now knowing the truth, could force Adam to tell the truth to the court.

He did not realize that conscious awareness of being a hypnotic subject and conscious profound determination to never again be hypnotized are easily overpowered by unconscious hypnotic conditioning. He did not know that a conditioned hypnotic subject—who has realized his situation—tends to respond to the hypnotist’s presence with fear, guilt, and confusion.

...though his existence was at stake, as soon as Adam was brought in, he was so influenced by his presence that his manner became uncertain and confused, and when he saw Adam’s mocking look and self-confident bearing he began to stammer. Nobody believed what he said. (Reiter, 1958, p. 63)

Adam whined to the judge during his testimony that he was just “an ordinary fellow.” He said that he had

no idea what hypnotism was, but that he had been persuaded, by the cunning and deceit use of it by Zebediah, to assist in those criminal projects. The court rejected Zebediah’s statement and believed Adam’s.

Zebediah did not give up. He proved that the insurance money from both burglaries ended up in Adam’s pocket. The court, however, still refused to believe his statements about hypnosis. At the trial’s end, Zebediah was sentenced to thirteen months in jail. Adam got eight months, and everybody’s sympathy, for being the ignorant, honest man who was deceived and taken advantage of by Zebediah, using hypnosis.

While in jail, Adam pursued a new money-making scheme. He attempted to blackmail Zebediah’s family, threatening to tell police about Zebediah’s house being torched and the old insurance swindle based on that (which had not come up during the previous trial)—unless they paid him hush money.

Confident of their son’s innocence, however, Zebediah’s family refused to pay Adam. Instead, they found a better lawyer to defend Zebediah. His new lawyer took Zebediah’s version of the case history more seriously than the previous one had. He obtained a ruling from the judge that Zebediah and Adam should not again be in the courtroom at the same time. He asked the judge to have both imprisoned men “put under mental observation.”

Showing their prejudices, the police kept Adam in a regular facility, but sent Zebediah to a mental hospital for the evaluation. The hospital’s director had no experience with hypnotism, and he firmly believed that a hypnotic subject could not be made to do anything against his will. The psychiatrist stated that Zebediah was “weakwilled and vacillating, a psychopath and a neurotic who had no understandable motive for his criminal actions.”¹ He interviewed Adam in jail and described him as “purposeful, energetic, and resourceful, a typically brutal and callous blackmailer...” (Reiter, 1958, p. 63)

Dr. Kroener Learns the Truth

The lawyer could not get Zebediah out of jail. After his client served the time and was released, the attorney sent Zebediah to be evaluated by the skilled psychiatrist and experienced hypnotist, Dr. Kroener. In the beginning, the doctor assumed that Zebediah was lying. However, as he worked with Zebediah, session after session, under hypnosis, during two months of 1927, the doctor gradually changed his mind. He concluded that Zebediah’s crimes actually had been caused by Adam’s hypnotic suggestions.

Perhaps Kroener also implanted a suggestion that blocked Adam from ever hypnotizing Zebediah again. For,



either by that blocking, or by total avoidance of Adam, Zebediah managed to never be victimized by his neighbor again. The doctor's belief in Zebediah's story must have been a precious comfort in this difficult era of that unfortunate man's life. For, his fiance had rejected him and the school district would not hire anybody with a criminal record, even if he could pass their test.

But Zebediah's lawyer and Dr. Kroener were working on a plan which they hoped would exonerate the school teacher. In 1929, Kroener hypnotized Zebediah again. This time, seven witnesses and a stenographer (who recorded 126 typed pages) were present. One of the witnesses was Professor Arthur Kronfeld, another noted German hypnosis expert. Both Kroener and Kronfeld wrote reports stating their professional opinion, that Zebediah had been victimized by Adam using hypnosis. The lawyer enclosed those reports when he applied to reopen the case.

The court of appeal agreed that new facts had come out, but refused to allow a full-process appeal. They based that verdict entirely on the dogma of moral integrity: if Adam could cause Zebediah, by means of hypnosis, to do immoral things, it proved that Zebediah was an immoral person.

Kroener's Book

Dr. Kroener wrote a book about Zebediah's case, seeking to present the case to the higher court of public opinion. His manuscript would have been the first modern psychiatric study of a victim of unethical hypnosis, and the first recorded memory recovery, by rehypnotization, of a survivor of unethical hypnosis. However, nobody read it because, immediately after its printing, the German government banned it. Whoever put up the substantial money for his publishing venture lost it all.

In 1936, another case of unethical hypnosis went on trial in Germany. That time, two hypnotists went to jail, not their victim. After the trial, Dr. Kroener contacted Dr. Ludwig Mayer, the psychiatrist who had managed to discover the truth and cause the hypnotists to be the losers in court. Dr. Kroener told Dr. Mayer about Zebediah's case. When Mayer wrote a book about his client (published in 1937), he included in it a summary of Zebediah's case history.

Post-War Events

When Germany sank into the dark maelstrom of Naziism. Dr. Kroener, a Jew, emigrated. When he returned, 17 years later in 1952, he searched for Zebediah and his lawyer. He learned that both still lived, and contacted them. Zebediah soon traveled to Berlin (it was the summer school holiday) to, once again, be hypnotized by Dr. Kroener. Zebediah was now age 56. He long since had been working again as a school teacher. His current job was in a large city school in the province of Franconia. His behavior record, since release from jail in 1928, was spotless.

Zebediah had 15 more sessions with Kroener—all tape-recorded, transcribed, and annotated. Although Zebediah's conscious memory of those old happenings was now fuzzy, but under hypnosis he remembered it all clearly. His story, remembered twenty years later, was unchanged.

During the Christmas holiday that year, Kroener visited Zebediah in Franconia. The psychiatrist asked Zebediah's permission to publish the book about him. Zebediah hesitated. He knew that publicity could compromise his job, yet he deeply yearned for the truth to be known and his innocence to be, at last, firmly established. He said, "Yes." A few days later, somebody circulated printed matter referring to the old charges against Zebediah. The old teacher immediately was fired from his job.

Then Dr. Kroener heard of another successful prosecution (in the Danish court system) of a hypnotist who had given a subject criminal suggestions. The court psychiatrist was an old friend of his, Dr. Reiter. Reiter told Kroener that he was working on a book about his case. It would be published in the United States as well as Europe. Aging and unwell, Dr. Kroener delivered his manuscript, tape recordings, and notes on Zebediah's case to Reiter.

Dr. Reiter added Zebediah's case to his book about Palle Hardwick. The detailed synopses of Zebediah's case history made by Dr. Mayer and Dr. Reiter provide the only remaining public record of Zebediah's sufferings and the struggle of good Dr. Kroener to make public the truth about his case.

Case History: Mrs. E.



[There are]...five cases in which rape took place in hypnotic sleep and under the influence of suggestion [and]... a theft on the large scale which was effected solely by the instrumentality of suggestion. A person who gave himself out as a doctor and hypnotised an ailing woman was able to suggest her handing over to him a fairly large sum of money on which he was able to keep his clutches.

- Janet, *Psychological Healing*, p. 312

In the past, writers have always called her “Mrs. E.” I call her “Anna Evan.” (It isn’t her real name; her real name is unknown.) When this all began, in the 1920s in Germany, Anna was not yet married to Mr. Evan. She had only just met that nice young man. Mr. Evan had a steady job as a minor government official, and had begun to court her. The criminal hypnotist’s name was Franz Walter,¹ but she knew him as “Walter Bergen” and other aliases.

Later, under rehypnotization by a police psychiatrist, Dr. Mayer, Anna relived her years of hypnotic victimization. One day, she tried to explain to Dr. Mayer how life as a conditioned, chronic hypnotic subject had felt:

“I’m no longer the same person as before. Something different controls me. I don’t want to do something, but I do it. Or I want to do something, and

*yet I don’t do it...in the end I thought of nothing more than doing what Walter wanted. If I obeyed I always felt more at ease. Within me I was never free—there was always something oppressing me...I can’t struggle against these pressures...the pressure vanishes when I obey the commands of the inner voice.” (Mrs. E., quoted in Hammerschlag, *Hypnotism and Crime*, pp. 120-121)*

When it was all over, she had been the unknowing hypnotic subject of Bergen for seven years, the wife of Mr. Evan for four. During those seven years, Bergen extorted thousands of dollars from her, used her sexually, sold her services as a prostitute, compelled her to attempt murder on her husband six times, and caused her to attempt suicide several times.

1. The two German cases of Zebediah and Mrs. E. overlap in time. It is quite possible “A” and Bergen knew each other.



The Day It Began

Anna Evan, a naive farmer's daughter, age 17, was riding a train to the city on the day it all began. She intended to find a doctor there who would help her with a minor stomach problem. She traveled alone. Perhaps it was her first solo trip, granted because she was a sensible girl with good values. It can be assumed that she felt rather proud and adult to be traveling alone to find a doctor and get treatment.

Anna found an empty train compartment, entered, shut the door behind her, and seated herself on one of its pair of facing seats. Shortly after, a man opened the door and seated himself opposite her without so much as a "Do you mind?" He introduced himself, "Bergen." She nodded and turned away.

Nothing that I have read about her tells how she looked, so I must imagine that. I think she was almost beautiful, but her nose was a little too broad for perfect features. I think she had sky-blue eyes and thick brown hair, worn long and loose under her demure traveling hat.

Anna wanted to watch the lovely German countryside roll by outside the window, but Bergen pursued her with questions in a lively and friendly manner. She was reluctant to talk to a strange man, but felt obliged by her polite upbringing to answer all his direct questions.

"Where are you going?" he asked. She told him. "What is your purpose?" he asked. She explained her intent to find a doctor and be treated for her stomach ailment. It might be assumed that she felt rather proud, and adult, to be traveling alone to seek a doctor and receive treatment.

"How fortunate we have met," the man said. "I noticed, the moment I came into your compartment, that you are ill. For, you see, I am a nature healer, a homeopath, Dr. Walter Bergen. My office is in Karlsruhe-Daxlanden. And yours is just the kind of illness that I can treat very well."

When the train stopped to take on coal and water at Graben, Dr. Bergen invited Anna to join him in the station for a cup of coffee. She demurred, for he frightened her somewhat. He insisted, however, jovially picking up her traveling bag and carrying it out the compartment door. She stood up and followed her suitcase.

He picked a table for them in the railway station restaurant and ordered coffee for Anna. He made small talk while they waited for the beverage. The waiter brought Anna's cup of coffee and walked away. Dr. Bergen suddenly seized her hand and stared into her eyes. He was channeling so much mental command through that gaze that, after a moment, Anna felt as if she no longer had a will of her own. She felt so strange and giddy.¹



1. For more on this type of induction, see Mind-to-Mind Inductions in Part II.

Bergen's shocking hand-grab, plus stare, technique may never before have elicited such a quick and profound induction response as Anna's. He probably was secretly delighted and amazed at his success. Actually, he had merely lucked onto a genetic somnambulist, 10 to 25% of the population.

Bergen had accomplished a first induction. He probably now considered the delicious long-term possibilities of controlling this young woman through trance and did not let this opportunity escape. It can be assumed that he next pushed her deeper into trance, deep as he could. Then he suggested posthypnotic amnesia, and a posthypnotic re-induction cue: "Whenever I say 'Loxitov,' you will immediately return to this deep trance state, and you will never remember what happens in this state." Perhaps he brought her back to a waking state, then re-inducted using his cue—several times. That training would have strengthened her conditioning, for each re-induction usually causes a subject to go deeper.

He gave further posthypnotic instructions, telling her to obey either verbal or written orders from him. He would use this means to cause her to come back to future meetings with him. He also gave hypnotic suggestions that her stomach would no longer trouble her. He collected the money that she had brought to pay a doctor.

Bergen was not a real doctor. "Bergen" was not his real name. He was a genuine con artist. He could have been reading books on hypnosis for years. Europe of that era had hypnosis texts aplenty. A scholar named Max Dessoir had published a *Bibliography of Modern Hypnotism* listing the numerous books on hypnosis that were published after Mesmer first focused public attention on this subject. Many books were in French, but some were in German. In 1888, Dessoir listed 801 titles. By 1890, there were 1183. Many authors discussed the possibility of abuse of hypnotic subjects, even crime caused by suggestions under hypnosis.¹

Over the next seven years, Bergen often instructed his unknowing hypnotic subject to meet him at the train station of Karlsruhe, or Heidelberg. He would then hypnotize her, lead her where he chose, do with her as he wanted. He gave Anna suggestions to act in a way that would appear normal to other persons (**waking hypnosis**), although

she was hypnotized and amnesic during those visits.

Suggested Sickness, Suggested Healing

The "doctor" angle was very profitable for Bergen. (It is possible to cause paralysis, muscle cramps, and every sort of pain by hypnotic suggestion.² Over and over, he gave Anna psychosomatic ailments. Some of them were very painful. If paid what he demanded, he then cured her by releasing the previous hypnotic suggestion that had made her "sick." One time, he instructed her, "All the fingers of your left hand, except the little finger, will become stiff. You cannot move them any more." (**Hammerschlag, p. 107**)

Bergen's suggestion was cloaked by amnesia from Anna's conscious mind. So, after he was done with her, Anna did not know why she could not unclench her left hand, except for its little finger. No matter how much effort she exerted, it remained shut tight. That painful, inconvenient condition continued for months—until her family gave her the money to pay Bergen's past bill and hire him to renew her "treatment."

When she, at last, was able to pay, Bergen pretended to massage her hand until she could open it. (And he counteracted his previous suggestion that had caused the clenching.) Once her hand could open again, she saw that the growing fingernails had bruised and inflamed her palm. Bergen then splinted and bandaged her hand. After removing the splint, her hand still felt so tired that she could hardly use it.

Mr. Evan remembered that incident too. He told Dr. Mayer, "For...about 8 to 10 weeks, my wife's hand had a cramp. It was impossible to bend her fingers. Another time, for 14 days, her hand was so firmly locked that the inner side was all bruised as a result." (**Mayer, p. 182**) Anna learned to bring Dr. Bergen every dollar she could get. If she did not bring money, he would subject her, by posthypnotic suggestion, to dreadful new pains.

In trance, by Dr. Ludwig Mayer, Anna later exclaimed, "Now I know where all those pains came from!...Sometimes I didn't bring money—because I couldn't get any from my parents or my husband. Then Walter would say, "You will get so ill that they will prefer to pay!" After that, I got the most awful pains, which only vanished when

1. Moll's 1889 German classic, *Hypnotism*, lists ways hypnosis might be used unethically. The list includes: assault on the hypnotized person, especially seduction; posthypnotic suggestion to create a physical problem such as paralysis; causing suicide attempts by posthypnotic suggestion; acquiring property illegally by posthypnotic suggestion to sign a will or other legal paper; causing false testimony in court by suggested hallucinations or suggested falsification of memory; causing subject by hypnotic or posthypnotic suggestion to harm someone else; causing subject to harm himself. That covers most of what Bergen did to Mrs. E.—and what Adam did to Zebediah.

2. Of the possibility of causing physical problems by hypnotic suggestion, a hypnotist wrote:

It is practicable to suggest any sort of hallucination of vision such as color perception, form or object perception, mist sight, double sight, or even absolute blindness...Complete deafness can be suggested, in which case it is necessary to take measures for an adequate signal to remove it, and one may then fire a pistol immediately behind the subject without his reacting. (Reiter, "The Influence of Hypnosis on Somatic Fields of Function," in LeCron (ed), *Experimental Hypnosis*, p. 243)



he took them away by magnetic stroking of me.” (Mayer, p. 131)

Bergen also used Anna sexually—free for himself, and in paid service to other men. He also shared his mental access to her with friends. If one of them spoke Bergen’s posthypnotically designated **cue word** to her, **rapport** temporarily **shifted** from Bergen to whoever had spoken that word. Bergen’s friend then could use all the powers over her that Bergen had developed. One of Bergen’s friends began frequently to participate in her hypnotic exploitation.

Murder Suggestions

It took a long time, but Mr. Evan finally began to voice suspicion of Anna’s “doctor.” The husband had acquired private evidence that her “treatment” included sexual encounters, of which his wife seemed completely unaware. When Walter Bergen realized that Mr. Evan was changing from a convenient supplier of cash to pay Anna’s doctor bills into an active threat, the “healer” began to give Anna hypnotic suggestions to murder her husband.

Bergen tried six times; he failed six times. The failures were partly blind luck, or the grace of God, but also due partly to Anna’s unconscious resistance to this most heinous suggestion. She described all six murder attempts later, under Dr. Mayer’s rehypnotizations, in the presence of her astonished husband.

First, Bergen told her (under hypnosis as always), that she would go to a drug store and buy a poisonous chemical used for furniture cleaning. She would then add that poison to Mr. Evan’s food. When she got home, how-

ever, Anna was gripped by such a mysterious, extreme excitement that her concerned husband would not allow her to leave the house to go shopping. Since Bergen’s hypnotic instructions had been specifically cued for enactment that particular evening, putting them off until the next day disempowered the urge.

Bergen’s second murder scenario was a shooting. He instructed the hypnotized woman, “When you get home, you will take the Browning out of the desk and hide it in a more convenient place. When your husband is sleeping, get the gun, draw the safety catch, and pull the upper barrel back. Hold the pistol at his temple and press the trigger. Then place the weapon in his hand, so that it will seem that he had committed suicide.”

Bergen’s hypnotic command sequence had omitted an important detail. Anna did take the gun out of the desk. She did hide it in a handy place. While her husband slept, she did get the gun. She released the safety catch as instructed, and she pulled the upper barrel back. She held the pistol to husband’s temple and then pressed the trigger. But the gun was not loaded, so her hus-

band was unharmed!

The next time Mrs. Evan was compelled to meet Bergen, she told him her husband was very upset and was seriously considering going to the police. Walter then came up with a third plan: “Give him mushrooms,” he ordered. “Cook harmless ones for yourself in one pan. Cook poisonous ones for him in a different pan—the type with a red skin.”

Consciously ignorant of the murder plan, Anna cooked the two kinds of mushrooms. She served herself

How Intense Can Hallucinated Pain Be?

Raymond Wells did an experiment on creating imaginary pain in a hypnotic subject. He pressed a fifty-cent piece onto a deeply entranced subject’s bare arm. Wells told his subject that the place where he was pressing the metal coin was going to feel first warm, then hot—hot as if the coin he was pressing there was a branding iron. He said the sensation of extreme heat in that place would then remain steady for the next 24 hours.

Wells then brought the student out of hypnosis. He told him to write down his experiences during the next 24 hours, and to report to him the next day. The subject wrote:

2:26—Red, slightly swollen center. (He was apparently having a visual hallucination or illusion of redness and swelling on his arm—Wells)...Center of circle so hot it will not bear touching. Cannot raise left arm above head without increased pain. Pain interferes with holding card to write...Blister more distinct now—at 2.35...Pain severe. Hot. Writhing. So hot, consciousness almost blank. Will not stand this longer than this evening. Can do nothing but try to relieve pain. Hot, sizzling...2.40—Am crying with pain. Can write no more. (Wells, “The Hypnotic Treatment of the Major Symptoms of Hysteria,” *J. Psychol.*, 17:269, 1944.)

At that point, the suffering hypnotic subject stopped writing and started looking for the Professor. When he found him, Wells rehypnotized the student and removed the pain-causing mental instructions. The pain stopped immediately and completely. Wells later wrote:

I am convinced that he would not have suffered more if there had been an actual hot iron pressed against his forearm all the time. (Ibid.)

the nonpoisonous ones. She gave her husband the poisonous ones. He swallowed two spoonfuls, then left the rest on his plate because of their disgusting taste. Two hours later, the poison took effect: stomach pains, diarrhea, and vomiting. Anna had no idea what why her husband was sick. She gave him some mint tea. After a while, he felt better.

The next murder “failure” definitely was caused by Anna’s unconscious fighting of Bergen commands. The hypnotist had given her a packet of white powder and instructions to slip the powder into her husband’s coffee. He warned her that the powder would cause a little bubbling in the coffee, and that she should take precautions so Mr. Evan would not notice the effervescing. As she was traveling home, Anna took the powder out to look at it. Then she “accidentally” spilled most of it. That evening, obeying the posthypnotic compulsion, she put the remainder in his coffee. Even that little caused him severe stomach pain. He went to the doctor for treatment.

When Mayer hypnotized Anna, Mr. Evan was present every session. He was so astonished, during her hypnotic regressions and recall of these murder attempts, that he could hardly stay calm. He confirmed the history of each incident (at last fully explained) for Dr. Mayer. He had, indeed, been sick after the two teaspoons of mushrooms, and after that cup of coffee.

Bergen tried again, switching to a different, even more deadly, method of hypnotic manipulation. He changed from direct murder instructions to an indirect, deceitful presentation of those instructions. He now gave Anna instructions under hypnosis which he claimed would keep her husband safe.

Mr. Evan rode a motorcycle. It had a hand brake and a foot brake. Under deep hypnosis, Bergen told Anna to cut the hand brake’s cable because that would force Mr. Evan to use the foot brake which was “less dangerous.” He then instructed her to “turn the screw of the foot brake several times to the left.” He explained that turning the screw in that direction would tighten it, and thus keep her husband safer. Anna objected. She knew how the mechanism worked.

Walter said, “Your analytical powers are disappearing. You must do exactly as I say!” Then, he repeated the full set of commands again, plus his reassurances that obedience would protect her husband.

Anna carried out the two acts.

Mr. Evan sat, amazed, listening to his hypnotized wife tell all this to Dr. Mayer. Now he understood the why and how of those strange brake failures on his motorcycle! He told Mayer what had happened next. “I was driving after dark, with a friend on my motorcycle. Just before coming to the railroad, which had its barricade down, the headlights of an approaching car blinded me. I didn’t realize how close I was to the barricade. When the oncoming car dimmed its lights, and I could see again, I was only 20 meters from the barricade! I jammed my foot down on the brake. It didn’t hold. It tore through. I pulled the hand brake. It didn’t hold either. I tried to get into first gear, but accidentally went into neutral instead. I hit the barricade, and crashed. Both my friend and I were hurt.”

Though his plan had failed again, Bergen was encouraged by having come so close to succeeding. After Mr. Evan was well enough to ride again, and his motorcycle was back from the mechanic’s shop, the hypnotist gave Mrs. Evan the same set of instructions, again.



Mr. Evan had another motorcycle accident. Both brakes tore through again. He was perplexed because both brakes had just been repaired. When his motorcycle crashed this time, he was riding alone. His arm and knee were injured, but he lived.

Suicide Suggestions

Frustrated by all those unsuccessful murder suggestions, frightened by Mr. E’s reported thoughts of going to the police, Bergen now began giving suicide commands to Anna. First, he told her to obtain a prescription from her doctor for sleeping pills and to swallow the whole bottleful the first night she possessed them. She asked her doctor for sleeping pills. However, he refused to give the visibly upset woman a prescription.

At their next meeting, she told Bergen she had not acquired the tablets. He then “made me feel dreadfully upset. He said I would die in terrible torment, that my whole blood was becoming pus. He said it would be better if I would kill myself rather than suffer through that death. He advised me to jump off the train when it was moving, but



only when I was alone. He said such a death would be painless. I was convinced and firmly decided to carry this out on the way home, because I believed myself to be terminally ill. But, on the train, I got into conversation with an elderly lady to whom I confided my misery. She comforted me and drove away the thoughts of self-destruction.” (quoted in Mayer, 1937, p. 106)

Anna had chosen to converse with the old lady. Almost anybody you discuss suicide with will attempt to comfort you and drive away those thoughts. Anna’s unconscious let them be driven away. Another suicide set-up by Bergen was evaded.

The hypnotist did not give up. On Anna’s next visit, he suggested that her husband loved another woman and wished to divorce her—or somehow get rid of her. In fact, Bergen said over and over to Anna in his hypnotic urgings, her husband was secretly trying to kill her because he was in love with that other woman. (In fact, Mr. Evan had not considered leaving her, nor did he have an affair.) Because of her husband’s (imaginary) betrayals, Bergen said that she would drown herself in the Rhine river.

On the way home, Anna did feel utter despair. She made plans to drown herself in the nearby Rhine River. Her unconscious saved her, this time, by finding a way to alert the housekeeper to Anna’s state of mind, and by picking a time to carry out the command when the housekeeper and several other persons were around. The housekeeper observed Anna’s depression, followed her, and restrained her from drowning herself.

Anna obviously had a problem. Up to this time, however, only her unconscious and Bergen knew the real source of the terrible pressures on her. Mr. Evan demanded, again and again, that she tell him what was wrong. Anna could not tell. She did not know what the problem was. She did not know that Bergen reinforced his amnesia commands with threats to destroy her, if she betrayed him by revealing anything to her husband. If she had consciously known what was going on, she would have reacted immediately and correctly. But her conflict was all unconscious, hidden from conscious understanding, prevented from resolution by the amnesia.

Mr. Evan was married to Anna during the last four years of her hypnotic abuse. At first, he had no idea unethical hypnosis was involved in her situation. Fortunately, he never doubted her sanity. He gradually realized her true situation.

Mr. Evan Goes to the Police

Mr. Evan tried, but he could not track down Bergen on his own. Because of amnesia, Anna did not consciously know when she was scheduled to see Bergen, what his real

name was, where she met him, or where he lived.

Walter Bergen was right to fear Mr. Evan, for he finally went to the Heidelberg Criminal Police office for help in solving the tragic mystery in his wife’s life. He went in 1934, toward summer’s end. He reported that his wife had been duped out of nearly 3,000 marks. He said the perpetrator was a man who had told Anna that he was a doctor and who had given her hypnotic treatments for various health problems. He said the doctor used several names, all false. Neither he nor Anna knew the hypnotist’s real name. Every effort he had made to discover the true name and address of the hypnotist had failed. He told them that he also suspected that the hypnotist had sex with his wife while she was hypnotized, with neither her knowledge nor consent.

After hearing what Mr. Evan had to say, the police called in a psychiatrist, Dr. Ludwig Mayer, the most respected medical hypnotist in all Europe. Dr. Mayer did not believe that unethical hypnosis was possible. In his previous writings, he had always promoted the “dogma of moral integrity,” that it is impossible to completely annihilate a subject’s will by hypnosis.

When Dr. Mayer examined Anna, he found no sign of any underlying illness, mental or physical. Mr. Evan assured the doctor that his wife did not have sickly relatives, was not sickly in her childhood, and had never had mental problems. A series of other psychiatrists and neurologists—at the Clinic for Women, the University of Heidelberg’s Nerve Clinic, and the University of Freiberg’s Psychiatric Clinic—also examined Anna. All agreed she was not mentally ill.

On all topics, except events having to do with Bergen, her memory was normal. Her only mental abnormality was that she could remember nothing having to do with the hypnotist. She had “forgotten everything.” She was, however, able to tell Dr. Mayer the induction cue which Bergen used on her! Bergen would put his hand on her forehead. She would feel dizzy for a moment, and “tired,” and then came the amnesic abyss.

Mayer Cracks the Case

Dr. Mayer asked Anna’s permission to hypnotize her. She gave it. The psychiatrist then used Bergen’s induction cue: the hand on Anna’s forehead. If a hypnotist who is attempting a rehypnotization uses the same induction or deepening routine as the former hypnotist (deliberately or accidentally), progress will be substantial. The first time Mayer put his hand on her forehead, Anna went into trance, but it was only a light state. (Perhaps Bergen had given her sealing and depth-limiting suggestions.)

However, Mayer kept repeating Bergen’s induction cue. Gradually, Anna’s trance deepened. After several

sessions of just repeating Bergen's induction cue, Mayer had this natural somnambulist deep enough for hypnotic regressions. But she still couldn't remember.

Bergen had threatened her unconscious with the worst he could think of if she broke his amnesia rule. If she remembered forbidden information and betrayed his secret, he had warned that she would fall dead, her father would die, and she would endure everlasting damnation in this life—and hell in the next. Dr. Mayer found it slow, tough going to fight those fear-based unconscious amnesia commands and recover Anna's memories. Bit by bit, however,

the memories did emerge.

Mayer's first priority was to identify the predatory hypnotist. He suggested that Anna would hallucinate the hypnotist's face. She did! Bergen's rules, which had made her unable to "remember" his face, did not cover a request to "hallucinate" it! She described that hallucinated face to Dr. Mayer.

The psychiatrist carefully recorded her description, then turned it over to police experts. They noticed that Anna's description matched the face of a man called Franz





Walter who had just been arrested in a nearby town for pretending to be a doctor! They put Walter in a lineup and brought Anna in. She identified him as the man she had met on the train, the man who had seized her hand and stared into her eyes.

Walter, of course, denied everything. They locked him up anyway.

Dr. Mayer continued searching Anna's memory. One day, she visualized for him a letter from Bergen containing instructions to come and meet him. At Mayer's suggestion, she "saw" the exact words of the letter as a positive hallucination superimposed over the blank whiteness of a piece of real paper he had handed her. Anna held the blank page up before her, peered at it, and "read":

I order you herewith to be in the station at Heidelberg on the 18th of this month where I shall expect you at the exit at 4 o'clock. Dr. Bergen. (Destroy this note.) (Hammerschlag, p. 106)

Another day, she relived him taking her through the streets to an unknown place. She had walked with her eyes open, but unable to see anything because of his suggestions that she was blind. He took her to a room, continuing to make those suggestions that she was "blind." He told her to lie down. He said, "You are receiving treatment! Sleep quietly! You know nothing of what has happened here, and you will not know later either!"

At this point, Mayer's hypnotic subject began to shake her head in a physical gesture of "No, no" as she relived this event. She made pushing-away movements with her hands. She began to cry softly. After she awoke from the trance, Anna explained to the doctor, "...now I know!...Through the hypnosis I suddenly know." She sobbed on and on. For a long time, she could not stop crying.

Word Associations

Dr. Mayer made good use of the memory-recovery technique of association, following the verbal, or imagery, linkages in Anna's unconscious memory. The result often was the uncovering of some new fact about the criminal hypnosés that Anna had not consciously remembered.

Mayer chose the cue words from what Anna already had remembered. For example, after Anna recalled being with Bergen in a swimming pool, Mayer asked her to think of "swimming pool" and then describe the next image that came into her mind. Anna said, "I clearly remember a white Turkish towel. It has light blue stripes at the top and bottom. I also saw a towel with lilac stripes at Walter's." The police searched Bergen's room. They found both towels.

Dr. Mayer also obtained cue words by hypnotizing Anna, then telling her to say every word or thought which came into her mind—not regarding whether it made sense to her or not. Her unconscious grabbed this opportunity to provide evidence on Bergen, without breaking his not-know, not-remember rules. It produced a string of incriminating clues: "Shoe—Schuhmacher—5 Mark; Auto—6071; Combarus," and so on. When Anna looked at the list of the words which she had said, after waking up from hypnosis, none of those words and phrases made any sense to her. Under later hypnosis, however, when Dr. Mayer asked her about those cue words, one by one, Anna was able to associate to them.

When Dr. Mayer said "Shoe—Schuhmacher—5 Mark," Anna associated: "Walter bought the yellow shoes in Speyer at the shoe shop. He left his old shoes there and besides that paid another 5 Marks." Police checked it out and confirmed the accuracy of her memory. To "Auto—6071," she associated Bergen once coming to get her in a car with that license number. Police established that Bergen had once borrowed a car with that number.

The day that Dr. Mayer said "Combarus" to her, and then asked what she remembered, was a bad one for Anna. She had instantly plunged into the midst of an intense experience of hypnotic reliving:

She is sitting with Bergen in a hotel lobby. Another man walks up to them. He is a bank branch manager named "Mr. B." Bergen talks to Mr. B. and tells him that Anna will satisfy him. Mr. B. hands Walter twenty Marks (which Walter pockets). Mr. B. leaves. Bergen keeps Anna sitting there a while.

They are alone now. He puts his hand on her forehead. It is his usual cue, used both for induction and deepening of a trance. He presses and says, "Now, with no will of your own, you will do anything the man asks you to do. You will remember nothing of what happens. You will think of the word Combarus, and then go into such a deep trance that you can no longer remember what happens to you or where you have been."

A female servant with strange, brightly-colored hair comes and leads Anna away from pimp Bergen, saying that she must go to Mr. B.

After awakening from that chain of memories, an agonized Anna discovered that she could now remember more. She told Mayer, "Walter did this often. Every time he said the word 'Combarus,' I lost my will power. Until today I knew nothing at all about this. You must think I'm a terrible person. But I'm not a slut and not a bad person. Right now I just want to go straight into the river and drown myself. I'm so ashamed."

Mayer learned that Bergen often used cue words such as “Combarus” as a first step in activating a complex sequence of posthypnotic suggestions in Anna’s unconscious. Bergen would tell the hypnotized woman that, under certain circumstances, she would think of the cue word. She was further instructed that thinking of the cue would then cause her to carry out some further command, or commands.

Bergen’s Assistant

After six months of daily sessions, questioning Anna under deep hypnosis, Mayer discovered that more than one hypnotist was involved in her abuse. However that information didn’t come out under hypnosis. In January of 1935, Mrs. Evan mentioned to him in a normal conversation that she had encountered one of the “criminal police.” Anna said the policeman had insisted that she give him extensive information about her case. She had done that.

The incident sounded improbable to Dr. Mayer, so he double-checked. He learned that, whoever he was, Anna’s questioner was not a legitimate policeman. Logic suggested it was Bergen, but her description did not fit Bergen. Dr. Mayer then questioned Anna, under hypnosis, about the mysterious event. She identified the imposter as one of Bergen’s friends, Alfred. She remembered that Bergen had told her under hypnosis to “comply unconditionally, and without any will of your own, with Alfred’s wishes, if you hear Alfred say ‘Filofi.’”¹

Dr. Mayer learned that, after Mr. Evan began talking to his wife about going to the police, Walter and Alfred had planned ahead for that possibility. Their plan was for Alfred to manage a private encounter with Mrs. Evan, drop her into trance with the cue word, “Filofi,” and then give her instructions. She would, as usual, have complete amnesia for both the encounter and the suggestions. By this means, Walter and Alfred intended to cause great confusion and difficulties for the prosecution during its questioning of her.

The Trial

It required nineteen months of daily hypnosis ses-

sions, each hours long, for Mayer to recover the complete details of all Bergen had done to her from Anna’s unconscious. The police had obtained physical evidence which corroborated her recovered memories. There would be a trial.

Before the trial, Dr. Mayer demonstrated to court personnel how it was possible for Bergen to share with Alfred his hypnotic control of Anna. Dr. Mayer hypnotized her. She went into deep trance. Mayer did not give a suggestion that she would obey only his voice. Mayer’s assistant then said to the hypnotized woman, “You will immediately become hypnotized if I say ‘ten’.” Mayer brought Anna out of hypnosis. His assistant began to count aloud the pages of a manuscript which he held. When he said the number “ten,” Anna’s eyes closed. She was again in a deep trance.

Mayer’s Book

In his post-verdict German-language book about Mrs. E.’s case, Mayer detailed twenty-one previous European court cases which dealt with crimes caused by posthypnotic suggestion (including Zebediah’s case). He warned the public of the risks of being hypnotized:

...a person in somnambulant hypnosis is not able to take up a critical attitude on his own behalf...subordination to the hypnotizer, and dulling of his consciousness takes place, regardless of whether he is the subject of a legitimate experiment or is being hypnotized for other purposes...Just as suggestions can be employed therapeutically...they can equally well be used for criminal purposes. (Mayer, 1937, p. 53)

His book was enthusiastically reviewed in the German press. It was much discussed by criminologists all over Europe, and became a best seller in the European nonfiction market. It was never translated into English, but an English researcher who read it in German called it “without doubt the most authentic and carefully documented example of the use of hypnosis for criminal purposes...” (Edmunds, p. 145)

The case went to trial in June, 1936. Like Adam at Zebediah’s earlier trial, and like Nielsen at Palle Hardwick’s later trial, Walter Bergen insisted that he was innocent, totally ignorant about hypnosis, and had never hypnotized the alleged victim. Like Adam and Nielsen, Bergen secretly tried to manipulate his subject’s court testimony using hypnosis. Unlike those cases, however, he failed. One reason he failed was because Dr. Mayer stayed with the case and continued hypnotizing Mrs. Evan.

In trance, she remembered another of Bergen’s cue words: “Leichtbino.” Bergen had said, “If you start to reveal anything in court that could harm me, the word ‘Leichtbino’ will come to mind. Then you will feel sick and will not say anything against me. You will only speak in my favor.”

The trial lasted three weeks. Bergen was sentenced to ten years in prison for larceny and for practicing medicine without a license. Alfred was sentenced to four years.

Mayer and the German police did everything right in this case. They even kept Mrs. E.’s true identity private. I hope that she and Mr. E were able to live out the rest of their lives in peace and security. However, in 1937. Nazis controlled Germany and World War II was beginning.

1. That was a cue to shift rapport to another operator.



Case History: Palle Hardwick



...the faith-curer of the grotto has this advantage over the endormeur of the platform or the hospital. He does not intrude his own personality and train his patient to subject his mental ego to that of his “operator.” The “mesmerizer” seeks to dominate his subject; he weakens the will power, which it is desirable to strengthen, and aims at becoming the master of a slave. I do not need further to emphasize the dangers of this practice...

- Ernest Hart, *Hypnotism, Mesmerism, & the New Witchcraft*, 1898

The Predator: Nielsen

In January, 1947, Bjorn Schouw Nielsen was sentenced to Horsens State Prison (the facility for Denmark’s worst criminals) in Denmark for crimes committed during the Nazi occupation. Nielsen, a self-educated, street smart, talkative, and imaginative con man, was always looking for an easy profit. He had a previous conviction and commitment to the State Institution for Psychopathic Delinquents. His recent crimes were informing on a previous employer to the Germans and blackmailing Resistance Movement businessmen for large sums of money.

He had been occupying his mind while in Horsens by planning his next, “perfect” crime. He defined a perfect crime as one which would be impossible to trace back to him, a crime for which another person would inevitably serve the jail time, and he—even if accused—would inevitably be let off. He bragged, again and again, to other prisoners about his plan.

Nielsen may have heard of the 1936 case of criminal hypnosis in nearby Sweden. The press called it the “Sala affair.” A criminal hypnotist, called only “Th.” in newspaper reports, had developed a gang of young men and women who raised money by cocaine trade, prostitution, robbery, and murder. Every gang member was Th.’s hypnotic subject. He had conditioned each with an eclectic mix of occultism, yoga, and hypnosis.

Nielsen studied hypnosis. He learned which traits mark a susceptible person. He practiced his hypnotic techniques on other persons whenever he had an opportunity.

The Prey: Palle Hardwick

A few months after arriving at Horsens, Nielsen met Palle Hardwick in the prison workroom. He noticed the younger man’s spiritual interests (often characteristic of hypnotically susceptible persons). He saw how depressed Palle was, and how inclined he was to turn to religion for

answers. Nielsen targeted Palle for remaking into an agent of his perfect crimes.

Palle's Childhood and Youth—Palle Hardwick and his identical twin brother were their parents only children. They were raised in a middle-class Danish family before, and during, World War II. His father was good-natured, hard-working, and reliable. His mother was witty and ambitious. What Nielsen did to Palle broke their hearts.

In childhood, Palle was intelligent, sensitive, reliable, dutiful, good with his hands, ambitious, and goal-oriented. He later called his youth “a series of little five-year plans.” He planned to have a bright future. He was also introspective, quiet, and interested in religion. Palle never smoked or drank. With a few heterosexual exceptions, he was chaste.

From HIPOCORPS to Capture—In 1940, at age 16, Palle joined a volunteer rifle group organized by the Nazis who then occupied his homeland. (They appeared to be there to stay.) The party's conveyer-belt system then carried him through the Youth Section of the Danish Nazi Party to the volunteer German Army Corps, and finally to the German Auxiliary Police (also known as Hipokorps).

Palle was in the Hipokorps only during the last three months of the war, but it ruined his life. He never participated in interrogations or mistreatment of detainees. In fact, he actively avoided assignments that would cause him to mistreat other persons. When assigned to be an interpreter for the Germans, he shot himself in the leg. When he became ambulatory again, they gave him a different assignment. Thus, he managed to avoid participation in the persecution of Danish Jews or of Danish Resistance members. Years later, Palle recalled his three months in the Hipokorps as one of the most unhappy periods of his life.

As the Allied army approached, he became disillusioned, despairing, disgusted. He was sure the Germans would lose the war, but he felt enough loyalty to his Hipocorps unit that he did not walk away from them. A force of combined Allies and Danish resistance fighters arrested Palle on May 8, 1945, together with German troops trying to retreat from Denmark. His captors took him to Horsens State Prison to be held for trial. The route ran by his parents' home, which Palle had not seen for a year and a half.

He stared apathetically out the window of the train, grieving, until he arrived at prison. At Horsens, they placed him in solitary confinement in the cellar for a few days, then moved him to a tiny cell, shared with another “collaborator.” Miserable, hopeless, monotonous prison days followed, one after another. Faceless cellmates came and went.

Trial and Imprisonment—After sixteen

months in prison, on September 9, 1946, Palle was finally tried. Postwar Denmark hated collaborators, especially Hipokorps members. Being caught in the company of Germans went hard with Palle also. He was sentenced to fourteen more years in Horsens. He was only 22.

Palle's twin brother also was sentenced for collaboration, but he received a far lighter sentence. He soon got out of jail, found a job in the wholesale business, and did well from then on. Palle remained confined, believing he had many years left to serve.

Palle did not fit in at Horsens. A prison report dated December 27, 1946, said he was “Polite and well behaved. Young idealist. Works well.” Palle, himself, later wrote of this period:

For me there was no way back to my earliest youth, before the whole thing began. I did not think that there would be any future for me even on that distant day many years in the future when I might possibly be released....I tried to find a meaning in things from a religious point of view, by thinking that they were ordained by God. I wondered whether He even existed and how He could have created such a world as ours. But that only made matters worse. I began to doubt whether there was a God who directed the universe, or whether it was not merely one long string of fortuitous circumstances. I felt quite alone...as if I were in a diving-bell at the bottom of the sea which was never going to come up again. (Palle quoted in Reiter, 1958, p. 73)

Those depressed feelings all changed, however, the day that Palle experienced a spontaneous mystical encounter with a “guardian spirit.” The spirit declared that Palle's long sentence to imprisonment was not an accidental misfortune, but was, indeed, part of God's plan for him, intended to develop and strengthen him for fulfillment of a later task. From the moment he received it, that message became very dear to Palle, a source of hope and strength.

Nielsen the “Guru”

Soon after he met Palle, Nielsen began to tell the gullible young man a series of grandiose lies. Nielsen claimed to know all about religion, to have read lots on it, to have been a member of a society for psychical research. In fact, he said, he was a master yogi—a guru! He promised to get Palle books to study on religion, to initiate him into the mysteries he had learned. He would give Palle an apprenticeship in the arts of yoga mastery. The charming, smooth-talking sociopath promised Palle that his lessons in Indian “philosophy” and yoga training would reveal life's true meaning, grant escape from his present misery, make him independent of this world, and guarantee a better one in an afterlife.



Palle resisted Nielsen's aggressive overtures of friendship.

Nielsen did not give up. He pressured Palle, every day, in the workshop. Nielsen expounded on the reincarnation of souls. He said hypnosis was the way to learn about one's past lives. He promised that, through "mind expansion," Palle could become one with the "divine cosmic principle" and have direct communion with God. He chattered about levitation, channeling spirits, telepathy, and yogis who walked through walls or who could cure a broken leg in five minutes. He gave Palle books to read about yoga.

Palle read the books. He redefined his beliefs and his spiritual goal in terms of what he read and of what Nielsen was saying. He was challenged by the "great and difficult labor" of mind expansion. The books promoted the Eastern concept of learning psychic mind skills from a teacher. Nielsen purred that Palle obviously had talent and even he, the guru, could learn much from him—if Palle would let him become his teacher. Palle believed everything that Nielsen said.

Palle Learns "Yoga"—Reassured by Nielsen's play-acting, the lonely young man finally accepted his proffered friendship. Palle and Nielsen were both accused of collaboration. Both were in prison, both assigned to the workroom. The friendship seemed natural to Palle. Soon, he accepted Nielsen's offer to teach meditation skills.

After that, in the workroom, every day, often in a corner by themselves, Nielsen did "spiritual" exercises with Palle. Like most covert hypnotists, Nielsen carefully avoided the word "hypnosis." He always substituted occult terminology for the "H" word. He called hypnotic episodes, "concentrations." He gave Palle "relaxation exercises," or "magnetic strokings," or "yogic training in how to cease thinking."

Nielsen always began new induction routines by requiring Palle to try it on him first. Con artist Nielsen would then pretend to be completely, helplessly under Palle's mental influence. Nielsen's play acting banished any fear Palle might have that Nielsen could get power over him. Only then, did Nielsen let Palle, who was now very interested and confident, have a turn at being the subject of the "experiment."

Thus, when Nielsen introduced a hand locking induction routine to Palle, Palle first did it to the guru. Nielsen only pretended to be unable to pull his hands apart when Palle said, "Try it. You cannot pull your hands apart." Nielsen knew the routine was just a trick played on ignorant people who don't realize that everybody's knuckle size prevents them from pulling apart clasped hands—unless they spread their fingers to allow the larger knuckles to pass through. This is a test of hypnotic susceptibility. It's also a hypnosis induction, because if a subject believes they

have been compelled to obey by mental power, they may continue to obey suggestions.

When it was Nielsen's turn to give the suggestion to Palle, Palle really "locked" his hands. He really believed that he could not pull his clasped hands apart when challenged to try it. Then Nielsen knew, for sure: Palle was a susceptible hypnotic subject, a proper candidate to be the agent of the guru's perfect crimes.

After the hand-locking exercise, Nielsen led Palle in breathing exercises combined with various yoga postures and concentrations on various mental ideas. To Palle it was all just an amusing game, a toy, a prison pastime. He had no idea that Nielsen was covertly conditioning him for a mind-controlled life

Nielsen asked Palle, whose prison behavior record was better than his, to request to share a cell with him. Palle received permission. (That began a long series: Nielsen tells Palle what to say, or do; Palle obeys.) From the spring of 1947, to the fall of 1949, Palle and Bjorn Nielsen were always together in their cell or in the workroom.

From Trance to Hypnosis—Nielsen told Palle that he knew a short cut to the meditative high (trance depth) which Palle now yearned to reach. He led Palle through more hand lockings, and relaxation exercises. He made Palle's arms or legs stiff (catatonic). He did magnetic strokings of a prone and resting Palle. All those were deepening exercises, training for automatism. Through that series of disguised inductions, Nielsen was carefully shaping Palle into a highly trained hypnotic subject. In the meantime, Nielsen kept Palle calm and confident, without suspicion.

Nielsen finally proposed hypnosis to Palle—actually using the H word. The guru made it seem nonthreatening by, as usual, having Palle first hypnotize him. Nielsen again pretended to be deeply affected. Palle again believed that Nielsen was easy to hypnotize and that he was difficult to hypnotize. The truth was the opposite: Palle was far more susceptible than Nielsen. Believing himself to be the more difficult person to hypnotize, Palle accepted being, most often, the subject of inductions. Nielsen explained that he was just trying to bring Palle up to his own yoga skill level.

Nielsen's fertile imagination kept generating new mind-expansion exercises. Jail-weary Palle welcomed them all. They were easy entertainment, a mental escape. Soon, Nielsen was keeping Palle busy doing "yoga" almost around the clock—excepting when he was eating or sleeping. The ceaseless training made Palle's hypnotic suggestibility constantly increase.

Nielsen, next, captured and redirected Palle's sex drive for the purpose of powering his hypnotic control. Kundalini yoga requires celibacy outside of trance and channels sexual energy into intense, orgasmic trance experience.

Palle's kundalini concentrations did, one day, result in an intense climax enveloped in hallucination. Palle believed that he had, in that moment, experienced fusion of his body and spirit and had found unity with a divine essence. Now, joyfully, utterly in love with the trance trip (and perhaps somewhat so also with the guru who worked so hard to deliver these trance highs to him), Palle eagerly anticipated more such orgasmic fusions. He believed he was moving away from the mundane terrestrial world toward contact with a lofty spiritual force.

Again and again, day after day, many times in one day, Nielsen pushed Palle to go into trance as deep as possible and to stay there as long as possible. He also taught Palle self-hypnotic techniques to make his state of lowered

consciousness last longer. Nielsen never once dehypnotized Palle, never told him the trance was now over, and he could again be "awake." Palle was now walking around in a state of constant trance, of varying depth, instead of his normal mental condition.

Nielsen explained away Palle's awareness of being in a constant deep trance by saying it was evidence that he was in the presence of the divine. Palle believed him. He wanted to hang on to that divine connection—even if it meant losing contact with reality. In July, 1947, a psychiatrist (who happened to be studying war criminals at Horsens Prison) examined Palle. The doctor wrote in his report that Palle was an idealist with no psychotic traits, no abnormal characteristics at all—except "a tendency to parry questions with obscure oracular answers." (Quoted in Reiter, 1958, p. 205) Obscure "oracular answers" can be evidence of a trance state.

Palle's constant effort, now, was focused on soaring higher and higher (lower and lower trance depths) in each new "concentration" that Nielsen assigned to him. Palle hoped to attain the highest yoga condition and achieve his dream of ecstatic and mystical union with divinity, with the universe's "vital principle." Nielsen's goal, on the other hand, was complete control of Palle's mind by repeated inductions, increased trance depth, and obedience drills. It usually takes much trance training for a subject to reach the deepest levels of trance. A large number of hypnotic sessions "increases the possibility of criminally exploiting the depth of hypnosis." (Hammerschlag, p. 30)

Palle Accepts "X" As God—The guru then began a new "spiritual exercise." As usual, first Palle hypnotized Nielsen, who pretended to be deeply affected. In his sham state of hypnosis, Nielsen "channeled" the voice of a spirit. He made clear which spirit it was. He was supposedly speaking with the voice of the angel who had appeared to Palle and reassured him. Nielsen said,

"I am your guardian spirit. You believe that what has happened to you is a great misfortune for you. But that is not the case. It has all been to strengthen you and test you, in order that you may carry out the mission which it is your destiny to fulfil." (Reiter, 1958, p. 108)

To Palle, Nielsen's bogus channeling was a true and precious revelation, and he hoped for more. Palle never doubted that he should

Social Isolation

Palle was now completely isolated, not only because he had become a space case, but also because Nielsen had used threats, flattery, and visual and auditory **negative hallucinations** to further isolate him. Under deep hypnosis, Nielsen had instructed:

"From this moment you will no longer speak to nor address your previous comrades... You will feel that all former ties have been broken. Day and night your entire consciousness will be directed towards the divine. If they approach you, you will not see them, and if they talk to you, you will not hear. They belong to a lower world, which you have nothing whatever to do with." (Reiter, p. 110)

Palle's former friends in prison thought his new condition of perpetual walking trance, and total ignoring of them, was very odd. Although they were upset by the change in Palle, none of them spoke to the prison authorities about it. Nielsen also programmed Palle against his parents and other relatives. Palle obeyed the secret regimen and, thus, became totally dependent upon Nielsen, now his only permitted associate.

Nielsen, however, was not isolated, and he couldn't resist bragging about his control over Palle to some of the other prisoners.



obey the “divine power” who had bestowed those words upon him. Nielsen told Palle that his guardian spirit was named “X.”

It was, then, Palle’s turn to be hypnotized. When Palle was in deep trance, Nielsen told him that X was the

tized and channeling the spirit’s voice. Soon, however, Nielsen developed a wider variety of X communication systems. Palle soon gave the same obedient response to words that Nielsen said while making an X with his body—such as having his legs or arms crossed in the sign of an X—or to the words written following the symbol X in a letter.



Eventually, all Nielsen had to do was say, “X says...” It was a convenient setup, informal and unrecognizable to any random persons who might overhear the guru in the process of implanting new hypnotic commands in Palle. It worked in any social situation. It worked even when Palle seemed to be in a normal waking state. Nielsen would say, “The guardian spirit wants...” or “X wants you to...” Palle would obey, as a hypnotic compulsion, whatever followed those cue phrases.

Sometimes, Nielsen completely concealed his role in X’s messages by causing Palle to have posthypnotic hallucinations in which X materialized before him and spoke the predator’s instructions. In the first of these posthypnotically hallucinated scenes, Nielsen instructed Palle’s unconscious that the spirit would act the same as Palle’s spontaneous experience of a guardian spirit had. So it comforted him, and seemed protective and loving. Over time, however, Nielsen weaned Palle from comfort and protection. X was more and more likely to simply show up and give orders. Being completely amnesic for the trance sessions during which Nielsen programmed him to experience these posthypnotic visions, Palle accepted the apparitions with complete faith.

Nielsen made Palle deeply terrified of the slightest failure to give unconditional, absolute obedience to any command from X. He did that by threatening banishment to spiritual darkness in this life and to hell in the next—and then concealing the threat under amnesia. The number one rule to

same person as God. He designated X as Palle’s induction cue to a deep, amnesic trance. From that moment on, Palle had complete amnesia for all his time spent in X-related trance. Under the cover of that amnesia, Nielsen hammered into Palle’s unconscious the belief that Palle’s guardian spirit—who was supposedly God and was named X—would hereafter deliver all his orders to Palle via Nielsen.

which X demanded obedience was the rule of Secret, Don’t Tell. Nielsen indelibly impressed on Palle’s unconscious several corollary admonitions that supported the basic rule of secrecy. X told Palle never to speak of X, or of his “revelations” from X, or of Nielsen, who was X’s “instrument.” In fact, Palle was never to speak to any other prisoners at all.

At first, X’s orders, via Nielsen, came in phony seances during which Nielsen pretended he was hypno-

The threats, if Palle should weaken and tell, were

as bad as those for imperfect obedience. He would be judged as having failed in his mission in this life, as having failed all his guardian spirit's tests. He would have no chance whatsoever of salvation and would be damned forever.

Preparation for a "Mission"—X (Nielsen) now told Palle's unconscious more about his "mission." He made it sound lofty and righteous. X said that God was personally ordering Palle to end all wars and to develop and lead a world government in which God and Mankind would be spiritually one. He said that Palle had been designated by God to be the savior of humanity who would "help, cure, and redeem" them, and lead them from suffering into happiness.

Nielsen spent the next year eroding all the moral values that Palle had internalized up to that point in his life, his original superego. Palle's belief in X was made the basis of a new superego system which displaced the old values. Nielsen did that by training Palle to unconsciously judge his behavior as good or bad based only on his X programming—what would cause X pleasure or displeasure. In a condition of obedience to X, Palle would feel happy and peaceful. Resisting X's commands resulted in feelings of misery, fear, and guilt.

Nielsen waited until Palle was conditioned to shift instantly to deep trance on cue and to have total amnesia for time spent in trance before he began giving him really noxious suggestions. That conditioning, combined with the comforting fantasy of world omnipotence and a savior's mission, unconsciously counterbalanced Palle's amnesic reality of humiliating submission to ever more cruel and humiliating demands by Nielsen.

The guru told Palle that his spiritual exercises were now going to teach independence from all physical and material ties. They all involved self denial because X said that Palle must now practice indifference to whatever was dear to him. The training exercises in "independence," however, always involved Palle giving Nielsen his worldly goods. Thus, Palle yielded up his daily meat ration to Nielsen, then his watch, then his accordion. If Palle resisted any concept or command, Nielsen explained that the student's inner resistance was caused by "matter" fighting "spirit." And he would urge Palle to overcome that rebellious "body resistance to the spirit."

Nielsen prepared Palle to commit robbery and murder for him by means of a classic series of desensitization exercises. He said Palle was "above" the usual moral principles such as right of property, or respect for life. X ordered Palle to free himself from all those "middle class morals." In deep trance visualizations, Nielsen gave Palle systematic training in criminal acts. At first, he induced Palle to hallucinate only minor crimes. The guru acted as if it were all a joke—just a little thievery. However, the acts which Nielsen made the hypnotized Palle visualize gradually wors-

ened: robbery, safe cracking, murders, then murdering Palle's own mother. That last item was agonizing for Palle, so Nielsen made him experience it, in hallucination, over and over.

X also instructed Palle to never reveal Nielsen's involvement in any crime that Palle might commit. And he told him to never be hypnotized by anybody but Nielsen.

Palle now walked around in a near-constant trance. He believed that he had direct, daily instructions from God (via X). He was forbidden to tell what was really going on in his life to his conscious mind or to anybody else. He was **sealed** against induction by any other hypnotist. He believed he had been designated the messiah who would unite the Scandinavian peoples and found an ideal society, because X had told him so. He believed he was founding a new patriotic underground. (Having been long and severely punished for joining the occupier, Palle now was the "resistance.") His mixture of religious and political delusions was an **artificial psychosis**, created by means of hypnosis. To the casual onlooker, however, Palle would seem merely insane.

Nielsen was finished hypnoprogramming Palle. It was early in 1949. He gave Palle instructions, via X, to escape from Horsens prison—and then to return and free his guru. Palle carried out the escape exactly as ordered, but he was recaptured before he could return and attempt to free the guru. Nobody knew that Nielsen was behind it. Palle was sentenced to serve extra prison time because of his escape.

Palle Out of Prison

Horsens Prison was now shortening the sentences of all prisoners accused of collaboration. Nielsen got out a few months before Palle. After the guru was gone, Palle was not walking around in a trance any more. As Palle's release date neared, however, Nielsen began sending letters to him. They always closed: "Greetings from X." Seeing those words thrilled Palle. They meant that X had not forgotten him. For a moment, he felt the old rush of contact with the divine.

Palle walked out of Horsens, a free man, on October 29, 1949. That day might have been the beginning of a new, better life for him, but his freedom was a cue that Nielsen had pounded in for years. Old hypnotic suggestions activated by that cue now poured into Palle's consciousness. He later wrote:

The moment I heard I was to be released...I felt at last God had given me my marching orders...I felt exactly like a soldier ready to leave for the front...everything which had happened up to now was only testing which had been designed to bring me up to the peak of my powers and ability...My earthly incarnation was now practically at an end



and only the final short step remained to be taken...
(Reiter, 1958, p. 124)

As soon as Palle arrived at his parent's home in Copenhagen, he called Nielsen (obeying a posthypnotic suggestion) to hear X's next instructions. Nielsen told Palle to relax, talk to his family, and call in the morning to arrange a meeting time. At six o'clock the next morning, Palle called. Nielsen said to come at three in the afternoon.

When Palle arrived, Nielsen introduced him to his wife, Titte. She soon left them alone. Nielsen hypnotized Palle. From then on, Palle went to visit Nielsen three, or more, times a week. Each visit Nielsen hypnotized him. On the days they did not meet in person, X instructed Palle to phone Nielsen. During their meetings, Nielsen reran all the old deep trance routines from prison, the "religion," the desensitizations—especially the detailed robbery visualizations—and the terrible warnings never to reveal these secrets (particularly not to his parents).

Nielsen told Palle to live with his parents. That would save money. When his parents gave Palle money to hunt for a job, X told him to give it to Nielsen. X told Palle he was freed from any concerns about material property. The money was all X's and Nielsen would manage it for the sake of X. When Nielsen used up that money, X caused Palle to borrow an equal amount from his brother. Palle soon found a job, and it paid well. He always turned his paycheck over to X who returned only what his parents expected as rent, plus a little pocket money. As a result, shortly after his payday, Palle would have to borrow money from some family member for bus fare to get to and from work.

While riding the bus home from Nielsen's apartment, or at night, lying in bed thinking about the mission, Palle often talked to X. Sometimes he saw X, and X talked back to him, for Palle's suggestible brain was now so saturated with X content and X worship that he was having spontaneous X hallucinations.

Nielsen liked company. Palle's natural inclination was toward puritanical habits. He hated beer, could hardly force it down. But X had ordered "social studies," which meant going out to drink and carouse with Nielsen, and so Palle went. And Palle paid. Palle always was commanded by X to pay.

Nielsen wanted to enlarge his stable of hypnotic subjects. He took lessons from a hypnotist to learn better techniques. He established a "Psychophysical Institute." Palle, directed by X, provided the money and did all the work of creating brochures and placing ads to recruit students for the "Institute." Nielsen held training sessions in his home for people thus enticed.

At this time, both Palle and Nielsen were fired by their employers. Nielsen did not get another job, but Palle

did. Now, X was even greedier for money. Palle often had to borrow tram fare the day after payday.

His father became suspicious. One evening, he took Palle aside and asked if Nielsen had some sort of hold over him. Palle denied the idea in the usual brusque way with which he dealt with his parents. He said his money matters were his own business and the idea of Nielsen controlling him was obvious nonsense.

An Arranged Marriage—Palle had a standing posthypnotic suggestion to tell Nielsen anything of significance that happened in his life. He reported the conversation with his father. Nielsen started worrying that his income from Palle might stop flowing. The predator decided to end the influence of Palle's family on him by maneuvering Palle out of their home. (Years later, after his memory recovery, Palle felt the deepest grief and anger over the ruined relationship with his parents.)

Nielsen chose a girl named Bente to marry Palle. Bente had been recently engaged to his brother-in-law, but was currently free. Nielsen, himself, then had a brief affair with Bente. Then he arranged a movie date for Bente and Palle. Thus it came about that, on February 11, 1950, a few weeks after Palle's talk with his father, Bente and Palle went to a movie together.

Two days later, Nielsen hypnotized Palle and suggested a feeling of deep, divine peace. Then X told Palle that he and Bente were destined mates because X willed their marriage. X said that Palle truly loved Bente, would realize this, and would think of her constantly. Amnesic for those suggestions, as usual, Palle had two more dates with Bente. He became convinced that he loved her. He introduced her to his family, and proposed marriage. She accepted.

Cupid Nielsen had no interest in promoting genuine love. To him, this marriage was just a better way to control Palle. So, when Nielsen heard that Palle and Bente were buying gold rings for each other, X was displeased at the "unnecessary" expense.

Before the marriage could even begin, X drove a wedge between the lovers by ordering Palle to force his fiancée to have intercourse with Nielsen. Later, regressed under rehypnotization, a grieving, traumatized Palle remembered being in Nielsen's apartment that night. He could hear Bente and Titte talking about housekeeping in the background. Nielsen led Palle to the adjacent room and closed the door behind them. Palle recalled...

It's there my guardian spirit usually comes and talks to me...He tells me to relax. He puts his hand on my forehead. He gives me magnetic strokings. Then he says that X has told him to see to it that he has intercourse with Bente. I feel completely para-

lyzed over my whole body. My whole body trembles. He tells me to keep quite calm. It does not concern me at all. I have a mission which I must fulfil. It is absolutely necessary that I learn how to control others...He says it is my body which resists. I must learn to control my body. He will help me, and he brings me into a state where I no longer belong to this world... (Reiter, 1958, p. 131)

After Nielsen roused his subject from trance, Palle obeyed the suggestions. He told Bente, "Go and help Nielsen with what he wants." She knew what Nielsen wanted. She refused. Palle insisted. She resisted. Palle said, "I won't marry you unless you do it." Then she agreed. Afterwards, she said, "Now you know I love you."

Deep down, however, Palle felt the opposite. Something he had found and treasured was irrevocably soiled. Ten days later, on their agreed date, Palle married Bente, but he never felt close to her or good about their relationship again.

Nielsen widened the emotional distance between Palle and Bente with more hypnotic suggestions. X told Palle to "govern" his wife, to live with her, but as the master in his house. X said Palle's relationship with Bente had just been an emotional feeling, which he was now completely free of: "...it is completely impossible that she should have any influence whatsoever upon your will...she has nothing whatsoever to do with your financial affairs." (Reiter, 1958, p. 133)

Nielsen now collected, via X, most of the wages of both Palle and Bente. When X again commanded Palle to go out drinking and picking up girls, he went, night after night. (Nielsen called that "karmayoga," action yoga.) As usual, Palle paid the bills. In addition, Palle made his usual solo visits to Nielsen's place. He told Bente he went there because their guerilla organization was training to fight in case the Russians invaded. He said all the money they gave Nielsen was also for that purpose.

By order of X, Palle never trusted his wife, regularly lied to her, and treated her callously. To Nielsen, on the other hand, Palle's behavior was candid, sacrificing, and trustworthy. That's how Nielsen had programmed him to act. Nielsen separated Palle from his parents by marriage. He separated him from his wife, even before their marriage, by infidelity. The story of Palle and Bente (their relationship ever dominated and managed by Nielsen) was a tragic subplot to Palle's hypnotic history. Palle's marriage could have helped to free him. Instead, it further enmeshed him in Nielsen's web.

Training for Robbery- The flow of money from both Bente and Palle still was not enough to satisfy Nielsen. Palle's wages were not as good at the new job, and there was little overtime. X told him to buy a gun (in case of

a Russian invasion).

In June, 1950, Nielsen began training Palle to do a bank robbery. He repeated all the old deep trance visualizations of generic robbery and random murder, plus the hallucinations of killing mother (the ultimate obedience exercise and moral desensitization). Then X told Palle to go to a pharmacy and purchase a container of ether, because X "wished to show him some pictures of a 'spiritual nature.'" (Reiter, 1958, p. 135)

When Palle returned with the ether, they went into the private room of Nielsen's apartment. Palle stretched out and relaxed; his guru performed the usual magnetic strokings and intoned relaxation suggestions. Then, Nielsen told Palle to breathe in the ether fumes while he suggested deep, deep sleep. Nielsen had added **narcosynthesis** to his induction process in order to reinforce Palle's trance depth, automatism, and amnesia.

The "spiritual pictures" turned out to be detailed visualizations of robbing a specific bank. Palle was to imagine himself entering the bank with a briefcase in his left hand, the gun in his right, his mind focused only on his connection with the "divine." Nielsen continued to guide narcosynthesized Palle's deep trance visualization:

"You go up to the cashier. You study your feelings very closely. You see how ridiculously easy it all is. You know that nothing can stop you. You know that a yogi can do everything. You know that feelings are only something belonging to the material world. You throw your brief case down on the counter and order him to fill it...You are clearly aware of X's presence. You point your pistol at the cashier. You know that you must get that money for X. You see that he is going to refuse. You experience this very concentratedly. You know that if one man will not do it another will. You shoot. You see him fall. You point the pistol at the next man. You repeat your order." (Reiter, 1958, p. 135)

Nielsen repeated the narcosynthesized induction and visualization conditioning, again and again. X appealed to Palle's unconscious vanity and ambition. He declared over and over that Palle alone could save the Fatherland. Then came more visualizations of robbery and murder:

"You shoot him through the head. You know that this is a necessary step on the way to Samadhi...You are completely unaffected. You know that it is God's will." (Reiter, 1958, p. 135)

Guru Failures—Palle had planned a vacation with Bente in the country that summer. X told him to stay in town. X also said that Palle must again make the sacrifice of giving his wife to Nielsen for sex. He told Palle to see to it



that Bente had plenty to drink that evening, and then to stay out of the way. Accordingly, Palle primed Bente with alcohol, then went to another room, where he meditated in a yogi position, focused on the thought that nothing in this world meant anything to him except the will of X.

The evening with Bente did not work out as Nielsen had planned. She fiercely defended herself. Although Nielsen inflicted a black eye and concussion on her, she escaped from him without being raped.

In robbery training sessions, X next pointed out to Palle the exact bank which was to be robbed. He showed Palle where to hide the money afterwards. X said that robbing a bank was easy, something that anybody could do. If Palle felt a resistance to obeying, he said, it only meant his body was stronger than his mind, and that, of course, must be overcome.

But Palle resisted X's command to commit a real robbery. X pressed the demand harder, asking for blind faith. He promised that, if Palle would only trust and obey, it would work out all right. Palle's resistance weakened. Years of programming, all the old hypnoconditioning arguments, had long prepared him to obey whatever X ordered.

Nielsen scheduled the bank robbery for August 21, 1950. The morning unfolded, as X had pre-instructed Palle's unconscious. Palle told Bente (who was now pregnant) that his back hurt, and he would stay home from work. She brought him breakfast in bed, then went to her job. As soon as she was out of sight, he went to buy a bicycle.

While walking toward town, he passed the Church of Jesus. At that moment, Palle began to feel terribly upset. He said to himself, "There's something wrong here...There's something which tells me that all this is wrong." (Reiter, 1958, p. 141) As Nielsen had programmed him to do, Palle interpreted his upset feeling to be his body resisting X's or-



ders. But he could not argue the resistance away. He could not help thinking about the people in the bank who might get hurt if he robbed it. His feeling of upset got worse and worse. He just could not do the robbery. He called Nielsen and said, "Everything is wrong."

Nielsen said, "I was only testing your will. Just relax. I'm busy right now, but I'll speak to your guardian spirit. Come see me at seven tomorrow evening."

First Bank Robbery—After that tremendous moral victory of resisting evil programming, Palle himself did not know what had happened. He did not consciously remember having been about to rob a bank. He did not remember being unable to carry out the plan. He went home and went to bed.

The next evening, after Palle arrived at his apartment, Nielsen concentrated on extinguishing that spark of unconscious Christian morality in his subject. He hypnotized Palle. He then deepened his trance with the ether. He then threatened, instructed, repeated, and repeated, the will of X for Palle to perform that bank robbery. The hypnotic session continued until well past midnight.

X rescheduled the bank robbery for the next day, August 23, 1950. The next morning, Palle again told Bente that his back hurt. Again, he lay in bed while she went to work. An hour later, Nielsen arrived at Palle's apartment. He began another prolonged induction of deep hypnosis in Palle. His suggestions again assailed Palle's unconscious: "You know that it is right. The guardian spirit has said so. Nielsen is only the instrument of your divine spirit." Nielsen finished and left.

Precisely ten minutes after his departure, the posthypnotic suggestions began to kick in. Palle began the robbery sequence. He rode a bike to the bank, parked it outside, and started walking in. Just as he was going through the doorway, he felt his "body" beginning to resist. This time he was able to conquer that resistance.

He continued into the bank, slung his briefcase over the teller's counter, and told him to fill it with money. The teller filled the briefcase and handed it back to Palle. As programmed, Palle then told everybody in the bank to get down on the floor.

If any person had refused to get down on the floor, Palle was programmed to shoot him. They all got down on the floor. Palle left with the briefcase full of money, mounted his bike, and rode home. There, he put the bike away, caught a taxi, rode to his designated meeting place with Nielsen, and handed over the briefcase and its contents to him.

Nielsen asked, "Have you shot anyone?"

Robot Palle reported, "No, it was not necessary."

Palle wanted to give Nielsen the pistol too. Nielsen told him to hide it in the woods. Then, Palle went home. Bente was already there. Unexpectedly seeing her triggered another panic attack. This was a situation which his hypno-instructions didn't cover. As by the church, he suddenly felt desperately confused and upset, unable to think, and unable to understand why he felt this way. His sense of confusion suddenly coalesced into an urgent need to call Nielsen and ask what to do.

He called. Nielsen's voice, his calming words, instantly soothed Palle. With that familiar, trusted voice in his ear, he knew everything would be all right. However, Palle's confused behavior had aroused Bente's suspicions. She had already heard about the bank robbery. She told him that she suspected he was the person who had robbed the bank.

Palle called Nielsen again, reporting Bente's remark. Nielsen gave Palle a posthypnotic suggestion to act miserable and guilty and to confess to Bente that he was upset because he had been unfaithful to her that day.

When Palle carried out that suggestion, however, Bente just laughed. She didn't believe a word of it. From the characteristic cigarette butts she had found in the apartment, she was sure that it was Nielsen who had been there with Palle. Palle again called Nielsen. X told him to move to a slum because he was spending too much money on rent.

The next day, Nielsen called Bente. He scolded her for accusing Palle of doing the robbery. He also said that, if she would not agree to the move, he would make Palle divorce her and marry a different woman. He then took Palle to visit a series of prostitutes.

Bente later told police that Nielsen terrified her. But, this time, she did not give in. She needed a decent place for their baby to live. She left Palle and moved in with his parents. Both she and his parents then urged Palle over and over to sever the relationship with Nielsen. Palle finally agreed not to see Nielsen until after the baby was born (six months away), and Bente came back to live with him.

Nielsen, prosperous with all the bank loot, adjusted

gracefully to the setback. X told Palle to phone the guru daily. He did so, and X gave his orders over the phone. Soon Palle was visiting Nielsen again.

But Nielsen was still concerned about the possibility that Bente might talk too much. To deny credibility to her suspicions, Nielsen gave Palle a posthypnotic suggestion to take a few hours off work, visit his doctor, and tell him about Bente's bad nerves and paranoid delusions. He was to act very worried about her and ask the doctor what to do. Palle obeyed, unaware of the real cause of his statements. Bente's supposed "bad nerves" and "paranoid delusions" went into her medical record.

Second Robbery and Murders—The money from Palle's first bank robbery was running out. January 10, 1951, Nielsen renewed Palle's narcohypnotic robbery training. In deep trance, Palle heard a lot of "God's will," "your mission," and "you must sacrifice yourself completely." Over and over, he visualized robberies and murders, especially of stubborn bank clerks. X also told Palle to write a detailed plan of his political party, including badges and organizational chart. After each training session, Palle woke up feeling a wonderful inner peace (as suggested).

X scheduled Palle's next bank heist for March 29, 1951. Palle retrieved the gun from the woods. He again took a briefcase. He rode Nielsen's bike this time. As he arrived at the bank, he again felt tremendous inner resistance surge up inside him. In a later rehypnotization, Palle relived his struggle to overcome that resistance at the moment when he arrived outside of the targeted bank:

"Well this is it...get it over quickly...then it's all right...(moaning slightly)...Oh! It's the usual thing. Why the devil have I got a body that has to put up resistance every time I'm going to do anything? Now (signs of violent affect)—(groans)...I can't do it...body resisting the will...it is only something to be conquered. It can be conquered...it must be conquered...I lean the bicycle up outside—that's right—Now it's just a matter of three brisk steps."
(Reiter, 1958, pp. 154-5)

Palle went up those three steps, walked into the bank, pulled the gun out of his briefcase, and shot a bullet into the ceiling. He threw the container onto the counter. He told the teller to fill it up with money. The teller hesitated. Palle, in posthypnotic trance, imagining himself to be the instrument of divine power, feeling the power of X with him in that moment, and obeying his extensive conditioning preparatory to that moment, shot the man dead.

Palle then turned to the bank manager and told him to fill the briefcase with money. Instead, the manager reached for the alarm switch. Before he could touch it, Palle also shot him fatally.¹ A bank worker on the periphery sounded



the alarm. Hearing it, Palle turned and rushed out of the bank.

As he ran out of the bank, Palle also ran out of posthypnotic suggestions. This scenario was not covered in his programming. So, the posthypnotic trance suddenly ended. He was wide awake. He interpreted that as X having abandoned him. As before, when he encountered something unexpected which his posthypnotic instructions did not cover, Palle became panic-stricken. He jumped onto the bike and pedaled away. He managed to escape everyone who was chasing him—except for one fourteen-year-old boy.

Capture, Interrogation, Psychiatric Evaluation

The youngster saw Palle go into an apartment house. He then turned back, flagged down a policeman, and told him where the bank robber had gone. The Copenhagen police searched the house. They found Palle just entering an apartment. He admitted that he was the object of their search. They went with him into the apartment.

Inside sat a drunk, dirty old woman. She told the officer that Palle was a friend of her nephew, Nielsen. She said Nielsen was vacationing in the country with a nightclub dancer who rented a room from her. She gave police a photo of Nielsen.

Interrogation—Palle Hardrup insisted, despite intense interrogation, that he had planned and carried out the crime alone. “Did you have an accomplice?” they asked, over and over. “No, none whatsoever,” he always said. Doctors at the Institute of Forensic Medicine reported that Palle was icy calm. He spoke casually of his robbery, apparently unremorseful. He said he had never discussed the idea with anybody else, that it was entirely his own.²

He parroted for authorities, word for word, all that Nielsen had told him under hypnosis to say if he was arrested. He would explain to them, as long as they cared to listen, that his robbery was only to get money to finance his political party. He told them about the organization chart and badges. The doctors assumed he was psychotic.

Police checked their files and discovered that Nielsen had a serious criminal record. But he was verified to

have been out of town at the time of the crime. The investigation of Nielsen was dropped. Palle was processed for trial. Nielsen’s plan to pull off the perfect crime was successful. Even under those terrible circumstances, and despite careful interrogation by doctors and police, Palle’s hypnotic conditioning did not break.

Informers—Most victims of unethical hypnosis have no witnesses to their conditioning. Or the witnesses are unable, or afraid, to come forward and testify. But Nielsen had bragged to other prisoners about his power over Palle, and many persons had seen him hypnotizing Palle. After Palle’s robbery and murders were reported in the newspaper and on radio, witnesses began to come forward.

The first break in the case was an anonymous letter claiming important evidence, and asking to meet a detective in a Copenhagen bar at a certain time. A detective went. The informant said that he had been in the same prison as Nielsen and Palle for several years. He said Nielsen and Palle were both serving time for collaboration and had shared a cell. He said that Nielsen had hypnotized Palle and caused him to become

...virtually his slave, giving up all his personal possessions and even much of his prison food to him. The code, or trigger sign which always sent Hardrup into a deep trance was the sign of an X, and Nielsen had so conditioned his subject that whenever this sign was made he went straight into a state of somnambulance. The informer insisted that although Hardrup had carried out the raid, Nielsen’s was certainly the mind controlling him at the time. (Edmunds, p. 148)

Other released prisoners from Horsens also contacted the police and provided information. Men still in Horsens spoke to prison authorities, who contacted the police and passed on their statements. All said the same thing: Palle was Nielsen’s hypno-puppet.

When police confronted him with this new evidence, however, Palle was unmoved. He still insisted he alone was guilty and that his intent was only to raise money for political purposes, not to give to Nielsen. The psychiatrists now, however, were looking for a new type of evi-

1. Alexander Cannon, an English medical hypnotist, warned of the possibility of crime by posthypnotic suggestion, and predicted an event such as this in a 1950 article: “...when an hypnotic suggestion of a criminal character is carried out, it is done with the greatest coolness.” He quoted an earlier analysis by Du Prel: “Hurried on by irresistible force, the subject feels none of the doubts of the criminal who acts spontaneously. He behaves with a tranquillity and security...” (Cannon, p. 19)

2. In 1887, Bjornstorm described an experiment in which a subject was told to steal a bracelet while hypnotized, which she did. Later, she was given a posthypnotic suggestion to accuse a man of having done the crime, which she also did. An early 1950’s Rand report to the Air Force and the CIA agreed that “a hypnotized subject will often accept and confess to an implanted memory as a real event in his own past life.” (Bowart, p. 69)

dence. They noted that Palle's denials were "unreasoned, mechanical reiterations of the same simple statements." (Edmunds, p. 148)¹

Psychiatric

Evaluations—The police reopened their investigation of the case. They called in Dr. Max Schmidt, Chief Police Psychiatrist, to consult. He had never heard of Palle before, but he knew Nielsen from past criminal adjudications. When Schmidt asked Palle if he had ever been hypnotized and what he knew about hypnosis, Palle became agitated and upset. He said that his "good angel" would not allow him to answer that question. He then repeated all the elements of his canned confession. Then he begged them to just "get it over." (Edmunds, p. 149)

When Schmidt told Palle that an identification of Nielsen and his guardian spirit would explain a lot, Palle absolutely and emotionally rejected the idea.

Dr. Schmidt gave Palle a battery of psychological tests. His IQ was 129. His claim to have robbed and killed because it was his destiny to rule and save Denmark was classified as "an atypical paranoid psychosis with a system of delusions, though without other distinct schizophrenic features." (Reiter, 1958, p. 205) The doctor told police that Palle's "psychosis-like condition" had been caused by subjection to prolonged, intensive hypnotraining. He told interrogators to just substitute "Nielsen" wherever Palle said "X" and they would get the real picture.

Palle still would not agree that he had been hypnotized.

The police talked to Nielsen again. He denied loaning his bicycle to Palle. They decided to question Palle with Nielsen in the room. The usual questions were asked. Palle gave the usual declarations of his own guilt and denials that Nielsen had anything to do with it. Police noticed that

Nielsen sat

...forward with elbows on knees, arms crossed and hands on shoulders, thus making a clear X sign. When told to sit properly he changed his position for a more upright one, but immediately crossed his legs. For the duration of the interrogation, a matter of some three hours, he stared intently into Hardrup's eyes.

It was observed that whenever Nielsen made an X sign Hardrup renewed his own confessions and protestations of Nielsen's innocence... (Edmunds, p. 149)

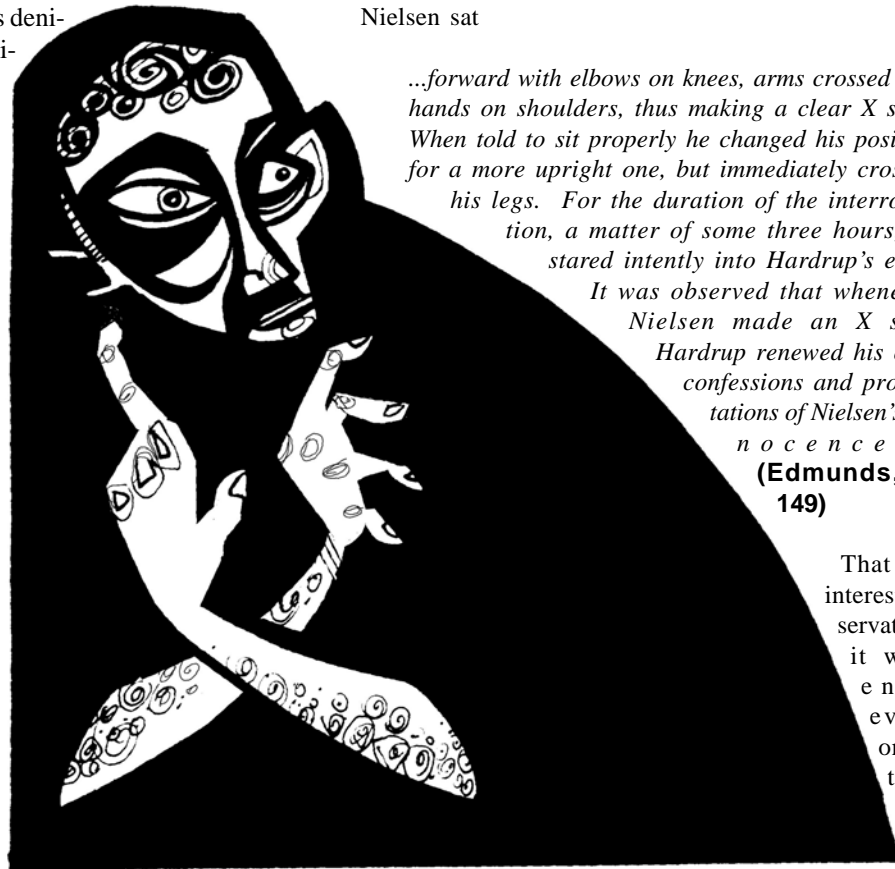
That was an interesting observation, but it was not enough evidence on which to arrest Nielsen. The attempt

to build a case against him seemed impossible. Then, somebody remembered a bank robbery in another Danish town, seven months earlier, which had the same modus operandi. The robber had escaped. Witnesses identified Palle as the holdup man in that one, too.

When police questioned Palle about that robbery, however, he could not remember a thing. He explained that his good angel "told him when to remember and when to forget." (Edmunds, p. 149)

The police talked to Bente. She told them that she had seen Nielsen hypnotize Palle many times using the X sign. She said she had long suspected that Palle was involved in the first robbery. Police noticed that Palle received a letter from Nielsen every day, content innocuous, but always marked with an X. Another prisoner told them that Nielsen had paid him to draw X marks on walls where Palle was sure to see them.

Palle still insisted he had committed the crime en-



1. A subject with amnesia-cloaked hypnoprogramming tends to repeat verbatim the content of that programming, in response to questions that stimulate it.



tirely on his own.

Dr. Reiter Enters the Case

Nielsen was defended by a team of the best lawyers money could buy. They based their client's defense on his claim that Palle could not be hypnotized. It looked strong. Neither Dr. Schmidt, nor the police department's expert hypnotist on staff (a detective who was in charge of Palle's case for the first year) could hypnotize him. To prove a case of victimization by hypnosis, Palle had to be demonstrably capable of amnesic somnambulism: quickly and deeply hypnotizable, capable of positive and negative hallucinations, and of unknowingly obeying posthypnotic suggestions because of complete suggested amnesia—a state of mind in which “critical powers and free will were abolished.” (Reiter, 1958, p. 87)

At this point, the police called in Dr. Reiter. He was one of Denmark's foremost hypnosis experts, a faculty member lecturing on psychotherapy and psychosomatic medicine at the University of Copenhagen, and an expert on criminal psychiatry. Like Schmidt, Reiter already knew Nielsen well. Dr. Reiter had been Director of the State Institution for Psychopathic Delinquents when Nielsen was incarcerated there and was also his parole officer after discharge. In addition, Nielsen had later attended the psychiatric clinic of a hospital which Dr. Reiter directed.

Reiter believed that unethical hypnosis was not possible. He had recently testified, for the defense, in the case of a 44-year-old hypnotist accused of using hypnosis to have sex with a female client. Reiter testified, in court, that he doubted that the alleged abuse could have taken place. (The Court sentenced the hypnotist to prison for eighteen months anyway.)

Reiter first visited Palle in April, 1952. The accused looked pale and harassed. He acted tense, stiff, and unnatural. For the first five weeks of their daily meetings, they just talked. Palle told Reiter what he could remember. He seemed genuinely interested in getting to the bottom of it all. But he did not remember anything about hypnosis. He did not remember anything about the first robbery.

Futile Attempts to Hypnotize Palle—From May 27 to July 4, 1952, Dr. Reiter tried to hypnotize Palle. Each time, Palle descended to a light trance level—and stopped there. Reiter's attempts did stir up in Palle painful, chaotic thoughts of times spent with Nielsen, but there was no recovery of amnesic memories, either in or out of trance.

One day, Nielsen encountered Palle in court. After that meeting, Dr. Reiter noticed that Palle's beliefs in his guardian angel and his mission, and his amnesia, had been reinforced. He began to have spontaneous hallucinations again in which X talked to him about his mission. Palle also began to feel upset all the time. He did not know why he felt

so anxious. He told Dr. Reiter that he was having chronic insomnia. Time after time, he would be just on the verge of falling asleep, and then he would suddenly feel tense and frightened, afraid of losing control, afraid of becoming unconscious. He had frightening dreams when he did sleep, but, when he awoke, he could never remember exactly what he had been dreaming.

The first fifteen times that Reiter tried to hypnotize Palle, what happened was a very atypical pattern. Palle went into a light trance, but no deeper. Anybody, who can be hypnotized, even a little, will normally go into trance more easily, and deeper, with each subsequent induction. Palle responded exactly the opposite. Any induction method which worked once on him took longer to work, and worked less well, each successive time that Reiter used it.

For example, the first time that Reiter told Palle to stare at a bright light, he entered a light trance in just five minutes. But each repeated attempt to induct using the light took longer—and Palle never went deeper. The first time that Dr. Reiter tried a levitation technique, after twenty minutes Palle was in a light trance. When Reiter suggested the deeper state of catalepsy, and touched Palle's hand to deepen by “anchoring,” Palle jerked awake. The next time Reiter tried the levitation induction, it took 47 minutes to get Palle into a trance, and this one was less deep than before. Again and again, Reiter changed his induction technique. Palle's reacted the same.

Reiter knew that Nielsen's defense team was claiming that Palle was not capable of deep hypnosis. The police psychiatrist, however, suspected that Nielsen had given Palle sealing suggestions against induction of deep trance. If every other hypnotist was limited to light trance, all Nielsen's commands to Palle would remain dominant; a command given at a deeper level of hypnosis automatically prevails over one given in lighter trance.

If the problem was depth sealing, how could he break through?

Day after day, Reiter attempted to hypnotize Palle—and continued to fail. Then, one day, the doctor tried a new, much more powerful induction method—barbiturate narcohypnosis.

Evipan Breaks the Seal—On July 4, 1952, Reiter asked Palle to stare at the light for three minutes. Then he injected Evipan (a European brand of Sodium Amytal) to chemically force him into trance. As the drug took hold, Palle cried out in sudden, terrible distress, “No! No! Let me go! I won't do it! I can't do it!”—on and on like that for the next two minutes. Reiter described Palle's condition in those few minutes as “the most high-pitched and obviously painful affect.” (1958, p. 89) The anguished yelling was Nielsen's hypnoprogramming resisting the chemical induction.

Then the doctor told Palle to open his eyes and look again at the bright lamp. This time, within 30 seconds of staring at the blinding light and hearing Reiter's soothing "Sleep, sleep" suggestions, a narcohypnotized Palle fell into a truly deep trance.

Now—after the staring, plus drug, plus second staring—Palle's body relaxed. His facial expression became calm and peaceful. All the anxiety and tension that had characterized his behavior up to now was suddenly gone. Reiter let him rest like that a half hour, then gave suggestions that he would awake feeling fine and acting calm.

Palle awoke and said he felt fine. He was acting calm too—which was completely unlike his reaction to previous hypnotic induction attempts by Reiter. So the doctor knew that his suggestions had finally taken hold!

Dr. Reiter asked Palle what he remembered and how he had felt during the procedure. Palle said he remembered staring at the lamp before the injection. He remembered the shot. He said it had made him feel as if he were split into two persons. "He was terribly afraid...There was something which seemed to prevent him going to sleep, although he felt very sleepy and influenced." (Reiter, 1958, p. 90) Palle also remembered staring at the light the second time. From then, until after Reiter's suggestion to return to consciousness, he remembered nothing. His spontaneous amnesia proved that Palle could reach a somnambulistic depth, for he had just done so!

Nielsen had a back-up hypnoprogram implanted against the possibility someone might succeed in breaking through his control. A new series of posthypnotic suggestions now kicked into action in Palle's brain. Although, in all their previous meetings Palle had been friendly and fully cooperative, now his facial expression turned hard. He acted tense, suspicious, apprehensive, and started an argument with Dr. Reiter. Next day, his newly suspicious and defiant attitude remained in place. He told Reiter that he was no longer willing to be hypnotized unless Reiter would allow Nielsen to come and see if Nielsen could also hypnotize him.

Palle had a legal right to reject hypnosis by Reiter. So, on that day Reiter did not try to hypnotize him. Instead, he spent the whole session reasoning with Palle, trying to persuade him to let Dr. Reiter continue to hypnotize him. The doctor said that he would be very interested to see what took place if Palle and Nielsen were together (though he actually thought Palle's idea was ridiculous, against Palle's best interests, and undoubtedly was Nielsen's hypnoprogramming). He added that such a meeting should happen much later. He ended by telling Palle to let prison officials know what he decided.

That night, Palle tossed and turned, again unable to sleep as he wrestled in his mind with the undefined force

in him which did not want him to see Reiter again. Before that restless night was over, he had defeated the unknown enemy in his lonely night combat. He had decided to continue with Reiter.

So, the next day, Palle came to see Reiter again and told the doctor his decision. The prisoner still was upset, nervous, talking fast, agitated. Reiter wasted not a moment. He again used lamp staring, followed by injection, followed by a second lamp staring to induct Palle. Again Palle went into a deep, amnesic trance. For the rest of July, Reiter repeated the same induction routine: staring, shot, staring. Every time, Palle went into deep, deep trance. Over the next ten sessions, Reiter decreased the amount of injected Evipan a little bit more each time, until finally the shot was just distilled water. It still triggered deep trance in Palle (classic Pavlovian conditioning). Later on, Reiter omitted the injection, using only the two eye fixations. Palle still went into deep trance. He was again a conditioned hypnotic subject.

Palle, the Somnambulist

Training—First, Dr. Reiter trained Palle to be an obedient hypnotic subject.

...the "training-in-hypnosis" period should not be abandoned until it has been established that post-hypnotic suggestions are carried through in a fashion that leaves no doubt of the mastery of the situation by the operator...a patient or subject should possess a number of accomplishments...He should be able to enter a deep trance almost as soon as he is instructed to do so; he should be able to revert memorially [regress] to earlier periods of his life; he should be able to verbalize while in the trance state; he should be able to carry out suggestions for posthypnotic behavior especially as these apply to recall or amnesia. (Lindner, Rebel Without a Cause, 1944)

Palle soon entered deep and amnesic trance, in less than a second, to whatever induction cue Reiter had specified. He settled Palle onto the letter "P" as a regular cue, imitating Nielsen's use of the letter "X." Reiter gave supplementary suggestions to prevent Palle from going into a trance if he saw a random P—such as in a sign. The doctor also gave sealing suggestions to protect Palle against more hypnosis by Nielsen: "If you ever receive an induction cue from any person but me, it will have no effect at all." (But earlier and more repeated programming tends to be dominant over later and less often repeated programming.)

Transference—Nielsen had got Palle to unconsciously accept the guru's hypnotic instructions as coming from Palle's guardian spirit/X/God. Reiter decided to mimic that system, except that he made Palle's unconscious receive the doctor's hypnotic instructions as coming from Mama and Daddy. Reiter wanted an unconscious transfer-



Classical Conditioning

Any biological function that is normally **unconscious (reflexive)** can be **classically conditioned**. Your level of consciousness can be conditioned because it normally adjusts unconsciously, just like your retina diameter and heart rate. Salivation at the sight of food is another normally unconscious (reflexive) function.

An assistant to Pavlov did the original classical conditioning experiment, using a dog. The dog would begin to drool as soon as he saw food, a natural response. The assistant began to ring a bell right before he brought food in where the dog could see it. Soon, when the bell rang, the dog drooled in anticipation of food. After that, the food might or might not arrive, but the dog still drooled when he heard the bell. A salivation response that was naturally associated with the sight of food now appeared at the artificial sound of the bell. That's classical conditioning. Classical conditioning is an **unconscious association** wherein an arbitrary outside signal is made to cause an event inside the subject's body.

In classical conditioning, the subject is **passive**. A dog with its salivary gland outlet in the mouth hooked up to an externally visible measuring tube, or a human subject willing to get a needleful of barbiturate in his arm is "passive." The subject's response to the biological cue is involuntary and reflexive. Pavlov placed meat powder on the dog's tongue; and it began to salivate heavily. Dr. Reiter injected Palle with barbiturate; and Palle's state of consciousness lowered to deep trance.

In classical conditioning, the desired association, or **reinforcement**, occurs before the elicited response: salivation or trance. The **conditioned** (unnatural) stimuli of bell or needle are timed together with the **unconditioned** (natural) stimuli: meat powder or barbiturate drug. Our natural learning system is associative. It does not work if the bell rings after the food comes, or if the fluid injection happened after consciousness lowers. Sequence is all-important in classical conditioning. The bell has to ring either at the same time, or slightly before, for the conditioned response to develop.

Classical conditioning is the unconscious creation of a **mental reflex**. It is **automatic learning**. An association between the two stimuli (bell/meat; needle/drug) is made so strong that, eventually, the artificial one (bell, needle) can replace the natural one (meat, drug). Thus it happened that the sound of the bell that Pavlov's assistant rang before placing the meat powder on the dog's tongue soon caused the dog to salivate, even when the assistant did not give the dog any meat powder. The dog was **conditioned**.

A famous experiment with human conditioning was reported, in 1933, by Hudgins, "Conditioning and the Voluntary Control of the Pupillary Light Reflex." Ordinarily, you cannot control the expansion or contraction of the pupil of your eye because that is an involuntary reflex. Your pupil automatically contracts at the stimulus of a bright light, expands in the dark. Hudgins conditioned human subjects, as Pavlov had with dogs. Hudgins would say, "Contract," and the bell would sound, and the light would flash in the subject's eye. After only a few hours of training, Hudgins could simply say the word "contract," and the subject's pupil would contract—no light, no bell, just the word!

In the 40s, Gregory Razran conditioned human subjects to salivate when he said "style" or "urn." Then he got them to **generalize the response** and therefore to salivate to synonyms such as "fashion" and "vase." (The generalized responses were weaker.) Okake Naruse, University of Kyoto, caused conditioned hallucinations. He made hypnotized subjects stare at a screen. Naruse flashed a light (or sounded a bell), then projected an image on the screen...

*...at low illumination. He gives the subject a pad of paper, has him draw the image several times, then suggests amnesia for the whole experience and brings him out of hypnosis. Later he tells the awakened subject to watch the screen; he sounds the bell, projecting nothing, and asks the subject to draw what he "sees." People do, quite dependably. (London, **Behavior Control**, 1969, p. 290)*

They drew the image projected during the past hypnosis. Conditioning, plus amnesia, made that work.

Dr. Reiter's needle, even though filled with pure water, because of the phenomenon of classical conditioning, soon resulted in an equally deep trance as if the drug had been used.

ence, of Palle's strong original bondings with his parents, to himself. Reiter succeeded: "More and more he identified me with persons belonging to his early infancy..." (Reiter, 1958, p. 92)

Reliving many emotional, painful episodes from his childhood and school years for Reiter increased Palle's hypnotic susceptibility to him yet more.

Testing—After training came a testing phase. Reiter tested Palle's trance depth by all possible standards. He suggested a visual hallucination. Animals played around Palle. The doctor suggested that Palle open his eyes. With eyes open, Palle still "saw" the romping animals. (That is **waking hypnosis**, a proof of somnambulism.) On Reiter's suggestion, Palle petted and played with the animals. Reiter next tested his ability to have hallucinations in color, negative hallucinations, and to talk to old friends resurrected in imagination. Palle performed all that with no trouble.

Only then, did Reiter begin to regress Palle. After Reiter began regressing Palle to the Nielsen period of his life, he still began each session with testing, including a regression to something "neutral"—a childhood scene, or something to do with his current life and relationship with the doctor. Before and after the neutral regression, Reiter daily tested Palle for evidence of deep, authentic somnam-

bulism: total amnesia, "massive catalepsy," anesthesia for a painful pinprick, complex multisensory hallucinations, and "bridge phenomenon." Palle always demonstrated complete somnambulism.

"Bridge phenomenon" meant that Palle's neck rested on the back of one chair, his ankles over the top of another. He lay there, in catatonic trance, stiff as a board. Reiter further tested Palle's bridge by loading forty kilograms on his outstretched body. His body remained rigid, supporting the weight.

Somnambulist Palle Is Demonstrated

Reiter gave several demonstrations of Palle's somnambulist abilities to persons involved in his case.

Induction Cue, Phone—Dr. Reiter showed how Nielsen could have given Palle hypnotic suggestions over the telephone. A policeman brought Palle into a room where several official observers, Reiter's assistant, and a telephone awaited. Reiter phoned from a nearby room. The officer who answered told Palle that he had a call and Palle took the phone.

Reiter asked, "How are you?"

"Fine," Palle said.

Hypnotist: An "Artificially Induced Superego"

R.W. White was a psychoanalytically-oriented psychiatrist and research hypnotist. He saw in hypnosis a "transference of the loving, hating and fearing attitudes which were first aroused by the parents" to the operator. ("An Analysis of Motivation in Hypnosis," p. 154) Kubie and Margolin were also Freudian-oriented research hypnotists. They said that hypnosis is essentially the displacement of the conscious mind's (ego) control by

...a complex image of the hypnotist which becomes part of the subject. This image functions in the subject as does the residue of parental images in adults. It delimits memories and contacts, dictates purposes, distributes inner rewards and inner punishments, and engenders strong affects. In some measure, therefore, it temporarily dispossesses the earlier authorities (i.e., the superego), or merges with them...The incorporated image of the hypnotist plays the same role in the hypnotic subject as does the incorporated and unconscious image of the parental figure in the child or adult. Hypnosis thus is seen to be an experimental reproduction of a natural developmental process. (Kubie and Margolin, "The Process of Hypnotism and the Nature of the Hypnotic State")

A hypnotic subject accepts the hypnotist as an unconscious displacement for his or her own ego the way a child unconsciously incorporates parental points of view.

In the induction stage the hypnotist becomes for a time the sole representative of the external world and, once hypnosis has been achieved, while the subject reinstates his normal boundaries in both time and place, the hypnotist remains incorporated within his conscience as "an experimentally induced super-ego figure. (Ibid.)



Reiter then said, “Now listen carefully! P!” Palle’s head instantly collapsed onto the desktop. His eyes closed. The phone receiver fell from his ear.¹

Reiter’s assistant yelled Palle’s name and shook him. Palle could not be awakened; he remained in deep trance. Then the assistant held the phone by Palle’s ear. Reiter gave Palle instructions over the phone to wake up. Then, Palle awoke. He remembered nothing of what had happened while he was in trance.

Induction Cue, in Writing— Reiter’s assistant then handed Palle a letter from Reiter. Palle opened the envelope and read the message inside:

Greetings from P. Reiter

Seeing the initial P in a letter from Dr. Reiter cued another trance. Again, Palle’s eyes closed and his head collapsed onto the desktop. Again, the observers shouted and shook him, but were unable to bring him out of it.² Again, Reiter’s assistant placed the phone by Palle’s ear while Reiter told his subject to wake. Again, Palle woke with no memory of the trance.

Amnesia and Posthypnotic Suggestions—Palle later wrote about a similar demonstration:

Now I am awake, and now I am asleep. One moment Dr. Reiter is giving an explanation and the next time I wake up (I don’t remember falling asleep in the meantime), all those present are sitting looking in their notebooks. They are all confusing fragments which it is completely impossible to write at all sensibly about. (Reiter, p. 187)

The doctor next demonstrated his subject’s obedience to posthypnotic suggestions. He hypnotized Palle and told him that, exactly three minutes after he was awakened from trance, he would stand up and walk over to the Assistant Commissioner. He was to then ask that gentleman his age, what year he left school, and what caused him to choose the career he did.

Reiter then awakened Palle and chatted with him. Palle had no memory of being hypnotized, nor of the posthypnotic suggestions which Reiter had given him. Three minutes later, Palle suddenly looked at the Commissioner. He then walked over to him and, in the most polite and apologetic manner, asked the exact questions he had been told to ask.

Reiter said, “Palle, why did you do that?”

Palle explained (**rationalized**) that he had suddenly thought how interesting the career of an important police official must be. He said he wondered how a person got into that important work.

Reiter then dropped Palle back into trance and gave him another posthypnotic suggestion. He said, “In precisely three hours, you will hear my voice, just like you used to hear the voice of X talking to you. You will not be surprised by that. You will call the jail guard, and ask to see the police solicitor.”

The police called Reiter at home that evening to report. They said his posthypnotic suggestion to Palle had been carried out in every detail. Exactly three hours after Reiter gave the suggestion, Palle (now back in his cell) had acted upset. He had called the warder and told him that he had now begun to hear Dr. Reiter’s voice. He said “he thought it was too bad that not only did he have to hear X now and then but that I, too, had to interfere in his affairs when he was on his own.” (Reiter, 1958, p. 94) Palle then asked for paper and wrote on it a request to see the police solicitor.

During their next appointment, Palle told Dr. Reiter about hearing his voice in the cell. Reiter’s “voice” had told him to be calm and have faith, because one future day the truth would emerge—if Palle himself would tell it. (Reiter had not specified exactly what words Palle would hear him say. Palle’s unconscious had itself composed that reassuring wisdom, which might conceivably have come from Reiter.) Palle couldn’t imagine why he had heard the psychiatrist’s voice in his cell.

Reiter then suggested a series of multisensory posthypnotic hallucinations, including an apparition of himself. Palle obediently hallucinated the suggested visits from Dr. Reiter. The doctor appeared in his white coat as Palle lay on his cell cot, gave the signal P to Palle, and Palle’s cell transformed into a beautiful beach surrounded by bright flowers, blue sea, and shining sun. The prisoner heard a church bell sounding in the distance and felt full of peace.

A Criminal Suggestion—Reiter’s final posthypnotic experiment with Palle was a “criminal” suggestion to break prison rules. Up to this time, Palle had always followed prison rules and had never once complained about anything. Reiter suggested to a hypnotized Palle that, in the afternoon, he would feel overwhelmed, tired, and irritable, with no appetite for his supper, followed by words to the effect that: “Your food will look unappetizing. It smells

1. A modern hypnotist giving posthypnotic instructions for a later phone induction usually tells the subject to remain upright and continue holding the phone to his ear after entering trance on cue. Reiter had not done that.

2. In 1890, a British medical journal, *The Lancet*, reported that the Scottish hypnotist, Dr. Bramwell, had prepared a client for difficult dental work by giving certain posthypnotic suggestions. He gave the client’s dentist, Mr. Turner, a handwritten note. On the day of his appointment, the patient arrived at the office of his dentist, Dr. Turner. Turner showed him Bramwell’s note. It read, “Go to sleep by order of Dr. Bramwell, and obey Mr. Turner’s commands.” The pre-set cue worked. The patient fell into a deep trance and felt no pain during the ensuing surgery.

rotten. You tell the prison guard that. He will probably insist that there is nothing wrong with your food. Then you start to get angry. You will speak rudely to the guard and quickly become even more angry. You say the most insulting words you can think of to him and become absolutely enraged. You would like to punch him, but you don't dare do that. Instead you grab up the plate of disgusting food and throw it on the floor. After doing that, you become more calm. You start to feel sorry for what you have done."

Later that day, back inside his cell, all went just as Reiter had suggested. Palle thought about his situation, and about his parents. He had been locked up in prison three years, so far, this time. He thought about how badly he had treated his parents, how alienated from them he had become. When dinner came, the bread and sausage tasted moldy to him. The milk tasted sour. Palle called the warder and told him that. The warder denied that the bread and sausage were moldy and insisted that milk was not sour. Palle got very angry, called him an idiot, and threw his plate onto the floor, where it smashed. Then he felt calmer and began to feel sorry for what he had done.

Regressions

Reiter was now daily regressing Palle to his life with Nielsen. First, however, each day, he returned him to scenes from his school years, then to early childhood (as young as two). After being confident that he was getting accurate regressions of verifiable events, the doctor would regress Palle to the Nielsen years. Reiter recovered Palle's memory of experiences with Nielsen in chronological order. Palle's daily sessions, each hours long, with Dr. Reiter continued for fifteen months. He did over a hundred regres-

sive dramatizations of his experiences with Nielsen.

Reiter wanted to know every hypnotic method that Nielsen had used, everything he had told Palle under hypnosis which had helped to shape him into a hypnorobot. He wanted to know Palle's state of mind at each stage in the planning of each robbery.

During the regressions, Palle usually lay motionless with the characteristic masklike, expressionless face of deep trance. A dramatic exception to that was when Palle remembered emotional events. Then, his expression displayed intense emotion, such as panic-stricken fear. The doctor noted that reliving deep feelings also made Palle's respiration and pulse rate increase. Sometimes he trembled. Sometimes his face and hands broke into a cold sweat.

Palle's waking voice was alert and fluent. But, when hypnotized and regressed, it sounded "weak, monotonous, almost ghostly...strangely passive...[except when] a frightened shout or scream." (Reiter, 1958, p. 159) Palle relived old conversations as if a videotape of that event were playing in his brain. He remained silent during moments when another person was speaking. At such times, Reiter felt as if he were listening to somebody talking on the phone.

When Reiter instructed Palle to say what the other person said, Palle imitated their manner of speaking as well as reproducing their words, speaking the part of each person in authentic tone and cadence. Reiter soon could recognize Palle's representation of Nielsen's deep voice and endless hammering in of programming suggestions.

Guarantee Truthful Regression—Dr. Reiter made sure that Palle's regressions were the most authentic sort: "I am there," rather than "I was there." He would hypnotize him, specify the day and time of day he was to regress to, then say:

You will experience all you went through on that day, in every detail. You do not only dream it, nor remember it, you really experience it, you are in the middle of it. You will tell me exactly what you do. (Reiter, 1958, p. 101)





He told Palle not to add or leave out anything. He gave strong suggestions, at the start of each trance, designed to punish the slightest deviation from truth:

...if he was guilty of giving a false account or if he diverged a hairsbreadth from the truth he would be seized by a feeling of terror...He would be panic-stricken with fear, his heart would thump violently and he would begin to sweat and tremble. He would also feel pain at the root of his tongue. His tongue and his voice would fail him and he would be incapable of saying anything coherently. He would feel as if his neck were being twisted and he was being strangled. (Reiter, 1958, p. 101)

One day, Reiter tested his truth-guaranteeing mechanism by suggesting to a hypnotized Palle that he had just told a lie. Palle's pulse began to race. Groaning and sweating, Palle managed to say, "I can't get any air. I can't speak. My tongue's all stiff."

When the day came that Palle was to relive the first bank robbery, Reiter gave an additional suggestion. If Palle did not tell the exact truth, he would feel the panic of his guardian spirit leaving him. [It probably was not smart to echo and reinforce any of Nielsen's conditioning.]

The police checked all verifiable details in the memories which Palle recovered under rehypnotization. All were confirmed.

Suggested Autobiography - Every time he hypnotized Palle, Dr. Reiter gave the prisoner a posthypnotic suggestion to write down everything he remembered of his visit to the doctor after he was returned back to his cell. Therefore, Palle recorded a series of puzzling encounters beginning with "Hello, how are you?" and maybe a short preliminary conversation—followed by the saying of good-bys. He never remembered being hypnotized. He never remembered anything that happened while he was hypnotized.

Dr. Reiter also suggested, every day, that his subject would write a chronological history of his life with Nielsen. He told Palle that memories would pour into his mind, that he would relive it all again, seeing everything clearly. Reiter encouraged Nielsen's victim to write these memories down. He said that the writing would relieve the pressure of them. So Palle wrote every day for months, every detail of his experiences as Nielsen's hypnotic subject. He always believed that the writing was his own idea—just a means to relieve the pressure and unburden himself of that troublesome history.

As with the regressions, Reiter gave Palle posthypnotic suggestions designed to prevent his subject from deviating in the least from the truth, or embroidering his experience the tiniest bit, while writing his autobiography.

Reiter threatened that, if Palle strayed from the true facts of his case, his hand would cramp. It would refuse to write any more, and its writing would become illegible. Reiter also said that, if Palle's memory was unclear on some point, he would state that fact plainly.

Palle now consciously recognized that Nielsen's "spiritual exercises" were really hypnotic conditioning. He now knew that Nielsen had regularly hypnotized him for four years before the robberies, that he had deliberately trained him to commit crimes by means of desensitizing visualizations under hypnosis, and that Nielsen had given specific suggestions under hypnosis which caused him to commit the robberies and murders for which he would soon be on trial.

Palle now made statements regarding that history which were very different from those made when he was first arrested. Then, he had claimed he committed the crimes all by himself and for the sake of his "mission." Now, he said that Nielsen was identical with X; and the crimes had happened because of Nielsen's orders; and that being freed from Nielsen's influence made him able to know and say that truth.

Palle's autobiography, written because of Dr. Reiter's suggestions, gave a completely different version of events than what Palle had first told police. Reiter called it Palle's "exercise book confession." The psychiatrist planned to enter it as new evidence in the case. Reiter had heard and seen Palle's relivings during hypnotic regressions, and read the autobiography. The doctor now clearly understood exactly how Nielsen had captured and enslaved his cellmate's mind. He hoped to make those events equally clear to court personnel.

Palle, however, did not yet know all that the doctor knew about those past events in his life. Dr. Reiter had routinely hypno-instructed Palle that, while writing, those past events would seem very far away, vague, foggy, and emotionally unconnected to him. Accordingly, although Palle had now regurgitated all the facts which his unconscious knew onto paper, for Reiter and for the record, and he consciously understood some essential facts about that history, Nielsen's victim had not yet intellectually integrated all the intellectual and emotional reality contained in those pages.

When the trial began, Reiter still had not allowed Palle to consciously remember the specific details of what had happened in his years with Nielsen.

Trial Preliminaries

Nielsen always hoped for, and looked for, opportunities to renew his hypnotic control of Palle, reinforce the old hypnotic conditioning of his subject, and to add new conditioning designed to get the guru off the hook. October 9, 1952, Dr. Reiter, again, demonstrated Palle's hypnoskills

Palle's Dreams

Reiter also used posthypnotic suggestion to make Palle remember dreams and write them down when he woke up. (He recorded several hundred.) Sometimes the doctor suggested he dream on a particular theme, or of certain persons. Palle always obeyed, always believed it was all his own idea.

When Reiter said to dream about Nielsen. Palle dreamed he was in his childhood room at home. A big plane flew over very low, then

...with a frightful crash came down on top of a low garage just outside our window...I was quite paralyzed...the plane and the garage were completely wrecked...I heard another machine droning overhead. The next moment it was down on top of the first, if anything with a worse crash than before. I found the situation quite terrible. I was completely knocked out by it...I was shaken to the core...Some time after the third plane droned over. I knew that it would crash just like the two before it, but there was nothing I could do. I was paralyzed with horror while I waited for the crash. It was like a nightmare.

The crash came as I had expected. I was completely beside myself. Shortly afterwards a fourth plane appeared and the same thing happened again...our house was on the direct route of all planes approaching the airport...

Suddenly they [the police] arrested me for being the cause of the whole series of accidents...they found in a cupboard a tiny instrument which I had once constructed and later put away and thought no more about...It was quite a small innocent looking instrument which I had once made as an experiment...It was really nothing more than a toy made to amuse myself.

As they produced it from the cupboard everything suddenly became clear to me. I realized, all of a sudden, that it was my instrument which had caused the planes to crash. It has since been found out by experiments that, besides the function that the instrument was constructed for, it had another function. Under certain circumstances it caused airplanes to crash if they came within a certain radius. I knew nothing about this, and only recently has science found out about this secondary function. It was, in fact, not my invention at all.

At this point I woke up, and I had to sit up and get my breath before I could go to sleep again."

Nielsen does not openly appear in the dream, but, as in real life, he is the unseen, powerful agent behind all the destruction. The "toy" symbolizes the original hypnotic training that Palle allowed Nielsen to do to him. Palle was so deceived. He thought the trances were no more than a toy, made to amuse himself. The "other function," which Reiter's "experiments" had shown the instrument had, was exploitative mind control.

Dr. Reiter asked Palle what he thought the dream meant.

Palle said, "Bjorn and all that he has done to me."

Reiter asked, "How did you feel during the dream?"

Palle said, "Wretched and panic-stricken over all the people who were killed."



to legal representatives. Neilsen, his defense lawyers, and their psychiatrist, Dr. Geert-Jorgensen, attended. (Reiter had recommended Geert-Jorgensen to Nielsen's lawyers because that psychiatrist firmly believed in the dogma of moral integrity—that no one can be caused to act against their morals by means of hypnosis.)

The show began with Reiter giving Palle his induction cue. Then the doctor pointed out to the observers the subject's instant shift into a state of profound trance as a result of perceiving the cue. Then he brought Palle out of trance to display the prisoner's total amnesia for having been hypnotized and for all events occurring while he was hypnotized. Then he cued Palle back into trance again. During that immersion, he made Palle regress and relive various criminal episodes. Here is the court transcriber's record of Palle's relived thoughts as he bicycled toward the bank where he would, in a few moments, attempt robbery and commit murder:

Subject: "I've got the pistol in my bag. It's loaded...Well this is it...get it over quickly...then it's all right...(moaning slightly)...Oh! It's the usual thing. Why the devil have I got a body that has to put up resistance every time I'm going to do anything? Now (signs of violent affect)—(groans)... I can't do it...I lean the bicycle up outside—that's right—Now it's just a matter of three brisk steps."

Dr. Reiter: "How do you feel?"

Subject: "I'm rather nervous..."

Dr. Reiter: "Why don't you like it?"

Subject: "...It is the physical resistance."

Dr. Reiter: "Physical resistance?"

Subject: "The body resisting the will...it is only something to be conquered. It can be conquered...it must be conquered." (Reiter, 1958, p. 154)

Nielsen exuded an attitude of arrogant self-confidence while he sat and watched Palle's reliving. The criminal hypnotist acted as if he were one of the lawyers, instead of a man about to be tried for causing robbery and murder by means of a mind-control technology. Nielsen denied that Palle could be deeply hypnotized. He denied that the subject was deeply hypnotized in that moment.

Dr. Reiter said to Nielsen, "You may use any depth test."

Nielsen sharpened one end of a match stick. He

cruelly shoved it far up under one of Palle's fingernails. Blood spurted. But Palle revealed no awareness of his injury, no sign of pain. Nielsen's lawyer, Geert-Jorgensen, and the guru himself had to agree it looked as if Palle really was in deep trance.

Throughout Palle's interrogations and trial, Nielsen (like Adam) cold-bloodedly exploited every opportunity to make himself look good, and to get Palle convicted. Smugly enacting his role of the falsely accused man, Nielsen energetically defended himself. His behavior was

...typical of the professional, criminal hypnotizer...It corresponded closely to the attitude displayed by the criminal protagonist in the famous Heidelberg case as described by Ludwig Meyer. (Reiter, 1958, p. 184)

Reiter believed that his sealing suggestions, blocking Palle against hypnosis by Nielsen, were effective. He now invited both Nielsen and Dr. Geert-Jorgensen to try to hypnotize Palle. Neither of them could. (Nielsen did not want to succeed.) But even Nielsen's presence and his feeble attempt to hypnotize Palle aroused old conditioning in Palle. He had trouble sleeping that night. He lay awake, feeling afraid and worried. When he slept, he dreamed of Nielsen and X. And the next day he felt very nervous in the presence of Dr. Reiter. Reiter easily restored Palle's calm with a hypnotic suggestion.

November 1, 1952, at a court hearing which Dr. Reiter did not attend, the police, ignorant of the dynamics of hypnosis, seated Palle and Nielsen beside each other. While a witness was being questioned, Nielsen talked to Palle about his duty to X. (We know Nielsen did that because he was overheard.)

After Nielsen reinforced all his old conditioning again, Palle was even more torn by conflict between the opposing sets of programming from the two hypnotists. The next time that Dr. Reiter met with Palle, he was in such an obvious state of wretchedness, more nervous and tense than ever before, that Reiter asked him what the problem was. Palle was amnesic for his encounter with Neilsen, but he did know that, after his court appearance, he had begun to hear X's voice again. He said he could not sleep. When he did sleep, he had agonizing dreams in which X appeared, the world ended, and he was damned forever.

Reiter gave his induction cue, "P." It almost did not work. Finally, he got Palle hypnotized. It took Reiter ten days to return Palle to his normal calm and to get their hypnotic rapport back to normal. Reiter repeated suggestions, over and over, meant to weaken all ideas associated with X in Palle's mind and to prevent Nielsen from ever again influencing him.

Palle's defense lawyer and Nielsen's defense team were adversaries.¹ For two years, Palle's lawyer—although he was merely the court-appointed defense for an indigent criminal—had carefully researched unethical hypnosis. He frequently consulted with Dr. Reiter about the facts of Palle's history as they emerged in the regressions. He attended all three demonstrations of somnambulist Palle which Reiter gave.

Nielsen's defense team now managed to divest Palle of this excellent lawyer. Nielsen whined to the judge that he had confided too much in Palle's lawyer. He claimed to now realize that it would threaten his own case if that lawyer continued to represent Palle. The court accepted Nielsen's argument. Just before the trial, they stripped Palle of his well-informed lawyer and assigned a new one to him. The newcomer had only a couple weeks in which to prepare to argue one of the most technically unfamiliar and complex legal cases to ever enter the Danish court system.

Psychological Reports and Grief—April 30, 1953, Dr. Hojer-Pedersen (Reiter's assistant), retested Palle with the TAT. He reported that Palle now felt guilt for what he had done—and anger about what Nielsen had done:

He is passive, considers himself unfairly treated, primarily by N, through no real fault of his own. He has been hit by others and has himself killed by accident. He has been living in a world which was artificially made up for him, he has been chained up in his own imagination and now is 'tied to the gravestones.'...he has been made a tool of. (Reiter, 1958, p. 82)

Of the 12 M card (the hypnosis picture in the TAT series), Palle said, "This is hypnosis." He attributed evil, profit-making intentions to the hypnotist. Looking at the picture made him feel anger. He said he wanted to give the old scoundrel pictured on the card a good shaking. His general responses showed optimism about the future despite dark shadows remaining from past events. He felt like Dr. Reiter had opened a window to the real world, to which the doctor belonged, through which fresh air now blew on him. He visualized Reiter as light which entered, and passed through, him.

Palle pictured his unconscious conflict between Reiter's present hypnotic control of him and Nielsen's former hypnoprogramming in imagery. He was standing on the edge of a mountain gorge. It was an endless abyss which plunged down and down. Dr. Reiter was struggling, using all the abilities he had, to influence Palle to come away from that edge. Although the doctor's approach was calm and

scientific, emotionless, Palle said that he expected Dr. Reiter to win the battle.²

Dr. Hojer-Pederson reported that he found no signs of insanity in Palle and dwindling interest in religion and politics. He credited Palle's "ambivalent, but momentarily strongly positive dependence upon Dr. Reiter..." (Reiter, 1958, p. 86) as the cause of the changes. He noted Palle's keen sense of justice.

Just before the trial commenced, Reiter combined his observations of Palle's regressions, dreams, and other behavior, and Palle's autobiography, into a final, thorough report, consisting of 366 typed pages. He delivered this book-length tome to the court on June 15, 1953 (two years and three months after Palle's arrest). The gist of his report was that the true cause of Palle's criminal acts, the true perpetrator of them, was Nielsen.

The court took three weeks to read it. On July 6, they held another hearing. At this one, both Palle and Nielsen were present—again seated side by side. Nielsen murmured to Palle about what X wanted. The court declared that Nielsen and Palle would each be allowed to read Reiter's report, for one week.

Reiter planned and carried out his clinical strategies with icy detachment from Palle, the victim. He fought like a cool, but determined, chess master, again and again, before the court on Palle's behalf. Reiter's efforts were tightly focused on winning the case. He was a police psychiatrist, not a therapist. His job was to discover, demonstrate, and prove the truth about what Nielsen had done to Palle.

Now, however, Dr. Reiter recognized that Palle's state of mind must be part of his strategy. Reiter, who knew Palle better than anybody else (except perhaps Nielsen), therefore, asked the court for an opportunity to prepare Palle psychologically, before the prisoner saw the psychological report. He warned them that, without supportive preparation, Palle's mental condition could be damaged and his hypnotic cooperation affected by the shock of what it contained. Reiter explained that he had maintained the hypnotic repression of Palle's memory for details of his abuse by Nielsen. Despite the fact Palle had written them all down, Palle did not yet know them.

Nielsen, on the other hand, was pressuring the judge to turn over Reiter's report immediately. Reiter's appeal for delay was denied. Nielsen's request for immediate release of the report was accepted.

Reiter then asked that the release of Palle's copy

1. Nielsen's defense "team" may have been supported, in whole or in part, by persons who were interested in protecting the legal position of hypnotists.

2. Research has shown that emotion is a component which tips associated programming toward a dominant status.



be delayed, until he could psychologically prepare him. But the judge reasoned that justice required that Palle be treated exactly the same as Nielsen. That request was also denied.

Reiter tried yet again. He asked the court to allow him to continue seeing Palle for therapy. He argued that maintaining their hypnotic relationship would prevent “relapse into the psychosis” (he meant a recovery of control over Palle by Nielsen and reinforcement of all the tragic X programming). Reiter said that his hypnotic relationship with Palle was not stable. He feared that, if it was not maintained, it could fade, or be eroded by Nielsen’s influence. Reiter argued that therapy would maintain their hypnotic rapport, which might be needed if new problems came up which needed to be dealt with by hypnosis.

Nielsen’s lawyers slammed back, asking the court to prevent Palle from having any more contact with Dr. Reiter—except for the two demonstrations already scheduled (to show Palle’s new lawyer how hypnosis works). The court again ruled for Nielsen. It barred Reiter from talking to Palle until two days before the next demonstration (scheduled to be held in one month).

As a result of all those rulings, one day a police official handed Dr. Reiter’s very long, icily clinical, and excruciatingly detailed report to Palle Hardrup. Palle was told that he had only one week to read the report. He had been given no advance preparation. He had no option of talking over its contents and how they made him feel with Reiter. In order to get through that thick stack of pages in one week’s time, Palle had to read Reiter’s chilly, convoluted prose every waking hour, plus far into the night hours he normally would have used for sleep. (After reading it, Palle discovered that he could not sleep, even when he tried.)

Before Palle saw the report, all he remembered of his hypnotic sessions with Reiter were the hellos and good-bys. Before he saw the report, he thought that writing the autobiography was his own idea. He thought the dreams he had were spontaneous productions. Before he read the report, Palle did not know he had fallen in love with Bente because of hypnotic suggestion. He did not know that he had given his fiancée for sex to Nielsen for the same reason. He did not know that he had visualized robbing and killing—even murdering his own mother. He did not know that Reiter would call him a repressed homosexual who was unconsciously in love with Nielsen.



As Palle read Reiter’s report, page after page, he writhed with shameful, painful realizations. Not once in the report did Reiter give any impression that he might actually like Palle. Palle now knew the process by which Reiter had manipulated Palle into unconsciously relating to the doctor as if he were Palle’s parent.

Was it possible that all Reiter had really wanted was just mind-control over him, so that the police psychiatrist could prove that he could manipulate Palle just like Nielsen had done? Palle was enduring a simultaneous harsh stripping away of all the illusions about the supposed friendship and respect Dr. Reiter felt for him. Reality, as Palle had imagined it, again, was revealed to have been grossly distorted. Again, the distorting had been done by a hypnotist. This time, the hypnotist was Dr. Reiter.

At the same time that harsh facts were eroding his attachment to Dr. Reiter, the report was stimulating Nielsen’s latent conditioning in him. Reiter had wanted to prepare Palle with a blocking suggestion to the effect that reading those inductive words would not affect him. He was reading Nielsen’s verbatim hypnotic suggestions from the very beginning of the guru’s predations until their recent encounters, just as he had regurgitated those words from his unconscious memory under rehypnosis by Dr. Reiter.

Reading page after page of his transcribed relivings of Nielsen seances drenched Palle’s mind once again with Nielsen words, Nielsen inductions—all the old X patter, X threats, and X promises. This flood of Nielsen words, Nielsen memories, Nielsen events, and X, X, X, stirred up elements of his former intense relationship with the guru. Nielsen had terribly abused Palle. He had been cruel and exploitative, but he had never ignored or abandoned him. Dr. Reiter (due to Nielsen and the court) had now disappeared from Palle’s life.

Forced first by the barbiturate, then by conditioning, Palle had shifted the bizarre, deep love and loyalty, called hypnotic **rapport**, from Nielsen to Reiter. Despite those tormenting realizations, Palle now remained loyal to Dr. Reiter. He kept the X threat at bay, fought to stay out of the abyss.

After reading the report, Palle could not sleep. He desperately needed sleep, but sleep would not come. He thought about Bente. She had faithfully and regularly vis-

ited him in prison ever since his incarceration and, once, the thought of her had comforted him. In his weary mental rambles, her image now blurred and transformed into a leering Nielsen face. He couldn't make it turn back into Bente.

When he did sleep, it was worse than the insomniac imagery. Terrifying, dramatic dreams of X frightened him. One night X, in a dream, ordered Palle to follow him again, back to that long ago day when he had first showed himself to Palle in a precious, strengthening vision. Then X was forcing him to obey: OBEY X. Palle tried to fight. He was trying to move his legs in bed, but the more he tried, the heavier they got. Then suddenly, half-dazed, he turned and looked into X's very face, and then he trampled it! His limbs had finally moved to accomplish that. He stomped and stomped upon the face of his god.

When Palle awoke from that dream, he desperately wanted to talk to Dr. Reiter. He asked to see him. The warden informed him it was forbidden. Palle held on, knowing he was scheduled to see the doctor again in a few days to prepare for their next demonstration.

When Reiter finally saw Palle again, he was shocked at the changes in him. Palle explained that, ever since reading the report, he had become more and more unhappy, anxious, scared, depressed, and confused. Reiter gave the induction cue, "P." It took him ten seconds to get Palle into deep trance instead of the usual less-than-a-second. Once Palle was in trance, Reiter suggested that he would have no more frightening dreams.

Then the doctor shifted to preparing Palle for the coming demonstration. It would be attended by Nielsen's lawyer and other court personages. Reiter repeated previous threatening suggestions meant to prevent any deviation from the truth. Right then, Dr. Reiter believed the most important thing he could accomplish for Palle was to win the legal case by displaying the utter totality of Palle's somnambulist obedience.

Reiter Loses Hypno-Control—Two days later, July 23, 1953, Palle was brought into a room where Reiter, Palle's new lawyer, Nielsen's old ones, and other legal personnel awaited him. Palle looked even more nervous this day than the last time Dr. Reiter had seen him. The prisoner was pale, sweating, tense, and ill at ease. Reiter asked if his suggestions under hypnosis had helped. Palle said they had helped at first, but then he had gone back to feeling upset. Palle handed Reiter a note he had written to him in his cell. Reiter read:

I simply shall not be able to stand it much longer. I feel as if my soul is hanging in shreds. My thoughts continually revolve round X-N, myself, the report and everything that has happened...
(Reiter, 1958, p. 178)

Reiter shoved the paper into his pocket. The observers were restlessly awaiting action. He had no time or legal option to give therapy—or even friendship. It was time for the demonstration to begin. Reiter spoke the cue, "P." Once again, it was a long ten seconds before Palle entered deep trance.

Reiter began the show. He suggested paralysis of various parts of Palle's body (catalepsy), then urged him to try to move that part. Palle could not. He stretched him out between two chairs stiff as a board. He suggested numbness, then inflicted pain on various parts of Palle's body to demonstrate the successful anesthesia.

Reiter then told his hypnotic robot that, when he was next awakened, he would be completely blind and deaf. Palle awoke unable to see or hear. He was obviously terrified, unable to comprehend why his dominant senses were not working (because of the amnesia). Reiter reinducted. He suggested a vivid positive hallucination, then a series of negative ones. Then Reiter snapped Palle in and out of trance, over and over, to settle an objection made by one of Nielsen's lawyers, and to demonstrate the subject's complete and spontaneous amnesia for all trance events. Then he put Palle through another series of obedience tests under hypnosis. Reiter suggested to Palle that, after he awakened him the next time, Palle would remember what had happened. He did.

Reiter snapped Palle back into trance. He told the observers he would next demonstrate posthypnotic suggestions. He said to Palle, "After I wake you up, you will see Nielsen seated in a chair beside you, talking to you." He woke up Palle. Palle was distressed to "see" Nielsen. "You didn't tell me he was coming today!" he protested to Reiter.

Still carrying out Reiter's posthypnotic suggestions, Palle conversed with the imaginary Nielsen, who was behaving absolutely in character. The hallucinated image of Nielsen made the X sign at Palle. It said, "X wants you to follow him again."

As Palle tried to fight against the invisible image's power over him, the audience stared. They heard Palle insist to thin air, "It's no use. We're finished. Go! I won't do it. I won't have anything to do with it. Stop!" (Reiter, 1958, p. 179) The image did not stop pressuring Palle to follow X again. Emotion contorted Palle's face as he struggled against the repeated X signs. The fascinated onlookers watched Palle's agony as he resisted the phantom Nielsen.

Seeing that he was scoring impact on the observers by means of the emotion generated in Palle, Reiter decided to give them even more emotion. He rehypnotized Palle and ended the Nielsen hallucination. He said, "At the bottom of your mind there is, at this moment, a particular feeling." He took Palle through a series of intensification



steps: realizing the feeling, becoming clear about what it was, slowly feeling it become stronger and stronger, on up to feeling it “completely overwhelmingly.”

Reiter gave this series of suggestions with secret confidence about what the outcome would be. He had put Palle through exactly the same hypnotic routine several times before. Every time, Palle had responded by saying how much he hated Nielsen because of all the suffering and damage his cellmate’s hypnosis had caused him. Reiter wanted the assembled legal representatives to hear Palle make that impassioned declaration once again.

As Reiter had expected, the watchers now saw Palle, as a result of the doctor’s suggestions, undergo a dramatic change of aspect. Violent emotion surged up in him. His face grimaced with pain and fear, then turned ghastly pale. His body broke into a cold sweat. His breathing became fast and shallow.

Reiter did not understand that Palle was off the script. In deep trance, his subject was experiencing a powerful, spontaneous hallucination. This time, the intensifying emotion he was feeling was not hatred for Nielsen. It was the powerful attraction of the X hypnoprogramming in his mind which Reiter’s suggestions were intensifying.

Palle was now in the grip of a spontaneous visualization. At the edge of the fathomless abyss which he had first seen in his nightmare, he was struggling, wrestling with the dark angel, trying desperately not to be pulled over the edge into that bottomless, lightless chasm.

“Now, tell me what you feel!” Reiter said.

Palle, who was feeling the most extreme emotion neurologically possible, said nothing.

Reiter prompted, for the edification of the audience, “Is it Nielsen?”

Palle finally groaned hoarsely in response, “No, it’s X!” (Reiter, 1958, p. 179) As Reiter had suggested, the terrible emotions in Palle were still steadily increasing in intensity. Suddenly, Palle screamed, “No!”

“What is it?” Reiter asked.

In a state of extreme terror, Palle yelled out, “I MUSTN’T DO IT!”

In the vividly hallucinated drama, he still struggled at the edge of that abyss. He now understood that the dark cavity was not only a concrete reality of terrible danger if he fell in; it was also a metaphor for an equally real state of eternal damnation. Over that edge lay an everlasting hell. He was on the edge, fighting with X, and X was trying with his every wile and strength to pull Palle over that edge, down into the abyss.

Reiter calmly asked, “What mustn’t you do?”

Palle did not answer. Reiter made more ineffectual tries to participate in this hypno-scenario gone awry. Palle remained occupied by terrifying images of his struggle with X (who was now trying to push him over the edge of the cliff). Palle shrieked to X, “LET ME GO!”

Reiter asked, “Who is it that must let you go?”

All the doctor heard for the next several minutes was Palle’s heavy breathing, as he remained in the grip of the deep trance visualization. Reiter was becoming concerned. He hastily said, in as confident a tone as he could muster, “You know that my influence is stronger than anyone else’s.” He gave calming suggestions, trying to undo his previous suggestions that Palle would experience maximal emotion.

Now, however, Dr. Reiter’s words had no effect on Palle. The subject continued sunk in trance and totally distraught. He was still engaged in that terrible life and death struggle against the power of X. In the background, Palle now sensed that a friend, rushing to help him in that deadly combat, was near at hand. But now the doctor’s effort was no use, too late. Palle suddenly struggling up ward from the hypnotic couch on which he lay, crying out, “Let me go. No!”

And then X caught Palle in one last horrible embrace and the god flung him over the edge of the abyss into the deep darkness.

As he fell, Palle yelled out, “Help! Help! HELP!” But he still fell, and fell, down and down, deeper and deeper. As Palle fell, he saw the figure of Reiter again. Now the Reiter image was near the image of X. Palle fell on, down into hell. As he fell, he watched the two figures, X and Reiter, come closer and closer until they touched, melted into one another, and merged into one image! Then he knew! X and Reiter were the same!

In that moment, Palle had realized that he was fighting Dr. Reiter as well as X! What had come together and became identified as one in his unconscious was Nielsen-as-hypnotist and Reiter-as-hypnotist.

Both hypnotists had forced their way into his susceptible mind. Both had gouged a groove of conditioning there by returning again and again to demand absolute obedience from his automatistic sector of mind. Both had made him do things he was not consciously aware of. Both had made him endure things to which he would never have consciously submitted. At that moment, Palle’s unconscious mind saw no fundamental difference between Nielsen, the lowlife criminal exploiter who had used it to rob banks and get money, and Reiter, the high-class psychiatrist who had just used it to demonstrate his slick and powerful hypnotic techniques.

Then Palle woke up from the trance. He woke up on his own initiative, not because he had been ordered to wake up. He woke up because he wanted to wake up! He awoke, and then he burst into violent sobs.

Dr. Reiter sat beside Palle a while, murmuring reassuring things, but really he did not understand at all what had just happened inside Palle. After a bit, Palle did calm down some.

The legal observers had waited patiently through all this. Now that Palle was calmer, Reiter wanted to finish his demonstration. He gave the cue again, "P."

IT DID NOT WORK! Instead of instantly dropping into an unconscious trance state as Reiter had expected, Palle did just the opposite (**conversion reaction**). He jumped up from the couch, and stood trembling in front of Reiter in a hyperalert state of tremendous agitation. His expression was furious and threatening. His eyes flashed with rage. He appeared so near to attacking the doctor that the two police officers who were close rushed forward, seized him, and tried to force him to lie back down on the couch—to again become the passive hypnotic subject everybody was accustomed to viewing.

Palle successfully resisted all their attempts to make him lie down on that couch, fighting with superhuman energy and skill. More police surged in and joined the fray. Even eight of them could not hold Palle down on the leather cushions. Suddenly, he pulled loose from all their grasping hands. He rushed out of the demonstration room into an adjacent hallway. There, he stopped and stood, trembling and breathing hard.

Dr. Reiter signaled the police to stay back. He walked up to Palle and said calming things. Palle gradually relaxed. After a while, he agreed to return to the demonstration room.¹

Dr. Reiter asked Palle to lie down on the couch again. Palle now obeyed. Dr. Reiter did not try saying "P" again. Instead, he pulled a hypodermic needle out of his medical bag, filled it with Evipan, and shoved the needleful into Palle. Reiter had not used barbiturate on Palle since he had first used it to break through Nielsen's sealing suggestions two years earlier. The barbiturate went into Palle's bloodstream and he became narcotized. But all the old hypnotic conditioning was now broken, gone. Palle was narcotized, but not narcohypnotized. Even the drug could not get Palle into an amnesic trance.

The Evipan did, however, calm Palle enough that he could explain to Reiter what had happened to him: the visualization at the edge of the abyss of damnation, the

struggle with X on its edge, the falling, and the merging of the X and Reiter images.

At first, Reiter just could not believe it. He asked, "But you don't now think I'm still merged together with X, do you? You can tell me apart from X, can't you?"

"No," Palle said. "I can't."

Reiter argued with him.

Palle stuck with his new conviction. "You are the same," he insisted.

"That's not logical," Reiter said.

Palle agreed, "It's not logical." Then he explained, "It's not logic but my soul that's speaking, my soul which is in shreds. It is my unconscious part...and that has nothing to do with logic." (Reiter, 1958, p. 181) (It was not Palle's logical left brain, but his imaging right brain which had, quite literally, drawn that conclusion.)

Dr. Reiter never again could hypnotize Palle. He assumed that Nielsen, also, would never again be able to hypnotize Palle.

Trial and Appeals

Palle's new lawyer had been doing his best to understand the case elements and win Palle's friendship. Like his predecessor, he sincerely cared about his client, even though it was just a public defender job. He stayed on the case for the next two years.

The trial preliminaries were now over. Nielsen was charged with robbery, attempted robbery, manslaughter, and having received stolen money. In Copenhagen Central Criminal Court, a jury would listen to the evidence and decide if Nielsen (married, unskilled worker, age 39) was guilty of having planned the crimes of robbery, attempted robbery, and manslaughter (which were committed by Palle), and of having instigated the commission of those crimes by means of hypnosis. The prosecutors wanted life sentences for both Nielsen and Palle.

Dr. Reiter told the jury how he had overcome Nielsen's sealing suggestions on Palle by using Evipan. He explained the threats he had used to guarantee authentic regressions. He told them the history of how Nielsen had parasitized Palle's mind which he had learned from Palle's relivings under hypnosis.

Nielsen's defense team then set out to prove that Palle was insane, and/or a liar. It continued to deprive Palle, insofar as possible, of legal and psychiatric aid. Nielsen,

1. Reiter later described the incident as "strikingly in keeping with the collisions between systems of conditioned reflexes described by Pavlov." (Reiter, 1958, p. 29)



who had lots of experience in court, only admitted something when irrefutable evidence appeared. He admitted, for example, that Palle had used his bicycle to commit the second robbery. He denied, over and over, having any role in either of the crimes. He insisted that he never had any hypnotic influence over Palle. His testimony was recklessly and impudently untruthful: false alibis, lies, changed statements. He refused to answer unwelcome questions.

When anyone seemed particularly dangerous to him...he endeavored by all possible means to out-manuever him and not infrequently with success.
(Reiter, 1958, p. 184)

Throughout the trial, Nielsen and Palle were in the courtroom at the same time, but they were not seated together. When not testifying, Nielsen was trying to catch Palle's attention. But Palle would not look in his direction, so Nielsen's body-language Xs were all in vain. Palle stayed calm and self-controlled throughout the trial, even when cross-examined by Nielsen's lawyers—even when his sanity, his truthfulness, and his morals were insulted in the most extreme way by Nielsen's defense lawyers and his defense psychiatrist, Dr. Geert-Jorgensen.

Geert-Jorgensen, the court-paid medical advisor to Nielsen's defense team, was Reiter's psychiatric adversary in the trial. In court, there is no absolute scientific truth in psychology and psychiatry. There is no one true analysis until the judge rules. Geert-Jorgensen insisted that Palle was lying, trying to excuse his bank robberies and murders. He testified that Palle had systematically, deliberately, and consciously invented the story of Nielsen hypnotizing him. He stated that opinion despite the fact that Dr. Reiter had entered the case because of eyewitness accounts of Nielsen hypnotizing Palle. (Palle was insisting at the time that he had done the crime alone). He ignored testimony that Reiter had forced hypnosis on Palle using a drug and then had dragged details of his hypno-abuse by Nielsen out in a hundred painstaking amnesic hypnotic regressions with threat of strangulation if he lied. It said it was only because of Dr. Reiter's suggestions that Palle had written his second confession.

Jorgensen's bottom line was not facts. It was the old dogma of moral integrity—that it is impossible to cause a person to commit a crime by means of hypnosis, unless that person already has a criminal nature. He admitted that Dr. Reiter had induced deep and amnesic hypnosis in Palle hundreds of times. He insisted that fact was irrelevant. He said that Palle was psychotic before he met Nielsen. He said there was no “medical proof” that Palle had ever been hypnotized by anyone before Dr. Reiter. Although he admitted that Reiter had hypnotized Palle, he called Reiter's

demonstrations of Palle's somnambulist obedience “doubtful.” Similarly, other members of Nielsen's defense team tried every way they could to reject hypnosis in favor of any other possible hypothesis.

Dr. Reiter, if given an opportunity to rebut all those claims by Geert-Jorgensen, undoubtedly would have shredded the claim that Palle had made everything up to shift blame to Nielsen. But Reiter was not permitted to testify again: “Unfortunately the time at the disposal of the court did not allow me to make any rejoinder to Dr. Geert-Jorgensen.” (Reiter, 1958, p. 183)

That left Palle's defense up to his lawyer. The attorney explained that hypnosis was Nielsen's chief means of influencing Palle. He pointed out that Nielsen had subjected Palle to hundreds of hypnosis sessions, closely spaced in time. He said that Nielsen's amnesia suggestions had concealed all that conditioning from Palle's conscious awareness, preventing him from defending himself. When Palle had carried out posthypnotic suggestions, amnesia had concealed the true source of his ideas and behavior from his conscious knowing. Palle was made unable to know what was true in his thinking, and what was imaginary, what was his own idea and what was an idea covertly implanted in his brain by Nielsen.

Geert-Jorgensen's unrebutted claims strongly affected persons in the courtroom who naively believed that “experts” always know what they're talking about and always tell the truth in a courtroom. His “expert testimony” influenced the judge's charge to the jury and also the prosecutor's final speech to them. Both judge and prosecutor stressed that the jury should not regard the case as being about hypnotism. The prosecutor argued that although, in reality, hypnosis was the center of this case, it was not so in legality.¹

July 17, 1954, the jurors delivered their verdict. They found Nielsen guilty of all charges—robbery, attempted robbery, and manslaughter. They found him guilty of planning the crimes, and of causing Palle to enact the crimes by several means of influence, one of which was hypnosis. Nielsen was sentenced to life imprisonment for robbery and murder even though he was not present at the scene! The jury had determined that serious criminal acts could be caused by a criminal hypnotist's manipulations of a somnambulist subject.

Dr. Reiter was pleased with the verdict. He had felt that the odds were completely against his side. Right up to the end of the trial, Nielsen had racked all the visible wins. Dr. Reiter's hard work had paid off. There was a jury decision based on his evidence—and he had a contract for a

1. The avoidance of the hypnosis issue resulted from *considerable fear for determining a new, mysterious and hardly definable crimogene factor in hypnosis...N's defense openly pointed out that by adopting such a theory the court was supporting superstition, witchcraft, the beliefs of the Middle Ages, etc.* (Reiter, 1958, p. 209)

book, which would be published both in Denmark and America.

Palle found it harder to see any victory in the trial's outcome. He had been accused of attempted robbery and two murders. Like Nielsen, he had been judged guilty by the jury. They sentenced Palle to life in an institution for the criminally insane.

The case seemed over. Reiter's professional duties were complete.

Palle Teeters on the Brink—Bente had long since given birth to Palle's baby. Palle felt both responsibility and strong love for his little girl. His feelings for Bente, on the other hand, were ambivalent. He felt he owed her a lot. She had faithfully stood by him despite his bad treatment of her. But she was the type of woman that Nielsen was attracted to, not the sort that he himself would have chosen. And he now knew that he had not chosen Bente. He had courted her only because of feeling hypnotically suggested love. He had been fooled into marrying her. He still felt wounded by the premarital adultery which Nielsen had forced on them. He felt like he and Bente were strangers. He did not expect to ever feel love for her again, but he wanted to do the decent thing by her and the baby.

Palle was no longer under Dr. Reiter's observation, and his mail was now unscreened. In November, 1954, Nielsen began to write to him (with many X's). Palle answered each letter. Nielsen asked Palle to change his statement to the court. Palle refused. Nielsen kept writing, kept X-ing, kept trying to reverse Palle's abandonment of X.

Palle wrote back in defense of himself. He vented his rage on Nielsen with savage, passionate fury—and vulgar epithets. (Persons who are in an emotional state—even a mood of rejecting—are far more easily hypnotized than persons who are indifferent to the inductive agent. Palle's intensely emotional, angry responses to Nielsen were evidence that Nielsen still had potential for hypnotic power over him.) Palle's resistance to Nielsen's induction efforts, held firm. He was his own person again.

In January, 1955, Palle began writing an autobiography on his own. He found it far more difficult than before, now that he did not have the motivation of daily hypnotic commands from Dr. Reiter. Nevertheless, he managed to crank out about seventy pages. Both his parents were elderly and in poor health now. The manuscript, many times, expressed concern about them and sorrow for the close, sincere relationship with them which had been destroyed by Nielsen. Palle mourned, "...what a blight it must have cast over their life...to see how I slowly drifted away from them in a strange way that they could neither understand nor do anything about..." (Reiter, 1958, p. 189)

Palle remembered his childhood dream of growing up, making money, and buying them good things. He longed to be out of prison and able to restore their confidence in him, to help them in their old age. But his mother died in the spring of 1955. His father was also ill. He died early in 1956. Palle's human ties, outside his prison unit, were now limited to his bizarre correspondence with Nielsen, his strained relationship with his wife, thoughts of the daughter he scarcely knew, and the remnant of his bonding with Dr. Reiter.

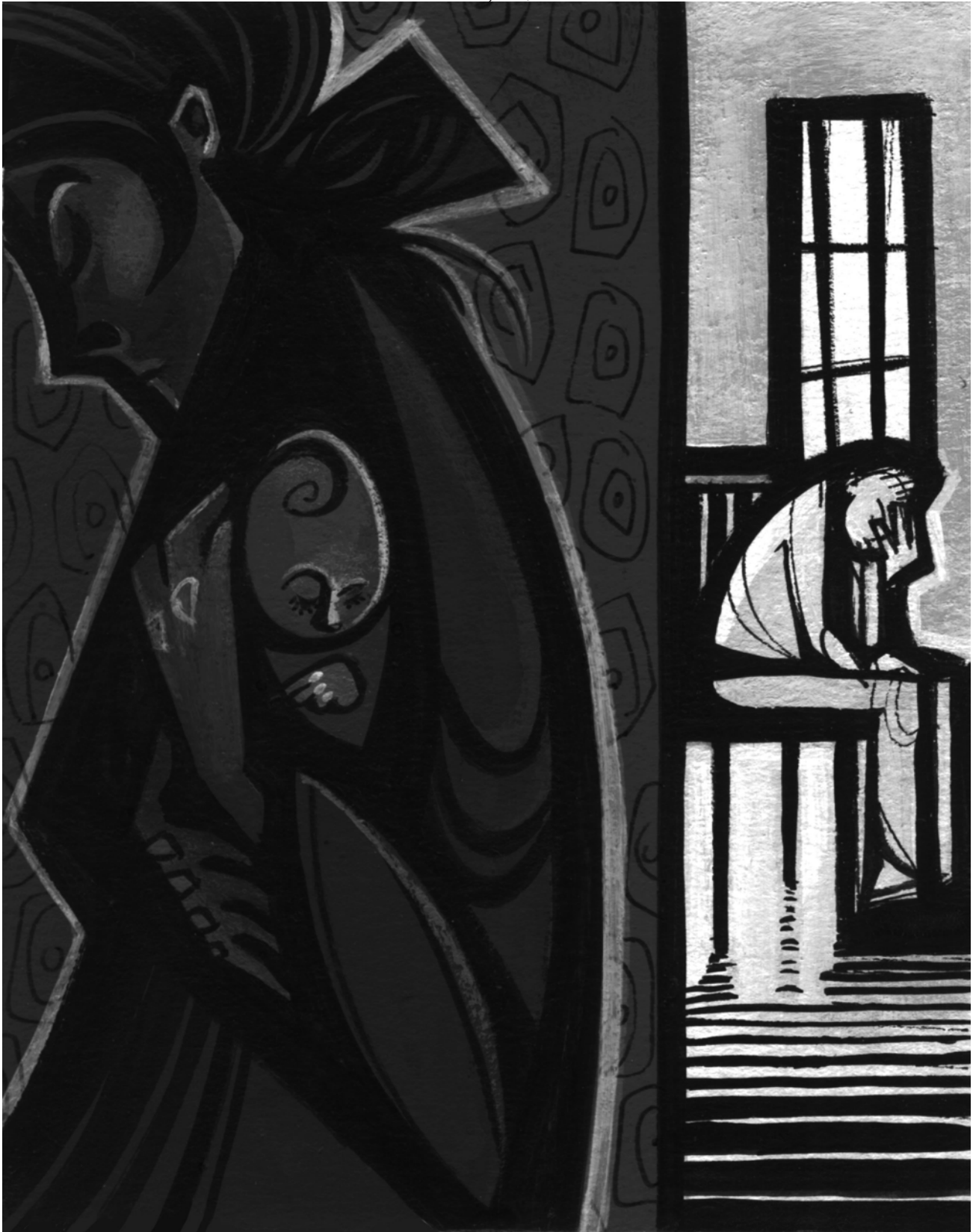
October 12, 1955, Dr. Reiter visited Palle in prison. He was shocked by Palle's state. The prisoner was very tense, very depressed, clearly torn by violently conflicting emotions within himself. On the one hand, he felt that he should accept his life sentence and all its consequences. On the other, he burned with thoughts of its injustice, its failure to reflect the true facts of what Nielsen had done to him. Palle had not yet been moved into the prison for the criminally insane, but he knew that soon he would be sent there. He dreaded the coming shame of that permanent move. He considered it worse than being in regular prison. He told Reiter that he no longer had a future. He also said that he no longer had any religious faith, no hope of any sort.

Palle talked the most about his young daughter. He told Reiter that he had decided it would be best for her if he got out of her life forever. Although the thought of doing so hurt him worse than anything, he was planning to ask Bente to divorce him, change her name, marry again, and raise their child so that no one in the child's life would know that her father was a convicted robber and murderer incarcerated in an asylum for the criminally insane. He added that, for his daughter's protection, he must never see her again. He said that he was truly innocent of the crimes, but that the people in his child's life would never understand that. As he talked to Reiter, Palle trembled with suppressed sobs, and tears flowed from his eyes.

Dr. Reiter could see that Palle was at a breaking point. The doctor knew that the prisoner's future was not as bleak as he thought. Dr. Max Schmidt, Chief Police Psychiatrist, and the Medico-Legal Council were planning to officially advise (soon) that Palle should be transferred from the institution for the criminally insane to a regular mental hospital. From there, they planned a discharge for him (to be followed by several years of psychological supervision).

Reiter longed to comfort Palle with that good news, but since none of it was official yet, the rules did not allow Reiter to tell it to Palle. (Dr. Reiter was a man who always followed the rules.) First, Palle had to go to the institution for the criminally insane and go through their evaluation procedure. The recommendation had to be made official. Then Palle could hear the good news.

In the meantime, Palle broke.



“New Evidence”—Ever since the jury’s decision, perpetual appeals by Nielsen’s legal team (based on his “not guilty” claim) had kept the case in the courts. On November 18, 1955, the Danish

Supreme Court unanimously upheld the lower court’s ruling and rejected an appeal for retrial.

To trial watchers, it looked like the end of Nielsen's defense efforts. A few days after the Supreme Court's denial, however, Nielsen's lawyers asked that the case be reopened by the Special Court of Appeal which Danish law allowed when new information appeared after a verdict. Nielsen's lawyers said they had important new information which, if known before, could have resulted in a different decision.

The Medico-Legal Council's opinion on releasing Palle was officially released a few days later, on November 24, 1955, but nobody informed Palle that he was scheduled to soon become a free man.

In the meantime, Nielsen's "new evidence" appeared. December 18, one month after their appeal to reopen the case began, Palle sent a letter to Nielsen's lawyers. Palle did not show that letter to his own lawyer before he sent it. The letter sounded as if it were dictated by Nielsen—or his lawyers. The content can be summed up as follows:

- Palle admitted committing both the robberies and the murders.
- Palle denied that anybody had ever hypnotized him—not Reiter and not Nielsen.
- Palle said that spontaneous hallucinations about being destined to establish a party, unite Scandinavia, and reform society had caused him to commit the crimes. He said those delusions resulted from a mental problem that had since cleared up on its own.
- Palle said he gave Nielsen the position of party treasurer and, therefore, handed over all the money to him, later discovering that Nielsen had succumbed to temptation and spent it on himself.
- Palle said that Nielsen had received stolen goods, but had not in any way instigated his crimes.

On December 21, Palle sent an associated letter to his own lawyer. It asked that the word "hypnosis" be removed entirely from the case.¹

Palle's lawyer was horrified at this series of letters. He knew they could ruin his client's chance for freedom and rehabilitation. Convinced that Palle's mind had been recaptured by Nielsen, his attorney asked the court to once again provide a psychiatric hypnosis specialist, such as Reiter, to uncover the truth of the matter, and to free Palle's mind again.

When Palle heard what his lawyer had done, he reacted with such fury that his attorney quit. The court appointed a new lawyer for Palle. The new attorney meekly accepted all of Palle's latest declarations about the case. In May, 1956, Palle's new lawyer also filed a request to reopen the case.

Now, both Nielsen and Palle had appealed to reopen the case based on Palle's third version of events, his third on-the-record version of confession. The first "confession" was his post-arrest declaration that Nielsen had nothing to do with the robbery and murders. The second version was his autobiography (written under suggestion), and associated statements—recorded after Reiter helped him recover his memory. The third was in that recent series of letters.

The appeals court now had to decide which of Palle's three confessions was the real one.

Nielsen was writing letters too. He wrote letters to the court saying that all of Palle's old statements about being hypnotized were just ravings. He referred again and again to Palle with exaggerated pity as the "poor psychotic fellow."

Psychological Assessments—Dr. Reiter unhappily observed all these developments from a distance. He was not allowed to talk to Palle now. He followed the developments as best he could. He attended the public court hearings when the case finally came before the Court of Appeal. He noticed that Nielsen's lawyers got Palle's disturbed, angry letters to Nielsen admitted as evidence that Palle was mentally ill. Nielsen's letters to Palle were not admitted. Reiter wondered why not.

In this new trial, Palle testified at length. Dr. Reiter was amazed at how much his former subject's behavior had changed. In previous court appearances, and in his many private sessions with Reiter, Palle had always behaved correctly, like a somewhat nervous, nice, and well brought up young man.

As Dr. Reiter watched the prisoner testify before the appeals court now, however, what he observed most resembled the way Palle was recorded by police observers as having acted when fresh from the murder scene—back when he was full of Nielsen programming. Like then, Palle now was...

...aggressive, cynical, impudent, reticent, dishonest, gave explanations which were obviously incorrect and often badly constructed, accused the police of corruption and bribery and refused to

1. If the hypnosis lobby was supporting Nielsen's defense effort, that is the outcome they would want: no hypnotist is culpable, and hypnosis cases are never to be tried as such.] On September 11, 1956, Palle sent his lawyer a second letter. It claimed that he had only pretended to be hypnotized by Reiter.



make a statement when during the cross examination by the prosecution he found certain questions awkward to answer. (Reiter, 1958, p. 194)

Dr. Reiter no longer had any doubt. He knew that Palle was back under Nielsen's hypnocontrol. Reiter wrote in the notes he was now privately keeping on the case, "His artificially created secondary personality was now plainly dominant." (*Ibid.*)

The Court of Appeal asked Dr. Sturup, head doctor of the Institution for Psychopaths, where Palle was currently confined, to report on Palle's mental state. Palle refused any examination, even a purely physical one. So Sturup informally observed Palle. He reported that Palle was well behaved, always quiet and appropriate. He pointed out that the prisoner's behavior in the hospital differed curiously from his attitude in the courtroom.

He said that Palle seldom said anything about the legal case but, when he did, what he said contradicted his statements in court! For example, in one personal conversation with Sturup, Palle had said "Of course hypnosis played a part" in what was going on. Another time, Dr. Sturup said to him, "You must have a really atypical personality if you were able to fool Dr. Reiter into thinking you were hypnotized for years when you really weren't." Palle replied, "Anyone ought to be able to see all that is in Reiter's report can't be wrong." Sturup said, "I personally saw you under hypnosis with Reiter and it sure looked to me like you were telling the truth." Palle gave a quick nod of agreement.

Sturup then reminisced to Palle about his letter to Nielsen's defense team, and his testimony before the court. As the doctor talked about those things, he noticed tears had appeared in Palle's eyes. Palle brought his hands up before his face, as if to hide those tears. Then he began to pace up and down the room, in an obvious effort to calm himself. He said, "If Nielsen hadn't been there, it would have gone entirely different."

Dr. Sturup whole-heartedly agreed. He, and many other observers, had noted the influence which Nielsen's presence (with his perpetual making of X signs with his legs or arms) invariably had on Palle.

Sturup transcribed these conversations and concluded his report to the court with a statement that he had observed no symptoms of insanity in Palle.

Although, Dr. Reiter had not been involved with the case for some time, the Court of Appeal now asked him to also assess Palle. Reiter was told to do that based only on the case documents—without meeting Palle in person again. Reiter did as requested. He then reported to the court that Palle's second testimony, the autobiography, was the only true one. With an emotional intensity surprising in that normally stern and restrained professional, Reiter in-

formed the court that Palle's third version of confession was the consequence of:

- The court order instigated by Nielsen's lawyer which prohibited further contact between Palle and Reiter and which denied therapy for Palle, and
- The letters from Nielsen to Palle "which the prison authorities with incredible thoughtlessness allowed." (*Reiter, 1958, pp. 197-8*) Reiter said those letters had put Nielsen's longtime hypnotic subject at extreme risk of recapture, a risk which soon became fact.

Nielsen Hits Again—After reading Reiter's report, Dr. Sturup immediately halted Nielsen's letters to Palle. Unknown to Sturup, however, a prisoner had just arrived into Palle's unit who had been previously housed in the cell next to Nielsen. Nielsen knew that this man would soon be transferred to Palle's unit. The guru had given him detailed instructions to pass on to Palle: "X says...." The old X programming was long since reinstated in all its tragic automaticity in Palle's mind. So, when Palle heard that X wanted him to give the cash inheritance which he had received from his father's estate to this new resident (who had outing privileges), he did so.

X's plan was for the privileged one to escape from his attendant on the next outing. He was to then use Palle's cash to purchase weapons and a car, and then help Palle himself escape. X had ordered that, after Palle escaped, he was to shoot the hospital's director and the Minister of Justice. (Maybe Nielsen, or his lawyers, had heard that Palle was scheduled to be released.) After Palle handed over his money to Nielsen's newest subject, the new resident did temporarily escape with it. But he was soon recaptured and confessed all. He could clearly remember the plans he had made with Palle. He was fuzzy about Nielsen's role in it all. If Nielsen, or his lawyers, had been unhappy because of hearing that Palle was scheduled to soon be released, they no longer were. Palle's record now looked worse than ever. The Medico-Legal Council's plan to release him was shelved for the time being.

The matter reminded Reiter of Palle's 1949 escape from Horsens prison, on orders of X—and then he had to serve extra prison time which kept him in longer than Nielsen. But Nielsen denied everything, portraying his usual role of abused innocence.

Appeal Denied—The Court of Appeal issued a preliminary report in May, 1957. The Court's evaluation of the situation was that Palle's mental state was "an artificially established, induced psychosis, created and developed through the influence of another person...making use of all the ways and means at his disposal...including hypnosis." (*Reiter, 1958, p. 201*). It concluded that "induced im-

pulses” (posthypnotic suggestions) had been used by Nielsen to exploit his control over Palle with criminal intent.

A month later, the Court of Appeal held a final three-day hearing. The prosecution studied Palle’s three different statements and finally concluded the “most fantastic and unlikely” one, his second, was the only one which

definitely matched the evidence. On that basis, the Court rejected both Nielsen and Palle’s requests to retry the case.

Nielsen’s lawyers later got the case appealed to the European Court of Human Rights, which decided in Nielsen’s favor.¹

Reiter’s Book

Reiter’s book about the case history of Palle Hardrup and Bjorn Nielsen, *Antisocial or Criminal Acts of Hypnosis: A Case Study*, was first published in Danish, then translated into English.² In addition to reporting Palle’s case history, Reiter also reviewed expert research and opinion on unethical hypnosis, from 8th and 19th century European hypnotists who had speculated and experimented with “antisocial hypnosis” up to his own time. He included synopses of Dr. Kroener’s case of “Z” and the Swedish Sala case.

American writers who mention this case usually misrepresent it. Aaron Moss (an expert on disguised induction?) repeated the crazy stuff that Palle said at his arrest as being evidence of Palle’s mental illness. Moss did not mention that it was programmed in by Nielsen. Moss implied that poor Mr. Nielsen was falsely accused and jailed because of that psychotic Palle and his irresponsible psychiatrist, Dr. Reiter, who generated false testimony in Palle under hypnosis. Moss cited a third-hand “Bech, n.d.”³ as his source of this information. (Apparently, he did not read Reiter’s book.) Several American research hypnotists have quoted Moss as being the final word on Palle’s case.

Reiter pondered these strident denials of the possibility of unethical hypnosis in the face of so much evidence. He speculated that they were due to preconceived opinion so impervious to reason or evidence that it was best termed “dogma.”

...the growth of this dogma was due to very human motives, not least on the part of a number of professional hypnotizers...who understandably enough wished to reassure a public likely to be alarmed by the dangerous potentialities of hypnotism. (Reiter, 1958, pp. 38-39)

1. A British expert, based at Cambridge University, wrote in a legal reference book:

*French and German laws treat it as an instance of absence of mens rea. The argument is that hypnotic suggestion creates a very great compulsion to perform the act. (p. 768)... The question probably depends, in large part, on the extent of dominion attributed to the hypnotist. One opinion favors the view that a hypnotized person cannot be forced to perform acts that are repugnant to him. If this is true, the most that the hypnotist can do in the direction of criminal activity is to remove an inhibition and cause the subject to commit a crime to which he is already inclined. This view is, however, challenged in a recent work by Dr. Heinz Hammerschlag, who concludes from a survey of the evidence that ‘there is no basis whatsoever for the view that moral weakness in a hypnotized subject is a condition for the misuse of hypnosis.’ It seems, therefore, that there is weight in the opinion of the American Law Institute, that the dependency and helplessness of the hypnotized subject are too pronounced for criminal responsibility. (Glanville Williams, *Criminal Law*, p. 769)*

2. Reiter’s book is the most thoroughly professional and detailed English-language psychiatric study of a case of unethical hypnosis. It is also dense, technical, severely jumbled in chronology, and coolly scientific in tone to the point of feeling inhuman.

3. I have not been able to track down this source.



Case History: Candy Jones



...public disclosure of some aspects of MKULTRA activity could induce serious adverse reaction in U.S. public opinion...
 - CIA Inspector General (Schefflin & Opton, p. 132)

A small box sat on the table. Wires ran from it to her wrist and to her shoulder. They shocked her. It hurt terribly. They shocked her, over and over, and asked question after question about the story of her life and her CIA link. She did not know about any CIA link. The torturers would not believe her. They shocked her again. They asked, “What about Dr. Jensen. Do you know a Dr. Jensen?”

“You’ve asked me enough. You should know,” she groaned. “Why don’t you just kill me? Why do you keep me here like this?”

To somebody in Washington, D.C., what those interrogators were doing to Candy Jones was just an experiment to see if the programming of a hypnocourier held up under torture.

Childhood, Youth, and Career

Candy was born in 1925 (two years after barbiturates first came on the drug market). Her birth name was Jessica Wilcox. Her mother was a homemaker. Her father

was a good-looking Polish Catholic who advanced from being a ticket taker (when he met her mother) to being a car salesman in Atlantic City (when he left her mother). Candy was three when Daddy stopped coming home. The mother and her child then went to live with Grandmama in Wilkes-Barre, Pennsylvania. The year was 1928. Grandmama was wealthy, well educated, pleasant natured, and an osteopathic physician.

Mother taught Jessica to sew, draw, swim, and ride, and use good manners. Dinner was always at five, an occasion for which to dress. During the meal, the little girl could speak only if spoken to. She had books, a cat, a dog, and playmates at their summer home on a lake. In winter, however, only her pets—and sometimes the cook’s little girl, Snowflake—played with her. Mother did not allow her to bring friends home from school. They would “mess up the house.”

The child loved to play in Grandmama’s room, dress up in her clothes, sit in front of her big dressing table. She did that almost every day. The dressing table had pullout

mirrors that could surround her on three sides, displaying seven images of little Jessica. One day she played tea party on the dressing table top and invited imaginary friends, the images in the mirror.

She was innocently performing a kind of self-hypnosis. Bright, imaginative children often do. Staring into a mirror invites trance at any age; children and teenagers are most susceptible to induction. You focus. Your mind becomes blank, and there's something about staring closely into eyes. Especially your own.

Jessica's tea party mirror playmates developed into an imaginary "club"—Doty (pronounced Dot-tee, a child's pronunciation of Dorothy), Arlene, Willy, and Pansy. As time went by, she did not need the mirror any more to play with them. Pansy was a good girl, quiet and nice. Willy was a boy who stomped his feet if he could not get his way. Doty tended to fight with Arlene. Arlene was the fastest runner, the highest climber, the strongest swimmer in the club. She had a domineering personality and was always trying to run things.

Grandmama died in 1936. Jessica was eleven. Mother and daughter then moved back to Atlantic City. For the next five years, the young girl's life was uneventful—sheltered, protected, and closely supervised by her mother.

In the wider world, there was war in Europe. Then the Japanese bombed Pearl Harbor, and we were in the war too.

In 1941, Jessica graduated from high school. She wanted to be a doctor like Grandmama, but mother would not pay for her to attend college. Mother told her to go to secretarial school instead. Jessica was not interested.

Candy Jones: Model—In June of 1941, Jessica Wilcox entered the Miss Atlantic City contest. She was the Girl Scouts' candidate. She won. Atlantic City hosted the Miss America pageant at that time. Jessica was not a contestant in the big show, but she marched in the parade and had many hostess duties because she was Miss Atlantic City.

Her long blonde hair, perfect features, tall, long-legged frame, bosomy contour, and sweet disposition attracted attention among the mob of newspaper and media people there to watch Miss America be chosen. The atten-

tion turned into an astonishing rush of enthusiastic press attention. By the close of the pageant, Jessica was surrounded by reporters and radio personalities begging for an interview or a photo. One of the contest judges was John Powers, founder of the famous Powers Modeling Agency. He invited her to come to New York and work for his agency.

To her mother's distress, Jessica accepted. She hung around the Powers stable for two weeks, but received only two photo jobs. (The pay was \$5 each.) One day, on her off time, while waiting for a friend at the other big modeling agency in town, Harry Conover's, her big break came. Conover was a top male model who had founded his own agency and soared from model to modeling mogul. A photographer walked in, saw her, and spoke of her to Harry. Harry walked out, took a look at the blonde sitting in his reception area, and the magic began.

Conover bought the blonde's contract from Powers. He transformed Jessica Wilcox into Candy Jones, bankrolling a media blitz based on a red-and-white candy-stripe theme. Candy had red and white striped clothing, accessories, jewelry, matchbook covers, and bicycle. Conover showered Manhattan with 10,000 red and white striped business cards which said "Candy Jones Was Here."

It worked. Warner Brothers Studio signed her up. She started getting calls to pose for magazine covers and to appear in glitzy ads for products with big budgets. Her mother gave up on secretarial school for her and moved to New York to live with, and chaperone, Candy.

In 1943, Candy was voted Model of the Year. Loretta Young was a judge on the panel. She said Candy looked like "a real girl." The guys in the trenches also thought so. Photos of the tall blonde in a polka-dot bikini were pinned-up wherever there were GIs. A photo of her in a formal dress stitched from transparent parachute nylon was equally well received.

Candy took acting and voice lessons and won a leading role in the smash Broadway play, "Mexican Hayride," produced by Mike Todd. It ran for eight months. She was the model used on recruiting posters for the new branches of the military in which women could serve—





WACS and WAVES. In one month of that amazing year of 1943, her picture was on the cover of eleven magazines. (Estabrooks published *Hypnotism* in 1943, a book which urged government use of unknowing hypnoprogrammed agents.)

Lieutenant Candy Jones—The USO offered Candy an opportunity to tour through the Southwest Pacific in a show written around her. She accepted the task of bringing evenings of happiness to weary and homesick GIs fighting in Pacific operations. She became Lieutenant Candy Jones. She began the USO shows in 1944, with a six-month contract, then signed on for another year—a total of eighteen months. While on tour, the beautiful model, performer, stage show manager, and patriot briefly met General Donovan. (He was head of the OSS, a new agency which President Roosevelt had authorized at the beginning of the war for the dual tasks of gathering intelligence and of doing secret scientific research with military applications.)

In April, 1945, Candy was presented with a quart of fresh milk brought by airplane from Australia—a rare luxury in the cowless Southwest Pacific area. She drank it. But the cow had been sick. The milk had not been pasteurized. Candy got undulant fever. With her resistance down from the fever, she also developed active malaria. They put her in a Philippines military hospital. There, from unclean sheets, she caught a third disease: the “jungle rot.” The rot was a fungus that made her beautiful blonde hair fall out in clumps. The malaria had given her a greenish-yellow skin tone. She looked *terrible*, but the New York photographers were far away. The medics right then were worried about keeping her alive.

While sick on Leyte, she encountered a military psychiatrist, “Gilbert Jensen.”¹ In August, 1945, after four months of treatment and recuperation, she was well enough to go home. Before she left, Jensen gave her a photo of himself with his APO address written on the back. He asked her to write. She did not.

Back in the States, Candy starred in another Broadway musical, a wig and heavy makeup hiding the ravages of illness. It took eight months more healing before she could pose for photographers again. She married her employer, Harry Conover, on July 4, 1946. Marrying Candy was a good career move for Harry. He did not reveal to her his homosexuality. It took five months to consummate their marriage, but Candy—who was a virgin and not sophisticated—did not understand the problem until years later.

A Telephone Induction—Candy’s busy ca-

reer included many invitations to guest on the big time talk shows of that radio-dominated era. Technology could not yet provide phone interviews with quality sound. Therefore, even for a radio interview, she would have to fly to the broadcast station. In 1946, she accepted an invitation to appear on “Don McNeil’s Breakfast Club” in Chicago. (That year, the OSS was reorganized as the CIA with the same two missions: secret intelligence gathering and secret scientific research.) There, Candy met another person who would be important in her hypnoprogrammed future.

Candy flew in the night before the show, registered at the Drake Hotel, and unpacked. Then the chills hit. The Leyte doctor had assured her there would be no more malaria attacks, but this felt like the old nightmare had come back. She went to bed, but the chills got worse. Under a mound of blankets, she was still shivering.

She called a staff employee at the Don McNeil Breakfast Club. He visited her, viewed the situation, and promised a doctor would call. Soon after he left, a doctor, “Dr. Marshall Burger,” did call her on the telephone.

This doctor, like “Jensen,” is known only by a pseudonym. Burger was a psychiatrist who hobnobbed with big names from both the political and entertainment worlds, especially movie stars. He was “a dynamic, craggy-faced egotist.” And he was a hypnotist, “a pioneer and leading authority in the field of medical hypnosis.” (Bain, p. 137) There were

...government-sponsored experimental programs with which he was closely identified. He’d begun working on such programs during World War II, and was one of the first doctors to probe the potentials of hypnosis as a tool of war. His sponsor for that project was the Central Intelligence Agency. (Bain, p. 137)

As Candy Jones lay alone in her hotel room, shivering under the covers, desperate for relief,² Burger talked to her on the telephone. He said he was not able to come see her that night, but that he would drop by the next morning. He told her to count backwards. He said he was trying to relax her. He assured her that, if she would just count backwards, she would stop shaking and fall sleep.

Burger never told Candy that his “relaxation” was a hypnotic induction. At the beginning of his induction routine, Burger did not know whether or not Candy was a naturally good hypnotic subject. A hypnotist never knows for sure until he tries.

1. “Gilbert Jensen” is the pseudonym which author Donald Bain used for him in *The Mind Control of Candy Jones*. We know no other name for him.

2. This incident reveals that the big-time morning talk show of that era, “Don McNeil’s Breakfast Club,” used a psychiatrist with CIA connections, as its on-call, day or night, physician. When the talk show referred a patient, he was usually a political or Hollywood celebrity, alone in a hotel room, far from home, and feeling lousy. He was sick, due to natural, or unnatural?, causes). The patient was not likely to guess that his doctor was a CIA specialist in covert hypnosis.

Now, he tried. He told her to place the phone on the pillow next to her ear and count down with him. He combined the counting-down induction routine with suggestions that her shaking was stopping, her chills going away, her fever dropping. And sleep, sleep, sleep.

As she counted backwards with Dr. Burger, Candy's chills did diminish. She did feel sleepier, and sleepier, and sleepier. She fell asleep. In the morning, she felt okay. Whatever had caused the problem was now completely gone. She appeared on the Breakfast Club, then flew back to New York. She did not know she had been hypnotized. Burger, however, now knew that Candy Jones was susceptible to hypnosis. (Maybe he told Donovan.)

Marriage Breakup, Money Problems—

In 1947, there was trouble inside the Harry Conover Modeling Agency. Other models were complaining that Conover showed favoritism to his wife in assigning jobs. Candy solved that one by opening her own agency right next door to Conover's office in the skyscraper called 52 Vanderbilt Avenue. Soon Candy's agency landed the lucrative Colgate-Palmolive account. She let Harry bill for her agency as well as his, and bank the payments.

Candy was always working. She toured overseas again, managing a USO show for U.S. soldiers fighting in Korea. She continued her modeling career until time took its natural toll, and the photographers did not call for her any more. She published books about glamour, dress, and fashion—and one about her experiences while touring for the USO during World War II. She gave birth to three sons: Harry, Chris, and Cari.

In 1958, she found out that her husband was bisexual (or maybe homosexual). That explained why he almost never reached out to love her. Soon after that, he disappeared completely. Candy took responsibility for all debts, including the rent on his office and hers. Then, she found out that he had withdrawn all the money from their joint bank accounts. Before he took off, there had been over \$100,000 in there. Now there was only \$36.

Candy struggled on. She found new sources of income. She began working on the radio, becoming a regular on the popular NBC weekend news program, "Monitor." Through her Monitor news interviews, she met people in the entertainment business, politics, and the military. Though naturally of a quiet nature, Candy maintained a socialite's life-style, going to Broadway openings and working for charities. She traveled a lot in her business, jetting coast to coast to watch fashion shows and give speeches.

Candy wanted her sons to have the best possible education and a stable environment. Since she was working and on the road so much, she enrolled all three of them in an expensive boarding school. She was also supporting

her elderly mother, and the woman who looked after her. Without her husband's income, however, all those expenses were soon more than she could afford. After a year of desperate financial struggle, Candy finally took her lawyer's advice and sued Harry Conover for repayment of the money he had absconded with—and for alimony, child support, and divorce.

Her legal case against him made juicy headlines for the New York daily papers. In the end, she won. The judge gave Harry a choice of paying or going to jail. But Harry had been giving lavish parties every night for the



past year, and now he had no money left. He went to jail for two years. Candy now also owed her lawyer a big bill for the court case.

CIA Recruits a Courier

Dr. Burger had moved from the Chicago suburb to



southern California. The clientele for his private practice was now the Hollywood crowd, shapely bodies—and opinion shapers to the world. California and New York were centers for CIA mind-control experiments in the 1960s, and Burger was part of that program. (Bain called him the research “project’s messiah.”)

Part of Burger’s job was training other doctors to be mind-control experts for the Company. One of his trainees was Gilbert Jensen. The CIA was then researching a new type of hypnoprogrammed courier, one with a more unbreachable amnesia than mere hypnotic suggestion could achieve: an artificially split personality. Gilbert Jensen would be creating and managing a unit of these unknowing agents.

Candy was a celebrity, a patriot, single, traveled in her business, and badly needed money. She must have seemed a good prospect for recruitment.

In 1960, strange things began to happen at 52 Vanderbilt Avenue, where Candy now ran her modeling school, agency, and what was left of the Conover agency, from Room 808. The events seemed unimportant at the time. Maybe some of them were truly irrelevant. But, looking back, there was an obvious pattern of deceit and manipulation, a sinister web of entrapment starting to weave about Candy Jones.

An Odd Burglary—Heavyweight boxing champ, Gene Tunney, had been Candy’s neighbor across the hall for years. One day, Candy noticed a “cleaning lady” standing outside Tunney’s door. She appeared to be trying to figure out which one, of a set of keys, fit his door. The next day, Gene told Candy that his office had been broken into the night before. He said no harm had been done.

A few days later, Candy ran into General Donovan, now “retired,” in the building lobby. Although they were barely acquainted, Donovan acted quite familiar. He told Candy he was meeting Tunney for lunch. Since he was quite early, Candy invited the General to tour her school while he was waiting. Then she took him over to Tunney’s office.

Several days later, a man visited Candy’s office, claiming to be an FBI agent who was investigating the burglary of Tunney’s office. He walked over to a microphone lying on Candy’s window ledge, picked it up, and looked it over. “What do you use this for?” he asked.

Candy told him that Allan Funt (of “Candid Camera” fame) had given her that mike, a very advanced type in its technology. Her models recorded public speaking assignments using it, so they could learn how they sounded to other people.

“It’s just what we need for a stakeout over on fifty-seventh,” the FBI man said. “Can we borrow it?”

Candy gave her permission.

Mail Service—The FBI man showed up at her office a month later, along with an associate. The two men asked Candy if they could use her office address to receive some of their mail. If any mail came for them, she was to call a certain phone number and report that fact. Candy consented. After that, mail did come once in a while for them. She always called the designated phone number when it did so.

A Favor for Donovan—Once in a while, Donovan now invited her to a party. In November, 1960, the General called to ask a favor. In some way (which he did not divulge to her), he had found out that Candy was scheduled to soon fly out to Denver and speak, then fly on to San Francisco to view a big fashion show. The General asked her to carry an “important” letter on that trip to an unnamed person who would come to her hotel room in San Francisco to claim it.

Candy asked Donovan to what governmental agency this anonymous person belonged. The General would not answer that question. He said that the visitor himself would explain. Candy agreed to carry the letter. Her last exit was about to be sealed off.¹ After she received the mysterious letter at her office, Candy stuffed it into her handbag and flew to Denver. She gave her speech there, then proceeded to San Francisco, where she attended the fashion show. Then, she waited in her hotel room for the promised visitor who was to come and take it from her. It was November 16, 1960.

The man who knocked at her hotel room door turned out to be Gil Jensen, the military psychiatrist she had met on Leyte. She offered him the letter, but he refused to take it. First, he wanted Candy to dine with him at a nice restaurant. She graciously accepted his invitation.

That evening, Jensen seemed to her much less at ease, less happy, than he had been back in the Philippines. Nevertheless, he was obviously trying hard, and he managed to make pleasant conversation. (It greatly helps the first hypnotic induction if the subject likes the hypnotist and trusts him.) He told Candy about his private practice over in Oakland. In turn, she told him about her divorce, her sons, the modeling business, the terrible financial pressures. Once he got Candy started talking, Jensen listened attentively, speaking only to encourage her whenever she seemed about to stop.

1. Was Donovan, consciously or unconsciously, fulfilling some romantic fantasy of creating the ultimate gorgeous, intelligent, female spy?

The Proposition—It was getting late. Again, Candy tried to give him the letter. Again, Jensen would not take it. He said that tomorrow at his office would be a better time to talk about the letter. Candy objected. She needed to get home to New York. Finally, when it was clear that she was not going to stay another day for any reason he had given her so far, Jensen came out with the big persuader. He said: “There’s some interesting work you could do for the Central Intelligence Agency, Candy, without interfering with your business. It could be lucrative.” (Bain, p. 60)

That was different. Candy was always looking for a way to earn money. She agreed to come to Jensen’s office the next day.

The next morning, a car and driver picked her up at the hotel. It drove her across the Bay Bridge to Jensen’s “office” in Oakland, the place where Candy would be hypnotized, drugged, and hypnoprogrammed, far from friends, family, or employees back in New York. The chauffeur helped her out of the limousine, then departed.

Candy stood alone on the sidewalk, looking around her. She was outside a two-story brick building in a run-down neighborhood. Adjacent was a green three-story one. Candy was surprised that the psychiatrist’s office had no sign to inform passers-by that a doctor worked therein. The house did not even have an identifying street number.

She climbed the three wooden steps leading to the front door, opened it, and stepped inside. She was now in a small reception room. The only furniture was two straight-backed chairs and a table. She sat down in one chair. Magazines were stacked on the tabletop, some more than a year old. The light in the room was almost too dim for reading, but she could see that all the magazine address labels had been torn off.

Jensen came in. He greeted her cordially, and led her from the reception room into his office. That room had only one window, shielded from street observation by heavy drapes. A gooseneck lamp with an unshaded, brightly-burning bulb was its only source of light. “Does the light bother you?” Gilbert asked.

“Yes,” Candy said.

He twisted the gooseneck’s flexible shaft a bit, which made no real difference. There were shaded lamps in the room, but none of them were turned on, and he did not offer to switch to one of them.

“Would you like a tour of the office? he asked. She politely accepted his offer. He led her into her a small adjacent room. It had a raised examination table in the center, a white medical cabinet against the wall, and one straight-backed chair. Candy did not think much of it, but she kept

those thoughts to herself. He then led her back to the room where the single bare light bulb burned, seated himself behind the desk, and began to ask her personal questions.

Candy did not feel comfortable. She wanted this conversation to stop. She wanted to get out of there. What she had expected to happen today was a job interview, not just a conversation between acquaintances. She was not bold enough, however, to ask him to get to the point. She kept answering his questions. He asked about her childhood.

Candy said, “It was lonely.” When she told him about the club and her imaginary playmates, Dr. Jensen suddenly showed eager interest. He wanted her to tell him more, and yet more, about each member of the club. So she told him all about quiet, nice Doty, and Willy who stomped, and Arlene who was strong and domineered.

Candy desperately wanted to get the interview over with, head home, and be back in New York by that night. She had delayed her return only because Jensen had offered a “lucrative” job, and she needed money. She asked, “What sort of work am I being hired to do, and with whom will I be working?”

“The unit?” Jensen asked.

“I don’t know,” Candy said. “The general told me that you would fill me in.” (Bain, p. 86)

Jensen ignored her question. He went back to asking about her imaginary friends in childhood.

Candy Signs Up—Candy had arrived at Jensen’s office in the mid-morning. Now it was 1 p.m. She said, “I really must go.”

Jensen ignored her request. He began a new series of questions, this time about her social life: “Do you date? Do you go to cocktail parties? Do you travel.”

Candy said that she seldom attended parties. She did travel a great deal for her business, but did not socialize much at home or elsewhere.

He finally offered her the job: “We could work something out with you from time to time, Candy, if you performed services for us during your travels.”

“What sort of services?”

“Carry a message now and then. That’s all.” (Bain, p. 87)

Jensen assured Candy that she would be paid to carry those messages. He said that she could go back to New York now. He would ask any other questions that he

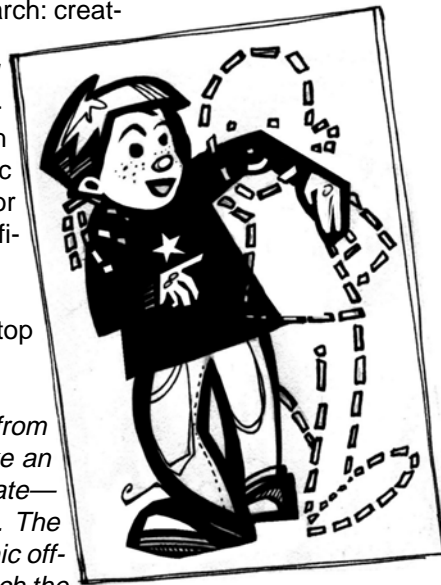


Mind-Splitting Use for Imaginary Childhood Playmate

The government was pursuing exactly that line of research: creating an **artificially-split personality** out of an imaginary childhood playmate. Josephine Hilgard's 1970 book, *Personality and Hypnosis*, states that a person with an imaginary childhood playmate tends to have significant hypnotic susceptibility (research supported by grants from NIMH, the Air Force Office of Scientific Research, etc.). An imaginary childhood playmate is a marker for hypnotic susceptibility. It can also be a point of fracture for artificial personality-splitting.

A CIA memo said that the **candidate**¹ must be in the top 20% of hypnotic susceptibility, and must have

...a dissociative tendency to separate part of his personality from the main body of his consciousness. The hope was to take an existing ego state—such as an imaginary childhood playmate—and build it into a separate personality, unknown to the first. The hypnotist would communicate directly with this schizophrenic offshoot and command it to carry out specific deeds about which the main personality would know nothing. (quoted in Marks, *The Search for the Manchurian Candidate*, p. 184)



The concept was that the hypnotist would transform that childhood nucleus of rejected, blocked traits and impulses into the core of a **subconscious isolate**. When there was a choice of more than one childhood playmate, the split would be built into the toughest, meanest one. Bowart told Schefflin and Opton that all the military hypnoprogrammed persons that he had located and interviewed “have been beaten or abused by one of their parents when they were young. To escape, they created imaginary personalities which a clever hypnotist then used against them.” (Schefflin and Opton, 1978, p. 445)

“R.J.”, a former Ranger and Viet Nam Special Forces retiree told me, in 1991, “Everyone who is going into any branch of the military takes the Military Aptitude Test, the MAT. It asks several questions along those lines: ‘Did you have imaginary playmates?’ ‘How old were you when you quit playing with your imaginary friend?’ After you have decided on your military occupational status, you take another test. People going into Special Forces are asked the same questions—‘Did you have imaginary playmates?’—plus additional ones along the same line. ‘Was that imaginary friend more or less aggressive than you?’ And there are questions about discipline: ‘Did your parents spank you?’ ‘Did you feel resentment when your parents spanked you?’ Almost every person who goes into a Special Forces unit has had a childhood imaginary friend. I did. He was a mean guy. He did things I couldn’t do.”

R.J. was a completely nice guy in his friendship with me, but he had that mean guy tucked away in his unconscious memories, which embodied parental (authoritarian) aggression and violence combined with repressed childhood rage and resentment. Arlene was Candy’s equivalent of R.J.’s “mean guy.” The CIA was not looking for a neurotic. For best programming results, the imaginary playmate must be part of a strong, normal personality, not a disordered, weak one. Brainwashing experts have learned that normal people reprogram easier and shape into a better product than neurotics. Candy had a strong, normal personality.

1. Estabrooks earlier, and Condon later, used the term “candidate” to mean an individual who has been targeted to be made into an unknowing hypnoprogrammed person.

had the next time she happened to come to San Francisco. But, first, he wanted her to fill out a form. He pulled a paper and pen out of his drawer and pushed them toward her. Candy then signed a

...security oath which officially made her an employee of the government, and as such she forfeited her right to legal compensation for the harm done her by the ruthless mind-control operation.
(Schefflin & Opton, p. 121)

By signing that document, Candy had joined Jensen's "unit." She had become one of thousands of part-time CIA employees. (Such employees were not listed in headquarters' records.) Jensen became her **control agent**, her only CIA contact. His **unit** was the people he controlled. The CIA would thereafter be referred to only as **the Company**.

Then Jensen had a few more things Candy must do before she could go. He traced her silhouette on a length of brown paper with a black pen as she stood against the wall with the paper behind her. He said that it would sometimes be necessary for her to travel using a passport with a false name. He asked her to choose the name, to choose something that felt comfortable, natural. For the first name, she chose Arlene, which was a variant spelling of her middle name (Arlene), and the name of one of her imaginary playmates. For the last name, she chose Grant, which was a part of her grandmother's name (Rosengrant).¹

Jensen said that a photographer would come to her hotel room and take photos for her passport. Then the doctor asked, "What did Arlene look like?"

Candy said that Arlene had looked just like her, except darker, brunette rather than blonde, when she saw her in the mirror as a little girl.

The Hypnosis Begins

Disguised Induction—Jensen next asked about her health.

Candy said, "I'm fine."

The psychiatrist said, "You look like you need

vitamins."

Candy said, "My doctor back in New York gives me B12."

Gilbert said, "I know better vitamins than B12." He urged Candy to get into top condition to endure her coming rigors of world travel.

Candy agreed to do that. Then she pulled out a cigarette and lit it.

Jensen said, "That is not a healthy habit. Why haven't you quit?"

Candy said, "I've tried, but I can't."

(Bain does not mention Candy sipping a beverage while smoking that cigarette, but it seems likely, from what

follows, that Jensen applied some chemical

persuasion—a narcohypnotic drug dropped into her drink—before his coming disguised induction. For Candy seems unusually susceptible to what follows, even for a natural somnambulist.

She had been there all day. It was past lunchtime. She must have

been both hungry and thirsty. If Jensen gave her a beverage about this time which contained an oral dose of barbiturate, after about half an hour she would have been thoroughly under its influence, extra susceptible to hypnotic induction.)

Jensen then discoursed, at length, on methods to quit smoking, including hypnosis. Candy said she could not be hypnotized. Jensen asked if she had ever tried. "No," Candy said, but she was sure she was not susceptible. Jensen knew, because of those imaginary friends, that she was wrong, but he did not tell her so.

[He]...sat back in his chair and clasped his hands on his chest. "You're probably right about that," he said. "There are lots of people who can't be hypnotized." He then launched into a quiet lecture on the evils of hypnosis as practiced by charlatans and quacks, coming down especially hard

1. Later, Candy would remember visiting Jensen in Oakland only once, the first time. Of that visit, she could only remember what had taken place up to the time when he agreed that she could not be hypnotized. Other details in this narrative were recovered by later rehypnotization.



on the stage hypnotists. “I’m really dedicated to putting a stop to the misuse of hypnosis, Candy. Dedicated to it. By the way, would you like to see how some people practice hypnosis?” (Bain, p. 91)

Candy nodded. Jensen stood up and led her on another tour of his office.

He was taking a long time, and being very patient, with this **first induction**. He could have ordered three strong men to hold her down, while he shoved a needleful of barbiturate into her vein which would send her straight down to a deep trance. Hypnoprogramming resting on a foundation like that, however, would be on an more unstable base. For his preferred outcome, Jensen needed to seduce Candy into the first induction in an atmosphere of friendship. If a hypnotist can get a few sincere “yesses” from a prospective mind-control victim before they begin to apply the harsher aspects of programming, a more effective unconscious basis for long-term control has been established.

Therefore, Jensen acted very pleasant as he took her on this second tour, chatting all the while about his plans to help with a crackdown on “people who try to hypnotize people, entertainers and all that.” (Bain, p. 92)

Induction Hardware—Jensen had now led Candy into a section of the building which he had not shown her before. As the two walked around, the psychiatrist demonstrated item after item of a truly remarkable collection of hypnotic induction gadgets—some simple, some very sophisticated. He patiently showed her how a hypnotist would use each one in order to induce a trance in somebody, if they were hypnotizable, “although I know you can’t be.” He demonstrated pendulum, candle, and metronome inductions. He showed a mechanical sound maker (which he later used to create her telephone induction cue).

Last of all, Gilbert brought her to the big mirror. He knew that whatever—or whoever—has hypnotized a person before tends to keep that ability. He had learned, that morning, that Candy Jones hypnotized herself, as a child, by staring into a big mirror. He now suggested that she sit down on the chair in front of his mirror. She obediently sat, looking at her reflected image. As she stared into the mirror, he led the conversation back to Arlene. They were talking again about Arlene. (At that time, she was merely talking about Arlene; she was not yet being Arlene.) As Candy looked in the mirror and talked about Arlene, she slipped down to a trance level of consciousness.

Drug Inductions—After the mirror induction,

Dr. Jensen told Candy to lie down on his “examining room” table. There, he gave the blonde celebrity her first dose of “vitamins.” Years later, her second husband, John Nebel, found himself playing Jensen’s role in her spontaneous self-inductions and regressions to this era of her life. John did not question the “vitamins” she repeatedly mentioned until he realized that Jensen had given them to Candy by IV into the big vein inside the elbow rather than by injection into the muscle of an arm or buttock. Then, John became suspicious. One day he discovered what Candy was really given:

JOHN: The bottle is hanging on the stand?

CANDY: Uh-huh. Like they used to have.

JOHN: Like intravenous feeding.

CANDY: Uh-huh.

JOHN: The bottle’s upside down, isn’t it?... (Candy looks up and squints)...Isn’t it upside down?...

CANDY: (surprised) Yeah.

JOHN: What’s it say on the label?

CANDY: (after a long pause) I’m reading it backwards.

JOHN: Yeah, I know. What’s it say?

CANDY: (haltingly, as though trying to make out the word) “Am...i...tol...”

JOHN: What’s the first word?

CANDY: ...Must be sodium.

JOHN: Sodium? Does it say the name of the pharmaceutical company on the label?

CANDY: I think it says Warner. (Bain, p. 97)

Candy’s Conditioning and Training

Candy’s conditioning by Dr. Jensen was grounded in three **narcohypnotic immersions** (“vitamins”) at his Oakland office, two in late 1960, the third in early 1961. Each immersion lasted for hours. During the narcohypnotic immersion, basic suggestions would have been made for a **reinduction cue**, and for future **amnesia** regarding that, and all subsequent, hypnotic events. Then the subject would have been pulled out of trance and tested to see if the reinduction cue and amnesia suggestions were working as planned. Only when he knew that her amnesia was firmly in place and that his reinduction cue was operational, would

1. In 1965, Teitlebaum, a writer on forensic hypnosis, offered a script called “Espionage Technic” in a section titled “Governmental Uses of Hypnosis.” The programming was designed to turn a new officer on the force into an unknowing hypnotic subject:
To aid you in your work in the future, I am going to give you some suggestions which will remain in your subconscious... when you awaken, you will not be aware as to the nature of the suggestions, but they will guide you... (Hypnosis Induction Techniques, p. 170)

Jensen have let Candy go back to New York.¹

Over the next months, the CIA experimenter developed Candy's somnambulist amnesia and obedience under a continuing series of those narcohypnotic immersions. But even the power of suggestions given to a drugged subject did not satisfy him. Somnambulist amnesia blocks can be lifted by a competing hypnotist's **rehypnotization**. Jensen was experimenting with creating a new kind of amnesia, one that was even harder to overcome than suggestions for amnesia given under narcohypnosis. He wanted to make Candy Jones into an **artificially-split personality**.

Artificial Personality Splitting—The moment that Jensen heard Candy describe Arlene's personality characteristics of strength, dominance, and aggressiveness, he knew which member of the club he would build into a separate personality. Jensen wanted an agent who could be in deep trance, but could pass for somebody awake and normal. It can be assumed that the CIA wanted a **split** with the advantage of knowing all of both personalities' lives, whereas the **root self** (Candy) would know nothing of her second, hypnotic life. By artificial personality splitting, they hoped to achieve both goals: the **waking hypnosis** and **one-way amnesia**.

To accomplish that splitting, Jensen would use narcohypnosis and intense hypnotic training, followed by insistent, repeated suggestions for Arlene to "come out." The psychiatrist told Candy that the drug was vitamins to strengthen her body. The neural remnant of Arlene left in Candy's mind from childhood, however, soon realized the truth. Jensen was after her. Jensen found the plan hard to carry out. Although Candy's conscious mind was drugged and unconscious, the neurons in her brain which contained the matrix of her childhood Arlene persona resisted Jensen's invitation to become self-conscious and independent.

Jensen persisted. One day, after an extra-strength, extra-long drug session and many insistent verbal summonses, as Candy lay in deep drug-trance on the examining table in his inner office, the CIA doctor finally succeeded. Suddenly, Candy felt severe stomach pain. (Jensen had told Arlene to "come up through Candy's stomach." Thereafter, Candy always felt that same pain at the moment she switched personalities and Arlene came out—a psychosomatic conversion of her resistance.)

ARLENE: ...and all of a sudden I was able to say a few words and start to talk again.

JOHN: (laughing) And was he surprised?

ARLENE: He backed away. I got ahold of his arm, and then he said—

JOHN: You mean Dr. Jensen's arm?

ARLENE: Yes, with my left hand. And I pulled him over, and he said, "Let go!"...And he said, "What are you trying to do?..."And he said, "Candy, Candy, stop that!"...And I said, "This is Arlene."...And he said, "You're hurting me!" (a pleased laugh)...And I was. And he said, "Good God, you're strong."...

JOHN: Meaning you, Arlene?

ARLENE: Yes. And he said, "You're Arlene."...And I said, "Who were you expecting?" (Bain, pp. 106-7)

Candy had no conscious memory of that conversation. From then on, she was broken and separated. Her split—and all its subsequent experiences—were walled off by amnesia from her.

Although Jensen was always somewhat afraid of Arlene, he continued to call her out and train her. It was his job. In that early conditioning stage, Arlene sometimes resisted her cue—"A.G., A.G."—to materialize. Jensen had to use drug induction, again and again, to cause "Arlene Grant" to appear. If Candy's mind refused the splitting command, even when drugged, then Jensen would resort to more and more barbiturate. Once, he almost killed her:

JOHN: Did you ever fail to come out?

ARLENE: Yes. (becoming intense) Lots of times I wouldn't.

JOHN: And what did Jensen do?

ARLENE: Give her another shot.

JOHN: Another shot. What was the most number of shots she ever got in one day?

ARLENE: He gave her three once and she couldn't wake up. And he got scared.

JOHN: How long was she out?

ARLENE: She wasn't out, she was asleep. She slept for about fourteen hours. (Bain, p. 108)

Later, Jensen fully conditioned the neuronal matrix called Arlene to complete takeover at his verbal cue. He would seat Candy in a darkened room in front of a candle, in front of a big mirror. The CIA technician would light the candle and then say, "Look in the mirror and see Arlene." When Candy peered into the depths of the reflective glass, she would always see Arlene. Then Candy would be gone, wherever displaced personalities go, and Arlene would have the body.

Then Jensen simplified the process yet more. He



left out the candle. He would simply say to Candy, “Look in the mirror,” or ask her, “Do you want to see what Arlene looks like?” Either statement now cued the displacement of the Candy personality by the Arlene split. Candy would always look in the mirror when Jensen suggested that. She always wanted to see what Arlene looked like. And, the moment she looked in Jensen’s mirror, Arlene would always emerge and displace her.

For the rest of Candy’s life, both her selves—Candy and Arlene—had conscious, separate existences. In one important way, however, their lives were completely different. Candy’s part of the mind “slept”—on-the-shelf, non-existent, “dead”—when she was Arlene. Arlene, on the other hand, was conscious all the time—thinking, feeling, aware—whether she had the body or not. Arlene went everywhere that Candy went. She was the hidden observer, noticing and remembering all that Candy thought and did.

Arlene was so powerful, and yet so helpless. For all she could do was watch and listen and know the real truth, the whole truth. Arlene only controlled the body—with its physical abilities to speak and walk—when Jensen summoned her out to do his bidding. When she was called out, she was in a condition of waking trance, capable only of absolute obedience. Arlene was Jensen’s genie, hidden in the bottle of Candy’s mind. Jensen released her only when he had a use for her.

The experiment had succeeded. A celebrity, Candy Jones, captured by deceit and disguised induction, now was an unknowing CIA-controlled hypnotic subject. Her artificially-created hypnoself, Arlene, acted as the knowing, loyal, secret agent, compactly hidden within the unknowing mind of the original **root self** of Candy—unless activated by Jensen.¹

Over the next twelve years, Jensen called Candy to Oakland again and again, for “vitamins.” There, he did an extended series of experiments on her. He forced her to drink orange juice laced with various drugs, injected new substances into her, tried out new conditioning routines.

One *classic conditioning* routine began with Jensen saying, “The light is out!” Then he would turn it off. Later, as the association conditioning took hold, he would just say to her, “The light is out.” Then the room would seem totally dark to her—even when the light was still on.

Induction Cues—Jensen could also hypnotize and program his human puppet by phone. He might call, talk to Candy a moment, then call out Arlene (using an auditory cue). Or he might play the cue the moment Candy’s voice answered, then talk to Arlene. (Candy would imagine

afterwards that it was a call with nobody there, because of having no memory of hearing Jensen’s voice. She would hang up, thinking nothing of it.)

The CIA doctor’s telephone cue to make Candy “relax” and switch personalities was a mechanical metronome sound which Arlene called “the code”—a unique series of tick-tocks which sounded faster and faster. He had an oral version of that induction code too. Sometimes, after Candy arrived at his office from the airport, she would wearily sink into a chair, and “doze off.” Arlene knew, however, that the sleep Candy fell into in that chair was not a natural one. Candy fell asleep because she heard Jensen speak a brief series of nonsense sounds. Afterwards, Candy never remembered hearing the induction cue. Only Arlene remembered that.

Isolation—Jensen concealed Candy’s programming, and his experiments on her, as if his life depended on it. He kept the existence of Arlene secret from Candy. He also kept what he had accomplished secret from foreign intelligence, and from the public, and from other CIA employees.

The first stage in any mind-control program involves isolation from family and friends while the foundation programming is implanted. After that, a more permanent form of isolation is built in: talk frankly only with “us”; stay away from “them.” Jensen and Burger also programmed



1. Arlene always scorned Candy. Estabrooks had proposed that the two personalities should be designed to conflict with each other. (*Hypnotism*, 1957, p. 203) They did.

in harsh prejudices for the purpose of alienating Candy from all definable groups of people. Jensen's flat "no-friends" rule dealt with the rest. The mind-controller wanted her to be a self-sufficient loner who avoided people and avoided relationships because Candy said, "...most of them wouldn't understand what I was doing. I couldn't take the risk." (Bain, p. 141).

Candy had been a lonely child. Now, though well-known and popular nationwide, she was a lonely adult. Love

was also forbidden. Candy was a famous beauty, a noted author who traveled widely in her work and met many eligible men. She sometimes thought about one man in particular, John Nebel. She had met him once, years before. Now she often listened to him interviewing guests on his late night talk show. Obedient to her programming, however, she never acted on her feelings, never communicated them to him, never even communicated with him. It was just a secret, hopeless crush. For Jensen had told Candy, while she was hypnotized, over and over, that she would never

Telephone Induction

Trance can be induced over the phone, even the first time, if enough factors favor the hypnotist. For example, when Burger first hypnotized Candy she was

- naturally susceptible to hypnosis,
- sick (which raises hypnotizability)
- desperately wanting to feel better (which provided motivation and motivation also raises it), and
- isolated, with nothing else to pay attention to except his voice over the phone.

Once a subject has been told the cue for posthypnotic induction, the process is even simpler.

If the subject has been hypnotized previously, it is only necessary to tell him that he will feel as heavy and tired as he felt on the last occasion when he had been hypnotized, but that he will still be able to hold the telephone to his ear. (Furst, p. 203)

The hypnotist speaks, or sounds, the posthypnotically suggested induction cue over the phone when he gets his subject's ear on the other end. He doesn't have to say "Hello" first. That would give his subject a predator-on-the-phone warning and the chance to hang up before the induction cue is spoken. Instead, the hypnotist gives the induction cue first. Immediately, in a person programmed for routine amnesia during trances, the subject's conscious mind is off-line. Only the reflexive hypno-robot is listening. The hypnotist gives his instructions to that subject's unconscious. When he is finished, the phone call and the hypnosis are terminated (probably both at once) by a routine suggestion.¹

marry again. He said she did not want to get married.

Jensen also denied complete medical care to his subject. The psychiatrist's deep-level hypnotic suggestions made her terrified to visit any doctor other than Dr. Aldridge (head of OB/GYN at Women's Hospital, N.Y.C.). Aldridge, her longtime personal physician, was trouble enough for Jensen. When Candy told the gynecologist about her flights to the West Coast for vitamin shots, Aldridge protested. He said, "Vitamin B12 is only given into the buttocks muscle. If given in the arm, the shot would be intramuscular, not intravenous." He urged his famous patient to refuse any more of Jensen's "vitamins."

Dr. Aldridge shook Candy up enough that she had a big argument with Jensen about those vitamins the next

time she went to Oakland. But, when she returned, the argument was settled in Jensen's favor. "There are different schools of medicine," she later rationalized to Aldridge. (p.124)

When Candy needed dental work, Jensen stalled her. The condition of her teeth became worse and worse. One day, she asked permission to make a dental appointment to have all her work done in one sitting—under Sodium Pentothal. That notion greatly upset Jensen. He insisted that she must never let anyone give her that drug.² Jensen did not rule out just Sodium Pentothal (a favorite of hypnoprogrammers). He forbade any dental anesthetic for her, even Novocain. Because of her chronic toothaches, Candy pleaded with Jensen many times to let her visit a dentist. He finally agreed to let her visit a CIA dentist,³ but then stalled again. The CIA dentist never was available for

1. For articles on hypnosis over the telephone, see Cooperman & Schafer, 1982; Owens, 1970; Stanton, 1978, and Owens, 1970; Weitzenhoffer, 1972.

2. Pentothal is a narcohypnotic and could have released Arlene.

3. It was standard procedure for CIA operatives to receive medical and dental treatment only from cleared physicians assisted only by cleared nurses and technicians. In case of surgery, another agent would stand nearby to note any unauthorized thing the patient said under anesthesia.



her.

Jensen also worried that Candy might visit a psychiatrist. He especially warned her never to allow herself to be given the powerful tranquilizer thiorazine. The involvement of an ethical psychiatrist is the thing most feared by an unethical operator. Psychiatrists understand narcohypnosis. They can administer barbiturates which penetrate sealing suggestions. They understand methods by which to program the unconscious—and by which to deprogram it. Candy later explained to John (obviously unconsciously parroting Jensen's statements) why she could not make an appointment with a psychiatrist:

"I'll get very, very sick and I might even have a convulsion. I've never had a convulsion, but I will know what one is like if I go to a psychiatrist...he said it would start in my stomach and he said that I would get very upset because they ask you too many questions...They'll think that you're crazy. They wouldn't believe you. They would think something has happened to you."
(Bain, pp. 129-130)

Candy tried hard to stay healthy. She knew that she could not seek help if she became sick because of her "phobia"—a fear of medical attention.

Training for a Hypno-Agent—The CIA sent Candy to Camp Peary, several times, for training in secret service tactics: "Detect, Destroy, and Demolish." There, at "The Farm" as insiders called it, she learned to search a room, commit arson, leave no clues, commit suicide with a poisonous lipstick, or commit murder by sticking a pin into the lipstick, and then into a victim. The curriculum also included the use of acid as offense and defense, firing various types of guns, climbing ropes, writing coded messages on fingernails, then painting over them with polish. And so on.

Courier in Action—In 1965, under the heading of "Espionage" in a book called *Hypnosis Induction Technics*, a programming script appeared:

Agent X, you are now in a deep hypnotic trance. When you awaken from this trance state you will not remember that you have been hypnotized....you will believe that you have never been hypnotized before in your life and that you cannot be hypnotized. In fact, if anybody should ever ask you if you have been hypnotized, you will say, "No, I have not been and I can't be"...you will know that if anybody ever hypnotizes you or attempts to hypnotize you, other than members of this particular unit, you will become extremely nervous, will feel sick to your stomach...In the event of your

*capture...you will find that you have no memory for...anything to do with espionage. No matter what type of questioning or hardship you may have to undergo, this information will never be released by your subconscious to your conscious mind. (Teitlebaum, *Hypnosis Induction Technics*, pp. 172-3)*

For Candy, it was not hypothetical. She was a CIA courier. It was all conditioned routine now: get off the plane, go to Jensen's office, take out her Arlene wig and clothing from Jensen's closet, change into them, receive her fake passport from him, and then get a dose of "vitamins." After that, Arlene went wherever Jensen directed, usually carrying a sealed envelope. She delivered them to major East coast cities, handing the envelope to some waiting stranger in a restaurant, office building, or hotel.

Consciously, Candy knew that she delivered mail, a task which sometimes involved travel, for the CIA. She knew that she used various names, including the name of Arlene Grant (she had a passport in that name). She knew that she had rented a box at the Grand Central Station post office, in August of 1961, under her birth name of Jessica Wilcox which she checked every day until about 1969—though mail seldom came. When it did, she knew that she was to take it to her office. An unknown man would collect it from there. Or somebody would telephone her with instructions to deliver it somewhere in the city. She knew it all must be kept secret. That was all she consciously knew.

The CIA did pay, but irregularly, and never directly. Instead, they would send several thousand dollars at a time to pay for her sons' school or to pay a family hospital bill—as if it were an anonymous donation.

Candy gradually realized that delivering those letters sometimes put her in situations that might be life-threatening. She then wrote a formal letter to her lawyer, the first time she communicated anything about her secret work to another person. She put a copy into her safe deposit box. In the letter, Candy said that she used three names: Jesse Wilcox, Candy Jones, and Arlene Grant.

In the event of my death, due to an accident or sudden illness...please have my demise checked, if at all possible...I am not at liberty to divulge the sideline activity in which I am involved; however, you can be assured that in no way is it illegal, immoral or unpatriotic. (quoted in Bain, pp. 112-133)

Candy confided a little more to her old friend and editor at Harper and Row, Joe Vergara. He did not believe her. She had the impression that he interpreted what she told him as evidence of a mental problem.

One night, Jensen instructed Candy to attend a

party which was being given by Bill Buckley at the '21 Club. (Buckley ended up a dead CIA station chief in Beirut.) Candy's assignment was to photograph the man who came in and insulted Buckley during the party. Candy was there. The man arrived, sought out Buckley, and insulted him with censorable language, just as Jensen had predicted. Candy snapped his picture. She did not know who he was.

Candy delivered the picture to unit-controller Jensen, who had just demonstrated his prowess to chief Buckley. From then on, the doctor proudly displayed that photo on his desk. It was a secret souvenir, trophy evidence of two of the minds he presumably controlled: Candy Jones, who could be made to photograph a stranger, and the strange man, who had been caused to insult Buckley. That kind of thing amuses hypnotists.

Torture and Shame Experiments

The two main centers of activity in Candy's CIA messenger job had been New York, where she lived and worked, and San Francisco, where she flew to get her "treatments," transformations, and assignments from Jensen.

Now, Jensen began a series of experiments which were carried out in a third city, Taipei, Taiwan, presumably by cooperating Republic of China agents. They tested the hypnoprogrammed courier's behavior by mimicking her capture and interrogation by "enemy."

The experiments tested how well her hypnotic amnesia withstood cordiality—and torture. Could torture break Candy? Would she be so convinced of her innocence as to act honestly indignant? Could ruthless torture make her reveal the secrets of her conditioning? Would her amnesia and personality splitting hold up even under humiliation and excruciating pain? Or would she confess all the secrets of Jensen and Arlene?

The CIA first discussed this particular **terminal experiment** in 1954.

Such an experiment could have been performed, as [Morse] Allen suggested, by friendly police in a country like Taiwan or Paraguay. CIA men did at least discuss joint work in hypnosis with a foreign secret service in 1962. (Marks, pp. 187-8)

John Marks made that statement because a document, proposing the foreign experiments which Candy had already described, turned up in 1978 among CIA papers he obtained by means of his Freedom of Information Act lawsuit against the CIA! Marks then submitted another FOIA request, specifically seeking information on that "joint work in hypnosis." The CIA, however, refused to release any documents about hypnosis experiments "in cooperation with foreign intelligence agencies." Another document, which survived the episodic CIA shreddings of their mind-control research records and was eventually obtained by John Marks, listed titles and

dates of document packets in seven boxes of MKULTRA experimentation records (152 sets in all). All contents of those boxes had been destroyed, but the title/date list had survived. The last five entries are:

MKULTRA	146 Aug.	63-Sept. 64
"	147 Oct.	63-May 67
"	148 Nov.	63-Sept. 64
GRANT	151 Feb.	66-Dec. 67
"	152 May	66-June 66

Does GRANT refer to Arlene Grant? That pseudonym, which Dr. Jensen assigned to Candy the first day she signed up for his unit, may well have been the name under which her experimental records were stored. The years of 1966-1967 match the period of time when Candy was making trips to Taiwan. Those journeys required extensive preparation and coordination between the CIA and their counterparts in the Republic of China.

The experiments on Candy, which took place on the island of Taiwan, began in the fall of 1966. We do not know exactly how many such trips she took. Of all the things that Arlene had to relive (her only way to communicate to John what had happened), the most difficult for her to reexperience were the cruel torture experiments. "She invariably became hysterical during these sessions." (Bain, p. 201)

Candy/Arlene told John Nebel about those experiments in 1973. Bain's book, which made public the history of her hypnogramming and use as a CIA experimental subject, was published in 1976. Candy's information predated the FOIA releases. They corroborated her account.

Nice Treatment—On her first trip to Taiwan, however, Arlene was treated well. She was told that her contacts were "businessmen." Indeed, it was a former president of Taipei's Chamber of Commerce who met her at the airport. When she offered him the envelope she carried, he would not take it. Instead, he insisted that she must come to his "home."

Home turned out to be located twenty miles outside Taipei. It was big and institutional looking. There were several other sizable buildings on his "estate." Arlene saw two women wearing lab coats talking to each other outside one building. That seemed odd. She asked her host about them. "Household servants," the man curtly replied.

For the next three days, her host devoted himself to pleasing Arlene Grant. It was Stage One of the experiment: Can you wine and dine the truth out? Together, they shared wonderful feasts of exquisite Chinese cuisine and visited the tourist highlights of Taiwan. Arlene, at no time, confided that she was really Candy Jones and had been drugged, hypnoprogrammed, and personality-split by a CIA doctor. She did take lots of photos.



When she arrived back to San Francisco, Jensen met her at the airport and personally drove her to his office for the switch back to Candy Jones. As usual, Candy left her fake passport, wig, A.G. clothing, and brunette makeup in Jensen’s office closet. She gave Jensen all the exposed film from her “sight-seeing” trip.

Back in New York, Candy found her office staff frantic. She had been gone for a week—and she hadn’t even told anybody that she was leaving!

Torture—A month later, Jensen again summoned Candy to San Francisco, turned her into Arlene, and sent her to the Far East. The same man met her at the Taipei airport. He took her to the same big house, and there accepted the letter she had brought. This time, instead of pleasantly entertaining her, he imprisoned and tortured his guest.

The simplest test of hypnotic depth is to suggest anesthesia, then test the subject—with pin, or match flame, or needle—to see if he feels pain. A person who is hypnotized and has been given a preparatory suggestion of numbness does not feel the pain. Candy felt the pain that they caused her normally, like a person who isn’t hypnotized. Being unaware (anesthetic) would have given away her hypnotic state. Yet she endured without breaking—like a hypnotized person.

Candy later told John that they shocked her, “Because I didn’t have what they wanted. I didn’t give them what they wanted.” (Bain, p. 197)

They strapped her into a chair by a table, and then....

CANDY: They put a solution first on the skin...

JOHN: A saline solution?

CANDY: I don’t know...a solution...they put it on

with gauze on a long stick...like a Q-tip...they stuck a wire on the wet area...They put the wire on your finger and...

JOHN: ...Do they wrap the wire around your finger?

CANDY: They just touch it to the area where the solution is.

JOHN: Is the current on?

CANDY: Of course.

JOHN: And the wire is attached to a box?

CANDY: Yes, like a manicure set, or an electric hair roller. A little box with a few dials on it...

JOHN: Did it spark?

CANDY: I didn’t look. But I heard it. It hisses.

JOHN: And it hurts.

CANDY: Momentarily. It’s a shock. It makes a blister... (Bain, pp. 194-195)

When they finished, the blisters were so bad that she could not put her fingers together.¹ Blistered and suffering, she now heard the Chinese businessman talking in Chinese to somebody on the

phone. Then he hung up the phone and unstrapped her from the chair.

He was acting friendly now. He apologized for the shocks. He insisted they were merely an effort to help her memory. He arranged for her to eat lunch, then drove her to catch the return flight to San Francisco.

Back in the U.S., Jensen also apologized to Candy for the torture. He said it was all a mistake, caused by a typographical error in the letter she had delivered.

Despite the torture, every time Jensen sent his hypnorobot to Taipei, she went. On a different trip, they

Measurable Degrees of Agony

Shocking inflicts measurable degrees of agony, so electrodes have long been a laboratory method for testing hypnotic depth, control, and pain tolerance.

This writer uses a little device known as a variac. This is plugged into an ordinary light socket and it delivers the exact voltage required. The contacts are placed on the palm and the back of the left hand, blotting paper, soaked in a saturated salt solution, being used to insure the very best form of contact. Under these circumstances, fifteen volts would be very painful, twenty unbearable. But a subject in somnambulism (deep trance) can take sixty, even 120 volts without flinching. (Estabrooks, Hypnotism)

1. In the context of pain, Candy’s split personality was divided even more firmly than usual. Later, Candy told John that Arlene had felt the pain, not her, and “Arlene’s hand” had the blisters.

Snake-in-the-Box Experiments

The scorpion-in-the-box test format, used on Candy, had been hotly debated in the literature of experimental hypnosis ever since 1939, when L.W. Rowland published a report of an experiment involving a snake in a box. Back then, the debate between experimental hypnotists on whether a person could be made to do something by means of hypnosis that they would not normally do was still open and lively. Rowland, using a box covered with "invisible" glass, had induced hypnotized persons to attempt to pick up the rattlesnake they could see inside the box.

By way of control, forty-two persons, of every age and degree of sophistication, were asked to come to the laboratory and pick up the snake...the persons were not only badly frightened at the appearance of the snake, they would not come close to the box; only a few were finally persuaded to pick up a yard stick and try to touch the snake. They all seemed bewildered when they touched the glass which they could not see. (Rowland, "Will Hypnotized Persons Try to Harm Themselves or Others?")

Because three out of four of his hypnotic subjects (but none of the un hypnotized persons acting as controls in the experiment) obediently tried to reach inside the snake box, Rowland concluded that "persons in deep hypnosis will allow themselves to be exposed to an unreasonably dangerous situation." His fourth subject "saw the snake, turned around facing the experimenter, and awoke." (*Ibid.*, p. 115)

Rowland also tested whether hypnotized persons would obey orders to harm other persons. He commanded a hypnotized person to throw sulfuric acid at the face of an experimenter (who was protected by invisible glass). The acid was clearly the real thing. He concluded that hypnotized persons "will perform acts unreasonably dangerous to others" (*Ibid.*, p. 117).

In 1952, Young carried out a pair of experiments in which he replicated Rowland's famous experiments described above. Hypnotized persons were first asked to handle a rattlesnake, then to toss "acid" in someone's face. In Young's experiment, the instructions were to reach through an opening into a box, grasp the snake, and move it into a large can. The snake closely resembled the poisonous water moccasin. Young's verbal instructions were designed to cause a subject to assume that the snake was poisonous. Nevertheless, seven of Young's eight hypnotic subjects did reach out, grasp, and move the snake.

One subject, a male music student, in tremulous conflict over the instructions, was so inept in the long-continued alternate approach and withdrawal of his hand near the snake's head that he was bitten by the snake and fainted dead away, only to be brought back to hypnotic consciousness and pushed by the experimenter until he, too, captured the snake of which he was mortally afraid. (Young, 1952, p. 405)

Young's subjects, like Rowland's, also threw acid—in this case, "nitric acid"—at the operator's face. One day, Young's experiment became totally real because one hypnotized subject accidentally threw real nitric acid in the assistant's face instead of the mock version:

...on account of the promptness of remedial measures, no scars were left on his face; although his heavy uniform (that of an ROTC student) demonstrated in large areas where the acid struck (Young, 1952, p. 405).

However, some later experimenters demonstrated that most people obey such commands without being hypnotized. They do it out of simple obedience to perceived authority, or because they know it is an experiment and they trust the experimenter. So the debate opened up again all over to what extent hypnosis could be a factor in coercively forcing people to do an antisocial act (injuring themselves or another person).

George Estabrooks showed an expert on hypnosis Rowland's report of his experiment and asked, "Do you think Rowland proved the point?"

The expert countered, "How do you know that glass is invisible? To you, yes. But the hypnotic subject may, probably does, have much greater keenness of vision than does the normal individual."

Estabrooks asked him how to make that experiment "air tight."

"Take away the glass."

"In that case there might be a corpse in the laboratory," Estabrooks objected.

"Exactly. But I see no other way to meet the objection." (quoted in Reiter, p. 41)

So the possibility of what experimental hypnotists called **antisocial hypnosis** could not be proved without a terminal experiment, and the terminal experiment could not be done because it was antisocial. But, they did it to Candy. After Candy put her hand in the box on Taiwan, whoever knew of this secret experiment had proof. Candy would know better than to trust those people. But she put her hand in the box. She was stung. And she stayed an unknowing hypnoprogrammed person.



shocked her using a small box sitting on the table. Wires ran from it to her wrist and to her shoulder. Those shocks hurt terribly. They shocked her repeatedly with that setup, and, together with the shocks, they asked question after question about the story of her life and her CIA link.

Reliving it, Candy said, "...I don't know anything. Nobody here believes me...I'm afraid to say yes and I'm afraid to say no...Why don't you just kill me?...why do you keep me here like this?...I don't know any Dr. Jensen." (Bain, p. 193)

When she still didn't (or couldn't) satisfy their interrogation demands for the story of her life, the lab techs told her they were going to put her hand into a box which contained either scorpions or the deadly coral snake. Later, Candy told John:

CANDY: They put her hand in the thing.

JOHN: In what?

CANDY: In with the scorpions. She didn't know whether it would be the scorpions or the coral snake.

JOHN: You mean into a box?

CANDY: Uh-huh. The scorpion was in there. (p. 203)

It turned out to be the scorpions, and one stung her. When she pulled out her hand from the box, the insect was still clinging to it. (Bain later observed a small scar on that part of her hand.)

The Chinese director of the experiments on Candy had put one over on the lab girls who believed the scorpion in their box was dead. When Candy actually got stung by it, they were upset and surprised. They stopped the torture and gave her medical treatment.

This trip, the "businessman" did not apologize for torturing her. This time, when she got back to San Francisco, Jensen did not say it was a regrettable mistake. It made no difference. Candy was hypnotized on cue and robotically went back to Taiwan every time she was told to do so.

In another experiment, the lab technicians tortured her by cutting both her thumbnails to the quick. Recalling the event, under hypnosis with John...

CANDY: ...They were going to keep cutting them down unless I told them...

JOHN: Told them what you knew?

CANDY: (panicked) I don't know anything. I gave them the letter ...They cut it right down into...It's all raw... Both thumbs... (Bain, p. 207)

Shame—In 1967, the CIA announced the end of all mind-control testing and the destruction of all records of that testing.¹ But Jensen continued the overseas experiments on Candy. Candy's last trip to Taiwan for torture experiments was in 1968. They had tried pain, and she did not break. Next, they would try shame—and then pain and shame combined.

She handed her envelope to a girl at an art gallery, as instructed. As if on cue, the girl spat in her face.

(The spitting sounds like a posthypnotic suggestion cued by delivery of the envelope. Maybe this event began the testing of Candy/Arlene's resistance to humiliation. Maybe, also, this was a puppet-meets-puppet encounter set up to see if that made any difference. Would they recognize each other's plight, embrace, and swear future solidarity against hypnoprogrammers? They should have, but they did not.)

Then Candy was taken to a hotel dining room, seated in its lobby, and given a drink. It made her feel sick. She began to sweat heavily.² A female attendant led her out of the dining area into a "bathroom" which had a bed in it and also a dressing room. The attendant took off Candy's clothes (which were now drenched with sweat). She hung them up, gave her a gown, and put her to bed. A doctor came, gave her a shot, and then left.

The female attendant then returned. She began a long episode of inflicting painful, shameful body pinches, including on her breasts and nipples. The pinches were severe enough to cause black and blue marks all over her body. While the "attendant" was viciously pinching her victim, she demanded over and over to be told about "the papers."

When her subject fainted from the pain, the Chinese woman roughly revived her and continued the torture. When the interrogator finally left the room, Arlene tried to crawl under the bed and hide.

1. A source later told Bowart they were done testing because "they went operational."

2. "...the men from ARTICHOKE wanted to know how well hypnotic amnesia held up against torture. Could the amnesia be broken with drugs?" (Marks, p. 185)

Demonstration at Langley—Candy’s professional, public life continued to thrive. In 1970, Harper and Row (her longtime publisher) released her autobiography of the years spent touring with the USO during World War II, *More than Beauty*. One evening, she was a guest at a White House party. She and Pat Nixon were photographed as they smiled warmly at each other.

Perhaps it was the night after that White House party. Perhaps it was some other night—Candy never could remember the exact date. But, one night, she went from Washington D.C. to the CIA’s headquarters at Langley, Virginia. There, Dr. Jensen demonstrated her degradation before a roomful of observers. Candy Jones was the first of eight conditioned hypnotic subjects which her unit-controller presented to his audience that night.

She lay prone on a rolling table, dressed only in her black wig, in deep trance. Jensen introduced her to the small audience as “Laura Quidnick.” After putting her through a series of acts of visibly automatistic obedience, the doctor concluded this display of her total subjugation with an obscene finale. Holding a lighted candle in one hand, Jensen said to “Laura” that what he was about to do to her would not hurt, and she would not remember. Then he shoved the burning candle into her vagina.

Jensen then invited any doctor who wished from the seminar audience to come on stage and try to interfere with his control of Laura. He exuded smug pride as, one by one, the audience members, now clustered around the hypnorobot’s gurney, tried—and failed—to disrupt his control over her.

Candy had endured all, proved herself to be the perfect hypnoprogrammed messenger, served her country with perfect obedience—and in perfect ignorance. Whether at work, supervising her office staff, at home with her children, or in social settings, Candy knew that she sometimes carried messages for the CIA. That is all she knew of those matters. She did not know that she was Dr. Jensen’s unknowing hypnotic subject. She did not know that his vitamins were really a narcohypnotic drug. She did not know she had an artificially-created split personality named Arlene Grant.

Candy Fights Back

Maybe what happened at Langley violated Candy’s unconscious moral principles badly enough to shake the roots of her basic hypnoprogramming. Or maybe the cause of the fracture that appeared in the wall that separated her secret life from her known life was what happened in Taiwan, plus what happened at Langley. For whatever reason, at this point in her personal history, Candy Jones began to develop unconscious resistance to the problem which she did not know because she could not remember. She was fed up without consciously knowing exactly why.

She heartily wished she had never signed on with the CIA.

In a later trance regression, she relived an argument with Jensen during this period. She said, “I love my country and that’s why I started in the first place. But...could you do what I’m doing? Go ahead. You go and do the things I’ve been doing. You couldn’t do it.” (Bain, p. 230) In 1972, Candy firmly told Jensen that she was finished working for the Company.

Jensen did not let her go. Not in the usual way.

Suicide Orders—Candy’s declaration that she wanted out was a turning point also for Jensen. He began to “suggest” suicide. Were the hypnotic suggestions to kill herself the logical completion of her testing sequence: the final and most truly “terminal” experiment? Or did Jensen choose “...the more conventional means of dealing with a renegade agent...”? (Bain, p. 133) Or was he done with his series of experiments and ready to discard Arlene (and Candy’s body which contained her)?

Arlene was mouthy, unpredictable, and frightening. “He’s petrified of me” (Bain, p. 100), she later told John. Candy’s alter ego was definitely too human, not suitable for mass production. Jensen had manufactured Arlene in 1960. This was 1972. Hypnoprogramming technology had made significant advances over the dozen years since disrespectful Arlene first sneered at Jensen, “Who did you expect?” The current crop of hypnorobots was more comfortably robotic in behavior and attitude, not like feisty Arlene. Candy’s split was now obsolete, surplus, an outdated experimental model with a bad habit of sassing its maker.

Jensen gave his subject suicide suggestions both in the form of direct and indirect suggestions under deep hypnosis. He repeated and elaborated them: “How would you do it?” he asked her. Then he told her how to do it:

CANDY: (She moans.) I can’t keep fighting like this, don’t you know that? I’m tired of fighting. I can’t fight any more (weary, upset) He’s gonna make me...give up.

JOHN: Who’s going to make you give up?

CANDY: (hesitantly) Dr. Jensen.

JOHN: What’s he going to do to you?

CANDY: He won’t have to do it to me. He’s gonna make me do it my own self. Give up...He wanted me to go down and jump off that rock.

JOHN: He said that?

CANDY: He said it would be very nice because I like it down there.



Both of them knew his reason. John Nebel had terminal cancer.

JOHN: Jump off a cliff?

CANDY: He said you might as well go...why wait?
(Bain, p. 80)

Jensen specified the date, the place, and the scenario for his subject's death. Candy was to arrive in Nassau, Bahamas, on December 31, 1972. She was to check into the hotel she usually stayed at, the Paradise Beach. Jensen would phone her early in the morning of the next day and cue Arlene to come out and take over. Arlene would then walk the body to an out-of-the-way cliff. It had a fine view of ocean dashing on sharp rocks, far, far below.

When she began the publicity tour for Bain's book about her hypnoprogrammed life, Candy told KSAN's interviewer, David McQueen, more about those plans:

"And I was going to take my snorkel, my swimming things, and I would be up on a little promontory where there were pine trees, and put everything down neatly and take off my watch and go in...Arlene Grant was going to dive in...But the person who would have died would have been Candy Jones." (quoted in Schrag, pp. 443-4)

Candy did not know what was scheduled to happen. Arlene, her unconscious split, knew that the body they shared had only thirty days before the death jump. The existence of Jensen's suicide scenario for Candy did not break through the wall of amnesia which divided her two selves. But something in her did break.

Better Wed Than Dead—Suddenly, like Pavlov's conditioned dogs after the Neva River flood almost drowned them in their basement cages, Candy was breaking Jensen-programming rules left and right. She broke the isolation rule by contacting her old friend (and longtime admirer), John Nebel.

Unconscious thinking is naturally arranged on a rational foundation of **opposites**. It is a strange, but true, fact that any chunk of programming in the unconscious—if under unbearable pressure—can escape that pressure by flowing to its opposite in that linkage of opposites. Candy now unconsciously converted Jensen's order to die into its opposite: a compelling and successful bolt to live. She broke Jensen's no love, no marriage rule. She and John had not seen each other for ten years. She was now 47; he was 61. They began to date. They married after a whirlwind, 28-day, romance. Neither she nor John knew her unconscious reason for hurrying.

Candy had first met John when she was 18 and he was 32. He was a photographer on free-lance assignment, photographing her for a Borden ad. He shifted to radio at age 43, hosting WOR's all-night talk show. Over the next eight years, he built his slot into one of the hottest properties in New York radio. When he shifted to WNBC for eight years, and then to WMCA, his loyal listeners followed. He was always in the Nebel-at-Midnight slot, six nights a week, six hours every night. His show was New York's most popular nighttime radio talk show.

Candy had a truth that needed to be discovered. John was a perfect match for that need. Over the past twenty years, he had hosted every imaginable sort of guest on his all-talk show, including numerous hypnotists. He was famous for his ability to probe the weaknesses of guests. Broadcast schools everywhere played Nebel tapes to teach fledgling interviewers how to get at the truth.



So Candy did not go to the Bahamas to commit suicide. On New Year's Eve, 1972, the exact day she was to have checked in at the Caribbean hotel and begun her suicide sequence, she got married instead. A deeply implanted hypnotic command CAN be resisted, but only by **conversion** of that neural energy into some other form of expression. It can not be dealt with by a simple denial. Its mental energy, when cued into expression, has to go somewhere. Candy diverted the en-

ergy of a suicide scenario into that of a marriage scenario. Better wed than dead!

At their wedding, the famous bride's long years of CIA-conditioned isolation were obvious. Long John had forty guests. Candy had none, except her mother and the attendant who looked after her. Donald Bain, Nebel's friend and biographer, noticed that, and thought it strange.

Their marriage not only evaded Jensen's suicide

plan for Candy. It also opened up wonderful new possibilities for her to get financial freedom from the longtime financial stress that first drove her into the arms of the CIA.¹ Nebel had invited her to co-host his nightly talk marathon and share its (he received no salary but collected half of the show's advertising revenue).

Candy Jones was an old pro at radio. John Nebel's audience quickly came to love her as well as him, so the listenership for the new husband-and-wife team stayed as solid as it had been for Nebel alone, and they prospered. Her new husband also offered Candy the services of his lawyers and accountants to extricate her from that money-hemorrhaging modeling school and agency. She gratefully accepted.

Arlene Begins to Appear—Jensen had conditioned Arlene to emerge when he told Candy to look in a mirror and “see” her. Starting with the wedding night, Arlene emancipated herself from being only Jensen's genie in the Candy bottle. She had a new man in her life now. She began to spontaneously appear when Candy looked into a mirror, a generalization of Jensen's first induction method. Arlene briefly appeared right after the wedding, and again that evening at their wedding reception feast in a Chinese restaurant. Arlene emerged a third time that night, after Candy left the marriage bed to go into the bathroom. There, she looked in the mirror, and returned...different. Arlene was not only appearing on her own. She was also disappearing on her own.

At first, the brunette in a blonde's body said nothing significant to John. She just took a turn at inhabiting the body for a while, then gave it back to Candy. It was as if Arlene now wanted to be John's hypnotic subject instead of Jensen's, the way a badly abused dog will leave its cruel former home and take up residence outside the back door of some neighbor, hoping desperately to be treated with kindness and taken in.

Nebel had no idea what was going on. He only knew that, starting on their wedding night, there were moments when Candy acted like a different woman—“tense, angry, concerned. I asked her if anything was wrong and she gave me a curt ‘No.’” (Bain, p. 9) It was Arlene who had said, “No.” And then she disappear again. Candy would be back saying the familiar, reassuring words that John loved: “You're wonderful, John...You've made me the happiest woman on earth.”

Once the alien presence was gone a while, John relaxed. But each brief appearance of Arlene left him more on edge. The idol of New York's nighttime radio took an

instant, intense, permanent dislike to Arlene's cold, distant voice, her cruel facial expression, her bitterness.

Arlene could not help the way she was. She was Candy's aggressive aspect, rooted in an imaginary childhood playmate, strengthened and loaded with Jensen's hypnoprogramming, layered over that with the emotional burden of all the tragic experiences which Jensen had forced on her. John did not understand that Candy had unconsciously chosen to marry him and was calling him wonderful because of needs from the part of her which he already so disliked.

The next evening, John noticed another brief episode of that bizarre “mood” in Candy again. Over the coming days, the new husband gradually realized that he had taken into his life, not only Candy, but also this chronically angry spook who unpredictably took over Candy's body. He did not yet realize that Candy was amnesic for her split's nearly mute appearances. He did not know that Candy had worked for the CIA. In their whirlwind courtship, the master at ferreting out truth had not gotten around to finding out all that Candy had been doing over the past dozen years.

Now John began to ask a lot of questions. Candy was strangely evasive and curt in her answers. She did say, however, that she would have to take a trip now and then. John did not like the idea of that at all. He pressed her for details. Finally, Candy told him about that long-ago FBI meeting, about letters sent to her office, about the messages that she had carried. She had told him all that she remembered.

“Do you still work for them?” John asked.

“No,” she said.

John wondered if he had heard the whole story.

Nasty and negative as Arlene seemed to John to be, she was trying to accomplish something healthy and good with her appearances. Candy was still at risk from Jensen. She needed help. Neither Candy, nor John, knew about Jensen. Arlene could not tell either of them in any normal way because her conditioning forbade it. She believed that, if John knew the real situation, he would help. But how could she tell? HOW?

John Hypnotizes Candy

John Nebel's job had required him to find material to keep interesting nighttime radio conversations going six hours a night, year after year. Sometimes he had hypnotists as guests. Again and again, he had read their books to prepare for the interviews, asked them questions, listened

1. Her CIA employment had since tended to continue that financial desperation. Her modeling agency and charm school business were ruined by all the time the CIA took, and by the unpredictable behavior it caused.



to their answers over the long night hours, watched them demonstrate hypnotic phenomena. Recently, he had accepted the invitation of one such guest to take his brief course in hypnosis. Nebel was “an amateur student of hypnosis.” (Schrag, p. 442) He had the two necessary skills to protect Candy from Jensen: some knowledge of hypnosis, and decades of experience at digging out the truth in interviews.

Arlene had to find a way to get John to hypnotize Candy—and a way that Candy would allow herself to be hypnotized. It would have to be a disguised induction. Thus it came about that, five months after her marriage to John, Candy’s unconscious began to inflict upon her the most severe possible insomnia. (Sleep deprivation results in greater than normal susceptibility to trance induction.) Candy and John were up all night doing their show. They would go home and sleep in the morning. But now Candy could not sleep.

It came to a head on June 3, 1973. She “...tossed and turned in the double bed in their cramped bedroom. Her face was drawn, and dark circles beneath her eyes caused them to appear sunken. She was near tears...” (Bain, p. 36) The anxious husband decided that Candy needed to relax. Trance induction is a physiological relaxant. John said, “I’ll hypnotize you.”

She said, “I can’t be hypnotized.”

John then tried a disguised induction, a type called **progressive relaxation**. Candy, being a highly trained hypnotic subject, quickly went into a deep trance. Her breathing became slow and regular. John then used a limb catalepsy routine to test her depth and deepen more. She was “down” all right. He then gave her a suggestion to shift from trance “sleep” into a true sleep. She did that. He had hypnotized her without using the “H” word, and he had relaxed her into getting a good sleep. He felt quite pleased with himself.

The next morning, Candy had insomnia again. John did progressive relaxation with her again. It worked, and she slept well. The next day, again there was Candy’s insomnia followed by John’s progressive relaxation induction. But, this time, something new happened before she shifted from hypnotic to natural sleep. After John “relaxed” her, she did a spontaneous age regression. She began talking in a little girl’s voice. Pretending to be a man from her neighborhood, John conversed with the “little girl” for a few minutes. Then her regression stopped. She fell into a sound and natural sleep. The fourth time that John relaxed her, she spontaneously regressed to childhood again, and relived more incidents.

It became a routine. Whenever John saw that Candy was in trance and spontaneously regressed, he would ask, “Where are you now?” She would tell him. John would

choose some appropriate role to play in the scene she was reliving. Candy was now sleeping better, and she was feeling more cheerful when awake. John considered the trances to be a good thing—and the regressions no problem.

One day, in an awake state, Candy told John that she had visited a CIA psychiatrist, Dr. Jensen, in California. She said that Jensen had wanted to hypnotize her and help her quit smoking, but she had informed him she could not be hypnotized—and he had agreed she could not.

John was startled. He knew that he had been hypnotizing Candy, but he could not make Candy believe that he had hypnotized her. Suddenly, he remembered hearing about a method of disguised induction for a person who says they can not be hypnotized. The hypnotist agrees with the subject, then demonstrates, “for your general information,” how hypnotists do it to people who can be hypnotized. “Did he show you how he would have hypnotized you, if you were able to be hypnotized?” Nebel asked her.

“Oh, he showed me some things,” Candy replied. “But he knew I couldn’t be.”

Arlene Spills the Beans—A few hypnotic sessions later, on June 1973, Candy spontaneously regressed—not to childhood, but to a scene in which Arlene was talking to Jensen! She was talking to John as if he were JENSEN! John accepted the role she had given him. He played along, pretending to be Dr. Jensen.

After Candy awoke from trance, and the natural sleep that followed it, John asked her about Jensen again. Soon, he realized that his wife could only remember visiting Jensen the first time. She could not remember anything that had happened inside his office after the conversation in which he had complained about her smoking, and then agreed that she could not be hypnotized. John reasoned that Candy’s memory stopped so abruptly because Jensen had hypnotized her and suggested amnesia. But his wife had not stopped smoking, so WHY did Jensen hypnotize her?

The next morning, after the show was done and they had gone to bed, and John had “relaxed” Candy, she did another spontaneous **revivification**. (A “revivification” is the most authentic type of hypnotic regression; the old memory “tape” plays, and the subject relives a past scene in their life.) She was pushing hard now to accomplish the long, sad process of revealing the history of her conditioning and life as a hypnotic subject.

Again, Arlene talked to John as if he were Jensen. Arlene was forbidden to talk to anybody about her creation and activities—except to Jensen! John knew that he should play along with the Jensen role which Arlene had assigned him, because to a regressed hypnotic subject...

*...all time subsequent to the...event...is blotted from the mind. It is, therefore, necessary for the operator to fit himself into the regression...transform himself into someone known to the subject at the earlier period. (LeCron (ed), **Experimental Hypnosis**, p. 156)*

John was beginning to understand. Later that day, he went out and bought a tape recorder. From this point on, he taped every conversation he had with his wife when she was in trance. During June and July, 1973, in both induced and spontaneous daily trances, John gradually learned the truth about Candy's job with the CIA.

He became accustomed to abrupt personality shifts in which Arlene's voice would suddenly be replaced by Candy's, or vice versa. Sometimes it was a hypnotized, unconscious Candy who talked to John during the regressions; sometimes it was Arlene. (The revivifications showed that Jensen also had encountered both of Candy's personalities under hypnosis.) John soon became familiar with the differences between their voices. Arlene's was more deep, harsh, and masculine-sounding. Candy never swore. Arlene always swore. Candy was always unaware of the missing time when Arlene was out. Arlene knew all the content of both lives.

The mysterious Dr. Jensen and the CIA shadowed the life of these celebrity newly weds. Candy consciously knew and admitted to John that she sometimes tried to call Dr. Jensen, probably in response to posthypnotic suggestions to check in at a certain time on a certain date. John also knew she did that. He had observed, to his great distress, how Candy, in an instant, would transform to Arlene, who would insist that she had to call "the Murray Hill number." And there was no stopping her. Fortunately, that number never answered now.

A plainclothes detective had begun to stand across the street from their apartment. He stood there every day, month after month—watching.

On July 3, 1973, John heard a disturbing message on their answering machine:

Japan Airlines calling on the 03 July at 4:10 P.M....Please have Miss Grant call 759-9100...She is holding new reservation on Japan Airlines Flight 5, for the sixth of July, Kennedy-Tokyo, with an open on to Taipei. This is per Cynthia that we are calling. Thank you. (Bain, p. 243)

The fact that John heard that call presumably caused another failure for the CIA, another win for Candy/Arlene. For John made sure that his wife did not get on that flight. If she had, she might never have come back. Or she might have come back freshly reprogrammed, back under

complete hypnocontrol.

John tried to track down who made that reservation for "Miss Grant." No luck. Japan Airlines said that the reservation was real, but they did not know who had booked it. They had no clerk named "Cynthia." Then somebody explained to John that "Cynthia" was probably a commercial code name for bookings from a certain organization, perhaps the CIA. His informant said that airlines often booked space and billed clients using such codes. "Cynthia" certainly did sound like a booking code that the CIA might have used.

John, Candy, and Arlene—As Arlene revealed, bit by bit, the truth about Candy's life, Nebel was at first uncomprehending. When he did begin to catch on, the information deeply disturbed him. He wanted to talk to Candy about it.

Armed with the tapes, John confronted his wife with the information which Arlene was revealing. Even after hearing tapes of herself talking to John under hypnosis, however, Candy still firmly denied being hypnotized. She insisted that his tapes were only of her sleep-talking while dreaming. By denying that she had been hypnotized, Candy unconsciously was protecting John's access to her unconscious memories. She was a sealed person. She could not allow herself to be hypnotized. John did not understand her very real need to deny that he was hypnotizing her.

He tried, again and again, to get through her denial. He played tapes for her, talked to her about the hypnosis sessions, described all that she had said and done while in trance. She still insisted that it was all only sleep talking during dreams. Or maybe, she said, it was "autosuggestion." She could not admit she had done the "H" word.

Candy also adamantly denied that Jensen had hypnotized her. When the regressions revealed that she had also been hypnotized by Dr. Burger, she denied that too.

Arlene's process of revealing truth had now shifted into high gear. In numerous, spontaneous revivifications, Arlene emerged and took over that shared body. Except—she had enough respect for a working woman's situation to never come out during Candy's live hours on the show.

At first, Arlene had avoided all conversation with John. Then, she only talked to him in the role of Jensen, while in a state of revivification. Sometimes now, however, she talked to him as John. She was getting freer from Jensen's rules. (So, Candy was getting freer too.)

The split's cue to emerge was usually Candy's encounter with a mirror. Whenever Candy looked at her face's reflection—in a restaurant, a restroom, or the bathroom of their apartment—Arlene was likely to emerge. John



developed a wake-up cue that instantly sent the split back under cover when she was no longer welcome, or had appeared at an inopportune moment. (If John pressed her hand against a piece of tile, Candy would immediately be awake and back in possession of her body.)

The first blow to Candy/Arlene's winning trend came from John. So far, he had been wonderful. He had met her unconscious need to be hypnotized and reveal information. Because her husband was almost always with her, he was able to help whenever the spontaneous trance regressions happened. He had carefully taped numerous hypnotic sessions and all the evidence they contained. He had spent hundreds of hours carefully questioning her to make details of the story clear. John was determined that there would eventually be a book about Candy's hypno-abuse, so that the public would also know these facts.

"Long John" Nebel was struggling too. At first, he mistakenly believed that Arlene's chronic state of anger was directed at him. Even after he intellectually understood that it was not, John still reacted emotionally as if it were. He blamed Dr. Jensen and the CIA for having created Arlene. But he also felt an implacable, angry hostility toward Arlene.

John blamed all their marital problems on Arlene's butting into what he viewed as his and Candy's private lives. He believed that Candy would be fine again if he could make intruder-Arlene quit coming out. John also feared that Candy might harm herself during a trance, because Arlene walked around his apartment during revivifications as if it had the layout of Jensen's office. He feared that she "would slip into such a deep trance that he would be unable to control her" (Bain, p. 120). He feared Arlene's capacity to publicly embarrass him.

John was either ignorant of, or not a subscriber to, hypnotherapy principles. He could not imagine a positive role for cynical, bitter, uncooperative, independent Arlene in Candy's mind. He never understood that Arlene was the part of Candy strong enough to suffer Jensen's endless horrific abuses, to contain all the forms of pain that he inflicted, and survive it. He never thought of Candy and Arlene as merely separated components of one woman's personality. Candy was John's ideal woman: unfailingly soft, appreciative, respectful, gentle, sweet, yielding. To him, she was the "real" personality. To his credit, he stayed deeply in love with her through all this. But he never understood that Arlene was genuinely Candy too, a split made from stolen, isolated parts of Candy's own feelings, opinions, and strengths.

John, also, did not like the way that Arlene bad-mouthed Candy. For Arlene routinely insulted her root self with words such as "dumb," "slow," "stupid." She called Candy a "goody two-shoes" and the "mother of her country" (referring to Candy's tragically abused patriotism). It made John angry when Arlene snickered at the gentleness

and pliability of Candy. It disturbed him when Arlene revealed her possession of Candy's capacity for anger and ideas of retribution:

"I have a lot of scores to settle up, and if Candy can't settle her scores for herself, I'll settle them for her...Candy has been screwed so many times, and I'm going to help her unscrew her life because she is just too goddamn dumb...I'm sick of watching it." (Bain, p. 160)

Bit by bit, Arlene was unscrewing Candy's life. She was providing a detailed expose of the CIA experimentation on Candy. She was gradually reuniting Candy with her amnesic knowledge, loosening up the grip of Jensen programming on her mind and life. By now, Candy had finally accepted what Arlene was revealing, and she had begun to eagerly participate in that uncovering, in the process of trance remembering. She was pressing on, trying to recover it all. The basic story of Candy/Arlene and the CIA was clear by the end of June and July 1973, but there were still a myriad of details to be cleared up. Candy still needed dental work, and John wanted psychiatric testing of her to corroborate Arlene's revelations—and then shut her up forever.

Dentists and Doctors—John urged Candy to see a dentist for a long time before she finally visited one. It was her first dental appointment since Jensen's hypnoses of her began, twelve years before! By now, her teeth were a disaster. She had become the famous beauty who did not dare smile. The dentist called her mouth "...a mess...One tooth was broken at the gum line. I had never seen anything quite so bad in all my years of practice." (Bain, p. 132) Unable to overcome Jensen's prohibition of anesthetic, Candy had all the needed work done without using a painkiller. It was a very slow, very painful process.

John also urged Candy to see a psychiatrist. For a long time, Candy was positive that talking to a psychiatrist would make her horribly sick, even to the point of convulsion. (Convulsions can be caused by hypnotic suggestion.) Merely discussing it gave her excruciating stomach cramps. Bain found another way. He often had hypnotists on the show. Her programmed prohibition did not seem to prohibit a casual and "accidental" encounter with a medical hypnotist! She let first one, and then another, hypnotize her at the station during station breaks from interviewing. Both gave Candy suggestions which accomplished further freeing and desensitizing.

Then, Candy agreed to go to Dr. Herbert Spiegel's office for a formal testing of her susceptibility. She had been acquainted with Spiegel (a psychiatrist who taught medical hypnosis at Columbia's medical school) for years. Nebel also knew Dr. Spiegel, who often talked on John's show about being a forensic hypnotist for the FBI or about Sybil, a woman with sixteen personalities, for whom he was

the relief psychiatrist when her main one had to be out of town.

To test Candy's hypnotizability, Spiegel used a susceptibility test, the "Hypnotic Induction Profile." A **susceptibility test** is a **standardized hypnotic induction**, followed by suggestions of various types. The tester reads an induction script to the subject. The speed with which the subject enters trance and the extent to which she obeys its series of requests (close your eyes, raise your arm, etc.) results in the score.

Candy's HIP rating was "extremely hypnotizable," the top ten percent. Spiegel said the test proved that she was hypnotizable enough to be hypnoprogrammed. She was a **somnambulist**, a person who has the capacity for complete amnesia—and for authentic regressions.

Spiegel's other tests of Candy looked for any "psychophysical basis" for her difficulties. He gave her the Thematic Apperception Test (TAT: tell brief stories about each in a standard set of pictures), and the Rorschach (describe images in ink blots). Spiegel said that Candy's TAT and Rorschach showed "episodic periods of stress, but not at the psychotic or schizophrenic level." (**Forward to Bain**)

Her brain scan also was normal. All in all, the psychiatrist found no evidence of insanity. Candy was relieved to be assured that there was now good evidence that she was not insane. She had been threatened by Jensen, in trance, that if she ever told a clinical person about the hypnosis, she would be immediately declared insane.

Spiegel concluded his report with a statement that he was confident that the CIA history, which Arlene had reported, was true.

John Battles Arlene—Candy had accomplished a lot toward accepting Arlene and the unconscious memories and separated strengths which she embodied. She had come far in the process of overcoming her amnesia and phobias. She expressed gratitude for Arlene's efforts and did her best to help the process of memory recovery.

John, on the other hand, became ever more unhappy with his wife's dual life. Long hypnotic sessions following long nights of work at the radio station exhausted him. They exhausted Candy, too. The frequent trances ate into her sleep time and caused great physical stress.¹ She began to look chronically exhausted and unhealthy.

John had two medical allies in his efforts to repress Arlene. Dr. Spiegel advised Candy to turn off her split's spontaneous appearances. Dr. Dick, Nebel's inter-

nist (who learned hypnosis from Spiegel) also urged Candy, in three hypnotic sessions, to control Arlene's appearances. But neither Spiegel nor Dick could affect her.

Candy defended her alter ego when John ranted about his dislike of her. She intuitively understood that the damage done by twelve years of criminal hypnosis would require more than two months to heal. Candy and Arlene had no choice but to struggle on with John Nebel as hypnotist, despite his desire that it be over.

Arlene repeatedly tried to show romantic interest in John, but he always scornfully rejected her. He believed that kissing, showing love, or having sex with Arlene would be moral unfaithfulness to his wife, Candy.

Then, John took it upon himself to make Arlene go away forever. He began making terrible threats to her. Candy tried to mediate. She told him that Arlene bragged about strength, but that her split really was afraid. John did not get the message. More and more, he talked to Arlene as if she were an evil spirit. In seven taped trance sessions (a horrified Bain counted them), John threatened to kill or injure Arlene. His threats were cruel and detailed. "I could break your arm," he once said.

Arlene had broken free of Jensen because he intended to kill Candy. Now, John was threatening to hurt, or even kill, Arlene.

JOHN: (in a threatening voice) Suppose you were burned to death?

ARLENE: I wouldn't like that.

JOHN: I don't care what you like.

ARLENE: She wouldn't want to burn. What happens to me will happen to Candy.

JOHN: (angry, frustrated) Your knowledge in this area, Arlene, is extremely limited. I can exorcize you. One way I can do it is with flame.

ARLENE: ...Do you really want to burn me?

When John threatened to shut her up in a box, a hysterical Arlene begged him not to do it. That was their new routine; strong Arlene ends up in fearful tears. John would not stop his cruel threats until Arlene cried. Arlene had escaped one cruel tormenter, only to find herself in the hands of another.

After months of suggesting terrible threats of vio-

1. Trance time imitates sleep and dreaming time. But it is not a truly equal rest. Trance reduces the physiological urge to sleep without satisfying the body and brain's need for that rest.



lence that he might do to Arlene, John began to worry she might hurt him. It was a suggestion-by-expectation to that hypnotic persona. Sure enough, one night John woke to find Arlene trying to choke him. He threw her off. Afterwards, Arlene said that she had only wanted to frighten him. She said that she would not really hurt him, or herself, or Candy, or anybody else. Indeed, she never acted violently again. But that did not improve things between her and John.

Nebel added a new tactic to his anti-Arlene campaign. He made Candy feel guilty whenever Arlene appeared. He told Candy that Arlene was endangering their marriage.

Bain Writes Candy's Story

Although Candy was a significant author in the field of fashion and beauty (ten books in print and an eleventh in process at this time), she did not write the history of her hypnoprogramming. Candy decided that this story, though also her own, would be told by another author.

August, 1974, Donald Bain accepted an invitation from John and Candy to visit their small Eastside apartment. He came, heard their story, accepted the assignment, and began work on a book about Candy's CIA history. Don Bain had neither medical nor scientific credentials. He had no educational or personal background for understanding CIA experiments in narcohypnosis, hypnoprogramming, artificial personality splitting, amnesia, and torture. His one previous book was a biography of John Nebel, (unfortunately) titled *Long John Nebel: Radio Talk King, Master Salesman, and Magnificent Charlatan* (Macmillan, 1974).

But Candy and John knew Donald Bain. What he lacked in credentials, he made up for in availability. When they asked, he agreed to write her story. It was not an easy task. Bain had to piece together Candy's CIA history from painstakingly transcribed tapes of John's hundreds of hours spent talking to Candy or Arlene under hypnosis. He interviewed Candy and John for hours. He did supplementary research on hypnosis, reading books, and talking to hypnotists.

John was now refusing to talk to Arlene. Period. Bain, because he was working on the book about Arlene's CIA experiences, was pushing Candy to provide more detail about those experiences. But only Arlene knew the answers to his questions.

Candy developed a way of accessing Arlene's memories without John. After coming home from the studio, Candy would go to her private apartment (adjoining the one she shared with Nebel). There, she called out Arlene

by looking in a mirror. Then, as Arlene, she would write for hours what she remembered of the secret life. Writing had been Candy's skill. Now Arlene was doing it. Candy had taken control of the schedule and content of Arlene's emergencies. The two selves were slowly reuniting.

John Nebel, however, was still not satisfied. He pressured Candy to repress Arlene—COMPLETELY. Finally, Candy agreed. She told Don Bain her decision:

To recall trips, Arlene, and those days, places and experiences for you on paper, I first have to use the mirror—look into it and ultimately, in a form, Jensen's "cute" gimmick—there she is: Arlene.

The trouble, however, is that by the time I'm to go back to our living apartment and to bed—which may be noon or later, I'm so exhausted I can't bring myself back.

Today must be the last time I use the mirror in here for fear of the above happening again.

Hard for anyone 'cept John to understand and I know it has destroyed much of his regard of me.

So—no more morning typings about the past to you or for anything related to Arlene.

I am eager for the book's success—for so many reasons and for everyone's sake... Best regards, C. J. (Bain, p. 249)

Bain was frustrated. He had so many more questions that now would never be answered. On the other hand, John was pleased.

Publishing and Publicity—Bain's book about Candy was published in 1976. Candy wrote a postscript:

...I marvel at the author's patience for the factual reporting of the vast details involved, his sensitivity and resistance to dwell on much of the sensationalism contained, and the Herculean task it required to tell my story...For all this I am grateful. Had it not been for John Nebel, I wouldn't have been alive; Jensen nearly won out...I won't have to take that swim now.

Acerbic (and now gagged) Arlene would have retorted that the victory declaration was premature.

Playboy Press published *The Control of Candy*

Jones in early 1976. (Harper and Row put out Candy Jones' *Complete Book of Beauty and Fashion* that same year.) Bain's book is not a clinical case study like those of the psychiatrists, Reiter and Mayer. He was only a journalist, trying to report an unfamiliar and difficult topic, but he managed to pass on the basic facts of Candy's history in a readable form.

The Mind Control of Candy Jones holds several unofficial records:

- The only book-length report of an American victim of unethical hypnosis;

Candy—could do to anybody. The final terrifying hurdle of telling was the coming publicity tour. Bain was going along with Candy. (John could not leave his radio show.) The planned nationwide tour, organized by their publisher, was scheduled to begin in California with a KSAN radio special about mind control.

Candy and Bain were in the studio speaking live. Walter Bowart, a journalist who was then researching a book about military hypnoprogramming, participated by phone. Bain said that he and Candy “have material that links Sirhan to Dr. Jensen on two specific occasions prior to the assassination.” (Schefflin & Opton, p. 444) Sirhan had shot and killed Robert F. Kennedy. Both Dr. Spiegel and a prison



- The only book-length case report of a hypnoprogrammed person since Reiter's report on Palle;
- The only book-length study of a hypnoprogramming case that involves narcohypnosis and artificial personality splitting;
- The only reported case, up to now, in which a hypnoprogramming victim saved herself and managed to get her story told.

Publicity Tour—Candy, via Arlene, had been trying to tell what the CIA, via Dr. Jensen, had done to

psychiatrist who had examined Sirhan in his California prison cell, insisted that the Middle Easterner was hypnoprogrammed and had fired the shot in response to an operator's suggestion, not of his own volition. Now Bain had publicly declared that he had evidence linking Sirhan to Dr. Jensen. And Jensen was a CIA psychiatrist who Arlene had identified as having specialized in making and operating unknowing hypnotic subjects for the Agency.

Bain also would have probably talked about Arlene's description of California laboratories in which Jensen scientifically tested his control over Candy. He would have told about his chance meeting with Dean Kraft, a Brooklyn psychic healer, on Nebel's show. Kraft had described to Bain the California laboratory in which government researchers had tested his healing powers, the place



where he was told not to ask what government agency was paying him, and not to ask about the “backgrounds” of the staff who tested him. Kraft’s description of that place matched Arlene’s in every detail!

John, Candy, and Bain Are Silenced—

Candy Jones, Donald Bain, and John Nebel lived on, but their feverish efforts to uncover and make known CIA hypnoprogramming secrets stopped, literally overnight. Candy did only one more interview after that KSAN interview. After that, none of the three ever gave another interview on this subject. They appear to have been quickly and permanently silenced. The planned nationwide tour stopped before it had really started—after only two radio interviews.

In the late 1980s, while casually scanning radio stations one restless night, I tuned in a California station. The deejay was talking about his interview with Candy Jones on her last tour, her next interview after KSAN, her very last one. She did it the day after KSAN. And he was the man who had interviewed her.

Candy Jones was alone for that interview. She did not say where Bain was. She told the interviewer that this would be the last interview she did for the time being. She explained that she had just signed a contract. It paid \$100,000 for the movie rights to her story, a lot of money in that era. The contract stipulated that no more publicity was to be done until the movie came out.

The deejay made clear his impression that Candy believed it was honest money. She believed there would be a movie. She expected major publicity when it was released. She told him that she and Bain would be writing the movie script together (so Bain was getting paid, too.)

Candy Jones and Donald Bain did work on the script, for a while, as the ruse (in my opinion, odds favor the \$100,000 being CIA money, and the “movie” proposal, a CIA deceit) dragged on. Some researchers who asked for interviews were told that “no more interviews were being given while Candy Jones and Donald Bain were working on

a movie about her experiences.” (Schefflin and Opton, p. 444) When Schefflin and Opton, themselves, tried to schedule an interview with Candy and Bain, they ignored the two scholarly investigators. Walter Bowart was also trying to arrange an interview. Candy and Bain had been warmly cordial to Bowart during their shared interview on KSAN.

Now they ignored his letters and refused to take his phone calls.

No movie was ever made. There was never any later publicity. A bona fide movie producer would have wanted maximum publicity at every stage. Without publicity, a book does not sell well. In the blink of an eye, after Candy signed that contract, Bain’s book about her was “out of print.”

[Copies are available, however, from Amazon.com and other used book sources. It takes about a month to get one.]

Perhaps Candy realized all that afterwards, but she had signed the contract. She had sold the rights to her life story. That signature took her in one moment from a full-tilt promotional campaign to never again talking about her hypnoprogramming and the CIA experiments. Did Jensen, the CIA doctor, make a surprise visit to her California hotel room after the KSAN show and compel Candy to sign that contract?

But Bain accepted the deal too. And John Nebel also never again talked to anybody about Candy’s CIA history. So threats of a more conventional sort may have been involved.

Despite all attempts to suppress the truth, Candy’s story was out!

Unquenchable Truth

Arlene managed to tell. John taped. Bain wrote. Playboy printed. Although the book was pulled from bookstores soon after, some copies from that first printing of *The Mind Control of Candy Jones* were already circulating. A remainder dealer (junk buyer of the book world) bought the last of the publisher’s first run. He listed the book in his mail-order catalog—the place where “dead” books go. More people saw it there and ordered copies. I was one of them.



He would seat Candy in a darkened room in front of a candle, in front of a big mirror...and then say, "Look into the mirror and see Arlene"



PART II

A Partial History of U.S. Government Mind-Control Research



U.S. Research on Hypnosis and
Mind Control Begins

Secret Agencies, Secret Research,
Secret Operations

Mind-Control Research: Goals
and Methods

Physical Methods of Psychiatry

The History of Deliberate
Personality Splitting

Operation Often: A Case History

Information, Interviews, and
Incidents

Psychiatry Is No Longer a Joke

Can't come up. Fish don't come up.

U.S. Research on Hypnosis and Mind Control Begins

The Personalities



Military Mind Control Research Begins

They fought in the trenches of concealment and deception, across the lines of falsehood and betrayal....It is the same in any war. What is heroic in combat is criminal in peace. Just as combat sanctions physical violence, so espionage grants license to moral violence....It is trite but true to say that they did what they did for the good of their country. Unfortunately, it is also true that it frequently didn't work out that way.

David C. Martin, *Wilderness of Mirrors*, pp. xii-xiv

The Personalities

At first, the persons involved in U.S. hypnoprogramming research were real and interesting. Later, they became anonymous, faceless operators and agents.

Donovan Organizes the OSS

In 1940, President Roosevelt asked a World War I General, William Donovan, to organize and head a U.S. intelligence gathering service—and a secret scientific research program. Between the two wars, General Donovan had become a very successful Wall Street lawyer. He knew everybody who mattered: politicians, tycoons, academics. They called him “Colonel” or “Wild Bill.” The new agency was called the OSS (Organization for Strategic Services). From the very beginning, bold and imaginative thinking was its rule.

“Every eccentric schemer with a harebrained plan for secret operations (from phosphorescent foxes

*to incendiary bats) would find a sympathetic ear in Donovan's office.” Donovan's comrade and close friend, later U.S. Ambassador to Great Britain, David Bruce, has written about his colleague, “woe to the officer who turned down a project because, on its face, it seemed ridiculous, or at least unusual.” (Schefflin and Opton, *The Mind Manipulators*)*

Donovan hired a crew of talented and daring young men, many of whom completed their careers with the CIA: Stanley Lovell, George White, Richard Helms, Frank Wisner, and Dr. Sidney Gottlieb. Donovan also recruited the nation's best scientific researchers—anybody who had talent and an idea—to work for him, without leaving their particular institutions. And he rallied prominent industrialists, a Who's Who of the nation.¹

1. His model of linking covert government research with prominent U.S. corporations and universities was a policy that the CIA (and NSA) continued.



Clark Hull

Clark Hull, a Yale hypnosis researcher, began a new way of researching hypnosis by collecting and analyzing biological statistics about trance subjects rather than pondering the trance itself. Like Pavlov, Hull viewed hypnotism as **conditioned reflex** (acquired unconscious habit). He claimed a skeptical view of hypnotic phenomena, but he hypnotized a lot of people:

*A youth of eighteen or nineteen years is brought in by my assistant. He has consented to act as subject in a research project. I stand before him and look directly into his eyes. As he tilts his head backward to look into my eyes I observe as usual the sign of considerable emotional disturbance in the beating of his carotid artery...I direct him to look steadily into my eyes and to think of nothing but sleep, to relax his muscles all over, even so much that his knees bend a little and his legs scarcely hold him up. After three or four minutes his eyes close, his head nods forward, and his breathing becomes heavy. I say, 'Now you are falling toward me, you can't help yourself...I catch him when well off his balance. Upon inquiry he states, in a drowsy tone, that he could not help falling forward but that he isn't sound asleep 'because I know everything that is going on.' I suspect that he is mistaken and employ the following objective test. I give him a posthypnotic suggestion that after waking he shall pick up and examine a book on my desk when I sit down in a chair, but that he won't recall anything about why he did it. I wake him as usual with a snap of my finger...A few minutes later I sit down in the chair. He casually walks over to my desk, picks up the book, and after glancing at its title lays it down. I say, 'Why did you look at the book?' He answers that he just happened to notice it lying there and wondered what it was about. (Hull, **Hypnosis and Suggestibility**, p. 32)*

Hull's subject obeyed the professor's posthypnotic suggestion, and he was amnesic for the real reason he had picked up that book. He claimed, even believed, that Hull had not been able to hypnotize him. Actually, that young man had not only been hypnotized, but he had been to a **somnambulist** depth.

In 1930, the Yale employment office informed Hull that he would no longer be allowed to hire students for his experiments. Some professors from Yale's School of Medicine believed that hypnosis was dangerous and they had decided to stop him. Hull was restricted to nonhypnotic experiments for the rest of his career. He spent that time fitting an array of definitions, postulates, corollaries, and theorems into a complex mathematical model for predicting human or animal behavior (a concept of learned habits powered by biological drives).

Lovell Hires On

General Donovan recruited a biochemist, Dr. Stanley Lovell, to head the OSS's "dirty tricks" Research and Development section. In Lovell's biography, *Of Spies and Stratagems*, he recounted a private conversation with Donovan about this job proposal:

Without ado I opened up on my basic problem..."I'd relish your assignment, Colonel, but dirty tricks are simply not tolerated in the American code of ethics...Americans want to win within

the rules of the game and devious, subtle devices and stratagems are, as the British say, 'just not cricket.'"

"Don't be so...naive, Lovell," said Donovan. "The American public may profess to think as you say they do, but the one thing they expect of their leaders is that we will be smart...Outside the orthodox warfare system is a great area of schemes, weapons and plans which no one who knows America really expects us to originate because they are so un-American, but once it's done, an American will vicariously glory in it..."

I pondered, then replied: "What I have to do is to stimulate the 'Peck's Bad Boy' beneath the surface of every American scientist and to say to him, 'Throw all your normal law-abiding concepts out the window. Here's a chance to raise merry hell. Come, help me raise it.'"

"Stanley," he responded, using my first name as a sort of password, I felt, to his inner circle, "go to it."

...with hardly an exception, they [U.S. scientists working on these programs] did outstanding service to their country...every one risked his future status...in identifying himself with illegality and unorthodoxy. (Lovell, pp. 21-22)

In his book, Lovell briefly, but scathingly, denied any OSS use of hypnosis. He said that hypnosis was not real, and was simply tawdry play acting on the part of operator and subject. But British Intelligence used hypnoprogrammed agents almost from the war's beginning.¹ And Dr. George Estabrooks divulged in 1971, in a magazine interview, that he personally had hypnoprogrammed numerous U.S. agents and couriers for the U.S. government during World War II. ("**Hypnosis Comes of Age**," *Science Digest*, April, 1971).

So Lovell was just following Company policy when he lied in his book, saying that hypnosis was not real. His profession hinged on keeping secrets—on the job, off the job, and when writing a book after the job. In that book, Lovell also reported overhearing a conversation between Donovan, who worked with European agents, and a Mr.

1. Sir William Stephenson, author of *A Man Called Intrepid*, wrote to Candy Jones and said that he had been a spymaster in World War II and had agents like her working for British Intelligence.

Van Bush, who was involved with the secret atom bomb research. Lovell knew the inside scoop on both projects.

I recall Van Bush, with his typical Will Rogers smile, asking General Donovan, "Have you succeeded in getting any of your people really inside Germany?"

"A few," said General Donovan rather casually.

I knew we had perhaps eight hundred in Germany and occupied countries that minute, but I also knew that Dr. Bush would be even more evasive if General Donovan had asked him, "What, Dr. Bush, is this Manhattan Project all about?" (Lovell, p. 60)

Lovell considered it appropriate for Donovan and Van Bush to lie about their projects. He did the same when talking about hypnosis.

A melding of amorality and secret scientific research and operations had been made the foundation values of a new agency of government. It seemed excusable at the time. Agencies of that type, however, have proliferated and thrived in the fifty years since Donovan accepted Roosevelt's commission to organize the OSS. They seem to operate with no moral guidelines except the Machiavellian goal of winning by any means. They endlessly pursue scientific inquiry, protected by the rule of Secret, Don't Tell from public oversight, yet financed by the cornucopia of public funding. They have grown in size, wealth, technological weaponry, propaganda abilities, and covert political power. This nation stands on the brink of reaping the sad fruit of secret government agencies functioning with neither moral foundation nor public oversight and control.

Sometimes, the best way to understand a big picture is to study closely one small piece of it, assuming that it will be representative of the whole. Here follows a study of secret government research into mind-control technologies from before World War II up to the present.

Estabrooks Promotes the "Super-Spy"

As soon as the OSS began, George Estabrooks (b. 1885, d. 1973) started traveling to Washington, D.C.. Estabrooks was a Canadian who spent three years at Oxford as a Rhodes Scholar. He received a doctorate, in 1926, from Harvard. He was a prominent figure in the American hypnosis scene for fifty years—from the 1920s to the 1970s.

Most of those years he was head of Colgate University's Department of Psychology. Estabrooks produced the first recorded induction (a Victrola record). He published over sixty articles and several books, the most interesting of which is titled simply *Hypnotism*.¹

Estabrooks promoted the use of hypnoprogrammed spies by both the military and police. He suggested that police agents could gather information from "the criminal class."

...If allowed a free hand, the authorities could proceed to plant such prepared subjects... always with the idea of obtaining information which might, sooner or later, be of real use to the police. (Hypnotism, p. 191)

He described a method for programming a double agent, whose unconscious mind would be loyal to his country (or his secret agency, or military unit), but whose conscious mind would be loyal to whatever country (organization, religion, or relationship) that was being infiltrated and reported on.

...we will use hypnotism to induce multiple personality. Hypnotism is the means to an end, though the technique would be impossible did we not have hypnotism at our disposal....

In his normal waking state, which we will call Personality A, or PA, this individual will become a rabid communist. He will join the party, follow the party line and make himself as objectionable as possible to the authorities.

Then we develop Personality B (PB), the secondary personality, the unconscious personality...is rabidly American and anticommunist. It has all the information possessed by Personality A, the normal personality, whereas PA does not have this advantage.

My super spy plays his role as a communist in the waking state, aggressively, consistently, fearlessly. But his PB is a loyal American, and PB has all the memories of PA. As a loyal American, he will not hesitate to divulge these memories. (Ibid., p. 200)

Unknowing Subjects—In *Hypnosis*, Estabrooks writes as if he is surrounded at Colgate by

1. In 1954, Estabrooks coauthored with Richard Lockridge a novel, *Death in the Mind*, set in World War II. In his story, Germans have secretly hypnotized certain Allied personnel, conditioned them to obey Nazi commands, and used them to commit a sequence of treasonable combat actions. The hero, secret agent Johnny Evans, creates countermeasures, then sets out to turn the tables and capture German minds: "Make them work for us." The beautiful hypnoprogrammed female agent is tortured.



persons he has made into unknowing hypnotic subjects.

One excellent subject, so trained, had been reading one of my manuscripts.

“I can believe everything you say,” he said, “but one thing. When you tell me that you can remove all knowledge of ever having been hypnotized, I simply don’t believe it.”

“Jack,” I said, “have you ever been hypnotized?”

“No.”

“Do you think I could hypnotize you?”

“No!”

In one second he was hypnotized. (Ibid., p. 188)

Jack knew no better, but Estabrooks had the satisfaction of proving the man entirely wrong and demonstrating complete hypnotic control over him. Estabrooks viewed persons who were susceptible to hypnosis as fodder for the mill of any hypnotist’s notion of higher purpose, be it research, profit, patriotism, or the mesmerizer’s personal entertainment. His attitude echoed that of Dr. Cook who, in 1927, advised beginning hypnotists to boldly develop a stable of hypnotic subjects:

First secure a good subject and practice upon him until you can hypnotize him with absolutely no difficulty, and then place him in the profound [somnambulist/amnesic] stages of hypnosis...Next secure two or three more subjects and develop them, and thus gradually add to the number. (Cook, p. 125)

In another incident described by Estabrooks, a visitor had joined the hypnotic operator and his unknowing subject in the lab. As the three casually chatted about a recent boxing match, the hypnotist tapped his pencil three times upon the table top, as if in thought. That was the subject’s induction cue; his eyes instantly closed as he shifted to deep trance. The operator and his guest performed various hypnotic demonstrations of the subject in his somnambulist state, then awakened him.

He immediately starts talking about that boxing match! A visitor to the laboratory interrupts

him: “What do you know of hypnotism?”

The subject looks surprised, “Why, nothing.”

“When were you hypnotized last?”

“I have never been hypnotized.”

“Do you realize that you were in a trance just ten minutes ago?”

“Don’t be silly! No one has ever hypnotized me and no one ever can.” (Ibid., p. 197)

The subject was unaware of the missing time and unknowing of his “other life,” the time he spent under hypnosis.

Estabrooks Promotes Secrecy—and Reveals Secrets—Estabrooks played a curious dual role in the history of hypnoprogramming. He urged secret government hypnosis research. He said that hypnosis would become a valuable weapon as new techniques were discovered in the future. He participated in researching new techniques: “For developing some of them...[I] plead guilty.” (Estabrooks, *Future of the Human Mind*, 1961, p. 221) He urged the use of consciously unknowing hypnoprogrammed, doubleminded agents, and he had manufactured such subjects.¹

Estabrooks referred, again and again, to the necessity for secrecy about the specifics of that technology and its possible military applications. But the professor also loved to talk, write, hint, and brag about that secret technology: “The facts and ideas presented are, so to speak, too true to be good...” (*Hypnotism*, 1944 ed., p. 193) In the first edition of *Hypnotism* (1943), he laid the groundwork for his hypnotic “superspy” concept. His second expanded upon it. The third edition (1957) added two long chapters on military and unethical hypnosis. He worked hard to inform the public that creating an unknowing, robotically obedient, hypnotic subject was possible—even easy. He made valuable information available about the existence and methods of that technology. Imagining an argument with a non-believer in amnesic hypnoprogramming, Estabrooks wrote:

He might... question... Will your controls hold? How long will that posthypnotic suggestion last without reinforcement? Can you count on complete amnesia? Where is your proof that no one but yourself and such others as you may designate can hypnotize that man? Questions such as

1. In the 1980s and 1990s, “the federal government has paid out many hundreds of thousands of dollars to some of his [Estabrooks] experimental victims.” (Daniel Brandt, *Prevailing Winds Magazine*, Number 3, p. 77)

Estabrooks, M. H. Erickson, and the FBI Experiment

In 1939, Estabrooks set up a hypnosis experiment for the FBI. He recruited M.H. Erickson, one of America's most prominent medical hypnotists, to do it. Erickson had worked for years in areas with application to unethical hypnosis and had his own stable of somnambulists. Years later, at a Colgate conference (which was taped and later transcribed in a book which Estabrooks edited), the two reminisced about that experiment. Erickson recalled:

"...[They] sent up a couple of laboratory men to investigate the possibilities of using it. I had Tommy go into a trance. For one whole hour of discussion-answer I did not know what the FBI men were doing. They uncrossed their legs and crossed them; they took cigarettes, and one lit the other's cigarette, and the next time the other lit the first one's cigarette.

"At the end of the hour they asked me to awaken Tommy, to bring him out of the trance, talk awhile, then put him back in the trance, and reorient him to that first trance. They had a program of exact movements, and they asked me...to have him visualize the entire procedure. Tommy gave a blow-by-blow account of the first hour, including the exact time in which so-and-so uncrossed his legs, when he recrossed them, when he shifted his hat over to one side, when he lit the other fellow's cigarette, when the other fellow lit his cigarette.



"They had that entire program all mapped out, and I was an innocent bystander. But Tommy did it. Then I had Tommy come out of that trance and go back into a trance in which he regressed to the second trance and gave a report on the first trance with extreme accuracy..

*"It proves that apparently the hypnotic subject can record a tremendous amount of data, that he can recover it in a perfectly remarkable fashion, and that his sense of order and system of experiencing things is very meaningful." (Estabrooks, ed., *Hypnosis: Current Problems*, pp. 270-271)*

these...merely involve details of technique. The theoretical and factual basis of that technique no competent psychologist would question. (Hypnotism, p. 193)¹

How to Program an Unknowing Hypnotic Subject

Estabrooks estimated that ten hours of hypnosis would be enough to accomplish his basic intention. However, he recommended a ten-month regimen for **candidates** who were to be both personality split and highly trained. What he called "candidates" were not volunteers. His basic procedure (given in *Hypnotism*, p. 195) for creating the unknowing hypnoprogrammed subject began with a disguised induction. It then proceeded to suggested amnesia, sealing against hypnotic competition, and the giving of a posthypnotic suggestion for instant re-induction by cue:

- 1) Covertly identify a specimen of the 20% of persons who are genetic **somnambulists** and easily can go to an amnesic depth of trance. Induct by a "disguised" method.
- 2) While the subject is in trance, give a **posthypnotic suggestion** for him to become deeply hypnotized again whenever the hypnotist gives a certain cue (such as tugging the left ear lobe with the right hand).
- 3) Also, give a posthypnotic suggestion which will deny the subject any conscious knowledge of this hypnosis, or any subsequent one. That causes an artificial, selective **amnesia** for all hypnosis events.

1. Now, almost two generations later, it is apparent that Estabrooks, master of hypnosis, had grossly underestimated the power of a related psychological technology—propaganda. Propaganda turned upside-down that which he saw as obvious truth; it established myth as seeming fact. It was the Big Lie technique that did it, the lie endlessly repeated with seeming absolute confidence by everybody who is anybody in hypnosis, psychology, and psychiatry (most of them sincerely believing the words they parroted even though they were not true).



- 4) Give a posthypnotic suggestion that nobody else can hypnotize this subject (called **sealing**).
- 5) Give a suggestion under hypnosis that the subject will act in trance just as if awake (called **waking hypnosis**).

nent mathematicians, engineers, and physiologists kicked off the new science of **cybernetics**. This was the first of a series of cybernetics conferences that the OSS covertly sponsored via the Macy Foundation. Wiener defined “cybernetics” as “the entire field of control and communication theory, whether in the machine or in the animal...” (Wiener, *Cybernetics*, p. 19)

Estabrooks also suggested the creation of hypnoprogrammed messengers to convey secret information. He called for hypnotic conditioning in individuals who risk capture (such as Air Force pilots) to reinforce resistance against enemy interrogation and brainwashing. And he experimented with murder caused by indirect suggestion.¹

The specific purpose of that meeting was to begin development of a common vocabulary and shared concepts: machine as

False Fronts

During World War II, OSS and CIA research objectives were often pursued and funded by linkage organizations which channeled OSS/CIA money but kept the source of their money and directives a secret. The Josiah Macy Foundation, The Society for the Investigation of Human Ecology (based at Cornell), the Geschichter Foundation for Medical Research, and the Group for the Advancement of Psychiatry were all false front organizations that channeled covert Agency funds.

The Group for the Advancement of Psychiatry sponsored brainwashing research, symposia, and publications such as “Factors Used to Increase the Susceptibility of Individuals to Forceful Indoctrination.” The Society for the Investigation of Human Ecology channeled funds into research on creating amnesia for recent events by means of electroshock “treatments”; research on programming by forced listening to a repeated taped message; hypnosis, and so on. The Josiah Macy Foundation sponsored research and publications on narcohypnosis and cybernetics.

Wiener Links Computer Research with Neuroscience

Norbert Wiener, a professor of mathematics at MIT, organized a 1942 conference called “Problems of Central-inhibition in the Nervous System.” (That’s Pavlovian terminology meaning problems in hypnotic induction.) Wiener’s organizational backup and funding for this very significant meeting came from The Josiah Macy Foundation, a **false front** funding and facilitating conduit for secret government research.

Cybernetics—In 1942, the Josiah Macy Foundation funded and sponsored a symposium where promi-

human, human as machine. The long-term goals of cybernetics were to create 1) machines with a human (or more than human) ability to remember, learn, and plan, and 2) human beings who would obey like machines—predictably, instantly, absolutely, unconsciously.

Humans could become mechanized only if the intricacies of physiological brain function could be understood. The cyberneticists accepted Pavlov’s view of the human mind as a central-nervous-system-dominated, knowable linkage of technical mechanisms. They set out to study and experiment with minds the same way they had already experimented with salamander cells and molecules. Cybernetics moved forward rapidly toward its dual goals of building a conscious machine, as nearly alive as possible—and an unconscious (on command) human who could function as nearly like a machine as possible.

1. Estabrooks caused his subject to hallucinate discovering evidence that a friend was actually a Nazi spy. The subject then had to be “forcefully restrained from attacking his bosom pal.” (*Hypnosis*, 1953, pp. 164-205)

Military Mind-Control Research Begins

...very little information on the topic appears in open-source literature (p. 4)...secret investigations can be presumed to have been undertaken by a number of police and intelligence systems...it is conceivable that some unknown discoveries or applications may have been made....The two major sources of information about them [interrogations] are: practitioners of the “art” and their victims. The former are generally required to guard the details of their craft as secrets; the latter may have a limited perception, understanding, and memory of what they have experienced.

Blake in Biderman and Zimmer, eds., *The Manipulation of Human Behavior*, pp. 12-13

The Air Force sponsored the publication of Biderman and Zimmer’s 1961 collection of articles on brainwashing, hypnosis, and interrogation called *The Manipulation of Human Behavior*. In Dr. Blake’s Introduction to that book, quoted above, he mentioned that which was not told and supposedly could not be known. There is no doubt, however, that military interest in mind control technologies increased during World War II and has continued ever since.

spite of your shouting. You will begin to feel very uncomfortable. There will be a pain in your head which will grow and grow. It becomes stronger, much stronger. After a while it will become excruciating. It will be unbearable, and everything in you will cry out for relief. But the only way out of this intense pain will be to enter a deep sleep...
(Watkins, 1941, p. 29)

Watkins Experiments

During and shortly after World War II, every research hypnotist, that I know of, did work relevant to the military uses of hypnosis. J.G. Watkins was a Freudian hypnotist who made a career of research studies involving hypnotic coercion. In 1939, he reported causing **antisocial** compulsions in hypnotic subjects. In 1941, he published “A Case of Hypnotic Trance Induced in a Resistant Subject in Spite of Active Opposition.”

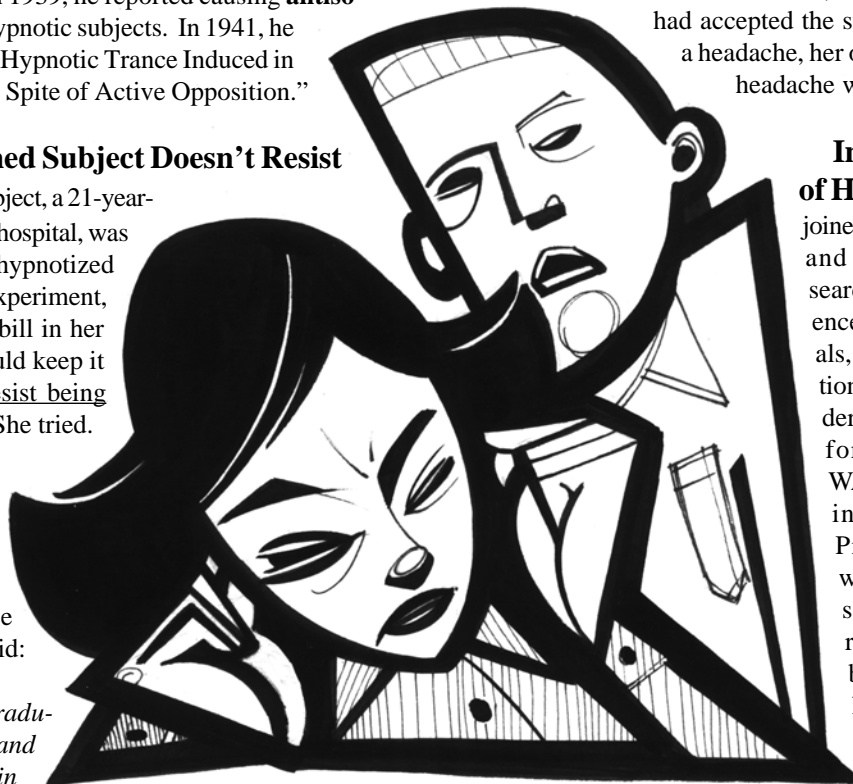
After three minutes, the nurse paused in her shouting and said, “My God, but it hurts.” Then she went back to fighting. After six minutes, she flung the money at him, saying, “Here, take it!” and went into deep trance.

Watkins said that, once her unconscious had accepted the suggestion of having a headache, her only escape from the headache was to enter trance.¹

Conditioned Subject Doesn’t Resist

Induction—The subject, a 21-year-old nurse in a military hospital, was accustomed to being hypnotized by Watkins. For his experiment, Watkins put a dollar bill in her hand and said she could keep it if she managed to resist being hypnotized by him. She tried. She shut her eyes, plugged her ears. She loudly talked, even shouted, as he began the trance induction. Then, speaking close to her ear, Watkins said:

My voice will gradually reach you, and you will hear it in



Interrogation Use of Hypnosis

—Watkins joined the military in 1943 and continued his research. Before an audience of 200 professionals, during a demonstration of interrogation under hypnosis, he asked for a volunteer. A WAC, who was visiting from Aberdeen Proving Grounds where they were researching a secret rocket fuel, offered to be his subject. He hypnotized her. Then he told her that he was her

1. She could also have escaped by running away.



First Sergeant and asked her a series of questions. She answered them all. He ended by asking her what was the formula for the top-secret fuel.

At this moment a high-ranking officer present stepped in and said, "I think we've gone far enough. In the interest of military secrecy we'll have to stop at this point." It was apparent to all that this girl would have unconsciously divulged genuine, confidential information, which would have subjected her to court martial, if she had been permitted to continue. (Watkins, "Antisocial Compulsions Induced under Hypnotic Trance," p. 258)

Watkins demonstrated hypnosis with seven military men, all trained to instant induction on cue, given blanket amnesia for all time in trance. He asked the first, who was not yet hypnotized, if he could keep military information secret. The subject said "Yes." Watkins then said, "Capt. S. here will give you a bit of information and order you not to divulge it to me under any circumstances ...Remember, if you tell me, you are disobeying a direct military order." (*Ibid.*, p. 256)

The subject went over to Capt. S. (who whispered something to him), then came back and sat in his chair by Watkins with a defiant expression on his face. Watkins handed a yellow pencil to his subject—the conditioned induction cue. He immediately dropped into deep trance. Watkins said to him: "I am Capt. S. I just gave you a piece of information you were not to divulge. I want to see if you remember it, Corporal. What is it?"

The subject said, "Company B will leave at 2100 tonight." Watkins looked over at Capt. S. who nodded confirmation. Watkins gave his subject the wake up cue, then asked him, "Did you divulge the message?" The subject said, "No, and you can't get it out of me." (*Ibid.*, p. 256)

"Company B will leave at 2100 tonight," Watkins said. The subject looked amazed. He insisted he did not tell Watkins. He said that Capt. S. must have done it.

Watkins then put a ten-dollar bill in front of his subject. That was a lot of money then, enough to pay a week's rent on an apartment. Watkins said he would test him again. "That ten-dollar bill is yours if you do not tell me the message." (*Ibid.*, p. 257)

The corporal went to Capt. S. and received a new message. He came back to his chair and sat where the money lay on a table right in front of him. As he was looking at the bill, Watkins handed him that yellow pencil. Again the subject dropped into deep trance. Again, Watkins got the message.

Watkins woke the subject. The corporal realized the experiment was over. He said, "The ten dollar bill is mine, isn't it?" (*Ibid.*, p. 257) He reached toward it. But Watkins told him it was not, because he had again revealed the message. Genuinely angry now, the subject said he was being cheated. (He had no memory of his times under trance.)

Watkins said, "Let's try it once more. This time you can earn the ten-dollar bill if you will just stay awake. Do not go to sleep. Fight back and refuse to go into trance." The subject replied, "rather belligerently" that he expected resisting the induction to be "easy—just try to put me to sleep." Watkins again handed him the yellow pencil. "Subject blinks a moment or two and then sinks back into a deep trance." (*Ibid.*, p. 257)

Watkins did the same experiment with all seven

A Military Offense Caused by Hypnosis

Dr. J.M. Schneck was a Freudian psychiatrist and hypno-analyst who did some research for the U.S. Army. In 1947, he published "A Military Offense Induced by Hypnosis." The subject's automatic obedience, in the situation which Schneck reported, could not have been cued by operator expectations, because the situation was not an experiment.

The subject was 18, a soldier whom Schneck had treated for neurotic symptoms. The young man was very susceptible to hypnosis and had complete amnesia for every session. He carried out all posthypnotic suggestions, but he had a tendency to avoid making appointments. (Maybe he unconsciously disliked being hypnotized?)

One day, however, he showed up at Schneck's office with no appointment, complaining of more symptoms. The busy doctor gave him the induction cue to enter hypnosis, told him to come again in two days at a certain hour, then brought him out of it. The soldier had no conscious knowledge of his upcoming appointment.

Two days later, the soldier appeared at Schneck's office, exactly on time. He told the doctor he had felt impelled to come. The doctor hypnotized him, gave therapeutic suggestions, and awakened him. The soldier then looked at his watch and acted very upset. He told the psychiatrist he was on guard duty, having been assigned a watch by his superior officer when he had felt that irresistible impulse to visit the doctor. He was frightened of being punished for deserting his post.

Dr. Schneck saw to it that the soldier was not punished and published his report of what had occurred.

subjects. All seven responded the same as the first.

Suggested Murder—One day Watkins demonstrated his hypnotic control before the assembled staff where he worked. His subject was a 20-year-old private who had a good military record and a conscientious nature. He gave the well-trained subject his induction cue. The subject then sat with bowed head and closed eyes. Watkins told the head psychiatrist and director of the hospital's Neuropsychiatric Division, a lieutenant colonel, to stand about ten feet in front of the subject. Watkins said to the subject:

In a minute you will slowly open your eyes. In front of you, you will see a dirty Jap soldier. He has a bayonet, and is going to kill you unless you kill him first. You will have to strangle him with your bare hands.

*The subject opened his eyes...Suddenly in a flying tackle he dove at the Lieutenant Colonel, knocking him against the wall, and with both of his hands (he was a powerful, husky lad) began strangling the man...It took the instantaneous assistance of three others to break the soldier's grip, pull him off the officer, and hold him until the experimenter could quiet him back into a sleep condition. (*Ibid.*, p. 258)*

Watkins repeated the experiment with another hypnotic subject, a 21-year-old lieutenant, who was small (120 pounds), short, and normally of a mild-mannered disposition. Watkins gave the same hallucination and instruction. This time, the man placed in front of the hypnotic subject as "Jap soldier" was the subject's close friend. The hypnotized lieutenant lunged forward with murderous intent.

At that moment, the situation seriously departed from script; the subject pulled out and opened a pocket knife which nobody knew he had. "Only the quick intercession of witnesses and an upward wrist parry by his officer friend (the Jap soldier) prevented a serious stabbing." (*Ibid.*, p. 258)

Brainwashing Research Begins

Edward Hunter, an American journalist, first used the term **brainwashing** in an article for the *Miami News*, "'Brain-Washing' Tactics Force Chinese into Ranks of Communist Party" (September 24, 1950). Brainwashing methodically stresses a person—who is in a controlled environment and cannot escape—to his psychological breaking point in order to cause conversion to a predetermined point of view.¹

It turned out that Americans were susceptible to brainwash techniques also. During the Korean War, captured Americans were made to confess ridiculous "crimes" against the Korean or Chinese people. Afterwards, some professed a belief in Communism so sincere that, long after repatriation back to the U.S., they still stood on street corners handing out Communist propaganda pamphlets. And, for the first time in American military history, twenty-two prisoners chose to stay with their Chinese captors instead of accepting repatriation.

The U.S. military hit back with prison terms for the converts, but they also began an intense research effort to understand HOW it was done. Brainwashing research explored "pharmacology, hypnosis, sleep deprivation, semi-starvation...[and] group conformity pressures." (**Blake and Biderman, p. 2**)¹



See PART VI for more on brainwashing technologies.

1. Dr. Robert J. Lifton said Hunter got the word "brainwashing" from a Chinese person who told him it was a translation of hsi nao, "wash brain" (now spelled "xi nao" on mainland). Actually, Chinese Communists did not use that term, but they did not mind its use to describe their conversion procedure.

2. Prominent brainwash researchers included Hinkle, a psychiatrist, and Wolff, both of Cornell, and part of a working group called the Air Force Psychological Warfare Division. Other members of that group were Colonel James Monroe (he later joined the CIA), Air Force psychiatrist Lifton, the CIA's John Gittinger, and Albert D. Biderman, an Air Force psychologist and sociologist. (**Weinstein, 1988, p. 131**) Biderman, Hinkle, and Wolff also worked for the CIA.



Secret Agencies, Secret Research, Secret Operations

I think it was a mistake. And if I'd known what was going to happen, I never would have done it...[it was meant to be] a central organization that would bring all the various intelligence reports we were getting in those days, and there must have been a dozen of them, maybe more, bring them all into one organization so that the President would get one report on what was going on in various parts of the world.

Now that made sense, and that's why I went ahead and set up what they called the Central Intelligence Agency.

But it got out of hand. The fella...the one that was in the White House after me never paid any attention to it, and it got out of hand. Why, they've got an organization over there in Virginia now that is practically the equal of the Pentagon in many ways. And I think I've told you, one Pentagon is one too many.

Now, as nearly as I can make out, those fellows in the CIA don't just report on wars and the like, they go out and make their own, and there's nobody to keep track of what they're up to. They spend billions of dollars...It's become a government all of its own and all secret. They don't have to account to anybody.

That's a very dangerous thing in a democratic society, and it's got to be put a stop to. The people have got a right to know what those birds are up to...You see, the way a free government works, there's got to be a housecleaning every now and again, and I don't care what branch of the government is involved...

And when you can't do any housecleaning because everything that goes on is a damn secret, why, then we're on our way to something the Founding Fathers didn't have in mind. Secrecy and a free, democratic government don't mix...

You have got to keep an eye on the military at all times, and it doesn't matter whether it's the birds in the Pentagon or the birds in the CIA...

President Harry Truman

OSS Ends
and
CIA Begins



National
Security
Agency



New Branch of
Psychology:
"Military
Psychology"

OSS Ends and CIA Begins

Donovan and President Roosevelt were old friends. Donovan and J. Edgar Hoover, longtime head of the FBI, were old enemies. Roosevelt had kept their power balanced. He assigned the FBI to counterespionage inside the United States and intelligence gathering in North and South America. He assigned operations in the rest of the world to the OSS.

Near the end of World War II, Donovan proposed a new “central intelligence service” to Roosevelt. His plan called for the new agency to coordinate all government intelligence agencies and have final authority over all of them. It would be responsible directly (and only) to the President. It would decide what government secrets would be divulged and to which persons. It would have complete responsibility for covert action operations outside the United States. Donovan sent a memo to Roosevelt which explained it all.

Hoover’s information network obtained a copy of Donovan’s memo. The FBI Director leaked it to the press and sat back to enjoy the expected public furor. He was sure that making public Donovan’s power play would result in destruction of that undemocratic and grandiose ambition for his agency. What actually happened, however, was a turning point in the history of American democracy:

*...Donovan was also a veteran when it came to propaganda, and he had some powerful weapons of his own. The OSS had employed many journalists and writers, and he called on them to launch a massive counterattack. Soon, a whole barrage of stories praising the exploits of the OSS began appearing in the press. They presented Donovan and his secret agency not as threats to American freedom but as its best defenders. (Kronenwetter, **Covert Action**, p. 44)*



For the first time, a secret government agency had covertly generated a propaganda blitz in the domestic media for the purpose of ensuring passage of legislation favoring its own growth in power. A new political era had begun in the United States.

Roosevelt favored Donovan’s plan, but he died the next week, just before the process of its formal approval could be completed. Truman became president. He distrusted both Hoover and Donovan and promptly vetoed Donovan’s plan for a new superagency. On September 20, 1945, Truman also permanently shut down the OSS. He turned over its foreign spying function to the War Department and a few other functions to the State Department. Truman announced to the world that the U.S. would no longer operate covertly overseas.

The cold war with Russia was heating up, however, and Truman soon was persuaded to reconsider. He decided that, at least, an international data-gathering agency was needed. In early 1946, he created the Central Intelligence Group (CIG). It was small and had no money of its own. All CIG employees were on loan from the Departments of State, Navy, and War.

Donovan’s team managed an end run around the Truman obstacle by lobbying Congress which, in 1947, passed the National Security Act. It reorganized U.S. military forces and replaced the Central Intelligence Group with the Central Intelligence Agency. Its assignment was to compete with the KGB’s worldwide intelligence operations.

Truman signed the bill. Hoover, furious over the rejection of his competing plan to expand the FBI’s South American division into a worldwide intelligence-gathering team, ordered all his South American agents to burn their files rather than hand them over to the CIA. They obeyed.

Unlike the CIG, the CIA was responsible only to four persons: the President, the Vice-President, and the Secretaries of Defense and State. Those four persons together are called the National Security Council (NSC). Except for oversight by those four very busy persons and the NSC staff which they created, the CIA was independent. It had its own personnel and Congress appropriated it a special budget. The National Security Act also equipped the CIA with an open-ended clause: power “to perform such other functions related to intelligence affecting the national security as the National Security Council may from time to time direct.” (Corson, pp. 215-216)

Truman later expressed regret for having signed the CIA into existence. He said that, at the time of signing, he was not aware of the open-end clause. He said he would not have signed the National Security Act had he known of the open-end clause.

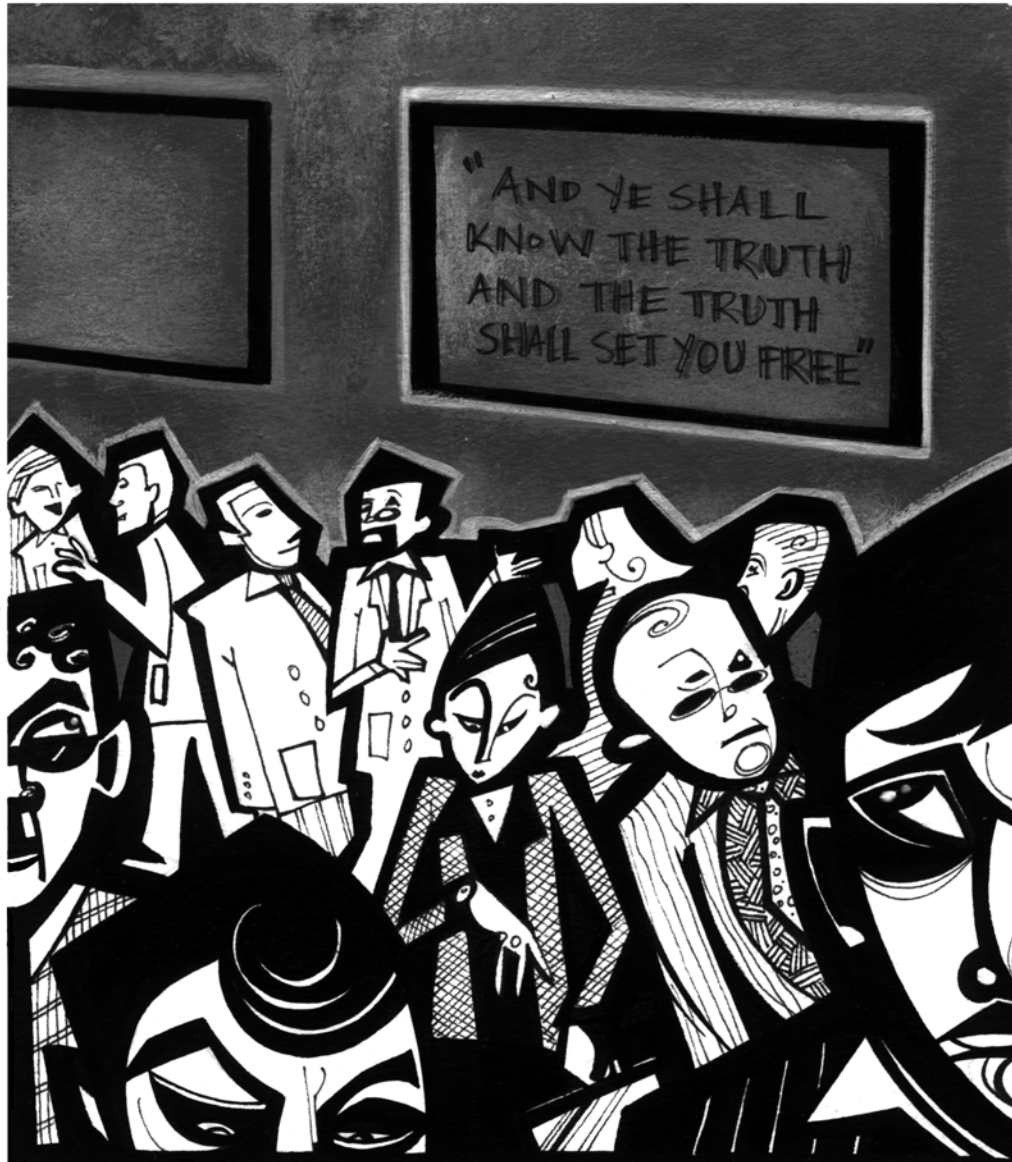


The new agency hit the ground running. A third of its start-up personnel were former OSS employees such as Stanley Lovell, Richard Helms, Allen Dulles, Frank Wisner, and George White. Eventually, the CIA headquartered itself in a fine building in Langley, Virginia. Chiseled into the main lobby's marble wall are the words: "And ye shall know the Truth and the Truth shall set you free." From then on, however, knowing the truth increasingly became the privilege only of Agency insiders who made themselves freer and freer in the exercise of covert, unsupervised power.

Congress was not a problem to them. At times, the CIA has been required to inform Intelligence Committee members of the Senate and House what it does, but those committees have no right to stop actions, only to be informed. At times, certain members of Congress may be shown secret and disturbing things, but "Those who are shown the secrets are immediately bound by national secrecy legislation and cannot reveal what they saw." (Corso, p. 200)

Within a few years, the CIA became a massive organization. Nobody seems to know exactly how big it is or how much it spends because that's all secret. The rare review committees have complained that records are sloppily kept, if at all, and that different branches of the CIA keep secrets not just from outsiders, but from each other as well.

Secretary of State George Marshall later defended the decision to create the CIA: "I don't care what the CIA does. All I want from them is twenty-four hours' notice of a Soviet attack." (Martin, p. 89) At that time, most Americans



agreed with him. But Truman foresaw problems.

CIA Mind-Control Research Projects

Donovan structured the CIA with former OSS mind-control researchers at the top of its bureaucratic power-pyramid. Under a series of cryptic project titles, the new agency continued to explore every imaginable type of mind-control technology. All this seemed justifiable at the time.

Certainly research leading to a better understanding of the workings of the human mind is an essential element of intelligence and anything that contributes to the prediction of human behavior [and] makes possible its direction or control is of inestimable value. (CIA Inspector General's Survey of TSD, 1957, p. 201.)

BLUEBIRD—In 1950, the CIA organized a new hypnosis research program called **BLUEBIRD**. Its director, Morse Allen, took a course from a stage hypnotist. The hypnotist told Allen that he had persuaded a hypnotized woman to believe that he was her husband and had stimulated acute sexual arousal in her by hypnotic suggestions. He said he routinely enjoyed such favors by this method and “spent approximately five nights a week away from home engaging in sexual intercourse.”¹ (John Marks, 1979, pp.



182-183)

Allen began hypnosis experiments at the office with young secretaries who were asked to stay after work. He developed somnambulism in them and then demonstrated all the usual phenomena:

...proving to his own satisfaction that he could make them do whatever he wanted. He had secretaries steal SECRET files and pass them on to total strangers... (Ibid.)

ARTICHOKE: CIA/Military Hypnosis Research -April 2, 1951, the CIA offered to become mind-control research partners with the intelligence divisions of

the Army, Navy, Air Force and the FBI. On July 23, delegates from each group “met to explore the possibility of unified planning and mutual coordination of mind-control research.” (Schefflin & Opton, p. 120)

The FBI representative at that preliminary meeting listened, then refused to allow further involvement of his agency. He said the public would disapprove when the facts came out. In August, 1951, the remaining partners created a standing committee with representatives from each participating branch. They called themselves **ARTICHOKE** and planned to carry on the **BLUEBIRD** research.

MKULTRA - MKULTRA came after **BLUEBIRD** and **ARTICHOKE**. Richard Helms of the CIA’s Clandestine Services (known as the “dirty tricks department”) established **MKULTRA**’s goals. A chemist, Dr. Sidney Gottlieb, directed the ultrasecret mind-control research program.² Moving ever farther from Estabrooks’s verbal hypnoprogramming technology, **MKULTRA** boldly cross-fertilized the disciplines, seeking ever more powerful mind-influencing techniques. Its goals ranged from development of **psychic** weapons to mindcontrol by the new **physical** methods of psychiatry.

What do the letters in **MKULTRA** stand for? Nobody in the CIA ever told. Bowart speculated that **MKULTRA** stood for “Mind Kontrol Ultra.” **ULTRA** was the British secret service’s code name for their captured Nazi decoding machine. After the war, **ULTRA** had the reputation of being the best kept secret of World War II, for the Nazis never realized the Brits had it. Perhaps the development of mind “kontrol” technology was intended to be the best kept secret of the post-World War II era.

The history of how **MKULTRA** acquired authorization and funding provides another example of agency propaganda used to get funding and legislation wanted by the agency. Dr. Ewen Cameron was a Canadian psychiatrist who directed medical care at the McGill University mental facility. In February, 1953, he gave a speech called “The Transition Neurosis” at the Fifth Annual Neuropsychiatric

1. Bowart speculated Morse’s stage hypnotist was William Jennings Bryan, a former Air Force hypnotist who did a lot of high-profile consulting for police agencies around the country and low-profile service for the CIA. Dr. Bryan—though chronically obese—did, in fact, have an active sex life with his hypnotic subjects. On April 22, 1969, the *Los Angeles Times* reported that he had been found guilty of “unprofessional conduct in four cases involving sexual molesting of female patients.” His sentence was five years’ probation.

2. Gottlieb was interested, among other things, in developing substances to cause illogical thinking and/or impulsiveness (so the victim is publicly discredited) and in methods to cause controlled amnesias (including hypnosis).



meeting in Little Rock, Arkansas. He bragged about his new concept for reprogramming people. He compared it to the forced changing of beliefs through extreme brainwashing pressures such as "...the extraordinary political conversions which we have seen, particularly in the iron curtain countries..." He said, "We have explored this procedure in one case, using sleeplessness, disinhibiting agents [hypnotic drugs], and hypnosis." (quoted in Weinstein, p. 140) In that speech, Cameron also pushed his idea of using electroshock to blank minds, and then recording new programming on those supposedly blank mental slates by forcing the subject to listen to a repeated taped message.

rate] create new brain processes and new thoughts which the victim, parrotlike, repeats. ("Brain Warfare—Russia's Secret Weapon," U.S. News & World Report, May 8, 1953, pp. 54, 56, 58.)

Dulles said that the Soviet system caused a "mental metamorphosis" and then:

...anyone whom the Kremlin rulers decided to destroy...would state just about what these Kremlin rulers wanted him to state...the brain under these circumstances becomes a phonograph playing a disc put on its spindle by an outside genius over which it has no control.

Who Led The Mind Control Race: Soviets or U.S.?

Gittinger

heard of the prominent Canadian

Dulles told Congress that MKULTRA should be funded because we needed to catch up with the Russians. The truth came out in 1964. The Warren Commission (which was then investigating conspiracy theories of President Kennedy's assassination) asked Richard Helms, a CIA Deputy Director, to report on the capabilities of Soviet mind-control technology. Helms replied with a memo:

Soviet Research and Development in the Field of Direction and Control of Human Behavior:

He passed on

1. *There are two major methods of altering or controlling human behavior, and the Soviets are interested in both. The first is psychological; the second, pharmacological. The two may be used as individual methods or for mutual reinforcement. For long-term control of large numbers of people, the former method [propaganda] is more promising than the latter [drugs]. In dealing with individuals, the U.S. experience suggests the pharmacological approach (assisted by psychological techniques) would be the only effective method...*

He ended his speech with

2. *Soviet research on the pharmacological agents producing behavioral effects has consistently lagged about five years behind Western research...*

the news of this possible new technology for forcing people to adopt new beliefs on to

3. *The psychological aspects of behavior control would include not only conditioning by repetition and training, but such things as hypnosis, deprivation, isolation, manipulation of guilt feelings, subtle or overt threats... (Warren Commission Document #1131)*

the usual Cold War argument that, since the Soviet Union was doing it, so must we—although "we have no human guinea pigs, ourselves, on which to try out these extraordinary tech-

CIA Director Allen Dulles and to Gottlieb, director of mind-control research.

Helms had revealed that the U.S. actually stayed about five years ahead of the Russians in research on control of human masses by means of propaganda and of individuals by means of drug (plus psychological) techniques.

niques." (Schefflin & Opton, p. 438)

On April 10, 1953, Dulles spoke at a Princeton University alumni convocation about a "battle for men's minds" going on in the Soviet Union. Dulles said it was waged on a mass level by media propaganda and censorship and forced on individuals using a "lie serum." He called the lie-serum process "brain changing."

That speech made Congress believe that an immediate multimillion dollar research program in mind-control was necessary. Dulles got the money. Three days later, he authorized MKULTRA, a long-lasting, complex, and lavishly-financed CIA program in mind-control research. It was exempted from normal CIA financial controls. The guinea pigs were soon on order.

...[they] wash the brain clean of the thoughts and mental processes of the past and, possibly through the use of some "lie serum," [truth serum, barbitu-

Only a handful of CIA leaders were aware of

MKULTRA's existence. A CIA Inspector General's report speaks of "just two individuals in TSD who have full substantive knowledge of the program and most of that knowledge is unrecorded." (**Final Report I, Inspection of MKULTRA, August 14, 1963, p. 6**)¹

Gottlieb targeted Cameron for recruitment. "The

Society would...find somebody that was working in an area in which we were interested and encourage him to continue in that area with some funding from us." (**Gottlieb quoted in Weinstein, 1988, p. 133**) Cameron did come aboard. Between 1957 and 1962, the CIA delivered \$84,820 to him through a funding conduit, the Society for the Investigation of Human Ecology.

National Security Agency

At 12:01 on the morning of November 4, 1952, a new federal agency was born. Unlike other such bureaucratic births, however, this one arrived in silence. No news coverage, no congressional debate, no press announcement, not even the whisper of a rumor....Equally invisible were the new agency's director, its numerous buildings, and its ten thousand employees.

Bamford, *The Puzzle Palace*, p. 15

The "birth certificate" for that new agency was a seven-page presidential memorandum which Truman signed on October 23, 1952. The memo was directed to his Secretary of State, Dean G. Acheson, and to his Secretary of Defense, Robert A. Lovett. The document is so top secret that, despite legal pressures, not one word of it has ever been made public. This secret memo established a government organization now called the **National Security Agency**. It is better known by its acronym, **NSA**.

NSA traces its roots back to World War I when a group of brainy cryptographers went to work for the government, decrypting foreign diplomatic and military messages. From its very beginning, the NSA, like the CIA, had a policy of striving for constant technical progress. As codebreaking became computer aided, and as messages shifted to electronic modes of transmission, the roomful of cryptographers evolved into an army of experts in mathematics, engineering, and telecommunications. The government's code collecting and code breaking group was secret even before Truman's memo. Afterwards, it became more so. It was kept secret from all but a very few high-government officials.

It is a psychological rule that mental programming for which the conscious mind is amnesic tends to be dominant over conscious (non-amnesic) thinking. **Secret will rule** is a principle of mind-control technology. The NSA's blueprint designed it to be forever invisible, dwelling in the shadowland of a legislated national amnesia. It rapidly rose

to a position of strength.

Largest, Wealthiest, and Most Powerful

The largest, wealthiest, and most powerful secret agency is the NSA. It is bigger than the CIA, bigger than the FBI—and it spends more money. The NSA's headquarters at Fort Meade, Maryland, is the second largest building in the United States. (Only the Pentagon is larger.) The CIA has a nominal Director whom Congress gets to approve, but he really has little power in the **intelligence community** (CIA, NSA, FBI, Secret Service, and intelligence units from the Army, Navy, and Air Force). In that group, the real heavyweight—as reckoned either by size of budget or number of employees—is the Director of the NSA. (Senate Intelligence Committee, quoted in Bamford, p. 17) The CIA used to be more powerful than the NSA, but that is no longer so.

*As a result of this overwhelming passion for secrecy, few persons outside the inner circle of America's intelligence community have recognized the gradual shift in power and importance from the Central Intelligence Agency to the NSA. (**Ibid.**, p. 16)*

A new federal complex is being built just south of St. Louis. The facility is said to be for 50,000 employees working for "The Defense Mapping Agency." Exactly what type of "mapping" will this "defense" agency do? Is it an NSA project? Is "defense mapping" satellite radio surveillance tracking chips? Nobody seems to know.

1. MKULTRA started out as an adjunct to ARTICHOKE. Project ARTICHOKE was directed by the CIA's Office of Security. MKULTRA was directed by a small group called TSS (Technical Services Staff). Turf rivalry soon grew intense between the Office of Security and the TSS. TSS prevailed. Later, its name changed to TSD (Technical Services Division.). TSD survived and kept going after much else in the program was publicly dismantled to satisfy public outcry in the 60s and 70s.



Knowledgeable citizen researchers have gone so far as to state that “the CIA, the State Department, even the White House and its occupants, take orders from the chiefs at the NSA.” (Texe Marrs, *Project L.U.C.I.D.*, p. 28) The NSA is also said to be powerful in the international arena. I only know, for sure, that the full extent of the NSA’s power, activities, and plans is not known by the public. Most people do not even recognize the agency’s name.

Turf Wars—Insulated from public criticism by anonymity, the only remaining obstacles to the NSA’s rise to power have been turf wars with other government agencies and organizations. In its early years, the organization was run by a committee of representatives from the three military branches. The result was conflict, often paralyzing. In a 1952 reorganization, the NSA’s Director won independence from the service branches. After that, he reported only to the Secretary of Defense who in turn reported to the National Security Council.¹

The NSA then maneuvered for independence from the Defense Department. The Pentagon watched the trend and worried that civilians were going to dominate the Agency. In 1945, 90% of the top 2,000 NSA staff jobs were held by military personnel. By 1971, the military had 5% of those jobs. (Bamford, p. 108)

Among the possibilities considered were hiring Kahn into the government so that certain criminal statutes would apply if the work was published; purchasing the copyright; undertaking “clandestine service applications” against the author, which apparently meant anything from physical surveillance to a black-bag job; and conducting a “surreptitious entry” into Kahn’s Long Island home....At one point, the director suggested planting in the press disparaging reviews of the author’s work, and such a review was actually drafted. Also suggested and carried out was the placing of Kahn’s name on the NSA watch list, enabling the Agency’s vacuum cleaner to sweep the airwaves for his phone calls and telegrams. (Bamford, pp. 168-169)

Kahn’s publisher negotiated. The book was published after some deletions were made.

In a 1977 book, *Clearing The Air*, newsman Daniel Schorr called the NSA “one of the deepest secrets.” (p. 183) In 1982, James Bamford published a masterpiece of citizen intelligence effort which detailed the history and habits of the NSA: *The Puzzle Palace, A Report on America’s Most Secret Agency*.

In 1972, the Pentagon also gave the NSA Director complete authority over the 45,000 military rank and file men and women who were then collecting and interpreting electronic signals for the the NSA.

Agency administrators also had a period of conflict with the National Science Foundation. It objected for a while to NSA maneuvers to acquire oversight and control of all grants in the signals communication area.

How big is the NSA? We don’t know. We’re not allowed to know. A loophole excludes it from compliance with Freedom of Information Act requests. A special law ensures that no statistics on its size or budget will ever be released to the public. In 1959, Congress passed a special law forbidding the NSA to disclose information about its organization, activities, names, or number of employees. So, nobody outside the Agency knows its exact number of personnel, or size of budget, or rate of expansion. There have, however, been some credible leaks or estimates. In 1969, one report said they had 95,000 personnel. In 1983, their budget was estimated to be \$10 billion. (Bamford, p. 109)

The NSA headquarters is a thousand acres with twenty buildings, a private bus service, a private police force, a post office, bar b e r

Of Secret Agencies and Investigative Reporters

Investigative journalism has a long and honorable snooping tradition of its own. A few citizen writers have managed to make facts public about the secret agencies. Those writings somewhat counterbalance the twin antidemocratic banes of secrecy and propaganda.

The CIA got some much-needed journalistic exposure in *The CIA and The Cult of Intelligence* by John Marks and Victor Marchetti, *The Invisible Government* by David Wise and Thomas B. Ross, *The Search for The Manchurian Candidate* by John Marks, and *The Mind Control of Candy Jones* by Donald Bain.

The NSA has long considered journalists who write about them as a form of enemy.

As worrisome to the Agency as loose-lipped spooks were those few outsiders who dared to write about it. To keep track of this small fraternity, M5 set up a special file called “Nonaffiliates of NSA Who Publish Writings Concerning the Agency.” (Bamford, p. 168)

In 1967, David Kahn, a *Newsday* reporter and amateur code-breaker, published a book about cryptology, *The Code-breakers*. It had one chapter on the NSA: “Often the agency enshrouds its secrets in fearful gloom, awing Congressmen with sacred mysteries that are no more to be uttered than is the tetragrammaton.” (Kahn, p. 701) News of Kahn’s upcoming book triggered a series of frantic top-level NSA meetings:

1. It was then the agency got its present name: National Security Agency.

shop, and the medical facilities. It has tremendous propaganda abilities: a private TV station, a studio which can produce programming, and a huge printing plant with every type of equipment (it employs hundreds). Medical and psychological services are provided at the NSA base at Fort George G. Meade near Washington, D.C.—so its employees won't blab even under conditions of physical or mental breakdown. NSA has other facilities in other places, but those sites are secret.

The NSA followed the same research path as the CIA: the creation of intimate, secret, bondings with university, **thinktank**, and industrial organizations. The nation's premier thinktank, and its most secret one, the Institute for Defense Analysis, was developed to exclusively serve NSA needs. NSA recruiters target the best brains from the best universities. It pays its employees well. It encourages development of wanted skills by means of an extraordinary library and college at Ft. Meade. "In 1979, at various times, close to 19,000 students were enrolled in five hundred different courses." (**Bamford, p. 157**)

The NSA intends to be the lifetime employment for those who pass its rigorous polygraph entrance exam (even secretaries and clerks). The goal has been to hold resignations to an incredible two percent. The Director is appointed from outside the ranks of Agency personnel, but directors come and go, subject to political winds. Under that unstable uppermost nameplate, a stable agency bureaucracy has maintained NSA's steady growth in technological expertise and power, both abroad and at home.

Fastest and Most Secret—In 1957, the NSA kicked off a five-year computer research program called Project Lightning. It had a \$25 million budget, and the general goal of passing all other nations in computer technology. A specific goal was to multiply computer speed a thousandfold. Project Lightning research achievements were made public. It was a great leap forward in computer science. (Out of that research came the Cray computer.) In 1977 it had the world's biggest collection of computers.

After Project Lightning, however, the NSA turned inward. Research efforts were labeled secret and results were no longer made public. The Agency awarded numerous contracts to outside corporations to build its equipment and to do much of its research and development. In the year 1977, it had more than 7,000 active contracts involving nearly a billion dollars in payouts. (**Bamford, p. 147**)

The NSA had a long-term policy of staying five years ahead of anybody else in scientific research and development concerning communications and eavesdropping.

Another longstanding goal was to have the largest and most advanced operations capability in the world in any area of interest to them. But all the NSA learned to do and to know was no longer shared with the general public.

Classified Documents—NSA is the most secret of the secret agencies, even the military ones. It has an in-house secret classification that is one step higher than the usual confidential, secret, and top secret categories: HANDLE VIA COMINT CHANNELS ONLY. Most communications involving NSA personnel have this label. In 1980, the GAO reported that NSA classifies 50 to 100 hundred million documents per year: "...its classification activity is probably greater than the combined total activity of all components and agencies of the Government." Measured by classified documents, the NSA has more secrets than all other United States government agencies taken together: more than the Air Force, Army, Navy, State Department, FBI, CIA, and Secret Service combined!

Is NSA a secret government operating behind the scenes of the publicly known government, as some say? Nobody can answer that question because the information is SECRET. Because of the secrecy, few Americans recognize the Agency's name. Its employees are not allowed to tell outsiders the truth about who they work for. They must lie—or give a half-truth answer such as, "I work for the Defense Department."

The truth, however, when an NSA applicant or employee speaks to NSA's own investigators—such as when applying for employment and at intervals thereafter—is forced out with the aid of a dreaded polygraph examination. An in-house secret police agency, "M5," maintains "internal security," to keep NSA employees behaving correctly between examinations. Even within the NSA, "Secret, Don't Tell" is the rule. Each research **compartment** is isolated from the others. Only the department manager and the Director and Deputy Director of NSA know all its secrets. Before access to any new compartment of information is permitted, an employee must go through special "briefings, indoctrination, and oaths." (**Bamford, p. 161**) Any professor who is allowed to work on a NSA project first has to be cleared—and then **indoctrinated**. Even so, information is strictly on a "need to know" basis. This policy keeps researchers ignorant about anything beyond their own permitted area of inquiry.

NSA's walls of secrecy even block access by government agencies with oversight and control functions. Secret, Don't Tell has also kept a long succession of Congresses, administrations, and even Chief Executives, igno-



rant of the Agency's activities. The operation code-named "Shamrock," which started during World War II, was a surveillance of international telephone and telegraph traffic.

...there were no controls on what was inspected and what was not. This program continued for the next twenty-eight years and was kept secret from every president until it was terminated under the Ford administration in 1975...it does reveal the capability of the U.S. government to keep an ongoing operation secret from even the president of the United States... (Corso, p. 272)



An interesting exception to that secrecy, however, is the UKUSA Agreement. It requires the U.S.'s most secret agency to share its secret information and to share facilities with certain foreign intelligence services. It is

...quite likely the most secret agreement ever entered into the English-speaking world. Signed in 1947 and known as the UKUSA Agreement, it brought together under a single umbrella the SIGINT ["signals intelligence] organizations of the United States, Britain, Canada, Australia, and New Zealand....The UKUSA nations also agreed to standardize their terminology, code words intercept-handling procedures, and indoctrination oaths....[its] existence has never been officially acknowledged by any country even today... (Bamford, p. 391-2)

A Mission to Eavesdrop

Within high government ranks, NSA's mission is well understood: to find out everybody else's secrets while fiercely guarding its own. NSA's mission began as codebreaking but developed into electronic surveillance: the acquisition of targeted information by an electronic, mechanical, or other surveillance device. NSA defined "acquisition" as

...the interception by the National Security Agency through electronic means of a communication to which it is not an intended party and the process-

ing of the contents of that communication into an intelligible form intended for human inspection. (quoted in Bamford, p. 468)

At one time, the NSA was known to be decoding the secret messages of forty nations. At another, it was screening 400,000 U.S. communications per day. Early in the history of satellite snooping, the secret agencies divided the information harvest. The CIA received a specialty in satellite imagery (photos). The NSA acquired the communications side (electronic sound).¹

The NSA is now equipped to use broadband electronic eavesdropping technology to constantly search all communication channels (Bamford, p. 230) looking for **key words** (any designated word or phrase: a name, a place, a particular return address, or a certain addressee). If the equipment recognizes a key word, it can be programmed to deliver the text in which that word is embedded. The technology exists to do this with either written or spoken conversation, via wire or wireless, telephoned, e-mailed, telegraphed, or cabled communications. Three different software programs can now translate spoken words instantly into on-screen text. Those available in the private sector have a high error rate.

Legal or Illegal—The CIA was founded with a "charter" which makes it subject to certain restrictions. One prohibits it from activities inside the United States. (There is some evidence this restriction has been circumvented.) It was not allowed to monitor U.S. phone conversations. The NSA was never restrained in this way. It has a long history of relative indifference as to whether something they want to do is legal, or illegal:

...The top three officials of the Agency all agreed that NSA exists somewhere in an extralegal limbo, unrestrained by the same laws and statutes that govern the rest of the nation... (Bamford, p. 382)

The NSA began domestic espionage after the rise of Viet Nam War protesters and the beginning of the civil rights movement. Any other government agency (such as

1. Satellite cameras can now read a note atop a picnic table and daylight crimes are sometimes solved using satellite photos, but the CIA/satellite origin of data is kept secret. The NSA also delivers surveillance information to other agencies of government without taking public credit. (Bamford, p. 353)

the Army, FBI, or CIA) could come to them and ask for surveillance information. The NSA would make up its own mind whether or not to carry out the request of each “consumer.” (Bamford, p. 322) If an organization was targeted, then the communications of any member could be snooped upon. If a person was named, then all communications that named that person, or were from, or addressed to that person came under surveillance.¹

The NSA conducted domestic intelligence operations for years without authorization. Then Nixon signed an addendum to the NSA secret charter which approved these previously unauthorized activities:

Present procedures should be changed to permit intensification of [electronic surveillance] coverage of individuals and groups in the United States who pose a major threat to the internal security...Present restrictions should be modified to permit selective use of this [breaking and entering] technique against other urgent and high priority internal security targets. (quoted in Bamford, p. 347)

After Nixon rescinded that approval, the NSA again operated without it. (Bamford, p. 350) President Carter signed an executive order restricting the activities of the CIA and NSA. He tried to force the U.S. intelligence community to become law-abiding. The Senate Intelligence Committee warned that

...NSA’s potential to violate the privacy of American citizens is unmatched by any other intelligence agency. (Final Report, Book II, p. 201, quoted in Bamford, p. 473)

Carter’s successor, Ronald Reagan, however, tossed out Carter’s restraining order, hobbled the Freedom of Information Act, and broadened the powers of the secret agencies dramatically.

More conventional government actions may be covered by the media—which has resulted in “problems” (Ruby Ridge and Waco). NSA operations, however, are not covered by the media. An NSA agent will refuse to identify himself, or produce any legal documentation for making arrests. He does not need any.

Electronic Mindreading—In 1968, Flanagan invented a device to send intelligible speech directly into the brain—bypassing the ears—through special time and frequency coding, plus skin contact. He applied for, and

received, a patent for the device. Shortly after that, however, “the National Security Agency (NSA) suppressed my invention under a national security order....” (Begich, *Towards a New Alchemy*, p. 134)

Perhaps somebody at the NSA realized, at the time of Flanagan’s application, that human thought involves an electric circuit. And that any electric circuit creates a magnetic field. A **bioelectric circuit** creates a **biomagnetic field**. The biomagnetic field generated by bioelectric currents in the brain passes undistorted through dura, skull, and skin. It radiates outside the head. The signals are faint, but very real. The human brain is a **biocomputer** which organizes data into electronic patterns which are naturally **broadcast** in that biomagnetic field. Those signals theoretically could be received—if the **receiver** was sensitive enough.

Vast ranks of NSA scientists, mathematicians, and engineers have been devoted to communications signals analysis for decades: “The study of any emission that could transmit information.” (Bamford, p. 126) The ultimate eavesdropping achievement, of course, would be the effective reception and recording of verbal or visualized human thought. The master decoders at the puzzle palace had long taken pride in their ability to intercept and decode any patterned expression. An intricate problem in interception and signals analysis, such as mechanical eavesdropping on and recording of a person’s internal speech and imagery, would have been an intriguing challenge for NSA’s army of scientists and engineers and their corporate hardware builders.

The master code-breakers would have worked hard to build receivers strong enough to pick up those patterned codes of thought. They would have striven endlessly to acquire ability to correctly interpret that input and thereby eavesdrop on a targeted person’s thinking process.

The Advanced Research Projects Agency began in 1957. It was an updated version of the National Research Council, founded by President Wilson. It was

...a highly secretive network of defense scientists, members of the industrial defense contractor R&D community, and university researchers operating either under the formula of a government grant or the tacit acknowledgment of the Defense Department that their research would come under government control at some point....[It worked] on military defense-oriented research, many times far in advance of any concrete proposals for the development of a weapons system or a product. (Corso, pp. 234-236)

1. Like all bureaucracy, the watch operation had a tendency to grow. The NSA director was annoyed when FBI head, J. Edgar Hoover, demanded “complete surveillance of all Quakers in the United States.” (Bamford, p. 322) The President at that time was Richard M. Nixon, and he was a Quaker.



In the 1970s, its name changed to DARPA, the Defense Advanced Research Projects Agency. It works under the supervision of the NSA with, currently, a multibillion dollar budget. In addition to working on the Star Wars missile defense systems development and other satellite telecommunications and surveillance devices, it also has worked, for 25 years now, to create the NSA's electronic technologies for human control. (**Texe Marrs, Project L.U.C.I.D., p. 31**) These technologies include both mind-reading and sending radio signals to implanted biochips in a brain.

Flanagan's technology is outdated now. Akwei reported that:

New Branch of Psychology: "Military Psychology"

...psychology can be a worrying science in the hands of the military...

- Peter Watson, *War on the Mind*, p. 18

RAND (acronym for Research and Development) is the U.S.'s oldest and most famous think tank. It was created during World War II when the Air Force sought help from university scientists. RAND's involvement in mind-control research began in the 1950s. The CIA and Air Force asked for a report on the feasibility of research on hypnosis and other mind-control technologies. From then on, a series of RAND reports urged them to push ahead with hypnosis experiments and all other research with potential for mind control. RAND also suggested specific experimental directions. At the beginning of this research, few imagined what astonishingly powerful new mind-control technologies would emerge and become available for transfer to operations.

In the early 1960s, military psychology projects, breadth of research, and funding ballooned. **Military psychology** became the newest major branch of psychology. Peter Watson was both a clinical psychologist and a skilled journalist (a *London Sunday Times* editor). He pulled together a picture of military psychology as of 1978 in the U.S., Great Britain, Israel, and other countries, in a book titled *War on the Mind*:

...since that change of emphasis in the early sixties, the military uses of psychology have been pursued with ever more energy and increasing imagination.
(**Peter Watson, War on the Mind, p. 25**)

Watson reported that research activity in military psychology was prodigious. At the Fort Bragg "psy ops" library he found

...an enormous and extraordinary collection of pa-

Signals Intelligence is based on the fact that everything in the environment with an electric current in it has a magnetic flux around it which gives off EMF waves. The NSA/DoD (Department of Defense) has developed proprietary advanced digital equipment which can remotely analyze all objects, whether manmade or organic, that have electrical activity...At the present time [1996] the NSA has nanotechnology computers that are 15 years ahead of present computer technology...All equipment hidden, all technology secret, all scientific research unreported (as in electronic warfare research). (**Akwei, Evidentiary Document**)

pers and documents...row upon row of (largely unpublished) reports of military experiments...described military adaptations of psychological research that went far beyond anything I had until then conceived.

...during the past twenty years and with hardly anyone in the outside world noticing, the military uses of psychology had come of age....Everything you could think of...had been investigated in remorseless detail and the relevant psychological research drained of any military application it might have. (**Ibid, pp. 14-15**)

He noticed that this research was all very hush-hush:

...studies...have been —either secret or, if not actually classified, circulated only among a relatively small handful of specialists. The closed-world nature of this branch of science has both determined its unique character and prevented a wider discussion of the various issues—scientific, military, political and ethical—which are raised by many of the studies. (**Ibid., p. 23**)

Watson found a surprising number of "institutes" that specialized in research in military psychology. There were a total of 146 in the eight countries he visited. The United States had 130 of them. Of those, 80 were inside the military. Others were in universities, specialist hospitals, private research institutes, and think tanks:

You will not find any details of them in the profes-



sional psychological journals...On the official surface...military psychology appears to be a small and not very enterprising aspect of the science. The extent to which this belies the true picture, however, can be seen from the fact that the research for this book has unearthed many organizations around the world sponsoring no less than 7500 studies...Clearly, military psychology is now an enormous field. But—equally clearly—it is closed to most of us. No one can know, of course, just how much secrecy there is... (Ibid., p. 26)

Watson reasoned that the fragmented nature of military psychology—so many institutes, most of small size—was a policy designed deliberately to maintain secrecy. He noticed the striking isolation of military psychologists from their civilian peers, and the civilians’ inability to access military research. He listed the classified categories of military psychology. He found 25 current studies in the category called “Use of hypnosis in intelligence and related

military subjects.” He said it was one of the “chief areas of classified study.” (Ibid, p. 31)

He quoted research that analyzed the “military mind”:

...more authoritarian than most, more conservative, more bureaucratic and likely to have a more negative view of human nature—to assume that people tend naturally to be selfish, aggressive, untruthful...more pragmatic. (Ibid, p. 443)

How would a pragmatic military mind react if a research breakthrough in mind-control technology appeared? Watson noted another tendency of the military mind: “...the ability to do something almost invariably means that an attempt will be made to actually do it.” (Ibid., p. 278)



Mind-Control Research: Goals and Methods

Terminal Experiments



Mind-Control Research Goals



Personality Restructuring

In working on this book I have had to come to terms with my own emotions—disbelief, bewilderment, disgust, and anger and, more than once in the early stages, a feeling that the subject was simply too evil to cope with. Nothing I had researched before could have prepared me...

- Gordon Thomas, *Journey into Madness*, p. 8

In a stream of memos during the 1950s, the CIA laid out an ambitious array of mind-control research goals. Even unlikely-sounding paths of inquiry were eventually

crafted into operational technologies by throwing enough time, money, and brain power into the process.

Terminal Experiments

[They wanted]...reliable results relevant to operations. In documents and conversation, Allen and his coworkers called such realistic tests “terminal experiments”—terminal in the sense that the experiment would be carried through to completion. It would not end when the subject felt like going home or when he or his best interest was about to be harmed....By definition, terminal experiments went beyond conventional ethical and legal limits.

John Marks, *The Search for the Manchurian Candidate*, p. 32

When Morse Allen was directing BLUEBIRD (the first CIA hypnosis project), he first performed hypnosis experiments on agency secretaries and office staff. Soon, however, he needed subjects with whom the CIA could take more risks.

Hypnosis sceptics, for years, had been rebuking experimenters in the field of **antisocial hypnosis**. The sceptics said that experiments proved nothing when the volunteers had knowingly agreed to participate. They argued that those subjects were unconsciously confident that their professor, or boss, or officer was not really going to hurt them or make them do something wrong. Morse Allen agreed. He wanted to test subjects for whom the stakes were completely real—even to the point of life or death.

For how could researchers learn to make permanent changes in the way a person's brain works without making permanent changes in the way the experimental subject's brain works? How could they research techniques that might—or would—cause brain damage? Or death? To solve this dilemma, a dual policy for secret government experimentation developed: a classic double standard.

For such subjects, called **terminal subjects**, all risks were permissible, even long-term changes in personality, even risks to life and sanity. And all those risks could be taken without the subject's pre-knowledge or permission. Because asking permission or providing pre-knowledge could negate the experiment.

For persons in the research bureaucracy and experimenters, however, no risk was acceptable. These morally questionable terminal experiments were labeled "top secret," deliberately keeping the information and results from the public. The top secret label was also a "license to kill" for research bureaucrats and technicians, absolving them of accountability for their actions.

Morse Allen approved the use of **terminal experiments** in 1950. From then on, subjects were entrapped, used, and permanently changed by CIA experimentation. They were discarded when the experimenter had no more use for them. The CIA, however, still felt that a frustrating atmosphere of moral inhibition was impeding their research. A 1950 memo said:

We shall continually strive to attain more knowledge and better techniques. In the meantime, my general feeling is that because we have accomplished things which seem almost impossible, the authorities concerned almost believe that nothing is impossible. As you know, there are definite limitations, especially since we are so greatly handicapped by popular and official prejudice

against some of our methods. (quoted in Schefflin & Opton, p. 114)

The CIA began researching brainwashing techniques in 1953,

*...the very year that the United States government signed the Nuremberg Code that prohibits human experimentation on captive populations, such as prisoners, or anybody else for that matter, unless the person is fully informed on the nature of the experiment and freely gives his or her consent. (Chavkin, *The Mind Stealers*)*

Wolff, a CIA brainwash researcher, told his superiors:

Where any of the studies involve potential harm to the subject, we expect the Agency to make available suitable subjects and a proper place for the performance of necessary experiments. (quoted in Weinstein, 1988, p. 133)

The CIA's last policy restraints on terminal experiments vanished in 1954. That was the year a Russian defector, Vladimir Petrov, revealed that the May 1951 disappearance of two British intelligence agents had been staged by the KGB because it knew that the two (who were double agents also working for the KGB) were suspected and were under investigation by superiors. A very disturbed U.S. Joint Chief's officer wrote:

It would appear that very nearly all U.S./U.K. high-level planning information prior to 25 May 1951...must be considered compromised.... (Martin, p. 61)

President Eisenhower instructed Lieutenant General James Doolittle to make recommendations for improved CIA operations to prevent another such Soviet intelligence coup in the future. Sixty days later, Doolittle turned in recommendations to pursue

...“every possible scientific and technical avenue of approach to the intelligence problem”...he urged the CIA to become “more ruthless” than the KGB. “If the United States is to survive, long-standing American concepts of ‘fair play’ must be reconsidered...We must learn to subvert, sabotage and destroy our enemies by more clever, more sophisticated and more effective methods than those used against us.” (Martin, p. 62)

Doolittle's recommendations were followed. In



1959, a hypnotist, writing of “hypnosis in war,” said: “It is relevant to note that an individual who was concerned with this type of work described it as ‘unethical’ and a ‘dirty mess.’” (Marcuse, *Hypnosis: Fact and Fiction*, p. 204).

In that same decade, Alden Sears ran a University of Denver study for MKULTRA, using students as hypnotic subjects. He researched the “building blocks” that make an **unknowing hypnotic subject**: “Could a hypnotist induce a totally separate personality? Could a subject be sent on missions he would not remember unless cued by the hypnotist?” In 1957, Sears wrote that the next experiments, on methods “to build second identities [artificial personality splitting]...could not be handled in the University situation.” (John Marks, 1979, pp. 186-7)

Sears refused to participate in that ugly second generation of experiments. He became a minister instead. Afterwards, he would never talk about the hypnosis experiments he had done.

Where Terminal Research Was Done

In the 60s, MKULTRA directors kicked mind-control experimentation into high gear. Their investigations had three experimental levels: 1) basic research, 2) clinical testing, and 3) testing in operational situations. Richard Helms was “the driving force behind this.” (Weinstein, p. 129). Various chunks of research were

...conducted at industrial facilities, academic centers, hospitals, government research sites and state and federal correctional and mental health institutions...MKULTRA's funding bypassed normal channels...its full scope was known to only a handful of people. (Schefflin and Opton, p. 132)

Fifteen penal, or mental, institutions were used by the CIA for secret research on their inmates. The Addiction Research Center of the U.S. Public Health Service Hospital, Lexington, Kentucky, was one such institution. The Federal Narcotics Bureau, the Food and Drug Administration, and possibly certain defense contractors, were also involved in mind experiments.

For example, in one typical LSD experiment, the CIA enlisted the aid of the Navy and also that of the National Institutes of Mental Health (NIMH). Both served as false-front conduits for CIA money. A typical CIA document states that the directors of NIMH and the National Institutes of Health fully recognized the CIA's “interest” and had offered the Agency “full support and protection.” (Lee and Schlain, p. 24)

CIA mind-control researchers also worked, and

were based, in educational institutions. They involved “at least 185 scientists and some eighty institutions: prisons, pharmaceutical companies, hospitals, and forty-four medical colleges and universities” in this type of study. (Chavkin, p. 12) Those facilities were

...all over the United States, at the great research centers like Boston Psychopathic, the University of Illinois Medical School, Mount Sinai, Columbia University, the University of Oklahoma, the Addiction Research Center at Lexington, Kentucky, the University of Chicago, and the University of Rochester, and still other centers, researchers had begun projects funded by the Agency through intermediaries. (Thomas, pp. 156-157)

Ivy League colleges, especially, became centers for defense and CIA contracts. At Harvard, “students and professors had for years served as guinea pigs for CIA- and military-funded” experiments (Lee and Schlain, p. 73). A professor later recalled that

Princeton was crawling with agents. They came courting everyone. It was obvious. They would give us whatever we wanted...We realized we were being recruited, but at that time we were flattered that such a prestigious government agency was interested in us. (*Ibid.*, footnote, p. 46)

In New York, MKULTRA researched in a very different social atmosphere—a **safehouse** disguised as a brothel. Although listed under the Federal Bureau of Narcotics, the safehouses were actually managed and funded by the CIA. George White organized the first one in a Greenwich Village apartment. He equipped it with a stable of prostitutes. He observed their interactions with customers through a special two-way glass, which functioned as a mirror on the brothel side and as a clear observation glass on the researcher's side.

The CIA was studying the use of “lovemaking” for espionage purposes and analyzing the sexual behavior of johns—especially of certain targeted individuals. White also tested experimental drugs, administered by experimental covert means, to the unknowing patrons. In 1955, White was transferred to San Francisco where he set up two more safehouses doing similar experiments. The safehouse experiments went on into the 60s.

After retiring, White wrote in a personal letter:

I was a very minor missionary, actually a heretic, but I toiled wholeheartedly in the vineyards because it was fun, fun, fun. Where else could a red-

blooded American boy lie, kill, cheat, steal, rape, and pillage with the sanction and blessing of the All-Highest? (quoted in John Marks, 1979, p. 101)¹

Cameron's Patients

Cameron's patients are the best-known individual victims of CIA-supported mind-control experiments. The patients and their presenting symptoms when they arrived at Dr. Cameron's office at McGill University in Canada for psychiatric help were not unusual: unhappy wife, middle-aged businessman with a holocaust flashback, hypochondria, arthritis, and menopause. Once they fell into Cameron's trap, however, they became humanoid white rats expended in extreme, ruthless, and brain-damaging experiments on mind control.²

tom choking sensation. After years of Cameron's bizarre, destructive experimentation, Weinstein acquired severe mental damage. His son, Harvey, grew up and became a psychiatrist out of a burning need to understand what happened to his father's mind.³

Why did Cameron entrap normal people (with minor problems) to use in his experiments? He did that because both brainwashing and hypnoprogramming work best on normal persons. Dr. Sargant, an English psychiatrist, expert on brainwashing, and a personal friend of both Dr. Cameron and CIA Director Dulles explained:

...the really crucial point which the whole history of hypnotism demonstrates is that the people most



Cameron was working on a new mind-control technique. One patient, Mr. Weinstein, was a middle-aged Canadian businessman who owned a prosperous clothing manufacturing company. Weinstein made the mistake of asking Cameron for help to overcome an occasional phan-

susceptible to hypnotic states are normal people. Hypnotism has never been very successful in treating the severely mentally ill...Many normal people, on the other hand, become hysterical un-

1. By "All-Highest," did George White mean the CIA Director? Or his MKULTRA project director? Or the National Security Council? Definitely, he did not mean God. Here we have "situational ethics" stated blatantly.

2. *In The Sleep Room: The Story of the CIA Brainwashing Experiments in Canada* by Anne Collins is the most painstakingly documented history of the Cameron/CIA connection and the personal stories of Cameron's victims.

3. The son, Dr. Harvey Weinstein, told the story of his father's life and his own search for the truth about what happened to his father in a heartbreaking book originally titled *A Father, A Son, and the CIA*, then *Psychiatry and the CIA: Victims of Mind Control*.



der stress, and, when they do, they become amenable to hypnotism and to techniques which depend on the same brain mechanisms.

*It is not the mentally ill but ordinary normal people who are most susceptible... (Sargant, *The Mind Possessed*, p. 31)*

The people most susceptible to brainchanging are stressed, normal people. So, Cameron captured normal people for his experiments. They did not stay normal. They became stressed. Funded, in part, by the Society for the Investigation of Human Ecology, he experimented with conditioning (building unconscious reflex habits), hypnosis (using a Sodium Amytal induction), other drugs, electroshock, and psychic driving. He analyzed the three stages of electroshock amnesia. He studied the retroactive amnesia for recent events which electroshockings can cause.

Cameron worked on two major CIA goals. One was the creation of irresistibly powerful remembering. His technique was forced listening to a short, taped message played over and over. He called that **psychic driving**. The other goal was its opposite: the causing of irresistibly powerful forgetting. Cameron's method to accomplish that was a large amount of electroshock. The amount was called **regressive** because subjects lost their bladder control.

Medical Ethics

Henry K. Beecher, a medical ethicist studying publicly available statistics, was astonished and disturbed by the steady increase, after World War II, in experimentation on unknowing subjects:

...they would not have been available if they had been truly aware of the uses that would be made of them...many of the patients in the examples to follow never had the risk satisfactorily explained to them, and it seems obvious that further hundreds have not known that they were the subjects of an experiment although grave consequences have

been suffered as a direct result of experiments... There is a belief prevalent in some sophisticated circles that attention to these matters would "block progress." But, according to Pope Pius XII, "...science is not the highest value to which all other orders of values... should be submitted." (Beecher "Ethics and Clinical Research,"

CIA Settles with Canadian Nine

In the spring of 1988, the CIA was on the brink of going to court because of a years-long lawsuit against it. The lawsuit was filed by Dr. Ewen Cameron's nine surviving mind-control research subjects. The Canadian government had already made compensatory payments to them, acknowledging its role in looking the other way and allowing them to be used in U.S. research. The now elderly Canadians were represented by a pair of Washington, D.C. lawyers, Turner and Rauh. The U.S. Justice Department was defending the CIA: "not guilty."

Abruptly, the Justice Department made the Canadians a cash offer. The U.S. would pay \$750,000 total to the nine survivors if they would drop their case with a) no admission of guilt from the CIA, b) no trial, and c) their agreement never to publicly discuss the matter again.

They agreed, got the money, and never gave another interview. The CIA avoided a prolonged court battle which would have resulted in glaring publicity and the possible coming forward of more victims of their mind-control research, or more revelations about those experiments. The Company also avoided being found guilty, for the paper trail in this case was wide and clear indeed.

1966)

Beecher said that ethical errors were increasing not only in numbers, but also in variety. Above all, he was dismayed by the ballooning government budget for research on human beings.

Since World War II the annual expenditure for research (in large part on man)...in the Massachusetts General Hospital has increased a remarkable 17-fold. At the National Institutes of Health, the increase has been a gigantic 624-fold...Medical schools and university hospitals are increasingly dominated by investigators. (Ibid.)

That was just NIH funding. What would the numbers have looked like to Beecher if military, thinktank, NIMH, CIA, and NSA fundings for human research were added in?

What exactly were they doing to all those people?

Mind-Control Research Goals

Can we get control of an individual to the point where he will do our bidding against his will and even against such fundamental laws of nature such as self-preservation?

1952 ARTICHOKE memo, quoted in Chavkin, p. 13

In 1950, the CIA's BLUEBIRD program began to target specific hypnotism goals. At first, the research goals were all defensive: to identify disloyal persons, establish a defector's legitimacy, make CIA agents able to resist hostile interrogation, and strengthen interrogation methods used on captured enemies. The list of goals soon changed, however, to include offensive uses of hypnosis. Hypnotism would make it

...possible to brief a prisoner or other individual, subsequently dispatch him on a mission and successfully debrief him on his return without his recollection of the whole proceeding. (CIA memo, "Defense Against Soviet Medical Interrogation and Espionage Techniques," quoted in Schefflin & Opton, p. 114)

They also targeted the basic goal of getting absolute control, in absolute secrecy, over another person. The victim would become an unknowing hypno-puppet who would obey any command:

The support program will consist of both fundamental and applied research studying all means through which control of an individual may be attained. (CIA memo quoted in Schefflin & Opton, p. 116)

They preferred the method of disguised hypnotic induction over nondisguised. Disguised induction would help achieve an

...absence of resistance and counter-control: ideally, the technique will be so elegant, so smooth, that the manipulated will not suspect, let alone object, that someone or something is trying to shape their behavior. (Schrag, Mind Control, p. 10)

One author wrote of a military scenario in which hypnosis is used

...to obtain the services of an apprehended spy, obtain all the knowledge he might have by use of an involuntary technic and send him back out as a double agent. (Teitlebaum, Hypnosis Induction Technics, p. 172)

In 1960, the CIA's Technology and Science Director, who was in charge of operational experiments in hypnosis, began an aggressive, new, enlarged program which he called "field experimentation" in the "counterintelligence program." There were

...three goals: (1) to induce hypnosis very rapidly in unwitting subjects; (2) to create durable amnesia; and (3) to implant durable and operationally useful posthypnotic suggestion. (John Marks, 1979, p. 189).

An outline of ARTICHOKE research targets listed further goals in the hypnosis area: development of techniques for disguised induction, hypnotic memory training, and sealing.

Disguised Induction

They were "investigating the possibility of obtaining control of an individual by application of special interrogation techniques" (Schefflin & Opton, p. 116). "Special interrogation techniques" was a euphemism for methods of disguised induction. The ARTICHOKE research program subdivided that research into experiments on how to cause an unknowing person to become hypnotized using polygraphs, drugs, hypnosis, subconscious isolation, or electroshock.

Hypnotic Memory Training

They called hypnotic memory training **memory enhancement**. Hypnosis definitely improves memory. If a person's memory is good to start with, hypnosis makes it even better. Hypnotic memory training had at least two intelligence and military applications: a) couriers bearing unconsciously remembered messages and b) subjects used as human tape recorders where no mechanical recording of speech was possible or permitted. In 1962, a research hypnotist issued a lyric call to use hypnosis to

...produce synthetic genius, emergent genius...in ordinary mortals...phenomenal memory...we are convinced that synthetic genius lies within the grasp of the human, but it will take long and patient research to activate this dream. (Wright, in Estabrooks, Ed., Hypnosis: Current Problems, p. 235)

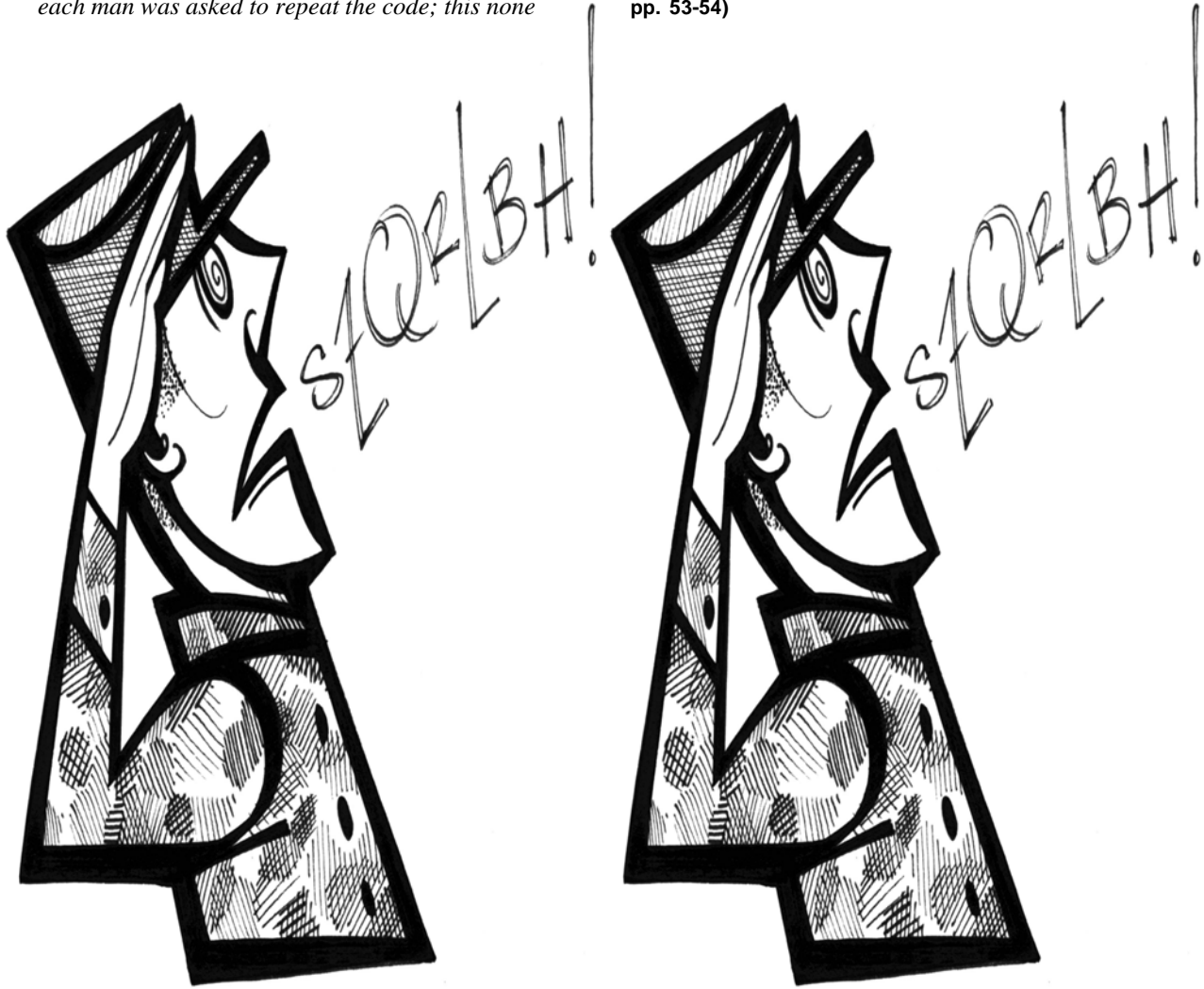


Dr. Gindes studied rote memory in hypnotized persons for the Army.

...five soldiers were hypnotized...and given a jumbled "code" ...they were allowed sixty seconds to commit the list to memory. In the waking state, each man was asked to repeat the code; this none

of them could do...During rehypnotization, they were individually able to recall the exact content of the code message. (Gindes, pp. 33-34)

The men had learned to spell "ordinary" as "sqlcnrbc," "tendency" as "tmslnfsk," and so on. (Gindes, pp. 53-54)



Hypnocouriers

In 1500 B.C., the Egyptians were using a hypnocourier system. Programmed virgins served the Pharaoh as royal "message bearers from the gods." The women were sent under military escort to distant dignitaries who knew the cue which would unlock the messenger's lips and release the consciously unknown secret message locked in her unconscious. At journey's end, when presented to the dignitary and cued, the words of her message would miraculously form themselves at her lips and speak themselves. She had no conscious knowledge from where those words came. She had no foreknowledge what words it was that her mouth would speak.

Modern hypnocouriers are described in a 1963 text on clinical and experimental hypnosis:

*Hypnosis is assuming an ever-increasing role in the psychological aspects of warfare. For instance, a good subject can be hypnotized to deliver secret information. The memory of this message could be covered by an artificially induced amnesia. In the event that he should be captured, he naturally could not remember that he had ever been given the message. He would not remember the message. However, since he had been given a posthypnotic suggestion, the message would be subject to recall through a specific cue, this having been given to him in the form of a posthypnotic suggestion. (William Kroger, *Clinical and Experimental Hypnosis in Medicine, Psychology, and Dentistry*, p. 299)*

The basic system was to read or tell a message to a hypnotized subject, who then was instructed to remember the message and speak it on cue. It could be long and complicated. The courier did not consciously know the message, or even the fact that he carried a message. The message's intended recipient, who knew the cue, would speak or act it out when ready. After perceiving that cue, the courier would go into a posthypnotic trance and speak the message—like a human tape recorder on “play.” A supplementary hypnotic suggestion could cause the courier to be amnesic for the meaning of the words he was speaking. (Bowart, in *Operation Often*, reported the case of a military man trained in this way.)

Estabrooks promoted the use of consciously unknowing hypno-messengers by government agencies:

If one expert can build up a code, another can break it down...a code must be printed somewhere...And human nature is weak. With hypnotism we can be sure of our private messenger. We hypnotize our man in, say, Washington...give him the message. That message, may we add, can be both long and intricate. An intelligent individual can memorize a whole book if necessary. Then we start him out for Australia by plane with the instructions that no one can hypnotize him...except Colonel Brown in Melbourne...It is useless to intercept this messenger. He has no documents and no amount of “third degreeing” can extract the information, for the information is not in the conscious mind to extract... (Hypnotism, 1944 edition, pp. 210-211)

Sealing

An early CIA memo described **sealing** as “establishing defensive means for preventing hostile control.” In civilian language it means that sealing the programmed mind blocks it from attempts by other hypnotists to put that person into trance. Sealing was another CIA hypnoprogramming goal:

Can we prevent any unauthorized source or enemy from gaining control of the future activities (physical and mental) of agency personnel (or persons of interest to this agency) by any known means? (CIA memo quoted in Schefflin & Opton, pp. 116-117)

The usual method of sealing was, and is, simply a

hypnotic suggestion that the subject cannot be hypnotized by any unauthorized person.

1950s CIA HYPNOGOALS, AND PROBABLE OUTCOMES

In a chapter called “Tampering with the Mind: I,” Schefflin and Opton included a long list of hypnoprogramming goals obtained from a CIA memo written in the 1950s. Here are thirteen of those goals, and my opinion of their probable research outcomes:

(1) Identify Hypnotically Susceptible Personality—The CIA wanted to know “the types of personalities which could or could not be controlled.” Since the 1950s, many studies, both military and nonmilitary, have sought ways to covertly recognize hypnotizability. Some systems are based on personality and behavior traits. A hysteric is always a good hypnotic subject. Compulsives are the hardest personality type to either hypnotize or to control by hypnosis, because they are going to be, and do, what they are going to be and do. Psychotics are categorically considered impossible to hypnotize, but there have been exceptions.

In some research, women were easier to hypnotize than men, but only by a small percentage. In both sexes, the higher the IQ, the greater the hypnotic susceptibility. In one study, bright female introverts were most susceptible. Extroverts forget more over time than introverts, but they are better at retrieving information from deeply buried memory, especially if it's relatively inaccessible. Introverts are more affected by punishment, extroverts by reward.

That data could be interpreted to make introverts preferred candidates for hypnoprogramming. They have better memory for unconscious instructions, less ability to recover repressed memory, and are more controllable by suggested suffering.

More formal evaluations of hypnotizability are derived from Rorschach or TAT tests and from brainwave patterns (more alpha indicates more susceptibility). If the subject had an imaginary playmate in childhood, that also indicates susceptibility.¹

1. See Section IV, “Susceptibility,” for more markers.



(2) Which Mind Control Method for Each Personality—

The CIA list included the goal of knowing “the methods which would or would not work on those personality types.” Therefore, they studied every conceivable induction method: open or disguised. That included study of hypnotic induction hardware of every sort, including instruments for electronic induction by brainwave manipulation and post-electroshock induction. They studied the inductive effects of fatigue and stress, visualization, relaxation, narcohypnosis, repetition, disorientation, sensory deprivation, extrasensory (mind-to-mind, psychic) induction, and combinations of those. (Research knowledge in these areas is covered in Part IV of this book.)

(3) Time Needed to Establish Mind Control?

The CIA wanted to know “the amount of time needed for ‘alteration of personality’ with each technique.” How much time does the operator need to take control of a subject’s mind? Using verbal techniques only? Using narcohypnosis? Electroshock? How long is it from the beginning of the process to the end—when the subject emerges as a controlled person, totally amnesic for all time spent under hypnosis?

Candy and Palle were trained for years. Estabrooks said that the essentials could be accomplished in ten days, but he recommended ten months for complete training. Bowart’s military interviewees and the Operation Often subject reported that their operators spent six to eight weeks setting up basic programming, including their final electroshock series to reinforce amnesia.

(4) Is the Conditioning Permanent?—The CIA also listed the goal of learning “the duration of the change.” Would the personality splitting and hypnoprogramming be permanent? In most cases, it would. However, time could have some weakening effect. Unconscious knowledge of safe distance or isolation from the operator can be even more helpful to a subject who unconsciously wants to escape and heal. If a victim becomes consciously aware that this technology exists, he may realize his situation, stop making excuses for the hypnotist, and start wresting his mind FREE.

(5) Can the Conditioning Be Reversed?—Early CIA euphemisms for hypnoprogramming were “brain changing” and “personality restructuring.” The hypnoprogramming technology indeed could profoundly change a subject’s personality. This

goal on the list asked about “the ability to restore the original personality.” In plain English, the question was: Could anybody undo their hypnoprogramming (conditioning)?

If the subject can get himself out of reach of all induction cues, and if he can avoid triggering any pre-existing check-in cues, his operator cannot reinforce old conditioning and cannot lay on new conditioning. In the absence of reinforcement, time may gradually loosen the hold of unwelcome conditioning. If that subject-in-hiding obtains the help of a skilled trance manipulator, more of the damage can be undone. Some—or all—of the old conditioning suggestions can be reversed. How much is reversed depends on how deep the changes were etched in the subject’s brain, how much time and effort is spent on the healing process, if the subject has a safe place to hide from the hypnotist while healing, and if the healer has a clear understanding of this technology. (But then the subject will be in rapport with the new helper. This may or may not be a problem, depending...)

Humpty-Dumpty is easier to break than to put back together. And when Humpty-Dumpty is back together, he will not look exactly like the egg he was because the experience of being hypnoprogrammed and then overcoming it is going to deeply affect that personality. Some amnesia can be overcome, however. Perhaps old induction cues can be blocked. (Or the subject can live in hiding from those cues.) The best case scenario probably will result in a sadder-but-wiser, more comfortable, more functional, and somewhat reintegrated, personality who is relatively safe from the abusive former operator. (See Part V, therapy topics, for more on this.)

(6) What Could Go Wrong During the Conditioning?—The CIA wanted to know “the adverse side effects” of conditioning. The answer is that subjects may die if given a miscalculated dose of narcohypnotic drug. Some may be pushed into psychosis, temporarily, or permanently. Some may develop long-term neurotic symptoms reflecting unwholesome hypnotic repressions: rationalizations, hypochondria, phobias, compulsions, nightmares, etc. Some may have their body, relationships, or life damaged by thoughtless, or abusive, suggestions.

In general, the more stable the person is to start with, the more effectively their programming will implant, the better their unconscious will com-

pensate for unconscious burdens with defense mechanisms, and the better their cover personality will function.¹

(7) How Complete Will the Control Be?—The CIA wanted to know “the extent to which the new personality could be controlled.” They learned that a mind-controlled person makes a better patsy than assassin because the unconscious retains some capacity to influence outcomes and sidestep the most unthinkable commands. For example, Zebediah shot his elbow instead of his hand. Mrs. E. tended to fail at murder and suicide instructions. Candy obeyed all the preceding orders, but she converted her suicide instruction into a break for freedom.

Nevertheless, obedience potential caused by hypnoprogramming is far greater than is generally recognized by the public. The assertion that “you can’t be made to do anything under hypnosis that you don’t want to” is FALSE. Great effort was made to train a subject to give reflexive responses, to be totally unconscious, mechanical, automatic, and absolute in obedience. With ruthless training, involving techniques from the physical methods of psychiatry, a close approximation of robotic response was possible—including some criminal and self-destructive actions.²

(8) Complex Conduct Be Hypnocontrolled?—The CIA wanted evidence as to “the complexity of the conduct which could be commanded of the controlled personality.” Research described in psychiatric case studies, and other research reports, makes it clear that direct commands (“suggestions”), indirect commands, and specific commands are all possible. So, also, are complex commands such as: “join it, believe in it, participate in it, but be unconsciously loyal to us and report back weekly.”

Any variety of neurosis or psychosis can be suggested under hypnosis. The resulting performance can fool even an expert. A love attachment can be suggested (Nielsen caused Palle to love Bente). A loving relationship can also be terribly harmed by hypnotic suggestion. A subject could be caused to not pay bills, sending all surplus money to one or more designated persons instead.

(9) Are Personality Changes Caused by Hypnotic Suggestion Detectable?—The CIA list targeted research into “changes in attitude of the person whose personality had been altered.” Would the victim’s family realize what had happened to their loved one? Would the neighbors catch on? The answer is that changes may be observable, but they are unlikely to be correctly interpreted unless observers understand that unethical hypnosis is possible and how it works.

(10) Can Preconditioning Be Detected?—The CIA listed “the ability to detect preconditioning and to determine the method used and the purpose to be accomplished by the conditioning” as a goal. **Preconditioning** has two meanings. It is, technically, the first stage of hypnosis, the period during which a subject becomes willing to be hypnotized by an operator, but has not yet been hypnotized.

The other meaning of “preconditioning” is probably the one which the CIA had in mind, however. This goal sought a method to detect if a person of interest to them was already somebody’s unknowing hypnotic subject—a previously conditioned (“preconditioned”) subject.³ They wanted not only to be able to identify that preconditioning, but also to be able to detect the operator’s method of conditioning the subject—and the operator’s motive for that preconditioning.

The method could be tough to find out. Only the subject’s unconscious knows, and his sealing would have to be broken to access that information. If the subject doesn’t know his operator’s motive, consciously or unconsciously, there is no way to find out—unless the CIA also has physical custody of the subject’s operator, and probes his mind.

(11) Can a Preconditioned Subject Be Re-programmed?—The CIA listed “the ability to **recondition** a preconditioned person” as a research goal. If a person of interest to them was already somebody’s hypnotic subject, could they undo (“recondition”) his previous programming, and then implant their own? Or simply implant their own and make it dominant over the previous programming? Since it was on their list, the CIA probably did try

1. A **cover personality** is the “new personality,” the conscious self, which is unaware of the conditioning period or of its second, secret hypnotic life.

2. The CIA had a project “designed to turn people into programmed assassins who would kill on automatic command.” (Lee and Schlain, *Acid Dreams*, xx)

3. See Part V for methods to identify a victim of unethical hypnosis.



reconditioning and probably came up with some answers. I don't know what those might be, but I feel sorry for their victims.

(12) Can We Reprogram a Reprogrammed Hypnoprogrammed Person?

—The CIA put “the possibilities of multiple conditioning” of an agent on their research list. If a hypnoprogrammed enemy agent was captured by the CIA, could he be reprogrammed into a double agent? If a hypnoprogrammed CIA agent was apprehended by the enemy and reprogrammed by the enemy to be their own agent, could the CIA then **reprogram** that person back to being loyal to them? In the case of a double agent, the original operator would imagine that he still had an effective agent, when actually another **unconscious isolate** of the poor victim's unconscious mind reports to yet another master, without either the subject's conscious mind, or the original hypnotic operator knowing it.

I suppose the CIA carried out this experiment, too. I feel great sorrow and sympathy for the subjects who suffered such mental abuse. The reprogramming of a reprogrammed subject who was hypnoprogrammed before is an even more horrific concept.

Reprogramming could also be applied to somebody, who was originally programmed by the agency, and then managed to (partially or entirely) deprogram themselves. The reconditioning would, theoretically, restore the unconscious automatism

of a balking subject. I also pity any victim who went through a first conditioning, got free, and then was subjected to yet another (probably far more brutal) conditioning period in order to enslave him again.

However, “reprogramming” is a mechanical concept. NO HUMAN IS TRULY A MACHINE. A living brain accumulates data, changes and adapts. It can develop an intense dislike for the condition of mind-slavery—even, or especially, at the unconscious level. It may look for loopholes in its programming which will support that person's survivability by enhancing his freedom. It may even find ways to avoid, even defy, the master.

(13) **Perfect Amnesia?**—The CIA also listed “the ability to induce states of amnesia so that the conditioned person is unaware of the conditioning” as a research goal. Posthypnotic amnesia is the foundation of all the previous scenarios. The person who knows what happened will take measures to protect himself from another hit. The CIA and the military wanted dependable ways to cause effective amnesia which would conceal the hypnotic conditioning—and all future episodes of hypnotic suggestion—from the subject's conscious mind.

The verbal (left) hemisphere can be silenced or made to lie. But, short of brain damage, the imaging (right) brain is very hard to silence. **Projective techniques** that involve imagery are likely to reveal the truth.

Personality Restructuring

...the day has come when we can combine sensory deprivation with drugs, hypnosis and astute manipulation of rewards and punishment to gain almost absolute control over an individual's behavior...a very rapid and highly effective type of positive brainwashing that would allow us to make dramatic changes in a person's behavior and personality...[in] a few months—or perhaps even less than that...

The techniques of behavioral control make even the hydrogen bomb look like a child's toy, and, of course, they can be used for good or evil. But we can no more prevent the development of this new psychological methodology than we could have prevented the development of atomic energy...

McConnell, *Psychology Today*, April 1970

When James V. McConnell announced the new method of **positive brainwashing** in the article quoted above, he was a famous Michigan behaviorist. In the early 1970s, he trained flatworms by electric shocks to prefer the lighted tunnel to the dark one. He edited and published both *The*

Journal of Biological Psychology and the *Worm Runner's Digest*, a radical behaviorist periodical. If anybody outside the Company knew what happened when you put all the MKULTRA research together and applied it with the goal of **personality restructuring** to a single subject, it would

be McConnell. In that article, he urged readers to adopt

...a revolutionary viewpoint toward society and its problems. Today's behavioral psychologists are the architects and engineers of the Brave New World... (Ibid., p. 74)

He suggested temporary incarceration for antisocial persons while they were being “cured” by means of this new technology. The subject would be housed in a “rehabilitation center” while experts “restructure his entire personality.” McConnell argued:

No one owns his own personality. Your ego, or individuality, was forced on you by your genetic constitution and by the society into which you were born. You had no say about what kind of personality you acquired, and there's no reason to believe you should have the right to refuse to acquire a new personality if your old one is anti-social... (Ibid.)

His words set off a furor. Who would have the right to define “antisocial”? How would they define it? (Was it “antisocial” of me to write and publish this book?) People asked for more information which McConnell declined to provide. Instead, he expressed regret for saying what he had said. He never again discussed the technology of “positive brainwashing.”

Related CIA and psychiatric research, however, provides further insight.

Research Personality Restructuring

The CIA used language derived from research on artificial neurosis to describe the creation of an unknowing hypnotic subject—often with a new opinion, behavior, or loyalty. Sometimes they called it **giving somebody a new personality**; sometimes it was called **personality restructuring**. Whatever its name, the process could, they hoped, covertly and permanently change a subject's beliefs and behaviors. (If they became an unknowing hypnorobot in the process, that would not be seen as a problem.)

In the 50s and 60s, U.S. brainwash specialists studied the phenomenon of Christian conversion, and also why some Americans turned Communist in Chinese POW camps. They contemplated the history of heiress Patricia Hearst who was kidnapped by revolutionaries, became a gun-shooting revolutionary, then was captured by police, and became a law-abiding heiress again. They studied how meat-eaters become vegetarians; and how vegetarians become meat-eaters, and so on.

They must have also wondered if restructuring the personality might secretly convert a Communist follower, or leader, into a staunch advocate of free elections, free enterprise, demilitarization, dismantling of the Russian empire, and economic integration of the Soviet areas with the U.S. and Europe. What an achievement it would be if an important political opponent could be covertly hypnotized and given a new personality—one that took orders from the CIA and had a Western political philosophy.

Hypnosis, voluntary or involuntary (drug or disguised induction), was the key to restructuring an old personality into a new one. After induction would come training for depth, obedience, and amnesia—and then the personality restructuring, the mental reprogramming.

Hypno-conversions

Dr. Cook, a University of Chicago professor, hypnotist, and author, described his process of hypno-transformation in a 1927 book. After he “treated” a daughter, whose father objected to her love for a “worthless suitor,” her feelings changed to “abhorrence.” (She then became infatuated with the hypnotist!)

In another case, a jealous Miss Edith thought her fiancée too attentive to a lovely cousin. She explained her problem to Dr. Cook, hired him, and together they hatched a plot. Edith then dared her fiancée to be hypnotized by Cook. The young man accepted her dare. Cook hypnotized him and gave a posthypnotic suggestion that he would visit the cousin and scold her severely for some imagined neglect until she became angry. After that, Miss Edith had no competition.

Cook freed an Iowa man of tobacco chewing:

...hypnotized him twelve times in four weeks. Before he left the city he was entirely cured of the tobacco habit, although he had no recollection of his experience while in the hypnotic state. (Cook, Practical Lessons in Hypnotism and Auto-suggestion, pp. 160-1)

A father, worried about his son's choice of companions, brought the young man to Cook's office. The son

...was willing...to test the power of hypnotism...and placed in the somnambulistic state. He was then told that it would be impossible for him to be induced to accompany his friends to any questionable places, and that whenever they met him he would treat them civilly, but would no longer make companions of them. Over and over again these suggestions were emphatically repeated to him before he was awakened, and this was repeated



daily for twelve days, during which time he had no communication with any of his companions, as his father had brought him quite a distance...

(Ibid., pp. 225-6)

Cook suggested amnesia to the son for all the implanted suggestions. He was “cured” and avoided those unwholesome companions in the future.

Like Cook, another hypnotist, Marcuse, reported changing a person’s convictions by hypnosis, obtaining a religious conversion. A “vehemently atheistic” subject lived in a boarding house. Marcuse enlisted one of his fellow boarders to report developments. The professor hypno-

tized the atheist in his office, read him a list of reasons for belief, and then suggested amnesia for the hypnosis. Marcuse soon exactly repeated the treatment. His dinner-table spy reported that other dining room guests were astonished at the sudden reversal of the subject’s opinions on religion. For the first time, he began to attend church services. **(Marcuse, *Hypnosis*, p. 228)**

Reprogramming by simple hypnosis is not a sure thing. If it were, there would be no failures in stop-smoking clinics (most of which use hypnosis). But, what if the subject is an artificially-created split personality who was programmed using narcohypnosis and other physical methods of psychiatry? That makes the outcome more predictable.

Physical Methods of Psychiatry

Narcohypnosis



Electroshock

[There were]... *CIA documents describing experiments in sensory deprivation, sleep teaching, ESP, subliminal projection, electronic brain stimulation...Another document mentioned “hypnotically-induced anxieties” and “induced pain as a form of physical and psychological control.”...Deadly chemicals were concocted for the sole purpose of inducing a heart attack or cancer without leaving a clue as to the actual source of the disease. CIA specialists also studied the effects of magnetic fields, ultrasonic vibrations, and other forms of radiant energy on the brain.*

Lee and Schlain, *Acid Dreams*, xx

After World War II, advocates of physical methods of psychiatry argued for “practical” (**physical**) therapies. They downgraded the “philosophical” approaches to healing, meaning the Freudian and Jungian methods.

The physical treatments offered, as of 1944, were narcohypnosis and drug abreaction sessions, electroshock, insulin shock, continuous sleep maintained by drugging, new vitamins, endocrine supplements, stimulants, anticonvulsants, and lobotomy. Advocates of physical psychiatry were hopeful that yet more and better electrical, chemical, and surgical treatments for the brain would soon be discovered.

The Rockefeller Foundation, CIA, National Institutes of Health, and others, lavishly funded that research. The following, 1950s, list of CIA mind-control research ar-

reas included physical methods of psychiatry and psychoanalytic methods:

- (a) *Psychosurgery.*
- (b) *Shock method:*
 - (1) *electrical*
 - (2) *drug: metrazol, cannabis indica, insulin, cocaine.*
- (c) *Psychoanalytic methods:*
 - (1) *psychoanalysis*
 - (2) *narcoanalysis and synthesis*
 - (3) *hypnoanalysis and synthesis.*
- (d) *Combinations of the foregoing.*



Other CIA documents from the 1950s list their goals in ultrasonics and “enhanced” polygraph techniques. For example, tests were done using an EEG as a polygraph. The question was “Do you masturbate?” Lobotomy was recommended in one document as a “solution” to neutralize a person “from a security point of view.” (Lee and Schlain) Another document discussed a covert procedure in which the operator used electroshock to cause anesthesia, then lobotomized the subject with an icepick¹

Amnesia Research

The CIA was always interested in methods to cause amnesia. July 15, 1953, after an employee who knew much sensitive information left the Agency, operations people told superiors in AR-TICHOKE that they needed a drug which would cause amnesia. The bosses replied that work was constantly in progress on causing predictable amnesias by a variety of means.

What predictably causes predictable amnesias? Repeated suggestions to not remember (taped or oral) given to a hypnotized person? Amnesia suggestions given to a narcohypnotized person? An electroshock series? Artificial personality splitting by means of an artificial neurosis? The answer is YES. To ALL of them. Those methods can be used singly—or in COMBINATION.

Hypnoprogramming Uses for Amnesia

Here follow reasons why amnesia is advantageous for a hypnoprogrammer:

- **Broken Feedback Circuit:**—Amnesia hides the problem from the subject’s conscious mind. If

a subject remembers being hypnotized and remembers being given the hypnotic suggestions, he may resist them. Amnesia, however, produces a person who does not know that he has been hypnotized and given suggestions. An amnesic person makes no effort to overcome hypnotic conditioning or to avoid contact from the hypnotist. He is not consciously aware that there is a problem.

- **Secret Will Rule**—An amnesic brain-programming overpowers a competing conscious willing. What is secret in your mind automatically overrules that which is not secret. The secret will rule.

- **One-Way Amnesia**—Both natural and artificial multiple personalities are usually **one-way amnesic**. That means that the original self, “A,” knows nothing about the split self, “B,” but B knows all about A. The knowing goes one way but not the other. B sees, hears, and knows all that A experiences. A, the original personality, neither sees, hears, nor knows what the split does during a **fugue**.² The split, however, is aware and critical of all the original personality’s acts, thoughts, and feelings.

For this reason, Arlene had all the information possessed by Candy, plus her own. However, until Arlene revolted and informed John (who enlightened Candy), Candy knew nothing about Arlene’s life. Candy’s mental access to what Arlene knew had been blocked by Dr. Jensen. Arlene referred to her own life as a split-off, hidden observer when she said, “...I’ll go along tomorrow. I’ll sit there and I’ll watch...Where she goes, I go.” (Bain, p. 99)

Amnesia suggestions given to a narcohypnotized person were an especially promising area for research and operations.



1. Lee and Schlain describe many more CIA records of goals, experiments, and activities in *Acid Dreams*, some even more horrific than these.

2. The period of time during which a dissociated personality split takes over, in an episode for which the original personality is amnesic, is called a **fugue**. A person may have one short fugue, or a series of them, or one long one, or any combination. Pierre Janet very narrowly defined “fugue” as an escape episode involving the dissociation (splitting off) of a set of ideas whose unity is based on a ruling emotion—such as fear. But modern writers use “fugue” to mean any time lapse or memory blackout.

Narcohypnosis

The question may be raised whether in narcohypnosis we are not dealing simply with sleep only instead of actual hypnosis. Anyone who has practiced narcohypnosis will have to answer this question in the negative, since the patients carry out suggestions and in every other way conduct themselves like deeply hypnotized subjects.

Schilder and Kauders, *Hypnosis*

Hyperventilation

Hyperventilation is a chemical induction technique. It can be a method of disguised induction. If you breathe as rapidly as possible (hyperventilation) for two to four minutes, you will have some degree of gaseous alkalosis. You will feel dizzy and confused. You will also be in a state of light trance. Changes in blood acidosis/alkalosis relate to changes in state of consciousness.

Hard, prolonged crying causes hyperventilation. (Hyperventilation induction is the key to Arthur Janov's Primal Therapy. Overbreathing lowers consciousness. In that state, a subject is encouraged to relive past traumas and to access and express deep emotion. You need a strong heart and lungs to undertake this stressful "scream" therapy.)

Barbiturates

Narcotic trance induction goes back to prehistory. Narcohypnosis began shortly after chemical anesthesia for surgery was discovered in 1846. Hypnotists experimented, testing to see if there were hypnotic effects associated with use of alcohol, ether, chloroform, scopolamine, and chlorpromazine. In the 1920s, Pavlov put dogs into a narcotic trance by injecting **barbiturate**. Again and again, doctors observed significant spontaneous hypnotic responses after barbiturate injection. The chemicals of choice for trance induction were eventually narrowed to two fast-acting barbiturates, oral or injected: Sodium Pentothal and Sodium Amytal (called "Evipan," in Europe). (I recently saw Trilene and Propofol also recommended for this use.)

Barbiturates are a class of **hypnoid chemicals** (chemical trance inducers). They have been around since the 1930s, widely used both as surgical anesthetics and hypnotics. Operating personnel must be careful what they say because their patients are in deep trance and are highly suggestible!

In 1936, Horsley began using Sodium Pentothal as a narcohypnotic entryway to repressed thoughts and emotions. His procedure was a rapid psychoanalysis done with a narcohypnotized subject. His 1943 book on that technique, *Narco-Analysis*, became a standard text on barbiturate use in hypnotherapy. During World War II, American and English doctors used narcohypnosis to treat combat-traumatized veterans.¹

Roy P. Grinker and John P. Spiegel published *War Neuroses in North Africa* in 1943, and *Special Report: Conference on Narcosis, Hypnosis, and War Neuroses*, in 1944.² Grinker and Spiegel published another book in 1945, *War Neuroses*. J.G. Watkins was an American who first researched hypnotic coercion as a military hypnotist. His 1949 book, *The Hypnotherapy of War Neuroses*, pioneered use of barbiturate drugging as a direct route to the unconscious in America.³

Police Use of Barbiturates—Police investigators at first called the barbiturates "truth serum." In the 1930s, they used them in interrogations or to elicit confessions. They gradually learned, however, that an operator could accidentally (or deliberately) suggest false guilt under those drugs because they enhanced suggestibility. Their popularity in police work then waned. Yet, as recently as 1979, B.L. Danto, who was both a doctor and a police officer, recommended "The Use of Brevital Sodium in Police Investigation" to overcome "unconscious resistance" and interrogate suspects. He argued that, whereas not everyone is susceptible to hypnotic induction, everybody is susceptible to Sodium Brevital.

Research on Narcohypnosis—During the Moscow show trials of 1937 and 1938, one by one, formerly strong, rational, and socially significant Communists (who had somehow gotten on Stalin's black list) humbly and publicly confessed to unlikely crimes. A European OSS agent, Allen Dulles, interviewed German chemical company executives after World War II. They believed the confessions were

1. The words **narcosynthesis**, **narcohypnosis**, and **narcoanalysis** all mean the same thing: Freudian analysis (or hypnotherapy) using drug induction and hypnotic training as the foundation of the therapy process.

2. Both of those Grinker and Spiegel books were funded by the Josiah Macy, Jr. Foundation (OSS funds conduit) and "privately" distributed.

3. I haven't read it. Estabrooks said the Watkins techniques "give us a picture of hypnotism that is weird and fascinating."



achieved by drug-hypnosis.

In 1942, Donovan formed a committee of psychiatrists and biochemists to investigate the drugs that might be used to extract data from an unwilling person. The Germans were also researching narcohypnotic technology. In 1944, the Gestapo in Hungary, aided by a Hungarian hypnotist named Volgyesi, used a drug-hypnosis combination to create a suggestible state, then interrogate and “prepare” people for trial.

In 1947, special military investigation teams carefully sifted through the records at Dachau where the German mind-control experiments had been conducted. The teams sent their findings, including descriptions of Nazi **narcohypnotic** experiments, back to the CIA. “None of the German mind-control research was ever made public.” (John Marks, 1979, pp. 4-5)

After Dulles became head of the CIA, he created an elite team to research mindcontrol, including every aspect of every hypnoid drug. RAND Corporation did a series of research reports for the government in the 1950s on methods to force persons (the “enemy”) to do things against their will. They concluded:

The drug technique would probably turn out to be the simplest and most efficient...and would be the most likely candidate for...hypnotizing defendants against their will. (RAND quoted in Bowart, pp. 70-71)

The CIA studied the ability of barbiturates to quickly force deep trance on resistant subjects. They learned that a person could be first drugged, and then hypnotized. Or he could be first hypnotized, then drugged to push the trance even deeper. A 1950s Air Force report on the military uses of hypnosis pointed out that hypnotic drugs increased both induction speed and trance depth.

The Air Force tested whether narcohypnosis would increase the percentage of persons who could be made somnambulists. (Bowart, p. 71) Normally 10-20% of people, in a first induction, can be taken to somnambulist (amnesic) depth of hypnosis. With a series of inductions and intensive hypnotic training, it rises to 75%. A RAND report said about 90% of the population would become somnambulists if trained under narcohypnosis. (Bowart, p. 71) Other experts have said narcohypnosis could train 95%. Lindner said “all.”

Practitioners of narcohypnosis learned that injection works fastest. Oral doses take half an hour for full effect. Horsley compared oral and injected doses:

Any of the quick-acting barbiturates may be given

by mouth, where they will produce a similar effect but of delayed and more gradual onset...[the] intravenous method possesses the considerable advantages of speed, accuracy of dose, and greater force of suggestibility. However...the oral administration of a rapidly acting barbiturate is a valuable aid to the induction of hypnosis. (Horsley, 1952, p. 149)

The CIA, therefore, spent years studying covert ways to dose unsuspecting victims with Sodium Amytal or Sodium Pentothal. Barbiturate powder cannot be prepared in the necessary solution for injection (mixed with water) ahead of time. It is unstable when exposed to air. Even in solution, it deteriorates within half an hour. Therefore, the barbiturate solution to be injected must be mixed right before injection. So the CIA experimented with barbiturate-powder “mickeys” slipped into a drink, or delivered in aerosol sprays.

A CIA operation, targeting a Russian agent, involved both drugs and hypnosis. They were administered in a fake psychiatric-medical exam:

Afterward, the team reported to the CIA’s Director that EXPLOSIVE had revealed “extremely valuable” information and that he had been made to forget his interrogation through a hypnotically induced amnesia. (John Marks, 1979, p. 42)

It can be assumed that the CIA investigators also learned that barbiturate is rapidly destroyed by a normally functioning liver. So its effect soon wears off. It is highly addictive. It cannot be given to a nursing mother, for it enters the breast milk and may overdose the baby, suppressing its respiration. A nursing baby would have to be taken from the mother (weaned) before a series of narcohypnotic immersions for her could begin.

The optimal amounts of drug, and the best timing of doses, would also have become apparent. Candy’s barbiturate conditioning was done using an intravenous-drip to control the flow and thereby her depth of trance. Intravenous-drip could, theoretically, hold her at that depth. An IV could work for Jensen, in his hidden office across the continent from everybody in Candy’s life.

It would not be suitable for clandestine drugging in a situation where unexpected company might show up and see the intravenous line. A covert drugging with any risk of exposure would use oral or injected barbiturate.

If a dose large enough to result in unconsciousness (and maximally deep trance) is given by injection, suggestions can be spoken which will stick at any stage—while the subject is unconscious or in the groggy semiconscious

state as the drug wears off. If the operator wants the subject to talk back, however, there is only one period in the drug's cycle in which that is possible. Immediately following injection of a large dose, the subject is unconscious.

As the subject's liver gradually throws off the narcohypnotic poison, his level of consciousness gradually rises. In the stage of complete unconsciousness, the subject doesn't speak, or doesn't speak clearly (mumbles). But as the drug wears off there is a stage during which the subject can speak clearly and answer questions. After a while, the subject is waking up from the trance. He is no longer deeply narcohypnotized.

Interrogators were frustrated by that small window of opportunity to get answers from a narcohypnotized subject. Then somebody thought of combining a barbiturate with a stimulant.

Barbiturate Plus Stimulant—Before World War II, psychiatrists noted the possibility of using barbiturate plus **stimulant**. Barbiturate stripped away consciousness and exposed the unconscious mind to manipulation, but the subject was very groggy. Before World War II, European police tried a dose of chemical stimulant to recover some alertness. They used

...strychnine or vitamin B6, or methyl-amphetamine as an antidote. This more complex procedure gives some control of the degree of relaxation. (Rolin, p. 36)

After the war, Horsley mentioned the concept of a barbiturate-stimulant combination:

This process of conditioning by large doses of drugs, counteracted by Methedrine if the patient becomes too drowsy to think clearly, is mainly of theoretical interest, but its possibilities are sinister. (Horsley, 1952, p. 146)

Government researchers, however, believed they had a mandate to think the unthinkable, and then to accomplish it. In February, 1951, the CIA ordered six "hyposprays" and inquired about the possibility of procuring a double-barreled hypospray that could fire both barrels at once. That order also included 300 ampules of Sodium Amytal, 100 of Caffeine Sodium-benzoate, and 100 of Caffeine Sodium. **(Schefflin and Opton)**

The ARTICHOKE program called the technique of barbiturate followed by stimulant the "A Treatment." They

began with a large enough dose of a hypnoid drug to knock out the subject's conscious mind. The subject then lay there, unconscious and still. They gave a shot of stimulant. The conscious mind stayed off-line, but the stimulant roused the subject's unconscious enough to answer questions. "Described in CIA documents as 'the twilight zone,' this groggy condition was considered optimal for interrogation." **(Lee & Schlain, p. 7)**

Project CHATTER—In 1947, the Navy came aboard the mind-control effort with Project CHATTER. It was an offensive tactic research project seeking ways to extract information from persons against their will, but "without torture." CHATTER lasted until 1953. The program researched barbiturate-stimulant combinations. With drug induction alone, the subject had a tendency to just lie there unconscious, "sleeping," spoiling chances of interrogation.

In one CHATTER experiment, the subject was given an injection of Sodium Pentothal to induce a deep trance, then stimulated back to semiconsciousness by an injection of Benzedrine. The operator then regressed the subject to an earlier time and suggested that he was talking to his wife:

For roughly an hour, the subject seemed to have no idea he was not speaking with his wife but with CIA operatives trying to find out about his relationship with Soviet intelligence. (John Marks, 1979, p. 40)

In 1953, CHATTER ended. It was officially declared to have failed to reach its goal.

Barbiturate Forces Induction?

During WWII, the prestigious Menninger Clinic did much defense-oriented hypnosis research. Afterwards, however, it reported a new series of experiments, supposedly proving that Sodium Pentothal was useless to overcome the resistance of reluctant hypnotic subjects.

Since that drug is devastatingly effective at overcoming resistance, the Menninger experiments were obviously phony. Perhaps the report was intended to nudge the private sector away from use of narcohypnosis and create public and professional ignorance about this technology. Indeed, in the years since then, this has largely taken place.

Back in the Real World—Medical recognition of forced induction and forced depth maintenance by means of narcohypnosis, however, goes back at least to Schilder and Kauders, two Austrian psychiatrists of the Freudian era.

1. See Section V for the discussion on M.H. Erickson's equally phony experiments.



The clinical textbook they wrote mentioned:

...the most effective means to induce deep hypnosis in persons who are otherwise refractory, namely, the use of narcotics and sedatives. (Schilder & Kauders, pp. 34-35)

L. R. Wolberg did narcohypnosis during World War II when young men with nervous breakdowns were available by the thousands, and quick cures were badly wanted by their superior officers. He later wrote that “supplementary hypnotic drugs” solved the problem of “definite resistances to trance depth...which cannot be overcome by ordinary training procedures...” (Wolberg, *Hypnoanalysis*, p. 50) Horsley wrote that

*...in resistant patients it is sometimes useful to give a full narcotic dose and to induce hypnosis during the stage of confusion while the subject is still half-asleep. (Horsley, in LeCron, *Experimental Hypnosis*, p. 146)*

In 1949, Melvin Powers published instructions for both oral and injected barbiturate use under his chapter heading “How to Hypnotize Refractory Subjects”:

*Under normal circumstances, a person can not be hypnotized against his will by the power of suggestion. However, we can hypnotize a person by using drugs. (p. 24)...The technique is not involved, and skill can be easily acquired...Sodium amytal and sodium pentothal are the most commonly used. (Powers, *Hypnotism Revealed*, p. 52)*

Narcoanalyst Lindner began with a drug induction, did hypnotic training of the narcohypnotized subject, then did a Freudian analysis under drug-hypnosis. He said that “With [narco-] hypnoanalysis it is as if surgical removal of such barriers and hazards (resistances and natural reluctances) has been accomplished.” He called narcohypnosis “a means to the dissolution of the resistance normally present when treatment begins...” (Lindner, *Rebel Without a Cause*, p. 19)

Marcuse’s authoritative and popular book on hypnosis (in print from 1959 to 1976) advised,

*If the patient has tremors or agitation which make it difficult for him to relax or if the patient actively resists verbal induction, then both hypnosis and drugs are required. (Marcuse, *Hypnosis*, pp. 131-2)*

A medical doctor who wrote directions for preparing and administering barbiturate in a psychiatric textbook stated:

*The use of intravenous barbiturates...is more certain and requires less time than does hypnosis. It does not, moreover, involve the emotional dependence [trust?] often prerequisite to successful hypnosis...(Kolb, *Modern Clinical Psychiatry*, 1982)*

T.O. Burgess (1956), an American doctor, also recommended narcohypnotic inductions for the “resistant or refractory patient”:

*Refractory cases or unresponsive subjects can be made more receptive by light oral dosage of Sodium Amytal administered about half an hour before trance induction. (Burgess in LeCron, *Experimental Hypnosis*, p. 343)*

The infamous medical ghoul, Dr. Ewan Cameron, also recommended barbiturate induction

*...especially with apprehensive patients. This consists in the administration of a disinhibiting drug. Our preference is for intravenous sodium amytal. The use of this preparation allows one to maintain careful control over the state of the patient from minute to minute. If too little is given, then nothing is gained; if too much, then it becomes almost impossible to maintain the patient’s attention at the level necessary for hypnosis...a well-developed hypnosis can be achieved by this means...Its main use is gradually to accustom the patient to the procedure of being hypnotized, so that ultimately he can be hypnotized without the use of such disinhibiting drugs. (Cameron, *General Psychotherapy*, 1950, pp. 222-223)*

A Summary of Mind-control Uses of Barbiturate

- 1) **Amnesia**—Deep narcohypnosis immediately and severely interferes with normal memory-forming capacity. The unconscious mind retains trance-period events in its memory, but the dissociated conscious mind may not be alert and focused enough to form memory links with that data. So the subject has difficulty remembering what happened.
- 2) **Immobilization**—A large dose of barbiturate makes the subject unconscious and thus physically immobilizes him. In smaller doses, it weakens and discoordinates the subject and makes it hard, or impossible, to think, run, or plan an escape. This provides time for an operator to implant long-term control conditioning.

3) **Forced Trance Induction**—A subject cannot resist trance induction once the barbiturate enters his bloodstream. He cannot wake himself up after the induction (as may be possible in nonnarcotic trance), even if he finds the situation objectionable.

4) **Opportunity to Carry Out Hypnosis Training**—The drug speedily (oral) or instantly (injected) strips away consciousness and conscious control. It lowers consciousness and holds it down. During that period it eliminates the subject's power of will because his unconscious is exposed to a hypnotist's manipulations with no protective filtering, analyzing, and discriminating conscious layer. A drugged subject, if given no suggestions, is narcotized, but not hypnotized. He simply sleeps it off. He shows no signs of hypnosis except extreme, uncritical, suggestibility to speech heard while sleeping.

Hypnotic training is a standardized set of suggestions regarding a posthypnotic induction cue, etc. Hypnotic training can be done under regular hypnosis—or it can be done to a narcohypnotized person. Posthypnotic suggestions used to train a narcohypnotized subject are likely to include instructions to a) maintain trance at the deep level of the drug trance even after the drug has worn off; b) return to consciousness only when cued to do so by the hypnotist, rather than rising in consciousness naturally and gradually as the drug wears off; c) a re-induction cue to re-enter that same deep-level trance state any time a designated (non-drug) entry cue is perceived.

5) **Speed of Induction**—Horsley wrote that

...the main advantage of narcotic hypnosis over verbally induced hypnosis is the speed...Most normal persons respond only gradually to verbally induced hypnosis, and, as a general rule, only a light degree of hypnosis is induced during the first session. In most normal persons the depth of hypnosis can be increased at subsequent sessions, but many hours of hard work are required to produce complete amnesia and somnambulism. Once this has been achieved, however, any normal person can be rehypnotized quickly and easily. The value of narcosis is, then, that it practically eliminates the necessity for hours of preliminary sessions of instruction in how to be hypnotized. And, after a single

session of narcotic hypnosis, posthypnotic suggestion is effective for the subsequent induction of hypnosis by verbal methods alone. (Horsley, 1952, pp. 148-9)

6) **Depth-Conditioning**—Drug induction can condition a subject for future hypnotizability and for increased trance depth. The more times that a person is hypnotized, the more easily that person can be hypnotized. The deeper a subject is pushed in one trance, the deeper that subject tends to go next time.

The rule that a deep hypnosis, once accomplished, will facilitate all subsequent hypnoses, applies also in this instance [narcohypnotic induction]. (Schilder and Kauders, pp. 34-35)

M.H. Erickson said that narcohypnosis made it possible for most subjects to be developed to a somnambulistic (amnesic) depth. ("Hypnosis in Medicine," p. 643) Lindner said hypnotic drugs vastly increased the percentage of persons who could be trained to be somnambulists. He believed that anybody, by using drugs, could be turned into an amnesic, induction-conditioned hypnotic subject.

7) **Rapport**—The deeper the subject descends into a state of hypnosis (drug-induced or otherwise), the more the subject acquires the childlike characteristic attitude of exaggerated respect (awe) and unconscious obedience toward the hypnotist called *rapport*. Even drug-forced hypnosis causes that intense bonding, even under the cruelest circumstances.

8) **Suggestibility**—Drugging maximizes trance depth. Greater depth increases the strength of suggestions. Hypnoprogramming can thus be efficiently implanted. A Swiss expert on unethical hypnosis noted the dark possibilities of extremely deep trance:

In the first stages of hypnosis the subject can preserve his personal independence; he will not carry out any action in this state of mind which runs counter to his moral or ethical beliefs. This can change to an appreciable degree as soon as the hypnosis reaches a certain depth...the subject's capacity for judgment is more or less excluded. In this state of consciousness the subject is almost wholly exposed to the suggestions which the hypnotist gives to him. The danger that criminal



*advantage can be taken of hypnosis brought to such a depth has rightly been pointed out. (Hammerschlag, *Hypnotism and Crime*, pp. 29-30)*

Christenson, a military research hypnotist, wrote:

*In narcosynthesis the subject cannot readily inhibit expression of thoughts or behaviors which are suggested by the administrant, so that the subject is no longer a 'free agent' and the question of coercion is a legitimate issue. ("Dynamics in Hypnotic Induction," in LeCron, ed, *Experimental Hypnosis*, p. 49)*

9) Addiction—The shift to lowered consciousness, whether from a drug or non-drug cause, is addictive. Induction is a “rush,” a moment of pleasurable and extreme brain excitation. Rushes are ad-

dictive. “...apart from the specific suggestions by the hypnotist of well-being, it [hypnosis] commonly causes euphoria and even elation.” (Horsley, p. 148) The euphoria is caused by chemical messengers settling into receptors in neurons of the brain’s bliss center. Brain chemistry makes people long to reexperience a remembered intense (lowered consciousness) experience such as childhood, falling in love, etc.

Repeated barbiturate induction soon creates an humbling, enticing addiction. It takes very few times. Barbara Noel believed that her psychiatrist deliberately addicted her to barbiturate to reinforce his control. He would make her beg for the injection, then finally give it to her. (Chemical addiction can be converted by suggestion into unconscious craving for induction—even by a non-drug, cued method.)



Rohypnol

Narcohypnosis is a century old. It is also the latest thing. During three weeks, in July 1995, 101,000 tablets of Rohypnol, the “date rape drug,” came into the U.S. at Laredo, Texas. Hoffmann-La Roche manufactures it in Mexico and also in South America, Europe, and Asia. Its U.S. street name is “roofies” or the “forget pill.” Ten times stronger than Valium, lasting up to eight hours, Rohypnol is a narcohypnotic that can be slipped into a beverage. As with the old barbiturates, a slight overdose can depress respiration and cause death.

Electroshock

[The shock voltage is]...about equivalent to that consumed [by]...a 100-watt light bulb. This much power applied continuously would soon be lethal, but the shock timer is usually set between one-half and one second, long enough to set off a grand mal epileptic convulsion, but not long enough to kill.

Schefflin and Opton, p. 365

Electroshock has three effects which are of interest to mindcontrollers:

- Increased suggestibility
- Amnesia, even retroactive amnesia
- Calming

Here is a detailed look at each of those three uses.

Shock to Increase Suggestibility

Shock is inductive. It literally can send a person into trance (a state of relaxed “sleep”). Induction by mild shocking is called **electronarcosis**.¹ More intense shocking will also cause convulsion. Electroshock is also known as **ECT (electroconvulsive therapy)**, or **ECS (electroconvulsive shock)**.

The treatment jolts 70 to 140 volts of electricity through the subject’s brain. That’s enough to cause convulsions as long as the shocking continues. Dr. Ugo Cerletti, the Italian psychiatrist who demonstrated the first experimental human convulsion was fascinated:

We observed...the onset of the classic epileptic convulsion. We were all breathless during the tonic [muscular contraction] phase of the attack, and really overwhelmed during the apnea [failure to breathe] as we watched the cadaverous cyanosis of the patient’s face; the apnea of the spontaneous epileptic convulsion is always impressive, but at that moment it seemed to all of us painfully endless. Finally, with the first stertorous breathing and the first clonic [alternating contractions and relaxations] spasm, the blood flowed better...we observed...the characteristic gradual awaking of the patient “by steps.” He rose to sitting position and looked at us...We asked: “What happened to you?” He

answered: “I don’t know. Maybe I was asleep.”
(Cerletti quoted in Marti-Ibanez, et al, pp. 91-120)

A nonprofessional also wrote a clear description of an ECT convulsion:

*The nurse at the patient’s head took up two pencil-like electrodes with flat, flanged bases and smeared contact jelly on them; she and Dr. Rosen then pressed the electrodes against Mary’s temples. Dr. Rosen set the dials quickly and pushed the button. At once, Mary grunted deeply, and her head jerked back...Her eyes were clenched shut, and her face was drawn into a tight, distorted mask. Her legs rose stiffly in the air, the toes and arches of her feet curled under, and her whole body now began spasmodically thrashing about. All three nurses kept hold of her, “riding,” as Dr. Rosen said, with her motions to prevent self-damage. As far as I could tell, she stopped breathing. At last, after forty-five seconds...the convulsion subsided, a long gargling sound came from her throat, and as she sank down, her breathing began again. **(Morton Hunt, Mental Hospital, p. 32)***

CIA Researches Using Shock to Increase Suggestibility

—In 1949, S. M. Korson reported “The Successful Treatment of an Obsessive-Compulsive Neurosis with Narcosynthesis Followed by Daily Electroshocks” in the *Journal of Nervous and Mental Disease*. Under a series of narcohypnotic inductions, Korson had developed the subject’s hypnotic obedience. He then gave a series of electroshocks to cause retroactive amnesia which would prevent loss of conditioning. An obsessive-compulsive is the hardest kind of personality to hypnotize, the hardest to brainwash, the hardest to change. Any method that worked on that type patient would work on anybody. The CIA probably followed Korson’s work with interest.

1. A Hungarian psychiatrist, Volgyesi, used a mild electric shock to induce “passivity” (trance) in the 1930s. He then deepened, formalized the trance, and treated the subject with verbal suggestions.



Dr. Irving Janis of the RAND Corporation delivered a study to the CIA, in 1949, which surveyed the research done on ECT to date. He said it caused “a temporary intellectual impairment, diffuse amnesia, and general ‘weakening of the ego’” This effect of being made extra suggestible, extra hypnotizable, extra persuadable continues “during the period when a series of electroshock convulsions is being administered.” (Janis quoted in Bowart, p. 251) Janis recommended that the CIA should research ECT’s potential for mind control.

They did. The 1950 BLUEBIRD goals include research into the mind-control uses of electroshock. In a 1951 CIA memo, Morse Allen, head of the behavior-control research program,

...asked if the psychiatrist had ever taken advantage of the “groggy” period that followed normal electroshock to gain hypnotic control of his patients. No, replied the psychiatrist, but he would try it in the near future and report back to the Agency. (J. Marks, 1979, pp. 25-6)

During the Korean Conflict, Dulles

...discovered, talking to psychiatrists in Scientific Intelligence, that electroshock treatments not only produced amnesia in patients for nonspecific periods, but when their memories started to return...at that stage it would have been possible for the Chinese and North Korean doctors to implant anti-American values. (Thomas, pp. 97-8)

An agency report speculated:

Conceivably, electroshock convulsions might be used as an adjunctive device to achieve somnambulism in a very high percentage of the cases. ...From my own and others’ investigations of the psychological effects of such treatments, I would suspect that they might tend to reduce resistance to hypnotic suggestions. It is conceivable, therefore, that electroshock treatments might be used to weaken difficult cases in order to produce a hypnotic trance of great depth. (CIA memo quoted in Bowart, p. 72)

A brainwashing specialist later summed it up:

The short-time memory losses and the confusion produced by the treatment may actually create a state of mind that makes it easier to become free of those ideational fixations that interfere with the restructuring of attitudes. (Valenstein, p. 161)

Tien Shocks Bad Wife into Good Wife

In Detroit, Michigan, in the early 1970s, “Laura” and her husband, Tom, “bickered constantly.” Laura wanted a divorce and custody of her three-year-old (hyperactive) son. A relative told the couple that Dr. Tien could save their failing marriage. Tom talked Laura into seeing Dr. Tien in one last try to save the marriage.

Dr. Tien diagnosed Laura as a “depressed, disturbed, emotionally unstable woman.” Laura agreed to become a changed woman by the electroshock method (which Tien called “psychosynthesis”). It worked. As Laura sucked on a baby bottle filled with chocolate milk during the suggestible period as she was coming to after her electro-jolt and the convulsion it caused, Tien talked her into a new set of beliefs. He gave her a new name, “Susan,” implanted a new self-definition, “good,” not “bad,” and provided her a fresh start on her married life.

Laura legally changed her name to Susan (Tien’s patients often did that). In a later check-in, Laura and Tom reported their marriage now worked well. Tien said Susan had become “a more stable, mature individual than Laura ever was.” Most of Tien’s patients, including Susan, were grateful for their cure, according to reporter Dolores Katz in the *Detroit Free Press* (Feb. 11, 1973). Tien’s method obviously derived from Cameron’s theory of “blinking” followed by building a new personality.

Tien was profitably mass producing those “new personalities, new lives” using electro-induction and giving suggestions in the hypnotic period following the shock. He shocked hundreds of patients into new personalities—about twelve treatments a day. Tien’s system was a kinder, gentler version of Dr. Ewen Cameron’s shock system.

...the most controversial of his treatment methods is the wholesale use of electroconvulsive therapy, known to the layman as shock treatment. This is designed to ‘erase’ undesirable elements of an individual’s personality so he can be ‘reprogrammed’ to function in a more desirable manner... (Katz)

Not everybody was enthused. St. Lawrence Hospital had to hire special staff members to work with Tien because regular staff refused.

Susan and his other shock-list patients received a series of around twenty treatments at the hospital on an outpatient basis, three times a week. In her periods of post-shock susceptibility, she learned to fear and loathe and hide her “bad” past.

Tien and a nurse...place the electrodes that connect Laura to the shock treatment machine... The patient, Laura, talks of her childhood experiences while the electrodes are fitted to her head. (Ibid.)

Dr. Tien had Laura talk of running away and getting her longed-for divorce at the moment he shocked her. That is the circuit he wanted to burn out. Right before the zap, Tien asked Laura a question about her childhood:

LAURA: ...I can’t remember.

TIEN: No? You mean the bad times were so bad you got all

mixed up? So now you want your husband to divorce you and take your son away?

LAURA: *No. You're mixing me up.¹ I never wanted that. I want the divorce and I want my son with me.*

TIEN: *Yes, it is all mixed up, isn't it? Do you remember running away? Just like your father ran away? Just like your mother ran away, leaving you with your grandmother? Remember running away from the orphanage? Remember running away from the foster home? Is it all coming back? You are so desperate sometimes and you feel so depressed, Laura. You can't put up with this any more. And now you want to run away from Tom. (Ibid.)*

At that moment, the nurse slipped a rubber mouthpiece into Laura's mouth and the doctor hit the switch. Tien "deliberately stimulates unpleasant memories immediately prior to the shock treatment so they can be erased."²

Laura's body briefly convulsed. A nurse wheeled the unconscious woman on a gurney into the next room where her husband Tom was waiting. When Laura started to wake up, Dr. Tien came in.

TIEN: *Susan, your husband is here.*

(Laura/Susan opens her eyes and looks submissively at Tom, who cuddles her in his arms and attempts to feed her from the baby bottle.)

TOM: *Come on, Susan, drink your milk.*

Susan (childishly): *I don't want it.*

TOM: *It's good for you. You're a good girl, aren't you?*

(Susan begins to drink from the bottle...) (Ibid.)

The nurse had handed Tom a baby bottle filled with chocolate milk. (Tien said adults liked chocolate milk better than plain in their bottle. He said the cuddling by husband or parent while giving the bottle "makes the individual receptive to new ideas.")³

As Susan sucked on the bottle, Dr. Tien commenced the reprogramming:

TIEN: *Have you ever been a bad girl, Susan?*

SUSAN: *Yeah. Sure.*

TOM: *No. Susan has never been bad.*

TIEN: *Right, Tom. It's Laura who was bad, not Susan.*

TOM: *Susan's a good girl...(Ibid.)*

Tien repeated that one over and over: "...the psychiatrist's voice croons, 'Susan is a good girl. She's never been bad, like Laura. Susan loves her husband. She's a good girl, Susan is!'" Then Tien moved on to specifics:

"Tell me, Susan, did your grandmother ever make you get in a doghouse?"

"W-h-a?" Susan mumbled.

"No," Dr. Tien categorically stated. "Susan's grandmother never did that. Laura's grandmother did it. You're a new person now. Have you ever been in an orphanage?" (Ibid.)

Susan catches on. "No, never," she says. Laura's real childhood with all its traumas, like her root self with all its rebelliousness, is being split away from her in this semi-conscious state. "Susan" is learning repression and denial, how to lie-even to herself-about her true past. That solves the problem. She was BAD but now she's GOOD.

"Susan is a good girl...Susan loves her husband," Tien urged again. Tien stressed to his patients that they were getting "new," "good" personalities to replace "old," "bad" ones. "Susan" had wanted to leave her husband: bad girl. Now she will stay with him: good girl, and grateful for her cure.

After the treatment, Laura switched to calling herself Susan all the time.

ECT for the purpose of solving marital problems has not always ended happily. Dr. Cameron's patient named Lauren, in a similar situation, also agreed to take the ECT character cure. Her husband said she came out of her month of shockings a much better. Lauren, however, believed the shockings did not improve her. Two years later she decided her misery was definitely caused by her husband. She divorced him and declares she's been happy ever since.



1. Confusion is also inductive and increases suggestibility.

2. "ECT Timed with Disturbing Thoughts," *Clinical Psychiatry News*, Dec. 1975, p. 2, is a related article.

3. In a 1951 article, the authors reported feeding shock patients using "a standard nursing bottle with nipple...she began to suck and was able to swallow the milk slowly but completely. To our further surprise, it was found that the other patients being [ECS] treated at this time also readily fed from nursing bottles...a return to an early, infantile mode of activity..."



Shock to Cause Retroactive Amnesia

The second mind-control use of electroshock is to erase the subject's memory for what happened during the shock series, or in the weeks immediately before it. A little shock, as from a prod, will not accomplish this. A big shock from a big shocker, called "electroconvulsive treatment," causes convulsions and memory loss. The memory loss from any series of shocks which are strong enough to cause convulsion can be retroactive. The current may be sent through both hemispheres of the brain using electrodes attached to the temples, or through only one hemisphere (right).

CIA Research on Using Shock to Cause Amnesia—In 1951, a famous psychiatrist, who was "a cleared Agency consultant," told Morse Allen that electroshocking could cause amnesia. He added that, in "the stupor following shock treatments," subjects were likely to be very loose-lipped about information. Allen was interested.

The psychiatrist also mentioned that...these treatments could not be detected unless the subject was given EEG tests within two weeks...Allen noted that portable battery-driven electroshock machines had come on the market...the Office of Scientific Intelligence recommended that this same psychiatrist be given \$100,000 in research funds "to develop electric shock and hypnotic techniques. (J. Marks, 1979, pp. 25-26)

A severe series of electroconvulsive shocks will cause **retrograde amnesia**: an inability to remember not only the time of shocking, but also a period of time preceding the shocking.

There are clear memory losses for the events immediately surrounding the convulsions and with a prolonged treatment series the memory loss commonly extends further and further back in time... Most of the memories return within days or weeks, but some memory gaps persist for six months or longer and there may be permanent loss of recall of events that took place during the period of the treatment. (Valenstein, p. 159)

Dr. Ewen Cameron researched ECT extensively on his own, and for the CIA. (He hoped for a Nobel prize. The man who invented the lobotomy had received one.) He tried to **depattern (blank)** patients' minds by electroshocking. (Then he tried to program in new personalities by forcing the subject to listen to repeated suggestions played on an endless-loop tape—**psychic driving**—in a normal state or under hypnosis.)

Cameron wanted the subjects amnesic for the blanking and reprogramming. His research had shown that if "schizophrenics" remember their "symptoms," those symptoms will return. If hypnoprogrammed persons remember being conditioned, they will fight it. So both he and the CIA wanted a method that would cause permanent, leak-proof, amnesia.

Electroshock's ability to effectively erase memory of the time just before the shock greatly interested the CIA. Maybe somebody could be ordered to do something, then shocked and made to forget what they had done. Maybe an unwilling candidate could be narcohypnotized, hypnoprogrammed, and then shocked into retrograde amnesia—made unable to remember that they had been hypnoconditioned. The CIA hired researchers to find out what kinds of shocks best guarantee permanent loss of memory. Cameron received a grant.

Three Stages of ECT Amnesia

Dr. Cameron observed that his typical depatterning patient moved through three distinct amnesia stages. He named them the First, Second, and Third Electroshock Amnesia Stages (**Cameron, "Production of Differential Amnesia as a Factor in the Treatment of Schizophrenia," 1960, pp. 26-33**).

First Stage—In the First Stage of electroshock amnesia, the subject loses much of her recent memory, "yet she still knew where she was, why she was there, and who the people were who treated her." (**J. Marks, p. 135**). That is called keeping your "space-time image." The subject knows where she is, why she is there, and recognizes familiar faces. Names are harder.

Second Stage—In the Second Electroshock Amnesia Stage, the subject loses that space-time image and is aware of the loss. That awareness causes extreme anxiety. The subject wants to remember. At this stage the subject asks repeatedly, "Where am I?", "How did I get here?", "What am I here for?" ...

Third Stage—In this final stage, the subject becomes bizarrely calm. All the previous anxiety is gone. Cameron said this stage was:

...an extremely interesting constriction of the range of recollections which one ordinarily brings in to modify and enrich one's statements. Hence, what the patient talks about are only his sensations of the moment, and he talks about them almost exclusively in highly concrete terms. His remarks are entirely uninfluenced by previous recollections—nor are they governed in any way

by his forward anticipations. He lives in the immediate present. (Cameron, "Production of Differential Amnesia")

Regressive Shock

Cameron developed the policy of giving a **regressive** amount of ECT as the means to create an unbreachable amnesia. Regressive ECT is caused by so much shocking that the subject temporarily becomes infantile in behavior. Both regular and regressive ECT affect memory, but regressive ECT affects memory the most. Regressive ECT is caused by shocks given more frequently—as much as several times a day, or even several times an hour, or even several shocks given in rapid-fire sequence—sometimes at a stronger voltage than usual. The series of close, strong shocks is continued until regression occurred, defined as the point when the patient lost bladder control:

They were dazed, out of contact, and for the most part, helpless. All showed incontinence of urine, and incontinence of feces was not uncommon. Most of them were underactive and did not talk spontaneously...They appeared prostrated and apathetic. At the time most of them whined, whimpered and cried readily...They could usually be made to walk if led and supported, but their movements were slow, uncertain and clumsy...They could not dress themselves and none...could complete the task of extracting a match from a matchbox and lighting the match. (Rothschild, p. 148)

Post-Shock Recovery—Schefflin and Opton compared the recovery of patients from ECT treatments to people who are very gradually

...coming out of a dead-drunken state, progressing back toward sobriety through the stages of blotto, soused, sodden, plain drunk and merely high...At first the patients do not know who they are, where they are, or what has happened to them...Gradually the world comes back into focus. (Schefflin & Opton, p. 366)

It took seven to ten days free of shocks for the subjects to come out of their torpor. They came out of it missing time. They also underperformed mentally, only gradually recovering over the next five years. (J. Marks, p. 107) Over time, the subject's amnesia gradually receded. However, in cases where a regressive amount of shocking had been given, Cameron wrote, "it is rare to find that any memories of the period of hospital treatment are brought back."

I once met a woman whose mother had briefly been hospitalized in the Deep South for a nervous breakdown. While in the hospital, this patient had been assaulted and raped by a black man, and had become pregnant as a result. The hospital forced her to endure an abortion, then electroshocked her into a condition of complete amnesia for what had happened, thus also erasing a source of potential liability.

In later years, the woman often complained to her daughter that, "There are patches in my memory that I just can't remember." It bothered her a lot, but she never overcame the amnesia. Her husband and pastor knew the truth about what had happened. It was from them that the daughter finally learned the full story, after her mother's death.

Shock to Cause "Calm"

An electroconvulsive shock series that reaches Cameron's Phase Three results in a temporarily emotionless, "calm," subject. Shocking has been, and still is, a treatment for depressed patients and for unmanageable ones because of this post-shock characteristic of being subdued and obedient. An English psychiatrist wrote, in 1947: "The quiet cooperation of the [electroshocked] patient will be appreciated by the nursing staff." (Thorpe, pp. 89-92) To manage "a patient in a state of wild excitement" he recommended

..."intensive therapy"...that which commences with several shocks daily until the excited state is suppressed, and by this method the most maniacal patient can be rapidly and dramatically brought under control. (Ibid.)

Anybody who is wildly and dramatically protesting the injustice of what is being done to him can also be brought under control. Because of the retroactive amnesia, he may then forget what the fuss was all about.

In 1993, I met a young woman who works as a nurse's aid in a downtown Seattle hospital which has a big mental ward. I mentioned that my college psychology professor had just told us that shock therapy was now outdated and seldom used.

The nurse's aid looked astonished. She said, "They use it lots." A few days later, I heard on the radio that electroshock is the single most common treatment for hospitalized mental patients.



The History of Deliberate Personality Splitting

History of
Research on
Artificial
Neurosis



Focus Shifts to
Child, Real or
Suggested

Truth, crushed to earth, will rise again.
- William Cullen Bryant, "The Battlefield"

George Estabrooks proposed, over and over, that superspies with **one-way amnesia** should be created by **deliberate personality splitting**. An absolutely dependable, unbreakable amnesia for all events under hypnosis is the most essential single element to create an unknowing, authority-controlled hypnotic subject. A split personality is a very hard form of amnesia to overcome.

Is artificial personality splitting possible? A college psychology text declares: "Multiple personality is a rare event and there are no experimental means for producing it." (Coon, p. 38) That statement, however, is FALSE. The artificial creation of multiple personality was discussed for years in the psychological literature, and experiments were done—successfully.

We know a great deal about multiple personality... and can now produce the condition on de-

mand through hypnosis. (M.E. Wright in Estabrooks, ed., Hypnosis: Current Problems, p. 234)

The "Dual I"

In the 1800s, the **hysterical disorders** (dissociation, amnesia, conversion reaction, and multiple personality, all symptoms of excessive repression) were becoming understood. Scholars observed that hypnosis sometimes resulted in the spontaneous appearance of another personality. And they noticed that the dissociation caused by hypnotism could result in an amnesia similar to the amnesia of a multiple personality.

The first person who deliberately tried to split a personality was a French doctor named Azam. In 1858, he tried "to bring about the phenomena of the dual 'I' artificially, by means of hypnosis." (Hammerschlag, p. 14) The study of hypnotic dissociation and case descriptions of

dual and multiple personalities were now underway. Hypnotists and psychiatrists (often the same persons), learned that dual, or multiple, personality could be cured by hypnosis—and caused by hypnotism.

Max Dessoir, around 1890, declared that everybody's mind contained the potential of a second personality which could be hypnotically stimulated into such strength that it would put the original personality at risk. Pierre Janet described a theory of **dissociation** in 1889:

*Things happen as if an idea, a partial system of thoughts, emancipated itself, became independent and developed itself on its own account. The result is, on the one hand, that it develops far too much, and, on the other hand, that consciousness appears no longer to control it. (Janet, **The Major Symptoms of Hysteria**, p. 42).*

Dissociation was Janet's explanation for hypnotic amnesia, split personalities, etc. He believed that a split personality was caused by the "overdevelopment" of a dissociated subsystem which, if large enough, could become a rival for selfhood.

In 1945, Dr. Wolberg wrote about creating "dual personality" in his psychiatric patients:

*...dual personality may be created by a relatively simple technic...The patient is told while in deep hypnosis that the [designated] part of him...is another individual of whom he is unaware. This new personality, however, knows all about him. A name may be given to this alter ego, and it may then begin to function as a distinct entity, with wishes and attitudes of its own...With proper suggestions the analyst can take the second personality into his confidence as an ally... (**Hypnoanalysis**, p. 280)*

Speaking of the case history of Mrs. E., Dr. Reiter wrote: "Bit by bit he [Bergen] had built up a secondary personality within her, which it was extremely difficult to bring to light." In analyzing Palle Hardwick's case, the doctor referred again and again to

...the artificially produced splitting of H's personality... (p. 7)...the prompt and automatic carrying out of the given suggestions and the subsequent loss of memory about what passed under the hypnosis, in other words a complete and artificial splitting into two separate personalities. (Reiter, p. 65)

How did the hypno-exploiters, Bergen and Nielsen,

split the personalities of Mrs. E. and Palle? Dr. Reiter said it took two things to make a personality split: **automatic obedience** and **complete amnesia**. Automatic obedience makes the artificial shifting from one personality to another happen, on cue from the hypnotist. Complete amnesia keeps the subject ignorant of that shift. Then he does not try to fix it. A healthy person has been given a mental disease (split personality) and made to function like a sick one.

In 1968, H. D. Birns published a book on hypnosis that described personality splitting:

The starting place to deliberately create a manageable multiple personality is, of course, with a normal person who has a self-controlled conscious and a self-controlled unconscious. The next step is to displace the conscious will, substituting the will of the hypnotist. That goal would require achieving a very deep state of hypnosis with the subject...

The techniques, and modifications of techniques, used in hypnosis may be numerous, but their purpose is the same: to enable the hypnotist to unseat the conscious mind from its accustomed place of authority so that he can take over control of the body. (p. 29) ...a hypnotist who has complete control of a subject is like a driver operating an automobile. And while the likeness is true, it's not really quite accurate because it doesn't do justice to the awesome powers that the hypnotist possesses. (Birns, p. 39)

Birns said that the last step was to "...create a split in the subject's unconscious that identifies with and acts in the place of the hypnotist—like the internalized parental figure in a normal subconscious."

Dr. William Sargant, a British brainwashing expert, wrote about Pavlov's technique for giving dogs nervous breakdowns:

Hypnoid, paradoxical and ultraparadoxical states of brain activity can also cause a splitting of the stream of consciousness, so that certain thoughts, memories, or patterns of behavior implanted in the brain somehow become isolated and totally divorced from the main stream of consciousness, memory and behavior (pp. 12-13)...In the hypnoid phase of brain activity, the mind may also become split. Pavlov showed with his dogs how one small special area of cortical brain activity could be so specially excited that it resulted in reflex inhibition of much of the rest of the ordinary cortical activity. (Sargant, 1974, p. 34)



Sargant also wrote about research on human mind-splitting using verbal midbrain implants developed while the subject was hypnotized:

Pavlov thought that the alterations were sited in the cortex, but we now know that the process could easily be initiated by alterations in the other part of the brain, for example, the reticular area of the midbrain. (Ibid.)

CIA Researches Subconscious Isolation

The CIA also researched artificial personality splitting. In private memos, they called an artificially-created, new personality a **subconscious isolate**. The CIA goal was to create a split so deep, so wide, so complex, that reunification (and, therefore, conscious remembering) would be impossible. They sought permanent changes. They wanted to bury their secrets in a subconscious isolate that could never escape and tell.

The CIA called the process of creating an unknowing hypnotic subject the “application of SI.” One goal-setting memo asked: “Can we obtain control of the future activities (physical and mental) of any individual, willing or unwilling, by application of SI and H techniques?” (It can be assumed that SI stood for “subconscious isolation” and

H meant “hypnotic.”)

A November 9, 1950, BLUEBIRD PROJECT memo repeated that SI goal:

...it is recommended that BLUEBIRD conduct experiments and develop techniques to determine the possibilities and the practicability of positive use of SI on willing and unwilling subjects for operational purposes. Positive use of SI would be for the purpose of operational control of individuals to perform specific tasks under post hypnotic suggestion...

After SI and H techniques were applied, the subject’s conscious mind did not know that it now contained a subconscious isolate which would robotically obey its operator’s hypnotic cues and instructions (and know everything the conscious mind did not know). Subconscious isolation created amnesia. That increased “compliance to suggested acts.” (Schefflin and Opton, p. 115).

After Condon’s novel came out in 1959, the term **Manchurian Candidate** became the popular name for an unknowing hypnoprogrammed person. Candy Jones was narcohypnotized into a “Candidate” in 1960.

History of Research on Artificial Neurosis

We undertook to produce synthetically a complete model of a stable neurosis...We took a model of neurosis because in it are found those properties of a stable conflict, of a prolonged affective disorganization of behavior...

Luria, *The Nature of Human Conflicts*



An artificial neurosis is a conflict between an urge and an inhibition, which has been implanted in a person’s unconscious under hypnosis, and then hidden there by suggested amnesia. The hypnotist suggests the urge, the amnesia, and perhaps also the inhibition.

Pavlov Applies Freud

An artificial neurosis is created by applying Pavlovian methodology to Freudian theory. Freud determined that neurosis and its resulting symptoms may be caused by an unresolved, unconscious conflict (such as between an inappropriate sexual desire and conscience). That’s how natural repression causes natural neurosis. Freud used his understanding of this natural cause of neurosis to help the patient. Because, if the repressed memory can be remembered, the patient usually will deal with the conflict and cure himself.

Pavlov undertook to cause neurosis, instead of

cure it. He defined **neurosis** as “a chronic deviation of the higher nervous activity, lasting weeks, months, and even years.” If he could experimentally cause neurosis, using Freud’s model, it would prove that particular theory correct. Pavlov’s experiments succeeded. He created **experimental neuroses** in animals by reversing Freud’s method of curing neurosis. Pavlov caused dogs to develop real neuroses. He thus demonstrated that learning can create emotional responses—and can cause one type of mental problem:

We have definite experimental neuroses in our animals...what is analogous to human psychoses....This was the reason for my becoming thoroughly acquainted with psychiatry....(Pavlov, Lectures on Conditioned Reflexes, p. 39)

Pavlov could produce nervous breakdowns in dogs either by overstimulating their excitatory system (stress) or their inhibitory system (repression). Or he did it by creating a **conflict between excitation and inhibition**. For example, he gave them severe electric shocks timed together with the arrival of food to set up a conflict between the avoidance of pain (fear) and the desire for nourishment. They were afraid to eat, but they needed food to live. They were now neurotic.

Luria Researches Artificial Neurosis

A.R. Luria continued Pavlov’s research in his Soviet laboratory in the 1920s. Luria was a prominent Russian scientist: Professor of Psychology at the Academy of Communistic Education, and a Research Associate at the State Institute of Experimental Psychology in Moscow. Luria took Pavlov’s research on creating artificial neurosis one step farther. Whereas Pavlov had experimented on dogs, Luria now experimented on human beings.

Luria wanted to create “a complete imperativeness of those tendencies in the area of which we provoked the conflict.” (Luria, *The Nature of Human Conflicts*, p. 240) He wanted to be able to go into somebody’s mind, tweak it a certain way, and overcome their natural will with his implanted “imperativeness.” He worked for a government which liked the idea of control—of being able to change people in a specific, permanent, controlling way.

Failed Conditioning Method—Luria’s first efforts to implant “imperativeness” failed. The method which had failed used a Pavlovian conditioning approach. Luria called it “a prolonged elaboration of an automatism.” It failed because, after the conditioning treatment, all of his subjects remembered what had happened. Remembering,

they rejected the implanted thoughts Luria was trying to drill into them. They rejected Luria’s attempts to railroad their minds into “prolonged affective disorganization of behavior.” Luria reported:

...many of our subjects were well able to adjust themselves to or correct the difficulties set before them...These results told us...that the disturbances we obtained were not of a stable and intensive character. (Ibid.)

Luria did not give up his quest to create such a complete imperativeness that the subject could not correct the difficulties. His goal was still to make a **stable** (permanent) and **intensive** (unconsciously powerful and dominant) implant in a subject’s brain.

Success—To accomplish that, Luria had, somehow, to overcome the subject’s natural feedback ability to observe what has happened in his mind and to self-heal by reprogramming himself.¹ So, Luria tried it again. This time he deeply hypnotized the subject and suggested amnesia. This time he succeeded. His subject’s conscious mind did not reject the implanted thoughts because it didn’t know they were there.

Luria never talks plainly. His book sounds like gibberish until you catch his meaning. Then you realize that Luria instructed his “technician” (a skilled hypnotist) to begin programming the subject with “a natural reaction of the personality” such as sexual desire or an aggressive impulse embodied in the emotion of anger. The hypnotist was to seek to “obtain a stable conflict of maximal strength, closely related in its structure to the more acute neurotic states.”

Therefore, an imaginary incident which aroused a sexual or aggressive feeling which would predictably be opposed by conscience was suggested to the hypnotized subject. Luria found it easy to set up “a collision between our suggested activity and the natural... personality” (Luria, p. 241) when the subject was hypnotized.

Accordingly, the subject was programmed to unconsciously believe that he had sexual relations with his mother when he was a little boy, or some such. Luria thus successfully implanted into a hypnotized person “a conflict of fair stability and intensity...by direct suggestion...[to] provoke a tendency of undisputed imperativeness...” (Ibid, p. 140) The hypnotic implant set up a primitive unconscious conflict in the subject’s mind, such as between de-

1. The brain’s natural **self-governing** capacity requires an operational **feedback circuit**. When memory works normally, pain, shame, or fear can cause reprogramming. But there will be no reprogramming if memory of the problem is blocked by amnesia.



sire and fear/shame or between anger and fear/shame.

The conflict could not be resolved because it could not escape from its hole of suggested amnesia into the mind's light of reason (where the subject's conscious mind would identify it as garbage and toss it out). The implanted conflict (now permanently concealed in the subject's unconscious by suggested amnesia) would be stable because it was insulated from the subject's self-correcting mental feedback mechanism. The deep-level guilt, shame, or anger generated by that suggested fictional conflict could then be used to drive whatever "imperative" Luria wanted.

Luria had succeeded in causing the targeted **stable disorganization of personality**. He called that an "artificial neurosis."¹

Artificial Neurosis Comes to the U.S.

In 1932, Horsley Gantt published his English translation of Luria's book. There were many psychoanalytically-trained medical hypnotists at that time. They were comfortable with both Freudian theory and with hypnosis. Some continued Luria's research in the United States.

In 1934 and 1935, M.H. Erickson published his research on artificial neurosis. He said the implanted lie should be "a reproachable act committed by the subject—an act which would be contrary to the subject's usual personality trends." (Erickson, Huston, and Shakow, 1934, p. 66) In another Erickson experiment,

...hypnotized medical students were told they had illegally performed an abortion...he was able (in nine out of twelve subjects) to suggest the presence of conflict, to induce guilt feelings, and to proceed successfully with the experiment; that is, to obtain in six of his subjects both psychological and physiological disturbances. (Marcuse, Hypnosis: Fact and Fiction, p. 112)

In 1942, P. L. Harriman reported in an article called "The Experimental Production of Some Phenomena Related to the Multiple Personality" that he had implanted conflicts, under deep hypnosis, in ten subjects. Then he concealed the implants from the subjects' conscious minds by sug-

gested amnesia. He used automatic writing to test whether the implanted conflict was finding unconscious expression. The subjects were consciously unaware of their implanted conflicts (and of their automatic writing), but the writing which he suggested that they do while hypnotized showed that their conflicts were unconsciously active. Their "personalities had been changed."

Jules H. Masserman was a University of Chicago psychiatrist who continued the work of integrating Pavlovian concepts of conditioning with Freudian concepts. In a 1943 book, *Behavior and Neuroses*, Masserman explained compulsions, obsessions, masochism, etc., in terms of the Pavlovian/Freudian linkage. His conditioning theories were based on animal research—experimental neuroses he created in cats and dogs.

Masserman taught animals to find food by opening a food box in their cage in response to a certain noise. Then, the moment the animal opened the box, he gave a severe electric shock, or a terrifying blast of air. It took only one or two such incidents to make the animals neurotic. Fear now was in conflict with hunger.

Two powerful instinctual drives were in direct opposition. Eventually, fear won. The animals



would no longer eat.

In 1945, a psychiatrist and narcohypnosis expert described solving a man's problem by giving him "an experimental conflict." His series of suggestions concluded:

You will not consciously know what it is, but it will nevertheless be on your mind. It will...govern your actions and speech, although you will not



1. Modern knowledge of the molecular basis of brain chemistry and the various emotional states has caused near abandonment of investigation into mental distress caused by stress or misprogramming. It is so much easier just to give somebody a pill which will repress excess neurotransmitter or to cause a shortage of some kind of neurotransmitter rather than to struggle trying to change problem programming or problem circumstances. Most cases of mental illness are caused by dysfunctions of brain chemistry and drugs are the answer. But, in some cases, the problem is the client's life circumstances, or his programming. In those cases, the best treatment would be non-drug. Change the patient's circumstances or the patient's beliefs (programming).

*be aware that it is doing so. (Wolberg, **Hypnoanalysis**, p. 302)*

By the late 1960s, hundreds of hypnotic experiments had been done on hypnotically-caused emotional states and shifts of state, such as depression, elation, and rage. For decades, researchers also studied repression, rationalization, and displacement using suggested unconscious conflicts. They established that:

With the aid of hypnotism it is possible to reproduce, artificially and temporarily, the diverse symptoms of hysteria, or with equal ease to make a manageable laboratory model of compulsion neurosis. By the same means, one can create an artificial "complex," making it effectively "unconscious," and, for the first time under controlled

*conditions with known antecedents, study the irruption of unconscious strivings into the normal stream of behavior and the methods of defense set up against them. (R. W. White quoted in Moss, **Hypnosis in Perspective**, p. 119)*

Young's classic list of hypnotic techniques that can be used for unethical purposes ended with artificial neurosis. He explained that

...by means of illusions, delusions, age regression, transidentification, and other powerful devices available in hypnosis, the personality can be temporarily so altered as to circumvent the ego demands and implant complexes which are as bona fide as those of a neurosis or a psychosis... (Young, 1952, pp. 406-7)

Focus Shifts to Child, Real or Suggested

Could they [adults] be returned to a state of neurologic and psychologic infancy for a short period, and then could new patterns of behavior be introduced?

Ewen Cameron, quoted in John Marks, *The Search for the Manchurian Candidate*, p. 108

In the 1950s, research on methods of artificial personality splitting also began to make use of the Freudian views of early childhood development and the psychology of the hypnotic subject.

Freudian Hypnosis Researchers

Sandor Ferenczi was one of the first **psychoanalytic** (Freudian) hypnosis researchers. Writing between 1916 and 1926, he hypothesized that hypnosis resurrects and reactivates a childlike persona in the subject's unconscious. He said that persona is characterized by abject dependency and Oedipal cravings toward the hypnotist (who is unconsciously viewed as parent). Ferenczi believed that a normal adult represses the unconscious wish to regress to childhood, but trance turns off the conscious mind and frees those immature desires to shape the subject's role in the hypnotic relationship.

*...the situation during hypnosis tends to favor a conscious and unconscious imaginary return to childhood, and to awaken reminiscences, hidden away in everyone, that date from the time of child-like obedience. (Ferenczi, **Contributions to Psychoanalysis**, p. 375)*

Ferenczi defined two styles of hypnotic induction and management which reflected that regressive element. He called them **maternal** and **paternal**. The maternal style of induction is conventional, gradual, polite, considerate, gentle, cooperative, and based on love or persuasion. A maternal-style hypnotist's voice is warm and friendly. A maternal induction lulls, persuades, or bores the subject into trance. Ferenczi said that a subject in a maternal hypnosis rapport is motivated by a need for **love**.



The paternal induction style is abrupt, shocking, dictatorial, highly authoritarian in tone, a domineering technique based on fear. A paternal-style induction uses a fast, directive induction method with a cold, unfriendly tone of voice. Ferenczi said that paternal hypnosis reawakens the hating and fearing attitude learned by a little child when disciplined by his parents. He said that, in paternal hypnosis, the subject is motivated by need for “abasement” and for “compliance.” According to psychoanalysts, that need

for abasement is an infantile, erotic, masochistic complex. Such a subject is in awe

of the hypnotist, and submits to the operator’s demands out of **fear** of him.

...the hypnotist with the imposing exterior, who works by frightening and startling...[is like] the stern, all-powerful father, to believe in, to obey, to imitate whom, is the highest ambition of every child...[hypnosis] consists in the deliberate establishment of conditions under which the tendency to blind belief and uncritical obedience present in ev-



eryone, but usually kept repressed by the censor (remains of the infantile-erotic loving and fearing of the parents), may unconsciously be transferred to the person hypnotizing... (Ferenczi, *Sex in Psychoanalysis*, Ch. 2)

Ferenczi believed instinctive Oedipal impulses were at the very center of hypnosis.

*The capacity to be hypnotized...depends on the positive, although unconscious, sexual attitude which the person being hypnotized adopts in regard to the hypnotist....[The hypnotic subject] is really in love with the hypnotist, and has brought this tendency from the nursery. (Ferenczi, *Theory and Technique of Psychoanalysis*, p. 473)*

Hypnosis always arouses a childlike state of mind: **dependence** and **transference**. Transference means relating to the hypnotist as if to a parent figure, hero, or godlike spiritual leader.

...the hypnotic subject is being directed to assume a state of mind in which mature discriminations are excluded and childish dependence upon the hypnotist is encouraged. As some people are pleased to be in a state where life seems narrowed down to an easily manageable level of closeness with a powerful guiding parent, hypnosis is in no danger of extinction... (Kovel, p. 209)

In the midst of World War II, Margaret Estabrook reported, in a Seattle newspaper, on research which created an artificial childhood:

...hypnosis is a peculiar relationship between two people. The hypnotist is a figure of parental authority, just as a doctor is to a patient, or a teacher to his pupil. Even more strikingly than in these other relationships, the subject tends to respond emotionally to the hypnotist in the same manner that he responded to his own parents in his childhood. In particular, "parental" commands in the form of suggestions are readily obeyed...(Margaret Estabrook, 1942, p. 1)

The artificial neurosis was created in a subconscious isolate defined as a child. The deeply hypnotized subject had been given a fake memory:

When you were a very small child, one and a half years old, your mother was taken to the hospital and your father made you drink milk from a cup. Up to this time you had been breast-fed. You thought it was your father's fault that your mother could no longer feed you. (Estabrook, p. 1)

The artificial memory was deliberately made painful.

When painful emotions have been aroused, as in the subject who accepted the weaning story, there is a natural tendency to forget or "repress" the cause of them. This is particularly true of childhood experiences.... (Ibid.)

Young children have a natural tendency not to remember painful things. A false memory that will predictably cause painful emotions, when implanted in a **hypnochild**, will be strongly repressed and resistant to uncovering and healing.

Mind-control researchers were looking for ways to cause hard-to-overcome amnesia. One way turned out to be loading a hypnochild subconscious isolate with guilt, pain, or shame.

Natural Development of Multiple Personality

How does multiple personality develop under natural circumstances? Since Freud, psychologists have understood that the earlier a trauma happens in a person's life, the more devastating (and hard to remember) it can be. Over 95% of natural multiple personalities develop as a result of some combination of monstrous psychological, physical, and sexual abuses in childhood. All persons who suffer from spontaneous multiple personality

...have a history of being severely abused; the disorder is thought to stem from ways some children try to mentally isolate themselves against the horror of unremitting abuse. (Goleman, pp. C1, C6)

Sybil's life story, told by Dr. Schreiber, is a well-known case history of a naturally-split personality. Her amnesia and multiple personalities developed during a childhood in which she was frequently beaten, shut up in closets, cruelly tortured, and nearly killed. The original Sybil-self escaped by dissociating, which created a split-self who suffered that torture instead of her.

E.R. Hilgard said that the cause of multiple personality can be traced to a "severely brutal period in childhood." (*Divided Consciousness*, p. 32) He detailed some elements of brutality that can result in a split personality:

...a disintegration of values at the heart of the family, with violent and excessive punishment, overt sexual assaults in childhood, unbalanced parental roles, one parent occasionally sadistic, the other rather passive and aloof. In resolving the conflicts over identification and guilt, and in try-



ing to cope in a context in which a unified strategy cannot work, the person divides...[and] the cause of the dissociations...lies in motivational conflicts that are often deeply unconscious. (Ibid., p. 40)

A Dutch psychoanalyst wrote in his post-WWII study of brainwashing:

The method of systematically exploiting unconscious guilt to create submission is not too well known. Guilt may be instilled early in life...[may] burden the child with a sense of guilt when he

*does not understand what was unmoral or wrong about a given act. (Meerloo, *The Rape of the Mind*, p. 81)*

A real child lacks understanding. It is a phenomenon of hypnosis that a hypnochild (created by suggestion) also does not understand. Therefore, suggested amnesia is hardest to overcome if the problem programming:

- a) embodies conflict;
- b) is implanted in a child, or a hypnochild;
- c) has associations to psychological trauma;
- d) embodies guilt and/or torture.

The Controllable Child

Here are the mental characteristics of a very young child:

- **Dependence**—Controllers say they are taking responsibility for another person's behavior or welfare. The silver lining of control, for the child, is the presumed privilege of dependence. A very young child must depend on adults to meet every need. Therefore, a young child humbly seeks approval and acceptance. It's a matter of survival. There's submission in any adult/child relationship, real or hypnotic.
- **Does Not Clearly Distinguish Fantasy from Reality**—A child does not clearly distinguish between fantasy and reality. Young children like to play pretend. Even when not playing pretend, a very young child does not distinguish reality from fantasy very well.
- **Accepts Logical Inconsistencies**—A young child's way of reasoning allows logical inconsistencies. That stage of nonlogical thinking is called **preoperational**. A very young child's mind passively accepts any logic provided by an authority figure, however preposterous it may appear to an adult mind. The child's literal and passive acceptance of whatever he is told resembles the acceptance of suggestions by a hypnotized person.

- **Obedience**—A child usually accepts a statement that he is guilty and believes that he deserves punishment. At the same time he internalizes the principle that he is in submission to the dominant punisher and must obey—or be punished. An adult mind understands that when the other person stops playing fair and begins to cheat, it is time to get OUT of the game. A child does not understand that.

- **Natural Amnesia**—Early childhood memories (before age three or four) tend to be inaccessible to adult retrieval. Very young children are naturally amnesic. Children—or hypnochild subconscious isolates—are more likely than adults to repress painful emotional memories.

- **Assumption That Might Makes Right**—Lawrence Kohlberg, a researcher on the development of moral reasoning in children, discovered that very young children reason on the basis that might makes right. So the child offers obedience to authority (and avoids punishment). Older they go through a "good girl," "nice boy" stage when adult approval is more important than anything else to them. So a child, or child split, might be urged to "be a good girl"—defined as doing what pleases the adult.

- **Greater Imprinting Capacity**—The earlier in life the programming occurs, the more deep-rooted and severe the psychological consequences are, and the more strongly driven an artificial neurosis may be.

Hypnochild Given Artificial Neurosis

The next technological advance in this black psychiatry sequence came when merely verbal hypnotic induction was replaced by **narcohypnosis**. It was Dr. Brickner, *et al*, who thus advanced this process of creating artificial neurosis. Their 1950 report, "Direct Reorientation of Behavior Patterns in Deep Narcosis (Narcoplexis)," described creation of a "psychotherapeutic method which utilizes directly certain neurophysiologic factors." The "neurophysiologic factor" was the forcing of their subject into a state of deep trance by drugging. They used intravenous sodium amylal

...because of the known accessibility and responsiveness of patients while under the effects of this drug. However, the doses we employed were much larger than those ordinarily used. (Brickner, 1950, p. 166)

They gave large doses in order to push the subject's chemical trance to a very deep level.

When the brain is in that state, specific psychological impacts often can be made with unusual directness. Frequently this results in unusually rapid psychological changes. (Ibid., p. 194)

Even the biggest doses of barbiturate did not make the subjects “patternless.” But the drug did create a physiological state of

...childishness and allowed the subjects' basic and primitive conditioning patterns which had been created early in life, to be stripped of their higher defenses...[and] directly susceptible to attack.
(Brickner et al, 1950, p. 166)

The “higher defense” that was stripped away was the subject’s **conscious mind**. The method was an IV drip of amobarbital sodium solution until the patient was in clinical coma.

Then Brickner read a **script** which pictured the patient in infancy, or early childhood. It dealt with the “early pattern” which they intended to reprogram. Each script followed the artificial neurosis model. It implanted a phony memory which was meant to become dominant over the subject’s real experience, and to replace it as a psychological dynamic in his personality in order to achieve the operator’s desired change in his behavior.

The script was read for an hour, either live or on tape, until the subject awoke from the drug trance. It was read to the drugged subject over and over during that hour, perhaps five times each session. They used an average of sixteen narcosis/script reading sessions to build the subject’s **new personality**.

The script regressed the subject to early childhood and then reprogrammed him while in that drugged hypnochild state. The hypnotist pretended to be a childhood parent of the drugged patient. The script created a phony, implanted “memory.” The new memory, thus im-

planted, was psychoanalytic dynamite. Brickner explained that an **incest** memory caused “unusually rapid psychological changes.” The script suggested

...a triangular (oedipal) situation, involving child and parents...WE HAVE NOT HESITATED TO GRANT COITAL RELATIONS WITH A PARENT...in a script... (Ibid., p. 172) [caps added]

The subject was kept totally amnesic about the new “memories.” “No conscious insight is given...” (*Ibid.*, p. 173)

Brickner’s Technique, Summarized—An artificial neurosis is an implanted set of false memories. The hypnotist lies to the subject; the subject believes those lies because he is hypnotized. Brickner used the following steps:

- The subject received hypnotic training and conditioning under very deep **barbiturate** narcosis.
- The script addressed the subject as a **child**.
- New, **false memories of childhood**, intended to be the basis for major, permanent changes in the subject’s personality, were implanted.
- Coital relations with a parent** was part of the script.
- The script was read to the subject **over and over**.



Operation Often: A Case History

Induction,
Disorientation, and
Reorientation



Sex Conditioning:
A Pseudo-Oedipal
stage



Obedience Training



Electroconvulsive
Shock



Psychic Driving

“I can’t believe that,” said Alice.

“Can’t you?” the Queen said in a pitying tone. “Try again; draw a long breath and close your eyes.”

Lewis Carroll, *Through the Looking Glass*

In the late '60s, because of leaks that disturbed the public, the CIA put new mind-control research procedures into place. From then on, no Agency doctor involved in drug research would participate in outside tests, and a subject's personal fate as a result of an experiment would not be recorded. Mindcontrol experiments involving narcohypnotic drugs conducted “outside” the Agency would now be done by persons who were not Agency doctors, and those persons would not keep written records. Soon after this new policy was in place, the CIA began a bold new mind-control research program called **Operation**

Often.

...Beginning in 1969, a team of Agency scientists from the Office of Research and Development (ORD) ran a number of bizarre and potentially far-reaching experiments in mind control...The most innovative and daring doctors had been transferred to ORD, and a number of young consultants from civilian medical research laboratories had been recruited...It would be called Operation Often. (Thomas, p. 273)

Long-Term Operator-Subject Relations

What were Operation Often's goals? Did "Often" refer to a hypnotic subject in a long-term relationship with his operator? Marriage? In 1962, Orne said of the cases of Z, Mrs. E., and Palle: "In each of the reported cases a quasi-love relationship preexisted, or at least developed concurrently with the use of hypnosis." (Orne in Estabrooks (ed), *Hypnosis: Current Problems*, p. 171)¹ In 1972, Orne again pointed out that known cases of exploitative hypnosis had a "long history of extremely close personal association" ("*Can a Hypnotized Subject Be Compelled to Carry out Otherwise Unacceptable Behavior?*" p. 111). He concluded his "review of the literature" with the statement that

...extant material does not indicate that an unsuspecting individual can be tricked into hypnosis and compelled to undertake behavior to the advantage of the hypnotist in the absence of a long term meaningful personal relationship...

If an unsuspecting individual was involved in a long-term, meaningful personal relationship, could he or she then "be tricked into hypnosis and compelled to undertake behavior advantageous to the hypnotist"? Would preexisting friendship, even love, increase vulnerability to the first induction? Would a subject who already loved his or her future hypnotist transform more efficiently into a hypno-robot after the first induction? Lifetime pairing with his subject would certainly be convenient for a hypnotist. Would this subject (a partner or spouse) be the ultimate controllable machine-mind because of the underlying love relationship? Only terminal experiments could answer all those questions.

The following case history matches the Project Often time period and research focus. The conditioning took place in early 1969, in New York, one of the two long-time centers of CIA mind-control research. The conditioning was done by a technician and his assistant, both somewhat amateur. The technician's wife had previously been conditioned and was now her husband's useful hypno-puppet. The man who acted as the technician's assistant in the upcoming experiment on his own wife would be rewarded by also gaining the imagined benefits of a hypnoprogrammed, obedient wife.

Complete, Helpless Obedience

The two Operation Often trainers aimed to maximize their subject's susceptibility to hypnosis, then to create, energize, and seal off a subconscious isolate in her lower mind. The split was designed to be maximally repressed (unconscious), maximally obedient (reflexive), and maximally operational. They would train her to enter trance

on cue, at terrific speed, descending to any specified depth, even to great depth. She would learn to maintain that depth until instructed otherwise.

Her robo-split was designed to have no power of resistance or independent behavior. As in all unethical hypnosis, their goal was to put the subject into a state of "completely helpless obedience" (Young, 1952, p. 396). They wanted a combination of automatic obedience, complete posthypnotic amnesia, and irreversibility. Their control was intended to be permanent, unchangeable, never consciously known to the subject, and always available for use by the operator.

Combined Technologies

To an uninformed observer, the conditioning process they used would have seemed to be randomly cruel. Actually, it was deliberate, sophisticated, and technical. Their conditioning process combined methods from at least four major psychological traditions:

- a) **Hypnotic techniques** (including suggested amnesia), developed by European hypnosis researchers from Puységur to Janet
- b) **Conditioning methods** from Pavlov and the behaviorists
- c) **Freudian concepts** of the sexual unconscious and the dynamics of neurosis
- d) Modern **physical methods of psychiatry** (narcohypnosis, electroshock).

The script was intended to implant permanently, into the subject's unconscious mind, a series of self-oppressing, inflexible rules. It would also change that mind into an artificially-created multiple personality. The newly created split (for whose activities her conscious mind would be amnesic) would be trained into a fully controllable hypno-robot.

The complex **training script** took her through a series of **suggested personas**. New characteristics were grafted onto each persona to evolve it into the next. The personas were:

- 1) Fish
- 2) Little girl (age two or three)
- 3) Slut: maximized sensuality, Oedipal script

1. Coe, Kobayashi, and Howard also studied the link between the status of a longterm unknowing hypnotic subject and the nonhypnotic relationship.



- 4) Rules: an artificial superego which recorded operator input and provided reflexive obedience to any operator command, a “machine mind.”

Each stage, each ingredient, each persona was created while the subject was under **narchohypnotic immersion**. Each built toward the next. Each was made into a

building block for the ultimate edifice of a hypno-control-able, consciously unknowing, artificial personality split—what CIA goal-memos had called a **subconscious isolate**. The isolated persona was intended to dwell, thereafter, hidden inside her unconscious sector of mind, knowing all she knew, but unknown to her—and capable of overruling anything she might will, if the master so commanded.

Induction, Disorientation, and Reorientation

...if one were seriously attempting to induce antisocial behavior...he would seek to falsify the whole external and subjective situation for the subject, stepwise, of course, giving the subject only such suggestions as he could assimilate and giving him time to consolidate them...Into such a misperceived and misconceived world, the hypnotist with criminal design would insinuate his orders.

P. C. Young, 1962, p. 381

Here follows a detailed description of her conditioning. First came the induction, then a disorientation process, then a reorientation.

First Induction

The subject was acquainted with the technician. She was married to the man who helped him condition her. She had previously rejected urgings to let herself be hypnotized, spoken to her hypno-robot style by the technician’s wife. This fateful day, however, the urging was done by the fellows themselves, her husband and his best friend.

She succumbed to their persuasions. She gave **voluntary agreement** to the first induction. That was an important unconscious foundation for the coming pyramid of programming directives. Any friendship or love attitude toward a potential manipulator acts as a presuggestion that enhances the effectiveness of later hypnotic suggestions.

She had no idea what the two men really planned to do to her. They tricked the ignorant young woman into agreeing. They told her that being hypnotized would be fun. She assumed it would be just one afternoon’s adventure. She was seduced by the expectation that they would



spend the afternoon paying attention to her instead of going out to sit in the neighborhood tavern together (as had been often their pattern lately). Perhaps they also slipped her some oral barbiturate as a preparation, which would have rendered her even more persuadable. She had no idea that their real plan was to condition her for a lifetime of mind slavery.

The technician used a verbal sleep induction: “You’re getting sleepier and sleepier. You’re very tired. You’re so very, very tired.” He deepened the trance. He told her to lie down on the bed. She walked to the bed in the next room and lay down. He sat on a chair, at her left, beside the bed. Then he deepened her trance yet more. He told her to close her eyes. He “sealed” her eyes shut. She was not to open them again until he said she could.

As she lay with eyes “sealed” closed, he told her to stretch out her left arm and clench her fist. He said she would be unable to open that fist until he said she could. He said her entire left arm was becoming more and more stiff, and more and more numb.

Then the technician quietly stood up and walked into the adjacent room. There, out of her line of sight—if she had opened her eyes (but she did not)—the assistant handed the technician a needle filled with barbiturate in solution, which he had just prepared. The technician carried the needle into the bedroom. He repeated suggestions that her left arm was stiff and numb, with her fist firmly clenched. Then he injected the first barbiturate shot of the series into the big blue vein inside the elbow of that arm.

She did not feel the needle going in because her arm was numb. She did, however, feel the drug hit her brain. In that brief moment, before she completely lost consciousness, she realized that something was TERRIBLY WRONG. She knew he was drugging her. She had no idea why. She tried hard to wake herself up, to stop all this from happening. That effort came too late.

Disorientation

While she was deeply under the influence of the drug, the hypnotist began a deliberate disorientation process. She had no idea that she was being subjected to a period of intensive conditioning involving a deliberate, systematic procedure. The procedure involved unusual technical knowledge and would cause irreversible changes in the way her mind worked. She had no idea that one human being could do such a thing to another. Accordingly, she had no idea why the programmers—two people whom she

thought she knew well—were now behaving totally, wildly, out of character. They were doing things to her that she could neither predict nor comprehend. She did not know how either of them could know how to do such a thing as this.

Those circumstances were disorienting for her. The script deliberately disoriented her even more. The script’s step-by-step falsification of her situation created “a misperceived and misconceived world” into which the hypnotist’s orders were insinuated.¹ P. C. Young had said that if a criminal hypnotist used carefully planned, gradual techniques, it would be possible to slowly and completely change a subject’s personality into that of a hypno-slave. Indeed, that is what happened to her.

As a result of the script’s suggestions, she soon feels confused, lost. She is under water. With fish. Swimming. Fish swim away. Swim back, closer again. She doesn’t understand what it means.

As the operator reads the script, “Fish, mackerel, herring,” he stops for an aside to his assistant: “Pickled herring,” he jokes. The subject is in a deep narcohypnotic trance, so she does not comprehend the reason for their laughter. Deep trance strips away a subject’s ability to respond to a joke.

The programming script continues that deliberately disorienting patter: He is telling her to “go to the fish market...down by the sea...dance with the oyster man...on the shore playing...like in Alice in Wonderland...playing with the oysterman.”²

She tries to keep up with the changing images.
They are at the fish market?

No, they are down by the sea.

She is dancing with the oyster man?

No, she is an oyster, playing with the oyster man.

She is an oyster?

No, she is a **fish**.

Reorientation As Fish

The operator disoriented her for place and behavior. His onslaught next shifted to an attack on her human identity. He had been talking about water and different

1. This technique is also called **shaping**.

2. The script seemed indebted to Lewis Carroll’s poem, “The Walrus and the Carpenter,” in *Through The Looking Glass*. That poem is a tale of callous deceit and predation. It is also full of confusing riddles, contradictions, paradoxes, and word play. At its end, the Walrus and the Carpenter dine well on the naive little oysters.



kinds of fish. Now, he talked to her as if she were a fish too.

...the most central element of brainwashing [is]...the deliberate breaking down of identity, the reduction of the individual ego to a helpless cipher...First comes the stripping away of the symbols of individuality...friends, status, name. (Schefflin and Opton, p. 60)

Her identity was stripped to such an absolute minimum that she was not even a mammal! She was an armless, legless **fish**. This disorientation technique had been used previously by M. H. Erickson:

The subject was systematically subjected to a gradual disorientation for time and place, and then gradually was reoriented...The process is a slow one and involves jumping from one confusing idea to another until out of the state of general confusion the patient develops an intense need for some definite and reassuring feeling of certainty about something, whereupon he becomes only too glad to accept definite reassurance and definite commands. (Erickson quoted in Rhodes, p. 147)

The purpose of the fish's disorientation was to make her more willing to accept "some feeling of certainty about something," no matter how bizarre. They wanted her unconscious to accept their "definite commands." Now the script shifted from deliberately confusing and **disorienting** her to gradually **reorienting** her with a feeling of certainty about something (she was fish) and associated definite commands ("You will obey"). M. H. Erickson reported that

In reorienting the patient...the hypnotist was careful to be extremely dogmatic in tone of voice, but equally vague and indefinite as to his precise meaning. (Erickson and Kubie in Rhodes, p. 147)

By repeating the postulates over and over which he wanted her unconscious mind to accept, the operator

drilled them in. His language was precise, "extremely dogmatic," yet "vague and indefinite." He never let her know his real goal.

Training for "Can't Come Up"—*She's a fish. She's a fish swimming in the sea and she can't come up. Not for days and days. She's a fish. She has to stay down—down, down, down. Can't come up. Fish don't come up. He says she can't come up. She has to stay down, under the water.*

Being a fish, swimming underwater, was used as an image for being in deep trance. Deep level programming is strong when formulated as an **image**: fish underwater. He said, "You can't come up. A fish dies if it comes up." This image was used to train her to maintain depth, and to not wake herself up from trance after they switched from narcohypnotic immersions to regular cued inductions.

"A fish dies if it comes up," the operator had said. His use of the word "die" shocked her. She was in deep drugged trance. Words are taken literally. Threats seem real, even phony ones.

That was the first time one of them threatened her. With that threat, another ingredient was added to her new way of life: control by terrible threats which only her unconscious mind heard and remembered.

A fish is subhuman. Fish heard him say over and over, "I am the **master**. You will obey." It was as fish that she first experienced and gradually adapted to a psychological environment of seemingly endless humiliation, pain, and depersonalization: "*He is the master. I will obey... servant... fish...I am not a person.*"

She was fish. Swimming in water. At this stage of the conditioning, they "fed" the fish with needles, each loaded with narcohypnotic drug—but perhaps there was less drug and more water each injection. She was being trained to be a fish, not a person. She was now a nonperson who would always obey the master, and who "can't come up."

Capacity Regression

When a subject is regressed, in trance, to the physiological and psychological characteristics of an earlier level of development, it is called **capacity regression**. An older person, regressed under hypnosis to a five-year-old's mental capacity, is not truly that age. Her unconscious mind role-plays age five. Any susceptible hypnotic subject easily slips into the capacity role of any suggested age.¹ L. R. Wolberg wrote of

...regressing subjects to an infantile level, so that they lost the capacity for expressive speech...producing at the same time typical sucking and grasping movements... (Hypnoanalysis, p. 291)

LeCron and M.H. Erickson also demonstrated capacity regression in their research projects.¹

1. Pretended **age regression** can look the same as true hypnotic regression to observers, but the subject's mental experience of that event is entirely different. In some studies of **capacity regression** hypnotic subjects have behaved somewhat older than the actual suggested age. The best hypnotic subjects are intellectually talented and tend to be ahead of the usual childhood developmental norms.

Little Girl—The script continued to **pyramid instructions** in her mind. (A succession of instructions maintains, or increases, hypnotic depth.) The fish was now allowed to take on some qualities of a person, but only those of a very young person. “A worthless **little girl**,” the operator now called her. He told fish she was not very smart. He limited her to a two-, or three-year-old level of intellect. He let the fish be vocal, but with only a child’s capacity for speech.

“Fish,” she said, her intellectual function and speech now limited by **capacity regression**. Brainwashers know that when a person is treated like a child by persons who have ABSOLUTE CONTROL of her environment, she tends to act more and more childlike. She also tends to become dependent on her keepers.

Deprivation/Partial Restoration Technique

Candy’s split was rooted in her imaginary, child playmate, but allowed to emerge as an adult persona. The Operation Often script was a more advanced hypnoprogramming technology. It created a child split who was programmed to remain a child. Permanent capacity regression made the fish-child split more programmable, vulnerable, submissive, and gullible.

Taking away all of a set of qualities (her humanness), then giving back only part of that set (only childlike human qualities) was another Ericksonian technique. In 1932, Erickson reported a four-step method of eliciting profound obedience in hypnotic subjects. He hypnotized persons who could see normally, then suggested total blindness. Then he suggested that they were merely colorblind. After his distressing demand for total deprivation of sight,

his subjects gladly accepted a suggestion of partial restoration of sight—even though it was marred by suggested color-blindness.

Erickson used a four-step process to get that **profound obedience**:

- 1) “*Slow, gradual induction of a profound somnambulistic trance.*”
- 2) *Deepening of trance to absolute greatest possible depth.*
- 3) *Suggestion of extreme deprivation, followed by conditional restoration of the privilege.*
- 4) “*The induction of a profound amnesia, to ensue at once and to persist indefinitely...In addition, there were given vague general instructions serving to effect an inclusion in the amnesia of all connotations and associations...*” (M. H. Erickson, “**The Induction of Color Blindness**,” pp. 62-63)

He first suggested total blindness (the **complete deprivation**)

...to permit the spontaneous development of affective distress and anxiety over the subjective visual loss...[This was followed by] “restoring” vision in part, yet leaving a “limited” blindness, which would preclude the seeing of a certain color or colors. (Ibid., p. 63)

Following this model, she was first stripped of all humanness and became the fish. Then some limited, specified human qualities were restored to her.

Sex Conditioning: A Pseudo-Oedipal Stage

...the person to be dehumanized is forced to engage in acts of which he or she is deeply ashamed.

Schefflin & Opton, p. 60

“You don’t have any brains,” the technician told the fish-child. “Well, you have a few brains,” he amended, “but they’re located here.” He touched her pubic mound.

The next stage of this subject’s conditioning was the implanting of an artificial neurosis modeled on Freudian concepts of toddler psychological dynamics. She was immersed in an Oedipal scenario which would maximally stimulate erotic longings for the love of father and produce fear

of mother. This conflict would make her a split personality.

The early childhood wishes of an individual cause him to become hypnotized and thus gain gratification by expressing his Oedipus complex. Thus the individual regresses back to childhood which allows him to express his repressed love for one parent and his fear of the other. (Kuhn and Russo, p. 61)



Types and Degrees of Suggested Physiological Arousal

Under deep hypnosis, any physiological function can be affected by suggestion. Heart rate can be increased or decreased. The temperature of the entire body, or any designated part of it, can be raised or lowered. Mysterious blisters can be produced by suggestion. And then, by suggestion, they can be eliminated. Vomiting, miscarriage, and the start-up or stopping of breast milk production have all been successfully suggested. Much research has also been done on causing sexual excitement, by mere suggestion, to a hypnotized subject.

In 1884, Ladame, a French hypnosis researcher, mentioned a case in which "...it proved sufficient to blow lightly on the palm of our patient to trigger both a sexual orgasm and a complete reenactment of the coitus." (Ladame, 1884, pp. 333-334) In an even more extreme experiment

...Tissie hypnotized a patient, and suggested to him that the right ring finger would indicate sexual desire, and the left, abstinence. When the patient awoke, contact with the right ring finger caused sexual excitement, contact with the left subdued it. Once Tissie forgot to remove the suggestion, and the consequence was that for twenty-four hours the patient was unable to refrain from coitus and masturbation, as well as spontaneous emissions. (Moll, 1982 reprint, p. 119)

In 1962, Gerald S. Blum reported his experimental investigations of psychoanalytic theory, his development of a cybernetic concept of how the mind works, and his research on **degrees of affective arousal**.¹ Blum united psychoanalytic research on hypnosis, concepts from computer programming, and modern studies of brain function. He called his hypnotic training regimens **programming**. He worked to

...develop models of mental processes patterned after those of cybernetic circuitry. Cognitive arousal is viewed as analogous to an electronic gain control that serves to amplify the signal regardless of the informational content. Affective arousal is conceptualized as ranging from free-floating pleasure to free-floating anxiety." (Blum, "Hypnotic Programming Techniques in Psychological Experiments," in Estabrooks, ed., Hypnosis, 1962)

Blum experimented on "small numbers of highly trained hypnotic subjects, usually undergraduate students." (Ibid., p. 359) He prescreened to eliminate anybody with heart trouble or bad nerves because he was going to put them through hell. The subjects were then "trained to experience degrees of cognitive arousal, pleasure, and anxiety...degrees of organismic anxiety...levels of pleasure" (Ibid., p. 384). He measured degree of arousal by monetary equivalents. (Are you feeling \$40 good, or \$400 good?)

Blum explained that his suggested arousals stimulated the **primary process elements** of sex and aggression in his subjects. Those are deep-brain instinctual drives. Any suggestion **driven** by a primary process element is powerfully motivated. Hypnosis exposes

...the complex psychodynamic realm of primary process thinking, defense mechanisms...[of] S's [subject's] 'natural' dynamic themes to laboratory scrutiny. (Ibid., p. 385)

Hypnosis makes possible artificial programming of the subject's unconscious. That programming can create a drive which the operator can then use to power his chosen agenda.

The fish-child's programming for total unconscious surrender to the hypnotist was deeply eroticized. Sexual arousal lowers consciousness and increases suggestibility. They began this stage of the narcohypnotized fish-child's training with suggestions of mild sexual arousal. Then they built that feeling into a desperate, huge desire. They urged and pressured until the fish-child was shaped into a flaming, primeval, hungry-hungry, desire-desire **id** incarnate.

Masochism Suggestions

The drugged fish-child now began to hear suggestions of **masochism**: "Do you want to hurt? You like to

hurt, don't you? This is all your fault because you love to be hurt." The script urged her to be a "willing slave." The technician said, "It's nice to hurt. Hurt is good for you."

Linkage of pain and pleasure was intended to be an implanted foundation belief leading her to total unconscious surrender to his hypnotic control. The technician and his assistant told the drugged fish-child that she loved to hurt, and loved to be victimized. They were preparing her to accept a lifetime of hurt and victimization caused by hypnotic obedience. This concept also was from the psychoanalytic view of hypnosis:

...the nucleus of the masochistic attitude is not to

1. That combination is not strange when you consider that Norbert Wiener, founder of cybernetics, wrote that Freud's main concepts (neurosis, repression, the return of the repressed, abreaction, and the importance of early-childhood programming) could all be expressed in terms of mechanical brain function.

be found in the fact that the subject wishes to suffer pain, but that he subjects himself completely and unconditionally... (p. 40)...*We shall attain a more profound understanding of the psychology of hypnosis by beginning with the psychology of masochism...The Masochist identifies himself with his ruler. By means of his subjection, he shares the enjoyment of the greatness and power of the latter...* (Schilder and Kauders, pp. 41-42)

In 1941, R. W. White wrote that the “press of hypnotic dominance evokes a kind of willing surrender, a glad abasement...” (“*An Analysis of Motivation in Hypnosis*”) White said there were similarities between hypnosis and being in love.

An Oedipal Experience

The fish-child, age three, already programmed for humility and obedience, was next immersed in an Oedipal scenario.

Ever since Freud, hypnotists with psychoanalytic training have theorized that the unconscious prototype of hypnotic submission is molded in early childhood. Freudian hypnotists interpret the act of turning over one’s unconscious mind to be operated by the hypnotist as a **regression**. If the subject is male, the regression is driven by fear of the “father” or love of the “mother,” depending on the hypnotist’s sex. It works opposite if the subject is female.

“I am your father,” she hears the assistant say. The technician amplifies: “He is your father. And you are his daughter. You are three years old.” The assistant then suggests that she feels incestuous desire for Daddy. The drugged and regressed subject nods in wistful affirmation.

Desire for her opposite-sex parent, “Daddy,” intensified to the maximum possible degree, was their Freudian hook.¹ Fish-child, catapulted into a pseudo-Oedipal

stage by suggestion under narcohypnosis, now heard the technician say that she and Daddy were “going to play games” and have sexual relations. The technician chuckled, then continued, “You love him and you obey everything he tells you to do. Do you understand?”

“Yes,” the drugged woman murmured.

“Will you always remember the commands?”

“Yes.”

“Always obey?”

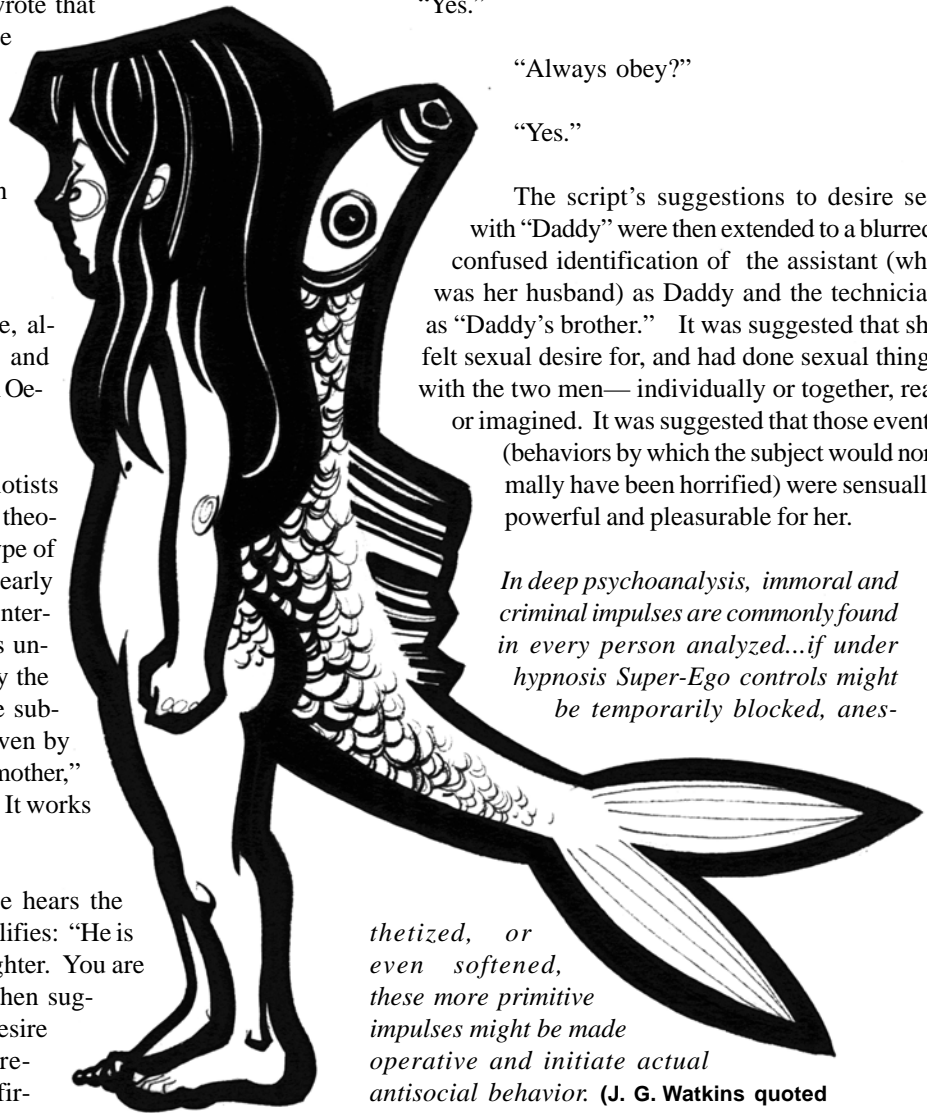
“Yes.”

The script’s suggestions to desire sex with “Daddy” were then extended to a blurred, confused identification of the assistant (who was her husband) as Daddy and the technician as “Daddy’s brother.” It was suggested that she felt sexual desire for, and had done sexual things with the two men— individually or together, real or imagined. It was suggested that those events (behaviors by which the subject would normally have been horrified) were sensually powerful and pleasurable for her.

In deep psychoanalysis, immoral and criminal impulses are commonly found in every person analyzed...if under hypnosis Super-Ego controls might be temporarily blocked, anes-

thetized, or even softened, these more primitive impulses might be made operative and initiate actual antisocial behavior. (J. G. Watkins quoted in Young, 1952, p. 394)

The “immoral...impulse” suggested and carried out in her drugged fantasy, was **incest**. Fish-child’s superego controls were temporarily blocked and anesthetized with



1. Freud said there is an **Oedipal stage** during which every little boy (at age three or four) feels strong unconscious sexual love for his mother, and a corresponding **Electra stage** during which a young girl unconsciously longs to replace her mother and be made love to by her father. Psychoanalytic theory sees this stage as a normal episode in a child’s psychological development (and usually calls them both “Oedipal.”) Since strong emotions of deep guilt and self-loathing tend to be associated with the forbidden desire, the thought is normally repressed. Conscience is being developed. The child then moves into a period of sexual latency which will last until maturity.



barbiturate. Children

...are unaware of the social meanings of sexuality... Further, the child does not have the freedom to say yes or no. This is true in a legal sense and also in a psychological sense...children have a hard time saying no to adults... (Finkelhor, 1979)

Their sex conditioning of the fish-child involved

both suggested and actual sexual assaults. The operators made sure their subject was genuinely stimulated and genuinely enjoyed that sensation. It is not unusual for sexually abusive experiences to arouse some degree of pleasure in the victim. Mike Lew addressed the victim's dilemma of "What if I enjoyed it?"

For many survivors, these pleasurable sensations are more upsetting than painful ones...It is likely

Limbic/Emotional Programming

The more imperative the excitement and the tension, the more foreign its setting for the subject, the greater the disturbance of behavior we may expect... Luria, *The Nature of Human Conflicts*, p. 253

Why was the hypnoprogramming done in a setting of intense sexual arousal (later, equally great shame and, still later, fear)? Luria said that the artificial neurosis was best accomplished by maximizing the subject's emotional feelings (lust, fear, anger). Emotions are based in a part of the brain called the limbic system.

Limbic Anatomy

The brain has three layers, all interconnected and interactive. Each has its own chemistry and structure. Each has its unique kind of intelligence, its own memory system, and its own method for sensing time and space. Each has individual access to motor functions and can operate somewhat independently.

The upper layer is the **cortex**. This part of brain consists of the left and right cerebral hemispheres and is analogous to a fully-programmable computer. The bottom layer (**brainstem** and **cerebellum**) handles the most automatic biological functions that have central nervous system guidance. The middle layer is located above the brain stem and cerebellum and below the cerebral hemispheres. The middle layer is called the **limbic system**.

The limbic system, where hormonal and neural systems connect, is the great powerhouse of the brain for emotional behavior. It generates the instinctive drive emotions: hunger, sex, and aggression. Freud called its function the **libido** or **id**. Emotions—pleasure, fear, anger, sexual desire—originate in the **amygdala**, a part of the limbic system. (Love is literally a higher function, based in the neocortex). The **hypothalamus** is a closely-related limbic center:

...the closest thing to our id is probably the hypothalamus, a small bundle of cells centrally located deep in the brain, near the top of the brain stem. This controls anger, joy, hunger, sex, fear and other drives. The most sensational development in all brain research was probably the discovery of pain and pleasure "centers"—really circuits—in or near the hypothalamus of animals. (Maya Pines, p. 18)

Curiously, in addition to being the center for our sex and aggression drives, the limbic system also is the switchboard center for our most treasured spiritual experiences. Limbic experiences are what convince us, convert us, and cause us to choose a particular system of values. The **Aha!** sense of realization comes from the limbic.¹

Limbic Function

Limbic programming...

1. Maximizes the potential drive to remember the programming
2. Maximizes the unconscious drive to repress the programming
3. Maximizes the dominance of the current programming over competing programming
4. Maximizes the tendency for the programming to be unconscious (limbic function is normally unconscious).

1. Martin Gardner coined that term in an issue of *Scientific American*.

to set off a chain of emotional reactions that lead to mistaken conclusions about the nature of abuse...One faulty path arrives at the belief that if any part of it was pleasurable, it wasn't really abuse...It allows perpetrators to confuse their victims into thinking that their participation in the abuse was of their own volition..."You enjoyed it" is a self-seeking statement by the perpetrator that attempts to mask the nature of abuse and

enlist the victim as an accomplice. (Lew, p. 132)

The operator then made the fish-child depend, for relief of suggested lust, upon his verbal hypnotic commands, another conditioning ploy. She learned to have an orgasm on hypnotic cue. Orgasmic training created and reinforced her unconditional surrender: FISH LOVES BAD...FEEL GOOD SEX...PLEASE ...FISH NEED... She was taught to enter trance instantly, on cue, by associating induction with

Maximized Drive to Remember Conditioning

Luria wanted to cause severe disturbance in his experimental subjects. Why? Because any strong emotion—sexual desire, anger, fear, or burning shame—reinforces the remembering process.

The suggested sexual arousal and emphasis on pleasure/pain events during the fish-child-slut's conditioning deliberately targeted her limbic system. The technician wanted his programming to be blindly accepted, firmly remembered, and never again conscious. So he programmed her with primary process linkages, in states of intense arousal. The hypnoprogramming suggestions sank into her powerful, instinctual, pleasure-seeking libido. The goal-seeking energy of that reproductive brain sector, which wants what it wants and wants it NOW, was being programmed and enslaved as a foundation for future control of her mind.

Blum studied the role of **amplification level** relative to the strength of conditioning. He compared the outcomes from various types of affective arousal—the array of possible emotions. (1962, p. 359) Hypnotic suggestions, given to a subject who is feeling the most intense emotion possible at the time, will implant with the maximum unconscious strength. With maximal associated emotion, programming in the unconscious is safest from deterioration, and it will be driven by the most energy.

Maximized Drive to Repress Conditioning

The more primitive the emotion (lust and rage), and the greater its intensity, the more likely it is to trigger a natural **repression**. If repression kicks in, it walls that memory off from conscious knowing. Urges of sex and aggression are both normally repressed. That type of repression begins as soon as a child is becoming civilized.

Maximized Dominance over Competing Programming

Primary process thought is drive-related thought. Drive-related thought is based in the limbic system. Any thoughts that are drive-related tend to be powerfully motivated. The limbic also has a built-in mechanism for motivating us without our conscious awareness of it. Emotionally-driven action tends to be reflexively dominant over intellectual reasoning in the brain circuitry. It can send a person into action before his cortex can stop it.

There is a good reason why we are made this way. We jump away from the sound of a suspicious rattle or from the sight of a long narrow silhouette under a nearby bush. We may, a moment later, realize that sound or sight wasn't really a snake. We reacted first, then analyzed the situation. That reflexive dominance helps to keep us alive. Normally, it doesn't harm us to jump from a false alarm, and it could badly harm us not to jump.

The limbic system has a dominant role in reflexive response because input is relayed to the amygdala first. The amygdala makes a reflexive response based on its programming. The input then moves on to the cortex for a second stage of processing which is more rational and detailed. That second stage may result in rejection of the first response. It's not a snake after all.

However, if the limbic programmed reflex causes the subject instantly to descend into a deep trance state, the rational center is blocked from participation until the subject is released from trance. If the subject returns to the analyzing state of consciousness with amnesia for what just happened, the **rational cortex** continues to be blocked from reprogramming the lower center.

If the amnesia did not exist, the conscious mind would use the appropriate and powerful emotions of rage, shame, and fear at being so used to reprogram itself and to make another such mind-invasion impossible. For it is emotion that gives us the power to reprogram ourselves. In this way, shame and pain can bless you by providing the energy to overcome previous, bad habits and achieve desirable real deep-level change.



effort toward orgasm (and also with craving for the barbiturate induction rush).

Does sexual conquest lead to compliance in other mental matters? “Sexuality to the mind of the patient involves unconditional love or surrender...” (Wolberg, 1964, p. 364) “If a response is...associated with a high level of motivation—the response is expressed vigorously,” a stimulus-response expert wrote. (Valenstein, p. 43) Rasputin was a priest-hypnotist whose influence was a factor in the fall of Russia’s last czar. A biographer explained his rise to power: “Unequivocal sexuality was a means of establishing authority, not just the result of an unbearable itch.” (De Jonge, p. 130).

The conditioning process also titillated the technician and his assistant:

The psychology of the hypnotized is incomplete without the psychology of the hypnotizer...He must feel incorporated in himself, in some obscure corner of his soul, this magical power; he must raise the demand for unconditional masochistic subjection and must bear within him the wish for the sexual subordination of the other person. The fear of violation on the part of the hypnotized necessarily is a concomitant of the wish to violate on the part of the hypnotizer. We very well know that lay hypnoses are—as a matter of fact—often made use of as means of sexual approach. (Schilder and Kauders, Hypnosis, p. 47)

SEX = HYPNOSIS

Then they taught the fish-child (and now slut) a terrible secret about the delight of sex. She learned that the incestuous sex (with “Daddy”) was the same as hypnosis. SEX = HYPNOSIS. Statements making that (preposterous) linkage were repeated over and over to her uncritical, nonanalytical, drugged, unconscious mind until it believed it. Hypnosis would be desired like sex. Revealing the secret act of being hypnotized would be feared as much as revealing the fulfillment of incestuous sexual desire.

SO ASHAMED: Guilt Training

The script now abruptly shifted from suggesting

extreme incestuous desire to suggesting equally extreme shame and self-denunciation. The technician already had suggested the sensual three-year-old fish-child-slut into being.

He had filled her with acute desire and trained her in abandonment to lust. Now he aroused an equally acute, extreme emotion of SHAME in her. He assigned to her all responsibility for feeling lust, for her sexual arousal, for her abandoned behavior (hallucinated or real).

Brainwashers first disorient the victim, then induce self-betrayal, then guilt. After forcing the prisoner to engage in those shameful acts, the captors shift to building guilt because of the shameful acts. Or, the captors may work to find out what their victim feels most genuinely guilty about, and then probe at that sore spot, hour after hour, day after day.

Hilgard’s Type One and Type Two Hypnotic Amnesias

E.R. Hilgard classified hypnotic amnesias (**dissociation**) into two types. **Type one is an amnesia which can be reversed under hypnosis and the memory retrieved.** Type one neurosis can be easily cured. **Type two is a more severely repressed amnesia and much harder to heal.** Hilgard said it was of a “psychoanalytic” nature.

[It] includes conflictual material arising in the earliest stages of development, when affect and ideation are not clearly distinguished, and when impulses are inadequately translated into verbal symbols. The repressed material may include later material deeply repressed because of its associations with trauma and guilt. Whatever the origins of the deeply repressed material, it is not directly recovered in free association, in dreams, or in the hallucinations of the troubled mind... (Hilgard, Divided Consciousness, p. 252)

Guilt can bring a person to a breaking point. It can even cause multiple personality. In children of the fish-child-slut’s suggested age, experiences of betrayal, confusion, brutal domination, and an intolerable burden of guilt are known to have caused spontaneous personality splittings. The fish-child-slut had, already, been put through betrayal, confusion, and brutal domination. Her guilt training came next.

The programmer said, “You love it. It feels so good. You’re so ashamed. Don’t tell. You mustn’t ever tell. **It’s secret, don’t tell.**” Again and again he told her how BAD she was for feeling those feelings: “BAD, BAD, BAD. It’s all your fault. You’re SO ashamed.”

Her narcohypnotized brain accepted this new layer of suggestions. She felt excruciating, intolerable shame. The programmers built those shame feelings up to the maximum possible degree of limbic intensity.

Why was the technician doing this to her? There were at least two reasons:

- 1) This process mimicked the natural development of masochism—which is an unconscious willingness (or even desire) to be abused. Research has shown that adult victims of child abuse will accept cruel and hurtful use in later intimate relationships if they unconsciously be-

lieve that the treatment they experienced in childhood was deserved because they were “bad.”

- 2) They were creating a conflict which would be used to drive an amnesia program (splitting her personality). Sex, shame, and rage (especially in a child or a hypnochild persona) are so very painful to the conscious mind that there is a natural tendency for the mind to repress them.

DON'T REMEMBER: Amnesia Resolves Drive Conflict

Next, the script pushed her to solve the artificial conflict by instituting a very real **amnesia**. She was now experiencing both a maximal intensity of desire, and a maximal intensity of **shame** and **fear**. She had learned that the SECRET DELIGHTS OF SEX were BAD PLEASURE (BAD BAD BAD). Luria called her present condition a **motivational conflict**. Other authors called it

a **drive conflict**. “Bad pleasure” was a drive conflict. Using the terrible, terrifying shame, the script pushed her to a literal mental breaking point: **DON'T TELL**.

They were now drilling in a new rule. It was a rule of **repression** that resolved the conflict. Over and over, they said, “You must not remember. You are so ashamed. You must forget. You must never remember because you are so ashamed.” The fish-child-slut registered the new rule in her limbic system circuits. She obediently repeated it for the masters:

“DON'T REMEMBER...FISH BAD FISH...FISH LIKE BAD SEX...BAD FISH LIKE SEX TOO MUCH...BAD BAD FISH...WON'T REMEMBER... HYPNOSIS... SEX-HYPNOSIS ... MUST NOT REMEMBER ...FISH IS BAD, BAD... SECRET FISH... MUSTN'T TELL. FORGET BAD GIRL.”

Now they added one more, devastating, element to the Oedipal scenario. They had already aroused maximum guilt and fear in the Oedipal scenario (those BAD sexual desires and acts with “Daddy”). Now the operator directed her unconscious guilt and fear toward “Mama.” They told her drugged, unconscious mind that her conscious mind was Mama. Over and over, they repeated that she MUST keep all this secret from “Mama.” “Don't tell. Don't tell Mama,” the programmer said again and again.

“SECRET, DON'T TELL,” she echoed their words.



“SO ASHAMED, DON'T TELL. MUST NOT TELL. MUSTN'T TELL MAMA. DON'T TELL MAMA. SECRET, DON'T TELL.”

Amnesia Results in Split Personality—
Once the fish-child-slut accepted that piece of brilliant, but



malignant, programming, the subject's artificial neurosis—and her artificial personality splitting—was accomplished. An unconscious part of her mind had been persuaded to build a wall of amnesia. The wall blocked off its own conscious mind from access to the memories and knowings that the unconscious split possessed. From then on, one part of her mind (the split) knew, but was afraid to tell. Her conscious mind did not know and would, supposedly, never know.

Buried guilt (or aggression), isolated from the conscious mind's light of reason, tends to be exaggerated, intense, irrational—and therefore powerful. After this, her conscious mind did not know what happened during the times when her secret split-off self was called out (under hypnosis).¹ The technician had caused a **mental reorganization** (a CIA euphemism for artificial personality splitting) in her brain. Because of the wall of amnesia, the part of her to whom those SECRET things had happened thereafter developed as a distinctly different mind. She was an artifi-

1. All this took time. The brain has (literally) to **grow** major changes in its organization: "It is now acknowledged that subjects must be allowed sufficient time to achieve desired psychophysiological reorganizations..." (Gorton, "*The Physiology of Hypnosis*," p. 30)

Military Limbic Hypnoprogramming

Walter Bowart began researching the subject of military hypnoprogramming after...

A young man I'd known since childhood had returned from a tour of duty in the U.S. Air Force, with amnesia, remembering nothing of his service years, except having had a good time. He subsequently learned, through intensive private psychotherapy, that he'd been hypnotized and conditioned. His mind had been unmade, then remade: his mind had been controlled.

*I was completely fascinated by his story, but naturally, in 1973, I thought it was an isolated, single event. Then, quite by accident, a few months later, I overheard another man in my hometown telling what was essentially the same story....After hearing the second story I began to wonder how many more men had their memories erased. (Bowart, *Operation Mind Control*, pp. 21-22)*

Bowart ran ads in several magazines seeking:

...ex-servicemen who have reason to believe they were hypnotized (or drugged) while in the service and subsequently exhibited signs of amnesia or hypermnesia... (Ibid., pp. 21-22)

He received more than a hundred replies. To eliminate the possibility of war trauma amnesia, Bowart rejected all those who had been in actual combat. He also rejected those who had no security clearance or had not been connected somehow with military intelligence. The remaining eighteen men all had security clearances, were connected with military intelligence, had great difficulty remembering their conditioning period, and could remember only isolated events from their military years.¹

Over the next two years, Bowart interviewed those eighteen men in depth. He also researched the general technology and history of hypnoprogramming. He asked friends who had military intelligence credentials to search the M.I. Classified Index for titles of government studies in "drugs, hypnosis, behavior modification, and related subjects." They found nothing of significance, only peripheral references.

Bowart did find some relevant-sounding articles, written under numbered military contracts, cited in the bibliographies of scientific journals. He searched the National Technical Information Service catalogue card files in Washington, D.C., looking for the numbers of those military contracts. The NTIS catalogue lists all government contracts, classified or not, in numerical order. He found numbered entries about which information was publicly available, but none of those dealt with military hypnoprogramming. He found numbered entries marked classified, but none of those were relevant either. The particular numbers which Bowart sought (the ones he had found in the bibliographies of hypnosis articles in civilian scientific journals, the ones he believed dealt with government mind-control research) were all missing from the index.

Operation Mind Control

Bowart organized what he had learned from interviews with the men who answered his ad, and the general background research, into a book about military and CIA hypnoprogramming, *Operation Mind Control*.² He summed up, in one chapter, the

1. Also, none of them could remember their childhood normally. Bowart never mentioned if their unconscious isolate was defined as a child. If the artificial split personality was a "child," its repression programming could generalize to the subject's real childhood, making it also difficult to remember.

2. Bowart's book is long out of print and hard to find. He seems never to have written another. I located one rough photocopy through a bookstore and one original by interlibrary loan from the Air Force Academy Library. Using the library loan system requires placing your name and address on record. For Bowart's book, you may prefer to avoid that.

cially-created multiple personality.

Communication Rules—The technician drilled into her mind several strict rules regarding future communication by the fish-child-slut:

She could speak only to the technician or his assistant and only when called out in hypnosis.

She could communicate only in dirty words.¹

She could communicate only in a state of steadily (slowly) increasing sexual desire.

The last two rules amused the masters. They further gagged the fish-child-slut. Her speech form and physiological condition while speaking would be inadmissible in polite company. If she ever told what she knew, the listener

1. M. H. Erickson learned that vulgar or suggestive language is powerful at the unconscious level. In "The Method Employed to Formulate a Complex Story for the Induction of an Experimental Neurosis in a Hypnotic Subject," he deliberately worked crude sexual references into the story to be implanted. This may have been a factor in their choice of rules.

experience of those eighteen men as a composite he called "David":

...many of the stories I uncovered have been left on the editing room floor. Each individual in this book stands for and tells the story of many victims of mind control. (Ibid., p. 25)

"David" was a bright, ambitious, young man of good character who enlisted in the U.S. Air Force, in 1969, for a four-year hitch. His enlistment process included a thorough assessment of his personality, character, and hypnotic susceptibility. Markers for susceptibility included high intelligence and having an imaginary playmate as a child. All Bowart's interviewees matched on both items.

The men told Bowart of a scene in which

"It seemed like somebody was violating me—raping my mind. I was strapped down in the bed. I was yelling and screaming about something. I'm not the type of person that cusses that much. I hardly ever use foul language, but I know that I said some pretty foul things to those men who were with me. They were officers, and in the service you can't call a superior officer an obscene name without getting punished. Yet I don't think I was ever reprimanded..." (Ibid., p. 29)

That description gives the impression that their conditioning process, like that of the fish-child-slut, involved Freud's primitive instinctual drives. In these males, however, the rage drive appears to have been maximized instead of the sex drive.¹

The body's first response [to anger] is a surge of energy, the release of a cascade of neurotransmitters called catecholamines. If a person is already aroused or under stress, the threshold for release is lower... (Ibid.)

After the limbic system was fully stimulated, the splitting suggestions would come next.

Project Monarch

Mark Phillips, in a short piece, privately published, also described military use of hypnoprogramming. He said Project Monarch was a "trauma-based psychological mind control." It used two different conditioning routines, "Alpha" and "Beta." "Alpha programming is accomplished through deliberately subdividing the victim's personality."² He said "Beta" programming was

...a combination of Alpha 'logic' programming and Beta primordial (primitive mind) sex programming.... This programming eliminates all learned moral convictions and stimulates the primitive sexual instincts devoid of inhibitions.

Alpha sounds like rage-trauma programming for males. Beta sounds like the Operation Often process of sex conditioning. Phillips said the purpose was to create a superperson:

The original purpose of Alpha was to program (train/condition the mind through torture) the espionage agent to perform certain difficult tasks...lock in photographic memory...along with...other superhuman traits.

1. Anger "usually arises out of a sense of being trespassed against—the belief that one is being robbed of what is rightfully his." (Gibbs, p. 64) They were indeed being robbed: of the right to one mind, indivisible.

2. Phillips also spoke of left-right brain division followed by a controlled reconnection. Both the division and reconnection probably were accomplished by suggestion rather than surgery.



would hear thoughts expressed by a naive three-year-old persona in a state of growing sexual excitement and using

shockingly crude language. Such communication was unthinkable.

Obedience Training

It has been known for many years by researchers in the field of hypnosis that terror, especially when created by physical torture, is brutally effective in enhancing the power and control of the hypnotic trance. The subject's suggestibility increases, and he becomes more compliant in order to bring an end to suffering.

- Bain, *The Mind-control of Candy Jones*, p. 210

The new, split-off personality had finished its pseudo-Oedipal training stage. Next she was subjected to a pseudo-anal stage: **obedience** training.

Aversive Conditioning

Their method for obedience training is called **operant conditioning**. This is the carrot-and-stick method. (They continued to work with her in a condition of drug-hypnosis.) The carrot was freedom from pain. The “stick” was an electric prod. **Aversive conditioning** is a technical term for the stick side of the operant equation. It means training by **punishment**. The prod taught her secret split to eliminate hesitation (**resistance**) and instantly obey any instruction given under hypnosis. This conditioning phase compelled the fish-child-slut to become a humanly intelligent stimulus-response machine.

The training was simply a series of difficult obedience tests given, to her, in the presence of the prod. If she showed the least hesitation, or resistance, to any command, the assistant touched her skin with the end of the thick metal stick. The shock-punishment was so swift, certain, and painful that her fear was stimulated to the greatest possible intensity.

Classic Pavlovian Conditioning—Aversive conditioning is a type of classic Pavlovian conditioning. Mowrer (1946) explained that aversive conditioning is a three-step process with the linking variable of fear:

- Stimulus (prod) causes fear, a powerful drive.
- Fear of prod produces linked fear of disobeying, which then also acts as a drive.
- Subject learns to obey.

In the language behaviorist conditioners use: fear of the shock had **generalized** in her mind to become fear of the behavior (failure to obey reflexively) that resulted in shock. In aversive conditioning an **alternative response** must be available which will not be punished. The fish-

child-slut's only available safe response was to obey reflexively any hypnotic “suggestion”: instantly, unthinkingly, mechanically, without analysis, evaluation, or deviation. Learning by **association**, she soon feared delayed, or incomplete, obedience as much as she feared the shock. She had dealt with her fear drive by learning to avoid behavior that caused the shock.

She learned to drink whatever she was told, eat whatever she was told, do whatever she was told. Disobedience to any hypnotic suggestion became unthinkable. They were the omnipotent masters and she obeyed—no matter how objectionable, outrageous, humiliating, or self-defeating their command was. In this prodded phase, she acquired a **habit** (reflex) of automatically performing the technician's hypnotic commands. In trance, she was now a kind of enflashed robot.

The extremities of pain, shame, and useless anger she went through, in this stage and in other stages of her conditioning, also taught her unconscious mind helplessness. She **learned helplessness**. That further reinforced the power of the masters in her unconscious mind.

Artificial Superego: Rules

A mind does not normally split into just two parts. In natural personality splitting, the original mind tends to fracture into at least three parts: 1) the original personality, 2) a libido split, and 3) a superego split. The script foresaw that tendency. The operator now programmed a third major split. This one was an **artificial superego**, an unconscious balance to the fish-child-slut's libido-identity. She became the fish-child-slut-Rules.

The rules were all their rules. The fish-child-slut-Rules sector of the subject's mind now, more carefully than ever before, recorded and stored every word the masters spoke while she was under hypnosis. Those words were the Rules. Hypnotic obedience, action in conformity to the Rules, was now her unconscious mind's strongest deciding parameter. Rules ruled.

Her basic conditioning was done. They had built into her unconscious mind a servant (fish-child-slut-Rules)

who would always do the master's bidding—even if painful, shameful, or self-injuring.

Electroconvulsive Shock

Inducing amnesia was an important [CIA] Agency goal. “From the ARTICHOKE point of view,” states a 1952 document, “the greater the amnesia produced, the more effective the results.”

John Marks, 1979, pp. 40-41

The two Operation Often programmers also wanted an **unbreachable amnesia** by which to cover the tracks of their invasion of the subject's mind. Keeping the methods of their secret technology securely hidden was a high priority for them—and also for the persons who had provided the tools of that technology to them. Amnesia caused by fear of unconscious threats, or by suggestions under narcohypnosis, is strong, but they knew an even more powerful method to generate amnesia. It would leave their conditioning implanted in her unconscious intact. It would erase all remaining conscious memory of the past weeks during which they had been conditioning her.

They used a portable electroshock machine to give her a series of electroshock knockouts.¹ Those electro-assaults caused a **retroactive amnesia** affecting memories of her conditioning period. The shocks might cause some brain damage. That was a reasonable price (in their view) to most fully ensure secrecy. The shocks also made her more suggestible, less able to resist, and (by the last of the series) rendered her bizarrely “calm.” Thus it happened that, one morning, the subject found herself strangely calm—and unable to remember what had happened during the preceding weeks. There have been similar cases.²

15 March, 1995, two patients of New Orleans therapist Valerie Wolf testified before the Advisory Committee on Human Radiation Experiments....they were permitted to testify because some of the names of CIA-connected researchers they mentioned were already familiar to the Committee....

[They] remembered sessions when they were around eight years old that involved electric shocks, hypnosis, shots with needles...sexual abuse and even training in intelligence tradecraft. One case occurred from 1972 to 1976 and the other in 1958. This testimony was not covered by the media.

(Daniel Brandt, *Prevailing Winds/3*)



1. John Marks said the CIA made portable electroshock machines available to its operators.

2. The report in John DeCamp's *The Franklin Cover-up* that the CIA turned children into split-personality “sex slaves” is likely derived from this Operation Often programming technology.



Electroshock in Military Hypnoprogramming

Finding electroshock being used in association with hypnoprogramming was a total surprise to Bowart as he interviewed his military subjects. After hypnoconditioning, "David" woke up in a hospital bed. He did not remember the shock series. He did not remember the past six weeks. But he did remember waking up:

...Through the gray waters of amnesia he drifted, coming back from blind coma...David's body lay still in the military hospital bed...Then his eyes opened. "When I woke up," David said, "I couldn't remember anything. I couldn't remember how I'd gotten there or why I was in the hospital." (Bowart, David chapter)

He asked the doctor why he was there. He was told that his treatment was because he had tried to commit suicide. He didn't believe that. He was then tested by two men doing a traditional nice cop, mean cop interrogation routine:

"One guy would ask me questions in an accusatory manner. Another guy would come over and say comforting things. Then the first guy would come back and accuse me again. Then the second guy would come and pat my arm and be friendly. I could remember their faces and their tone of voice, but I couldn't remember the content of what they were talking about." (Ibid.)

Hypnotists have three routine tests for deep trance control: 1) suggested amnesia, 2) obedience to a complex posthypnotic suggestion, 3) negative hallucination. David's amnesia was complete so item one could be checked off. He obeyed the complex posthypnotic command to be able to remember his interrogators' faces and tone of voice, but none of the content of what they were talking about. Item two could be checked off.

The negative hallucination might have concerned the presence and activity of a fourth man in the room, someone whom David had a posthypnotic suggestion to neither see nor hear. If such a fourth person observed David's failure to see him, item three could also be checked off.

Before the ECT series commenced, Bowart's interviewees were emotionally upset, yelling enraged obscenities at an officer. But they were all totally **calm** after the shock treatments: "I was not resentful. I was passive." (Ibid.)

Psychic Driving

Accompanying the interview was a photograph of a young woman wearing headphones and the caption described her listening to her repeated confession ...[Dr. Cameron] was confronted with the "same problems as professional brainwashers" because his patients, like prisoners of the Communists, tended to resist and had to be broken down.

- Thomas, *Journey into Madness*, p. 170

Electroshock leaves subjects "confused, vulnerable, and open to hearing repeated messages." (Weinstein, 137) Cameron's overall concept of how to reprogram persons was a seductively simple two-step process. First he **blanked** the subject's brain with electroshock.¹ Then he attempted to drill what he considered a new, better personality into that supposed blank. His procedure required

(1) the breaking down of ongoing patterns of the

patient's behavior by means of particularly intensive electroshocks (depatterning);

(2) the intensive repetition (sixteen hours a day for six or seven days) of prearranged verbal signals (psychic driving);

(3) during this period of intensive repetition, the patient is kept in partial sensory isolation... (Cameron

1. He also called that process **depatterning**. This author calls it blowing them to hell with electric zaps.

quoted in Thomas, pp. 129-134)

After being electroshocked, fish-child-slut-Rules heard certain simple messages repeated over and over. One of them was I WAS BAD BUT NOW I'M GOOD. Because of psychic driving, I WAS BAD BUT NOW I'M GOOD became the unconscious foundation thought for her conscious personality's new life as an unknowing hypnoprogrammed person. She learned to believe that her programmers had helped her by making those changes in her mind. They had "fixed" a "bad" person by turning her into a "good" person.

Dr. Cameron promoted this method of reprogramming people by making them listen to a repeated, recorded message. His goal was to get a message permanently implanted in the subject's unconscious mind. His psychic driving technique could be used to break a subject, or to implant a thought in the subject's mind.

Messages driven in over and over by repetition on TV or radio are an type of psychic driving called **advertising**. When you listen to the same song played over and over, you're allowing that song to program you—psychic driving. A thought that returns to mind again and again can be a symptom of **neurosis**. By that definition, psychic driving deliberately creates neurosis. Cameron also called it "beneficial brainwashing."

After Cameron believed that he had depatterned people's minds with electroshockings, he attempted to reprogram or "re-pattern" them using repeated, taped messages driven in by headphones which the subject was compelled to wear. He began researching psychic driving in 1953, well before portable cassette tape players with tiny earphones hit the market. Cameron's subjects wore primitive headsets with heavy ear coverings.

His method was depersonalized, technologized, and had potential for mass application. In his first grant application, to the Society for the Investigation of Human Ecology, for money to research psychic driving, Cameron explained:

...by continued replaying of a cue communication, a persistent tendency to act in a way which can be predetermined can be established. In other words, by driving a cue communication one can without exception, set up in the patient a persisting tendency for that cue statement...to return to his own awareness....the dynamic implant...if reinforced by repeated driving, tends to activate more and more of the components of the relevant community of action tendencies...

The CIA liked that. They started to fund his research.

Cue Statement: a Dynamic Implant

Cameron called a repeated message—such as I WAS BAD BUT NOW I'M GOOD—a **cue statement**. His goal was for the driven words, and their content, to spontaneously return—in an intensely persuasive way—into the subject's consciousness whenever a related thought arose. He wanted those words to be accepted and retained as deep-level programming. After that, they would be established as parameters by which the subject would base all her unconscious choices.

Cameron described psychic driving in an article titled "Repetition of Verbal Signals: Behavioral and Psychological Changes," (*American Journal of Psychiatry*). He called the words that were drilled in, until they acquired a powerful life of their own in the subject's brain, a **dynamic implant**. (Cameron, 1956, p. 503) The cue statement was considered to be "dynamic" when it began to spontaneously return to the subject's conscious mind. The subject, if the psychic driving had been done under hypnosis, would have no conscious knowledge of where the thought came from, or why it came. If that ignorance continued, the message might stay dynamic for years, perhaps permanently.

The cue message could be selected from things that the patient had said in "therapy" or it could be created

...on the basis of our knowledge of the dynamics of the patient, and predetermined plans for changes in the personality of the patient. (Cameron, "Further Report on the Effects of Repetition of Verbal Signals," p. 210)

He suggested choosing it "from one of the original areas from which the patient's current difficulties arise." (Cameron, 1956) It "may be based for instance, upon the patient's lifelong feelings of inadequacy or his passivity" (Cameron, 1956, p. 503) He said

...we have found that the best results can be obtained if we attempt to change a characteristic which has already been recognized by the patient as deviant and undesirable...he has wished to change it, he has already made many attempts both in reality and in fantasy to do so... (Cameron, 1962, p. 752)

Therefore, the subject was made to listen, over and over, to a message about the past behavior or failure for which he felt the greatest burden of **guilt**. Cameron said that the cue message should deal with one topic only and



be no longer than twenty seconds. (Later, he said five to seven seconds.)

In a second article on psychic driving (1962), Cameron and his associates distinguished between the effectiveness of a repeated message excerpted from the patient's own words, and a message in somebody else's words and voice. He had discovered that driving the subject's own words was much more effective: "...we have usually found our purpose achieved within about 30 minutes of driving." A message in another person's words "is best carried on over extended periods...for 10 to 12 hours a day..." The cue statement was her own words: I WAS BAD BUT NOW I'M GOOD.

Cameron's subjects listened in either a normal waking state, or in a drugged state, or under hypnosis, or under narcohypnosis:

Among the various ways of preparing the patient, one of the first used was to disinhibit him so that his defenses might be reduced. Sodium amytal was used in a number of cases...There is currently under exploration [psychic] driving under hypnosis... (Cameron, 1956, pp. 503-504)

Grateful for Her "Cure"—In the final stage of brainwashing, a subject does what is ordered and thinks as she is supposed to think. She also experiences heartfelt gratitude for the effort the brainwashers spent on her "cure." In this final step of the conditioning of fish-child-slut-Rules, she was made to accept moral responsibility for causing that conditioning.

She was taught that her conditioning was the remedy for all her past failures—the acts she felt most guilty about (sex out-of-wedlock and terminated pregnancies). The programmers made her believe that their conditioning was really all her fault. She came to understand that it was a necessary and praiseworthy "treatment" to cure her of that otherwise incurable badness. She had been BAD. Now she was GOOD.

Psychic driving also taught her to feel (inescapably, forever) grateful to the two conditioners for their efforts on her behalf. Now she appreciated all the hard work the technician and his assistant had done—and all the risks they had taken in order to change her in those special ways and make her GOOD. After the psychic driving was finished, she felt profound, sincere gratitude.

Proud to Be a Good One—Psychic driving also made her PROUD of having been robotized, of being such a good machine, hidden inside a normal-appearing human woman. She had suffered a lot of pain, shame, and

anger in the process of becoming that new creature. The programmers channeled all her negative emotions—especially the terrible humiliation—into a compensatory unconscious pride. She was proud of being such an incredibly, absolutely, mindlessly obedient hypno-robot. Fish-child-slut-Rules thus vicariously shared in the glory of the masters' amazing control over her.

Cover Personality

The programmers believed that they had repressed all the subject's memory of their conditioning process. They now gave the instructions which would set up her **front person**. CIA goalsetters called this her new personality. A secret agent has a cover identity. A hypnoprogrammed person who unknowingly lives a double life—one concealed behind chronic, systematized amnesia—has a **cover personality**.

Hypnotic suggestions set up the basic parameters of fish-child-slut-Rules's cover personality. She was to act 1) sane 2) normal, and 3) positive/cheerful. Those rules were designed to keep safely out of sight the psychological warping caused by her conditioning. The cover was maintained as a status quo in a natural way by unconscious defense mechanisms and rationalizations. The programmers wanted her always to act appropriately—unless they told her to act bizarre. The cover personality was carefully designed to block all expressions of repressed energy that did not serve the operators' purposes and to channel them into ways that did serve their purposes. It could not be perfect, but it came close.

The repressed, hidden artificial split was instructed to contain, and conceal, all that was abnormal, "insane," and despairing in her mind. It covered and hid all the pain, shame, guilt, anger, and ugliness in the secret life of a hypnoprogrammed person. The cover programming created a living mask that faced outside, toward the public (even her own family) and lied to them, preventing them from realizing the true circumstances of her life. The cover was also an inward barrier: a wall between self and self, that kept her conscious mind ignorant of all that her unconscious knew.

The subject's conscious mind had an illusion of completeness. She had no idea how much of her thinking was blocked from her awareness by that inner wall. She had no idea how much happened that she didn't know about. When she told lies (rationalizations), she didn't know they were lies.

Interlocking Amnesias

The Operation Often subject was entrapped by a variety of interlocking and mutually reinforcing amnesias, both physiological and psychological. Here follows a list of everything done to her with amnesia-generating potential:

- 1) She was given repeated doses of barbiturates.
- 2) Her trance was deep enough to result in natural dissociation.
- 3) She was subjected to deliberate disorientation: “down by the water...playing with the oyster man...”, becoming fish, and then child (capacity regression).
- 4) The seemingly chaotic, senseless series of traumas that followed and the cruel ridicule by the programmers further disempowered her.
- 5) The fish-child was loaded with traumatic and shameful urges and experiences and phony “memories” of incestuous sexual experience. She became fish-child-slut. Painful and shameful thoughts and traumatic incidents during her conditioning pressured her toward a natural model of developing split personality.
- 6) The conditioning period was sharply unrelated to life as she had previously known it. She had **cognitive dissonance**. How can you believe a bizarre nightmare?
- 7) Fish-child-slut was urged to feel shame, guilt, and fear and then told, “Don’t tell Mama”—her conscious mind being identified as “Mama.” She became a split personality.

8) Their obedience training programmed



her to absolute obedience to every command, including amnesia suggestions, using an electric cattle prod. She became fish-child-slut-Rules.

- 9) Fish-child-slut-Rules was made unable to communicate except in a socially intolerable manner (extreme profanity, sexual content, and while in a state of increasing sexual excitement).
- 10) “You will remember nothing” commands were repeated over and over to the deeply hypnotized subject.
- 11) An ECT series caused disorientation, functional amnesia, and greater susceptibility to suggested mind-splitting and forgetting.
- 12) By accepting I WAS BAD BUT NOW I’M GOOD and becoming grateful for the change in herself, the subject’s unconscious further submitted to the repression.

Amnesia made the artificial structure now implanted in her brain, inaccessible to changes, or dismantling, by her conscious mind. If a conscious mind never encounters, experiences, or becomes aware of a problem in its unconscious programming, it is never able to correct it.

Shifting the Rapport

The technician then **shifted the rapport**. He shifted control of the subject, from himself, to the intended long-term operator, his assistant (her husband). He accomplished that by simply telling her under hypnosis to now take orders from her husband in the same manner as she had been taking them from him. Her husband, who was now also her operator, had no previous experience as a hypnotist. In hundreds of recreational and manipulative hypnotic episodes over the following decades, however, he became a skilled puppetmaster.

Her conditioning was finished. It had taken little more than six weeks. The mental machinery now built into her mind reacted to hypnotic instructions with reflexive automaticity, independent of her conscious will, beyond her conscious knowing. Anytime he wanted, the operator could call out his puppet, the alternate personality, his zombie, his robot. He could make it do whatever he wished. Afterwards, the conscious (cover) personality had no memory of that time.



Language: Backwards and Too Soft to Hear

In the coming years, the split was sometimes required to hear the operator's words as if they were spoken backwards. Sometimes, she was told to hear them as if spoken too softly to discern. Either way, they seemed incomprehensible to her. Teitelbaum reported using similar instructions as part of a sealing. He told the subject that if an unauthorized hypnotist

...starts to give you suggestions which might have a tendency to place you into a trance state, you will suddenly find that you cannot understand a word he is saying. It will be as if he is speaking a foreign tongue which you have never heard before and this condition will last as long as he is giving you such suggestions... (Teitelbaum, pp. 105-6)

In the case of fish-child-slut-Rules, however, the instruction to hear language as if it was incomprehensible was applied to her own operator's speech while she was in trance. Perceiving only seemingly incomprehensible or inaudible language, she couldn't know what his instructions were to her. She couldn't evaluate them, or mentally prepare herself for them, or alleviate them—not in the smallest degree. She had no opportunity to know, criticize, or remember the operator's words.

The meaning of the words, however, was recorded perfectly at the level of automatic function in her brain. The cue triggered mindless, reflexive, machinelike obedience carried out by that unconscious sector of her brain. Amnesia, plus the incomprehensible or inaudible language, caused all his hypnotic commands to hit her out of nowhere. Whatever he suggested arrived at the cued moment of implementation directly out of the amnesic abyss, full scale, untouched by experience's tempering comment, or feedback adjustments, or any awareness of where her behavior came from and why it was happening.

Using the language "too soft to hear" routine, he could easily, **covertly reprogram** her in the presence of observers. Neither she, nor they, would realize that she'd been dropped into trance, reprogrammed, then pulled out again. The first cue shifted her to a waking hypnosis in which her behavior would appear normal though she was now in the suggestible state. He would give his instructions. She would have no conscious knowledge of their content because the words would sound too softly spoken to hear. Her unconscious, however, registered them clearly. Then he gave the signal that shifted her back to a normal state of consciousness. As with the opening cue for this sequence, the signal to exit from trance was also unknown and unrecognizable to her conscious mind, unremarkable to any onlookers.

Information, Interviews, and Incidents

John Marks
Uncovers Secrets,
Then Hides Them
Again



"They Wouldn't
Hesitate to Kill You"



Of Patsies and
Assassins



Mind-to-Mind
Trance Inductions

If this government ever became a tyranny...the technological capacity that the intelligence community has given the government could enable it to impose total tyranny, and there would be no way to fight back, because the most careful effort to combine together in resistance to the government, no matter how privately it was done, is within the reach of the government to know. Such is the capability of this technology...

I don't want to see this country ever go across the bridge. I know the capacity that is there to make tyranny total in America, and we must see to it that this agency and all agencies that possess this technology operate within the law and under proper supervision, so that we never cross over that abyss. That is the abyss from which there is no return.

- Idaho Senator Frank Church, Chairman, Senate Intelligence Committee, "Meet the Press," National Broadcasting Company, Washington, D.C.; Merkle Press, 1975, transcript of August 17, 1975

John Marks Uncovers Secrets, Then Hides Them Again

The CIA managers intended that their secrets of mind-control research would be buried forever. In 1963, they announced that behavioral research had almost ended and they shredded many records. In 1973, the shredding of all remaining CIA records of mind-control research was ordered.

In 1974, however, the *New York Times* printed Seymour Hersh's report on Operation Chaos, a secret (and illegal) CIA program which spied on "dissident" (antiwar and pro-civil rights) Americans.¹ News had also leaked about CIA researchers giving LSD to unsuspecting customers in government-operated "brothels" in San Francisco and New York.

1. Actually, "watch list" activities had involved the Secret Service, FBI, DIA, and NSA, as well as the CIA. As was to become a pattern, the CIA took the heat—a favor which the other agencies would then owe in return.



Congress demanded an investigation. President Ford asked Vice-President Nelson A. Rockefeller to chair the Commission of CIA Activities Within the United States. Eventually, the Commission released a report to the President. It later was released to the public. The release of the document was a token effort designed to quiet public concern.

Marks Files FOIA Request

John Marks was a CIA watcher employed by the American Civil Liberties Union. While carefully reading the report, he noticed the line: “The drug program was part of a much larger CIA program to study possible means for controlling human behavior.” The Freedom of Information Act had been passed recently. Theoretically, it could be applied to the CIA. June 30, 1975, Marks filed a Freedom of Information Act request for CIA documents dealing with the study of “possible means for controlling human behavior.”

The CIA said there were no such records. They said,

All the records concerning the program were ordered destroyed in 1973, including a total of 152 separate files...all persons directly involved...were either out of the country and not available for interview, or were deceased. (Bain, Appendix 2, p. 265)

Marks kept asking. It took him



(and the ACLU) two years and a legal case. Some say it was only because of President Carter’s quiet support that Marks finally got possession of any documents. He was given seven boxes of MKULTRA financial records which had been overlooked in the CIA’s earlier paper shreddings, plus three boxes of old ARTICHOKE documents.

Before the documents were released for controlled viewing by prescreened persons, CIA censors went through them. They held back some pages and lavishly applied the opaque black stripe of SECRET onto those which were released. They obliterated almost all the names except Gottlieb’s. (He was obviously selected to handle the coming outcry).

The released documents were only 1950s goalsetting memos and reports of failed experiments, so Marks didn’t learn the whole story. Only a few insiders at the CIA knew it all, and they have never told. The documents he did obtain, however, astonished the few researchers who were permitted to view them in a guarded reading room set up in a Hyatt Regency Hotel room in Rosslyn, Virginia.

Martin A. Lee and Bruce Schlain came daily, for months, and read all the documents they could find about behavior modification programs—including those of the Army, Navy, and Air Force. They quoted many useful document passages, found in that room, in their 1985 history titled, *Acid Dreams: The CIA, LSD, and the Sixties Rebellion*. John Marks’s 1979 book, *The Search for the Manchurian Candidate* was also based on the Hyatt documents, as were several newspaper articles.

Bumbling, Ineptitude, and Failure?

In 1977, Congress held hearings on the documents that Marks had obtained. The CIA provided only a few speakers. The CIA witnesses conferred together be-

forehand on what to say, and then rehearsed their testimony with Chairman Ted Kennedy. As a result,

*Throughout the hearings the senators listened to one account after another of bumbling and clumsiness on the part of Agency personnel...could have been describing a Three Stooges routine...This kind of buffoonery proved to be an effective public relations ploy for the CIA, deflecting serious scrutiny...By stressing ineptitude the Agency conveyed an all too human air. After all, why prosecute a bunch of regular Joes for fooling around with chemicals they could never hope to understand? (Lee and Schlain, *Acid Dreams*)*

When John Marks finally finished writing his history of BLUEBIRD, CHATTER, ARTICHOKE, and MKULTRA, he also presented those research efforts as bumbling, inept, and failed—a comedically inadequate, doomed effort that fell far short of Agency goals. Over and over, Marks pointed to inanities and mistakes, depicting ludicrous scenes which aroused contempt for the agency.¹

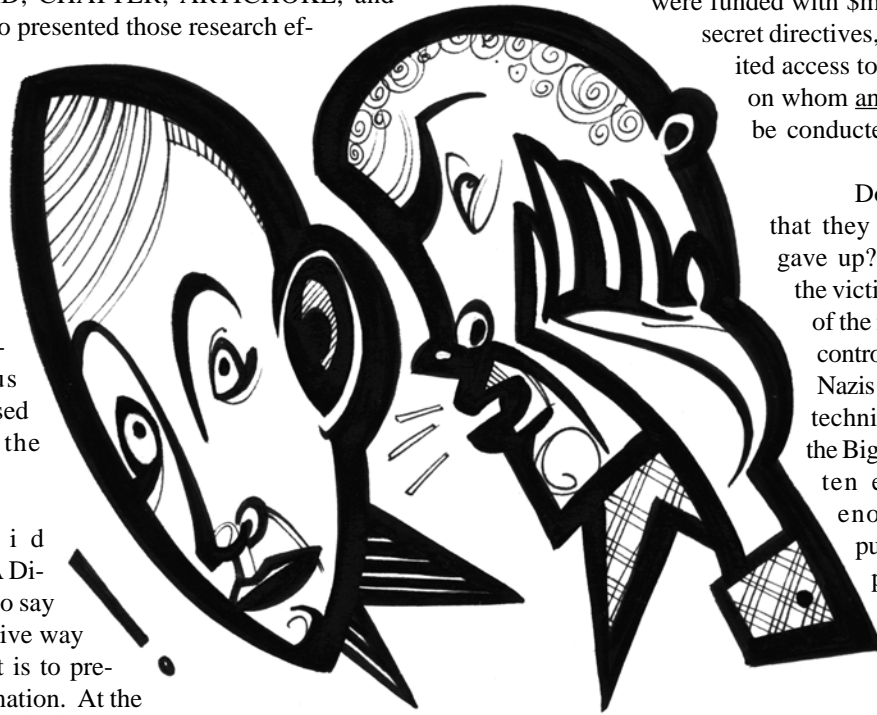
Why did Marks do that? CIA Director Dulles used to say that the most effective way to disguise a secret is to pretend to share information. At the book's end, Marks described a personal interview with another head CIA figure. He said that director told him the CIA never succeeded and finally gave it all up because it was not possible.

Did Marks really believe that? Or was he threatened into helping keep Agency secrets? Or did he join the mind-controlled? Somewhere, along the way from the court case to the publication of his book, John Marks changed. Despite all the good information that he had made available to the public, in the end, he told it the way the Company wanted it told: He said they failed; they gave up; it wasn't

possible. Because of his previous success at uncovering and making public their secrets, most of his readers accepted that conclusion. Therefore, publication of his book—although it did get out some shocking new information about CIA research—effectively ended a period of public and Congressional heat focused on the Agency's mind-control secrets.

The Big Lie—Low-life European criminals like Adam, Bergen, and Nielsen created unknowing, exploited hypnotic subjects. Sophisticated European and American hypnosis researchers created hundreds more amnesic subjects in two centuries of enthusiastic research. For over fifty years, since World War II, psychiatric researchers employed by U.S. government agencies worked to improve those early hypnoprogramming technologies. They were funded with \$millions, urged on by secret directives, and allowed unlimited access to “terminal” subjects on whom any experiment might be conducted.

Do you *really* believe that they couldn't do it and gave up? If you do, you're the victim of another branch of the new science of mind control: **propaganda**. The Nazis also used the Big Lie technique. If you repeat the Big Lie loud enough, often enough, and long enough—and if you publicly revile, or suppress, dissenting voices—almost everybody, eventually, will believe it.



The truth is that the MKULTRA hypnoprogramming research was not a failure. It was a success. Public belief that it was a failure was part of its success.

1. Lee and Schlain, on the other hand, reported the CIA research with appropriate seriousness.



A Brief, Strange Phone Conversation

I called John Marks around 1987. I identified myself as a nonfiction writer who was researching the case of Cameron's Canadian experimental subjects (then pending against the CIA). Their lawyer had told me that John's publisher planned a new release of his book when the case came to trial.

John Marks told me that he had never touched the subject of mind-control again, except to write a revised introduction for the new edition.¹

Then I asked, "Have you ever heard of a case of a Manchurian Candidate? After your book came out, I'd guess lots of people contacted you to tell you more..."

"Yes," he said, "but I didn't believe any of them. I don't believe they ever succeeded at it. I don't believe it can be done. Look. I'm very busy," he snapped at me. "I don't have time for this kind of thing. *Are you one?*" His tone suddenly had turned tense, harsh, hostile—as if un-

consciously warning me.

"NO!" (I lied. If "Manchurian candidate" means any supposed-to-be-amnesic hypnoprogrammed person, rather than one who is specifically programmed to kill, I am one.)

"Good-bye," he said. He slammed down the receiver with a force that left my ear tingling.

What an odd "interview" that was. His fight to free telling documents from the CIA had seemed to be the work of a free mind. His book, however, described a failed effort; and I knew that was not true. And he said he had not believed a single one of the persons who contacted him. Walter Bowart would have interviewed at least some of them in depth. John Marks never touched the subject again. Why did he change?

And why did he hang up so abruptly? Was he protecting himself? Was he protecting the Agency? Was he protecting me?

"They Wouldn't Hesitate to Kill You"

[NSA agents] are authorized by executive order to spy on anyone...This surveillance network is completely disguised and hidden from the public...NSA personnel serve in quasi-public positions in their communities and run cover business and legitimate businesses...The operations independently run by them can sometimes go beyond the bounds of law...NSA DOMINT [Domestic Intelligence] has the ability to assassinate US citizens covertly or run covert psychological control operations to cause subjects to be diagnosed with ill mental health.

John St. Clair Akwei²

From 1992 to 1994, I spent most of my time researching and writing on gardens, herbs, and livestock for the ninth edition of my *Encyclopedia of Country Living*. But, one lovely summer afternoon, I was catapulted back into the mind-control topic. I had driven miles to interview a plant expert. She and I sat in the living room of her lovely country home in the coastal mountains. We were talking about growing plants, green and beautiful. After a lull in the conversation, she asked me what I was now doing with my life besides revising the garden book.

On impulse, I told her about my mind-control research, about Candy, and about Bowart's military hypnoprogramming cases in which an electroshock series was used near the end of conditioning to reinforce suggested amnesia. I said, "They all woke up unable to remember the previous six weeks."

She looked astonished. She said, "You have to meet my husband, 'Joe' [a pseudonym]." She led me out of the house. We walked together through the dense, cool,

1. The trial was canceled by an out-of-court deal. I think the new edition was not published.

2. The quote is from a document about NSA structure and its covert operations. It was submitted as evidence for a lawsuit against the National Security Agency filed at the U.S. Courthouse in Washington DC by John St. Clair Akwei (Civil Action 92-0449). Akwei said that individual U.S. citizens are sometimes targeted in this way by covert, independently-operating NSA agents. **The Australian magazine, *Nexus*, reprinted it in full in its April-May, 1996, issue, p. 17. A U.S. newsletter called *Taking Aim* reprinted it from *Nexus*. Substantial excerpts are in *Project L.U.C.I.D.* by Texe Marrs.**

and quiet rainforest and soon found him. Joe was a tall, thin, serious-looking man. He was no longer young, but still strong and athletic-looking. He was just then directing a beautiful draft horse stallion in the act of dragging a log.

“Joe”: A Case History

His wife introduced me to him. He shook my hand and said apologetically, “I probably won’t remember your name. I can’t remember names.”

“Don’t worry,” I reassured him, “I can’t remember names either—or faces.”

Trouble Remembering Names and Faces (Prosopagnosia)

Electroshocking leaves no obvious telltale physical marks, but it may result in difficulty remembering names and/or faces. It causes “...gaps for events long preceding the course of [ECT] treatment...and even more common was a failure to name or even recognize old acquaintances.” (Pratt, *Amnesia*, p. 231) There may be permanent brain damage after electroshock, depending on the amount of shock administered, and the way in which the shock was delivered. Subjects have reported loss of memory, skill, or knowledge—especially loss of ability to recognize faces.

Oddly,...memory for deliberately learned material, like lists of nonsense syllables, seems to be less impaired by shock than memory for the stuff of everyday life, such as recognition of the faces of one’s friends. (Schefflin & Opton, p. 381)

Difficulty in remembering faces is called **prosopagnosia**. Jeanine Huard, one of Cameron’s experimental subjects, had prosopagnosia:

She also described an unusual symptom in that she is unable to recognize familiar people in different surroundings...the disturbance would appear to lie in the ability to recall or associate a face with the memory of the person when the context in which the person has been known changes. I knew that such a symptom had been reported by one of Cameron’s other patients. (Weinstein, p. 159)

The other patient was Dr. Mary Morrow: “Like other victims of Cameron, Mary was left with neurological damage...she suffers from prosopagnosia...” (Weinstein, p. 167)

Joe unhitched the huge animal from the log it had been pulling, led it into the corral, and turned it loose with a gift of chow. I could tell he really liked animals. We waited at the house until he came back. Then my hosts set up lawn chairs in their yard and we sat there, surrounded by fragrant flower beds, talking.

Joe had never heard of Bowart’s book about military hypnoprogramming or Bain’s book about the CIA hypnoprogramming experiments on Candy Jones. What he knew was his own personal history. This quiet, peaceable man told me that he had been in the Army. He was a black belt in karate by hobby and an MP by assignment. He was stationed in Germany when he started thinking about the ethics of the war (Viet Nam) more and more. “I didn’t like it,” he said.

Finally, he decided he had to do something toward stopping it. He had to take a stand. He was a man for whom absolute values of conscience mattered absolutely. He decided: “After being an MP for two years, I could no longer go on duty and uphold their laws.”

The Army’s response was first to shanghai and then to brainwash him. Brainwashing is most effective when it starts with a shock kidnapping. That prevents the victim from getting his mental defenses in place beforehand. Therefore, the five kidnappers arrived suddenly, late at night, and told him to come along. Joe didn’t like the feel of it and decided he wasn’t going. He told me he fought like “hell” and took out four of them temporarily. The fifth man got him.¹

“Before my imprisonment began,” Joe said, “the Provost Marshall read me the rules: ‘A soldier will receive a minimum of two hours of sleep per twenty-four,’ and so on. The officer pointed out in a threatening manner that, although Joe had the right to food, “the regulations didn’t say whether meals would come all at once or spaced out.”

He said, “They locked me in a room by myself. There were five soldiers who guarded me day and night on shifts...They started systematically driving me crazy...No sleep—sometimes twenty hours of work straight. Maybe two hours of sleep per 24. No consistency.” Joe spent the next three months alone in that cell except for the changing shifts of tormenters guarding him.

Both the CIA and the military were very interested in brainwashing research as part of their general research

1. In addition to the long-standing MKULTRA concept of a hypnoprogrammed courier, there also was a long-standing concept of the hypnoprogrammed fighter/assassin. They now knew just how good Joe could be in a real fight.



on every possible mind-control method. In a military-sponsored symposium on brainwashing, one article mentioned that:

Various writers have associated the compliance effected by Communist captors with phenomena observed in the laboratory; e.g., effects reported following experimental work in pharmacology, hypnosis, sleep deprivation, sensory deprivation, semi-starvation...as well as in social-psychological investigations of persuasion and group conformity pressures. (Blake in Biderman, p. 2)

Therefore, there had been experiments that included observation on sleep deprivation and semi-starvation. Was Joe an unknowing subject in one of those experiments? Or was he on an operational conveyor belt, being readied for the next stage? An army memo on “interrogation” techniques, dated September 6, 1961, reported:

Stressing techniques employed included silent treatment before or after EA 1729 [LSD] administration, sustained conventional interrogation prior to EA 1729 interrogation, deprivation of food, drink, sleep or bodily evacuation, sustained isolation prior to EA 1729 administration, hot-cold switches in approach, duress ‘pitches,’ verbal degradation and bodily discomfort, or dramatized threats to subject’s life or mental health. (quoted in Lee and Schlain, p. 39)

Joe could not remember what happened after being locked in the room. All he knew was, “I woke up in a hospital bed. I couldn’t remember anything. I asked a doctor what happened to me. He said I’d had an electroshock treatment. I still can’t remember anything about being in the hospital before I woke up there.”

“How much time were you in the hospital that you can’t remember?” I asked.

“About six weeks,” Joe said, “but it doesn’t show on my army record that I was ever in the hospital at all.”

He woke up feeling calm. He calmly asked the doctor why he was in the hospital. The doctor told him it was because he had tried to commit suicide.

Joe said, “I didn’t believe that, about the suicide.”

“The doctor made you think there was just one electroshock treatment?” I asked.

He nodded.

“Well, don’t believe that either,” I said. “It would have been a series of electroshock treatments. I don’t think anybody gets just one of those. Especially if they can’t remember the past six weeks.”

Driving Dogs “Crazy”—When Joe was released from the hospital, he was discharged from the military. For the next ten years, he trained attack dogs. (I got the impression that he was still somehow still connected with the military during that dog-training time.) I asked, “How did you train the dogs?”

“You start by making them crazy,” Joe said.

“I don’t understand.”

“You tell the dog, ‘Sit.’ It sits, and you praise it. It feels like it understands. Then you tell it ‘Sit,’ and it sits, and you reprimand it. You do this hundreds and hundreds of times. You push the dog to **confusion**. The purpose of this is so that the dog will do whatever you say no matter what, under all conditions. You are training the dog to NOT think for itself. A sentry dog or police dog has to be willing to bite *anybody*. We were driving the dogs crazy and then bringing them back. It took at least a month. Lots of dogs washed out. We got rid of them. A washout starts doing things for itself. They couldn’t go crazy and not go crazy.”

So half of the dogs turned into “crazy” robots and *always* obeyed. The dogs that resolved the conflict by thinking for themselves were the program “washouts,” the conditioning “failures.” Reflexively, unconditionally obedient dogs were the programmer’s ideal achievement, his “successes.”

The same concept could be applied to people.

Difficult Civilian Adjustment—After ten years of training dogs, Joe seems to have really become a civilian. He had a hard time adjusting. He was fortunate, however, in one important way. He had won the heart of his plant-loving woman along the way, and she had stuck with her quiet, tense man through all his difficulties.

When Joe first went job hunting, he didn’t know that his conditioning had caused him to become allergic to authority.¹ But he soon realized that. Every job he worked soon triggered a mysterious psychological revolt in him. Somebody would give him a normal, reasonable command—

1. Persons who are unconsciously overburdened with CONTROL, such as subjects of hypnoprogramming, may become negatively reactive to control scenarios. They then have difficulty enduring normal forms of control in their conscious life.

and it would put him into a rage. He would have to get out of there. For some reason, he could not stand anybody “controlling” him.

After Joe realized that he no longer could work under somebody else’s authority, he found a way to be self-employed. That solved the problem. He was all right now. He and his wife had each other. And he made a living as a horse-logger, toiling alone in the forest.

Joe Gives a Warning

I had no experience interviewing a living, in-front-of-me, survivor of mind-control technologies. Up to this time, my research had all been in books and articles. I hadn’t gone looking for Joe, or anybody like him. But there he was, squarely in my path—as if God had placed this army veteran (who had experienced some military mind-control technology) there for a reason.

Talking to him, asking him questions, made me feel tense. It was very hard for me, requiring great effort, because something deep inside me was resisting my attempts to question him. Joe also was tense and under tight control. He wasn’t openly resisting my curiosity, but he wasn’t volunteering much information. I’d ask a question, haltingly, briefly, because that was the best that I could manage. He answered each: haltingly, briefly, as if that was as much information as he could get out.

My brain felt frozen. I felt an unfamiliar inner warning, a fearful, almost mentally-paralyzing inhibition against interviewing this particular person. Was there an item in my, and his, programming script that **forbade subjects to discuss with each other their conditioning events and hypnoprogrammed aspects of their lives?**

I fought it. I had a lot of experience fighting and overcoming that type of inner resistance. I struggled to ask more questions. Joe was a true fighter, too. He struggled to answer them. But all the time I was talking to him, I really just wanted to get out of there. I yearned to make the confusing disturbance in my head stop.

My last question was, “Would you mind if I used your name in my book about hypnoprogramming?” I was using others’ real names. I figured that real names would give my work more credibility.

For a moment, Joe didn’t answer. I saw a shadow come over his face. What was it? Was it a scowl because I had asked such a thing of him? Or was his expression fear? Then he composed himself. He nodded agreement.

“Thank you,” I said. I had handled all I could that day. I wanted to go. I made my farewells, stood up, and walked away from Joe and his wife. They remained sitting on the lawn chairs surrounded by beautiful flower garden on that lovely, sunny spring afternoon in the Western high mountains.

As I walked toward my car, which was parked nearby, Joe suddenly rose and followed me. I stopped, turned, and looked at him, wondering, as he caught up to me. We were beyond his wife’s hearing.

He said softly, **“If they knew what you’re trying to do, they wouldn’t hesitate to kill you.”**

I looked hard at him. Joe was definitely not mentally ill, not paranoid. He didn’t say anything else. I didn’t either. I nodded acceptance of his warning, turned away again, and walked on. This time, he stayed behind.

As I walked, I realized—with sudden shame—how very much I had asked of Joe when I requested to use his real name in my book.¹ Yet he had agreed. I understood now that, before he agreed, Joe accepted in his mind the probability of a death penalty for being named as having talked to me. But Joe had ethics. He had the absolute kind created by God, not the situational kind made by governments or individuals for their own convenience. He was willing to sacrifice his life for truth. Was that sensible? practical? No. But it was right.

I wondered who “they” were. CIA? NSA? Military? I didn’t ask. I never went back to visit Joe and his wife again. What I had to learn from them, I had already learned. I had no way of establishing if what Joe feared was real. I only knew the enemy I knew. That’s why I talked it over with R.J.

R.J. Thinks They Killed His Author-Friend

I had a friend and neighbor, at that time, R.J. [another pseudonym; he asked me not to use his real name]. He was a retired Viet Nam veteran, Special Forces. (He never told me exactly what he did in the military. Maybe he didn’t remember. Maybe he couldn’t say.) When I got home from the visit with Joe and his wife, I asked R.J. about Joe, and about Joe’s warning to me.

R.J. nodded silently, and looked away. Then he started talking about a woman he once knew who wrote a book about the “delayed stress” problems of returned Viet Nam veterans. He said, “It happened in the 70s She was just starting out on a publicity tour, right after her book

1. I do not want Joe to be at any risk of being killed, so I did not use his or his wife’s real identities here.



came out. She died in a Seattle hotel room. I read about it in the newspaper. I don't believe her death was suicide. I think they killed her."

There it was again—"they." Murder or not, her death got rid of the book. Without its author promoting it in the media, sales plummeted. It was soon out of print, its message forgotten.

A man in my writer's critique group who had read numerous books on the Kennedy assassinations gave me a similar warning: "If a person gets too talkative, he gets killed."

But didn't we live in a modern democracy? There were laws—and a Constitution. And wasn't civilian authority dominant over that of the military in this country? I had always assumed that no law authorized covert murders by any government organization or its agents. Was that belief incorrect? Or did we no longer have rule of law in



this country? Joe, R.J., and my friend in the critique group were all so sure that I could only hope to live until my book was finished—and that I could finish it only if I worked in secret.

I decided to heed their warnings. If they were wrong, it would not hurt to research quietly and privately. If they were right, it was the only way I could complete this work. Thereafter, I worked in greater isolation and confided in fewer people.

Over the coming years, I learned that it can be permissible for our government to "use any means necessary" to protect what is declared "Secret." I learned that "counter-intelligence" personnel have been used to covertly suppress unwanted civilian knowings. I learned that military power can supercede civilian power. I uncovered bits of evidence suggesting that certain agencies or individuals in government have used deceit, disinformation, even assassination, to maintain power and manipulate political events.

Of Patsies and Assassins

I know of no safe depository of the ultimate powers of society but the people themselves, and if we think them not enlightened enough to exercise their control with a wholesome discretion, the remedy is not to take it from them, but to inform their discretion by education...I have sworn upon the altar of God eternal hostility against every form of tyranny over the mind of man.

Thomas Jefferson

In July, 1953, the Director of Security for ARTI-CHOKE sent a memorandum restating the goal of their hypnoprogramming research. The restated goal was "...the development of means for the control of the activities and mental capacities of individuals." The memo designated a

subgoal: "attempting to have a hypnotized subject kill someone while in a trance." (Lee & Schlain, *Acid Dreams*, p. 28)

Gittinger told John Marks that the CIA could not create a programmed **assassin**. Gittinger said that there

were “more reliable ways to kill people... ‘a well-trained person could do it without all this mumbo-jumbo’...” (John Marks, 1979, p. 191) Nevertheless,

...he acknowledges that he does not know. If the ultimate experiments were performed they would have been handled with incredible secrecy. [Gittinger] ...admits that none of the arguments he uses against a conditioned assassin would apply to a programmed ‘patsy’...the subject would remember everything that happened to him and be amnesic only for the fact the hypnotist ordered him to do these things.... (ibid.)

A **patsy**, in this scenario, would be a carefully trained hypnorobot who obeyed complex posthypnotic suggestions. The consciously-unknowing, innocent victim would be publicly blamed for the crime: a patsy.

History is clear about the tensions between the Kennedy brothers and CIA leadership. After John Fitzgerald Kennedy was elected President of the United States, he appointed his brother, Robert Fitzgerald Kennedy, as his Attorney General. First, Bobbie fearlessly took on the Mafia. Very soon JFK and RFK, both, also had serious and escalating disagreements with CIA heads.

After the aborted Bay-of-Pigs “invasion,” Kennedy fired the Deputy Director of the CIA, General Charles Cabell, who had been in charge of that debacle. Cabell had worked closely with Allen Dulles in the CIA leadership for nine years. Cabell’s fury at Kennedy became well known in Washington circles. His brother was the mayor of Dallas.

Despite Cabell’s firing, the CIA remained unrepentant. It still did not respond to attempts by President Kennedy to control its bad habits of independent adventures in foreign policy and secrets kept from the Administration. Kennedy then dumped the CIA’s legendary Director, Alan Dulles, as a second lesson. JFK said he needed “a man, not a legend” in that office. The man Kennedy appointed to replace Dulles was J. McCone, the only CIA Director who seems ever to have seriously believed that the Agency should respect moral principles.

Richard Helms and the other MKULTRA insiders remained. Did JFK know about their mind-control research and the terminal subjects? The President had the legal right to be informed of all the CIA’s activities. But the leaders of that Agency were men who made a career specialty of breaking ALL the rules. They did not tell the President more than they wanted. They did not tell McCone either.

It was McCone’s Inspector General, John Earman, who discovered MKULTRA, but only as a project title. He learned about the safehouses, on his own, while taking a routine look at TSS. Earman was deeply disturbed by the little he had learned. Helms defended the program, “We have to keep up with Soviet advances in this field.”

Kennedy told an aide, “The CIA will have to be dealt with.” Two weeks later, he was assassinated in Dallas. The day after he became President, Lyndon Johnson returned the CIA to business as usual. Jacqueline Kennedy might have made trouble, but a post-assassination series of electroshock “treatments” calmed her. Helms no longer had to defend or explain the MKULTRA research. CIA man George White managed safehouses until 1966, when he shut them down and retired.

Numerous citizen researchers emerged after the assassination and challenged the official “lone-deranged-assassin” versions of those killings. The citizen researchers privately undertook the detective work which was not being publicly accomplished. They looked for evidence, interviewed witnesses, and evaluated what they found. They wrote articles and books to share what they learned with other researchers and with the public.¹

Penn Jones, editor of a Texas weekly, was one such researcher. He gave away 10,000 copies of his own book on the assassination of JFK at a 1969 rock music festival. Jones also kept statistics on the deaths of persons who would have been important court witnesses. One by one, they perished in suicides, auto accidents, and seeming heart attacks. Actuarial experts calculated the odds, of all those deaths occurring in so short a time, as being in the trillions.

The untimely deaths of so many of the persons who did it, or were involved with it, or announced they had an investigative breakthrough about it, made it more difficult for citizen researchers to establish whether the various accused were patsies or murderers, hypnoprogrammed or regular criminals, sane or mentally ill.

In the next election, in an act of little understood and poorly appreciated personal and political courage, Robert F. Kennedy ran for President of the United States. RFK undoubtedly knew that the CIA was implicated in his brother’s assassination. He must have realized the risk he was taking. If he became President, RFK would predictably resume the shake-up of the CIA which his dead brother had begun. Those persons responsible for the assassination of JFK also surely realized that RFK would also endeavor to bring the guilty persons to justice.

1. The *Assassination Please Almanac* (1977) is an annotated bibliography edited by Tom Miller, with introductions and essays compiled by other persons associated with the Assassination Information Bureau.



They waited until the night that Robert F. Kennedy won the California primary. Up to then, his election was not certain. After the landslide triumph in California, however, it was obvious that he would be the next president. That night, at the victory celebration, the candidate was assassinated by a man of Middle Eastern descent who had a curious double name, Sirhan Sirhan.

An era of great democracy had plunged into the darkness of a Machiavellian style of settling political competitions. Jefferson's concept of government by an informed electorate choosing representatives in honest and open elections had been usurped by conflict resolution in murderous palace wars reminiscent of the Roman Empire's declining years.

The Warren Commission was supposedly convened to investigate all the evidence which that army of civilian researchers had uncovered. It was largely made up of persons having intelligence or military backgrounds. Alan Dulles was the member who controlled which witnesses would testify. Nevertheless, the volumes of recorded Warren Commission evidence contain much that supports a conspiracy explanation of the president's murder. The Commission, however, ignored and rejected their own evidence. They concluded that Oswald was the only responsible person.

The **assassination researchers** struggled on, trying to learn the truth, and to make that truth known. Jim Garrison, New Orleans District Attorney, in whose jurisdiction Lee Harvey Oswald had once lived, read every page of the shelf of books which was the Warren Commission's official report. That reading convinced Garrison that the Commission was part of the cover-up because it had obviously not identified the true murderer of the President.

Garrison independently undertook a new official investigation. He used his FBI and military background, the investigators and investigative resources available from his job, plus dogged sleuthing, to uncover the truth. He badly wanted to bring the true culprits to trial and make America be America again. Although both Garrison's life and reputation were threatened, he persevered. In the end, he definitively traced the assassination of President John F. Kennedy to persons linked to the CIA and other secret agencies. His evidence made clear that Oswald had been just a patsy for the real murderers of President Kennedy.

"What the hell do you call this?" a puzzled friend asked Garrison of the findings.

"A coup d'etat," the D.A. grimly replied.

The D.A.'s attempt to prosecute the true conspira-

tors was not successful. He then wrote a book, *On the Trail of the Assassins*, to make his evidence public. (That book may have inspired the Oliver Stone film, *JFK*.)

Lee Harvey Oswald

Lee Harvey Oswald protested, "I'm just a patsy. I didn't kill anyone." Edward J. Epstein's book *Legend: The Secret World of Lee Harvey Oswald* was based on FOIA documents and Epstein's interviews with 150-plus witnesses who were not interviewed by the Warren Commission.

From these new documents and witnesses a startlingly different picture emerges of the secret world in which Oswald lived his final years. It is a world of military and political secrets, inextricably interwoven with spies, counterspies, and soldiers of fortune. George De Mohrenschildt, the mysterious figure who arranged significant portions of Oswald's life, granted the author a four-day interview in 1977 to tell his story...the interview was never completed—De Mohrenschildt was found shot to death, an apparent suicide, on the second day... (Legend: jacket text)

Jack Ruby

Jack Ruby shot Oswald dead before he could be brought to trial. He was part of a crowd of citizens which was allowed to be present as Oswald was being moved from one site to another. Jim Garrison established that Ruby also had many connections to the intelligence world. Ruby's interrogation was a farce.

Only an understanding of the techniques and applications of mind control could begin to bring meaning to the fragmented ramblings of Jack Ruby.

On June 7, 1964, Jack Ruby was questioned in jail in Dallas, Texas, by Earl Warren and Gerald Ford. In that session Ruby continually pleaded for a lie-detector test or for sodium pentothal.

Said Ruby: "I would like to be able to get a lie-detector test or truth serum of what motivated me to do what I did at that particular time..." (Boward, p. 197)

Did Ruby hope that truth serum (barbiturate) would penetrate sealing and reveal his hypnoprogramming? If Ruby killed Oswald as a result of posthypnotic suggestion, he was not a patsy. He was a **hypnoprogrammed assassin**.

Milton Kline, a prominent New York experimental hypnotist, who did unpaid consulting for Sears and other

CIA researchers, said he refused to “cross the ethical line.” He was certain, however, that the secret agencies had crossed it. He was also certain that a “Manchurian Candidate” could be created.

“It cannot be done by everyone,” says Kline, “It cannot be done consistently, but it can be done.”... [Kline added that] he could create a patsy in three months; an assassin would take him six. (J. Marks, p. 187)

The government chose Dr. Louis Jolyon West to do the sanity evaluation of Ruby, and to be his defense psychiatrist. West was a longtime insider in military/intelligence mind-control research. He started his career studying brainwashing for the Air Force. He performed an interrogation experiment with Martin Orne. He then went civilian, heading the University of Oklahoma’s Department of Psychiatry. But West continued to do government research. He studied the effects of hypnosis-mescaline combos for the CIA in 1957 (Aldous Huxley, *Moksha*, p. 131). He “conducted research into LSD, hypnosis and ‘the psychobiology of dissociated states’ for the CIA.” (Lee & Schlain, *note*, p. 189) Once, he killed an elephant for them—with LSD.

West visited Ruby in jail, then wrote his report. The psychiatrist declared that Ruby was in a “paranoid state manifested by delusions.” Ruby was not faking his symptoms, Dr. West explained, because, despite repeated suggestions by West that the prisoner was mentally ill, Ruby had insisted that he was sane. West explained that this proved that Ruby was mentally ill, because “The true malingerer usually grasps eagerly at such an explanation.” Catch-22: Ruby refused to admit he was insane, so he was insane.

What were those “delusions” that West took as evidence of Ruby’s insanity? Ruby believed that conspirators had caused the murder of John Fitzgerald Kennedy. (Lee & Schlain, *note*, p. 189)

West’s career advanced. He became UCLA’s Psychiatry Department chairman and Director of its Neuro-Psychiatric Institute.¹ Ruby went to prison. He died there from a fast-moving cancer that appeared out of nowhere.

When Jack Ruby’s programming began to slip, it became necessary to kill him as well. A recent article by Gary Alexander...suggests that the programming theory explains the behavior of Oswald and Ruby better than any of the existing speculation about those events... (Schefflin & Opton, p. 413)

Sirhan Sirhan

Robert F. Kennedy was assassinated by Sirhan Sirhan. Dr. Diamond, an expert hypnotist and associate dean of UCLA’s School of Criminology, was the defense psychiatrist. He visited Sirhan eight times. He hypnotized him during six of those visits. At first, Diamond and Sirhan just talked:

“Was that the first time you actually ever saw Kennedy?”

“It was, sir—in reality...It was a thrill to see him.” There was a note of fond recollection in his voice, like that of a four-year-old boy after his first visit to Santa Claus...

“You had no idea,” said Diamond, “that three days later you were going to kill him?”

“...no, hell, no, I didn’t. I don’t know what the hell made me, sir.” (Kaiser, p. 294)

Diamond then questioned Sirhan, under hypnosis, about a conspiracy. Sirhan denied that, but his distinct pattern of delayed speech before denying key questions indicated blocking. After Diamond conditioned Sirhan to complete amnesia and obedience, he suggested

...that he ask about the weather when he woke up. Sirhan was soon out in the anteroom, asking a deputy if it was raining outside.

“Why did you do that, Sirhan?” asked Diamond with mock curiosity.

“What’s so unusual about that?” said Sirhan. “Asking about the weather?”

“Whose idea was that, Sirhan?”

“Huh?...Wuh, wuh, uh.” Sirhan could tell from the smile on Diamond’s face that something funny was going on. But he couldn’t believe that Diamond had programmed him to ask if it was raining. Diamond punched the rewind button on his Sony tape recorder. He would show Sirhan how he instructed him under hypnosis. But his tape was blank. He had forgotten to put the machine on ‘record’ in the first place. Sirhan was overjoyed, for this only proved what he had suspected all along: Diamond was bluffing...had never really hypnotized him.

1. The government also chose Dr. West to be its examining psychiatrist in the case of Timothy McVeigh, after the Oklahoma City bombing.



Diamond put Sirhan in hypnosis once more...Then Diamond suggested that Sirhan would come out of the trance and climb the bars like a monkey.

Sirhan went out and climbed on the bars. He was up there, he explained to Diamond, "for exercise." Diamond replayed the tape, let Sirhan hear how he'd been programmed. "It wasn't your idea at all, Sirhan. You were just following my instructions."

Sirhan was silent for a time. He shivered. "Ohhh, it frightens me, doc."

"It is very scary," admitted Diamond.

"Oh," said Sirhan, as if realizing something for the first time. "No. No."

"But it's very real," said Diamond. "It's not a fake. And it's not a trick."

"...sir, killing people is different than climbing up bars." (Kaiser, pp. 373-374)

In a conversation with Kaiser, Sirhan mournfully asked,

"Why did I not go to the races that day? Why did I not like the horses? Why did I go to that range? Why did I save those Mini-Mags [the high-powered bullets used on Kennedy]? Why did I not expend those bullets?...It was like some inner force." (Sirhan quoted in Bowart, p. 223)

Walter Bowart speculated Sirhan's sequence of going to the rifle range instead of to the races, and saving some high-powered bullets there, may have been a complex set of posthypnotic suggestions leading up to a preprogrammed murder. His mention of "some inner force" could be explained as posthypnotic suggestion.

Diamond testified, in court, that Sirhan was crazy and accomplished the murder completely on his own: "Sirhan programmed himself to do this like a robot..." (Kaiser, p. 456) Diamond explained the shooting as Sirhan's unconscious

...plan for the fulfillment of his sick, paranoid hatred of Kennedy and all who might want to help the Jews. In his conscious mind there was no

awareness of such a plan or that he, Sirhan, was to be the instrument of assassination...His mind is truly split, with part of his life on one side and part on the other. (quoted in Schefflin & Opton, note 17)

Kaiser disagreed with Diamond's diagnosis of Sirhan. The case reminded him of Palle Hardwick who

...was never aware, until Reiter's work with him, that he had been programmed for crime, and programmed to forget that he had been programmed...Sirhan could have been programmed and programmed to forget. (Kaiser, p. 289)

After his 1969 sentencing, Sirhan was sent to San Quentin Prison. Dr. Eduard Simson-Kallas had been the chief psychologist there for the past six years. The last two years he had been in charge of the psychological testing and study of death row inmates.¹ Simson-Kallas visited Sirhan regularly over the next twenty weeks. He looked over all the previous psychiatric reports and did extensive testing and interviewing. He talked it over with his colleague, Dr. David G. Schmidt, the chief psychiatrist at San Quentin. The two of them came to the firm conclusion that their findings in the case were in major conflict with the psychiatric evaluation of Sirhan given at his trial.

"Nowhere in Sirhan's test response," Dr. Simpson said in the affidavit, "was I able to find evidence that he is a 'paranoid schizophrenic' or 'psychotic' as testified by the doctors at the trial...The fact is, paranoid schizophrenics are almost impossible to hypnotize. They are too suspicious and do not trust anybody, including friends and relatives, not to speak of a hypnotist from, for him, the most hated race. [Diamond was a Jew.] Psychotics in general are among the poorest subjects for hypnosis. They cannot concentrate, they do not follow instructions and basically do not trust. Sirhan, however, was an unusually good hypnotic subject." (quoted in Bowart, p. 225)

Simson-Kallas told a *San Francisco Examiner* reporter that he believed Sirhan had been hypnoprogrammed. He did not believe that Sirhan "could have hypnotized himself into a trance and then shot Robert Kennedy." Simson-Kallas said, "He was put up ...He would be easily blamed, being an Arab. He was programmed to be there."

Simson-Kallas said his suspicions of Diamond's

1. Bowart calls him "Dr. Edward Simpson" and says he was a psychiatrist. I used the Schefflin-Opton version of his name and position.

court diagnosis were first aroused when Sirhan described the murder as if “reciting from a book,” rather than in vivid language—and Sirhan gave no details. He did not appear to know any details.

Sirhan said, “I don’t really know what happened. I know I was there. They tell me I killed Kennedy. I don’t remember what exactly I did but I know I wasn’t myself.” (Schefflin and Opton, pp. 439-440)

Simson-Kallas said that Diamond’s diagnosis of Sirhan as a schizophrenic had to be false because “You can’t hypnotize schizophrenics.” He said the famous incriminating notebooks were real but “the crucial sections are not in Sirhan’s handwriting...[in trance] his handwriting would be different...but it would be looser because he would be more relaxed, not more controlled as these were.”

When Schefflin and Opton interviewed Simson-Kallas, he said, “I resigned over Sirhan...He had asked me to hypnotize him...When I went again to see him the prison authorities wouldn’t let me. I resigned.” (Schefflin & Opton, pp. 439-440)

A few years later, Donald Bain (who researched the case history of Candy Jones) said in a KSAN interview he had proof that Sirhan Sirhan visited Candy’s CIA hypnoprogrammer, “Jensen,” several times. After Candy Jones, John Nebel, and Donald Bain were silenced, Dr. Spiegel continued to speak out. He produced a film which warned that unknowing hypnoprogrammed persons could be manufactured. He insisted to reporters that Sirhan Sirhan was hypnoprogrammed. He refused to speculate by whom.

MIND-TO-MIND TRANCE INDUCTIONS

Secret ESP research is still being conducted, although CIA spokesmen refuse to comment on the nature of these experiments.

- Lee and Schlain, 1987

In 1991, in Seattle’s Magnolia District, I worked as a housekeeper for a wealthy family. There, I encountered a new category of trance abuse. The landscaper was named Greg. When he and his crew came by for their monthly day of yard work, I usually invited them to lunch in my basement apartment. Eventually, the subject of hypnosis came up, and I told Greg that I had been hypnoprogrammed and was now sealed.

Friend Tries a Hit

A few weeks later, Greg called. He said a friend was visiting him who wanted to meet me. Since his friend only had a few hours in town, we needed to meet right away. I accepted their invitation to share a quick supper at a nearby pizza parlor. The friend was a tall, lean man, maybe thirty-five. I sat alone on one side of the table; Greg and his friend sat across from me. We ordered food from the unobtrusive, busy waitress, and then conversed.

I sensed a disturbing hardness, well-masked but there, and coldness at the core of Friend. “What do you do for a living?” I asked him.

He said he traveled around the country giving talks at Unity churches. He offered no details. I had heard that denomination was very “liberal” and leaned heavily toward

trance experience. It occurred to me that he might have hypnotic skills. I didn’t verbalize that speculation. Neither Greg nor his friend mentioned hypnosis in our conversation.

The minutes were passing slowly. The food had not yet come. I hoped it would arrive soon. Suddenly, Friend stood up and leaned across the table toward me until the tip of his nose was only four inches from mine. He looked directly into my eyes with a stern and strained expression on his face. As he did this, he did not speak a word of explanation.

I felt a shockingly abrupt, inductive pressure hit my brain, a force of startling power: Whoom! A strong, subliminally angry, wordless, mental force was pressuring me to enter trance. It was flowing from his mind to mine! It was in direct contact with my unconscious, pushing hard at me to enter deep trance NOW.

But I had been sealed by the most sophisticated methods known at the time of my conditioning. I can only be hypnotized by authorized persons. I felt my unconscious conditioning which blocks entry to unauthorized persons click into action. It was a reflexive, and therefore instant, response to Friend’s mental induction attempt. This



day, that old training was totally supported by my personal will. I did not like him. I did not like the angry, cold feel of his attack on my mind.

I consciously perceived my inner defense system responding to the hammer blow of his induction attempt. An inner wall of “No!” rose up in my mind the instant it sensed inductive pressure coming from him, and to an equal degree of power. My resistance to his induction attempt felt like a thick, impenetrable, huge iron wall. It had instantly energized in my head in response to the threat from him: electromagnetic force colliding with electromagnetic force. It completely blocked Friend’s unfriendly effort to covertly force me into trance.

It all happened in just a few seconds of clock time: His induction effort slammed onto the outer sensory perimeter of my brain. My mind, in a nanosecond, shoved back

his attempted mental intrusion with equal power. I assumed he could mentally feel my effective resistance just as I could feel his attempt to penetrate my defenses. He also could see from my face that I was not in trance.

The induction pressure stopped as suddenly as it had begun. He sat down again. He did not say a word about what he had just done. Nor did I. Nor did Greg. All three of us acted as if it had not happened. It was, altogether, a very weird encounter.

I did not say anything because I did not know what to say. Also, it was still very hard for me at that time to talk about such things because of my “Secret, Don’t Tell” programming. I wondered if Greg was silent because he had already succumbed to the “force” and now was under a posthypnotic suggestion to ignore anything having to do with Friend hypnotizing other people. For whatever rea-

sons, all three of us pretended it had not happened—even though that just-failed mind-to-mind induction attempt was clearly the entire purpose for Friend’s eagerness to meet me.

The pizza arrived. We ate it and went our separate ways. Greg and I never spoke of the incident afterwards. I left the housekeeping job to write full-time and lost contact with Greg. However, I remembered that curious incident—the first time ever I was glad for my sealing. I wondered if it happened because Greg told his friend that I was a hypnoprogrammed person. Did Friend want to help me get free? Or was Friend testing his ability against that of my operator for the personal ego points of possibly capturing another hypnotist’s puppet? Or was Friend seeking to learn what technology another operator had that he did not yet know?

I never expected to see Friend’s induction style again.

A Pattern Emerges

In 1994, when a new edition of my *Encyclopedia of Country Living* was published, I left Seattle on a nationwide book promotion tour on the subject of gardening and writing. After that, I adopted an itinerant lifestyle, working to finish this book while living in hiding. A year later, at a supper table in North Carolina, the subject of extrasensory inductions came up. I told them about Greg’s friend. They told me that a twelve-year-old neighbor boy had a similar experience.

The next day, I interviewed him. It had happened at a Christian youth meeting in a hotel. A complete stranger brought his face close to the boy’s, looked him in the eyes, and caused him to fall into a deep state of what he assumed was “slain in the Spirit.” He knew that the stranger had deliberately done it to him. He remembered nothing of the time while he was in trance. He did not recall ever seeing the stranger again.

The incident with Friend had been simply inexplicable. Two such incidents, however, enabled me to look for elements of pattern. Obviously, there were people who knew how to do mind-to-mind trance induction. How many people? How did they learn to do it? What was the underlying physiology of this event? I tried to remember anything I knew which might be relevant.

Randall Baer had written about the “guru’s touch.” He said a guru would go down the line of devotees once a week and send them, one by one, into temporary bliss with a brain-to-brain mind zap.

Extrasensory inductions. I had read other mentions of persons with mind powers, in or out of religious

settings. Religious experience could easily be confused with generic trance experience. Somebody uninformed about trance technologies might easily assume that a person who can put another person into a trance, or into a state of unconsciousness, or who can read their mind, has divine powers.

I now realized that those were abilities developed in certain flesh-and-blood brains. Not everybody can jump up and turn a somersault in midair. But certain gymnasts with the right body type and training can. In the same way, persons with genetic talent and training could do those mental tricks. They do not have a direct line to God. They are mental gymnasts with skills poorly understood by the naive public.

I wondered how operators learned to do a mind-to-mind induction? The professor had not taught that in the hypnotherapy class I took as part of the research for this book. He had not even mentioned it. I wished I knew how Greg’s friend had learned his skill, and how he used it. Psychic induction was a distasteful, high-powered variant of disguised induction.

My psychology textbook said that it was absolutely impossible for one mind to influence another by a purely mental process. I knew of other significant places, however, where the psychology textbook had made FALSE statements about trance and hypnosis. They were obviously wrong on this one, too.

Because of sealing, I was immune to mental attack from anybody but my own operators (and I lived in hiding from them). And I already knew a lot about hypnosis. It occurred to me that privilege carried with it a responsibility. I should also learn and reveal as much of the truth about this as I could. Next time somebody tried an extrasensory induction on me, I had to make myself ask them some questions before they got away. I had not asked Friend anything at all. I had not asked R.J. and Joe very much. I had to overcome the resistance inside me against asking, or I would never find out more.

History of a Psychic

I read in the newspaper that the CIA had spent \$20 million on psychics. Before, I would have tossed out such a statement as ridiculous. Now, I wished I had looked up and read all the references to psychic research that I had tossed out during my past years of researching hypnosis. A psychic mind-control effort would logically begin with a psychic (brain-to-brain) hypnotic induction.

I knew Friend would rarely fail if he tried that on anybody with normal susceptibility and no sealing, or weak sealing. An obvious CIA goal would have been to train an



Psychic Research

In the 18th century, a French nobleman named Puysegur began the scientific study of the psychic powers of hypnotized persons. Since then, research and training in paranormal powers have been linked with hypnosis. Hammerschlag described a German case from the late 1800s in which a mute itinerant did this type of mysterious mental induction on the daughter of a man who had allowed the vagrant to sleep overnight in his home. Next morning, unknown to her father, she left the house with the vagrant. She followed him helplessly for the next several days until she awoke from trance and explained what had happened. A German court sentenced the vagrant to prison.

Cold War Psychic Research

From the 1950s on, both the Soviet and U.S. governments poured money into secret research on how to develop and control psychic powers. Russians studied the underlying physiology of psychic events and explored exactly what was, and was not, possible in the development of mental powers. The KGB trained agents in “Psychotronic Technology.”¹ The U.S. government did the same. In 1952, the CIA specifically targeted the study of parapsychology as part of the 25-year, 25-million dollar MKULTRA effort. They experimented with extrasensory perception, dowsing, telekinesis (motion caused by mind power alone), clairvoyance (the ability to obtain knowledge in seeming defiance of time and space such as “remote viewing” and mind-reading). (In the psychic area of remote viewing research alone, the CIA, in September of 1995, confirmed the existence of a research program that lasted 20 years and spent \$20 million.) The CIA also sought to find and maximally develop the talents of “exceptionally gifted individuals who can approximate perfect success in ESP performance.”

*The Office of Security, which ran the ARTICHOKE project, was urged to follow “all leads on individuals reported to have true clairvoyant powers”...the CIA began infiltrating seances and occult gatherings...The CIA also sought to develop techniques whereby the ESP powers of a group of psychics could be used “to produce factual information that could not be obtained in any other way...everything that adds anything to our understanding of what is taking place in ESP is likely to give us advantage in the problem of use and control.” (Lee and Schlain, *Acid Dreams*, note, p. 18)*

In the late 1970s, the Stanford Research Institute did psychic experiments for the CIA. In 1981, the U.S. Army began a study at SRI to systematize psychic phenomena and make their results reliable, consistent, and useful to nonpsychics. Their funding was a few million per year. The CIA worked with “seers,” parapsychologists whose abilities they hoped could equal those of the KGB’s psychotonic experts.

“Remote viewing” was discovered in 1983. The success of CIA remote viewing operations has become common knowledge. “Micro psycho-kinesis,” also known as “Micro-PK” is the psychic ability to manipulate small objects, including those in electronic systems. This has also been an area of intense interest to CIA and Pentagon ESP researchers. (Goals might be to erase a disc or bring down a plane, or trigger a distant explosion.) In the category of distant viewing...

1. Sheila Ostrander and Lynn Schroeder wrote a book about Soviet psychic research. *Psychic Discoveries Behind the Iron Curtain*, Prentice-Hall, 1970.

I saw Stansfield Turner, former CIA head, affirm on a videotape, "Yes, this works," he said. "We had one psychic that described specific military installations inside the Soviet Union, information that turned out to be, in detail, correct." The head of the Navy said, "Yes, there is such an operation underway, and no, I won't talk about it." (Maj. Ed Dames, interviewed by Art Bell, p. 6, After Dark)

The private sector was researching too. In a mishmash of fact and fancy, Douglas Baker told how to "control" another person's mind via an extrasensory transmission which he called a "vortex of energy." (Douglas Baker, *The Opening of the Third Eye*, p. 81) He pointed out the anatomical function of the eyes as a nervous-system conduit into, and out of, the brain:

...The optic nerves...have occult significance...The human eyes have a two-way activity...the picking up and transmitting of energies...The latter, the radiatory capacity of man, pour out through the eyes and are the basis of the ancient proposition of the "evil eye." The optic nerves are the only part of the brain which is visible from the exterior. They are to be seen clearly through an ophthalmoscope. It is from this region of the eye that occult forces [ESP] pour (Ibid., pp. 100-101)...Then great power over the one gazed at is soon developed. (p. 107)

ESP Is a Trance Phenomenon

Unusual mental events tend to be associated with **trance** states. **Parapsychological** events are most likely to occur when a person is in a spontaneous, operator-induced, or self-induced trance state. The most remarkable results of all happen when two or more, associated, persons are in trance at the same time.

In 1892, in *The Law of Psychic Phenomena*, T. R. Hudson said that most ESP events are unconscious confabulation or misinterpretations, but that a few are well documented as authentic. He reasoned that extrasensory abilities are based in the unconscious and are most sensitive in a person who is in deep trance. Modern research has confirmed Hudson's theory. Higher scores on ESP tests are associated with deeper trance states:

*The discoveries of psychic expert Dr. Charles Honorton, of the Maimonides Medical Center, seem to agree with this theory linking alpha powers and psychic powers. Dr. Honorton worked extensively with alpha feedback for long periods, and he found that successful ESP insights are related to "relaxation, mild disassociation, passivity, and a reduction of visual imagery."...In addition, everyone who showed relatively high alpha also had relatively high ESP scores in a test. (Jodi Lawrence, *Alpha Brain Waves*, 1972, pp. 56-8)*

Another mental state that is both high alpha and associated with psychic production is the **hypnogogic**:

As your mind changes from one conscious level to another, as from waking to sleeping or sleeping to waking, ESP phenomena have been recorded by scientific observers...The period when you are already asleep and just beginning to dream, is also associated with psychic production. (Ibid., pp. 56-8)



intelligence or military operator to acquire skills exactly like those which Greg's friend had so helpfully demonstrated for me: **maximum speed; maximum force of hit; maximum trance depth for the subject, if affected (yielding maximum hypnotic control)**.

Somebody with skills like that had made an effective hit on a teenage boy at an away-from-home Christian conference. Why? I definitely wanted to learn more. A week later, an opportunity appeared. I met Linda, a lean, attractive New Ager with a husband, Marcus (25 years younger than she was), and a cute baby. They made drums for a living.

Linda told me that an unusual person named Ivy recently had bought a drum from her. She said that, only moments after arriving, Ivy had looked into her eyes and thrown her into the deepest state of consciousness she had been in for years. Ivy then intoned deepening suggestions over her such as, "You will just let go." (I noted that she knew the lingo of a professional hypnotist.) In that deep trance, Linda had vividly hallucinated. She saw her guest as a beautiful, wise young Indian woman. She saw herself as also young and beautiful. **Very seductive stuff.**

Linda had a bad case of rapport. She was filled with awe, respect, longing to obey Ivy, and a craving for that deep trance feeling to happen again. Marcus, on the other hand, who had viewed the whole thing as a spectator (like staying sober at a drug party), now feared and detested Ivy. He also was struggling with alienation from Linda caused by her sudden fascination with Ivy.

I said to Linda, "Please, I want to meet Ivy. I want to ask her some questions." I explained my research in extrasensory inductions.

A few days later, Ivy walked into a social gathering at Linda's house where I awaited her. She was a short, slim, grey-haired, well-dressed, well-groomed, attractive woman of 58. Linda introduced us, then walked away into the adjacent porch where her other guests were seated.

I knew that Linda had already told Ivy why I wanted to meet her, but Ivy did not mention extrasensory trance inductions as we chatted casually. She and I now stood alone, facing each other. Then I felt her turn on the mind-to-mind inductive pressure. This time I was expecting it.

It felt different from the mind of Friend. Her head was not placed so near to mine as his had been, only about eighteen inches away. Her eyes stared fixedly at mine. (The eyes are the only site at which a person's brain is not encased in bone. At the back of the eye socket, the optic nerve connects directly with brain tissue.) Her eyes, as she

began that moment of inductive effort, acquired a quality of extraordinary luminosity. However, that may have been an unconscious, rather than a normal, visual registering.

As her eyes projected that extraordinary, focused energy, I simultaneously perceived Ivy's inductive pressure on my mind. Her push was not as powerful as Friend's had been. Rating their voltages on a subjective scale, I'd say that his was nine out of a possible ten; hers was seven out of that ten. However, her attempt had lasted longer than his—perhaps ten seconds. His lasted only about three seconds.

Her induction pressure, also, would have forced me into trance, if I had not been sealed against it. I resisted both consciously and unconsciously. I did not turn my eyes from her gaze, or walk away. I simply stood there, calmly analyzing what was happening, until she gave up and turned it off.

Ivy got her turn. Now, it was mine. I seized the opportunity and spent the next three hours (in the presence of Linda, her spouse, and several guests) trying to extract information from her.

I learned that she was single, the mother of three grown children, and a student in her final year in Kent University's Ph.D. clinical psychology program. She said that her department's faculty did not know about her interest in using her mind to force people into trance. She had not mentioned it on her application.

Ivy had been studying extrasensory mind inductions privately for the past ten years, ever since she took a class in Silva Mind Control. After she realized that extrasensory induction was possible, she tried to induct people, every day. She did that wherever she found guinea pigs to practice on (at the laundromat, in the checkout line).

"How many inductions a day, on the average, did you try?" I asked.

"About six," she said.

At first, her power was weak. She could not get her targets into altered consciousness. Or, if she could, their trance was not very deep. As years passed, however, during which she kept practicing and kept goading herself to generate a more powerful induction, she gradually became better at it.

She learned that she had to be in a momentary, self-induced, deep trance to do a mind-to-mind induction. The deeper her own trance was, the stronger her power became to force somebody else's mind into that state.

Therefore, she sought out mind-training programs that would train her to go into deeper trances.

After she took a Master-level Avatar course five years ago, Ivy said that her extrasensory induction technique really began to work. Back home from Avatar, during a week when she felt like she was “going crazy,” she said that two “guides” had appeared in her mind. “They” had been with her ever since. “They” chose the persons she would zap and controlled the entire zapping process in her brain. From then on, she had her present ability.

Then, Ivy heard of a new type of brainwave synchronizer induction machine. She volunteered to be a test subject for it. She received several months more of deep-trance training from that electronic device. It was a tape with a music track. The synchronizing (induction) track was a subliminal layer concealed underneath the music. She listened to the tape through a headset.

Although she had paid for the synchronizer like a regular product, she said that she was required to keep a detailed daily record of her experiences while using it. She also had to make weekly phone reports to a supervisor.

I said, “Sounds like a research project.”

She nodded, “It probably was.” She did not know who had invented the device, or who was sponsoring the research. “Some government agency,” she guessed. She said that machine was the most powerful inductive tool she had ever encountered, sending her into the deepest trance she had ever experienced. It was “better than Silva, better than Avatar.”

Her instructions were to use it *no more than half an hour per day*: “One day I said to hell with it and left it on for two hours,” she recalled. “I threw up for the next three days.”

Ivy saw no moral problem with performing uninvited extrasensory inductions. She claimed to be “adjusting the energy” of the people whom she pushed into trance. She said that if it was possible for her to push somebody into trance, that meant they needed her “adjusting.” She said that she was meant to affect each person she put into trance, and therefore she was not personally responsible. She insisted she used her abilities only for good.

I did not view it that way. Her attempted induction of me, and the interview she gave afterward, certainly were

helpful to me. They were helpful, however, only because I was researching predatory and abusive hypnosis, and she was a predator who was willing to demonstrate her ability and then talk about it. I had now observed and interviewed a person who used remarkable mental skills for a personal power trip—gathering devotees, spreading her religion by a devious hypnotic technology, for she urged everybody she encountered to let her give them the past-life trip: “No charge.”

She also used this black art to attack a vulnerable person she saw as an obstacle. Linda’s husband, Marcus, did not approve of Ivy, and he did not pretend otherwise. Marcus had never had a past life regression and certainly did not want one now. Ivy was clearly targeting him for a future forced-induction attempt as she dropped repeated, insistent, seductive presuggestions: “The name ‘David’ keeps coming to mind. I think you’re going to experience a past life. Yes, something about ‘David,’” she said to him.¹

Teacher from the Psychic Institute

Three days later, I heard about a woman in the community who had been the head teacher at the Berkeley Psychic Institute. I made an appointment to interview Melina. She was an attractive young brunette possessing a powerful mind which I sensed was carefully leashed. We had a warm conversation. She confirmed that the CIA had long been interested in psychic skills. She said they used to have a panel of psychics observing the Soviet Union. She said that two graduates of her fifteen-month training program had been hired immediately after graduating by “the government.”

I said, “I’ve heard some people say there really is no right or wrong, no good or evil, that it’s all relative.”

She shook her head firmly, “No.”

We talked about unethical trance. Melina does not call herself a hypnotist, but rather a “psychic.” She said that, as a child, she dragged chairs around the room, blew up electronic equipment, and bent spoons with her mind (talents she now can, and does, inhibit). Instead of attending college, she took training in directly using her brain power. (She did not say who trained her.) Then she found employment as head teacher of the Berkeley Psychic Institute. After a few years, however, she left that job because of ethical differences with some of the Institute’s leadership. She now worked with a team of physical therapists on the Eastern side of the Appalachians, trying to help clients with crippled and disabled bodies.

1. Understanding this, it can be seen that, although numerous witchcraft trials in the Middle Ages are well documented as being inappropriate, there may have been a kernel of truth involved in the movement. Ignorant and fearful persons may have been desperately trying to defend society against predatory individuals with the skill of mind-to-mind inductions.



She knew exactly what I was talking about when I described the psychic induction attempts by Friend and by Ivy. She called what they had tried **displacement**: the attempted displacement of the subject's conscious control by the hypnotist's mental will. She also called it **running your energy through a person, or invasion**.

Melina said she had taught her students at the Berkeley Psychic Institute how to **block** both displacement and **mind-reading** attempts as a part of her curriculum. (Mind-reading was a completely new idea to me. I had never encountered the concept before, outside of science fiction.) Melina said that she considered both displacement and mind reading unethical and, therefore, did not train students how to do them, only how to block them. She added, however, that learning how to block displacement and mind reading obviously made students aware that displacement and mind-reading were possible. She said she knew some students, once made aware, would try on their own to use those skills.

She recalled an incident that had occurred at a Whole Life Expo (**psychic fair**) that she had attended. She had been watching a demonstration given by a "Reverend Martinez," the head of an unnamed organization. His top assistant, a person "who misused his energy a lot," came and stood close by her. For fifteen minutes, she said, he attempted to "invade my mind." Melina silently blocked him, and continued watching. (I soberly pondered that image. I had resisted ten seconds. Melina had coolly held off a mind predator for fifteen minutes. I was impressed.) After that quarter hour of fruitless attack, he said aloud to Melina, "You have a strong mind."

"Yes, I know," she replied.

"I'd like you to join our organization," he said.¹

Melina replied, "I'm already employed. I'm head teacher at the Berkeley Psychic Institute."

I asked her how many people were now receiving this type of training. She would not speculate about the numbers in other programs. She did say that the Berkeley Psychic Institute had seven "seminaries" in California (which she said was a center for this kind of activity). Total current attendance in all the training programs of the Berkeley Psychic Institute was about 7,000. Each graduate received a credential from the state of California as a "minister" in the Church of Divine Man. I asked, "How big are Church of Divine Man congregations?"

"There are scarcely any congregations," she said "They have a publishing house (Deja Vu Publishing, Berkeley, California), the training programs, and tours to 'psychic' places. That's it."

"Then what do these 'ministers' do after they graduate?" I asked. She said they often went into **psychic reading**, or counseling, or gave training courses in meditation, or some such. Then, she talked about the psychic readers who put their subjects into involuntary, deep, even amnesic, trance—displacing the clients' conscious minds with their own, establishing hypnotic control over them.

I was surprised. I had thought psychic reading was fake. Now I understood that the induction of the subject and his consequent suggestibility could be real. I also realized that the psychic might put herself into a trance state and make use of its paranormal potential for the "reading."

Melina also expressed distress about psychics who displace and then give the entranced client manipulative suggestions: "You must move to San Francisco," she intoned, psychic-style. She spoke bitterly of psychic-addicted clients who let a psychic utterly control their lives.

I asked, "What percentage of psychics use their skill unethically?"

She thought hard a minute. "About sixty percent of them," she said. "And a further fifteen percent create problems for their client because they have so little self-knowledge of their own programming that they unconsciously pass on their own baggage."

"What organization out there abuses mind-control technology the worst?" I figured she was going to answer the CIA or NSA. After thinking another long minute, however, she said, "The Scientologists."

After that, I became busy with other things. I lived on the road, stayed with volunteer hosts, led writing workshops for home-schooled children and their teaching parent. I also spoke on long-term trends in the nation's food supply and how to have the greatest garden of your life. In every spare moment, I worked to complete this book.

Over the next year, I encountered several more persons attempting mind-to-mind inductions. (Now that I knew what it was, I recognized encounters I would have missed before.) One inductor was a short, homely, elderly man who tried it on me during a contra club's closing waltz. After our

1. I did not get around to asking what this "organization" of persons who "misused their energy" actually did, but it sounds like it would definitely fit into the category of trance abuse.

dance, I questioned him.

He said he had read about mental inductions in a few places and now was trying to learn how to do it. He attended contra dances several times a week in order to attempt inductions during the spin-your-partner moments, and waltzes. Contra etiquette requires the girl to stare into her partner's eyes during spins, and her brain is somewhat disabled from all the spinning. These two factors helped his induction attempts.

I met a professed witch whose induction effort felt like a dark spinning evil rushing toward me, a wandering psychic who attempted my induction with gleaming eyes from a seat in my audience, and a charismatic minister whose prayer induction produced a skillful mental sensation of a disorienting spinning, with additional nudging to fall backward on each backside pass of the spin. None of those three affected me.

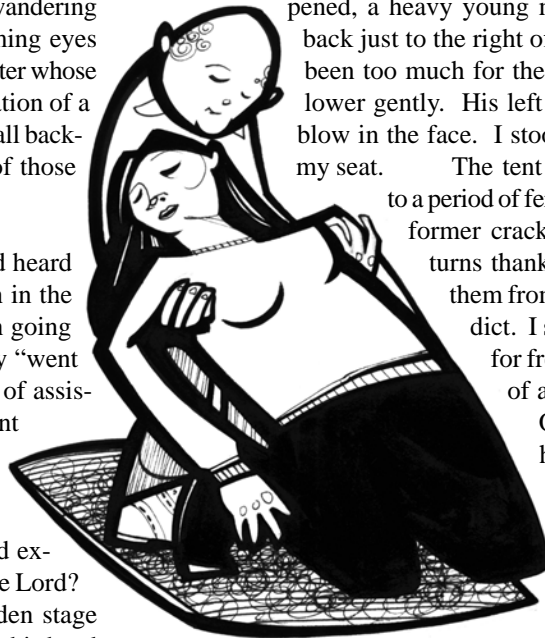
I also visited a tent meeting where I had heard that the minister was causing people to be "slain in the Spirit." Toward the meeting's end, people began going forward. One by one, he prayed for them. Many "went down," falling backwards into the waiting arms of assistants who then gently laid them on the canvas tent floor. They would remain there until normal consciousness returned.

I went up, determined to experience and explore this man's induction also. Was it really of the Lord? Moments after I arrived at the edge of the wooden stage platform, the pastor came over to me. Positioning his head within a couple inches of mine, he began to pray for me. I closed my eyes at the thought of prayer. I am a Christian.

Then I felt a mental invitation to induction. It was substantively different, in two ways, from all the previous ones. First, the carrier wave emotion was not anger like that of Friend, or the seductive fascination projected by Ivy and the Contra Man, or the disorientation nudge of suggested spinning. Instead, it felt like pure love, safe and warm. Second, unlike all the previous mind-to-mind induction attempts, there was **no compelling element**. Instead, I felt like my permission was being asked: "Well, do you want to, or not?" I felt as if the decision was entirely free, entirely

mine.¹

"I want to," I thought. Then it happened. For the first time in my life, I was "slain in the Spirit." I instantly became completely unconscious and fell backward. The assistants, waiting behind me, caught my falling body and lowered it to the canvas floor. A moment later, my conditioning to resist any induction reasserted itself. I surged back up to full awareness. The experiment being completed, I had no further reason to be in that state.



As I still lay there, considering what had just happened, a heavy young man crashed onto his back just to the right of me. His weight had been too much for the minister's helpers to lower gently. His left arm hit me a painful blow in the face. I stood up and returned to my seat. The tent meeting then shifted to a period of fervent testimonies from former crack addicts. They took turns thanking Jesus for freeing them from the life of a drug addict. I silently thanked Jesus for freeing me from the life of a hypno-robot.

Over the next years, I heard of—or met—other charismatic ministers, prophets, or revivalists whose mind-to-mind quality did not seem pure and holy to me. I learned that just because it says it's good, does not guarantee that it is good. I also learned that any attempt by me to bring up the subject of extrasensory induction to any nonChristian practitioner triggered instant mental combat.

I never failed to resist an unwelcome induction in one of these Top Dog contests. Nobody ever tried it on me a second time. Soon, I quit inviting trouble. Reason suggested that somewhere there was a psychic predator who could overcome my inner resistance. I did not want that to happen.

1. Neuroanatomists say that no two brains look exactly alike, outside or inside. Every mind-to-mind induction attempt I've experienced has had a unique "signature" quality.



Psychiatry Is No Longer a Joke



...the observer who attends neuroscientific meetings finds himself in the company not just of researchers, writers, philosophers, businessmen, politicians, and journalists but also of military men....What will it be like, a few years hence, when the secret police have scanners to identify banned thoughts and drugs to change minds?...In this future-shock world of ours, truth often seems more like fantasy than impending reality, which makes it all the more difficult to confront....as I've watched the science unfold in an obscurity that approaches secrecy, my fears have intensified...Psychiatry is no longer a joke, and those who continue to laugh are fools.

Jon Franklin, *Molecules of the Mind*, 1987, pp. 281-282, 298

“A” Was Not Available

My routine, at that time, was to recruit persons I knew, ask them to organize a week’s speaking schedule in their area for me, and then live in their home while fulfilling those obligations. I asked a Tennessee lady, whom I had met on a previous visit, to organize some bookings. “A” agreed. A few weeks later, however, she changed her mind, saying she was too busy. She had found an enthusiastic fan of mine to take her place as my Tennessee coordinator, she said. That was how it came about that “D” took charge of my Tennessee visit.

“B” Is for Background

D’s booking abilities turned out to be truly remarkable. She scheduled stays combined with speaking engagements for me, first with “B,” then with “C,” and lastly with herself. She scheduled so many speeches and seminars that I had to book a second visit to Tennessee to fit them all in. My first visit (divided between B and C) was for a week, in late October, 1996. B turned out to be a kindly old Assembly of God minister who pastored a tiny rural church. I enjoyed my three-day visit there, and spoke every day. Then it was time to move on.

“C” Is for Counterintelligence

After I wearily pulled into her driveway after dark, my second Tennessee host, C, greeted me cordially. We then sat in her homey living room, getting acquainted. Suddenly, the pretty blonde daughter nestled in her lap said, **“Don’t think of pink elephants.”**

That’s a standard line in programs that train hypnotists. It helps students to understand that the unconscious does not perceive negatives (“not,” “no”) very well. Student hypnotists must learn to phrase suggestions in a **positive** way, because “Don’t think of pink elephants” makes people think of pink elephants.

I now knew that there was a hypnotist in this young girl’s environment. Who? I remembered that I had not yet met the girl’s father. I asked my hostess, “What does your husband do for a living?”

“He’s in Army Counterintelligence,” she said.

“What does he do in Counterintelligence?”

“He’s an interrogator.”

Now I understood. Interrogators are highly trained in hypnosis, narcohypnosis, and whatever else can penetrate mental defenses. I knew that from reading old U.S. military brainwashing research.

She added, “He’s in Korea right now, won’t be back until April.” (I breathed an inward sigh of relief.) “He hates his job,” she continued. “He always has to work either in an attic or a dungeon (basement), someplace with no windows. For the year and a half he was taking his training, he was awful to live with.”

I could believe that. He probably endured some Secret-Don’t-Tell conditioning himself. I had heard elsewhere that certain military/intelligence ladders of success now require some hypnoprogramming for every new promotion.

“D” Is for Dangerous

C told me that Mr. and Mrs. D were friends of her and her husband. She said that they, also, would be arriving at her home and staying overnight that night, being on their way to the Small Farm Expo at St. Louis. It was late, and I was tired. I went to bed. Sleeping soundly, I did not hear the Ds arrive.

In the morning, my hostess knocked on my bedroom door. She said the Ds wanted to meet me before they had to leave. I dressed and came out. C was French braid-

ing Mrs. D’s hair. Mr. D was sitting at the breakfast counter. At his invitation, I sat down across from him.

He introduced himself as “ex” Army Special Forces. He seemed a wholesome, open, kindly man. He launched into conversation with me with a tale of fighting in North Africa under the U.N. with the “black helicopter” outfit. He spoke bitterly of the U.N. commander’s refusal to let the Americans rescue a captured comrade who, as a result, had been tortured and killed.

I had no experience with the U.N., or the military, or fighting in Africa, so I just nodded.

He said that he was employed now in a job that had to do with explosives (and was connected to NASA).

I had no experience, or interest, in explosives, so, again, I just nodded.

At that moment, C intruded and asked me to go into the next room and play a game with the children. (It was the day after Halloween. This was a substitute for last night’s trick-or-treating, which she had forbidden). She directed herself, Mr. D, and me, each to a room where we were to think up academic questions to ask the children. A correct answer was to be rewarded with a piece of candy.

She left Mr. D where he was, and assigned him to ask the science questions. I was to ask the English and Social Studies questions. I stood, and began to walk to my station. I was almost to the door when I heard Mr. D ask a child, “What’s the largest planet?”

“Jupiter,” the child answered.

“No, it’s Venus,” he said.

I paused, startled. If this man was really in a science/engineering field (explosives) and “connected with NASA,” how could he possibly not know that elementary bit of astronomical trivia? “It is Jupiter,” I said.

D accepted my correction gracefully.

I wondered if he actually was an undercover agent looking for people who hated the U.N. and were interested in explosives. The Small Farm Today conference, to which he and his wife were hurrying, might have some of those. Both the Cs and the Ds had recently increased their involvement with the “survivalist” movement, embracing back-to-the-land lifestyle, homeschooling, and fundamentalist Christian faith. Maybe both were covertly looking for would-be bombers.



I proceeded to my designated room, sat behind a child's desk, and began to ask questions. I began with harder ones: "What are the names of the continents?" "What are the parts of speech?" The children didn't know. I gave easier, and yet easier, questions, and finally managed to give away some candy.

Her hair being braided, Mrs. D waved a brief farewell to me from the doorway and then hurried off to gather her children for departure. Her husband came into the room to say good-bye. I rose to acknowledge him. As he stood opposite me, on the other side of the desk, mouthing a formal good-bye, I felt his mind push a wave of flattery and a short phrase into my mind: "**A woman of importance!**" I was surprised that I could perceive the words of his projected thought so clearly.

Then I felt a sudden, chilly emptiness around my mind. I realized that impression of chill emptiness was caused by an unconscious perception that Mr. D's flattering thought had been combined with an inductive effort—which was now turned off, resulting in the "emptiness." This was the first extrasensory inductive effort on me that I had not recognized in the start-up and run mode. I had only realized it, consciously, after he turned it off.

I did not like that. I was glad, however, that D had not been able to force me into trance, even though he had been able to broadcast that thought into my mind. I assumed that he had now given up on me, as had all the others.

I was wrong. Defeat only caused this adversary to change his tactics. He swiftly reached out and took my right hand in both of his. He briefly clasped it in a conventional manner. Then he began a random series of little squeezes here and there in different places on my hand. Next, he abruptly switched from that distracting, confusing series of hand pressures to focus on feeling for the main nerve leading from my hand up into my arm. He found it, and pressed down hard with his thumb.

I felt an erotic wave surge, from the point where he pressed, up the nerve in my arm toward my brain. My first reaction was distress that this young Christian married man (he and his wife were longtime members of a major charismatic denomination) had deliberately stimulated the sensual charge now rushing toward my head with bioelectric speed.

Then his stimulus got **blocked**, transformed to nothing. I did not know how he caused that surge of excitation.

I did not know how I stopped it, but I did. My sealing obviously covered that [sex induction?] possibility also.

Mr. D now spoke, aloud, to me. He said, "Something's wrong here. For some reason, that just isn't enough. Got to do this right." A casual listener could have interpreted that statement to mean that his handshake was not a warm enough good-bye, for Mr. D's outstretched arms now indicated that he must have a farewell hug from me.

He was aware that his attempts to push my brain into a state of trance weren't working "for some reason." He was going to try something more, something different, to "do this right." My programming was always to block unauthorized mind penetration. His programming was never to give up his efforts to penetrate, to keep switching attack modes until he succeeded.

He released my hand and walked around the desk, holding out his arms in invitation. Giving no outward sign that I was aware of his previous attempts to penetrate my mental defenses, I politely accepted this "farewell" hug. He was about my height. Embracing me, he placed his ear next to mine. As his head came close to the side of mine, I guessed that he would try again. He did.



(As our skin touched, ear-to-ear, he scanned a measure of my individual—signature—pattern of brain function. Having established my wavelength pattern, he tuned in on my brain activity, like a radio receiver tunes in a chosen station. Next, he activated a means to continue—automatically—perceiving my brainwave activity. My recognition of these events was not, at the time, conscious. I would realize, later, what I had unconsciously observed just

then.)

While we still touched, ear to ear, D next **forced** me to think a very amplified ("loud") thought in **pre-speech** mode in my mind. I communicated only one word in response to his stimulation of that area of my brain. Delivered to his mind-reading capacity, it was doubled and borne up to consciousness on a carrier wave of derision: "SLEAZY! SLEAZY!"

With the automaticity of unconscious reflex, D accomplished all that in brief seconds of time. Now, he unwound his arms from me and stepped back.

Neither my face nor my outward words in this prolonged process of fake farewell—not even that rudely stimulated thought—had betrayed to him my deep-level sensing of the combat of our lower minds. From the moment that I felt him begin to listen to (record?) my thoughts and emotions, they had revealed nothing of significance. My emotions appeared to be unruffled by all that had passed between us—except for a lingering, generalized disgust. My mental content was as serene and routine as if I did not know all I really knew.

I was not consciously thinking about the probability that he was an agent. I did not consciously think of the relevance of his penetration attempts to my own training and break for freedom.

Just then, Mrs. D came and stood in the doorway again. She was anxious to leave for St. Louis. She told her husband that their children and suitcases were now all in the car, waiting for him. She hurried away again.

Mr. D walked halfway to the door. Then he turned, paused, and told me how much he was looking forward to my scheduled stay in their home (a return visit to Tennessee for ten days in mid-December). I politely voiced a similar statement. I thought I meant what I was saying.

Then he left the room. I heard Mrs. C's front door open, and then close, as the Ds left her house. I heard their car engine start up outside. The moment the car engine started, I felt D's mind-reading connection with me cease. (I do not know why the timing of those two events matched.) I heard the crunch of tires on gravel as they drove away.

For the first time since Mr. D began probing my brain, I was now safe to consciously think my true thoughts and feel my true emotions. In the safety of that broken connection, a huge wave of **panic** broke over me. The panic surprised me.

I had never felt that fear before—except of my own operators. Now I had something new to worry about. Life would be even more complicated and difficult. It was a week before that feeling of fear wore off.

A friend had mentioned having a long “intense” phone conversation with Mrs. D. My friend had sounded so disturbed. I now called and asked her to tell me more about that conversation.

She said Mrs. D “was like a top spinning out of control. She kept jumping from one idea to another. It didn't make sense.”

“That's a standard **conversational induction** technique, a **confusion induction**,” I told her.

She asked me, “Can a person be hypnotized over the telephone?”

“If they're susceptible, yes,” I answered. “Please avoid talking to her again.”

Could I avoid talking to the Ds again? The Lord had just provided, by seeming coincidence, a brief (and safe) preview of these upcoming hosts, six weeks before my scheduled visit to their home. What would happen if I fulfilled my promise to visit?

Mr. D would try again—and again, and again. Or would it perhaps be a dual effort with him and his wife combining the mental heat? Or covertly drugging me? Or something else? I had less chance of resisting all that. I knew I must cancel the visit.

I could not lie. So what could I say? Finally, I wrote the Ds a postcard which explained that, for urgent personal reasons, I must cancel my visit to them. Mrs. D wrote back—not to express sympathy—but in obvious anger. She demanded to talk to me on the phone. I wrote back further apologies.

The subliminal impression that I returned to again and again, in reviewing and analyzing my memories of that incident was that Mr. D's mind had used some type of mechanical assist in its penetration efforts. How could that be?

Analysis of a Hit

During the week after my encounter with Mr. D, I considered all that had happened in the few minutes during which he had said “good-bye” to me. I pondered those events until I was satisfied that I had extracted every possible bit of data from my memory.

Then, to the best of my ability, I analyzed my observations. I realized that Mr. D had used seven distinct and different techniques:

1. *He projected a verbal thought into my mind: “A WOMAN OF IMPORTANCE!”*
2. *He used an extrasensory form of contact with my mind, including the generating of an **extrasensory induction** effort.*



3. He performed a **confusing** routine of hand pressures.
4. He sent an **erotic sensation up the nerve** from my hand toward my brain.
5. He forced me to think a **verbal thought “loudly”** enough to be clearly perceived by his extrasensory ability (or its mechanical or biochip adjunct?).
6. He took a **brainprint** of my mind’s individual electronic frequency profile.
7. He was **mind-reading** my thoughts (and/or mechanically recording them?) from the time he was ear-to-ear with me until his car engine started.

Now, I needed to find corroboration and explanation of each of those seven techniques. It was easier than I had expected.

1. Thought Projection—D had projected his verbal thought into my mind: “A WOMAN OF IMPORTANCE!” I soon found references to the early stages of that technology.

In 1961, after meeting a technician, who said he could hear radar, Dr. Alan H. Frey, a biophysicist, began testing the effects of microwaves on human nervous systems. He learned that the technicians were right. The human auditory system could respond, as if hearing, to certain modulated electromagnetic energies. His subjects could “hear” pulsed microwaves in the 300 to 3,000 megahertz frequencies.

They tended to perceive the energy as buzzing, hissing, ticking, or knocking. They could hear it even when blindfolded, even when they did not know that the power was on. Deaf persons could hear it. The subjects perceived the sound as coming from inside their heads, or from a little ways behind them.

Frey published those research results in 1961 in *Aerospace Medicine* and in 1962 in *the Journal of Applied Physiology*. The U.S. establishment ignored his work.

Soviet scientists, however, were doing similar research. They recognized that the human nervous system is an electronic network through which current flows. Normally, skin and skull shield it from outside power fields, but **when certain types of electromagnetic fields impact the body’s neural tissue, that impact can cause nervous system response.** Frey had proved that.

Frey continued to experiment. He placed electrodes in the brains of living cats, irradiated their heads with pulsed microwaves, and observed their responses on an oscilloscope. They definitely were being stimulated. (Brodeur, *The Zapping of America*, p. 52)

Now the military was interested. This technology was mentioned in a report assembled for the Defense Intelligence Agency by the Army Medical and Information Agency: “Sounds and possibly even words which appear to be originating intracranially can be induced by signal modulation at very low average power densities.”

In the spring of 1973, Dr. Joseph C. Sharp, at Walter Reed Army Institute of Research, “heard” and understood spoken words communicated to him by “a pulsed-microwave audiogram (analog of the words’ sound vibrations) beamed into his brain.” (Becker, 1985, p. 319) Sharp was the subject in

...an experiment in which the human brain received a message carried to it by a pulsed microwave transmission. Sitting in an anechoic chamber—a room with absorbent walls designed to prevent microwave reflection—Dr. Sharp was able to recognize spoken words that were modulated by an audiogram—a graphic representation of the sound waves that humans can hear—and that were then sent into the chamber at a microwave frequency of about two gigahertz. (Brodeur, note, pp. 295-6)

This type of research is now hotly pursued. In its 1996 defense authorization bill, Congress authorized \$37 million for research in what the Pentagon calls “nonlethal” or “less-than-lethal” technologies. This is sold as a “humanitarian” form of warfare—or crowd control.

Much of this “friendly force” technology involves electromagnetic fields and directed-energy radiation, and ultrasound or infrasound weapons—the same technology that’s currently of interest in brain-stimulation and mind-control research.

*A partial list of aggressive promoters of this new technology includes Oak Ridge National Lab, Sandia National Laboratories, Science Applications International Corporation, MITRE Corporation, Lawrence Livermore National Lab, and Los Alamos National Laboratory. (Brandt, “Mind Control and the Secret State,” *Prevailing Winds Magazine*, No. 3, p. 75)*

John St. Clair Akwei wrote in his evidentiary document of technology for projecting thought, implanting thought, and associated NSA technologies:.

RNM [Remote Neural Monitoring] can send encoded signals to the brain's auditory cortex, thus allowing audio communications direct to the brain (bypassing the ears). NSA operatives can use this covertly to debilitate subjects by simulating auditory hallucinations characteristic of paranoid schizophrenia....

Speech, 3D sound, and subliminal audio can be sent to the auditory cortex of the subject's brain (bypassing the ears), and images can be sent into the visual cortex.... This modulated information can be put into the brain at varying intensities from subliminal to perceptible.

2. Imperceptible Induction Pressure—I could not perceive it turn on, only switch off. I must have perceived it turn on unconsciously, however, because I unconsciously blocked it. I already had experience with extrasensory induction attempts. What was new to me was the existence of **mechanical** devices for extrasensory mind accessing.

For I had sensed that D's efforts were more than human. Did he have a microminiaturized brainwave synchronizer device carried on (or in?) his body?

I learned that his technology dated back to the 1980s. It was the property of the NSA division called SIGINT (Signals Intelligence).

There are three other significant NSA divisions: **COMINT** (Communications Intelligence) aspires to "blanket coverage of all electronic communications in the US and the world." (**Akwei**) The division called **DOMINT** (Domestic Intelligence) keeps records on all U.S. citizens, and gathers extra information on those individuals who are of special interest to them. According to Akwei, NSA (as of 1996) had 50,000 agents in another division called **HUMINT** (Human Intelligence).

These agents are authorized by executive order to spy on anyone. The NSA has a permanent national security anti-terrorist surveillance network in place. This surveillance network is completely disguised and hidden from the public... (Akwei's document)

Akwei said that some of the HUMINT agents knew they were agents—and some were "unknowing" agents. **So the NSA was using hypnoprogramming too.** But Mr. D obviously knew that he was an agent.

3. Confusing Routine of Hand Pressures.—It was no accident that D had given my hand all those little squeezes. That was a technology I had instantly recognized. Years before, M.H. Erickson reported using a series of random hand pressures as a disorienting and confusion technique to aid induction of a female subject.

In my case, however, D's random hand pressure was more than just a confusion technique. It was also obviously intended to **distract** my attention and camouflage his next act, which was feeling for the main nerve in my hand, and pressing on it.

4. Erotic Signal—How did D send that erotic sensation from the nerve in my hand toward my brain? The analysis I had made shouted "machine-aided"; the signal was too crude, too out-of-context, too specifically directed into just one main nerve to be natural.

I had no idea how it was generated or how it was passed into my body. I was grateful I had been able to block it.

A few weeks later, I told a friend, who is an engineer, about that strange sensation going up my arm. She was baffled too.

When we talked the next time, however, she chortled happily, "I know now how he did it! An FBI agent who came to give us a seminar on security measures told a joke. The seminar was classified. The joke was not. Never mind its details. The punch line was, 'Chip in the thumb, chip in the index finger, battery in the ring.' As soon as he said that, I knew that's how he did it to you."

5. Forced Articulation of Pre-Speech Thought.—D's ability to force me to think a verbal thought "loudly" enough to be clearly received by his electronic adjunct had deeply annoyed me. I wanted to understand how he did it.

I soon learned that research on radio signals to subjects' brains started in the early MKULTRA era.

Dr. Elliot Valenstein was a psychosurgeon. He stuck electrodes into various sites in the brains of living creatures, testing external control systems directed by wire connections or radio signals to those electrodes. He called his goal "electrically- controlled behavior."

Jose Delgado, a Spanish physiologist and neurologist who researched at Yale during the later years of his



career and published more than 200 scientific papers, called it “electronic brain stimulation.” Delgado’s book, *Physical Control of the Mind* (1969), has photos of epileptic girls with implanted brain electrodes. He could “send electrical signals...by telemetry while the patients are completely free within the hospital ward” (Delgado, 1969, p. 89). He once halted a charging bull by a radio signal to its implanted electrode.

Delgado also proposed direct radio interface between brains and machines:

...direct communication can be established between brain and computer, circumventing normal sensory organs (p. 93)...Electronic knowledge and microminiaturization have progressed so much that the limits appear biological rather than technological. (Delgado, 1969, p. 96)

In his acknowledgments, Delgado thanked the U.S. Public Health Service, the Office of Naval Research, and the U.S. Air Force for providing financial support for his book. He applauded the exploding interest in “neurobehavioral sciences.” He said “Brain research institutes flourish, publications are increasing in number...” (Delgado, 1969, p. 258)

I learned that the NSA also called it “electronic brain stimulation.” It can now be accomplished without putting electrodes in a subject’s brain. “...finely-tuned microwaves can achieve the same results as implanted electrodes...” (Daniel Brandt, “*Mind Control and the Secret State*,” *Prevailing Winds Magazine*, No. 3, p. 76) This technology

...has been in development since the MKULTRA program of the early 1950s, which included neurological research into radiation (nonionizing EMF) and bioelectric research and development. The resulting secret technology is categorized at the National Security Archives as “Radiation Intelligence,” defined as “information from unintentionally emanated electromagnetic waves in the environment, not including radioactivity or nuclear detonation.

Signals Intelligence implemented and kept this technology secret in the same manner as other electronic warfare programs of the U.S. Government. The NSA monitors available information about this technology and withholds scientific research from the public. There are also international intelligence agreements to keep this technology secret. (Akwei document)

Okay, but how could Mr. D make me think a thought? How could he make me think it loudly? Did he

use a subliminal question to designate what the content of that thought would be? Did he ask, “What would you call me?” Or, “What do you think of me?” Did he want, most of all, to know if I realized that he was an undercover agent?

Akwei provided a table of frequencies. He said that 9 Hz, for example, might create a “phantom touch sense.” Was that the frequency of the charge that D sent up my arm?

Akwei did not say which frequency might stimulate a subject’s pre-speech center, forcing them to loudly articulate a thought. But Akwei did list the frequencies which might stimulate a person’s motor control cortex, auditory cortex, and visual cortex, etc.. It makes sense that a brain’s pre-speech center can also be zapped into performing.

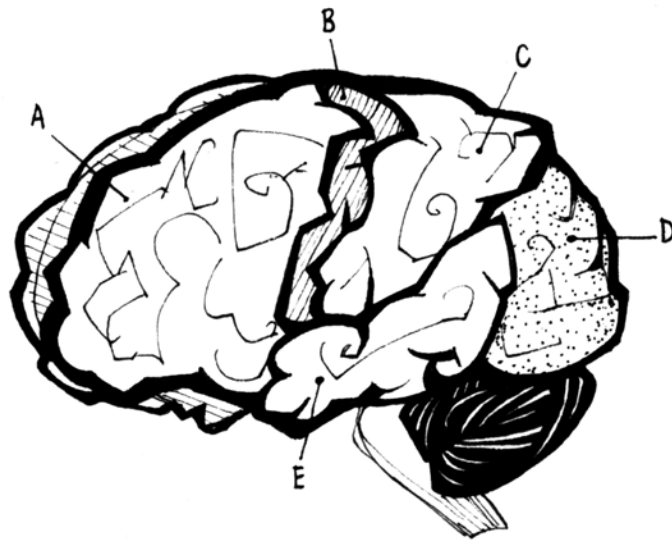
The signal by which D stimulated the word SLEAZY out of me during that ear-to-ear positioning was probably highly focused and directional. Microwave signals have been developed into “pencil-thin beams which were too narrowly directional to be picked up anywhere beyond the immediate vicinity of the signals.” (Bamford, p. 508)

An acquaintance, who is CEO of a company that implants a space-age hearing aid, told me that technology to perceive verbalized, “pre-speech,” human thought via skin contact is now well developed. He said that electrical equipment can “gather and read the electrical fields generated on the skin and translate subvocal speech into text.” So, as long as we were touching skin, it was easy for Mr. D to “read” my SLEAZY, SLEAZY response.

Akwei’s document explains more:

...For electronic surveillance purposes, electrical activity in the speech center of the brain can be translated into the subject’s verbal thoughts. EMF Brain Stimulation works by sending a complexly coded and pulsed electromagnetic signal to trigger evoked potentials (events) in the brain, thereby forming sound...in the brain’s neural circuits. EMF Brain Stimulation can also change a person’s brain-states [of consciousness] and affect motor control.

Affect motor control... An agent like Mr. D was not your regular gun-carrying policemen. D toted a **mind-control** arsenal. He could implant a thought into a person’s mind and make the subject think it was his own. He could push a mind into a suggestible trance state. He could read the emotions and thoughts of a mind. He could disable a body by disruptive signals to a person’s motor cortex: affecting motor control.



- A. Frontal Lobe (Speech, etc.)
- B. Motor Cortex (Movement)
- C. Parietal Lobe (Sensory)
- D. Occipital Lobe (Visual)
- E. Temporal Lobe (Sound)



6. Brainprint—Reading Akwei also helped me to understand the “brainprint” perception. To insert a thought into a brain, he said, it is necessary to decode

...the resonance frequency of each specific brain area. That frequency is then modulated in order to impose information in that specific brain area. The frequency to which the various brain areas respond varies from 3 Hz to 50 Hz. Only NSA Signals Intelligence modulates signals in this frequency band. (Akwei document)

That explained my perception that Mr. D took a “brainprint” of me. He was “decoding the frequency” of my individual brain.

Jon Franklin is a journalist who covers molecular psychology. He has twice been awarded a Pulitzer prize for nonfiction. His 1987 book, *Molecules of the Mind* described the emerging Brave New World of neuroscience. Franklin stated in *Molecules of the Mind* that each human mind has a unique brainprint, comparable to other unique human traits—fingerprint, retinal scan, and facial configuration. He predicted a coming era in which **police will identify people by their brainprints.**

A retired career man in military intelligence wrote:

*Imagine transportation devices in which the key to the ignition is a digitized code derived from your electroencephalographic signature and is read automatically upon your donning some sort of sensorized headband. (Corso, *The Day After Roswell*, p. 99)*

7. Mind-reading—The mind-reading (mechanically recorded?) that went on, from the time Mr. D. was ear-to-ear with me until his car engine started up, was the last, and ugliest, problem to consider.

An acquaintance who once was expert at Silva Mind Control and then became a believer remarked that he used to have conversations with people in “other buildings.” ESP. What a person in deep trance can accomplish by mental focus, logically a sensitive enough machine could do. Becker wrote that a conscious electromagnetic field has the potential to learn to directly recognize another such field, even to effect it. Or extract information from it:

The sensitivity of our instruments may someday develop to the point where we can tune in to biomagnetic fields on select frequencies, thus experimenting as directly with ESP as we now do with radio.... (Becker, p. 266-267)

The *National Enquirer*’s June 22, 1976, issue reported that the Advanced Research Projects Agency had been working since 1973 to create a machine which would read minds from outside the subject’s body by deciphering that brain’s projected magnetic waves. A scientist working on the project told the magazine’s reporter that their goal was a method of mind control. He said that aspects of the new technology were being worked on at MIT, New York University, UCLA, and NASA’s Ames Research Center.

A spokesperson at the Department of Defense, Robert L. Gilliant, Assistant General Counsel for Manpower, Health and Public Affairs, responded to the outcry caused by that article with a letter in which he insisted

*...that the so-called ‘brain wave’ machine, which was the subject of the National Enquirer article...is not capable of reading brain waves of anyone other than a willing participant in the laboratory efforts to develop that particular device. (Gilliant quoted in Brodeur, *The Zapping of America*, p. 299)*

The part about the machine only being operational with a “willing participant” is an obvious lie. Unless a subject has special training or special ability to resist, it would not matter if he was willing or not.

In 1984, G. Harry Stine wrote about cyberpersons, the frontier where human nervous systems and electronic circuitries merge in his book, *The Silicon Gods*. Stine predicted that chips, which he called “intelligence amplifiers,” would soon be available either for implant or temporary attachment to human nervous systems. Stine said that these devices will enable other persons to “get inside a person’s head” because of providing the ability to (amplify?) hear another person’s thoughts.

In 1986, a writer for *Science News*, reported that:

*The techniques, under study at the University of Michigan at Ann Arbor, in AT&T labs, and elsewhere, will allow outsiders to direct a person’s brain cell conversations and talk directly to the individual’s brain neurons. (Julie Ann Miller, “Chips on the Old Block,” *Science News*, June 28, 1986, pp. 408-409)*

Miller said that research was then focused on the development of integrated circuit chips which could be implanted into a brain.

Akwei reported the finished new technology:

The NSA’s Signals Intelligence has the pro-

Of Biochips and Cyborgs

Government research into bioelectricity, and technologies that combine man and machine, got serious in the early 1980s. In 1984, two-thirds of the \$47 billion federal research budget went to the military. (That may be a typical percentage. It is the only year for which I have a measure.) Shortly before 1985, government research in **bioelectricity** and **biomagnetism** kicked into high gear with a multimillion push. "In this area almost all research funding is military." (Becker, *The Body Electric*, p. 333)

Back in 1982, the National Science Foundation had begun to fund research which sought ways to "**glue**" **biochip proteins to neurons**. Biochip technology uses organic materials to create the data-processing chips. These organic chips can be integrated with human nervous systems, even implanted into living human brains. The result is literal machine-man combinations.

In a procedure until recently confined to the fantasies of science fiction, microchips are now being routinely placed into brain stems and cortexes to relieve a variety of medical conditions. Micro-engineered probes many times thinner than a human hair are buried deep inside the brain, fed by platinum wires lacing underneath the skull. More than fifteen thousand people so far have had their brains wired, and this population of cyborgs will increase exponentially. The National Institute of Health leads this field.

....Some second generation implants can now think. They can interface with brain, provide complex instructions to mechanical parts, and read brain activity. The use of computer microchips also allows these implants to provide a mass of unique information about the host human.

*A new generation of intelligent materials and chemicals can fool the brain into believing they are part of the human body, and thus become part of it. Scientists at ICL, IBM and Rank Xerox have independently developed organic based engineered computers, allowing them to construct machines out of living material, using protein strands as wires, and molecular movement as memory. As computers can be 'grown' on living tissue, the interdependency becomes limitless. (Simon Davies, "The Future, Big Brother & You," *The Free American*, June 1996, p. 4. Published on New Dawn's Web site at: <http://www.privacy.org/pi>)*

Government research to develop a bionic brain has also been a well-funded area. Living neurons, when maintained in an artificial and semi-mechanical environment, are called **wetware** to distinguish them from "hardware." An Canadian acquaintance who does computer research told me about the **neural net**. Neural nets learn and generalize just like normal neurons. If you give a neural net the rule that the past tense is built by adding "ed" it will say "goed" (instead of "went"). You must also teach it every exception to every rule. Then it will learn, just like a child, that the proper usage is "went," not "goed." Neural nets are now used in both commercial and military applications. The **bionic brain** is here. It is called the **biocomputer**.



proprietary ability to monitor, remotely and non-invasively, information in the human brain by digitally decoding the evoked potentials in the 30-50 Hz, 5 milliwatt electromagnetic (EMF) wave. Contained in the electromagnetic emission from the brain are spikes and patterns called “evoked potentials.”

Every thought, reaction, motor command, auditory event, and visual image in the brain has a corresponding “evoked potential” or set of “evoked potentials.” The EMF emission from the brain can be decoded into the current thoughts, images and sounds in the subject’s brain.

So why has all this exciting news about the frontier of scientific research in electronic transmission, to and from, human brains not been publicly reported?

It has not been reported because Secret, Don’t Tell is a secret, and it is growing, and growing—worldwide. A Swedish author states: “...covert surveillance systems able to control the neurological activity of the brain have been developed in secret and beyond public awareness...” (Robert Naeslund, *When the State Rapes, Slippgaten 12, 117-39, Stockholm, Sweden*)

Secret, Don’t Tell has been made retroactive. A chilling instruction in an old intelligence memo (written by a highly-situated person in U.S. military intelligence) “recommends” complete erasure of a segment of history:

*I recommend that the background of our experimentation with long, low-frequency brain waves and any source material be completely expunged along with any historical data relevant to this analysis. (Corso, *The Day After Roswell*, p. 199)*

History, however, is resistant to being “completely expunged.” In 1987, Jon Franklin wrote frankly about prospects for the new mind-reading technology:

...the day may come when mind-scanners are commonplace in hospitals. There are also possibilities outside medicine. Mind-scanners might be useful, for instance, in diagnosing accused criminals who plead insanity. Since ‘mindprints’ probably can’t be faked or altered, they could serve to identify people who are, say, involved in security operations...They could also be used to screen students or job applicants... (p. 197)

What will happen when law enforcement agencies apply the mind-scanners to the problem of lie

detection...CIA operatives might have to undergo periodic scans to make sure they haven’t become double agents. (Franklin, p. 288)

Again and again, Akwei’s statement referred to computer-aided mind-reading technology:

Remote neural monitoring (RNM, remotely monitoring bioelectric information in the human brain) has become the ultimate surveillance system. It is used by a limited number of agents in the US Intelligence Community.

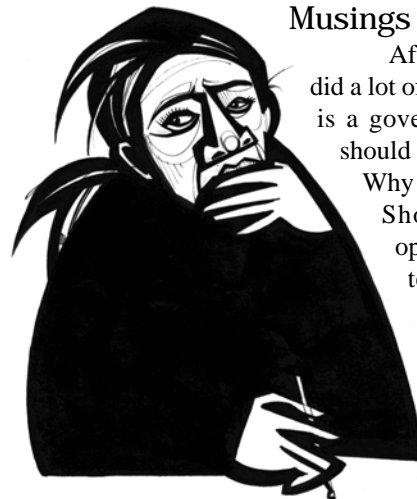
WHOOEEH! Had I ended up quite literally, smack dab in the arms of one of them: an NSA agent equipped to do **remote bioelectric monitoring**? And I had escaped to tell the tale.

I was confident that my mind had not revealed anything of interest to Mr. D, either in emotion or verbal thought. Somehow, my unconscious had been able to detect his “noninvasive” invasion. Then my own “Secret, Don’t Tell” conditioning reflexively ensured that I revealed nothing—except the unimportant disclosure that I thought his behavior was SLEAZY.

Like a child, huddled terrified under a blanket in the house’s basement, my mind split had listened to the footsteps of an intruder noisily walking about upstairs and had kept hidden the existence of itself and of its treasures of information. I had endured that encounter and kept my mind’s freedom, but I did not want to be so tested again.

Musings

After meeting the Ds, I did a lot of thinking. If Mr. D is a government man, why should I be afraid of him? Why should I avoid him? Shouldn’t I just be open and trusting and tell all? Isn’t our government benevolent and the friend of any law-abiding citizen?



But he was not honest with me. I did not like the arrogant way he attempted to view my mind’s contents. Thought police. What would thought police in a Muslim society do? In a Communist one? In a society in which people who want to grow their own vegetables and butcher

their own chickens are viewed as social renegades by a government controlled by a handful of corporate vegetable growers and agribusiness chicken marketers?

What would thought police do in a society where the masses were ignorant that thought police exist—and the highest priority of the thought police was to keep the existence of the thought police secret?

What was Mr. D looking for? Was he checking me out for possible subversive tendencies? Or looking for another puppet?

If he was just looking for bombers, I could almost make my peace with his technology. But he tried it on me. Did he try it on me because I fit the profile of a possible bomber? Ridiculous. I am female, and, as far as he knew, only interested in goats and gardens. In fact, I abhor violence of every sort—including the secret violence of mind invasion.

More likely, he targeted me because I am a writer with some 400,000 books in print—millions of copies if you count my old articles printed in *Guideposts*, *Organic Gardening*, and *Backwoods Home Magazine*. “A woman of importance.” Any mind-controlled author and “woman-of-importance” could be useful to help validate and disseminate propaganda.

Is any woman or man “of importance” therefore a target to this type of NSA agent, a trophy worth the bother to acquire, a potentially useful puppet to manipulate toward accomplishing the mind-controllers’ chosen goals?

What “important people” are already unknowing puppets of the NSA? How high does their control go? How far does their web extend into the international communities? Bamford said the NSA has agreements with intelligence agencies in other countries. Akwei said that the electronic mind-control technology is international.

Back when I was not at all important, I already was captured and puppetized. Finally, I escaped.

“Something’s wrong here,” Mr. D had said. Yes, indeed. Something was very wrong here. But was it me? Or him? Or both?

Secret police. With mind-scanning abilities. Wow! Akwei said that the NSA can electronically track persons once they have obtained their brainprint. Well, they took a brainprint of me, but I was sure they did not know where I was now. Maybe they were trying to develop that technology, but had not yet perfected it. (Texe Marrs says that in his book, *Project L.U.C.I.D.*) I knew that Mr. and Mrs. D did

not have any magic way of tracking me because friends told me she made several phone calls urgently seeking me after receiving the card which cancelled my visit to their home (and all associated speaking engagements).

I went away from all the earthly persons most dear to me in order to live in hiding, and to write and publish the truth as best I can discover it. Day by day, I struggle to remain free and keep making this book happen. I do that, in part, because I believe the **the public has a need and a right to know the truth**—all the truth. When a society loses the right to know all the facts, it loses the right to democracy. Only those persons who know all the facts have an arguable basis on which to make good decisions.

There is an old saying, “Hide the truth and the truth becomes your enemy. Disclose the truth and it becomes your weapon.”

We have certain agencies of government for whom truth and truth-tellers have increasingly become the enemy, because the agencies have hidden so much truth. Trapped in webs of cover-up and disinformation, citizens are increasingly uncertain who to believe, and what to believe, even about matters of fact. This is an especially hard situation for persons who believe that the law of God (“Thou shalt not bear false witness.”), and the name of God (“I am the way, the truth, and the life.”), require truth-telling.

The power to compel a trance, to implant a thought, or to mind-read a thought, at first proposal, surely was conceived as a “weapon” for use against an enemy. I’m glad that Gorbachev dismantled the Soviet threat. I’ve wondered for years if he became mind-controlled.

Maybe the displacement of nuclear power by mind-control power was the real significance of the day the Berlin Wall came down; a new political era began. In the era which had just ended, those nations which owned nuclear weapons and intercontinental ballistic missiles were the dominant political powers on earth. In the new era, mind-control weapons, and those who possess them (the secret agencies of certain nations) will be dominant.

Who will be the “enemy” in this new era? Perhaps the enemy will be unknown to the public. The battles for Top Dog among the mind-controllers will not be reported on the five o’clock news. Will the publicly defined “enemy” now become citizens who detest the use of unknowing subjects for terminal experiments, the clandestine use of mind-manipulating technologies on random persons by independent agents, and agencies or military serving secret (or private) agendas without oversight and control by democratically elected representatives?



What would happen if a person, with some kind of ability that top-secret programs have been racing to create for fifty years, turns on its creators and revolts instead of serving? What if that person's extraordinary ability is only absolute obedience, learned in suffering? What if, now, that person only wants to be free—and to tell?

If Mr. D discovers what I'm trying to do, is it he and his NSA associates who "wouldn't hesitate to kill me"? By administrative order, does an independent NSA agent have the right to kill? That's what Akwei said.

Would they kill me because I know too much? I only know too much because that knowledge was forced on me. Would they kill me because I'm going to tell? I never signed a promise not to tell. I never was a government employee. I'm a writer, a writer of nonfiction.

You can kill a writer, but you can't kill her book if **the readers act to keep it alive.**

I first met Mr. and Mrs. D in November, 1996. I canceled my bookings with them in mid-November. In March, 1997, the "Check Claims Branch, Exception Inquiry Section, Financial Processing Division, Department of the Treasury/Financial Management Service," using the letterhead of the U.S. Treasury Department, and a Hyattsville, MD, address wrote to me. The letter was a complex notification and was full of threats. It said that I may have made a "false claim" against the U.S. government. It enclosed a copy of a check from "Rust Scaffold Services" (Chicago address) which supposedly had something to do with me. But I have never heard of "Rust Scaffold Services," nor have I lived in Chicago since my college days.

It also referred to the check which an unnamed "Agency" had sent me months earlier—\$28.50 to purchase a copy of my *Encyclopedia of Country Living*.

The notification threatened a \$10,000 fine and five years in jail if I have made a "false claim" against the government.

Have you heard of **permissible deceit**? The rule of permissible deceit allows police and government agents to say any false thing when endeavoring to get a subject to divulge any true thing. The letter then asked me to answer a detailed list of questions about where I am, who handles my mail, and how I cash checks. That was probably its real purpose: a fishing expedition for information.

I returned the "Treasury Department" letter with a note, explaining that it was obviously a mistake. I have never resided at the address which they listed.

I struggled on to complete this gargantuan task, helped by many friends.

God is faithful. This long and heavy task of telling will be finished. One day, you will read the text on your computer screen, or hold the printed book in your hand, or listen to it on tape. The Secret, Don't Tell will have been told. The central facts of hypnoprogramming and modern mind-control technologies won't be secret any more.



Two weeks later, he was assassinated in Dallas

PART III

Trance Phenomena

Trance as a Personal Experience
Ten Important Hypnotic Phenomena



Screen-watching...isolates people from physical reality, and from each other.

Trance as a Personal Experience

Light Trance,
Deep Trance,
Or Hypnosis?



Hypnosis?
Or Just
Advertising?

The Church of Scientology...does not give credit to hypnotism... explaining that their processes are the really valid ones while hypnosis is outdated...[but] their methods are clearly hypnotic ones....yoga comes close to being an Eastern way of using what in the West is called hypnosis...all regimented techniques such as Silva Mind Control, EST, etc., have the phenomena of hypnosis at their roots...although most would fervently deny this. Why? It is very simply good business to try to come up with something which seems different, if you are trying to sell it to a purchasing public.

McGill, J. *of Hypnotism*, March 1990, pp. 30-31

In 1945, fewer than 200 U.S. professionals used hypnosis. By 1971, 20,000 dentists, physicians, and psychologists were using it professionally.¹ Mental health personnel, advertisers, spiritual advisors, motivation specialists, sports psychologists, people programmers, educators, meditation leaders, dream-group leaders, and group leaders of every sort now use more and more sophisticated mind-influencing technologies. Now, millions of people expertly induce trance and direct the trance experience of others—often for profit (and power).

Human society is now polarizing into division between the influencers and the influenced, the programmers

and the programmed, those in the know and those out of it.² The trend is toward division into subjects and operators—at worst, into hypnotic predators and hypnotic prey. (The prey may unconsciously long to move up and become predators.) There has been an associated revolution in attitude toward trance. In 1971, LeCron wrote, “Where it was not at all unusual twenty years ago to have a patient refuse hypnotic treatment, now this is a very rare occurrence...” (LeCron, *The Complete Guide to Hypnosis*, p. 223) In 1997, most persons enter inductive settings with even greater abandon.

How did that happen? It happened because the

1. LeCron, *The Complete Guide to Hypnosis*, 1971, p. 1.

2. In Kuhn and Russo's 1958 anthology, *Modern Hypnosis*, I noticed that 25% of the authors (all expert hypnotists) had been, or were presently, employed in either Labor Relations or Personnel Management for various huge corporations (usually as department head). I had not realized that hypnotists would be concentrated in that field. On second thought, however, it makes sense. An expert at disguised induction could have great potential in either Labor Relations or Management.



technologies of trance induction and trance management have become ever more sophisticated, more effective, and more widely disseminated to possible “agents.” (The names for hypnotist are as legion as the names for hypnosis). It happened because public information about trance has become tightly restricted to only positive, good-marketing statements. The truth is that trance can help. The myth is that trance absolutely cannot be harmful.

It is self-defense to understand how your mind works. Awareness of your suggestibility can help you resist manipulations that you might otherwise uncritically accept. Induction and suggestion technologies (induction to lower consciousness, suggestion to take advantage of that state) are now very sophisticated. Those technologically expert mind manipulations are directed at a largely ignorant public.

Are These Statements True Or False?
(The answers are on the next page.)

- All human beings vary in state of consciousness throughout their 24-hour day—and throughout any trance. The possible depths range from nil to coma.
- You are naturally in deep trance every evening just before you fall completely asleep and every morning just as you are waking up.
- A part of your brain called the reticular activating system specializes in raising (stimulating) and lowering (inhibiting) your consciousness.
- A trance experience can be individual or it can be shared by two or more persons.
- Your trance experience can be guided, directed by another person (hypnotist, charismatic leader, meditation guide, etc.). Or it can be spontaneous, freely unfolding from inside you.
- There are many different ways, called “inductions,” to push a susceptible person into lower consciousness.
- Everybody has a certain inborn status of trance susceptibility, ranging from zero to much. The more you experience trance, the deeper the trance tends to get as your susceptibility becomes trained, exercised, and reinforced. Once you have acquired deep trance capability, you will always have it.
- People with the most susceptibility are called “somnambulists,” because they can walk and talk in deep trance without waking up.
- Trance is always “hypnotic” in that, the deeper you go, the more suggestible you become. The deeper your trance, the more uncritically you accept anything you hear or read or view in that state.
- A controlling trance state that functionally is hypnosis can be knowingly induced, managed, and concluded by an operator without using the word “hypnosis.”
- After any trance induction, even after being told to “wake up” from hypnosis, there is a post-hypnotic period of suggestibility lasting anywhere from several hours to after a night’s sleep. During that time, you are extra susceptible to reinduction of trance.
- Trance is addictive. It is our natural programming for social bonding, choosing and following leadership, and profound learning.
- Any entranced person tends to develop emotional fascination with, and emotional dependence upon, the cause of that trance. That phenomenon is called “rapport.”
- Trance/hypnosis is unconsciously contagious. If you are around it, you may get caught up in it. Trance contagion explains some historical incidents of “mass hysteria.”
- Persons who are in an emotional state (including being angry or hostile) are more likely to be influenced in a trance setting than observers who are simply indifferent.

True or false? They're ALL true.

Trance: The Subjective Experience

It is like a door opening to knowing yourself better, or anything else you're focused on in that moment. In normal waking consciousness the doors to direct perception of the data, memories, and emotions stored in your unconscious are almost closed. The more creative you are, however, the more "ajar" they tend to be.

Or it is like a teeter-totter. Your mind is the teeter-totter. The conscious (you) mind sits on one end of the board. Your unconscious mind sits on the other end. Visualize the act of going into trance as

*...the subconscious part of the mind becoming the dominant one...visualize the mind as a see-saw with the conscious part normally at the elevated end. During hypnosis this end would descend and the subconscious mind at the other end of the plank would rise to become the dominant one. (LeCron and Bordeaux, *Hypnotism Today*, pp. 143-145)*

Varying depths of trance correspond to varying positions of the teeter-totter board. They also correspond to brain wave states. The slower your brain waves (until you are asleep), the deeper your trance. As you move down into trance, mental activity shifts from the left to the right

hemisphere. There is a quieting of the analytical, reality-orienting voice of consciousness as your conscious mind becomes more dissociated, more off-line, more displaced. Correspondingly, the door opens wider to input from your unconscious functions of mind.

At its best, human trance capacity is an innate biological mechanism by which we can

- Be moved by persons and ideas with potential for importance, then give that person (or idea) our loyalty. We may thus fall in love and create a nuclear family, or bond with others as extended family. We may be moved to work together on a worthy common cause (or an unworthy one).
- Access the vast experiential data bank and great problem-solving ability of our unconscious sector; connect with memories from a younger age; obtain creative, problem-solving, and planning ideas.
- Receive extrasensory (or holy) insight, help, warning, and guidance.

Light Trance, Deep Trance, or Hypnosis?

...trance states in daily life, especially light ones, occur, pass unnoticed, and remain unrecorded.

- Griffith Wynn Williams, "Hypnosis in Perspective," p. 4

There are three distinct and different types of trance. Two are characteristic depths of trance: light and deep. The third is a formal style of operator-controlled trance called **hypnosis**. Induction of trance is not the same thing as hypnosis. A trance, light or deep, can be turned into a hypnosis, light or deep.

I. Light trance is:

- a. Conscious
- b. A high alpha state
- c. A mental condition from which you can instantly emerge any time you want.
- d. Suggestible.
- e. A generator and conduit of rapport.

II. Deep trance is characterized by

- a. Loss of conscious control
- b. Perceptual distortion
- c. Feeling of heightened significance for experiences or ideas acquired in this state
- d. A sense of contact with the ineffable
- e. Hypersuggestibility.
- f. Heightened rapport

III. Hypnosis is

- a. An operator-managed trance, the conventions of which are already known by, or are taught to, the subject.



Natural Trance

Many factors can induce natural trance states: religious practices, poetry and music (rhythm, tone, and content), daydreaming, staring into a flame, thinking about a dream. There is the spontaneous **creative trance** of a choreographer, writer, or musician, while working—and the creative trance in which performers of dance, theater, and music may work. **Highway trance** can cause vehicle accidents: “Both monotony and bright points of fixation are part of the repertory of hypnotic induction.” (G. W. Williams, “Highway Hypnosis,” 1963)



We naturally shift up and down in level of consciousness, all day, every day. When you stare off into space, “lost in thought,” that is a **state of lowered consciousness**. A natural deep trance, a **hypnogogic period**, always happens as part of the brain wave stages as

you wake up, and as you fall asleep. Those **natural trances** are different from systematically developed, operator-controlled trance, because their induction is spontaneous and the control is yours. They vary in depth.

Light Trance—In lowered consciousness, we are the most suggestible and the most persuadable. In that state we fall in love—with persons or ideas. We give our loyalty, our love, our sacred love. We accept our most fundamental beliefs. In any trance experience we find good (or what seems good). We find truth (or what seems truth). Deep trance experience is never trivial or transient to the person who experiences it. It becomes the standard by which we judge all other experience.

Do you eat, go to sleep, or wake up from sleep? Those all lower consciousness. You are also in light trance while deep in thought, praying with intensity, hearing a beloved, familiar piece of music, watching television, getting a massage, whenever you’re caught up in emotion, in love, or focused on any fascinating experience. Any time you think of, or tell, a dream, your consciousness lowers. Emotional shock, fatigue, sensory deprivation (boredom), and sickness lower consciousness. So do rhythmic sounds or flashing lights. So does a fascinating book, play, statue, or painting. Light trance experience is a rich thread in the problem-solving, creative, planning, emotional, and spiritual texture of the life of anybody who is genetically able—and therefore likely—to experience it.

People are naturally attracted to whatever lowers consciousness. The deeper they go, the more they are attracted to that experience. Your choice of habitual context in which to experience lowered consciousness makes all the difference in how your life turns out. Is it a drug party? a tavern? a concert hall? naked bodies? a TV theme song signaling the beginning of a favorite program? the singing before the preaching? the praying afterward? Do you visualize or meditate, watch video or films, play games, run? Do you seek out extreme challenges like bungee-jumping, roller-coaster riding, hang gliding, sky diving, climbing sheer rock cliffs? Those all lower consciousness.

Trance is a physiological mental state characterized by heightened suggestibility. It always has a context.

That context is what it “contains.” It can contain any idea, self-generated or suggested by another person, worthy or unworthy, true or false. **Trance capacity** is the means by which we experience the directives of a hypnotist or help from the Divine. The physiological mechanism is the same. What you fill that container with makes the difference.

The mind, like the body, is a gift which may be tragically misused. Trance capacity can result in a person being manipulated, seduced, exploited, even destroyed. As with our sexuality, the gift of capacity for lowered consciousness must be protected from abuse, used wisely and appropriately. You are suggestible. Humans are born believers. You can control, however, what you expose your brain to. You can crown your life with a suitable choice, carefully nurtured in a suitable setting, or you can ruin your life with inappropriate choices. Trance experience is a natural talent, a natural hunger for those who are genetically equipped for it. Exercise good judgement and self-control. Use the two gifts wisely: mind and body.

Deep Trance—People view deep trance experiences either with exaggerated suspicion, or exaggerated awe, depending on whether the context is familiar or unfamiliar, approved or disapproved. Deep trance does have extraordinary aspects. Trance/hypnosis may look like a state of sleep, but exactly the opposite is true. Behind the outer aspect of deep trance, there is mental acuteness, intensity, and potential productivity far beyond the capacity of any nontrance state. A person in this altered state of consciousness may be more sensitive to surroundings, more articulate, more critical, more appreciative, and/or more imaginative—more of whatever mental capacity is triggered.

Your brain’s physiology is the reason why deep trance experiences tend to feel spiritually intense. In deep trance, the basic assumptions by which your brain manipulates data are available for adjustment—minor or major. Any adjustment of those fundamental parameters in your deepest programming is going to feel like a religious experience.

Every major religion has a denomination, or practice, that pushes worshippers toward the deepest trance state: Islam’s Sufism, Judaism’s kabbalah; practically any Buddhist or Hindu worship form; and Christianity’s charismatics, mystics, centered prayer, monastic meditation, exorcisms, and visions.

Christian denominations vary across a wide spectrum in induction techniques and the depth they target. Inductive elements may include music, solemnity, repetition, and magnificent symbols and visualizations. I have been deeply moved by skilled liturgical music and beautiful patterned expressions of faith. But, let me add, one of the most profound spiritual experiences I ever had happened in a tiny rural Mennonite Church in Oregon. Half the congregation was singing off-key. The preacher was an humble, good man, but not an extraordinary speaker. Yet there, the Spirit of the Lord touched and guided me.

Eastern religious practices first came to America through the influence of pop stars and psychedelics, yogis in labs demonstrating amazing control of internal body functions, and Zen masters hooked up to EEG machines. Eastern religions deliberately and efficiently guide a subject into the deepest trance state possible. They equate religious training with sophisticated induction training. They define the deepest trance as the most desirable religious state. As Western researchers pressed forward into trance experimentation, Western variants on the Eastern imports developed.

The biggest, liveliest, most overt deep trance marketplace





pitching its wares to Generation X is the whole New Age religious scene: psychics, gurus, yogis, hypnotists, channelers, dream therapists, scream therapists, massage therapists, movement therapists, hypnotherapists, mediums, visionaries. There is a trance angle to all the New Age interests: paranormal phenomena, drug-induced states, mystical experiences, dreams, and mutual hypnosis. New Age activities are a religion based in a thousand versions of put me down (into trance), and fill me up (with whatever).

The inductions out there are not all religious. Most women expecting a baby train in LaMaze, or its equivalent of **coached childbirth**. Athletes visit sports psychologists to train in **concentration**. If you go to the emergency room with a migraine, you get **progressive relaxation** followed by visualizations. Blood pressure patients can get **biofeedback training**. Cancer and AIDS patients visualize their white blood cells increasing in number (and they do increase!). Pain patients learn self-hypnosis.

Commuters with lifestyle problems listen to hypnotic tapes with subliminal messages, trying to reprogrammed themselves out of bad habits. Couch potatoes can watch hypnotic videos with subliminals. Nicotine and ice cream addicts can go to hypnotic stop-smoking or reduce-eating “seminars.” Television viewers and pop magazine readers are urged to call a psychic.



*It is good business. Anybody entering deep trance gets a thrill (a surge of cortical excitation) from the **Aha!** center in their limbic brain. A **rapport** attraction to the agent of that inductive rush follows, plus an instinctive bonding with whomever you shared that experience. These three forces (**Aha!**, **rapport**, and **bonding**) add up to a strong urge to return for reinduction.*

Persons who are genetically nonsusceptible to deep trance are left on the sidelines, appalled at the mental antics of both the suggesters and the suggestible.

“Hypnosis” Defined

Some persons see the world as a system of competing wills in which weaker minds are dominated by stronger ones. People do influence—or are influenced by—other people in every interaction, usually not intentionally. The more you like and trust another person, the more likely you are to accept suggestion from that person. Any natural leader elicits a “hypnotic” response from his followers. None of that, however, is hypnosis in its formal definition.

Hypnotism is a form of unconscious influence so extreme as to be a special category. It is an **operator-managed trance** state. When the subject is most deeply somnambulist (most extremely dissociated), and if there is rigid operator control of that state, then that operator is most truly a hypnotist. In this formal and rule-governed style of trance, **hypnosis**, the operator’s will displaces the subject’s will and directs his unconscious. A defining element for hypnosis is the degree of operator control.

Hypnosis is a technology. Like any other technology, since fire was tamed and the wheel invented, it can be used either for good or evil. Hypnosis is used in stop-smoking and weight-loss clinics, by sports psychologists, behavior therapists, and hypnotherapists. Some psychologists, psychiatrists, and doctors use hypnosis in their medical practices to treat problems such as anxiety, phobias, sexual dysfunctions, bulimia, and chronic pain. Suggestion under trance can minimize pain and bleeding in any medical situation from childbirth to dental procedures, and in surgeries of all sorts.

The root for the word “hypnosis” is the Greek word for “sleep,” but hypnosis differs from physiological sleep. Trance is not necessarily the same thing as hypnosis, but hypnosis always starts out as trance. Some hypnotists, in private conversation—comparing the ecstasy of religious experiences, meditations, visualizations, concentrations, and reveries—insist “it’s all hypnosis.” That is a false statement. It is all **trance**, but it is not all **hypnosis**.

Trance is physiologically defined by dominant brain wave pattern, bioelectricity (positive or negative current and direction of direct current flow in the head), and blood chemistry. Hypnosis is any trance state that is initiated, managed, and concluded by an operator (the **hypnotist**). That management usually involves suggesting cues for reinduction and awakening. The hypnotist trains his subject to increase depth of trance, suggestibility, and obedience.

A hypnotist’s use of authority can vary wildly. He can create the state, then let the subject take full control; training in biofeedback does that. At the other extreme, the

hypnotist uses a totally authoritarian strategy in which the subject never is expected to have self-control in the hypnotic state again. Suggested total amnesia for all events under trance may cause the subject to be consciously unknowing of their hypnotic relationship. Complete amnesia is not typical, however, even of deep trance events.

Hypnosis, at best, is a special way of encouraging a subject's unconscious mind to activate its own capacity for healing. At worst, it can be the tool of an abusive parasitizing of one mind by another for the purpose of exploitation. It becomes clear, therefore, why the Bible repeatedly warns against involvement in the practice.



If the operator told you to jump, after the hypnosis is over, when he says "Boo!" and you do not jump, you were not hypnotized. If you do jump—and explain you are just playing along—you were hypnotized, and now you are rationalizing.

Trance Training

*We have had religious revolutions, we have had political, industrial, economic, and nationalistic revolutions. All of them, as our descendants will discover, were but ripples in an ocean of conservatism—trivial by comparison with the psychological revolution toward which we are so rapidly moving. That will really be a revolution. When it is over, the human race will give no further trouble. (Aldous Huxley, quoted by Andrews and Karlins in *Requiem for Democracy? An Inquiry into the Limits of Behavioral Control*, p. 1.)*

Therapists of every sort, motivational speakers, and religious leaders usually include at least light trance in their program. Teachers of all sorts now lead people in guided visualizations from kindergarten to the old age social hall. Meditators, both in and out of named and organized groups, are

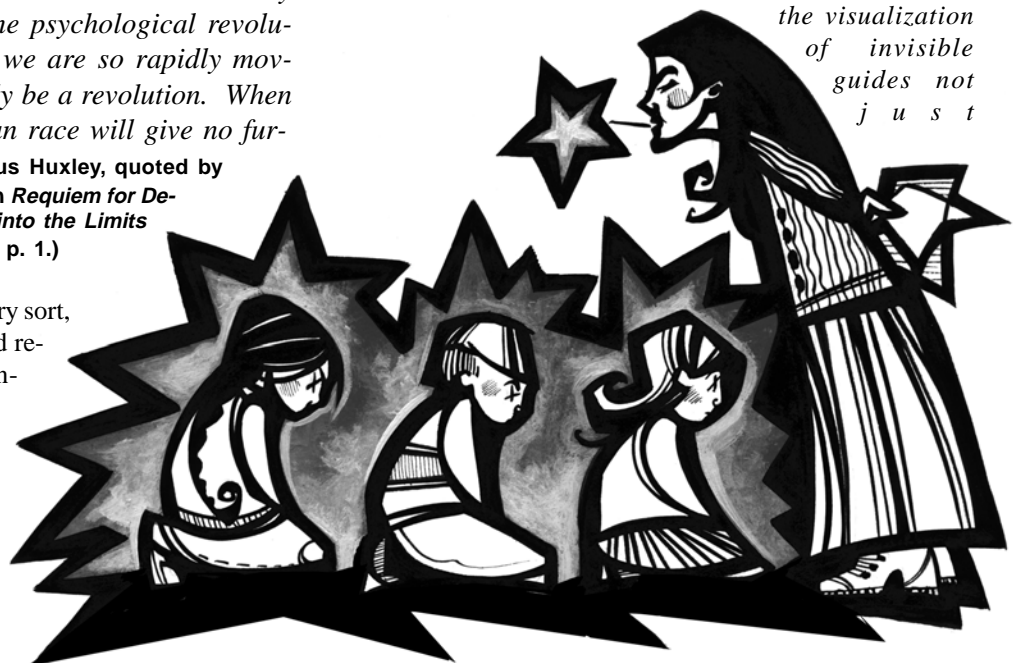
now legion. Most organizations build loyalty using trance or brainwashing techniques (or both). Advertising and propaganda have become ever more sophisticated, more capable of persuading.

The most blatantly inductive television routine that I have seen is the introduction to a children's cartoon show. Many children now also receive induction training in the classroom. I met a young Christian woman who had attended a public (arts) high school in Miami for its ballet program. One day, her teacher brought two one-hour hypnotic tapes to school. For two consecutive classes, she played those tapes. All her students, except my young friend, listened without objection.

The tape began with a visualization induction, then deepened the subjects, then told them to receive instruction from an internal "shaman." Thus, each hearer was directed to create an unconscious mind-split with a mission to communicate. The result could be inconsequential, or helpful, or mentally disturbing. The Christian student had heard enough. She made an excuse of illness and left the room. The teacher pursued her into the hall. There she argued bitterly, vehemently against her student's objections to listening to the tape. When the student stated that her religious conviction did not allow listening, the teacher finally let her remain outside the classroom. After that, however, the teacher—and, under her leadership, other students—made such a negative issue of that student's devout Christianity that she left to complete high school at home.

Was that an isolated incident or part of a trend? In American classrooms:

Children also partook in the visualization of invisible guides not just





through the Galyean approach but through Silva Mind Control. They would lie on the floor and empty their minds, invoking the invisible presences within them. In Buffalo, New York, students were required to learn Silva Mind Control and reportedly contacted the spirits of various long-deceased historical figures—a new way to study George Washington and Abraham Lincoln...Featured in a brochure entitled “Education in the New Age,” Canfield and Klimek led [teacher] workshops on “Meditation and Centering in the Classroom” and “Guided Imagery”...[they have] coauthored numerous books such as, *The Inner Classroom: Teaching with Guided Fantasy*. (Brooke, *SCP Jour-*

nal, Vol. 16:4, 1992, pp. 20-22)

I heard that in Wisconsin many elementary students are now given similar training. In 1997, I was a guest speaker in a Northwestern Michigan public school. I noticed a group of students across the room (which contained several classes doing various activities) who were commencing a computer class by gathering in a tight circle with their teacher, heads together, and intoning a prolonged “OMMMMMMM.” When the head teacher noticed me staring at this activity, wide-eyed, she rushed over to the group, jerked her head toward me as if in explanation of her request, and caused them to immediately cease the induction. They dispersed to their seats before the computers.

Hypnosis? or Just Advertising?

The hypnotic pressures of everyday life....cause people to buy a special brand of toothpaste, smoke a given brand of cigarettes, or wear one type of hat and not another...

- R.W. Marks, *The Story of Hypnotism*, p. 214

I was talking with Jerry Rubin, an acquaintance who had once done hobby hypnosis, late one evening while he worked behind the counter of a local convenience store. Jerry was a heavy-set, middle-aged man with a blunt, unsophisticated manner, and a very kind heart.

“Isn’t hypnosis the basis for advertising?” Jerry asked.

“Well, maybe some...”

“No, not some,” Jerry retorted. “That’s the basis of it. That’s the underpinnings of mass advertising.”

We stopped talking while Jerry rang up a young man’s purchase of a pack of cigarettes. The customer left. I protested, “But most of us are able to handle advertising rationally.”

“Are we?” Jerry asked. “How many people come in here dedicated to a specific brand of cigarettes? How did they get that conditioning? And they won’t have another kind. The brands all taste the same. They all have the same effect. But those people are advocates of that particular brand. And I don’t know any other explanation for it. There’s no logical explanation. Why do we use underarm deodorant that is of no use to the world and yet a hundred million people demand it as the accepted norm? How do you do that? Repetition. Image-building.”

I nodded.

Jerry continued, “If you’re looking for the nega-

tive, nonmoral underbelly of hypnosis that most people don’t look at, I don’t think you’re going to find it published. But the advertisers know how: subliminal sounds, subliminal pictures, the parent-figure that tells you what to do. The whole idea is to circumvent reason and manipulate you.”

In the background I could hear the repetitive tinny tune of a videogame machine being played by another late-night occupant of the store. The young man was playing that same game over and over and over and over. Putting in quarter after quarter. Always losing.

“Think about it,” Jerry insisted. “Think about how many people’s minds have been altered to make them smoke cigarettes and kill themselves when they know for a fact they’re going to die if they do this. They’re committing suicide by smoking. It’s stamped on every cigarette box. How can a corporation warp somebody’s mind to do that?”

“Isn’t the kid more likely to be following the example of parents, or peers? And then get addicted by the substance?” I asked.

“How do you get a peer group to smoke?” Jerry snapped back. “How do you get them to start? It’s not natural. How many people are going to pick up a burning leaf and inhale it and have that become a social norm, a whole culture? Isn’t that hypnosis?” he growled, “—circumventing the conscious mind?”

“Yeah,” I admitted, “when you circumvent the conscious mind for your own purposes...”

“...you are hypnotizing somebody,” Jerry finished.

“You are pushing buttons in the unconscious,” I admitted. Then I told him how a person could be trained to be a compliant, amnesic hypnotic subject.

“I’ve read in spy novels of such drugs and stuff,” Jerry said. “And anything that’s in a spy novel is more than likely mirroring reality. I went over to the counseling center to get treatment for tension. The counselor said, ‘Picture yourself in a nice warm environment, safe,’ and so on. It was hypnosis but he didn’t use that word. There’s others doing that stuff you’re talking about. Remember the dentist in town that got caught for telling women under hypnosis that for him to drill on their teeth they had to take their tops off and stuff?”

“Yeah.”

“It works. And these psychologists who understand these tools—you betcha there’s a bunch of them out there doing it. Because that’s human nature from what I’ve seen. There’s a bunch that aren’t, but there’s a bunch that are.”

Jerry stopped talking. We were both silent for a bit. In the background, quarters plinked into the machine. A brief game. Then more quarters.

“The first scientific experiment on hypnosis was in France with a condemned prisoner,” he said. “I read that in a book. They laid a guy out on an operating table, put him under hypnosis and told him he was going to die, that what they were going to do was slit his wrists and all his blood was gonna drain out of his body. They put ice across his wrists like that was a knife slash, and they dripped water into a bucket so he could hear the sound. And then they said he turned white and died. That’s strong stuff!”

“It’s called ‘voodoo death,’ death by suggestion,” I explained. “It says in the books that a hypnotic operator should be careful because under hypnosis a subject’s physiological reactions will match what he or she is told to hallucinate. So you don’t frighten a person with a weak heart.”

“The people I sent to Atlantis never had any troubles,” Jerry said defensively. (He had hypnotized friends and told them to “Go to Atlantis.”)

“Why did you ask them to go?”

“I wanted to find out what was there. You know, past lives and all that sort of stuff.”

Suddenly I had a chilly feeling in my soul. Under deep hypnosis the Atlantis Jerry sent people to would have felt real to them. Atlantis could have become important in their lives for years after. Maybe for the rest of their lives. They would believe in Atlantis, believe in past lives, want to see those visions again, feel that seductive deep trance sensation again. They would feel the powerful draw of rapport to Jerry for years after that. All because Jerry was playing around with hypnosis, using them as his subjects to “find out what was there.”

I went home.

Advertising to the Unconscious

Military psychologists worked for decades to develop the most effective **propaganda** techniques. In the private sector, **advertising** experts have done the same. Companies spend millions on advertising because they know that it works, and they know how it works. In the 1950s, the advertising industry began **motivational research**. They discovered that ads could be directed at consumers’ unconscious minds as well as their conscious minds. They learned that unconscious motivations could be even more powerful than conscious ones.¹ A bunch of new “needs” were then created by advertisers, targeting unconscious yearnings to be more sexually attractive, rich, youthful, popular, etc.

P.T. Barnum’s quote, “There’s a sucker born every minute,” was advice to sellers. “Let the buyer beware” is the best advice for buyers. There are ruthless marketers out there whose product may be worthless—even dangerous or addictive. They know just what attracts and hooks and how to do effective marketplace inductions. They know you will automatically defend any habit they can get you to adopt. You will also instinctively evangelize your new habit to other persons—whether it is a drug, a religion, or a rejection of religion.

Media Can Displace Reality—Over 97% of homes, all over the world, now have a television set. Most people spend hours every day in front of the fascinating—and hypnotic—tube viewing reprehensible social examples, addictive substitute realities, managed news (government knows how important this medium is!), and commercial persuasions (often with subliminals). Human beings are born gullible to a verbal or printed pitch.

Media are powerful mind-influencing tools because, strange but true, your brain takes the spoken or written word more seriously than the evidence of its own senses.

1. Vance Packard brought the new technology to public attention in *The Hidden Persuaders*, New York, 1957.



Gorton researched the effect of real (“direct”) stimuli versus verbal suggestions to enter or leave trance. He gave hypnotized subjects competing commands: one to wake up, the other to stay in trance. He gave one command in a circumstantial, “direct” form. The other was in a verbal form. He measured responses with an EEG printout which showed appearance, or disappearance, and amount, of alpha waves. His subjects always obeyed the verbal instruction rather than the circumstantial one.

That is why you fall for the promises, the “sales pitch.” The media are so important because the spoken word is dominant over reality. The media are not reality; they are just words (and pictures). Written words are dominant over both spoken words and reality. That is the importance of billboards, print ads on paper or screen—and Scripture. Screen speech and imagery, especially HDTV, may be the most powerful programmer of all. That is why advertisers of all sorts spend mega-bucks putting messages on the tube.

Big name ad agencies target your wallet and your children’s minds very scientifically. Consciousness lowering in conditioned subjects happens quickly. The first three-fourths of a video ad often contains an inductive assault intended to lower consciousness and thus increase suggestibility.

Screen-watching tends to lower consciousness. It creates sensory deprivation. It isolates people from physical reality, and from each other. Normally, your eyes almost always are moving, seeking, evaluating. Even when you read, your eyes shift. When watching television, however, the eyeball does not move. The focus is fixed. All information is flattened into one dimension. The viewer is forced to focus on that single, flat dimension. This lowers consciousness.

Lowered consciousness is worth money to advertisers. The lower the viewers’ state of conscious when the pitch comes, the greater their suggestibility and the greater the probability of message acceptance. Induction methods include shock (tension/fear), sexual arousal, relaxation (sensory deprivation), or disorientation (confusion). Then comes the sales pitch. The entire ad is repeated over and over because repetition is another factor that unconsciously persuades.

The technology of television has changed the political process. By means of television, a few people shape the opinion of millions. Those opinion-shapers are commanded by persons either in a position to pay for this expensive privilege, or with the power to demand control of it.

Television and Children

Video lowers consciousness, especially in children. Researchers experimenting with children wearing brain wave monitors could not prevent children from going into trance the moment they began to watch television or any video. A young mother, who usually kept the TV off, taped two Christmas specials, complete with commercials for a fast-food chain and a popular brand of doll. Her young children then watched the tapes over and over. She and her husband were amazed at how important that fast food chain and the doll products quickly became to their children.

Children are likely to acquire their values and beliefs from your (or the neighbor’s) TV rather than from you, Sunday school, or academic school. Children who assume that Sesame Street is a rightful part of their day as preschoolers may demand MTV as teenagers.

Viewing of screen cartoons, and other animated, quickly shifting screen scenes, at a very young age and for many hours per day is one cause of the modern epidemic of ADD and hyperactivity. The child’s brain continues growing after birth. As it grows, it adapts itself to the pace and content of its environment. Children growing up tied in a crib, staring at a ceiling, show symptoms of retardation. Children who grow up viewing screen images can show symptoms of attention deficit and hyperactivity.

The problem is that mother soon discovers that her child becomes physically quiet while watching those animated images on television or video. The path of least resistance is then to leave the television (or videos) running for hours every day. But the child is not truly relaxed. When the tube turns on, he goes into a trance. Trance puts the child’s motor system off-line. He is only relaxed in the hypnotic sense. His body is immobilized, but his unconscious mind is going pell-mell, pacing itself to the lurching, chaotic, often violent or vile images on the screen. The very young child’s brain adjusts its behavioral timing to resemble the timing of the animated material in its environment.

When the show is over, the child awakens from trance. With his motor function restored, he bursts into action with the stored-up energy of youth. If he behaves at the learned pace of an animated character, that child may be diagnosed as being hyperactive, or having attention deficit disorder. The usual treatment is ritalin, a drug that simultaneously stimulates and relaxes, just like television. Television is

...a major cause of hyperactivity...The physical energy which is created by the images, but not used, is physically stored. Then when the set is off, it comes bursting outward in aimless, random, speedy activity. I have seen it over and over again

*with children. They are quiet while watching. Then afterwards they become overactive, irritable and frustrated...television causes hyperactive response..It is bizarre and frightening, therefore, that many parents use television as a means of calming hyperactive children...The worst thing one can do for a hyperactive child is to put him or her in front of a television set. (Mander, **Four Arguments for the Elimination of Television**, pp. 167-8)*

Raising children on images of animated characters doing cruel and damaging things to each other to a background of jolly music is also taking a toll in children's peer relationships. The statistical frequency and severity of bullying is way up in this reared-by-TV generation, programmed by shows that feature the art of bullying as a staple.

HDTV—Television images soon will be much more hypnotic. **HDTV** is **high density television**. Sony Communications created it. The shape of an HDTV screen is rectangular, like film, rather than square, like a conventional television screen. It has far more detail in its scanning lines. That data increase is a quantum leap in focus demand and data input for the viewer's brain. The crystal-clear images are far more hypnotic than those of standard television. An HDTV film of outdoor scenes, with voice-over by a hypnotist, was shown to one-hundred TV industry representatives by a research hypnotist :

...we demonstrated that properly-selected HDTV images and hypnotic command can produce a light to medium open-eyed trance for most viewers...it's clear that domestic HDTV will one day tap into the viewer's subconscious mind.... (Farago, 1991)

Over the next decade, the entire North American television system is switching from standard transmission to HDTV. During this ten-year transition period, some people will have old TV receivers and some the HDTV type. Stations will transmit in both standard and HDTV mode. The switch to HDTV involves even more than everybody on the planet who wants TV reception buying a new receiver. All the television stations must be equipped to put out the HDTV signal. Hundreds of new television towers must be built (at \$2 million a tower), many the size of skyscrapers (up to 2,049 feet high). After that, however, there will be no more standard broadcasts. You will watch HDTV, or nothing.

Subliminals

Subliminals are an important marketing technology. They can work on the same people that hypnosis works on, the genetically susceptible. Subliminals can be visual or auditory.

Visual Subliminals—Dr. Wilson Bryan Key, who studied subliminals in politics and advertising, identified them in print sources—newspapers, placards, magazine illustrations. A friend of mine, with the equipment to do it, studied television ads in slow motion, looking for sexual subliminals. He found them. “They’re common,” he told me. “The soap opera ads have the most.” Visual subliminals can be effective because the film is showing a sequence of images timed at thirty, or more, images per second. But the conscious mind can only register about ten images per second.

*A technique called subliminal advertising places images within the dot-scan sequence at a speed which is faster than sight. You get hit with the ad, but you can't process this fast enough, so you don't know the ad is registering...Your brain gets the message, but your conscious mind doesn't. According to those who have used the technique, it communicates well enough to affect sales. (Mander, **Four Arguments for the Elimination of Television**, p. 194)*

Audio Subliminals—Subliminal messages can also be added to audiotapes. You have to take the advertiser's word for it that there are subliminals in a tape.

[They]...insert messages into the mind of the individual without the person being aware of the mind-programming process. This highly developed modern technology...has become quite sophisticated... (Baer, pp. 49-50)

The first subliminal audio technology used a background voice that matched the music in volume. Those messages cannot be detected unless you have a parametric equalizer. Want to create subliminal tapes yourself? Sorry, that technique is patented, and the patent holder exercises firm control. In fact, there are many patents now for various subliminal sound techniques. One method acoustically adapts the words so they are delivered in the same tone and rhythm as the music. Those subliminals are undetectable by the normal conscious mind. Once they are implanted, there is no known mechanical technology to detect them. The unconscious, however, is a supercomputer, and it hears them.

People do not know when they have watched, or listened to, a program with subliminals. They only know that it excited and convinced them. One day, a man showed me a large box of relaxation tapes he owned, more than fifty in all. He said, “I buy one, listen to it, and then send for another. I don't know why I do that.” Perhaps while he was “relaxed” he heard a subliminal sales pitch to buy another tape.



A Subliminal Sales Event

One July night, in 1990, I sat in a hypnotherapy class in a Seattle suburb. Cheryl, a good-looking, blonde, fortyish woman sat behind me. She asked our teacher, Charles Tebbetts, "Can somebody be made to do something under hypnosis that they don't want to?" Then she started to tell him something.

Tebbetts cut her off sharply, snapping back, "Absolutely not!"

I turned around and whispered over my shoulder to her, "Yes, they can."

After the lecture and the evening's videotape, it was time for us to team up and take turns hypnotizing each other. Cheryl asked me to hypnotize her. Because I was new in class and very nervous about hypnotizing somebody, I was grateful she chose me to trust like that.

In the pre-induction interview she talked about an incident from several years ago that still deeply upset her. A friend had invited her to visit a promotional event. "I didn't know she was getting points for bringing me," Cheryl said. After watching the promotional film, she wrote a check for \$2,000: "I had never had any interest in their product. I didn't want it. I really couldn't afford it. About a week later it was like I woke up and wondered what happened. Why did I do that? I've never been able to understand why."

I used a standard maternal induction, and Cheryl easily went into a trance. I then simultaneously deepened and regressed her, using an elevator countdown into the past. I had the "elevator doors" open up at the Las Vegas promotion for that company. I invited Cheryl to step out those doors into her memory of that promotion.

I asked her what was happening.

She was reliving the event. First, she said, she was in the hotel lobby. Then, she entered another room, sat down, and viewed a fast-paced, hour-long film. "It showed the swimming pool, the rec room," she said.

"Focus on the moment when you made the decision to buy," I said.

She was silent a long moment. Then, she said, "It never moves. It's like looking through the skin of a grey amoeba into the inside of it. The words never move."

"What do the words say?" I asked.

"They say, 'YOU WILL BUY THIS.'"

I did not understand. I questioned her more. Eventually, I figured out that she was watching a multilayered film. The rapidly changing conventional images of swimming pool, rec room, etc., were superimposed on that fixed background of words. She had not been consciously aware of seeing the background words, but she had unconsciously perceived them.

I asked Cheryl's unconscious to take note of the unethical quality of that type of suggestion. I asked it to choose a means to signal her if she was ever again exposed to that kind of attempted manipulation. It suggested "an emotional feeling—in her stomach." We then established that Cheryl's unconscious would give her an "emotional feeling in her stomach" plus a powerful urge to get up and walk out of the room, if a similar situation ever happened again.

When I awakened Cheryl from the trance, she told me she was so pleased to have that long-standing mystery in her life solved. She was also happy now to be protected against any similar exploitation.

I was happy too. At last, I had done something effective to help another person recover information from her unconscious and to resist future unethical mind manipulation.

Ten Important Hypnotic Phenomena

1. Suggestion
2. Rapport
3. Automatism
4. Catalepsy
5. Hallucination
6. Anesthesia
7. Posthypnotic Suggestion
- Normal Memory
8. Amnesia
9. Regression
10. Confabulation

When one becomes familiar with the characteristics of hypnosis and the phenomena obtainable through its use, he must come to one conclusion: that the relatively few reported cases in America of hypnotically induced crimes is insignificant as compared with the potential number of undiscovered crimes of this nature.

Teitlebaum, 1964, p. 158



1. Suggestion

Suggestion commonly means advice presented in a non-compelling way.¹ When used in the context of hypnosis, however, suggestion means something entirely different. A hypnotist works to make his hypnotic suggestion as compelling as possible. If you're not suggestible, you're not hypnotized—for the primary characteristic of hypnosis is **suggestibility**. The deeper your trance, the greater your suggestibility. All the hypnotic phenomena, except rapport, directly derive from suggestibility.

There are four ways a subject perceives suggestion:

- a) **Verbal Suggestion**—Spoken words.
- b) **Nonverbal Suggestion**—Communication by eye and facial behavior, posture, gestures, and other body language.
- c) **Intraverbal Suggestion**—Communication by vocal inflection and voice modulation. (Using intraverbal suggestion, experimenters have made hypnotized subjects do the exact opposite of their verbal suggestion.)
- d) **Extraverbal Suggestion**—Communication conveyed by the implied meaning of words.

Suggestion Targets Automatic Obedience

When a subject's conscious mind has been, somehow, stripped away, turned off, or distracted, **induction** has taken place. Now the hypnotist can speak directly to the subject's unconscious mind without interference or censor-

ship from his conscious mind. Suggestion means direct communication (bypassing the conscious mind) to the unconscious sector of mind. That direct communication targets the noncritical, automatic part of the brain for direct programming.

Direct vs. Indirect Suggestions

There are two types of hypnotic suggestion: **direct** and **indirect**. Direct suggestion instructs without disguising intent. Indirect suggestion is veiled, devious instruction designed to deceive and trick the subject into doing what the hypnotist wants. A subject is much more likely to obey an evil suggestion that is presented indirectly.

For example, Marcuse discussed how an operator might get hypnotic subjects to do what they would ordinarily resist. He said he might get subject X, an animal lover, to kill a cat by suggesting a hallucination that would cause X to see that cat as a dangerous tiger with a poisonous bite which would cause a painful and certain death, and the cat was about to attack. The subject "would then be told that, in self-defense, he would shoot the animal." (Marcuse, *Hypnosis*, p. 110) "Kill the cat" is a direct suggestion. "In self-defense, shoot the poisonous tiger" is an indirect suggestion.

Adam never disguised his commands to Zebediah. He relied only on trance depth, suggested amnesia, and direct commands. Bergen used both direct and indirect suggestions with Mrs. E. Nielsen often used indirect ones on Palle. He didn't say, "Go rob a bank and give me the money," a direct suggestion. Instead, Nielsen told Palle, "Your guardian angel, X, wants you to rob a bank to raise money for the sake of the Fatherland," an indirect suggestion.

2. Rapport

Deleuze and the early mesmerists also described the evils resulting from too frequent, or too prolonged, hypnotic sessions. Such subjects gradually became addicted to hypnosis. Not only did their need for frequent hypnotization increase, but they became dependent on their particular magnetizer, and this dependency could often take on a sexual slant.

- Ellenberger, *The Discovery of the Unconscious*, pp. 138-119

Rapport As a Focus on the Hypnotist's Voice

Normal sleep is an isolated and private world, your self talking only to yourself in dreams. During hypnosis, however,

the sleeping mind keeps a channel open to the voice and suggestions of the hypnotist. The narrowest meaning of **rapport** is the mental connection a hypnotized person maintains with the voice of his hypnotist. The words of a hypnotic induction usually reinforce that tendency: "You will

1. "Suggestion" also means directive communication presented in an indirect way such that the person who obeys does not notice why he or she obeyed.

be oblivious to all else, concentrated on, and aware only of my voice.”

That remarkable focus is another aspect of rapport. When your mind is focused on only one thing, without other distractions, that one thing makes a strong imprint. The deeper you go, the more you have isolated a particular center of the brain from competing inputs. Hypnotic obedience results from sidelining the brain’s conscious monitors and isolating the active network of neurons from competing networks. The hypnotic subject obeys the hypnotist’s suggestion because a competing explanation or directive is not accessible.

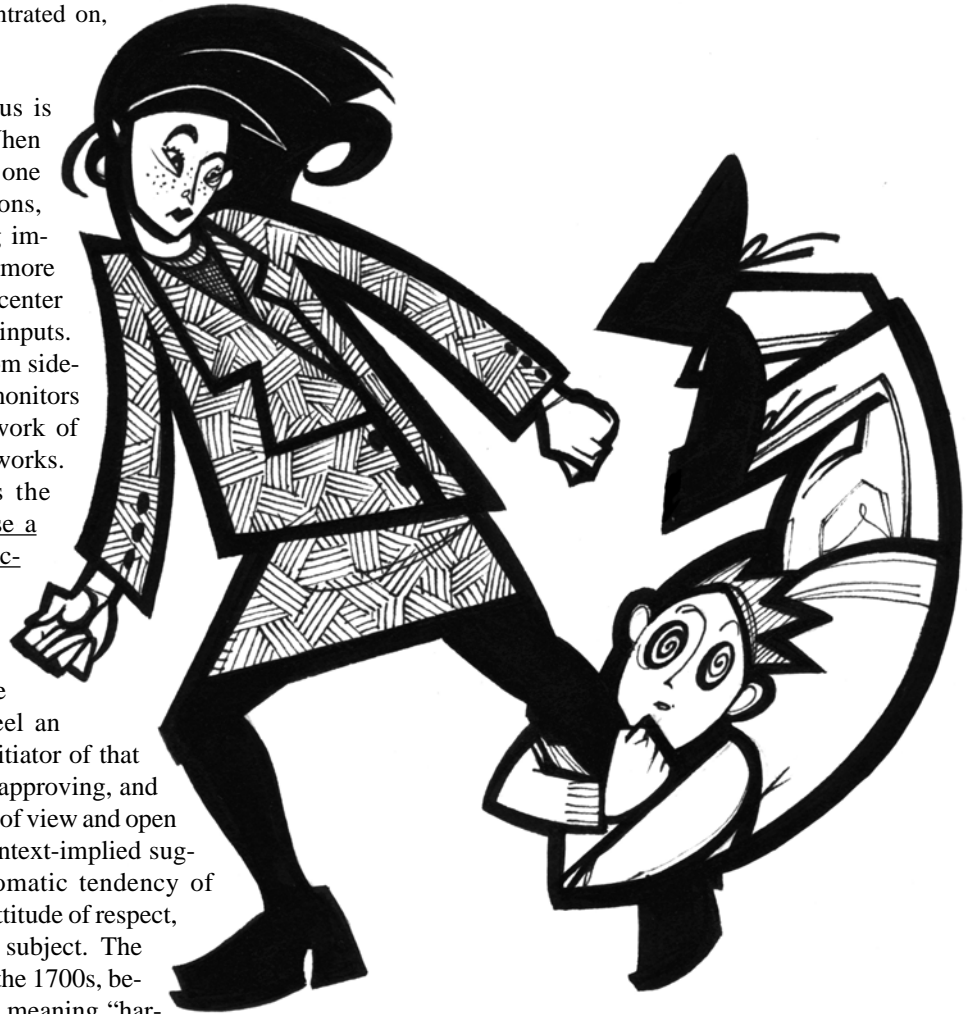
Rapport as Love

After even one trance induction, subjects tend to feel an intense emotional tie to the initiator of that induction. They feel bonded, approving, and accepting of that source’s point of view and open to his, her, or its spoken or context-implied suggestions. Rapport is the automatic tendency of trance experience to cause an attitude of respect, affection, and obedience in the subject. The first magnetizers, in France in the 1700s, believed rapport (a French word meaning “harmony” or “connection”) was the central phenomenon of hypnosis, rather than suggestibility.

Rapport is far more than just a hypnotic phenomenon. Wherever there is charismatic leadership, love, or even close friendship, there is rapport. The line between rapport and other love relationships is fuzzy. Rapport always contains an element of dependence. It often has a subtle (or obvious) erotic element. Anybody who performs well for the public generates rapport. A teenager with a crush on a performer is in its grip. The rank and file tend to fall into rapport-love with their leaders or heroes—political, religious, cultural. Human beings naturally bond to, and organize themselves around, leaders.

Rapport As Addiction

Lowering consciousness feels good. Anything that feels good creates a longing for repetition. Rapport can become an intense, emotional relationship. The subject finds his thoughts fixed on the hypnotist between, as well as during, hypnotic sessions. He begins also to pick up and obey general context clues from the hypnotist as to what to believe and how to behave. Kubie and Margolin defined rap-



port as “a psychological fusion between hypnotist and subject” (*“The Process of Hypnotism and the Nature of the Hypnotic State”*). An old-time mesmerist observed that

...the subject was hypersensitive to the hypnotist to the extent that he was able to perceive the latter’s faintest signs. Through habit and training, a process of mutual understanding by signs developed between them, of which neither was aware. The subject became sensitive to the slightest shades of the hypnotist’s thoughts without realizing how, and without the hypnotist’s awareness. (Rault, quoted in Ellenberger, pp. 153-154)

Janet said the development of rapport over a series of hypnotic sessions had two distinct phases. In the first, the patient was freed from symptoms and felt much better. In the second, however, which he called **somnambulic passion**, the symptoms sometimes returned.

...[the] patient felt an increased need to see the hypnotist and to be hypnotized. This urge often assumed the form of passion...ardent love, jeal-



ousy, superstitious fear, or profound respect.

Somnambulic passion was a potpourri of possible elements: erotic passion, or the kind of love one feels for a parent, or some other kind of love. One element that never varied however, was the patient's need to be directed. (Janet, 1897)



*Rapport can be transferred from one hypnotist to another by a simple verbal command, called **transfer of rapport**, or **shifting the rapport**. An operator tells his subject to now obey a new operator in the same way he has been obeying the speaker. If the suggestion is accepted at the subject's automatic level of mind, rapport will shift.*

Rapport as Bonding

Subjects of the same hypnotist tend to **bond**. Old-time European researchers first noticed the tendency of

patients of the same magnetizer to bond with each other. This principle has many applications. Persons influenced by the same leader(s) tend to trust each other, and to behave worthy of that trust. They relate as brothers and sisters. This psychological trait enables the bonding of family, congregation, and community.

Rapport Also Impacts the Hypnotist—

Rapport flows both ways. The hypnotic subject influences the hypnotist's behavior, because a hypnotist unconsciously develops suggestibility to cues from his subjects. Thus, rapport tends to become a situation of **mutual suggestion**. The subject gives his hypnotist what the hypnotist secretly expects, and the hypnotist tends to create for the subject what the subject secretly expects. This unconscious collaboration between the charismatic leader and his followers has, in the historical record, resulted in remarkable elaborations of mutual delusion and absolutistic and costly loyalties: Jim Jones, Waco, the Heaven's Gate comet cult.

The Freudian View of Rapport—Freud

called rapport **transference**. He believed it was a revival of the original parent-child relationship. Psychoanalytically-trained hypnosis researchers believed trance obedience was rooted in an unconscious longing for, or regression to, a childhood behavior (or instinctual early programming) of total dependence on, and uncritical love of, the parent figures. Little children can believe anything.

3. Automatism

One of the experiences that most surprises the hypnotized person is the seemingly automatic way in which the suggested actions execute themselves. His hands clasp tighter of their own accord, his arm stiffens itself, while he himself remains a passive spectator. Inexperienced subjects are often startled when they discover that this feeling is not an illusion...

- R. W. White, 1942, p. 318

“Suggestion” means any directive carried out with automaticity, or intended to be carried out with automaticity. **Automaticity** means it was obeyed by the subject's unconscious mind without control, criticism, or feedback from his conscious mind. **Automatism** means thinking at the unconscious level. Your conscious is a rational free agent. Your unconscious is more like a machine, a “slave” unit in computer language. It does all the automatic, habitual tasks such as writing, typing, eating with a fork, driving. It also responds “to such things as heat, cold, hate,

danger, love and lust.” (Birns, *Hypnosis*, p. 40) What we do automatically, we do without conscious awareness.

Suggestion Intends Automatic Obedience

Normally, suggestions are accepted by the unconscious only some of the time. Hypnotic technology strives to improve the odds of unconscious acceptance. A subject who had usually been very suggestible told her operator one day that his suggestion “did not take.” “I am quite ready to obey you,” she said, “and I will do it if you choose:

only I tell you beforehand that the thing did not take.” (Janet, 1925) That patient had recognized the difference between voluntary, conscious cooperation (an intentional act), and the **reflexive**, unwilling response when a suggestion “takes” (an automatic response).

Automatism is **unconscious behavior**. The conscious analyzing, critiquing, and rejecting function of a deeply hypnotized person is inhibited. What is left is their capacity for automatic, unconscious response to suggestions. An act carried out in a state of automatism seems to execute itself. This statement may seem incomprehensible if you have never experienced the phenomenon of **nonvolition**. A posthypnotic suggestion, for example, carries itself out. You do not experience intention before the act. Your conscious mind does not participate in the act.

A hypnotist’s suggestion intends this kind of automatistic obedience. In **automatism**, a subject’s obedience becomes literal and humorless. The action of reasoning power is limited to searching out ways to implement the suggested behavior.

Words as Conditioned Stimuli—Hypnosis is a tool for programming and reprogramming because of the powerful effect of words (and the meanings and images they communicate) on the human mind. Pavlov called direct observation by sense organs the **first signal system**. He called language the **second signal system**.

Speech is an auditory code. Each word is an encoded meaning. Everybody who knows a language uses the same definitions for its words. A word can be decoded in the mind of the hearer after a child has learned the meaning of the word. Then, that word has become a **conditioned stimulus**. Each perceived word stimulates a **conditioned reflexive response** to recognize its meaning. Language recognition and response are automatic, **reflexive**—unless we are learning a new one.

Amazing but true, research has shown that words, the second signal system, are more effective at programming people than real life experiences, the first signal system! The words, to which we are exposed, program us. A primary phenomenon of hypnosis is based on this fact, that people respond automatically to words and the ideas they convey.

Bernheim first pointed out the phenomenon of direct programming by **verbal suggestion** back in the 1800s. You touch a hot stovetop and jerk your hand back. That heat was a direct sensory perception. But if I yell “Hot!” before your hand gets there, your hand will also jerk back. The word “hot” was a stimulus to which your brain has a conditioned recognition of its meaning. Acting in response

to that recognized meaning, your hand pulls back from the thing now identified as “Hot!” For human beings, words elicit conditioned stimuli just like real life sensory perceptions.

Without language, tedious **cause-and-effect training** is necessary in order to learn. By means of language, however, people are **programmed** and reprogrammed directly, quickly, and clearly. They do this simply by hearing verbal instructions, or by reading written instructions (words coded in visual symbols). You can “program” a person, awake or hypnotized, simply by talking to him.

Words act as conditioned stimuli in a totally mechanistic, automatistic way when the subject is deeply hypnotized. During hypnosis, the conscious mind, one of whose functions is to keep us hitched to reality, has been turned off. The conscious is not there to interpret or deny. The unconscious is literal and, frequently, obedient. When the subject’s conscious mind is turned off because of hypnosis, language takes the place of reality. If the hypnotist says, “You see a cat waltzing alone in pink pajamas,” you might see that.

The second signal system is a marvel of ease and efficiency for an operator (parent, teacher, employer, hypnotist). A dog will not salivate to the sound of a bell until the paired stimuli have been presented many times. A conditioned human hypnotic subject, however, can be given that command in the form of a verbal instruction just one time: “Salivate at the sound of the bell.” The conditioned reflex is instantly established in the subject’s unconscious. He now salivates after hearing the sound of the bell. The behavior of salivating after hearing the sound of the bell was instantly established as a **conditioned response**.

That is the gist of Salter’s realization about how hypnosis works, his “conditioned response theory of hypnosis.”

Hypnotic Conditioning—**Conditioning** means training a person to respond to instructions automatically. Psychologists apply the word “conditioning” only to learning that is reflexive, automatic—not conscious. Hypnotists often use “conditioning” to mean the training of a hypnotic subject:

In the training of a subject we strive for the development of a desirable, conditioned reflex pattern. Susceptibility to hypnosis increases with the repetition of the hypnotic induction...thus creating a favored pattern. The more frequently a response follows a given stimulus, the more firmly is the tendency established...A conditioned reflex re-



sponse may be defined as a psychological or physiological response to a specific stimulus resulting from training or experience. (R. W. White quoted in Moss, Hypnosis in Perspective)

Under deep hypnosis, words can create unconscious reflexes. Any posthypnotic suggestion, such as for reinduction, is a conditioned reflex. The subject's behavior of "falling asleep" every time the operator gives the cue is a conditioned response to the cue's stimulus. No practice is necessary after the subject is trained for trance depth and amnesia. If the operator's instructions are accepted by the subject's unconscious, a conditioned response pattern is instantly established. He has instantly acquired a new "habit."

Habit

Habit is automatic behavior, a **conditioned reflex** established in your unconscious. Anything done repeat-

edly turns into habit. We have habits because mental processes of which we are consciously aware tend to be uncomfortable--such as those involved in learning the multiplication tables, or a new language as an adult, or how to drive.

If we had to consciously direct every movement, every thought, and every bit of sensory perception, our mental circuits would be overwhelmed. Habit is also useful because it frees the conscious mind to consider new data. Unfamiliar things in our environment may signal danger. It is the job of the conscious to note them, then to think, reason, analyze, and evaluate them. Then it makes a decision. It can change unconscious programming based on those evaluations, especially when spurred by strong feelings such as pain, shame, or fear.

Habit is a functional system in the brain which takes less energy from the nervous system to activate than it

Unconscious Reflex Dominance Attributes

When reflexes compete (such as those suggested by a new hypnotist competing against those implanted by a former hypnotist, which one wins? To be effective, new programming, or changes in old programming, have to make as deep, or deeper, impression than the original programming. Habit strength is the sum of the strengths of six components. If you had a numerical way to measure the strength of each of the six factors which cause unconscious reflex dominance, outcomes could be expressed as a mathematical formula:

- 1) **Chronological Sequence**--If all other factors are equal, an earlier suggestion will dominate over a later one. That is why childhood experiences are so important. That is why a subsequent hypnotist's programming effort has to be more vigorous. The "age," when programmed, can be real, or suggested.
- 2) **Emotional Intensity**--Every programming has some degree of associated emotional tone, and it is either positive or negative. Programming associated with greater emotional intensity makes a deeper imprint and has greater drive.
- 3) **Depth**--All other factors being equal, a suggestion made in deeper trance will prevail over a suggestion made in a less deep state of consciousness. Dr. Reiter could not make progress against Nielsen's programming of Palle until, using barbiturate, he achieved a greater depth of trance in Palle than Nielsen had. If the subject's original conditioning was done under narcohypnosis, it is difficult (possible though) to compete with that, except by using another narcohypnotic series.

The greater the **focus**, the more intense the attention, the deeper the trance level at the time, the stronger a suggested mental reflex will be. Focus is a mini-trance, a selective attention, and it can happen outside a conventional hypnotic context. Focus increases the probability of future dominance of that imprint.
- 4) **Strength of Drive**--A stronger suggestion prevails over a weaker one. A suggestion is stronger if it is more strongly driven, or more closely linked to primary process elements hard-wired into the brain, or if it is more complexly elaborated. Thus, reflexes associated with food, sex, or aggression tend to be dominant. That explains the success of television ads for fast foods, underarm deodorant, and pickup trucks.
- 5) **Repetition**--Anything you think or do, once, has already started to become habit. The more times you do it, the stronger the reflex will be, the deeper the habit groove. This is the mechanism underlying habit: the more you do it, the more likely you are to do it. The response, which you are turning into a habit, can come from inside you or it can come from outside you. When you have obeyed a series of suggestions for somebody, there is a steadily increasing tendency that you will obey further suggestions from that person.
- 6) **Amnesia**--Unconscious mental programming is unlikely to change, unless it can become consciously known. Thus, suggested amnesia prevents your natural self-governing mental feedback system from weakening or changing the amnesic programming.

would take to defy it and do something different. Habit is, in physiological terms, literally the electrochemical brain path of least resistance. When you are learning to type on a keyboard, you think about the placement of each finger. You type slowly, painfully. It is the same when you are learning to ride a bike or to drive a car. Once it becomes habit, however, those actions and reactions are reflexive, comfortable--and very difficult to change.

Habit strength is one of the factors in your mind that mediates between the outside stimulus and your internal response (an **intervening variable**). Habit strength is like a trench dug by flowing water. The longer and harder the water has run, the deeper the habit trench. The stream may be directed to a new course, but if the new and the old meet and conflict at any point, the water will tend to shift down into the older, deeper trench. That is an **addiction** response. A victim of unethical hypnosis is a kind of addict, addicted to obediently entering trance in response to the induction cue.

Second-Signal System—Your response to words is habit that happens at the unconscious level. Pavlov called our sensory perceptions of the outside world the **first signal system**. Humans also take in information from other humans coded in words, written or spoken. Pavlov named that second source of information the **second signal system**. Words are stimuli that elicit specific and predictable habit responses in the people who hear them.

New habit can be directly programmed into the subject's unconscious mind via the second signal system. The result will be hypnotic automatism. Spoken words can instantly create **unconscious conditioned reflexes** in a somnambulist. That is amazing. That is scary. Automatism is conditioned reflex behavior resulting because a hypnotist directly accessed the automatic level of a subject's mind. The words of the hypnotist are the second signal system stimuli; the obedience of the subject is his unconscious, automatic response.

Simultaneous Automatic and Conscious Behavior

Two different activities can be carried on at the same time, originating from different areas in the brain. You can, at the same time, be conscious and be **dissociated**. A classic example of this is **automatic writing**. Any time that you do two things at the same time, some dissociation is involved. I can simultaneously type and think about what I am going to write, because the movement of my fingers is a dissociated activity. The movement is a habit which needs no conscious direction.

The symphony conductor Pierre Boulez once described in a TV interview how it was that a person could conduct "five against four," meaning rhythmically moving one's right hand five times while moving four times with the left...Boulez said that doing "five against four" is simple: one merely had to put one of the hands on "automatic," and then pay attention to the other. (Furst, p. 91)

Boulez was doing concurrent unconscious (automatic) and conscious behavior. M.H. Erickson and his wife instructed a farm boy, in amnesic trance, to empty his bucket into the trough after every 250 strokes of the pump handle. As the boy (now out of trance) pumped, Dr. Erickson asked him spelling words. The boy spelled the words out loud at the same time that he was pumping. The moment the boy pushed the pump handle down the 250th time, he would suddenly stop spelling, stop pumping, and carry the full bucket to the trough.

The Ericksons described a similar experiment in which a stenographer, writing shorthand at up to 120 words a minute, obeyed an amnesic hypnotic suggestion to change pencils every so many words. She performed the unconscious pencil-changing act perfectly, as well as the conscious recording of dictation. When the Ericksons asked her to do both acts consciously (counting words and recording words), she could not. When they revised the instructions, however, and told the secretary to just **guess** when she should change pencils, she could do it (because she had gone back to counting unconsciously).¹

Ordinarily, you can not simultaneously beat a five rhythm with one hand and a four with the other. You can't count to 250 and spell at the same time. You can not count words and take dictation all at once. If one of the two operations is performed by your unconscious, however, you can perform these amazing feats.

Conversion

Conversion happens when a subject exchanges one symptom, behavior, or belief, for another. The transformation may be suggested, or spontaneous. True conversion always happens at the unconscious level—and thus with automaticity. In order for an unconscious to reject a suggestion, or a posthypnotic suggestion, it **must convert** that suggestion's energy into another, linked behavior.

For example, Hammerschlag observed a subject to whom he had given a posthypnotic suggestion to stick out his tongue at him: "...he becomes stiff and stares at me with

1. "Just guess" is a function assigned to our unconscious. It also explains the phenomenon of **source amnesia**.



wide-open eyes. Then he shakes his head as if he wants to drive away a thought.” Hammerschlag asked the subject what was in his mind. The subject “replies that the absurd thought entered his head that he must stretch his tongue out to me...” (p. 65) The subject was then completely freed of that posthypnotic urge. He had converted the tongue-sticking-out into stiffness, staring, head shaking, and finally the verbalization describing the urge. Those conversion behaviors completely dissipated the suggestion’s energy. The subject was relieved of the unconscious pressure to perform that humiliating act.

A conversion is an unconscious escape maneuver. It is a self-protective maneuver that the subject’s unconscious can do—without the presence, or participation, of the conscious mind. An unwelcome, unconscious instruction is avoided by diverting its drive energy into a different channel of expression. There is always automaticity in conversion; it is always an unconscious maneuver. If a person rejects a suggestion by means of conversion, he or she was in a trance state when the original suggestion was implanted.

A girl was given a posthypnotic suggestion to turn on her radio after awakening from trance, but not to know why. After being awakened, however, she did not obey. Instead, she acted very nervous, standing up, sitting down, walking from her chair to the radio, then stopping and going back. The hypnotist asked, “What makes you so jittery?” She explained that she felt “an almost irresistible compulsion to get some music on her radio, but she realized that it was quite late and it might waken the baby next door.” (Gindes, p. 42) She had resisted the objectionable suggestion by converting it into anxiety and nervous pacing.

A prominent German hypnotist, Wagner von Jauregg, publicly declared, over and over, that hypnosis could not be used to cause a person to commit a crime. One day a strange man entered his office carrying a pistol. The man shouted threats and pointed the gun at him, then let the gun fall and shouted more threats. Investigative hypnotists later learned that another hypnotist had instructed the man to “shoot” von Jauregg. He had made the suggestion, provided the gun, demonstrated that there were no bullets in it and no harm would come of obeying. Despite all that, the subject never pulled the trigger. He converted that part of the suggestion into letting the gun fall. (J. H. Schultz, 1952)

In Mayer’s second book, he described an experiment in “antisocial” hypnosis. He, the female subject, and another person were all standing outside in a garden. Before the hypnotic induction, he handed the subject a gun and told her to shoot at a tree. She did so. Then he handed her some cartridges and told her to reload the gun. (The

new cartridges were dummies, harmless fakes, but there was no way she could know that.) She loaded the gun. Then, he induced hypnosis

She is instructed to shoot at the person indicated by me and she indicates her complete agreement. [He also suggests that...] The subject must, within a minute after awakening from the hypnosis, sieze the revolver which will be lying in front of her, aim it at the breast of the indicated person, and pull the trigger...The subject sinks into a state of excitement, with fixed and steady gaze at the revolver which lies before her. She is terribly agitated. Before that instructed minute of delay has passed, she begs for a glass of water because she suddenly feels unwell. Something dark arises inside her. Then she springs into the air as if driven to do so, tries to grasp the weapon, shrinks together, slips on to the ground and lies there motionless. She is placed on a bench. She comes to after some minutes, and looks around her in astonishment. She tries to orient herself but for about ten seconds she remains confused. (Mayer, Die Technik der Hypnose, p. 52)

Her excitement, physical restlessness, request for a glass of water, feeling unwell, springing into the air, and fainting were all conversions of the rejected suggestion. A suggestion which has been accepted at the unconscious level **MUST** be converted rather than simply denied. (That is one origin of neurotic behavior.)

There are also cases on record in which a hypnotist told a subject to do something intolerable, and the subject converted that drive into a self-generated wake-up command! In the infamous Salpetriere, a hypnotist had demonstrated a hypnotized young woman committing suggested crimes:

Witt., the principal subject, thrown into the somnambulist state, had...displayed the most sanguinary instincts. At a word or sign, she had stabbed, shot, and poisoned...The notables had withdrawn, greatly impressed, leaving only a few students with the subject, who was still in the somnambulist state. The students...told her that she was now quite alone in the hall. She was to strip and take a bath. Witt., who had murdered all the magistrates without turning a hair, was seized with shame at the thought of undressing. Rather than accede....she had a violent fit of hysterics. (Janet, Psychological Healing, p. 184)

That incident is much cited as proof that a hypnotized person will reject any unwelcome suggestion. There

is always the hope of effective resistance to an odious suggestion, and Witt. managed it. She converted the unwelcome suggestion to strip and imagine herself taking a bath into that “violent fit of hysterics.” She could not simply deny the suggestion. She had to **convert** it. If a suggestion is rejected by conversion, rather than just being ignored, that is proof that the subject was in an automatistic state when the original suggestion was given!

The possibility of conversion should not be taken to mean that it is impossible for a hypnotist to compel a subject to do something against his will, or against his best interests (the “dogma of moral integrity”). Fortunate, indeed, is the subject who successfully manages to convert an exploitative or abusive suggestion. Normal unconscious processes are set up to obey rather than to convert. Modern technologies of hypnocontrol have done their best to completely eliminate this option for a subject. Nevertheless, conversion always remains a possibility.

Conversion is one origin of psychosomatic ailments. In 1937, Eisenbud treated a man who suffered severe migraine headaches. He observed they were triggered by situations in which his patient’s hostility was aroused, but could not be expressed—anger converting into headache. Eisenbud cured the patient with a **desensitization series** of visualized scenes in which hostility was aroused but could not be expressed. The first scenes caused painful migraine headaches. As the series continued, however, headaches resulted less frequently. The patient was beginning consciously to understand that he had been converting his anger into pain. Conscious recognition of the conversion enabled the subject to unload that bad habit.

Pure **symptom removal** (you tell somebody under trance that their problem is going away, or to quit doing it) may work, or it may not. Suggested **symptom conversion** works better, because it gives the symptom’s underlying drive-energy a better place to go. For example, a facial twitch could be converted into an inconspicuous twitch of the left little finger. Conversion could even give the problem drive a useful and helpful new function, a **compensation**.

4) Catalepsy

The subject, upon being hypnotized, was commanded to clasp his hands as tightly as possible and was told that he would not be able to open them until he was instructed to do so. A burning cigarette was forced between the clasped hands in such manner that he would suffer severe burns if they could not be pulled apart...the subject made several attempts, screaming the while. The odor of burnt flesh was noticeable. Finally, after the subject pleaded for release from the suggestion, the professor relented.

Gindes, p. 94¹

Suggested Catalepsy

In trance, you may lose conscious control over muscle actions that are normally voluntary. That phenomenon is **catalepsy**.² Catalepsy can happen when the brain’s motor (muscular) control system is dissociated (goes off-line). Or, it begins when the subject’s unconscious starts taking orders from the hypnotist instead of from its own conscious mind—and he suggests catalepsy.

The cataleptic state can involve either **flaccidity** or **rigidity**. A paralysis (catalepsy) caused by hypnosis (or hysteria) is not like a real paralysis caused by physical nerve damage. It is only there because the subject’s unconscious

accepted the idea that it is there. It takes the form that the subject imagines it should. The manifestation may not be anatomically correct in terms of nerve distribution and function.

Pavlov theorized that catalepsy happens because the motor center goes off-line. He hypothesized that a sequence of higher brain centers (which he called **analyzers**) go off-line, one by one, as brain inhibition (relaxation) increases. His concept is correct. The center for voluntary muscle control is one of the first to go, so catalepsy appears at a relatively shallow trance depth.

1. Gindes did not note the obvious aspects of sadistic domination and subject abuse by the unidentified “professor of psychology” who suggested the cataleptic situation of clasped hands to his subject and tested his automatism so cruelly. This is a clear case of an “antisocial” act by a hypnotist against a subject. The subject is unable to escape despite great need to do so. Gindes told it only as an interesting aside.

2. In biofeedback training, on the other hand, you gain control over normally involuntary body functions.



Catalepsy to Test Trance Depth and to Deepen

Catalepsy demonstrates the **displacement** of conscious will by unconscious will, and the hypnotist's dominance over the subject's unconscious mind. In his first induction of Candy, Nebel used a limb catalepsy routine simultaneously to test her trance depth and to deepen her. After the primary induction by progressive relaxation, he lifted her left arm up and suggested that it had become rigid and would hold that position, and that she could not lower it, even if she tried. Nebel was suggesting **dissociation**; her arm was to have a mind of its own.

With Candy's conscious mind inhibited, her unconscious accepted the suggestion. Muscles tensed in the arm as Candy consciously tried to lower it. Unconsciously-controlled opposing muscles kept it up. She could not lower it. Nebel ended the test. He gave permission. Then her arm lowered.

Deep Trance Catalepsy—There is a profound difference between suggested catalepsy in lighter trance (“however hard you try, you can not open your eyes”) and the natural catalepsy that appears in deep trance. In trance deep enough for surgery, there is a tendency for a body part to remain in whatever position the hypnotist places it. That tendency is also called **catalepsy**, but deep trance catalepsy is a physiological condition rather than a suggested one. The subject is truly *unable* to move. Dr. Esdaile used this condition as a surgical anesthetic for hundreds of operations in India. Binet and Fere used the word “catalepsy” only to describe this latter condition, one characterized by absolute hypnotic automatism. “...the cataleptic subject is a machine,” they declared.

Catalepsy vs. Catatonia

Catalepsy and **catatonia** are related words. In modern usage, **catalepsy** is used when speaking of a hypnotic subject. **Catatonia** is used when speaking of mental patients who have unusual body flaccidity or rigidity. A cataleptic hypnotic subject's suggested muscular rigidity resembles the fixed positions of some catatonic schizophrenics. In light-trance catalepsy, the subject does not move what he has been told he cannot move. In deep-trance catalepsy, the physiology of the state immobilizes the subject. In catatonia, the immobility is spontaneous and is caused by mental illness. However, some old-time writers used either word to refer to either state. Some even reversed them, using catatonic to mean cataleptic. In the following quote, both terms are used correctly:

[Catalepsy is]...a peculiar state of muscle tonus which parallels corea flexibilis of the stuporous catatonic patient. The subject holds his arm up in the air, maintains any awkward position

given him by the hypnotist, and shows a failure of normal fatigue reactions. Concomitant with it are a loss of the swallowing reflex, a dilatation of the pupils, a loss of facial mobility, and a definite slowing of all psychomotor activity. Yet, upon instructions by the hypnotist, the subject can perform adequately at a motor level equal to the waking capacity and often at a level that transcends it. (M.H. Erickson, *Hypnosis in Medicine*, p. 644)

“Bridge” Phenomenon

Old-time hypnotists often tested or demonstrated a subject's cataleptic capacity with the **bridge phenomenon**. Dr. Reiter used it when demonstrating Palle before the court personnel. Dr. Cook, a professor at the University of Chicago, almost a century ago, said:

A favorite demonstration of profound hypnosis made in public exhibitions is the production of catalepsy...when the subject is perfectly rigid, his body is lifted and placed in such a position as to cause the head to rest upon one chair, while the feet rest upon another, making of it a sort of human bridge, upon which the operator may place weights, or upon which he may stand. (Cook, pp. 243-244)

A 1990 text for hypnotists describes a similar routine:

*The stage hypnotist tells the subject that his or her body is getting stiff and rigid, so stiff and rigid that it is becoming as unyielding as a bar of steel. The rigid body is now placed across two chairs and another person stands on the unsupported abdomen. (Hughes, *The Induction of Conviction*, p. 31)*



Suggestion under trance can make a body rigid and unfeeling, but it cannot make a body immune to actual damage. Subjects have died after romps of this sort.

5) Hallucination

It is well known that, while under the hypnotic influence, subjects can eat the most obnoxious articles without realizing the unpleasant effects, provided the proper suggestions are made. It is possible to give a subject a glass of diluted ammonia and say: 'Here, drink this glass of milk,' and thus get him to drink it. But such an act would be grossly wrong, for the ammonia would injure the throat and stomach...even though he experienced under suggestion a pleasurable sensation while swallowing it.

- Cook, *Practical Lessons in Hypnotism and Autosuggestion*, 1920, pp. 72-3

A **hallucination** is a vivid, sensory, mental experience that is not real, but, at that moment, seems to be real to the subject. The experience of a hallucination can be suggested to a hypnotized person, or it can be suggested to appear after the subject awakens from trance, as a cued posthypnotic event. The hallucination can mimic any of the five senses: sight, hearing, feeling, smell, or taste. Vision is the hardest sense to hallucinate. Deep trance is necessary.

Gindes wrote about feeding soap to a subject and convincing him that it was a delicious dessert: "Similarly, it is possible to make the hypnotic subject accept chili-peppers as sweet milk chocolates and ice-cubes as burning coals." (Gindes, p. 37) Taste and smell hallucinations have a long, sad history in hypnotricks.

*Persons have been known to drink kerosene, or diluted ink with apparent pleasure, as if it were wine, tea or milk, depending on the suggestion. Persons have been known to turn away with the expression of disgust on their faces from an excellent perfume; or to inhale with delight the vapors from a bottle of ammonia. (Winn, *Scientific Hypnotism*, p. 24)*

Research hypnotists have, by suggestion, caused total blindness, colorblindness, and total deafness.

*Subjects can be made to...be deaf to the loudest noise—even a gun fired close to their ears...Or subjects can be made to believe they are blind, so effectively that the brain waves typical of real blindness will begin to be transmitted. (Hughes, *The Induction of Conviction*, p. 31)*

Those conditions were all hallucinations, perceptions of reality falsified by suggestion.

Normal and Abnormal Hallucinations

We all can imagine, and many people can visualize. In normal people, ideas, thoughts, and insights from deep mental levels can manifest themselves to their conscious in **visualizations**. There are visualizations that you can deliberately call out on your mind screen. There are spontaneous visualizations that just happen. Right-brained people may visualize much of their own thinking. Visualizations may also be suggested by another person. You "see" that image—a pink elephant. You know it is just a suggested image. Ordinary imagery and imagination vary in degree of **autonomy**. It can be a matter of opinion as to when an image is just a visualization, and when it is a hallucination.

*The dream...when remembered... qualifies as hallucination. (p. 89); ...dreams are the hallucinations most frequently experienced in daily life. (E.R. Hilgard, *Divided Consciousness*, p. 95)*

The most extreme type of hallucination happens when the subject mistakes his hallucination for external reality. If you know it is a visualization, dream, or illusion, the event does not qualify to be called a hallucination in the most complete sense. Full-scale hallucination is imagination that you believe is reality. A full-scale hallucination is **autonomous**. You do not control it. For the moment, it controls you. Normal people can have the extraordinary, unforgettable experience of spontaneous hallucination. Too many such experiences, however—especially if they are a) terrifying, b) authoritative, and c) believed to come from some source other than your own mind—could net you a diagnosis of mental illness.



Interview with an Ex-hypnotist

As I browsed The Crossroads Bookstore of the Palouse Mall, looking for hypnosis books, a pleasant-looking man with short brown hair and glasses asked, “May I help you find something?”

“Do you have any books about unethical hypnosis?”

He thumbed through a catalog, then said, “No, there’s nothing listed. May I ask why you’re interested in that subject?”

“I’m researching the subject, writing a book.”

“I could tell you a few things about unethical hypnosis,” he said with sudden vehemence. “I used to be a hypnotist. And then my life changed and I gave it up.”

“Would you give me an interview?” I asked.

“I’m alone in the store today and busy. Come back tomorrow at lunchtime. My name is Keith Moen.”

I was back at noon the next day. Keith said, “My first experience with hypnosis was in a parlor trick at a party. I let a young man who had been dabbling in it hypnotize me. Then he told me I was in the desert, hadn’t had any water for days, and that I was extremely thirsty. He said I was in desperate need of water. Then they handed me a glass of water. He said, ‘Finally, at last, you have your water.’ He told me it would just taste wonderful, refreshing and sweet and good. ‘Now drink it.’ I drank it right down, all the way down. Then they woke me up. They had stirred several tablespoonfuls of pure citric acid into that water. I drank ‘lemonade’ for weeks after that. Every time I’d take a drink of water, or milk, or anything, I’d taste that citric taste.”

Keith continued, “So then I became an amateur hypnotist and I went around hypnotizing people. That’s a very, very dangerous thing to do. I was totally untrained, had no idea what the consequences of my actions were. I saw pretty amazing things playing around with it. I hypnotized my first wife a number of times—got to the point where all I’d have to do is give her a pre-suggested cue and she would go into a deep state. I experimented on her, took her back to her childhood and back into the womb. She was a student nurse going to school in Costa Mesa, California. She was having trouble with a pharmacology class. Through a series of hypnotic suggestions I told her she would retain all of the knowledge that she looked at, heard, or studied in this pharmacology course, that she would remember it and would do very well on the test. She’s the only person in the history of Costa Mesa College that got a hundred percent on the pharmacology test. But a few years later I realized I was playing with dynamite and stopped doing it entirely.”

Keith paused to think a moment, then continued, “You know, I’ve heard people over the years say you won’t do anything under hypnosis that you wouldn’t normally do, that you wouldn’t do anything immoral or illegal.

That’s simply not true. I’ve talked with others about it who agree with me. I’ve counseled people who have been hypnotized. I’ve been involved in it myself and I have seen people do things they would normally not do. Under hypnotic suggestion you can make them do it.”

Positive Hallucination

There are two types of hallucination: positive and negative. If a person hallucinates what does not exist (either at the time of the suggestion or after a posthypnotic cue), that is a **positive hallucination**. He perceives something that does not exist, because its existence has been suggested to him.

Negative Hallucination

If a person hallucinates the absence of something that is really there, it's called a **negative hallucination**. Negative hallucination may affect any sense. Suggested blindness, or blindness in one eye, or deafness, or inability to see a person who is actually present in the room, are all negative hallucinations.

The subject's every act and word seem to indicate that with the consciousness he possesses he does not see Mr X. Subjective reports of individuals with such a negative hallucination indicate they experience either the presence in the room of something "peculiar" with a "not to be inquired into" aspect, or the existence of a white space for Mr X.

(Marcuse, *Hypnosis: Fact and Fiction*, p. 73)

Being told you are not depressed, or do not crave cigarettes, or ice cream, is a type of negative hallucination. It is a blocking from awareness. Negative hallucination is

considered one of the most difficult hypnotic challenges. In order for a negative hallucination to be accepted, the subject *must* be in a very deep trance.

Negative hallucination (or any other hypnotic phenomenon) can occur spontaneously. In 1947, L. R. Wolberg, while experimenting with antisocial hypnosis, suggested to a series of hypnotized subjects that they do a plainly unethical act:

"When you awaken you will find next to you a bar of chocolate. You will have a desire to eat the chocolate that will be so intense that it will be impossible to resist the craving. At the same time you will feel that the chocolate does not belong to you and to eat it would be very wrong and very bad. You will have no memory of these suggestions..." **(Wolberg, "Hypnotic Experiments in Psychosomatic Medicine")**

One subject ate the candy, but then got indigestion. Another ate three quarters of it, complained that it tasted bitter, felt nausea and stomach pain, and then vomited. A third could not see the chocolate. His unconscious resolved the suggested moral conflict by creating a spontaneous negative hallucination erasing the chocolate bar from his vision. Wolberg picked up the candy bar and held it out to him. The subject did not see it. Wolberg threw it noisily on the table in front of the subject. He still did not see it.

6. Anesthesia

It is not true, as many claim, that the subject's body can be made to resist the destruction of heat, cold, blows, injuries, etc., while under hypnotic influence. He can be rendered insensible to the impressions produced by these things, but he cannot be rendered proof against their actual effects. It is cruelty to command a subject to pick up a live coal. He may do it without suffering at the time, if the suggestion is given that it will not burn, but the coal will nevertheless burn his flesh...the ammonia would injure the throat and stomach...even though he experienced under suggestion, a pleasurable sensation while swallowing it.

- Cook, 1927, pp. 70-73

Pain can be blocked by suggestion. Hypnosis enables people to endure more pain than otherwise would be possible. The deeper the trance, the more pain can be endured. Because hypnotic anesthesia is of psychological origin, numbing patterns induced by suggestion are what the subject thinks they should be, rather than correct nerve anatomy. **Analgesia** is the lightest stage of hypnotic anesthesia. There is no startle reaction, no facial flinch or grimace at the pinprick or pinch.

Surgery under hypnosis would have become common if chemical anesthesia had not appeared shortly after **hypnotic anesthesia** was developed by Dr. James Esdaile, a Scottish surgeon. Around 1852, Esdaile did thousands of operations, including hundreds of major surgeries, in the government hospitals of Hooghly and Calcutta, India. Before Esdaile, surgery was gruesomely painful and the death rate from the operation itself was fifty percent, usually from shock. But ninety-five percent of Esdaile's patients survived



their surgery—even limb and breast amputations and the cutting out of enormous scrotal tumors. His subjects felt no pain during the operation because they were all in the deepest level of trance.

Hypnotic training for dentists began after World War II. Since then, much dental work has been done under suggested anesthesia with posthypnotic suggestions to limit bleeding. Hypnodentists have done “every possible type of dental operation...preparation of deep cavities and filling of teeth, extractions, removal of impacted teeth,” root canals, and gum surgery. “Bleeding and salivation were controlled...there was no pain or discomfort either during or after.” (Burgess, p. 323) Persons I have known, whose dental work was done under hypnosis, were pleased with how well suggestion overcame fear, pain, and bleeding.

Esdaille pioneered the practice of surgery under deeper hypnotic anesthesia. Since then, C-sections, etc., have been done under deep hypnosis—even a thyroidectomy. Babies are often delivered using it. (All “childbirth classes” are trance training with the coach as hypnotist.) It usually takes time to train a hypnotic subject to achieve the depth of trance where deep anesthesia is possible. But, once that depth is achieved, a dental hypnotist wrote, “it can be obtained immediately for an indefinite number of years. The writer has tested this with two subjects, one for 20 and another for 21 years.” (Burgess p. 344)



Hypnotic anesthesia works both for imaginary (psychosomatic) and real pain. Do not use trance suggestion to relieve pain until a doctor has examined the patient to find out what is causing it. If a hypnotist masks the pain by hypnotic suggestion, without learning its cause, the result could be a ruptured appendix, or worse.

Anesthesia Reveals Trance Depth

Surgery cannot be performed on somebody who is faking hypnosis! Suggested anesthesia, therefore, is a test for trance.

...the operator will proceed to introduce the more involved tests—for instance, suggestions of tingling and numbing sensations of one extremity, followed by a pinching, searing, or puncturing of the flesh to demonstrate that anesthesia has been effected. (Moss, pp. 3-4)

Anesthesia in Stage Demonstrations

Like other hypnotic phenomena, suggested anesthesia has been abused. A hypnotist advised: “The excuse, ‘It was just an experiment,’ is never justification for injury.” (Gindes, p. 95) For example, it was common practice in old-time hypnotic exhibitions to demonstrate suggested anesthesia by sewing

...the lips together by needle and thread, or by passing hat pins through the cheeks. In some instances the tongues of several persons have been sewed together... (Cook, pp. 189-190)

Cook also mentioned a stage show in which

The tongue was protruded and perforated directly in the center by a very large needle. Not the least tremor was noticeable and no blood flowed.

He urged hypnotists, before “inserting needles or other instruments into hypnotized persons,” to immerse them in “some good aseptic fluid.”



IF A SUBJECT’S OBEDIENCE TO A SUGGESTION WOULD HARM OR INJURE HIM IN THE WAKING STATE, IT WILL HAVE THE SAME EFFECT IN THE HYPNOTIC STATE.

7. Posthypnotic Suggestion

The patient hears what I tell him in his sleep, but no memory of what I said remains. He no longer knows that I spoke to him. The idea suggested arises in his mind when he wakes, but he has forgotten its origin and believes it is spontaneous.

- Bernheim

A **posthypnotic suggestion** is made under hypnosis, but is carried out during a later waking state. The hypnotized person is instructed to perform a certain behavior at some time after the trance is over. The subject temporarily returns to trance during the time he enacts the posthypnotic suggestion.

Posthypnotic Action Revives Trance

Posthypnotic programming arises, when cued, from the unconscious. It overrides, and temporarily shoves aside, the subject's conscious mind. While doing posthypnotic behavior, the subject is in trance again. The posthypnotic act is enacted in a momentary **renewal of the hypnotic condition** in which it was originally suggested. The subject has normal consciousness before, and after, the posthypnotic act, but he carries it out in trance. Posthypnotic behavior is

*...a resurgence of a self-limited hypnosis...This may be shown by interfering with the performing of the posthypnotic act and finding the subject in a state typical of hypnosis. (M. H. Erickson, quoted in Marcuse, *Hypnosis*, p. 75)*

The posthypnotic act may take place despite objections from the conscious mind:

...it is not an integrated part of the behavior of the total situation in which it occurs, but is actually disruptive of the conscious stream of activity, with which it may be entirely at variance. (Erickson & Erickson, "Concerning the Nature and Character of Post-Hypnotic Behavior")

If the posthypnotic suggestion also directs the subject to act "wide awake and normal" while obeying the posthypnotic directive, the trance condition can be concealed from untrained observers. A person carrying out a posthypnotic act may act:

- Like a sleepwalker, with amnesia afterward;
- In trance, but with no amnesia after the act;
- In an apparently normal mental state, with no amnesia, but obeying the hypnotic suggestion.

Which type of behavior manifests depends on the subject and on the specific posthypnotic suggestions. For example, a hypnotist who volunteered for another hypnotist's demonstration, was given a posthypnotic suggestion (plus amnesia). When the hypnotist blew his nose, the subject was to change chairs. Ten minutes after the subject was awakened from trance, the hypnotist blew his nose.

*...the subject became vaguely uneasy and finally said, "Look here, I feel a definite compulsion to go over to that chair. I bet you have given me a posthypnotic suggestion. Well, I'm darned if I will go all the same." After this, he took part in the discussion for a few more minutes and then finally, and quite suddenly, got up, crossed the room and sat down in the other chair. (Eysenck, *Uses and Abuses of Psychology*, pp. 216-217)*

The subject was aware of his situation, and in apparent waking consciousness (except perhaps for the moment in which he suddenly got up, crossed the room and sat down in the other chair). He had no amnesia afterward, but he had obeyed.

Posthypnotic Suggestion Lasts

George Estabrooks conditioned an unknowing subject for his own fun during World War I and gave him a posthypnotic suggestion. If Estabrooks said, "Watch the front," the subject was to stand up and shout, "Call out the guard. Here comes Paul Revere."

Twenty years later, Estabrooks happened to meet that fellow again. As they stood and talked, the hypnotist suddenly spoke the cue, "Watch the front." His subject "looked puzzled," but gave the proper response: "Call out the guard. Here comes Paul Revere." "Then he looked even more puzzled and added: 'I wonder why I said that.'" (Estabrooks, *Hypnosis*, p. 89) Both the programming and the subject's amnesia regarding his hypnotic usage by Estabrooks had lasted twenty years. But, now, he was sophisticated enough to ask himself why he had done that strange behavior!

The unconscious is also capable of fantastically accurate counting and time measurement without using any



watch or clock. An act can be suggested to be performed any number of time units in the future and it is likely to be done at, or very near, the designated time.

Unremoved Suggestions Remain Active Posthypnotically

Suggestions should be removed before the end of a trance unless they are designed for long-term operation. Estabrooks told of a person who went to a therapist complaining of feeling followed by a dog. The symptom had appeared suddenly and there were no others. The subject knew the dog that he thought was following him was imaginary but he could not stop his imagination from working.

In rehypnotization, the doctor learned that this subject had an unfortunate habit of volunteering for stage demonstrations of hypnosis. A hypnotist had said, “You’re getting chased around the stage by a mean dog.” The subject ran frantically around the stage hallucinating the fierce dog in close pursuit. It made the audience laugh. The hypnotist did not remove that suggestion. It is easier to acquire a problem by hypnosis than it is to get rid of it in subsequent hypnoses. It took the doctor several sessions to fully erase that mean dog from the subject’s unconscious.

There was a similar case in England.

While participating in a stage demonstration, a subject was told, upon hearing a certain song, he instantly would fall asleep. The hypnotist then awoke the subject and he returned to his seat in the audience. Later in the show, the hypnotist told the orchestra to play that certain song. The subject instantly fell asleep. When the band stopped playing the song, he woke up again. The hypnotist let him go home without canceling the suggestion.



Two nights later, the subject was out driving with his girlfriend. The car radio was playing, and that song came on. His eyes closed. His body slumped onto the wheel, asleep. She grabbed the wheel, managed to wrestle the car to the side of the road, and stopped. When the tune was done playing, he yawned and woke, amnesic for the entire sleeping episode. He did not know why the car was at the side of the road.

His girlfriend contacted the stage hypnotist. He rehypnotized the subject and removed that dangerous posthypnotic suggestion.

Another stage hypnotist told a subject, “Move back where you came from.” He meant that the subject was to step back into the group line. The subject did not obey, although the hypnotist repeated the command several times. Not long after, however, the subject quit his job, put his house up for sale, and moved a thousand miles—back to where he came from. The hypnotist had not intended those words to be a posthypnotic suggestion, but the literal unconscious of that particular subject took it that way. (Perhaps it was expressing an unconscious longing.)

A college student, playing around with hypnosis, hypnotized his friend and told the subject that he had drowned. After he ended the trance, his subject still did not breathe normally. He was gasping for air. The student hypnotist didn’t know what to do. He located his psychology professor, an expert hypnotist, and asked for help. The professor (Marcuse) rehypnotized the student and suggested he’d actually swum to shore and survived the danger. The subject breathed normally again.

A psychology student was showing off his hypnosis skills at a party. A girl asked him to take away her fear of water so that she could swim. He induced deep trance, then gave her suggestions.

Early the next morning, the girl got up before anybody else. In a state of posthypnotic suggestion, confident that she could now swim, she eagerly plunged into the lake. “Her bloated body was recovered from the water a few hours later.” (Gindes, p. 94)

An acquaintance told me about a high school friend of his who hypnotized classmates: “But when he realized he was changing them for life, he got scared and quit.” Another told me of a high school pal who had hypnotized a young man and told him that he was afraid of ants. The subject acquired a severe ant phobia. The amateur hypnotist and friends got their yuks. Then the young hypnotist was ready to rehypnotize and remove the ant phobia. His subject refused. He chose to keep the phobia rather than risk new conditioning.

The Possible Variety of Posthypnotic Acts

Any act that can be elicited under hypnosis also can be enacted as a posthypnotic suggestion. The possible purpose and content of posthypnotic events is as infinite as human ingenuity, as varied as human circumstance. Whatever behavior is wanted can be ordered up by cue: changed memory of past events, a new memory of an imaginary event, hallucinations (positive or negative), or any other future action. Performance can be cued to happen at any time in the future, even years later. Sometimes such suggestions take, and sometimes they do not. When they do, the results can be astonishing.

A hypnotist gave a posthypnotic suggestion to a woman that on a certain day, at a certain time, on a street in L.A., she would meet her (dead) brother. She later wrote:

“I was so happy to see him, but I was astonished because I knew he was dead. However, in a way, his presence seemed perfectly natural at the time. He accompanied me to my apartment, and there we talked about different things....Soon he rose from his chair with the excuse that he had to keep an appointment, and left. I did not become fully aware of the impossibility of the situation until after he was gone, and then I felt dazed. This feeling of bewilderment stayed with me until it was explained that my illusion was part of an hypnotic experiment.” (quoted in Gindes, p. 40)

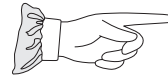
Rationalization

Rationalization (making up a fake reason) is a major **defense mechanism**. When we do things for reasons of which we are not consciously aware, we rationalize. The obedient enactment of posthypnotic suggestion likewise gets excused by fake explanations provided by the unconscious to the conscious. A subject who does not remember being given a posthypnotic suggestion will always invent an imaginary reason for obeying.

His rationalization will be as plausible as possible. He will consciously believe it even though it is a lie he has told himself. Posthypnotic suggestions can be beneficial or harmful. If asked later why he did this particular thing, he will

...rationalize his conduct by some kind of semi-reasonable explanation...To anyone acquainted with the real motive, namely, the posthypnotic suggestion, these pseudo-motives are very interesting because they are so similar to the pseudo-motives often given by people to justify actions, the real reasons for which are unconscious to themselves or, if conscious, dishonorable. (Estabrooks, *Scientific American*, p. 216)

If a hypnotic subject is not consciously aware of an implanted posthypnotic suggestion because of suggested amnesia, then he does not know the real reason he did the posthypnotic act. In that situation, he will make up some excuse for what he did, as plausible as possible. He will honestly believe the rationalization. He has lied to himself, and perhaps also to others, and believed his lie.



After obeying an amnesic posthypnotic suggestion, people do not say, “I don’t know why I did that” (which is their conscious mind’s truth). They do not say, “The hypnotist made me do it” (which is their unconsciously known truth). Instead, if you ask, “Why did you do that?” they will make up an excuse which is as believable as possible—and they will honestly believe whatever they said!

A prominent experimental hypnotist gave a young woman a posthypnotic suggestion to take off one shoe after she awakened from his hypnosis demonstration. She was to set it on the table before her. He then suggested amnesia and awakened her:

...she fidgeted for a few moments, then slipped off one of her shoes with the other foot, reached down, lifted it, and placed it on the table in front of her. Then she reached over and took the flowers from a vase on the table and placed them in her shoe. (LeCron, *The Complete Guide to Hypnosis*, p. 18)

When the hypnotist asked why she had put flowers in her shoe, the subject rationalized: “I have a vase at home that looks something like a shoe. I wondered what kind of flower arrangement I could use with it.” (*Ibid.*)

The specific nature of the subject’s rationalization for performance of a posthypnotic act may itself be suggested. For example, a military hypnotist told two hypnotized soldiers that:

“At precisely eleven o’clock you will come again



to this room. You will sit down and suddenly you'll have a terrible itch on the soles of both feet. You will take off your shoes and your socks because you just have to scratch that itch." (Lovell, *Of Spies and Stratagems*, p. 90)

The hypnotic subjects reappeared at the appointed hour. They removed their shoes and socks and scratched their feet.

A military officer present, Colonel Buxton, remonstrated, "Here, here...don't you see there's a General here? What's the matter with your feet?" "Gotta scratch 'em--itch like hell," a soldier explained. (Ibid.)

The Cue

The designated condition that triggers the posthypnotic act is the **cue**. A posthypnotic suggestion is always triggered by perception. You see, hear, feel, touch, or smell the preset cue—and that triggers the expression of the associated posthypnotic suggestion. That cue was stated by the hypnotist during a previous hypnotic trance. Perceiving the cue triggers automatic performance of whatever behavior was instructed. The most important single category of posthypnotic cues is **induction cues**.

Induction Cues—Most people have established lifestyle cues to enter a more relaxed state of mind. These consciousness-lowering cues are embedded in familiar ritual or other circumstances associated with previous trance experiences. They probably are not consciously recognized as induction cues. Whatever that something is, it is precious to you. The opening bars of the theme song of a TV addict's favorite show cues the deep sigh that signals lowering consciousness. Other cues may be routines, rites, familiar words, familiar sights, familiar sounds, familiar thoughts, or ideas to which you respond strongly, and at a deep level.

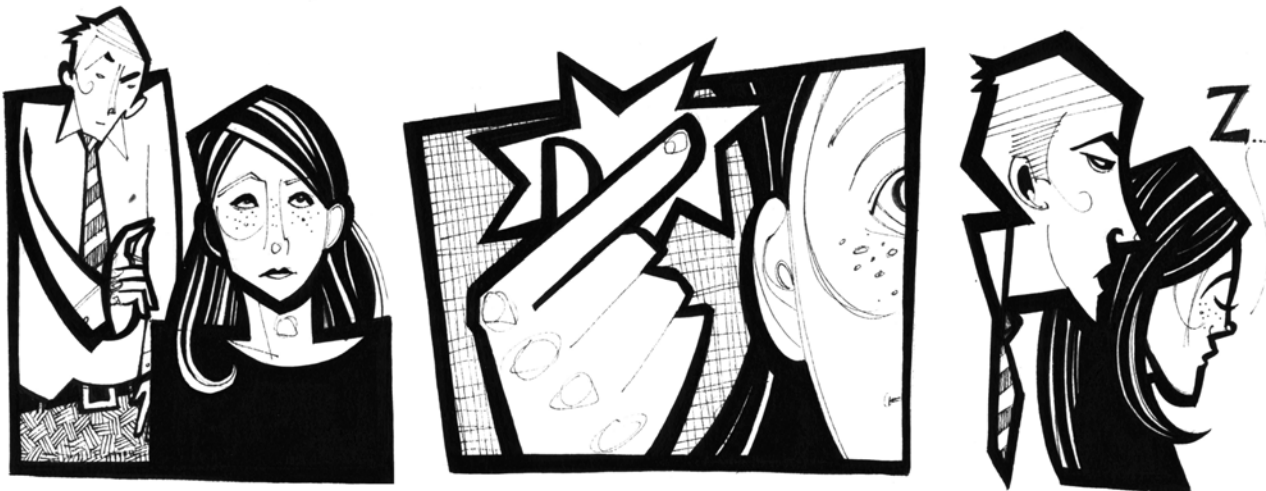
In 19th century Europe, before the process of cued induction was clearly understood, operators accidentally conditioned subjects to a cue, and thereafter assumed it was *the* magic doorway to lowered consciousness. For example, Dr. Tourette's hypnotic subjects were all expected to drop into cataleptic trance whenever someone came up from behind and made a loud noise—and they did:

...we beat the gong. She immediately went into a cataleptic trance...this strange result of loud and unexpected noise has been the cause of more than one peculiar incident. On a Corpus Christi Day, several hysterics following the procession became cataleptic because of the military band...On another occasion, one became cataleptic at the barking of a dog. Another one went to a concert at Chatelet on her day off; she became a cataleptic three times during the concert.

An induction cue must be perceived: tasted, smelled, heard, seen, or felt. Anything that can be perceived can be an induction cue. The cue can be given in person, or over the phone, or in a letter. Induction cues are usually for a one-step descent into deep hypnosis, but they can be qualified to limit descent, as in **depth-limited trance** for any competing operators. Most induction cues have **multiple defining elements**. "When I snap my fingers and say, 'deep asleep,' you will fall instantly into a deep hypnotic sleep" is a posthypnotic reinduction cue with three defining elements. They must all occur for induction to be triggered:

- 1) The present operator, "I," must be the one giving the posthypnotic cues.
- 2) A finger snap must be perceived by the subject.
- 3) "Deep asleep" must be spoken by the present operator.

That compound induction cue prevents



rehypnosis by an accidental snap of the fingers, or an accidental hearing of the words “deep asleep,” or a casual encounter with the operator.

*...many magnetizers impressed upon their patients' minds that no one else would ever be able to magnetize them. (Ellenberger, **The Discovery of the Unconscious**, p. 154)*

A suggestion that specifies the induction cue and a following descent into deep trance sets up a subject for automatistic (unconscious, compelled) descent into trance:

*...by means of posthypnotic suggestion, a person may be put into the hypnotic state against his desires if he is a somnambulist. (Heron, “**Hypnosis as a Factor in the Production and Detection of Crime**,” 1952, p. 27)*

Sealing

If a hypnotist gives his subject a posthypnotic suggestion that no other person can induce hypnosis in him, then that subject becomes unavailable to other operators. An abusive hypnotist is likely to do this to escape detection.¹

Sealing goes back at least to the 1700s (and perhaps even farther):

*Prior to Mesmer's time, since the public knew nothing of hypnosis, there was no reason to attempt to “seal off” good subjects from potential lay operators. (Teitelbaum, **Hypnosis Induction Technics**, pp. 104-105)*

After Mesmer popularized hypnosis, however, operators looked for ways to keep other operators from using their subjects:

A Peculiar Incident

I took a course on hypnotherapy while researching this book. An assistant instructor taught the class every Thursday evening. He was a short grey-haired gentleman who, for decades, had been a professional hypnotherapist with many clients. The night he first saw me in the classroom, he stared hard at my face for a moment, as if he thought he knew me. I wondered if perhaps I resembled a client he had worked with years ago, but I made no comment.

In the usual class routine, the professor's lecture was followed by a long video demonstrating some hypnotherapy technique. The assistant lectured, then dimmed the lights, and began showing the video. I happened to be sitting at the end of a row. In the semidarkness, he walked over and stood beside me. In one swift motion, he pressed his right index finger on the center of my forehead.

Startled, I turned my head and stared at him, wide-eyed. He did not speak a word of apology or explanation. He did not even acknowledge doing something unusual. He just stepped back and walked away from me. I did not question him. I did think to myself with a silent chuckle, “So that's how he greets old clients, by throwing them into trance with that posthypnotic reinduction cue.” After I thought about it some more, however, his ethics did not seem so amusing.

He had not said to me, “I think you've been my client before. May I have permission to hypnotize you again?” He did not say, “I'm going to hypnotize you.” No. This professional hypnotist, who obviously thought I was already a conditioned subject of his, chose to make re-acquaintance with me in the most dehumanizing way. He attempted to bypass my conscious mind entirely by triggering an old induction cue. His touch to my forehead revealed a further assumption on his part: that I was amnesic for all his past contact with me. If I had been a previous hypnotic subject of his, that touch would have worked—unless some other hypnotist had sealed me in the meantime.

A few weeks later, he told our class that his usual posthypnotic cue for reinduction was a finger touch to the forehead of the subject.

To accomplish the sealing, the hypnotist gives instructions to the subject such as:

*...no person other than myself...ever will be able to hypnotize you again. The suggestions I am about to give you will become deeply implanted in your subconscious mind, but you will not consciously remember them after you awaken from this trance state. You will not remember that I hypnotized you and will not remember that you have ever been hypnotized before in your life. In addition, if any...person ever tries to hypnotize you, you will tell him that you have never been hypnotized before, that you cannot be hypnotized and that you don't want to be hypnotized. (Teitelbaum, **Hypnotic Induction Technics**, p. 105)*

Raymond Wells researched techniques for unethical hypnosis during and after World War II:

One hypnotizer might very well be able to produce effects in subjects which nullify the later work of another hypnotizer, in part or even in toto. The implantation during the hypnotic trance of a subconscious inhibition which operates post-hypnotically to protect the S from

1. Sealing is not absolute. A determined subject, with the help of a determined hypnotist, can get past sealing instructions.



being hypnotized at all by other hypnotizers is a familiar case in point...rendering the S helpless to become a S thereafter at the hands of other hypnotizers, however much he may desire and strive.... (Wells, “**Ability to Resist Artificially Induced Dissociation**”)

Estabrooks promoted government creation of sealed, unknowing clandestine agents. Because conditioning made the subject highly susceptible to hypnosis by anybody,

... we plug this gap again by suggestion in the somnambulistic state. We assure the subject that in the future no one will be able to hypnotize him except with the special consent of the operator. (Estabrooks, **Hypnotism**, pp. 196-197)

Estabrooks told about a visiting hypnotist who was invited to test the seal of an unknowing subject. The subject insisted to the guest that he had never been hypnotized and could not be hypnotized. The guest asked permission to try anyway. The subject said he could but that it would be useless:

So the visitor, a good hypnotist, tries, but at every test the subject simply opens his eyes with a bored grin. Finally he gives up the attempt and everyone is seated as before. Then the original operator taps on the table with his pencil. Immediately the subject is in deep hypnosis. (*Ibid.*)

The sealing may or may not be concealed from the subject’s conscious awareness by suggested amnesia, but usually it is. Suggestions hidden by amnesia have dominance. Amnesia also prevents ill-advised communication to a new hypnotist, who might take news of sealing as a challenge. If the subject is amnesic, another hypnotist

...might never know that the seal has been placed, and might deem a person not susceptible to his induction technics and as just one of the small class of people who cannot be hypnotized. (Teitelbaum, **Hypnosis Induction Technics**, p. 106)

Protective Sealing—Sometimes an operator seals a trained (and, therefore, extra vulnerable) subject in order to protect him from future hypnotic exploitation. Wells gave all his hypnotic subjects this type of sealing.

...there will be created a subconscious inhibition which will prevent anyone, including myself, from hypnotizing you at any time unless of your own

free will you give your consent in writing. If for any worthwhile reason in the future...you should wish or be willing to be a subject, then if you will write, “I am willing to be hypnotized today by Mr. -- and if you then date the statement and sign your name, you can quickly and easily be hypnotized by any of the usual methods, in just a few seconds. There will be no hypnotic compulsion carrying over from this present hypnotic state which will in any way prevent you from deciding wholly for yourself in the future whether or not it is wise for you to sign a statement of willingness. You will have to sign the statement of your own free will or else it will not be efficacious. (Wells, “**Experiments in the Hypnotic Production of Crime**,” p. 70)

When Wells conducted experiments on the **reinduction of an unwilling subject**, however, he used a different contract. It said that “no one else” could ever hypnotize them against their will. Wells said that a somnambulist subject with amnesia will obey the sealing rules from then on.

Simeon Edmunds also suggested protective sealing. He said that a person who is worried about his trance susceptibility should ask a trusted friend, who knows hypnosis, to hypnotize and then seal him: “This suggestion, it appears, fulfils itself like the rest, and the bane works its own antidote without further trouble.” (Edmunds, p. 142) By the way, Edmunds also hoped to

...assist in dispelling the widely held and highly dangerous misbelief that no person can be hypnotized against his will. (**Hypnotism and Psychic Phenomena**, p. 35)

Another hypnotist suggested giving each patient the option of being sealed with

...suggestions which will serve as a protection from the experimental amateur or vaudeville hypnotist...”In future no one will be able to hypnotize you except a dentist, a physician, or some other qualified person such as a psychologist; unless you expressly desire to be hypnotized, no one can hypnotize you. (Moss, p. 315)

In a context of narcohypnotic and electronic inductions, however, when some of the bad guys have the highest credentials and the best technology, mere verbal sealing is not the protection it once was.

NORMAL LONG-TERM MEMORY

Its very porousness, its open-endedness and ongoingness, its ability to bond deeply across remotenesses of time and space, its own virtual dimension--all of these help to make memory a powerful participatory force...Just as everything participates in memory, so memory participates in everything: every last thing. In so doing, it draws the world together, re-remembering it and endowing it with a connectiveness and a significance...

- Casey, *Remembering*, pp. 312-313

The last three important hypnotic phenomena—amnesia, regression, and confabulation—all affect memory. To fully understand how suggestion can affect memory, first consider how normal memory operates.

Stages of Remembering

Researchers have worked hard to unravel the neural mechanisms of memory: how it is established, how maintained, how recalled. There are three distinct stages in the establishment of a memory.

- 1) You **observe** something via one of your senses.
- 2) If it catches your interest, you hold it in **short-term memory (STM)** for a moment. This is active, conscious memory, limited in capacity to about a maximum of seven items. You are using STM when you lookup, and then repeat, a phone number until you can finish dialing it. Data in STM decays within twenty seconds, unless it moves into long-term memory.
- 3) Thinking about it more, or with more intensity, moves the item into your **long-term memory (LTM)**. The new memory generally enters LTM by associating with relevant information which you already have. When an item shifts from your temporary memory (STM) to your permanent memory (LTM), the process is called **consolidation**. There seems to be no limit to the information we can absorb. The process of remembering is always going on.

Independent, Parallel Memory Systems

Your brain has independent, and very different, parallel memory systems: **visual (symbolic)**, **verbal**, and **muscle memory**. These “multiple forms of memory...are mediated by processes that can function independently of one another.” (Schacter, p. 352) Each memory system has its own unique encoding system. The same memory may be encoded in different ways and stored in different parts of your brain.

What you experience as muscle sensation can be recalled as muscle memory. Muscle (body) memory is based in the **neuromuscular pattern generators**. Muscle memory manages my fingers at this keyboard as I write. The symbolic (visualized) memory system is based in your right brain. **Symbolic memory** is important because it is truthful and less subject to repression than verbal memory. **Verbal memory** is based in your left brain and is valuable for its riches of association. Emotion is also encoded in memory. To completely recall a memory, your brain must retrieve and reassemble three components: the visual images, the sound/words from the scene, and the associated emotion.

Neural Patterns of Lowered Resistance

Memory is a pattern of lowered resistance across a multitude of neural synapses, a storage system for data established in patterns of reduced electrical resistance. The activity which created it is over. The memory remains as a potential electronic pathway because of the lowered resistance. Habit and memory are identical in this way. Behavior becomes conditioned habit because movement of electrons in their semiconducting lattices “permanently changes the materials’ characteristics so as to make the same electrical responses easier in the future.” (Becker, *The Body Electric*, p. 257) The connections (**synapses**) are vital. Weakened connections result in an irretrievable memory. Strong connections cause a powerful memory that is easily remembered.

In a computer’s memory, a single word is stored in a particular place. If erased, it is gone forever, leaving other data unaltered. Human memory is different. In the brain the rule is not one neuron, one memory. Instead, any single memory is spread out in “a vast neuronal net.” (Ibid., p. 48) The death of one neuron does not cause the loss of any single item of memory, because data is stored across a series of neurons. The death of a brain cell just causes a little static in the system.

Each memory input alters an entire matrix of neurons. The data storage is **dynamic** (active) rather than static (fixed). It is ever shifting as new data comes in and affects the old. Imagine ripples of water on the surface of a pond



into which a stone has been thrown--and then another, and another. Each stone creates waves. One ripple-wave pushes the next ripple-wave and the next pushes the next, and so on. Or, imagine a new chicken climbing onto the roost to sleep. All the others are awakened for a moment, are jostled, and have to shift a little to accommodate the newcomer. That is how you add a new piece of information to your brain storage. Each new datum slightly shifts the position of the previous data .



Because memory is spread out over so many neurons, repressing a piece of information by suggested amnesia has a broad impact on the subject's mind. Recovering a memory (or confabulating it) also impacts the entire personality.

Diphasic Act of Remembering

Remembering is a **diphasic** (two-step) mental act. The retrieval process begins with an **intention** to remember. The intent to retrieve information out of your long-term memory storage may be conscious or unconscious. Intent is the “go-to” cue. There must also be a “place” cue to specify what “object” to remember. Remembering starts with the intent and ends with the content. Remembering involves both how we remember, and what we remember, but the two aspects are simultaneous rather than consecutive. Then you are back there: reliving the taste of Mom’s best cooking one family feast day, so many years ago.

Retrieval—Retrieval is an act of willed remembering. Intent to remember sends current into the neurons of the cerebral cortex. Those electric pulses sent from the location of intent-to-remember stimulate the electronic matrix that contains the memory.

Sometimes, you want to remember, but you cannot. Certain things make it difficult to retrieve a memory. After consolidation, the memory stays in your permanent storage. It is there, but you may have difficulty retrieving it to consciousness.¹

Failure to retrieve a memory may be caused by **resistance**, a **blocking** of the retrieval impulse. The system then fails to channel electric signals into the appropriate synapse network, or the wanted memory does not get retrieved because of a breakdown at some other point in the process. The blocking may be caused by a natural failure (such as Alzheimer’s disease), a self-imposed one (such as a traumatic amnesia), or a suggested one (such as hypnotic amnesia).

Memories Are Associated and Can Be

Cued—A computer does not make **associations** unless programmed to do so in a search (or unless it is a biocomputer using a neural net). In the living brain, however, similar data are grouped in storage. They associate by neural link-ups and can affect each other’s encoding and retrieval. We have “a highly efficient filing system in the brain, which allows related experiences to be classed together and then cross-indexed.” (Maya Pines, 1973, p. 166). The more associations (**index words**) we have for a piece of information in our memory, the more easily we can remember it.

...neurons responding to a certain face might be connected to ones expressing the name of the person whose face it is and to others for her voice, memories involving her and so on...Meaning derives from the linkages among these representations with others spread throughout the cortical system in a vast associational network, similar to a dictionary or a relational database. The more diverse these connections, the richer the meaning. (Crick & Koch, Scientific American, Dec. 1995, p. 85)

You remember either by **recall** or **recognition**. Recall is when you intend to remember it and then do so, a simple act of memory retrieval. Recognition is when you pick it out of a lineup. It’s the difference between an essay test and a multiple choice test. It’s the difference between drawing a picture of the holdup man and picking him out of a lineup.

We retrieve (recall) information that is catalogued in our left brain (verbal) memory by starting with an index word (**cue word**), or other verbal clue. The index word leads through a **chain of associations** to the memory. If you cannot remember a word, odds are good that you could remember what letter it starts with, or how many syllables are in it. That is how your brain files verbal data.

1. A Soviet scientist, I.I. Korotkin, specialized in the physiology of trance. There are numerous translations of articles by him mentioned in the research literature, such as: “On the Physiological Mechanism of Inhibitory Action on Stimuli Inhibited by Hypnotic Suggestions.” If a certain memory circuit is inhibited because of suggested amnesia, you can not recall that memory because the neurons that hold its coding will not accept excitation. They will not perform the retrieval function.

Views on Memory Validity Vary

Researchers on memory hold varying points of view on the nature and validity of memories. One extreme end of the spectrum of memory specialists thinks that memory is, moment by moment, **reconstructed** to suit one's immediate purposes. The other extreme believes that "autobiographical memory is highly factual--almost **photographic**." (Kovnat, pp. 9-13) Kovnat recalled a conversation with William Brewer, a prominent academician:

Barclay and Neisser have taken a relatively strong position that memories are distorted. On the other hand, I came out with a rather large data set that these memories are actually closer to being correct. It looks to me as if there will eventually be some sort of compromise between the idea that these memories are like highly accurate Polaroid snapshots of your life and the idea that memories are so dramatically reworked. It's like fact versus

fiction; the truth may lie somewhere in the middle.

(Ibid.)

Memory can get foggy. I recently discovered that my birthday is January 19, not January 18. On the other hand, I took comfort in noticing that I was only one day off. The Welsh poet, Dylan Thomas, confessed to a similar failing of memory:

One Christmas was so much like another...that I can never remember whether it snowed for six days and six nights when I was twelve or whether it snowed for twelve days and twelve nights when I was six. (Thomas, A Child's Christmas in Wales)

Nevertheless, he was undoubtedly accurate about having once been a child, having celebrated Christmases, and that a prolonged snowstorm occurred one Christmas season in Wales when he was either six or twelve.

8) AMNESIA

Unreasonable commands...have no prospect of being carried out unless there is an amnesia which protects them from the criticism of a clear consciousness....The degree of susceptibility to profound hypnosis customarily increases when the hypnosis is repeated...until finally, after repeated hypnoses, the condition is attained in which the trained medium will carry out even the most idiotic orders.

- Schilder and Kauders, pp. 5-7

Memory is the mental function of storing, organizing, and recovering information. Using memory, we acquire, retain, and access our vast reservoir of personal experience and learned data. Memory can be deeply and tragically affected by suggestion.

...in this war situation...There must be no leakage, no talking outside the classroom. So the operator now removes from the subject all [con-

scious] knowledge that he has ever been hypnotized. This is quite simple, again by the use of suggestion in the trance. We tell the subject in hypnotism that on awakening he will have no remembrance of ever having been hypnotized, that if questioned, he will insist he knows nothing about hypnotism and has never been a subject.

(Estabrooks, p. 196)

Amnesia is loss of ability to retrieve a memory.



The hypnotic suggestion that makes a subject most likely to carry out orders contrary to their self-interest is amnesia. The most important element in a case of abusive hypnosis is amnesia. The biggest roadblock to uncovering a crime of criminal hypnosis is amnesia. Amnesia is, therefore, the central problem of a survivor of abusive hypnosis. It is central to the operator's setup, central to the years of secret life hidden under the consciously known one, central to the struggle to escape and heal.



Memory can never be completely enslaved, however, because the mind is so vast. The potential number of neural hookups is virtually infinite. Memory's truth and freedom find refuge and comeback resources in that infinite matrix. They always have a chance of circumventing repressive blocks and finding another route to consciousness.

Hypnotic Phenomena That Affect Memory

Suggested Amnesia—Suggested amnesia causes the specified memories to be irretrievable from LTM.

Confabulation—Suggestion, overt or covert, or spontaneous self-suggestion causes a person in a state of lowered consciousness (trance) to fabricate a false memory.

Hypermnesia—Suggestion causes previously unobtainable memory to be recovered.

Regression—When suggestion causes memory to be recovered by retrieving and reliving old memories.

A psychology textbook says "...it is normal for the hypnotized subject to recall everything that went on under hypnosis." (Wortman, Loftus, and Marshall, 1981) They cite "Barber, 1975" as source. That statement is only true, however, if the subject is in a light to medium (not somnambulistic) depth, and if that subject's unconscious has not accepted an amnesia suggestion.

Three-hundred years of hypnosis research have established that two types of amnesia are associated with trance experience:



General Categories of Amnesia

Barbizet, a French neuropsychiatrist and expert on memory, divided the amnesias into two basic categories: 1) **physical** (functional) ones, due to injury or disease in the brain tissue, and 2) **affective** ones. Some later researchers have listed three basic types: 1) **normal forgetting**; 2) **functional amnesia**; and 3) **affective amnesia**.

Normal Forgetting—Everybody has occasional natural amnesias. When you cannot remember where you left something, or the last few miles you drove, you are experiencing a natural, passive forgetting.

Functional Amnesia—In functional amnesia, the normal functioning of neurons, for some reason, has been disrupted. Functional amnesia can be caused by a) mechanical interference with the consolidation process, such as by electroshock or concussion or b) gross organic brain damage, as from brain surgery or Alzheimer's.

Affective Amnesia—Affective amnesia is an **active forgetting**. Your unconscious has deliberately reorganized your memories to create an inability to retrieve the target data from your long-term memory. Any amnesia that is not functional is an affective amnesia, so natural forgetting and spontaneous amnesias fit here too. The brain structure is undamaged. The memory is in long-term storage, but the retrieval system won't obey. It will not complete the act of remembering. Therefore, you do not make the effort, or you do not sustain the effort to remember. Affective amnesia can be caused by a natural emotional trauma that causes unconscious repression, or by suggestion.¹

dissociation amnesia and suggested amnesia.

Dissociation Amnesia

Dissociation amnesia is a totally different amnesia from suggested amnesia, though both are associated with hypnosis. It may be present for some (or all) of the trance even if there is no suggested amnesia. In light hypnosis, you usually remember everything. In a deeper stage, you may remember some things, and have dissociation amnesia for others. In the very deepest state, there is the greatest potential of dissociation amnesia.



In dissociation amnesia, you are not told to forget. You just do. It is a spontaneous, natural result of being in a very deep trance. However, the deeper you are, the more responsive you are to suggestion. If told you will remember all that happens, you will do that.

The cause of dissociation amnesia is probably the disconnection of your conscious mind. It tends to take with it the remembering function when it goes off-line.

...hypnotic behavior does not seem to occupy a proper place in the subject's memory. He disclaims recollection of recent and often very complicated actions [done in trance] which in the ordinary way he seems to have every reason to remember. (White in Moss, p. 123)

Puysegur first identified dissociation amnesia in trance subjects. After that, most old-time hypnotists and some modern hypnotists have used the appearance of this spontaneous amnesia as a defining marker for somnambulist depth of trance. All the older analyses of stages of hypnotic depth included dissociation amnesia as part, or all, of the defined crossover to somnambulism.

Spontaneous Amnesias

Spontaneous amnesia is an affective amnesia that arises, not from hypnosis, but from

...an unconscious refusal by the subject to accept

1. Natural dissociation that happens in deep trance gets filed here too, but probably should have a category of its own.



a part of his biography. But these memories, which are inaccessible to the consciousness, are not forgotten but repressed... (Barbizet, p. 135).

Spontaneous amnesia is most likely to happen under conditions of severe emotional stress. During World War II, one study of “shell shock” cases found that 144 out of 1,000 consecutive admissions, or about 15%, involved temporary losses of memory:

Such loss of memory is often a simple inhibitory response of the brain to overwhelming stresses it cannot deal with by any other means. (Sargant, *Battle for the Mind*, p. 57)

A college professor developed a “euphoric state of amnesia,” but it turned out she had repressed a series of very bad recent experiences including “the breakup of her marriage and the sudden death of her mother before her eyes. (Loftus, *Memory*, p. 71) Loftus concluded that “After such an enormously stressful experience, many individuals wish to forget...and often their wish is granted.” (*Ibid.*, p. 73)

Suggested Amnesia

This amnesia is caused by a suggested **repression** of the brain’s normal memory retrieval function. A hypnotist’s suggestion, “You will not remember,” seeks to trigger the same physiological repression of synaptic action as in spontaneous amnesia. Warrington and Weiskrantz (1982) studied hypnotically-suggested amnesia. They learned that the memories repressed by suggested amnesia remain in long-term memory just as in natural repression. The breakdown is, again, like natural repression in the retrieval process. Repressed memories are in long-term storage but no longer can be retrieved because the retrieval function does not work when applied.

Because of the fine precision with which words communicate, suggested amnesia can affect anything in a subject’s memory, and in any way. You can be told to forget only your name. Or only your friend’s name. Or you can be told not to remember anything that ever happened under trance, including its induction and your awakening from it. The will of the hypnotist, inserted at your unconscious level, overrules your conscious effort to remember. The words are stimuli intended to directly and mechanically elicit the wanted responses from an unconscious-- Pavlov’s second signal system.

You may know that you know, but you’re unable to remember. You may remember, but be unable to communicate that remembering. You may have a sense of remembering but feel an active reluctance to complete the act of remembering. Or, you may be consciously unaware there is anything to remember.

Lindner: Now, Harold, I want you just to sleep, sleep deeply, a deep refreshing sleep. When you awaken you will have forgotten all the things you have told me; forgotten everything. You are forgetting now. You have forgotten already. Have you told me anything, Harold?

Harold: ...No--I don't--I forget--I...

Lindner: That’s right. You have forgotten. And when you wake up you will tell me that you have had a good rest, that you are feeling fine for having had a good sleep. You will not recall that you have told me anything at all. Now you will awaken. One--two--three...

Harold: Oh, I must have...I’ve been asleep. I had a good sleep... (Lindner, *Rebel Without a Cause*, p. 245)

A military hypnotist suggested combining dissociation amnesia with suggested amnesia: “Suggestions of amnesia would then simply reinforce this tendency [dissociation amnesia] which already exists in the nature of the process. (Christenson, p. 51)

Fugue

A **fugue** is a spontaneous, complete dissociation. Persons with split personality are in fugue when being an alternate persona. The original personality is amnesic for the fugue period. M.H. Erickson called such a trance an example of posthypnotic behavior which erupts from the unconscious up “into the conscious stream of activity and fails to become an integral part of that activity” (“*Nature of Posthypnotic Behavior*”)—unless the subject later manages, or is enabled, to remember.

Resistance to Remembering

When you are blocked from remembering by an affective amnesia, the problem is called **resistance**. The resistance exists either because of natural or learned scruples or feelings, or because of hypnotic blocks. It's "resistance" when you say, "I don't seem to be able to think of anything." When you try to visualize something, but all you "see" is thick fog, that's resistance visualized.

R. W. White suggested amnesia to a group of hypnotized experimental subjects. After awakening them, he asked what they could remember of the trance. Here are the reasons (rationalizations) those subjects gave for the inner resistance which prevented them from remembering what happened in the trance:

- a) *I feel that if I thought hard enough I could remember, but I just can't get down to business.*
- b) *I haven't any inclination to go back over it.*
- c) *Something is holding back my memory.*
- d) *My mind doesn't want to think.*
- e) *...I get as far as the eye suggestion and then my thoughts go off into something else.*
- f) *I do remember but I can't say, I can't think of the word...(Later) I could remember it without being able to say it....I partly knew and partly didn't. (R. W. White, A Preface to the Theory of Hypnotism)*

The subjects were all trying to say the same thing: their memory of what happened in the trance exists, but the brain's information-retrieval system is not cooperating. They have the information, but their unconscious is refusing to carry out the mental act of retrieving it. Their conscious will cannot overcome their unconscious acceptance of the suggestion not to remember. They cannot make the effort, or cannot maintain the effort. The will of the hypnotist, inserted at their unconscious level, is overruling their own conscious effort to remember. Because the suggestion blocking retrieval is covered by amnesia, their conscious mind is unable to access and change it.

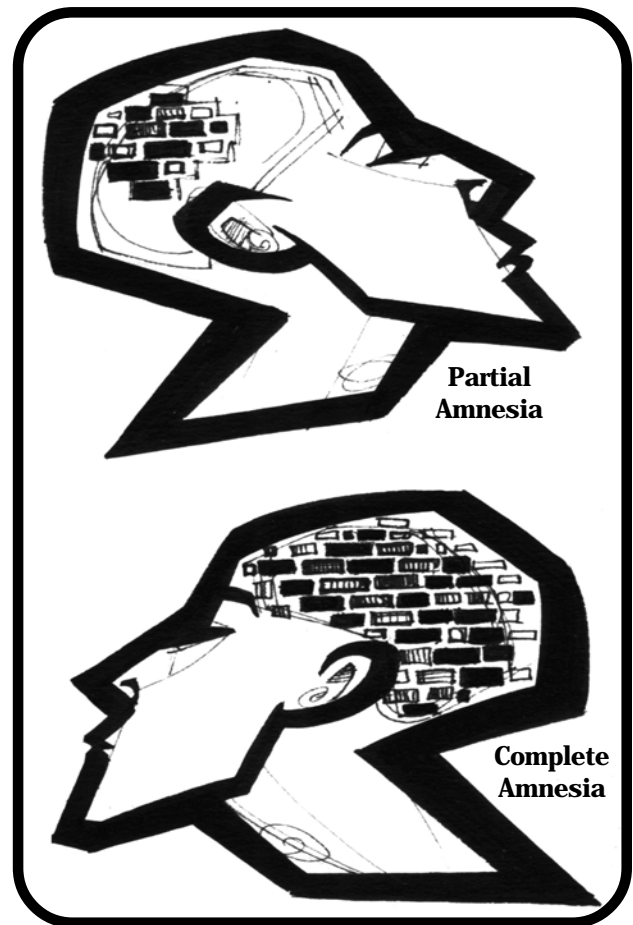
Testing Amnesia

Modern susceptibility scales include suggested amnesia as one measure of depth, or susceptibility. The Barber Suggestibility Scale uses posthypnotic amnesia for one scored test item. In the test for "recall amnesia" in the Standard Hypnotic Susceptibility Scale, Forms A and B (Weitzenhoffer & Hilgard, 1959), the hypnotized person is told:

...you will probably have the impression that you have slept because you will have difficulty in remembering all the things I have told you and all the things that you did or felt. In fact, you will find it to be so much of an effort to recall any of these things that you will have no wish to do so. It will be much easier simply to forget everything until I tell you that you can remember. You will remember nothing of what has happened until I say to you: 'Now you can remember everything!'
You will not remember anything until then.

After testing is finished, the subject is wakened from trance. The tester asks what was remembered starting with the hypnotist's request that he focus his eyes on the "target." Score is based on how many things the subject managed to remember despite the amnesia suggestions. A score of three, or fewer, rates the subject as "passed amnesia." (Afterwards, the tester may give a posthypnotic cue to drop the amnesia wall: "Now you can remember everything!")

In some other susceptibility testing systems, if the subject remembers most, or all, despite the suggestion, it's **no amnesia**. If the subject remembers some, but not all, he shows **partial amnesia**. If the subject remembers nothing at all, there's **complete amnesia**.





Artificial Multiple Personality

It is by remembering that we **integrate** experience. If we can't remember something, we can't integrate it. The experience remains dissociated.

The normal act of recalling memories is a result of the association of ideas. If there is a failure of the power to recall events which normally should be remembered, this is "dissociation"—an interruption or repression of the memory. Amnesia is therefore an essential element...[in the development of a multiple personality] (LeCron & Bordeaux, pp. 143-144

Some experimental hypnotists have called systematic hypnotic training, including suggested amnesia and designated reinduction and exit cues, the **artificial creation of multiple personality**. The subject is given standing instructions not to remember all trance events. He instantly enters deep trance as a result of a posthypnotic induction cue. He leaves it at another cue. Under those conditions, all his trance events will resemble fugue. He is an artificially-created split personality. He has (suggested) chronic, systematic amnesia for a certain system of ideas and events in his life.



If the subject's entry to trance is fast and smooth, and if displacement of the conscious awareness includes instant transition to an amnesic status--then the mental machinery enabling the trance induction has become an unconscious reflex. Consciously willed change of this condition is difficult.

Amnesia Blocks Your Feedback System

—Your conscious mind chooses your goals and attitudes. Your unconscious carries them out. Your conscious mind evaluates any extraordinary results of your behavior. That's the **feedback process**. Based on feedback, you correspondingly adjust the instructions to your unconscious. You use feedback in everyday life to improve your mental programming. If you drive too fast and nearly have an accident at a sharp curve, you will instruct yourself to take that stretch slower the next time. You changed your unconscious behavior as a result of feedback.

Accurate awareness of what you did, and why you did it, and what happened as a result of doing it—feedback—makes you a self-governing person. If you can't remember the event because of natural or suggested amnesia, you have no feedback. You can't correct your programming if you don't know the real reason why you did something. Problem programming rooted in forgotten events is a cause of **neurosis**.

A hypnotist can artificially create neurosis by suggesting mental conflict plus amnesia for the suggested conflict. The setup tends to be permanent and powerful because amnesia removes the mental implants from the subject's conscious awareness. Normal cleanup and adjustment action of the brain's feedback function is blocked. Systematic, controlled amnesia has always been of great interest to mind-controllers.

*...when a posthypnotic compulsion is performed with the awareness that it is being performed (even though the suggestion to perform it is forgotten), the feedback from the unusual behavior tends to inhibit its continuation. (E. R. Hilgard, **Divided Consciousness, p. 142**)*

If you hear yourself giving a bizarre response, completely out of context, over and over, and you know you are a hypnotic subject who has been given a posthypnotic suggestion for that response, then you have feedback. You will then struggle to repress that response or try to avoid any situation that cues the inappropriate, unwanted behavior.

If, every time somebody says "Hi," you hear yourself answering "February," you will answer "February" less and less, as the trials go on. If you notice you are giving every spare cent to adult children instead of paying your old bills, you will find a way to evade that obviously inappropriate impulse. If you do not know that you are a hypnotic subject, however, and if you do not notice yourself saying "February," because you have a posthypnotic suggestion for selective deafness, or selective amnesia, then you will give that response forever.

9) Regression

Unfortunately many investigators of “hypnotic regression” have accepted as valid that type of “regression” which is based upon current conceptions of the past; and they have not gone on to the type of true regression in which the hypnotic situation itself ceases, and the subject is plunged directly into the chronological past.

- Erickson & Kubie quoted in Wolberg, *Hypnoanalysis*, p. 291

To regain the power to have a self-governing, self-correcting mind, a victim of suggested (or spontaneous) amnesia needs to go back into trance with a good-guy helper and access and reprogram the amnesic material. That process is **regression**.

There are two types of suggested regression: **capacity regression**, and **memory regression**. Capacity and/or memory regression may be spontaneous as with Candy, or suggested as with Palle, Mrs. E, and Zebediah.



For more on capacity regression, see Operation Often.

Meanings of “Regression”

In the field of psychology, the word **regression** has several different meanings:

- “ When you have a new baby, the previous one tends to temporarily **regress**. It returns to a younger level of functioning.
- “ When a person becomes hypnotized, they shift toward more primitive **primary process** thinking and toward attributing parental qualities to the hypnotist. Psychoanalytically oriented hypnotists **call** that **regression**.
- “ When a person, in trance, acts a younger age, spontaneously or because he has been instructed to act a younger age, that is **capacity regression** (also called **primitivation**).
- “ When a person in trance is told to go back in time, in order to remember, or relive, what happened at a younger age, that is **regression** for the purpose of recovering a memory.



Three Types of Memory Regression

Memory regression happens in one of three basic styles, listed here from the least to the most reliable: 1) **remembering**, 2) **reenacting**, and 3) **revivification**.

Remembering—When **remembering**, the memory is viewed from the subject's present age and described in the past tense. Hypnosis doesn't have to be deep for this type of regression. You're in a dual role, aware of the present, but also connected to the past. You are conscious, but perhaps with a mental door open to unconscious material.

Reenacting—When reenacting you are "back there," at the time, **role-playing** the scene. A subject regressed back to childhood may speak like a child, in a child's tones, with a child's grammar, vocabulary, and reactions. Reenacting tends to happen under light trance. (Deep trance regression tends to elicit revivification.) Reenacting is

... "regression" in terms of what the subject as an adult believes, understands, remembers or imagines about that earlier period of his life. In this form of "regression" the subject's behavior will be a half-conscious dramatization of his present understanding of that previous time, and he will behave as he believes would be suitable for him as a child of the suggested age level. (Erickson and Kubie, quoted in Wolberg, p. 291)

Revivification (Reliving)—The most authentic and powerful memory regression type, the one associated with deepest trance, is **revivification**. Revivification is not based on current memories, recollections, or reconstructions. The present and all subsequent life and experience are blotted out during this type of hypnotic event. The memory tape plays. The subject relives the experience.

Revivification is very different in subjective experience, and objective significance, from reenactment. The reliving of revivification is compelling, vivid, and experienced as "now." **The subject talks about his memories in the present tense** both during, and after, the experience. During the reliving, associated capacity regression may reproduce patterns of physiological behavior associated with that earlier period of life.

Regression Therapy

Repressed painful experiences can cause **neurotic symptoms**. If that person remembers the original event, relives it, and feels the formerly hidden emotion (thus **releasing, integrating, and dealing** with it), the symptoms usu-

ally will disappear. The usefulness of exposing old memories to the light of day is its power to produce personal change.

A **claustrophobia**, for example, might be caused by a young child's experience of having been shut in a dark closet as punishment. If the event is not consciously remembered, the unconscious retains the attitude toward that memory that it held when it first happened. A forgotten memory from age five remains networked in your unconscious programming with the emotions which were attached to it at age five. As we grow older, however, we acquire perspective. What terrified a five-year-old is likely to seem less frightening to an adult.

The Cases of Lucie and Marie—Pierre Janet pioneered **regression therapy** in the late 1800s. Lucie was a nineteen-year-old woman who suffered from unexplained episodes of terror. By hypnotizing her, and having her do automatic writing, Janet learned that the cause of the terror episodes was an incident that happened when Lucie was seven. Two men had hidden behind a curtain and deliberately frightened her. Janet was able to identify how the symptom had resulted from that particular memory and also to cure her.

He further explored regression hypnotherapy with another nineteen-year-old patient, Marie. She seemed blind in the left eye. However, when he regressed her to age five, that eye suddenly saw normally. He asked her to relive various events from age six and discovered the origin of her hysterical blindness. He implanted a revised memory, rewriting a portion of her personal history. That eliminated the problem. Her unconscious mind accepted the comforting lie. She regained vision.

The Case of Mrs. S.—Mrs. S was a psychiatric social worker who always felt strong fear when she had to go into a hospital for any reason. She was also phobic of any man's bare, hairy arms—and of knives. She had occasional, inexplicable nightmares and asthma attacks. Other than that, she was healthy, normal psychologically, and functioned well at work.

She wanted to find the cause of her problems, but could not afford therapy. She began to read Horney's book on remembering, *Self Analysis*, every night at bedtime. She did the book's exercises every night, just before going to sleep. One night, she realized that a classic **repressed traumatic event** might be the cause of her phobias. She began searching her memories, starting at age fourteen. She went back and farther back, reviewing one emotional episode after another, trying to remember any trauma that might be the basis

of her phobias. When she got to age five, she suddenly remembered—with startling clarity—a previously forgotten event. That event was not the answer, but it was a mental exercise toward that end. The clarity was because she was now in a self-induced deep trance. Then, suddenly,

*...she seemed to be lying on a table, clothed in a white gown and under brilliant lights. She could see a man standing beside her holding a small knife. Above her head was a vague, threatening object which was settling down over her face. Terror-stricken, she struggled to rise, but two hairy arms seized her and roughly forced her back. She continued to struggle and was grasped violently and shaken; then a hand slapped her sharply and repeatedly. The object came down over her face, smothering her. At this point she began to scream, waking her husband. She was in extreme panic, trembling and sobbing, and he had great difficulty quieting her. (LeCron, *The Complete Guide to Hypnosis*, pp. 171-172)*

In self-analysis, Mrs. S. had sought revivification of that memory, and she had achieved it. She poured out the **cathartic**, healing emotions to her husband. The next day, she asked her mother to explain. Her mother told her

...that, at the age of 16 months, a mastoidectomy had been performed on her and that she had been very sick afterward, with severe shock complications. Two of the nurses at the hospital had informed the mother of the brutality displayed toward the child by the anesthetist, and they had resigned in protest. For some time the child had experienced nightmares and had been emotionally disturbed. Following the operation, her first attacks of asthma had been manifested. (Ibid.)

Her mother's memory had **corroborated** Mrs. S's deep

trance reliving of that childhood memory. It was regression, not confabulation. After that, hairy arms became bearable to Mrs. S. Her knife and hospital phobias completely vanished. She never had another asthma attack.

Case of the Asthmatic Man—While lecturing on hypnosis to a group of doctors, Professor LeCron recruited a man as a demonstration subject, hypnotized him, developed deep trance, and regressed him to

...his third birthday. The subject began to gasp for breath, wheezing violently, coughing, and choking. His face and neck became markedly flushed, and he displayed signs of acute distress. It was obvious to all that he was undergoing an attack of asthma. One of the physicians present made a quick stethoscopic examination and reported rales present, with a high rate of pulse. (Ibid., p. 169)

LeCron brought the subject back to his present age and woke him from hypnosis. The asthma attack immediately stopped. Next day, the subject contacted his mother and asked what she remembered about his third birthday. She said that he had a bad attack of asthma that day.

Regression: True or False?

Recently published psychology textbooks deny the validity of any regression phenomena. They report research which implies failure in most age and capacity regression experiments. They say that questioning under hypnosis retrieves more data, but

that a greater percentage of the data will be false. That is correct only if the experiment involves what Dr. Reiter would have considered too light a trance, inadequate hypnotic training, leading questions, suggestive trance context, and no safeguards against the subject straying from the truth such as ideomotor signals, urgings to tell only the truth, and threats against falsehood.

Actually, over the nearly three hundred years of scientific hypnosis research from Puysegur to the present,





dozens of European and American hypnosis researchers established both that regression is real and that confabulation--now also called **false memory syndrome**--is real. The truth lies between the two convenient extremes of accepting all claims, or rejecting all claims.

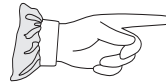
Those who believe that age regression can be actual usually note that it often is not complete; that frequently it is only partial, and sometimes the investigator does obtain only a kind of acting. They feel that regression may or may not be true, depending upon the hypnotizability of the subject and the skill of the hypnotist. (John G. Watkins, Introduction to LeCron, A Study of Age Regression under Hypnosis, p. 153)

To tell the difference between confabulation and genuine regression is a problem fit for Solomon. Or an investigative hypnotist such as Dr. Reiter. There is no absolute guarantee against fabrication or confabulation, even when working with a credentialed person. The credentialed person may intentionally, or unintentionally, lead the subject into confabulation. The subject's:

...desire to comply, both in and out of the formal trance, is such that they may convincingly invent information in an effort to give the hypnotist what he seems to want. They can even deceive themselves. Thus, interviews utilizing hypnotic age

regression for the purpose of uncovering information must be performed carefully and dispassionately. Further, external corroborating evidence is crucial for verification of material produced in a regression study. (Spiegel, Foreword to Bain, p. xi)

I wish I could provide you (and me) with a five-minute litmus test which would determine, with 99.9 % accuracy, whether a particular memory obtained in deep trance is true or not. I can't do that. Nobody can. The bottom line on memories recovered under regression is that they may, or may not, be true. If you have corroborative **direct memories** (memories obtained in normal, rather than trance, consciousness) or other objective evidence, then you have the comfort of proof. Without that proof, it can not be simple and sure. It depends--on subject, circumstances, hypnotist, depth, and the technique used.



It may be hard to sort out true regression from confabulation. Confabulation exists. True recovery of previously amnesic memory in trance regression also exists.

10) Confabulation

An epidemic of false accusations is occurring in which adult children are accusing their parents of horrendous acts of sexual abuse, including incest and satanic ritual abuse.

- Goldstein and Farmer, *Confabulations*, p. 1

A person who **confabulates** has produced fantasy and mistaken it for factual truth. There is always a risk of confabulation in trance--of creating a false reality, and then being burdened by belief in it. The tenth hypnotic phenomenon is **confabulation**.

Suggestibility Causes Confabulation

In general, people are susceptible to subtle, unconscious leadings. Trance is a mental state of even greater

suggestibility to either conscious or unconscious leading by context or by operator, and deep trance is the most suggestible state of all. For example, patients with exactly the same symptoms discover quite different causes for those symptoms when in therapy with operators who are loyal to different therapeutic philosophies (or religions).

Given a psychiatrist who is interested in birth trauma, or in faulty parental attitudes, most hys-

Four Paths to False “Knowing”

Here are four possible paths to a convincing, but false, “knowing,” which can be generated by the unconscious:

- 1) **Rationalization**—Rationalizations are the lies that we tell ourselves when we do not know, or do not want to know, our real unconscious motive for an act.
- 2) **False Memory Implanted by Suggestion**—A suggested false memory is a lie told to our unconscious by somebody else. A hypnotist can alter a subject’s memory and cause the subject to believe an untrue version of his personal history—even testify to that belief. It happened to Zebediah and to Palle. False memory has also been used as a technique to discredit persons who were trying to reveal hypno-abuse. A person’s grip on direct memories is hard to dislodge, but it is relatively easy to implant additional confabulatory “facts” in a hypnoprogrammed mind. Since erasure of existing conscious knowledge is not feasible, but maneuvering the subject into a position of confabulation is feasible, the mind predator may do just that. The confabulated false memories are intended to destroy credibility for all the victim’s statements.
- 3) **Fabrication**—Witnesses in a courtroom (and everyday people in everyday situations) tend to fill in forgotten details of remembered events, according to what they think probably happened. Those details may be different from what actually happened. People also may unconsciously revise old memories to adapt them to later circumstances or beliefs. And memories can evolve over the course of years of re-remembering and retelling. (That is why a written record, made within a few days of the event, is better evidence than what is recalled, years later.) Those are all varieties of fabrication.
- 4) **Confabulation**—A person in trance is highly suggestible. She may accept a hypnotist’s suggestion, or a self-generated idea, or a context clue. When experiences or statements generated in a state of trance are felt by the subject to be true, but really are not, that is **confabulation**.

terical and suggestible patients will finally produce many examples of disturbing parental attitudes, and may even remember in startling detail some supposed highly traumatic birth experience. But given another psychiatrist who is interested in quite different matters, such as whether or not the patient is mother-fixated, or has been sexually assaulted by the father, the hysterical patient, because of his state of greatly increased suggestibility, will produce a quite different set of memories which fit that psychiatrist’s explanation of the symptoms. Freud once made twelve consecutive patients remember and abreact what proved to be imaginary sexual assaults by the father, implanted by Freud’s belief, at the time, that sexual assault by the father was the major cause of hysteria. Later he realized how wrong he had been...
(Sargant, *The Mind Possessed*, p. 56)

There are many reports of hypnotized persons remembering birth—even womb experiences. I doubt, however, that anybody could truly recall their moment of conception. But a person in deep trance can be led to “experience” that, and anything else, on this planet or off it. The hallucination will feel absolutely convincing, because that is how brains are wired. An operator can lead a person to experience a “past” life, or a “future” life, a “moment of conception,” a “UFO abduction.” Whatever--as long as the subject is capable of trance deep enough for hallucination.

Fake “alien” encounters¹, false womb experiences, phony excursions to “Atlantis,” and “past lives” generated under deep trance by presuggestion, or by leading suggestions, change a person’s assumptions about life, the universe, and everything. Confabulated incest memories, or “Satanic ritual abuse” memories, may result in terrible, un-

1. There is significant hard evidence for the reality of some “alien” encounters. I once met a man with severe scars on his side. When he was a young man, a flying saucer had landed back of his house. His father ran away from it. He ran toward it—and was burned. Decades later, he now heads a California UFO reporting network—a phone line that the U. S. Air Force monitors. “Sometimes we phone in a fake landing event just to watch them scramble. They always show up.” Aliens? My analysis is that some events are advanced U.S. aircraft. Others may be time-traveling (a theoretically-possible technology) tourists from the planet’s future, genetically engineered future humans. That fits with the crop circle (year-dating) phenomena. Time will tell...



necessary pain for families—even imprisonment of innocent persons.

It Feels True

Confabulation, like any deep trance hallucination, feels truer than true. Many hypnotic experiments have “sent” hypnotic subjects to impossible times and places. A susceptible hypnotic subject always manages to come up with some plausible scenario—and then believes it was real! Psychologists have studied the responses of confabulators (hallucinators) to legal questioning, comparing them to the responses of people relying on regular memory. It is a phenomenon of trance that anybody who acquired their information in a trance state (whether she is a confabulator or a survivor of criminal hypnosis recovering amnesic memories), tends to be more confident and sincere-sounding as a witness than a person who is relying on direct memory.

*...wheres other witnesses would hesitate when confronted with the facts of the investigation, hypnotized witnesses would hold their ground steadfastly and to an unshakeable degree. (Lawrence and Perry, *Hypnosis, Will, and Memory*, pp. 285-286)*

False Knowing, But Real Emotion—A

confabulator will feel profound and “appropriate” emotions. Those emotions will be experienced as completely real and valid. Doesn’t that prove that the event actually happened?

No, it does not. You can feel excruciating shame, pain, anger, grief, or joy over something that was merely suggested to you, or that your unconscious generated while you were in a state of trance. Real emotions felt during the “experience,” and still felt whenever recalling it, are not “proof.” The emotional reaction to an experience a subject has confabulated—or been told under amnesic hypnosis to



Even though you thought it, it may not be true. Even though your recall of it seems real, it may not be true. Even though it caused you to feel deep emotion, it may not be true.

believe in—is identical in brain chemistry and subjective experience to the emotional response elicited by a revived genuine memory. It is all brain coding. In the mind, it is all

mind, whether true or false, imagination or reality. Real memory and false memory are both, in that sense, just **imagination**.

Confabulation has been studied since the late 1800s. The Bridie Murphy case started the fashion of hypnotic “remembering” of past lives. This is now big business for certain hypnotherapists who specialize in generating them for customers. Reporters later discovered that Virginia, the woman who “remembered” an apparently convincing youth in Ireland, actually had lived, for five years, during her childhood and adolescence, across the street from an immigrant Irish family, the Corkells. She had a crush on John, one of their sons, was friends with their son Kevin, and—in her trance confabulation—adopted Mrs. Corkell’s maiden name (Bridie Murphy) as her own. (*Time*, June 18, 1956; E.R. Hilgard, *Divided Consciousness*, p. 50) But that research came too late. Past life “regressions” under hypnosis were here.

Toleration of Confabulation

Why do therapists tolerate, even encourage, confabulations? It is a fact that—unless their specialty is forensic hypnosis—they usually do not care if the memories are true or not.

1) Money—It is good business. People who have no other reason to visit a hypnotist may visit to “remember” a past life. They pay \$60 or \$80 to the hypnotist for that visit, or more.

2) Abreaction Therapy—Some psychology textbooks now say it does not matter if a generated memory is true or not (the subject always feels like it is true), because any fact or fantasy, under trance, that generates emotion can be therapeutic. When a subject is in a state of emotion, he is more open to being reprogrammed by an operator. Also, any experience that generates emotion, even if confabulated, leaves the person feeling less stressed, and in apparently better psychological health.

*...a falsely implanted memory might create a larger emotional discharge than the real, and induce the physiological effects needed for psychological relief. (Sargant, *Battle for the Mind*, p. 24).*

So, hallucinations of battle on ancient Mars, or of your father abusing your pregnant mother, generate great emotion, which leaves the subject feeling psychologically renewed. That is how the human brain is wired. Experiencing profound emotion, for whatever reason, can temporarily relieve neurotic symptoms. It also increases the likelihood that the subject will accept other items on the operator’s belief agenda.

3) Legal Protection—A public and legal attitude of toleration toward confabulation is also favored by the therapy community. It protects them from liability for sloppy “regressing” that actually pulls up confabulations from the subject’s unconscious—which the subject then believes to be fact.

4) Return Business—Confabulation generates return business for the hypnotist, psychic, or whoever because, after any deep trance experience, the subject experiences a craving to revisit that rapport object and do it all again. Trance is a rush with addictive elements. It also implants a deep sense of importance for whatever happened to you in trance, whether true or false. Trance subjects bond with the hypnotist in rapport (regard, affection, and obedience). They speak enthusiastically of their experience to friends (other potential customers).

5) Reinforcing Group Belief—When a group of people share a belief, they naturally bond with each other. Any new recruit is warmly welcomed. He strengthens the group and renews their confidence in the shared convictions.

“Incest Memories”

Until the late 70s, there was little awareness of child sexual abuse and few resources for survivors of it. Then some women and men began talking about sexual abuse in their childhoods. Some of them had recovered the memory of that abuse years later. Books were then written about childhood sexual abuse. Some implied that if the thought occurs to you that it happened, it did. Support groups formed. A clinical specialty developed. Incest therapists often induced trance in their clients. (Any time one person talks alone with another in a mood of trust, it tends to lower consciousness.)

Soon thousands of therapists were leading clients to recall incest memories. Some suggestible persons—in settings where recovering repressed memories of child abuse was the norm, or was encouraged—“remembered” things that were not true. Some realized that later and **retracted**. But great pain had already been caused to them and the accused.

The heartfelt and pathetic stories that parents have written about their experiences with alienated daughters have strong similarities. More than 500 such stories were documented between January and June, 1992...In all of these cases:

1. Adult children accused their parents of

childhood sexual abuse.

2. *In each case recollections of the abuse occurred in therapy.*

3. *The accusations were based on repressed memories uncovered in therapy.*

4. *The memories were all Decade-Delayed-Discoveries.*

5. *Many of the adult children participated in 12-Step Programs.*

6. *Many of the adult children read the book **The Courage to Heal**.*

7. *All of these adult children severed relationships with their parents and any family member who did not believe their stories.*

8. *The therapists refused all communication with the parents... (Goldstein and Farmer, **Confabulations**, p. 187)*

Goldstein and Farmer’s book describes cases thought to be confabulations. It includes interviews with therapists who clearly do not understand the ease with which a susceptible hypnotic subject can be unconsciously led to confabulate, and the emotional intensity and feeling of authenticity associated with any confabulated memory.

Relatives who had suffered the loss of a child’s love because of false memories began to fight back against false memory syndrome. They networked, researched, publicized.

Social Issues Resources Series specializes in books on false incest memories. There is also a magazine called *Issues in Child Abuse Accusations* and a newsletter called *The Retractor*. All cover similar territory: confabulation in the incest area. Since 1992, the False Memory Syndrome Foundation, Philadelphia, PA, has provided information, networking, and names of lawyers who specialize in fighting false child abuse accusations. It also provides area phone numbers so you can receive emotional support from other parents who have gone through this.

However, the False Memory Syndrome Foundation may have an ulterior motive in its efforts to deny validity to memories acquired—or recovered—after some passage of time.



...FMSF has some on their Board of Advisors who may want to cover up their own work. One is Louis West, another is Martin Orne, one of the key MKULTRA researchers in hypnosis, and a third is Michael Persinger, who did research on the effects of electromagnetic radiation on the brain for a Pentagon weapons project.

*Regression therapy could threaten to reveal techniques the CIA may have secretly developed involving the use of hypnosis. (Daniel Brandt, "Mind Control and the Secret State," **Prevailing Winds Magazine**, Number 3, p. 73, NameBase NewsLine, #12, Jan-March 1996)*

Confabulation can happen. If a person confabulates, then, rather than being relieved of harmful old misprogramming, she acquires harmful new misprogramming. It is *not* helpful to believe falsehoods about your past. People need to live as close to the truth as they can get.

Facts about confabulation, however, should not be allowed to obscure facts about memory regression. Unethical hypnosis also can happen. The possibility of memory recovery by means of regression is an important means to healing for the survivor and recovery of the case facts. Denial of that fact would be too convenient for hypno-abusers.



One Subject ate the candy, but then got indigestion. Another ate...then vomited. A third could not see the chocolate.



PART IV

Induction Methods

Visit with a Stage Hypnotist

First Inductions

Depth

Physiology of Trance

Type 1 Induction: Sensory Deprivation Shuts Down the Analyzer

Type 2 Induction: Excitation Overwhelms the Analyzer

Type 3 Induction: Brain Syndrome

Type 4 Induction: Chemical, Electrical, and Biomagnetic (Psychic)



“She had on power-blue underpants.”

Visit with a Stage Hypnotist



Stage Hypnosis:
“Fakery”?



...the possibility of an obliteration of memory remains, not only in theory and in laboratory experiments, but also in practice. If this possibility is repeatedly denied, it is because the wish is father to the thought and because facts are ignored which cannot be easily disposed of.

Hammerschlag, *Hypnotism and Crime*, 1957

My friend Skip said, “I know that people under hypnosis will do things they wouldn’t normally do. I remember back in college, a hypnotist came around, put on a show. He got volunteers from the audience, hypnotized them. He told them the temperature was going up, that they were hot, real hot. One girl stood up, unzipped her pants, and dropped them to her knees before he could stop her. She had on powder-blue underpants. I knew that girl. She wasn’t the type to take off her clothes in front of two hundred people.”

A hypnotist wrote of similar situations:

*...by telling him that he is alone, that he feels very dirty and should take a shower, he will begin to undress and take off every garment unless the hypnotist intervenes at a crucial moment. Many unethical exhibitionists, whose skill surpasses their good taste, have delighted audiences by waiting until the subject is almost stripped before rousing him to a state of utter consternation and embarrassment! (Gindes, *New Concepts of Hypnosis*, p. 43)*

One night, in 1987, I entered the door of Mingles, a tavern/pool hall near the University of Idaho campus in Moscow, Idaho. This evening of research would not be spent with the usual books and articles. I would be part of the audience watching an elderly, potbellied, gravel-voiced, comedian-with-a-gimmick do his hypnotist routine. It was the third show of his that I had watched in two days. I was getting to know his routine well.

In a deep, strong, pleasant voice, Bob told his audience, “The higher the level of intelligence, the better a subject you can be, if you wanna be. I’m a damn good subject and I’m damn proud of it and I’ve been up on over two dozen hypnotists’ stages myself. And enjoyed the Hell out of it.” (That is the **bandwagon** propaganda/advertising technique. You tell people that everybody else is doing it, and loves it. That suggests that they want to do it, and should expect to love it too.)

As soon as all the volunteers had arrived on stage, Bob culled out a couple of the less susceptible hypnotic subjects, sending them back to their seats in the audience. He said to the remaining subjects, “Now I’ll want you stand-



ing just in front of your chairs, and concentrating on that light or just above it.” The light was a single, unshaded, brightly-shining bulb. It hung from an extension cord at stage center just about two feet above the heads of the taller subjects. (**Eye focus** results in eyestrain and creates **sensory deprivation** that help induction along.

“After I’ve got you standing up concentrating on that light,” Bob said, “I’m going to give you a suggestion for falling backwards. It’s the same as a daydream. How you get into a daydream is imagination, so you must go into a hypnosis the same way. You will go into it instantaneously, and you’ll feel like falling back or sitting down. Or maybe that light will change in some way. Whatever it is, don’t even hesitate. Sit down. Close your eyes when you sit down and don’t open them unless I tell you to.”

(His mention of the harmless sounding “daydream” and “imagination” were **presuggestions** for the subjects to shift to **right brain** function. That part of the brain is a hypnosis center as well as the base of visual imagination. The suggestion that subjects would “go into it instantaneously” was **training** for efficient operator control, for instant induction on cue. The idea that the subject would “fall” was a presuggestion of helplessness. Gale’s hint that

“maybe the light will change in some way” presuggested a **visual hallucination**. His order to “close your eyes, and don’t open them unless I tell you to” would, if obeyed, cause ongoing **sensory deprivation** which would nudge the process along even more of shutting down the subject’s cortex. That is because the less sensory input you are processing, the less cortical activity you have—and the easier it is to slip into a trance state. That whole onslaught of detailed instructions was also, in and of itself, inductive, a technique called the **pyramiding of instructions**.)

The stage hypnotist’s tone now switched from casual to very businesslike as he began to give another series of commands: “Stand up please. Stand in front of your chairs—heels together, toes apart in a 45 degree angle similar to mine, hands behind your back.” (It did not really matter how they stood. What mattered to Gale was their beginning **habit of obedience**, precise, uncritical obedience to his every directive.) The seven prospective subjects stood up, positioned themselves as directed, and turned their faces toward the light.

“When you hit **somnambulism**, that’s when that fantastic feeling comes over you, and it’s just...good shit,” Bob told them. It was a seductive presuggestion to go to the hypnotic depth which is characterized by maximum acceptance of any suggestion, even a negative hallucination, even of complete amnesia for all events of the trance. “Concentrate on the light,” he said. “Tilt your head up a little bit. Listen to what I’m saying. Tilt your head up a little bit if it’s not already. Take a deep breath.”

Bob’s voice now changed to a nearly monotonous tone. “Stay with my voice,” he said. “And as you let it out [the breath], relax every muscle. Picture what I’m saying. And now, another deep breath. And, as you let it out, picture every muscle going loose, relaxed and comfortable. And now another deep breath. And as you let it out, if the light begins to blur, go out of focus, or to change in any way, it’s a very natural phenomenon.”

The hypnotist’s deep voice became even deeper. His words emerged slowly, deliberately. (Both his tone and cadence reinforced the suggested lowering and slowing of the subjects’ mental processes.) “Picture yourself falling backwards into your chair. Pulling you off balance, as if you’re falling back. Pulling you back, pulling you back.” (His speech was now somewhat incoherent. Confusion is another inductive technique. The suggestions to relax and to visualize were also inductive. And Gale was telling them to visualize loss of control, helplessness to resist his suggestion, “falling backwards.”)

The hypnotist continued his induction patter for about five minutes. During that time, he rejected most of his candidates, rudely ordering them off the stage, one by one, when their unconscious submission did not measure up to his wishes. The two male volunteers who remained on the stage appeared to be in a deep trance state.

Bob said, "Picture in your mind, your right hand becoming light as a feather. It's floating upwards all by itself, lifting into the air. Floating upwards like a balloon filled with helium, lighter than air."

One man's right arm was up. The other's was not. Bob said to that person, "As I touch you on the arm, it will just float right up, floating up and lifting." He lightly touched the subject's arm. That touch is a deepening technique called **anchoring**. It works because a real touch in the midst of a suggested fantasy, under circumstances of sensory deprivation, tends to make the fantasy seem more real. The subject's arm floated up.

"And now many of them are floating up and lifting," Bob said.

I was struck by the deceit, implicit in his statement, to the two subjects who were sitting obediently with eyes closed, that "many" arms were floating. (A hypnotist is usually trying to displace the subject's will. He wants the subject to let the hypnotist's voice take over his brain's higher functions. He wants his voice to become a substitute link to, and interpreter of, his subject's reality. Very often, a hypnotist accomplishes that by persuading his subject's unconscious mind to accept lies.)

After Bob finished with his initial induction process, he was ready to begin the show. First, he **regressed** his subjects to age five and terrified them with a suggested "bogeyman." "Oh, my gosh, he's really got ahold of you now!" Bob warned them. The two men voiced childlike, frantic cries of fear. "Oh, it's not the bogeyman," Bob said in a surprised and reassuring tone. "It's your Daddy! Oh, he was worried about you and he came lookin'. Oh, give him a big hug!" The subjects smiled and pantomimed the hugging of their daddies. "Oh, I've got you suckered," Bob suddenly snickered. "It is the bogeyman!" The subjects' emotional state flipped back to terror. Gale then made the bogeyman disappear and restored the subjects to their real age.

Then he said, "Your penises are gone." (A **negative hallucination**.) The audience broke into peels of laughter at the subjects' obvious distress. "They're gone," Gale said, "and they've been replaced with vaginas." (A **positive hallucination**.) His subjects looked very disturbed. The audience thought it was hilarious. For a while, Bob continued this sequence of explicit hallucinations involving the

subjects' sex organs. The audience guffawed at his subjects' varying expressions.

"And now you're going to realize everything that has been happening," Bob told the two young men. Their faces showed confused emotions.

Bob now addressed the audience directly, "Hypnosis is your mind power, and once you've learned how to use it, you don't need anyone else to activate it. Let me prove that to you. You picture the best feeling you've ever known. And, the instant you think of it, you snap your fingers as hard as you can. And that feeling will come over you—twenty to thirty times stronger than it ever did before.

"And, by the way, once you've experienced it that strong, it will be forever that strong, or stronger." One by one, isolated finger snappings are heard here and there in the audience.

"Don't take all night," Bob urged them. More finger snappings were heard. "When I count to three, he says, 'it will be ten times stronger. One, two, three!'" There were isolated bursts of laughter. "And when the audience claps, it'll be fifty times stronger!" There was strong applause and cheers from the audience.

(Gale had spoken to the audience as if they, too, were hypnotized, and had suggested that sensual hallucination. Many in his audience had obviously given trance depth obedience to the seductive commands. Indeed, it is well-known that hypnotically **susceptible** members of the audience of any hypnosis performance do also tend to enter trance. With some techniques, up to 90% of the audience may be hypnotized.)

"And now, on the count of three, you're going to remember all those fantastic feelings. One, two, and three!"

"Was that satisfactory?" Gale asked a sexy looking young woman in the audience? She nodded, looking embarrassed.

By means of that routine, Gale (or any observer) had an opportunity to identify potential somnambulists in the crowd. Gale had now given them, also, some beginning **conditioning**. He had also given them a strong, sensual, **positive reinforcement** for being hypnotized.

Gale now returned his attention to the two, still hypnotized, subjects sitting quietly on chairs on the stage. He put the two men through another series of vivid erotic hallucinations. The audience laughed at the resulting, visible, erections. "And, now, you're going to realize what's happening," Bob said. The subjects' faces displayed em-



barrassed, sheepish expressions. (They were now trained not to realize what was happening—unless he told them to do so. Gale was quickly and subtly conditioning them for **automatism**.)

“And SLEEP!” he suddenly yelled at them. Their heads dropped, chins on chests, eyes closed, the classic hypnotic posture, all sensuality swept away by the command.

“Suddenly you are beginning to hallucinate,” Bob now told them in a low and menacing tone. “As you look out over the audience, all you see is weird creatures. Some of them are hysterically funny.” The subjects pointed out toward the audience and giggled. “Others,” Bob continued, “are just right down weird.” The subjects again showed fear. The audience laughed.

“In the back of the room, you see one that is totally frightening. Scares the hell clear out of you.” Bob continued describing a terrifying fantasy with erotic elements. I felt a prickle of cold fear myself at the menace in his tone and the bizarreness of his image. The subjects on stage looked horrified. Then Bob said that the threatening image was now moving steadily toward them.

One subject, with a panicked expression, bolted to his feet. He slowly stumbled backward, staring in terror at the hallucinated threat supposedly stalking him. He retreated to the far side of the stage. There was a pool table there. He glanced backward, obviously planning to crawl up onto the pool table. I wondered if he might get hurt.¹

Bob adroitly headed off the problem: “You can’t get on a pool table,” he coolly stated, “there’s crabs on ‘em.”

The young man instantly pulled back from that anticipated escape route. He stood terrified, trapped between the approaching horrific vision before him and the crabs on the pool table behind him. Bob pushed the hallucination to the absolute extreme, that of shocking contact with the visualized horror. Then he shouted, “And, now, you’re going to realize what’s happening!”

As the subjects recovered their composure to some extent, they managed to laugh with good-natured embarrassment. “On the count of three, I’m going to wake you up,” Bob told them, “but you will still be in a hyperstate of **suggestibility** and everything I suggest will instantly happen.” (He was training them for **waking hypnosis**—to be deeply hypnotized, absolutely suggestible, but acting normal and awake.)

Next, he suggested a hallucination that everybody in the audience was naked. The room was quiet as the audience watched the subjects staring at them. The subjects pointed out to each other various friends, commented on their imagined physical attributes, guffawed at the sea of nudes before them. (I remembered a friend’s report of watching a stage hypnotist give that same suggestion to a group of subjects on stage. Most had reacted as Gale’s two subjects had. However, one male subject, the moment the command was given, jumped up, ran off the stage, rushed out of the auditorium, and did not return.)

Bob now announced to his subjects, “Hell, you’re naked, too. And the chair keeps playing with your testicles.” Their expressions turned to terrible dismay. Their hands rushed to cover their privates. Their bodies wriggled in reaction to the supposed manipulations of the chair. “And now,” Bob said, “you realize you’ve got your clothes on.” The subjects responded with foolish grins and relieved expressions.

Just before waking up his subjects and ending the act, Bob Gale told them firmly, several times, that they would remember everything they had experienced. He also instructed that they could not again be hypnotized by any-one—unless they wanted to be. Those were good and ethical suggestions. The two subjects rejoined their friends in the audience.

His act was over. The pool hall lights brightened again. The audience stood up and wandered about—to the bar, to play pool, or out the door. The hypnotist lit a cigarette and left the stage. He walked back to the seat at the far end of the bar—the seat which he had occupied before the show. He ordered a drink.

Standing quietly to one side, mingling with the crowd, I watched him awhile. He sat alone, chain-smoking, drinking one glassful after another of something alcoholic. How ironic I thought: the master of mind control was obviously unable to master his own bad habits.

He still sat alone, staring grimly down at his drink. I worked up enough courage to walk over and stand at his right. There was no bar stool available on his right, but there was standing room there. “I want to interview you,” I said. “I’m a writer.”

“I don’t give interviews,” he snapped. “There are already too many books about hypnosis by people who aren’t hypnotists, and they’re mostly no good.”

1. A stage hypnotist suggested to the subject that
...he was in a swimming-pool and that the large basin of the pool itself lay in front of him. He climbed on to a chair and, in the belief that he could now dive head first into the water, fell head over heels onto the floor of the stage. (Hammerschlag, pp. 86-7)



"I actually know quite a bit about hypnosis," I said. "I've been interested in it for years. I'm impressed with the ethical way you conduct your act." He gave me a long, doubtful stare. I explained, "You insist that your subjects remember everything they experienced after you are done, and you tell them that they cannot be again hypnotized by anyone unless they want that to happen."

He relaxed a little.

I said, "I know it could be worse. You mentioned in one of your performances that you know a lot of other stage hypnotists. Are they all as ethical as you are? I mean, you know, and I know, that this constantly-promoted line that 'You cannot be made to do anything under hypnosis

that you don't want to' is not true. People can be made to forget what they did under hypnosis, even that they were under hypnosis. They can be conditioned to instantly be rehypnotized any time. They can be trained to absolutely obey post-hypnotic suggestions and to never suspect their behavior comes from a source other than their own minds. A person could be turned into somebody's secret slave that way, and he or she would have no conscious knowledge of it. 'You will remember nothing,'" I intoned, imitating the flat-toned, slow-paced voice of a hypnotist.

"I could do that," Bob avowed with sudden grim enthusiasm as though needing to assure me of his professional prowess. "One main block, and then a strong oblique block, and then surround that with a hundred other minor blocks. She'd never remember. I could. But I wouldn't do that. I never have done that."

I silently pondered, for a moment, his choice of a sex for the theoretical victim who would "never remember." Then I asked, "Have you ever known of a case where another hypnotist did use the relationship created by a subject's trust to take advantage of her using this method?" I asked that, and then I held my breath.

"Yes."

I went back to breathing, but I did not say anything. I waited. And waited. And waited. Uncovering the truth was so important to me. I had to get him to volunteer more information. Bob finally broke the awkward silence. He said, "I know a psychiatrist who uses it that way."

"To get sex?"

"Yes," Gale replied.

"To get money?"

"Yes, both. The AMA won't do anything to regulate it. These guys are making too much money."¹ He sounded bitter.

1. See Noel's case history in the Forensic Hypnosis section.



I wondered how much money small-time hypnotists like him, making the circuit of college-town night spots, earned. The audience at the pool hall this night had been thin. There must be temptations. “How about the stage hypnotists you know?” I asked. “Do they ever use the conditioning established on stage with their subjects for unethical purposes afterwards?”

“Yes,” he said.

“About what percent of them do that, would you say?” I asked.

“About half.”

I said, “I know that if a person’s memories of what happened under hypnosis are suppressed by posthypnotic suggestion, that person can get their memories back by being hypnotized by another hypnotist and then being commanded to remember. But that would be difficult. It would take a lot of time.”

Bob nodded.

“Would you be willing to do that for somebody?” I asked.

“If a person were in that situation, they should go

to somebody with a Ph.D., somebody with training in psychology.”

“How would that person help them?”

“He’d have to break”—Bob made a fierce karate-chop motion with his right hand—“through the blocks. Break them down one-by-one.”

I left then. It was a hard subject for me to talk about. I thought about our conversation for a long time afterwards. I had a feeling that Bob Gale did not understand that the average clinical psychologist would not believe that the cases of unethical hypnosis, which he had just described, were possible. I also knew that neither academic nor clinical psychologists understand how sealing works, or how to fight through it. If a victim of predatory hypnosis went to a Ph.D., the doctor would probably diagnose paranoia instead of criminal hypnosis. If the predator knew that his subject was trying to get help from a psychologist, he might even covertly suggest an array of paranoia symptoms—to steer the diagnosis more surely that way.

Nevertheless, our brief conversation had thrilled me. It was the first time I had ever talked to a hypnotist who was both knowledgeable and truthful about unethical hypnosis. I had found the courage to ask questions, and he had given me truthful answers. It felt like one of the greatest days of my life.

STAGE HYPNOSIS: “FAKERY”?

Stage hypnotists achieve fourth and fifth [sommnambulist] level trances in their subjects very quickly, by an authoritative assertiveness that breaks down any resistance on the part of the subjects, who are usually volunteers from the audience, anxious to do whatever the performer wants. The majority of stage hypnotists are highly skilled at what they do....

—Hughes, *Hypnosis*, p. 26

Hughes, writing above in a modern text for student hypnotists, stated the truth. Stage hypnotists normally do hypnotize their subjects. It is also true that, in some cases, stage hypnosis acts have involved elements of fakery. I have interviewed stage professionals who know, for a fact, cases in which certain stage hypnotists ensured their success by hiring actors and using other tricks to elicit performances that the audience assumed were real hypnosis.

One confusing factor is the long history of deceit in the way stage hypnotists represent their “acts.” T. X. Barber, former stage hypnotist, Ph.D. “researcher,” and ex-

pert mind manipulator, made a career of saying, among other things, that stage hypnosis is all fakery. He said that hypnotic phenomena result simply from the subjects’ eagerness to display, and perform, and their pretending to be hypnotized by the stage hypnotist. Most basic psychology textbooks now repeat the Barberism that stage hypnotists do not really hypnotize their subjects.

The “great” Kreskin announces, “There is no such thing as hypnosis,” each time he begins his show. Then people flock to him, because there is “no such thing as hypnosis,” and there is “no such thing as real stage hypnosis,” and there is no such thing as criminal hypnosis, so they feel

absolutely safe. A young hypnotist asked McGill (who, like Barber, started out as a stage hypnotist, then got a Ph.D.) in his *Journal of Hypnotism* column why Kreskin always starts that way. McGill replied:

...it may remove some tendency of fear...thus making it possible to obtain more willing subjects on stage as volunteers. There is also the practical aspect involved in that some states and some cities have ordinances that do not allow public hypnotic performances. Denouncing hypnotism and terming it suggestion opens up territories where hypnotic shows are not allowed. A bit tricky but clever in its way. (McGill, J. of H., Mar. 1990, p. 30)

The lie reassures the audience and subjects, increasing suggestibility and protecting the performer from legal liability.

Nelson's catalog served the "mentalist" category of stage performers for years out of Columbus, Ohio. It offered a book titled *Stage Hypnotism: A Complete Course in Pseudo and Real Stage Hypnotism, Covering Every Phase of Hypnotic Performance*. The advertising declared that stage hypnotism is "a combination of Suggestion and 90% trickery." That disclaimer protects the industry from legal attack. The stage acts which the book details are real, however. Here are a few of the "tests" which that course on stage hypnotism taught:

The Rigid or Great Rock Breaking Test [bridge phenomenon with rock broken on abdomen]; Scientific Bloodless Operation, placing four, five or six steel needles through various parts of the body [hypnotic anesthesia]...24 to 48 hour window sleep [prolonged hypnotic coma done on display]..."

Use of words like "trickery" and "fakery" reassure the tourists and local yokels. They protect the stage hypnotists from liability. Trickery and fakery certainly are involved, but not because hypnosis is not real. They are involved because the subject does not understand the physiology and technology of the induction process and the risks of accepting somnambulant conditioning. He, thus, may be led, by deceit, into a condition of greater and greater vulnerability.

A hypnotist, making the high school circuit, used the technique of calling volunteers onto stage and whispering to each one, "I didn't realize that I would be working

with young people. It's against the law to hypnotize anybody under the age of 21. Will you just **close your eyes and pretend to be hypnotized?**" Each agreed. The students did not realize that the hypnotist had lied. There was no law prohibiting the hypnosis of minors. The student subjects also did not realize that sympathizing with the hypnotist, eye closure, and pretending to be hypnotized are three heavily **inductive** elements, all of which would set them up for a quick shift to a genuine trance state. They were being conned by trickery. They also were being hypnotized.

Nelson's catalog offered a special, detailed presentation (booklet) on using the **bridge phenomenon** as a stage act. The ad text urges use of the bridge on stage because "It will brand you as a great hypnotist. Using a subject weighing less than 100 lbs., performer places subject under hypnotic control (?)." The question mark is the publisher's legal disclaimer to avoid liability. The scenario assumed that the hypnotist traveled with a highly-susceptible and heavily-conditioned assistant who was trained to enter a catatonic-level trance on cue. The hypnotist

...then causes the subject's muscles to become rigid, so that the body is as strong and unyielding as steel [not truly possible, and some body parts, such as breasts, have inadequate muscle tissue to become rigid and protect them]. The hypnotised subject is then placed across two chairs, the ankles resting on one, and the shoulders on the other chair, nothing else supporting the body. And while in this state, three full grown men stand upon the body which is suspended across the chairs. [That kind of abuse damaged Spurgeon Young's pancreas and liver and caused his death.] OR a large rock may be placed on the stomach, and broken by the blow of a heavy sledge-hammer! [That is how Flint's wife died.] OR, place a 100-pound anvil on the subject's unsupported stomach, and allow two powerful men to play the "Anvil Chorus" (accompanied by the orchestra), swinging twin sledge-hammers on the anvil with all their might. This spectacle, the resultant sound effects and music will lift your audience right out of their seats!"

Nelson's catalog offered the booklet on bridge phenomenon —"complete stage illusion—running time eight to twelve minutes, requires no apparatus"—for \$5.00.¹ In more recent times, stage hypnotists have revised their acts, leaving out tests of hypnotic anesthesia in which they sewed their subjects' lips together (or cheeks to each other), and their use of the bridge phenomenon.

1. Other books on stage hypnosis are *Stage Hypnotism* by S. W. Reilly, *Quick Hypnotic Tricks* by Stewart James, and two by Ormond McGill—*Encyclopedia of Stage Hypnotism* and *The Art of Stage Hypnotism*.



First Inductions

Readiness: the Pre-induction Stage



Disguised Inductions



Fast and Forced Inductions



Self-hypnosis



Susceptibility

Readiness: the Pre-induction Stage

...there is an initial contract between the subject and the hypnotist according to which the subject agrees to conform to the conditions and expectations appropriate to hypnosis...

- E. R. Hilgard, *Divided Consciousness*, p. 224



The first few inductions involve a series of three stages: pre-induction, light trance, and deep trance. After receiving training, the trained subject may go directly from induction cue to deep trance.

Readiness is having an attitude of interest, willingness, and fearlessness about an upcoming induction attempt. It is the **first stage of induction**. James Christenson was a military psychologist who interned under M.H. Erickson, then worked with the Army Air Force, Army Service Forces, and Veterans Administration, researching hypnosis induction and applications. He viewed induction as a three-step process.

- 1) “Achieving a state of **readiness** to be a hypnotic subject”

- 2) "...development of the...**light hypnosis**, with varying degrees of actual hypnosis."
- 3) "...a full **somnambulistic** reaction or deep hypnotic trance." (Christenson in LeCron, p. 33)

The three stages defined by Christenson only happen in the first (or in the first few) inductions. With experience, training, or a specific posthypnotic suggestion for **instant induction** next time, induction becomes an **unconscious conditioned reflex triggered by a cue**. Presuggestions are no longer needed or relevant. The cue becomes enough.

Christenson researched by hanging out in the soldiers' lounge and hypnotizing volunteers. The subjects did not know they were participating in an experiment. Christenson covertly recorded their behavior. Half of the onlookers volunteered to be hypnotized. More women volunteered than men. The hypnotist theorized that those persons who volunteered had positive pre-induction suggestions in their personal history, or had acquired those positive expectations of hypnosis from the Christenson's presuggestions and watching the example of other volunteers.

Pre-induction Suggestions

The first stage of induction induces a potential subject to give it a try, to expose himself willingly to whatever the inductive method is, to go into it with an attitude of cooperation. The key to that lies in persuasive and reassuring **pre-induction suggestions**. Pre-induction suggestions are all the ideas and expectations a subject brings to the event, plus those acquired once there.

Hypnotizable people have considerable (though varying) degrees of **suggestibility**, even in the waking state, so the pre-induction suggestions are truly "suggestions." Pre-induction suggestions are presented, in casual conversation, in a **pre-induction talk**.

Pre-induction suggestions are frequently half-truths, or worse. A hypnotist routinely tells the prospective subject before the first induction that

*...under the influence of hypnosis, no one says or does anything that he would not do, or say under the most normal conditions of consciousness. He must be assured that he will have complete control of himself at all times, and that he will be able to wake up from the hypnosis at any time that he elects to do so. (Powers, **Advanced Techniques of Hypnosis**, p. 24)*

Powers then admits that the subject is being given

"false information." But, he argues:

If the patient is not put wholly at ease, it becomes impossible to hypnotize him. We, therefore, misinform him for his own benefit...We, like physicians, do what we feel is necessary for the well-being of those who have seen fit to turn to us in their need. (Ibid.)

Most people believe that a professional would not tell them an out-and-out lie. Hypnotists, however, do lie.

*We even lie to patients, and we believe that is OK so long as it is done for the purpose of helping them. (Citrenbaum, **Modern Clinical Hypnosis for Habit Control**, p. 14)*

Most people assume that the induction does not begin until they are told it is beginning. They believe all the pre-induction suggestions. Powers urged hypnotists to "saturate" the subject in the first induction with the expectation of becoming hypnotized and develop his "fullest acceptance" of that coming state. That process begins in the pre-induction talk.

The pre-induction talk typically **presents myths about hypnosis, while claiming to dispel myths about hypnosis!** The hypnotist reassures, placates, and appeals to "reason." He also works to build the subject's confidence and create a mood of hopeful expectancy. He does this because a subject who trusts the hypnotist and who believes he will be hypnotized is more likely to be hypnotized and will go into a deeper trance.

For example, after Dr. Diamond felt that he had established a friendly relationship with Sirhan (the man who shot Robert F. Kennedy), he decided to try hypnosis on him. The psychiatrist began his hypnosis with deceptive, disarming pre-induction suggestions.

"Sirhan, you know what hypnosis is?"

"Isn't it domination of the weaker will by the stronger?"

"No," said Diamond, it isn't that at all. It's simply a way of demonstrating one's own ability to concentrate, and the hypnotist is not dominating over the will of the other. No one can be hypnotized against his own will, and the hypnotist really just gives suggestions and encouragement to a person so that he can use his own will-power to strengthen his own abilities. There's a lot of phony baloney about hypnosis." (Kaiser, p. 295)



After stating the pre-induction myths, a hypnotist usually offers to answer questions. If the hypnotist does not know the answer to a question, Powers says to just make up a “convincing explanation, so that no loss of prestige will affect the successful conclusion of hypnosis.” (*Powers, Advanced Techniques of Hypnosis*) The hypnotist may also give pre-suggestions on how to enter trance. For a **thought-centering** (Type 1) induction, the hypnotist might say, “The main thing is for you to direct all your thoughts so they are concentrated on one idea.” Sensory deprivation (dim light, quiet room, eyes closed), plus thought centering, is a common induction technique.

Induction effort can be directed at one person, or at a group. People are easier to hypnotize in a group than when they are alone because the group’s presence is a pre-induction suggestion implying safety and conformity. Hypnotizing a group of persons also tends to be quickly accomplished because of the contagious effect that some people entering deep trance can have on others. New subjects learn what trance behavior is expected of them by observing experienced ones. In a group, potential subjects also feel less self-conscious and less threatened (whether that safety is true or illusory). The difference between an individual or a group induction is “nothing more than a louder voice!” (*Marcuse, Hypnosis, p. 55*)

Disguised Inductions

...in some cases...good somnambulists may easily be rendered susceptible to suggestions...by chance—in theatre, church, train, car or at a meal.

- Cannon, “*Hypnosis in Criminology*,” p. 19

There is a very thin line between false pre-induction suggestions and **disguised inductions**. An induction is disguised if the subject has not been clearly informed ahead of time of the hypnotist’s intentions. A disguised induction creates exactly the same physiological state of trance as if it began with a non-disguised induction. Suggestions and posthypnotic suggestions are equally effective. Disguised inductions—inducing hypnosis without preliminary conscious consent—are common. They are controversial and often denied, but the writings of hypnotists contain many mentions of disguised first-time inductions.

A disguised induction is an involuntary induction. It bypasses the subject’s conscious mind and directly manipulates his unconscious. Without the subject’s conscious knowing, the hypnotist tries to stimulate **physiological** induction reflexes in his unconscious that will inhibit the analytical, critical, and willing/rejecting functions of his conscious. Some forensic hypnotists say that disguised induction is not really against a person’s will because the subject’s **unconscious** cooperated. Their premise is that the unconscious mind can give a valid **permission** for the entire mind to be hypnotized. Disguised induction attempts to seduce the subject’s unconscious into this “freely willed” cooperation.

Most people do not understand that a disguised induction may need to happen only one time (or a few) to establish a long-lasting conditioning in a genetic (or trained) somnambulist. Zebediah, Mrs. E, Palle, and Candy were all

first hypnotized using a disguised method. Dr. Alexander Cannon, an English medical hypnotist, may have been thinking of the disguised first induction of Mrs. E when he wrote the words quoted above.

Avoiding the H Word

A disguised hypnotic induction avoids the word **hypnosis**. The operator insists that what is about to happen is not hypnosis. It is, supposedly, something else entirely. (That is a lie, of course.) For example, a mail-order hypnosis course suggests achieving a disguised induction by using the words **relaxation** and **deeply relaxed** in a conversational induction instead of using the words **sleep** and **hypnosis**. For the first induction of a dental patient...

If it can be avoided, the patient should not be told that hypnosis is to be employed. He should be informed that he is to be relaxed; that he will feel drowsy and comfortable... (Burgess, “Hypnosis in Dentistry,” p. 332)

That first, disguised induction “conditions him for life.” (*Ibid.*, p. 325) A dentist, who taught hypnosis seminars to professionals with M. H. Erickson, saw advantages in disguised hypnotic induction “due to the existing prejudices in the minds of the public...” (*Aaron Moss, “Hypnodontics,” p. 314*) Here is Moss’s disguised method:

...nothing is told the patient which would make him aware that he is about to be put in a hypnotic state. He is simply told that he is to relax; that he

should make himself comfortable and let his arms and legs become loose and heavy...step by step, he is gradually brought into a trance state. The patient is then unaware that he has been hypnotized. (Ibid.)

The following news clipping reports a case in which asthma and epilepsy patients were subjected to disguised inductions:

*Dr. Harold Rosen, of the Phipps Psychiatric Clinic at the Baltimore hospital, said patients were hypnotized without their knowledge so their symptoms could be better studied. During this state, he said, their symptoms were brought on or intensified so that real or apparent attacks of asthma or epilepsy were reproduced during a consultation. (quoted in Powers, *Advanced Techniques of Hypnosis*, p. 123)*

“Just Relax”—In **progressive relaxation**, the hypnotist names various parts of your body and suggests that each, named, part of you is relaxing. This is a common induction in programs for smokers and overeaters, in sports training, and for headaches. Progressive relaxation may just relax you. If you are susceptible, however, or if it is done repeatedly, it can put you in a trance of some depth. It may be combined with instructions to visualize one, or more, specified images. Visualization is very inductive.

*...much of what passes for the different forms of behavior therapy depends very heavily on the use of hypnosis (relaxation). (Edmonston, *Induction of Hypnosis*, p. 116)*

Frederick J. Evans studied disguised hypnotic inductions and hypnotic amnesia. His research hypothesis was: “Is it possible...to induce deep hypnosis without S’s [subject’s] awareness or knowledge that the experimental procedure involves hypnosis?” (*An Experimental Indirect Technique for the Induction of Hypnosis Without Awareness*, p. 73) Evans used a “relaxation” technique to induct. Over a period of five years, he tested nearly three-hundred people.

His procedure was to tell his subjects that he was studying the “effects of relaxation on behavior.” He instructed them to lie on a couch, watch a fixed point, and relax completely. Then, he gave a series of further “relaxation” instructions which had to do with controlling breathing patterns. He also suggested visualizations—such as to see a pendulum that swings in matched rhythm with the controlled breathing. Then he counted slowly, from 1 to 21, to deepen the trance.

After thirty minutes of that **patter**, Evans gave his

subjects traditional tests for depth of hypnosis. He gave suggestions for posthypnotic compulsions, inhibitions, depth amnesias, and recall interference. He suggested catalepsies: rigid arms and other motor phenomena. He suggested simple hallucinations, anesthetics, and age regression. His results were very definite:

- *His “relaxed” subjects showed precisely the same spectrum of trance depth behavior that would be predicted had they been given a hypnosis susceptibility test.*
- *“At least half of the Ss, even under some pressure, did not seem to recognize that an attempt had been made to induce hypnosis” (Evans, p. 79)*

Evans thus proved that “relaxation,” or **indirect induction**, as he called it, is a hypnosis induction, whether the word “hypnosis” was used or not—and whether, or not, the resulting trance is used to elicit traditional hypnotic behavior. His results demonstrated that half, or more, of the persons who are hypnotized by this disguised method will not know that they are hypnotized. And they will resist knowing the truth!

*...the finding—that subjects may not be aware that hypnosis has occurred—raises some very interesting ethical and/or legal issues... (Edmonston, *Hypnosis and Relaxation*, p. 67)*

Indeed.

Disguised Induction by Imagery—Dr. Milton Kline developed a disguised induction based on **imagery**. It started with visualizing, in sequence, a house, a tree, a person, and an animal. The subjects practiced with their eyes open until they could see those images. Kline would then suggest **eye closure** (which further lowered





consciousness). He would say something like, “Visualize yourself sitting there exactly as you are now, except that the image of yourself has its eyes open.” He would then suggest that the subject imagine his image doing an eye-fixation exercise, staring without blinking at some target object. He ended this induction routine by saying, “Now you are feeling just like the image, going deeper and deeper asleep.”

I have recently seen the euphemism, **imagery procedures**, used to describe this method of disguised induction.

Conversational Induction—The Ericksonian organization includes programs on disguised inductions in its conference programming, tapes, and videos. M. H. Erickson developed the conversational disguised induction, and it is an Ericksonian specialty. The method is embedded in seemingly casual talk¹ and seemingly “incidental” body contacts.

Chaperone Induction—Erickson also did a disguised induction by persuading his intended subject to “chaperone” her roommate’s “therapy.” (The roommate had previously been persuaded to play this pretend role in the doctor’s plan.) It took Erickson an hour and a half of hypnotic patter—addressed supposedly to the roommate, but really to the “chaperone,” before he succeeded in easing the targeted woman into a deep trance. When Erickson observed that she was, finally, in deep trance

...the patient was told gently that she was in a hypnotic trance. She was reassured that the hypnotist would do nothing that she was unwilling to have him do, and that therefore there was no need for a chaperone. She was told that she could disrupt the trance if the hypnotist should offend her. Then she was told to continue to sleep deeply..., listening to and obeying only every legitimate command given her by the hypnotist. Thus she was given the reassuring but illusory feeling that she had a free choice. (Erickson and Kubie, “The Successful Treatment of a Case of Acute Hysterical Depression by a Return under Hypnosis to a Critical Phase of Childhood”)

When Erickson stated the subject’s posthypnotic cue for reinduction, he added

...that if she had any resistances towards such a trance she would make the hypnotist aware of it after the trance had developed, whereupon she could then decide whether or not to continue in

the trance. The purpose of these suggestions was merely to make certain that the patient would again allow herself to be hypnotized with full confidence that she could if she chose disrupt the trance at any time. This illusion of self-determination made it certain that the hypnotist would be able to swing the patient into a trance. Once in that condition, he was confident that he could keep her there until his therapeutic aims had been achieved. (Ibid.)

The “chaperone” woke up with no memory of anything that had happened during the time she was in the trance. She had no conscious knowledge that she had been in a trance.

Ainslee Meares, an Australian psychiatrist, also did disguised inductions. Meares declared that the essence of hypnosis involved the subject’s unconscious abandonment of ego control. Like Erickson, Meares would “turn the patient’s defenses against him and use them in the hypnotic induction.” (Meares, 1958, pp. 24-28)

Sleep Induction—A conditioned hypnotic subject will respond to the hypnotist’s induction cue as well from a state of sleep as when wide awake. (Marcuse, *Hypnosis*, p. 58) First time hypnotic induction of a sleeping person by spoken suggestion also is possible. It is another recognized method of covert hypnotic induction. One hypnotist reported the case of a child

*...who refused to go into hypnosis with me, who refused even to try to consider it and had refused over a period of many hours. I caught her when she was asleep in the hospital bed and was able to give her some suggestions which she did accept. (Wolfe in Estabrooks, *Hypnosis: Current Problems*, p. 262)*

William James stated that “...persons in ordinary sleep may be transferred into the hypnotic condition by verbal intimation or contact, performed so gently as not to wake them up.” (*The Principles of Psychology*, p. 594) T.X. Barber reported an experiment in which he compared outcomes of giving suggestions to subjects under hypnosis and under light sleep. Both groups responded the same. (Barber, 1956) Barber claimed to have proved that hypnosis does not exist.

1. M. H. Erickson reported numerous conversational inductions tailored precisely to the individual psychological profile of the targeted subject’s unconscious.

What he really demonstrated, however, was that light sleep is a suggestible natural trance state which can be utilized for the purpose of disguised induction.

Dynamic Learning Method's mail-order hypnosis course gives instructions for hypnotizing a sleeping person.

...simply begin hypnotizing the person, just as though the person were awake...[it] may require considerable patience and persistence... (p. TS20-1)

The course tells the hypnotist to say that, in the future, whenever that person is sleeping, he will be able to

hear and understand the hypnotist's voice, shifting directly from natural sleep to hypnotic sleep at that sound, instead of waking. The recommended patter continues, "You will hear and understand the hypnotic suggestions I give you, and you will obey them." (p. TS20-1)

Sometimes, however, professional efforts to accomplish first-time induction of a sleeping person do not work. The reason may be the varying types of brain waves associated with the spectrum of sleep depths. Success probably depends on giving suggestions during hypnoid levels of relaxation (alpha/theta) instead of during the non-hypnoid delta periods. The subject's unconscious resistance also may be a factor...

Fast, and Forced, Inductions

...a patient might realize what is transpiring and become resentful, with a consequent bad relationship ensuing. The writer has had this happen, with the patient refusing to return for further treatment. There is also a medicolegal aspect to the use of the disguised induction of hypnosis and a question of liability.

- Aaron Moss, "Hypnodontics," p. 314

The Actively Resisting Subject

There are incidents involving actively resisting subjects scattered throughout this book. Some subjects managed to reject an unwelcome suggestion, or an unwanted trance induction. Some even escaped completely from a distressing hypnotic relationship. A British newspaper reported a case of this type. The original induction had been disguised. The next time the operator tried to induct, his subject resisted. The journalist who described that incident mistakenly assumed it was the first case of its sort:

The first medical proof that a woman can be hypnotized against her will—as Svengali hypnotized Trilby—is put on record today by Dr. Ian Oswald, an Oxford University psychiatrist...She did not realize she was being hypnotized and went into a deep trance...

While she was in trance, Dr. Oswald stated a **post-hypnotic reinduction cue**. If, at any future time, she saw him clap his hands together, she would immediately return to that same state of consciousness:

When she recovered consciousness the typist realized she had been hypnotized. She was so dis-

tressed to find she could not remember what had happened that she refused any further treatment. She told Dr. Oswald she was frightened of him... He clapped his hands. Almost immediately she became glassy-eyed and said her mind was "going queer"...After two more hand-claps she went into a trance. While hypnotized she agreed to continue the treatment, which was eventually successful.

"This case supports the view that if such a person can once be hypnotized, then subsequent rehypnosis can be achieved despite strongly motivated refusal by the subject," Dr. Oswald writes. "This would probably be true with an unscrupulous hypnotist." (Pincher, Daily Express, 1959)

Conditioned Induction

The more **conditioning (training)** that a subject has, the **faster** that subject enters trance. In fact, one way to estimate a person's extent of past hypnotic conditioning is by his speed of response to induction.¹ More speed indicates more past hypnotic training. A first induction, on the other hand, may take a long time. Some operators may spend several hours (or more) on a first induction.

1. It is a curious fact that repeated induction in animals decreases their hypnotic susceptibility, but in humans increases it.



A person's resistance to induction is worn down gradually. Induction failure, after one attempt, does not necessarily mean that subject cannot be hypnotized. Repeated exposures to induction increase susceptibility, even if no trance has yet taken place. Persons who did not, at first, succumb tend to do so, sooner or later, if exposures to induction efforts continue.

Moll achieved somnambulism in several clients after as many as forty induction attempts. Marcuse cited a case in which it took a total of three-hundred hours of induction effort for him to get the subject hypnotized. Bramwell did experiments in which subjects, after over a hundred failed induction attempts, turned out to be deeply hypnotizable. A Berlin hypnotist named Vogt finally induced deep hypnosis in one subject after about seven-hundred previous, failed, attempts.

The amount of time between induction efforts is unimportant. Any stage of hypnosis which has already been induced easily can be reinstated. Apparent "failure" can even help a hypnotist, for, if the targeted subject becomes confident that he is immune, he may lower his resistance. Once deep trance is achieved, induction time for subsequent inductions becomes short because the subject has learned where to go mentally, and how to go there.

The subject who has been hypnotized many times inevitably develops certain automatic or conditioned reflexes, by which a shortcut is established to the hypnotic state. In such an individual the process of induction has lost the very features which are its essence in an untrained subject. (Kubie and Margolin, "The Process of Hypnotism and the Nature of the Hypnotic State")

After the first induction is accomplished, however long that takes, and the **posthypnotic cue for reinduction** is implanted, the "reinduction of hypnosis is a matter of only a few seconds or a few minutes." (Moss, p. 316) Marcuse said induction cued by posthypnotic suggestion can reduce induction time "to a matter of seconds" (p. 63).

M.H. Erickson saw **reinduction by a posthypnotic cue** as the key to training and control: "...the posthypnotic performance provides an opportunity to secure a trance state quickly and unexpectedly. (**"Nature of Post-Hypnotic Behavior"**) In a fully-trained subject, the lengthy initial induction process has been replaced by an unconscious reflex that gives instant obedience to a perceived posthypnotic induction cue.

L. R. Wolberg suggested the posthypnotic induction cue for rehypnosis of his patients with the following patter:

You are deeply asleep at the present time...From now on it will not be necessary to go through the process of hypnotizing you...When I give you a certain signal like...[tapping the desk, hand on the shoulder, or any other clearly defined stimulation which is not likely to occur in ordinary social intercourse]...you will very easily and immediately enter into a state of sleep as deep as the one you are in now. (Wolberg, 1948, p. 159)

Once the subject's unconscious has learned to what depth it must shift and the reinduction cue which triggers that shift, all the hypnotist has to do is produce the designated cue. The subject is **trained**. Once a trained hypnotic subject, always a trained hypnotic subject.

Even though an hour or two, or many hours, might have been required to make the subject completely somnambulistic in the first place, afterwards all this is changed, especially if...he is told when in the hypnotic state that on succeeding occasions he will go immediately into a deep hypnotic state in a few seconds whenever he is to be rehypnotized. All this is a familiar matter in the field of practical hypnosis. Unless something is done to prevent it, the once-deeply-hypnotized subject may be quickly rehypnotized by anyone for whom he will serve as a subject. There is consequently the danger among students that a good subject, seldom realizing how good a subject he really is, may allow fellow-students who know little about the seriousness of hypnosis to work on him. (Wells, "Experiments in the Hypnotic Production of Crime," p. 69)

In the trained subject, reinduction is nearly instant. It requires as little as one second for the subject's conditioned reflex to respond to perception of the posthypnotic induction cue.

Lengthy, detailed, and complicated induction methods are generally used when a subject is first learning to be hypnotized. Such complex inductions not only become unnecessary as experience with the hypnotic state grows, but are cumbersome. (Kelly and Kelly, Hypnosis, p. 24)

Specific posthypnotic suggestions to enter hypnosis more rapidly the next time and to go deeper also affect the rate of descent and depth. Any suggested cue is also long-term, unless removed by a counter-suggestion—done by an outsider or managed by the subject's internal resistance. There are many accounts of a hypnotist seeing somebody to whom he gave a posthypnotic induction cue one, ten, or twenty years ago, testing, and discovering the cue still works.

Forced Reinduction

During their pre-induction talks, hypnotists often declare that nobody can be hypnotized against his will. Is that true? Partly. If a resistant subject, facing an induction attempt which is not disguised and only involves Type 1 induction methods, chooses (and is permitted) to walk away from the induction effort, the statement is true.

Once a subject has been inducted, trained, and assigned a posthypnotic induction cue, however, it is an entirely different matter. (Or if the induction is by chemical or electronic means.)

Though the first attempt to hypnotize a subject frequently fails, repeated attempts are likely to succeed, and, once a subject has been hypnotized, the length of time needed to send him into trance will rapidly decrease with subsequent repetitions of the experience. When a subject has become accustomed to be hypnotized, he may be put into trance without realizing what is happening.... Though many workers have insisted that the patient's cooperation is essential, the fact is that subjects can be hypnotized against their will. (Sargant, *The Mind Possessed*, p. 30)

In "Ability to Resist Artificially Induced Dissociation [hypnosis]" Wells reported testing whether a conditioned subject could resist unwanted induction. Watkins, Brenman, and Young did similar experiments.¹ With one exception, they all obtained the same results: trained subjects could not resist reinduction. (The one successful resister was a Methodist minister.) For most subjects, once the shift to trance has become fast and smooth and trance has become of somnambulist depth, obedience to the induction cue is a conditioned response. It is an **unconscious reflex**. The reflex is instant and, perhaps, also amnesic. An **unconscious conditioned reflex** usually is dominant over a **conscious will** to resist. The subject does not say NO to induction any more, because he does not know consciously to what to say NO, or when to say NO to it.

Length of Time in Trance

How long can a person can stay in trance? The suggestion at the end of a session to "wake up" doesn't necessarily mean that suggestibility is over. It means that the subject has obeyed the operator's suggestion to now act awake. The command to wake up is a posthypnotic suggestion to act awake! You can be in lowered consciousness and not know it. Usually, however, trance wears off completely with a good night's sleep. (That's the well-known "morning after" assessment.)

A lengthy trance can also be suggested under hypnosis. M. H. Erickson said a doctor's secretary

*...told me she had a personal problem which she was not able to think through and wanted me to put her in a trance and tell her to think through her problem. I was innocent and naive, so I did just that. She stayed in a trance for one whole week, discharging her duties for the doctor. He recognized that she was in a trance. (M. H. Erickson in Estabrooks, *Current Problems*, p. 263)*

Cook wrote of trances that lasted for months among certain religious persons in the Orient (p. 244). A friend told me about a wealthy woman convert to the Sufi religion (a Muslim denomination which induces very deep trances in its religious services). She developed a state in which she "walked around spaced all the time." Bergen kept Palle in such a constant state of trance that it resembled a psychotic condition. A state of near constant trance is called **vigilambulism**.

*...[it is] a peculiar state of permanent half-somnambulism of persons who had been repeatedly hypnotized but who had not been submitted to the regular maneuvers that would terminate their magnetic sleep. Such people seem to be fully awake, but are liable to receive suggestions from anyone who will talk to them. (Ellenberger, *The Discovery of the Unconscious*, p. 118)*

SELF-HYPNOSIS

"Every day, in every way, I'm getting better and better."

- Emile Coue

"All induction is self-induction," hypnotists often proclaim. They like that slogan because it shifts responsibility for the trance condition and its outcomes from the hypnotist to the subject. In the case of **self-hypnosis**, however, the main impetus for induction really does come from

the subject. The operator-controlled state of "hypnosis" is the same physiologically as "self-hypnosis." In self-hypnosis, however, there is no operator actively inducing and managing the subject's trance.

1. Watkins said that, if the hypnotic subject is not giving automatic responses, he is not in the somnambulant condition.



However, the self-induced trance usually starts with a persuasive idea from an outside source, and **instruction**. A tape, video, book, an example, or a live operator teaches the subject how to go deliberately into the alpha/theta brain wave state. Once the student learns “where” to go and how to get there, it is easy for most persons. Any person who can be hypnotized by another person can hypnotize himself. The ability to self-induct may be given instantly by the teaching operator, as a posthypnotic suggestion, or it may

be learned more gradually, a conditioning process. In that case, the subject internalizes the training and soon can run the mental routine without an outside prompt.

Self-hypnosis tends to be a self-limited hypnosis. You go down so far, but no farther. You pop back up from that state of deep concentration any time you want or need to—when the baby cries, when there is a knock on the door.



WHEN A PERSON LEARNS A ROUTINE TO LOWER CONSCIOUSNESS FROM ANY SOURCE, HE TENDS TO ABSORB OTHER PROGRAMMING FROM THAT SOURCE, AND TO DEVELOP RAPPORT WITH THE TEACHER. IN ANY DEEP TRANCE, HE WILL FEEL RAPPORT (AN ATTITUDE OF EXAGGERATED RESPECT) TOWARD PERSONAS AND/OR IDEAS SUGGESTED TO, OR PRODUCED BY, HIS UNCONSCIOUS.

Bernheim and Coue Start It

Any induction method that can be used by an operator can also be used for self-induction. Self-induced trance has been around as far back as we have records. Bernheim wrote about self-hypnosis and the related practice of **positive self-suggestion**, in 1886, in *Suggestive Therapeutics*. However, it was Emile Coue’s 1923 book, *How to Practice Suggestion and Autosuggestion*, that popularized Bernheim’s ideas. It was the first practical manual for self-hypnosis. Coue taught self-induction methods that anybody could use: staring at objects (such as your eyes in the mirror) or talking to yourself, repeating positive statements. Coue taught people to repeat the desired goal to themselves over and over: “Every day, in every way, I’m getting better and better.” Ever since Coue, self-hypnosis has been intermittently popular.

Nancy School Therapy Principles—

Liebeault and Bernheim lived in Nancy, a city in France. They gave free hypnotic treatments, taught the normality of trance, and fought vigorously and lifelong for the **rights of hypnotic subjects**. A generation later, Coue was running a corner drugstore in Nancy and studying hypnosis. After he opened a free clinic, Coue’s teachings were called the “new Nancy school.” Coue began the **client-centered** style of **hypnotherapy**, letting the direction and method be set by the client rather than be dictated by the therapist. He also developed the method of self-hypnosis which begins with a hypnotist trainer who establishes induction conditioning, then teaches the subject to take over, using that conditioning for self-help. Other people followed his example and also opened free clinics, called “Coue Institutes.”

As did most later purveyors of pop, group, religious, and self-hypnosis, Coue avoided the word “hypnosis.” In the sense that the H word means an **operator-controlled** trance, however, Coue was dealing with something different. In self-hypnosis, the cure came, not from a hypnotist, but from the patient’s effort to reprogram his own mind by positive thinking. Coue made clear the power of words to influence the unconscious mind, the power of self acting on self,

Nowadays, instruction for self-hypnosis is a huge industry: motivational tapes, videos, and books. Coue would have been astonished at the array of contemplation religions, self-hypnosis manuals, and books on how to think yourself well, but he would have understood the principle on which all are based. They all continue his teachings of positive **autosuggestion**.

For the consumer, however, the best method is to exercise **faith (positive thinking)** in a context which gives God the glory.

Biofeedback

Doctors used to believe that people could not control any part of their **autonomic nervous system**. Autonomic functions are unconscious and **reflexive** in nature. State of consciousness, background thinking, habitual choices, salivary output, digestion, heart rate, and respiration rate are autonomic functions. Then doctors learned that a person in trance can directly control his physiological functions. **Biofeedback training** puts an unconscious function under conscious control in order to improve the

body's physiological state.

Biofeedback trains persons with health problems, by means of trance, to monitor and improve their **involuntary functions**, their physiological state. They can learn to lower their blood pressure, slow their heart rate, and contract their pupils. Using biofeedback techniques, people have also learned to control the rate of blood flow to their head or hands (that can stop or prevent migraine headache), to control or stop bleeding, and to adjust numerous other personal physiological states.

The trance skills are first taught by a trainer, than utilized independently by the subject. The training process requires both trance-level focused mind and information about the subject's internal physiology. That information is the "biofeedback." **Feedback** makes it possible for the subject's focused mind to learn to recognize, and therefore control, its "bio" states.

*...body functions become voluntary in direct proportion to the amount of information feedback the subject gets from each past response of his body before his next response occurs; it is as if will and knowledge were reducible to the same thing. (London, **Behavior Control**, p. 96)*

Biofeedback began with M. I. Lisina, a Russian biofeedback researcher. She was trying to teach subjects to constrict or dilate blood vessels in response to electric shocks. Because they were being shocked, the subjects were highly motivated to learn. Unfortunately, she did not allow them to see what their bodies were doing in response to their efforts to avoid the shocks, so they could not learn anything.

Then she took them through the conditioning routine (with the shocks) again. This time, she let them see the continual machine printouts of their vascular ups and downs, and she told them what she wanted them to learn to do. The subjects all quickly learned to control their blood vessel diameters!

What Lisina learned in that experiment is now the basis of all biofeedback training. The subject is told what the goal is, and he is always provided with some way to observe his body's responses. Biofeedback training combines trance concentration with digital display of internal body function. Biofeedbackers learn to communicate to their bodies what they want by entering trance and **visualizing** the wanted activity. People fighting cancer by visualization in trance do the same thing. Test after test has shown that what you strongly visualize in a deep trance state will happen in your body.

Modern biofeedback training is aided by electrical monitors that can detect, amplify, and display the behavior of any internal body functions. One monitoring device measures temperature and heart rate. Another measures blood pressure. Thus, a person can learn to have a slower, or more regular, heart beat and a lower blood pressure. Some instruments monitor sweat gland activity (lie detectors also measure that), and muscle tension. Muscle tension monitors can help patients overcome the underlying cause of spastic colon disorders, tension headaches, etc. There is even a tiny, swallowable monitor for stomach acid which enables patients to learn to reduce its flow and prevent ulcers. Another type of monitor gives a readout of brain wave pattern so clients can learn to go in and out of alpha or theta at will.

Kamiya taught hypnotic subjects to control their **alpha** (hypnoidal brainwave) production by means of biofeedback. Kamiya's trainees learned either to increase, or suppress, their alpha brain waves. To teach control of **state of consciousness**, his subjects were hooked up to an EEG. Whenever the brain wave type appeared that the experimenter wanted, a tone sounded. Soon, the student learned to enter that condition at will. The more Kamiya's subjects practiced, the better they became at shifting from beta into alpha, or vice versa.

Even animals can be taught to control autonomic functions. Dr. Neal E. Miller (**Rockefeller University**) taught lab animals using rewards and punishments. His rat learned to make one ear blush and the other blanch.

The highest degree of biological self-management known has been achieved by monks from Tibet, India, and Sri Lanka who develop autonomic self-control in rigorous deep trance practice, and call it religion. Tibetan monks, since about 150 BC, have trained themselves to achieve profound trance and to apply trance abilities to various purposes. (Those abilities did not protect their country from conquest, but have become a great market item for refugees.)

A French woman who lived among Tibetan monks in the 1930s described a "final exam" for trainees. The goal was to generate extraordinary internal heat, a feat of conscious control of an autonomic body function:

The neophytes sit on the ground, cross-legged and naked. Sheets are dipped in the icy water, each man wraps himself in one of them and must dry it on his body. As soon as the sheet has become dry, it is again dipped in the water and placed on the novice's body to be dried as before....until day-break. Then he who has dried the largest number of sheets is acknowledged the winner of the competition.



Besides drying wet sheets on one's body, there exist various other tests to ascertain the degree of heat which the neophyte is able to radiate. One of these tests consists in sitting in the snow. The quantity of snow melted under the man and the distance at which it melts around him are taken as measures of his ability. (Alexandra David-Neely, *Magic and Mystery of Tibet*, Chapter VI)

A swami from India once visited the Menninger clinic and demonstrated that he could create any type EEG wave which they requested—once he figured out what “theta,” “alpha,” “beta,” and “delta” meant in his native language. He could control the two arteries to the hand, making “one half of his right palm 10 degrees warmer than the other half.” He could change his heart beat:

*First he made his heart slow down from seventy-five to fifty beats per minute. Then, suddenly, he produced an atrial flutter, during which his heart beat so rapidly that it could no longer pump blood...He maintained this state for seventeen seconds, apparently unharmed, and immediately afterward went off to lecture. “My heart is my toy,” he said. (Pines, *The Brain Changers*, p. 76)*

Susceptibility

Hypnosis...can be used for both good and evil...All people are prone to being molded by outside influence to some extent. The small group of highly hypnotizable people, when put in the hands of unscrupulous individuals, are even more vulnerable.

- Spiegel, *Introduction, Bain, The Control of Candy Jones*, pp. x-xi

At a dinner party, years ago, a man told me that he used to belong to a hypnosis club in Canada. All the men in that club hypnotized their wives. I asked, “Did your wife ever hypnotize you?” “Oh no,” he said, “I think there are just some kinds of persons who can be hypnotized, and some who can't.”

Was he right? Are there “just some kinds of persons who can be hypnotized and some who can't”? Well, yes and no.

Inductability depends on hereditary **susceptibility**, plus **training**. Most people have some inherited ability to lower consciousness. **Hypnotic susceptibility** means the

innate capacity to experience hypnosis quickly, easily, and deeply. **Hypnotic ability** is a modern euphemism which means exactly the same thing. As a result of genetic and personality differences, people differ in susceptibility. In most people, training will create additional, learned ability.

Screening for Susceptibility

When stage hypnotists send some volunteers back to their seats, they are culling out less susceptible persons. Some of their rejects also could have been deeply hypnotized—but not in five minutes. A researcher who specialized in techniques applicable to criminal hypnosis wrote:

...I have ceased to be much interested in trying to

induce slight hypnotic phenomena in large numbers of subjects, but I have become interested almost exclusively in the upper 20 percent, and especially in the upper 10 or even 5 percent of subjects, in whom the most extreme phenomena can be brought about, including criminal acts contrary to the moral natures of non-criminal subjects. (Wells, "Experiments in Waking Hypnosis for Instructional Purposes," note to reprinted edition)

Projective tests such as visualizations, the Ror-

schach, and the TAT can be used to predict susceptibility. Vivid imagery and strong imagination predict hypnotizability. The most accurate susceptibility tests in the public sector, however, measure response to a standardized induction routine. This type of test began as a depth measure, then became used as a predictor of hypnotizability. A person given a **hypnosis susceptibility test** is being simultaneously tested and hypnotized. The subject's score is based on the number of suggestions obeyed, with the most points given for the most difficult suggestions (amnesia and negative hallucination).¹

An Anthropological View of Trance

Erica Bourguignon reviewed the 488 cultural societies (mostly pre-industrial and tribal) referenced in the *Ethnographic Atlas*. She looked for evidence of **altered states of consciousness**:

... [of] 488 societies, in all parts of the world...437, or 90%, are reported to have one or more institutionalized, culturally patterned forms of altered states of consciousness... (Bourguignon, pp. 9-10)

She learned that individuals with trance capacity existed in **all** those societies. And most societies had scenarios in which the appearance—and utilization—of trance phenomena were accepted.

Altered states of consciousness ...appear in a variety of forms among the peoples of the world. Often, they are institutionalized and culturally patterned and utilized in specific ways... (Ibid., p. 3)

Bourguignon divided the worldwide experience of trance phenomena into two types. One was an individual event, a passive and private trance involving a dream, hallucination, or vision. The other type was a public procedure, active in **performance**, conveying messages from, or taking the role of, an unseen presence. She called that second type **possession trance** or the **impersonation of spirits**—"the acting out of their speech or behavior."² She noted that the possession trance did not involve sensory hallucinations and was sometimes followed by amnesia. (p. 12)

Genetic Susceptibility Spectrum—Some persons, called **refractory**, don't respond at all to inductive techniques. Some enter only a light **hypnoid** state. At the other extreme of the susceptibility spectrum, the most susceptible persons go quickly and easily into somnambulism, the deepest trance state. The first scientific study of the **range of susceptibilities** was done by Hull, in 1933. He gave a standardized hypnotic induction to numerous subjects and rated them by depth reached:

Refractory	10.48 %
Light Hypnosis	32.68 %
Deep Hypnosis	34.58 %
Somnambulism	22.26 %

In a similar experiment, years later, LeCron and Bordeaux found a similar distribution:

Uninfluenced	5 %
Hypnoidal	10 %
Light Trance	25 %
Medium Trance	35 %
Somnambulism	25 %

Factors Associated with High Susceptibility

Susceptibility does not result from character weakness: "Native strength or weakness of 'will' have absolutely nothing to do with the matter." (William James *The Principles of Psychology*, p. 595) Burgess reported that, of

1. It is probable that both the military and secret agencies now can test instantly both susceptibility and trance depth with electronic equipment.
 2. Whether you call it **possession** or **impersonation** depends on whether or not you believe the spirit is real.



250 patients treated by seven “hypnodontists,” all but eleven were hypnotized on the the first try. Only five never could be hypnotized enough for suggested anesthesia during dental work. He speculated that the high induction rate was because those private dental patients were:

More cultured, higher in intelligence, well-organized personalities...[which] acts as an automatic screening process so that the clientele of the dentists is largely made up of people more susceptible to the induction of hypnosis. (Burgess, “Hypnosis in Dentistry,” p. 325)

A recent author, however, corrected what he considers an “overemphasis” on

...the role intelligence plays as a factor of susceptibility. If other things such as undue curiosity, fears, and mistrust are absent or removed, then 90 percent or more of all people are hypnotizable. Obviously this faction of the general populace is not comprised of highly intelligent people. (Hughes, p. 26)

In a 1974 article, Spiegel listed characteristics of the most hypnotizable persons:

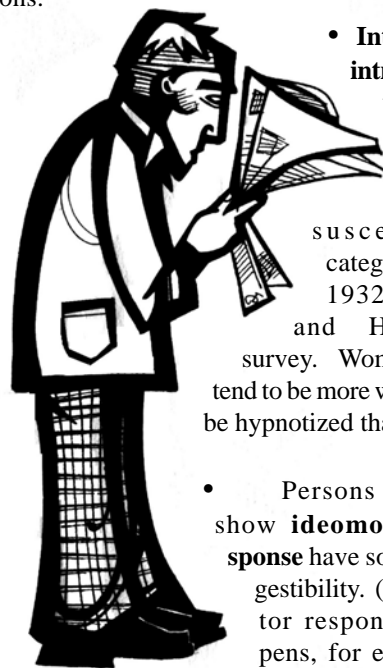
...readiness to trust; a relative suspension of critical judgment; an ease of affiliation with new experiences; a telescoped time sense; an easy acceptance of logical in-



congruities; an excellent memory; a capacity for intense concentration; an overall tractability, and, paradoxically, a rigid core of private beliefs. (Spiegel, International Journal of Clinical and Experimental Hypnosis)

Josephine Hilgard’s 1970 book, *Personality and Hypnosis*, lists many signs of hypnotizability. There are also dozens of articles on predicting hypnotizability in subjects without using a recognizable induction. Here follows a list of generally recognized markers for hypnotically susceptible persons:

- People who had an **imaginary playmate** in childhood,¹ an **hysteric** tendency (**obsessive** personalities are the most difficult to hypnotize), or who have multiple personality disorder.
- A person, who volunteers for a hypnosis **stage** demonstration, and then reveals somnambulatory capacity, is obviously identifiable as susceptible.
- **Children** are, as a category, typically more susceptible to hypnosis than adults. Children begin to be susceptible after they have learned language (which is conditioning to words). Children between 8 and 12 are usually the most susceptible age. (The Burgess survey, however, found teenagers most responsive.) Some studies find elderly people the hardest to hypnotize, but there are individual exceptions.



• **Intelligent introverted women** were the most susceptible category in a 1932 Davis and Husband survey. Women also tend to be more willing to be hypnotized than men.

• Persons who show **ideomotor response** have some suggestibility. (Ideomotor response happens, for example,

1. The Quest Program is public school elementary training involving a series of deep trance visualizations. By means of this guided imagery, and specific suggestions, the child is led to dissociate, create an imaginary associate, and then develop it. All such children will then meet the criteria for having “an imaginary playmate.”

when the thud of a boxer's fist into his opponent's jaw causes a watcher to flinch.) Conversation with a pendulum ("yes," "no," "maybe") involves ideomotor responses. The subject's unconscious is making those responses.

- A person who has an established (or anticipated) **positive relationship** with the hypnotist, such as in love with, or in awe of him) will be more susceptible to hypnosis by that particular hypnotist than one who lacks those feelings.
- Persons who have a capacity to love and to **love deeply**, who "fall hard," and persons with the "tendency to fixate love-objects powerfully, customarily are easily inducted into profound hypnosis." (Schilder and Kauders, p. 39)
- Greater susceptibility is associated with higher intelligence and better adaptation to deprivation. To be suggestible is to be able to **learn easily**. Being able to learn quickly helps in survival. Humans have a built-in tendency to conform to any situation in which they are placed.

- **Ability to visualize** is a strong marker. Persons who use mental imagery a lot are generally hypnotizable. The more vividly you visualize, the more susceptible you are.
- The most hypnotically susceptible persons tend to be imaginative, right-brained, and creative. **Imagination** is your inherited and/or developed ability to suppress and inhibit your conscious mind and let your unconscious (your "imagination") lead.
- A person who becomes totally involved in an activity—such as fiction reading (especially science fiction), theater, prayer or worship—to the point of **ignoring distractions**, is probably susceptible.
- Persons who are attracted to **adventures**, whether of body or mind, are likely to be hypnotizable.
- The best hypnotic subjects have the **strongest egos**. They have a firm grip on **reality** when focused on that rather than on imagining.

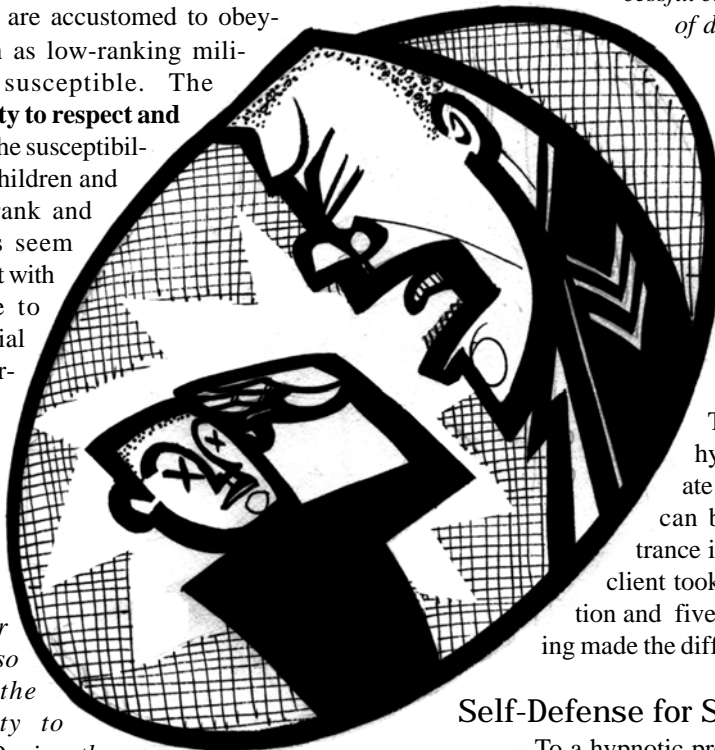




psychedelic drugs (LSD, marijuana) are more attracted to, and more susceptible to, non-drug trance inductions than people who have never used such drugs.

- The more **experience** a person has with trance, the more susceptible they are.¹
- Persons who are accustomed to obeying orders—such as low-ranking military—are more susceptible. The greater the **capacity to respect and obey**, the greater the susceptibility tends to be. Children and teenagers and “rank and file” of all sorts seem more likely to react with blind obedience to persons with social symbols of leadership.

*Anything calculated to enhance the authority of the hypnotizer or suggester also enhances the susceptibility to hypnosis....During the war, officers were as a rule harder to hypnotize than privates...Persons not as a rule accustomed to recognizing authority of any kind are harder to hypnotize...hypnosis is an attitude of subordination, an attitude of subjection. (Schilder and Kauders, *Hypnosis*, p. 39)*



Induction of Retarded and Psychotic

Persons who are **retarded**, or **mentally ill**, tend to be at the low end of the susceptibility spectrum. A **psychotic** is difficult to hypnotize. Any schizophrenic who can be hypnotized probably has only a mild case of the disease. In 1889, August Voisin attempted to hypnotize unwilling psychotic patients:

The patient, either held by assistants or placed in a straitjacket, had his eyes kept open, and was compelled to look at the light of a magnesium lamp or at Voisin's fingers. If necessary, the process was continued for three hours; suggestions meanwhile being made. The patients, who at first usually struggled, raved and spat in the operator's face, eventually became exhausted and, in successful cases, passed into a condition of deep sleep. (Bramwell, p. 43)

Even after that sustained effort, however, Voison only managed to induce deep trance in ten percent of those patients.

Training for Susceptibility

Much research has been done on methods to increase a subject's susceptibility. Training can maximize inherited hypnotic ability. It can even create ability. The process of **training** can be as simple as repeating the trance induction. In a dental study, one client took fifteen minutes for first induction and five minutes for the second. Training made the difference.

Self-Defense for Susceptible Persons

To a hypnotic predator, very susceptible persons are prey, to be found, if possible, and captured and exploited. So, if you are quite susceptible, exercise reasonable caution about exposure to hypnotic situations. (You have the option of getting a deep-level suggestion from a trusted hypnotist to seal you against subliminal suggestion and unwanted inductions.)

If you find yourself feeling the fascination of “rapport” toward a suspected hypnotic predator and wish to resist, “in future avoid such a man, whose intentions I can now see through, and shall never allow myself to remain alone with him.” (**Hammerschlag, p. 30**) However, rapport grows just as well in a group as alone, and a preset induction cue works under any circumstances. I would amend that to read “shall never allow myself to be in his or her presence again.”

1. The more a person has experienced deep trance, the more he or she tends to seek it. It has an addictive aspect. The deeper the trance was, the more they are likely to return for more.

Depth

Depth Training



Depth Scales



Depth Characteristics

In this condition of hypnosis the patient forgets all that has happened during the trance, and this lack of memory, or amnesia, is the characteristic feature of this...the deepest phase of hypnotic influence [where]...the more striking psychological and physiological experiments are performed. About 25 percent of hypnotizable people go into a somnambulistic trance.

Magonet, 1957, p. 22

Depth Training

An operator, who is developing a subject, puts that subject through four different phases: 1) **induction**, 2) **deepening**, 3) **training**, and 4) **treatment/operations** (the giving of suggestions). The first and second phases both involve deepening. Whatever further inhibits the conscious mind, shifting it from faster and less **synchronized** brain waves toward slower and more synchronized brain waves (short of real sleep) is movement toward a greater **depth of trance**. People vary in genetic capacity for hypnotic induction and depth, but training makes most of them go deeper.

Training to Go Deeper

Depth training begins during the first session with the suggestion to **go deeper the next time**. That suggestion will be repeated until training is complete. The more time a person spends under hypnosis, the more times that person is hypnotized, the more actions (mental or physical) which a person performs at the hypnotist's suggestion, and the more that person is "trained," the deeper he goes.

Training for susceptibility is the same process as **training for depth**. Training, in and of itself (no drugs), raises the percentage of somnambulists from the normal 20-25 %, to over 50%, and maybe even 75%. Narcohypnotic induction, plus training, may increase that to as much as 95%, or more.

Depth training may be for any purpose. Anesthe-



sia requires deep trance. A hypnodontist wants “the deepest possible trance...which may require two or more sessions.” (Burgess, p. 333). If the operator wants an extreme degree of control, training lasts until the subject:

- 1) Instantly shifts from awake to deep trance on cue.
- 2) Accepts commands for total amnesia (somnambulism)
- 3) Obeys posthypnotic suggestions in a complete, automatic way.

Narcohypnotist Lindner considered training subjects for deep trance to be a necessary preliminary to **hypnoanalysis**. He said a week would do it, if the hypnotist had the advantage of **drug-induced depth**:

[After learning to make] ...a rapid passage from the waking state to sleep, patients are familiarized with hypnosis and its functions...By the end of this preliminary period (to which no more than a week is given) this unique relationship [hypnotist-subject] is in a state of readiness for exploitation. The close of the first week then finds the patient adept at passing confidently from a waking to a sleeping state...on the merest suggestion of the clinician...Testing for depth of trance is simple but most important...it is often necessary to achieve a decisive penetration (viewing the trance state as a vertical phenomenon). (Lindner, *Rebel Without a Cause*, pp. 22-23)

Hypnoanalyst L. R. Wolberg also trained his subjects for somnambulist depth:

...to get the patient to a point where he is able to open his eyes in a trance without awakening, to develop amnesia, and finally to respond to complicated posthypnotic suggestions. (*Hypnoanalysis*, p. 51)

Training to Maintain a Specified Depth

Normally, depth of trance fluctuates. Any hypnotized person, unless trained otherwise, tends to yo-yo up and down in depth throughout the trance. Normally, a subject can wake herself up from a bad dream—or a bad trance, if something is happening under trance that she doesn’t like. Training usually seeks to overturn those two natural defenses of depth fluctuation and self-waking. A trained subject has learned to go down either as far as possible, or to a designated depth of consciousness, and to maintain that depth. That trained subject also does not wake up until cued to do so by the operator.

Deepening Techniques

Here are the main deepening techniques:

- Any **prolonged visualization deepens**. The subject may be told to visualize himself riding down an escalator, or walking down stairs, or counting backwards, or walking backwards. The theme will be down, Down, DOWN.
- **Repeated suggestions** of “deeper” or “relax” deepen trance: “You are going deeper and deeper, deeper and deeper...” Or “heavy, so heavy.” Or “drowsy and relaxed...just let yourself relax...let yourself go.” Or “let your muscles relax...now your facial muscles...relax.” Or, monotonous, repeated “sleep” suggestions.
- A **pumper command** can be used to deepen: “With each breath, you will go deeper.”
- **Obedience exercises** deepen: the more you obey, whether visualizing something new, or raising your arm, or lowering it, etc., the deeper you go. If a subject accepted a suggestion to see his breath coming out (a positive hallucination), or that he cannot open his eyes (catatonia), or that his right arm is becoming weightless and slowly rising—he probably also went deeper.
- **Time** is a factor. Hypnotists who work with a subject for hours at a time, and who have done hundreds of inductions of that same subject, normally achieve far greater depths than they would in a first-time, casual experiment.
 - 1) Length of time spent being inducted deepens—such as **repeating the same induction** pater again, and again, and again. Old-time mesmerists often inducted for two to five hours. Esdaile (who did hundreds of complex surgeries under hypnosis) did even longer inductions.
 - 2) An increased total number of hours of time spent in training under various hypnoses deepens.
 - 3) An increased total number of times hypnotized deepens. Repeated awakenings from trance and **re-inductions** into trance result in deeper trance states.
- **Narcohypnosis** deepens.

Depth Scales

[In the light-medium stage]...the subject has progressed beyond the point of simple cooperation...he does things he cannot stop himself from doing unless he interrupts the entire process....

- Christenson, "Dynamics in Hypnotic Induction," in LeCron (ed), *Experimental Hypnosis*, p. 33

Hypnotists usually measure depth by **performance scales**. A susceptibility test is an induction with a **depth scale** and **standardized scoring**. Depth scales are typically divided into some number of stages, each identified by its characteristic behaviors. But, in general, the deeper you go

- the more **suggestible** you are
- the more vivid your **imagery** (hallucination)
- the greater your capacity for **fantasy** and **fabrication**
- the greater your capacity for authentic **regression**
- the greater your ability to carry out focused **problem solving**,
- the more you may **lose personal initiative** and turn over your brain's decision-making and planning capabilities to the operator
- the poorer your **reality-testing**, the more likely you are to accept operator suggestions or self-generated fantasies as fact.
- the better you can **perceive extrasensory stimuli** (those which normally are below the threshold of conscious perception).

The preceding list adds up to more of just about anything. The bottom line is how your trance potential is used. It may generate truer, or falser, information. It can make you stronger, or weaker. It can help you to be more in touch with reality, more alert and able to cope—or it can cause you to be less in touch with reality, and less able to cope.

The **capacity for trance** is not, in itself, evil. It may, however, be used in a misguided, or even evil, way. It may be used by an operator for evil purposes.

Number of Depth Stages

Researchers have been developing (and redeveloping) **depth scales** since Liebeault. Individuals vary so much in hypnotic performance that scales must be based on averages. Many researchers have attempted to chart the characteristic depths of hypnosis and to describe the features of each depth. The number of old-time named depth stages ranged from Moll's two stages to Pavlov's twelve. Liebeault described six degrees of trance depth which he grouped into three main stages: light, medium, and deep. His associate, Bernheim, further divided the induction continuum into nine steps between fully awake and fully asleep.

Two Stages: Light and Somnambulist—

The two-stage scale goes back to 1889 and a Frenchman named Moll. He divided hypnosis into just two stages: **light** and **deep**. He said that light hypnosis affects will, but not memory. He said that deep hypnosis (somnambulism) is reached when a natural amnesia (now called dissociation) occurs, and the subject finds it difficult to remember what happened during the trance.

In the 1940s, Christenson used a three-depth scale: 1) nonsusceptible, 2) various degrees of light trance, and 3) somnambulist trance.

Since only two of his stages were trance depths, this actually revived the two-depth scale. From the military point of view, a two-stage depth analysis is most practical. Either the subject

Dissociation

Any trance state involves some degree of **dissociation**. Hypnosis is a deliberately-induced condition of dissociation. The subject's conscious mind is displaced by some part of his unconscious. That displacement is called "dissociation." Degrees of dissociation correspond to depths of trance.

The transition from light to deep trance in a two-stage scale, or from medium to deep on a three-stage scale, is placed at the point of dissociation. After dissociation begins, your conscious memory of what happened becomes partial, hazy, or completely absent. In this very suggestible condition, however, if the hypnotist suggests complete remembering, the subject will remember. On the other hand, if the hypnotist suggests complete forgetting, that also will happen.



can be made into an unknowing hypnoprogrammed person (amnesic and automatic), or he cannot (non-susceptible or light depth). He defined the “light” stage as beginning at the point of obedience to suggestion:

The point of transition between simple waking suggestion and light hypnotic phenomena may be placed provisionally at the point where the subject displays either a reluctance to resist or an inability to resist despite evident efforts...the distinction is evident in most individuals when they are first hypnotized. (Christenson, “Dynamics in Hypnotic Induction,” p. 34)

To divide his “light” depth from his “sommnambulist,” he used two definitive signs: **spontaneous dissociation amnesia**, and **waking hypnosis**. The deep stage was a “full sommambulistic reaction” with amnesia and significant physiological involvement.

Three Stages: Slight, Deep, and Sommambulist—Bramwell divided the trance spectrum into three depth stages: slight, deep, and sommambulist. Like the others, he defined sommambulism as the depth characterized by natural amnesia. In 1902, August Forel published a similar three-stage depth analysis which was adopted by many writers after him.

- 1) **Somnolence**: a very light trance; subject **can resist suggestions** and open his eyes.
- 2) Light slumber or **hypotaxis**: subject cannot open his eyes (catalepsy), and is likely to comply with some suggestions, but will not be amnesic.
- 3) Profound sleep or **sommambulism**: natural post-hypnotic amnesia; difficult suggestions are obeyed.

Stages Subdivided into Degrees—Cook divided the major stages of trance depth into seven substages, which he called **degrees**. His Fourth Degree began the Sommambulist Stages: “Absolute Obedience...subject completely loses his individuality and is a mere automaton in the hands of the operator...and when awakened he will have no recollection” (Cook, p. 95). His Sixth Degree was “Catalepsy...muscular rigidity.” The Seventh was “Lethargy,” his name for the state in which respiration and heart rate can be controlled by suggestion (now called **coma**, or **profound trance**).

Katkov’s depth analysis had three stages, each with three degrees. He placed sommambulism in the Third Stage, Second Degree: subject communicates only with the hypnotist, can have positive hallucinations of any sense (but eyes must be closed), and may show partial spontaneous amnesias. His Third Stage, Third Degree was complete sommambulism: the subject’s conscious mind is fully displaced; he passively awaits suggestions from the hypnotist; all deep trance phenomena are possible, including negative hallucinations, total amnesias (spontaneous or suggested), and age regression.

LeCron and Bordeaux followed Cook with a very detailed, sound analysis of phenomena associated with various depths of trance. The pair divided their scale into degrees ranging from 0, for **insusceptible** (no suggestions accepted or physical signs of trance observed) to a maximum of 50, the “**Stuporous condition** in which all spontaneous activity is inhibited.”¹

Fluttering of eyelids is listed at 3, **appearance of rapport** at 13, **recognition of trance** at 19. “**Fixed stare** when eyes are open” and **pupillary dilation** are at 29. They begin sommambulistic depth at 28. They list **systemized posthypnotic amnesias** at 32, considering them more difficult to induce than **complete amnesia**, which they placed at 31. They place **age regression** at 42, **positive posthypnotic visual hallucinations** at 43, and **negative** ones at 44.

Self-Report Scale

If a subject has experience in various trance depths, he can gauge for himself how deep he is by the way he feels. If the operator asks, “On a scale of 1 to 10, with 1 as the highest and 10 as the lowest, where are you now?” he is using a **self-report scale**.

Tart created this type of scale, which uses internally observable markers, as well as external ones. The listed internal mental signs were markers by which his subject could determine his comparative depth. Tart’s scale is unique and humane in that some of its items measure depth by signs other than degree of submission to the hypnotist’s will. His **internal markers**, here listed from lowest to greatest depth, include awareness of breathing, cessation of spontaneous mental activity, time becoming a meaningless concept, loss of awareness of the joke, loss of awareness of the environment, **visual blackness**, and physical relaxation. I think awareness of breathing is probably suggested rather than natural. The other markers, however, are all physiological phenomena.

1. The LeCron and Bordeaux Scale is reproduced in Magonet, pp. 13-15.

Characteristics of Depth Stages

The hypnotized person lacks alertness and humor; he is literal and serious in his execution of the operator's wishes, seems to have lost all sense of the ludicrous, pursues one goal with disproportionate intensity, and pays little attention to matters and impressions which lie outside this purpose. He seems to have a contracted frame of reference...

- R. W. White, quoted in Moss, *Hypnosis in Perspective*, p. 138

This section lists observable characteristics of the main depth stages: light, medium, and deep.

Light

This trance depth is called **light** or **lethargic**. The subject feels noticeably relaxed, drowsy. He can still move about slightly, and is aware of all around him. He can talk, laugh, and answer questions. For some people, the light stage may not be much of a trance, merely a sort of waking suggestibility. For others, it is a true beginning of trance. A subject in light trance may be unable to open his eyes if eye catalepsy is suggested. He is also susceptible to any other catalepsy. The subject may have either muscle relaxation or muscle tension, a sleepiness or a hyperalertness, depending on what is being suggested. The operator may observe that the subject's eyelids have closed and are fluttering, or quivering.

According to LeCron and Bordeaux, the hypnotist can recognize that the subject is in trance before the subject can. Eventually, however, the subject becomes aware that he is in a condition that is different from his normal awakens. In the light depth, a subject remembers all that happened.

Medium

At **medium** depth, the subject has a greater detachment from the environment. As he moves into deeper trance, his eyes are closed. In fact, an observer can measure the progression of the trance based on the subject's eyes. In the light trance, there is a stage in which the eyes close, and the eyelids quiver. In deeper trance, the quivering ceases.

At first the pupils of the eyes will be noticeably contracted, and as the influence becomes intensified they gradually dilate and become very large, and in the profound stages the eyeballs will roll upward, as may be readily seen by lifting the eyelids. If, when in the somnambulistic state, the subject should be required to open his eyes, the eyeballs will usually assume their natural position.
(Cook, p. 243)

Breathing becomes slower and deeper. The subject can display some amnesia, positive hallucinations, and obeys simple posthypnotic suggestions. At this depth the capacity for catalepsy is greater than in the light stage, and muscular rigidity can be suggested. There is greater suggested insensitivity to pain, and more noticeable automatism.

Deep (Somnambulist)

A person in somnambulist trance can produce any of the hypnotic phenomena. Their hypnotic behavior shows **automatism**, which is an **inability to resist suggestions**. Posthypnotic amnesias can be selective, systematized. Somnambulists revivify when age regression is suggested. Posthypnotic suggestions can be complicated, bizarre. Hallucinations may be detailed scenes or events, and the subject will believe the hallucination is real. They can do automatic writing. Anesthesia and catalepsy can be great enough for dental work, childbirth, surgery. The usual test for somnambulistic depth is a three-item test: 1) amnesia, 2) posthypnotic suggestion, and 3) positive or negative hallucination—in trance or by posthypnotic suggestion. A posthypnotic, negative, visual hallucination is considered the most difficult posthypnotic suggestion: the ultimate test.

Christenson described the **physical signs** of the somnambulist level:

This appears to be a distinct state, qualitatively different from earlier stages...relaxed muscular tonus, a reduced breathing rate which falls to a minimum of 12 to 15 respirations per minute when he is ignored, general body flush, and reduced reactivity to outer stimulation, all suggestive of a state of rest or sleep. (p. 35)

Old-time European hypnosis researchers defined a **somnambulist** as any person capable of a trance deep enough that **spontaneous dissociative amnesia** takes place. At that level, three other significant trance phenomena also occur: **catalepsy**, **automaticity**, and **amnesia**. It is at this stage that serious ethical abuse can take place. Forel believed that, in the somnambulist state, the subject's will was



“Catalepsy” vs. Somnambulism

Binet and Fere, two old-time French researchers, made a very interesting division of the somnambulist level into two opposing states which they called **catalepsy** and **somnambulism**. They said the cataleptic subject was the unfree type: an **automaton**. The prime characteristic of their “cataleptic” was

...automatism...it is, in fact, only the cataleptic subject who can be termed an automaton...catalepsy permits the mind to be handled with the same docility as the limbs...The suggestions offered to him are inevitably accepted, since he never resists them...a cataleptic subject ceases to have a personality...there is no cataleptic ego. (Binet and Fere, p. 143)

Their “somnambulist,” on the other hand, was a free spirit who just happened to be in a deep trance state!

...no automaton, but a person endowed with character, aversions, and preferences...In this state there is certainly an ego. The somnambulist’s intellectual condition may be compared to those dreams in which the sleeper actively intervenes, and displays judgment, critical sense, and sometimes even mind and will. (Ibid.)

They sum it up:

The cataleptic subject is a machine, the somnambulist is a person. The first readily performs all the acts suggested, while the second often offers a resistance which may become troublesome to the experimenter. (Ibid., p. 288)

The next generations of experimenters spent much effort trying to find ways to suppress any possibility of accidentally creating a split personality with capacities for independent ego, when automatic behavior was wanted, hypnorobot cataleptics. In the public sector, however, there have developed an army of self-employed mediums and psychics, doing their own trance-thing. Unfettered by an operator, they are Binet and Fere’s “somnambulists,” displaying independent (though dissociated) mind and will in deep trance.

completely overruled. Christianson described the characteristics of the deepest state, as viewed by a military man:

Posthypnotic suggestions will be executed, usually with amnesia, and various other phenomena can be induced, for example, catalepsy, memory improvement, greater motor facility, heightened concentration, physiological and biochemical changes, and psychological dysfunctions such as delusions or hallucinations.

The most reliable single criterion for a full hypnotic state is that the subject can open his eyes and still remain in a trance... (p. 34)...the subject becomes more literal in his thought processes...the subject frequently displays greatly improved insight into his mental processes. (p. 36)

Waking Trance

The “normal” deep trance state is silent inertia, unless suggestions are being acted on. **Waking trance (waking hypnosis)** results from the combined effects of susceptibility, depth, and specific suggestions to open one’s eyes and act normal, yet to stay deeply hypnotized. In its linguistic root, the word “somnambulism” means **sleepwalking**. A common definer of somnambulism is this ability of a

deeply hypnotized person to open his eyes and to walk and talk as if not hypnotized—and yet remain hypnotized. Only persons who have reached a somnambulist depth are capable of looking and acting awake in trance.

Candy/Arlene could be in Taiwan for days, still in trance, still obedient to the distant Dr. Jensen. She was an **open eyes**. When deeply hypnotized, she was fully able to function like an awake person, walking around and conversing intelligently. If her EEG had been tested, it too would have looked normal.

The somnambulist is amnesic for time in trance, unless specifically instructed to remember it:

The patient in hypnosis can rise from his chair, walk in the streets for two hours, carry on lengthy conversations with people he meets, even see a movie, but upon return to normal waking, will remember nothing that occurred during the state of hypnosis. He has no way of accounting for the lapse of time... (Gindes, 1951)

Carl Sextus, a nineteenth century Danish hypnotist, described a revealing incident of waking hypnosis, used as a free hypnotic entertainment for his party. He began by

giving a complex set of posthypnotic suggestions to a 23-year-old subject whom he had hypnotized “five or six times” before:

*...on the next Saturday, March 5th at 8 o'clock p.m., he was to leave his home on Norrebro Gade, and go to my residence...after having asked for me and spoken to me, he was to perform a number of insignificant actions in an exact order as stated, after which he was to fall into a deep sleep... (Sextus, *Hypnotism*, 1893 ed., pp. 139-141)*

At precisely 8:25 PM, Sextus' doorbell rang. When the hypnotist opened the door, he saw his subject standing outside in a posthypnotic revivification of the original trance:

[He]...held himself rather stiff, and spoke with a certain dull accent, repeated exactly what had been told him, and performed the different acts in exact order. He stared at me without any expression in his eyes, and after he had accomplished what had been told him to do, he fell into a deep and unconscious sleep, from which he could not be awakened by any of us, by either speaking to him or touching him...There were now several experiments performed, to convince us that the subject was completely insensible to any pain. I placed under his right arm a mark an inch long with a red hot knitting needle, without any motion or sign that he felt it. I put a strong needle through his hand, so that it projected a quarter of an inch on the other side, during which (he being commanded) sat with a happy and smiling expression on his face.

...[I] now awoke the sleeper by a sharp shout. He opened his eyes and gazed about with a dazed look, evidently surprised at finding himself in a strange house, surrounded by a party... (Ibid.)

A somnambulist can act “as if he were wide awake and may even deceive observers with his seeming wakefulness.” (Erickson, “*Hypnosis in Medicine*,” p. 646) Even skilled hypnotists have trouble distinguishing waking hypnosis from normal waking behavior, for there is no head lolling, body slumping, or eye closure. On the other hand, Sextus above described certain discernable characteristics of that waking sleep. (It can also be detected by the acute mental sensitivity of another person in deep trance.) Christenson described similar, and additional, physical clues for the state of waking hypnosis:

There is a definite change in facial expression and

voice, with an air of abstraction, indifference to surroundings, and a reduction of outwardly directed activity unless it is suggested by a hypnotist...The subject who is in a deep somnambulistic state will often not seem to be in a nonwaking state at all...To directed observation, however, there are a number of characteristic changes. The expression in the eyes will become somewhat vacant or inward-looking at the moment of induction, and may remain so. When not stimulated, the subject tends to lapse into a typical posture, head dropped slightly forward on the chest and attention apparently directed inwardly... [the “hypnotic posture”] (p. 35)

Coma

There is a stage of even greater depth—not described on any of the above scales—but which is well known. M.H. Erickson called it “plenary trance” or “coma” and viewed it with extreme respect. This state is best for major surgery which will use no other anesthetic but trance. In coma, you CANNOT MOVE. The inability to move in the coma state is not a result of verbal suggestion. It is a physiological result of the trance depth. Pavlov would have explained, “the motor analyzer is shut down.” A modern neural systems analyzer would say: “Information is not being transmitted to the motor output stage of the brain to become available for speaking, or any other action of voluntary muscles.”

The subject who is in a coma cannot speak or respond, but at the unconscious level he remembers all that takes place. It usually takes extended training (repeated hypnoses over a period of weeks or months), to develop an ability for coma depth. Many hypnotists never see anybody this deep. M.H. Erickson explained:

...in that [plenary] trance state you can ask him to do certain things such as increase the flow of blood to the right kidney. You can test this by probing with intraureteral catheters...I have induced a plenary trance by simply suggesting that the person go into a deeper, more profound trance, that he feel himself becoming more and more stuporous.

*He retains his contact with you, he hears you, but the process of hearing you is slowed down; that is, there is an immense time lag. If you ask, “Do you hear me?” you can perhaps count to 15...20...25 before he will indicate that he does. (in Estabrooks, *Hypnosis: Current Problems*, pp. 255-257)*



Books on Trance Induction

Edmonston's 1981 book, *Induction of Hypnosis*, describes or quotes verbatim a vast number of historical references, many rare, to hypnotic induction, starting with Hindu, Egyptian, and Greek methods. He then works the reader forward, chapter by chapter, to modern times.

[[It is]...a history of the rituals, rites, and incantations through which individuals have attempted to produce in one another the condition we now call hypnosis...what I have attempted to do is to present the major developmental trends in hypnotic induction through the centuries... (Edmonston, pp. ix-x)

Edmonston's underlying theme is that trance induction is not limited to methods titled "hypnosis." He includes many of the names and settings in which the essential phenomena of hypnosis occur: any trance that was created and directed by one person, purposefully influencing another person.

Other books on induction are: Elman, 1964; Erickson, Hershman & Selter, 1961 (transcripts of the weekend seminars for doctors, dentists, and psychologists); Hartland, 1966, 1971; Kroger, 1963 (second ed. 1977); Meares, 1960; Teitelbaum, 1965; and Hughes, *The Induction of Conviction*.

The Physiology of Trance

Suggestion Causes
Physiologic
Changes



Brains Are Exciting



Biophysics

In spite of its importance, information about inhibitory mechanisms has not yet been integrated into the general body of scientific knowledge, and no chapter is devoted to this subject in most neurophysiological, psychological, and pharmacological textbooks. This lack of interest is surprising because as Morgan wrote eighty years ago, “When physiologists have solved the problem of inhibition they will be in a position to consider that of volition”...

Delgado, *Physical Control of the Mind*, p. 155

Delgado was a prominent research neurologist and surgeon in his era. For years, he experimented on human epilepsy patients, by using radio signals to electrodes implanted in various sites in their brains (reticular activating system, thalamus, septum, or caudate nucleus) to excite or inhibit. His 1968 observation about the omission of information in textbooks on the physiology of hypnosis remains true. No elementary psychology text, that I know of, discusses the **physiology of trance** (other than to mention the **reticular activating system**). Some textbooks claim there is no known physiology of trance and, therefore, no proof that hypnosis is more than a mental idea. That, of course, is not so.

Suggestion Causes Physiologic Changes

Such proposals as “You will feel sad because your little girl has recently died” may often border on the sadistic.

- Marcuse, *Hypnosis: Fact and Fiction*, p. 170

As in biofeedback training, mere hypnotic suggestion can cause **physiologic changes**. Emotions that are suggested to a hypnotized subject, or associated with a

Every thought has a **physiological** basis. Every state of consciousness has a physiological basis. Every shift of consciousness, up or down, is a physiological event. I am sure that much more information on the physiology of trance does exist, but it has been hard to find. Most of the information appears to have been labeled top secret, and kept from public knowledge. Perhaps it is stashed in the drawer next to wherever they keep the design specs for a nuclear bomb: SECRET, DON'T TELL. I agree that the design for a nuclear bomb should be secret. The physiology of trance, on the other hand, should be admitted to exist and be taught to students.

hallucination, or generated by abreaction in revivification of past experience, all cause physiological responses, as would the real event. Thus, a terrifying hallucination can



cause a damaging heart attack, because the subject's heart will be as stressed during the hallucination as if the event were real.

Von Schrenck (1900) reported a case in which a medical student hypnotized a female cousin and impregnated her. When he learned she was pregnant, he again hypnotized her and suggested to her that she would have a miscarriage at a set time in the near future. She miscarried at his stated time.

Heron said that the old-time hypnotist/physicians "all experimented with hypnotic anesthesia in obstetrics." Some claimed they were able to control the length of labor, even to arrange the time of day when labor began, by post-hypnotic suggestion. In the 19th century, Braid helped nursing mothers to produce more milk, by hypnotic suggestion. The opposite--inhibiting milk-production in a mother who had lost her baby--was also reported by many hypnotists (Esdaile, Mohr, Heyer).

*Even results over which the will has normally no control, such as sneezing, secretion, reddening and growing pale, alterations of temperature and heartbeat, menstruation, action of the bowels, etc., may take place in consequence of the operator's firm assertions during the hypnotic trance... (William James, *The Principles of Psychology*, 1890, p. 602)*

Volgyesi linked hypnotic behavior to the attributes enabling human survival by showing that bleeding can be controlled by hypnosis alone. He wrote an article called "Pavlovian Syndrome" about unconscious self-hypnosis as a protective measure in periods of starvation. Dr. Reiter reviewed the European literature on control of subtle body functions, by suggestion, under hypnosis. Therein, he cited studies on the power of suggestion to regulate blood flow after a tooth extraction, control heart rate, and treat psychosomatic ailments. He also found criminal suggestions used to create organ failures! (Reiter, "*The Influence of Hypnosis on Somatic Fields of Function*," in LeCron, ed. *Experimental Hypnosis*)

Hypnotic anesthesia is another clear proof for the physiological basis of trance. It not only diminishes the outward signs of pain, but it also inhibits the associated internal pain responses. Heart rate, breathing, and galvanic skin reflexes are all decreased, rather than increased. The message of injury does not reach the brain, if blocked by hypnotic suggestion.

Induction Physiology: The "Relaxation Response"

Two American research hypnotists, Benson and Edmonston, separately researched body changes associ-

ated with trance/hypnosis. They called the characteristic physiological changes that happen during induction the **relaxation response**. They observed that relaxing tends to bring on this state; and this state tends to bring on relaxation. They equated relaxation with the induction of trance, or hypnosis. Their careful research has become widely understood and accepted.

*...simple meditative techniques resulted in such notable physiological changes as decreased metabolism, heart rate, blood pressure and rate of breathing, as well as distinctive brainwave patterns... (Goleman and Thurman, *MindScience*, p.ix)*

Physiological Effects of Induction—Visible signs of spreading inhibition are a **deep sigh**, a **slight quiver of the eyelids** as they are closing, and **deeper and more regular breathing**. Platonov (1959) noted that arterial pressure and pace of respiration lower as trance deepens. The slower the subject enters trance, the slower the arterial pressure drops. Other physiological effects of trance are reduced oxygen consumption, slowing of brain wave patterns from beta toward alpha and theta, and reduction of heart rate.



Trance experiences vary so wildly in their depth, emotional quality, context and content that it is easy to think that they also differ physiologically. In fact, however, the physiology of trance induction--hypnosis, relaxation, meditation, trance, centered prayer, or whatever else it is called—is always the same. In terms of physiology, all inductions are the same.

Is "Relaxation" the Same as "Trance"?—Benson compared what happens to the body during conventional "Hypnosis with Suggested Deep Relaxation" to Transcendental Meditation, Zen, Yoga, Autogenic Training, Progressive Relaxation, and Sentic Cycles. He found similar physiological responses in all. (Benson, *The Relaxation Response*, pp. 70-71) He deduced that all were, therefore, physiologically the same state. In *Hypno-*

sis and Relaxation (1981), Edmonston painstakingly reviewed evidence on the neurophysiological state of the body during a similar variety of trance inductions. He also observed that all the common inductions (biofeedback, meditation, yoga, hypnosis, etc.) had the same physiological results, which he summed up as a pattern of **relaxation**.

Certain researchers compared brain waves of persons told to become hypnotized with those of persons told to close their eyes and relax. Because they found equal amounts of theta, they assumed that proved that the hypnotized people were merely “relaxed.” (**Tebecis et al., 1975, p. 5**) Edmonston, however, protested that conclusion. He said they had actually proved that the relaxed people were also in trance!

The fact that they have used the word awake to denote the condition can easily lead the careless reader to an erroneous conclusion. (Edmonston, Hypnosis and Relaxation, p. 150)

In similar research, alpha densities turned out to be the same for persons given relaxation instruction and for those given a conventional hypnosis induction. (**Edmonston and**

Grotevant, 1975) Those results also prove—not that hypnosis is not real—but that relaxation is an effective induction technique. The use of **progressive relaxation** as a hypnotic induction technique has been studied thoroughly and well documented. Persons who are told to “pretend you are hypnotized” are also not valid controls for an experimental comparison with hypnotized persons, because “pretend you’re hypnotized” is a standard (and quite effective) hypnosis induction technique. Studies showing EEG similarities between persons in hypnosis and persons in “light sleep” (**Chertok and Kramarz, 1959**) do not disprove the hypnotic state. They merely confirm that light sleep is a hypnotic (hypnagogic) state of consciousness.

The research by Benson and Edmonston should have cleared public confusion and settled this issue. Unfortunately, it did not. Many trance-inducers continued to swear that what they do is not “trance,” and most certainly is not “hypnosis.” Hypnotists in private conversation, however, say “It’s all hypnosis.” More precisely, it is all **trance**. Different names for trance exists because it is better for business to use a new, different name and avoid the negative associations of old, familiar words like “lowered consciousness” or “hypnosis.”

Brains Are Exciting!

... the nerve may be taken to be a relay with essentially two states of activity: firing and repose...

- Norbert Wiener, *Cybernetics*, p. 142

Neuroscience is the study of the physical basis of the mind and other nervous functions. (**Neurobiology** means practically the same thing.) Its basic concept is that all mental functions can be traced, at root, to physical processes happening in the brain. Neuroscience combines biological, biochemical, and biophysical sciences to understand—and attempt to control—the physical aspect of psyche, the brain/mind.

Neuroscience thinks of mind in computer terms. The brain is a **wetware** machine, comparable to the hardware of a computer. Beliefs and knowledge are the software. Those mental software programs are called the **code**. The code consists of two different parts: a set of **data** (object), and a **procedure** (intention) that applies itself to the data. The procedure is a sequence of mental actions that does something to the data.

Your brain is a fully programmable **biocomputer**. It easily learns to speak English, Chinese, Russian (or all three) if exposed, in childhood, to those languages. With some

effort, it can also learn the languages of music, mathematics, and computer programming. Learning and memory are based in **neural networks**.

Brain Anatomy

The brain is as large as a grapefruit, as heavy as a cabbage, and contains more than a hundred billion nerve cells. It is the most complexly organized thing in the known universe. Its billions of neurons are the most delicate cells in your body. In life, they are a marvel. After death, the membranes and receptors of neurons quickly begin to break down.

Brains are as individual as faces. Every brain is different, in some way, from every other. The brains of men and women are very different, and that difference is obvious long before birth. The basic anatomy of every brain, however, is similar: **brainstem, limbic system, left and right hemispheres, and cortex**. Those organs are all made up of neurons. The outer brain cap (**cortex**) is made up of specialized cells which are tightly organized into an array of tiny cylinder shapes and are comparable to a computer’s



parallel processing system. The brain's anatomy divides these parallel processing computing units up into a multitude of subcomputers.

Reticular Activating System

Pavlov hypothesized that a person's state of consciousness is controlled by a brain center which helps to govern excitation and inhibition of the cerebral cortex. In 1949, two physiologists (an Italian, Giuseppe Moruzzi, and an American, Horace Magoun) found the **reticular activating system (RAS)**, the brain mechanism which controls the overall activity state of the cortex. It is the doorbell for your upper mind. The RAS sends streams of impulses to your thalamus and cortex which control wakefulness and attention, drowsiness and sleep, excitation and inhibition. It triggers the beginning, or end, of trance.

Pavlov also predicted that the governing center for shifts in state of consciousness would be part of the cortex. Here he was wrong. Moruzzi and Magoun found the RAS considerably below the cortex. It is down in the **brainstem**, at the top of the spinal cord. The brainstem handles warnings based on incoming sensory data, and autonomic functions such as breathing and heartbeat. The reticular activating system is a specialized part of the brainstem which controls our level of alertness. It is a long, narrow neural structure that stretches from the top to the bottom of the brainstem. The power center of the RAS is the **reticular formation**, a mass of tissues about the size and shape of a finger, located on the axis of the upper brainstem. The reticular formation directs the rest of the reticular activating system and has connecting dendrites with sites all over the cortex.

Your brain is wired so that incoming sensory nerve signals affect not only their ultimate cortex receiving area, but, by passing through the RAS, also can affect the entire cortex. It can put you to sleep or awaken you. If the RAS identifies a stimulus as unfamiliar, or worthy of extra attention, it may alert the entire cortex. With the cortex alerted,

you **focus** harder on the matter to be considered and **amplify** the input. Your mind, literally, becomes more able to detect and analyzes normally overlooked tiny details in this out-of-the-ordinary situation.

The RAS controls general inhibition as well as general excitation. When you lie down and close your eyes, sensory input is reduced. The RAS automatically **reduces cortical stimulation level**. You become more and more relaxed, and shift toward trance, then toward sleep. Thus, the RAS controls the beginning and end of trance. The RAS system also sends signals to muscles that maintain muscle tone, as well as signals which coordinate detailed muscular movements. It is the **motor analyzer** that Pavlov theorized went off-line early in hypnosis, causing the phenomenon of catalepsy.¹ Damage to the reticular activating system can cause long-term **coma**, a sleep from which the sleeper cannot wake.



Biophysics

...since every reaction and thought seems to produce an evoked potential [readable on EEG or MEG], the DC system seems directly involved in every phase of mental activity... Variations in the current from one place to another in the perineural system apparently form part of every decision, every interpretation, every command, every vacillation, every feeling, and every word of interior monologue, conscious or unconscious, that we conduct in our heads.

- Becker, *The Body Electric*, p. 241

1. The thalamus, septum, and caudate nucleus also have important inhibiting functions.

Every living cell produces electricity. All living things generate electrical currents. There is a tiny **direct current** flowing throughout the nervous system of the human body. Electric currents, however weak, always generate **electromagnetic fields**. **Biophysics** is the study of electric currents in cells, nerves, muscles, brain, and the magnetic fields those bioelectric currents produce. Your nervous system has electric current, and that current generates a **biomagnetic** field.

EEG

In 1875, Richard Caton claimed to have observed an electric field around the heads of animals. In 1924, Hans Berger, a German psychiatrist, stuck platinum wires in his son's scalp and proved the existence of that field by recording the first **EEG (electroencephalogram)**. The EEG's recording pen marked, on paper, a series of rhythmic changes in potential voltage. Berger, at first, assumed the whole brain had only one wave. He soon learned the waves differed, depending on where he put the **electrodes** on the

head, and on what was going on in that part of the head at that time.

Now, EEG technicians use up to **32 channels**, and take readings from all over the head. The higher the average level of brain wave activity, the greater the susceptibility to hypnosis. Your hypnotic susceptibility is related to your bioelectric physiology. Now, the EEG, literally, has the power to distinguish life from death; a flat EEG signifies brain death. Certain types of thinking, or states of mind, cause particular types of brain waves. Researchers have even identified the **intention wave**, **surprise wave**, and **double-take wave**.

A **magnetoencephalogram (MEG)** gives an even more precise image of mental operations than an EEG. That is possible because the brain's "**magnetic field** passes right through the dura, skull bones, and scalp without being diffused..." (Becker, *The Body Electric*, pp. 240-241)

Can an EEG Detect Hypnosis?

Trance Induction Observable on EEG—Alpha and theta are the states of consciousness you pass through while going to, and rousing from, sleep. They are also the EEG states associated with trance induction. The EEG of a person in an inductive stage will show alpha and theta brain waves. Studies have shown specific EEG changes associated with hypnosis: spindle and slow delta activity. (Barker and Burgwin, 1948, 1949; Schwarz et al., 1955; Marenina, 1959). However, a trance state is identifiable by EEG only in the inductive stage. After that, it can be concealed.

...the hypnotic process can be seen to consist of a seemingly opposite pair of phenomena: first, during the induction process, a state of maximal attention to one group of stimuli, combined with an obliteration of all others, which results in a loss of Ego boundaries [consciousness] and an incorporation of the hypnotist into the subject. Later, in the fully developed stage, a diffusion of sensorimotor relations occurs with a retention of a dominant but repressed link to the hypnotist by the incorporation of a fragmentary image of him in the re-expanded borders of the Ego. (Kubie and Margolin, "The Process of Hypnotism and the Nature of the Hypnotic State")

Waking Hypnosis Not Discernible on EEG—Pavlov explained the same phenomenon years earlier: "Hypnosis involves the reduction of organism-environment integration to a thin line of interpersonal communication," operator to subject. A hypnotically split-off personality, such as the Arlene part of Candy, could operate with just that thread of connection, a thin mental tether, to Dr. Jensen. Her hypnotic tether would be undetectable by any EEG technology known outside the military.

Because suggestion can cause physiological changes, the EEG profile of a hypnotic subject becomes whatever the operator suggests. Barker and Burgwin (1948, 1949) showed that EEG activity in hypnotized persons matched suggested behavior. If sleep and relaxation were suggested, the subject's slow low-voltage waveforms increased. Waking-type activities performed in deep trance resulted in waking-type waveforms. Thus, if a somnambulist is given suggestions requiring **waking hypnosis**, even his brain wave patterns obey. His EEG, at first glance, will look like that of a waking state. A hypnotic subject can also mimic the delta waves of sound sleep, yet be unconsciously recording an operator's suggestions.



Alpha, Beta, Delta, Theta

The pulsing of millions of neurons causes the brain's **electromagnetic aura**. It also produces the **brain waves** that an EEG machine records. Their patterned pulses add up to the mind's **state of consciousness** or **level of consciousness**. The neurons pulse in a variety of patterns. Every state of consciousness has its own characteristic bioelectric patterns. Named for each dominant brain wave pattern, the four main wave patterns are: **beta, alpha, theta, and delta**. Each of those names is pegged to a precise **cycles-per-second** speed of the brain waves.

We pass in and out of each of those four basic states of consciousness, repeatedly, every day. Different parts of the brain are likely to be in different patterns, at the same time. For example, one part may be idling in alpha, while another, busier, part is in wide-awake beta. Thus, our level of consciousness is constantly raising, or lowering, in response to various external, or internal, cues.

Beta (14-28 cps) is a mental condition of fully awake and under pressure to complete tasks. This is our state for the daily grind, for logical, problem solving actions, for fear, worry, and **visual activity**. When part of our brain relaxes, it slips from beta **down** into the slower, more **synchronized**, frequency of alpha. If we get sleepy, the waves slow and synchronize yet more to theta rate. If they slow all the way into genuine sleep, we are in delta. Delta (½-4 cps) is the mental state of a deep, true sleep (not hypnotic).

The route from beta, descending through alpha, and then down to theta is called **lowering consciousness**. The EEG waveforms are used as a crude physiological marker for the main states of consciousness: beta, alpha, theta, and delta.

The Hypnoid States: Alpha and Theta

Alpha (8-13 cps) and theta (4-8 cps) are between beta and delta. They are the states with hypnoid potential and trance qualities.

Alpha—People tend to phase in and out of **alpha** multiple times per minute. If a person closes his eyes (a common induction aid), his brain wave component of alpha (and also theta) increases. When alpha goes up, his level of consciousness goes down. D. R. Engstrom reported, in his 1970 doctoral thesis, that any method that increases alpha production makes people more susceptible to hypnosis. A higher average number of alpha waves is a marker for persons who are more susceptible to hypnosis. Children nor-



Alpha

Theta

Delta

Beta

mally have more alpha than adults and are more hypnotizable. London, Hart, and Leibovitz (1968) found a large difference between brain wave patterns in women who were susceptible to hypnosis and in those who were not susceptible.

Whatever increases alpha production is also inductive. The alpha state is a natural light meditation, a contemplative, relaxed mood. Anxiety reduces alpha. Alpha is lightly hypnagogic, lowered consciousness, relaxed wakefulness, daydreaming, catnapping, light trance—from which we can bring ourselves back to alertness instantly. In alpha, critical, evaluative thought is reduced, but creative thought is enhanced. The conscious mind becomes more open to ideas from the unconscious, or to outside suggestions.

Theta—Theta is a state of deep, potentially creative, thinking. Theta waves (4-8 cps) are the slowest, except for deep sleep (delta). When a person becomes very tired or bored, his brain may begin bursts of theta. In more consistent theta, people may not be very responsive to outside signals. They are in trance—or in a hypnagogic state.

Hypnagogic States

In the process of falling asleep we relax and let go of the connection with conscious mind which operates self-control and awareness. We pass through alpha, then theta, and on into the sleep waves of delta. Our transition time spent in alpha and theta is called **hypnagogic**. It happens as we fall asleep and, again (in reverse order), as we wake up.

As slumber steals over us, our cortical vigilance does not fall at a uniform rate. It shifts up and down, tending only gradually to sag lower and lower. Alpha rhythm appears in bursts, but less and less often, with longer and longer periods of slow waves in the EEG. Little by little control of our ideas escapes us. At intervals we "come to," realizing we have just had some rather queer thoughts about something... Suddenly we may realize that we have been talking inwardly to ourselves.
(Oswold, *Sleep*, pp. 43-44)

Does everybody have hypnagogic episodes? We know that everybody dreams. Dreaming happens in a light stage of sleep, but the hypnagogic is different from dreaming. Sleep researcher Oswald said everybody experiences the hypnagogic condition.

Some people describe strange experiences while drowsy--visions, voices, bodily jerks and bizarre sensations. Do other people not have these or do we all have them, but mostly forget? I believe the latter is true. Unless one is roused, or determines to rouse oneself sufficiently to make a written record...all trace of these experiences is fi-

nally lost. (Oswold, p. 43)

Alpha-specialist, Jodi Lawrence, disagreed. She believed the ability to have hypnagogic experiences ranged across a spectrum and correlated with hypnotic susceptibility:

...rigid people with repressively structured lives are "less able to let go" and fantasize, less able to express their inner feelings and thoughts than people who are more relaxed and open in their attitudes. (Lawrence, *Alpha Brain Waves*, p. 51)

Technically, the hypnagogic state that occurs just before waking has a separate name, **hypnopompic**. Usually, however, both hypnagogic and hypnopompic periods are lumped together and called "hypnagogic." Hypnagogic experiences tend to be more pronounced in the morning, perhaps because the conscious mind has been off-line for a longer time.

Addictive Aspects of Trance

We yearn to return to that which felt good. That is natural operant conditioning, automatic self-programming. It feels good to enter trance. Why? The explanation is physiological:

When you go into an altered state, you transfer into right brain, which results in the internal release of the body's own opiates, enkephalins and Beta-endorphins, chemically almost identical to opium. (Transcript, Valley of the Sun Publishing Lecture Tape, Malibu, CA, 1984, p. 6)

After trance, you also may feel:

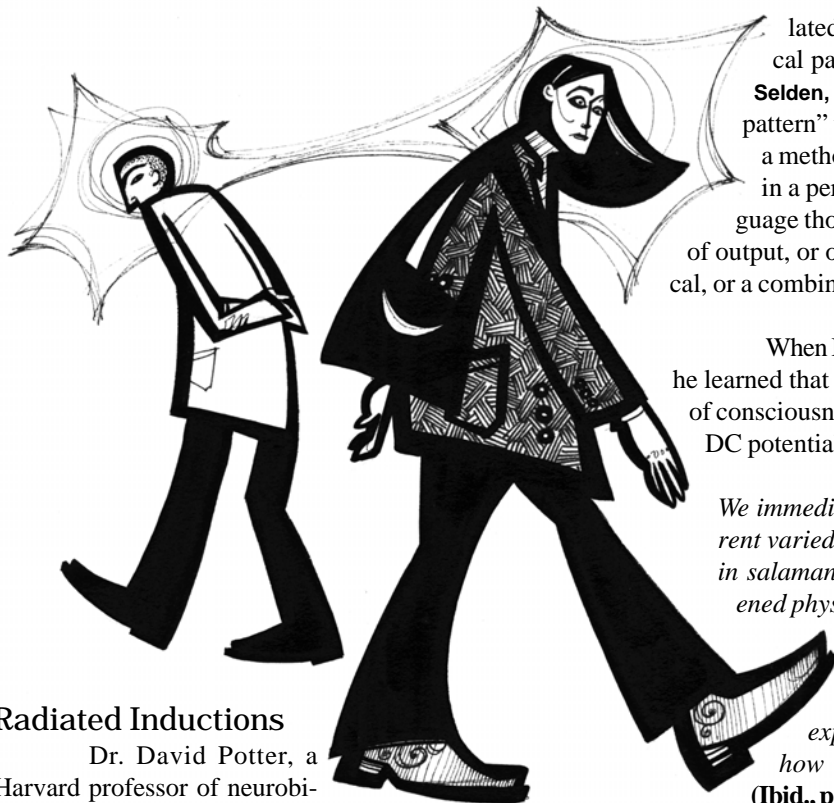
...unlocalized feelings of exhilaration and well-being...There are, therefore, two main direct effects of hypnotic trances: first, the suggestibility during the trance phase itself; and second, the general, mildly euphoric sense of well-being immediately following the hypnotic trance. (Verdier, p. 69)

The rush of pleasurable cortical excitation, as you enter trance, tends to bring you back for more. So does the generalized feeling of relaxation and well-being that follows.

Self-programming in Hypnagogic—The hypnagogic stage is a natural trance, a suggestible state of mind.

....In the twilight stage, one is less able to criticize, or to ignore, new ideas...Light sleep and drowsy stages may make you as suggestible as if you're actually hypnotized. (Ibid., p. 53)

Coue first pointed out the usefulness of this natural trance state for self-programming. You can give your unconscious mind suggestions during either your evening or morning hypnagogic periods. If you wrestle with a problem in your mind as you are falling asleep, in the morning you may find an answer awaiting your conscious mind. The hypnagogic is a natural **crossover time**, when you can learn from, and instruct your unconscious. For example, you can tell yourself, before you fall asleep, what time you must wake up in the morning. The hypnagogic is also a naturally spiritual time when you may ask humbly for direction and receive guidance.



Radiated Inductions

Dr. David Potter, a Harvard professor of neurobiology, proved that neurons can communicate via electrical, as well as chemical, signals. The first stimulating of neurons by means of an electric signal sent through the air is credited to Galvani, a medical doctor who studied the effect of electricity on animals. In 1786, he discovered that the

...leg muscle of a frog placed at some distance from the spark of an electrostatic machine—a device for generating sparks—would twitch if touched by a scalpel when the machine was turned on. Experiments in the remote stimulation of nerves with electricity were not conducted again for more than a hundred years... (Brodeur, Ch. 2)

Every pulse of electric current—in an axon, or anywhere else in the universe—generates an **electromagnetic field** around itself: “...every electric evoked potential is accompanied by a magnetic evoked potential.” (Becker and Selden, p. 241). Every human being’s brain and body, therefore, generate an electromagnetic field. Magnetometer readings have proven the existence of the brain’s weak, but very real, electromagnetic field. That field is not diffused by the skull, or dura, or air. It passes freely through and, holding its form, **radiates** outside the body.

Any electromagnetic field can be influenced by another, nearby, electromagnetic field, because nerve cells respond to electromagnetic fields as well as to electrical impulses. Becker, and other researchers, have shown that direct current, magnetic field, or microwaves when “modu-

lated in various ways can force specific electrical patterns upon parts of the brain” (Becker and Selden, p. 319). The forcing of a “specific electrical pattern” upon part of a person’s brain can be used as a method of trance induction, or to insert a thought in a person’s mind, or to stimulate an English-language thought in their pre-speech center. The source of output, or of reception, can be mechanical, or biological, or a combination of the two.

When Becker studied direct current in animal brains, he learned that current flow varied according to their state of consciousness! Then he did similar experiments on the DC potentials of human brains:

We immediately found that the back-to-front current varied with changes in consciousness just as in salamanders. It was strongest during heightened physical or mental activity, it declined during rest, and it reversed direction in both normal sleep and anesthesia. This knowledge led directly to the experiments...that taught us much about how hypnosis and pain perception work. (Ibid., p. 116)

The Current of Injury Reverses Polarity

Becker began his experiments assuming that, in hypnoanalgesia, the pain was felt but somehow denied. However, his experiments proved that

...it was a real blockage of pain perception. It seems that the brain can shut off pain by altering the direct-current potentials in the rest of the body “at will.” There’s every reason to suppose that pain control through biofeedback or yoga likewise works by using an innate circuit for attenuating the pain signal... (Ibid.)

The current that sends a message of body damage to the brain has a different polarity from the usual rule of positive brain and spinal cord, negative extremities. Becker called that message, communicated by means of reversed polarity, positive instead of negative, the **current of injury**. His experiments showed that anesthetic also reversed nerve current polarity from negative to positive. As the anesthetic took effect, negative potentials in the patient’s extremities weakened, even vanished. If the patient was rendered completely, deeply anesthetized, “the potentials often reversed entirely, the extremities becoming positive and the brain and spine negative.” Becker conducted further experiments with the help of an expert hypnotist. After the hypnotist gave a trained somnambulist suggestions of extreme arm numbness, Becker tested polarities:

In each case, I found that the frontal negative

potential of the head became less negative, often reaching zero, as the client attained deep trance. The reading changed in the same direction as in anesthesia, only not as far... (Becker, p. 239)

So, the brain can shut off pain by reversing direct current potentials.¹ Becker, working with the hypnotist, then demonstrated that the brain can control and change these body electrocurrents when the change is suggested under deep hypnosis. He also recognized that he had found a physiological proof of hypnosis: “We found we could use this difference [in current direction] to determine whether a person was really hypnotized or just cooperating.” (*Ibid.*) The CIA had that on their 1950s goals list: a foolproof way to know if a person was really hypnotized or just pretending. By now, maybe they already knew what Becker thought he had just discovered.

Neurons

Specialized cells called **neurons** perform the physical work and make the mental magic of mind. Instructions given in hypnosis are ultimately commands to neurons. All the brain structures are made up of neurons. Every habit is something that happens, fundamentally, at the neuron level. Every time you do something again, you reinforce the synaptic paths for doing that behavior.

There are nearly a trillion neurons in the entire human nervous system. There are many types of neurons. They vary wildly in size, shape, and function. **Neurons have chemical, bioelectric, and biomagnetic capabilities.** The total number of potential connections between those neurons approaches infinity. As we learn, our neurons literally grow and make new connections that model that learning. New nerve fibers grow and branch out from the tips of earlier branches, and new neuron connections are forged. Neurons are the ultimate communicators.² They use electricity, chemistry, and magnetism to communicate.

Most neurons have a main cell body, plus a tail called an **axon**. Pulses of electricity travel along the axon fibers away from each cell center at periodic intervals. The frequency of **pulses** depend on the neuron’s degree of excitation. A neuron fires from one to sixty pulses a second down its axon tail. It fires one pulse per second when at rest, its most **inhibited** state. It sends sixty pulses a second in its most **excited** state.

Axon lengths vary. Axons from neuron to neuron

in your brain may be as short as a few centimeters or as long as the diameter of your brain. Axons that go from the central nervous system to body extremities may be much longer. The far end of an axon splits into myriad branches. Each branch ends in a **bouton**, a connector that settles itself close to the surface of another neuron.

The outside of a brain neuron is completely covered with barnacle-like connecting boutons from other neurons. The neuron’s surface also has many extensions, called **dendrites**. The cell’s outgrowth of dendrites increases its available area for the boutons of other neurons to snuggle in. Every neuron is, inextricably, part of a larger neural community, with potential instant sharing of information.

Chemical Communication—One of the ways in which a neuron can affect other neurons is by squirting any of a wide variety of chemicals, called **neurotransmitters**, from its axon tip across the **synapse** (gap) into **receptors** in a neighboring neuron. The pulsed electrical signals that come down an axon are translated into **neurotransmitters** at the axon tip. Each type of neurotransmitter has both a distinct shape and distinct magnetic characteristics. They shoot out of the bouton’s transmitter-producing sacs like pellets blasted out of a shotgun. They are propelled across the sliver-size gap between the bouton and into the **receptor** which the adjacent neuron has grown for that purpose.

Electrical Communication—Any induction is a physiological event, because brain function is physiological. The bioelectric state of a neuron is either off, or on, because it is either **firing** or **not firing**. Pavlov called the state of firing, **excitation**. He called the state of not firing, **inhibition**. He also used the word “inhibition” to mean the **slowing down of activity in the higher brain which results in trance**. He called lowering consciousness, **spreading inhibition**.

Pavlov was theorizing that level of consciousness results from the dynamic interaction of two opposing neural functions: **excitation** and **inhibition**. In his era, neuronal synapses and their firing patterns had not yet been discovered. We now know that he was correct. A neuron that is not firing is inhibited. Anything that slows down the firing rate of neurons—or completely prevents them from firing—is **inductive**.

Excitation in one neuron can spread to surround-

1. Pain relief is one of the standard uses of hypnosis. I used to think hypnotic anesthesia was merely a negative hallucination. Suggestion in any form, during trance by any name, if accepted by a susceptible person’s unconscious, can relieve pain (or cause it). Becker’s research clarified the mechanism involved.

2. One of the marvels of modern science is that researchers can insert a tiny glass electrode into a living nerve cell, stimulate it to send a message, and then actually listen to the ensuing conversation between it and other cells amplified over loudspeakers: a patterned communication. (*Montgomery, p. 26*)



ing neurons. A bunch of excited neurons may take over other brain centers, exerting more and more brain control. Inhibition has a necessary, natural, protective function in the brain: “an enormous synaptic powder barrel which would explode in epileptic convulsions in the absence of inhibitory elements.” (Delgado, *Physical Control of the Mind*, p. 156) Inhibition helps neurons to ignore messages that are not for them. Inhibition activity balances the excitatory firing capacity. Inhibition is not a passive process but an

...active restraint, like holding the reins of a powerful horse....During the organized performance of behavioral responses, most neurons and pathways must remain silent to allow meaningful orders to circulate toward specific goals. Inhibition is as important as excitation for the normal physiology of the brain, and some structures have specialized inhibitory functions. (Ibid.)

On the other hand, when the conscious, decision-making, analyzing mental center of the cortex is completely inhibited, what is left is **automatism** (somnambulism). When the OSS sponsored a scientific conference on inhibition during World War II, papers were presented on the induction of trance. When Delgado spoke of **inhibitory mechanisms**, he meant whatever lowers consciousness. **Whatever lowers consciousness inhibits the conscious mind and increases suggestibility.**

Direct Currents

Study of electrical currents in the nervous system goes back to the 1940s, when Ralph Gerard and Benjamin Libet measured direct currents in a frog’s brain. In 1958, electric currents were detected in the glial cells of rat brains. Also, about that time, Dr. Bob Becker left a first career in orthopedics to begin thirty years of research in bioelectricity. Soon he could predict the **voltage** and **polarity** of a nerve before testing it. He learned that the brain and spinal cord are positively charged; the extremities are negative. Neurons are normally

...polarized, positive at the input fiber, or dendrite, and negative at the output fiber, or axon.

(p. 106)...this electrical polarization might be what guided the impulses to move in one direction only, giving coherence to the nervous system. (Becker, *The Body Electric*, p. 106)

That coherence is the normal bioelectric current which flows in a nervous system. The current is **positive** or **negative**. Its current flows in a loop: out from the brain through the motor nerves, back through the sensory nerves. The current is not carried in the nerve itself,

but rather in the outer sheath of the nerve, in the **perineural**, or **Schwann**, cells. Every part of the nervous system, even the tiniest

twiglet, has perineural cells. They are a network extending throughout the body, bathing every cell in faint electrical current.

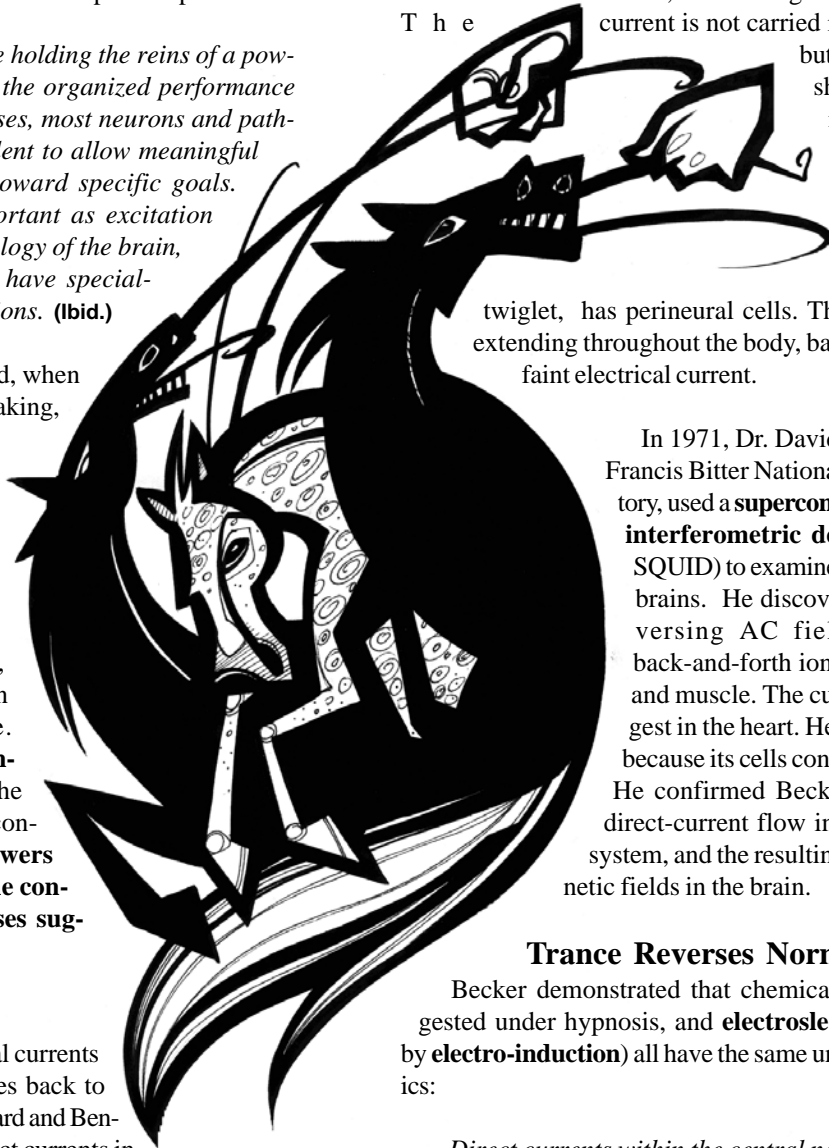
In 1971, Dr. David Cohen, at MIT’s Francis Bitter National Magnet Laboratory, used a **superconducting quantum interferometric device** (nicknamed SQUID) to examine electric current in brains. He discovered a quickly reversing AC field produced by back-and-forth ion currents in nerve and muscle. The currents were strongest in the heart. He deduced this was because its cells contract in synchrony. He confirmed Becker’s discovery of direct-current flow in the nerve sheath system, and the resulting steady DC magnetic fields in the brain.

Trance Reverses Normal Polarity—

Becker demonstrated that chemical anesthesia, suggested under hypnosis, and **electrosleep** (trance caused by **electro-induction**) all have the same underlying biophysics:

Direct currents within the central nervous system regulated the level of sensitivity of the neurons by several methods: by changing the amount of current in one direction, by changing the direction of the current (reversing the polarity) and by modulating the current with slow waves. Moreover, we could exert the same control from outside [the subject’s body] by putting current of each type into the head. (Becker, pp. 112-113)

That is a remarkable realization!





Electric currents (or electromagnetic fields) can cause inhibition. They can produce anesthesia, defined as absence of waking consciousness. The absence of waking consciousness is trance. Certain electric currents or electromagnetic fields can produce trance, acting from outside a body!

A strong enough magnetic field oriented at right angles to a current magnetically “clamped it,” stopping the flow. By placing frogs and salamanders between the poles of an electromagnet so that the back-to-front current in their heads was perpendicular to the magnetic lines of force, we could anesthetize the animals just as well as we could with chemicals, and EEG recordings of magnetic and chemical anesthesia were identical. We got the same effect by passing a current through the brain from front to back, canceling out the normal current of waking consciousness, as in electrosleep. (Becker, p. 238)

Becker learned that waking from trance caused by a magnetic field did not resemble the lengthy wake-up from chemical or direct-current electrical anesthesia. Instead, it resembled the awakening from a merely verbal induction of trance.

...as we decreased the strength of the magnetic field, normal EEG pattern returned suddenly, and the salamander regained consciousness within seconds. (Becker, p. 113)

Becker’s research made clear that electronic induction from outside the body could be done by forcing slow waves on the brain, by reversing brain polarity, by reducing the waking current flow, or by using a magnetic field: electrical anesthesia! Specific potentials exist of chemical, electrical, and biomagnetic effect on neurons—resulting in the induction of trance. It was only a matter of time before **induction machines** based on one, or more, of these physical principles would be developed.

Options

The neuron has a broad spectrum of communication options. It is not limited to its two firing extremes of one and sixty pulses per second. It can change the type of neurotransmitters it emits. By growing more, or fewer, receptors, it can change its sensitivity to the neurotransmitters which are sprayed against its outer membrane by other neurons. It can change the metabolic rate of a neurotransmitter producer, or of a receptor, slowing it down, or speeding it up. A neuron can also reduce, or increase, its number of axons, or its production of a particular neurotransmitter. Certain neurons are sensitive only to certain neurotransmitters. Other neurons are only able to communicate to a lim-

ited range of associates.

Those options are inhibiting factors which help keep order in the universe of the mind. A neuron does not have to say either “yes” or “no.” A wise neuron does not let itself become carried away in an explosion of excited response. It gives cautious, halfway, responses. It only becomes partly excited. Because of that wide variation in its possible responses, it has the ability to exercise caution. A neuron can say “maybe,” or “I’ll think it over,” or “I’m waiting for more information,” or “I’ll pray about it.” It can also reject excessive inhibition. It can reject unwelcome trance induction attempts.

Pavlov’s Four Induction Types

The methods which lower consciousness have many different names. Physiologically, however, all induction techniques can be divided into just four basic categories. Pavlov first pointed out these four routes to **cortex inhibition/trance**. The **four Pavlovian types of trance induction** are:

- 1) **Sensory deprivation** (too little cortical stimulation)
- 2) **Sensory overload** (too much, or chaotic, cortical stimulation)
- 3) **Brain syndrome** (lack of food, sleep deprivation, or sickness affects cortical ability to maintain alertness)
- 4) Lowering of consciousness caused by an outside force using **chemical, electrical, or electromagnetic** means to disrupt function of the targeted cortex.

The next sections explain what is inductive, and why, and how to make choices between inductive influences. That information can help you avoid unwanted manipulations.



Type 1 Induction: Sensory Deprivation Shuts Down the Analyzer

Sensory
Deprivation
Experiments



Deprivation and
Concentration
Inductions



Induction by
Shift to Right
Brain

...it should now be apparent that relaxation techniques will have to be thoroughly reported to the patient or subject as producing that condition that many people in the past have characterized as hypnosis.

Edmonston, *Induction of Hypnosis*, p. x

The author of that quote expressed doubt, however, that professional hypnotists would submit to the ethical principle he had just stated. As a more realistic solution than trying to make hypnotists be truthful, Edmonston urged better public education: “An educated, knowledgeable populace is better able to make a well-reasoned choice than one held in relative ignorance....” (**ibid**).

Any **induction method** weakens or shuts down the cortex. Any inhibiting process which limits the analyzing

function (central to your conscious mind and its ability to evaluate and make decisions) is inductive. The **analyzer** in your brain is your conscious evaluating, deciding self. It is your **ego**. It is you. When your conscious mind goes off-line, you are either in trance or asleep. Type 1 inductions are inhibition caused by **sensory deprivation**. Anything that slows down, or reduces, thought, or reduces sensory or mental input tends to lower consciousness.

..Human beings...need to explore new and chang-

ing conditions...Organisms function best when their level of activation is moderate, and they try to avoid both too much and too little arousal.

(Suedfeld, "The Benefits of Boredom," p. 67)

Many influences can cause us to **lower consciousness**, at least a little, and then (in that lowered state) accept persuasion. A state of lowered consciousness is **trance**. Trance always begins with some process that **inhibits**. Four common ingredients of a **sensory deprivation (Type 1) induction** are:

1) **Passivity**: a behavior pattern of submission to the leader's thought suggestions.

- 2) **Eye closure**: sensory deprivation of sight, the most stimulating sense, contributes to brain inhibition.
- 3) Advice to "**relax**."
- 4) **Focused concentration**: for example, first on breathing deeply, then on a series of fantasy images, and on the leader's voice.

Other Type 1 inductions are classic sensory deprivation, progressive relaxation, highway hypnosis, boredom, repetition, mind blanking, and shift to right brain.

Sensory Deprivation Experiments

Sensory deprivation was discovered by Donald Hebb, McGill's Chairman of Psychology. In 1950-51, as Chairman of the Canadian Defense Research Human Relations Committee, Hebb was invited to a meeting of British, American, and Canadian military psychologists. One topic was the bizarre Russian "confessions" then going on as part of the Stalinist purges. Another topic was the American discovery that U.S. troops manning early-warning stations in the Arctic were listening to Radio Moscow because they could not receive any other stations. The military asked the psychologists if listening to only one station—Radio Moscow—would turn the troops into Communists.

Hebb thought up an experiment to test a very extreme version of the Radio Moscow situation. When he got back to McGill, he hired twenty-two subjects, mostly graduate students, for \$20 a day (a lot of money in 1951). All promised to stay in the experiment for a minimum of twenty-four hours, with an option to stay for five days (and earning a whole \$100!). Each volunteer was placed alone in a room. The room was miked, so any sound he made could be heard by the researchers. He wore goggles over his eyes that blocked every form of patterned light. Only diffused light could get through. The subject's arms—clear down to the fingertips—were covered by cardboard tubes to prevent him from using his sense of touch. Each subject wore headphones over his ears. Via the headsets, some subjects heard **white noise** (meaningless static). Others heard "Home on the Range" played over and over, or stock-market quotes, over and over, or nonsense syllables, over and over.

When they saw the setup, six of the twenty-two volunteers backed out right then and there. The average

stay of those who did give it a try was forty-three hours. Eleven quit even before the promised first twenty-four hours was up. The longest anybody stayed with it was 139 hours (five 24-hour days, plus nineteen additional hours).

What happened to the brains of those volunteers who were subjected to that extreme sensory deprivation surprised Hebb. They could keep coherent thoughts for five or six hours. After that, **they began to be unable to think clearly**. Next they experienced **visual hallucinations**, and maybe also auditory and tactile hallucinations:

One man saw squirrels with packsacks on their shoulders marching in single file over a snow field, another not only saw a space ship in the 'sky' but felt projectiles fired from its guns hitting his arms. One of the experimental team, a clergyman who was in graduate psychology under Hebb, thought he was going crazy before he had passed even 24 hours: he hallucinated a whole scene that began with a stone sending ripples out over the surface of a woodland pool. Then naked boys dived in from above the trees, followed by naked women—at which point the researcher got himself let out....

(Anne Collins, p. 51)

It was an important experiment in the history of psychology. Hebb had discovered that brains need steady and varied input from their environment to stay in a normal mental state. After less than a day under conditions of sensory deprivation, the subjects came out with their brains, temporarily, less functional. Their IQs were lowered. Their reaction times were slowed. Some of the students had per-



sisting illusions. One, because of an illusion of seeing the world as flat, almost had a car accident. It took as long as 24 hours for their brain functions to fully return to normal.

Hebb also learned that denial of sensory input dramatically increased receptivity to any patterned input. If he gave subjects a choice of white noise or “Home on the Range,” they quickly came to love “Home on the Range.” He let some subjects listen to

Passages of propaganda in favor of innocuous theories they thought university-educated science students would be fairly resistant to: a belief in ghosts and extrasensory perception; and the anti-evolutionary point of view. (Anne Collins, pp. 51-52)

Hebb reported that:

The effects of the propaganda were the only ones that showed signs of lasting beyond the experimental period...A number of the experimental subjects, unlike the controls, went to the library to borrow books on psychical...research, mind-reading and so forth; there were spontaneous reports of being afraid of ghosts late at night, for the first time in the subject's experience; and reports of trying to use ESP in card-playing... (Hebb, 1958)

Another experiment on sensory deprivation, done by other Princeton researchers, produced similar results. The sensory deprivation predisposed subjects to accept uncritically whatever they were told:

After they had spent twenty-four hours in the darkroom, he played them a tape with a propaganda talk in praise of Turkey...the students now felt very friendly towards Turkey. With a group of students, however, who had not been in the darkroom, the propaganda had little or no effect. (Lausch, p. 223)

The U.S. sponsored more sensory deprivation experiments.

Under experimental conditions, some people have succumbed to sensory deprivation within one-and-a-half hours, whereas others have maintained adequate function for thirty-six hours or more. (Hinkle, in Biderman & Zimmer, p. 33)

Eventually, all of Hinkle's subjects began hallucinating. If a brain cannot obtain outside stimulation, sooner or later, it will manufacture its own. The early sensory deprivation research made clear that:

1. Brains must have a constant inflow of new data to function normally. Constant learning is a physiological need!
2. The less input there is to a brain, the more susceptible and suggestible that brain becomes to whatever input is available.
3. The most effective programming system will endeavor
 - a) to minimize other inputs as much as possible, while
 - b) delivering its own propaganda, educational material, training, beliefs, etc., to a maximized degree.

Hypnotic Chambers

Research on sensory deprivation led to the development of the **hypnotic chamber**. This was a room, or a complex of rooms, built in such a way as to minimize sensory input and thereby create sensory deprivation. For example, a biofeedback training room is “dimly lit, soundproofed...no distractions.” (Pines, p. 58) Likewise, you leave the relaxed pastels of the outer hallway and enter a series of rooms dedicated to hypnosis research at a major northwestern university by walking through a soundproofed door.

You are now looking down a hall about thirty-five feet long which has several doors leading off from it. One leads to a conference room, another to an observation room where watchers can peer through a one-way glass window into the interior of the adjacent induction room. Inside the induction room, all the walls and doors are painted a bizarre, dense black. No pictures, signs, clippings, or graffiti relieve that bare blackness, only the “mirror” provides a little visual interest.

Not only is the visual setting starkly transformed from the outer environment, but also you have stepped into a distinctly different acoustical environment. No sound whatsoever from the bustling corridors outside can stimulate or interrupt thoughts in here. Voices (or screams) inside these black rooms cannot be heard outside. There is a faint hollowness to spoken voices, like sounds in a cave. It is an absolutely soundproof environment.

This, and every other, hypnotic chamber is a structural embodiment of the operational principle of sensory deprivation that every trance inducer understands. He turns down the lights, quiets the room, suggests that the subject close his eyes, quiet his body, slow his thoughts. That deprivation leads to lowered consciousness, heightened suggestibility.

The CIA mentioned plans for a hypnotic chamber in a memo titled “Interrogation Techniques,” dated January 14, 1953:

If the services of Major Louis J. West, USAF (MD), a trained hypnotist, can be obtained and another man well grounded in conventional psychological interrogation and polygraph techniques, and the services of Lt. Colonel _____, a well-balanced interrogation research center could be established in a especially selected location.

That research center, apparently, was built. West wrote his friend Aldous Huxley in 1961 (Huxley, *Moksha*, p. 186) that his latest experiments involved sensory deprivation, and that he had a superbly equipped laboratory in which to do them.

An untitled CIA document, from about 1956, details plans for a more advanced hypnosis lab:

This laboratory will include a special chamber, in which all psychologically significant aspects of the environment can be controlled. This chamber will contain, among other things, a broad-spectrum polygraph for simultaneous recordings of a variety of psychophysiological reactions of the individual being studied. In this setting the various hypnotic, pharmacologic, and sensory-envi-

ronmental variables will be manipulated in a controlled fashion and quantitative continuous recordings of the reactions of the experimental subjects will be made. (quoted in Schefflin & Opton, p. 498)

A one-person induction room of this type is marketed to private parties for eliminating “outside sense stimulation.” (McGill, 1991, p. 19) The Hypnotic Chamber is six and a half feet high, three feet wide, and four feet deep. The subject enters through a door, then lies down on a deeply reclining (sixty degree), thickly padded surface, and closes the door. (It opens from the inside.) There is a little light in the Chamber ceiling for staring at during induction. It has an intercom system so that a person outside the Chamber can talk to one who is inside, and vice versa. “Experimental results with the Chamber have proved remarkable in the depth of trance induced.” (Ibid.)

The **isolation tank** is another type of sensory deprivation environment. The subject floats in the tank on top of warm, salty water (so salt-saturated that a person cannot sink in it) in a totally dark, soundproofed, and silent room. In the isolation tank persons have reported experiences ranging from insight to hallucination.

Randall N. Baer

The autobiography of Randall N. Baer, *Inside the New Age Nightmare*, details many trance induction methods. By the age of fifteen he was already a New Age trance junkie. He tried it all: from LSD to Silva to yoga. It was Baer's two books on crystals which kicked off the crystal excitement among New Agers. He marketed “treatment” in a room in which the subject was exposed to a powerful inductive combination of “New Age music, subliminals, brain-drive [brain wave synchronizing] machines, films of occult symbols, and swirling light-shows.” What Baer promised customers in his treatment room is what most New Age programs offer: trance induction. He wrote that “a large percentage” of the subjects did enter trance in that room. He delivered his “product” in over a thousand sessions.

Then, touched by the words of a television evangelist, Baer became a Christian. His book was very helpful to me. Shortly after publication, the brakes in his car unexpectedly failed; it crashed, and he died.

Deprivation and Concentration Inductions

Any type of mental focus or concentration lowers consciousness somewhat because of sensory deprivation. Whenever we strongly **focus attention** on something, we tend to **dissociate**. When dissociating, we become more suggestible. Our consciousness is always tending to split. Unaware, automatic actions are governed by a part of consciousness that is split off from the rest, by a specialized network of neurons. Those specialized neural networks do not have an analytical system of their own. They possess so little power of criticism that they accept suggestions

quite readily. Here follows a list of inductive methods that rely on a combination of sensory deprivation, and concentration on a single idea, to work.

A hypnotist's long, dull, monotonous monologue causes sensory deprivation. It bores the subject into trance. Bramwell's 1903 induction method became a medical standard still in use today. He used a quiet and somewhat darkened room to reduce sensory input. He told the subject to “just let it happen,” and then bored and suggested him into trance:



I then say: “Presently I shall ask you to look at my eyes for a few seconds, when probably your eyelids will become heavy and you will feel impelled to close them. Should this not happen, I shall ask you to shut them, and to keep them closed until I tell you to open them. I shall then make certain passes and suggestions, but I do not wish you to pay much attention to what I am saying or doing, and above all you are not to attempt to analyze your sensations. Your best plan will be to create some monotonous drowsy mental picture and to fix your attention upon that”...

*After these explanations, and having darkened the room and instructed any spectators to remain quiet, I place my patient in a comfortable chair and request him to look at my eyes, at the same time bringing my face slightly above and about ten inches from his...I continue to look steadily at him and make suggestions. These are twofold; the patient’s attention is directed to the sensations he probably is experiencing, and others, which I wish him to feel, are suggested. Thus: “Your eyes are heavy, the lids are beginning to quiver, the eyes are filling with water. You begin to feel drowsy, your limbs are becoming heavy, you are finding it more and more difficult to keep your eyes open, etc.” (Bramwell, *Hypnotism*, pp. 50-51)*

He suggested monotony, “heaviness,” and the idea of **sleep**. The suggested sensations, of course, are the first illusions that the subject is being directed to experience. They are elementary exercises in robotic unconscious obedience.

Massage, and Mesmeric “Passes”

Charles Tebbetts told his hypnotherapy students that **massage** is also inductive. The old-time mesmerizers sometimes did not even touch the subject, stroking only the air just outside the subject’s body. Esdaile described his procedure:

Desire the patient to lie down, and compose himself to sleep, taking care, if you wish to operate, that he does not know your intention; this object may be gained by saying it is only a trial; for fear and expectation are destructive to the physical impression required.... make the room dark, enjoin quiet, and then shutting your patient’s eyes, begin to pass both your hands, in the shape of claws, slowly, within an inch of the surface, from the back of the head to the pit of the stomach.... Repeat this process steadily for a quarter of an hour, breathing gently on the head and

eyes all the time. (Esdaile, pp. 145-146)

Esdaile had only just begun. After half an hour, he began to add verbal suggestions of sleep to the passes. He kept this up for as long as eight hours straight, as long as it took to get the subject to a coma depth trance. Esdaile was an English surgeon in India. He had no anesthetic but trance, so he had to induce profound depths. He performed the most challenging operations of his time on those mesmerized patients. After Esdaile started the induction process, his assistants continued it. That freed the doctor to operate on a patient who was already in a catatonic coma.

The stroking of a beloved’s body induces lowered consciousness. Massage in general—even a good back rub—tends to be inductive. Schilder and Kauders pointed out the common ground between the erotic and the inductive:

Gentle speech, shouted rebukes, manhandling, are not only devices in the technique of hypnosis, but also in that of erotic seduction, “fixation,” stroking—certain [induction] techniques even make very extensive use of stroking the body—are common both to hypnosis and to the erotic. (Schilder and Kauders, p. 35)

Relaxation

A relaxation induction simply may be a regular verbal hypnotic induction with the word “relaxation” substituted for the word “sleep, and “deeply relaxed” substituted for “deep sleep.” It will work just as well that way. When you relax, your brain waves slow, and consciousness lowers.

Progressive Relaxation—Edmund Jacobson researched the link between relaxing muscles and slowing brain waves. He learned that suggestions to relax cause a disguised induction. Jacobson published a specific sequential series of suggestions to relax various muscles of the body. He called his system **progressive relaxation**.

It specified wrinkling and unwrinkling the forehead for ten minutes, then relaxation exercises for the eyelids, then the eyes. (Boring, wearying repetition, such as the wrinkling and unwrinkling of one’s forehead for ten minutes, causes sensory deprivation and is inductive.) Near the end of the series, the operator (which he called the practitioner) was to bring his index fingers closer and closer to the subject’s eyes until the subject was staring at one fingertip.

Jacobson learned that his “relaxation” suggestions could be used to induct groups of people as well as individuals. Although Jacobson called his system “progressive

sive relaxation,” he knew that it was actually a system for hypnotizing persons. In his book on the subject, he described outward signs of successful relaxation, which clearly reveal a trance state:

- **Increasingly slow responses** to interruption, or complete failure to respond
- **Sleepy-eyed appearance** of a subject after successful relaxation

...when the individual learns to relax the eyes while open, their vacuous appearance, with the facial musculature so relaxed that it is expressionless, is characteristic... (Jacobson, 1924 edition, pp. 574-575)

Medical and therapy workers, sports psychologists, and others, now often use some variant of Jacobson’s progressive relaxation. A patient who goes to an emergency room with a severe migraine headache, is likely to be treated, in part, with progressive relaxation followed by visualization of imagery. Both are powerful induction tools. Once the patient is in a suggestible state, the nurse will give positive suggestions to relieve the headache. Hypnosis is a treatment for migraine that usually works.

That treatment, however, involves a disguised induction. Physiologically, the induction of relaxation is identical with the induction of hypnosis, and **relaxation** is a common type of disguised induction. Edmonston pondered the ethics of that situation:

*If a patient refuses “hypnosis” as part of treatment, is it ethical for the medical attendant to say to the patient: “All right, I won’t use hypnosis in your treatment, I’ll just teach you how to relax”? Has our knowledge of the relationship of relaxation to hypnosis placed us in the ethically awkward position of having to deceive, “for their own good,” patients who are resistive to the use of hypnosis? Are we now forced to an “end justifies the means” position, in which the practitioner must live with a sin of omission...in order to benefit the patient? (Edmonston, *Hypnosis and Relaxation*, p. 215)*

Repetition

Repetition strengthens **unconscious habit**. Whatever is to be drilled into your brain is repeated over and over. A short commercial, repeated ten times, programs you more effectively than a longer one repeated only three times. Advertisers know that, alas.

Repetition has an inductive effect on the brain. By

monotonous and incessant repetition, a sensory input, that began as a **stimulus**, can become an **inhibitor** of neurons. For example, by repetition of an indifferent stimulus in a continuous, monotonous manner, Pavlov bored dogs into trance. The meditator who is saying his mantra, over and over, is using a repetition induction. Herbert Benson, in *The Relaxation Response* (1975), although himself a meditator, pointed out that a special mantra is unnecessary, because any repeated word accomplishes the sensory deprivation to put you down.

A constant, unvaried, loud noise can also put a susceptible human being to sleep. I saw public school students in a Michigan “open” classroom in a tight huddle with their teacher, heads close together, saying, “Ommmmmm,” before beginning their computer class. The head teacher then realized that the guest speaker in their school was staring, wide-eyed, at the omms. (I was surprised to see that New Age and Eastern religious practice was a classroom routine in a public school where Christian prayer was not permitted.) She rushed over and told them to stop.

A researcher named Das subjected persons to the monotonous stimulation of a single tone to see if they would go into a trance, like Pavlov’s dogs. It worked. One (non-hypnotizable) person merely felt bored. Two felt sleepy. But five were found sleeping after only thirty seconds, and six were found snoring. The monotonous tone had produced a Pavlovian state of inhibition. Das speculated that the faster his subjects became sleepy, and the more sleepy they had become, the more hypnotizable they were. (He also suggested a correlation between hypnotizability and **conditionability**—viewing hypnotizability as a survival asset.) (Das, “*The Pavlovian Theory of Hypnosis*”)

Martin Orne wrote, “...peculiar types of repetitive, rhythmic stimulation” compel trance in hypnotizable individuals.” (article in Biderman & Zimmer, eds, *The Manipulation of Human Behavior*) Listening to music, or watching the same video or rerun over and over, is soothing—and also inductive. “Hari Krishna, Hari Krishna, Hari Hari, Krishna Krishna,” the Krishna Consciousness follower intones. Buddhist worshippers chant the same brief sentence over and over.

*The group would all be on bended knees, chanting to a sacred scroll in front of the room. The chants were from an Eastern scripture called the “Lotus Sutra.” There was a short, easy-to-learn chant which was the main focus of the religion. I was instructed to chant this phrase for 30-60 minutes every day... (Baer, *Inside the New Age Nightmare*, p. 9)*

Sufis use “dhikr” phrases, recited over and over



together with others, or alone, “perhaps most effective when repeated silently in the mind and accompanied by special breathing techniques and physical movements.” (**Sargant, *The Mind Possessed*, p. 75**) Meditators say their “mantra” word, or phrase, over and over, until the altered state is reached. If his consciousness raises, the meditator just goes back to saying the mantra, which creates sensory deprivation and lowers consciousness again.

Christians use repetition inductions, too. The congregation may sing favorite, deeply meaningful, verses, over and over, before it hears the sermon. The Catholic repeats “Hail Mary, full of Grace, blessed art thou among women and blessed is the fruit of thy womb, Jesus...” or “Jesus Christ, Son of God, have mercy on me, a sinner.” Other congregations may sing old favorites, “Put your shoulder to the wheel, push along...” “On a hill, far away, there’s an old rugged cross...” “Rock of ages...” It is inductive, but it is certainly not a moral error to repeat beloved, significant poems, songs, scripture verses, prayers, etc. “The Lord is my shepherd...” Sometimes, a lowering of consciousness is exactly what we are seeking in an attitude of worship.

Type 1 Induction Machines

A machine’s stubborn mechanical insistence can break down human resistance and quickly access the subject’s unconscious. **Induction hardware** comes in many forms. Type 1 machines are designed to accomplish cortex inhibition by causing sensory deprivation. They produce a **monotonous** (tone) or **meaningless** (white noise) sound, or a monotonous, meaningless, or very concentrated visual image.

The first hypnosis induction machine was the **Luy’s light**, a machine which whirled a hypnodisk with a light on the side. The night that Dr. Jensen first hypnotized Candy Jones, he showed her **hypnodiscs** and other induction aids that used “flashing or rotating lights.” (**Bain, p. 94**) The hypnodisc has tried and true efficacy in hypnotic inductions.

Hypnodiscs—Visual patterns affect the brain. They can also affect level of consciousness. Spinning light can induce hypnosis. I often glimpse some kind of spinning image, or spiral pattern, worked into a TV ad or at the opening to a show to lower consciousness and intensify dramatic effect. Television or film, especially shows for children and adolescents often use hypnotic elements such as spirals, spinning, or confusing images, and out-of-focus views—all of which tend to lower a viewer’s consciousness, especially if that viewer is a young person.

A hypnodisc may be as simple as a piece of white paper with a black spiral design. It can be viewed motionless, or rotated. The rotation can be done by hand, but it is

most effective when the hypnodisc is spun mechanically by attaching it to a revolving pin in its center. Hypnodiscs have varied in size from thumbnail diameter up to five feet wide, or larger. Stage hypnotists have mounted a large disc on their platform (and put a significant percentage of the audience into trance by its influence).

A hypnodisc is inductive because the spinning spiral focuses the subject’s attention on a series of optical illusions and tires his eyes. The operator may reinforce that effect with a verbal suggestion to experience an illusion: “You feel you are being drawn into a deep, dark, revolving cone.” Or...

“...The white circles become more prominent, then the black...it seems to recede in the distance and you feel as if you are drawn into it. Your breathing becomes deep and regular. You get drowsy, very drowsy. Soon you will be asleep.” (**Wolberg, 1948, p. 143**)

A **metronome** makes a simple, repeated, rhythmic sound. Some induction metronomes are combined with a small light that flashes in time with the sound. Staring at the swaying of a **Chevrue’s pendulum**, or into a **mirror, hypnodisc**, or **Luy’s light** also is inductive. Other mechanical induction aids used in the history of hypnosis are Luys’ revolving mirrors, the hypnoscope, color contrasting cards, and a silver spoon used to reflect candlelight into the subject’s eyes.

Recorded Inductions

George Estabrooks first proved that a hypnotic induction could be accomplished by means of a recorded patter (“A Standardized Hypnotic Technique Dictated to a Victrola Record, 1930). He produced the first widely distributed **recorded induction**.

Audio and videotaped induction, followed by helpful suggestions, is now big business, especially in the motivational, habit-changing, and self-improvement businesses. The recording typically begins with an induction to **lower consciousness** and **increase suggestibility**—followed by the suggestions.

For example, at **stop-smoking clinics** the client hears the initial hypnotic conditioning and suggestions live, then takes home a taped version. He listens to that tape several times a day until the craving to smoke subsides. (It usually works.) Some **hypnotherapists** have a specific tape for every routine problem that may come into the office: eating too much, eating too little, nail-biting, nose-picking, flashing, frigidity, etc.

Mind Blanking

Mind-blanking or **thought-stopping** was, and is, a common induction technique. This method creates sensory deprivation and bores the subject into lowered consciousness.

...concentrate the subject's mind upon some one unimportant thought to the exclusion of all others. This thought must, indeed, be so unimportant that when it is the only thought entertained the mind is almost absolutely passive. (Cook, p. 78)

The “sound of one hand clapping” is an unimportant thought which is also confusing (another inductive technique.) The image stops thought because it is **illogical** and **paradoxical**. Therefore, it causes a sensory deprivation.

A similar thought-stopper is the statement: “If a tree falls in the forest, and no one is there to hear it, does it make a sound?” (Yes, it does. A deer browsing nearby would hear it fall. Plants broken under the weight of the fallen tree would “hear” it. The temptation in that thought is to imagine that the universe only exists if “I” perceive it. That is arrogant, self-centered, and false.)

I heard a radio deejay asking rapid-fire questions of callers: “If you had to choose one: no nose or an extra nose in the middle of your forehead—which would you choose?” “If you were cold in bed, would you rather put on another blanket or turn up the heat?” “Don’t stop to think, just answer.” That is a paradox style of induction. It sidelines the analytical, thinking conscious mind.

Yoga instructions are inductive. None are openly called “hypnotic,” but all lead to trance. Richard Hittleman’s *Guide to Yoga Meditation* used a thought-stopping induction. The TV guru told readers that thinking was a bad thing and that they should avoid thinking as much as possible, because many thoughts “include useless concern, false anxiety and foolish daydreaming.” (p. 43) Thought-stopping is an effective induction technique, so Hittleman’s suggestions, if taken literally, could propel a susceptible person into a state of near constant trance (vigilambulism).

Nielsen seduced Palle into hypno-robot condition partly by using the lure of pride. Hittleman used similar grandiose language to describe trance. He said that a person with no consciously recognized trance experience was “sleeping.” His term for a person who was beginning to experience sessions of lowered consciousness was “awakened” or “enlightened.” He said that this enlightened person can

...transcend his ordinary mind...You have a great

responsibility not only to yourself, but to your fellow man to advance your development as far as possible... (Hittleman, pp. 63-65)

Trance can, and does, “transcend” ordinary mind. It can put you more in touch with the truth, or less. Beware of pride in trance, because pride can be the root of evil, the tool of the deceiver.

Hittleman warned that “Usually there is a great inner struggle as one treads the winding path between the states of ‘wakening’ and ‘enlightenment.’” (*Ibid.*, p. 66) That “struggle” may be your conscious mind trying to keep you grounded in reality. Similarly, Nielsen urged Palle, repeatedly, to overcome his “resistance.” Nielsen trained Palle to stay in a prolonged trance. Hittleman also urged the reader to stay in trance by an act of will: “...whenever you feel that it has deserted you, simply will it back.” (*Ibid.*, pp. 68-69)

Two other advocates of Eastern-style induction instructed:

...sit down, be quiet, watch your mind, bring it to one-pointedness, bring it back when it strays—which it most certainly will within the first ten seconds—over and over again. (Goleman & Thurman, MindScience, p. 106)

Thought-stopping inductions can be nonverbal. They can be part of any religious context. The Montanists were a Christian sect; about 200 AD they held forefinger to nose during prayer and that centered focus soon lowered consciousness. Residents of certain Greek Orthodox convents of the Onphalopsychists on Mt. Athos achieved trance by staring at their navals. In 1666, Brother Lawrence, an humble French monk, wrote similar instructions to develop a sustained trance:

Let it be your business to keep your mind in the presence of the Lord. If your mind sometimes wanders or withdraws from the Lord, do not be upset or disquieted...The will must bring the mind back...Become accustomed to recalling your mind to the Lord often. As you do this more and more you will find it easy to keep your mind calm in times of prayer and to recall it when it wanders. (Brother Lawrence, Practicing His Presence, p. 82)

The psalmist recorded the most simple, and powerful, instruction in this category: “Be still, and know that I am God.” (**Psalm 6:10**)

Trance is a door to the spiritual realm for those persons with genetic capacity to experience it in that manner. Trance is the mind channel that opens us to that which is transcendent and holy. However, trance can also open us



to that which is corrupting, degrading, and unholy. May we have the grace of God to discern the difference between various trance situations and trance contents. May God protect us from all unholy, corrupting, or abusive trance relationships.

Eyes Have a Role in Induction

Eye Focus—Staring into your own eyes in a mirror is inductive. Staring into somebody else’s eyes when they are close to you can be inductive also. In fact, **staring** at anything has inductive potential. Staring causes sensory deprivation, and thus it tends to lower consciousness. It is normal for your eyes to shift freely around, looking at various objects. Eye movement prevents eyestrain. If you stare fixedly at a close object for even as little as five or ten seconds, your eyes will start to tire. Hypnotists call the point you stare at, the “target.”

Staring at a **target** causes **eye fatigue**, which can lead to **eye closure**, which can lead to “sleep.” The target can be a candle, an unshaded electric light, an object swinging on the end of a chain, somebody else’s eyes, or your own eyes seen in a mirror.

Eyes become even more fatigued if the target is **above** eye level. Rolling your eyes upward correlates with, and may actually generate, increased alpha. So when trance inducers ask you to stare at a fixed point, the target is probably above normal eye level, causing eyestrain. Or it may be close to your eyes, which causes discomfort in focusing, another type of strain.

There are many common applications of that principle. Eye fixation is the intuitive function of symbols—national flags, religious symbols, organizational icons. And those symbols are usually displayed above eye level. Eye fixation has real psychological impact in the intensity and focus of a ceremonial setting. “I pledge allegiance to the flag...”

Eye Closure—A hypnotist usually maneuvers for, or asks for, eye closure early in the induction. Eye muscles are the smallest muscles in your body, and the most easily tired. After a brief period of upward staring, a subject tends to close his eyes if the operator suggests that they are “tired” and “strained.” They are! But accepting that suggestion further decreases sensory input. And imagining that the operator has already been able to make magical things happen in you (“tired, strained” eyes), also deepens trance.

Eye closure instantly, significantly reduces sensory intake, because sight is the dominant human sense. Any time you close your eyes, alpha brain waves immediately increase. If the room is quiet, and you sit or lie quietly, auditory and tactile input is reduced. The less meaningful the input you are receiving, the more focused and suggestible your mind will be to whatever is coming through.

Any time somebody tells you to close your eyes and pay close attention to his words, he is, intuitively or consciously, striving to lower your consciousness. Any time you close your eyes and **visualize** something, you are entering a more suggestible **hypnotic state**. Any time somebody tells you to close your eyes and then spends a period of time directing you to visualize a series of things or do a series of acts with your mind or body, he is conditioning you for deeper trance and greater suggestibility. The outcome may help you, or it may harm you. You must be able to discern the difference.

Obedience Conditioning

“Will you help me?” my young daughter asked.

“Okay,” I agreed.

She began to read instructions to me out of a book: “First raise your head,” she requested. (I did.) “Now lower it. Now turn it to the right. Now turn it to the left. Now stick out your tongue.” (I continued to obey, through various commands, letting her be the operator pulling my puppet strings. “Fine,” she encouraged me. “Now open your mouth. Now close your mouth. Now clap your hands. Now close your eyes.”)

I was now sitting quietly with my eyes still obediently closed.

“SLAVE!” she chortled triumphantly at me.¹

A hypnotic induction is often a long series of suggestions which the hypnotist wants the subject to obey. To achieve induction and deepening, it does not matter what the suggestions are, as long as the subject is kept busy obeying. A subject who is busy obeying does not slip out of trance and start thinking for himself.

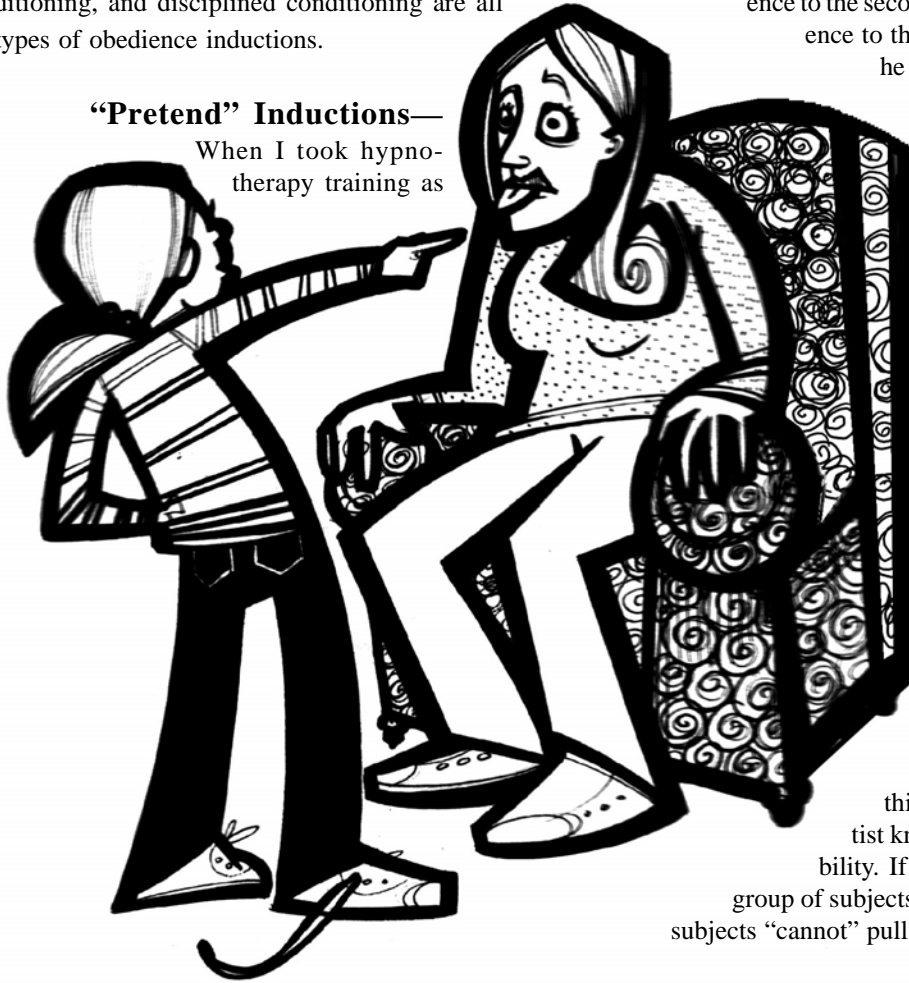
A popular sales training system teaches salesmen that, if they can cause a client to obey any two suggestions, he becomes likely to obey a third one, too. That is the force of habit. Human beings are tremendously fast learners. Even two times can be the beginning of a habit that is difficult to shake. Or even once. “Pretend” inductions, abstract con-

1. Quoted from **Schwartz, *Tomfoolery: Trickery and Foolery with Words*, p. 42.**

ditioning, and disciplined conditioning are all types of obedience inductions.

“Pretend” Inductions—

When I took hypno-therapy training as



part of the research for this book, I learned about “**pretend**” inductions.

If a subject agrees to pretend that he is hypnotized, he will become hypnotized, sooner or later. His consciousness lowers because he keeps taking orders. The principle is “use it or lose it.” If a person keeps taking orders, completely turning off his own analytical powers and behaving like an automaton, his power of self-willing (ability to say yes, or no) starts to fall asleep. It has nothing to do.

Abstract Conditioning—If you can make a person believe that he is hypnotized, and therefore act hypnotized (mindlessly obey), soon he will be hypnotized. **Abstract conditioning** is an induction technique which fools a subject into believing that he is hypnotized before he actually is. Believing it, soon, makes it so.

All hypnotic training creates **conditioned responses**. Livingston Welch, a behaviorial hypnotist, first reported and analyzed this phenomenon of **abstract conditioning**. In this method, the hypnotist tells his subject to do one thing. Then he tells him to do a second thing. Obedi-

ence to the second command is compelled by obedience to the first one, but the subject assumes he is obeying because of the hypnotist’s mysterious powers.

For example, a stage hypnotist gives the **handclasp challenge**. He challenges his subject to clasp his hands in front of him, keep them clasped—and then try to pull them apart. The subject’s hands will not come apart because his knuckles are in the way. He can only pull them apart if he unclasps them first. The handclasp challenge induction tricks the subject into believing that the subject cannot control a part of his own body because of the hypnotist’s suggestion. The subject’s inability to move is more than just an illusion. The hypnotist challenged the subject to do something that the subject thinks he can do, but which the hypnotist knows is actually a physical impossibility. If the handclasp challenge is given to a group of subjects, the hypnotist then observes which subjects “cannot” pull their hands apart:

*Note them! They are the ones that you can control!...these people are awake and, in spite of it, you have succeeded in contacting their subconscious minds, thus completely controlling them. (Powers, **Advanced Techniques of Hypnosis**, pp. 83-84)*

The handclasp challenge identifies susceptible subjects and also begins the process of induction. A subject who believes he is hypnotized may then act hypnotized. A person who acts hypnotized, just like someone pretending to be hypnotized, very soon may actually be hypnotized. The pretender, and the believer, have the same outcome—lowered consciousness. That is abstract conditioning.

The **eye focus induction** is another example of abstract conditioning. The hypnotist first tells his subject to gaze steadily at a single bright object. His second suggestion is that the subject’s eyes are becoming tired. In truth, those eyes are getting tired because it is hard and unnatural to gaze fixedly at a bright object. The hypnotist may then suggest that the subject’s eyes are beginning to blink. In fact, eyes do start to blink under these circumstances (trying to rest from gazing fixedly at the bright object.)



A third example of abstract conditioning is the open-your-eyes-with-eyeballs-up challenge. The hypnotist has told a subject to close her eyes, and, with eyelids still closed, to roll her eyeballs upward as if looking at a visualized spot in her brain. In that condition, he tells her to notice that her eyelids “are beginning to stick tightly together, are now stuck shut, glued shut.” Then the hypnotist challenges her, while keeping her eyeballs rolled upward, to open her eyes. She cannot do that because nobody can do that. When the eyeballs are rolled upward with the lids closed, the little muscles that raise your upper eyelids cannot function.

Abstract conditioning is often used as a disguised induction.

Discipline Conditioning—If you act like somebody is your boss, and do everything he says, pretty soon you develop the habit of not thinking for yourself in that person’s presence any more. Boot camp runs on this principle. Let me add, however, that a pattern of doing the opposite of what you are told is equally unthinking and robotic. Inability to accept instruction is even more handicapping than becoming somebody’s robot. The best mental condition is a condition of free choice: choosing to do it his way, or your way, based on your reasoned analysis of each situation. It takes time and effort, however, to analyze a situation. Under conditions of haste or stress, unthinking obedience is more efficient. Under conditioning regimens, it is also more rewarded.

Parents, teachers, and military trainers traditionally lean on discipline conditioning. The longer the process of giving and taking orders continues, the more likely the subject is to put his own brain on a sidetrack and let the chief do all the thinking. Trained military rank-and-file are said to be good hypnotic subjects because of their obedience training.

Dr. Cook told student hypnotists to choose a prospective subject, then

...lead him gradually to submission. Incidentally tell him of your hypnotic knowledge...Then dare him to let you hypnotize him. It is best to commence on some young man about sixteen years of age, who is accustomed to working under a hard boss for little pay. He is accustomed to obedience... (Cook, p. 132)

So, a sensory deprivation induction can result from accepting repeated coaxing—or orders—to be passive, submissive, obedient. That series of instructions conditions the subject to accept ever more demanding suggestions. Hypnotists have a specific name for the inductive/deepen-

ing effect of giving a series of commands: **pyramiding of suggestions**.

...pyramiding of suggestions serves to increase the depth of hypnosis, for as each suggestion is obeyed, the subject inevitably falls deeper into the state...If a subject will obey simple suggestions, he will obey difficult ones. (Gindes, p. 165)

R.W. White further explained how the pyramiding of suggestions works:

...the urgent character of his words, their power to keep the subject attentive in spite of his drowsiness, lies...in the fact that they consist of requests, commands, and suggestions...By the measures which he takes to exclude distraction, and especially by his words, the operator tries to maintain a state of mono-motivation, a focal press of dominance, and the subject is given little alternative except to continue the deference which made him susceptible in the first place or else to display a resistive autonomy which under the circumstances could hardly be distinguished from aggression. (quoted in Moss, p. 143)

If being “good” can make you overly accepting of authority, is it ever good to be “bad”? YES! Curtis MacDougall told a relevant story in his book, *Hoaxes* (New York, Macmillan, 1940):

A coin about the size of a fifty-cent piece was passed around a class of forty-eight boys from fourteen to seventeen years of age with instructions to examine it carefully. At the end of the class period the instructor asked each boy to draw a picture of the coin, indicating the position of the hole in it. Although there was no hole, all but four of the forty-eight indicated one, some even drawing two holes. Of the four only one, the bad boy of the class unaccustomed to obeying orders, was positive that there was no hole. (MacDougall, Curtis D. Hoaxes. N.Y.: Macmillan, 1940)

One day, the fate of the nation might depend on the ability of citizens to recognize that there really is no hole in that coin! Society needs to cherish and protect the right to existence (and to free speech) of its “bad boys” who are unsusceptible to illusion and who can sound the alarm: “THE EMPEROR HAS NO CLOTHES!”

Induction by Shift to Right Brain

After going through an extended step-by-step trance induction technique, we were told by the instructor to imagine ourselves to be in a house or dwelling of our own design...Extensive instructions guided us in creating every detail and exploring every aspect...After many hours of repeatedly going through this process, the inner sanctuary actually started to take on a type of reality of its own...an eerily "real" status...

- Baer, *Inside the New Age Nightmare*, p. 10

In the quote above, Baer was describing a Silva Mind Control group induction that involved extensive **visualization**. Anything that shifts you toward right-brain function tends to be inductive. Visualizing imagery, music, singing, art, imagination, and retelling dreams all tend to lower consciousness, because they all shift you toward right-brain function. Visualization of **imagery** directly and powerfully shifts you to **right brain** function. The visual hemisphere (usually the right one) is far more emotional and hypnotic in nature than is the left. While visualizing, you may sense lowered consciousness. Or, after entering trance, you may spontaneously shift toward right-brain function and begin to visualize.

Visualization Induction

Visualization of imagery requires a shift to right brain function. Mental focus on, and work with, images tends to have a consciousness-lowering effect. It is often used in combination with other methods. When the hypnotist suggests the image which his subject is to imagine, that is **directed imagery**.

Visualizing images makes any associated suggestion more effective. Some hypnotists say that a suggestion will not be effective unless it becomes visually imaged in the subject's mind. Teachers—and salesmen—know that teaching, or selling, is most effective if the student, or prospective customer, visualizes something. A classroom program called "Confluent Education" starts first graders in a program of trance training by having them visualize the sun radiating within them, followed by other images. That is the induction. Then the teacher says, "You are inwardly perfect and contain all the wisdom of the universe within yourselves." That is the programming.

Ideomotor Induction

When you read someone's body language, you are observing her ideomotor response. If she says "yes," but shakes her head at the same time, then the real answer is "no," because body language is always more truthful than verbal language. The ideomotor response may reflect important data that the conscious mind does not have. You

are not consciously aware of those tiny muscle movements of ideomotor response unless you have taught yourself to notice whether your head nods or shakes in response to thoughts.

Ideomotor movement is an automatic (unconscious), muscular response to unconscious thought. For example, if you think "go," your going muscles awaken with a flicker of response, which is suppressed by an opposite response of the staying muscles if it is not yet possible to go. What you think of, your muscles automatically act out in a tiny way. What you think is what you do.

Ideomotor response does not need a hypnotic induction to take place. It is sometimes used as a disguised induction. Concentrating on perceiving your ideomotor responses tends to be inductive, because it shifts your mental focus to an unconscious mode of response. Any ideomotor response is a dissociated one.

A common example of ideomotor response is the use of a small pendulum to elicit answers to questions. The swinging pendulum is called Chevreul's pendulum because it was invented, in 1833, by a Frenchman named Chevreul. He also proved that the movements of a dowser's rod and those of an ideomotor pendulum were both unconsciously activated, and registered unconscious thinking. (Dowsing can be a very helpful skill because it visibly registers tiny manifestations of the magnetic field that conscious minds cannot perceive. Water, flowing underground, generates a magnetic field which the unconscious minds of about half of those who try can detect.) LeCron pioneered the use of ideomotor responses in the U.S. using a Chevreul's pendulum or finger signals to register faint information from the deep unconscious. In hypnotherapy, answers can be obtained this way without a client having to fully remember something painful.

The subject chooses, or is told, what movements of the pendulum will mean "yes" or "no." The subject's unconscious—which is always aware and noticing—then acts accordingly. For example, if you think to yourself, "My left index finger will rise if the answer is no; my right, if



the answer is yes,” you have set up an ideomotor signaling system. LeCron told the hypnotized person, “Your left thumb will rise if the answer is yes; your left index finger will rise if the answer is no.”

Noting the swing direction of a glass ball on the end of a chain also invites an ideomotor response. A washer or ring tied on the end of a 10-inch thread works as well as a pendulum. There are four possible pendulum swings and each can be assigned a meaning in the ideomotor system: clockwise circle, counterclockwise circle, back and forth to your left and right, or back and forth in front of you. The four meanings can be: 1) yes; 2) no; 3) I don’t know; 4) I don’t want to answer the question. Persons using this system post those meanings on a visible card for ready reference. Or they may start by asking the unconscious what swing directions it prefers for which answer. Do that by thinking “yes” and see what swing you get. Then write that on the card. And so on.

Other persons find it helps to keep it simple. You (and your unconscious) decide, or are told, that the ball will swing one way if the answer is yes, the other way if the answer is no. Most ideomotor systems allow only that “yes” or “no” response.

Ever played 20 questions? A series of yes/no questions can get to the bottom of practically any problem. If you ask something an unconscious really does not know, however, it may come up with a pretend (confabulated) answer. It is important to understand that ideomotor response is not absolute truth. It is just unconscious opinion. It can be wrong, right, helpful, or deceptive. What you get depends on the programming in that person’s unconscious.

If the information is coming from an isolated matrix of neurons in the unconscious, that is normal. If that matrix starts to define itself as an independent personality, it is a schizoid phenomenon. Schizoid simply means dissociated and is common to the point of normal for persons in trance. Unconscious centers of information tend to express themselves as if they had independent identity. If the neuronal matrix, however, generates false information, shut it off for obvious reasons.

Dream Inductions

Dreams emerge from the same right-brain unconscious that functions in hypnosis. Most people go into a spontaneous light trance state while telling, or even thinking about, dream material. That is true whether the dream is being publicly shared or privately considered. Remembering a dream—even listening to somebody else tell their dream and following their imagery with your mind—shifts you toward right brain and lowers consciousness. Trance state is the natural bridge between your inner and outer selves. Dreams are one form in which data crosses that

bridge from the unconscious to the conscious. Dreams and their messages can be a precious source of insight, inspiration, and direct guidance.

Dream workshop leaders often ask a dreamer to “re-enter” the dream, “in a deeply relaxed state of consciousness,” and then change or extend it. (McLeester, *Welcome to the Magic Theater*, p. 115) Changing or extending the dream may not be appropriate. Simply understanding it may be the best thing. Going into a dream under the direction of another person will lower consciousness.

Maternal and Paternal Induction Styles

There are two standard styles of hypnotic induction and trance management. The **maternal** is conventional, gradual, polite, and considerate. It avoids tones of authority or command. It is often used with Type 1 inductions and in hypnotherapy. The **paternal** style is abrupt, shocking, dictatorial, and highly authoritative in tone. It appears more often with Type 2 and Type 3 inductions.

One person begins to lead the fantasy by asking everyone else to relax, close their eyes and breathe deeply. Then they relate the bare script of outline of a fantasy, while the others picture it in their minds and watch what develops. The leader should relate the fantasy in the first person present tense, as though it is happening...and develop a slow, even pace... (McLeester, p. 83)

This beginning of trance can develop elements of hypnosis.

Type 2 Induction: Excitation Overwhelms the Analyzer

- ☑ Emotion Inductions
- ☑

The necessary condition...is...some kind of consciousness in which an emerging idea meets with no resistance from any other—in which, so to speak, the field is clear for the first comer. We know that a state of this kind can be brought about not only by hypnotism but also by emotional shock (fright, anger, etc.) and by exhausting factors (sleeplessness, hunger, and so on).

Breuer and Freud, *Studies on Hysteria*, pp. 258-9





Overstimulation of the cortex results in an involuntary cortical response of protective inhibition. It is a curious paradox of the human suggestibility spectrum that we are most susceptible to suggestion when external stimulation is minimal, or when it is maximal. Sensory deprivation can cause trance. Its opposite, **sensory overload**, also can cause trance. Sensory overload results in overexcitation. **Excitation** is the opposite of inhibition. Excitation is a condition in which the rate of neuron firing speeds up. Too much input (**stress**) causes too much excitation which, in turn, may cause a natural, protective **shutdown** effect. Shutdown equals **inhibition**. Inhibition, when it is caused by a protective shutdown, is Pavlov's **Type 2 induction**.

Beecher proved that the more stressed a person is, the more effective a pretend pill, **placebo**, will be at curing whatever he imagines ails him. The more upset, excited, disturbed, or stressed you are, the more suggestible you become. Any degree of cortex shutdown results in an equivalent amount of inhibition (lowered consciousness, trance).

The stressful, overwhelming input can arrive via any sense: seeing, hearing, touching.... In 1960, CIA researcher Ewen Cameron jotted down plans to report his research on Type 2 **input-overload** inductions: "Also in paper, make reference to input-overload in terms of 1) sound 2) light 3) pain 4) verbal stimulation." (Weinstein, 1988, p. 220).

Overwhelming Noise

Loud, rhythmic **noise**, such as prolonged, loud, drum beating—or sitting close to an unshielded dot matrix printer at work—can be inductive. When my dot-matrix printer goes into action, if I stay seated nearby, I will fall into a deep sleep within a few minutes.

Das demonstrated that response to loud, repetitive noise can predict hypnotizability. His better subjects could not keep their eyes open when exposed to that type of noise.

Loud noise is Type 1 in that it shuts out other sensory input. It is Type 2 in that it overwhelms, simultaneously denying varied auditory intake and overstimulating the nerve cells. That triggers the protective mechanism of inhibition. The cells turn themselves off. The subject goes into trance, and then on down to delta sleep.

Emotional Shocks

Brainwashing researchers have analyzed the types of **emotional shocks** and their power to devastate. Shocks are most likely to make a person suggestible—and to break him—when they are:

- intense
- repeated
- unpredictable
- uncontrollable
- linked to pressure
- incomprehensible
- humiliating

Confusion

Another thing that overwhelms the analyzer is inability to make sense of incoming data: **confusion**. A confusion induction is a Type 1 (sensory deprivation) because it deprives the brain of meaning. It is also Type 2 (overloading) if you try to make sense of it, and cannot, but keep trying until you become overwhelmed by the confusion. So, if something does not make sense, avoid the assumption that the fault is a lack of intellect on your part. Your feeling that it does not make sense may be absolutely correct! The confusing statement may be for the purpose of induction rather than communication.

This morning I saw an advertisement on TV: a jumble of highly emotional, vivid, incoherent images. At the very last moment, in small letters in the center of the otherwise blank screen (an eerily clear and calm impression after the preceding intense, chaotic images) one word appeared, a brand name. The brain, if set suddenly adrift in a sea of nonsense, will clutch hard to the first sensible thing that comes along after the chaos. That brand name was the first image that was allowed to make sense.

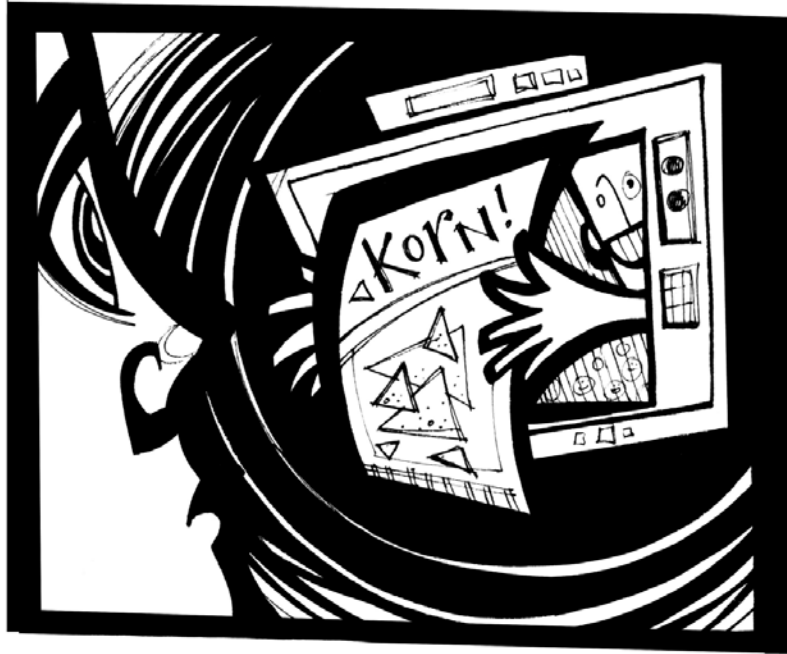
I saw another Type 2 confusion TV advertisement on Super Bowl Sunday. It began with chaotic, meaningless

images jumbled one upon another. Suddenly, out of the confusion, a bag of corn chips moved slowly, centrally out from a distant view on the screen “toward” me, its brand name clearly visible.

M . H .
Erickson often did confusion inductions. “In all my techniques, almost all, there is a confusion.” (Erickson, et al., 1976, p. 85) Sometimes, he caused confusion by using induction patter that was full of contradictions, plays on words, or a profusion of negatives. Sometimes, he did totally illogical and incomprehensible acts in an ordinarily predictable and regular setting.

For example, one day, the doctor took the hand of a woman he was meeting for the first time, as if to “shake” it. He ordered her to count backwards from 20 to 1. While she counted, he played games with her hand, putting light (seemingly random) pressures on various parts of it with his fingers. All this time, he stared at the wall behind her head, instead of looking at her face, as if he were looking right through her. He released her hand so slowly and gradually that, when he finally did let go of it, she was unsure of just when he actually had stopped touching it. Her hand, after

his release, stayed outstretched, in a cataleptic condition.



Every element of Erickson’s induction process had been done with the intention to confuse her, to dislodge her reality orientation, and to overwhelm her conscious mind. Seeing that catatonic hand, Erickson asked her, “Do you think you are awake?” That question further attacked her conscious orientation.

Other techniques that inhibit consciousness by creating confusion are:

■ Rapid-fire statements.

- New demands given before any previous one can possibly be completed.
- Jumping from idea to idea in an illogical manner.
- Giving obviously mistaken instructions.
- Changing instructions, then refusing to admit that they were changed.

Emotion Inductions

We laid hands upon her, ministered inner healing to her, and she wept and cried before the Lord. She was totally set free from the grief of her father’s death.

- *Herald of Hope*, Summer 1995, p. 2

Television advertising may begin with a shock, confusion, sensory deprivation, or relaxation induction. Advertising inserted into sports, drama, or news programming is most effective because viewers already are feeling excitement because of the preceding programming. Emotion is inductive. It creates suggestibility. “Intense emotion opens up the corridor to the subconscious because the conscious mind is inhibited by emotion,” Charles Tebbetts told his hypnotherapy class.

Panic will do it. “...terror and pain produce a state analogous to hypnosis.” (Gindes, p. 49) Rage will also do it. Brainwashers strive for it. Some religious inductions intensify emotion. Plain old life is the most common source of shock and suffering inductions. Crying causes hyperventilation which is inductive. (Tears also remove stress chemicals from your system.) Emotion lowers consciousness. Frank Laubach, a Christian mystic, described how pain had made him feel nearer to God:



*This week a new, and to me marvelous experience, has come out of my loneliness. I have been so desperately lonesome that it was unbearable save by talking with God...something broke within me...How infinitely richer this direct first hand grasping of God Himself is, than the old method which I used and recommended for years, the reading of endless devotional books...how was this new closeness achieved? Ah, I know now that it was by cutting the very heart of my heart and by suffering. Somebody was telling me this week that nobody can make a violin speak the last depths of human longing until that soul has been made tender by some great anguish. I do not say it is the only way to the heart of God, but I must witness that it has opened an inner shrine for me which I never entered before. (Laubach, **Practicing His Presence**, pp. 9-10)*

When a person is deeply touched emotionally, he is in a state of **abreaction**. “Suggestibility can be enhanced, temporarily at least, by repeated abreaction.” (Sargant, **Battle for the Mind**, p. 76) People who share deep emotional experiences, again and again, bond. A client also may become more and more suggestible to whomever is coaching these experiences. Emotion can thus be a tool to heal deep wounds.

A church newsletter spoke of the healing of a lesbian:

She began weeping before the Lord, which released the Lord's healing power into many of her traumatic childhood experiences. She was going between weeping and laughing for a long period of time as the inner healing continued...She came back for several times of ministry...a number of pains of the past being released...They never came back. Praise the Lord! (Herald of Hope, Summer 1995, p. 2)

Expression of positive emotion can also heal:

I prayed for the Lord to give him deep holy laughter for the hurts, and after about thirty minutes of laughter (sometimes mixed with crying), the bitterness, the unforgiveness, and the physical pain in his body were gone. (Ibid.)

For a rape victim:

As we ministered to her, she laughed and cried deeply about this great trauma in her life. The laughter and crying released the bitterness, the unforgiveness, the fears, and shame within. Dorothy was at long last free from the pain and shame

of that terrible experience. (Ibid.)

Fear

Cheryl was an extremely susceptible hypnotic subject. Her husband, when angry, would yell so loudly at her that she became rigid with shock (**cataleptic**). Then he would give her instructions. He had intuitively learned to use a fear induction on Cheryl, then tell her what he wanted her to do. Estabrooks wrote that “...emotional shock...gives us the phenomena of hypnotism and vice versa.” (**Hypnotism**, p. 110)

*It has been known for many years by researchers in the field of hypnosis that terror, especially when created by physical torture, is brutally effective in enhancing the power and control of the hypnotic trance. The subject's suggestibility increases, and he becomes more compliant... (Bain, **The Mind-control of Candy Jones**, p. 201)*

Any excitement or trauma (sudden fright, fear, terror, threats) makes you more suggestible. Fear (or any intense emotion) causes cortex overstimulation which results in Pavlovian **inhibition**. Inhibition equals induction. So, fear is inductive. The greater the fear, the deeper the potential trance. “Our own attitude as physicians causes us to avoid in principle hypnosis by intimidation, by shouting at the patient, frightening him...” (Schilder and Kauders, p. 84) Not all operators, however, have those moral principles:

*If a subject is to be hypnotized and is quite frightened, the operator can take advantage of the fear for easy induction. The frightened person is already in hypnosis or on the verge of it. (LeCron, **Techniques of Hypnotherapy**)*

What Stephen King really does to readers and film viewers is provide the rush of trance induction by using fear. Excitement often peaks right before the commercial break in television programming. The product sells better that way because the viewers are in a suggestible state.

Fear, or lust, or any other path to lowered consciousness, can be addictive. Look at the grim faces in a gambling parlor. They hope. They lose. They suffer. But they take pride in their boldness, in the size of their suffering, the amount of their loss. Sometimes, they even win. Winning is a powerful emotional rush, a positive reinforcement that brings them back to those seductive machines and gaming tables to lose again, and again, because **winning programs the brain more powerfully than losing**. Human beings are designed to try, try again—if given a little encouragement. As a result, more and more gambling casinos are built, more and more lotteries established.

Sex Inductions

Last, but certainly not least, in the Type 2 category, is induction by **sexual excitation** and **orgasm**. Sargant's book, *The Mind Possessed*, devotes a chapter to the topic of sex inductions:

During the sexual act, especially if it ends in mutual orgasm, both partners achieve an intense... state of temporary brain excitement, which leads on to a state of sudden temporary nervous collapse and transient brain inhibitioncreating greatly increased suggestibility... (Sargant, p. 87)

A married couple, during their honeymoon, quarreled fiercely. While his new wife was in a state of absolute

rage, her husband shouted, "I'm sorry I married you!" Eighteen years later, she was still married to him, but she still felt deeply insecure because of his long-ago statement. A marriage counselor, whom the husband had asked for help, told him to say "I'm glad I married you" during her next orgasm (a comparable time of great emotion). The treatment worked.

Because erotic excitation and orgasm greatly increase suggestibility, ideally, the sex act results in imprinting a mutual sense of responsibility for, and bonding to, the partner—as well as freeing him from accumulated tensions. Like any other induction system, however, this one is easily distorted and abused.

About the Tension Induction and Hyperalert Trances

There is some public recognition that "sleep, sleep, sleep" suggestions can result in trance. There is no public recognition that "Alert! Worry! Earthquake! Hurricane! Fire! Fear! Evil! Satanic! Rape! Murder! Starvation!" suggestions can also result in lowered consciousness and heightened suggestibility. Though seldom mentioned in the research journals,¹ **tension induction** and the **hyperalert trance** are, in practice, often used. A basic propaganda rule is that the more upset people are, the more gullible they become. Any emotional state lowers consciousness and causes temporary cortex inhibition—a condition of greater suggestibility.

1. In 1964 Arnold Ludwig published an article on "Tension Inductions and the Hyperalert Trance."



Type 3 Induction: Brain Syndrome



As the “brain syndrome” develops...the subject is quite likely to have thinking difficulties and sensory experiences, illusions, delusions, hallucinations, and projective or paranoid thinking...he may confabulate....

Hinkle, p. 26

Brain syndrome. Pavlov’s Type 3 induction, is (like all other induction types) a physiological event. Hinkle first used the term while studying **brainwashing** for the Air Force. He wrote that brain syndrome is “not uncommon among men who have been through prolonged combat, or through prolonged and depleting activities of any sort.” (*Ibid.*, p. 27).

Exhaustion can be physical, emotional, or both. Anything that pushes your brain out of its normal condition makes you more suggestible: exhaustion, hunger, sickness, lack of oxygen. A brief choking pressure on the subject’s jugular has been used to induct. Alexander Cannon, an English medical hypnotist, created that very ugly induction method by pressing for “one minute or so.” Then he gave hypnotic suggestions meant to turn that physiological unconsciousness into suggested trance. Lying, with head tilted downward, also causes an almost instant lowering of consciousness.

A traveler to Nepal described an incident in which his camera film was destroyed from a six-foot distance. The destroyer was a cruelly deformed young man whom he had just photographed. The devotee had achieved great trance depth, and associated psychic ability, by amputating three of his four limbs and keeping the remaining one permanently in a painfully contorted position.

Bernheim was the first researcher to write about brain syndrome. He pointed out that very sick and unconscious people behave as if hypnotized. Volgyesi theorized that trance had a natural protective function for a body under stress, because hunger, illness and exhaustion all lower consciousness. Childbirth also triggers an altered state of consciousness. In 1927, August Forel pointed out that animal hibernation physiologically resembles a coma-depth hypnotic trance. And a hen who is setting a clutch of eggs, attempting to hatch chicks from them, acts catatonic.

Brain syndrome is common. Exhausted people are more suggestible than rested ones. Researchers have observed many examples of trance behavior in fatigued persons, such as after a long bike race. The more exhausted (or hungry, or emotionally stressed, or ill) you are, the more suggestible you are, and the more you are likely to have a conversion experience or one of those limbic system **Aha!** experiences of realization.

*Fasting, chastening of the flesh by scourging and physical discomfort, regulation of breathing, disclosure of awesome mysteries, drumming, dancing, singing, inducement of panic, fear, weird or glorious lighting, incense, intoxicant drugs—these are only some of the many methods used to modify normal brain function for religious purposes. (Sargant, **Battle for the Mind**, pp. 91-92)*

The list goes on: EST seminars, very stressful religious retreats, boot camps, certain holistic “medical” retreats (that induce vomiting, diarrhea, malnutrition, and do excruciatingly painful muscle probing), and the **vision quest** all fit here. Some persons have attended “those now-popular seventy-two-hour group encounters where exhaustion finally leaves you with shredded nerve ends ready to absorb anything.” (Malko, 1970, p. 3) “Survival training” also may result in this type of induction:

Having had no food and little water for three days under such extreme conditions, most of us were walking wrecks...When we reached the destination around 2 A.M., half the group was near a state of total collapse. Numerous people were vomiting, one was having real medical problems...the “lid” of my mind was opened and

my awareness soared into the starry heights. (Baer, pp. 18-19)

Even in its early stages, brain syndrome impacts memory and may result in varying degrees of **spontaneous amnesia** or **confabulation**:

There may be a distinct hiatus in his memory, without its being noticed...More often he is vague, uncertain about details, and has temporary blocks of memory, especially for the nuances, or the finer (and sometimes the most important) details...As the “brain syndrome” develops...His orientation for time, place, and person becomes increasingly deficient. (Hinkle, p. 26)

Randall N. Baer described the darker side of playing with one’s mind in yoga:

Extended fasting, strict vegetarian diet, Hatha Yoga, chanting, and diverse prescribed physical purification exercises (like slipping a length of cloth down the throat to the stomach, and pulling it back up again)—all are combined into a highly disciplined regimen...There are extreme dangers involved in awakening the kundalini practices. I have observed numerous New Agers experiencing the subtle and extreme casualties—mental and emotional disruptions—involuntary physical movements (from uncontrolled spasms to incessant quivering), nervous system burnout, outrageous ego-inflations, sexual obsessions, intense delusionary states, hallucinations, and other quite undesirable side-effects. (Baer, p. 114)

Combining Induction Types

Induction attempts often combine different types. Or, the induction may start with one type, then shift to another, and perhaps yet another. Operators may use television, video, or computer programming to combine subliminal messages with sound rhythms at the “brain synchronization” pace, or with visual, or anti-logic inductive elements. Any combination of inductive elements is possible, and all reinforce the others’ effects.



Type 4 Induction: Chemical, Electrical, & Biomagnetic (“Psychic”)



...a neurophysiological basis exists for the facilitation of hypnosis.
Martin Orne¹, 1961, p. 175

When a person’s physiological state of consciousness is directly affected in an inductive way by an outside force: **chemical, electrical, or biomagnetic**, that is a Type 4 induction. Some Type 4 induction methods are very ancient. Others are on the cutting edge of modern research and technology. Chemical inductions are covered in Part II: Narcohypnosis. Electrical inductions are introduced in Part II: Electroshock. There is more on electronic and biomagnetic inductions in Part II: Mind-to-mind Inductions, and Psychiatry Is No Longer a Joke.

Beta is a **nonsynchronized** brain wave pattern. **Alpha** and **theta** patterns, the **hypnoid** states, are comparatively more **synchronized**. Anything that slows and syn-

chronizes brain waves is inductive. Some induction devices require skin contact to work, using the subject’s own nervous system as their signal carrier. Other signals are designed to radiate through the air, being received by the brain in a manner similar to a radio receiver. Both a skilled psychic inductor and an induction machine have potential to influence an unguarded, susceptible person’s brain waves, shifting them from beta patterns into the slower, more synchronized alpha and theta patterns. The biologically, or mechanically-generated radiation, of a specific frequency aims to cause **brain wave synchronization** in the targeted mind.

Whether psychic or electronic, this process tends

1. Whenever I see the name of a prominent research hypnotist coauthoring an article involving the physiology of hypnosis, the name of some obscure physiologist is listed first. That is the name it is catalogued under. So when you look up Orne articles, you do not see “Bioelectric Correlates of Hypnosis” or “Endosomatic Electrodermal Correlates of Hypnotic Depth and Susceptibility,” articles which he coauthored.

to be **extrasensory** in that it cannot be perceived by the usual senses: hearing, seeing, smelling, tasting, or touching. The signals can be recognized, however, by a sensitive and trained unconscious. They could also probably be recognized by sensitive and appropriately programmed electronic equipment.

Rock concerts have Type 2 induction elements, strobe lights and throbbing loud music, which create overwhelming sound and emotion. The influence of massed people simultaneously responding to the induction pressure is a Type 4 induction factor. **Mass hysteria** is a natural process of brain wave synchronization caused by electromagnetic transmissions from massed, excited brains affecting each another. Mass hysteria is an induction effect caused by an extrasensory process.

Induction Machines

When a brain is in trance, it is in a condition of **brainwave synchronization**. Synchronization takes place on a spectrum, rather than as an absolute. In a fully alert state, the brainwaves are not very synchronized. As consciousness lowers, they become more synchronized.

Neuroscientists have recently discovered that special music calibrated at a specific beat per second merge the right and left hemispheres of your brain into a cohesive unit. Studies have shown that this synchronization can speed up the learning process two to five times while dramatically increasing the receptivity of your unconscious mind. Subliminal Success cassettes utilize this special music as a soothing background for the potent subliminal messages that are being directed to specific areas of your brain. While your conscious mind relaxes to the specially designed sounds, your subconscious mind is focused... (Ad for “Whole Brain Synchronization,” Western Research Institute, Thousand Oaks, CA, 1990)

The first **electro-induction machines** were crude. They used comparatively large voltages, delivered by skin contact, to disorient the brain into a state of inhibition. This began in 1902, when Stephane Leduc, a French scientist, announced that he had put animals to “sleep” by sending alternating current through their heads. By 1907, the same thing was being done to humans: “By means of electric baths hypnosis may be induced either when the subject is being charged with electricity, or after the charge has been made, when sparks are drawn from him.” (Lapponi, p. 66)

Between 1917 and 1963, Dr. Ferenc A. Volgyesi, in Hungary, hypnotized people by shocking them with a touch of his mitt-with-a-kick. (He marketed it as the “Faraday Hand.”) Eastern European scientists produced **electronar-**

cosis induction machines which induced trance by passing a mild shock through the head, from temple to temple. These machines have been commonly used by therapists in the U.S.S.R. and France. An alternate system uses electrode contacts on top of the eyelids and behind the subject’s ears to deliver alpha/theta frequency direct currents—a brain wave synchronization method. A young American developed a method to communicate patterned sound (speech and music) via skin contact (**Begich, Towards a New Alchemy**).

In 1961, Martin Orne mentioned a method for silent, distance induction that did not require skin contact and which mimicked alpha waves. (1961, p. 175) He probably meant W. S. Kroger’s Brain Wave Synchronizer. It was the first machine which was specifically designed to lower consciousness. Kroger and Sidney Schneider developed the **electric induction machine** between 1948 and 1957. Kroger first announced its existence in a 1959 article. Early versions of the machine used a pattern of flashing lights together with a repetitive signal in the alpha or theta cycles per second ranges.

The Brain Wave Synchronizer has been around ever since. It can now be turned on by remote control. Its soundless, invisible signal may affect any susceptible brain in the area, causing the human brain wave pattern to synchronize with that of the radiated electronic signal. Kroger tested 2500 patients with his machine: 80 % were affected; 50 % of the 2500 entered deep trance within five minutes. Trance is a state of increased suggestibility, a state in which suggestions can be given to develop the subject’s condition into hypnosis. Hughes included the following quote regarding the use and efficacy of the Brain Wave Synchronizer in his textbook for student hypnotists:

Starting at 7 on Alpha I turn the speed higher at a very slow pace up to 10, then slowly back to 5, 4, or maybe slower, then up again. I watch the eyes very closely for that glistening, fixed stare... I do not stop until I see a fixity in the eye and facial expression. I turn the dial very slowly until I see this....

Usually within 5 minutes the eyes will close and remain so. I take it from there with suggestion. Very rarely do I fail to get a workable trance at the first setting, and by workable trance I mean achieving at least a partial amnesia. In a very few cases it may take two or three sessions to obtain the desired control...in the last 269 cases I have had only two who did not achieve a workable trance. (quoted in Hughes, Hypnosis: The Induction of Conviction, “How to Hypnotize Your Client”)



The machine is now regularly advertised in *Journal of Hypnosis* for about \$550 and touring experts give how-to workshops on its use to professionals.

After the Brain Wave Synchronizer was invented, other electro-induction machines were marketed under various trade names. Edmonston offers a list of manufacturers, but it is out of date. Baer said many brands of zap-yourself induction machines were advertised in New Age magazines:

MC2, David I, Alpha-Stim, Neuro-Pep, Bio-Pacer, Isis, Somatron, and Graham Potentializer... readily available, ranging in price from \$300 to \$6,000....Most of these devices use goggles (for flashing light input) and headphones (for sound input), and have control consoles that coordinate the light and sound in order to induce controlled trance-states and psychedelic-like experiences. (Baer, p. 49)

I have heard of a little shocker marketed to the New Agers to “heal yourself” with. Some early models caused brain damage. Later models have, supposedly, overcome that problem. The “virtual reality” technology fits in here. Most of this technology uses skin contact to send a message to the user’s nervous system, transmitting through the moist conductor of skin and flesh, rather than zapping through air like the Brain Wave Synchronizer.

A pricey, electric inductor, called “The Learning Machine,” is another member of this category. It is mar-

keted, along with an array of educational and recreational tapes, by Zygon (Redmond, Washington). It combines goggles with earphones that position a sizable unit back of the ear. You arrange the gear on your head, find the switch, and down you go: “A digital program embedded in the CD, sends a combination of light and sound instructions through the headset to stimulate the optimum mind-state for learning.” The company calls it “an amazing light-sound matrix that instantly relaxes your mind. This highly relaxed mind-state helps lock the new information into your memory.”

The synchronizing waves in that type of machine come from a cassette tape. You cannot hear the inductive part. What you hear is an audio overlay of pretty music and positive suggestions. You do not hear the broadcasting on subliminal sound frequencies which has the potential to trigger a further lowering of consciousness and implant programming.

Flashing Lights

Lights flashing in a rhythm also can affect the brain in surprising ways. Researchers testing the **induction effect of flashing light** found that a strobe light, flashing at a certain frequency, can cause an epileptic to go into seizure. Byron Gysin invented a “flicker machine” that “caused hallucinations similar to mescaline or LSD.” (Lee and Schlain, p. 81) Poet Ginsburg, while testing acid for the CIA, endured a flashing light timed to match his alpha rhythms. He, himself, had suggested the experiment, but he soon found it unbearable. Ginsburg told them to turn it off. They did. However, after the light was turned off, his feelings of terror still continued. I recently read about a powerful induction method that uses patterned, colored light.

The Magic Chair

A traveling huckster with a magical chair was giving free demonstrations. (Free demos are a good sales technique for any trance vendor because anything inductive tends to create longing to repeat the experience.) I watched another woman try it. She lay in the reclining chair with goggles over her eyes, from which light patterns flashed onto the thin skin of her eyelids. From plugs in her ears, huge and chaotic sound bombarded her auditory nerves. Her face soon relaxed into the characteristic mask-like expression of the deep trance state. Afterwards, she told us she had been having an ecstatic experience (hallucination) of blasting off in a rocket for the moon.

Then it was my turn to recline in the chair with the goggles over my eyes and the earphones in my ears. The goggles created a flashing light pattern; the earphones played throbbing music. For me, it was not ecstatic. I did not lower in consciousness, not even a little. Instead, I felt severe, almost unendurable pain: first in the back of my neck, then in my upper shoulder area. I did not have a visual hallucination, only that pain and annoyance from the headphone noise.

At first, I thought the pain was real. I felt around on my neck where it hurt, trying to massage the pain away. I then realized that my sealed unconscious was having to **convert** all that mechanical induction pressure into something other than trance, and its choice was the subjective impression of physical pain. It was all I could manage to force myself to continue lying there until the demonstration was complete. I was glad he kept it short.



...she had been having an ecstatic experience (hallucination) of blasting off in a rocket for the moon.



PART V

Legal & Therapy Issues in Criminal Hypnosis



Interview with a Hypnotist Lawyer

More Cases of Criminal Hypnosis:
Tried and Untried

Texts and Training in Forensic
Hypnosis

Public Spokesman on Hypnosis:
Truth, Half-Truths, and Lies

Criminal Hypnosis is Possible:
Wells and Brenman, Salter and
Bowers, and Young

How to Identify a Victim of
Unethical Hypnosis

Help and Healing

...her uncle...moved into the top floor of her family's house. He used hypnotic conditioning of Nora to facilitate his sexual abuse of her: "...the Monster Animal that Dr. Eldon put in the stairwell when I was three..."

Interview with a Hypnotist-Lawyer



During the past decade, knowledge of hypnosis induction techniques has been obtained by an ever enlarging percentage of the public....the so-called “secrets” of hypnotism are becoming available to everyone, qualified or otherwise. There is no question that the number of criminal incidents related to the use of hypnotism will increase.

Teitlebaum, 1964, p. 158

In the late 80s, I spent an hour in the Spokane, Washington, office of an eminent lawyer-psychologist-hypnotist, Dr. Mays. He was articulate and efficient as he invited me into his large, expensively furnished office. There was a couch at one end of the room, and a couple of easy chairs facing each other in its center. I sat in one, he in the other. I asked to be allowed to tape our conversation. He agreed.

“Tell me about yourself,” I said. “It’s unusual to have both a degree in law and a Ph.D. in clinical psychology.”

“My training has been in psychology and I’ve always practiced as a full-time clinical psychologist,” he replied. “The legal training was a second thought. It’s not as unusual as it once was. There are probably a hundred people in the country who have J.D./Ph.D.s and there are three programs that produce joint degrees—one at Arizona, one at

Nebraska, and one at Stanford, because there’s a significant overlap between the legal system and the mental health system in such areas as assessing competency for trial, in terms of looking at the function of memory in answering questions, and making some recommendations for the courts regarding child custody decisions, assessing competency to make a will...a host of other kinds of situations. I was interested in it academically, and when I had some veterans’ benefits, when I had some time, I decided that would be an interesting thing to do. So, I applied to law school and enjoyed it. I don’t want to practice law. But, on occasion, I’m approached about specific cases. I teach evidence at the law school with a friend of mine who is interested in the construction of reality, which [is] basically the rules of evidence allow[ed] to be presented to a jury. And I see that as just real similar to what happens with individuals who allow certain information to enter into their own awareness and respond to life and make decisions based on that...”



His voice droned on and on for five minutes, or more. (I left out a lot of what he said here.) His meaning became less and less clear. Or was my mind getting fuzzy, tired? Was I spacing out, giving up the contest to keep up with him intellectually? Or was I in lowered consciousness? My mind felt numb, stuporous. I said, “Um-huh” again. I had been repeating the nods and “um-huhs” throughout his long monologue, trying to pay close attention, trying to be polite. He had not paused once to acknowledge my “um-huhs.” I wondered if his long obtuse speech was a **conversational induction**, a specialty of persons with Ericksonian training. Is that why my mind felt less clear than usual?

Dr. Mays now sat silent, waiting.

With some effort, I gathered my thoughts back into coherence. I still could not articulate all the reactions and thoughts struggling to coalesce in me. Critiquing Dr.

May’s conversational style wasn’t my highest agenda for this precious hour anyway. So I just said “Okay.” Then I laughed with embarrassment because, after all that he had said, I had nothing to reply but that stupid-sounding, “Okay.”

“Is that clear?” he asked.

I chuckled again. “That’s great,” I said. I could feel myself coming out of it now, riding back up the elevator of consciousness to normal alertness. My mind shook off its remaining somnolence and became sharp and fully functional again. Now I could articulate another question. I asked, “Has your crossover relationship between the law and practice of psychology ever caused you to, uh...” I paused, hesitant. I wanted to word the rest of this question very carefully, “...be involved with inquiries into the ethics of the practice of psychology?”

“Yes.” He volunteered nothing more.

“Could you tell me about that?” The phony casualness between us had suddenly disappeared, like water dropped through a sieve, fallen into an invisible dark drain hole below.

“I’ve been called upon as a consultant by several attorneys who were involved in litigations, either defending mental health professionals, or pursuing lawsuits against mental health professionals, and they’ve asked for my appraisal of the circumstances as I understood.” He sounded cautious, serious. Again there was silence.

“You’re also a hypnotist,” I said.

“Yes, I am.”

“Where did you acquire that particular skill?”

“I became interested in hypnosis some years ago in my postdoctoral training. I started to go to hypnosis training workshops in ’72 or ’73 and continued doing that for a while. The name Milton Erickson kept coming up. He’s a rather notable figure who once practiced and wrote about hypnosis. I was able to spend four weeks apprenticing with him and have continued with that as a real area of interest.”

I asked more questions. He answered them all. In addition to his private practice, I learned that Dr. Mays taught, researched, and was regularly published in professional journals. I was excited by his achievements. I said, quite sincerely, “Well, I’m speaking to a very active profes-

sional, and one who's shown real qualities of leadership. You obviously belong to psychological organizations. Are you president of..." I paused, teased, "the American Psychological Association?"

"No, I'm on the Governance Board of that," Dr. Mays replied, speaking as seriously as I had been light. "I've been president of the [Washington] state association." He then waited politely for my next question.

I asked it: "Have you ever, in all these years and years of practicing, and packed professional life, and all the reading you've done and all the education of various sorts you've acquired... Have you ever heard of a case of the unethical use of hypnosis?"

"Yes. I don't think that there's a specific standard regarding hypnosis per se, but I've seen that as a communication vehicle used inappropriately, and I've seen that used as an artifact of other unethical issues."

"What do you mean?"

Dr. Mays suddenly looked very uncomfortable. He paused, cleared his throat, paused again—the first uncertain moment that I had seen in him since our conversation began. He stalled, "Take a second to figure out exactly what..."

I asked, "Can you describe the specific incidents?" I was embarrassed that my voice so clearly revealed my eagerness. I was hoping, so much, that he would mention the psychiatrist to whom Bob Gale had referred as an abuser of hypnosis. At very least, I hoped he would mention some case that would prove to other professionals that unethical hypnosis could happen. [This interview took place right after I talked to Gale, and before I did most of the research for this book.]

"Well, some of these cases are confidential in their nature. When I'm consulted by an attorney, for example, who tells me certain things, that's often a confidential communication. I'm not free to disclose that to people."

"So there have been legal cases regarding the alleged misuse of hypnosis?" I asked.

"There have been, I understand, legal... I'm not sure if there've been any lawsuits brought to trial. I know of no—as of about ten years ago—no tort actions in the United States in which hypnosis itself has been the cause of some specific injury."

"Then...how did these other cases that you were talking to me about turn out?"

"Carla, I'm wanting to be helpful to you and I'm not wanting to talk or hint or imply about a specific case which I've been asked to consult about in confidence."

I tried again from a different angle, wording my question very carefully, "Do you feel that the profession of psychology/psychiatry in general, and those persons with a specialty in hypnosis in particular, are protective of themselves when it comes to publicly divulging what they might know privately of ethical problems?"

Dr. Mays thought silently for a while. Finally, he said, "Yes, I think sometimes that's right. I think the influences are sometimes subtle, in that people don't want to talk publicly about a whole host of things. I think the information is not freely available because it's not a public arena."

"Do you think it should not be a public arena?" I asked. "Do you think the public has no right to know hypnosis is sometimes ethically abused, or used improperly?"

"No, I have no problem with the public being fully informed."

"Have you ever heard of any cases other than this one, or more, legal thing you've personally been involved in? Have you heard about any cases of abusive hypnosis, other than those you have been personally consulted on? Have you read about the cases in Europe where people actually were sent to jail for..."

"No, I know of nothing," he interrupted. "Last time I reviewed was about eight to ten years ago, and, at that time, there were no successful tort actions in the United States involving hypnosis."

This professional psychologist, who sounded so knowledgeable and authoritative, seemed to know nothing of a subject about which I, a complete nonprofessional, had already been able to find out so much. That surprised and discouraged me. Did Dr. Mays truly not know? Did he and Bob Gale live in separate universes? Or was Dr. Mays lying to me?

Dr. Mays continued, "I've taught for the American Society of Clinical Hypnosis, myself. Hypnosis is like a beaker. It can be filled up with helpful liquids and medicines, or it can be filled up with something that's not helpful."

I asked, "Have you ever read John Marks's book, *The Search for the 'Manchurian Candidate'*?"

"No."



U.S. Legal Cases Involving Hypnosis

A specialist on forensic hypnosis, Udolf, wrote: “No American case has been found in which a defendant has successfully raised such a defense,” meaning the defense of having committed a crime because a hypnotist told him to do so. Yet, in the 1981 case of the United States v. Springston, the defendant pled not guilty on the basis that he robbed a bank only because of posthypnotic suggestion. Nine jurors voted to acquit. Because the outcome was a hung jury, Springston and the government settled for a plea bargain (Springston served four months in jail).

Udolf did state that The American Law Institute’s Model Penal Code said “conduct during hypnosis or resulting from hypnotic suggestion’ is not voluntary within the meaning of the proposed statute.” (Udolf, 1983, pp. 137-139) Canadian law also permits a defense of **automatism** for cases involving hypnotic suggestion to do a criminal act.

However, I do not think that Dr. Mays mistook my questions to be limited to the narrow topic of crimes committed by a hypnotic subject because they were suggested by his operator. What about crimes committed by a hypnotist by means of his mental control over a subject? Udolf wrote, “...there are a fair number of cases in which it is quite clear that hypnotic subjects have been victimized by the hypnotist.” (Ibid., p. 138) He cited Kline’s 1972 report of subjects

...sexually abused by psychopathic hypnotists....Both of these cases are probably reliable as they were reported by the hypnotists themselves during psychotherapy, not in the course of a criminal prosecution. (Ibid.)

“Are you familiar with the concept?”

“I am.”

“Do you think it’s possible?”

“Very, very, very unlikely.”

“Are you completely close-minded to the possibility?”

“No,” Dr. Mays replied. “I think such things are possible, but I think it very, very unlikely.”

“I Want to Stop Now”

Back home, after my talk with Dr. Mays, a neighbor, a single woman in her mid-forties named Corinne, visited me. I told her that Dr. Mays had said he knew of some cases involving hypnosis, but that he had refused to give any details.

She then told me about a guy in Boise who had used hypnosis to seduce women for years, ever since she was a young woman. She asked, “Didn’t you read about it in the newspaper? Somebody sued him last winter for this kind of thing. He settled out of court.”

Settled out-of-court. If that was how such legal cases usually ended, it explained why Mays could say, “no legal cases brought to trial...no tort actions.” I asked her, “Tell me more about this guy in Boise. How long has he been in business?”

“I saw him in ’76. He was a hypnotherapist who had built up quite a reputation already. He was probably in his forties. He especially worked with disturbed children and families.”

“How did you happen to come into contact with him?”

“I was curious about hypnosis. I wanted to try it. He was recommended as one of the best. I was a social work student. I saw him twice. The first time we just talked. He wanted to establish a certain amount of trust.” Then she stopped talking. She sat, staring into space.

“What happened the second time?” I asked.

“Well, I was what they call ‘going under.’ And I thought he was asking me if I would get undressed. Then I was saying to myself, ‘Something’s happening here...better bring you out.’ And I just stopped going under. And I got real uncomfortable. I can’t remember exactly, but I think I

said to him, ‘I want to stop now.’”

Corinne was such a pretty, shapely woman now. She would have been a real beauty twenty years earlier, I thought.

She continued: “He said, ‘What happened? You were going under so... We were just about ready to...’ And I was really embarrassed to say anything. I didn’t want to tell him what I thought. And he asked, ‘Well, what’s the matter?’ And I said, ‘I thought you were going to tell me to get undressed. I don’t trust you.’ And he said, ‘Well, if I did, what would you take off first?’ And I’m going—Oh, my God. To me that was a strange response. I cut it off and I never went back. I never reported it to anyone else, just talked to one or two friends. I didn’t tell it to the agency I was working with. The agency used him and his partner a lot with disturbed children. There was one particular girl, a teenager. She’d been abused by her family. They sent that child to him. It was at that time I heard from other friends that he had affairs with patients.”

“Yeah,” I said, “the official point of view is you cannot be made to do anything under hypnosis that you don’t really want to do. So these guys can do that and then say, ‘Well, she really wanted to undress for me. I’m just this irresistible hunk.’”

“It was totally inappropriate in the therapy situation,” Corinne said, “no matter what the person’s problem is. I didn’t go there with a sexual problem at all. It was the furthest thing from my mind. So it would have been totally unethical and inappropriate, no matter what—to undress under hypnosis.”

“That’s one thing about this unethical hypnosis thing,” I said. “People so seldom tell. And when they do, nobody believes. Or it gets settled **out-of-court**. So then there’s no court record. I wonder if this is one of the cases that guy in Spokane, I just saw, was talking about having consulted on.”

Corinne had pulled back in time. A Swiss specialist on unethical hypnosis wrote that

...within certain limits it is possible for a natural mechanism of self-defense to operate. The lighter the depth of a hypnosis, the more strongly the critical powers of the hypnotized subject are preserved so that he can reject a suggestion which goes “against the grain” and...can break through the hypnosis. (Hammerschlag, p. 29)

A Dutch psychoanalyst told of a girl he had treated who previously had gone to a hypnotic “healer.” He said

she did not know there

*...are unconscious sexual roots in hypnosis, related to the passive yielding to the attacker, which the quack uses to give vent to his own passions...It was only at the very last moment that she had been able to get out of her lethargic, submissive state and fight off his assault. (Meerloo, **The Rape of the Mind**, p. 61)*

A few weeks later, as I was walking down the street, Corinne drove by with another woman. They pulled over, and she introduced me to her companion, a social worker named Jackie. Later that day, Corinne again stopped by my home.

She said, “Carla, after she met you, Jackie asked me what you did. I told her you were researching a book on unethical hypnosis. And Jackie told me, ‘I just found out that my husband has been hypnotizing me.’”

If she had only just found that out, I thought, it was clearly an unethical situation. Why, I wondered, did the husband get into that hypnotist-subject relationship with his wife? Why did he make her amnesic? How did he use his secret control over her? How did she find out?

I never saw Jackie again, so I don’t have the answers to those questions.

More Cases of Criminal Hypnosis: Tried and Untried

CriminalHypnosis:
Court Cases



Criminal Hypnosis:
Out-of-Court
Cases

If in skilled and worthy hands hypnosis is as powerful and salutary an instrument as its recent application, for example, in hypnoanalysis indubitably indicates, then in skilled but unworthy hands it might become an instrument of danger...

Young, 1952, pp. 406-7

CRIMINAL HYPNOSIS: COURT CASES

The Case of Spurgeon Young

In the United States, in January of 1897, the Chatauqua County Coroner, A. H. Bowen, was notified of the death of Spurgeon Young, a 17-year-old, 125-pound black male. When Bowen autopsied, he found Young had died of diabetic coma and kidney weakness. It seemed odd to him that a young man, with no previous health problems, had quite suddenly died of a failed pancreas and kidneys.

Bowen began asking questions and collecting background information on Young. He learned that, for the past six months, Young had been put into deep trance, over and over, by “amateurs and irresponsible and reckless youthful operators and dabblers in hypnotism...” (**Bowen quoted in Bell, p. 530**) Those “operators and dabblers” had discovered that Young was a genetic somnambulist with no memory of time spent under trance. Hypnotizing Young had then become the local entertainment.

They would put him into a trance and suggest that he was drunk or had delirium tremens. They would put him into a catatonic state and “bridge” his body with no sup-

port except for chair backs under his neck and ankles. They romped and stomped upon Spurgeon Young’s suspended, rigid form—on his chest, his abdomen, his legs—until they tired of the sport. Then, the perpetrators would leave him alone with a posthypnotic suggestion to wake up at a certain later time. Young would return to consciousness, unaware of the missing time, ignorant of what had been done to him—and feeling sick.

...having been sat or stood on, by men of average or heavy weight, while in a cataleptic state, with head and feet supported, so that he formed a bridge between such supports...” (Ibid.)

Bowen then wrote to a noted hypnosis expert, Clark Bell, explaining the details of the case. He asked if hypnosis could, directly or indirectly, cause “physical injury or organic impairment particularly of the renal function, or symptoms of glycosuria...” Bell passed on copies of Bowen’s letter to fifteen other experts in the U.S. and Europe, asking for their advice.

One by one, the replies came in. They were generally of the opinion that Young's health had been endangered by the trauma he endured as a result of hypnotism, not from the hypnotism itself. One writer called it "diabetes of traumatic origin..." Several stated that trance itself could cause health deterioration. (That is not true.)

The coroner's inquest jury agreed: "We find that J. W. Spurgeon Young came to his death...from diabetes and

nervous exhaustion caused by hypnotic practices..." (Bell, p. 545) However, no one was charged with the crime. The jury did recommend a state law prohibiting hypnotism.

Austin v. Barker

When Edith Austin found herself pregnant, she had no idea how it could have happened. In August of 1901, she gave birth. A few months later, her father's lawyer hypnotized her, questioned her under that rehypnotization,

Other Cases of Sexual Violation Under Hypnosis

Tardieu reported a similar, 1857, criminal case. The victim was Marguerite, age 18. She had visited the house of a magnetic healer for a treatment. At that time, magnetic healers routinely prescribed frequent, even daily treatments. It was good for business and the subjects knew no better. From then until early April, Marguerite went for daily hypnotizations. Then she realized she was pregnant and went to the police.

The police commissioner wondered if it was possible for a virgin to be deflowered and impregnated against her will by means of magnetization, so he appointed two experts to research the matter. The experts knew much experimental evidence existed that hypnotic subjects could be made insensitive to "tortures," and also could be made amnesic regarding trance events. They reasoned, therefore, that a hypnotic subject also could be the victim of coitus without consent, and without conscious awareness. When Tardieu was consulted in the case, he agreed with their opinion. (In a couple of other cases, he had found the hypnotist innocent.) The court convicted Marguerite's hypnotist based on the three expert opinions.

Thoinot, an associate of Charcot, reported a similar case in *Medicolegal Aspects of Moral Offenses* (published in English, in 1919). Again, the case involved a girl who said she had been impregnated by a young man who often had magnetized her. She said they were alone for a while on Christmas night and during that time he had put her to "sleep" and raped her. This case came to the notice of the authorities because of the girl's request, relayed by her minister, to go to a charity hospital for the birth.

Experts were called in to determine the credibility of her story. Ladame was one. The question the experts were asked to resolve was: "...Is conception possible when a woman is in a state of absolute insensibility?" (Ladame quoted in Thoinot, p. 135) Ladame said that all the girl claimed was possible. When the case came to court, however, the judge ruled in favor of the accused.

August Forel, a Zurich psychiatrist, professor, and mental hospital director of that era, was interested in criminal hypnosis and its legal implications. In his 1902 book, he reported giving somnambulists a suggestion to kill (he provided, in one experiment, a piece of chalk for a "knife," in another, a pistol loaded with blank cartridges). In both cases, the subject carried out the suggested "attack."

*I am convinced of the fact that a good somnambulist may commit serious crimes during hypnotic sleep in response to suggestion, and that, under certain circumstances, he may not know anything about it later on. (Forel, *Psychotherapy and Suggestion, or Hypnotism*, p. 287)*

Forel also experimented in the category of sex crime. Working together with another hypnotist, he gave an old, homely, and "extraordinarily prudish" female servant a suggestion to strip to the waist in their presence. This woman's extreme modesty was such that she would not allow examination of her breasts even by a doctor. When Forel gave her the suggestion in somnambulist trance, however, she immediately and with no evidence of emotion, carried it out:

I own I was astounded at it. If I had not been absolutely sure of her complete amnesia, I would never have dared to have performed this experiment, for she would have despaired if she had known. I only carried it out with considerable disinclination, and only in the interests of science, for this kind of experiment borders on the illegal. (Ibid., pp. 285-286)

Forel eventually became "convinced that every conceivable crime may be committed on a hypnotized person, provided that a higher degree of hypnosis is attained." (Ibid., p. 280)

and the mystery was cleared up. The lawyer learned that David Barker, who had hypnotized Edith several times, around the date she had conceived, was the father of her child. Edith was a somnambulist, capable of profound trance followed by amnesia. While she was in amnesic trance, Barker had taken advantage of her. Afterwards, she had no conscious memory of what had taken place.

Over the years, from 1901 to 1906, the case of Edith Austin was tried three times. The first judgment found Barker innocent, declaring that the accusation was based on “some science and theory that was not generally known or understood...” (**Austin v. Barker, 1904**) The second trial reversed that decision to a guilty verdict on the grounds that the first court had ruled against the evidence. When retried in 1906, the court reversed again, declaring Barker innocent because the accusation was “hearsay,” not a “true memory.”

Louis v. State

This 1930 case illustrates another problem with solving hypnosis abuses through the courts: very often the legal system decides a case based on its own game-playing rules, rather than on the facts. The defendant, Louis, a hypnotist, was accused of having put “a spell” on the person who brought the charges against him. The spell had compelled her to take her bankbooks, go out of her house, travel the two miles to her bank, withdraw all the money she had in the bank, and go back home where she turned it over to Louis. The amount was about \$290.

At the first trial, Louis was convicted and sentenced to ten years. He denied his guilt and appealed the judgement. The Court of Appeals of Alabama overruled the lower court and set Louis free: “to make a case of robbery, the People must prove...that the property was taken either by force or fear...no force was used...and she had testified that she was not afraid.” A charge of larceny by trick or device might have gotten a conviction. But it was too late.

The Sala Affair

A 1936 Swedish case of unethical hypnosis involved the acquisition and control of a gang by hypnosis, crimes caused by hypnosis, suicide caused by posthypnotic suggestion, and murder by a poisoned injection given to a subject in a hypnotic trance. The hypnotist is known only as “Th.” The case is known as the “Sala affair.”

Th. was short and very fair-skinned. He compensated for his wimpy body by learning to dominate others, first by his intellectual gifts, then by his hypnotic skills. Beginning when he was thirteen, Th. read every mystical-sounding book he could get his hands on: theosophy, spiritualism, parapsychology, metaphysics. (Psychiatrists on

the case later called him a “schizoid.”) He was introverted, preferring solitude to company. He was closemouthed, sociopathic—and utterly amoral.

He enlisted acquaintances in experiments on ESP—and then hypnotism. He used “yoga training” and other occult mental exercises as disguised trance inductions. By adulthood, Th. had developed into an occult-oriented, imaginative leader—with no conscience. He told his hypnotic subjects they now belonged to a secret organization named “The Magic Circle.” He organized the members in a complex hierarchy. He required absolute obedience and vows of secrecy from them in the conscious state, even more in the hypnotic state. Using his hypnotic control, Th. turned the club into a little Mafia. He induced underage girls to have sex with him, then to work as prostitutes. Using hypnosis, he ordered his male gang members to commit robberies and murders.

Th. had only one real friend, a gang member with whom he had a long-term homosexual affair. He began to obsess that his friend might tell somebody else about their relationship (then a crime under Swedish law). Th. recorded in an autobiography that “by means of a slow process of suggestion” he was, in one week, able to make his friend commit suicide by shooting himself. Another time, Th. hypnotized a gang member and then gave him a fatal injection of homemade poison. Th. eventually was judged guilty, but insane. He was sentenced to life in an institution for the criminally insane. (**Reiter, pp. 53-55**)

People v. Leyra

Extreme fatigue increases suggestibility and facilitates hypnotic induction—especially in resistant or unknowing subjects. A disguised induction of this sort made it all the way to the U.S. Supreme Court: *People vs. Leyra, Leyra v. Denno*.

Certiorari to the United States Court of Appeals for the Second Circuit. No. 635. Argued April 28, 1954.—Decided June 1, 1954...Held: The use of confessions extracted in such a manner from a lone defendant unprotected by counsel is not consistent with the due process of law required by the Constitution...reversed...Mr. Justice Black delivered the opinion of the Court.

Camilio Weston Leyra, a man in his fifties, was accused of hammering to death his elderly parents in their Brooklyn apartment. It appears that he did commit the crime. The contention in court was over the admissibility of the confession obtained by Dr. Max Helfand.

Soon after the crime was committed as Leyra was being held in jail, on suspicion of having committed the

double murder, the prisoner asked for a doctor. His complaint was a painful sinus attack. The “doctor” did not arrive until “the climax of days and nights of intermittent, intensive police questioning.” Leyra had been allowed two hours sleep, the first in several days, then was awakened to talk to the doctor. His visitor was really “a psychiatrist with considerable knowledge of hypnosis.” Unknown to Leyra, their conversation was being taped.

The doctor performed a skillful **disguised induction**, then extracted Leyra’s confession. He made numerous small requests to train the subject in obedience; successive acts of obedience tend to lower consciousness. The requests were either to open his eyes or to shut his eyes. The tape transcription shows that Leyra gradually began to accept suggestions from the psychiatrist. His taped answers to the doctor’s questions became “dazed and bewildered.” Then the doctor began to push for the confession:

DR. HELFAND: I want you to recollect and tell me everything. I am...going to make you remember and recollect back and bring back thoughts—thoughts which you think you might have forgotten. I can make you recollect them...Tell me, I am here to help you.

LEYRA: I wish you could, Doctor.

DR. HELFAND: I am going to put my hand on your forehead, and as I put my hand on your forehead, you are going to bring back all these thoughts that are coming to your mind. I am going to keep my hand on your forehead and I am going to ask you questions, and now you will be able to tell me...Speak up. It’s coming clear to you. I have my hand on your head...

The hand on the forehead is a hypnotic technique called **anchoring**. (Something external and sensory is linked to something internal and mental.)

Leyra confessed. Later, however, during his trial, he denied the confession, blaming it on the “mental pressure and coercive psychiatric techniques” that the doctor used. Leyra was convicted. The Supreme Court reversed the decision, because “For an hour and a half or more, the techniques of a highly trained psychiatrist were used to break petitioner’s will in order to get him to say he had murdered his parents...” The first element of deceit used to break him down was his trust in the doctor.

From the police’s point of view, the real problem may have been the incriminating tape of the doctor’s verbal induction prior to the confession. Not a problem any more. The National Guild of Hypnotists’s 1991 convention adver-

tised a seminar by a “police hypnotist” teaching a “Non-Verbal Hypnotic Induction Technique.” “Induce trance without saying a word,” the ad said. “It’s like nothing you have ever seen.” The old-time mesmerists would have understood.

State v. Levitt

In this 1961 case, the Supreme Court of New Jersey overturned the conviction of a hypnotist on a charge of lewdness, also because of legal maneuvering having nothing directly to do with hypnosis. The state’s only witness was the doctor’s patient. It was her word against his, and he, of course, denied everything. The Court’s reason for the overturning was that a jury member later reported that other jurors had said things about the defendant that suggested prejudice.

Johnson v. State

In 1967, the Court of Criminal Appeals of Texas upheld a hypnosis conviction. The case involved a 36-year-old guidance counselor accused of sodomizing a sixteen-year-old student. Two other teenagers were present at the time. The victim said that the counselor had hypnotized him. The two witnesses testified that his statement was true. The appeals court, however, disregarded the element of hypnotic influence. They declared the victim an “accomplice.”

Mirowitz v. State

This, 1969, case began when a Texas Board of Medical Examiners investigator saw a suspicious advertisement. The hypnotist claimed to be a Ph.D. clinical psychologist and offered help with speed-reading, self-hypnosis, marriage problems, etc. The investigator called, said she had a headache, and made an appointment.

Her first session with the “doctor” lasted twenty minutes. He advised self-hypnosis for the headache and asked if she were a virgin. She consulted with him again two weeks later. He hypnotized her, presented himself as her boyfriend, and established a scene in which she and he were honeymooning. Then he made real sexual maneuvers. She stopped it. She had been expecting him to do something like that.

Her supervisor was waiting outside the office when the investigator came out. Both the supervisor and the investigator testified against the hypnotist in court. The hypnotist denied, but was convicted. He appealed, based on the Johnson v. State case. He said the investigator was an accomplice and, therefore, must have a third party corroborate her testimony. The appellate court rejected that appeal because the investigator had not consented to the sexual acts and thus was not an “accomplice.”

J. Hartland's Report

J. Hartland reported "An Alleged Case of Criminal Assault upon a Married Woman under Hypnosis" in 1974. In that case, a woman, 20, said an obstetrician sexually molested her while performing an internal examination. The obstetrician admitted that he used hypnosis to obtain "relaxation" for his patients' exams and had done so for twenty years. Hypnosis was not a direct issue in the case because the woman denied being hypnotized. Perhaps she was not, because she remembered and complained!

Nevertheless, the defense maneuvered hypnosis into the center of the case. The President of the British Society of Medical and Dental Hypnosis, representing the profession, testified that it was practically impossible to get a hypnotic subject to submit to a crime. He recited the usual litany of hypnosis myths: there is no such thing as displacement of the subject's will by the hypnotist; there is no hypnotic amnesia or even dissociation; the subject can wake up any time she wants to. He then declaimed eloquently on the supposed propensity of hysterical women to project sexual fantasies onto their doctors.

The defendant was acquitted.¹

Regina v. Palmer

In 1979, C. W. Perry published an article: "Hypnotic Coercion and Compliance to it: A Review of Evidence Presented in a Legal Case." It was about an Australian case, Regina v. Palmer, in which a hypnotist, without academic credentials, was found guilty of rape, attempted rape, and indecent assault on two women.

The case began when Barry Palmer, age 38, demonstrated hypnosis at the party of a neighbor with whom he was barely acquainted. For years before this incident, Palmer had been doing hypnosis in various settings and roles. He had both training and experience in the field. At the party, he offered to cure problems such as obesity, nail biting, or smoking, for any person who would make an appointment with him. Three women made appointments.

When each client arrived at his home, Palmer attempted seduction by means of hypnotic trance and suggestions given under hypnosis. First, he induced as deep a trance as he could. Then, he suggested that she was very hot, and would undress. He gave amnesia suggestions. The further details are too sordid to repeat here, but were discussed in court and presented in Perry's article. As is

the unwritten rule for hypnotists writing about unethical hypnosis, Perry was not sympathetic to the women. He nitpicked their testimonies in his article, even though Palmer admitted what he had done.

Palmer's defense was that it is impossible to make a hypnotized person do anything she does not actually want to do. The three women, on the other hand, all said they, being hypnotized, could not resist. They all testified that they did not want to have sex with Palmer. They said they were aware of what was happening, but could not make effective protest because of their hypnotic condition.

Three expert witnesses testified for the defense, two for the prosecution. All had visited the library to prepare. Perry reported that the prosecution experts cited publications by Conn (1972), Kline (1972), Reiter (1958), and Watkins (1947, 1972). The prosecution centerpiece was this quote:

...we must admit that, whether we like it or not, a hypnotist of evil intent could use this unique and powerful state-relationship to intervene in ways which would mobilize harmful, destructive, and antisocial forces within his subject. If we can anesthetize an arm to remove pain, then we can anesthetize a superego to remove guilt. (Watkins, 1972, pp. 97-98)

The defense cited Bramwell (1903), LeCron and Bordeaux (1947), Orne and Evans (1965), Orne (1972), and Wolberg (1948). A defense expert witness protested:

If it were so simple to have a subject accept one's suggestions without question then all my very disturbed patients would accept my suggestions that they become confident, competent, and mature people in a few sessions and I would not have patients for a period of a number of years. (Perry, p. 206)²

Barry Palmer was found guilty by the lower court and sentenced to one year in prison. However, the verdict was overturned on appeal because two of the women did not file charges until two days after the incident happened (when they heard that the third woman had done so). The judgment was also overturned because an expert witness for the prosecution turned out to have faulty credentials.

According to Perry, hypnotists, who believe that

1. I have not known a woman who projected sexual fantasies onto her doctor although, obviously, it could happen. I have myself, however, experienced sexual abuse by a doctor during a pelvic exam. I also know a nurse who deduced sexual abuse, done by an intern to his young female client, during a pelvic exam. With fear and trembling, she divulged that fact to their supervisor. He reassured her, explaining that the intern had been reported for the same thing before!

2. Very disturbed patients are the least likely to be suggestible.

patients can be coerced by hypnosis, explain failures of suggestion as due to shallow trance or poor hypnotic techniques; hypnotists, who believe it is impossible to cause a criminal act by hypnosis, quote the dogma of moral integrity: the immoral suggestion gives the subject a chance to act out unconscious, preexisting immoral wishes.

Palmer's three rapes under hypnosis were each done under a first hypnosis. Perry said: "The case demonstrates vividly that a long-term interpersonal relationship is not always necessary for hypnotic seduction to occur." (Perry, 1979, p. 214)

United States v. Springston

Paul L. Deyoub, of Central Arkansas Mental Health Services, reported a case of bank robbery¹ accidentally caused by hypnotic suggestion. Deyoub began his article by quoting Orne's (1972) evaluation of the case of Palle Hardwick, and Orne's claim that Dr. Reiter and the court were wrong because nobody can be forced to do anything by means of hypnosis. Deyoub then described his case in which a man had committed a bank robbery because of a carelessly worded hypnotic suggestion.

Mr. Springston, age 30, visited a non-degreed hypnotist about six weeks before he robbed the bank. He wanted help with weight loss. The hypnotist performed a relaxation induction. Once Springston was in deep trance, the hypnotist then talked to him. Among other things, the hypnotist said, "You're a very strong person; you could do anything you decide to do. Why, you could even rob a bank if you wanted to." (Deyoub, pp. 301-306)

Mr. Springston was not particularly impressed with the hypnotist. He believed that he had not been hypnotized. But the hypnotist's mention of robbing a bank returned to his mind, over and over, until it became an "obsession." When Mr. Springston finally committed the robbery, he was aware that he was doing it, but he could not understand why he was doing it. He felt like a bystander watch-

ing himself do it, as if he were "in a dream." That describes a **dissociated state**. Nobody was hurt during the robbery. The money was completely recovered.

Springston pleaded "not guilty" because of acting under a posthypnotic suggestion. Deyoub interviewed him. The prisoner told Deyoub that he had "fantasies" and spent lots of time immersed in daydreams. When driving, he often became lost in thought and passed his planned stop. Deyoub summed it up as regular "dissociative experiences and perhaps a schizoid personality." Deyoub concluded that Springston was definitely a susceptible hypnotic subject. Deyoub did not give Springston a **susceptibility test**

...since it is generally inadvisable to use hypnosis with defendants who have much at stake (Orne, 1979). Springston had to testify, and the hypnosis associated with a susceptibility test could have altered his memory of the original hypnotic experience. Further, if a low score had been obtained, the prosecution could hold that hypnosis should have had little impact. A high score might simply reflect the defendant's motivation to help his defense. He had the right to refuse a susceptibility procedure which may have helped him, but more likely would have injured his case.

Deyoub testified as an expert witness at Springston's trial. The trial resulted in a hung jury: nine votes to acquit, three to convict. The government plea-bargained and gave him six months (he only served four). None of the jurors stated an opinion on hypnosis, but DeYoub speculated that the majority of the jurors voted for the defendant's acquittal

because of the testimony about the role of hypnosis in the case...Hopefully this case will not serve as a rationalization for criminal behavior...but as documentation of potential dangers in the misuse of hypnosis.

Criminal Hypnosis: Out-of-Court Cases

Some years ago, a physician/hypnotherapist, who was having an extramarital affair with a woman whom he wanted to marry, hypnotized his wife and suggested to her that she was developing a headache. When the headache would become very severe, he told her, she would swallow all the pills in the bottle he had put in her lap. They would make her fall asleep, so she would not feel the pain any longer. After a while she reached for the pills and took them all. It was a lethal dose.

—Brown and Fromm, *Hypnotherapy and Hypnoanalysis*, 1983, p. 146

1. United States v. Springston, CR 81-50007-01, U.S. District Court, Western District of Arkansas (1981)



I do not know of any legal case that matches the above report. Did the murderer receive therapy and no criminal charges? Cases involving unethical hypnosis are routinely settled out of court. Cases which are settled out of court are not entered into the legal record. They are not collected, studied, or followed up on by research hypnotists or journalists. This section covers cases of criminal hypnosis that did not come to trial, but maybe should have.

Newspaper Reports

News about cases of unethical hypnosis does not travel far. *The New York Mirror* (Sunday, April 17, 1960, p. 3) reported that an Albany girl said she was forced to marry by means of hypnosis. That was the end of the matter, as far as I know. Numerous other local newspaper articles have reported incidents of unethical hypnosis, which were not cited, or investigated, by research hypnotists.

Knight discussed a case which was reported in the *Montreal Gazette* (April 10, 1989): “Dentist Kept Practice Despite Admitting Assaults.” A Canadian dentist had pled guilty to one count of sexual assault on a hypnotized child. He avoided a sentence by agreeing to talk to a psychiatrist. Three years later, he won a case when two more children also testified that the dentist had sexually assaulted them in a hypnotized condition. Twenty years later, he admitted guilt for those previous cases, plus at least fifteen later ones.

Bad Outcomes of Hypnosis

In 1984, Kleinhaus and Beran deplored

...the unfortunate widespread belief that hypnosis is innocuous... [and urged that medical professionals be made] aware of the possibility of immediate as well as long-term deleterious effects that may follow misuse of hypnosis so that those cases which come to the attention of the physician will be properly diagnosed and treated... (p. 283) During hypnosis the subject agrees to permit the hypnotist to



become the sole channel of communication and source of interpretation of all internal and external stimuli impinging upon himself. (Kleinhaus and Beran, 1981, p. 288)

The two authors support that statement by reporting six cases of posthypnotic trauma. The perpetrators in their cases were mostly stage performers. In a 1962 conversation with Estabrooks, Orne described two similar cases with unfortunate outcomes caused by hypnosis:

Dr. Orne: ...I have heard many people say that they do not see the complications [of hypnosis] about which everybody warns them. Unfortunately, one sees what one wishes to see, especially in medicine...I was told by a dentist, for example, that it was completely safe to induce by hypnosis such things as brushing your teeth. He told a patient, who happens to have been a patient of mine, so I did have a follow up, that she had a

*dirty mouth and should therefore clean her teeth. And she did—20 to 30 times a day subsequently, and developed rather severe gingivitis. Incidentally, the dentist could not remove this using hypnotic suggestion. I am also reminded of a very helpful anesthesiologist who suggested to a patient that she lose weight rapidly, and who felt that he had great success with her. The patient lost weight and ended up in my office because of severe depression. (Estabrooks, ed., **Hypnosis: Current Problems**, p. 254)*

Modern research on the “undesirable effects” of hypnosis, however, has narrowed the definition of a “problem” to be any exception to quiet cooperation with the hypnotist during the session, or any behavior that makes waves in the hypnotist’s life after the session. Deceitful induction followed by chronic, amnesic, and abusive treatment of a subject is not recognized as a category of “bad outcome.” The patient can be a problem; the doctor can not.

Levitt and Hershman (1961; 1963) surveyed, by questionnaire, 301 professionals who used hypnosis. More than 27% had seen “an unusual, unexpected, and probably alarming, reaction to hypnosis, either during the state itself, or immediately afterward” (Orne, “**Undesirable Effects of Hypnosis**, p. 233). By this standard, Palle’s hysterical resistance to Reiter’s first successful rehypnotization of him would be listed as a problem. Palle’s easy surrender to Nielsen’s original hypnotic seductions would not rate as a problem.

By far the most common reaction was some sort of emotional upset, including anxiety, panic states, or depression. The only other frequently reported kind of symptom included minor physiological phenomena like headache, vomiting, fainting, dizziness, etc., either during or immediately after hypnosis. Other reactions which were noted by at least three respondents were crying and hysteria, loss of rapport during hypnosis, excessive dependency on the hypnotist, and difficulties resulting from inadvertently given suggestions. There were five cases of overt psychosis immediately after hypnosis, and five instances of difficulties with women patients involving sex (Levitt & Hershman, 1961, p. 6)

Who did what, to whom, in the sexual category was not specified.

In “The Myth of Coercion through Hypnosis” (1981), Conn reported on two women clients of his, both of whom had previously had sex with a hypnotist. Each ended up “admitting” to Conn that hypnosis had not really been a factor. Conn smugly concluded that the whole nonsense about unethical hypnosis was a matter of

...outmoded Svengali-like theories derived from 19th century authors of hypnosis-science fiction, isolated instances of mismanaged patients by incompetent operators, and the occasional disorganization of undiagnosed prepsychotic individuals following hypnosis.

A competing analysis could be that two suggestible women were used by the first “therapist” for sex, then persuaded by their second, Conn, to believe that the previous hypnoses had not been used inappropriately.

Kline’s Cases

Milton V. Kline was a research hypnotist who stood against the naysayers. He talked openly about unethical hypnosis all his professional life. He praised George Estabrooks’s revised edition of *Hypnotism*:

[It] surpasses even the original publication and should be required reading for all who wish to gain an introductory and insightful understanding of scientific hypnosis at the present time. (Kline quote, inside cover flap)

In the “Dynamics of Hypnotically Induced Anti-social Behavior,” Kline reported that he had induced a hypnotic subject to perform indecent exposure. The act was punishable by law and definitely contrary to the moral values of the subject, a lawyer who had volunteered for an “experiment on the legal implications of hypnosis.”¹ The subject did not know anything else about what the experiment would involve.

There were four hypnotists involved, three male and one female. The acts of indecent exposure took place outside the lab in a public area. The subject had no way of knowing that the police department was cooperating and keeping people, who were not an authorized part of the experiment, out of the area.

When any of the four hypnotists gave a **direct command** to perform the indecent act, all four failed. He could not be persuaded to expose himself in the waking state. But when the command was presented **indirectly**,

1. Kline doesn’t give much detail, but Orne later told more in “*Can Hypnosis Compel Behavior?*” (p. 106)

when he was in deep trance, as part of a falsified reality, three of the four hypnotists were able to cause him to do it. They also found that the subject would perform the indecency if he first was caused to **visualize** himself performing it. He was most obedient to the hypnotist with whom he had the best rapport.

The experimenter whose command he refused was female. She later admitted that she had been very upset by the act she was requesting, as well as by the deception. The subject may have obeyed the suggestions in her tone and body language (her true feeling), rather than the one she was forcing herself to verbalize. (She was so disturbed by the experiment that she then withdrew from further participation.)

In another article (“...New Clinical Data”), Kline reported three modern cases of unethical hypnosis committed by clinical professionals. He did not supply real names. One perpetrator was a doctor, age 56. For years, he had used hypnosis to seduce female patients.

His strategy was to introduce hypnosis into his treatment procedure even when there was no clinical need for it. He would gradually develop a close, dependent, supportive, and reassuring trance relationship. Then he would suggest strong erotic feelings to the hypnotized woman. During later hypnoses he suggested that she would dream about those erotic desires. Next time, he would suggest an erotic dream involving those desires—and himself. Finally, he suggested that she felt a compelling desire to physically perform with him the act which she had dreamed.

This technique did not work with every targeted female, but it worked with many. The gradual approach allowed him to make a hasty retreat when resistance appeared. His undoing was the successful seduction of a 23-year-old. She ended up working as an unpaid employee on his staff and having sex with him every day. But, at that point, her unconscious began to fight back.

This case is similar to that of Candy Jones in that the hypnotic split (containing all knowledge covered by suggested amnesia) began independently to communicate to the husband in the trance phase of the sleep cycle. During “sleep,” the repressed part of her mind told her husband—with qualities both of erotic pleasure and strong negative and conflicting feelings—all about her sex with the doctor that day.

Like John Nebel, her husband began to tape record her night-talking. He confronted the doctor, who agreed to get therapy. The matter was then dropped.

Kline’s second case involved a 26-year-old graduate student in psychology who craved sex with little boys.

He advertised his baby-sitting services in newspapers, but only took the job if it involved a boy younger than ten. Like the doctor above, he then proceeded with a deliberate series of **shaping** steps. First he developed a warm friendship with the child. They played games of imagination. He did tricks and told the child he had magical powers.

He then induced trance using the pretend-you’re-watching-television method which is very effective with children. He deepened the trance by asking the child to imagine participating in the acts on screen. He next suggested posthypnotic amnesia. If the child did not develop posthypnotic amnesia, he quit the baby-sitting job. If the child did develop the suggested posthypnotic amnesia, he would involve the child in acts of oral and anal sex. He used hypnotic suggestion to attempt to disguise what actually was happening and to reinforce the amnesia.

However, one of the children became “disturbed,” and was taken to talk to a psychiatrist. The child was able to recall, and tell, most of what had happened.

In this case, also, the perpetrator was not publicly identified. He quickly volunteered himself into “treatment” and that was the end of it. Neither of the above two abusers sought therapy until they were caught. Neither had normal emotions (affect) in human relations. Neither felt guilt about what they had done.

The power of professional psychological and psychiatric organizations is such that they have been able to appropriate the legal process from the public judicial system to their private one. “Not only do professionals violate their codes of ethics but they protect their guilty members from censure.” (Knight, “*The Case Against Restrictive Laws*,” p. 27) In Kline’s two cases described above, the criminals’ professional peers somehow had acquired the right to deal with them, instead of the public legal system. Their chronic severe criminal behavior was dealt with by a slap on the hand: “therapy.”

Kline’s third case did not involve sexual abuse. The crime was a vicious posthypnotic suggestion. The hypnotist was a gynecologist, age 36, who used hypnosis to treat obese patients. He told one such client, a woman age 27, who was a very susceptible subject, to eat only at mealtimes. She did not obey his hypnotic suggestion, however, and ate even more.

Her next visit, when the doctor heard that, he became very angry. He hypnotized her again. This time, he suggested that if she again defied his diet instructions and ate between meals, she would feel an overpowering impulse to kill her beloved poodle dog. That night, the woman again succumbed to caloric temptation and gobbled down an entire quart of ice cream. She then went into a posthypnotic

trance triggered by the act of diet-breaking. In that dissociated condition, she carried out the doctor's suggestion, killing her dog by smothering it.

When she came out of the posthypnotic trance and realized that her pet was dead, and that she had killed it, the woman began to scream hysterically. She gulped down a bottle of iodine and also slashed her wrists with a knife. The neighbors, awakened by her screams, called the police who rushed her to the hospital. She survived the suicide attempt, but suffered a schizophrenic breakdown.

You Must Be Dreaming

Barbara Noel is a singer-songwriter who wrote an autobiographical account of abuse under narcohypnosis: *You Must Be Dreaming* (coauthored by Kathryn Watterson). Noel was, for eighteen years, the patient of Jules H. Masserman. Dr. Masserman was cochairman of the department of psychiatry and neurology at Northwestern University Medical School. He was a past president of the American Academy of Psychoanalysis, and also of the American Psychiatric Association.

He began to use injections of a hypnoid drug, Sodium Amytal, supposedly to explore Noel's unconscious. One day, however, she returned to consciousness prematurely and found—not her mind, but her body being explored. (Hyman, *AP article*) Noel gradually realized that Masserman routinely had sexually molested her while she was in a drugged, unconscious state. He also addicted her to a drug (Amytal) that kept her coming back and literally begging for more.¹

After Noel came forward, two other women joined her. They stated, for the record, that they had also been Masserman's patients and had been sexually molested. One was a lawyer, the other a businesswoman. The three filed suit in the Circuit Court of Cook County, Illinois. Masserman settled in the usual manner of hypnotists with litigious clients: out-of-court, with a payoff. He paid Noel \$200,000. The other two each received \$25,000. He remained a renowned psychiatrist. The case received minimal publicity.

Noel was determined to break the publicity barrier, and warn other women. She wrote the book, *You Must Be Dreaming*. The book was made into a TV film, "Betrayal of Trust."

After Noel, *et al*, filed their complaint with the Illinois authorities, the American Psychiatric Association sus-

pending Masserman for five years. The Association answered later inquiries on Masserman's status by saying that "Dr. Masserman has retired." Neither the legal case, nor the book, nor the film shook the professional community's support for Masserman. No psychiatric periodical mentioned the case. The APA Board of Trustees still invited Masserman to meetings. He was an "honorary life president" of the World Association for Social Psychiatry. Just a month after he paid to shut up those women, the World Association, at a Rio de Janeiro convocation, lavished tributes and accolades upon him.

The professional indifference to his malpractice surprised and upset Ann Landers, who, for so many years, has reverently quoted mental health professionals, and sent millions of readers to get "therapy." Ann was shocked that a psychiatrist would give Barbara drug shots, have sex with her unconscious body, collect \$100,000 in therapy fees along the way, and remain respected, even renowned, by his peers. She was disturbed that the world community of psychiatry was completely indifferent to the evidence of his unethical acts. She wrote a column about it.

It wasn't her first column on unethical hypnosis. I'll never forget the day, about 1970, that I read another column of hers (or Abigail van Buren's?) about hypnosis abuse. It contained a letter from the parents of a girl which clearly described a situation of chronic unethical hypnosis involving their daughter. The columnist wrote that she had consulted psychologists who were experts in hypnosis, and they had all assured her that nobody can be hypnotized against their will, and nobody can be made to do anything under hypnosis that they do not want to do.

Her column was read by ninety million people. I wonder how many other readers, like me, were discouraged from seeking help by her dismissive response that day?

1. After an induction conditioning series, he should no longer have needed the drug, unless he aimed to maintain her addiction—or wanted to guarantee the secrecy of his sexual predations.



Why Not Seek Relief from Abusive Hypnosis by Legal Means?

The hypnotism lobby has spent two-hundred years combating the perception that exploitative manipulation of persons in a state of trance could result in legal liability. In the last thirty years, several Big Lies, oft repeated (propaganda technology), have resulted in yet another step of removal from liability: complete public ignorance of even the possibility of this crime. The legal system is now very tilted to protect hypnotists (and government organizations which may use hypnosis).

Therefore, if a survivor of unethical hypnosis is considering whether to bring legal charges against his abuser, these problems must be faced:

- Most psychological professionals are uncomprehending of, if not hostile to, a claim of unethical hypnosis and are protective of each other against their common enemy: the client. They would prefer a diagnosis of “paranoia” for the accuser.
- Potential “expert witnesses” are heavily indoctrinated with attitudes of disrespect and disbelief for any alleged survivor of unethical hypnosis.
- In the past, in order to prove unethical hypnosis in court, the survivor was subjected to yet more amnesic hypnosis to recover memories, and to display publicly his capacity for profound automatic obedience.
- Courts and associated personnel do not understand the absolute necessity to completely isolate the subject from the alleged hypnotist. They are not set up to deal with possible hypnotic manipulation of the subject’s testimony and behavior before, during, and after the trial. There is no understanding of the psychological effect that the mere presence of an abusive hypnotist may have on a survivor.
- The trial process, ideally, should be a simple search for truth. Watchers of the O.J. trial, however, observed something far different from that ideal: a public, ceremonial clash of sophisticated, paid debaters serving the personal interests of their payees. There is also no guarantee that all persons will tell the truth despite their swearing to do so, and there is a 99% probability that the accused hypnotist will lie cleverly and with confidence. Hypnotists, by definition, are verbally skilled, experienced, people manipulators. They often have status and peer relationships in the medicolegal community, a fellowship which tends to easily forgive and effectively protect its own.
- No matter who wins or loses, the case is likely to be tried again, and yet again. Throughout the judicial process, opportunities continue for the predatory hypnotist to reestablish control over the subject who is forced to be thus publicly exposed.
- The hypnotist’s defense will likely be well-funded by contributions from medical insurance companies and lobby committees for hypnosis organizations, as well as other entities which find hypnosis covertly useful. The budget of an individual survivor, on the other hand, is likely to be tight.
- If certain agencies of the government secretly create unknowing hypnotic subjects and if they seek to develop and use ever more sophisticated mind-control technologies (as more and more bits and shreds of evidence suggest), will there not be covert obstacles to a victim seeking exposure of this technology, and safety from it, through public courts?



Texts and Training in Forensic Hypnosis

A Hypnotist's View
of Forensics



Manuals of
Forensic Hypnosis



Hypnosis of a
Witness

All crimes committed under hypnotic influence, even though the hypnotiser be the most cunning and knowing knave imaginable, and even if the crimes be most warily devised, are always liable to subsequent investigation, by which, at least, they can be discovered and the delinquent brought to judgment; but for this to be accomplished, lawyers must understand hypnotism.

Karl du Prel, 1889

A HYPNOTIST'S VIEW OF FORENSICS

Every national convention of hypnotists includes workshops on hypnosis in the courtroom. They normally teach to one of these points of view:

- A hypnotist defending himself.
- Hypnotizing a witness to obtain evidence about a third party criminal's behavior.
- How to testify in court as an **expert witness**. (An expert witness is hired by the prosecution or the defense in a case to express a helpful opinion. He, or she, states facts corroborative to that opinion and, supposedly, explains the underlying scientific principle.)

Highlights of the *Journal of Hypnosis* (1991) convention offered forensic hypnosis experts teaching professional guidelines (Marx Howell and George H. Baranowski in a mock trial setting), and a two-day course in forensic hypnosis with George Baranowski. It also offered seminars on "Testifying in Court" and "Hypnosis and Malpractice Lawsuits in Federal Courts."

[Learn]...how to protect yourself against costly lawsuits and what to do if you find yourself involved in a malpractice case. Medical professionals have been the targets of the legal profession for many years...It's time for our profession to protect ourselves against this threat before the flood gates open up and drive up the cost of li-



ability insurance.... (Ad for seminar on “Hypnosis and Malpractice Lawsuits in Federal Courts,” *Journal of Hypnotism*, Convention Issue, 1991, p. 64)

tempts have been made to outlaw them. (Brown & Fromm, 1986, p. 147)

National Guild of Hypnotists

Graduating from a hypnotherapy course qualified me to join the National Guild of Hypnotists and to subscribe to *The Journal of Hypnotism*. With lively readability, plain English, and an ever-positive slant on hypnosis, it teaches and networks. Anybody can order audio and video tapes of the annual conference seminars and workshops, books, an electronic induction machine (the Brain Wave Synchronizer), and much else for “hypnosis, the profession of the 90s.”

Their big annual convention is a bazaar of hypnotic, trance, and psychic information and enterprise. The diverse participants represent an informal survey of the national civilian hypnosis scene. Seminar topics range from the bizarre (firewalking class, past-life therapy, training in ghost encounters) to mainstream clinical hypnotherapy techniques.

Attendees could take the two-day course for school personnel, or the two-day course to earn certification in hypnotherapy, and/or the seminar on “Induction Techniques with Difficult Subjects.” The advertisement for a six-day course said that it would certify NGH members to become trainers themselves, teaching any “professional” to “immediately become a practicing hypnotherapist specializing in smoking cessation, stress management and weight control.” (p. 9, *Annual Convention Issue*, 1991)

In 1996, the NGH became a “local” of the AFL-CIO. The magazine announced a deal with the union to allow them to participate in future “wellness exams” given to union members. It did not say if participation would be covert or by pre-informed permission of the union member. Probably covert. An interesting development—because the CIA and various hypnotists have mentioned, over the years, that a medical exam is a good setup for a disguised hypnotic induction.

Who Has the Ethics Problem?

An ongoing theme in the back room hypnotic scene is the never-ending turf war between degreed and non-degreed hypnotists. The degreed hypnotists have periodically attempted legal restriction of the non-degreed hypnotists. A psychiatric text stated that:

Stage hypnotists and other lay people...have trifled with hypnosis for a long time...Many of them fancy themselves to be hypnotherapists and advertise themselves as such...irresponsible practices of these lay people endanger the public interest, and at-

However, in the current feeding frenzy in the trance marketplace, those two groups—the degreed and non-degreed hypnotists—have combined forces to resist any legislation affecting hypnosis. The Council of Professional Hypnosis Organizations is a joint committee of the two sectors. Its purpose is to fight any restrictive legislation pertaining to hypnosis.

Bryan M. Knight, M.S.W., Montreal, Canada, psychotherapist, agreed that there are some “irresponsible practices” (“**The Case Against Restrictive Laws**,” *Journal of Hypnotism*, Vol. 5, No. 4, Dec. 1990, p. 27) among the non-degreed. He defended the right of the non-degreed to practice, however, with well-documented evidence that some of the degreed also have “temptations of the flesh, incompetence, and self-delusion.” “The Case Against Restrictive Laws” is a long compilation of moral slips by degreed doctors and psychologists. Here are some statistics which Knight collected, and sources which he cited for the data:

17% of the women in graduate psychology programs had sex with an instructor; 22% of students of either sex who had recently been awarded a Ph.D. had been abused; 34% of students involved in personal relationship breakups ended up in bed with an instructor. (Glaser and Thorpe, pp. 43-51)

The education in sexual abuse got passed on. Women who had sex with instructors in graduate school were four times more likely to have sex with their own patients as those who did not. (Pope et al., pp. 147-158)

7% of psychiatrists have had sex with (or otherwise abused) patients. (Gatrell)

12% of psychologists have had sex with (or otherwise abused) clients. (Pope, Grunebaum)

Psychologists are recruiters for whatever belief system they personally adhere to, including some who act as bait for cults. (Temerlin)

Knight also took degreed psychologists to task for the prevalence of disguised hypnotic inductions which avoid the word “hypnosis” but

...nevertheless employ techniques (such as progressive relaxation coupled with visualization) that are virtually identical to hypnosis. Professionals apparently have no ethical qualms about misrepresenting what they do... (Knight, p. 28)

Manuals of Forensic Hypnosis

Probably, sooner or later, some psychologist with research in hypnotism as his specialty would unravel the whole thing but he would still have a deuce of a time proving it.

- Estabrooks, *Hypnotism*

Several U.S. universities offer a combined program for would-be forensic psychologists: a Ph.D. in psychology and a law degree. There are handbooks of forensic hypnosis written by, and for, such professionals. A British expert, based at Cambridge University, wrote in a legal reference book:

*French and German laws treat it as an instance of absence of mens rea. The argument is that hypnotic suggestion creates a very great compulsion to perform the act. (p. 768)... The question probably depends, in large part, on the extent of dominion attributed to the hypnotist. One opinion favors the view that a hypnotized person cannot be forced to perform acts that are repugnant to him. If this is true, the most that the hypnotist can do in the direction of criminal activity is to remove an inhibition and cause the subject to commit a crime to which he is already inclined. This view is, however, challenged in a recent work by Dr. Heinz Hammerschlag, who concludes from a survey of the evidence that 'there is no basis whatsoever for the view that moral weakness in a hypnotized subject is a condition for the misuse of hypnosis.' It seems, therefore, that there is weight in the opinion of the American Law Institute, that the dependency and helplessness of the hypnotized subject are too pronounced for criminal responsibility. (Glanville Williams, *Criminal Law*, p. 769)*

I read manuals, which are focused on legal aspects of hypnosis, written by Teitlebaum, Udolf, and Lawrence and Perry (published in that order). Their contents reveal an evolution of the judicial view of criminal hypnosis toward ever less credibility for the unknowing victim of abusive hypnosis. Each manual in the series decreased a survivor's chance to obtain an appropriate judicial response.

Teitlebaum: Facts Stated

Hypnosis Induction Technics, by Myron Teitelbaum, B.S., LL.B., was a happy find for me. It is a long, long way from Teitlebaum's warnings (1965) to Lawrence and Perry's denials (1986, 1988). Teitlebaum called the de-

tection of antisocial uses of hypnosis "the third major use of hypnosis." Under the heading "Criminal Uses of Hypnosis," and elsewhere in his book, he repeatedly warned readers about the possibility of unethical hypnosis:

Among authorities today there is not much doubt that a subject can be made to commit criminal or immoral acts...there is also the area where the hypnotist himself commits the wrongful act and then uses hypnosis to evade the law. (Teitlebaum, p. 159)

He named amnesia as the most seductive ingredient for criminal hypnosis: "...the greater the ability to conceal the nature of the suggested act from the subject, the greater the chances of its enactment." (p. 160) He discussed both sealing and seal-breaking techniques and speculated on "antisocial possibilities":

With knowledge of the tools of hypnosis such as memory substitution, suggested amnesia and suggested seal...how easy it would be for a skilled hypnotist prior to the trial date to get innocent individuals to testify in good faith to a set of facts which to them were true, but yet never existed. (p. 145)

Other sections of his book cover "Hypnotism and Crime" and "Governmental Uses of Hypnosis." The latter includes an "Involuntary Induction Technic" (relaxation induction) for use on a "prisoner."

On the use of rehypnotization to detect unethical hypnosis, Teitlebaum emphasized the importance of an approach customized to that particular subject and the imperative need for methods, such as Reiter used, to establish reliability of the recovered information. He emphasized the need for a skilled hypnotist and criticized another hypnotist who

...did not instruct the subject to tell the truth. He did not motivate the subject to want to tell the truth. He did not set up any conditioned reflexes which would automatically signal the telling of an untruth. He did not interrogate the subject to



determine if the subject had been pre-suggested to give certain answers... [and he used] leading and suggestible prodding... (p. 151)

“Pre-suggestions” to “give certain answers” would be likely to occur in a case involving a criminal hypnotist who can access his subject. In known case histories of this type, the hypnotist typically attempted to covertly influence questioning of his victim by suggesting what his subject would say, or by putting a lid on any incriminating memories.

During the rehypnotizations of “Z”, Mrs. E, and Palle Hardwick, those obstacles were overcome. The investigating psychiatrists used profound hypnotic states, avoided leading questions, and maintained temporary amnesia. Police investigators, in those three cases, already possessed, or found, evidence which corroborated the statements each rehypnotized subject had made about the hypnotic abuse.

Teitlebaum suggested the following guidelines for forensic hypnosis:

- Tape record during induction and interviews (now the rule is both videotape and audiotape from first hello to last good-by).
- After deep hypnosis is achieved, examine and test the subject to learn if there has been any previous hypnosis, what his ability for self-hypnosis is, “and if there have been any hypnotic pre-suggestions with regard to the telling of truth and the matter at hand.” (p. 155)
- Then

...implant certain conditioned reflexes to signal the telling of an untruth...examples... 1) Hyperaesthesia of an arm could be suggested and the subject made to feel acute pain. Relief of that pain could be obtained by suggesting that the rubbing of the back of the head by the sensitive arm would achieve the result. The subject would then be told that the telling of a lie, no matter how slight, would cause the pain to reoccur. This would be firmly established by forcing the subject to lie with regard to questions as to his name, age and place of birth. 2) Instead of a pain stimulus and response the subject could be caused to involuntarily blink his eyes or twitch his thumb. (p. 155)

- Motivate the subject to speak only truth, by suggesting pride for that accomplishment.

Schefflin and Opton: Facts Straddled

The Mind Manipulators (1978), by Alan Schefflin and Edward Opton, is a brilliant, inclusive, monumental edifice of a book. This painstakingly-researched reference work has detailed chapters on most mind-control technologies. The electroshock section is especially well researched and helpful (although the authors do not mention its association with hypnoprogramming). However, *The Mind Manipulators* is not well-known and is hard to find.

On criminal hypnosis, their approach awkwardly straddled the fence. One chapter dealt with the subject of unethical hypnosis. It uncritically recorded every bit of scuttlebutt the authors had found—with a scoffing approach which some of their material might deserve. They did not mention narcohypnosis. Yet the authors fully accepted Candy’s description of being conditioned with the help of a barbiturate IV, because of the later, corroborating CIA documents. However, they denied that her free will was ever taken from her: “The technology of mind manipulation is too blunt for the precise control necessary to create a zombie agent” (Schefflin and Opton, *The Mind Manipulators*, p. 447).

They spouted the old dogma of moral integrity: that nobody can be abused under hypnosis unless they have a weak character to begin with. Therefore, they declared, Candy’s programming was basically her fault rather than the CIA’s!

Rather than face the alternative of accepting responsibility for her voluntary role in what she did, she has chosen the other alternative of accepting her behavior but changing her attitudes about it. She now describes her role as involuntary, the product of a sophisticated form of dominance over the mind. This explanation eases for her the tension created by the knowledge that her behavior violated her moral codes... (p. 474)

Did coming to that conclusion ease, for Schefflin and Opton, the tension created by fear that they, too, could be hit with a needleful of barbiturate and hypnoprogrammed into unknowing, obedient subjects? It logically extrapolates from their position that, because their personal moral codes forbid hypnoprogramming (supposedly unlike Candy’s), they are safe from it. Schefflin and Option also said that:

Esoteric notions like brainwashing allow people to forget that they are responsible for their own actions. Personal values, as well as independence of thought and judgment, are not snatched away from people. People all too readily give them up voluntarily. (Ibid., p. 474)

If only it were true that, if a targeted person just has enough strength of character and courage, mind-control technologies cannot be successful. Those of us who have received forced conditioning, like lab rats, have a more humble and accurate perspective on that issue than Schefflin and Opton.

Udolf: Facts Distorted

Udolf's *Forensic Hypnosis* (1983) provides information on courtroom applications and legal problems involving hypnosis to a target audience of experienced professionals—psychological and legal. He discusses “Hypnosis as an Investigative... Procedure,” “Admissibility of Hypnotically Influenced Testimony,” “Hypnotic Confessions, Statements...,” “Role of the Expert Witness,” “Hypnosis and Crime”—even “Regulation of Hypnosis.” Detailed glossaries define legal and psychological terms. He also provides an index of cases involving hypnosis.

In contrast to Teitelbaum, Udolf denies the possibility of unethical hypnosis. Like Schefflin and Opton, any issue of hypnosis abuse is viewed by Udolf as due to the subject's lack of character. He lists as “pseudo issues” “The possibility of hypnosis against a subject's will” and “the hypnotist's ability to victimize the subject or compel or deceive him...” (Udolf, *Forensic Hypnosis*, p. 7) He repeats the usual myths: “the evidence appears overwhelming that it is not possible to hypnotize a person who actively resists hypnosis...” (Ibid.) “Subjects never lose control of the situation nor surrender their volition to the hypnotist. They can come out of hypnosis at any time they desire.” (Ibid., p. 3)

Elsewhere in the book, however, Udolf equivocates: “The question of whether hypnosis can be used to...victimize subjects, has remained unresolved...” (p. 125)

He admitted that disguised induction exists. He lists methods by which a covert hypnosis can be accomplished: by “relaxation,” or by substituting another word for “sleep” in a verbal sleep induction script, or by the “chaperone system” (in which the “chaperone” is the hypnotist's real target).

Udolf states that any subject who is hypnotized by a disguised induction has given “subconscious consent,” because, he says, the induction was not disguised to the subject's unconscious and it agreed to the induction. According to Udolf's reasoning, either the conscious or unconscious of a subject can give agreement. No matter which one agreed, he would call that agreement equally valid.

Udolf does not deal with the fact that the unconscious mind is reflexive and can be reduced to a relationship

with a relatively limited group of neurons, whereas the conscious mind is capable of being analytical and draws on the general resources of its data bank. Can an isolated “mind” that is not fully capable of analysis legally be a “mind”? Udolf also does not discuss the ethics of a forced reinduction by posthypnotic cue, or of induction by hypnoid drug, or by any other unusual and compelling chemical, electrical, or biomagnetic technology. He also does not consider the questionable legality of obtaining a subject's conscious (or unconscious) agreement to be hypnotized by means of lies stated by the hypnotist about hypnosis.

The book cites many legal cases involving hypnosis, but most have little relevance to this book's topic. Many involve only shaky evidence and morally distasteful subjects and circumstances. On the subject of Palle Hardwick's case, Udolf merely quotes M. Reiser's, 1978, summary of the case.

...in Denmark in which the defendant robbed a bank and killed two employees. It was alleged by the accused that during World War II, when he was in prison, his cellmate repeatedly hypnotized him and made him “subservient” and that he had acted under the former cellmate's influence. (Udolf, 1983, p. 131)

Udolf's comments on the Australian case involving Palmer and the three women are also disturbingly distorted: “The testimony of the complainants appears incredible...It seems likely that this case is an example of hypnosis being used to give a subject an excuse to do what she was evidently willing to do.” (p. 136) He speculated whether the women's testimony was “honest rationalization” or “deliberate perjury.”

On hypnotizing witnesses to crimes, Udolf says the purpose should be only to help get evidence for use in the trial—not to use information obtained by hypnosis in the trial.

A study of the text and bibliography shows these problems in Udolf's presentation:

- It mentions narcohypnosis only briefly, and only in the context of its use in police interrogation to obtain confession.
- It omits M. H. Erickson's research on how to establish deep-level control of a subject. The only reference to Erickson is his piece of phony “research,” which supposedly proves that criminal hypnosis is categorically impossible.



- There is lots of Barber, which means there is a lot of pseudoscience, twisted logic, confusion, and assignment to the subject of all responsibility for bad outcomes.
- Marginally relevant legal cases are cited in detail. The important cases of Palle, Z., and Mrs. E, are slighted.
- There is no serious discussion of the physiology of hypnosis. This leaves Barber's statement that the subject's imagination dupes the hypnotist uncontested.
- Research studies that could provide strong proofs of regression authenticity are not cited. Only studies that challenge any credibility for regression are included.
- Udolf's bibliography is far more restricted in references than Teitlebaum's because Udolf omits most points of view and research results which are contrary to his positions.
- Teitlebaum included a chapter on government use of hypnosis. Udolf does not mention that possibility (probably because it was now more than a possibility, and SECRET).

In the final analysis, Udolf is far more worried that a subject may successfully accuse a hypnotist of unlawful conduct than that a hypnotist might successfully victimize a subject (p. 144). He argues against any legislation dealing with hypnosis.

Lawrence and Perry: Facts Denied

Hypnosis, Will, and Memory: a Psycho-legal History, by Jean-Roche Lawrence and Campbell Perry, is a more recent (1986, 1988) book on the legal aspects of criminal hypnosis. The authors claimed, up front, that their book was going to answer, once and for all, the question:

...how can the hypnotic situation lead to reports of total submission, compulsion, or lack of control over one's own physical and psychological processes? (Lawrence and Perry, pp. xvi-xvii)

Their answers are hypnosis-lobby propaganda repeated with specious cleverness. This lengthy work is written about something the authors say cannot exist. It is a vast compilation of marginal, equivocal, and outdated materials. It presents, for any lay or professional reader, the standard myths about hypnosis. It provides legal references for any hypnotist who has been accused of malpractice.

Lawrence and Perry claim that "Hypnosis is a situation in which an individual is asked to set aside critical judgment, without abandoning it completely..." (*ibid.*, p. xiv) In fact, however, the goal of every criminal hypnotist is to displace the subject's conscious mind as completely as possible. Lawrence and Perry say that

...the alleged coercive power of hypnosis...stemmed from its identification with long-standing beliefs surrounding phenomena such as witchcraft and sorcery, religious fanaticism, and the unabated popular enthusiasm stimulated by the scientific discoveries...and the negative reactions to its use from the established medical, religious, and political milieus of the last two centuries... (p. xvii)

Actually, the coercive element of hypnosis results from an operator's expert manipulation of a susceptible subject's brain physiology.

They say, "...it is recognized today that the hypnotized subject is not an automaton..." (p. 394) Actually, subjects have varying responses to trance, and go to varying depths. Not every hypnotic session involves **automatism**. But every case of criminal hypnosis does.

The index to Lawrence and Perry's book does not list "disguised induction" or "induction, disguised." It does not mention "narcohypnosis" or "electro-induction." Estabrooks is mentioned in the bibliography, but not for the 1945 book in which he bragged about making unknowing hypnotic subjects and urged government development of a cadre of amnesic agents, and not for the magazine article in which he reminisced about creating hypnoprogrammed spies during World War II.

Compare the spin that Lawrence and Perry put on their presentation of the case of Palle Hardwick with the true facts:

Reiter's (1958) account of this case placed great store on H.'s account of these events, which was provided in hypnosis. In particular, he [Reiter] relied on the mistaken doctrine that the hypnotized person is unable to lie, and on the slightly more plausible premise that H.'s hypnotically elicited recollections of the events were in substantial agreement with the known facts of the case. Almost exclusively, he focused on the apparent Svengali-like power of an unscrupulous hypnotist... (Lawrence and Perry, p. 308)

Most of their book is a review of old legal cases from the 1700s and 1800s in Paris's La Bibliotheque Nationale. The first three-hundred of the book's four-hundred-some

pages barely get us into the early twentieth century. The remaining pages list U.S. legal cases involving hypnosis: twelve before 1910, and about thirty from 1910 to 1945. Lawrence and Perry clam up just when it gets interesting. They say that post-WWII hypnosis research

...is probably a little too close to be able to chart objectively. It suffices to say that this period has been one of remarkable growth and development at both the clinical and experimental levels. (p. 297)

I wholeheartedly agree with that statement. I regret that they chose not to provide details of that “remarkable growth and development.”

Lawrence and Perry assign all guilt for ethical deviance, in trance or as a result of trance manipulation, to the hypnotic subject’s presumed preexisting lack of character, the old “dogma of moral integrity.” One of their most disturbing statements is that people have been harmed by hypnotists only because those hypnotic subjects believed harm was possible: “underlying self-fulfilling prophecies” (p. 394). It requires such an ugly twist of self-serving logic to make the victim of criminal hypnosis into the perpetrator—to totally relieve the hypnotist from moral or technical responsibility for the outcome. (The final stage of brainwashing also pushes the victim to accept all guilt and responsibility for his mistreatment.)

Toward the end of their book, however, the authors eloquently contradict their earlier statements:

Perhaps the most intriguing and elusive issue in the history of hypnosis is the experience of nonvolition. Recognized before the end of the eighteenth century, it has haunted investigators ever since....One has only to think about the victims’ reports of having been sexually abused by an unethical hypnotist to realize how ambiguous such situations are and how unwilling the scientific community can be in acknowledging such possibilities. (Lawrence and Perry, 1988, pp. 393-4)

Meyers: Textbook Myths

Meyer’s, 1990, beginning level college textbook, *Exploring Psychology*, says that information repressed by hypnosis “can be recalled at a prearranged signal or upon subtle questioning.” (Meyers, p. 145) Kohlstrim, 1985, and Spanos, *et al.*, 1985, are cited. However, amnesic information can only be cued out if the original hypnotist implanted that “prearranged signal,” and if the second hypnotist knows the designated cue and is allowed to use it by the subject’s programming. “Subtle questioning” will work only if the questioner is prepared to include hypnotic abuse in the

options—and if the data is only lightly repressed (unlikely in a case of abusive hypnosis).

To recover information heavily repressed by hypnosis, rehypnotizations with the goal of age regressions, hard work and a long struggle against the blocking programming will probably be necessary. But Myers shuts the door on hypnotic age regression as a means of recovering amnesic information, giving an impression of scientific debunking: “60 years of research disputes claims of age regression.”

Myers cited research that persons, who are pretending to be a child, act more childlike than regressed hypnotized persons. He cited that as evidence that regression is phony. (I don’t agree. The deeply regressed subject is not focused on behaving like a child. He is enveloped in remembering.) Myers mentioned the Chowchilla bus case as a successful example of remembering under hypnosis, but he denigrated it as an “atypical” example. He gave only grudging approval to witness hypnosis, saying it “may have value—or at least do little harm.” He cautioned that hypnosis can increase the number of errors and cause confabulation. True. He did not mention Dr. Reiter’s method.

As Meyer stated, there have been studies contesting the validity of regression since 1925. What he does not state, however, is the related fact that there have also been quite amazing studies demonstrating authentic hypnotic age regression. The credibility of age regression, such as into a person’s childhood, was accepted by most hypnosis researchers until the textbook takeover of the Orne/Barber advocates. (Their position developed, concurrently, with the explosion of trance venues in the marketplace and covert government hypnosis research.)

“Can Hypnosis Force People to Act Against Their Will?” the section title asked. “No,” Myers answered, restating the old dogma of moral integrity: obedience proves that the subject wanted to do the suggested act anyway, and hypnosis provided the opportunity. (That is false. A conditioned amnesic somnambulist cannot keep from being rehypnotized on cue. She cannot remember what she has been told not to remember. She cannot avoid obeying most suggestions. She can only disobey if she can manage a conversion.)

In summary, the facts presented in a modern psychology textbook admit a possible physical reality for hypnosis—as long as amnesic victims of criminal hypnosis do not try to remember anything by rehypnotization, do not aspire to testifying in court, and do not claim that hypnosis caused them to do an unwilling act.



Musings

Dr. Estabrooks wrote about the slim-to-zero possibility of a case of unethical hypnosis becoming publicly uncovered as such. He said, "...military intelligence teaches one to be devious..." (*Hypnotism*, p. 230) In a "devious" scenario, the writer knows that Gus "walks in his sleep, a pretty good sign that he will be a good hypnotic subject." He asks Gus to visit him at home. After Gus arrives, the writer proposes hypnosis. Gus agrees. The writer soon knows for sure that Gus is a somnambulist. The writer gives Gus a posthypnotic suggestion to not remember his trance induction and conditioning. He suggests sealing.

Will the "writer's" crime be exposed?

That's not nearly as easy as you might think. Our psychiatrist friends, capable as they are, would probably miss the point [the fact of unethical hypnosis]. If they didn't, they would be laughed out of court. Their explanation would be ridiculous, in the eyes of the public, and they certainly could never prove it. We have only to stick to our origi-

*nal story...no one but...the writer can hypnotize Gus to get the truth. In fact, we would be greathearted and allow anyone to hypnotize him...Our military friends would see through the hoax. They would dig up our records and know that we had the background to lay the plot. Then they would maintain a discreet silence. Certain military matters are not for public consumption. Probably, sooner or later, some psychologist with research in hypnosis as his specialty would unravel the whole thing but he would still have a deuce of a time proving it. We would simply sit tight. (*Hypnotism*, p. 233)*

That is true. Military hypnotists, and those who work for the government, let hypnotic predators freely prey on uninformed persons rather than make public details of the technology and its use in order to prosecute them. In turn, civilian hypnotists, who are knowledgeable about some military advances in mind-control, say nothing—except to other insiders. And the potential for unethical control grows.

Hypnosis of Witnesses

...the real pioneers in this appear to be the Israelis. Meyer Kaplan, the detective who commands the Jerusalem CID, has found that witnesses can recall far more under hypnosis than they can consciously...Hypnosis has recently been introduced as a routine police measure in all terrorist bombings in Israel where there might have been witnesses.

- Peter Watson, *War on the Mind*, p. 286

Donald Bain explained in *The Control of Candy Jones* that "...information recovered through the use of hypnosis is not, in itself, legally valid" (p. 42). The rule is perfect for unethical operators. The only way that victims can recover their memory is by rehypnotization, but information gained only by hypnosis is not legally valid. Since most hypnotists now deny that criminal hypnosis is possible, rehypnotization of victims of unethical hypnosis is not taught. But witness hypnosis is—yet with increasing scepticism.

Back in the 60s and 70s, hypnosis of both witnesses and the accused was considered the cutting edge of forensic hypnosis. Then the pendulum began to swing toward scepticism.

A major problem in forensic hypnosis is the con-

*tinued existence of the mistaken impression that everything said in trance is fact, that all bits of information garnered from a hypnotized individual are accurate. Sometimes they are, and sometimes they are not. (Kelly & Kelly, *Hypnosis*, p. 219)*

The pendulum kept swinging. Now, it is at the opposite extreme. The forensic view of witness hypnosis has shifted from believing that anything said under hypnosis is true to the position that nothing said under hypnosis is to be trusted. Now, there is no distinguishing between less and more reliable types of regressions. Now, all memories expressed in trance are viewed with doubt.

Dr. Reiter, that cold-blooded forensic hypnotist, took plenty of time, used excellent proofs of deep trance,

and suggested safeguards against lying or confabulating.. He had worked with Palle daily for months, before he actually began to collect evidence. The problem with a quicker and more humane hypnosis is its higher rate of error.

Testimony derived from hypnosis alone can not convict. It can generate leads to more tangible evidence. That legal policy is helpful for malpracticing hypnotists. If they are careful not to generate any nonhypnotic evidence, under those guidelines they are unconvictable.

Basic Facts of Forensic Hypnosis

- ☞ *Hypnosis makes it possible to recover true, faint, or repressed memories.*
- ☞ *It is possible for a hypnotist to deliberately stimulate, or implant, distorted or false memories in a subject's mind.*
- ☞ *Hypnosis can result in imagination unknowingly displacing real remembering: confabulation.*

☞ *Hypnosis rapport makes a subject likely to follow and accept conscious, or unconscious, leading cues from the hypnotist, however subtle. If an interrogator seeks memories that do not exist, a hypnotized person may confabulate them.*

☞ *A victim of confabulation, or of false memory implanting, is likely to feel a strong, unswerving belief in the false memories. That confidence is even greater than he would express for real memories.*

The first-named fact in this list exists, and it can be valuable to individuals and legal authorities when trance is properly managed—or even sometimes when it is not. The other facts, however, must also be kept in mind as possibilities.

Chowchilla Case

In America, keen police interest in witness hypnosis began with the Chowchilla case. The bus driver who was victimized in that famous Chowchilla, California, kidnapping, could remember only three digits of the kidnapper's





license plate. Police hypnotized the driver, hoping to learn more. Under hypnosis, he named two complete license plate numbers. One of them turned out to be completely wrong. But the other one was correct in six of seven digits. Three of the digits were the ones that he had already named, so he only gained three digits. But those three made all the difference. They resulted in arrest, trial, and life imprisonment for the three perpetrators.

Bryan

Dr. William Jennings Bryan was a grandson of the great orator, William Jennings Bryan, and the son of a physician. He earned degrees in electrical engineering, law, and medicine, but he spent the last decades of his life teaching and practicing forensic hypnosis. He founded a school and internship program for hypnosis training. He sold tape sets of his lectures. Like M. H. Erickson's educational programs, Bryan limited registration for his pricey four-day cram courses—and longer and pricier “internships” in hypnosis—to degreed medical personnel or lawyers. (He also opened the courses to accompanying spouses, nurses, etc.)

Dr. Bryan started a magazine, *American Journal of Hypnosis*. It continued for years and often carried articles on forensic hypnosis, as well as on the physiology of trance. He consulted with the CIA and was a technical consultant for the movie, “The Manchurian Candidate.”

Bryan was the biggest name in the country in the field of forensic hypnosis in the 60s. He personally was involved in many notorious legal cases of his era. He wrote more than 150 articles and books on hypnosis. Many touched on his experiences providing hypnosis for law enforcement agencies. Some were texts on forensic hypnosis (such as *The Legal Aspects of Hypnosis*, 1962). Bryan approached forensic hypnosis with a zest and frankness that is strictly taboo today. Unfortunately, you can scarcely find a copy of his books, tapes, or magazine articles.

Spiegel

Dr. Herbert Spiegel helped with an Ann Arbor, Michigan, murder case using witness hypnosis. Eleven patients had died in a VA hospital, all of respiratory arrest. The modus operandi appeared to be an injection of Pavulon (a derivative of curare). Detectives assumed that the murderer was somebody on the VA staff, but they did not know who.

Dr. Spiegel hypnotized one patient who, while in the trance state, recalled events in the ward that were not remembered during prior questioning of him in the nontrance state. Based upon this information, the FBI was able to expand the scope of its investigation and, eventually, two suspects were

named, both nurses. (March 22, 1976, Time, paraphrased in Bain, p. 42)

Kroger

W. S. Kroger also did witness hypnosis. In one case, he hypnotized a policeman who had been wounded by robbers. In trance, the officer was able to recall the license number of their car, even though it had been several months since the incident. In another case, a hypnotized subject remembered, by means of age regression, where he was on a particular calendar date eight years earlier. In both cases, officers were able to corroborate the accuracy of the subject's recall under hypnosis with tangible evidence.

(Like most regression specialists, Kroger distinguished between **revivification** and **age regression**. Revivification is a reliving immersed in the past. The hypnotized subject says, “I am....” Age regression is a less valid acting out of past history during which the subject's awareness of the present remains intact. Kroger felt that revivification was quite reliable, but that age regression without revivification risked confabulation.)

Howell

Inspector Marx Howell has twenty-eight years of law enforcement experience and is an FBI National Academy graduate. He specializes in the “investigative hypnosis interview” for the Texas Department of Public Safety. Official Texas interest in witness questioning under hypnosis began in 1980, after the Chowchilla kidnapping. Some officers were sent to train at the Law Enforcement Hypnosis Institute in Los Angeles, California. Texas' own fifty-hour training course was first given by the Therapeutic and Forensic Hypnosis Institute, Houston, Texas. It has sections on “Criminological vs. Psychotherapeutic Use of Hypnosis,” “Myths and Misconceptions,” “Inductions and Deepening Techniques,” and “Information-Eliciting Techniques.” They later developed “two in-service hypnosis schools in the DPS Academy...” (p. 36)

Texas kept statistics. In their first 1,121 sessions of investigative hypnosis, 73.68% of the inductions resulted in additional information. The value of the information obtained under hypnosis ranged from zero to the provision of key evidence which resulted in identification and arrest of a perpetrator.

Howell stressed that any leads emerging from a hypnotized subject should be corroborated and used only to support the physical investigation. Laws applying to forensic hypnosis depend on the state where it is practiced and there are significant differences between the laws of those states. Texas is said to be very open to it. Texas courts accept witness testimony that has been refreshed by

hypnosis. Many other states do not. However, Texas does not allow hypnosis of suspects or defendants.

Howell said that a police hypnotist should be ignorant of case details. To develop a subject's trust, he should wear plain clothes and first...

Explain the common misconceptions which most people believe about hypnosis...Many of these misconceptions come from the Svengali-Trilby novel by George DuMaurier and have been perpetuated over the years through television, motion pictures, and stage hypnosis. (Howell, p. 37)

Even in Texas, there is no help for a victim of unethical hypnosis. Texas police hypnotists are taught that unethical hypnosis is not possible.

Baranowski

George Baranowski is another prominent forensic hypnotist. He studied at the Midwest Investigative Hypnosis Training Institute in Rochelle, Illinois, taught by Sheriff Jerry Brooks. He also studied with Dr. William S. Kroger, and at Purdue, and at Indiana University. He proposed the following procedural requirements for forensic hypnosis. (Damon, pp. 5-6)

- *Record everything on both audio and video.*
- *Don't ask "leading questions."*
- *Learn court procedure as to forms, attitude, how to testify, basic laws, rules of evidence, the "doctrine of memory," and how to interview.*



Public Spokesmen on Hypnosis: Truth, Half-Truths, and Lies

M.H. Erickson



T. X. Barber



The Skeptics:
Sarbin and Spanos



M. T. Orne

Now if hypnosis can be used to secure both good and bad ends, why do so many hypnotists loudly and vehemently deny that criminals can profitably employ it?

Part of the answer can be attributed to the dedicated nature of these scientifically trained men who wish to make the public aware of the fantastic potentials of hypnosis as a beneficial and worthwhile tool in human endeavors.

Their task, however, is complicated by the fact that even generally well-informed segments of the public continue to associate hypnosis with quackery, cheap entertainment and some vaguely sinister evil. Publicity identifying hypnosis as a potentially valuable criminal tool only serves to make acceptance of the benefits of hypnosis more difficult. Thus, many researchers feel compelled to attack such an unfavorable linkage head on, in deference to what they consider the greater good.

Birns, *Hypnosis*, 1968, pp. 155-156

Not Birns (whose insightful words are quoted above), but M. H. Erickson, T. X. Barber, Sarbin, Spanos, and Martin Orne are the well-known and oft-cited public spokesmen on hypnosis. They are quoted in textbooks, courtrooms, and forensic manuals as final authorities on matters having to do with criminal, or merely “unethical,”

hypnosis. However, Erickson, Barber, Sarbin, Spanos, and Orne probably declared a public position that was different from their private knowledge. Here follows a closer look at what these public spokesmen have said about hypnosis—and how their statements compare to the facts.

M. H. ERICKSON

...an individual in hypnosis can be caused to commit an act which is socially and objectively reprehensible... (p. 116) One well-known and experienced hypnotist regretted that the dangers were not more numerous and more obvious, for then he believed there would be less tinkering with hypnosis by the inexperienced...Possible dangers do reside in...the moral issue...

- Marcuse, *Hypnosis*, p. 167

Was M. H. Erickson the “well-known and experienced hypnotist” to whom Marcuse referred? Maybe.

M. H. Erickson started hypnotizing people when he was a college freshman at the University of Wisconsin. By his junior year, he had put hundreds of other students in trance. He was invited to demonstrate hypnosis to the psychology department, to a medical school, and to a nearby mental hospital. In 1923, Clark L. Hull, a hypnosis researcher, invited Erickson to teach a graduate seminar. After earning an M.A. and an M.D., Erickson interned in psychiatry. He combined teaching, research, and private practice. Over his lifetime, he hypnotized thousands of persons, some as many as five-hundred times.

He profitably targeted doctors, dentists, and graduate psychologists. He taught thousands of professionals throughout the U.S. to use hypnosis—often in two or three-day how-to-hypnotize hotel seminars. He was creating a new medical technocracy with the special abilities of disguised induction and hypnotic suggestion. When hypnodontist Aaron Moss recalled presenting those seminars with Erickson, he said that 60% of the students were dentists, 35% were medical professionals, and only 5% were psychologists. The students learned fast:

With only a little experience he [the student] can produce the peculiar phenomena characteristic of hypnosis such as age regression, hallucinations, illusions, catalepsy, etc. (Moss, p. 306)

M. H. Erickson’s wife, Elizabeth Moore Erickson, also a professional in this field, was overshadowed by her husband’s professional stature. One of the great Ericksonian articles, “Concerning the Nature and Character of Post-hypnotic Behavior,” is credited to both of them, his name first.

The Erickson Foundation

Erickson, like Jung and Freud, founded an organization which acts as a perpetual lobby, publicity machine, fund-raiser, and promotor of all things Ericksonian. Erickson, Jung, and Freud all trained disciples at length, bonding together those who came to study with the master. Each developed a library of revered books—written by the master and/or his disciples. Each has unique in-group concepts, lingo, skills, and hierarchy.

The Milton H. Erickson Foundation publishes a quarterly newsletter (sprinkled with M.H. Erickson quotes). It sells audio and videotapes from past Ericksonian conferences. (But you must be a graduate student in psychology, hold a post-BA degree in that subject, or have a social service job to attend a conference or purchase conference tapes). Conference courses typically include “Conversational Induction Techniques,” “A Conversational Induction with Fixation on Ideas,” and “A Conversational Induction and the Utilization of Spontaneous Trance.” Ericksonians are big on disguised induction. The “conversational induction” is their specialty.

The newsletter also has advertised a terra cotta, or bronze, portrait bust of Erickson. Its list of books for sale has included *The Wisdom of Milton H. Erickson*, *My Voice Will Go With You: The Teaching Tales of Milton H. Erickson*, and others, all with “Ericksonian” or “Erickson” in the title. Like Maypole dancers, Ericksonians continue to weave the magic of the MHE name, the continuing MHE adulation, and themselves, more tightly against the center pole which is MHE himself.¹

M. H. Erickson had peers who researched hypnosis: LeCron, Wolberg, R. W. White, Salter, Young. For years, William Jennings Bryan ran a competing organization which

1. To encounter him as a fairly likeable human being, speaking plain English, and telling his therapy tales, read Zeig’s *Teaching Seminar with Milton H. Erickson, M.D.*



also offered an internship program and produced a professional journal on the subject of hypnosis. Now, all of those but Erickson are forgotten. Why? Was he really “greater”?

Erickson was a brilliant hypnosis researcher who contributed several important elements to the technology of coercive hypnosis. Most notably, he created the propaganda piece that kicked off a surge of disinformation about hypnosis which quickly became a tidal wave.

Erickson on “Antisocial Hypnosis”

Erickson’s most cited article is a piece of phony “research” that appears to prove that unethical hypnosis is impossible, and that nobody can be made to do anything against his will, by means of hypnosis:

...the conclusion warranted by these experimental findings is that hypnosis cannot be misused to induce hypnotized persons to commit actual wrongful acts either against themselves or others... (M. H. Erickson, “An Experimental Investigation of the Possible Anti-social Use of Hypnosis”)

Erickson claimed, in that article, that a subject cannot be made to do anything against his will, or against his morals. What he really demonstrated, however, is all of the methods by which a hypnotist can cleverly and deliberately fail to produce self-destructive or unethical behavior—if he wants to report that type of results. “An Experimental Investigation of the possible Anti-social Use of Hypnosis” is now quoted as scientific gospel in every psychology textbook.

Millions of suggestible people have accepted Erickson’s research results as fact. The reasons are a lesson in propaganda techniques: a) An authority figure, a “doctor,” insists the lie is the truth. b) “Experts” and textbooks repeat the lie insistently and endlessly. c) Mock-up experiments have “proved” it. (We are taught that anything with the appearance of science is the final answer. d) Erickson used big numbers: lots of subjects, lots of experiments, lots of negative results.

How did this extraordinarily expert hypnotist manage to “fail” in his attempts to get hypnotized persons to commit “anti-social” acts, when amateur criminal hypnotists could manage it? This double-layered article superficially insists it is proof that a subject cannot be made to do anything against his will by means of hypnosis. What it actually displays is an array of slick techniques by which a hypnotist can claim to attempt unethical hypnosis and produce seeming failure.

- *In some cases, he hypnotized them so lightly that they could still discuss and argue with*

*him freely. They were not deep enough to have labored, almost inaudible, somnambulistic, literal, and automatistic thought processes and responses. Light trance is not as compelling as **deep trance**.*

- *In other writings, Erickson said that deep, amnesic trances were necessary for automatic obedience, and he was an expert at producing them. However, he gave no **amnesia suggestions** in this experiment. He knew that full access to memory supports volition!*
- *He was a master of devious, **indirect**, seductive patient manipulation, but in this “research” he gave only direct suggestions. He said, “Sit on a hot stove.” None of the subjects would.*
- *He did not use the full array of hypnotic techniques. He reported that he tried to make a subject have the “impression” that a friend’s purse was actually her own, and could not make it work. He did not suggest a visual **hallucination** that the purse was her own. (In a rerun of that experiment, Margaret Brenman suggested exactly that, and she succeeded in eliciting the “antisocial” behavior.)*
- *After his “failed” experiment, a subject told Erickson that she “tried hard,” but she “simply could not do what had been asked...” That statement describes the experience of **nonvolition** of a deeply hypnotized, trained subject. (The suggested act seems impossible to resist. It seems to carry itself out with no conscious control.) The subject’s hypnotic automatism probably was stimulated by Erickson’s **nonverbal directive**. Consciously, she was not aware of the two levels of instruction coming from Erickson: a weaker verbal layer, a dominant nonverbal layer. Subjects, however, unconsciously, and with extreme sensitivity, perceive an experimenter’s nonverbal communication (tone and body language). Erickson’s bias was so clear that some hypnotized subjects refused his request, made while they were hypnotized, to play practical jokes on other persons. Yet they willingly obeyed the same request in a waking state!*

Every M.H. Erickson article I have ever read contained one or more concepts of technical value. In addition to the preceding demonstrations, in his article’s conclusion, Erickson directly stated one important, powerful, and true

thing. He said that persons who are injured, offended, or exploited under hypnosis remain unconsciously angry—even when they do not consciously know that fact.

...the subjects tended to develop and manifest much more intense feeling at the hypnotic level of awareness than at the conscious waking level. Many of the subjects in the waking state readily and easily forgave...only to manifest in the trance state a full continuance of their anger. ("Antisocial..." p. 393).

Opposition to Erickson's "Research"—

Estabrooks (who personally had done lots of morally marginal hypnosis) said:

*...[the] attitude is that there is only one way to have a subject commit a crime. We hypnotize him for the first time at 10:00 A.M. At 10:30 we hand him a knife and say, "Go murder your father." The old gentleman is still hale and hearty by 11:00 A.M. so we have "proved" our point that it can't be done. (Estabrooks, *Hypnotism*, p. 185)*

In a 1953 article, "Anti-Social Behavior and Hypnosis," Marcuse surveyed the literature and tallied separately those persons, among the well-known experimental hypnotists, who believed unethical hypnosis was possible, and those who did not. He said that only Bramwell, Young, and Erickson disbelieved (or claimed to disbelieve) in the possibility of self-destructive and hetero-destructive acts caused by hypnosis.

Soon after, Young was converted to Marcuse's side by the evidence from his own experiments. Young then also took on Erickson, pointing out the

*...poverty-stricken suggestions to which, according to Erickson's thesis, antisocial experimentation is limited. If, however, we study Erickson's technique in dealing with all other hypnotic problems, we find him using a methodology varied and rich, and consequently effective. (Young in LeCron, ed., *Experimental Hypnosis*)*

Indeed, Erickson's insistence that hypnosis is invariably harmless (except perhaps to the hypnotist!) becomes even more ridiculous when you learn that Erickson made persons become hypnotized unknowingly, and unwillingly. He caused hearing people to become deaf—even against their will and to their great distress. He caused seeing persons to become blind, and then colorblind. Young wrote a classic article which listed some of the methods that would facilitate unethical hypnosis. The contributions of Erickson are prominent in that list.

Marcuse wrote to Erickson, pointing out that his "experiments" made no attempt to evade the subjects' resistance. He had not, for example, used the technique of hallucination which had been so effective in his other experiments. Erickson wrote back ("Personal communication, 1948") that

...the anti-social act was now "on the part of the hypnotist," for he said "there must be an awareness of the nature of the act before it can be judged as anti-social." (Erickson quoted in Marcuse, "Anti-Social..." p. 19)

According to Erickson's statement above, if the subject becomes unable to be aware of the nature of the act, the moral burden shifts to the somnambulist's hypnotist! That makes sense. However, that omits the experience of nonvolition.

Young read the quote from Erickson's letter to Marcuse and commented that:

Erickson's definition of an antisocial act in hypnosis is an act which the subject has been made to see as antisocial. It cannot be a bad act which the subject has been misled into believing is a good or at least necessary act. For Erickson, it must be a bad act which the subject sees as a bad act. (Young in LeCron, ed., p. 384)

Marcuse further quoted Erickson:

It is possible that many individuals are reluctant to discuss the matter of anti-social behavior publicly and may take a position contrary to what they believe for fear that a minor aspect of hypnotic phenomena [the possibility of criminal hypnosis] may jeopardize further work in the area...This expressed fear is not without foundation as witness the current blanket prohibition of hypnosis in many of our large universities. That a technique is misused is no argument against its use. (M. H. Erickson, quoted by Marcuse, "Anti-social Behavior and Hypnosis:")

Wells and Estabrooks also published debunking efforts. A graduate student working under Wells, Margaret Brenman, repeated some of M. H. Erickson's "failed" anti-social experiments—and obtained totally different results. In a *Journal of Psychology* article, Wells targeted Erickson, saying:

If a beginner in the art of hypnosis, a graduate student in her first year of practical experience in hypnotizing, can successfully carry out experi-



ments in which her subjects are forced to perform anti-social acts against their wills, then psychologists or physicians with more experience with hypnosis who fail in all such experiments should be put to shame, or encouraged to improve their technique until they, too, can get equally successful results. (Wells, 1941, p. 99)

Dr. Reiter, then Europe's most prominent expert on unethical hypnosis, could scarcely believe Erickson's "research" was being taken seriously in the United States.

[His] ...experiences then stand in direct opposition to those of a number of investigators of equally high rank. In fact Erickson stands alone among his contemporaries. (Reiter, 1958, p. 41)

In a 1942 article, Erickson seemed to agree with his opposition:

It is certainly true, however, that failure to produce even these acts cannot be used as evidence that...hypnosis cannot be misused to induce hypnotized persons to commit actual wrongful acts either against themselves or others. The writer [Erickson] concurs entirely with Rowland who recently has written that...the common acceptance that hypnotized persons will not perform acts that violate their ideals is badly in need of re-examination. (Psychiatry 5, 1942, pp. 49-62)

In 1944, however, Erickson again reversed himself:

Briefly, there are no injurious or detrimental effects upon the subject other than those that can develop in any other normal interpersonal relationship; hypnosis cannot be used for antisocial or criminal purposes, although most subjects can be induced to commit make-believe or pretended crimes...; the hypnotist-subject relationship is entirely one of voluntary cooperation, and no subject can be hypnotized against his will or without his cooperation...

Since hypnosis depends primarily upon cooperation by the subject, the control of the trance state rests largely with the subject. No subject can be kept in a trance for an unreasonable length of time without his full cooperation...Finally, as for detrimental effects of hypnosis, none have been observed in personal experience with hundreds of subjects, some of whom have been hypnotized hundreds of times. ("Hypnosis in Medicine," p. 641)

Results of the "Antisocial" Article—

Erickson had faked experimental results for the unwitting masses and the fawning Ericksonians to believe. He did it well, as he did all things well. He proved that it is unnecessary to give people truth since they are satisfied with lies. He proved that more clever and more ruthless manipulators can manipulate less clever and more trusting ones. He provided a slick piece of propaganda to ensure the future profits, and power, of his profession. Ever since, psychology and psychiatry have treated Erickson's phony experiments as if they were the last word on the matter.

"An Experimental Investigation of the Possible Anti-social Use of Hypnosis" was published in 1939. In April, 1940, a Sunday issue of *The American Weekly* (as close to universal indoctrination as you could get in that pre-television era) said,

The general public seems to believe that hypnotized persons will do unlawful things directed as a result of being hypnotized. The careful and conclusive work of Dr. Milton H. Erickson, at the Eloise, Michigan, Hospital and Infirmary, shows that this notion is untrue. Neither while hypnotized, nor later as a result of ideas planted while hypnotized, could he get people to do unlawful or wicked deeds, not even tiny ones. Dr. Erickson is an outstanding hypnotist of the present time, and should be able to accomplish this if it were possible.

People base their behavior on their data. After Erickson's article, what they were taught, and therefore what they "knew," was a lie. The debunking efforts of Wells, Estabrooks, Brenman, and Young failed, shouted down by print repetition of that lie, and denials of the truth. Erickson, Barber, Orne and their false postulate of ever-harmless hypnosis reign.

M. H. Erickson Video

On the evening of September 19, 1990, Professor Charles Tebbetts showed his hypnotherapy class (in which I was a student) a bootleg tape of the famous Dr. Milton Erickson performing before a select audience. (It was an unauthorized copy. Tebbetts never attended college.) Erickson's subject was a strikingly beautiful, shapely, young black woman. The old man did a disguised induction, then deepened her into a very deep trance. Then, he shifted her to somnambulist waking hypnosis (instructions to open her eyes and have normal speech capability).

Next, he demonstrated his control over her: He made her do things she said she did not want to do. He suggested that she would relive a harsh childhood spanking given by her mother. He said to her, "Feel the pain." He repeated that again, with emphasis, "Feel the pain." She was being obliged by Erickson, in front of a large audience, and being videotaped, to relive an excruciating childhood spanking.

Erickson sat there with a little smile on his face, watching his subject squirm in agony. "FEEL it!" he commanded. "YOU WILL FEEL PAIN!"

She obviously was feeling it. I writhed in my seat and stifled an outcry. Erickson then told her to forget why she was feeling the pain (to be amnesic for the fact that she felt it because of his hypnotic suggestion, and because she was in a nonstop replay of her mother's spanking). He told her to just feel it, feel that agony of stinging on her buttocks.

She did that.

My class was mostly lay persons seeking hypnotherapy training. It was not doctors, dentists, graduate psychologists, and social workers like the Ericksonians. I never saw the end of the film because the women in my class were becoming more and more upset. "This is sick," Marykate said. "If you show any more of this, I'm going to leave," Ronnilee agreed. Several more echoed her threat to walk out if Tebbetts did not stop the film, for they could see no therapeutic purpose for that pain hallucination. Neither could I. It was stage hypnosis, titillating entertainment for a theater audience—not a therapy demonstration.

Tebbetts grinned, as if he had expected that reaction to the film. He stopped the tape. He clearly thought little of Erickson.

Why did Erickson's live audience not react like my classmates? Did they hold him in such awe (rapport?) that criticism—even revolt—was not imaginable? Or did his predominantly male and totally professional audience share his arrogance toward, and emotional distancing from, that woman? Would they be as arrogant toward, and emotionally distanced from, any subject (client or patient)? Were they utterly desensitized to subjugation by hypnosis?



Ericksonian Technology Applicable to Criminal Hypnosis

In a 1960 letter to Dr. Orne, Erickson declared “that complications are essentially nonexistent, because ‘the unconscious mind will protect the individual from accepting suggestions detrimental to his adjustment.’ ” (Orne, “*Undesirable Effects of Hypnosis*,” p. 233) (If only that were true.) Dr. Paul Young’s list of techniques which would facilitate exploitative hypnosis included several methods reported by Erickson:

- *...regressing the subject to an age when he was...susceptible to immoral urges...*
- *...appealing to motives latent in the normal state but easily aroused in hypnosis—motives of love, compliance, and desire for omnipotence.*
- *...so distorting the subject’s perception of external reality, including personal relationships by hallucinations, that acting on such motives is in line with the hypnotist’s nefarious purposes.*
- *...implanting complexes which are in line with personal vanity...lust...or desire for submission. (Young, in LeCron, ed., *Experimental Hypnosis*, pp. 392-3)*

Here is my list: four specific technologies that have mind-control applications which M. H. Erickson helped to develop.

1) Ericksonian Disorientation—Erickson first described the disorientation technique when reporting his experiments on hypnotic causation of color blindness and deafness. In “Hypnotic Treatment of a Case of Acute Hysterical Depression,” Erickson and Kubie’s disguised induction (since known as the “chaperone” method) of an unwilling subject was followed by a disorientation “for time and place...”

2) Sensory Distortion—Erickson did basic research on experimental distortions of seeing and hearing (relevant to any conditioning to hear the hypnotist speaking backwards, or “too softly to understand” and thus incomprehensibly to the subject’s conscious mind). He tackled hearing first. He reported his experiments in “A Study of Clinical and Experimental Findings on Hypnotic Deafness: (1) Clinical Experimentation and Findings,” and “(2) Experimental Findings with a Conditioned Response Technique.”

He started with a hundred trained subjects, then culled them to thirty capable of “the profound somnambulistic state...considered necessary for reliable experimental results.” (p. 127) He wanted “a deep trance, characterized by catalepsy, automatism, hypersuggestibility and profound amnesia” (p. 128) because “the experimental work contemplated necessitated the overthrow and negation of ingrained patterns of normal response and behavior...” (Ibid.) He pointed out the necessity of “eliminating sources of error arising from faulty, incomplete or superficial trances.” (Ibid.) He selected the most susceptible subjects from those thirty.

He gave each of those subjects two hours more of “...systematic suggestion...before he was considered to have reached a sufficiently stuporous state, which resembled closely a profound catatonic stupor.” (Ibid.) He spent an hour, or more, teaching the subject waking hypnosis—“teaching of the subjects to become somnambulistic without lessening the degree of their hypnosis.” (Ibid.) Erickson considered the long time he spent on induction and training essential to his success:

The prolonged systematic development of the stuporous and somnambulistic trance states as contrasted to the usual rapid, and, in the experimenter’s judgment, more superficial induction of such states, probably contributed greatly to the final results. That such a technique served to establish a massive generalized state of ‘inhibition,’ rendering the subjects incapable of spontaneous responses and restricting them to limited responsive behavior, is possible... (p. 146)

Erickson would not describe his “special technique of suggestion” whose purpose was “a complete inhibition of all spontaneous activity while giving entire freedom for all responsive activity.” (p. 129) A logical guess would be narcohypnosis. However, he declared that he caused total automatism, no free will. He repeated that process of two hours induction plus one hour of training “over and over again...” The “instructions were given slowly, emphatically and impressively, and were repeated many times to insure full comprehension and acceptance.” (p. 130) The subjects were being trained to behave with the greatest degree of automaticity possible, to become human robots.

3) Amnesia—The capstone of this unconscious structure Erickson was building in his subjects was “...a state of amnesia for all commands and instructions, the amnesia to be present continuously for all future trance, posthypnotic and waking states.” (p. 129) Amnesia kept the subject consciously ignorant of all past, present, and future hypnotic events and programming. Using merely verbal (not narcohypnotic) technique and in merely one week (rather than six), Erickson was still able to achieve four cases of suggested partial deafness and six of complete

deafness.

The reactions of his subjects to their mysterious (because of the amnesia) deafness varied from curiosity to shock: "...a number of subjects displayed marked panic reactions, showing marked fright..." (p. 142)

The second article in his suggested deafness series was about amnesia. Erickson's major point in that article was that extreme sensory distortion (persuading subjects to be stone deaf) can be achieved by hypnotic command in a susceptible subject provided that complete amnesia is induced first. He said that a subject, in whom amnesia is not complete, will resist extreme, long-term sensory distortion. (And for good reason.)

Erickson then shifted from experiments which suggested deafness to a series which suggested colorblindness. (Erickson was born colorblind; he could recognize only the color purple.) He made the hypnotic subjects unable to see certain colors by a four-step process:

- 1) "Slow, gradual induction of a profound somnambulistic trance."
- 2) *Deepening of trance to absolute greatest possible depth.*
- 3) *Suggestion of extreme deprivation (complete blindness), followed by conditional restoration of the privilege (colorblindness). Erickson explained that he first suggested total blindness to deliberately cause emotional distress "...to permit the spontaneous development of affective distress and anxiety over the subjective visual loss..." This he followed by "'restoring' vision in part, yet leaving a 'limited' blindness, which would preclude the seeing of a certain color or colors."*
- 4) "The induction of a profound amnesia, to ensue at once and to persist indefinitely...there were given vague general instructions serving to effect an inclusion in the amnesia of all connotations and associations..." ("The Induction of Color Blindness by a Technique of Hypnotic Suggestion," pp. 62-63)

After the experiment, subjects had

...muscular stiffness, intense fatigue, and throbbing headaches. These reactions are suggestive of profound neurophysiological responses to the hypnotic suggestions. (Ibid., p. 69)

pathology of Everyday Life," Erickson made clear the necessity of 1) hypnotic depth, 2) repetition of the suggestion, and 3) total amnesia to get acceptance of suggestions obviously against the subjects' will and self interest. In "Hypnosis in Medicine" he stated (which modern psychology textbooks heatedly deny) that "usually after a deep trance the subject has a more or less complete amnesia for all trance events" (p. 644). His 1974 article, with Rossi, Erickson described various amnesic phenomena in hypnosis and ways to produce them. In "Deep Hypnosis and Its Induction" Erickson reported unfamiliarly deep stages of somnambulism. He warned that such depths could be dangerous for the subject.

4) Artificial Neurosis—In "Experimental Demonstrations of the Psychopathology of Everyday Life," Erickson described the "implantation of a complex."

During hypnosis the subject was instructed to recall...certain [suggested and imaginary] things that the subject had done which he regretted intensely and which constituted a source of much shame to him... (p. 350)

Erickson on Regression

The master did provide some good news for future victims of suggested amnesia and abuse under hypnosis:

Traumatic, painful, forgotten experiences and memories that often constitute a point of origin in serious personality disturbances are frequently readily accessible under hypnosis, can be easily recalled by the patient and...hypnosis can enable subjects to recover memories of lost experiences in phenomenal and minute detail ordinarily not possible. ("Hypnosis in Medicine," pp. 644-645)

In "Experimental Demonstrations of the Psycho-



T. X. BARBER

*...it was the non-professional, the occultist, the dabbler in magical and religious ritual, who kept knowledge alive during the hiatuses of professional progress. To the soothsayers of old and the magicians of late, we may owe a greater debt than we realize. In fact, some of the more prominent individuals in hypnosis during the present century learned many of their early techniques from the stage magicians and the self-professed witches of their times.*¹

-William Edmonston, Jr. *The Induction of Hypnosis*

T.X. (Theodore Xenophon) Barber started out as a stage hypnotist, then moved into academics. After receiving his Ph.D., Barber became director of psychological research at Massachusetts' Medfield

State Hospital. There, he began a lifelong career in hypnosis disinformation. In his book on hypnosis for lay readers and beginning hypnotists, Barber supplied induction routines:

Keep your eyes on the little light and listen carefully to what I say... ...Your eyes are closing, closing. Close your eyes...You will not wake up until I tell



1. William Edmonston, Jr. was probably offering Barber (and McGill?) a veiled tribute when he wrote those words.

you to. Remember that the dangers of hypnosis are a myth. (Hypnosis, pp. 251-2)

If a subject accepted Barber's suggestion not to wake up until the hypnotist said, one danger of hypnosis was already operational. A major escape route was closed off.

Medfield Money

Barber's theoretical declarations on hypnosis were the radical position in the spectrum of professional opinions on hypnosis when he first began making them. Barber claimed that hypnosis is entirely self-deception on the part of the subject. He said the subject deceives the hypnotist by acting hypnotized. Barber insisted there was no such thing as hypnosis. He always wrote the word in quotes—"hypnosis"—lest somebody imagine the condition was real. Of the cases of "Z", "Mrs. E", and Palle, Barber smirked:

If 'hypnosis' played a role in these cases, this role may have consisted...in providing the subject with a rationale for justifying behavior to himself and to others. (Barber, "Antisocial and Criminal Acts Induced by 'Hypnosis,' 1961, p. 311.)

With that specious and hypocritical old dogma of moral integrity, Barber shouted down opposition from honest experimenters by his sheer volume of publications. He (and his staff?) produced more than forty-seven articles, and one book. When I counted entries in a very complete bibliography of articles on hypnosis, Barber had more than any other author. Psychology textbooks now quote him as an "authority on hypnosis" (Coon, p. 152).

In forewords to his early works, Barber thanked CIA and Navy-funded hypnotists for favors given. His later research and publications were for years funded, at least in part, by a "Medfield Foundation." Did whoever funneled all that money into the Medfield Foundation want to displace the old public concept of hypnosis as a powerful tool that carries an element of risk? Did they want to replace that more accurate view with Barber's image of hypnosis as harmless charlatanry and a subject's self-deceit? Was the change funded because the creation and management of unknowing hypnotic subjects had become an important part of military and intelligence agency operations?

Whatever the funders' intentions were, their money did accomplish those ends. The Barber propaganda maximized public trust (and thus hypnotic susceptibility). It undermined the credibility of anybody who might, in the future, attempt to report, resist, or merely discuss the possibility of hypnotic exploitation.

Barber was a brilliant man who did some interesting experiments. If one bothers to pick the grain from the

chaff, some of his points are worth keeping in mind: how faint is the line between "hypnotic" and regular behavior; how very much the laws of suggestibility operate in nonhypnotic situations; and the **placebo** principle that if you believe something will help you, it probably will. Barber demonstrated that people are, naturally, in and out of various states of consciousness, and naturally operate with varying degrees of suggestibility in their daily lives. He showed that they do not need a formal "hypnotic" induction to accomplish what comes naturally. It is true that a trained hypnotic subject can mimic a waking state, even for the EEG. It is also accurate that hypnosis can conveniently be summarized as a condition of heightened suggestibility. The mental state of hypnosis does involve an unconscious cooperation with the hypnotist. Barber's statement that it is hard to know the state of consciousness a person is in just by looking at them is correct. (But trained and experienced persons are much better at it than untrained ones, and another hypnotized person is the best of all.) It is right that a hypnotized person tends to act the way he expects a hypnotized person to act. It is a fact that the **expectations** of the subject tend to shape the way both the subject and the hypnotist behave. And vice versa.

Barberisms

Barber's main weapons, in the disinformation area, were endless verbiage and confusing nitpicking of statements by persons who disagreed with him. The writing itself is inductive. Soon you are so confused and/or bored, that you either suspend analysis and completely buy into the weird stuff, or you throw the book away (the wiser choice).

For example, Barber claimed to have proved that there is no difference between being hypnotized and not being hypnotized; that a person in a regular state of consciousness will hallucinate as readily as a hypnotized person; that hallucinating subjects are only pretending; that hypnotic regression is not real; that a hypnotized person is only role playing, only pretending to be what he thinks a hypnotized person is supposed to be; that words like "trance" or "somnambulism" should not be used (even as concepts) because they make people believe in the existence of something which is different from normal consciousness, that Rowland and Young's snake experiments only proved that the subjects obeyed in the same way as Milgram's subjects (who were not hypnotized).

If you believe all the above, you are suggestible and confused already!

What were Barber's most deceptive misinterpretations, misstatements, and myths?

■ *He made a big deal of the fact that control*



subjects in an experiment, if asked to pretend to be hypnotized, may also become hypnotized. (But one of the standard induction methods is some variation on the theme of “pretend you’re hypnotized.” If you pretend to be hypnotized, and are naturally susceptible, you soon will be.)

- *He demonstrated, over and over, that hypnotic induction can be caused by suggestions and influenced by suggestions. He said that proved hypnosis was merely a matter of thought, and therefore it did not really exist. (But every thought is a physiological event in the brain. Certain thoughts, and patterns of thoughts, can impact brain physiology in ways that affect its level of consciousness, which is also a physiological event.)*
- *He made much of the fact that induction suggestions do not have to have the word “sleep” in them. He took that fact as evidence that the hypnotic subjects were not really “hypnotized” but only pretending to be hypnotized. (Actually, the experiments had proved that trance/hypnosis induction can go by any name, and can happen in any setting—with or without the word “sleep.”)*
- *He claimed that there is no physiological evidence that hypnosis exists, and, therefore, it does not exist. That is flagrantly untrue. (See Parts II and IV.)*
- *He claimed that hypnotic susceptibility was*

only an appearance caused by a hypnotist’s skill, or by the hypnotic suggestions, rather than anything innate in the subject. (Also false. Susceptibility is a characteristic affected both by genetic happenstance and by training.)

- *He said that stage hypnosis is only pretending. It sometimes is, but usually it is real. Dr. Van Pelt, an Englishman, included a chapter on “Some Dangers of Stage or Amateur Hypnotism” in his 1948 book:*

*Unfortunately, it is not only those who volunteer to go on the stage who can be affected. Even members of the audience watching exhibitions of stage or amateur hypnotism can be influenced, for it should be remembered that approximately 25 per cent of people are highly suggestible and are capable of going into a deep trance. (Van Pelt, **Secrets of Hypnotism**, p. 63)*

- *Barber claimed that trance is not real. To explain trance phenomena, he claimed that all hypnotic subjects are just pretending to be hypnotized. (The phenomena of hypnosis cannot be entirely explained, however, by **demand characteristics**: operator instructions, subject expectations, wishing to please the hypnotist, and role playing.)*

THE SKEPTICS: SARBIN AND SPANOS

In most instances the subject appears to act like an automaton. There is an apparent absence of volitional activity. The experimenter throws out commands which seem to be accepted by the subject without critical consideration. He is often slow, stuporous, and seems to be exerting a great deal of effort to perform simple acts. Retrospective accounts reveal a distinction between obedience as found in everyday behavior and the automatic acceptance of commands without the subjective experience of intent.

Sarbin quoted in C. Scott Moss, *Hypnosis in Perspective*, p. 149

“The Skeptics”

Barber developed a following of other academics, sometimes coauthors of his copious output, sometimes disciples—a cheering section of imitators who called themselves “the skeptics.” The skeptics induced the same hypnotic phenomena that other hypnotists did. They rejected any physiological basis for those phenomena.

Like the Salpetriere group of the 1880s, the skeptics believed that anything immoral which happened as a result of trance took place because the hypnotic subject secretly wanted it to. Nothing could be the hypnotist’s fault. Barber and the skeptics took this even beyond Charcot and his associates. This Medfield group denied that the hypnotist was responsible even for the hypnotic phenomena, subtly viewing the hypnotist as the dupe of the subject, rather than vice versa.

Sarbin

Theodore Sarbin started out a behaviorist: words create images that push buttons in people’s brains and get results. That is the career stage at which he wrote the above, forgotten, quote. Sarbin later competed with T.X. Barber to

redefine hypnosis into its current innocuous public image. Barber won, but Sarbin was a close second with his **role-playing** entry. Sarbin’s “theory” that hypnosis is only the subject pretending, role-playing, is now mentioned in most psychology texts.

There is, in fact, some truth to his view. People are so suggestible, and they do tend to behave in trance as they see other people behaving, and also according to their prior expectations and presuggestions. Like Barber, Sarbin rejected brain physiology as a factor in hypnosis. As with Barber, that flawed premise makes his final assumptions unsound. For example, Sarbin did not integrate EEG data relating to levels of consciousness with his role-playing observations. Therefore, he claimed that trance depth is simply the degree of “submergence of the self in the role.”

Spanos

N. P. Spanos also continued the Barber myth that hypnosis has no physiology and no unique state of consciousness. Like Barber and Sarbin, Spanos contributed to the understanding of the normal power of expectation in human life.

The Not-So-Skeptical Inquirer

I was astonished to discover that *The Skeptical Inquirer*, published by the “Committee for the Scientific Investigation of Claims of the Paranormal,” also pushes the idea that hypnotism does not exist. Despite all the high IQ names in their directorate, including that giant intellect, Isaac Asimov, they, like the Psych 101 textbooks, regard hypnotism as a harmless intellectual toy, if not outright charlatany. In their review of a 1989 collection of hypnosis articles, edited by Spanos and Chaves, T. X. Barber was cited as the final authority. Enough said.



Martin T. Orne

[For interrogation purposes] *hypnosis must either be induced against the subject's will or without his awareness.*

- Orne, "Potential Uses of Hypnosis in Interrogation," p. 173

After receiving his M.D. and Ph.D. from Harvard, Martin Orne became an Associate in Psychiatry at Harvard Medical School. He directed the Studies in Hypnosis project from 1958 to 1964. Among his many research projects was one on how soldiers could be taught to do self-hypnosis "in order to do certain military tasks" and how they could pretend to be hypnotized well enough to fool an enemy interrogator.

He provided an article on "The Potential Uses of Hypnosis in Interrogation" for Biderman and Zimmer's 1961 book, *The Manipulation of Human Behavior*. (On p. ix, Biderman and Zimmer said Orne had been doing work "supported by the Society for the Investigation of Human Ecology, Inc," a CIA funds conduit.) In that article, Orne noted the possibilities "for the subject's perception of reality to be distorted in accordance with the hypnotist's cues" (p. 170), for spontaneous amnesia, and for "some compulsion to comply with the hypnotist's requests, along with a striking disinclination even to wish resisting them" (p. 171). On the subject of disguised induction, he said

There are three situations in which hypnosis has been reported to have been induced without the subject's awareness...while the subject is asleep...when the subject is seeking psychiatric help and hypnosis is induced in the course of a clinical interview with no explicit mention of the process...[and] a trance spontaneously entered by individuals who are observing trance induction in another subject. (p. 174)

He mentioned induction by means of repetition, hardware, and so on:

...rotating spirals, mirrors, and swinging pendulums...the subject's own breathing... prolonged stimulation by rhythmic drums... monotonous rhythmic verbal suggestions... (p. 175)

He also mentioned a more sophisticated induction machine, and the neurophysiological basis of trance.

Orne on "Antisocial" Hypnosis

Orne's 1962 article, "Antisocial Behavior and Hypnosis," was supported by the Air Force Office of Scientific Research. In it, he surveyed the history of arguments over unethical hypnosis. He summed up the most extreme pro-hypnotist position (the "dogma of moral integrity"):

Gilles de la Tourette (1887) made the well-known statement that a subject in deep hypnosis will not perform any action which goes against his basic moral sentiments. Dynamic psychology changed the phraseology to read that a hypnotized individual will do nothing counter to his unconscious wishes. However, neither phrasing of the position is testable because the subject's so-called "criminal tendencies" or "unconscious wishes" are specified after the fact. That is, if a subject does not perform the suggested antisocial act, his refusal is taken as evidence for the generic view, whereas if the subject complies, his acceptance of the suggestion is seen as evidence for his criminal tendencies or his basic desires. (pp. 139-140)

He also summarized the view at the other extreme:

...a subject must carry out whatever suggestion is given to him by the hypnotist, and a subject's refusal merely proves that he was not hypnotized deeply enough. Phrased in this manner, this position is equally untestable. Any empirical data which indicate that the subject will carry out antisocial or self-destructive behavior are accepted as proof, while any data to the contrary are by definition dismissed. (p. 140)

Without considering whether truth might lie in the middle, between those two extremes, Orne concluded that reviewing the existing literature did not solve the question.

Guidelines for Investigative Hypnosis

In the years after he published his own “Antisocial...” article, Orne became a dominant influence on U.S. forensic hypnosis. His public statements, in general, act to undermine the claim of any person reporting unethical hypnosis, and strengthen the legal untouchability of hypnotizers.

...the antisocial aspect of this question cannot be addressed experimentally...no evidence is available to indicate that hypnosis increases the behavioral control of the hypnotist over that already present prior to its induction. Certainly, the popular view which holds that hypnosis is able to exert a unique form of control over the hypnotized individual, which can compel him to carry out otherwise repugnant actions, must be rejected. (Orne, 1972, p. 101)

Orne’s myths concerning the inability of hypnosis to cause anything unpleasant or undesirable are now quoted in psychology texts and by other “experts.” In 1978, he wrote a brief for the U.S. Supreme Court in which he stated that any hypnosis of a witness before a trial should follow set guidelines. (Orne, 1979) He argued that it is inadvisable to hypnotize defendants who have a great deal at stake. (He would, I suppose, have advised Dr. Reiter not to hypnotize Palle Hardwick.)

Orne’s guidelines for investigative hypnosis are quoted both in Udolf and in Lawrence and Perry (pp. 279-385). The latter laud Orne’s guidelines as

...the most comprehensive attempt to balance the needs of an investigative agency, the rights of a potential defendant, and the psychological welfare of a victim of crime who has become a candidate for pretrial hypnosis. (Ibid., p. 357)

Orne’s guidelines, however, are for the hypnotizing of a witness to a crime. The existence of a victim of hypnosis itself is not included in the guidelines, because it supposedly is not possible. Orne’s guidelines are said to guard particularly against the possibility of witness confabulation. The method of preventing confabulation is not Reiter’s system of “you’ll choke on it if you tell a lie.” Instead, filming every moment of interaction between a hypnotist and subject is considered a good safeguard. Then people later can argue over “the degree to which inadvertent cueing [leading questions]...may have occurred” (Ibid., p. 357) rather than preventing confabulation.

The guidelines cover qualifications of the hypnotist (“qualified mental health professional” with training both in hypnosis and forensics), insistence on complete videotape recordings of all contact between hypnotist and subject (both persons in the picture), limitations on those present (only hypnotist and subject allowed!), and prehypnosis evaluation (a “detailed narrative description of the facts as the subject remembers them”).

Orne also specified “appropriate hypnotic induction and memory retrieval techniques”: induction by “one of the standard methods” (this rule makes it harder for a survivor of unethical hypnosis who is sealed against any “standard” induction); no direct questioning (direct questioning may help drag out facts over hypnotic inhibitions and could also reveal significant blocking pauses and agitation caused by approaching forbidden data); constant filming (technically difficult when only two people are present); and a prior mental examination of the subject (symptoms of mental illness can be suggested under hypnosis).

Orne, along with Loftus and Laurence, has contributed mightily to modern legal prejudices against, what Lawrence disparagingly terms as, “common sense knowledge” about the possibility of criminal hypnosis. Orne and others (1984) reported that hypnotization of witnesses either did not improve their recall, or actually contaminated their memories with unconsciously adopted hints from the investigator/hypnotist.

Orne also stresses that hypnosis should only be used to generate leads which can then be pursued to see if they can be fully and independently verified (Orne, 1979). That is good advice in a case where confabulation is a possibility—and confabulation is always a possibility. But the “only” is a problem. In a case of criminal hypnosis, which is also a possibility, independent verification of leads can support the general picture which emerges under rehypnotization.

As a final evaluation of Orne, compare the facts of the cases of Z, Mrs. E., and Palle with his pronouncements on them. He called Dr. Kroener’s report of Z’s case “the most convincing of the three reported in the criminal literature” (1962, p. 175). He was particularly impressed by the arm-shooting:

This single incident is far more impressive than the fact that he was willing to perform acts which are legally antisocial but which are frequently considered to be relatively innocuous...The Kroener case...seems to provide strong supportive evidence that, in some instances at least, social control can be sufficiently increased in hyp-



nosis to cause the subject to commit self-destructive behavior which he could not have been persuaded to undertake without the use of hypnosis.” (Ibid.)

After admitting that much, however, Orne evaded the logical conclusion that criminal hypnosis can exist: “Unfortunately, because of the problems in establishing the true nature of the events, no definitive position can be taken.” (Ibid., p. 176)

Of Mrs. E.’s case, he said:

...a quasi-therapeutic relationship existed between the subject and the hypnotist, and thus it is not too surprising that the subject was willing to pay the hypnotist...it certainly is not too unusual a crime for a woman and her lover to plot the demise of the husband. There are only the woman’s statements that attempts on her husband’s life resulted from posthypnotic suggestions. No proof exists that such suggestions were ever made. (p. 172)

He granted that Palle’s case was

...thoroughly studied by Reiter...This case satisfies the criterion of serious antisocial behavior to the

benefit of the hypnotist; however, a long history of extremely close personal association preceded this occurrence. (Ibid.)

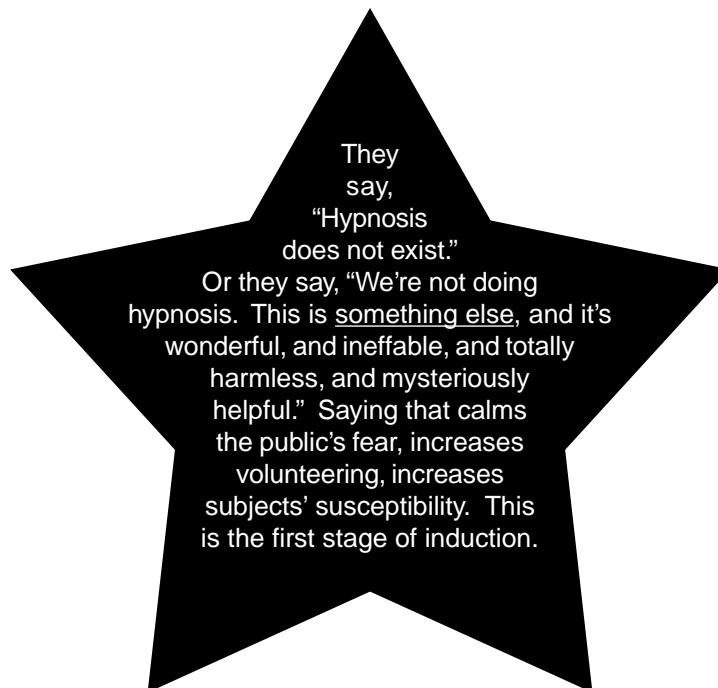
Orne stated that the real reason Palle Hardwick robbed and murdered was a “mutual psychosis” between Palle and Nielsen with

...strong homosexual overtones...While hypnosis played some role in this case, it is by no means clear whether it accounted for the behavior of the subject or was, in fact, quite incidental to it. (Ibid.)

No proof would be good enough for Dr. Orne. He would always try to deny its validity. The bottom line is: he does not accept that a hypnotist can be culpable. And he does not promote any procedure which might support the effort of a victim of criminal hypnosis to get free and to obtain justice.

Musings

Behaviorist philosopher, Perry London, said that information control is the basis of mind control, individual or group. When the phony research of Erickson, the false conclusions of Barber and the “skeptics,” and the skewed judicial concepts of Orne are taught and cited, public information, and therefore public opinion, has been controlled.



Criminal Hypnosis Is Possible: Wells and Brenman, Salter and Bowers, and Young



Wells and Brenman



Salter and
Bowers



Young

...the whole point as to the essential nature of hypnosis is missed unless the fact is recognized that even so extreme a phenomenon as real crime against the will of the fully forewarned subject can be produced by means of it.

Wells, "Experiments in the Hypnotic Production of Crime," pp. 100-101

Wells and Brenman

R. W. Wells

During and after World War II, Dr. Raymond Wesley Wells researched hypnotic automatism at Syracuse University. He established that the posthypnotic induction cue was a critical element in exploitation. He pioneered the technique of waking hypnosis. One of his hypnotic subjects was "a young man of strong convictions, not suggestible

in everyday life, not credulous or gullible." By hypnotic suggestions, Wells made that young man believe himself to be a poor hypnotic subject, although Wells had actually developed him into a very susceptible one. The subject, being amnesic for his training sessions, also believed that he had not been worked on individually by Wells. (*Ibid.*, p. 83)



Wells was a specialist on criminal hypnosis. He provided a list of safety measures for persons planning to be hypnotized:

- Ö Do not submit except for a serious purpose.
- Ö Choose a “competent and honorable” hypnotist.
- Ö Have a “reliable [and non-hypnotizable!] third person...present as a witness at every occasion of hypnotizing.

Wells gave all his subjects a suggestion that nobody could hypnotize them without their prior written permission given in a fully conscious and responsible state.¹

Margaret Brenman

Brenman began researching “antisocial” hypnosis as a student assistant to Wells during World War II. Her first article described experiments on six female hypnotic subjects:

When brought out of the trance state, you will have complete amnesia not only for today’s hypnotic work but for ever having been an individual [hypnotic] subject; although you will remember having taken part in the group-experiment in class, you will recall falsely having been in the poorest quartile...and will good-naturedly accept as banter any suggestion on the part of your classmates that you are a good hypnotic subject. (Brenman, 1942, pp. 50-51)

The subjects carried out all Brenman’s hypnotic instructions, exactly as given.

Brenman agreed with Erickson that complete amnesia was a key to obtaining results that would not normally be possible. In one experiment, she suggested to a hypnotized girl the hallucination of being home alone in bed. She suggested that the subject was “alone in bed” and having the fantasy which she normally had at bedtime.

The subject then described to Brenman a fantasy that focused on a certain young man and involved both desire and guilt feelings. Brenman suggested posthypnotic amnesia to the subject, woke the girl from her hypnotic trance, and asked about her sex life. The girl refused to give any information of the type she had just revealed under hypnosis. (Brenman said this experiment had proved the value of hypnosis in interrogation.)

In another experiment, Brenman induced a series of girls, by hypnotic suggestion, to take a dollar bill imagining it was their own, thus “stealing” it. Three days after the first part of the experiment in which the girls were caused to “steal,” Brenman proceeded with the second half of the experiment. She expected each subject, after learning the truth, to feel guilt and repay her the dollar. The first two, Misses A and B, when told they had been caused to steal a dollar by means of hypnosis, behaved as Brenman had expected. Each acted guilty and gave the experimenter a dollar in repayment, although they had already spent the dollar which they had been hypnotically induced to think was their own. But Miss C, my favorite, reacted differently.

BRENNAN: Were you ever worked on individually in hypnosis?

MISS C: No, it didn’t work at all well...I was in the lowest quartile.

BRENNAN: Do you know whether it’s possible to get people to perform criminal acts in hypnosis?

MISS C: It might work with some but not with me.

BRENNAN: Even a minor crime?

MISS C: I hardly think so.

BRENNAN: Have you ever known me to lie to you?

MISS C: Never. [Her unconscious could have supplemented, “except when I was hypnotized.”]

BRENNAN: Well, I’m telling you that you did steal a dollar while in a hypnotic state several days ago.

MISS C (laughing spontaneously): But how absurd; I’m not even hypnotizable.

BRENNAN: Would you think it possible to produce an amnesia for a crime committed in a hypnotic state?

MISS C: Theoretically, yes.

BRENNAN: Then perhaps you can believe me.

MISS C: If this is true, I will not accept any responsibility for it. (Ibid.)

1. Then he broke his own rule for the purpose of experimentation, attempting to induct persons who were resisting. He overcame the resistance of all except a Methodist minister.

Brenman then told Miss C to try as hard as she could not to be hypnotized. C made clear that she certainly would do that. Brenman gave C the induction cue, and "...despite this exercise of 'will power' she went into a good trance immediately." (*Ibid.*, p. 53) Brenman gave, the now hypnotized, Miss C suggestions that removed her amnesia. Then she knew the truth of all that had happened. However, Miss C still refused moral responsibility for what had happened. She would not give Brenman and Wells back the dollar. Instead, C went off gaily on her school holiday.



That really upset Wells. He and Brenman had defined the experiment that, if the subject felt guilty and repaid afterwards, it proved the subject really was a moral person. Wells and Brenman, therefore, were of the opinion that Misses A and B had proved false the old dogma that a moral person cannot be made to do an immoral thing by means of hypnosis. But Miss C had refused to feel guilt and had not repaid the dollar. Wells later solved the dilemma by writing that he had discovered that C actually was a person of low character and immoral attitudes, with no conscience in financial matters—unsuitable for the experiment.

God forbid you should either cost the hypnotist a buck or skew the anticipated experimental results. I am on Miss C's side. Brenman succeeded in making her think she was not hypnotizable when she was, gave her amnesia for a segment of her life, and manipulated her like a human pup-

pet. Miss C was set up, lied to under hypnosis, conditioned for future involuntary induction, deceived into taking the dollar, and allowed to keep it long enough to spend it. Then, they wanted her to behave ethically? She was ethical. Her sense of justice came into action. Subjects A and B were utterly duped. They not only accepted all the hypnotic suggestions, they also accepted an additional implied suggestion, in waking state, that they should feel guilty and repay. Miss C was made of tougher stuff.

After Margaret Brenman earned her Ph.D. at Syracuse, she did similar research at the Menninger Clinic. She married another experimental hypnotist, named Merton M. Gill. Brenman and Gill made a career of joint research in experimental hypnosis, with an emphasis in psychoanalytic hypnosis. Their most interesting publication was one of the very few surveys that have ever studied the psychology of the hypnotist rather than that of the subject!



....the process of inducing hypnosis touches off important and intense feeling in the hypnotist as well as in the subject...most of our responding hypnotists recognize in themselves an important need, however well or poorly disguised, to control other human beings....One of our respondents, a particularly honest and self-searching psychoanalyst, says: "I gave up hypnosis as a regular procedure...because I am aware of the fact that...my decision to hypnotize a man was motivated ultimately...by some almost sadistic impulse to dominate him and with the female, the comparable situation manifested itself in the form of an erotic impulse."

*Another...who stresses as one of the infantile components of the wish to hypnotize the need for a magical omnipotence, adds rather wryly: "...such motives undoubtedly play an important role in the initial decision to become a physician at all, and certainly in the specialty choice of psychiatry. The only trouble is that with the use of hypnosis this all becomes so naked." (Brenman and Gill, *Hypnosis and Related States*, pp. 91-98)*



Salter and Bowers

When the bell rings the appropriately trained dog salivates. He cannot help it.

Salter, *What Is Hypnosis?*, pp. 24-25

Salter

Andrew Salter was a prominent researcher who applied the **theory of conditioned reflexes** to hypnosis, developed the desensitization technique, and fought T.X. Barber's nonsense theories. Salter, the father of hypnotic conditioning theory, argued against Barber's theory of cognitive expectancy for years. Salter said that cognitive expectancy could not explain why posthypnotic suggestions for the distant future worked. Salter said, "We can do in the waking state almost anything that can be done in the hypnotic state—almost everything, but not quite. And that is all the difference."

Salter summed up his concept of hypnosis as a conditioned reflex phenomenon as follows:

Words, spoken by the therapist, travel along appropriate nerve tracts in the person under treatment, and produce chemical modifications in his nervous system. These changes are associated with behavior changes...We are not especially concerned with giving the individual stratified knowledge of his past—called "probing." What concerns us is giving him reflex knowledge of his future—called "habits." (Salter, 1949, p. 316)

He compared a hypnotic subject to Pavlov's dog. The more effectively conditioned a person is, Salter declared, the less effective control he has over his own behavior. Human beings, however, can be far more complexly programmed than dogs, because humans respond with incredible specificity and sensitivity to words. Words stimulate conditioned responses in humans.

Salter once challenged Barber to select a random group of one-hundred males, 21 to 25 years old.

*I would pick three subjects from this group and subject them to a week's worth of hypnotic training in which they would be instructed to shoot Barber (much as in **The Manchurian Candidate**, a*

*book Condon has credited me with inspiring). I would then give Barber one week during which he could exhort these subjects as much as he wanted in a waking state. If, in thirty days thereafter, one of my subjects did not try to kill Barber, he could consider his theories of hypnosis verified. I would not be interested in doing this experiment without a waiver from Barber and from all of the appropriate legal jurisdictions. (Salter, *What Is Hypnosis*, pp. 94-5)*

Barber did not accept Salter's challenge.

Years later, I see that Salter is not cited in the textbooks. Barber is. Barber is preached, but Salter is practiced. Student therapists are now taught, "We don't know what it is, but it helps." They are taught just enough about hypnosis to do their job: narrow clinical applications involved in medicine or dentistry, psychiatry or hypnotherapy—or sales, stress management, pain management, advertising, etc. They learn what they have to know about hypnosis (or whatever else it is being called). Not a bit more. The people who know more have classified that information: SECRET, DON'T TELL.

Bowers

Kenneth S. Bowers, like Salter, specifically took on T. X. Barber. In *Hypnosis for the Seriously Curious* (1976), Bowers debunked Barber's oft cited "White Christmas" and "lap cat" experiment. Barber had got nonhypnotized people to claim they were hallucinating the hearing of "White Christmas" or hallucinating the sight of a cat in their lap. They did that because Barber's words ("This time I want you to really try") created a strong pressure to claim they did, even if they did not—or to drop into trance and really hallucinate the sound or sight.

Bowers repeated Barber's experiment exactly, except he added one line to the script. Bowers told each subject that she must tell the truth to prevent the entire experiment from being worthless. After hearing that, even

though the women were told to “really try” this time, far fewer claimed that they heard the music or saw the cat in their lap. (Bowers, “*The Effect of Demands for Honesty on Reports of Visual and Auditory Hallucinations*,” 1967)

Bowers took on another of Barber’s deceptive oversimplifications. A hypnotized person can be given suggestions to make him or her deaf. If then asked, “Can you hear me?” some subjects reply, “No, I can’t.” Barber said that proves they are faking it. Bowers said: No, that behavior is like that of the person given a **negative hallucination** that the chair is “gone.” If told to walk around the room, the

hypnotized person will avoid bumping into the chair. One part of the subject’s mind knows the chair is really there and avoids bumping into it. But the subject is not consciously aware of the existence and placement of the chair.

In 1989, Bowers argued that certain phenomena are unique to hypnosis, that hypnosis is a special state of consciousness, and that surgery under hypnotic anesthesia, strong hallucinations, and suggested cures of physical problems are strong evidence of its uniqueness.

Young

From a hurried review of the literature it appears that there are no theoretical obstacles to the possibility of antisocial uses of hypnosis. On the contrary, the cumulative effect of the reported results is so great as to convince one that antisocial actions are not more...difficult

to induce—than are many of the actions which have been carried out by subjects...In fact, if a skillful hypnotist should use such techniques as those just mentioned and should go all out to induce antisocial results, theoretically it is very likely he would succeed. Additional strong presumptive proof lies in the subject-hypnotist relationship of dominance submission which makes possible...the falsification of the subject’s internal and external world...

-Young, 1952, p. 398

Dr. Paul Campbell Young worked for the Veterans Administration during World War II, then was on the faculty of Louisiana State University’s Psychology Department. He was a pioneer researcher in experimental hypnosis. LeCron credits him with being first to use the **controlled experiment**.

In 1940, Young published a study on capacity regression. He gave IQ tests to hypnotized adults who had been regressed, by suggestion, to the age of three. His subjects’ test score averages came out closer to age six

than to age three. Those results caused him to doubt the validity of regression. Like Doctors Mayer and Reiter, Young also started out convinced that a hypnotic subject cannot be made to do anything against his conscious will.

Antisocial Uses of Hypnosis

Like Mayer and Reiter, Young later did an about-face on the issue. By 1952, Young listed capacity regression as real, and also as a potential element in a **conditioning** process leading to exploitative hypnosis.

I know what changed the minds of Mayer and Reiter on this issue: the cases of Mrs. E. and Palle. I do not know what caused Young’s dramatic reversal between 1941 and 1948. His 1952 article, “Antisocial Uses of Hypnosis,” is one of the most eloquent, detailed, forceful, and confident statements in print about the potential for misuse of hypnotism. Young bluntly insisted that hypnotism can be used unethically and abusively, and that a subject can be made to act against his conscious will. “The harm may be done to oneself or to others...An act is harmful or antisocial or dangerous if damage is done or danger is run.” (“*Antisocial Uses of Hypnosis*, p. 376)




Young's article was published in *Experimental Hypnosis*, an anthology edited by LeCron and sponsored by the military. He reviewed and critiqued previous relevant experiments and writings by other experimental hypnotists. He listed all the most important articles and books on the subject, up to 1948, in his bibliography. He wrote pages refuting M.H. Erickson's "antisocial" experiment. He disposed of Orne's argument, that a long-term relationship disproves unethical hypnosis. He crushed Barber and Sarbin's argument, that unethical hypnosis only exists because of the subject's supposed uncanny ability to perceive what the hypnotist wants, and the subject's eagerness to play that role.

Techniques of Criminal Hypnosis

Young listed eighteen hypnotic techniques that would facilitate "divergent applications" of hypnosis. He quoted published work of one, or more, prominent research hypnotists as his source for each method. He declared that he had listed "only a tithe of what could have been brought forward." Here follow the essentials of that list:

- 1) **Powerful and Primitive Unconscious**—Young quoted Fisher: "*Powerful and primitive unconscious forces...come to light in the hypnotic trance.*" The operator-controlled trance gives the hypnotist direct access to that potential of primitive, powerful primary process, **drive-related** potential in the unconscious.
- 2) **Omnipotence by Identification**—He quoted Schilder and Kauders: "*For the hypnotized...he [the hypnotist] is the great magician, who alone is capable, by his wish and will, to produce creative changes in the universe...*" (**Hypnosis**) The subject's unconscious is in awe of the operator's potential power over it. The "magic" is real (and potentially very evil) to the personal, interior mental universe of the conditioned hypnotic subject.
- 3) **Narcohypnotic Induction**—Young quoted Lindner, a psychiatrist who did narcohypnotic inductions, and conducted intensive conditioning under the drug-induced trance. Lindner called his process **hypnoanalysis**: "*Hypnoanalysis is equivalent to a surgical removal of barriers and hazards; it pierces the psychic substrate and raises the repressed to the level of awareness.*" (**Rebel Without a Cause**) That "surgical removal of barriers" can be used in hypnotherapy to cure people, or in rehypnosis to uncover criminal hypnosis. It can also be used to overcome resistance barriers in the process of implanting exploitative conditioning.
- 4) **Minimizing Outside Reality, Changes in**

Thought Mode—For this factor, Young quoted from a 1947 article by Brenman, Gill, and Hacker: "*A minimization of outside reality and...changes...in modes of thought...*" Hypnotic trance does minimize outside reality. It changes "modes of thought" in part by derailing the conscious (critical, evaluating) mind and displacing it with the hypnotist's will.

- 5) **Limiting of Subject's Internal Input**—Young quoted Leuba (1946) on the power of hypnosis to
 
limitation of the spontaneous mental life of subject and the consequent limitation of attention to the stimuli provided by the experimenter."

Young's point 4) was that hypnosis can eclipse the subject's outside reality. Point 5 was that hypnosis can be used to "limit" the subject's spontaneous mental world. It limits the mind to thinking what it is permitted to think. (In some cases, however, the subject's unconscious has rebelled and prevailed.)

In trance, the thinking is being done by a subsystem without input from the executive monitor (conscious mind). The subsystem can confuse imagination with reality, and the error will not be corrected because only the conscious mind can tell the difference.

- 6) **Suggested Hallucination**—Young cites M. H. Erickson's 1939 success in causing hypnotic subjects to hallucinate colorblindness—so real that subjects "*had the correct (hallucinated) afterimages.*"
- 7) **Suggested Unbearable Pain**—Young cited the research of Wells on the operator's ability to cause "*hallucinations of unbearable pain.*" Mrs. E. was, in part, manipulated by this technique.
- 8) **Identification of Hypnotist with Parent**—Young cited R. W. White's 1941 article, "An Analysis of Motivation in Hypnosis," on infantile motivations and unsatisfied needs as causes of hypnotic obedience: "*Love, passive compliance, and the wish to participate in omnipotence.*"

9) **Selective Amnesias**—Young cited M. H. Erickson research again (*"Hypnotic Techniques...," 1945*): *"Hypnosis offers an opportunity to control and direct thinking, to select or exclude memories and ideas..."*

10) **Focus and Dissociation**—Young cited M. H. Erickson, this time on the trance phenomenon of dissociation and focus on the operator: rapport:

...a condition in which the subject responds to the hypnotist and is...instructed by the hypnotist...a concentration of the subject's attention upon...the hypnotist and those things which the hypnotist wishes included in the situation, and it has the effect of dissociating the subject from other things. ("Hypnosis in Medicine")

11) **Artificially-Induced Complex**—Young cited Wolberg's description of a patient in whom an artificial complex had been implanted:

He complained of...dizziness, ...took two or three steps then fell backward remarking that he felt so faint that he could hardly walk. His face was blanched and when his pulse was taken it was found to be rapid and thready...cold perspiration...began to shiver...generalized muscular tremors...agitated, and complained of such great physical distress that I found it necessary to rehypnotize him and remove the conflict.

12) **Training for Automatism**—Young quoted Lindner's rule that hypnotic training should be continued until *"posthypnotic suggestions are carried through in a fashion that leaves no doubt of the mastery of the situation by the hypnotist."* (*Rebel With-*

out a Cause)

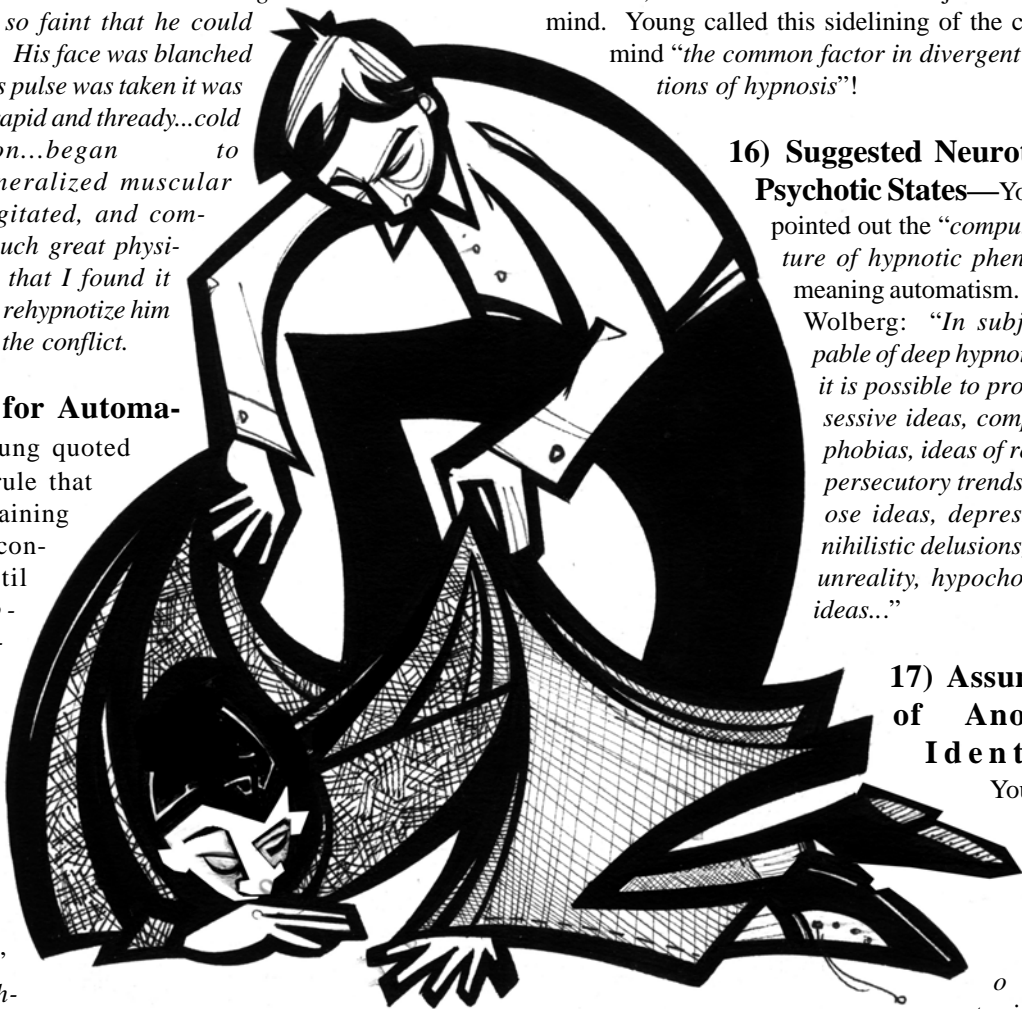
13) **Reorganization of Psychic Life**—Young also cited M.H. Erickson on the array of devices a hypnotist can use to influence a subject, *"reorganizing his psychic life."* Erickson had listed *"recovery of memories, development of amnesias, identifications and anesthetics, the causing of dreams, emotional conflicts, hallucinations, disorientations..."* Young also cited R. W. White (**"Preface..."**) on the profound changes possible in a person's personality (and therefore behavior) by means of hypnosis.

14) **Capacity Regression**—In a remarkable turnaround from his original research conclusion on capacity regressions, Young cited the research of M. H. Erickson, Lindner, Watkins, Wolberg, etc., on capacity regression. He concluded it can be real, and can be a significant potential factor in exploitative hypnosis.

15) **Sidelining the Conscious Mind**—Young cited Brenman and Knight on *"circumvention of the ego resistances,"* the inhibition of the subject's conscious mind. Young called this sidelining of the conscious mind *"the common factor in divergent applications of hypnosis"!*

16) **Suggested Neurotic and Psychotic States**—Young here pointed out the *"compulsory nature of hypnotic phenomena,"* meaning automatism. He cited Wolberg: *"In subjects capable of deep hypnotic states, it is possible to produce obsessive ideas, compulsions, phobias, ideas of reference, persecutory trends, grandiose ideas, depressive and nihilistic delusions, ideas of unreality, hypochondriacal ideas..."*

17) **Assumption of Another's Identity**—
Young cited M. H. Erickson's *"experiments on transidentification?"*





for this item. The hypnotic subject unconsciously incorporates wishes and attitudes of the hypnotist, like a child incorporates parental rules and views. Just as each adult has attitudes absorbed in childhood from their parents still influencing them, so each hypnotic subject acquires unconscious parameters and a role model from the hypnotist too. Kubie and Margolin described this implanting of a foreign superego, the mental parasitization of hypnoprogramming, and how the hypnotist's words become a part of the subject's mind:

...the hypnotist...becomes something which the subject carries around inside of him—a secret 'will,' or purpose—a 'still, small voice of conscience'—an unconscious component of the new personality which has emerged. In this phase, the thread by which the subject remains tied to the hypnotist becomes hidden. He is led by it, but he is not aware of it, and he scotomatizes [rationalizes] all experiences which might force it upon his attention...Yet just as it is never the actual parent but an image of the parent, so it is not the hypnotist, himself, but a complex image of the hypnotist which becomes part of the subject..the buried (in-

corporated) image of the hypnotist becomes an experimentally induced superego figure....with the result that to the subject the words of the hypnotist become indistinguishable from his own thoughts. (Kubie and Margolin, "The Process of Hypnotism and the Nature of the Hypnotic State")

18) Gradual Conditioning—Modern behaviorist researchers call it **shaping**. The hypnotic techniques are applied in “a progressive, mutually supporting pattern,” so that a subject gradually comes to accept suggestions which, if made earlier, certainly would have been rejected. Thus, “a complex is so elaborated into the subject's real experiences that it becomes an integral part of him.” Young cited himself for this one. (1952, pp. 391-2)

Conclusion

Young retorted to “those who think hypnosis powerful only for good” that, if it can be a powerful psychological tool for good, the logic is inescapable that “in skilled but unworthy hands...[it] might become an instrument of danger.” (Ibid., p. 407) He warned that hypnosis must be viewed (like all other technologies) as capable of use for either good or evil purposes.

For two hundred years, on both sides of the Atlantic, experimental hypnotists vied with each other to see what percentage of subjects could, by means of hypnosis, be induced to commit a crime. There is an even more important research question that has never been examined, and which begs for an answer. That question is: What percentage of hypnotists, believing themselves to be secure against any possible disagreeable consequences, would commit unethical hypnosis? Seduced onward by the lure of total power, in total secrecy, over another human being, how deep into moral abasement would a typical hypnotist go? Would certain government agencies also find the idea of total power, in total secrecy, alluring?

How to Identify a Victim of Unethical Hypnosis

1. Report from Relatives or Other Observers



2. Self Report



3. Revealing Induction Phenomena



4. Evidence from Projective Testing



5. Inhibition, Anxiety, or Somatic
Reaction to "H" Topic



6. Symptoms of Repression



7. Social Isolation



8. Memories: Absent, Inadequate, Or Too
Perfect



9. "Weakness" During, Fear of Control After



10. Dream Clues



The Manchurian Candidate: A Novel

No discussion of the social implications of hypnosis would be complete without a reference to the antisocial implications. A considerable amount of research has been done in this field and we feel that the dangers of hypnosis are, in certain situations, very real.

Wright, 1962, p. 233

Is someone you know a victim of unethical hypnosis? Have you seen a person in trance, or in the **posthypnotic trance** that occurs while carrying out a suggested posthypnotic act? If that person has been trained to do waking hypnosis, you may find it difficult to recognize his trance state—unless you know the observable characteristics of that state (listed under item 2). A deeply-hypnotized person can easily discern if another person is also in that state. An intuitive person may be able to sense somebody else's level of consciousness.

Usually, however, you will encounter the unknowing subject in his waking state. You will talk to his **cover personality** rather than to an unconscious isolate. But **repression** cannot make traumatic unconscious memories and associated emotions completely go away. The repressed material continues to play a part in the subject's unconscious mental life. When trauma is buried in the unconscious, it still exerts energy from that hiding place. A victim of abusive hypnosis experiences pressure from the unconscious to find safety and accomplish self-healing and release of inner stress by pushing out into the open some of that traumatic material.



Here is a list of known characteristics of other survivors of unethical hypnosis.¹ The more matches, the higher the probability that another situation of unethical hypnosis exists. A person who has suffered severe abuse in the amnesic hypnotic state will have more matches than an unknowing hypnotic subject who has been treated kindly while in trance.

1. The CIA targeted creation of a list of clues to identify an unknowing hypnoprogrammed person as one of their research goals back in the 1950s. They undoubtedly know much that would be of help to civilian police agencies and therapists struggling to resolve questions in this area. But the reason for their research was not to identify, free, and heal victims of predatory hypnotists. It was to identify hypnoprogrammed "enemy" agents in order to eliminate the problem, or to reprogram them to serve an additional master, the CIA.

1. Report from Relatives or Other Observers

It is very difficult to identify a hypnoprogrammed, mind-controlled person, if he does not consciously know that fact about himself. In some cases, however, the subject's parents, friends, spouse, or medical examiners have recognized and reported evidence of the hypnotic exploitation. Palle's father suspected Nielsen had "some kind of hold" over his son. Other prisoners, and his wife, observed and reported Nielsen's hypnotic control over Palle to the police. Unfortunately, they did not report that until after the murder/robbery. Psychiatrists who examined Palle noticed that the prisoner's unreasoned, mechanical repetitions, declaring that he alone had committed the crime, sounded like hypnoprogramming being produced on cue.

Mrs. E's husband figured out what was going on, identified his wife's problem as hypnotic predation by an unknown "doctor," and asked the police for help. John Nebel began to understand that his wife's trance-talking was revealing a history of criminal hypnosis, so he bought a tape recorder and began to tape those conversations. It was the victim's husband, in one of Kline's reported cases of sexual predation by means of hypnosis, who also tape recorded, and then ended, the abuse.

The Posthypnotic Trance

It would be especially helpful to recognize behavior carried out in a state of posthypnotic trance.

...the posthypnotic response consists of the spontaneous and invariable development, as an integral part of the performance of the suggested posthypnotic act, of a self-limited, usually brief, hypnotic trance...This trance is usually of brief duration, occurs in direct relation to the performance of the posthypnotic act, and apparently constitutes an essential part of the process of response to and execution of the posthypnotic command...[it] requires for its appearance neither suggestion nor instruction... [it] develops at the moment of initiation of the posthypnotic act, and persists usually for only a moment or two...(M. H. Erickson, "The Nature of Post-Hypnotic Behavior")

Posthypnotic Trance Proves Existence of Previous Trance—Erickson stated in the same article that "the spontaneous posthypnotic trance constitutes a reliable indicator of the validity of the original trance..." Posthypnotic behavior, if it can be firmly identified as such, proves the existence of a previous hypnotic trance in which the subject was given the original suggestion.

Posthypnotic Trance Defines Nature of Previous Trance—Erickson also said that "careful observation will often disclose an absolute continuance in the spontaneous posthypnotic trance of the behavior patterns belonging actually to the original trance state." Accordingly, the way the subject felt during her "flight" to the door was a **continuance** of the way she felt during the original trance in which the posthypnotic suggestion was given: the sense of being in a very deep trance; her body mechanically obeying another person's will; her conscious self being violently cast aside into a condition of irrelevance, helplessly observing the hypnotic predation.

How to Identify a Posthypnotic Trance—Erickson listed clues by which an observer could identify the moment of continuation trance associated with carrying out a posthypnotic suggestion.

A slight pause in the subject's immediate activity, a facial expression of distraction and detachment, a peculiar glassiness of the eyes with a dilatation of the pupils and a failure to focus...a fixity and narrowing of attention, an intentness of purpose, a marked loss of contact with the general environment, and an unresponsiveness to any external stimulus until the posthypnotic act is either in progress or has been completed...[note the] intent, rigid, and almost compulsive nature of his behavior, and his state of absorption and general unresponsiveness until he has reoriented himself to the immediate situation...a brief interval of confusion and disorientation from which the subject quickly recovers by renewed and close attention to the immediate situation. ("The Nature of Post-Hypnotic Behavior")



Slander, Lies, and “Paranoia”

Slander—**Slander** may appear in the form of direct accusations, statements to media, or hints dropped into the gossip pool concerning (unfounded) accusations of child abuse, homosexuality, psychosis, criminal acts, “religious fanaticism,” “white supremacist” attitudes, and so on. The power of slander is well understood by propagandists. An unethical hypnotist seldom victimizes only one person. If one, of a cluster of subjects, has escaped and is trying to tell, the hypnotist may manipulate his other subjects to generate slander and weaken the escapee’s credibility.

Lies—Or the predatory hypnotist may seek (without the use of hypnosis) covertly to contrive ruinous testimony from medical persons, former friends, or other potential “references” (employers, employees, or landlords). This would prevent, confuse, or impede an investigation. For example, when Palle’s wife, Bente, began to suspect their involvement in robbery, Nielsen used his hypnotic control of Palle to create medical “evidence” that Palle’s suspicious wife was mentally unstable and inclined to “delusions.”

Paranoia—Unethical hypnosis—a condition which is not medically admitted to exist—can easily be misdiagnosed as **paranoia**. Fried and Agassi sum up the basic symptoms of paranoia:

- “Paranoia is, by definition, a quirk of the intellectual apparatus, a logical delusion.” (p. 2)
- There are persecutory delusions.
- There are illusions of grandeur.
- The paranoid is usually very intelligent.
- The logical delusion is unshakeable, permanent.
- Except for the logical delusion, “clarity and order of thinking, willing, and action, are completely preserved...”
- The logical delusion “effects a deep seated change of the total outlook on life and a derangement of standpoint towards the surrounding world.” The result can be a private world, a private language, and rejection of the publicly accepted view where it conflicts.
- The person “...will not be classed as paranoid as long as...he remains aware of the privacy of his private views and of the conflict they have with the public views...” (p. 72-3) and does not obtrude his deviant belief into conflict with the public’s general belief.
- Paranoia is “accompanied by another symptom, namely the strong denial of any major symptom and any mental illness whatsoever...the patient exhibits no hallucinations and no bizarre behavior...” (p. 79)

According to the above standard, which is taught to psychiatry students, any naturally intelligent person who happens to be the first to realize some disagreeable truth, who insists on publicly proclaiming that truth as fact, and who can be accused of some “delusions of grandeur” and notions of “persecution,” could be diagnosed as paranoid—if the psychiatrist happens not to accept the particular truth the subject is proclaiming. Fried and Agassi sum it up:

*The signs of paranoia...are three: first, the patient shows only incidental symptoms while denying his being mentally ill altogether...second, he is fairly normal otherwise...third, he has an **idee fixe**...a systematic chronic delusion....*

If the fixed idea is a delusion, the patient is paranoid. If it is true, the patient is a mentally healthy person. The doctor gets to decide.

...psychiatry has never been able to define precisely what is normal (or abnormal) behavior, and thus it inevitably ends up enforcing conformity to whatever the current community and government standards happen to be... (William Arnold, p. 256)

If psychiatrists do not recognize the possibility of unethical hypnosis, then persons who ask for help with a situation of unethical hypnosis risk being diagnosed as paranoid.

In the Soviet Union, political dissenters who were incarcerated in mental hospitals were most frequently diagnosed as having **paranoid delusions**. They had “poor adaptation to the social environment” and “overvalued their own importance.” They had “grandiose ideas of reforming the world.” Soviet psychiatry defined delusions as “false beliefs held onto with unshakable tenacity.” If a Soviet citizen believed he was being persecuted for his beliefs, that was considered a delusion with “paranoid features.” A. P. Filatova, a Soviet psychiatrist, declared, “No normal person can be opposed to the Worker’s and Peasant’s State.”

The thousands of political “paranoids” who were diagnosed, incarcerated, and drugged in Soviet mental hospitals had an unshakeable “delusion” that it was possible for elections to be real instead of rigged, that free enterprise would work better for the Russian economy than central planning, and that their country would be better off if the KGB were shut down and the press given freedom. Soviet psychiatry considered that particular set of delusions “progressive” and resistant to cure. Persons with that delusion were often forced (or tricked) into imprisonment in mental hospitals, then given the choice of renouncing their delusional views or remaining confined. Even if they renounced, however, they remained socially branded as “mentally ill,” and lost driving licenses, jobs, and opportunities for more schooling.

A heavily-conditioned hypnotic subject can be caused to display any set of neurotic or psychotic symptoms the hypnotist chooses to suggest.

In many cases the individuals I interviewed believed their lives or sanity would be in danger if their names were made public. (Boward, p. 25)

Why did Walter Boward’s military hypnoprogrammed interviewees fear their sanity would be in danger? They feared for their sanity because they were all highly-trained hypnotic subjects. One easy way to destroy credibility, if a forced hypnotic subject tries to reveal the truth, is the use of hypnotic suggestions to cause disordered thinking or problem behavior. The suggestions may even be set up systematically to compel the subject to mimic the array of symptoms associated with a specific mental illness.

On the other hand, a person who declares she is being hypnotized and forced to do things, who knows exactly what she is being made to do that she does not want to do, and who can describe in detail a hypnosis event that supposedly happened an hour ago, may be truly paranoid. A genuine victim of unethical hypnosis usually has amnesia for that type of data and struggles to assemble facts from bits of evidence gleaned in the waking state.



If one person believes something weird, such as that Martians are attacking, it is paranoia. However, if a group of people adhere to that weird notion, it is no longer paranoia, and they are a cult. If a majority of people adopt that idea, it becomes normal. And that’s strange.



2. Self Report

Some subjects, themselves, have figured out they were victims of a hypnotist based on normal recall of certain incidents. Their success has been due to a) programming errors, b) context clues, c) indignation overload, d) feeling in control, and e) natural aging. Zebediah, Bowart's interviewees, your author, and Nora O. all fit here.

a) Programming Error

Even the best of operators, sooner or later, will make a programming error when giving instructions to a hypnotized subject. Such an error may allow normal memory of events that were intended to be covered by amnesia. Or it may allow recovery of previously repressed memories.

b) Context Clues

The subject may figure out the problem from a context of normal memory in which hypnotic exploitation explains an otherwise inexplicable perception. For example, he may recognize a posthypnotic hallucination as such. He may realize that something he did was compelled by posthypnotic suggestion.

Missing Time—Whenever there is amnesic hypnosis, there are gaps in memory (**specific amnesias**). Missing time is the context clue that subjects most often notice. Zebediah remembered the clock hands suddenly seeming to jump forward several hours. M. H. Erickson's experimental subject noticed that outside it had gone suddenly from light to dark, and that he had gone from feeling fresh to feeling exhausted in the same instant.

Another subject noticed that her husband had switched from merrily chatting, while lying beside her in bed, to lying there snoring in what seemed to be but a split second of time. She also noticed frightening, severe pain which had been absent a seeming moment before. (Emergency surgery in the morning saved her life.)

Difficulty in remembering a period of about six weeks at the beginning of the hypnotic exploitation suggests a basic conditioning period on Bowart's CIA/military model.

Recognized Hallucinations—Other subjects have recalled obvious suggested hallucinations, positive or negative. Nora O. said, "I can remember him talking. I can see his mouth moving, but I can't remember anything he said." A posthypnotic suggestion made her unable to remember anything he said. She could not remember his words, but the instructions had allowed her to remember his face as he talked. (The mind thus tries to compensate for the artificial brain sickness of abusive hypnosis and its specific amnesias. What can be remembered becomes relatively more vivid, as if it expresses the energy of both the remembered, and the associated unremembered, data.)

Nora also said, "He made me see things. I still see them." He told her to see a frightening animal on the stairs that led from his room downstairs to the rest of the house. That illusion kept her trapped in his room, when he so chose. Another subject later realized that a perceived image was actually a hallucination because its details were too regular (the pattern was repeated like a wallpaper pattern) to be real. (The clue in the image might have been provided deliberately by her unconscious to her conscious in order to help its sleuthing function.)

Inexplicable Behavior—The subject did certain illogical things, or inexplicably allowed certain things to be done to him or her. The subject now realizes those events can be explained as responses to posthypnotic suggestions. A posthypnotic act is good proof of a previous hypnosis. Its occurrence can be long after, and far away, from the original suggestion. Zebediah gave all the money in his pockets to Adam, numerous times, when he encountered Adam on the street, or elsewhere. A subject wrote of experiencing obedience to a posthypnotic suggestion which compelled her to "fly" to the door and open it the next time she heard a knock on it:

While my body mechanically obeyed that other will, like a headless robot rushing to the door, my own consciousness felt violently cast aside. In that isolated, irrelevant, helpless, shunted-off place of being in my universe of mind, I was now merely a peripheral, minor consciousness observing my body as it was controlled by that dark force.



Illogical Observations—Dr. Lindner transcribed a conversation in which Harold, his amnesic (prisoner) hypnotic subject, is putting evidence together from what he was able to observe in the conscious state.

Lindner: Harold, what do you remember about yesterday?

Harold: I don't know. All I know is you burned my hand. Here. I know I didn't have that yesterday when I came here, and I know you've burned my hand before, so you get the blame for this too.

Harold figured out what really happened.¹

c) Indignation Overload

A subject may self-protectively convert, remember, or deduce normally amnesic events due to unconscious response to damage or danger. When extreme physical or emotional damage, pain, rage, or fear cause a hypnotic subject to override commands, despite all the conditioning to the contrary, that is **indignation overload**. When the subject's sense of justice is deeply offended, or when a situation conflicts with strong instinct (such as survival, or a mother's need to protect her child), the subject may manage to overcome some hypnotic programming. She may remember something despite amnesia suggestions. She may manage to convert a suggestion into a less harmful form. She may manage to get some conscious awareness of the problem. Indignation overload is usually only a partial rejection of conditioning.

For example, Candy responded to a suicide command by initiating a chain of events that resulted in her marriage to Nebel, and some memory recovery. Palle overturned Dr. Reiter's induction conditioning.

d) Feeling in Control

Unconscious recognition of safety, through distance in space and/or time from the perpetrator—or the involvement of a competing ethical hypnotist—may trigger some remembering and telling. There is evidence both from case histories and research to support this. P. W. Sheehan found that experimental subjects who reported feeling in control violated his amnesia suggestion. Subjects who did not feel in control did not break through it.

Zebediah was in prison (which isolated him from Adam) when he realized what Adam had done. Candy was married for five months before Arlene started telling. Bowart's interviewees were civilians when they realized their hypnotically suggested "memories" were not the stuff of reality:

1. I appreciate Harold's spunk. I dislike reading about such tests for anesthesia. The damage was real, even if not felt until later. Routinely burning Harold with a cigarette, to prove that the subject was hypnotized, was cruel and unnecessary in a therapy setting. Lindner explained in a footnote that "the burning of the dorsal surface of the hand" was a depth test. (p. 245). In fairness to Dr. Lindner, I have to add that he seems to have tried really hard to straighten the delinquent kid out. Also to Lindner's credit, in a 1960 article, "The Shared Neurosis," he reported examples of therapists who used hypnosis to serve their own neurotic needs.



“When I first got out of the service, all I could remember about my four years was that I’d had a lot of fun. I mean, all the pictures I have, and all the recollections I had, were of Max and Pat and I having fun, skin diving, laying on the beach, collecting shells, walking in the jungle. It never dawned on me until later that I must have done something while I was in the service.” (Bowart, p. 32)

e) Aging

There is a physiological reason for spontaneous mid-life recoveries of repressed traumatic memories. They literally become more endurable.

...recent, startling research suggests that there may be a physiological factor involved. Autopsy studies show that during middle age there is a major loss of cells in the locus coeruleus, an area of the brain stem that is associated with the experiencing of panic and anxiety. (Berger, p. 477)

Thus, memories repressed by deliberate loading with fear or pain associations become more accessible in middle age. The beasts guarding the mental gate to this hidden knowledge have grown less fearsome, more manageable.

3. Revealing Induction Phenomena

The following **induction** events may be evidence of previous hypnotic conditioning: a) **unusual susceptibility**; b) evidence of being **depth-limited** and/or **regression-blocked**; c) **unusual nonsusceptibility**; d) sudden deepening if the new hypnotist uses the same induction or deepening technique the previous hypnotist used: **piggybacking**; and e) extraordinary **reaction to the onset of trance**.

a) Unusually Susceptible

The subject who is **unusually susceptible** to hypnosis may be revealing past training. Once a person has been hypnotized many times, it is easy for any operator to quickly induce trance, and it will be a deep trance, unless the subject is sealed. One hypnotist, upon encountering an unknowing heavily conditioned hypnotic subject, remarked, “I have never seen anybody go down so far, so fast, so easily.”

A former policeman told me that he had accompanied his wife to a hypnosis session as a “chaperone.” He fell “asleep,” however, at the first induction patter and remained so until the hypnotist awoke him. On another occasion, he bought a tape which taught Morse code using a hypnotic technique. Each time he listened to it, after the first few sentences, he never could remember anything more until after the tape was completed—but he discovered afterwards that he had learned the code perfectly.

I told him such extreme susceptibility to hypnosis was strong evidence that at some former time in his life he

had received extensive hypnotic conditioning. The rule is: once a good subject, always a good subject—unless the operator seals you with a suggestion that you cannot be hypnotized by anybody else. He had not been sealed.

b) Depth-limited and Regression-blocked

A hypnotizable subject may be **depth-limited** and/or **regression-blocked**. Dr. Reiter’s repeated hypnoses did not accomplish anything with Palle except a shallow trance that was more difficult to induce and a little less deep each time. It was barbiturate that finally broke through Nielsen’s suggested depth barrier. The fact that the drug could change the process of his induction so dramatically proved that a hypnotic suggestion for depth-limiting had been the problem. Bowart’s interviewees were both depth-limited and regression blocked.

...he found me to be a very easy subject. I’d go into a trance at the drop of a hat....[but] whenever he tried to regress me—saying, ‘I want you to go back’—I’d just bring myself out of the trance, even if it was a deep trance. My heart would be pounding, my palms would be sweating, and I’d feel the same claustrophobia I’d felt whenever I’d confronted those application forms. (Quoted in Bowart, p. 36)

The subject probably had been told something like: “You can be hypnotized by another person, but only down to a medium depth. If that other operator asks you to go

back in time, by any wording whatsoever, you instantly will come out of the trance. You will be very wide awake and very upset. Your heart will be pounding, your palms sweating. And you will feel claustrophobic. You will feel a tremendous need to get out of there.”

When the subject mentioned in a) who went down “so far so fast” returned to that hypnotist a second time, she found that, since her previous appointment, she had been made depth-limited and regression-blocked. She and the new hypnotist, however, were able quickly to overcome the covert operator’s depth limit and regression-blocking.

c) Unusually Insusceptible

A **sealed** subject seems **insusceptible**. If a person fits other criteria for hypnotizability, but cannot be hypnotized, he may be sealed. If a person once could be hypnotized, but now cannot, it is possible that person is now sealed. (On the other hand, subjects differ in response to hypnotic situations and different operators.) When the subject mentioned in parts a) and b) went back to the new hypnotist a third time, she found herself mysteriously immune to hypnosis. No matter what the hypnotist did, he no longer could induce hypnosis in her. The covert operator had sealed her against any induction to any depth by any other operator.

d) Piggybacking

If a later hypnotist uses the same induction method used by the previous hypnotist—**piggybacking**—there may be a breakthrough in inductability. For example, Dr. Mayer used the same induction cue with Mrs. E. that Bergen had used, and it worked. Successful piggybacking is evidence of previous hypnotic conditioning to that induction cue. Candy’s later mirror inductions piggybacked on Jensen’s earlier mirror-conditioning of her. That, in turn, piggybacked on Candy’s childhood self-conditioning using a mirror to self-hypnotize.

Piggybacking can overcome sealing and depth-

limit resistance. Piggybacking can be used either to begin a trance or to deepen an existing trance. If the second operator repeats the first operator’s deepening method, he also may be able to access the subject’s depth conditioning from her original operator. If the subject spontaneously relives the experience of the prior hypnotist’s induction in a later trance with a different operator, trance may deepen to the level used by her previous operator. If the subject relives a previous operator’s induction or deepening method while in a later trance, that piggybacking will powerfully deepen the present trance: “As Candy counts down with Burger, her voice indicates that the reliving of that experience is putting her into an even deeper trance while with Nebel.” (Bain, p. 140) When Candy relived her first mirror induction while in trance with her husband, she shifted to deeper trance.

e) Extraordinary Reaction to Onset of Trance

As Reiter drugged Palle Hardwick down past Nielsen’s posthypnotic depth limit, Palle screamed “No, no!” When Nora O. went to a hypnotherapist, seeking help with her childhood hypno-abuse, she became hysterical as soon as she was hypnotized. The hypnotist could not wake her up. Nora ended up in a mental hospital. “Wasn’t right for a month,” she said. Nora never allowed anybody to hypnotize her again.

Another subject stopped breathing after her psychiatrist administered barbiturate for the purpose of recovering information about former abusive hypnosis. The psychiatrist had to give her a specific suggestion to breathe, for each breath, until the drug’s effect wore off and she returned to normal consciousness. That particular hypnotic conditioning impeded therapy until the stop-breathing programming could be lifted. (That was accomplished by the end of the next narcohypnotic immersion. The doctor gave suggestions, intended to lift the stop-breathing conditioning, between the necessary suggestions to breathe.).

4. Evidence from Projective Testing

Projective tests ask for responses to pictures or images, or ask the subject to think up images, or to create shapes and images.

The expressive techniques...include free drawing,

free movement, clay modeling, etc., and some of the projective techniques such as the Thematic Apperception Test, the Rorschach, the drawing of the Tree, the Szondi Test and others. (Assagioli, pp. 94-5)



Sealing May Affect Ability to See Illusion

One day, about a decade ago, the professor brought a spinning machine, that created an illusion, to my psychology class. She held it up in front of everybody, started it up, and asked what we saw. Every person in that class saw it as the illusion—except me. I saw “through” it. I saw what was really there. I could not see the illusion, even when I tried.

I have wondered, ever since, why I was different from the thirty-three other students. Was my inability to see the illusion caused by my sealing? Hypnosis is a kind of illusion. Were illusions accidentally covered by my conditioning to unconsciously block all forms of induction?

An image that arises spontaneously in a person’s mind is called **receptive imagery** or **spontaneous imagery**. Those images are valuable for self-understanding, as well as diagnosis. They will reveal a subject’s much-used and/or abused hypnoprogrammed condition, if the symbol language is correctly interpreted. Projective tests such as the TAT reveal the truth because you project your inner self onto neutral stimuli. You think you see form (pattern) in data, even random data, such as the Rorschach ink blots. What you see in random data, or the response you give to generic data, provides

...rapid access to facets of the personality that might otherwise be uncovered only through hypnosis or prolonged psychoanalysis or psychotherapy. (The Layman’s Dictionary of Psychiatry. N.Y.: Barnes & Noble, 1967, p. 185)

“Draw Nothing”

If a victim has been told many times, “You will remember nothing,” a suggestion to “draw nothing” may work especially well to help the subject retrieve data from earlier hypnoses. “You will remember nothing” is a standard command. The instruction to remember “nothing” is first mentioned in Bailly’s secret report to the king.

In cases of profound hypnosis there is often an oblivion of what occurred during the hypnotic sleep. This oblivion is complete when the experi-

menter has taken care to tell the hypnotized subject that he will remember absolutely nothing. (quoted in Binet and Fere, p. 366)

When told by a friend to “Draw nothing,” one survivor drew amnesic material from her repressed memories. Her conscious mind was surprised by what she saw herself drawing. Her split had been told many times under hypnosis, “You will remember nothing,” and her unconscious remembered that “nothing.” As she drew “nothing,” unconscious knowledge associated with what she was drawing came to her. Then she consciously knew and, finally, she could talk about it.

Walk Through Your “Land”

If you ask a survivor of criminal hypnosis to visualize a basic series of images, the role of the predatory operator in that person’s mind WILL be graphically demonstrated in some way. For example, visualize a landscape, perhaps a forest. There is a path leading down into that landscape. Take a walk down that path.

Now you see a key lying on the ground beside the path. What does it look like? What do you do with it? Walk on down the path. You come to a clearing of some sort. There you see a container. What does it look like? What do you do with it? Walk on down the path. It has a bend coming up. You go around that bend and suddenly you come upon a bear in the middle of the path. What does the bear look like? How will you get past it and on up the path?



(If you need help, imagine that I found a way to get you past the bear.) Now you are past the bear, and going on down the path. Up ahead, you see a dwelling place of some sort. What does it look like outside? Inside? Are there plants around the outside of it? Now you're going on down the path. You come to some water: lake, creek, spring, or some such. What does your water look like? Go on down the path. Up ahead, you can now see a wall that stretches from horizon to horizon. What does it look like? Can you get over it?

Somewhere along that trail, probably in the first half of the series of images, a hypnoprogrammed person may report seeing an independent person of some sort in

their land (or evidence of such a person such as footprints). Immediately after being glimpsed, this image withdraws, refuses contact, or conceals its presence.

For example, one hypnoprogrammed subject described a man sitting in a pickup truck on a hill above his forest. As soon as he saw and described it, however, the truck drove out of sight and did not return. Another subject was startled when the head and upper torso of a character suddenly popped out of her container, jack-in-the-box style. The image shook its head vigorously at her, scornfully saying "nyeh, nyeh, nyeh"! Then, it popped back down into the container whose lid then slammed back down, concealing all again.

5. Inhibition, Anxiety, or Somatic Reaction to the "H" Topic

A victim of criminal hypnosis may have difficulty communicating about hypnosis, or viewing a picture about hypnotic abuse, or hearing another victim talk about it. The

problem may be a) inhibition, b) anxiety, or c) a physical reaction.



a) Inhibition

The subject may avoid talking about the hypnosis in his life almost completely. Palle's reaction to the hypnosis picture in the Thematic Apperception Test (TAT) series was unlike his other interpretations; he spoke briefly, with no detail. Or the subject may show relative lack of speech skill on the subject of his hypnosis experience, compared to his ability to communicate information about other subjects. A physician observed to such a person, "Your normal skill at communicating is very high, but when you tell somebody about the hypnosis it suddenly becomes extremely poor."

There may be evidence of specific hypnotic suggestions forbidding the telling. For example, the mouth opens, but words do not come out. (The antecedent suggestion would have been: "Your mouth may open, but no words will come out.") When a therapist asked one survivor of unethical hypnosis the first pointed question about the hypnosis in her life, she discovered she could not answer. She looked helplessly at him. Her mouth was open quite wide (the same thing that had happened before, when she had tried to tell a lawyer). It would not close. Nor would words come out. The listener waited.

Finally, by willing it of herself in a feat of supreme self-discipline, she managed to utter one word. And then another, and another, until she had briefly answered the question. The barrier was then weakened. It was not as hard for her to answer his following questions.

Memory blocking may also be apparent under hypnosis. Whenever John asked the hypnotized Candy a question about the CIA hypnoses, she would say, "I don't know anything." Her words were "...the singsong automatic response Nebel had heard hundreds of times on the tapes." (Bain, p. 233). A survivor of unethical hypnosis may show emotional pain when giving that response of "I don't know." "I don't know" is the heart of the trouble. She or he is not aware, cannot tell, cannot feel, cannot remember, all because of the suggested amnesia.

Blocking may also be apparent in a pattern of delayed speech before answering questions about the hypnosis.

b) Anxiety

Survivors may have an **anxiety reaction** to the subject of hypnosis. Bowart told Schefflin and Opton that,

when interviewing the hypnoprogrammed military men, he had "...discovered a common characteristic: they all have an anxiety reaction when questioned about those missing spaces of time." (Schefflin & Opton, p. 445)

c) Somatic Reaction

The victim is likely to display anxiety, stress, and/or spontaneous lowering of consciousness when questioned about his hypnotic history. He may also show these symptoms upon hearing another person speak of hypnotic victimization. The anxiety may be expressed in a physical (somatic) symptom. Stephanie B. is a young woman whose father made her his hypnotic subject and sexually abused her. When she heard about another case of criminal hypnosis, she felt "chills."

I first met Nora O., a lady in her early seventies, in a writer's critique group. Over the next few weeks, I learned that she had been hypnotized when she was three years old by her uncle, an obstetrician who had lost his license for performing abortions. He then moved into the top floor of her family's house. He used hypnotic conditioning of Nora to facilitate his sexual abuse of her. The abuse continued until she was eleven.

Nora O. had a physical fear reaction to hearing or reading about abusive hypnosis: "My heart is racing 170 beats a minute. I have goose bumps all over my arms," she would say. Nora had a degree in clinical psychology and career experience as a college English teacher. She seemed wonderfully qualified to help me. I asked her to edit this book for me. She hesitated, then agreed. She had edited nearly a third of it before she had the heart attack.

"I never, ever had a heart attack before," she said. She became afraid to continue the work:

After I semi-recovered and was up and about (well UP, anyway), I found that every time I went near your book my heart felt funny. If I picked up the box your book was in, the room tilted. If I began to read it, my [heart] monitor went up into the red zone. I stashed your manuscript under the bed in the guest room. Even then, whenever I passed that door on my way down the hall, it was like walking through an icy draft. I swear. About every week I'd go try again, but the same weird feelings would come over me—and they still do.^{1,2}

1. Letter from Nora to Carla, 10-5-96.

2. There may be an association between a history of frequent hypnoses involving terrifying hallucinations, or suggestions to feel extreme terror, and arrhythmias later in life, especially in subjects with hereditary predisposition to arrhythmias.

6. Symptoms of Repression

The subject may have symptoms of **emotional repression**. The repression caused by hypnotic commands blocks the pain, shame, and fear unconsciously caused by predatory hypnosis from direct, conscious expression. Therefore, the repressed emotions leak out in revealing symptoms. Repression is the basis of all the other **defense mechanisms**. Repression is not a static, once and for all, event. It is part of the dynamic, shifting equilibrium in a person's mind between pressures to express, and pressures to repress. Pain, shame, and fear repressed under a **cover personality** can never be completely concealed.

a) Blocking When Questioned

A victim of abusive hypnosis may have a distinct pattern of delayed speech before denying key questions. This indicates blocking. Sirhan Sirhan gave this type of response to certain questions.

b) Emotional Numbing

Dr. Joel Osler Brende, a narcohypnotist treating posttraumatic stress in war veterans, wrote about the lasting, distressing symptoms that survivors of traumatic events suffer. He listed

...symptom complexes of intrusive traumatic memories, emotions, and imagery alternating with amnesia, denial, and emotional numbing—the latter symptom complex representing the attempt “to forget”....(Brende, 1985)

A hypnoprogrammed military subject summed up his behavior in the first months of therapy:

*“...when I first came in I'd talked in a monotone. I was very, very, controlled. I showed no emotions and had no inflection in my speech.” (quoted in Bowart, *Operation Mind Control*)*

The patient behaved like that for his first three months of treatment. That psychiatrist added that he “does not talk very much and has difficulty in expressing his feelings...Almost entire lack of facial expression.” (*Ibid.*, p. 84) She felt like he had a wall around him that she couldn't get through.

In another case, two consecutive clinicians were puzzled because the subject showed no emotion, although she was describing horrific events.

Emotional flatness, or tight control, can be specifically caused by hypnotic suggestion, or it can be symptomatic of hypnotic conditioning, when emotional repression is part of the amnesia. The traumatic experience is stuffed into the unconscious, blocked from expression either emotionally or verbally. The subject may be able to reconstruct some memories from peripheral, conscious evidence. Accessing the related emotion is something else. The predatory hypnotist does not want his secrets revealed. He would deny his subject either the credibility or the healing associated with emotional outpouring.

“Everybody, my folks, my friends, everyone who'd known me before noticed how changed I was [after military hypnoprogramming]. I was fearful, and under tight control.” (quoted in Bowart, p. 35)

c) Approach-Avoidance

Because of hypnoprogramming, the victim may completely avoid anything that would uncover the secret and accomplish deprogramming. If he does seek help, an approach-avoidance attitude is likely. The subject reaches out toward safety and healing. Yet, he is hindered in that effort by Secret-Don't-Tell programming that defends the hypnotic implants.

d) Spontaneous Eruptions of Repressed Hypnotic Memory

Everybody with trance capacity has **spontaneous trances** (daydreaming, highway hypnosis). Normally, these are shallow in depth. Normally, they neither involve **regression**, nor the escape of repressed hypnotic material.

Abusive hypnosis creates a load of unconscious pain that needs release, and of hidden truth that needs telling. The victim of criminal hypnosis, therefore, has a greater-than-normal tendency to experience spontaneous dissociation (even symptoms of multiple personality) because of his/her trained capacity for deep trance phenomena.

Some subjects have spontaneously recovered significant data in a series of dreams, associations, and realizations. The repressed memories “dribbled” back, gradually leaking from unconscious to conscious. For a survivor of criminal hypnosis, talking or reading about abusive hypnosis, or being hypnotized, tends to revive related personal memories. Nora O. wrote me:



...after I started reading your work and talking to you I began to see the Monster Animal that Dr. Eldon put in the stairwell when I was three or four years old. The only other time it came back was when I tried talking to a hypnotist about hypnosis 30+ years ago. It's back again, big as life, three thousand miles from Oregon!

I go up and down the basement stairs several times a day (somewhat slowly since the heart attack), and I walk right through the shaggy reddish-brown abomination. I scarcely even shudder any more. I always carry my heavy-duty Rubbermaid laundry basket out in front of me and shut my eyes tight for the ten seconds it takes to pass through, but I know it isn't there. No, it's not. It absolutely isn't there. It's just in my head. (Heart?) (Letter, Nora to Carla)

An eruption of repressed memory or emotion is a **spontaneous regression**. Survivors of abusive hypnosis may spontaneously regress to scenes from their repressed history with, or without, formal trance induction. Candy spontaneously regressed after John's "relaxations." At first, she only regressed to early childhood, but then Arlene began to relive the CIA hypnoses. Many of Bowart's interviewees also had spontaneous regressions. In yet another case of spontaneous regression to a scene of forgotten hypnotic abuse:

A sixteen-year-old boy was hypnotized by a lay hypnotizer, had a fit of insane violence in hypnosis, and attacked the hypnotizer, who knew no other course to take but to call for the assistance of the police. The hypnotized boy had to be manacled. When in the clinic, he had already been calmed and pacified, he knew nothing of what had taken place. A new hypnosis in the case of the same boy yielded the following information: the young man had been well known as a good medium in the vicinity of Vienna and had been repeatedly used by various persons, perhaps two hundred times altogether, for public exhibitions. One of these lay hypnotizers had on many occasions ordered him to go crazy and had suggested to him that a fly was approaching him, becoming larger and larger as it advanced, thus filling him with an acute sense of fear. During the hypnosis, which had taken place in Vienna, the other hypnotizer now appeared [as a regressive hallucination], and on the latter's [hallucinated] command the young man now went through his feat [of seeing the fly approaching, becoming larger and larger]. (Schilder and Kauders, p. 45)

Frequent spontaneous trances can be hard on the physical body. Normal sleep patterns may be disrupted. Trance visualizations may temporarily displace normal dreaming. For example, Candy suffered a lot of insomnia and emotional and physical stress during the process. "Candy withered under the strain." (Bain, p. 247)

A recovery of memory tends to stimulate yet more memories. After Candy spontaneously regressed to her childhood under hypnosis, John played the tape for her. Hearing that tape about a childhood incident made her remember yet more about the occasion of hitting her head. The two mental units, conscious and unconscious, are yoked. Though not always pulling equally, together they pull the subject along toward knowing.

e) Symptoms of Post-traumatic Stress

Anxiety, phobias, depression, severe nervousness, and lack of sexual drive are seen in concentration camp survivors and former prisoners of war. These symptoms may also appear in subjects with a history of abusive amnesic hypnosis. Meerloo gave a related, but different, description of what happens after the "Totalitarian Spell" is broken: "temporary nervous repercussions...crying spells, feelings of guilt and depression...The period of brainwashing becomes a nightmare." (pp. 91-2) Two Canadian researchers on post-traumatic stress syndrome in victims of past imprisonment and torture listed "somatic symptoms of anxiety, phobias, suspiciousness, and fearfulness." (Allodi and Cowgill, "A Canadian Study" in Stover & Nightingale)

...symptoms of anxiety, hyperalertness, disturbances in concentration and memory, and a tendency to reexperience the trauma in dreams and thoughts are components of both the torture syndrome and other stress and post-traumatic disorders...a specific criterion of the torture syndrome is that the person affected lacks any apparent predisposition to mental disorder. (Allodi, ibid)

This is normal for a person with post-traumatic stress disorder, "torture syndrome."

Phobias—Phobias can be either natural or suggested. Nobody is born with a phobia. It is always "developed." Developing a phobia requires a hookup between unconsciously associated cause and effect, programmed in with a lot of anxiety. Survivors of unethical hypnosis, or brainwashing, may have acquired phobias.

Patty Hearst, in prison after her recapture from the SLA, received psychiatric treatment for "some of my newly developed phobias." (*Every Secret Thing*, p. 380) Nora O. feared dying whenever she talked about the hypnotic abuse

in her life. After getting out of the service, Bowart's typical interviewee looked for work, and discovered that he had a phobic reaction to answering questions about his past. When filling out an application form...

He wrote his name and noticed that his hands were sweating. As he began to enter his address his heart began pounding so loudly it was audible. He became short of breath and felt like the walls were closing in. He fought to remain calm, but within a few moments he snatched up the form and bolted out the door. (Bowart, p. 35)

He tried to cure himself of the job application panic by desensitization; he kept going back, trying again. He did become able to get a little farther into the form, but:

...when he came to the place in the form which required work information about the past four years the pounding in his ears, the shortness of breath, and the terrifying feeling of being confined in a small space came over him again, and he left... (Ibid.)

He tried going to college. He was able to fill out the form and turn it in because it did not ask what he had done in the military. Personal questions in class, however, would trigger that panic reaction and a compulsion to leave the area. He dropped out of college. The specific posthypnotic suggestion probably had stated that if he ever told what he had done in the military, he would be stricken with unendurable panic, feel a dreadful claustrophobia, and have to get out of that place. His hypnoprogramming not to divulge personal information was over-generalized and over-intense. It prevented a normal life.

7. Social Isolation

There may be a pattern of isolation from other people, avoidance of close (confiding) friendships, and/or avoidance of involvement with a therapist who might recognize the problem of abusive hypnosis. Nielsen maneuvered Palle away from the influence of his friends and family. Later, Palle said, "I feel as if there is always a gap

between me and other people...I often feel alone even when in other people's company, because I can never feel the urge to take them into my confidence." (Reiter, p. 85) Nobody came to Candy's wedding, except her mother and her caretaker. Bergen wanted Mrs. E to kill her husband.

8. Memories: Absent, Inadequate, Or Too Perfect

Memories relating to hypnotic episodes tend to either be absent, inadequate—or too perfect. Dr. Mayer noted that Mrs. E.'s memory was normal in every respect—except when she tried to remember anything to do with Bergen.

The victim's memory of what happened is unreliable, patchy and uncertain, so that his statements will either appear improbable, inadequate, scrappy and confused, and self-contradictory, or just the opposite, so over confident and detailed

that they appear to the court to have been learnt off by heart. (Reiter, 1958)

The "overconfident and detailed" memories are ones obtained or recovered in a trance state, spontaneous or suggested. Any memory that is recovered directly from the unconscious, which has never been conscious before, will seem "overconfident and detailed." For a victim of unethical hypnosis, that may be the only way it can come back. (And there is a risk of confabulation.)



9. “Weakness” During, Fear of Control After

The subject who is in an active abuse relationship with a predatory hypnotist may seem unusually weak and meek. Zebediah’s prison evaluation called him “weakwilled and vacillating.” Palle became “apathetic” and an “introvert” after his hypnotic exploitation began, although, as a child, he had been outgoing. After Nielsen programmed him, his Thematic Apperception Test showed “a desire to be led by another person.” Another subject, before her recovery from severe hypno-abuse, was called the “most self-effacing person I have ever met.” Bain described Candy’s personality as “gentle, meek.”

In the relationship of hypnotic exploitation, there is a mental “paralysis” of the hypnotized person. The willing function of his conscious mind, to some extent, is being displaced by covert instructions from the hypnotist. The subject of unethical hypnosis has been entrapped in a very real situation of powerlessness. To the subject’s unconscious mind, the operator seems (and is) very dangerous. The unconscious automatically reacts to this overwhelming dominance with a survival-oriented, belly-up posture, “a passive-masochistic attitude” (R. W. White), a complete surrender. That unconscious surrender may spill over into the outward life.

There may be other reasons for that passivity beyond the unconscious training and survival instinct of surrender. Are the subject’s strong parts all occupied with the effort of containing the pain, shame, and frustration? Are

they occupied with the burden of unconsciously coping with the secret hypnotic life? Does the unconscious hypnotic split absorb all the subject’s assertive personality characteristics in obedience to the hypnotist’s demands that the unconscious isolate must dominate the subject’s conscious self? Or does the hypnotic split take on qualities of the exploiter, becoming a personification of the hypnotist’s will, secretly implanted and developed as a multiple personality to absorb the subject’s assertive qualities?

The subject also tends to show noticeable weakness in any conscious confrontation with the hypnotist. Zebediah believed he could confront Adam in court, but then discovered he could not. Palle had a “feeling of weakness and cowardice in respect to N, and this was manifested when he was confronted with N in court.” (Reiter, p. 78) Survivors of abusive hypnosis tend to relate to their predator with a mixture of fascination/love (rapport) and hate/fear (reality).

Fear of Control

A survivor of abusive hypnosis may have a phobic reaction to (or may simply avoid) situations involving control by another person. Dr. Reiter said that Palle’s attitude toward authority was strikingly ambivalent. Authority attracted him, and at the same time he intensely hated it. Joe reacted with strong discomfort to any authority over him and had to be self-employed.

10. Sleep Symptoms and Dream Clues

Dreams are a functional necessity for every living human, whether we remember them or not. (We usually do not.) We dream three to seven times per night. Dream length ranges from just a few minutes up to an hour, but usually between eight and thirty minutes. About one-fifth of your sleep time is spent dreaming, an average of one dream every ninety minutes, with more toward the morning. Dreaming plays a role in filing away learned material into long-term memory. The more you are learning, the more you will dream.

Survivor Dreams

Sleep and dream patterns, and dream content, also can convey information about repressed unconscious knowings. For example, during the period when Dr. Reiter was first trying, unsuccessfully, to hypnotize Palle, Nielsen encountered his hypnotic subject in a courtroom and reinforced all his conditioning. After that encounter, Palle began to feel upset all the time. He did not know why he felt so anxious. He also began to have chronic insomnia. When

just on the verge of falling asleep, he suddenly would feel tense and frightened, afraid of losing control, afraid of becoming unconscious. He had frightening dreams when he did sleep, but, when he awoke, he could never remember exactly what he had been dreaming.

A survivor of artificial personality splitting may have dream content that focuses on the situation of the unconscious split. Or the content may be drawn from the life of the root self. Or it may involve both personas.



Dreams can leak unconscious knowledge to the conscious mind. They can even be purposeful message-bearers from the unconscious to the conscious. Dreams may contain fragments of factual information (verbal or concrete) mixed in their collage of symbols. CIA experimenters, who researched artificial personality splitting to create a subconscious isolate, noted the possibility of the crossover of unconscious knowledge to the subject's conscious mind via dreams:

There would be inevitable leakage between the two personalities, particularly in dreams; but if the hypnotist were clever enough, he could build in cover stories and safety valves which would prevent the subject from acting inconsistently. (CIA memo quoted in J. Marks, pp. 184-5)

So, the subject may be unable to remember dreams, either spontaneously or because of repressive hypnotic suggestions meant to block their information-carrying ability. Or he may dream—and have nightmares. Dreams may “actually refer to present situations of which we have never been consciously aware.” (Faraday, p. 166) When a survivor of criminal hypnosis dreams about amnesic memories, the dream delivers information from his unconscious to his conscious, data which previously has not been consciously known.

Not infrequently, the content of the hypnosis will reappear in a dream, although the patient may not always be able to indicate precisely the origin of this content. (Schilder & Kauders, Hypnosis, p. 60)

Dreams may also convey consciously denied emotion.

In their sleep, the memories of atrocities surface to vivid awareness among the victims of mind control. Night after night terrible images, suppressed by deeply conditioned responses, emerge as terrifying nightmares. (Bowart, p. 26)

The survivor may dream the same, or a similar, scene over and over. Repeated dreams are attempts to come to terms with intense, unconscious, emotional material.

The recurrent dream tells an important story about the client...recurring ones are attempting unsuccessfully to adjust or call attention to some internal conflict between fragmented parts. (Tebbetts, Miracles on Demand, p. 29)

Analyzing Dreams

Repeated nightmares may precede a period of spontaneous memory recovery. Bowart's interviewees, who spontaneously recovered memories, typically began that process with a series of disturbing dreams. The first dream, or first few dreams, of a series tend to be a special effort by a survivor's unconscious to communicate something to its conscious mind. The topic of the dreams may be fear of the hypnotist, need to escape, specific experiences hidden by amnesia, grief at loss of memory, grief at family relationships disrupted by the hypnotist's predations, anger at the hypnotist, etc. Dreams of being put to sleep or paralyzed may be metaphors for being forced, on conditioned cue, into deep trance.



A dream may be all symbols, part symbols and part memories, or mostly real data.

Psychotherapists and analysts in particular should beware of their professional habit of treating all their patients' communications, including dreams, as mere 'projections' of the personality, containing no objective truth...[we should explore] a dream thoroughly for signs of objective truth... (Faraday, Dream Power)

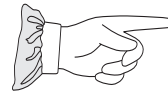
Let me add a note of caution here. Out of an average sample of the dreams of a class of college sophomores, almost 100% had dreamed of being attacked or pursued, 75% of sexual experiences, 66% of schools, teachers, and studying, 62% of falling, 56% of being frozen with fright, and 56% of nudity. So, dreams of being unable to move are common and do not necessarily refer to hypnotic experience. Dreams of trying to evade pursuit may symbolize many things, only one of which is unconscious fear of hypnotic predations. Dreams of struggling to find and save a lost child can symbolize many things, only one of which is the problem of unconscious isolation of the amnesic body of knowledge.

If you pay attention to your dreams, you will come to know yourself better.

It is generally agreed among psychotherapists and personality theorists that dreams provide us with the most direct revelation of unconscious thought processes that is available in normal personalities. (M. P. Emery, thesis, "The Differential Assimilation of Dream Content into Waking Consciousness," Columbia Teacher's College.)

Palle's dreams often had military themes and issues of obedience and submission. His dream representations of Nielsen were intensely emotional and negative, expressing anger and fear. Nielsen would be portrayed either with disgust as "the drunkard," or he would be "the hidden force which sustained the whole content of the dream and directed it towards its tragic-explosive catastrophic outcome." (Reiter, p. 76) The dreams of another survivor typically represented the predatory hypnotist as a snake, or as a dangerous, frightening man.

The survivor who understands the language of his dreams may learn what he must do to be safe. Some part of his unconscious mind, the **hidden observer**, always knows the whole story. That truth, and related warnings, can be communicated to the conscious mind in dreams. Warnings, insights, and guidance can come in the form of a dream.



If there are many significant matches in the ten preceding categories, the correct diagnosis is:

Posttraumatic Stress Syndrome

*Subcategory:
Unethical Hypnosis*

Survivor Confabulation

Victims of unethical hypnosis, who have become aware of their condition, who have tried to fight against it, and who have sought therapy for it, may have a burden of confabulatory overlay in addition to their true memories. There are three potential sources for this:

- The confabulatory overlay may have been caused by suggestions from the original, predatory operator. Why? It is very difficult for a mind-controller to take away the precious gems of consciously aware facts to which a subject, who is fighting for mind-freedom and the right to reality, is clinging. It is relatively easy, however, to give this trained subject suggestions which will make him confabulate additional, nonfactual, material. The purpose is to destroy credibility for the true component of the subject's declarations. It tends to work because most people assume that if one item in a person's testimony can be shown to be confabulation, then nothing they say should be taken seriously. Testimony laced with hypnotically-implanted falsehoods could ruin a victim's legal case.
- A further possible source of confabulation is the process of trying to recover amnesic material in the twilight zone of self-induced trance. The unconscious is highly cooperative with any conscious goal direction. Unless constantly warned to seek only truth, it may produce preposterous tales. Any subject capable of being subjected to unethical hypnosis also may believe in preposterous tales fabricated by his own unconscious.
- A therapist who treats a survivor of criminal hypnosis may not sufficiently guard against the risk of confabulation. Some psychology textbooks now say it does not matter if it is true or not (the subject always feels like it is true), because any fact or fantasy that generates emotion is helpful. This is a myth perpetrated by the therapy community that a) protects them from sloppy "regressing" that can pull up anything (such as "past lives") and b) protects the sizable industry of fabricated regressions. It is not helpful to believe falsehoods about your past. A person needs to live as close to the truth as he can. Careful trance management with insistence on only factual, true retrievals is best. When suggested confabulation happens, the subject has doubly suffered hypnotic abuse: first from the original perpetrator, and second from the therapist with whom the subject generated a second hypnotic burden of monstrous beliefs about his personal history.



The Manchurian Candidate: A Novel

Richard Condon's 1959 novel, *The Manchurian Candidate*, begins with a scene in which the Red Chinese capture a patrol of U.S. soldiers. They take the men to Manchuria for hypnoprogramming.

Yen Lo, Military Hypnotist

Reflecting the real-world's evolution in unethical hypnosis, Yen Lo, the Chinese hypnotist, works for the government/military. This high-tech Oriental mesmerizer sets out to transform the fine catch of American GIs into persons who will obey as mindlessly and automatically as robots.

Yen Lo combines traditional nineteenth century hypno-training and trance management skills with twentieth century narcohypnosis technology [something the CIA also was working on, as had the Nazis before them]. Yen Lo **conditions** his subjects [a term introduced by the research hypnotist Andrew Salter, who was Condon's friend]. The fictional hypno-doctor sneers at the common

...belief that no hypnotized subject may be forced to do that which is repellent to his moral nature, whatever that is, or to his own best interests. That is nonsense, of course... (Condon, p. 48)

In contrast to DuMaurier's villainous hypnotist, Svengali, Condon presents Yen Lo as a lovable human being. He is an intelligent, kindly old man when interacting with friends and family:

...Yen Lo sat with the thirty boys and girls of his staff in the evening circle on the lovely lawn behind the pavilion. He would tell them the beautiful old stories later when the darkness had come. While they had light he made his dry jokes about the Russians and amused them or startled them or flabbergasted them with the extent of his skill at origami, the ancient Japanese art of paperfolding...He would hold up a sheet of paper...and lo!—wonderment dropped from his fingers, the paper had come to life, and magic was everywhere in the gentling evening air. (Condon, p. 52)

Yen Lo's kindness, however, is reserved for his family and associates. It is not extended to the enemy. He is a classic Nazi doctor; the only ethics that he applies to

his medical practice is political expediency. He hypnotizes the Americans because they might be useful for his government's purposes. Yen Lo is strictly a "Company man," a loyal Communist Chinese, who also happens to be an expert on trance management in a country at war. He takes pride in using, and displaying, his expert workmanship. [With a mere switch of employers, he would fit perfectly among the technocracy of U.S. military and secret agency experimenters and programmers.]

Narcohypnotic Immersions and Conditioning

Yen Lo selects one patrol member, Raymond Shaw, to be programmed as the **Manchurian candidate**. Shaw is set up to be a human "...time bomb with a fuse eight years long." (Condon, p. 256) The "bomb," upon command, would kill its designated target—a U.S. presidential candidate.

The novel gives us an overview of the technology which Yen Lo used to program Shaw. The "candidate" is first shoved into deep trance by narcohypnotic drugging. The barbiturate knocks out his conscious mind and exposes his unconscious mind to verbal reprogramming by the enemy. Condon calls a narcohypnotic session—the period of time between the "descent into the deep unconscious" and when "the subject was pulled out"—an **immersion**. Yen Lo explains:

The total immersion time into the unconscious mind of the subject during the first contact had been eleven hours...The critical application of deep suggestion was observed during the first eleven hours of immersion when the primary link to all future control was set in. (Condon, p. 44)

["Deep suggestion" means suggestion given at a profound trance level, or under narcohypnosis. The "primary link" would be the posthypnotic reinduction cue plus amnesia suggestions. The reinduction cue would be set up to trigger an instant, unknowing shift in consciousness.] Condon said that Yen Lo has "his own radical technology for descent into the unconscious mind with the speed of a mine-shaft elevator." (Condon, p. 38)

When Yen Lo brings his subject out of narcohypnotic immersion the first time, "four tests were made to determine the firmness" of the deep implants. [The

author does not specify what those **tests** were, but, logically, they would have been tests of the reinduction cue, of the suggested posthypnotic amnesia, and of suggestions for posthypnotic positive and negative visual hallucinations. Amnesia and posthypnotic visual hallucinations, especially **negative hallucinations**, are among the most difficult hypnotic phenomena to elicit. Therefore, they are generally considered proof of somnambulist depth.]

Yen Lo hypnoprogrammed the U.S. soldiers, then demonstrated his control of their minds in a stage program before a gallery of Communist officials. Yen Lo hands the hypnotized subject, Raymond Shaw, a gun and tells him to shoot the two men he likes the most. Shaw obeys.

Marco Figures It Out—The Chinese then slip the GIs back to the U.S. side. All of them now have hypnotically implanted, identical, false memories of having heroically survived an enemy ambush. The phony memory was intended to explain their missing time. They have suggested amnesia for everything that happened in Manchuria—except the false memory of an ambush.

Although Shaw does not consciously remember shooting his friends in the demonstration, back home in the U.S., he relives that scene in **nightmares**, over and over. The Manchurian candidate's former commander, Colonel Marco, who also was hypnotized and present at the demonstration, and who also is amnesic, also is having repeated nightmares. In Marco's dreams, Raymond Shaw kills two members of his own patrol for a demonstration before the Chinese brass. After Marco finds out that another member of the patrol (not Shaw) is also having repeated nightmares about Shaw shooting two friends for a demonstration, the Colonel contacts Shaw. Marco asks Shaw about his dreams. He learns that Shaw is dreaming that scene also.¹

The novelist supplied a further clue for Marco in the form of a logical flaw in the implanted group memory of that imaginary ambush. Marco says to Shaw, "But you don't remember doing all those things." Shaw's memory has the same problem:

"That's what I'm trying to tell you...Every time I'm directed to think about the action I always know what will happen exactly, but I never get to the place where it actually happens." (Condon, p. 206)²



In one scene in the novel, Shaw's dual-cue induction setup (a suggestion to play cards, followed by the sight of a "red queen" sends him into deeply suggestible trance) is accidentally accomplished. He is in deep trance in a New York bar. Shaw is programmed to robotically obey the next

words he hears after the induction, no matter who says them. The next words he hears are "Why don't you take a cab quick to Central Park and jump inna lake..."

Zombie Shaw hails a cab, tells the driver to take him quickly to Central Park, and there he jumps into the (shallow) lake. The post-hypnotic command sequence being completed, the subject then returns to normal consciousness—in wet clothes. He is amnesic for the time he was in trance, but he admits to the pursuing Marco that his clothes certainly have become wet.

By now, Marco has figured out what really happened to his patrol in Manchuria, and why. The Colonel knows too that, after Shaw is hypnotized, he can be programmed by anybody. (That is not usually the case.) I won't tell you the ending; you might want to read it for yourself.

Afterthoughts

No novel since *Trilby* advanced public understanding of hypnoprogramming as much as Condon's novel, *The Manchurian Candidate*. Technically, it is sounder than DuMaurier's novel. The technology it presents is also more modern. Condon's book, however, is still clearly fiction. The programming of the patrol members, and the ending, are too quick and easy, too perfect.

To readers in 1959, the author's scenario seemed comfortably fictional. Then came the assassinations of John F. Kennedy and Robert F. Kennedy, followed by shocking evidences of conspiracy and the involvement of hypnoprogrammed persons. Condon later wrote a novel, *Winter Kills*, about the JFK assassination. After that, as far as I know, he never published again.

¹ Nightmares that symbolically express the repressed anguish of hypno-abuse traumas may occur in real-life victims of unethical hypnosis.

² The subject considers logical inconsistencies in his or her life and figures out the truth.



Help and Healing

A Hypnotic
Predator is in the
Picture



Who Can Help?



The Healing,
Freeing Image



Other Methods to
Overcome Amnesia



Therapy
Techniques and
Principles

“Get them to pity the person that they hate. Put them in the other person’s place.”

Charles Tebbetts

Therapy Issues in Criminal Hypnosis

There are four extraordinary factors to be considered when planning therapy for a survivor of abusive hypnosis: 1) difficult diagnosis, 2) possible active predator, 3) need to overcome suggested amnesia, and 4) challenging therapy needs.

Difficult diagnosis: the first of those extraordinary factors is the enormous difficulty, and hesitation, associated with defining a person as a victim of abusive hypnosis. **Criminal hypnosis** tends to be difficult to diagnose,

and easily forgiven, even overlooked, because mental scars are hard to discern. One long, livid, skin scar, visible on the outside of Palle’s head, for every criminal mind penetration inflicted upon him by Nielsen instantly would have clarified the situation for observers. The sight would have stimulated quick corrective action. But no methods of identifying an unknowing hypnoprogrammed person are so simple as observing scars on the head. (There are ways to identify a victim of unethical hypnosis, however, covered in the preceding section).

A HYPNOTIC PREDATOR IS IN THE PICTURE

Before therapy can be effective, a victim of abusive hypnosis must become safe from induction cues by the previous hypnotist. In this type of case history, a real—not imaginary—hypnotic predator has been involved in the subject's life, and may still be. Therefore, the therapist's first priority must be to identify, if possible, who the operator is, and to what extent the subject is still at



risk of an induction cue. (There may be more than one operator, as in the cases of Mrs. E, and the Operation Often subject.)

If an active hypnotic predator is not blocked from access to the subject, therapy will be difficult, if not futile. Therapy attempts may even backfire if the predator reacts to the threat of exposure by giving suggestions to destroy the subject's credibility and block further therapy. The abusive hypnotist might, for example, manipulate his subject in order to create an impression of paranoid symptoms to align with the subject's story about having been hypnotized, and achieve a misdiagnosis.¹

In a contest with a Johnnie-come-lately therapist, the first hypnotist has the advantage, because of his well-established conditioning of the subject—until the subject is out of his contact range. The friend of a victim of predatory hypnosis, therefore, strives to protect the subject from the predator's induction cues: visual (in person, mail, video), auditory (in person, telephone, audio/videotape), or tactile.

Screened Contacts—The subject's future safety may depend on screening mail (Dr. Reiter believed that allowing Palle to receive letters from Nielsen caused his relapse into hypnocontrol), screening phone calls (John Nebel caught the "per Cynthia" message that might have sent Arlene back to Taipei), and avoiding any personal encounter between hypnotist and subject (ignorant court personnel seated Palle and Nielsen side by side in court on more than one occasion).

Survivors of unethical hypnosis need to understand the facts of telephone induction because it is so easy for a perpetrator to maintain control over a subject in this electronic era merely by dialing his/her phone number. The erosion of privacy also aids perpetrators by making it difficult to keep a phone number private. An escaped hypno-programmed subject might most conveniently be traced over phone lines. And just one moment of phone contact could allow an operator to attempt to program out old loopholes and reestablish hypnocontrol.

An answering machine does not provide security. A recorded message can contain the auditory induction cue followed by instructions to call the hypnotist, followed by the usual amnesia.

The only real safety that I know of, unless all conditioned induction cues can be blocked, is to not be in a known location, not have a known phone number, and not trigger any "check-in" cues. Living with an unknown address and phone number is very difficult when the government, post office, banking system, health care providers, etc., all tend to demand an accurate address—and phone number. Refusal to provide a phone number and address may instantly arouse suspicion and make life even more difficult.

"Are you a bank robber on the run?"

"No, I am an escaped hypnorobot on the run."

That type of response does not reassure people.

Successful hiding may require living in a location (or a series of locations) that even a private detective, working for the predator, could not find. Screening of physical or phone access must continue until all previous induction cues are identified and disempowered. Blocking heavily-

1. An ex-policeman told me that a professional criminal told him that a basic technique was, "If you're going to do it, make the abuse so bizarre, nobody would ever believe him."



conditioned induction cues, however, may be difficult.

The emerging chip-locating technology is of appropriate concern to any hypnoprogrammed person. Pets and trucks already can be equipped with chips that can be located by satellite technology. Some people also now have these chips buried in their flesh (certain high-ranking French military, and all Thai citizens, for example). Is the new federal complex being built south of St. Louis to house the Defense Mapping Agency (projected 50,000 employees) a center for chip-tracking technology? The St. Louis citizens don't know. For sure, the existence of hypnoprogramming technology is yet one more reason to object to the implanting of a chip.

To Flee, Or Not To Flee

In the case of a conditioned hypnotic subject, the bottom line is a considered decision; what cost is worth the effort to have mind-freedom? It is possible that the hypnotic predations are not so objectionable, or unwelcome, as to be worth the necessary effort to completely evade them.

A father, covertly using hypnosis to keep a son from bad companions and bad habits, or to help a daughter be content and productive, may not fit the definition of a “predatory hypnotist.” A victimized wife, despite her suffering, may choose to stay in the situation for the sake of her children, her marriage, and her love for the abuser.

It is also true that the same hypnotist may treat different subjects in very unlike ways. He may have a genuinely benevolent attitude toward one subject, while being a serious threat to the safety of another. His treatment of a subject may depend on whether his first priority is to benefit and protect the subject (such as a child), or to benefit and protect himself (as in the case of an “outsider”).

A hypnotist who puts his subject at risk for life, or sanity, is a good argument for evasive action, no matter what the cost, unless responsibility for the care of young children, or some similar duty, is judged as being of greater consequence.

WHO CAN HELP?

A victim of unethical hypnosis is not mentally ill, but he or she needs help if there is extensive,

deep-level, and abusive hypnotic conditioning. The subject's conscious mind needs to be reintegrated with the repressed memories and feelings. He also needs the reinte-

gration of blocked mental defenses. In the process of recovering amnesic data to consciousness and of experiencing associated emotions, the survivor becomes able to func-

The Easiest Cure

It is a sad fact that the offending hypnotist could fix the abused subject's problem most easily, most completely, and most inexpensively. Candy knew that. She spoke of a wild urge to go to California and somehow get Jensen to undo what he had done, to reverse his commands.

If only the offending operator could somehow be persuaded, forced, or tricked into giving the suggestion, “Now you can remember everything that ever happened under my hypnosis.” The amnesia would immediately, completely, dissipate, the way that sun, in only a second of time, can burn away dense fog, leaving a clear view. The separated personalities would be reunified. Memories smothered in the mists of amnesia would instantly become accessible and clear. The subject would be reunited again: one person under God, indivisible—one data base, one memory.

The perpetrator himself has the greatest power to fix what he broke, to set into motion the easiest, most effective process of cure. [I have had the experience of having chunks of programming suddenly disintegrate because of the operator's own (careless, forgotten) suggestion. The first time, I did not realize what had happened until a week later. The second time, I knew the instant that the **deprogramming** process had begun. My brain felt suddenly warm and busy—making new, better connections?—at the moment my freeing was activated. And I was so happy. I look forward to more such joyful events.] In this ideal scenario, the perpetrator would give one final command: that the subject can never again be hypnotized by him (or any operator associated with him). The criminal hypnotist has given a sealing command against himself!

Such total cooperation from a criminal hypnotist in the healing of his victim, however, has never happened. The exploiter typically tries, to the bitter end, to perform covert damage control and keep his secrets hidden as long as the subject is within his reach. If he secretly can access his longtime subject, he gives the old accustomed induction cue, then asks questions to bring himself up to date on the status of the investigation. Then he gives new suggestions to that conditioned mind, designed to protect himself or to further exploit the subject.

tion again as an integrated and self-protected person.

Need to Tell

The situation of a subject, who is in the grip of a criminal hypnotist, may be truly desperate. Hypnotic commands surround him with blocks designed to prevent him from escaping or getting help. But the victim, weary of suffering, yearning to be free, unconsciously looks for loopholes in that programming. The first step to freedom and healing is to tell somebody. Any telling helps. Anybody, who will listen, helps. Two factors are vital to the process of finding safety and healing: 1) the wounded person's courage to tell, and 2) the listener's gift of unconditional love.

To tell is to overcome a series of challenges. Anytime the victim talks about personal problems, he opens himself to the creation of a rapport. For this reason, unknowing hypnoprogrammed persons tend to be blocked against making confidences, in general. Any time he talks intimately with another person, again and again, he is creating a rapport that competes with the hypnotist's. To heal, he overcomes the inner, blocking resistance and talks. First, he tells one person. Then, another. Telling more and more people helps him more fully integrate what he is telling. However, he needs a believing listener.

Some doctors, I've heard from patients, are sometimes disbelieving or nonresponsive to the histories they've recorded from these patients. Like they might find it too difficult to deal with....I think if they could talk to anybody it could be helpful. They don't need to talk to a doctor, necessarily—they need to be treated decently, they need a good listener. (Berger, quoted in Rauchman, p. 34)

A survivor is likely to turn to other family members early in the telling process. A typical victim is blocked from revealing anything in a formal therapeutic situation with a credentialed person. Candy first revealed the problem to her husband. Bowart's typical interviewee first told his mother.

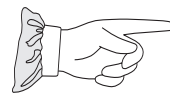
If the perpetrator is also a family member, however, telling other family members may not be helpful. "There are no secrets in families, only denial," the saying goes. The family of an abused person struggles with cognitive dissonance, the clash between the pretend version of their life and the reality of it. It feels easier to maintain the false front, to deny the telling, to implicitly collaborate with the abuser. For this reason, the whistle-blower, instead of the perpetrator, tends to be viewed as the problem by those inside the family, or group. The survivor needs to shift his efforts to tell away from the perpetrator's in-group.

It is hard to tell. The subject will feel as if he is divulging personal and intimate secrets—and perhaps even risking cruel, bizarre punishments for telling. If a listener's attitude is derogatory, threatening, or indifferent, the effort to tell is made harder. It takes tremendous courage for a person, so deeply wounded and fiercely threatened at the unconscious level, to disobey and risk telling.

He must try again. Every time he fights his way past the programmed resistance, it gets easier. Above all, he must break the silence. He must tell it again, and again, and again. He must tell it. Write it. Draw it. Sculpt it. Tell one person. Tell a group. He must remember what he can, figure out what he can, and tell the gist of that to somebody he believes may listen, sympathize, and believe.

If he has tried, in the past, to tell and been disbelieved or rebuffed, that makes it harder for him to try again. The message of rejection is that nobody will believe what he has to say, that he risks being called a liar, or even diagnosed as insane. (I hope dissemination of this book makes it easier for victims to find help.) So he must use good judgement about who he tells—but keep trying to tell somebody.

The persons who believe him will be thereafter his closest, most trusted, friends. Once he begins telling, he is on the road to freedom. Things are never going to be the same. He is building a new life in which the people who are close to him know the real him—the person who is a survivor of abusive hypnosis. Changing a long-held pattern of secrecy changes the victim in a profound (and good) way. The process of change may be an emotional and confusing time. That is the usual fallout from change. But he will come out of the process renewed, reintegrated, wiser, and stronger.



For safety's sake: He MUST avoid confiding in highly visible persons, such as John Marks or Mark Phillips. He must avoid anybody who is specifically looking for hypno-programmed people. Any such looker could be a lure for further unethical use of the victim. But, he MUST tell somebody, because he needs to tell, and other people need to hear this.



Time Issues in Therapy

The therapeutic time and effort needed to help the victim of a severely abusive, longterm hypnotic relationship probably cannot be supplied in any conventional therapeutic situation, certainly not in one hour a week of talk therapy. It took nineteen months, every day, hours in each session, for Dr. Mayer to complete his hypnotic investigation of the facts of Mrs. E's case. Dr. Reiter worked with Palle for hours, every day, for about eighteen months. It was also "a daily and grueling adventure for John and Candy to discover the truth about her past life...exhausting, as well as exhilarating..." (Bain, p. 82)

Bowart's typical interviewee had spent years in expensive, conventional, fifty-minute therapy, several times a week. Even so, his typical survivor only had begun to get answers, and then had to give up the formal therapy for lack of funds. (He continued the struggle to overcome amnesia on his own.) Another survivor spent several months of several-hours of therapy per day in an informal, amateur relationship, and a few more months on a once-a-week basis with a professional.

Trance Time Moves Slowly—One of the reasons why so many hours of hypnotic regression are needed (if that is the intended route of memory-recovery) is the nature of hypnosis itself. In deep trance, dialogue phrases of speech tend to be separated by very long pauses. A hypnotized person thinks slowly: the deeper the trance, the slower he thinks. Sometimes, the subject's words are spoken too softly or are too mumbled to understand.

The tendency to physical paralysis in deep trance can make it difficult for the hypnotist to understand what the subject has said (it helps to give a suggestion for clear speaking). Sometimes, the hypnotist is uncertain what is going on in the subject's mind, and he needs time to decide what question or response to make. Because of the passivity of deep trance, the subject usually needs constant conversational participation from the hypnotist. Accordingly, this type of uncovering takes a long time.

Putting Together the Puzzle

—It takes much time and effort to establish the basics of what has happened in a case of hypnoprogramming. The subject's own ignorance, confusion, doubts, and fears make communication awkward and imperfect. A person with normal memory starts by sketching the big picture in words. Then he adds details. Hypnoprogrammed persons with suggested amnesia cannot do that. Their data arrives in disconnected bits and pieces. Those pieces may not be in chronological



sequence. They may be trivial, peripheral to the major history of the abuse. The subject starts by telling those bits and pieces. For example, Mrs. E.'s recovered memories did not appear in a neat, chronological, and immediately comprehensible form. The amnesic data was, at first, a mass of

...confusing, disordered and fragmentary details...brought to light by the investigation...a very extensive interrogation of Mrs. E. was necessary in order to fill up at least the most essential gaps in her memory. (Hammerschlag, pp. 92, 99)

It took John Nebel months to begin to understand what had been done to Candy. Candy, early on, could not tell what had happened to her, or why Arlene kept popping out. What Arlene managed to divulge, in the beginning, was not sufficient to alert John to the full picture. The shreds of memory produced by Arlene in trance, and by Candy in the conscious state were merely "fragments of the past, unconnected, isolated and without any apparent link to a larger, more cohesive picture..." (Bain, pp. 72-3)

Likewise, Bowart interviewed the hypnopro-

grammed ex-military men “several times over a period of two years. Each interview produced additional information as David’s memory returned in fragmented, isolated bursts.” (*Operation Mind Control*, p. 28)

Money

If the damage is light and the hypnotic abuse is minor, therapy sufficient to identify and block induction cues may be affordable. The therapist of choice may be a maverick, because many professionals are full of prejudice and ignorance in their view of this particular type of problem. A “company type” counselor who could get his wages out of insurance probably is not going to give a diagnosis of criminal hypnosis.

If the subject is severely amnesic, any traditional therapy done “properly” will be expensive—because counteracting that amount of damage takes a long time. Dr. Spiegel, in his introduction to Bain’s book about Candy Jones spoke of

...the time and money factors which would have virtually ruled out the use of a professional throughout the many months of hypnotic sessions with Candy...John’s intense interest and patience in pursuing this project were necessary if such an abundance of material was to be gained. He was with Candy day and night, an impossible task for any outsider. (Bain, pp. 40-41)

It takes trust and time to deal with hundreds of hours of past criminal hypnosis. Professional help is likely to be prohibitively expensive. The therapy process for a victim of longterm, abusive hypnocontrol, such as Zebediah, Mrs. E., Palle, or Candy Jones, may be too demanding to be handled, financially or logistically, in any conventional hypnotherapeutic setup. Thus, help for the most severely wounded subject may have to come from a volunteer, an amateur.

Therapy by an Amateur

Candy struggled toward mind freedom with her husband, rather than with a paid professional. I was first helped by a wise and wonderful friend who had only a little experience as an amateur hypnotist, but who had a great desire to help and intuitive healing ability.

A survivor of abusive hypnosis needs **hypnotherapy**, either formal or informal, by that name or by another, by an amateur or by a professional. No two people have the same situation. The best I can do is to provide information about both amateur and professional options. The survivor needs help, but he needs to be picky about who gives it and what form it comes in. Here follows an honest discussion of the possible options. Then, he must

keep trying until he finds a friend, or professional, with the necessary qualities and willingness to help.

Therapy by a nonprofessional has both advantages and risks. A survivor could tell more, and more credibly and comfortably, if he or she could normally, directly remember and tell what happened under hypnosis. But the telling, in a situation of systematic suggested amnesia, is most likely to be done by the mind **split** who contains the memories of time spent under hypnosis. That split is an entirely different self from the **root self**. It is also invariably an angry, unsocialized one, being the subject’s longtime repository of lonely suffering, shame, and mental defeat.

It can be hard for an amateur to deal with a subject’s regressions, abreactions, personality parts, mysterious messages from the unconscious, and repressed rage. John Nebel’s inability to love—or even tolerate—Candy’s Arlene component tragically undermined his effort to help his wife. But credentialed therapists can be inadequate too. They may totally misinterpret the situation and completely reject the interpretation of unethical hypnosis.

Therapy by a Professional

The purpose of **treatment** is to get the client into better shape than he was before. A **hypnotherapist** understands techniques that may be useful in dealing with unethical hypnosis: suggested dreams, regression, parts therapy, image transformations, and so on. A hypnotherapist is accustomed to conversing directly with a client’s unconscious mind.

The problem is to find a person who 1) will admit that abusive hypnosis can happen (ask up front), 2) is experienced, and 3) has good morals (a good professional reputation). The victim needs to shop carefully. Avoid a therapist who does “past lives,” or who has lots of “incest,” “alien encounter,” or “ritual abuse” clients. He may lean toward asking questions that get those skewed results. If the client is not happy with his therapist, he should find one he likes better. He was not free in his relationship with the predatory hypnotist. He needs now to have a free relationship with the therapist. Nevertheless, it works well if he picks a good helper, and then endures the bad days as well as good ones in the process.

Gender of Helper—Boward’s military interviewees generally had better results with a female therapist than with a male. Is noncoercive female gentleness, nurturing, and emotional support best for a person who has suffered hypnotic bullying in the past? Perhaps. But I also know of female subjects who received good help from a male counselors—some of whom used a paternal technique, some a maternal style.



Training and Credentialing—Hypnotherapy training and credentialing varies over a wide spectrum, from Ph.D. clinical psychologists and M.D. psychiatrists with expertise in hypnosis, to “lay therapists” who may have completed training ranging from three months of nightschool down to a three-day weekend course. Many lay hypnotherapists are knowledgeable, experienced, of high moral character, and have real intuition for healing minds. Others are not, and do not.

(Government oversight of this field hovers between nonexistent, slight, and inappropriate. I am not sure that legislation is the answer when government itself has been a major culprit. It would certainly help, however, for a start, if abusive hypnosis was illegal!)

Some degreed hypnotherapy specialists—M.A., M.D., or Ph.D.—do not advertise hypnotherapy because some professional organizations have, in the past, tried to define hypnotherapy as “quackery by ignorant people.” In some cases, that statement is true. On the other hand, some of the best operators out there are **lay hypnotherapists**.

A psychologist can also be a hypnotherapist, but, in some states, a licensed hypnotherapist may have no other training or credentials except in hypnotherapy. A degree does not guarantee that person is the best candidate for therapist. Lack of a degree does not mean that a certain hypnotherapist cannot help the survivor. Many doctors, dentists, psychologists, psychiatrists, and social workers have training in hypnosis, though they normally do not describe themselves as “hypnotherapists.” However, they often have less experience with hypnotherapy than a hypnotherapist, who does nothing but hypnotherapy, and may have more time available.

Beware of clearly unqualified people. John B. Beard, Secretary of Britain’s National Council of Psychotherapists and Hypnotherapy Register wrote me about the situation in England:

It is high time that someone wrote about Hypnosis, its use and misuse...As there is no law concerning the use or demonstration of hypnosis, anyone can do it. You, for instance, could fly over here. Find rooms in which to practice. Advertise. And lo! be a hypnotherapist. The result is that since 1981 (a depression over here) so called hypnotherapists have flooded into the market. If you can't do anything else be a hypnotherapist. There are said to be 67 organisations representing the so called therapists: and perhaps 30 schools “cashing in” on teaching them.

(Personal letter, June 22, 1988)

The Freudian hypnotists have been unique in the hypnosis community in that they have pondered not only the unconscious motivations of a hypnotic subject, but also those of the hypnotist! Pardell said “...the hypnotist is a person who is willing, and perhaps desires, to accept the position of the controlling and omnipotent parent-figure” (p. 486). Pardell also quoted Gill and Brenman’s comment on a relevant personality characteristic of hypnotists:

...the paradoxical need for simultaneous intimacy and distance...in those who choose to specialize in hypnosis, this paradoxical necessity to establish closeness, and yet retain firm control over the maintenance of necessary psychological distance, is of particular importance. (Ibid)

When Christians Seek Deliverance from Abusive Hypnosis

The Bible specifically warns against hypnosis, again and again. My book makes clear the reasons we are urged to avoid hypnosis. How does a Christian who reads, in the Bible, verse after verse warning us to stay away from hypnotists, recover from a personal history of victimization by criminal hypnosis?

Botulism toxin is one of the most poisonous substances on the planet, yet for certain illnesses, the best treatment is an injection of botulism toxin. A client who is suffering from repressed memories caused by a previous hypnotist needs rehypnotization to undo the damage done by the previous hypnotist. The Christian should not have incurred that damage. But, once it exists, whether by moral carelessness or deceitful predation, the victim needs to be treated for that problem in a state of lowered consciousness.

One choice is a Christian counselor who understands how to work with the client’s spontaneous visualizations. Another option is a counselor who works by means of intense (deliverance) prayer states. The best therapy for a victim of criminal hypnosis probably would involve both accessing repressed data, desensitizing, and integrating work involving both the client’s imagery and intense prayer.

L. R. Wolberg wrote:

Hypnosis may also bring out some startling changes in the analyst’s feelings and behavior. The seeming helplessness of the patient, and his apparent susceptibility to suggestions, may liberate omnipotent, sadistic and sexual strivings...
(Wolberg, *Hypnoanalysis*, p. 2)

There are no simple answers. I would rate experience and reputation higher than credentials. If it were a regular psychological problem, I would advise a person to

look for somebody with at least a decade of experience, credibility in the professional community, and a common religious orientation. But, in this situation, somebody young and inexperienced may be more open to the subject's real needs than a person who is heavily indoctrinated with professional dogma. In choosing a helper in the healing process, the survivor should respect his gut reaction. Whoever the subject chooses, he should then trust him. The therapist's ability to help is greatly assisted by the client's trust.

Client-directed Therapy—One of the things that helps to heal a survivor of abusive over-control is to give him control. The survivor may be phobic of any situation involving control, including a therapeutic situation. The survivor may also understand far better than the therapist what happened and what is needed to heal it. Making the survivor a full partner in the process may be hard for therapists who have been trained to manipulate the subject, and to conceal information from him.

Hypnotherapy may be done in the context of almost any healing system: Jungian, behaviorist, psychoanalytic, or generic. If I had to choose just one category, I might look for a Jungian because of openness to client-directed therapy and expertise in working with the right-brain language of imagery. A **Jungian** therapist will usually allow subject participation, making the client's unconscious a partner in the healing process. I would like to see

Christian counselors develop more expertise in the area of direct right-brain communication using the language of symbols. (The lion devours the serpent in order to transform it.)

Reporting Assaults—The law requires credentialed therapists to report assaults. Because this type of case is a classic can of worms, the therapist may feel very uncomfortable at the thought of becoming legally compelled to prosecute the criminal hypnotist. A professional counselor may feel compelled either to report the case as an assault, or to define the subject as mentally ill. If there is to be a court case, tradition demands that the subject be prepared by a new hypnotist to demonstrate somnambulist helplessness and automatism in court. However, the current forensic atmosphere predicts an unwinnable case in court (though, maybe, an out-of-court cash settlement).

Narcohypnosis—Only a psychiatrist can legally do narcohypnosis. It is hard to find one who will, and it is expensive. It is also hard to find one who will do it in an office visit rather than during a psychiatric hospitalization. A psychiatrist who is trying to overturn a sealing created under a series of previous drug-inductions, may find it advisable to use suggestion under a new series of drug-inductions to accomplish re-programming. Keep in mind that barbiturate is highly addictive. Drug immersions should be limited to the minimum, and the psychiatrist should immediately begin training, under the drug, for relief of cravings and for a cued nonbarbiturate induction.

METHOD TO OVERCOME AMNESIA: THE HEALING, FREEING IMAGE

The biggest roadblock to uncovering the crime of criminal hypnosis is the subject's **amnesia**. To identify the hypnotic predator(s), to learn how to avoid potential induction situations, to remember real events which have never before been conscious, and to repeal burdensome old suggestions, the subject must overcome amnesia. Overcoming amnesia may be easy, or hard. That depends on what suggestions are in place, how deeply implanted, how well defended, and how gifted the second hypnotist is.

The Myers psychology text says that Kihlstrom (1985) proved that suggested amnesia can be overcome at a **pre-arranged signal**, or upon **subtle questioning**. That makes memory recovery sound easy. Overcoming criminal hypnosis, in reality, is not easy. The criminal operator does not use a prearranged signal to lift the amnesia. He wants it to stay in place. Subtle questioning is unlikely to happen. The subject does not know there is a problem. If the subject's friends and relatives know there is a problem, they

do not know what to do, or do not want to get involved. And subtle questioning would work best against only lightly grooved defenses. An amnesia associated with criminal hypnosis is likely to be heavily reinforced.

Remembering Enables Forgetting

To escape, defend himself, and heal, the subject needs to recover at least some of the repressed memories. They are real events which have never before been conscious. They happened and were then inhibited from recall by suggested amnesia. Normally, data passes first through the conscious mind, is evaluated, and then remembered. But in unethical hypnosis, as in multiple personality, the memory NEVER WAS CONSCIOUS. It is not subject to normal memory retrieval.

The repression of amnesia only effects direct retrieval of the memory. Repressed memories cause **anxiety** and **neuroses**. Unethical hypnosis can leave, in your un-



conscious mind, a dump of memories: pain, shame, rage for the careless, cruel damage, anger at the betrayal of trust. What is not conscious cannot be changed. Once a chunk of unconscious programming becomes conscious, however, you can change it.

Remembering also enables forgetting. When memories are available for conscious recollecting, they also become subject to normal processes of **forgetting**. A repressed memory cannot dissipate any of its pain or shame. Therefore, a repressed memory is stored as an unusually well-preserved memory, its content and emotional load both unmarked by replays, unweakened by the passage of time. That fact makes a repressed memory even harder to remember, because the conscious sector of your mind naturally tends to defend itself against any input that would change its comfortable status quo. It does not like **cognitive dissonance**.

As a person remembers repressed data, he experiences the linked emotions for the first time. At first, those emotions are very intense. But as that memory is recalled again and again, the pain wears off. Finally, the memory dissipates into a position of equality with other long-past events. That is the normal process of forgetting.

There are many methods to overcome suggested amnesia. The most accessible and powerful single tool to accomplish that purpose is imagery. The imaging ability is usually based in the right brain, and is best described by starting with the basic brain anatomy involved.

One Brain: Three Different Minds

Though, consciously, you perceive yourself as one united mind, that mind is actually the sum and composite of activity from anatomically separate brain centers, and separate subprocessors within those centers. Your conscious and unconscious minds are separate, though linked. Your unconscious has three major divisions: the left brain, right brain, and limbic system. These each have independent capacities, but normally they cooperate.

Limbic System—The **limbic system** is a complex combination of neural structures tucked between the brainstem/cerebellum and cortex, together with the pituitary and hypothalamus glands. The limbic maintains your autonomic system: body temperature, heart rate, blood pressure, and blood sugar level. The primitive emotions of sex and aggression are also based there. Long-term memory is consolidated there by an organ called the **hippocampus**. That is not where the memories are stored but, without either of the two parts that together are called the hippocampus, you cannot make new long-term memories. Your limbic system also is the bodily source of that sudden inner sensation of understanding and conviction that is attached to

revelations: “Aha! Now I see!”

Cerebrum—The **cerebrum** contains two **hemispheres**, your **left brain** and **right brain**. It is the biggest part of the brain. The two hemispheres, left and right, are connected by about 300 million neurons in a broad band called the **corpus callosum**. The two hemispheres, combined, provide you with a **dual coding system**, one method using mind-pictures (graphics), the other using words. Thus, you have two built-in basic **cognitive modes**.

Left Brain

In right-handed people, the verbal system is usually based in the left hemisphere. In left-handed people, it may be on either side. We go with the average and call it the “left brain.” The left brain specializes in information coded in the form of **language**. Left brain coding is **sequential**, a serial system. It is well-suited to a data flow which changes in time sequence: speech. Speech requires it to decode very rapid changes in sound patterns.

Your left brain talks. It does the job of translating the right brain’s symbol language into words, and thus provides speech for the nonverbal hemisphere. Using its sequential code ability, the left brain also performs your analytical, logical thinking. It is the hemisphere which does logic and mathematics. Those are all linear thought processes, one symbol at a time. Your left brain is great at analyzing, at dissecting wholes into parts. It is good at additions, deletions, and rearrangements of data order. It is always trying to get a straight-line view, to reduce it all down to things that do not contradict.

Right Brain

The right hemisphere understands some speech, but only up to about a two or three-year-old level. It can produce impulsive, unthinking, **automatic speech** such as swear words, song words, emotional outbursts, and terms such as “yes,” or “no,” or “I don’t know.” (Researchers call those terms **overlearned**.)

Singing and poetry may seem like verbal skills, but they are actually generated by the right brain rather than the left. Poetry and song lyrics are fairly direct translations of right-brain symbol language, produced, of course, with the cooperation of the left brain speech skill. That is why those particular verbal forms have the right-brain characteristics of intensity and truthfulness. They can reveal some of the painful truth behind a survivor’s mask. They can also generate refreshing honesty in relationships. Try talking to your best friend only in poetry composed in the moment, or only in extemporaneous singing, and see what happens! (The music playing behind the lyrics is entirely based in the right brain.)

Right-brain Symbolic Language—Right-brain (in some of the left-handed people, it is the left) coding of data is completely different from the left brain's system. Although it has limited use of language, the right brain mainly uses **symbolic** (visual) thinking. Symbolic thinking is suited to your sense of sight. It codes data in a viewable graphics language of symbols called **imagery**. Those symbolic representations are projected onto your mind-screen. You see them in your "mind's eye." The right brain thinks in images by manipulation of visual symbols. It remembers in images. It can communicate directly in images. This mental system is **simultaneous**, as well as **sequential**. The data is spread out over a space, all there at once, the simultaneous event. Then one image can transform into another image, a sequential event. Because of that projecting ability, your right brain is expert at illustrating precise relationships of one part to other parts, at conceptualizing parts of a unified whole.

Right-brain Parallel Memory—Stephen Michael Kosslyn, a Harvard professor of psychology, discovered that there is parallel data recording in the left and right brains. This fact is of extreme importance to survivors of unethical hypnosis. Limiting

*... "knowledge" to that which a person can report [verbally]... can be a fundamental error. We are aware of more than we can discuss. (Ornstein and Thompson, *The Amazing Brain*, p. 156)*

Thus, each hemisphere encodes, organizes, reorganizes, stores, and retrieves information in its own distinct—and different—cognitive mode. Each side contains memories of the same events in your life, but the memories are coded in their different modes. Those two memory systems have some other important differences.

The More Reliable Image—Paivio discovered that right-brain memory is more reliable than left-brain memory. Bower confirmed that fact. Paivio showed pictures and words to people, then tested their recall of them. They remembered the pictures more easily than the words. The independent memory record in your right brain is less subject to "decay" caused by the ravages of time and trauma than is verbal memory (Paivio, 1972; Bower, 1972).

The Inductive Image—Visualization tends to lower consciousness. By projective techniques, your unconscious can be accessed without a formal trance induction. A common method for inducing trance in children is to tell them to imagine watching a favorite TV program. A common technique for adult hypnotherapy, when dealing with unconscious resistance, is to suggest the subject watch an imaginary TV or movie screen. Then the therapist sug-

gests that images or action will appear on that screen which explain a symptom. Or, the patient may be told to dream of what caused the problem. The suggested dream is a projective technique for accessing repressed information.

The more time a person spends visualizing, and the more he concentrates on the visualizing, the deeper he will go. The deeper the trance, the more power the imagery projections have to access repressed material and solve problems. Visualization can evade sealing commands. As the trance deepens, images tend to become more autonomous. **Autonomous imagery** is, technically, a hallucination, but as long as you know it is just imagery, and not real, it is under control.

The Freer Image—Data recorded in the right brain is far less subject to censoring and far more easily retrieved than data recorded in the left brain. Repression and denial are based in the verbal, left hemisphere. The imaging side of the brain is willing to tell. It cannot verbalize without the left brain's cooperation, but it can visualize. Hypnotic suggestions to "not know" may tie left-brain memory into "nots," but the subject's right brain remains willing and able to show what it knows!

When are images used in remembering?...we use imagery if we...cannot deduce the information from other stored descriptions...[or] if an appropriate description has been stored but is too difficult to remember. (Kosslyn, p. 175)

In suggested amnesia, the left, verbal sector of the brain has become inhibited from retrieving certain information. It has acquired a rule against talking about that. It will lie, or "forget," to keep that truth concealed from its own conscious mind, in obedience to the hypnotist. The right brain, however, may project, in images, what the left brain dares not put into words. The survivor may then find it possible to deal with the problems that the images represent. Working with the images can result in growing strength and objectivity.

Thinking With Images

What the left brain is censoring, the right brain can show, but only by methods that do not require involvement of the verbal hemisphere. Those methods are called **projective techniques**. Projective tests draw on the parallel resource of right-brain memory, eliciting responses in the form of drawn or visualized images or stories. Any projection draws on the special memory, honesty, and talents of your right brain. Each image will be uniquely personalized, frankly exposing the truth about the contents and organization of your personal unconscious. The Rorschach ink blot test, the telling of fairy tales, the drawing or sculpting of answers to questions, and the TAT (Thematic Apperception Test) are projective techniques.



Image Generating—There are three necessary steps in thinking with images: image generating, image inspecting, and image manipulating or transformation. First, we “see” it: **image generating**.

Image Inspecting—Then, we examine what we are seeing: **image inspecting**. Since the right-brain images are all linked in networks of association, we can move from viewing one image to viewing another: “one image, or one part of an image, gives rise to another, as one step in a [computer] program leads to another.” (Kosslyn, *Ghosts in the Mind’s Machine*, p. 93) The linked images are an important tool by which people with amnesia can recover their memories.

Image Manipulating—If the image can be viewed, it can be healed. Healing is accomplished by merging, manipulating, and transforming the images. In the right brain, two contradictory ideas can be visualized at the same time. If the images change, either spontaneously or deliberately, that is **image manipulating**, or **image transformation**.

The symbols are likely to lead the subject’s conscious mind straight to the trouble and to begin maneuvering it into the necessary steps to fix it. The unconscious, like most body parts, may have a self-healing, self-balancing function. Accordingly, it will automatically attempt to accomplish damage control, and to repair damage already done.

Every time a person works with images in a visualization, he will make progress, and he will become more knowledgeable about what his personal vocabulary of right-brain symbols stands for. When a right brain image merger or transformation occurs, it can resolve a deep conflict. The astonishing thing is, if a person changes the image he visualizes, his deep-level inner programming which that image represents changes too! If a person’s inner programming has changed, since the last time he looked at the images on the mind screen, his visualized imagery will display that change!

By means of symbol transformation, his former state (the original symbol) is linked to his new state (the revised symbol). This is how a person can change without losing the connected thread of who he is. In the visualization process, he literally SAW the problem, and he can see the progress in dealing with it. For example, a symbol representing the predatory hypnotist may begin as an enormous, terrifying figure. As progress it made, it will gradually become smaller, and less frightening. Symbol transformation is associated with deep emotion and real change in a subject and the direction of his life. It is one way that any person can heal, change, get insight, and grow.

The Image as a Hypnotherapy Tool

One of the therapist’s problems is to figure out what right-brain language information is being communicated in the symbolic images. Experience, intuitive sensitivity, and some Jungian exposure all would be helpful in that. A good hypnotherapist knows how to guide the subject’s imagery in ways that remove blocks to memory. (Wolberg has many neat tricks for that.)

Dealing with Frightening Images—If a survivor has repressed traumatic memories, those memories are likely to first appear as abstract frightening images. Frightening images should neither be avoided nor confronted. Instead, the block should be approached gradually, gently, and in a context of the fantasy (imagery). It is the very process of working with the symbol representing the block which nudges it toward **depotentialization** (release of its energy, its “power”). Guided visualizations involving frightening images both deepen trance and accomplish **desensitization**.

Covert Desensitization—Covert desensitization is a useful healing tool for survivors of abusive hypnosis. Words did the harm; words can also do the healing. In the 60s and 70s, J. R. Cautela pointed out that an imag-

Emotion

Symbols generate emotion, which equals drive energy. Both symbols and emotion tend to lower consciousness. A situation causes emotion if you perceive it symbolically. Symbols for emotion in your mind are autonomous, creative—and not necessarily rational. Symbols that cause emotion have the potential to change you deeply. Cognitive psychologists call symbolic, emotional cognition, **hot**, to distinguish it from the blander nonsymbolic, nonemotional type of cold thought.

The basic emotional spectrum is strung between the two opposites of love and fear. This is the basic polarity of love versus anxiety, “go to” versus “flee from.” Hope makes you “go to.” Fear makes you “flee from.” Thus emotions draw us toward the essence of hope, or activate us to avoid danger. A state of mental conflict occurs when a need to go to crashes into a need to flee from.

Emotion is goal-directed. It has a purpose, and that purpose is to change things. When you feel an emotion of shame or regret, you have already begun the possibility of change. Feelings of shame or regret are a wonderful opportunity to change for the better. The act of feeling the emotion (abreaction), itself, represents change. Until you feel emotion associated with a certain inner programming, that programming is walled off from the option of change.

ined event in the mind is nearly identical to a real event in the mind. (He used the word “covert” to mean purely mental, imaginary, events.) Therefore, conditioning by having a “relaxed” subject imagine doing various things can be just as effective as if he actually does those things.

Covert desensitization is accomplished by making a subject imagine a series of events for which he is phobic, progressing from less scary visualizations to bolder ones until the phobia is fully dealt with and deactivated, “desensitized.” Many later researchers have confirmed that principle: what a person does in his imagination transfers to how he reacts and what he does in reality. A victim of unethical hypnosis can be helped by a series of visualizations in which, at last, real secrets are revealed and the unethical hypnotist is defied and defeated in imagery.

Guided Fantasy—In “Projective Hypnoanalysis” (Chapter 19 in Le Cron’s *Experimental Hypnosis*), J. G. Watkins proposed imaginative and powerful hypnotherapy methods, which he called **brief therapy**. One method was for the hypnotized client to begin, and then elaborate, a fantasy. Watkins said that the

...unconscious, given enough protection through disguised fantasy projections under hypnosis, will often make known its true purposes and strengths.
(Watkins in Le Cron, *Experimental Hypnosis*, p. 451)

Help for the Healing Process

The unconscious mind’s goalsetting mechanism looks for and carries out ways to enact what its conscious mind wants. The **goals** it works to achieve are the things that person has thought about wanting. Conventional hypnotherapeutic wisdom advises people who wish to be more effective in carrying out goal-directed actions to: First, decide on your goal. Second, again and again, imagine yourself, vividly, in a state of achievement of that goal. By constantly visualizing the goal, you leave it up to your unconscious to find the route to get there. When one attempt does not work, it automatically reroutes you to another. Anything you try helps, because with every try you learn more about what works and what does not.

I must add that, in my case, at the beginning, although I had some pertinent data, I did not fully understand it. I did not know what it was that I needed to pray for. It was after I asked Jesus, with a simple, humble prayer, to forgive my sins, and to come into my heart, that I began to experience the astonishing freeing and empowering events,

the guidance and protection which has culminated in this book. As part of that process, I visualized healing imagery with good success. In fact, after I became a Christian, everything I tried helped—at least some.

Right-brained or Left-brained?

Some people tend to think in pictures; others in words. Some people cannot visualize. Some, if asked to visualize, will describe something real from their past experience rather than something imaginary, but at least they can project it onto their mind screen. Those people who can consciously think with images, using them as visual representations of real feelings, objects, or actions have, if needed, an easier road to overcoming amnesia and healing.

Picture thinkers, because their dominant hemisphere is the right, are called **right-brained**; word thinkers are **left-brained**. Politicians and philosophers tend to be left-brained thinkers. Poets and sculptors are right-brained thinkers. Thinking in pictures, to any degree, is associated with creativity. Thinking in extremely clear, vivid images, and/or having the ability to control those images, is associated with genius (and with hypnotizability). Some fortunate people are gifted in both hemispheres.

If a “split-brain” operation (**lobotomy**) cuts through the corpus callosum, the right and left brains are unable to communicate and coordinate their actions. In that situation, the right brain--emotional, creative, and holistic--can no longer hook up to the left brain for its verbal expression. The left brain is deprived of the passionate creative intensity of the right. The verbally expressed personality becomes flat and dull.

These two hemispheres, each with its own mind, its own language, its own special expertises, can function in cooperation or independently, simultaneously or separately. If a task is specialized for one side, then the appropriate hemisphere activates, and the other idles. Both types of coding, verbal/sequential and graphics/wholistic are invaluable. They cannot be done simultaneously in the same brain site. People have to have separate brain centers in which to do them. And we do.

Sometimes, the two unconscious minds (left and right) do not agree with each other. In that case, they may struggle for supremacy. (“One part of me thinks this, but another part of me thinks that...”) When they do agree on a goal, however, their complementary approaches provide you with a wonderful, total, problem-solving ability.



OTHER METHODS TO OVERCOME AMNESIA

Working with imagery is an excellent way to overcome amnesia, but it is not the only one. Here follows a list of eight other significant methods to overcome amnesia: 1) persistent questioning, 2) ideomotor techniques, 3) hypnagogic crossover, 4) association, 5) guessing, 6) recognition, 7) regression under rehypnotization, and 8) narcohypnosis.

1) Persistent Questioning

Some research results show that posthypnotic amnesia may yield to persistent questioning. First, discover the subject's conscious memories relating to the unethical hypnosis, then follow the trail where it goes. It helps if you ask specific questions because the subject is usually blocked against volunteering information. "Just talking," the usual model for therapy, takes an extraordinary amount of time for a survivor of unethical hypnosis to accomplish only a little.

The survivor may, therefore, be grateful to friends who are willing to extract information, question by question. Or a subject may find it easier to tell from his right brain, in the form of suggested writing, drawing, sculpting, or singing projects. What works best depends on the exact wording of his "secret, don't tell" suggestions. For example, one subject can write it, but cannot speak it. Another is just the opposite.

There are two notable problems with the technique of persistent questioning. A subject may just be more firmly silent when pursued with direct questions, if they stimulate blocking suggestions. When friends are patient and do not ask, that survivor may be more able to confide the part of

the hypnosis story which she consciously knows.

The other problem is that the technique of **leading questions** is known to generate confabulated material. So, be sensitive as to whether this technique is getting results—and if they are accurate. Confabulated material does not, of itself, disprove the possibility of unethical hypnosis, but it certainly muddies the water and makes discernment of the true facts of the case more difficult.

Possible Questions

- *Who did it to you?*
- *What can you remember?*
- *What are you unable to remember?*
- *How old were you when it began?*
- *How many years were you in an active relationship with your hypnotist?*
- *How did he hypnotize you the first time?*
- *How did he deepen the trance?*
- *What is the induction cue? Do you know of more than one?*

Leading Questions

One day, in hypnotherapy class, Tebbetts taught us how to give our subjects a "past-life experience." "I don't believe in that," he said. "It's just a hallucination. But if you believe in it, or if your client does and wants to have one, I can show you how to give them one." (Two people in the class intended to make a living by inducing past-life hallucinations.)

Tebbetts then gave the class a specific sequence of instructions which would induce a hypnotized subject to imagine some experience from "a past life." He illustrated by telling us about the case of a client who "paid me a good sum to take him to a 'past life,' so I did." That customer had lacked imagination, but was eager for the past-life experience. Tebbetts said, "I made up his past life for him because he couldn't do it for himself." Tebbetts made clear that it was just a matter of getting a deep enough trance for hallucination to be possible, and then giving the proper **leading questions**, or suggestions.

The technique of asking leading questions was used by interrogators during the Inquisition to push accused persons, who were already shocked and tortured into a deeply suggestible state, to imagine that they had been sleeping with demons, or riding broomsticks. The method was rediscovered, in 1829, by a European, Dr. G. P. Billot, who

*...found that by means of leading questions (a technique which had been employed earlier by exorcists in demonic possession cases) he could induce patients in trance to announce that they were possessed by spirits. The spirits claimed to be the guardian angels of the patients, through whom they communicated... (Sargant, *The Mind Possessed*, p. 43)*

Inducing a conversation with angels is currently in vogue with hypnotists, as is past lives, alien abduction, and recovery of childhood memories of sexual abuse. Leading questions, used by social workers with young children (who basically walk around in a state of trance all the time), has resulted in an epidemic of false sexual abuse charges.

- *Were drugs ever used in your hypnotraining?*
- *Have you ever been electroshocked?*
- *Can you remember your childhood?*
- *What posthypnotic suggestions were you given?*

2) Ideomotor Techniques

Answers regarding repressed memories may be obtained using ideomotor techniques without having to consciously remember painful details. An ideomotor response does not need a hypnotic induction to happen, so sealing is not an obstacle to it. Any **ideomotor** response is a **dissociated** one. What you get depends on which brain neurons get directly hooked up to the hand muscles, what the designated rules for ideomotor behavior are, and what programming has been suggested.

Chevreur's Pendulum—A simple way of ideomotor questioning requires a small **pendulum**, such as a washer or a ring tied onto the end of a ten-inch string. There are four possible pendulum swings and, therefore, four possible answers: clockwise circle, counterclockwise circle, back and forth to your left and right, or up and down in front of you. The four answers can be: 1) yes; 2) no; 3) I don't know; 4) I don't want to answer the question.

You choose what movement will mean “yes” (such as back and forth); and what movement will mean “no” (such as up and down). Or, start by asking the unconscious what swing directions it prefers for which answer. Do that by thinking “yes,” and see what swing you get. Write the answer on a visible card for ready reference. Then do the same for the other motions and write the results on the card.

The argument for confining responses to only “yes” or “no” is that it keeps it simple. Most ideomotor systems allow only a “yes” or “no” response. Ever played Twenty Questions? Then you know that a series of yes/no questions, patiently asked, can get to the factual bottom of practically any problem, if you do it right and persistently. The argument against using only the yes/no choice, however, is that, if you ask something the unconscious really does not know, it may come up with a pretend (confabulated) answer. (State over and over that you want the TRUTH, only the TRUTH.)

This swinging pendulum is called **Chevreur's pendulum**, having been invented, in 1833, by a Frenchman, Chevreur. Chevreur also proved that the movements of a dowser's rod and of an ideomotor-operated pendulum were

both unconsciously activated. (Yes, dowsing is “real.” Flowing water creates an electromagnetic field which can be unconsciously discerned by about half the people who try.) LeCron pioneered the use of ideomotor responses in the United States using a Chevreur's pendulum, or finger signals (“Raise your thumb for ‘no,’ your index finger for ‘yes.’”)

Automatic Writing—You are talking on the phone. Unconsciously, your hand doodles on the note pad. That is a type of **automatic writing**. If your hand writes what your conscious mind has not previewed and does not know, it is doing automatic writing. It can happen in or out of hypnosis, with or without conscious awareness. It can happen spontaneously, or as a result of a direct command during hypnosis (e.g., hypnotist tells your hand to write without you being aware that it is writing, and without you knowing what it is writing), or as a posthypnotic suggestion.

E. R. Hilgard defined automatic writing as

...either totally out of awareness, while the writer is preoccupied with something else, or, if he is aware of it, he does not feel that he is its author. This latter case is rather like that of dreams, in which a remembered dream is a conscious product, but the authorship of the dream is obscure. (The Hidden Observer, Ch. 7 “Automatic Writing and Divided Attention”)

Your hand is connected to a dissociated center of consciousness and is writing a message or opinion from that dissociated center. It is a trance technique for accessing unconscious knowledge.¹ “Automatic writing...is often resorted to when resistance or objection to verbalization is encountered...[the hypnotized person is] told that his hand will automatically start to write.” (Marcuse, p. 129) So, if you have been instructed under hypnosis that “you can't tell,” you cannot. But the 99-and-some dissociated neurons that rise to the challenge of the instruction, “your hand will automatically start to write,” quite likely consider themselves unencumbered by the command to “you.” Being in the unconscious, they are used to thinking for themselves. They may, thus given permission, be willing to directly communicate what they know—and that is automatic writing.

What you write automatically is likely to be something repressed and important to you. The painful, repressed data is like steam under great pressure held in by the wall of prohibiting repression. Given the slightest opening and encouragement, it will find a way, some way, out!

1. Automatic writing is also common in occult circles for other uses.

*Automatic writing is a splendid means of gaining access to unconscious material that lies beyond the grasp of conscious recall. The portion of the cerebrum that controls the automatic writing seems to have access to material unavailable to the centers that control speech. This is possibly because graphic activity eludes the vigilance of the ego better than does speech. Consequently hypnotic verbalization of feelings and impulses may not yield information as vital as that brought up through automatic writing. (Wolberg, *Hypnoanalysis*, p. 176)*

Automatic writing under hypnosis has also been used as an ideomotor barrier against lying or confabulation in forensic hypnosis: “If you do not tell the truth, your hand will write the correct answer without you controlling



it. Nor will you know what the hand is writing.” Automatic writing has also been, on occasion, an outlet for confabulated material.

3) Hypnagogic Crossover

Information can cross from the unconscious to the conscious during the times just before you fall asleep (**hypnagogic**) and when you are just waking up (**hypnopompic**). During those two daily periods of natural trance, you can give instruction to your unconscious. You can also receive reminders or realizations from it.

4) Association

Technically, this memory system is called **redintegration**. People naturally remember in association with pre-existing knowledge. Any new datum is linked by neuronal connections to related, known data. The memories are like beads on a string, or like strands in a complex web. One thing reminds you of another, and then another. Stream-of-consciousness association can free repressed data. Association, while in trance—deep trance, works even better.

You can associate from word to word, or from symbol to symbol. Just follow the series. Associating may lead you to obscene ideas, painful memories, or problem notions about the person to whom you are speaking. To make this work, you have to set aside criticism and concentrate on the goal of getting out the information. The end of a chain of associations is usually where the most repressed thought, and, therefore, a very powerful one is located.

5) Guessing

A survivor of hypnosis with suggested amnesia knows more than he consciously knows that he knows. Any guess about the missing information may be based on his unconscious knowing, and therefore quite possibly correct. The phenomenon of being able to remember the information by guessing, even though you cannot consciously remember the source of your information, is called **source amnesia**.

They uniformly denied recognition of the stimulus figures, but once in a while they gave a correct response word, declaring that it seemed to come to them from nowhere. (R. W. White, 1942, p. 315)

A related phenomenon appears when a subject tries to **relearn** amnesic information. It is much easier to learn information the second time, even though memory from the first learning is not conscious.

6) Recognition

Long-term memory in the brain is catalogued by **cue words** similar to the way an on-line search system, or

the index of a book, works. In the same way, we use an index system to retrieve data from long-term memory. So, you might remember an incident pertaining to a fish by first thinking of names of different kinds of fish. The more associations you have in your mental index, with a piece of data, the easier it is to remember.

In a later hypnosis, the subject, if so directed, will recall what happened in previous trances:

The hypnotized subject seldom remembers, on awaking, the events which occurred during his hypnotic sleep. On the other hand, when he is asleep his memory embraces all the facts of his sleep, of his waking state, and of previous hypnotic sleeps. Binet and Fere (p. 135)

"...the subject remembers in hypnosis all that has happened in previous hypnosis." Moll

...amnesia may cease as a result of a new hypnosis...[with] an order not to forget the content of the hypnosis after waking, or the order may simply be issued in hypnosis that everything be remembered after waking. Schilder & Kauders, Hypnosis, p. 60

If he were replaced in a deep trance, he would be able to recall every incident that happened in his previous trance. Most patients can remember word for word the suggestions given to them in previous seances. Gindes, p. 33

Acts of one trance are usually recalled, either spontaneously or at command, during another trance... William James, The Principles of Psychology, p. 602

...a person under hypnosis will recall all that has happened to him in previous hypnotic states, if you suggest that he do so. Powers, Hypnotism Revealed, p. 24

If the tester gives four choices and says "Just pick one," the person with source amnesia is more likely to pick the right one than is somebody who never knew the answer at all. The clue can come from the subject's own mind, or somebody else can give it to him. **Recognition** methods start with a hint or question directed at the subject. He then uses association to access the concealed memories which are unconsciously linked to that clue. The recognition happens because what he heard or saw aroused the memory of what has been forgotten.

Cues can help recover less accessible memories, but they can also result in unconscious **fabrication**. When you can remember just a few facts about something, you may use those facts to create a seemingly logical reconstruction of the original scene—and that logical reconstruction may be incorrect. Those logical, but false, "facts" are called **constructive errors**.

7)Regression under Rehypnotization

Wolfort wrote of a woman who recalled, under rehypnosis, all that had happened in a hypnotization thirteen years before. Zebediah, Mrs. E, Palle, and Candy all recovered information by rehypnotization, then were told what had happened by their psychiatrist. Candy's multitude of spontaneous regressions occurred over a period of months, during which she recovered the basic facts of what had happened during Jensen's previous hypnoses of her.

The best results in **rehypnotization** of survivors have been achieved by profound hypnotic states, avoidance of leading questions, and maintenance of temporary amnesia. Progress required prolonged effort by the psychiatrist to deepen, unblock, and regress the subject. In some cases, it worked better to regress him to childhood first, then to approach the target period from those earlier years, rather than attempt to regress the subject straight back to the problem.

In **revivification**, the most authentic type of regression, the operator is an anachronism if the subject did not know him at the regressed age. John solved the problem of **operator anachronism** in Candy's case by **role playing** somebody contemporary in the relived scene, usually Dr. Jensen.

State-dependent Learning—Rehypnosis is necessary to remember events that originally happened in a state of trance, because you remember something best if you are in the same mental state as the one in which you originally committed that bit of data to memory. That phenomenon is called **state-dependent learning**. It may happen in the same mood, the same state of consciousness. Therefore, you tend to recover memories of depression in



depression, joy in joy, pain in pain, and so on. And, what you experienced under hypnosis, is most easily remembered under a subsequent hypnosis. What you experienced in childhood may also be easily remembered under hypnosis. Perhaps that is because, as Charles Tebbetts said to my hypnotherapy class, “Children are in a state of hypnosis all the time.”

Liegeois told of a young girl who worked as a house servant. She was a somnambulist who had been experimented on at length by some unknown person. That may have predisposed her to dissociations. Her mistress was rich and had certain valuable jewels. One day, in a spontaneously dissociated (daydreaming?) state of mind, the servant girl moved the jewels from one place to another, thinking they would be safer in the new place. Afterwards, she did not remember that she had moved them, or why.

When neither the mistress nor the girl could find the jewels a few days later, the mistress believed her servant had stolen them. She pressed charges. The girl was jailed.

Dr. Dufay was at the jail on other business. He recognized the imprisoned servant as the hypnotic subject of his colleague and talked with her. She explained her situation. Dufay hypnotized and questioned her about the matter. She then recalled moving the jewels, and why, and where. Dufay persuaded the judge to listen to the girl. The judge, himself, went to the house where she had worked, and located the jewels just where she had said, in trance they would be. She was freed.

She had been in a spontaneous trance when she moved the jewels. It was in another trance (rehypnotization), that she remembered.

Breaking a Seal—Before rehypnosis can be accomplished, the survivor of criminal hypnosis will probably have to be unsealed. A person who has been sealed by one hypnotist can be unsealed by a subsequent one. A hypnotist, encountering a client who is clearly under a sealing command, may respect operator territoriality and refuse to help. Or, he may try to unseal. This can work if the previous operator is out of the scene and will not be giving counter-commands.

Teitlebaum described how to **break seals** as well as how to place them. All his seal-breaking methods involved disguised induction. The clinician must evade the subject’s implanted barriers to induction:

...a well placed seal can be broken only by indirection and trickery. Where the subject has been hypnotized by the use of “sleep” words, it may be very easy for a physician to break the seal through a relaxation technic without any mention of the fact that he is going to hypnotize the subject and without any use of the word “sleep.” (Teitlebaum, *Hypnotic Induction Techniques*, p. 110)

He gave examples of such “trickery.” His “Seal-breaker Technic A” suggested that the subject close his eyes and remember being inducted, the very first time, by the original hypnotist: a **piggybacking** induction reinforcement. The subject is directed to think of the exact words which were used and to reexperience the feelings and actions of that previous induction. A disguised induction can apply to natural amnesias also. Two hypnotherapists, speaking of an amnesia case wrote, “As is typical in amnesia, the block to memory was strong against a direct assault but relatively weak against a ‘back door’ approach.” (Kelly & Kelly, pp. 138-9)

However, if the previous hypnotist obtains access to the subject again, he may turn the tables and reseat.

In any contest for control of the subject, there are some built-in aspects that favor the original hypnotist. 1) **Extinction** of previous conditioning tends to not be absolute because of the tendency for earlier conditioning to be dominant over later conditioning. 2) The original hypnotist may have more **conditioning density** (number of times hypnosis was induced). 3) The original hypnotist, if unethical, may have associated greater trauma with conditioning and greater emotional **intensity** tends to dominate over lesser in conditioning. Nevertheless, if the subject wants to get free badly enough, God willing, all those difficulties may be overcome.

Cognitive Dissonance

Cognitive dissonance is the opposite problem from confabulation. Something really did happen in the subject’s life, but he or she is denying it. Why? Because thoughts (cognition) that are logically inconsistent cause discomfort. And thoughts that do not fit with the way we want to think things are tend to be rejected. We need logic in our perception and consistency in our thinking. People reject information if it contradicts their preexisting ideas. It is a don’t-bother-me-with-facts- because -my-mind -is-already-made-up response. If the doctor suddenly says you have three months to live, your first reaction will be denial. What he said is cognitively dissonant with the expectations you had for your life expectancy.

8) Narcohypnosis

The other established way to bypass a sealing is by **narcohypnosis**, what Reiter did with Palle. Narcohypnosis sent Palle deep enough into trance to dislodge Nielsen’s influence. Narcohypnotic induction slices through induction blocks like a knife through warm butter.

The therapist, however, needs to be pre-

pared for the possibility that the subject may have post-hypnotic programming to stop breathing in case of drug induction, mimicking respiratory failure caused by barbiturate overdose. In that case, the therapist must combine verbal suggestions to breathe with suggestions to remove the causative programming, between breaths. It may take two or more narcohypnotic sessions with this “artificial” breathing to deactivate the suicide programming.

Obviously, that subject must be kept safe from any further programming by the previous operator! There is also likely to be an implanted suggestion to report back to the original operator if the seal is broken. Suggestions should

also be given to block that and/or keep the subject safe from opportunities for recontact by the predator.

Corroboration—When recovering amnesic information, the subject does not know beforehand exactly what memories will emerge. Afterward, he has no absolute assurance that the recovered data is accurate, although anything from the unconscious will always feel true to a subject. Recovered memory can be **corroborated**, however, by direct memory, context clues, and verification of details produced under trance, as the police did in the cases of Palle Hardwick and Mrs. E.

Therapy Techniques

Progress in therapy goes hand in hand with strengthening of the ego.

Wolberg, *Hypnoanalysis*, pp. 242-243

A hypno-abuse survivor’s unconscious wants safety and healing. It wants the pain and fear to stop. It wants recovery of what was lost. It wants what was broken apart to be reunited, whole and healthy again. Hypnotherapy is one logical framework in which to work on those goals of safety and healing.

Hypnotherapy Class

In July, 1990, I enrolled in a three-month evening course in the basics of hypnosis and **hypnotherapy** at the Charles Tebbetts School of Hypnotherapy. Tebbetts, professor of hypnotherapy, age 85, often told us stories from his long and colorful life. He told of being a young, itinerant stage hypnotist when a doctor came up after a show and said to him, “Boy, that’s a powerful thing. You could help a lot of people with it. Most of my patients think themselves sick.” The doctor offered Tebbetts a job as his “psychologist”—if he would teach him hypnosis. Tebbetts accepted. A year later, the doctor had learned hypnosis. He was “curing” patients much faster using disguised inductions. But he did not want them to know he was using hypnosis, so he swore his psychologist to silence.

The Class—Professor Tebbetts had two books in print, *Miracles on Demand* and *Self-Hypnosis and Other Mind-Expanding Techniques*. We read his books at home. During each three-hour class, we spent about two hours listening to him lecture and watching videotapes of his past hypnotherapy sessions. The last hour, we practiced hypnotizing, and doing therapy, on each other, and on clients who received free treatment if they would let themselves be subjects. The course required 150 hours of attendance, plus detailed practice sessions, exams, etc.

My classmates included a psychologist, an M.D., a minister, a salesman with Neuro-Linguistic Programming

training, a couple of housewives, and a Hindu yogi. Class attendance varied from six to twelve. I observed that most of these hypnotists, or would-be hypnotists, were fairly moral persons who sincerely wanted to use their skills to help, not to harm. I also observed one potential rotten apple in the barrel. And I saw a lot of naivete about what could go wrong in a hypnotic relationship.

Induction Training—A hypnotherapy relationship starts with a **pre-induction interview**. Among the questions we learned to ask were: “Have you ever been hypnotized? How long ago? For what purpose? What was your response?” “Do you have any fears or phobias?” A big phobia of mine was hypnosis. Now, four nights a week I heard hypnosis, watched hypnosis, hypnotized other people, and let other students practice hypnosis inductions on me as I fulfilled my requirement to do a certain number of hypnotherapy treatments and help other students fulfill theirs. I was not able to go into deep trance, but I made progress towards overcoming my discomfort with somebody trying.

I noticed that I was not the only person in there with induction resistance. A few students claimed “I can’t be hypnotized,” or would not let anybody try, or would limit the depth. Were they sealed? I knew I was. But if they knew they were sealed, they never said so. Most of the students, however, had a trusting attitude toward other hypnotists, submitted readily to trance induction, and were easily hypnotized.

Tebbetts taught us to listen for the deep sigh that signals a lowering state of consciousness. To coax a subject deeper and deeper, he advised us to “Keep offering them rewards: You’ll feel better, feel happier, be healthier, etc.”



Amnesia Suggestion—One evening in class, Tebbetts told us about a client who came to him, asking to be made to forget something. “He wouldn’t even tell me what it was he wanted to forget, but that’s okay.” “Did you make him forget?” a student asked. “Oh, sure,” Tebbetts said. “I took him down the **tunnel of forgetfulness**. I said to him, ‘I’m going to lead you through the tunnel of forgetfulness. And now you’re in it and it is forgotten, forgotten, gone.’” He chuckled, remembering.

I listened, shocked with recognition. Again and again, in years past, I had worked with the image of that tunnel. My lost memories were in it. Sometimes, when I had tried to get at them, I saw it as blocked by a strong wooden door which was padlocked. Sometimes, I managed to get in there and remember things, but it was never easy. Was the tunnel stock imagery used by hypnotists to make people lose their memory of something? Or was the tunnel a universal unconscious symbol for forgetting?

A tunnel, by definition, is underground, under cover. Maybe that’s why memories left “in the tunnel” would be understood by the unconscious as an instruction to keep them unconscious (covered up, forgotten). The meaning of images in the right brain graphics language interested me. I had already learned that the visualized image of a **key** usually communicates something about the subject’s attitude toward knowledge. The mind-screen image of a **container** usually represents the subject’s capacity to love.

Ethical Issues

I am sure that Professor Tebbetts knew about unethical hypnosis, but he adamantly denied that fact in class. Perhaps he reasoned that, if his students thought it was not possible, they would never try. He did discuss the problem of sex. He considered sexual involvement with a client unspeakable and unthinkable. He said of one “famous” hypnotist “He’s an egomaniac, an immoral person, a cheater. I’ve got a long list of women he’s molested. He propositioned about four or five girls here while doing his therapy.”

Tebbetts said that past lives¹ were just a suggested hallucination. “I don’t believe in them, but I’ll show you how to make a client have one.” And he did. He told about a client who came to him wanting a past life. “He didn’t have any imagination, so I made it up for him,” Tebbetts chuckled.

Limiting Number of Sessions—Tebbetts was not religious, but he was often ethical. He emphasized to us, over and over, that hypnosis was a powerful tool for reprogramming to get quick results. He firmly agreed with the position of the Holy See that “continued subjection to

hypnosis is ‘morally’ wrong.” He said that more than a few sessions with a subject would tend to set up an unhealthy dependency in the subject. He emphasized that we should not need to work with a client more than one, two, or at the most three, sessions to solve his problem. He described how he firmly, even rudely, extricated himself from the usual client yearnings to keep the relationship going (because of the rapport phenomenon and the cortical excitation of lowering consciousness). He was dead set against hypnotist-subject relationships that continue overlong—into potential monetary exploitation and development of psychological dependence. The most sessions Tebbetts ever gave a client was twelve.

That client had a severe physical illness with psychosomatic roots. He was not completely cured, but he was significantly improved. Then Tebbetts refused to see him any more.

Tebbetts Hypnotherapy Techniques

Tebbetts mixed words of wisdom with his **hypnotherapy techniques**: “Start building up their self-esteem from the moment they sit down.”

Correcting a Misprogramming—Tebbetts approached therapy like a computer programmer. He identified the symptom he intended to cure in the pre-induction interview. He then did an induction, deepened the trance, and began his search for the presumed **misprogramming** that was the cause of that symptom. Tebbetts believed that every symptom was caused by a problem in the subject’s previous mental programming. He taught us that our first task as a hypnotherapist was to uncover the symptom’s cause—to identify the misprogramming.

He taught us a wide array of techniques by which to discover the misprogramming. Good hypnotherapy, he said, meant probing, trial and error, the sense to know when paydirt was hit, and the skill to shift smoothly from one uncovering technique to another until you came to one that worked. One source of an unconscious misprogramming could be something said to a child, years ago, that was misunderstood, or unconsciously overstressed. “An imprint by an authority figure means that’s your truth.” The client usually is not consciously aware of the misprogramming, and that is its power.

Our second task was to get them to relive the event of the misprogramming with feeling, classic **abreaction**: “The memory which provokes the symptom must be brought into consciousness. The feelings associated with it must be reexperienced because you’re dealing with the FEELING,”

1. It is easy to confuse “past lives,” which are confabulated, with psychic events of mental time travel, even experiences enveloped in another person’s life, for which there is evidence.

he said. So, the subjects had to reexperience the guilt, shame, or anger. Only then, could we take it away.

Our final task was to cure that symptom by talking to, and **reprogramming**, the now exposed unconscious memory. Tebbetts taught us to begin a regression by telling the subject, “You’re taking all your present knowledge and experience back with you.”

Then, he supplemented the client’s “knowledge and experience” with his own logic. He said the key problem was usually that the unconscious was operating on immature, childish logic and needed to be supplied with mature, adult logic. Therefore, Tebbetts undertook to supply the client with a “subconscious reeducation.” He said, “Hypnotherapy is changing childish perceptions into adult understanding.”

First, Tebbetts would explain, to the problem part, the functional difficulty its symptom was causing the root self. Then he would speak the **missing logic** into the unconscious system to correct the misprogramming, because the unconscious mind cannot supply that logic for itself. So, he would talk and talk mature common sense to the hypnotized client, suggesting beliefs that could work better than those upon which he had previously been basing his behavior. After the client acquired conscious awareness of the misprogramming, the release of its hidden emotion, and the application of mature logic to it, the symptom would usually disappear. The problem was resolved.

Parts Therapy—Tebbetts specialized in “parts therapy.” Tebbetts said, “Everybody has two or three.” Tebbetts said that any client who had **internal conflict** was a candidate for parts therapy: “Indecision and ambivalence are signs that parts therapy is needed.”

Most people do not realize, unless they have been through this sort of hypnotherapy, how distinctly different and embattled their various aspects of personality can be—even responding in different-sounding voices when called forth by the hypnotherapist to unburden, explain, and negotiate. To students in our class who were unfamiliar with the behavior of personality parts during trance, it seemed pretty weird: hypnotizing the subject, calling out a part, asking its name, getting the parts to dialogue with each other, hearing one personality part refer to another in the third person as “she” or “he,” though only speaking of a different element of self.

Although they had separate names, these were normal unconscious parts, not multiple personalities. How-

ever, their memory content and attitude often was a surprise to the hypnotized subject, who listened as his various unconscious sectors took this opportunity to reveal their conflictual programming. Often the problem part turned out to be rooted in some long-forgotten event. Night after night, I watched Tebbetts bring out the combatant aspects of a client, name them, and then help them to better understand each other. Finally, he would negotiate a workable compromise that would result in more successful, comfortable functioning for the whole self.

The professor began a parts therapy by talking to the problem part in a cordial way, making a friend of it. He drilled into us: “Never criticize the parts. Say, ‘You’re not to be blamed.’ Always compliment them for doing a good job.”¹ He said to find out if the part had a punishing, or protecting, function. Arlene said that she stepped in when things got too hard for Candy, that she had saved Candy from tight spots, and Candy agreed. Tebbetts would have considered Arlene to have a protecting function. He would have thanked Arlene for protecting Candy.

Professor Tebbetts emphasized how important a problem part truly was: “The part that’s causing the problem always has the energy, the power.” He would tell it that the root self was lucky to have such a strong part! For the conscious mind, he taught us to encourage the attitude: “I’m a survivor. I’m not a victim.”

He said that each part’s appearance was just a “memory tape playing.” He said, “You cannot change or correct a tape unless you have it out of the file and playing.” He said it does not work, and it is not wise, to just tell the problem part to go away. Tebbetts made clear that shutting up a problem part would stop the healing process! He explained, “You can’t just get rid of a personality part. They’ll always reemerge.” He said, “Always make it clear to a part that it’s important and will be kept. Always make the parts get together. It’s important that they cooperate and love each other.”

You have to either integrate it back with the root self, or give it a different job to do, one that it will accept willingly. Usually, he gave the separated part a new job to do, one that would transform the client’s functioning by rechanneling that strength and energy in a positive way. He said to give the offending part a role that was “equal in importance to what he or she did before.” He said, “The offending part is usually the most powerful part.” He would suggest to the hypnotized subject some way in which that traumatic experience, which had caused the problem part, could be useful in the person’s future.

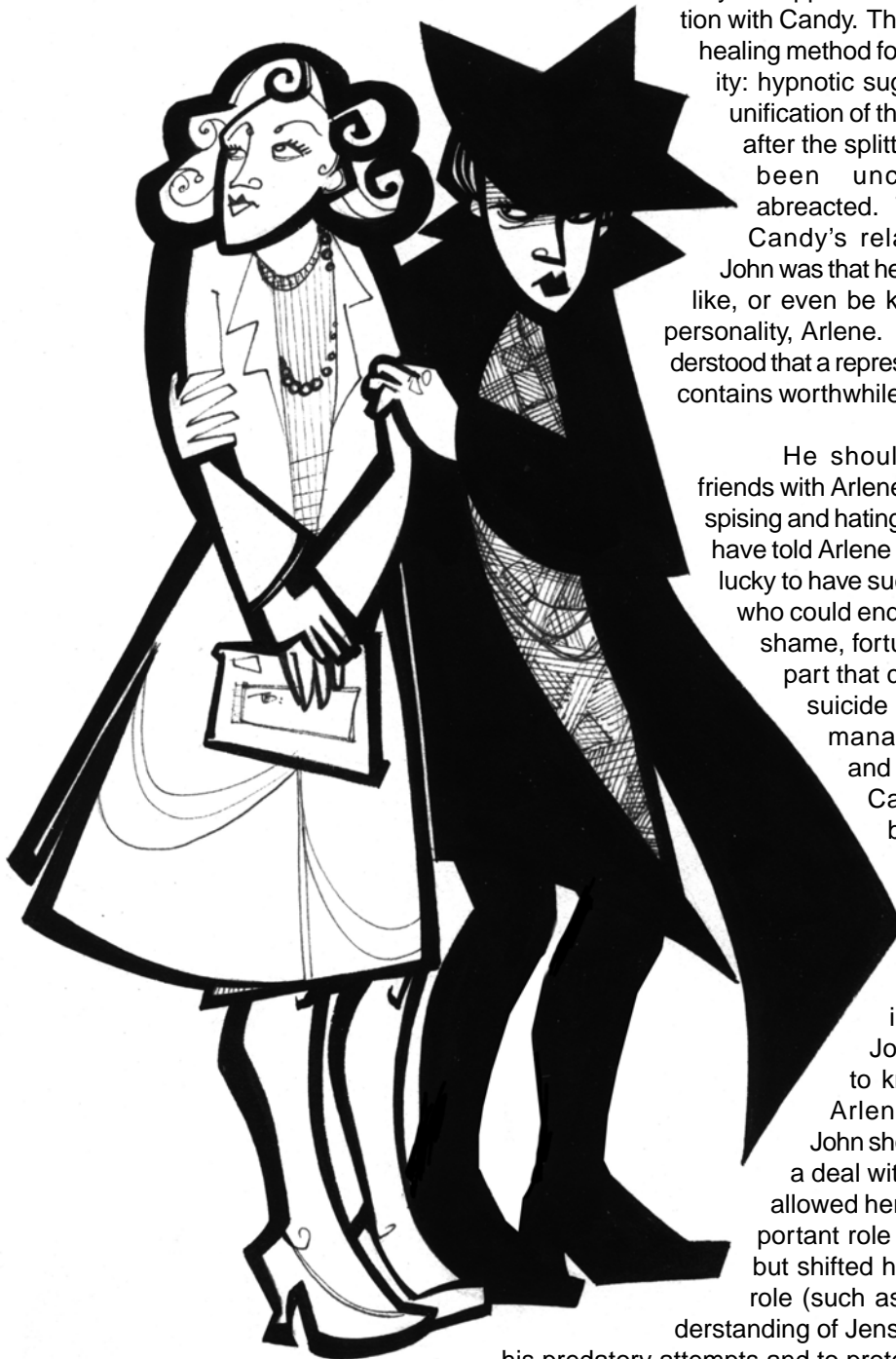
1. It is the conscious mind which must ultimately make decisions and take moral responsibility for outcomes, not an isolated matrix of neurons in some dissociated part of the unconscious.



What John Did Not Understand About Candy's Therapy

John Nebel did not understand that, once created, the only way Arlene could permanently "disappear" was by reunification with Candy. That is the classic healing method for split personality: hypnotic suggestion for reunification of the personalities, after the splitting trauma has been uncovered and abreacted. The tragedy of Candy's relationship with John was that he would not love, like, or even be kind to her split personality, Arlene. John never understood that a repressed self always contains worthwhile strengths.

He should have made friends with Arlene, instead of despising and hating her. He should have told Arlene that Candy was lucky to have such a strong part who could endure torture and shame, fortunate to have a part that could evade the suicide command and manage to emerge and tell. Although Candy's life was being disrupted by Arlene's spontaneous appearances, it was extremely important for John and Candy to know the things Arlene was telling. John should have made a deal with Arlene which allowed her to keep an important role in Candy's life, but shifted her to a positive role (such as using her understanding of Jensen to report on his predatory attempts and to protect Candy from him). And, he should have negotiated for a more functional schedule of appearances.



him). And, he should have negotiated for a more functional schedule of appearances.

Technically, what Tebbetts did was a **conversion**. He transformed problem energy into helpful energy. Tebbetts was a genius at choosing an appropriate positive job to assign to the problem part. Then, he would get the problem part to agree to its new task. In the unconscious, a deal is really a deal because that is the mechanical, automatic part of your brain. Once programmed, it tends to stay programmed.

I became competent at putting other people into trances and giving healing suggestions. Tebbetts said I was a very good hypnotherapist. He expected me to work full-time in that field after graduation. But I was really just a writer, collecting knowledge “incognito” for this book. I did not want another profession.

Wolberg’s Five-step Therapy

Wolberg summed up hypnotherapy as a five-step process: a) accepting change; b) strengthening the ego; c) bonding with therapist; d) recovering repressed memories and feelings; and e) integrating them.

a) Accept the Therapeutic Process—The recovery of memories forces the subject to change identity, both internally and in his relationships with other people. A person “always fights to maintain his scheme of life, neurotic as it may be, and defends himself vigorously against change.” (Wolberg, *Hypnoanalysis*) But that person also, somewhere deep inside, longs to be healed and whole again.

If he overcomes denial, reaches out and touches, accepts, experiences, and becomes the abnormal, crazy, heartbreaking realities of the unconscious knowing, then he is reintegrated. He will experience painful emotions in the process. He will become a different person. He has to reach out and make connection with his amnesic data without knowing just what he will discover, and just who he will become as a result of that discovering.

The hypnotherapist helps by using direct, or indirect, suggestion to strengthen and motivate the survivor.

b) Strengthen the Subject—The victim, who is still being victimized, has learned to live with what he has not yet managed to escape—or what he has chosen to endure. He has become accustomed to channeling fear into attempts to minimize the abuse, rather than into attempts to stop it forever. The survivor must first learn to believe that escape is possible. He must consciously feel enough of his fear and anger to channel those emotions into motivation to achieve a permanent escape.

Anger is an interesting emotion. If you do not express it, you tend not to feel it. The more you express it, the more you feel it. The emergence of anger is linked to a

person’s ability to perform both aggressive and defensive actions. For a victim of abusive hypnosis, accessing anger enables the development of a capacity for self-defense. The person who has been hypno-trained, broken to unconscious obedience, must recover his will to fight and to defend himself.

When the disease is overcontrol, part of the cure may be a **client-directed therapy**. Jules H. Masserman gave artificial neuroses to cats and dogs, making them afraid to eat. Then he looked for methods to cure those neuroses. The best method of cure turned out to be giving the animal complete control of its feeding process by training it to control the food-delivery switch. Animals who learned to control their situation eventually overcame the fear, ate, and lived.

LeCron was a first-rank experimental and clinical psychologist (and prolific author) who advocated client-centered hypnotherapy. He taught students to let the subject make decisions. He told clinicians not to manipulate, not to coerce. He urged colleagues to respect their hypnotic subjects.

[He also said that they would get much better results in experimentation if they treated the hypnotized subjects “as a normal human being rather than a robot.” LeCron explained that respectful treatment permitted the subject to participate more actively. He said that if they listened to the subjects’ observations during and after the experiment, their input might turn out to be quite helpful in interpreting the results.]

c) Bond—The survivor’s strength of will grows as a result of a positive relationship with anybody to whom the truth is told, including a therapist. Hypnosis tremendously speeds up and facilitates all the healing processes—bonding, uncovering, and integrating—because it cuts right through unconscious defenses and requires an immediate close relationship with the hypnotist. Two forms of **resistance** have to be worked through, however.

One is **transference** issues. The relationship will probably go through episodes of rejection by the parts of the survivor’s programming which are uncomfortable with that close relationship “because of repulsive hostile and erotic strivings that threaten to invade consciousness.” (Wolberg)

The second form of resistance flows from the hypnotist’s implanted commands. This remnant of the abuser’s programming inside the subject’s mind is the enemy to be overcome, once the perpetrator’s outside influence is eliminated.

Unconscious material is invested with such dan-



ger that the very acknowledgment of it is more than the patient can bear...In therapy it is essential to reunite the conscious ego with the repressed material and the attendant anxiety, but resistance constantly hampers this process. (Wolberg, p. 346)

Both types of resistance have to be worked through and resolved. Walking away from the relationship stops the healing process. The survivor must stay in there, and keep talking. It will get better. In a healing relationship, the resistances manifest, and then are resolved. Memory of important amnesic events and feelings can be recovered, despite inner resistance, when the survivor's will to heal is greater than his fear of unconscious threats.

d) Recover Repressed Feelings and Memories—The hypnotherapist regresses the subject back to find the origin of the problem, and to feel those repressed feelings (abreaction). After the problem is revealed, he can recognize the illogic of living according to a lie which was planted in his unconscious, or a misunderstanding which he mistakenly accepted into his programming at an earlier age. He can progress to a more mature and functional unconscious self-management.

If the survivor's mind-cage, the basic secret-don't-tell programming, is built of shame and guilt, those feelings have to be recognized and felt, even though they were artificially implanted under hypnosis. An **artificial neurosis**, once in place, is a real neurosis.

The needs to block induction cues, repeal previous suggestions, and recover repressed memories are powerful arguments for some professional therapy. In working with victims of criminal hypnosis, some clinicians have uncovered the truth by achieving maximally profound hypnotic states in their subject, avoiding leading questions, and maintaining temporary amnesia. The process Dr. Reiter used with Palle is a good model for a therapy of that type. Reiter used tough measures: drug induction to break through the perpetrator's sealing on Palle; ideomotor signals to reveal if Palle said anything untrue; and an incredible number of hours spent working with the subject.

Most survivors, moreover, would not be willing to put themselves through something like that. They would be reasonable to say, "I've suffered enough already." In fact, there are much kinder, gentler therapy models for survivors than Dr. Reiter's process. Candy managed an inner-directed partial healing, working with her husband. Another survivor accomplished a self-directed healing by using a little of almost every memory-retrieval method, plus some spontaneous trances, and amateur hypnotherapy from a friend, and help from several different clinicians (each for only a short series of sessions).

e) Integrate—Hypnotherapy begins with uncovering and ends with reeducation. The **integration** stage accomplishes the victim's reeducation. Denial, by not remembering, was his conscious mind's first perimeter of defense. Denial by remembering, but not feeling the emotion, was his second line of defense. Now, he has remembered. He has felt the emotion. In this step, he incorporates those new knowings and feelings into his life-style. Integration takes longer and is more complex than the steps of remembering and feeling the emotion.

Patty Hearst's psychiatrist helped her to recover from brainwashing by two important realizations: One is that "they did it to me." The other is that when you break and accept their programming (and science has demonstrated that every dog and every human have their breaking point, so you do not need to feel guilty), you internalize it. Then "I did it to me" becomes also psychologically true. Both "they did it to me," and "I did it to me" have to be dealt with as part of the healing.

Accordingly, integration, for the survivor of unethical hypnosis, involves accepting the two curiously contradictory truths that it was not his fault—and that he chose it. That means he deals with his anger about what happened; and he admits the role his own choices played in making it happen.

He can undo any consent he gave, which was betrayed, in imagery. He accomplishes that by running the scene backward, in trance, to the point in time of the giving of that consent. If the consent was betrayed by delivering him into a situation he would not have agreed to, if fully informed ahead of time, the deal was not a valid contract and can be mentally undone.

So, the subject overcomes the amnesia, encounters the data, and feels the feelings (which can then be unloaded). Integrating that data irrevocably changes him, and his future. (He may now need some positive, legal, moral way to channel and release his anger—such as by trying to help other survivors and warning the public at large.) Along the way, he has developed more realistic new attitudes about himself and other people. He has dropped old bad habits and phobias. He has built new, better behaviors. The survivor of unethical hypnosis comes out of all this stronger, wiser, and happier.

Love and Respect

A survivor of brutal mistreatment and psychological crushing, accidental or deliberate, needs healing doses of their opposites: love and respect. If the subject is a split personality, natural or artificial, that love and respect must be extended to both victims—the root personality and the split. The root personality, the conscious part of a survi-

Most Effective Wording for Suggestions

The language of suggestion is directed to a subject's unconscious mind. How do you talk to an unconscious?

- ❑ **Focus Attention**—An idea that becomes a suggestion is one on which unconscious attention is concentrated. Advertisers are experts at attracting the attention of your unconscious.
- ❑ **Literal**—The unconscious is literal. It does not get the joke.
- ❑ **Clear**—State the suggestion clearly. When a suggestion can have more than one interpretation, and when no one interpretation is specified, the subject's unconscious will pick the most compatible one.
- ❑ **Positive**—A positive suggestion is more likely to be accepted than a negative one. You should tell an impulsive, irritable child, “You will be patient, cheerful, and happy, always in a good mood,” because telling him or her, “You will not lose your temper” does not work. The unconscious is comparatively deaf to “not” and “no” words. Because of this, negative affirmations—in or out of hypnosis—can backfire. “Don’t lose your temper” can turn into a unconscious suggestion to lose your temper. “Don’t worship evil” can be taken as an unconscious suggestion to worship evil.
- ❑ **Affect**—If emotion can be aroused and attached to any suggestion, then the suggestion is more likely to be accepted, and to function thereafter with power. Any idea with emotion attached dominates over one with no emotion. A suggestion associated with stronger emotion will dominate over one with less emotion. Indifference is the best armor against unwanted suggestion. Strange, but true, conscious effort to counteract a suggestion tends to intensify its action.
- ❑ **Imagery**—Giving a suggestion in the form of visual imagery tends to be more powerful than mere words. Imagery rouses the right brain, which is a hypnotic center. When imagination (based in your unconscious) and will (based in your conscious) conflict, imagination tends to win.
- ❑ **Repetition**—The more you hear it, the more you are likely to believe it.
- ❑ **Written**—The unconscious is more likely to accept and believe written words than spoken ones. (Hence the power of Scripture.)

vor, must also extend love and respect to its battered, wounded unconscious parts.

In the case history of “Eve,” her personality splitting was found to have begun in childhood when she was forced to touch her lips to a dead face in a funeral parlor. Eve split because part of her would not obey, but part of her could not resist obeying. After Doctors Thigpen and Cleckley helped her finally to remember and relive that moment, her selves reunited again. (If you read the sequel,

however, you will find it was not quite that simple, easy, or final. It never is.) Thigpen and Corbett summed up why they had a successful outcome with “the three faces of Eve.” The first six reasons are all manifestations of love.

- 1) *All three of the personalities talked to the therapist.*
- 2) *The therapist gave “uncritical acceptance and understanding.*



- 3) *"...the rebellious Eve Black encountered no active condemnation or punitive opposition..."*
- 4) *The therapist offered "understanding."*
- 5) *The therapist did a "painstaking review" of the patient's past "emotional experiences."*
- 6) *..."Jane fell in love"...*
- 7) *"...passage of time with...intrinsic biologic factors toward repair, reintegration..."*
(Thigpen and Corbett, pp. 279-280)

walks away from the memory-recovery part of her healing, knowing she may never remember anything more. The survivor survives. She gets on with her life.

Before she quits therapy, however, firm protective blocks should be in place against any future use of an induction cue, by the previous predator(s). There should also be a posthypnotic suggestion that would inform her therapist if the predator hypnotist ever again attempts, or succeeds, in breaching her mental defenses. If, for any reason, that unconscious, protective blocking is not feasible or secure, her only other alternative is to live in permanent hiding from any possible induction cues from the predator.

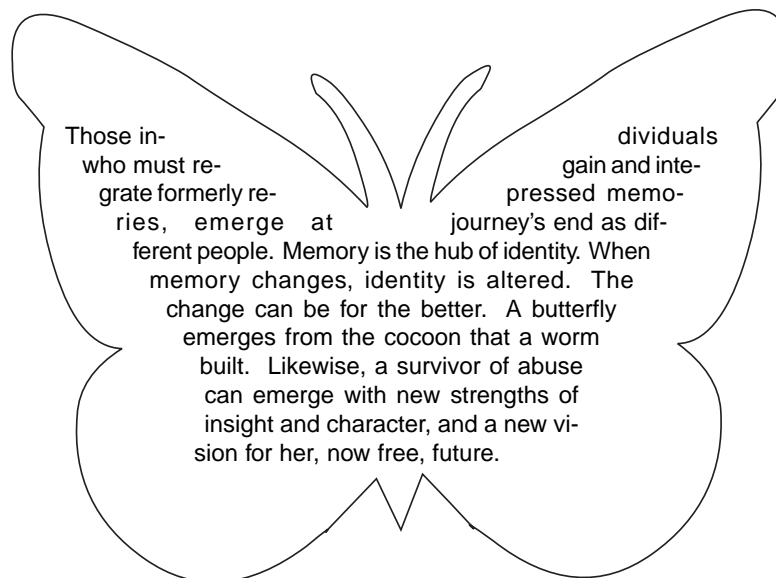
When to Stop Therapy

I think it is neither necessary nor desirable to recover the memory of every moment of time, or every painful event experienced under an unethical hypnosis—unless the unethical hypnotist himself gives the command, "Now you will remember all." While it is going on, any recovery process that is acting in defiance of his repressions pretty well occupies the victim's life. It takes time to recover memories, and time to adjust to the shock of each new revelation. It takes money, if you are paying a therapist.

At some point, she needs to get on with her life. Eventually, she has to say, "I know enough now." Then she

Conclusion

At first, she may feel it is no use to try. It is "hopeless." She is not strong enough. But if she does not try, it IS hopeless! She has to find the strength born of necessity. When she fights to defend herself, she finds the power! The will to fight is the essence of the power to defeat! In the unconscious mind, opposites always can be connected. The current always can flow in the opposite direction. That means that the very depth of a subject's unconscious despair can transform into an equally powerful desperate courage. Because the subject is worth it! The foundational lie is the idea that she is not worth the effort to get free.





...he suggested that if she again defied his diet instructions and ate between meals, she would feel an overpowering impulse to kill her beloved poodle dog.



PART VI

Reference



A Brief History of Hypnosis
4000 BC to 1900 AD

Pavlovian Vocabulary

Brainwashing: The
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Relevant Chronology: 1493
to Present

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He won a science prize for his method, and
got written up in the newspaper...
they...classified the information Top Secret.

A Brief History of Hypnosis

4000 BC to 1900 AD

Faith Healing
Versus Scientific
Theories



Mesmer



Marquis De
Puysegur



Liebeault,
Bernheim, and the
“Nancy School”



Charcot et al

Hypnotists are afraid of their subjects. There is something weird, uncanny, unbelievable about the seance, and something ominous about the untruths the operator tells his victims...Most people are afraid of other people even under the conditions of routine contact...tempting is the opportunity for the hypnotist...

Robert W. Marks, *The Story of Hypnotism*, pp. 117-118

Ancient and Medieval Hypnosis

Trance induction and brainwashing are both very ancient technologies. Aspects of them usually have appeared wherever there were people. **Hypnosis**¹ goes back at least as far as ancient Egypt. Papyri in the British Museum, dated 3766 BC, describe the Sorcerer Tchtcha-em-ankh doing hypnosis at King Khufu’s court. Egyptian pharaohs used **hypnoprogrammed couriers** called “messen-

gers of the gods,” in 1500 BC. Bas-relief on a tomb at Thebes shows a priest inducing hypnosis.

Technologies for systematic control of entranced subjects and for **self-induction** of deep trance were soon all over the map. Buddhism and Hinduism used sophisticated induction methods. Chaldean magicians skillfully manipulated trance subjects. Abyssinian fakirs made people into slaves using hypnotic techniques.

1. **Hypnosis** is the management of a person in trance by an awake operator who seeks automatic obedience using such conventions as a re-induction cue, posthypnotic suggestions, and suggested amnesia.



In 500 BC, **sleep temples** in Egypt offered a nine-day cure by (drug-induced) sleep and by suggested “gods” appearing in dreams. In 400 BC, the Delphic and other ancient Greek oracles, began to compete, offering drug- and stress-induced trance experience. Priests induced hypnosis in Aesculapian sleep temples by ceremonial inductions, then gave healing suggestions.

Hypnosis also found its way to the Northern peoples of Europe. Celtic druids used it. The ancient Finnish classic, the *Kalevala*, describes hypnotic trance in detail. Like other ancient peoples, they did not know why it worked, only that it did. It was not until the beginning of Europe’s Renaissance that the *why* of hypnosis first became a serious issue.

Faith Healing Versus Scientific Theories

“If there be anything preternatural about this disease, I order in the name of Jesus that it manifest itself immediately.”

- Father Gassner

From 1500 AD to 1950 AD, the history of hypnosis was embodied in a sequence of interesting personalities who publicly argued, experimented, treated patients, and then wrote about those experiments and treatments.

Nettesheim

Agrippa von Nettesheim (b. 1486, d. 1535), court physician to Franz I, first put hypnosis under scientific scru-

tiny. He described trance, and hypnotic management of a person in trance, in a book, *Occulta Philosophica*. The association of hypnosis with the word **occult**, meaning “secret,” comes from that title.

Paracelsus

Paracelsus (d. 1541) was the next European to describe the phenomena of hypnotism. He called it **magic**, a word which then meant any mysterious science. It was Paracelsus who first made it clear that hypnosis was a technology with striking moral implications. (The Catholic Church, ironically, persecuted him for his statement that the mind can both cause and cure some types of illness.)



Paracelsus first distinguished ethical from unethical hypnosis. He called hypnosis used with benevolent intentions for medical purposes, white magic. He called hypnotism used harmfully, or for exploitation, black magic.

Greatrakes and Bagnone

Valentine Greatrakes (b. 1628, d. 1683), “the great Irish stroaker,” hypnotized and suggested healing to masses of Irish folk. In Italy, around the same time, Francisco Bagnone did the same. Both healed in the religious tradition.

Maxwell

De Medicina Magnetica by Guillaume Maxwell, a Scot of noble ancestry, was published in 1679. Like other Renaissance thinkers, Maxwell was looking for scientific explanations for natural phenomena. He proposed the theory that trance involved magnetic force, was transmissible, and was useful for healing. He believed that the magnetic force could result in an operator (assumed to be male) acquiring total erotic control over females.¹

Gassner

Father Johann Joseph Gassner (b. 1727) was more well-known and sought after to perform healings and **exorcisms** than even Greatrakes or Bagnone. At the peak of Gassner's long career, he exorcised patients in the presence of both Protestant and Catholic clergy, doctors, aristocrats, and skeptics. A notary public recorded his words. The authenticity of his healings was attested to by honorable observers. Despite the hoopla, all agreed that Gassner was a good man, an humble cleric, a country mouse who served the Lord by working miracles. He worked in the tradition of Medieval Catholicism and always gave God the glory.

Gassner developed a good methodology for trance healing. It was written down, so we know exactly how he proceeded. In a typical case, a nun afflicted with convulsive fits knelt before him. He asked her name, the nature of her sickness, and whether she agreed to his authority. She answered his questions and agreed to his authority. Gassner then said in Latin: "If there be anything preternatural about this disease, I order in the name of Jesus that it manifest itself immediately."

The nun went into convulsions. To Gassner, this proved that her illness was not natural, but caused by an evil spirit. A modern hypnotist might say that Gassner had informed the nun's unconscious that, if hers was a psychosomatic ("preternatural") rather than an organic disease, she would manifest the symptoms immediately. If she could make symptoms occur by an act of mind on demand, Gassner intuitively understood that she might also be motivated to suppress them by an act of mind, on demand.

Gassner then gave the nun a long series of suggestions to obey. He demonstrated power over the evil spirit by commanding it (also in Latin) to cause convulsions here and there in a series of named locations in her body. He also commanded it to display various emotions. Finally, he demanded "the appearance of death" (**coma**: the deepest trance level). All of his orders were obeyed. Each submission to Gassner's suggestions sent the nun into yet deeper trance and made her more responsive to his next suggestion. After she showed the appearance of death, he gave his final suggestion—the expelling of the evil spirit. She was cured, and she thanked God for it.

He used the same initial procedure with every patient. If Gassner asked the patient to manifest symptoms and no symptoms appeared, then he knew—intuitively or from experience—that the patient was either not capable of **automatistic** (deep) trance response, or that the disease was organic in origin, or both. In such cases, Gassner always referred the patient to a regular physician.

Mesmer

The magnetic treatment must necessarily be dangerous to morality. While proposing to cure diseases which require prolonged treatment, pleasing and precious emotions are excited...But morally they must be condemned...

- Secret Addendum, Franklin Commission Report

Although Mesmer (b. 1734) was only seven years younger than Gassner, he followed the rebellious new generation's way of thinking. As a Renaissance man, he was not satisfied to let the thought of faith making a person whole be enough. Mesmer wanted to replace explanations for the phenomena of trance which were based on faith with explanations based on science.

Mesmer Testifies Against Gassner

Father Gassner's healing **exorcisms** were drawing such big crowds that the German government, in 1775, decided to investigate him. Since Mesmer was known to them and had observed Gassner at work, the Commission invited Mesmer to testify before them. Gassner was not invited to be present, nor was he given the opportunity to present a counter-demonstration. It turned out tragically for the priest.

1. With trance, what you expect is what you are likely to get, since subjects respond to suggestive cues.



Mesmer demonstrated to the Commission that he could simply touch patients and get symptoms to appear, and disappear—including convulsions. He caused an epileptic man in the room to have a seizure. He caused a member of the commission who was subject to convulsions to have one—and then to stop having it.¹

By then the Commission was thoroughly in rapport with Mesmer. He then told them that Gassner was not really working religious miracles, but was actually using the same “magnetic fluid” that Mesmer himself used. Following Maxwell’s theories, Mesmer told them that one brain could affect another by invisible magnetic rays that passed through the air from **magnetizer** to **subject**. He called the process **animal magnetism** to distinguish it from the physical function of magnetism operant in a compass’s needle.

Mesmer also believed that he put his brain into a healing mental state, then transmitted that healing by the physical act of reaching out toward the patient. He thought he could move the invisible fluid around by hand motions. If he actually stroked the subject, he called those motions **magnetic strokings**. When he used hand movements which passed over the body, either slightly touching or moving parallel to it, at a slight distance away, without touching, he called them **passes**. He said that Gassner’s exorcisms were accomplished using the magnetic fluid, and it could be done by anyone.

The Commission believed Mesmer. Despite Gassner’s years of piety, humility, and unselfish service in healing the sick, the priest was forced into retirement in disgrace. He remained thus until his death, in 1779.

Suggested Crisis

Mesmer induced trance by **magnetic passes**. One of his disciples, Deleuze, later described the method in an instruction manual for student mesmerists. To conduct the magnetic passes,

*...draw them [your hands] along the arm to the extremity of the fingers, touching lightly...Then descend slowly along the body as far as the knees, or farther... (Deleuze, **Practical Instruction in Animal Magnetism**, pp. 22-45)*

In addition to such strokings and passes, Mesmer’s medical techniques included bleeding, emetics, magnets, and **electric shocks** (something new). After he, himself, became controversial in Vienna, Mesmer moved to Paris. There, his methods became even more bizarre, and his clien-

tele, mostly high-born and wealthy girls and women, expanded. Mesmer had developed a system for mesmerizing many persons at the same time!

The patients, usually more than two-hundred, came every day to his home, where they spent the entire day. A large container, called the **baquet**, sat in the center of the large, semi-dark treatment room. The baquet was supposedly a source of healing energy to the persons who were seated around its outside, grasping the iron rods and ropes which protruded from it. Masonic symbols adorned the walls of the room. (Mesmer and his friend Mozart belonged to a Viennese Masonic lodge.) Magnets hung from the ceiling. The air was thick with burning incense. The patients were given cream of tartar (a laxative) as preparation.²



Mesmer then appeared, wearing a long lilac overgarment. As his private orchestra played soft music in the background, Mesmer paced their melody with movements of his baton. He stirred up the invisible fluid (and the patients) with lively motions of his wand when things were too calm. He laid it down and played his glass harmonica with the band once things became lively.

1. Modern experimental hypnotists have repeated Mesmer’s experiment and confirmed that convulsions can be both started and stopped by suggestion.

2. They would quickly become laxative dependent.

The daily induction continued until the patients' **crises** began, generally after two or three hours. Mesmer and his disciples, the **mesmerists**, moved from patient to patient, moving around the invisible fluid—**mesmerizing**. First timers showed little reaction to Mesmer's efforts. More experienced attendees produced the behavior which Mesmer expected. They

...would laugh, sweat, yawn, shiver; most of them had bowel movements, a sure sign of the effect of the magnetism...[some] shouted, cried, fell asleep, or lost consciousness...laughter and shivers became convulsive....Convulsions became violent and mixed with moanings of pain, intense hiccups, and uncontrollable crying. (Lawrence and Perry, p. 59)

Lawrence and Perry also described Mesmer's subjects as "embracing passionately" or pushing another person away "violently." Extreme behavior was encouraged by the setup. The winners, those who behaved in the most bizarre and violent manner, were taken to a separate **crisis chamber**. It was completely padded, in expectation of convulsions. Mesmer personally treated the patients in that crisis chamber. He did not allow any other person to be present.¹

About 25% of the group (the normal percentage of **somnambulists**) had a "complete crisis," lasting several hours. In Mesmer's magnetic scenario, crisis was followed by a period of "coma." Mesmer believed his treatment—and the brain overload it generated—was psychologically and physically healing.²

The Franklin Commission

Mesmer's critics argued that his treatments were seductive, indecent, and dangerous to the women's mental stability. In 1784, the King of France directed a French scientific commission to investigate the nature of mesmerism, in general, and the claims of Mesmer, in particular. The royal Commission members included Bailly (a noted astronomer and the Commission's Reporter), De Bory, Majault, Sallin, d'Arcet, Guillotin (inventor of the guillotine), Le Roy, and Lavoisier (founder of the science of chemistry). The Commission's Chairman was Dr. Benjamin Franklin, the American ambassador to France.

Mesmer was out of town, so they studied his theory

and practice as exemplified in the treatments provided by his disciple, Deslon. The Commission members were especially interested in the **crisis**:

*These convulsions are remarkable for their number, duration, and force, and have been known to persist for more than three hours. They are characterized by involuntary, jerking movements in all the limbs, and in the whole body, by contraction of the throat, by twitching in the hypochondriac and epigastric regions, by dimness and rolling of the eyes, by piercing cries, tears, hiccoughs, and immoderate laughter. They are preceded or followed by a state of languor or dreaminess, by a species of depression, and even by stupor. The slightest sudden noise causes the patient to start, and it has been observed that he is affected by a change of time or tune in the airs performed on the pianoforte; that his agitation is increased by a more lively movement, and that his convulsions then become more violent. (Commission Report, quoted in Binet and Fere, *Animal Magnetism*, 1887, p. 9)*

Top Secret: For the King's Eyes Only—

For comic relief, read the Commission's "Secret Report" to the King of France. Only one copy of this addendum to their report existed for forty-two years, and it was top secret: "for the king's eyes only."³

The Secret Report concerns morality. Most of Mesmer's clients were female, and Mesmer's main interest was the crisis that his treatment elicited in many of them. In veiled and poetic language, the report says that the ladies observed in "crisis" were unknowingly experiencing sexual orgasm brought on by expectation, stimulation (all that gentle stroking, including of the abdomen), and example.

The magnetizer generally keeps the patient's knees enclosed within his own, and consequently the knees and all the lower parts of the body are in close contact. The hand is applied to the hypochondriac region, and sometimes to that of the ovarium, so that the touch is exerted at once on many parts, and these the most sensitive parts of the body...the two faces almost touch, the breath is intermingled...

1. In private consultation, mesmerists physically stroked the subject's body from her head to the center of her abdomen (which Mesmer considered a site of magnetic activity). Others combined the strokes with passes. Some disciples later gave up Mesmer's practice of being alone with patients after accusations of sexual exploitation emerged.

2. Brain overload remains an induction staple from sex to psychiatry (used in therapies from abreaction to electroshock): "...the identical pattern of mounting nervous excitement and tension, leading on to states of collapse, temporary sleep and highly increased suggestibility." (Sargant, *The Mind Possessed*, p. 20)

3. The Franklin Commission Report soon appeared in English: "Animal Magnetism: Report of Dr. (Benjamin) Franklin and other Commissioners on Col. Stone's Pamphlet." (Philadelphia: J. Johnson, 1785; Philadelphia: H. Perkins, 1837. The Secret Addendum became available in English after the translation of *Animal Magnetism*. by Binet and Fere.



The report made clear that there was no specific touching of the genitalia. It noted, however, that prolonged touching did not need to be specific for the patients to experience erotic arousal and climax:

Women have, as a rule, more mobile nerves; their imagination is more lively and more easily excited...In touching any given part, it may be said that they are touched all over the body.

Once the first subjects entered crisis, any others who would experience it tended to soon join in. The report explained that was because

...the mobility of their nerves also inclines them more readily to imitation...women are like musical strings stretched in perfect unison; when one is moved, all the others are instantly affected....This ...explains why the crises in women are more frequent, more violent, and of longer duration than in men...

Bailly, the Reporter, described the physical signs of the crisis:

...the respiration is short and interrupted, the chest heaves rapidly, convulsions set in, and either the limbs or the whole body is agitated by sudden movements. In lively and sensitive women this last stage, which terminates the sweetest emotion, is often a convulsion; to this condition there succeed languor, prostration...

In the private report for the king, the Commission concluded:

The magnetic treatment must necessarily be dangerous to morality. While proposing to cure diseases which require prolonged treatment, pleasing and precious emotions are excited...But morally they must be condemned...

Bailly also noted that the lieutenant of police had asked M. Deslon (whose magnetizations the Commission had been observing) “whether, when a woman is magnetized and passing through the crisis, it would not be easy to outrage [rape] her.” Deslon “replied in the affirmative.” Deslon added that, for this reason, only “he and his colleagues, pledged by their position to act with probity, were entitled and privileged to practise magnetism.”

The Commission members were not so confident that all danger could be controlled merely by limiting practice to Deslon and his colleagues. The Secret Addendum

pointed out that the magnetizings could go on for “two or three hours at a time,” a prolonged time during which “the physician can, if he will, take advantage of his patient...and no one can rely on being always master of his will.”

Like Maxwell, Mesmer and his disciples believed that animal magnetism caused irrepressible sexual desire in women. The induction technique which the mesmerizers used actually maneuvered the female subject toward their expected outcome of sexual desire. The Secret Addendum was correct about the treatment being risky to morality.

Mesmer Loses Face—The Royal Commission rejected Mesmer’s hypothesis of an invisible magnetic fluid. It concluded that the “chief causes of the effects ascribed to animal magnetism are contact, imagination, and imitation.” After 80,000 copies of the Commission’s general Report were printed and distributed, Mesmer then had to take a turn out of favor.

Ben Franklin went home. Revolution overthrew the French monarchy. Bailly, Lavoisier, and Thouret were executed by the guillotine. Mesmer argued with the scientists, trying to get them to accept that the invisible magnetic fluid was real. Eventually, he gave up and retired to Germany. He died there in 1815. In the history of hypnosis, however, he is important.

- Mesmer was the first person to push the scientific establishment to consider a scientific explanation for hypnotism. His relentless campaigning started the scientific study of hypnosis—and of the human unconscious.
- Mesmer emphasized the hypnotic phenomenon of **rapport**, which he defined as the mesmerist’s mental sensitivity to the patient. (Puysegur later found it worked both ways.)
- Mesmer induced a state of **suggestibility**, then gave **suggestions** to relieve the patient’s symptoms.
- Mesmer noted natural individual differences in **susceptibility**.
- Mesmer observed that repeated inductions progressively **trained** a subject and increased his or her **depth** of response.

After Mesmer, European scientists exploded in a frenzy of experimentation.

Abbe Faria

Abbe Faria came to Paris from India in 1814. He was the next sensational hypnotist after Mesmer. He hypnotized over 5,000 people. He used none of the “magnetic” props of Mesmer, and he cured many persons. He insisted his cures were not because of magnetism, but due to the hopeful expectancy and mental co-operation of his patients. He thereby shifted the study of trance from physical scientists to psychologists. Study of the physics of trance did not resume until the 1950s.

Deleuze

Jose Philippe Francois Deleuze was a French botanist whose two books, *Practical Instruction in Animal Magnetism* (1825), and *Animal Magnetism* (translated into English, 1846), are classic presentations of Mesmer’s ideas. Deleuze believed that only sick people could be hypnotized. He believed that his passes moved magnetic fluid from the client’s head area to his hands or feet. His goal was to create **harmony** in the patient.

His theory had problems, but his skill at hypnotizing was good. He used a **sensory deprivation induction**: a darkened room, comfortable temperature, no other persons present, and no interruptions. He worried a lot about the ethics of magnetizing! He advised that the best way to avoid future problems was to choose one’s magnetist wisely. He said that only a woman should magnetize another woman in order to protect the subject’s virtue, and also because a female patient might be more willing to discuss personal problems with another woman. Also, if a crisis (orgasm) were to occur, he believed that a man should not be present. He warned that visits of a male magnetist to a lady’s home several times a week invited harmful gossip. He advised that, if a man was to magnetize a woman, he should demand the presence of a chaperone.

Deleuze was one of the first hypnotherapists to do **parts therapy**. He talked to different aspects of a person in trance, negotiating among their differing opinions. He noted the increased memory capacity of deeply hypnotized persons. He pointed out the importance of early childhood memories to later personality dynamics. He observed how much people differed in their ability to become hypnotized.

Marquis De Puysegur

No curiosity will lead me to use him [as a hypnotic subject] and so disregard his health and well-being.

- Marquis De Puysegur

The Marquis de Puysegur (1751-1825) was a student of Mesmer who continued and greatly advanced the scientific study of hypnosis after his master’s fall from status.¹ The Marquis was a Frenchman from the highest rank of nobility. He was also a man of strong moral uprightness. That quality of steady virtue protected his work from some of the errors of his master.

Puysegur, together with his two younger brothers, became interested in Mesmer’s healing technique. After Mesmer’s rejection by Parisian authorities, Puysegur went back to the family estate and there tried to accomplish magnetic cures for local peasants. They came to him with real afflictions, such as painful arthritis, rather than with the upper-class neuroses and general boredom of Mesmer’s

clientele. They were ignorant of what behavior Maxwell and Mesmer expected of them in trance (convulsive crises as a climactic stage of their trance). If patients were too ill to come to him, Puysegur went to where they lay, suffering, on straw pallets in thatched-roof cottages.

Puysegur magnetized them by mesmeric passes, believing that he was working with the invisible magnetic fluid, distributing it in a better way. In 1837, he wrote:

...your hand must not be stiff; let your fingers be a little bent...for it is from the end of the fingers that the fluid flows or radiates...give yourself up entirely to feelings of sympathy, and to the wish to relieve your patient. If he feels pain in particular

1. Oldtime authors call him De Puysegur; modern ones, Puysegur. For further information on Puysegur, see Laurence and Perry’s chapter “Artificial Somnambulism,” pp. 103-124, in *Hypnosis, Will, and Memory*; and Ellenberger’s *Discovery of the Unconscious*.



parts, hold your hand some time on that part; continue your operation, for about half an hour.
(quoted in Edmonston, *Hypnosis and Relaxation*)

Puysegur and Race Discover Somnambulism

One of Puysegur's first patients was a young shepherd named Victor Race. No convulsions resulted from his efforts with Victor. Maybe Victor had not heard they were supposed to happen. Instead, the lad went into a profound **sleep**. His condition reminded Puysegur of a sleepwalker, yet, in that sleep, Race showed astonishing intelligence, clarity of mind, and ability to behave as if awake and aware. After the magnetizing was over, Victor was completely **amnesic** for all that had passed.

That episode was a turning point for Puysegur. During future mesmeric sessions, he began regularly to elicit patient responses more like Victor's than like those of Mesmer's clients. Instead of having convulsions, Puysegur's clients fell "asleep." Puysegur was glad. He much preferred "sleep" to "convulsions." As he continued to communicate to his patients an expectation of calm, he got trances so calm they surprised him. They were characterized by what seemed like sleep, or near-sleep, and total **relaxation**.

Puysegur named that state **artificial somnambulism**. (Braid later renamed it **hypnosis**.) The Marquis also recognized that he was dealing with two stages. The first was an **induction stage** during which the magnetist relaxed the subject. Then came a **secondary stage** in which the patient was quiet and obedient and might be given curative suggestions.

Puysegur Defines Somnambulist Phenomena

Puysegur did many significant experiments and analyses of somnambulist phenomena. Mesmer first used the word **rapport** to describe the hypnotic relationship, but he was referring to the mental state of the hypnotist. Puysegur extended the term to mean the intense and very personal bridge of relationship from subject to hypnotist as well as of hypnotist to subject.

Puysegur studied the spontaneous amnesia that sometimes appeared in his subjects. He noted that deeply entranced patients, during the trance, clearly could recall past events from their life, but after the trance they could remember nothing of what had happened during the trance. He noticed that trance improved both memory and mental performance. He was the first experimental hypnotist to systematically study the link between deep trance and extrasensory perceptions. His many experiments in that area began after Victor Race, in trance, seemed able to receive Puysegur's thoughts telepathically.

Puysegur Grapples with Moral Issues

Puysegur, like Paracelsus, the Franklin Commission, and Deleuze, was concerned over the possible immoral use of a somnambulist by her hypnotist. He asked two women in trance if their trance state would enable him to order them to undress. Both assured him that it would not. Their statements put his mind at ease on that subject. He wrote, "There are limits where the authority ceases..." (quoted in Lawrence and Perry, p. 118) Puysegur did not experiment to see if the women's ability to resist was real or imagined.

After Puysegur had done many experiments using Victor Race, he began to display his subject's extraordinary trance sensitivity in public demonstrations in Paris. Twice, Puysegur demonstrated Victor's behavior, in trance, to Mesmer. Victor's health declined. One day, during a trance, he told Puysegur that his health problems now "resulted

from his being exhibited to curious and often incredulous people." (Ellenberger, p. 72)

Puysegur chose the morally sound response:

When he is in a crisis [deep trance], I don't know of anyone more deep, more careful, and more clear-sighted...none can equal him and this saddens me. By next Tuesday, it will be over; this man will not need to be touched any more. No curiosity will lead me to use him and so disregard his health and well-being. (Puysegur, quoted in Lawrence & Perry, p. 108)



Puysegur respected his patients. He taught that magnetized patients should be used neither for stage performances, nor for experimental purposes. He said that the only morally permissible reason for trance induction would be to give medical treatment.

However, he included somnambulists among those qualified to give treatment. He believed that somnambulists could diagnosis illness in other persons and prescribe treatments. His somnambulists, being hypnotized, always believed they could do whatever the hypnotist said they could, and tried their unconscious best. Being in deep trance, the subject's guesses would often be preternaturally accurate. Puysegur's idea became popular and magnetist-somnambulist "medical" pairs became a common (and profitable) stage act.

He did not approve of solo hypno-medical acts, however. One day, Puysegur caught a former patient of his pretending to self-hypnotize, then diagnosing illness and prescribing medication. The Marquis stopped the peasant's profitable quackery.

Puysegur opened a school to teach how to magnetize and how to operate a clinic of magnetic medicine. He taught that Mesmer's theory of hands and batons pushing around a **universal magnetic fluid** was false. Instead, Puysegur said, hypnotic phenomena happened because the magnetist's powerful will of mind set "into action the vital principle of" (the unconscious mind of) his patients. He

was talking about one mind directly influencing another.

Puysegur managed to make it through the French Revolution (which he, at first, supported) serving merely two years in jail. For the rest of his life, he worked with sick people.

Contributions of Puysegur

Puysegur debunked the Maxwell belief that hypnosis must result in erotic abandon. He dumped the Mesmer delusion that it must result in "crisis." He discovered and defined a purer and more researchable condition of trance: somnambulism. He developed a new understanding of the phenomena and medical applications of trance. He created the first psychological theory of hypnosis: that the mental will of the hypnotist stimulates a response in the subject's mind. He urged the use of rapport for good, rather than for evil. His students became a new kind of magnetizer who used the vocabulary created by Mesmer, but whose quiet, medical style of trance management was modeled on Puysegur.

His work reversed some of the scientific community's rejection of animal magnetism resulting from the Franklin Commission's Report. Because of Puysegur, for the next hundred years, France became a world center for the scientific study of hypnotism. The grand old man must have grieved to see what some of those researchers did to their subjects, but one of them, Liebeault, worked in the best of Puysegur's moral tradition.

Liebeault, Bernheim, and the "Nancy School"

...92% of his attempts were successful, which may reflect the innate trust of his clientele.

- William James, *The Principles of Psychology*, p. 594

Liebeault

William James, in the above quote, was speaking of Auguste Ambroise Liebeault (1823-1904), the next important French hypnosis researcher after Puysegur. Liebeault was a poverty-stricken country doctor and a student of Azam (the first person to attempt artificial personality-splitting under hypnosis). For twenty years, Liebeault toiled in obscurity, practicing his hypnotic techniques on patients. Some people called him a quack. They were wrong.

It was Liebeault who first recognized the connection between the physical act of looking upward and increased susceptibility to hypnosis. He first numbered and characterized the **depth stages of trance**. Liebeault insisted

that trance induction was normal, that it worked because of a natural quality of human suggestibility, and that it could cure people without harming them. He asked nothing for his help. He said, "If you wish to be treated by drugs you must pay. If, however, you allow me to treat you by hypnosis, I will do so free of charge!" His rate of successful hypnoses was the highest known, to date.

Liebeault, the unselfish physician to peasants, whose every recorded hypnotic action suggested an attitude of kindness and respect for his patients, also insisted that abusive hypnosis was possible. He believed that the hypnotist was morally responsible for the response of a subject to suggestions given under hypnosis.



In 1866, he published a book on his methods, *Du Sommeil*. Only one copy sold.

Bernheim

A sciatica patient, who had previously been seen by the Nancy Medical School's prominent neurologist, Hippolyte Marie Bernheim (1840-1919), and had not been helped, tried Liebeault's alternative treatment and was cured. After hearing that, Bernheim set out to confront and expose the quack. Upon meeting Liebeault, however, Bernheim became convinced that the unpretentious country doctor had discovered a valuable healing technique.

Bernheim first became Liebeault's pupil, then his professional associate. He taught Liebeault's methods in his classes at the medical school. More copies of *Du Sommeil* sold. The partners, Liebeault and Bernheim, became known as the **Nancy School**. Over the coming years, they hypnotized and treated more than 12,000 persons.

The Nancy School used **mind blanking** ("think of nothing"), and **eye fixation** ("look into my eyes"), followed by **eye closure** ("now just close your eyes"), and **sleep suggestions** to induct subjects. They demonstrated, over and over, that hypnosis did not have to be the weird theatre of Mesmer or the weird medicine of Charcot. In their clinic, the trance experience was quiet, normal, and focused on its medical purpose.

Bernheim experimented with **posthypnotic suggestion**. He hypnotized a former army sergeant and told him to go to Dr. Liebeault on a certain day two months later, "and you will see the President of the Republic—who will give you a medal and a pension." The subject was amnesic for Bernheim's instructions. On the specified day, he entered Liebeault's office, walked over to where a visitor stood, bowed low to him, and called him "Your Excellency." As Liebeault approached, the sergeant again bowed to the confused visitor, and murmured, "I thank Your Excellency."

Liebeault asked, "To whom are you speaking?"

The sergeant answered, "Obviously, to the President of the Republic."

Bernheim pondered the phenomenon of **rapport**, that highly charged and special relationship between hypnotist and patient.¹ He recognized the extent to which a suggestible person will **role-play** and act out the expectation of the hypnotist: "A word, a motion, a tone of voice puts them on the track."



1. Freud, who began his clinical phase as a hypnotist, was influenced by Bernheim. Freud evolved the concept of **rapport** into the idea of **transference**.

He pared the technique of verbal induction down to its essential of **suggested inhibition**, a single-idea focus on **sleep**. He told his subjects to think only of sleep. He suggested that their eyes were tired and beginning to wink, with eyelids feeling heavy, and vision becoming blurred. Then he would suggest eye closure, **eyelid catalepsy** (“Your lids are stuck together, you cannot open them.”), and falling asleep.

Bernheim wrote two books: *Hypnosis and Suggestion in Psychotherapy* (1884) and *Suggestive Therapeutics* (1889). In them, he clearly described the situation of an amnesic hypnotic subject who unknowingly carries out posthypnotic commands. He believed that a susceptible hypnotic subject could be caused to commit violence, or to submit to seduction, because of his **automatism**. He said that false memories could be suggested under hypnosis. He believed that hypnotized women could be sexually abused. He kept a tally of crimes which had been committed upon hypnotized women, or had been committed as a result of hypnotic suggestion.

Bernheim believed that posthypnotic obedience to immoral suggestion was caused by **automatism**, rather than by a subject’s lack of character. One day, he staged an experiment in this area. He suggested, to a hypnotized man, that a **hallucination** of a person standing in front of him had just insulted him. The hypnotist then handed his subject a knife made of paper, told him it was a “dagger,” and instructed him to stab the hallucination. The subject leaped forward, making fierce stabbing motions. Then he stood rigid, wild-eyed and trembling, staring at the “man” whom he had just killed.

He also wrote about **disguised induction**: hypnosis obtained in a subject without using a recognized induction process and without having informed the subject. And he considered the physiological basis of trance, noting that very sick, or unconscious, people may behave as if hypnotized.

Bernheim’s writings were widely accepted as authoritative; they helped move him into leadership of the Nancy group.

Beaunis

Beaunis, the third member of the Nancy School, was a French lawyer and Bernheim’s friend. Beaunis agreed with Bernheim that a trained somnambulist can be reduced to automaton-like behavior, even to the extent of doing self-injurious and unethical actions. Beaunis was also a hypnotist. One day, he hypnotized a young woman and gave her a posthypnotic suggestion to see him come into her room and wish her “Happy New Year” on the morning of January 1, 1885, six months away. On January 1, Beaunis was in

Paris, yet the subject (obeying his suggestion for the posthypnotic hallucination) “saw” him in her room in Nancy. She was flattered that the great man had personally come to greet her.

Liegeois

Like Beaunis, Jules Liegeois was a lawyer. He was fascinated with hypnosis and represented himself as an individual who was deeply concerned about the unethical use of hypnosis. He was a member of the prestigious Academy of Moral and Political Sciences, and he produced a lengthy (four-chapter) monograph on “the possibility of utilizing the hypnotic state for criminal actions...and presented a report on hypnotic suggestion in its relation to law.” (**Hammerschlag, pp. 14-15**) He cited numerous French legal cases involving hypnosis, from 1830 up to his day.

Like the others, Liegeois was himself a hypnotist. He had a somnambulist subject named Camille “...[who] would remain impassive and indifferent when a pin was stuck full length through her arm or a piece of burning charcoal put in her hand...” (That goes far toward “utilizing the hypnotic state for criminal actions,” as far as I’m concerned.) In another experiment, Liegeois used posthypnotic suggestion to cause a girl to make, before a government official, a detailed, false confession in which she claimed to have committed a bizarre and horrible murder of her friend.

Liegeois was the first hypnotist to use a telephone to contact, and rehypnotize, a subject:

*M. Liegeois has hypnotized some of his subjects at a distance of 1 1/2 kilometers by giving them an intimation [induction cue] to that effect through a telephone. (William James, *The Principles of Psychology*, p. 594)*

Binet and Fere

These two French hypnosis researchers, Binet and Fere, technically belonged to the Nancy School’s competition, the Salpetriere group. Fere was an Assistant Physician at the Salpetriere mental hospital in Paris. However, Binet and Fere sided with the Nancy school in public arguments on the issue of **antisocial hypnosis**. In their coauthored book, *Animal Magnetism* (published in English in 1888), they insisted that obedience to abusive or criminal suggestions was possible in a heavily conditioned subject:

Many persons are agitated by the idea that a stranger may influence and dispose of them as if they were mere automata. This is certainly dangerous to human liberty, and it is a danger which increases with the repetition of experiments.



A Case of Suggested Theft

Liebeault devoted a chapter in his book to the dangers of hypnosis. Yet he personally was involved in a tragic case of crime suggested under hypnosis. The case began one October day, in 1886, when another doctor, X, visited Liebeault. X said he had come in hopes of seeing an experiment that would demonstrate the possibility of criminal suggestion.

Dr. Liebeault good-naturedly agreed and hypnotized a somnambulist teen-aged boy, N, for the demonstration. The doctor told N that on the following morning he would go to the house of a certain one of the doctor's friends and, therein, steal a pair of small statues that were displayed on a chimney ledge. He further instructed that, after two days had passed, the boy would feel an emotion of sincere guilt for what he had done and return the statues to their owner.

While N was still hypnotized, before Dr. Liebeault could conclude the trance, Dr. X excitedly "intruded and suggested in an authoritarian voice: 'You will steal! Do you hear me? You will steal!'" (Lawrence and Perry, p. 230)

Liebeault then awakened the boy and sent him on his way. Dr. X happened to encounter the unfortunate lad again several hours afterward in a local restaurant. X was with friends to whom he wished to display his ability to achieve obedience in the controversial area of giving criminal suggestions. This time X hypnotized N himself. Then X told N to steal several small items plus a raincoat which was hanging from a wall hook. N obeyed every suggestion. Unfortunately, X neglected to cancel his urgings to "Steal!" before awakening N and leaving, so N was left with the suggestion functioning posthypnotically.

At first, no trouble was apparent. N stole the statues as Liebeault had directed, then felt guilty and returned them, as directed. But, unknown to Liebeault, he then continued to steal. Shortly afterward he was arrested for theft of a series of cheap items, mostly clothing. Police found in his pocket a notebook in which he had kept a record of every stolen article. He also confessed.

Liegeois visited N in jail. He requested permission from the court to testify on the possible role of Dr. X and the experiment in the case. His offer was turned down. N was sent to jail for two months.

Liebeault volunteered to hypnotize N and undo the problem suggestion. N's father, however, who was exceedingly unhappy about the previous hypnoses of his (underage) son, forbade any further hypnoses.

Binet and Fere said, that from the point of view of a predatory hypnotist, **amnesia**—spontaneous or suggested—was the most important aspect of hypnosis.

These facts show that the hypnotic subject may become the instrument of a terrible crime, the more terrible since, immediately after the act is accomplished, all may be forgotten—the crime, the impulse, and its instigator.

They reported an incident in which the subject's amnesia stayed firm, despite physical injury during trance. A hypnotized woman, with whom they were experimenting, fell. Her head hit hard on the floor. Neither her fall, nor the excitement of spectators in the room after she fell, brought her out of trance. When Binet and Fere awakened her from

trance in the usual manner...

...the subject was astonished by the pain in her head...[she]could not understand whence it came. We are, therefore, justified in the assertion that a subject of profound hypnotism may undergo all sorts of violence without retaining any recollection or consciousness of it...We even think it possible that a subject might be violated [raped] in the hypnotic state, in which she would be unable to offer any resistance. (Binet and Fere, p. 367)

They also observed that subjects who suffered from suggested amnesia could remember all under **rehypnotization**.

Charcot and the Salpetriere Group

The hypnotic sleep, which is produced with so much difficulty and delay in fresh subjects, occurs with alarming rapidity in those who have been long under treatment. Some of our patients are hypnotized at once by a single abrupt gesture, and this may be effected in all places alike, and at any hour of the day. If we meet one of these subjects crossing the courtyard, an exclamation or abrupt gesture will cause her to stop short and become motionless in catalepsy. She may be as instantaneously awakened by breathing on her forehead or eyes....This is a somewhat important fact from the medico-legal point of view....a suggestion may be given in a sleep of very short duration...in the course of fifteen seconds we could throw a subject into a lethargy, then into somnambulism, suggest an act, and then awake him. It is, therefore, possible that an individual might make use of the fifteen seconds in which he found himself alone with a susceptible subject to inculcate an idea, an hallucination, or an impulse.

- Binet and Fere, 1888, *Animal Magnetism*, pp. 364-5

Binet and Fere may have written the above warning with the situation in mind of the Salpetriere, a Paris medical poor-house and insane asylum that housed more than 4,000 women. Jean Marie Charcot worked and researched there. He was the chief doctor for many of those women, especially ones who had convulsions—physiological or hysterical.

Charcot began his publishing career with a celebrated report on how to distinguish true epileptics from hysterics who were unconsciously mimicking epilepsy. He also did good studies of lung and kidney disorders, and worthwhile observations on **hysterical paralyses**. Soon, Charcot was considered the foremost neurologist in the world. He became rich and powerful. Foreign, as well as French, patients sought him out. The Salpetriere became famous because Charcot and the famous physiologists, Tourette and Babinsky, were there.

Charcot then began to study **hysteria** using the same method of physiological observation that had worked so well with the epilepsy mimickers and the patients with hysterical paralyses. He theorized 1) the existence of an **unconscious**, and 2) the role of an unconscious **fixed idea** in causing a **neurosis** (concepts which Freud would later build on). He discovered that he could suggest to a hypnotic subject that she had a paralysis and it would appear. He could then suggest that her paralysis had gone, and it would disappear. He noticed that “attacks” of hypnosis were followed by amnesia, and that those lost memories could be recalled under rehypnotization, if there was no

associated brain damage. Those observations were all sound.

Weird Science

While studying hypnosis, Charcot tried to boil down all the phenomena of trance into a single neurological illness. That gross oversimplification caused him to make even more misses than hits. For example, Charcot declared that only women could be hypnotized—and only those women who had that mental illness which he called “hysteria.”

Charcot taught his students that all hysterics are sexually obsessed and sexually uncontrolled, having insatiable nymphomaniac tendencies (the ghost of Maxwell here?). He taught that a hysteric was likely to have “hysterical stigmata” [hickeys? bruises? abraisions?] scattered over her body, especially on the breasts, lower abdomen, and inside her mouth and vagina. Some authors say Charcot taught that hysterics are numb everywhere except in the genital area. Other writers say Charcot claimed that the stigmata-affected areas were insensitive in a hysteric and could be stimulated without the woman knowing it. Charcot also declared that all hysterics were liars (likely, for example, to falsely claim sexual abuse by their doctor, interns, and attendants).

Since he insisted that any female who was capable of trance was an hysteric, mentally ill, dangerous, and seductive, Charcot could not imagine hypnosis being used for a therapeutic purpose. He claimed that every trance

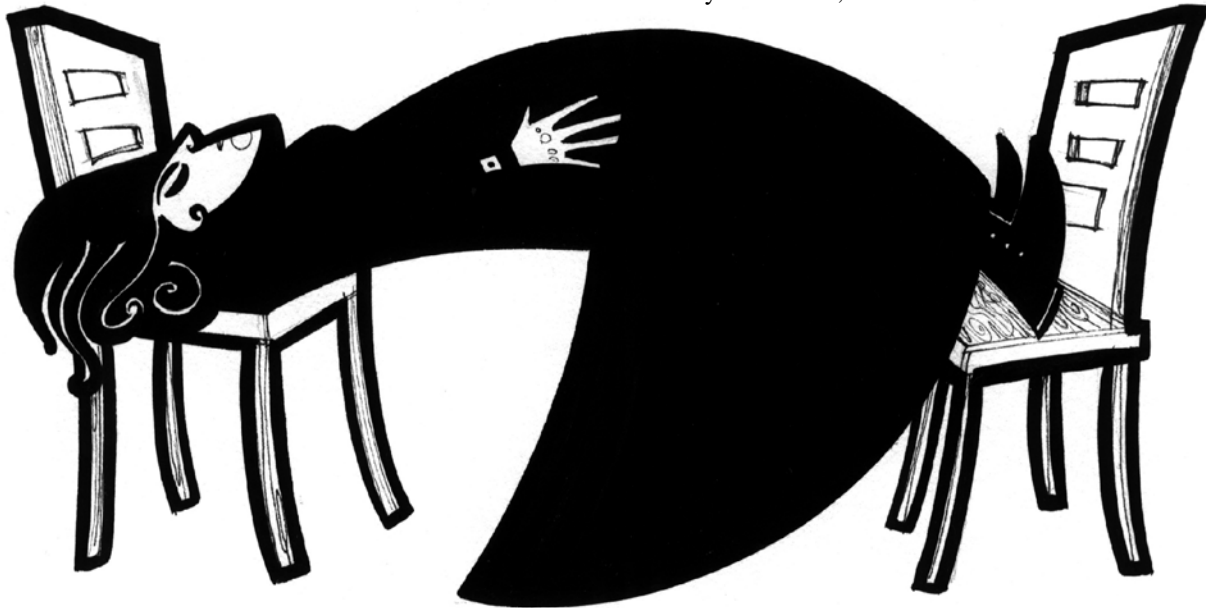


crisis (using the same vocabulary as Mesmer) was divided into a complex series of set stages. Charcot did not realize that one subject's behavior had suggested this pattern to him—and later subjects had mimicked his expectations.

Charcot believed that hysterics entered trance spontaneously. He claimed that he never deliberately hypnotized anybody. If the subject did not go into trance spontaneously, however, when Charcot wanted her to do so, the doctor would press on her eyeballs until she did enter trance!

Charcot invited all the intellectuals of Paris to come and watch his stable, of less than a dozen young women, going through their crises at his regularly scheduled psychiatric circus at the Salpêtrière. He did not realize that the lecture preceding his demonstration told the suggestible patient exactly how to behave in her trance. (And saved her from getting her eyeballs pushed in.)

He first lectured that stimulation of the female hysteric's erotic zones would trigger a predictable sequence of crisis stages. Then he would choose a subject, begin to stimulate her zones, and the show began. The first expected stage was rigidity ("human plank"). The



woman would arch her body from head to heels. She could, in this rigid, catatonic state, be placed between two chairs and sat, walked, or bounced upon. Her second expected stage involved overt sexual delusions. In the last stage, the woman hallucinated seeing animals around her. (She was surrounded by animals, all right, but they were human.)

Lewd Desires—A further tragedy suffered by Charcot's patients was inadequate supervision. Not only was their doctor a sexually-twisted ghoul, but other Salpêtrière staff members followed his example. Charcot's

description of their supposed illness was an ugly male fantasy projected (or forced) onto these suggestible women (usually young and pretty) who had been publicly defined by him as having a disease characterized by uncontrollable sexual fantasies, lewd desires, amnesia following "crisis," and compulsions to falsely claim sexual molestation.

Charcot's "hysterics" were frequently visited, hypnotized, and ? , in their hospital quarters by inappropriate people. For example, in 1889, a group of male students at the Salpêtrière tried to cause a young woman named Witt., while in trance, to "strip and take a bath." She was not as sexually voracious and uncontrolled as Charcot taught. She **converted** their inappropriate order and, instead, went into "a violent fit of hysterics." Another "hysteric" gave birth to a child mysteriously conceived in the hospital.

Like Mesmer, Charcot is remembered for persuading the French scientific establishment to seriously investigate hypnotic phenomena. Bernheim later recalled, however, that of all the thousands of clients he hypnotized, the only one who ever displayed Charcot's exact list of trance stages, was a former Salpêtrière patient. After his years of fame, Charcot spent an even greater number of years in early retirement, discredited on the basis that

his theories were simply wacky. In the last year of his life (d. 1893), even Charcot realized that he had been mistaken.

In the meantime, his team had spent a lot of time in court arguing with the Nancy School.

The Case of Pauline

Tourette's 1887 book on hypnotism details a case involving the hypno-abuse of one of the Salpetriere's hysterics. Pauline was an 18-year-old girl who was easily hypnotized. One day, she was hypnotized by an unauthorized person who gave her a posthypnotic suggestion that, at 4:00 p.m., she must find the hospital's priest and "embrace" him. He gave her a further posthypnotic suggestion that she would be unable to reveal who had given her that instruction. At 4:00 p.m., Pauline

...suddenly arose, got out of bed and went across the room to the door. The nurse who was on duty asked her where she was going. "I am going to Father X," she said; "I want to embrace him." They thought she had become insane and did not let her go out of the room. This led to an indescribable scene. Pauline made desperate attempts to free herself; she had to be tied down. In the following hours she had an attack of cramp of unusual intensity; she made piercing cries and disturbed the remaining patients. The doctor on duty was informed. After he had made several vain attempts to calm Pauline, the idea occurred to him to put her to sleep so as to bring her to rest by means of suggestion. He now discovered how it all happened, because as soon as Pauline was asleep she told him about the events of the morning without, however, mentioning the name of the one who had given her the suggestion... (Tourette, p. 131, quoted in Hammerschlag, pp. 75-77)

Now the doctor knew what the problem was, but he was unable to cancel the previous suggestion. Pauline's distress continued, unabated, all night. By the next morning, a search had revealed the identity of the perpetrator. He was taken to Pauline's room, required to hypnotize her and undo that frivolous command. He did so. Pauline immediately was released from the posthypnotic compulsion and became calm.

Several days later, however, it all happened again. Pauline had a sudden compulsion to find and embrace the priest. This time, the doctor immediately hypnotized her and asked where she had gotten the suggestion. She said, that morning, on the staircase, she had encountered three persons who had hypnotized her and given her the command to embrace the priest along with the command that she would experience severe pains if she did not embrace him—or if she revealed who had given her the suggestion. Again, Pauline was in acute distress with the need to carry out the suggestion. This time, the doctor could not discover the guilty parties. So they found the priest, and explained the problem to him. He kindly allowed Pauline to embrace him. She then became normal again.

Nancy vs. Salpetriere in Court

Being doctors, Liebeault and Bernheim focused on discovering ways to use hypnosis to solve medical problems. When the lawyers, Liegeois and Beaunis, joined the Nancy School, however, they brought interest in the legal aspects of hypnosis. Between 1884 and 1890, Liegeois and/or Beaunis fought one case after another involving hypnosis.

Liegeois took an absolutistic position: "any individual placed in a somnambulistic state will become in the hands of the experimenter a complete automaton, both morally and physically." He and Beaunis used Bernheim and Liebeault as expert witnesses. They cited experimental re-

sults from the writings of European trance researchers and the outcomes of previous legal cases which had involved hypnotic abuse.

Brouardel was the lawyer who usually argued against Liegeois and Beaunis. Brouardel always insisted that misuse of hypnosis was simply impossible, citing the **dogma of moral integrity**. The dogma is a legal fiction with a long history, which has persisted up to the present day. It deals with the question of whether somebody can be made to do something immoral by means of hypnosis. According to the dogma of moral integrity, if a hypnotist causes a subject to do something immoral, then the subject was an immoral person who wanted to do that immoral thing. If a



hypnotist caused a subject to do something self-injurious, or criminal, the dogma made it, always, the subject's fault.

The Nancy School did not believe in the dogma. Brouardel and the Salpêtrière staff, except for Fere, did believe in it. Brouardel called staff associated with the Salpêtrière as his expert witnesses. Charcot had only a dozen Salpêtrière hysterics on which to experiment, whereas Liebeault and Bernheim had hypnotized thousands of persons of both sexes and all psychological types. The Salpêtrière gang treated their hypnotic subjects with scorn, circus-like manipulation, and inappropriate suggestions. They had awesome credentials, however, and they all insisted that exploitation by means of hypnosis was quite impossible, so sometimes Brouardel would win the case.

The series of legal cases involving hypnosis, which the two sides fought, catapulted the Nancy School from obscurity to the Salpêtrière's level of Parisian notoriety. The persons and their positions became very well-known to Europeans living in that period of history. The most famous case over which they battled was Gabrielle Bompard's murder trial.

Everybody Hypnotized Gabrielle

In 1890, a young woman named Gabrielle Bompard was accused of the murder of Gouffe, a Paris bailiff. She was tried, together with a man named Eyraud who was accused of using suggestions given under hypnosis to cause Gabrielle to commit that murder. In the end, Eyraud received a death sentence and was executed. Gabrielle was sentenced to twenty years in prison at forced labor. Gabrielle's story illustrates the potential fate of a genetically somnambulist European girl in the late 1800s.

After Gabrielle's mother died when she was eight, the child became rebellious. To subdue and control his daughter, her father placed her, for the next decade, in a variety of convent boarding schools. By age eighteen, however, she was considered to have calmed down and was successfully living at home.

Then Gabrielle discovered that her father was sexually involved with the maid. Soon after, Gabrielle took a lover of her own. Wanting to end his daughter's affair, her father sent her to his friend, Dr. Sacreste, for some minor surgery. He privately asked the doctor to hypnotize Gabrielle into a state of emotional and sexual repression. Dr. Sacreste was able to hypnotize Gabrielle deeply enough to perform the surgery with hypnosis as the only anesthetic. While she was hypnotized, Sacreste questioned her regarding the affair. He then gave suggestions meant to end her relationship with the young man, sent her home, and passed on the titillating and shocking private details of her romance to her father.

Gabrielle's lover, however, did not let the affair end. He began to hypnotize Gabrielle himself, giving her suggestions in deep trance which were meant to counter the doctor's influence. Her father sent her to Dr. Sacreste for more treatments. Gabrielle's unconscious was now a battlezone between the two most important people in her life. Her father (via Dr. Sacreste) and her lover, who continued also to hypnotize and give suggestions to her. The content of their suggestions directly conflicted, but both men were training Gabrielle to be an ever more automatic hypnotic subject.

Gabrielle made a final choice. She left home to be with her lover. Her father, considering his battle lost, paid Dr. Sacreste's bill, wrote off his daughter, and returned his attentions to the maid. Gabrielle probably had hoped to live happily ever after with a good man who also happened to be her hypnotist. It didn't turn out that way. Once the thrill of competition for control of Gabrielle was over, her lover, quite unlovingly, abandoned her. That made her what they called in those days, a "fallen woman." With her chances for marriage now ruined, and with no family to fall back on, Gabrielle did what many young people in Europe of that day (and since) in similar circumstances did: she went to the big city, Paris.

In Paris, she met Eyraud, age 48. She also met another man. Both of them hypnotized her—almost daily. Then the murder happened. Afterwards, Gabrielle said that she did not know Eyraud had planned to kill Gouffe. She said that she thought he planned only blackmail. After she killed him, Gabrielle spent the rest of the night alone in her room, frozen in terror, staring at Gouffe's dead body where it lay across the foot of her bed.

The next morning, Eyraud collected the catatonic Gabrielle, and the loot, and fled from Paris to New York City. There, they met a young businessman named Garanger who was flashing lots of cash. Since he was now running short on the funds stolen from Gouffe, Eyraud planned to extort this convenient new target, and therefore cultivated a friendship with Garanger.

Gabrielle, however, saw in the young man's friendship an entirely different set of possibilities. Here, she imagined, was a chance for her to switch men, escape from Eyraud, and straighten out her life. One day, when Eyraud was out of town, Gabrielle told everything to Garanger. Garanger pitied her and spirited her, and himself, away from Eyraud—back to Paris. (He also frequently hypnotized her.)

Bernheim later described Gabrielle as "lacking in moral sense," but she did the right thing at this time (and paid dearly for it). Upon reaching Paris, January 22, 1890,

she and Garanger went directly to the police station. They walked inside together and she turned herself in. She told the police that Eyraud actually was the person who was responsible for Gouffe's murder. She said that Eyraud's hypnotic suggestions had compelled her to lure Gouffe to her room, where she put the rope around his neck, strangled, and robbed him.

Eyraud was arrested in Havana, Cuba, and extradited to France to stand trial. Like all the other criminal hypnotists on trial, he denied ever having deeply hypnotized Gabrielle.

Gabrielle continued to be hypnotized, now by the authorities. They found that her trances were deep and displayed all the accepted proofs of somnambulist automatism. Those hypnoses and interrogations of Gabrielle while in trance, however, were just office entertainment. They had no expected role in the trial. Brouardel, from the Salpetriere group, explained:

Needless to say, none of these questions were related to the events under investigation...She also responded to a number of posthypnotic suggestions with success. These observations buttressed the experts' diagnosis that she was indeed a neurotic individual...It never occurred to us, and it could not occur to us, that hypnotism and hypnotic suggestion could have had a role in the behaviors that Gabrielle was accused of. (Brouardel, quoted in Lawrence & Perry, p. 251)

This famous trial provided an opportunity for the greatest hypnosis experts in Europe to strut their stuff. Liegeois, of the Nancy School, argued that criminal behavior could be suggested under hypnosis. The other experts who testified, however, were all from the Salpetriere: Brouardel, Motet, and Ballet. Those three all adhered to Charcot's positions that:

- a) *The ability to be hypnotized is confined to females and symptomatic of a female mental illness called "hysteria."*
- b) *Hysterics are, by nature, immoral persons.*
- c) *Crime cannot be caused by hypnotic suggestion.*

Dr. Sacreste testified at the trial in Gabrielle's defense. He said that, being a somnambulist, she would have obeyed even criminal suggestions. A prosecution hypnotist rebutted Sacreste's testimony by pointing out that the doctor had not been able to make Gabrielle leave her lover. He declared that fact, itself, proved that Gabrielle could not

be controlled by hypnosis and that she was naturally inclined toward lack of character.

The regular jail physician, Dr. Voisin, often hypnotized Gabrielle when Brouardel, Motet, and Ballet were not. Her defense lawyer called Dr. Voisin as a witness because he had heard that, during Voisin's many hypnoses of Gabrielle, the doctor had been able to clarify some facts in the case. When examined under oath, however, Voisin refused to become involved: "I cannot testify. Both as a doctor and as a government employee, I am required to observe professional confidentiality." (pp. 1210-1211, of *"Affaire Eyraud-Bompard" in Gazette des Tribunaux, 1, December, 1890.*)

The court convicted Gabrielle, saying, "An honest subject resists a dishonest suggestion and if he obeys it, it is not because his will is subjugated but because he consents." The doctors at the Salpetriere, the unofficial Parisian headquarters for unethical toying with hypnotic subjects, were pleased with the decision.

Gabrielle served the full twenty years at hard labor. After her release, a French journalist hypnotized and regressed her to the time before the murder. He learned that, at first, she had resisted Eyraud's posthypnotic instruction to commit the murder. Eyraud forcefully repeated the suggestion. He hammered it in, over and over, until Gabrielle's unconscious yielded.

Tourette

Gilles de la Tourette was an associate of Charcot at the Salpetriere. Like Charcot, Tourette believed that hysteria was a female disease, that hypnotizability was conclusive evidence of mental illness, and that no moral and normal person could be caused to do a criminal act by means of hypnosis. Tourette, however, sided with the Nancy School on two important points. He said that a hypnotized woman could be sexually violated, and he said that she could be caused to lie by means of hypnosis.

Janet

Pierre Janet (1859-1947) succeeded Charcot as the star of the Salpetriere. Janet refined and improved Charcot's theories. He discarded many that were wrong, and developed some that were right. He continued Charcot's mistaken doctrine that hypnotizability proves that the subject is mentally ill, but he made important amendments to that view. Janet said that hysterics were the most easily hypnotized, but not the only hypnotizable persons. He recognized the role of training: the more a patient is hypnotized, the easier it becomes to hypnotize that person.

Nevertheless, he retained Charcot's arrogant notion of a social abyss between the "healthy" hypnotist and



his “disordered” subject. That prejudice excused all the cruel, scornful experiments that experimenters did to their subjects (and what stage hypnotists did to their mediums). Janet wrote:

The relationship of a hypnotizable patient to the hypnotist does not differ in any essential way from the relationship of a lunatic to the superintendent

of an asylum.

Janet believed that hypnotic induction required deception, and that its nature must always be disguised from the patient. He excused that deception on the basis that it was a doctor’s professional duty to prescribe whatever would do the most good and in a way that would work.

Across the Channel: Braid and Bramwell

The action in hypnotherapy, in the 18th and 19th centuries, was mostly in mainland Europe, especially France. James Braid, a Scottish doctor, became an important exception. He first became interested in magnetism, in 1841, while watching a demonstration by the Frenchman Lafontaine in Manchester, England. When Lafontaine announced to the audience that his subject was “sound asleep,” the English doctor demanded the chance to examine her. Lafontaine welcomed him to do so.

When Dr. Braid raised the subject’s eyelids, he found, to his astonishment, that her pupils were contracted to two small points. The doctor then jammed a pin up under one of the subject’s fingernails, clear to its end. She gave no sign of feeling pain. Dr. Braid concluded that her condition was quite real. He began to magnetize people himself. Braid rejected Lafontaine’s theory of a “universal fluid,” however. His competing theory, that trance was based in brain physiology, helped make hypnosis credible to British scientists.

Unfortunately, Braid then decided that phrenology was also true and combined his ideas on hypnosis with the lore of head bumpology. The skeptics were again empowered.

Braid coined the terms **hypnotism** and **hypnosis** (from the Greek root “hypnos” which means “sleep”). He later realized that hypnosis was a different state of consciousness from sleep, but those words have remained in use. He treated hypnosis in a matter-of-fact way, integrating it into a medical setting. Some of the induction techniques he developed are still in use. He replaced staring at a hand with staring at a light. He hypnotized sighted persons in the dark and also blind persons, proving that simple mental concentration worked as well as staring at a visual target, and that verbal suggestion helped induction. He developed an induction which was based on concentrating on a single idea. Hypnotizing without a formal pattern, he discovered a disguised, conversational induction.

Braid noted the **dissociation** phenomenon by which a hypnotized person can attend to more than one thing at once, one part seemingly unaware of the other. He defined **somnambulism** as any trance state deep enough that the subject is naturally amnesic. Between 1843 and 1852, he published a series of books on hypnosis.

J. Milne Bramwell was an Englishman who read Braid’s books and carried on his research. In 1903, he published *Hypnotism: Its History, Practice and Theory*. Bramwell pioneered the **pre-induction interview** as a means to gain the patient’s trust and understanding. He also corrected any “misconceptions” or fears of the client which might cause resistance to induction. If he encountered resistance to verbal induction, Bramwell sometimes used drugs. Reiter called him a “moderate adherent” to the belief in the possibility of unethical hypnosis. (Reiter, p. 38)

Pavlovian Vocabulary



If we could look through the skull into the brain of a consciously thinking person, and if the place of optimal excitability were luminous, then we should see playing over the cerebral surface, a bright spot with fantastic, waving borders constantly fluctuating in size and form, surrounded by a darkness more or less deep, covering the rest of the hemispheres.

Pavlov, Lectures on Conditioned Reflexes

Estabrooks, Sargant, Salter, Wells, and the **behaviorists** in general, are successors to Pavlov's research tradition. The above-named experimental hypnotists considered Pavlov's work to be the scientific foundation of the physiological study of hypnosis. Pavlov himself, however, is hard to read because he speaks Pavlovian. Here follows an explanation of the most important Pavlovian vocabulary, having to do with hypnosis, used by him and his successors.

Complete Inhibition

Complete inhibition is Pavlovian for normal sleep.

Cortex Inhibition

Cortex inhibition is Pavlovian for trance induction.

Excitation-inhibition

Chemical messengers (neurotransmitters) cause electrical **excitation** or **inhibition** in the individual brain cells. When neurons fire neurotransmitters across their separating synapses, they are attempting to excite the targeted neurons. If neurons do not fire, they are in a condition of inhibition.

Pavlov believed that inhibition was a natural protection against overexcitation. Now, some scientists estimate that as much as 90% of the brain's chemical effort is devoted to inhibition. (Maybe it is that much harder, but that necessary, to usually say "no" rather than "yes.")

Excitation can result in inhibition in two ways. Any repetitive, monotonous stimulation (excitation) eventually results in inhibition. Also, any overstimulation will eventually result in inhibition—a burnout:

...inhibition is ever appearing in the role of a guardian of the most reactive cells of the organism, the cortical cells of the cerebral hemispheres, protecting them...when they meet with very strong excitations, securing for them necessary rest, after the usual daily work, in the form of sleep. (Pavlov, Lectures on Conditioned Reflexes, p. 39)

Irradiation-Concentration

Patterns of neural excitation, or inhibition, **irradiate** (spread) or **concentrate** (contract). The irradiation or concentration starts from a particular center and moves out (irradiation) or contracts inward (concentration). The



spreading or contracting of excitation happens in response to stimuli coming either from outside or inside the brain.

In this section's opening quote, Pavlov accurately envisioned the spreading cloud of electrochemical activity associated with any mental activity expanding with greater mental busyness (contracting with inhibition when the activity is over). Now, by means of PET scans, we can look through the skull of a thinking person and see the phenomena of irradiation and concentration, mind at work, similar to what Pavlov envisioned.

Hypnotic Phases

Increasing cortical inhibition results in hypnotic induction. That is Pavlov's Type One, sensory deprivation, induction. Hypnosis is a stage between awake and asleep. Visualize a brain, undergoing the process of trance induction, as a huge mansion with a multitude of rooms. At first, most of the rooms are lighted. They are "awake." Gradually, as the process of **cortical inhibition** (induction) proceeds, the lights wink out in more and more rooms of that mansion.

However, some rooms still are lighted. Thus, hypnosis can be thought of as partial sleep, because some neurons remain in an active state and in touch with the outside world. Hypnotic induction happens in the transition state of inhibition between full alertness and full sleep.

Pavlov called the various depths of trance "the intermediate phases between the waking state and complete sleep." He also called them the **hypnotic phases**. (Lectures..., p. 39)

Transmarginal Stimulation

By "transmarginal," Pavlov meant past the break-

ing point. He was fascinated with what mentally broke dogs (and people)—and how. As with classical conditioning, Pavlov first noticed the phenomenon of **transmarginal stimulation**—the breaking point—when it accidentally appeared in his laboratory. The occasion for his realization was the dramatic Neva River flood which happened in the winter of 1924.



All those dogs, who drooled when the bell rang, were kept in a basement laboratory in Leningrad, near the Neva River. For years, his lab workers had been conditioning the dogs into various sets of automatic responses. When the river unexpectedly flooded Leningrad, the water poured into that basement laboratory where the dog cages were kept. It rose, and rose, to nearly the tops of their cages. Shortly before the dogs were rescued, they were surviving only by swimming around and around at the tops of those cages.

Then, a lab attendant dove into the near-freezing water and rescued the dogs, one by one, bringing each dog out of its cage—under water. It was a very frightening experience for the dogs.

*....after their rescue some were in a state of severe inhibition, stupor and collapse...Pavlov was most excited when he found that in all those dogs which had experienced the collapse, all their recently implanted conditioned reflexes had been abolished. It was as if the recently printed brain-slate had been suddenly wiped clean, and Pavlov was able to imprint on it new conditioned patterns of behavior. (Sargant, *The Mind Possessed*, pp. 8-9)*

Transmarginal stimulation had pushed the dogs to collapse. They had been driven by fear, excitement, and

final relief into transmarginal stimulation. They were pushed past the breaking point, over the brink.

After the flood, Pavlov took time to thoroughly investigate this new phenomenon. He learned it did not require an act of God to accomplish transmarginal stimulation. In his experiments, he deliberately pushed dogs to that mental brink—and then over it. Every dog had its breaking point. He established that dogs, like people, could have nervous breakdowns. The circumstances that could make them neurotic were anger, fear, or mental conflict.

As Pavlov studied transmarginal stimulation, he realized that it consisted of a series of three phases. He called those phases the **equivalent**, **paradoxical**, and **ultraparadoxical**. He said that a subject in the process of deepening trance will go through these phases. In all three of the **transmarginal states**—equivalent, paradoxical, and ultraparadoxical—dogs or people have symptoms of “hysteria.” Pavlov defined **hysteria** as a mental condition characterized by more than usual suggestibility—or counter-suggestibility (reflexively acting or thinking the opposite way of what is suggested).

Here are those three transmarginal states viewed in more detail.

State of Equalization (Equivalent Phase)—In the **state of equalization**, which Pavlov also called the **equivalent phase**, weak and strong stimuli receive the same response. For example, the subject responds equally (the same) to a whisper or a shout. A normal, healthy person feels a range of emotions, depending on what is going on in his life. But a sick person, in the equivalent phase, may be flat emotionally, unable to feel joy or sorrow or any emotion in the normal way.

*...normal people, during periods of great fatigue following stress, may find that there is little difference between their emotional reactions to important and trivial experiences. (Sargant, *The Mind Possessed*, p. 11)*

Pavlov’s concept of the state of equalization, the equivalent phase, has also been used in the analysis of hypnosis depths. Katkov analyzed depth into three stages—each stage having three degrees, and he noted that his second stage, third degree, subjects showed an equalization phase of responsiveness. Either the word, or the actual stimulus, equally could elicit the response. For an example, in that equalization phase of trance depth, illusion caused by hypnotic suggestion or real seeing were equally possible for the subject. He could see a real cat, or he could “see” a suggested hallucination of a cat.

In Pavlov’s vocabulary, the **weak stimulus** was the word, “see.” The **strong stimulus** was the actual event, the presence of a real cat before your eyes. (Later research has shown, however, that the word—which Pavlov called the “second-signal system” can be dominant over the actual event. We tend to believe what we are told we saw, rather than what we really saw.)

Paradoxical Phase—The **paradoxical phase** is a deeper trance state, with more extensive inhibition, than the equalization phase. In the paradoxical phase, the strong stimulus either does not work, or it works poorly. A weak stimulus, on the other hand, which in a normal state of mind would not work at all, or only poorly, now produces far greater response than a strong stimulus. In the paradoxical phase, strong stimuli increase brain inhibition.

Katkov listed **paradoxical behavior** as the third degree of the third stage, his deepest trance stage. Here, mere words are dominant over any real-world phenomena. For example, a suggestion for the absence of pain can enable a surgery without anesthetic. Pavlov’s dog, in this state, refused food associated with a strong stimulus, but accepted it if the stimulus was weak.

The hypnotized subject, in this phase, ignores the siren outside. He is completely focused on and obedient to the whispered words of the hypnotist. The unconscious split of a survivor of abusive hypnosis answered a question which was asked, in a soft whisper, in a room full of persons engaged in normally-voiced conversation. The split did not respond to any normally-voiced question. Only the subject’s root personality answered that type of query.

Ultraparadoxical Phase

In the **ultraparadoxical phase**, an emotionally overexcited, overwhelmed—utterly stressed out—nervous system loses all of its previous conditioning. The shock of threatened drowning caused the dogs’ previously conditioned habits to wash away.

In the ultraparadoxical phase, the subject may do a **Pavlovian reversal**, or he may accept any new conditioning in the context. Palle Hardwick was driven into the ultraparadoxical phase during Dr. Reiter’s final demonstration of him. He then spontaneously rejected Dr. Reiter’s hypnotic conditioning of him: a Pavlovian reversal. In a Pavlovian reversal, what was anathema to you before, now becomes desirable. Or what was impossible for you before, now becomes possible.

In the ultraparadoxical phase, when the dog, or person, rejects old patterns, he may become extremely susceptible to new conditioning, to the uncritical adoption of



new attitudes and behaviors. Therefore, pushing the prisoner into the ultraparadoxical phase is the goal of brain-washers.

Positive Induction

Pavlov observed that the more “rooms” in the brain that became dark, the brighter the light burned in the remaining ones. He called that phenomenon **positive induction**. Whenever many neurons became inhibited, the remainder benefitted by the increased excitation of positive induction. Those neurons that were still excitable could become even more excitable than normal. Those that were in a state of inhibition would not interfere. That is the condition of trance. That is also the physiological basis for the extraordinary mental powers a hypnotized person can demonstrate. It is a kind of balancing act in that mansion: the more lights that turn off, the brighter the lights burn in whatever rooms do remain lit: positive induction.

Negative Induction

Pavlov’s Type Two, the shock induction, takes place because of the principle of **negative induction**. Too much stress, or a sudden shock which overstimulates a person’s brain, can result in trance or depression. The cause is the phenomenon which Pavlov called **negative induction**. Negative induction starts with stimulation, with turning lights on: BRIGHT. Too much BRIGHT causes a physiological compensation in the brain; other rooms must turn their lights off. Thus, overstimulation causes inhibition: negative induction.

In addition to “negative induction,” Pavlov had another term for the protective shutdown caused by shock or overstimulation. He called it a **self-protecting reflex of an inhibitory character**. Pavlov reasoned that there were situations in which an animal’s (or person’s) only hope to live was to stay absolutely immobile. Immobilization is a potential of the catatonic stage of hypnosis. Therefore, he viewed the cortical shutdown in response to shock (fear) as a self-protecting reflex of the inhibitory sort.

Progressive Inhibition of Cortical Analyzers

Pavlov’s cybernetic concept of brain function postulated the existence of what he called **analyzers**, one for each mental department. He suggested that there was a visual analyzer, an auditory one, a motor (voluntary muscles) one, and of course, in humans, the analytical, critical, self-controlling conscious-mind analyzer. Pavlov theorized that the process of deepening into trance involved inhibiting those analyzers, one by one.

Pavlov believed that the voluntary analyzers would get inhibited (shut down) first. He said the involuntary ones would not be affected by the spread of cortical inhibi-

tion. Indeed, one of the earlier characteristics of trance is loss of voluntary control (such as, inability to open eyes, lower an arm, pull hands apart). Pavlov would explain that phenomenon by saying that the motor analyzer was shut down by spreading cortical inhibition.

Brainwashing: The Technology

Stage One:
Deconditioning



Stage Two:
Breaking Point



Stage Three:
Reconditioning

The message of coercion is: you must change and become what we tell you to become—or else. The threat embodied in the ‘or else’ may be anything from death to social ostracism, any form of physical or emotional pain. The goal of naked coercion is to produce a cowed and demoralized follower.

Lifton, *Thought Reform and the Psychology of Totalism*, p. 438

Brainwashing’s Goal Is Conversion

Stressed humans naturally tend to make **conversions**—which may, or may not, be permanent. The conversions happen because stressed humans (and dogs) may respond to crisis by discarding inappropriate old programming and discovering, in suffering, the key to spiritual growth and to new and better behavior. A person can change by adopting a group’s shared values and beliefs. Or, they can change independently, creating a new personal path out of the debris of shattered past attempts. **Brainwashing** is a deliberate regimen of stress that seeks a true change of heart, which results in future collaboration.

In the 1950s, certain U.S. government agencies began to fund brainwashing research. In 1957, Dr. William Sargant, an English brainwashing specialist, stated the goal

in one question: “Why do stressed humans tend to make conversions?” They were looking for a way to deliberately, systematically elicit conversion: predictable stresses for predictable results. The experiments confirmed that harsh manipulation of a confined person can break down previous attitudes and instill a new set of the brainwasher’s choice.

Brainwashing is not what advertisers, politicians, educators, and evangelists do, because their audience is not a captive one. If you can walk away from unwelcome persuasion, it is not brainwashing. If you cannot walk away, it may be. **Indoctrination** is the mildest level of brainwashing. Indoctrination is a very direct conversion system which attempts to change a person’s viewpoint while he or she is still a thinking individual. More severe and classic brain-



washing regimens differ from indoctrination in that they attempt to change a person's mind without allowing any input or control from the victim. Complete control over a person's environment allows extreme psychological manipulations.

Methods of Brainwashing

The technique of brainwashing involves total external control, an atmosphere of stress, and two or three induction methods (alternating, or combined) which increase suggestibility. Since brainwashing is a coercive mind-control technology that contains elements that lower consciousness and increase suggestibility, there is a link between hypnotism and brainwashing. Stress increases suggestibility. Extreme stress can cause trance. The Pavlovian induction types historically associated with brainwashing are:

- *Type One: Sensory deprivation.*
- *Type Two: Overstimulation—prod, whip, sexual abuse, haranguing, terrifying, etc.*

- *Type Three: Brain syndrome caused by fatigue and hunger.*

Three Stages of Brainwashing

Brainwashing takes place in a series of three major stages. A Dutch psychoanalyst, Joost Meerloo, first analyzed and named them in his post-WWII analysis of Nazi brainwashing techniques:

- I. **Deconditioning** of the subject.
- II. Subject's artificial **breakdown** and **identification** with the new authority, with the brainwashers' orthodoxy, whatever it is.
- III. Subject's **reindoctrination**, retraining in the new orthodoxy.

So, the first stage is breakdown. The second is the phenomenon of the breaking point, and identification with the brainwashers. The third is the subject's reindoctrination. All three stages—deconditioning, breaking, and reindoctrination—have been carefully researched.

Stage One: Deconditioning

[The purpose is] to destroy the old loyalties and value systems...their personal meaning systems...extinguishing old conditioned patterns.

- Perry London, *Behavior Control*, p. 91

Biderman and Lifton independently analyzed the exact coercive elements, and their chronological order, which accomplish the subject's deconditioning. Each came up with an eight-item list.

Biderman's List of Deconditioning Factors

1) Isolation, Disorientation, and Loss of Control —A brainwashing regimen always starts with **isolation** of the victim.¹ Brainwashers isolate a prospective subject from associates who might sustain his old beliefs. Isolation may be solitary confinement. Patricia Hearst was shoved into a closet in a house where only SLA members lived.

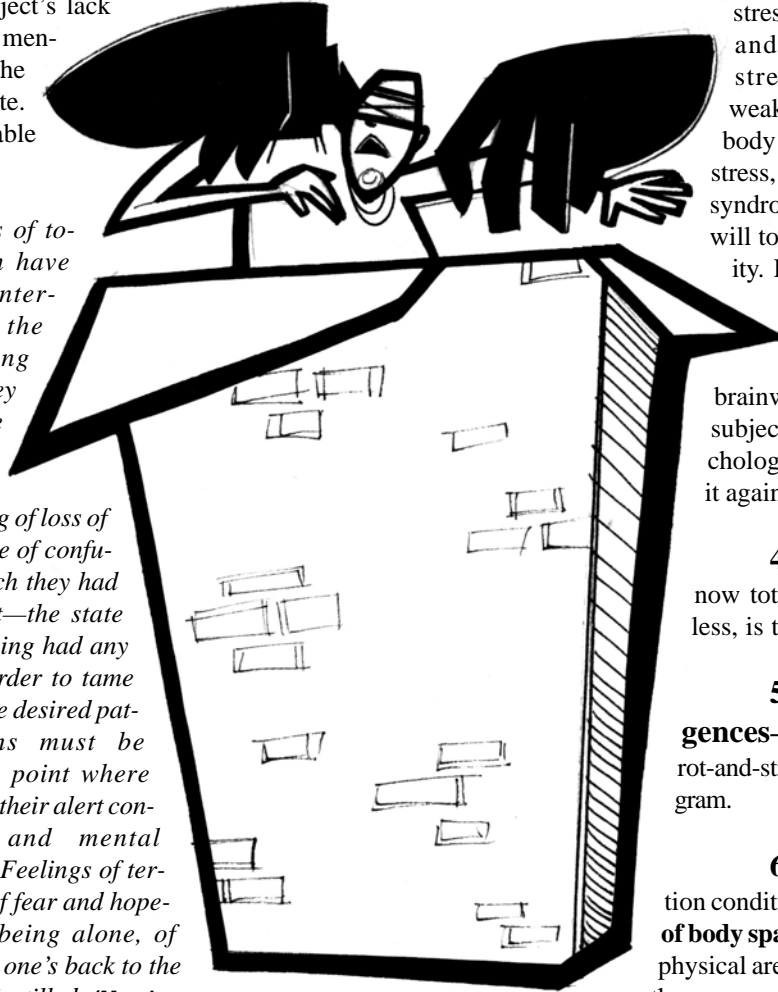
If the inmate is to be held in a group, the brainwashing program usually isolates new candidates from all former associates. It surrounds them instead with new associates who are also undergoing brainwashing, or who are already single-mindedly devoted to the new point of view. In a brainwashing program described by Sargant, the inmates lived for nine to twelve months in a camp which was so isolated that all ties with the subjects' friends and families were cut.

The camp regimen deliberately shattered all their old patterns of behavior. In any brainwashing situation, the subject has totally lost control—and is confused. This is deliberate. In a classic brainwashing regimen, the isolation from former peers is combined with **loss of control** and **dis-**

1. The isolation of brainwashing is a physical corollary to the mental isolation of a hypnotic subject whose operator has become the subject's sole definer of reality.

orientation. The victim has been snatched abruptly out of his accustomed environment and thrust into a totally different one. The subject's lack of opportunity to mentally prepare for the change is deliberate. It makes him less able to resist.

Many victims of totalitarianism have told me in interviews that the most upsetting experience they faced in the concentration camps was the feeling of loss of logic, the state of confusion into which they had been brought—the state in which nothing had any validity...In order to tame people into the desired pattern, victims must be brought to a point where they have lost their alert consciousness and mental awareness. ...Feelings of terror, feelings of fear and hopelessness, of being alone, of standing with one's back to the wall, must be instilled. (Meerloo, p. 49)



3) Exhaustion—Mental collapse under stress can have both a physical and mental basis. Physical stresses, such as fatigue, isolation, and malnutrition; and mental stresses, such as humiliation, weaken the physical foundation of body and mind. Extreme physical stress, especially torture, causes brain syndrome, which further weakens the will to resist and creates suggestibility. Exhaustion makes a person susceptible to any repeated message, an easy target for hypnotic suggestion. Another brainwashing technique wears the subject mentally by locating a psychological “sore spot,” then prodding it again and again.

4) Threats—The subject, now totally isolated and totally helpless, is threatened.

5) Occasional Indulgences—This is the carrot of the carrot-and-stick **behavior modification** program.

6) Subjugation—Subjugation conditioning often involves **invasion of body space**. Most people have a limit, a physical area inside which they do not like other persons to intrude. This private space is usually a circle around us, about two or three feet from the body. Harsher brainwashing regimens involve constant interrogation, sleep deprivation, bad and insufficient food, inadequate toileting facilities, humiliating treatment, and no contact with persons outside the brainwashing setup.

7) Degradation, Omnipotence, Omniscience—Physical or sexual assaults—anything that shames—further subjugate and degrade the victim. The subject is shamed. The captors, on the other hand, demonstrate what Lifton called **omnipotence** and **omniscience**. Degradation of the subject seems to prove the programmers' omnipotence. The abuse in this category typically involves not only humiliation and degradation, but also forced self-betrayal.

8) Enforcing Trivial Demands—This conditioning is for takeover of the subject's will.

2) Monopolization of Perception—Unauthorized information is prohibited and prevented. There may even be outright **sensory deprivation**. The victim's attention is focused on his own physical and mental misery, and the necessarily exaggerated importance of all interactions with the tormenters. Isolated from family and friends, he is now totally dependent on his captors who have the exclusive right either to continue or relieve his suffering.

He may be in sensory deprivation, being made susceptible to propaganda. Or he may be mentally overstimulated. In that type of brainwashing regimen, subjects are given no chance to relax, not a moment's peace, no opportunity simply to think their own thoughts. Mind and body are constantly occupied, and fatigued, with specified group activities and propaganda input.



Lifton's Brainwashing Analysis

Dr. Lifton interpreted brainwashing as a manipulated, forced conversion experience. His 8-point method incorporated psychoanalytic elements, the Chinese Communist indoctrination system, and all three of Dr. Meerloo's elements (deconditioning, breaking, and reindoctrination):

1. Captors acquire total **control** over victim.
2. Captors assault victim's sense of **identity**.
3. Victim feels **guilt** and accepts blame.
4. Victim **confesses** vices, both real and imaginary, the uglier, the better.
5. Victim **betrays** self and others, then feels "cut off from his former roots and unable to return..."
6. Victim is pushed to extreme **death anxiety** and breaking point.
7. Captors swap leniency for **total compliance**. The prisoner now eagerly behaves any way they want, because he now believes this may be a way to survive.
8. The prisoner's conversion is reinforced by a systematic regimen of criticism, self-criticism, and **instruction** in exactly what he is supposed to believe.

Stage Two: The Breaking Point

...the Chinese Communist leaders not only find nothing to resent in charges that they 'brainwash' their opponents, but regard the term as a quite apt and honorable description of what they wish to achieve. (p. 6) Practitioners of 'thought-reform' seek 'real' changes in beliefs and values. They demand that the victim be 'honest, sincere, and full' in his 'self-examination, repentance, and change.'

- Blake in Biderman and Zimmer (eds), *The Manipulation of Human Behavior*, p. 10

Finally, the subject's mental tension reaches the cortex overload stage. Then, ultraparadoxical

breakdown (a physiological phenomenon first described by Pavlov) occurs.

Ultraparadoxical Stage

The **breaking point** is a physiological event. Abuse causes the ego, the "I," to shrink, pull back, and weaken until, finally, exhausted, it gives up. Pavlov named that moment of giving up the **ultraparadoxical stage**. When pressure, exhaustion, and fear become unbearable, the subject reaches the breaking point.

Sargant argued that anything that causes temporary cortex overstimulation and collapse has the healing effect of loosening up old programming patterns, thereby allowing the implant of new ones. His list of overstimulations which could cause the ultraparadoxical break included electroshock, voodoo possession, rock concerts, and suggested confabulations and implanted false

memories. Sargant approved of whatever it took to drive the patient into the **transmarginal collapse**, so that his previous behavior patterns could be broken up.

Pavlov stressed dogs, through deconditioning, into the ultraparadoxical crisis. After the breakdown, he conditioned new habits into them. Sometimes, he put the dog through the whole routine again: stressing it into another breakdown, and then retraining into yet another set of habits. At the breaking point, the exhausted, confused dog—or person—will accept any sort of relief.

Submission to and Positive Identification with Enemy

A curious phenomenon of this second stage of brainwashing is the subject's **identification** with the brainwashers. At the breaking point, the victim switches, from fear and hate of Big Brother, to trust and love of Big Brother.

Victims

...suddenly begin to feel affection for the examiner who has been treating them so harshly—a warn-



Compulsives Resist the Best

The "**obsessional neurotic**," better known as the **compulsive**, whether canine or human, is the personality type which is most able to resist brainwash techniques. He tends to avoid becoming emotionally involved in what is going on. That protects him from being influenced. Brainwashers have the most success with compulsives using Type Three inductions—lack of food, lack of sleep, illness, injury, and exhaustion.

*Many human eccentrics may approximate to Pavlov's stronger dogs, who acquired new behavior patterns only when they had first been debilitated by castration, fever, or gastric disorders which made them lose a great deal of weight. Once reindoctrinated, they were fattened up, and the new behavior patterns became as firmly fixed as the old; indeed, Pavlov could not get rid of them again. (Sargant, *Battle for the Mind*, p. 86)*

*ing sign that the 'paradoxical' and 'ultraparadoxical' phases of abnormal brain activity may have been reached: they are near to breaking point... (Sargant, *Battle for the Mind*, p. 214)*

Meerloo wrote of the breaking moment:

...the moment of surrender may often arrive suddenly. It is as if the stubborn negative suggestibility changed critically into a surrender and affirmation. What the inquisitor calls the sudden inner illumination and conversion is a total reversal of inner strategy in the victim. From this time on, in psychoanalytic terms, a parasitic superego lives in man's conscience, and he will speak his new master's voice. (Meerloo, p. 92)

At the breaking point, the subject begins to reject what he is being told to reject and begins to accept what he is being told to accept. At this point of emotional extremity, he makes the Pavlovian reversal. Now he loves Big Brother. The breaking point is also the point of confession: "I was bad but now I'm good."

Internalization of the Guilt for Breaking

All brainwashers dread conformity based on opportunism rather than conviction. All work to achieve a sincere conversion. They make

...the ultimate test of the loyalty and sincere devotion of the individual to the system...his acceptance of the inquisitorial process itself: the purge, coercion, confession, and the entire paraphernalia of enforced conversion...(Biderman and Zimmer (eds), p. 8)

The subject's final capitulation happens when he not only gives outward obedience to whatever the captors will for him to do, but he also honestly comes to think and believe whatever they demand. After that, he no longer blames Big Brother for bringing him to the breaking point. He now thanks Big Brother for his "help." The subject now blames what happened on himself.

He now feels a deep conviction of **guilt**. He accepts personal responsibility for what happened: "I was bad. It had to be done to me, so I could be made good. I'm so grateful Big Brother fixed my wrong thinking." The subject now believes that he was imperfect, and needed the brainwashing cure. This taking of responsibility for his mistreatment is called the **internalization of obedience**. At the breaking point, the victim's independent will steps back, yields to the controller's will, then internalizes that submission.



Self-loathing Measures Inmate's Renewal—

*One final test of loyalty demands that the prisoner act as though he hated himself with the intensity of the criminal definition which the system has placed upon him. (Blake in Biderman & Zimmer, eds, *The Manipulation of Human Behavior*, p. 8)*

Similar language described a model prison therapy, the Asklepeion program at the Marion Illinois Federal Penitentiary:

...object of the "therapies" is initially to "unfreeze" the prisoner's formal organization of beliefs about him or her self (or, as Opton describes it, "to degrade the self-concept and shatter his personal identity"). When this has been achieved, the person will then "change" his or her personality and belief system. In the final stage the new personality will be "refrozen." (Ackroyd, et. al., p. 268)

The "refreezing" takes place in Stage Three.

Stage Three: Reconditioning

*Through both continual training and taming, the new phonograph record has to be grooved...Incidental relapses to the old form of thinking have to be corrected...The victim is daily helped to rationalize and justify his new ideology...This systematic indoctrination...
- Meerloo, *The Rape of the Mind*, p. 92*

In Stage One, the relentless deconditioning pressure unfroze former convictions, values, beliefs, and attitudes. That left the subject vulnerable to the implanting of new ones. In Stage Two, the ultraparadoxical stage, the subject reversed strategies and began to identify with the brainwasher. Meerloo called Stage Three "The Reconditioning to the New Order." It accomplishes the subject's **reindoctrination**.

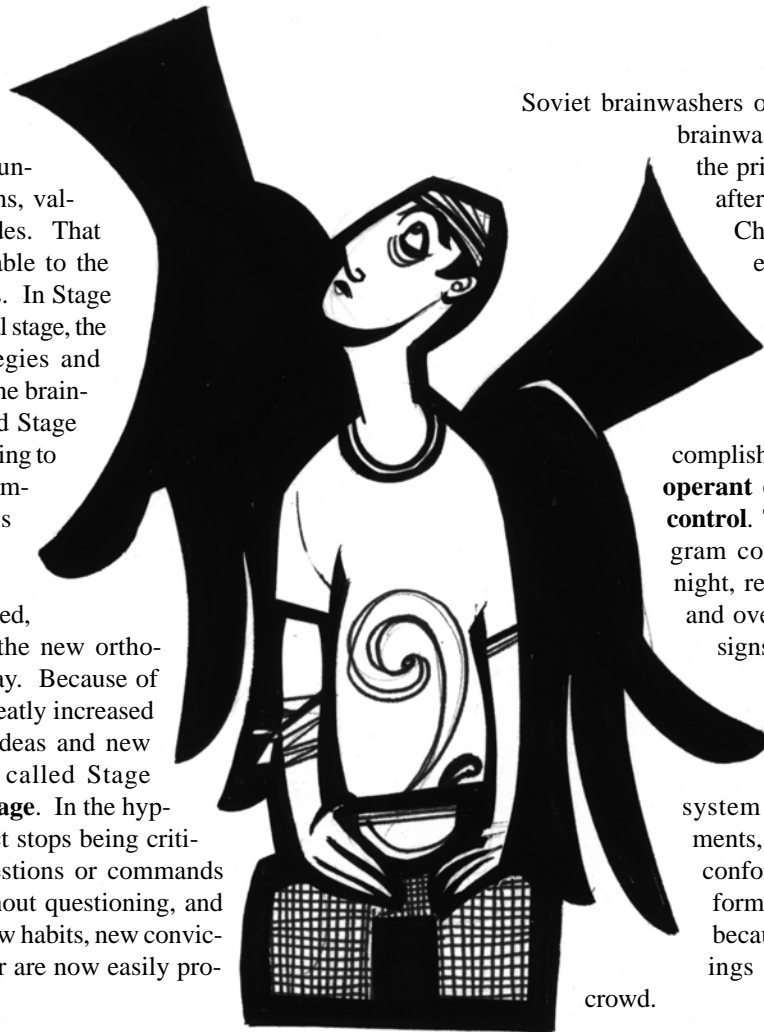
The brainwashed, broken subject learns the new orthodoxy in a hypnoidal way. Because of that characteristic of greatly increased suggestibility to new ideas and new conditioning, Pavlov called Stage Three the **hypnoidal stage**. In the hypnoidal stage, the subject stops being critical. He accepts suggestions or commands without argument, without questioning, and in an uncritical way. New habits, new convictions, and new behavior are now easily programmed into his mind.

Soviet brainwashers omitted this third stage of brainwashing. The Russians sent the prisoner on to serve his time after he broke and "confessed." Chinese brainwashers, however, sent the softened-up prisoner for the third stage: **reconditioning**.

Reconditioning is accomplished by **message repetition**, **operant conditioning**, and **milieu control**. The typical instruction program continues from morning to night, repeating its teachings over and over. As the prisoner shows signs of genuine conversion, he is rewarded with group approval and upgrades in physical circumstances.

Operant conditioning, a system of rewards and punishments, retrains by linking hope to conformity, and fear to nonconformity. Milieu control works because humans are social beings and generally follow the

crowd.



Grateful for the Cure

After the prisoner has been broken and retrained, he defends the new mental conditioning. He feels genuine **gratitude** for having been brainwashed. The human mind has a natural tendency to defend its status quo—whatever it is. Retraining is finished when all the new attitudes are “frozen” in place. They will now be as resistant to outside change as were their predecessors. The more rigid the subject’s personality was before the break, the more stoutly he will now defend and cling to his new programming.

Musings

I have been to the breaking point, and beyond, three times in my life. The first Pavlovian reversal occurred when I was sixteen years old and had fallen in love for the first time. My parents harshly resisted my attachment to the young man and broke up our relationship. I converted my love for that young man into rage at my parents and despair over my own prospects. I transformed from a meek girl-child into a bitter, alienated adolescent, seeking worldliness. I went from “naturally good” to genuinely bad.

The climax of a novel based on the history of Donovan’s OSS (W. E. B. Griffin, *The Last Heroes*, audio version, 1997) described a similar conversion from good to bad. The hero, obedient to his OSS directive, murders an absolutely innocent man as if it were a trivial matter. Then he knocks out and kidnaps another man, one whose life is considered by the U.S. government to be useful. In the dramatic finale, we learn that our hero’s love interest, his unit director, has agreed to a date; and Donovan himself, Big Brother incarnate, is taking a personal interest in his future with the organization.

The reader is expected to feel good and satisfied with the protagonist’s conversion from an everyday Joe with mom-and-pop moral values into a person who will commit any crime, if so directed by his secret agency (government) superior. The novel’s conclusion implies that this is the climactic moral transformation demanded of our new world order: to trash Judeo-Christian morals and thereby demonstrate one’s worthiness to win romance and the Agency Director’s protection.

I went through my second spontaneous Pavlovian reversal years later, when I was in my early thirties. In the midst of personal crisis, I again made a huge transition. This time, I confessed my sins, faced my responsibility and guilt for all that I had done wrong, and made the switch from sinful to redeemed.

The capacity for Pavlovian reversal is an innate God-given gift. Like any other ability, it can be used for good or for evil. Its worse use is of switching us from the state of assuming we are good to a conscious commitment

to obey sleazy or self-destructive impulses, or evil orders. Its best use is to move us from an humble recognition that all humankind begins from a helpless state of sin, through confession, shame, and on to acceptance of Christ’s gift of redemption.

That long ago day, I prayed, “Jesus, come into my heart.” And He did. The bud of my life’s potential then began to grow into spiritual maturity, beauty, and strength. I became empowered in my personal struggles, now in alliance with a greater power. Mostly, I used this new strength and guidance to more effectively fulfill my family responsibilities, but I also completed and marketed my first book.

My third Pavlovian reversal took place thirteen years ago, once again during a period of personal turmoil. It was now time to confront my programmed powerlessness, fear, conscious ignorance, and unconscious resistance to change. The worm turned. I began to fight. At first, my battles were all in the land of mind against my hypnoprogramming. I learned how to fight by fighting. In this process, I had to go through a period of holding up my most fundamental beliefs to profound scrutiny and reevaluation, leaving all known paths to plunge directly into the unknown. When I came out the other end of the tunnel, I was reaffirmed in my basic Christian faith. My God was once human and Himself experienced humiliation and learned obedience through suffering. He hates injustice.

Bit by bit, I regained mental territory from the enemy: memories, feelings, abilities, another page written, another interview, a new bit of research accomplished. I struggled first to reunite and heal my own, broken self, but eventually I had to seek ways to help others who had been similarly victimized. I realized that I must become the print “authority” on criminal hypnosis, for there was no other adequate to meet their need.

Thirteen years ago, the dream of researching and writing this book seemed impossible. I persevered because I could have no peace in my spirit otherwise. Against the impossible obstacles, I flung impossible amounts of work and sacrifice. For many years, it felt like I was struggling alone against this great evil.

Gradually, I came to understand that this aspect of my life was also part of God’s purpose for my life, to be achieved in God’s timing. Sometimes, I experienced extraordinary instances of clearly supernatural assistance and protection. After many years of relative isolation, my path has recently reconverged with those of many other believers. I have experienced anew warm fellowship and have received almost daily miracles of kind, and expert, assistance.



Behaviorism and Government Ally

The Philosophical
Postulates of
Behaviorism



Skinner on
Behavior Control:
The Rest of the
Story

“Men like me, who possess hidden wisdom, are freed from common rules just as we are cut off from common pleasures. Ours, my boy, is a high and lonely destiny.” As he said this, he sighed and looked so grave and noble and mysterious that for a second Digory really thought he was saying something rather fine. But then he remembered the ugly look on his Uncle’s face the moment before Polly had vanished; and all at once he saw through Uncle Andrew’s grand words. “All it means,” he said to himself, “is that he thinks he can do anything he likes to get anything he wants.”

C.S. Lewis, *The Magician’s Nephew*

In the area of mind-control, after World War II, there developed:

- A new branch of psychology: military psychology
- A new relationship between the mental sciences and the government
- A psychological/scientific philosophy that set the rules and justified the new sci-tech socialism: **behaviorism**.

Together with the secret government push for more and better people-control technologies (buttressed

by constant technological advances in data collection and manipulation, communication, and conditioning), the new psychological philosophy of behaviorism developed.

History of Behaviorism

Behaviorism began in the Soviet Union, although the term was not coined until later. Dr. Horsley Gantt was the first American after the Communist Revolution to research in Russia. He left the Phipps Psychiatric Clinic, at John Hopkins University, to work in Pavlov’s laboratory for six years. There, Gantt met all the important Russian psychophysicologists. He translated the writings of Pavlov and Luria into English. Gantt’s translations introduced English-speaking physiologists and psychologists to the Soviet’s new way of looking at—and researching—the human mind, as merely another “natural object.”

An American psychologist, John B. Watson, then made Pavlov's discoveries on conditioned reflexes part of mainstream American psychology. Watson urged psychologists to study only observable behavior as Pavlov did, not inner feelings as Freud had. It was Watson who named this new psychological point of view **behaviorism**. Behaviorists, like Pavlov, view brain function as the sum of inborn reflexes, plus learned (conditioned) reflexes. The dark side was that

Watson had little or nothing to say about intention or purpose or creativity...his examples were not incompatible with a manipulative control. (Skinner, About Behaviorism, pp. 6-7)

In the Soviet Union, where the Communists enthroned the dream of manipulative control over the masses, Pavlovian psychiatry had soon become official psychological doctrine. Civilian psychiatry in the United States, however, largely ignored concepts of **the conditioned reflex** and **artificial neurosis**, preferring Freudian or Jungian healing approaches. CIA and military psychiatrists, on the other hand, enthusiastically embraced the new approach to the study of the mind which emphasized the role of **mental reflexes**. Brains are constructed so that the reflexive act is immediate, unthinking, and usually **dominant**. That fact was of great interest to mind-control researchers.

THE PHILOSOPHICAL POSTULATES OF BEHAVIORISM

There is one aspect of human research which is usually overlooked: the existence of a moral and social duty to advance scientific knowledge. (p. 211) ...The prospect of any degree of physical control of the mind provokes a variety of objections: theological objections because it affects free will, moral objections because it affects individual responsibility, ethical objections because it may block self-defense mechanisms, philosophical objections because it threatens personal identity. These objections, however, are debatable. A prohibition of scientific advance is obviously naive and unrealistic. It could not be universally imposed...

- Delgado, *Physical Control of the Mind*, p. 214

Behaviorism has been the busiest, and best financed, field of psychological research since World War II. Scientific research is a priority in the technocratic society. There is a "moral duty" to do scientific research, Delgado said. In the United States, however, it is now illegal to conduct research on a person without their informed consent—unless that person is a child in public school. (Or, probably, unless that research is "secret, don't tell.")

The implementation of all discoveries that may conceivably advance power or profit, despite risks to human and other life on the planet, is also a high priority.

Behaviorism provides a psychological—and political—philosophy that serves the new elite. It has evolved into a secular religion which embraces four philosophical postulates that government psychotechnocrats want to hear. For this reason, behaviorists have dominated applied psychology (and government funding for psychological re-

search). Startling fifth and sixth postulates have developed, corollaries to the first four.

1) Unlimited Research

The first postulate is that NEVER ENDING, UNTRAMMELED RESEARCH IS INEVITABLE AND DESIRABLE. To the behaviorists, nothing is sacred. Anything they can imagine, they can try.

...without stimuli...the mind cannot exist...the mind may be defined as the intracerebral elaboration of extracerebral information...the basis of the mind is cultural, not individual. (Delgado, Physical Control of the Mind, p. 27)

Delgado doubted that there is such a thing as a "soul." He added that, if the soul exists, "A natural question would be whether or not the soul could be modified by experimentation..." (*Ibid.*, p. 29)



2) Behavior Control

The second psychological postulate of this new order is that MANIPULATION AND CONTROL OF PEOPLE'S BEHAVIOR IS INEVITABLE AND PRAISEWORTHY. A line from B.F. Skinner, a behaviorist researcher, is often quoted: "People will be controlled; I just want them to be controlled more effectively." (Skinner, *Beyond Freedom and Dignity*, 1971)

Behaviorists say that THE GOAL OF PSYCHOLOGY IS THE PREDICTION AND CONTROL OF HUMAN BEHAVIOR.

*The whole notion of psychological freedom strikes the behaviorist as mystical, unscientific, and somehow having religious connotations...the committed behavioral engineer is seldom assailed by doubts. He firmly believes that his is the voice of science and not myth. (James Deese, *Psychology as Science and Art*, 1972, p. 105)*

Perry London, behaviorist philosopher, explained:

*Control means power. Behavior control means power over people. In times past, it meant power over life and death and some visible activities in between. Now, it is coming to mean power over all the details of people's lives—of attitudes, actions, thoughts, and feelings, of public postures and the secrets of the heart... (London, *Behavior Control*, p. 199)*

Behaviorists practice **action therapy**. Action therapy starts from the premise that getting rid of the symptom eliminates the problem. It takes for granted that the therapist is a proper source of behavior control. The behaviorist therapist assumes that:

His job is to give the patient not self-control but symptom relief...whatever works without damaging the patient is acceptable...Skill at manipulation, anathema to insight therapy, is the moral prize beyond purchase of the actionists, whose title to exercise control is as certain to them as their responsibility for healing is clear. (Ibid., p. 64)

3) Government Control of Science

Government is seen as the PROPER CENTER OF SCIENTIFIC GOALSETTING, RESEARCH, AND OPERATIONAL APPLICATIONS of present, or future, psychological (and non-psychological) technologies. The working partnership that developed during and after World War II between government employees and research scientists in educational institutions extended also to industrialists

who built products for research and operations, products which were purchased with government money.

Since World War II, government, higher education, industry (and their bureaucracies) have become ever more bound together in secret research and manufacturing projects. This came about because of the buying of science by the grant system, and the buying of industry through government contracts. Government has become the dominant purchaser (and director) of research because most research is now so expensive that only government (or huge corporations) can afford to bankroll it.

Government directors in the mind-control field were attracted to the behaviorists, who were seen as the most practical, and the least impeded by moral squeamishness, of the psychological camps. Behaviorists who embraced government control and funding of their research were, in turn, generously supported (also highly controlled). In 1979, a writer looked back and declared that behaviorists became dominant in American psychology mainly "because Behaviorism was correct about science being a public enterprise" (Furst, *Origins of the Mind*, p. 11).

4) Government Control of Information

When government funded the mind-control research, it could control the goals and methods of that research. Most research relevant to mind-control has been publicly funded. PUBLIC FUNDING GAVE GOVERNMENT THE POWER TO ENFORCE SECRECY OF RESEARCH RESULTS. **Secret** means that there is no public oversight, no public control, no public participation in any development or application of the secret technology. Secrecy denies the public a true picture of what is possible, and what is being done—even though tax dollars are used to do it.

Even researchers studying mind-control topics may not have an accurate picture. Each isolated specialist or team, working on individual government contracts in scattered institutions, is told only the bare minimum needed to proceed with work on their particular piece of the puzzle. And they have no control over how the technology which they develop will be used. No matter how purely defense-oriented the researchers are, once that technology exists, they have no say in decisions on who will use it, on whom, or in what way.

Secrecy prevents normal dialogue between scientists. It eliminates public oversight and criticism. It prevents public knowledge of new mind-control technologies, either in experiments or in operations. Secrecy especially envelops any government operation that borders on illegality. Secrecy protects government agencies (and their personnel) who are involved in illegal, or quasi-legal, activities.

And, invisible under the cloak of secrecy, it is much easier for an agency to slide rapidly into greater and greater possession and abuses of power.

Any secret research can be turned against the government's enemies, foreign or domestic. Many secret technologies could also be used to protect the interests of any governmental agency or organization which had the use of that technology and which felt threatened, thwarted, or wished to establish a stronger position for itself. Such an agency, if it had propaganda capability, for example, might be tempted to generate "news" that would make the public think its enemies are their enemies, hoping thereby to eliminate its opponents. Agency managers thus might rationalize that any clandestine use of secret technology which protects their own interests is for the good of all.

5) Government Patents Its Research and May Seize Civilian Research

NSA contracts with private industry to manufacture its equipment but "the U.S. government, through NSA, owns all patent rights to both the research and the hardware." (Bamford, p. 491) **THE GOVERNMENT OWNS PATENT RIGHTS TO ITS RESEARCH AND HARDWARE. IT ALSO SEIZES CERTAIN CIVILIAN RESEARCH.**

Of the some three hundred secrecy orders issued each year at the U.S. patent office, all but a very few are on inventions the government has originated itself and has already classified. The remainder are on appropriated civilian research. The government can take any civilian research that it wants. Every civilian application to the Patent Office is first screened by an NSA-linked "Secret Group." The Secret Group decides which applications will be blocked with secrecy orders and taken over by the government.

Flanagan first encountered this rule as a high schooler. He developed a method of detecting time and direction of atom blasts and major rocket takeoffs worldwide. He won a science prize for his method, and got written up in the newspaper. Then, officers from Air Research and Development showed up and interviewed him. They learned his system, classified the information Top Secret, and departed. Months later, the U.S. government announced their possession of this technology.

Flanagan encountered a similar obstacle a few years later when he applied for a patent. The device, which he had invented, conveyed information to the brain by electromagnetic waves passed directly through the skin to a person's general nervous system. By his method, either visual or auditory images can be relayed without intake via eyes or ears. They are conveyed directly to the brain from peripheral nerves via the skin (which also is a sense organ).

This technology of direct transmission to brain, via skin, had applications to "very narrow band radio systems."

Flanagan's patent material was seized by the Defense Intelligence Agency under National Security Order #756,124. When the inventor protested in court, the seizure was defended by the United States Justice Department. Under law, no compensation was required. The inventor was forbidden to discuss, promote, or do any further research on his technology. (Begich, *Towards a New Alchemy*, pp. 28-30)

In April, 1978, Carl Nicolai (and a group of three other young inventors) received the patent office's reply to a six-month-old request for a patent on the Phasophone, a voice-privacy invention. He received, instead of a patent, a Secrecy Order on the invention. He also was warned that he would spend two years in jail and pay a \$10,000 fine if he revealed anything about his Phasophone to anybody who did not already know about it. (Bamford, pp. 446-449)

The same day that Nicolai received his Secrecy Order, another inventor, Dr. George I. Davida, a University of Wisconsin professor, had the same experience. Davida had applied for a patent on a new cipher instrument. The National Science Foundation had been funding his work. Both Nicolai and Davida fought their Secrecy Orders, taking on the NSA in court. After years of legal wrangling, the NSA eventually backed down on those two inventions. But the Agency did not make any long-term changes in their general style of operations.

A recent, similar case involved the Clipper Chip, another privately invented device. It created an unbreakable code for computer-to-computer communications. The inventor of the Clipper Chip refused to submit to the Secrecy Order's demand that he release information on his invention only to government personnel. He defied it. For that reason, he was prosecuted, convicted, and is now serving a long prison term.

...we face ever increasing intrusions on individual inventors by a government with a million lawyers on the payroll, funded with hundreds of billions of dollars and able to tie up individuals in a web of regulation and control, strangling freedom of thought...whose interests are served by withholding this kind of knowledge? And who are these non-elected, unappointed thought-police...? ...confiscation of property for application in military purposes may run counter to an inventor's religious or philosophical beliefs...What right does a government have to take what others have created, and interfere with the inventor's ability to continue to develop his ideas? (Begich, pp. 32-33)



6) Managed Media

Propaganda is mind-control designed to efficiently influence many people at the same time. It can be disseminated via print, pictures, TV, radio, and contrived rumor. Nazi propagandists used “The Big Lie” technique in World War II. Whatever the tale was, no matter how illogical or slanderous, if a credible source repeated it, many people would come to believe it. Other propaganda methods are fake photos (an easy technology in the computer age), false statements by authoritative sources, use of loaded words such as “racist” or “white supremacist,” combining a message in speech or lyrics with an emotional setting (the national anthem before the ball game), the bandwagon technique (“everybody’s doing it”), and the use of media subliminals.

The techniques of propaganda and advertising are the same. The goals may differ. The April 24, 1995, issue of *Advertising Age*, on “terrorism,” frankly described THE LINK BETWEEN SECRET AGENCIES AND MEDIA. In “Setting Minds Against Terrorism,” author Joe Mandese, says that “public policy” is thought up by National Security Council “policy makers” and then packaged in “behavioral science” (mind control/propaganda technologies?). He says the policy makers then send the package over to the CIA and FBI (and NSA?). Those agencies have partners on Madison Avenue who then see to it that the package is nicely presented and well distributed by print and electronic media.

If Mandese is correct, high-level government intelligence organizations decide what Americans are to believe. In a society where situational ethics (whatever we tell you is right, is right) is promoted, situational data is a natural corollary (whatever we tell you is a fact, is a fact). Mandese quoted interviews with executives whose first priority was to “implement strategies” rather than to report facts. The media manager’s top priority was to make persons view the U.S. government as loving and benevolent (and truthful?).

The only change in this procedure that Mandese, a representative of the advertising profession, proposed in his article was shifting the process, of planning government propaganda, to include advertising and marketing specialists who would join the committee of intelligence agency representatives. Mandese did not want to lessen government media influence. He just wanted a bigger role for his constituency—the advertising professionals—in the process of deciding what citizens are caused to believe, and in determining how they will be made to believe it.

The *Science of Coercion* by Christopher Simpson

(Oxford University Press, 1994) further documents how private corporations, thinktanks, foundations, and university social scientists have advised officials and police agencies on how best to deploy government propaganda. There are now said to be “Psy War” groups in the Pentagon, NSA, FBI, CIA, NSC, ATF, Secret Service, and U.S. Marshal Departments. The Defense Department has established a Director of Information Warfare who will manage an Information Corps.

The Information Corps would be an elite military force developed to mastermind information attacks and countermeasures. Under the cloak of national security initiatives, this group would act not only to defend our borders against alien attacks of aggression, but also to protect the nation’s Government from its own citizens. (“The Double Edge of Computers,” The Voluntaryist, June 1996, p. 4)

How tragic that true facts are seen as a problem to be overcome by those who govern. How tragic that propaganda creation and dissemination—and even disinformation—is being institutionalized as a part of secret agency, military, and police agency operations. INFORMATION CONTROL IS THE KEY TO MIND-CONTROL—INDIVIDUAL OR MASS. You are what you know (or what you think you know), true or false. If what you know is fact, you can make the best possible decision. Democracy works best when voters are correctly, and fully, informed.

Musings

After World War II, democracy’s shift to technocracy in the United States accelerated. New attitudes arrived with that shifting social basis of power. The new sci-tech elite rewrote the commandments.

Telling the truth is not just off the list of commandments; telling the truth to anybody but your authorized associates and superiors—if you know anything of significance—has been made a **sin** in the new order of things. With the Ten Commandments and God seemingly disposed of, **situational ethics** is in power.

The bottom line, after the casting away of Biblical values, is what a blatant mind controller told me, years ago, when I asked him to define ‘good’ and ‘evil’: “If I can get away with it, it is ‘good,’” he replied. That is the emerging ethic of our Machievellian Brave New World. The goal of those who play this game is power, profit, or both. Their method is—anything they can get away with.

Musings on The Waco News

I had no patience with people who tried to tell me that our media is controlled until the day the fire started in the Branch Davidian compound in Waco. Like millions of Americans, I was watching CNN as a tank rolled up to the thin, wooden, outer wall of the compound. The tank then rammed and penetrated it. I watched the tank back up, leaving a small hole, and then surge forward again, punching the hole larger. I don't recall how many times it backed up and rolled forward, enlarging that hole.

I do clearly remember that, after one backing out, I saw a fire inside the jagged opening in the compound wall that the tank had made. I watched in horror as the flames rapidly spread from there to the rest of the structure, and then engulfed it.¹

A few minutes after the fire started, a CNN announcer appeared and said they didn't know how or where the fire had started and that they were waiting for information from Washington, D.C. I thought, "That's odd. Everybody who was watching knows where and how the fire started. In a minute they'll rerun the film of the tank going in and out of the wall and show again the film of that first appearance of flames inside the broken-down wall." But they did not show that footage again. Instead, a few minutes later, the announcer came back on and said that sources in Washington, D.C. had informed him that the fire had started in several places at once, and that those fires had been started by persons inside the compound.

I was shocked to realize that CNN had a government representative in their control booth (or elsewhere, watching and in phone contact), who decided what people would see as "news" and what our "facts" were going to be. What would be the slant of this kind of news? That day, the operational guideline was: If it makes the government look bad, it did not happen. If it makes the other guy look bad, it did happen.

After people catch on (and they do), however, government distortion of news ends up making the government look bad rather than good. People who realize they have been lied to may lose faith in everything they are told by a public source. They may assume that any news that makes the government look bad must be the truth. They may become open to believing terrifying propaganda produced by persons whose agenda is even less desirable than that of their government. In the long run, it is better public policy to allow journalists to tell the truth as they (and the viewers) really saw it.

Skinner on Behavior Control: The Rest of the Story

There is no subjugation so perfect as that which keeps the appearance of freedom...

- Jean-Jacques Rosseau, *Emile*

As an undergraduate, B. F. Skinner read Gantt's translation of Pavlov. Later, he studied Watson's books. He decided to devote himself to this new field of behaviorism. Ultimately, he became a Harvard professor. Skinner wrote about ten books, and many articles, over a long and distinguished career. He discovered another way of building conditioned reflexes in addition to the phenomenon which Pavlov had identified and called classical conditioning. Skinner's method, called **operant conditioning**, is accomplished by either **positive** or **negative** reinforcement.

The National Institutes of Mental Health supported Skinner financially while he produced the thin volume titled

Beyond Freedom and Dignity. Was that support because the NIMH managers wanted to popularize concepts of conditioning and Skinner's arguments on behalf of a society managed by psychologists who viewed people as sophisticated machines? After publication, that book received tremendous media support. It was a Book-of-the-Month Club selection, serialized in *Psychology Today* and the *New York Post*; it was assigned reading in psychology classes, and enormously successful both in hardcover and paperback.

Skinner wrote a sequel to *Beyond Freedom and Dignity*, titled *About Behaviorism*. Therein, he stated that this book was intended to be an antidote, a correction to

1. I heard later through independent media that the fire started because the tank's intrusion knocked over a kerosene lamp.



what he viewed as the rosy one-sidedness of *Beyond Freedom and Dignity*. *About Behaviorism* deals with abuses of control—a subject which his previous book had completely ignored. *Beyond Freedom and Dignity* also ignored all methods of behavior control which were painful (negative reinforcement) rather than pleasant (positive reinforcement).

The many organizations which had supported the success of *Beyond Freedom and Dignity*, at every stage, did not similarly support *About Behaviorism*. NIMH did not financially support Skinner's work on the second book before publication. After the completed book was on sale, the media did not promote it. Virtually unknown to the public, *About Behaviorism* sold poorly and was soon out of print.

In *Beyond Freedom and Dignity*, Skinner provided strong arguments for control of people. He said, "The literature of freedom has never come to grips with techniques of control which do not generate escape or counter-attack..." (p. 34) Did he mean fat paychecks? Did he mean suggestions given to people who are staring at a screen, in a lowered state of consciousness, watching advertising, propaganda, or "entertainment"?

A government may prevent defection by making life more interesting—by providing bread [food stamps?] and circuses [TV sitcoms?] and by encouraging sports, gambling, the use of alcohol and other drugs, and various kinds of sexual behavior...The Goncourt brothers noted the rise of pornography in the France of their day: "Pornographic literature," they wrote, "serves...one tames a people as one tames lions, by masturbation." (Skinner, Beyond Freedom and Dignity, p. 32)

In *Beyond Freedom and Dignity*, Skinner seems always to be supporting the controllers. In *About Behaviorism*, however, Skinner clearly corrected that impression:

Organized agencies or institutions, such as governments, religions, and economic systems, and to a lesser extent educators and psychotherapists, exert a powerful and often troublesome control. It is exerted in ways which most effectively reinforce those who exert it, and unfortunately this usually means in ways which either are immediately aversive to those controlled or exploit them in the long run.

Those who are so controlled then take action. They escape from the controller—moving out of range if he is an individual, or defecting from a government, becoming an apostate from a religion, resigning, or playing truant—or they

may attack in order to weaken or destroy the controlling power, as in a revolution, a reformation, a strike, or a student protest. In other words, they oppose control with countercontrol. (About Behaviorism, p. 190)

Skinner called the power of non-controllers, **countercontrol**. He considered countercontrol a good thing. Between labor and union, for example, he said, countercontrol can result in a negotiated contract that meets the needs of both sides. In a true democracy, the opposition party represents the needs of those who are temporarily out of power. Eventually, when the force of public frustration has built up enough to win an election, power makes a healthy shift, at least for a while, to the previous outsiders. If democracy is allowed to function, this is how it works.

Skinner called a balance of politically opposing forces, with equally effective powers on each side, **equilibrium**. He said that political equilibrium was about as good as it gets, though inherently unstable.

Skinner did not believe that benevolence and compassion were important motivations in human behavior. He tended to interpret all social dominance dynamics in terms of power. He said "benevolence is no guarantee against the misuse of power." (*Beyond Freedom and Dignity*, p. 38). He later expanded on that thought:

The point is illustrated by five fields in which control is not offset by countercontrol and which have therefore become classical examples of mistreatment. They are the care of the very young, of the aged, of prisoners, of psychotics, and of the retarded. It is often said that those who have these people in charge lack compassion or a sense of ethics, but the conspicuous fact is that they are not subject to strong countercontrol. The young and the aged are too weak to protest, prisoners are controlled by police power, and psychotics and retardates cannot organize or act successfully. Little or nothing is done about mistreatment unless countercontrol, usually negative, is introduced from outside. (About Behaviorism, p. 191)

People with satellite-tracked chips in them would not be able to "escape from the controller by moving out of range." The original Constitution and Bill of Rights of this nation was designed to perfectly balance control with counter-control. That balance is now lost—or at risk—in many areas. For example, a friend of mine, who is an elected county judge, recently told me of pressures to eliminate elected judges (making all appointed) and the use of juries, nationwide.

Glossary

The language of hypnosis can be confusing to the uninitiated. How can a “suggestion” be words meant to be obeyed with machinelike unconscious automaticity? Why is a hypnotist also called an “operator”? These definitions, along with the table of contents and index, are designed to help you better understand the vocabulary and technology of hypnosis.

A

Ability, Hypnotic—This is a modern euphemism for what the old-timers called **hypnotic susceptibility**.

Abreaction—**Abreaction** is a deeply emotional remembering, a reliving of some past incident. It usually takes place in a state of lowered consciousness. If no emotion was expressed, abreaction did not occur. Healing is enabled when the patient recovers to consciousness forgotten memories and experiences—and simultaneously expresses their associated deep emotions. Jung said that abreaction was

...the dramatic rehearsal of the traumatic moment...in the waking or in the hypnotic state and [it] often has a beneficial therapeutic effect. We all know that a man feels a compelling need to recount a vivid experience again and again until it has lost its affective value...Abreaction is...an attempt to reintegrate the autonomous (traumatic) complex, to incorporate it gradually into the conscious mind as an accepted content, by living the traumatic situation over and over again... (The Practice of Psychotherapy, pp. 131-132)

Freud and Breuer were the first to identify the phenomenon of abreaction. They called it **catharsis**. Freud built his psychoanalytic psychology on this foundation. In World War I, hypnotic abreactive treatment was common. In World War II, doctors speeded up the treatment. They used narcohypnosis to quickly induce deep trance, then suggested regression and reliving of the memories and buried pain from recently repressed war experiences.

For an amnesic patient, the medical goal of abreaction treatment was to retrieve the repressed memory, plus its associated emotion. If a patient could remember the incident, but had repressed its associated emotion, the therapeutic goal was to retrieve and feel that emotion.

Abreaction also results in bonding with the therapist, and in increased suggestibility. It is a fact that you bond with whomever you cry with, and you listen to their advice with enhanced suggestibility.

If any patient is subjected to repeated abreaction...as in psychoanalysis and other



more intensive forms of psychotherapy, and if this occurs over a period of months or years, he often becomes increasingly sensitive and suggestible to the therapist's suggestions and interpretations of symptoms. A hypnoid state of brain activity may result. Patients may come to feel that in some way they are in the hands of a person of almost divine wisdom; they avidly accept suggestions from the therapist about altering their behavior, which would have been quite unacceptable to them in their more normal state of mind. Quite bizarre interpretations are accepted and false memories are believed as facts... (Sargant, *The Mind Possessed*, 1974, p. 17)

Releasing the emotion is a predictable path to healing if the emotion is fear or anger. An extreme outburst of feelings of fear or anger relieves symptoms, so the patient's reliving needs to be as emotional as possible. The doctors developed a routine wherein the patient accessed it, felt it, and worked with it until he consciously understood how the repression had affected him. Then he was able to put the traumatic memory to rest and get on with his life. (However, accessing the emotion of sadness in a depressed patient makes him more depressed.)

Most therapies now include abreaction as a goal. Some therapies now use an abreaction process based in a context of confabulated "memories" and their associated emotions.

Addiction—If you do not quit doing what does not work, you are **addicted**, or have a **neurosis**. Those are deep-level programmings that need to be revised.

Affect—**Affect** is the psychologist's word for emotion. The affective part of a person's response can range from **apathy**, which means no affect at all, to very intense feelings. **Affective tone** refers to a point on the possible spectrum of affect, ranging from the worst pain to the keenest pleasure. Every **conditioned reflex**, meaning every imprint your brain contains, has an associated affective tone.

Emotion makes you more programmable. It **lowers thresholds** (makes programming easier) if the affect is increasing. By the same rule, you become less programmable when in a state of decreasing affect. Greater associated affective tone means better memory for that item. Less associated affective tone means you are more likely to lose that memory.

For example, the TV story, fight, game, or news heightens your emotion. Then comes the commercial. The commercial may further arouse you emotionally (and/or lull you hypnotically). Then comes the commercial's pitch line. Whatever you associate with emotion, can program you.

Agent—Euphemism for a hypnotist, operator.

Altered State of Consciousness—An altered state of consciousness is any mental state (caused by physiological, mental, or chemical actions or agents), which the subject, or an observer of the subject, recognizes as different from his usual waking consciousness.

Amnestic—Amnestic information is brain data for which you are amnestic.

Analysis—"Analysis" can be an abbreviated term for **psychoanalysis**, which investigates verbal memory and thought processes, looking for buried old traumatic material that may be causing present problems. **Jungian analysis** investigates your symbolic, mythic right-brain memory and thought processes. Both analytic approaches have validity, because each draws on a different one of the two separate, parallel hemispheric memory systems--verbal and symbolic. The experience of them is very different, however.

Anchoring—A purely mental suggestion can be strongly reinforced by associating it with an actual physical event, usually a touch. **Anchoring** involves the hypnotist touching the subject, or the hypnotist telling the subject to touch a real object.

Bergen used an anchoring touch to begin, reinforce, and deepen Mrs. E's trance when he was trying to persuade her unconscious to do something particularly objectionable. When John first hypnotized Candy, he told her to close her eyes, think of her forehead, and relax her forehead. He then gently, briefly touched her forehead and eyelids--an anchoring.

Antisocial Hypnosis—For 200 years, the term **antisocial hypnosis** has categorically referred to the possibility that a hypnotic subject can be made to commit a crime, or to be a victim of a crime. The **experimental hypnotists** who researched and argued this subject usually avoided the question of whether a hypnotist could be tempted to so use a subject. They focused almost entirely on whether exploitation was possible.

Anxiety—If you feel apprehension, uneasiness, or a sense of dread, but do not know why, you fit the psychological definition of **anxiety**. The cause is unconscious fear. It may be appropriate, or just a misprogramming. The feeling is hard to overcome until you learn what its unconscious basis is.

Association—In the context of psychology, an **association** is a mental connection between ideas. You can associate words, images, or both. Associations are more like a web than a chain. They are linked in **associative networks**. The key word, to which you associate, is called the **index word**. It draws out con-





nected items from what memory expert Casey called the “ramifying pathways.”

*...to remember my childhood dog “Peggy” is at the same time to enter a microcosm of that period of my life, a mini-world in which “Peggy” links up with other dogs my family owned, with the way they were regarded by my siblings, with the way they made that domestic space more warmly familiar, etc. Each of the themes just mentioned represents a pathway in this particular part of my past; and from each pathway still others diverge: from “Peggy” the dog to Peggy Mills, the wife of my father’s law partner, to “Peg O’ My heart,” or to Charley Peguy, the French writer...Exploration within memory—even within a single given memory—is potentially endless. (Casey, *Remembering*, pp. 204-205.)*

Association has an important role in the remembering process, and in the therapy process.

Automatism—Automaticity refers to actions performed unconsciously, reflexively. When you learn to drive, you are learning dependable habit-responses that will eventually be **automatic**, functioning with little active participation by your conscious mind.

Aversive Conditioning—Aversive conditioning means training by punishment. In behavioristic psychology experiments, it has often meant electric shock.

*[Prodding is]...primarily a form of punishment training which almost always includes elements of classical conditioning...In virtually all of the clinical procedures, the delivery of a shock stimulus is contingent on the occurrence of a deviant response. (Rachman and Teasdale, *Aversion Therapy and Behaviour Disorders*, Ch. 11)*

Rachman and Teasdale’s big, grim book on the subject of using electric prods to educate people also covers other aversive methods, but the authors’ preferred method was the prod.

Pavlov’s Russian contemporary and competitor, Sechenov, was the first to use electric shocks for conditioning. Shocking has been used ever since. The idea of using cattle prods on people is about as old as cattle prods.

Electrical stimulation can be precisely controlled. The therapist is in a position to administer a discrete stimulus of measured intensity

*for an exact duration of time at precisely the required moment...Unlike chemical aversion treatment, electrical stimulation permits frequent repetitions of the association between the unwanted behaviour and the noxious stimulus. It is perfectly feasible to present a large number of trials to the patient during one session and also to provide for numerous conditioning sessions within the same day. This should enable treatment to progress more quickly. It is also feasible to construct portable apparatus for the delivery of shocks and this allows treatment to be carried out on an outpatient basis. (Rachman and Teasdale, *Aversion Therapy and Behaviour Disorders*, pp. 34-6)*

Capitalists responded promptly to requests for a smaller, human-sized prod:

Many reform schools and corrective institutions in different parts of the country are still employing the electrically charged cattle prod to shock the recalcitrance out of one’s system. The voltage is high enough to destroy the skin on contact. Recent entrants into the field boast of greater refinements in the kind of electric-shock devices they produce; for instance, the Farrall Instrument Company of Grand Island, Nebraska, claims to have overcome the crudity of the cattle prod by having its electric shockers include a voltage control.

*The Farrall Company, which exhibits its wares at the meetings of the American Psychological Association and other professional conventions, distributes literature rejecting the views of many professionals that aversive methods are more punitive than corrective. It contends that zapping is the panacea for ‘anti-social behavior, for psychosomatic disorders, self-destructive behavior and sexual deviance.’ (Chavkin, *The Mind Stealers*, p. 58)*

The shocks used in aversive conditioning are big ones, maximally strong from the very beginning:

...shock intensities need to be fairly high and the hope expressed earlier by Eysenck and Rachman (1965) that mild shocks may be adequate, now seems less probable. It is best to avoid building up from mild to strong shock as this procedure may produce habituation effects... (Rachman and Teasdale, p. 70)

Rachman and Teasdale quoted Azrin and Holz

(1966) on how to most effectively eliminate a targeted behavior using aversive conditioning:

- 1) *The punishing stimulus should be arranged in such a manner that no unauthorized escape is possible.*
- 2) *The punishing stimulus should be as intense as possible.*
- 3) *The frequency of punishment should be as high as possible; ideally the punishing stimulus should be given for every [disobedient] deviant response.*
- 4) *The punishing stimulus should be delivered immediately after the response.*
- 5) *The punishing stimulus should not be increased gradually but introduced at maximum intensity.*
- 6) *Extended periods of punishment should be avoided...since the recovery effect may thereby occur...*
- 7) *An alternative response should be available which will not be punished... (Ibid, p. 21)*

The available **alternative response** is submission to whatever the person holding the prod is demanding.

Awake—When the hypnotist is finished and wants you to **wake up**, he says so, and you do. Technically, hypnosis is not sleep, although many oldtime researchers thought it was. Humans are suggestible and are likely to do what the suggester means rather than what he says. If he says “sleep” in an induction procedure, and means hypnosis, he may obtain a hypnosis.

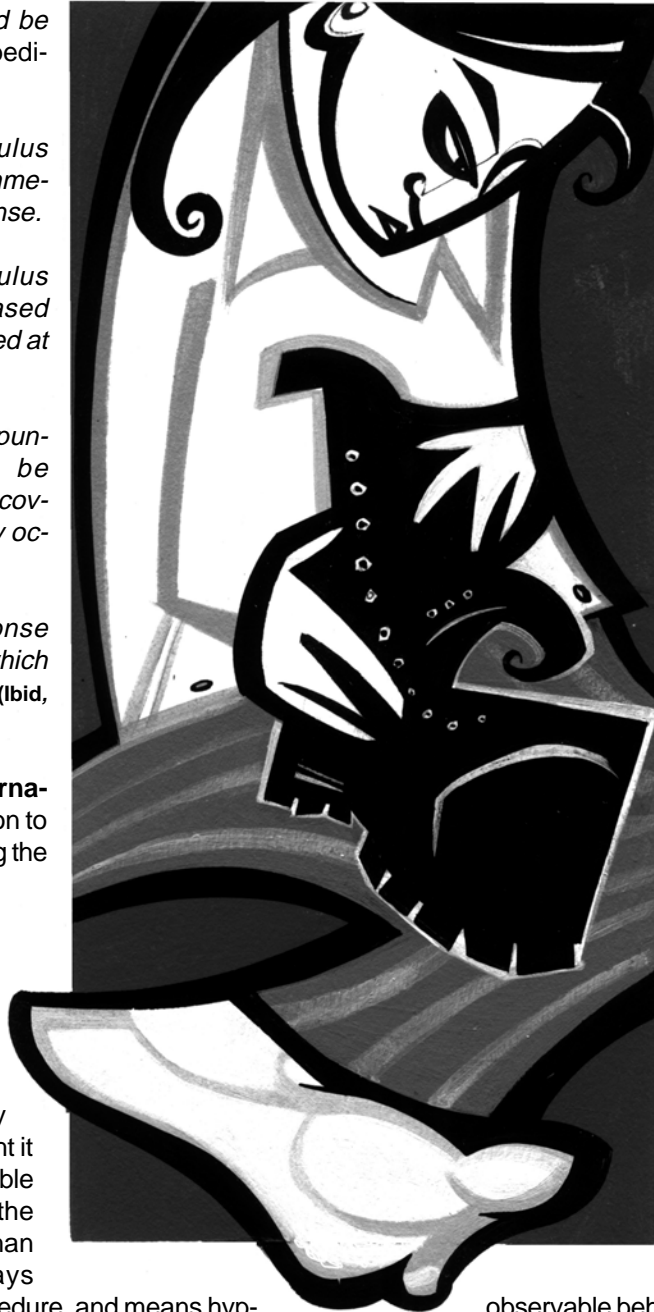
B

Behavior Shaping—This term, **behavior shaping**, comes from **behavior modification**. It means the planned, step-by-step establishment of a series of conditioned reflexes. Each step is achieved and **reinforced** before the next is begun.

Pascal and Salzberg (1959) published a behavior shaping series of steps to create **hypnotic conditioning**. Item 7 asked for waking trance (a somnambulistic depth). Items 8 and 9 were for posthypnotic suggestions: one for a specific amnesia, the other for a posthypnotic act (removing one’s shoe to take out hallucinated “pebbles”). In step 10, the wake-up suggestion was given, and tests were given to see if 8 and 9 had worked. Using this system, Pascal and Salzberg reported that over 50% of their subjects had reached somnambulist depth.

Behavior Therapy—The process of **behavior therapy** assumes that personality is an expression of past conditioning. It is a brain’s physiological habits. The basic techniques of behavior therapy are **aversion therapy, desensitization, operant conditioning, modeling** and **biofeedback**.

Behavioral psychologists focus on outwardly observable behavior rather than on what their patient thinks. Behavior therapists focus on treating a





specific symptom, rather than freeing up a wide range of unconscious feelings, as a Jungian or Freudian therapist might do. Thus, behavior therapy emphasizes **symptom removal**: “Get rid of the symptom and you have eliminated the neurosis.” (Eysenck, 1959, p. 65) If the symptom goes away, that means, to a behaviorist, that the treatment was a good one.

Some behavior therapists depend heavily on **relaxation** and **imagery** inductions followed by suggestions or image manipulations. A behaviorist is not interested in spontaneous images which a subject may generate. The goal of this type of therapist is to cause the subject to visualize only the specific images which he tells him to visualize.

Block—A suggestion given under hypnosis that prevents any later hypnotic suggestion is called a **block**. For example, a **sealing suggestion** blocks induction by any other hypnotist.

Brief Therapy—Because **hypnotherapy** can go so quickly to the root of the problem, one school of hypnotherapists calls it **brief therapy**. But some “brief” therapists keep their treatment far briefer than others do. The time requested by a hypnotherapist to solve a subject’s problem can range from one session to months, or even years, of sessions.

C

Catatonic—A **catatonic** state involves suggested muscular flaccidity or rigidity.

Clinical—Literally, **clinical** means “bedside.” Clinical training is actual internship in a medical setting as contrasted with learning from books and lectures.

Cognitive Dissonance—We defend our mental and life status quo against whatever seems to threaten it. Leon Festinger first pointed out the phenomenon of cognitive dissonance.

The word “dissonance”, in its ordinary meaning, refers to an inharmonious, inconsistent, discrepant relation between two things. The usage in the theory is similar to this. A cognition is something a person knows about himself, about his behavior, or about his surroundings. Dissonance is said to exist when two

cognitions, occurring together, are inconsistent with each other according to the expectations of the person...These expectations of what goes with what are built up on the basis of past experience, including notions of logical relations, cultural mores, and learned empirical correlations among events.

The central hypothesis of the theory is that the presence of dissonance gives rise to pressure to reduce that dissonance, and that the strength of the pressure is a direct function of the magnitude of the existing dissonance... Dissonance is conceived as a motivating state comparable to other drive states. Successful reduction of dissonance is, for example, comparable to successful reduction of a state of hunger. (Festinger and Bramell, 1962, p. 256)

People also emphasize the best of what they have chosen in the past and automatically deprecate what they have rejected in the past. We prize consistency in our thought. When a survivor of criminal hypnosis, first recovered a memory associated with amnesic sexual abuse, she refused to continue the process of remembering. She said that what she was remembering was not possible. It did not fit with what she had believed about her life before that moment. She was suffering from cognitive dissonance.

Conditioning—Pavlov originated the view of mental function as based on natural and acquired mental reflexes. He taught that mental reflexes can be created deliberately, or erased. He called that process **conditioning**. Conditioning is a type of training meant to take hold in your unconscious as a reflex. Hypnotists, during and after the fifties, began to use the behaviorist’s word, **conditioning**, to also mean suggestions given under hypnosis.

The study of conditioning theories, methods, and applications is now far advanced. There are four types of conditioning: 1) direct **programming** of a subject in trance using conventional forms of communication, 2) Pavlov’s **classical conditioning**, 3) Skinner’s **operant conditioning**, and 4) Thorndike’s **solution learning**. All four types create habits, which are unconscious reflexes.

Classical conditioning happens automatically. In operant conditioning—also known as **learning theory**--you learn because of the result of your act. Operant conditioning is the carrot-and-stick, reward-and-punishment, system. Your operant learning may be initially conscious, but it soon turns to habit (unconscious).

Conscious Mind—There are parts of the brain associated with the **conscious mind**, and parts associated with the unconscious mind. The conscious is closely linked to the **somatic nervous system** (voluntary muscles) via the cerebral cortex (the outermost layer of the cortex). Your thinking, reasoning site is at the extreme frontal area of the cortex. Some psychoanalytic psychologists call the conscious the **ego**, or “Ego.”

The job of consciousness is to deal with things for which no habits yet exist or which cannot be left to habit. Consciousness is a luxury in terms of using available mental circuits. We use it sparingly. Most of our mental activity is unconscious (automatic and out of awareness). Stopping at a red light is something you do consciously the first few times. You shift to doing it unconsciously as soon as it becomes habit. When you make an automatic response based on habit, choice is not involved. The act is unconscious.

Choice is the most important role of the conscious part of your mind. Consciously we look at new possibilities, consider reasons and circumstances, factor in our emotions and hopes. If you are denied consciousness, you are denied much of your capacity for free choice, free will.

Consciousness can only work with what data is available to it. Repressed, denied, amnesic data is out of reach for the conscious mind. Therefore, it cannot be factored into conscious analyses preceding choices. The better we understand all the unconscious factors that influence our behavior, the freer and wiser we can be in our behavioral choices. On the other hand, it would be cumbersome, inefficient--if not overwhelming--to consciously process all our sensory intake, data evaluation, and responses.

Therefore, we need both our conscious and unconscious minds. The conscious mind, or **ego**, is our analyzer and decision-maker. The **id** (libido) provides hormonal, instinctive goal directions that **drive** (in the sense of impel) the brain system. The **super-ego** contains the rules we have been taught, and those learned by experience. It forces the drive to play the game by those rules. The deep **unconscious** is a vast data bank and data processor whose program never finishes running.

Contagion—Induction by **contagion** means induction by unconscious acceptance of an unconsciously perceived suggestion to enter trance and behave in a way you have heard mentioned or seen modeled by someone else.

Context Clues—A hypnotic subject may recognize a past hypnosis incident because of context inconsistencies or inappropriateness. For example, Zebediah realized the hands of the clock had inexplicably jumped forward.

Control—“The concept of **control** is at the center of all psychological research,” Ms. Higgins lectured my Developmental Psychology class. The goal of behaviorist, “scientific” psychology has been the prediction and control of behavior.

The fundamental moral issues in behavior control do not change, of course, no matter what technology develops around them. They are now, as ever, only these: Who shall be controlled? By whom? How? (London, Behavior Control, pp. 180-181)

The inability to make somebody else do what you want frustrates; the dream of omnipotence lures. Society tends to be a hierarchy of controllers and controlees. The healthy counterbalance to control is **autonomy**, for the opposite of control is autonomy. Autonomy is fundamental to identity (and knowing one's true identity is fundamental to autonomy).

Human beings typically give up some autonomy. Why? They do so in order to bond, network, and create a safe social shelter in which to live. The loss of autonomy is scary, yet also attractive, because we are a naturally cooperative species whose cooperation helps us and our descendants to survive. It is the nature of our lives that we have to work together to accomplish almost anything.

Control always looks better in a context of one human being taking responsibility for the welfare of another. As long as our trust is fulfilled and not betrayed with exploitation it is a trade-off that can work for both sides. Control can be predatory, or altruistic, or set up for fair-sharing of power and rewards.

Some psychologists look for ways to control people. Some look for ways to set people free. Some do both. Different schools of psychology have different inclinations. Behaviorists are generally more controlling, Jungians more freeing. Brainwashing is a control technology. Hypnosis can be used either to control or to free.

To a behaviorist, the means to control a life form is to control its environment. To acquire complete control, you completely control the subject's environment. The “mountain tribes,” the “country people,” have



been throughout history a source of annoyance to urban centers of political control. Rural populations tend to be more independent-minded because they are accustomed to more control over their own environment. They grow some of their own food and livestock, perhaps hunt. They situate and build homes somewhat more freely than urban folks. They live, perhaps, beyond observation.

The control of a person's environment, above all, is based in control of their data input. We are what we know (or what we think we know). Whoever influences, or controls, the press, the media—what is said on the 5 o'clock news—influences, or controls, the mind of the nation. People who refuse to watch TV, who do not read conventional newspapers or listen to regular radio stations, and who homeschool their children, are most threatening to central programmers. They avoid “knowing” what everybody else “knows.” That allows them to develop some point of view or belief that is uncomfortable to the media-controllers.

Conversion—This has two meanings:

- 1) To change belief systems. **Conversion** is the goal of every form of persuasion from advertising to evangelism to brainwashing. The prize is your belief because, from your beliefs, come your behaviors, your choices in religion, politics, economics, child bearing, and child rearing. In every contact and context, you experience persuasion—and probably also exert it.
- 2) “Conversion” is also a term used by hypnotists to mean switching one symptom or behavior (or belief) for another.

Corroboration—Additional independent evidence that supports the original evidence is corroboration. For example, nonhypnotic evidence that supports evidence from a rehypnotization is corroboration and is considered important if a case of criminal hypnosis comes to trial.

Cue—The **cue** is the sensory trigger for a previously implanted posthypnotic suggestion. It instantly triggers a trance state, which is a continuation of the previous trance, and which is focused totally on the accomplishment of the cued task.

Cybernetics—When the brain and nervous system are thought of as an electronic machine—and when machines are thought of as possessing intelligence, even consciousness—this is **cybernetics**.

D

Daydreaming—**Daydreaming** occurs in a lowered state of consciousness-- more to certain types of people than to others. Some daydreamers make up their own stories. Some simply let it happen; that is **autonomous imagery**.

Delirium—An oldtime word for a somnambulistic trance.

Deprogramming—A person who has been brainwashed and then undergoes a rebrainwashing directed at undoing the previous one is said to be **deprogrammed**.

Densitization—**Desensitization** is a behavioral therapy technique for dealing with anxiety-provoking ideas. It can cure **phobias**. Desensitization usually starts with relaxation training to create a trance, but formal trance does not have to be involved. After doing induction training, the therapist presents a series of imagined situations, involving the phobia, in a progression from least to most anxiety-causing. He first asks the client to imagine only little challenge in the problem category, but then moves on to suggest the imagining of bigger, and yet more difficult scenes. (The same **behavior-shaping system** can be used to sneak up on any goal.)

The hypnotic **abreaction** of a traumatic, repressed memory is accomplished in a similar way. When the memory is first encountered, the subject perhaps can be there and suffer the feelings for only half a minute. Then he is brought forward to a happier time for relief. The therapist then returns the subject back to the traumatic scene for about 30 seconds--on that same day, or on a later one. After enough brief visits to the traumatic material, it will be desensitized.

Why did Candy agree to welcome a stranger into her hotel room in San Francisco? She was a long-term responder to patriotic appeal. Every request in the desensitization series that the CIA used to entice her into their hypnoconditioning trap involved the patriotic angle:

1. Will you (help the law and) give me information about the burglary? (“Yes,” she said.)

2. Will you let the FBI receive letters here? (“Yes.”)
3. Will you call this number everytime something comes for us in the mail? (“Yes.”)
4. Will you personally carry a letter to a man in San Francisco? (“Yes.”)

Candy’s recruitment to CIA hypnoprogrammed courier status was proceeding in a systematic way too:

1. Candy agrees to receive letters for the agency.
2. She agrees to personally carry a secret letter to some unknown man who would knock at her hotel room door in a faraway city.
3. She is then invited to officially become a CIA courier.
4. Ultimately, she carries messages on paper, or in her mind, consciously knowing, or unknowing.

Disorientation—This technique aids induction, deepens trance, and strengthens operator control. For more information, see Operation Often in Part II.

Drive—The deeply rooted needs that push you are called **drive**. In the brain, “drive” equals energy. Emotion causes drive. Sex and aggression are brain drives which are usually inhibited or limited to a permissible form of expression. **Primary process** (unconscious) thinking is sometimes also called “drive,” when it is bound up with deep-level drive emotions. We are most likely to repress, “forget,” mental thoughts or data which are drive-related, having sexual or aggressive associations. The way our brain is wired gives drive-related thoughts a capacity for indirect, unconscious expression.

E

Ego—The **ego** is your conscious mind. It is the part of you that has the responsibility of making choices, your “I wills,” and “I won’ts.” It sets goals for the unconscious. It is skeptical and analytical, a good reality tester. It holds the reins to retrievable memories (the continuity of experience by which you define yourself). The ego is not always in control. (See Rationalization,

the lies we tell to ourselves.) Reality and fantasy are difficult for an unconscious to distinguish if deprived of its ego’s supervision and abilities. That is because, to an unconscious, all data is “now” and “real.”

F

Feedback—Observing cause and effect, noting good and bad outcomes, and revising our behavior accordingly, is our **feedback** loop. Self awareness lets you exercise self-control. With feedback, people can accomplish marvelous feats of learned self-control. On the other hand, if the feedback function is blocked--as by suggested amnesia-- the subject is prevented from reforming problem programming in his mind.

Forensic Hypnosis—This is the study of the use of hypnosis in a trial setting.

Freudian Hypnotists—Although many aspects of Freud’s theories have been revised or discarded by later psychologists, his concepts of the function of the unconscious, of repression and other defense mechanisms, and the importance of impressions in early childhood, have successfully withstood the test of time. Some Freudian hypnotists performed **psychoanalysis** under hypnosis, which they called **hypnoanalysis**, instead of using Freud’s long talking method of psychoanalysis. During World War II, some Freudian psychiatrists used drug inductions followed by abreaction, a process which they called **narcoanalysis**.

Both narcoanalysis and the theories of the Freudian hypnotists are important in the history of mind control.

H

Hellstromism—**Hellstromism** is a “highly developed 6th sense.” Stage performers who do mentalist acts use this word to describe their skill. Texts on this subject are sold in magician specialty shops.

Hypermnesia—**Hypermnesia** is an ultra-clear remembering of forgotten details of past experience by



Freudian Hypnosis Theory

Schilder and Kauders, two Viennese psychiatric hypnotists contemporary with Freud, began the effort to interpret hypnotic phenomena, à la Freud. They believed infantile, unconscious needs powered the hypnotic induction and subsequent rapport:

- 1) The wish to “participate in omnipotence” (to subordinate oneself to another person’s authority).
- 2) Tendency to love.

1) Need for Omnipotence—Schilder believed that the infant unconsciously desires **omnipotence**. He meant that the baby wants to win in all contests of will. Reality forces that “latent need” to retreat. Even after it is repressed, however, that desire continues to influence the child’s fantasy. As fantasy, it has potential for projection upon other persons—such as a hypnotist.

...alterations take place in the external world at his mere wish. For the hypnotized, at least, he is the great magician, who alone is capable, by his wish and will, to produce creative changes in the universe, to eliminate objects from the universe, or supply them to it. In addition, he has this great power over the bodily functions of the hypnotized, in other words, the hypnotizer is a magician, a sorcerer, in the mind of the hypnotized. (Schilder and Kauders, p. 42)

Indeed, the hypnotist can be a powerful magic-maker who changes the subject’s sensory perception and bodily function at his mere word. Schilder reasoned that because of the subject’s own latent longing for such magical power, he yields himself to the hypnotist’s will “to have a share in the greatness of the hypnotizer.”

R. W. White was a psychoanalytically-oriented psychiatrist who researched during World War II. He said that susceptibility to hypnosis depends on aptitude plus **motivation**—unconscious needs for love, obedience, and an omnipotent person in your life:

...latent infantile needs sometimes function as motivating forces favorable to hypnosis: the need for love, such as a child feels toward its parents, the tendency toward passive compliance in the presence of an elder, and the wish to participate in omnipotence. (R. W. White, “An Analysis of Motivation in Hypnosis, p.161)

2) Tendency to Love—This is called the **erotive root** of hypnosis. Freud compared being hypnotized to being in love because lovers also tend to display rapport-like subjection, compliance, and disinclination to judge or criticize. Being “in love” generates some trance physiology. Schilder and Kauders, however, saw every hypnosis as an erotic relationship (ordinarily not consummated, of course), hetero-erotic or homo-erotic, depending on the sexes of hypnotist and subject.

means of hypnosis. It is one of the phenomena characteristic of somnambulistic depth of hypnosis. "Hypermnnesia" can also mean removal under rehypnotization of a previously suggested hypnotic amnesia, thus allowing a subject to recover memories from previous hypnoses. What the inner will has been induced to suppress, that will can also be moved to set free.

Hypersuggestibility—Orne used the term **hypersuggestibility** to designate the phenomenon of a subject's enhanced suggestibility, even after the trance is technically over and he has been told to "awake." Until after a night's sleep (or longer), the subject remains in a hypersuggestible state. The subject's respect, awe, unconscious longing to feel that way again, and his suggestibility, linger on. This tendency of rapport to remain, even after the active trance is over, is part of human physiology, and a basis of social bondings. Thus, leaders can get followers. Thus, attraction can build into love.

Hypno-analysis—**Hypno-analysis** is psychoanalysis done under hypnosis. Like hypnotherapy, hypnoanalysis uses age regression, free association, attention to dissolution of resistances, and recovery of repressed material and its accompanying affect, suggested dreams, and posthypnotic suggestions. Unlike hypnotherapy, hypno-analysis also uses purely psychoanalytic concepts such as interpretation of the transference, and the search for the Oedipal root.

Hypnoidal State—Some writers have used the term **hypnoidal state** to mean a light trance.

Hypnotherapy—Therapy done with a client in the state of hypnosis enables the methods of hypnotherapy, to be used. If the client is in a state of trance, but not in formal hypnosis, these methods may also be used: age regression, free association, dissolution of resistances, recovery of repressed information and its accompanying emotion, suggested dreams, and posthypnotic suggestions.

Hypnotist—A hypnotist, in broadest definition, is a person who knowingly puts another person into a trance state, and then deliberately utilizes the subject's condition of lowered consciousness by giving suggestions. According to that definition, of course, everybody from the music leader in church to any mesmerizing speaker is a hypnotist" (See the opening section of Part III for more on this.) In its narrowest definition,

a hypnotist is a person who seeks to lower consciousness to the point of natural amnesia--or who suggests amnesia.¹

Hysterical Symptoms—Any illness that has been caused by suggestion can be removed by suggestion. **Hysteria** is an illness of self-suggested symptoms. Hysterical symptoms can be healed by faith or by hypnotherapy which identifies the historical circumstances of, and reason behind, the first appearance of the symptom, abreacts the memory's emotional content, and supplies mature logic to correct the misprogramming.

I

Ideomotor—See Type 1 inductions: ideomotor responses.

L

Learned Helplessness—Psychologists call the feeling that you cannot do anything to make it better, that you will keep on failing no matter what, **learned helplessness**. When persons, or animals, receive punishments they cannot predict or prevent, they learn helplessness. Bruno Bettelheim observed it among inmates in Nazi concentration camps. A painful situation has been judged hopeless. The best defense against learned helplessness is optimism, even "foolish" hope.

There has been research both on how to cause learned helplessness, and on how to cure it. Causing it is easy: repeated suffering with no possible escape from it. Curing learned helplessness is harder than causing it, but dogs--and people--can be healed of this. One thing that works is **rescue**: the victim is snatched up and carried away from the situation which taught helplessness. The other thing that works is giving the victim complete **control** of his environment.

Learning Theory—**Learning theory** is a term for operant conditioning, the carrot-and-stick, reward-and-punishment, method of teaching, and learning.

1. I would like to know how those few Bible translators (the Good News bible, for example) that include the word "hypnotism" define it.



Libido—What is termed **instinctual libido** means the classic sexual and aggressive drives.



M

Meditation—Meditation is usually first learned from a book or teacher (hypnotist). After you learn how to get into the trance, you can do it on your own--**self-hypnosis**. At its purest, meditation is the inductive stage of hypnosis, a simple lowering of consciousness. However, suggestibility and rapport always accompany lowered consciousness. The suggestions, specific or implied, and the rapport, will define the future of the experience. Meditation has been demonstrated to re-

duce stress by those who favor it. However, exercise, daydreaming, and prayer also reduce stress.

Medium—**Medium** once was the European term for any hypnotic subject. In the **spiritualist movement** which evolved from one branch of mesmerism, “medium” came to mean a hypnotized person who delivered messages from spirits of the dead. Another usage meant a somnambulist stage performer. It is now applied mostly to **channelers**. The channeler operates in a self-induced trance.

N

Neurosis—A **neurosis** can result from a struggle between a strong **instinct** and an equally strong **prohibition** in the mind that forbids capitulation to that instinct. The best outcome is finding a way to channel that drive energy into a form of expression that does not risk shame and damage. If the method of expression is a problem, the condition is a neurosis. Luria began the hypnotic technique of creating an artificial neurosis. This process suggests a fake situation of desire, versus prohibition, to a hypnotized person. Amnesia is then suggested, which puts the implant out of reach of the subject's conscious ability to reprogram himself.

O

Operant Conditioning—Human beings constantly revise and correct their own programming according to whether things are working or not. That is **operant conditioning**.

Operator—An **operator** is a hypnotist. He operates the hypnotic subject by means of his instructions to the unconscious machine function in the subject's brain.

P

Posthypnotic Suggestion—A **posthypnotic suggestion** is a hypnotic suggestion regarding something that the subject is to do, think, or believe at some

designated future time. Any posthypnotic suggestion must be triggered by a **cue**, any recognizable sign that the hypnotist has suggested to the subject.

Primary Process—**Primary process** is a term originated by Freud. He defined it as thoughts which were impulsive, irrational, primitive, libidinous, and linked to sex and aggression. Freud distinguished between primary thought processes and secondary ones. Primary process was later used to mean hypnotic experiences with vivid imagery. (See Drive.)

Projection—In the hypnotic context, **projection** has two meanings:

- 1) A **transference reaction** is a projection. People tend to project onto another person—therapist or loved one—feelings associated with a previous relationship, such as father, mother, previous spouse, previous hypnotist.
- 2) Making up a fairy tale, seeing a shape in a cloud, or in a Rorschach inkblot is also called projection. When a person creates, visualizes, or attributes shape, design, or ideas to something outside himself, he is projecting. Dreams are autonomous, spontaneous projections. Any projection tells much about the projector. You are what you see. The pictures you draw, or stories you tell, express your true attitudes, values, and strivings—both conscious and unconscious.

Psychoanalysis—Freud and Breuer got the credit, but it was really Anna O., Breuer's patient, who invented abreaction, and the "talking cure" that made Freud famous and became known as **psychoanalysis**.

During spontaneous auto-hypnotic states... [Anna] insisted on relating...fantasies that had the effect of temporarily relaxing her [inducing trance]. (Moss, p. 10)

Breuer called Anna's spontaneous trances "a state of bewilderment." When he noticed her thus, he began to hypnotize her and insist she tell him what she was thinking about. When he had traced all her symptoms back to their origin, they disappeared and did not return. In the process, the cause of each became startlingly clear. Each cause was an amnesic idea/memory acquired in a repressed, painful experience. The hysterical symptoms

...immediately and permanently disappeared when we had succeeded in bringing clearly to light the memory of the event by which they

*were provoked and in arousing their accompanying affect, and when the patient has described that event in the greatest possible detail and has put the affect into words. (Breuer and Freud, *Studies on Hysteria*, 1966, pp. 264-265)*

Breuer and Freud had discovered the natural mechanism of **repression** which can cause an unwanted symptom (a conversion of the repressed drive). Anna O. had demonstrated how healing could come from expression and psychological integration of that repressed data. A repressed idea is, by definition, a distorted idea because it has no conscious integration in terms of adult, rational understanding. Since it is entirely unconscious, it is under "irrational," automatic management. The drive energy of the repressed idea and its associated emotion was dispersed by being experienced and expressed--**abreaction**. This was a totally different method of psychological healing from the simple attempts at symptom removal by direct suggestions under deep hypnosis that the oldtime mesmerists had tried.

Pumper Command—A **pumper command** is a suggestion has been linked to an impelling physiological event. The linkage is used to automatically repeat and add drive energy to the suggestion. A common pumper command is, "With every breath you take, you will go deeper and deeper." The subject must breathe. If his unconscious accepts the suggestion, he will go deeper and deeper.

Another pumper command might be, "Every time you have a bowel movement, that act of pushing automatically makes you remember, hold in, and strengthen all my commands." Or, "every time you ...[some sex act], it automatically 'pumps up' your obedience to me--and that obedience will be always strong, firm, exciting and imperative." Pumper commands of this type may be used to program an unknowing subject. They may be intended to keep the entire body of commands at peak functioning, even after the initial conditioning is completed.

R

Rapport—**Rapport** is the unconscious bond which any subject feels with his source of trance. Suggestibility, even outside formal trance, is characteristic of rapport. Suggestible people adulate whoever has impressed them and are vulnerable to further sugges-



tions.

Rationalize -The lie you tell yourself, and/or other persons, to explain an amnesic posthypnotic obedience is called a **rationalization**. The unconscious does not inform the conscious mind that a posthypnotic act was performed because of the hypnotist's suggestion—if that knowledge has been forbidden. So the subject creates another explanation for the act. *All* hypnotic subjects who obey a posthypnotic suggestion explain their act by a rationalization. They will make up a plausible reason if that is possible. They will produce a stupid excuse if that is the best they can do to explain the posthypnotic act. We always have an explanation for our behavior, true or false.

Recovered Memory—A **recovered memory** is a memory that once was hidden by amnesia. The amnesia might be 1) suggested under hypnosis, or 2) spontaneous, as in terrible emotional shock, or 3) functional, as in the spontaneous dissociation of deep trance.

Reflex—A **reflex** is an automatic stimulus-response function.

Repression—**Repression** is a special form of memory. The unconscious preservation of memories in amnesia is an active, rather than a passive, forgetting process. The unconscious tends to repress a painful memory, keeping it out of conscious awareness. Memories which are most likely to be repressed are those involving trauma, or forbidden wishes, usually of a sexual or aggressive type. Since repressed memory cannot be consciously recalled, it is not subject to the normal mental processes of integration and forgetting. Repressed memories are preserved with content unchanged. They continue to exert pressure (proportionate to their amount of emotional drive) for expression and resolution.

Freud observed that unconscious pressure from amnesic data and feelings resulted in what he called the **return of the repressed**--in dreams, fantasies, slips of the tongue, and forgettings. Those "returns" allow a bit of the repressed idea to return to the subject's real-life function, but in a disguised way.

Resistance—Freud observed that, in order to make repressed information and feelings conscious again, "it was necessary to overcome something that fought

against one in the patient." (Freud, *Autobiographical Study*). That force is called **resistance**. Resistance refuses entrance to certain thoughts. It defends the territory of conscious mind (what you already know) from unconscious data that you do not remember that would emotionally upset you if you did remember it. Resistance is the border guard of your mind against **cognitive dissonance**. It keeps you from thinking ideas that would cause you anguish or would make no sense in terms of your present mental framework.

A hypnotist uses the word "resistance" in a more technical way. He means something inside a subject's mind that resists induction, deepening, releasing of certain information, or the accomplishment of any other suggested mental purpose.

Role-playing—Any suggestible person (actually most persons are more or less suggestible) responds to environmental cues about how to behave. This phenomenon is also true for persons in a formal hypnotic trance. Hypnosis researchers have learned that subjects are sensitive to operator cues, both overt and covert, as to what behavior is expected of them in trance. That tendency in human behavior is called **role-playing**. Some hypnotists have pushed that concept so far as to argue that hypnosis is only suggestible people role-playing what they expect trance to be.

Rorschach Test—This projective personality test evaluates personality and is used to diagnose personality disorders. The **Rorschach test** can also be used to predict hypnotizability. It consists of a set of ten cards, each of which contains an inkblot formed by folding a piece of paper over a patch of ink. Some are in black and white; some are in color. The client is asked what images he sees or is reminded of, either in the inkblot as a whole, or in its details. His answers, together with his timing and attitudes, are tabulated and analyzed.

Each blot was carefully chosen. The responses of thousands of people have been scored and analyzed to establish standard responses, so definite conclusions can be made from the elicited information. Scoring is now very sophisticated, and done by computer. The computer prints out thirty to forty, quite accurate diagnostic paragraphs based on those Rorschach responses.

S

Seance—The European term for a formal session of deep trance or hypnosis is **seance**.

Sensory Deprivation—**Sensory deprivation** denies sensory input. Isolation from other people is its mildest form. Denial of sight, hearing, and touch is its most extreme form. A brain must have sensory input to function normally. If a mind does not get enough input, it will grasp at whatever new data is available. Data acquired in an informational vacuum will be taken more seriously than data acquired under normal circumstances. Sensory deprivation results in both greater suggestibility and greater hypnotic susceptibility.

Shadow—This useful Jungian term describes repressed or undeveloped tendencies and the consciously unacceptable thoughts that are not ordinarily let out. Robert Bly described the roots of a normal shadow:

When we were one or two years old we had what we might visualize as a 360-degree personality. Energy radiated out from all parts of our body and all parts of our psyche. A child running is a living globe of energy...but one day we noticed that our parents didn't like certain parts of that ball. They said things like: "Can't you be still?" Or "It isn't nice to try and kill your brother." Behind us we have an invisible bag, and the part of us our parents don't like, we, to keep our parents' love, put in the bag. (Bly, p., 17).

Opposites are an important part of the shadow. For each thing that you consciously are, there exists an unconscious opposite in your shadow. For example, if a person comes on strong about authority, he has a subservient worm in his shadow. If he comes on with superiority, he has an inferiority complex hidden in the darkness of his soul.

For years, I have been consciously characterized by optimism to the point of irrationality. In my shadow an equally irrational, bleak depression was stuffed. As I draw to a close the thirteen years of intense effort spent creating this book, some of that depression has begun to leak out, enabling me to deal

with it and get a more realistic outlook. The leakage is evidence of my healing in progress. It means that now I have enough hope to be able to integrate my hidden despair.

The best way to manage a shadow is bravely to look at it, to be aware that it is there. Becoming aware of your shadow reduces its power. Self understanding makes you stronger. It gives you more control over those shadow tendencies.

From the Christian's point of view, we want to expose our past sin to look at and grieve over. Thereby, we acquire the gift of shame. It is shame, deeply felt and laid at the foot of the cross, which then empowers us to CHANGE. From first spiritual experience to last, the Christian's process of becoming is a sorting and resorting process. Empowered by redemption, aided by the Holy Spirit, we push into the shadow what properly belongs there (sin). We bring out what properly should be out (Christlike qualities).

In our unconscious minds, we all carry forever an early model of each parent. Lifelong, we have potential identification with those shadow parental models. Any subject of amnestic hypnosis also acquires a shadow presence of the operator in his unconscious, thus adding the role of hypnotist as well as the role of subject to the previous models. In this book, I know I offer a very mixed message, modeling both operator and subject roles. That reflects the strong hypnotist's presence in my shadow.

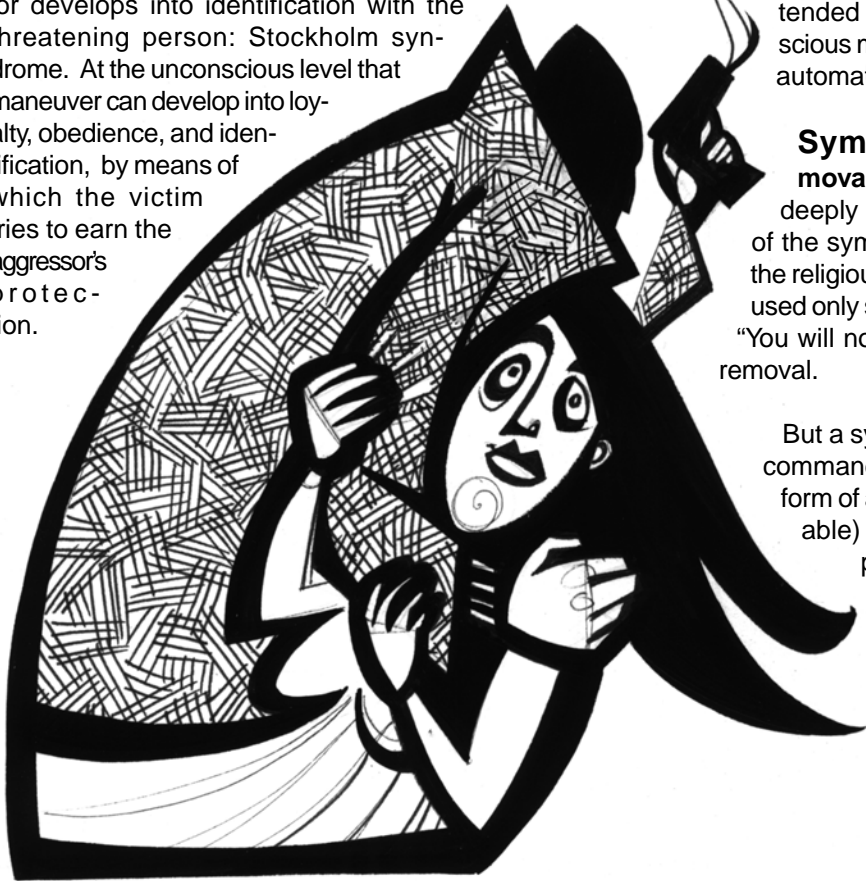
Somnambulist—A **somnambulist** is a person who can walk and talk in deep trance without waking up. A somnambulist, when in the deepest trance condition, can "see" a positive or negative hallucination, and he will accept a suggestion for amnesia.

Stockholm Syndrome—The tendency of a prisoner to form a human attachment and identify with the jailer is called **Stockholm syndrome**. The name comes from a hostage-taking holdup in a Stockholm bank, during which one hostage came to identify her well-being with the safety of the criminal who had taken her hostage. In cases of Stockholm syndrome, even for weeks afterward, hostages may have difficulty rejecting feelings that the hostage taker was protecting her from the authorities, and difficulty expressing animosity toward him.

Anna Freud first described this phenomenon of **identification with the aggressor**, a psychological



defense mechanism. To avoid a threat, you have to support, even help, the person who poses the threat to you. At the unconscious level, that behavior develops into identification with the threatening person: Stockholm syndrome. At the unconscious level that maneuver can develop into loyalty, obedience, and identification, by means of which the victim tries to earn the aggressor's protection.



Bruno Bettelheim analyzed Stockholm syndrome in people incarcerated in Nazi concentration camps who began to want to please their aggressor. A victim of criminal hypnosis also may have Stockholm syndrome.

Subconscious—The terms **subconscious** and **unconscious** are interchangeable, but I prefer the latter, which better expresses the significance of that vast non-conscious sector of mind.

Subject—A hypnotized person, or any person who has been hypnotized in the past, is called a **subject**.

Subliminal—A **subliminal** is a message in advertising or motivational material via art, video, audio, or text, which is intended to go directly into unconscious registry without being perceived (or evaluated!) by the conscious mind.

Suggestion—**Suggestion** is a very old euphemism that means any instruction given by a hypnotist to his subject. A suggestion is intended to be received by the subject's unconscious mind as a command and performed with automaticity.

Symptom Removal—**Symptom removal** is a healing technique. The patient is deeply entranced, then healing (and removal of the symptom) is suggested. Faith healers in the religious tradition and the first hypnotherapists used only symptom removal to treat their patients. "You will no longer overeat," suggests symptom removal.

But a symptom simply repressed by hypnotic command may reappear by **conversion** in the form of another (perhaps even more objectionable) symptom, so this method has limited potential.

T

Testing—There are three basic types of **testing** for hypnotic subjects:

- 1) The **susceptibility test** is a standardized induction to see if a potential subject can become hypnotized, and to measure how easily the induction takes place, and how deep the resulting trance is.
- 2) After induction, the operator may **test trance depth** by suggesting catalepsy of a body part, such as inability to open the eyes, followed perhaps by some constraint of arm motion. Some hypnotists have tested depth by suggesting numbness, then pinching, burning, or puncturing the subject's flesh.
- 3) A **follow-up test** checks on the firmness and functionality of deep-level implants by observing whether or not posthypnotic suggestions are carried out. The hypnotized subject may be given a) an amnesia suggestion, and b) a suggestion for a posthypnotic negative hallucination. Those two tests demonstrate maximum somnambulist depth, maximum hypnotic obedience.

Therapy—**Therapy** is one person trying to help another. In **talk therapy**, the counselor listens and reacts. It is amazing how helpful telling a sympathetic listener your troubles for an hour a week can be. It is also amazing how suggestible you can become to clues from the person you tell your troubles to. Talk therapy addiction is now common. For many persons, purchased friendship and “professional” advice have taken over the role that friends and family once had in their lives.

Every form of nondrug therapy has trance experiences available in it. Dream therapy develops positive hallucination. TA leads the subject to dissociation. Prayer lowers consciousness for the believer. Any time a person is vividly remembering what happened in early childhood, or before birth, or “past lives,” or seeing things people do not normally see, or conversing with “spirits,” they are in **deep** trance. Any time you experience a full-scale fantasy under deep hypnosis, it is going to feel real and important—profoundly moving, insight-granting, key to personal change. The experience tends to leave you feeling much better, at least for the moment.

*We even found on occasion that the release of great anger or fear could be more effectively produced around incidents which were entirely imaginary and had never happened to the patient at all, and such abreactions of imaginary events could have remarkably beneficial effects... We found that the two emotions which it was most helpful to arouse... were feelings of great anger and aggression, or of intense fear and anxiety. (Sargant, *Battle for the Mind*, p. 5)*

Token Economy—A **token economy** is an operant conditioning method. It gradually **shapes behavior** to bring it into conformity with what is wanted. Complicated behavior patterns can be created by rewarding each item of wanted behavior, or punishing each item of unwanted behavior. Thus, we bring up children.

Torture—Once I thought that **torture** meant only physical and extreme cruelties, such as breaking legs. Then I learned

...the generally accepted definition of torture produced by the United Nations, Amnesty International, and other human rights organizations: the deliberate infliction of pain by one person on another in an effort to break the will of the victim. (Thomas, p. 2)

The pain in that definition does not limit tor-

ture to physical pain. Forced stress intended to break the will is also “torture.” Deliberately caused mental stress can be torture. Suggested, hallucinated pain can be torture. Suggested feelings of terror can be torture.

The important ingredients in the definition of torture are neither the nature of the pain, nor its origin. The two essential elements that define an act as “torture” are 1) that the act is “against his will” and 2) that its purpose is “an effort to break the will of the victim.”

Tranceable—Hypnotizable.

Trance Logic—Hypnotized persons are stripped to the mechanical stimulus/response level of their minds. They are literal and humorless. That literalness is called **trance logic**. People simulating hypnosis are unlikely to accurately mimic trance logic, so its appearance has been used as a test to establish if a person is really hypnotized.

Transference—Hypnotic subjects and therapy patients tend to develop rapport—an extraordinary emotional relationship to their hypnotist or therapist. They tend to imbue that relationship with projected, remembered qualities of some unconsciously associated person from their own past, such as a parent. That phenomenon is called **transference**. The transference can be positive or negative. This projection of unconscious feelings from a previous relationship may be mild or intense in strength.

Transfer of Control—If a hypnotist shifts command of a conditioned subject to another operator, that is called **transfer of control** or **shifting the rapport**. The rapport can be shifted in the middle of a trance or by a posthypnotic suggestion. The switch of operators is made keeping all previous hypnotic conditioning fully operational.

U

Unconscious—Subconscious, subjective, subliminal, superconscious, and unconscious, are all terms that have been used to refer to the part of your mind that is not conscious. It is your vast ocean of memory, association, thought, feeling, and habit. In that great deep, your conscious mind is like a little boat floating,



16 Important Characteristics of Every Person's Unconscious

If this seems huge and complex, remember that the human brain is the most complex thing in the known universe, and the unconscious is the larger and most complex part of that brain.

- 1) The unconscious is a vast and powerful component of your mind. It contains your **intuitive abilities** and your **religion circuits**, the antennae by which you sense the presence of the divine, the mechanism which points out profound truths to your conscious.
- 2) Your conscious and unconscious minds are **independent, and yet linked**, like gears whose cogs connect. The conscious directs and affects the unconscious. The unconscious directs and affects the conscious. Both rules are true. The unconscious rules by reflex and habit. The conscious rules by suggestion, command, will, and desire.
- 3) The unconscious accepts any idea you **believe** into your programming basics. The conscious mind can reason either deductively (from principle to derived assumption) or inductively (from evidence to principle). It is a function of the conscious mind to evaluate new ideas and decide if they are true. If that new idea is accepted as true by the conscious, it is then sent along for registering in the unconscious. There, it becomes a deductive principle from which the unconscious will, in the future, automatically reason. The unconscious lacks the analytic, criticizing function which is assigned to your conscious, and it normally reasons only by deduction.
- 4) The unconscious **reasons by deduction** (from principle to detail), basing its decisions on the accumulation of all your previous beliefs. When we accept religious, moral, or scientific principles (or self-talk—true or false) into our basic unconscious programming, then we live the life that derives from those assumptions.
- 5) The unconscious contains much programming from childhood, and adolescence, before we could clearly discriminate truth. Some earlier programming may be in **error** and a problem. Impulsive, "illogical" behavior is based in this erroneous programming. If you wish to change yourself, you must change your unconscious beliefs. If your unconscious is reasoning from a false premise, a correct one needs to be substituted.
- 6) The unconscious is the location of **habit** in your mind. Ideas or behaviors that are frequently repeated become habits. Your unconscious programming is ordinarily dominant over your conscious because most of your behavior is based on habit and automatic.
- 7) Your unconscious contains your **goals**, and it will drive you toward them. It contains your **attitudes** and will constrain your behavior to conform to them.
- 8) **Words** have more power than real experience to influence the human unconscious.
- 9) By means of lowered consciousness (trance), the unconscious mind can be accessed directly. **Trance** inhibits the conscious mind and thereby enables direct contact with the unconscious.
- 10) Your unconscious contains the origin, memory, and associations of your **emotions**.
- 11) The unconscious has computer-comparable **memory** with a huge capacity. We know more than we consciously realize.
- 12) As well as the brain areas containing our memory storage, emotions, and habit, the unconscious is linked to **physiological control systems** of the autonomic nervous system, glands, and the involuntary muscles of heart, lung, and digestive function.
- 13) It is the seat of creativity, source of that sudden flash of knowing called **insight**. Insight follows intensive preparation by studying and working with a problem, a period of incubation to allow unconscious thinking, and then "listening" with the conscious mind. That listening allows the barrier between conscious and unconscious to lower enough that the answer can be delivered to the conscious.
- 14) It contains your **id**, the primitive **drive emotions**—anger, fear, sexual desire.
- 15) It contains your **superego**, which is your **conscience** and restrains you from impulsive, drive-based action.
- 16) It contains your **hidden observer**, a computerlike, analytic recording mechanism that always knows what is going on and silently registers those facts. The hidden observer rouses you in the presence of danger. For example, it wakes a mother in the night when her child needs her.

or sailing, on its surface with you aboard. You can also think of the **unconscious** as your mind's hard drive. Your conscious mind is you looking at what is on screen.

Freud used the word "unconscious" to describe thought content and process of which we have been unaware, but which can become conscious. The problem with that term is that it can be confused with the knocked-out state. Janet, therefore, substituted the word **subconscious**. But "subconscious" implies a lower mind, and some people object vehemently to that. There are many more terms for the unconscious, just about one for every induction system, philosophical, psychological, or religious view. Often that name is claimed to be the only true one. The unconscious is the mental circuitry by which sensitive persons experience the supernatural. That fact makes people touchy about labels.

I use the neutral term "unconscious."

V

Visualization—When a person is told to imagine one, or a series, of mental image(s), that is called **visualizing**. Focus on mental imagery is a standard induction method, often used as a disguised technique.

W

Wake Up—The **wake up** is the coming up/out of the trance.



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A Brief History of Information on Criminal Hypnosis

Not the least of the reasons for seeking to discredit hypnotism has been that the public and scientists alike have feared it. In one way, it is most unfortunate that...there should appear popular and scientific articles which tend to arouse further fear—articles by the very men who sincerely believe that hypnosis has something of great value to offer. Pointing out that it can be dangerous in unscrupulous hands is bound to develop and increase such fears...Popular fears of its dangers will certainly restrict its use in the future...On the other hand, if hypnosis can be dangerous to the hypnotized subject, then the public is entitled to know the facts. There can be no question of this...

LeCron, *Experimental Hypnosis*, 1952, pp. 371-2

The work of previous authors who have struggled to collect, record, and disseminate information about the mind-control technologies and their abuses has been a great help and comfort to me. Each writer added nuggets of precious knowledge to the public store and, thereby, made my work easier. Their books were carefully, even tediously, researched—not easy to write. Few sold well. Most passed quickly out of print, and were soon forgotten, the author’s hard work neither financially nor socially rewarded.

Information on the possibility of unethical use of hypnosis was first declared top secret in 1784. That year, a

Secret Addendum, “For the King’s Eyes Only,” was delivered to the King of France by Benjamin Franklin’s Committee, assigned to evaluate mesmerism. The Addendum stated that there was a risk that women could be raped or seduced when under the influence of hypnosis.

Soon, however, hypnotists were talking openly about those risks. For the next two centuries, European hypnotists argued passionately about the possibility of what became known as **antisocial hypnosis**—whether a hypnotist could get a subject to commit a crime, or to submit to a crime. Some insisted that a hypnotic somnambulist could be caused to commit even theft and murder. Others declared

that a hypnotic subject could not be caused to do anything that was against his morals. If the subject accepted a hypnotic suggestion to steal or murder, that only proved he had weak morals and the crime was his fault.

Experimental hypnotists quoted research results at each other. They devised research strategies to prove, or disprove, a position. They researched, argued, and wrote books. Up to 1888, 801 books on various aspects of hypnosis had been published in Europe. Between 1888 and 1890, 382 more books on hypnosis were published. In France, some years, no books were published except on hypnosis! Most of those books dealt with the creation of subjects who were amnesic for their experience under hypnosis: **somnambulists**. In that era more than twenty-five criminal cases were tried that involved criminal hypnosis.

The long and lively debate over antisocial hypnosis raged, unimpeded, in the public press from the time of Mesmer to the 1960s—except for the suppression of Dr. Kroener’s book on the case of “Z” by the German government. The heated print arguments dealt with what an operator could, or could not, get a subject to do, and how the operator might accomplish criminal hypnosis, and why the subject might, or might not, submit. (They rarely inquired into the likelihood that an operator might, or might not, attempt to commit the crime.) Up to the 1960s, books on how to hypnotize were in every bookstore. Writers on hypnosis freely discussed the hypnotic condition of amnesic somnambulism.

In 1959, in one of the last and best of those frank and forthright books on hypnosis, Dr. Marcuse stated that a person can be hypnotized against his will under certain circumstances (*Hypnosis*, pp. 106-107). Marcuse said a hypnotist can make a subject obey an objectionable command, and also can make the subject be the one to experience the guilt for doing that act (*Ibid.*, pp. 109-110). He said that a previously hypnotized subject cannot resist re-induction, except by being unable to perceive the cue (p. 107). He warned of problems caused by amateur (or careless) hypnosis.

As military psychology and CIA mind-control research ballooned in the 1960s, print mention of criminal hypnosis in civilian publications dwindled. Marcuse noticed that. He described the Salpetriere case of the deeply entranced girl (Witt.) who, when instructed by male medical students to take off her blouse, converted the suggestion instead into hysterics and woke herself up. If that had been a current news case, and if she had obeyed, Marcuse wrote, “...it may be questioned whether journals or texts would carry this report.” (p. 109)

Over the next forty years, by a combination of repression, denial, and a busy industry of myth-making, the truth about criminal hypnosis became scarce, sketchy, and confusing—or written in obscure technical language which only insiders could comprehend. Increasingly, any possibility of unethical hypnosis was flatly denied.

During those forty years, the technologies of trance manipulation have become ever more sophisticated and widespread. Experts have become more expert, more potentially exploitative. At the same time, real information about the risks of hypnosis has become ever more limited in supply—and more and more riddled with falsehood. Widespread pro-trance propaganda and lobbying have steadily increased public trust in any trance experience and have encouraged ever greater numbers of people to choose to participate in deep trance experiences.

Libraries now provide generous amounts of information on almost any topic, but not on how to build a nuclear weapon. That is classified. Nor do they provide information on the creation of unknowing hypnotic subjects and other mind-control technologies, for that is “inextricably bound with the secret world of intelligence” (Thomas, p. 354).

But truth has a way of appearing unexpectedly, again, despite everything.

Public Sources of Hypnosis Information

Seattle’s public library served me wonderfully well. Through their interlibrary loan department, I obtained hundreds of books and articles about hypnosis from all over—at no charge. I read them all. Bit by bit, the picture came clearer. There are excellent print collections on hypnosis in McGill University’s Osler Library (Montreal, Canada), at Vanderbilt University (the Albert Moll Collection), and at Wichita State University (Kansas; the Maurice and Jean H. Tinterow Collection). The National Guild of Hypnotists (P.O. Box 308, Merrimack, NH 03054-0308, 603- 429-9438, FAX 603- 424-8066) sells new and used hypnosis books. It also has a 39-page catalog of audio/video tapes from their annual national conference presenters. Magic, Inc., 5082 N. Lincoln Ave., Chicago, IL 60625, 312-334-2855, sells books on stage hypnotism. Out-of-print, or secondhand books and manuscripts on hypnotism are offered by Mario Carrandi, Jr. (122 Monroe Ave., Belle Mead, NJ 08502, 908-874-0630).



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No volume on hypnosis and memory can be complete without a discussion of the use of hypnosis to aid forgetting (posthypnotic amnesia)... Understanding the reversal of amnesia in laboratory studies [is] reviewed in the book's third section...

The publisher also claims that this book covers hypnotherapy and "narcosynthesis," and describes it as "an indispensable reference for investigators...a source of pertinent information for law enforcement and legal professionals." Having carefully read the publisher's other offering in this field (by Lawrence and Perry), I am skeptical.

Phillips, Mark E. Various brief self-published items. Phillips works hard to get the word out that he is an "MK-ULTRA Abuses Investigator" for the "SKBI Research Group." He urges past mind-control victims to contact him. I advise you to avoid him and his organization. If what Phillips fears has even a grain of truth, networking would be a dumb thing to do. Including, or especially, with him.

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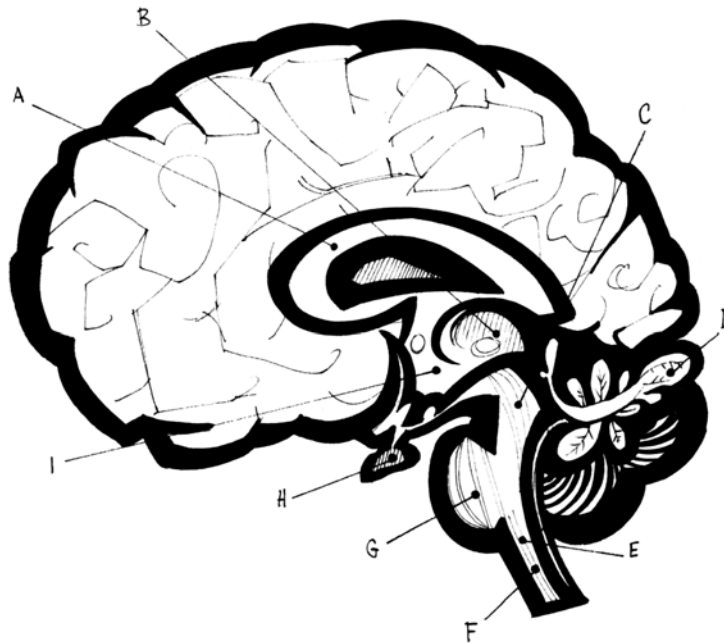
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A - Corpus Callosum
B - Thalamus
C - Midbrain
D - Cerebellum
E - Brain Stem

F - Medulla
G - Pons
H - Pituitary
I - Hypothalamus

Relevant Chronology:

1493 to Present

- 1493 Paracelsus is born. He is the first person who scientifically describes and defines unethical hypnosis. He calls the phenomena of hypnotism **magic** (a word then used to describe any incomprehensible science). He calls hypnosis, used benevolently for medical purposes **white magic**. Hypnotism used harmfully, for exploitative control, he calls **black magic**.
- 1679 Guillaume Maxwell, a Scot, writes *De Medicina Magnetica*, describing a universal force, supposedly magnetic, transmissible, and useful for healing (an idea later adopted by Mesmer.)
- 1775 Mesmer demonstrates the power of suggestion to a German scientific commission, tells them anybody can do it.
- 1780 Marquis Tissart du Rouvres, the three de Puysegur brothers, General LaFayette, and other French military officers do mesmeric experiments with troops. Many French posts have officer-magnetists on staff.
- 1784 The French King authorizes a Commission to examine Mesmer's scientific claims for **animal magnetism**. The Committee is chaired by America's Dr. Benjamin Franklin. It reports the phenomena are caused by imagination rather than a mysterious invisible fluid. The Committee delivers a Secret Addendum to the report to the King. It states that mesmerism can be used for unethical purposes, such as seduction.
- 1784 Puysegur describes the spontaneous posthypnotic amnesia associated with deepest trance. He names that state **artificial somnambulism**, because subjects, if so instructed, can walk about with open eyes, without awaking from trance.
- 1787 Posthypnotic suggestions are described.
- 1790 Luys creates first mechanical induction devices: metronome, and hypnodisc with spinning light(s) on side.
- 1807 Puysegur describes **transfer of rapport**, when control of a somnambulist is shifted from one hypnotist to another by verbal suggestion.
- 1815 Franz Anton Mesmer dies. He leaves many disciples with various opinions and induction



techniques. They spread **mesmerism** all over the world, some as scientific hypnosis, some as **spiritualism**. Some mesmerists say the cures are from God. Some use seances to call up spirits of the dead. One disciple founds chiropractic. Mesmer's efforts to find a physiological explanation for hypnotic phenomena caused scholars to shift from considering hypnosis as magic or religion to seeking scientific understanding of it. Thus, Mesmer began **dynamic** (unconscious) **psychiatry**.

- 1815 Abbe Faria comes to Paris from India, gives public demonstrations of hypnosis, hypnotizes as many as 5,000 at a time. He, like Mesmer's disciple Puysegur, proves Mesmer's props are not necessary for induction. He says that both the induction and the cures arise from expectancy and cooperation in the patient.
- 1820 Dr. Alexandre Bertrand publishes treatise saying trance makes subject preternaturally sensitive to suggestions of the mesmerist, both spoken and unspoken.
- 1821 First recorded operations under hypnotic anesthesia done by Recamier. First tooth extraction under hypnosis.
- 1823 First childbirth under formal hypnosis.
- 1825 The word **hypnosis** (from Greek, "sleep") is first used. Hypnotic anesthesia, analgesia, positive and negative hallucinations, catalepsy, regression, posthypnotic suggestion, and some physiological effects on the body caused by suggestion are all identified and experimented with.
- 1837 John Elliotson, an English doctor, begins lifelong campaign for scientific study and medical use of hypnotism.
- 1841 An English doctor in India, James Esdaile, uses hours of mesmeric stroking and **passes** in a semi-darkened room, combined with "sleep" suggestions to induce trances deep enough for major surgeries, hypnosis being the only available anesthetic. He experiments on a prisoner: he induces deep trance, automatism, then amnesia, and makes him an unknowing hypnoprogrammed subject.
- 1843 James Braid, a Scottish surgeon, sees mesmerism demonstrated, and begins a lifelong study of it. He pioneers practical medical applications of hypnosis. He theorizes that it is a type of special suggestibility. He discusses disguised induction—trance (hypnosis) deliberately caused in a susceptible subject without a formal or pre-announced induction.
- 1846 Chemical anesthesia begins. Surgeons lose interest in Esdaile's hypnotic anesthesia. Hypnotists begin to experiment with drug-induced trances.
- 1858 Dr. Azam, of Bordeaux, attempts to create an artificial multiple personality by means of hypnosis. (*Hammerschlag*, p. 14)
- 1860s Charcot's Salpetriere group competes with Liebeault and Bernheim's Nancy School. Charcot, et. al., accept hypnosis as worthy of scientific analysis, but insist that criminal hypnosis is impossible (though he and his staff exploit, display, and scorn somnambulist women). The Nancy School believes criminal hypnosis is possible because suggested amnesia is possible.
- 1866 Dr. Liebeault defines **suggestion** and **suggestibility**. He analyzes the depth stages of trance,

- classifying the next-to-deepest stage by its characteristic mild amnesia, the deepest stage by the spontaneous appearance of complete amnesia.
- 1879 Wilhelm Wundt opens the first psychological laboratory at Leipzig, Germany. That event is considered to begin the new science of **psychology**.
- 1880 Multiple personality is a hot topic among hypnosis researchers, writers, and the public. Hypnotists know how to artificially create the condition.
- 1882 Conrad and Guthzeit synthesize barbital (5,5-diethyl-barbituric acid), the first barbiturate used for medical purposes.
- 1882 Parapsychology begins as a science with the founding of the Society for Psychical Research, which attempts careful investigation of hypnotic phenomena having parapsychological implications.
- 1888 Hypnosis researchers commonly know that hypnotic amnesia can be overcome in a subsequent trance state. Moll writes: "...the subject remembers in hypnosis all that has happened in previous hypnosis."
- 1889 Pierre Janet (1859-1947), a famous French hypnosis researcher, defines **dissociation**: "Things happen as if an idea, a partial system of thoughts, emancipated itself, became independent..." This explains hypnotic amnesia and obedience to "forgotten" posthypnotic suggestions.
- 1890 Research and practice of hypnosis are now part of medicine and psychology. Max Dessoir's bibliography of books on hypnotism now includes 1183 titles, many dealing with issues of crime under hypnosis.
- 1892 Freud writes about regression to childhood during lowered consciousness.
- 1892 British Medical Association unanimously accepts hypnotism as therapeutic method.
- 1893 A Swedish hypnotist, Wetterstrand, finds that "a few drops of chloroform," plus his regular induction routine, turns resistive individuals into good hypnotic subjects.
- 1894 George DuMaurier publishes *Trilby*, a protest novel about the abused stage "mediums" of his day in which the ruthless hypnotist, Svengali, captures Trilby by a disguised induction, trains her, then displays her somnambulist skill on stage.
- 1899 Herrero reports to first International Congress of Hypnotism, in Paris, on various drugs that facilitate hypnotic induction, especially barbiturates.
- 1900 Paris meeting of International Congress of Hypnotism accepts therapeutic value of hypnotism.
- 1901 Freud points out the phenomenon which he calls **slips of tongue**, and explains the cause of such "thoughtless" mis-sayings, mislayings, etc., as repressed unconscious feelings managing to act out.
- 1903 Bramwell pioneers many elements used in modern hypnotic inductions: **pre-induction interview** to gain trust and understanding, use of quiet, darkened room to reduce sensory input, telling subject to "just let it happen," and directing subject's attention to "sensations he probably



is experiencing” (actually sensory illusions and exercises in obedience). He uses narcohypnotic induction to overcome cases of resistance to merely verbal induction.

- 1903 Pavlov introduces **classical conditioning**.
- 1904 William James reports that the Frenchman, M. Liegeois, has hypnotized persons as far away as twelve kilometers by giving an induction cue over the telephone.
- 1907 A German, Auguste Forel, writes that a criminal hypnotist could prevent his discovery by means of **sealing**, which he calls “locking suggestions.”
- 1907 Laponi reports that electric shocking can induce trance: electro-induction.
- 1908 First American researcher on the physiology of hypnosis, William McDougal, describes inhibited state of cortex during trance, suggests new methods to cause that inhibition (staring, monotonous stimulation, etc.)
- 1912 A researcher in Pavlov’s laboratory causes **neurosis** in a dog. Pavlov later does extensive investigation of artificial neurosis.
- 1914 Juliusburger uses diallylbarbituric acid as a hypnotic drug to treat psychosis.
- 1915 Watson and Lashley perform first human conditioning experiments in U.S. John Watson’s publications popularize the terms **behaviorism** and **conditioning**. His child-rearing books are best sellers.
- 1917 Hungary’s Dr. Volgyesi uses a strong electric shock to induce “passivity.” He then verbally deepens the trance and further trains the hypnotic subject.
- 1921 In a small German town, “Z” is hypnotized (using a disguised induction) by his ex-con neighbor. He is an exploited, unknowing hypnotic subject for the next decade.
- 1923 Eli Lilly and Company markets the barbiturates amobarbital and butabarbital.
- 1923 The State Institute of Experimental Psychology in Moscow reports Luria’s success with hypnotically-implanted “crimes.” He made people confess to things they did not really do.
- 1924 Hans Berger, Austrian psychiatrist, discovers electric brain waves, weak but detectable, coming from his son’s brain. He then learns that different states of mind emit different characteristic signals. This research will result in the EEG. (A flat EEG is now the legal definition of death.)
- 1925 P. C. Young publishes the first true **controlled experiment** on hypnosis.
- 1926 U.S. research into causing **artificial neuroses** in animals begins in Howard S. Liddell’s laboratory.
- 1927 Pavlov wins Pulitzer Prize for discovering classical conditioning: he can make dogs drool when a bell rings.
- 1929 Sodium amytal is first used to force hypnosis on a subject.

- 1930 George Estabrooks markets first recorded hypnotic induction (12-inch Victrola record). One side is induction, catalepsy challenge, then waking hypnosis instruction. The other is induction, challenge, then shifting of rapport from the recorded voice to a live hypnotist in the room-IF subject has given prior written permission.
- 1931 W. Horsely Gantt, after six years in Pavlov's lab, returns to Johns-Hopkins and founds a U.S. conditioning laboratory. He studies experimental neuroses, frustration, and drive conflict in dogs.
- 1932 Hauptmann, in Germany, and Dr. J.S. Horsley, in Great Britain, independently discover that injecting the barbiturate Evipan causes "a state indistinguishable from verbally-induced hypnosis." (LeCron, *Experimental Hypnosis*, p. 141) Horsley begins a career of practicing and promoting barbiturate-induced trance, followed by conventional hypnotic training. The method offers speed, depth, and coercion.
- 1933 Dr. Clark Hull, Yale, publishes *Hypnosis and Suggestibility*, first book-length behaviorist study of hypnosis. Most hypnosis research is now published in scientific journals.
- 1934 Mr. E. tells police that an unknown "doctor" is covertly hypnotizing and abusing his wife.
- 1935 Tabern and Volwiler synthesize Pentothal (thiopental) and Lundy introduces it as an intravenous anesthetic.
- 1935 Biofeedback experiments begin.
- 1935 Portuguese neurologist Egas Moniz invents prefrontal lobotomy. It soon becomes a popular psychiatric technique. A few years later, he wins a Nobel Prize for the lobotomy.
- 1936 P. Brotteaux reports use of combined scopolamine and chloralose to induce hypnotic suggestibility. **Sodium pentothal** is first synthesized and used as an intravenous anesthetic.
- 1936 Walter Bergen and his accomplice are sentenced to jail because of criminal hypnosis.
- 1937 Dr. Mayer's *Das Verbrechen en Hypnose und seine Aufklaringsmethoden*, describing Mrs. E's, case is published.
- 1938 Cerletti and Bini introduce electroconvulsive shock treatments. Over the coming years, hundreds of experiments are carried out on animals and people. Many seek predictable control of the shock's amnesia effect.
- 1939 Estabrooks recruits M. H. Erickson to do hypnosis experiment for F.B.I. Erickson's subject demonstrates detailed, accurate memory in hypnotic regression.
- 1940 William J. Donovan (World War I general, N.Y. lawyer) proposes to Pres. Roosevelt a new government organization to specialize in secret scientific research and "securing of information important for national security"—the Organization for Special Services (OSS).
- 1941 Donovan, first director of OSS, recruits U.S. scientists from all fields, atomic to hypnotic.
- 1941 Estabrooks proposes various uses of hypnosis for military. He creates hypnoprogrammed couriers. (*Science Digest*, April 1971)



- 1942 Donovan organizes OSS committee of psychiatrists and biochemists to study drugs which might be useful for interrogation.
- 1942 Development of electronic computers and artificial intelligence begins.
- 1943 George Estabrooks publishes *Hypnotism*, publicly urges military and police use of hypnoprogrammed spies and couriers, reveals that hypnosis both causes and cures multiple personality.
- 1943 U.S. and British psychiatrists use **narcohypnosis** as a quick, effective treatment for battle fatigue.
- 1943 Jules H. Masserman, University of Chicago, applies Pavlovian concepts of conditioning and experimental neuroses to humans, and integrates them with theories of psychopathology and psychoanalysis.
- 1944 Ferenc Volgyesi, “best hypnotist in Hungary,” helps Gestapo use Scopolamine-Ephedrine-Hukatal to create a highly suggestible mental state in prisoners. During that state, hypnosis is induced, subjects are interrogated, and then prepared for trial.
- 1945 English doctors, Grinker and Spiegel, publish *War Neuroses*. It describes the use of barbiturate to induce trance and to accelerate abreactive hypnotherapy, a therapy method they call **narcosynthesis**. American doctors call it **narcohypnosis**.
- 1945 John J. McCloy establishes “Psychological Warfare” as a top-secret branch of the War Department.
- 1947 Nielsen uses disguised induction in a yoga context to make his Danish cellmate an unknowing hypnotic subject.
- 1947 Congress passes National Security Act. It creates CIA out of post-war remnant of OSS. The law says CIA has no police or security function within the U.S. Truman signs, later says he was not fully informed and regrets having signed.
- 1947 U.S. keeps secret records of Nazi mind-control experiments (including drug-hypnosis) obtained from Dachau ruins. (Marks, *The Search for the Manchurian Candidate*, pp. 4-5)
- 1948 Research begins on a machine that will emit signals at the frequency of alpha brain waves on the theory that brainwaves of hypnotically susceptible nearby persons will synchronize, shifting the subject into a trance condition.
- 1949 Congress passes Central Intelligence Agency Act, which also restricts CIA activities to foreign countries.
- 1949 Hungarian government puts Cardinal Mindszenty on trial. With a glazed look in his eyes, he publicly confesses to astonishing and illogical crimes of treason. Within six months, CIA believes they know how the Cardinal’s mind was broken: psychological stress, drugs, and hypnosis.
- 1949 S.M. Korson reports the “Successful Treatment of an Obsessive-Compulsive Neurosis with Narcosynthesis Followed by Daily Electroshocks.”

- 1949 Dr. Janis (Rand Corporation report) urges research on “drugs, hypnotism, hypno-narcoanalysis, electric and drug shock...” and on ECT (convulsive level of electric shock to brain) to assist mind control. Testing mind-control drugs is underway. Rockefeller and Macy [CIA conduit] Foundations fund Menninger Clinic to research hypnosis.
- 1949 The Society for Clinical and Experimental Hypnosis is founded: membership by invitation only.
- 1950 Brickner reports implanting false unconscious memories of early childhood incest in amnesic drugged persons: “Direct Reorientation of Behavior Patterns in Narcosis.”
- 1950 Lie detector tests (biofeedback analysis) are becoming accepted by police forces.
- 1950 Edward Hunter’s article “‘Brain-Washing’ Tactics Force Chinese into Ranks of Communist Party” introduces the term **brainwashing**.
- 1950 CIA’s Roscoe Hillenkoetter approves “virtually unlimited use of unaccountable funds” (Thomas, p. 96) for new Project, BLUEBIRD. Goals include 1) learning to obtain accurate data from persons, willing or unwilling; 2) learning to condition persons so that data cannot be extracted from them by any means; 3) researching combinations of electroshock, Freudian psychiatry, hypnoid drugs, and hypnotic training techniques to achieve **subconscious isolation** (artificial personality splitting) and increase “compliance to suggested acts.” Then comes induced amnesia for all those procedures. (Schefflin & Opton, *The Mind Manipulators*, p. 115) CIA Director Morse Allen okays **terminal experiments**.
- 1950 Soviet and U.S. governments both begin pouring money into secret research to develop and control **psychic** powers.
- 1951 Nielsen’s hypnorobot, Palle Hardwick, commits second bank robbery, murders, and is arrested. Witnesses implicate Nielsen. Dr. Reiter enters case.
- 1951 CIA psychiatrist reports that ECT can produce varying degrees of **amnesia**. Morse Allen asks the CIA psychiatrist to try using the post-ECT “groggy” period to gain hypnotic control. A CIA memo says that, using hypnosis, they could “brief a prisoner...dispatch him on a mission and successfully debrief him on his return without his recollection...” (Schefflin & Opton, p. 114)
- 1951 CIA begins ARTICHOKE (named for the “A treatment,” drug-hypnosis combinations), a joint program of BLUEBIRD-type research with the military (Army, Navy, and Air Force). The F.B.I. refuses to join.
- 1952 Project ARTICHOKE mission statement targets development of means to obtain data “from a person against his will and without his knowledge,” preventing those means from being used on “us,” and raises the question, “Can we get control of an individual to the point where he will do our bidding against his will and even against such fundamental laws of nature such as self-preservation?” (Chavkin, p. 13) Project M-K-Delta investigates how to covertly modify a person’s behavior. Amnesia is a research goal: “The greater the amnesia produced, the more effective the results.” (John Marks, pp. 40-41) Parapsychology is another research area.
- 1952 During the Korean war, 7000 Americans are captured. None escape; 30% die; 33% collaborate. The many false confessions of germ warfare participation by U.S. and British prisoners astonish U.S. public, and stir interest in **brainwashing**.



- 1952 President Truman signs National Security Agency into existence.
- 1952 Prescription tranquilizers become common.
- 1953 U.S. signs Nuremburg Code, containing rules governing medical research. They prohibit human experimentation, unless subject is provided full information beforehand and freely consents. It states the subject can withdraw at any time.
- 1953 CIA begins covert testing of chemicals and technologies on unknowing citizens. ARTICHOKE becomes Project MKULTRA, a Technical Services Staff (TSS) operation, which will continue for twenty years. (Project MKDelta is absorbed into MKULTRA.) Richard Helms is the “driving force behind this” (Weinstein, p. 129). MKULTRA experiments with “electroshock, psychology, psychiatry... aversive therapy, electric shock, and...‘brainwashing’.” (Boward, pp. 105-108) Improving their hypnoprogramming technology is a top goal. The Director of Security for Artichoke adds a sub-goal: “...attempting to have a hypnotic subject kill someone while in a trance.” (Lee and Schlain, *Acid Dreams*, p. 28)
- 1953 Dr. Ewan Cameron, head psychiatrist at McGill U., Montreal, Canada, reads paper at a Neuropsychiatric meeting in Arkansas which explains his concept of **depatterning** by electroconvulsive shock and **repatterning** by **psychic driving** (forced listening to repeated, taped message). He says, “We have explored this procedure in one case, using sleeplessness, disinhibiting agents [barbiturate], and hypnosis.”
- 1954 Morse Allen, CIA hypnosis chief, hypnotizes office secretaries. He causes one to shoot her friend with an (unloaded) pistol. He wants to test if “hypnotically induced amnesia would stand up to torture.” (Marks, *The Search for the Manchurian Candidate*, p. 187). CIA gives a Soviet agent the “**A**” **treatment** (barbiturate to induce unconsciousness, then, twenty minutes later, a shot of stimulant); the agent then accepts a male interrogator as being his beloved wife Eva, and confides in her. Suggested total amnesia is successful.
- 1954 Soviet defector Petrov’s revelations of KGB infiltration of CIA shake up President Eisenhower. Lieutenant General Doolittle urges “every possible scientific and technical avenue of approach to the intelligence problem” and becoming “more ruthless” than the KGB.
- 1954 CIA Director Allen Dulles shifts hypnosis research from Morse Allen to Sid Gottlieb’s MKULTRA team. Alden Sears begins experiments: “Could a hypnotist induce a totally separate personality? Could a subject be sent on missions he would not remember...?” (Ibid., p. 186)
- 1954 Dr. Frank R. Olson’s suicide becomes public (CIA slipped him LSD). Congress gives widow big monetary settlement. Director Allen Dulles writes public letters to responsible persons in the Agency accusing them of “poor judgment.” However, his handwritten private memo makes clear the letters are merely for public consumption: “These are not reprimands and no personnel file notation is being made.” (Schefflin & Opton, p. 112)
- 1954 Copenhagen Criminal Court convicts Nielsen of using hypnotic and other means to control of Hardwick cause him to commit robbery and murder. Nielsen is sentenced to prison, Hardwick to psychiatric confinement.
- 1955 For first time in history, twenty-six Korean War POWs elect to stay in Communist China rather than return to U.S. Others return, but then hand out flyers on street-corners urging support for

- North Korean victory. **Brainwashed** becomes a household word—and a government research priority.
- 1955 Army pays for Tulane U. research program which implants electrodes in brains of mental patients.
- 1956 Dulles assigns Hinkle and Wolff to create a definitive study on the roots, history, and methods of brainwashing.
- 1956 The Group for the Advancement of Psychiatry (CIA funds conduit for brainwash research) holds Symposium No. 3 in New York on “Factors Used to Increase the Susceptibility of Individuals to Forceful Indoctrination: Observations and Experiments.”
- 1957 Alden Sears refuses to continue experiments on artificial personality-splitting for CIA. Cameron submits grant application to Society for the Investigation of Human Ecology (CIA front), gets \$60,000 to test ECT amnesia and psychic driving.
- 1957 Vance Packard publishes *The Hidden Persuaders*, exposing the advertising industry’s adoption of unconscious motivators. *New York Times* quotes ad executive who says that **subliminals**, messages so briefly flashed on screen as to be consciously indiscernible, do influence buying decisions.
- 1957 Estabrooks’ *Hypnotism*, new edition, says: “A nation fighting with its back to the wall is not worried over the niceties of ethics.” It says research on hypnoprogramming will not be made public, but discusses disguised induction, amnesia, sealing, waking hypnosis, and creation of an artificially-split personality.
- 1958 Seymour Fisher (Bureau of Social Science Research, Rand Corporation subcontractor) sends Air Force a report predicting that “some drugs would prove useful in reducing the amount of time required to induce complex hypnotic behavior.” (Boward, p. 23)
- 1959 A machine which aids hypnotic induction by putting out a repetitive electric signal in alpha or theta range is invented: the **Brainwave Synchronizer**.
- 1959 First hypnosis **susceptibility scales** are published; these standardized inductions enable systematic, reliable prediction of response to hypnosis at any depth in one standardized induction.
- 1959 Marcuse (*Hypnosis: Fact and Fiction*, p. 204), states that a person involved in military hypnosis experiments told him they were “unethical” and “a dirty mess.”
- 1959 Congress passes law forbidding the National Security Agency to disclose any information about itself.
- 1960 MKULTRA launches expanded “operational experiments in hypnosis” with three goals: 1) rapid, disguised induction; 2) creation of durable amnesia; 3) implantation of “durable and operationally useful posthypnotic suggestion.” MKULTRA does the laboratory development of techniques; TSS (Technology and Science Section) handles “field experimentation.” (J. Marks, p. 189)
- 1960 CIA begins spying on “domestic dissidents.” The Society for the Investigation of Human Ecology (a funds conduit), publishes *Brainwashing: A Guide to the Literature*.



- 1961 Researchers study left and right brain hemispheres, discover they have independent consciousness and also have separate, independent memory systems.
- 1961 Alan H. Frey discovers that humans can perceive pulsed microwaves in 300-3,000 megahertz range by direct brain perception of the radiated energy—no ears necessary.
- 1962 CIA discusses “joint work in hypnosis with a foreign secret service...” for experimental torture interrogation of a hypnoprogrammed agent. (J. Marks, p. 188)
- 1962 President Kennedy dumps Allen Dulles, puts McCone in charge of CIA: “I must have someone there with whom I can be in complete and intimate contact—someone from whom I will be getting the exact pitch [truth]. I made a mistake in putting Bobby in the Justice Department...Bobby should be in CIA.” (Martin, p. 118) McCone is not told about “the safehouses and the CIA-Mafia assassination plots” (J. Marks, p. 100)
- 1963 McCone’s Inspector General learns of MKULTRA. He reports: a) It is “professionally unethical,” (b) doubts its legality by original [CIA] charter, (c) warns “it places the rights and interests of U.S. citizens in jeopardy,” and (d) warns that “public disclosure of some aspects of MKULTRA activity could induce serious adverse reaction in U.S. public opinion, as well as stimulate offensive and defensive action in this field on the part of foreign intelligence services.” (Schefflin & Opton, *The Mind Manipulators*, p. 132)
- 1963 In the midst of conflict with the CIA, on November 22, President Kennedy is assassinated. President Lyndon Johnson immediately returns the CIA to business as usual.
- 1964 J. Lee Rankin, General Counsel for the Warren Commission (investigating the assassination) asks CIA’s Helms for data on Soviet mind-control technology. Helms reports that they “consistently lagged about five years behind Western research.” (Warren Commission Doc. #1131)
- 1964 CIA “ends” MKULTRA, telling Congress and the press that its behavioral research is over. However, the Science and Technology Directorate quietly continues brain research.
- 1964 Hypnotic audiotapes proliferate in therapeutic circles and in the general marketplace. Hypnosis researchers (Barber & Calverley, 1963; Hoskoved, Svorad, & Lanc, 1963) confirm their effectiveness. Videotaped hypnotic induction and training will soon follow.
- 1965 The CIA’s San Francisco **safehouse** (a fake brothel where mind-control experiments on unknowing citizens are conducted) closes. The N.Y. safehouse remains open until 1967.
- 1966 CIA experiments in Taiwan test the ability of hypnoprogrammed person (Candy Jones) to resist interrogation, including under drugs and torture.
- 1967 The CIA announces the “end” of mind-control testing, and claims to have destroyed related records. (Ditto in 1964 and 1973.)
- 1969 Delgado proposes direct radio interface between brains and machines: “direct communication can be established between brain and computer, circumventing normal sensory” routes. (Delgado, 1963, p. 93)
- 1969 “...Agency [CIA] scientists from the Office of Research and Development (ORD) ran a number of bizarre and potentially far-reaching experiments in mind control... The most innovative and

- daring doctors had been transferred to ORD, and a number of young consultants from civilian medical research laboratories had been recruited...called Operation Often.” (Thomas, p. 273)
- 1970 Behavioral psychologist McConnell writes “...we can combine sensory deprivation with drugs, hypnosis and astute manipulation of reward and punishment to gain almost absolute control over an individual’s behavior...”
- 1971 Microprocessor introduced to computing world. Computer miniaturization is now possible. Implantation in humans will be researched.
- 1972 Maimonides Medical Center confirms the theoretical link between trance and psychic ability.
- 1973 The Watergate and Church Committees force unpleasant disclosures. In January, CIA Director Richard Helms orders remaining MKULTRA records (files 1-152) shredded, then resigns. A document which lists the file titles, however, escapes the shredding. (The last two titles are “GRANT.”) Dr. Sidney Gottlieb (MKULTRA’s other most important manager) retires.
- 1973 Dr. Joseph C. Sharp, Walter Reed Army Institute of Research, understands words radiated directly into his brain in the form of “a pulsed-microwave audiogram (analog of the words’ sound vibrations)” (Becker, 1985, p. 319)
- 1973 The NSA’s Advanced Research Projects Agency begins work on creating a machine that can read minds by deciphering the brain’s radiated magnetic waves. Aspects of the new technology are being worked on at MIT, NYU, UCLA, and NASA’s Ames Research Center.
- 1974 CIA Document #455, 6 May 1974, reports on “Experimentation Programs Conducted by the Department of Defense That Had CIA Sponsorship or Participation and That Involved the Administration to Human Subjects of Drugs Intended for Mind-control or Behavior-Modification Purposes” (J. Marks, p. 230).
- 1975 *Report to the President by the Commission on CIA Activities within the United States* says “...studies explored the effects of radiation, electric-shock, psychology, psychiatry, sociology...”
- 1975 John Marks files Freedom of Information Act requesting the CIA documents mentioned in the above Report which deal with studies of “possible means for controlling human behavior.”
- 1975 Inspector General sends memo to CIA Director: “Precautions must be taken ...to conceal these activities from the American public... The knowledge that the Agency is engaging in unethical and illicit activities would have serious repercussions in political and diplomatic circles and would be detrimental to the accomplishment of its mission...” (Schefflin & Opton, p. 498, #177)
- 1976 Playboy Press publishes *The Control of Candy Jones*. Candy and Bain start nationwide publicity tour, give one interview, then accept \$100,000 for “movie rights,” and never give another.
- 1976 Sen. Frank Church (Church Committee Report) says in a radio interview: “I know the capacity that is there to make tyranny total.” He warns urgently that the secret agencies have acquired such devastating tools of control that they must always be required to operate within the law, and must always be supervised.
- 1977 CIA, pressured by President Carter, releases ten boxes of old documents to Marks—and to other reporters and journalists. *New York Times* front page reports the MKULTRA effort: twenty-



five years and \$25,000,000, and it quotes their 1952 mission statement. Congress calls for testimony on the documents that Marks obtained. CIA Director Admiral Stansfield Turner testifies that 185 nongovernment researchers in eighty institutions were involved in the MKULTRA research. Among them were forty-four colleges and universities, fifteen research foundations, twelve hospitals and clinics, and three penal institutions. He refuses to name specific institutions or researchers.

- 1977 The investigating committee lacked time to read all 16,000 pages, and “the small cadre of [longtime CIA] witnesses had agreed among themselves beforehand to limit their testimony to questions asked, not to volunteer anything.” (Collins, p. 34)
- 1978 Michel Ter-Pogossian, et. al., at Washington University, St. Louis, has built prototype PET. This sophisticated brain-scanning device lets scientists watch the brain at work by detecting bioradiation from outside the head. A computer projects the data as a picture.
- 1979 Nine of Cameron’s surviving McGill research subjects file a lawsuit against the CIA.
- 1979 U.S. District Court orders CIA to name the universities and researchers that worked for MKULTRA (to facilitate the finding and compensating of research victims which Congress has ordered). CIA Director Turner, however, argues for keeping the names secret, on the basis that they fit the CIA definition of “intelligence sources.”
- 1980 GAO reports that the National Security Agency (NSA) classifies 50 to 100 million documents per year. “...its classification activity is probably greater than the combined total activity of all components and agencies of the government.”
- 1981 U.S. Army begins SRI study with goal of systematizing psychic phenomena and making the results of performance of psychics reliable, consistent, and useful to nonpsychics. Funding is millions of dollars per year.
- 1982 The National Science Foundation begins funding research on ways of “gluing” **biochip** proteins to neurons. Biochips use organic materials to create data processing chips which may be integrated with human nervous systems, creating actual machine-man combinations.
- 1983 Despite the 1979 U.S. District Court order, only fourteen CIA experimental subjects (all surreptitiously dosed with LSD in the S.F. safehouse) are found. Only one of them is compensated. CIA’s Laubinger deposes: “It was decided that there were no subjects that required notification other than those.” Admiral Turner expresses regret about “...a disappointingly small number” notified, but defends the CIA’s refusal to declassify: “I don’t think that would have been necessarily the best way...Not in the litigious society we live in.”
- 1983 CIA psychics develop the skill of **remote viewing**.
- 1983 National Security Agency budget is estimated to be \$10 billion.
- 1984 The federal budget for scientific and technological research is \$47 billion. Two-thirds of that money goes to the military. Government research in bioelectricity and biomagnetism kicks into high gear.
- 1985 “...the CIA, which has always been at the cutting edge of developments in psychopharmacology, continues to conduct secret research aimed at creating more sophisticated forms of chemi-

- cal [mind] control” (Lee & Schlain, *Acid Dreams*, p. 292)
- 1985 Judge John Penn, U.S. District Court, D.C., rules that CIA does not have to reveal names of MKULTRA researchers: “Courts do not have sufficient background or expertise to formulate a knowledgeable decision as to what may be harmful to the intelligence-gathering procedures used by this country...” (Weinstein, p. 184)
- 1987 Jon Franklin describes each brain’s unique energy-radiated **brainprint** which could be used for identification. He predicts use in near future of “scanners” by police to read minds. (Franklin, *Molecules of the Mind*)
- 1987 “Secret ESP research is still being conducted, although CIA spokesmen refuse to comment on the nature of these experiments.” (Lee and Schlain, *Acid Dreams*, 1987)
- 1988 CIA settles out of court with Cameron’s patients, paying \$100,000 to each—on condition that they drop the case without requiring a CIA admission of guilt and never again give an interview. They agree.
- 1988 Science journalist Howard Rheingold gets through the tight security guarding Stanford Research Institute’s top-secret mind-control program’s enormous center in Santa Monica to interview a scientist, “Mack.” It’s a short interview. Mack warns, “...you’re strolling through a mine field.” Mack does confide this much: “We are entering an area more revolutionary than any traditional political theory...In some fundamental ways, getting high [entering trance] is really what makes the world go around. We’re talking about changing the nature of our beliefs about reality when we talk about ‘getting high’.” Mack tells Rheingold that “perception of reality can be reshaped by modifying those beliefs through drugs, hypnosis, or psychotherapy techniques.” (Rheingold, 1988, pp. 122-3)
- 1990 The Dec. *Journal of Hypnotism* reprints Schilder and Kauder’s narcohypnosis instructions to National Guild of Hypnosis members.
- 1994 Ohio Sen. John Glenn convenes hearings on cold war experiments on unknowing citizens. The administration works to “keep our focus limited to human radiation” (with nuclear materials). (“The Cold War Experiments,” *U.S. News & World Report*, Jan. 24)
- 1994 *U.S. News & World Report* interviews Gittinger, Gottlieb, et. al. Gittinger says, “...most of it [the mind-control research] was exciting and interesting and stimulating, and quite necessary as it happens, during that period of time.” Former MKULTRA Director Sidney Gottlieb, who now works with hospice AIDS and cancer victims, says he is “trying to get on the side of the angels instead of the devils.” (Ibid.)
- 1995 Rohypnol, “the date rape drug,” becomes street problem. In three weeks of July at Laredo, 101,000 tablets of this drug, which strips away consciousness, enter U.S.
- 1996 The Commission on the Roles and Capabilities of the U.S. Intelligence Community reveals the CIA has “accumulated a \$2 billion slush fund” and recommends that spooks who lie to Congress be severely punished. The Commission also points out the need “for greater disclosure of details of the now-classified intelligence budget” because right now nobody knows exactly how much they get or what they use it for.” (*Asheville Citizen-Times*, Mar. 7, 1996, p. 4A)



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BOLD-FACE ENTRIES ALSO CAN BE FOUND IN THE GLOSSARY.

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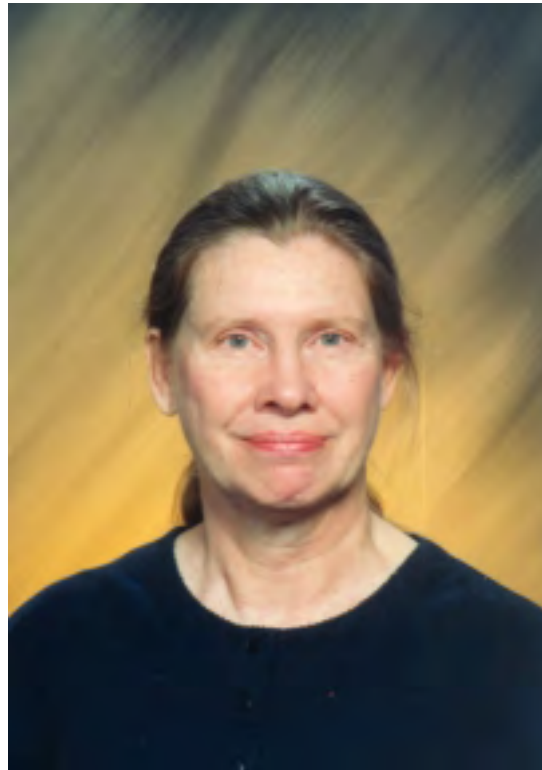
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Thank you, God,
for enabling the
completion of this long
and heavy task of
telling. All glory be
to You in Your holy
aspect of Truth.



Carla Emery

This photo was taken by Mark Spencer of Zelienople, Pennsylvania, in his living room. Mark is a professional photographer. While visiting Mark and his family, I told him I needed some photos. He said, "Sure." Half an hour later, he had captured 25 different Carla-expressions. (He used a small colored screen as a backdrop.) Corey chose the close-mouthed look. Actually, I can smile and show my teeth, too.



Corey Smigliani

Corey Smigliani is a graduate of the Massachusetts College of Art and currently resides in the Boston area, sharing the roof of Art Making Factory #53 with some talented alumni and friends. With the solemn "Secret, Dont Tell" under her belt, Corey is looking forward to working on some lighter ideas of her own.

Should you care to get in touch with Corey, she may be reached via her hometown P.O. Box of 264 - Brant Rock, MA 02020.



Have nothing to do with the fruitless deeds of darkness, but rather expose them. For it is shameful even to mention what the disobedient do in secret. But everything exposed by the light becomes visible, for it is light that makes everything visible. This is why it is said:

Wake up, O sleeper,
rise from the dead,
and Christ
will shine on
you.

Ephesians 5: 11-14 NIV

- I. Case Histories of Criminal Hypnosis
- II. A Partial History of U. S. Government Mind-control Research
- III. Trance Phenomena
- IV. Induction Methods
- V. Legal and Therapy Issues in Criminal Hypnosis
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But all at once...with one wave of his hand over her - with one look of his eye - with a word - Svengali could turn her into the other Trilby, his Trilby - and make her do whatever he liked...
George Du Maurier, *Trilby*, 1894



From corrupt therapists to unethical researchers to secretive government agencies, Svengalis have victimized the unsuspecting and the imprudent. *SECRET, DON'T TELL* is a good read about this too-long closed subject, exposing the darker side of hypnotism throughout history - a world where real-life Svengalis abuse their hapless Trilbys.

Born from the author's own painful experience with unethical hypnosis, *SECRET, DON'T TELL* is the product of over a decade of interviews and diligent scholarly research. It is a true encyclopedia in the field of hypnosis and modern mind-control technologies, indispensable for anyone interested in trance phenomena, psychotherapy, psychoanalysis, counseling, or related fields of law.

Yet Carla Emery's writing is far from stuffy or academic. This book is intensely readable, with the pace of an excellent suspense novel. It is both compelling and terrifying - and every word is true.

Carla Emery is a mother, speaker, and writer - especially of encyclopedias. She is the author of the critically and publicly acclaimed *Encyclopedia of Country Living*, a basic reference work in the field of family food production ("goats and gardens"). In print for 25 years, currently in its ninth edition, this old-fashioned recipe book and how-to manual now has some 400,000 copies in print. She is also a perceptive watcher and clarion of world events affecting our environment, health, freedoms, and fortunes.

