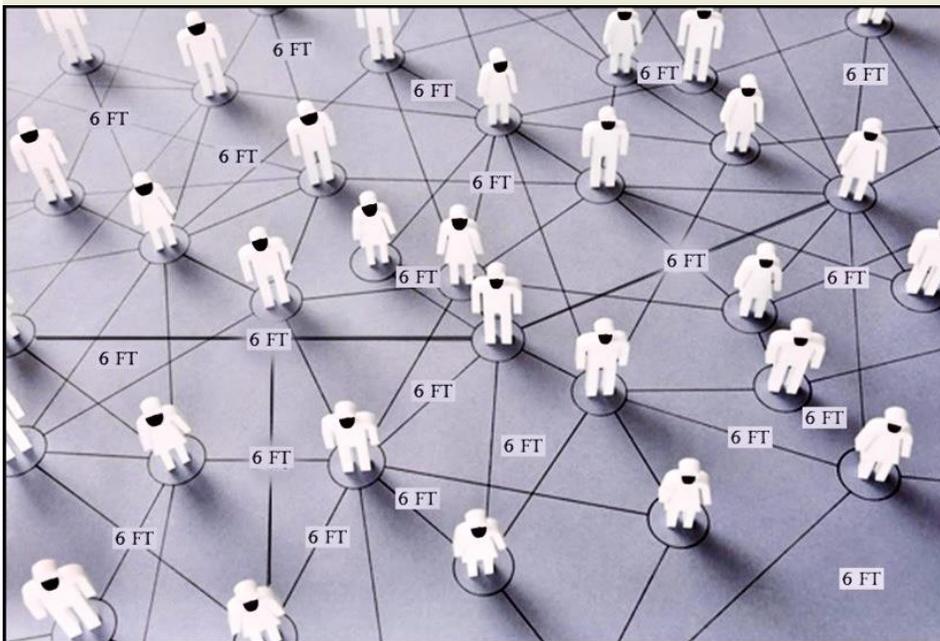


2021 Bulletin: **PANDEMIC ISSUE**



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Afik Faerman, M.S.

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disappear

Division 2021 Election Results:

- By Joseph Green, Ph.D.

I am pleased to announce the results of our 2021 Division 30 election:

President-Elect: Scott A. Hoyer, Psy.D.

Secretary: David Godot, Psy.D.

Treasurer: Ciara C. Christensen, Ph.D.

Member at Large: Guy Montgomery, Ph.D.

Congratulations all!

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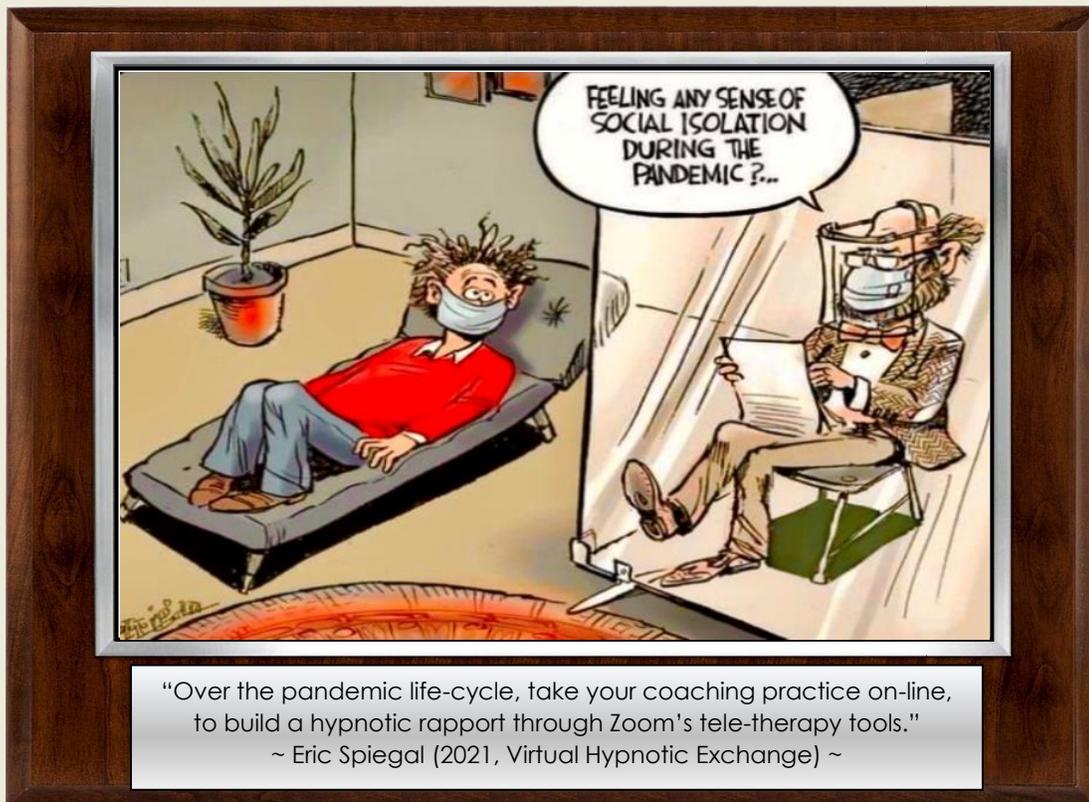
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President's Letter

- By Eric K. Willmarth, Ph.D.

Once again another year has flown by and I find myself writing a final President's Letter before turning the care of Division 30 over to the capable hands of Dr. David Reid, our incoming president. I will keep this letter quite brief because as you can see, you have a world of news and updates contained in this fabulous newsletter. Probably the single most fortunate decision that I made this year on behalf of Division 30 was to ask Charlotte Young and Afik Faerman to be the new co-editors of the Division 30 Bulletin. I hope that you can appreciate all the planning and work that went into this issue. From updates about membership, the International Journal of Clinical Hypnosis and other hypnosis Societies, to Feature Articles, election results and member activities, I trust that you will find that this is one of the best documents that you will receive this year. And it won't stop with this issue. Plans have already been made for publishing a summary of the talks from this year's Virtual APA Conference, whose schedule you will find within this issue. Please consider contributing to the next issue with articles, updates or opinions. Please also consider sponsoring a colleague to join Division 30 as we continue to provide leadership in a field that has yet to come into full recognition within the healthcare world. Finally, thank you to all of the members who have worked so hard and contributed to our success during these difficult times. I look forward to the leadership of Dr. Reid and the new president-elect, Dr. Scott Hoyer. I am confident that our Division is in good hands for years to come.

Yours in Song,

Eric K. Willmarth, Ph.D.



Co-Editor's Letter

- By Charlotte A. Young, M.A.

Welcome to the Society of Psychological Hypnosis, Division 30 Bulletin, Spring/Summer, pandemic Issue # 1, Volume 29 of 2021.

Of all 29 volumes (and years) from which the Hypnosis Division 30 has produced newsletters, you will find this issue carries a casual, whimsical format to put aside rigid policies we globally endured over this biennial pandemic.

Culturally, Canada enforced a solid, 14- month lockdown; including a provincial/Quebec, 8:30 p.m. curfew to be off the street with fines from \$1,200 to \$6,000, on violators. We cycled through 5 colour-coded, progressions, to track phases of Covid-19 control within the pandemic; not too dissimilar from our 5 increments of rainbow currency.



It was during this context of an extended, lockdown (myself since March 2019) that you might understand why I was thrilled to receive an unexpected, international, phone call from Division 30 President, Eric Willmarth (in the middle of my walking-meditation to inspect if the Mall Gym was still closed).

Air-juggling my iphone10, (& startled to discover the iphone could actually *ring*); Eric offered an invitational request to take-on the task, as lead of the Division 30 Newsletter.

After 20 minutes of Eric's persuasive conversation; or perhaps, it was I who wouldn't let him go; I agreed to do the Newsletter with 2 caveats. The newsletter would have to include a "Hypnosis, Arts & Entertainment" section and someone else would have to format the digital technology, organization. AGREED!



That night I had a most fabulous dream, I already completed the Newsletter. I was having so much fun networking in a massively packed, outdoor convention of tens of thousands of new people I met. I announced the Newsletter was completed by being only 32 pages (relative to past newsletters that were 150 page, editions). When I awoke, I felt great about the newsletter, realizing all I had to do as "content editor" was work backwards LOL.

I was so pleased Afik Faerman was willing to use his access to the highest of multi-information technology of resources, as "technical editor" to construct the Newsletter. What a great resource of organization layout, he has provided in this issue. Co-editor teamwork is the best ride, forward.

I encourage our 600+ membership & 12 Executive members to experimentally supply content, or anecdotes for upcoming Newsletters to c.young@videotron.ca. If contributing at least once a year to the Newsletter is not enough exertion; I extend a supportive, warm mentorship offer, to contemplate continuing as my successor.

"Leadership success is measured by the success of your successor." ~ Rev. Myles Munroe M.A., Ph.D (1954-2014 plane crash)

EXECUTIVE SUMMARY

Membership Report

- By Charlotte A. Young, M.A.

According to APA's Division Engagement Office staff, out of APA's total 122,479 members & 54 divisions, we have 616 members in Division 30. Of our membership, 5 % are not from the United States, comprising a total of 33 international members.

Canadians make up the highest international group at 2%, with 13 members. Next highest country is Portugal with 5 members. Countries with 2 members each are India, Australia and Spain. We have 1 person each from Brazil, Switzerland, Chile, Italy, China, Turkey, Costa Rica, Ireland, UK & Northern Ireland.

Students make up 9% of our population (54 apprentices in hypnosis). If we consider "post-career" as retired from an original career, these members make up 52% or 317 members. It suggests Division 30 has a much more mature population of elders with a repository of skillsets.

Profiling names as a determinant of gender (by rounding off the numbers), Division 30 has approximately twice as many males than female hypnotists in the Division. Males make up 64% or 391 members. Females make up 32% of the population or 200 members. Those with unisex names (or just an initial) were 4% of the population of 25 members.

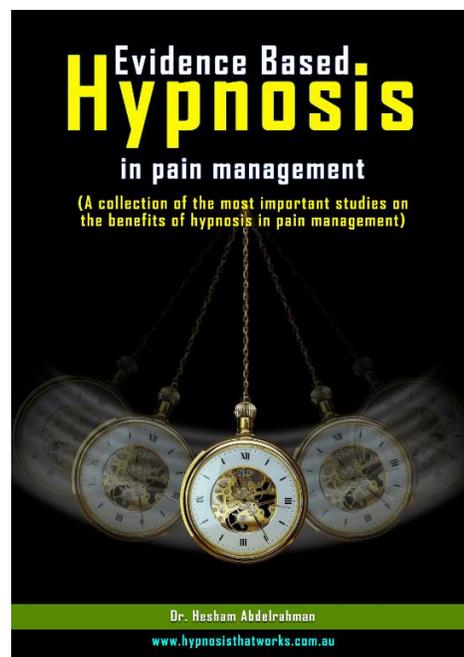
For more precise membership data, please take 10 minutes of your time to complete the 2021 Co-Editors', Membership Inclusion Survey (see link on the right).

MEMBERSHIP INCLUSION SURVEY + GIFT

As co-editors, we appreciate you taking 10 minutes of your time and effort, to [COMPLETE OUR NEW MEMBERSHIP INCLUSION SURVEY](#) (to determine the multi-cultural diversity and range of academic achievements, reflected within our Membership).

Special appreciation goes out to Hesham Abdelrahman, M.D. who donated the attached, Bonus Gift e-book abstract collection, collated in 2021 May, for the benefit of our members.

You would be offered the option to download the document, for FREE, upon completion of the Member Inclusion Survey.



EXECUTIVE SUMMARY

The 2021 Division Award

- By John C. Mohl, Ph.D., M.Ed

Department of Social & Behavioral Science
Bucks County Community College
275 Swamp Road, Newtown, PA 18940

The Awards Committee is proud to announce that Erik Z. Woody has been awarded the Award for Distinguished Contributions to Scientific Hypnosis by Division 30. In his nomination statement in support of Dr. Woody, Dr. Len Milling noted:

Dr. Woody's research has made important contributions to knowledge in a variety of areas including individual differences in hypnotic responding, dissociation, models of hypnotic behavior, the biological underpinnings of hypnosis, as well as the use of hypnosis to test theories of psychopathology. His publications have been widely cited and a number of his hypnosis journal articles have been cited more than 40 times!

Dr. Woody is prolific researcher whose positive impact on hypnosis will be felt for years to come. Division 30 congratulates Dr. Woody on achieving this distinction!



Image: retrieved from the University of Waterloo
(<https://uwaterloo.ca/psychology/people-profiles/erik-woody>)

LATEST NEWS FROM



Have you considered what Open Access Publishing can do for your research?

Publishing your accepted article in the *IJCEH* is free, but some authors elect to cover the costs of publishing, making their paper freely available to anyone online. The number of authors electing to publish their articles with Open Access in the *IJCEH* has been increasing. Open Access papers have many more views, more readers, and usually more citations. This is beneficial to the authors and to the journal! If your manuscript is accepted, consider Open Access publishing, and email us with any questions.



Editor-in-chief:

Gary R. Elkins, Ph.D

The *IJCEH* accepts many types of papers, including: Empirical research (e.g., clinical trials, neurophysiological studies, mechanistic studies, feasibility studies, replications); Clinical papers (e.g., well-designed multiple or single case studies); systematic reviews, meta-analyses, research-informed theoretical papers, & significant historical or cultural material. **Topics can include:** Hypnosis, hypnotizability, and hypnotherapy in psychology, psychotherapy, psychiatry, medicine, dentistry, wellness, nursing, and related areas; and studies relating hypnosis to other phenomena (e.g., mindfulness, contemplative practices, & consciousness).

If you have a paper to submit, go to mc.manuscriptcentral.com/ijceh and create a username. Everything you submit will be conveniently available for you to view on the online system.

Contact us at: IJCEH@baylor.edu

Stay in the know when new articles or issues are published by signing up for new content alerts at the *IJCEH* publisher's website: <https://tandfonline.com/ijceh>. Click "New Content Alerts", enter your email, and select your preferred frequency!

Managing Editor:

Joshua R. Rhodes, M.A.



Find us online at:

www.IJCEH.com or www.tandfonline.com/nhyp



Follow us on Twitter

Here are some Twitter accounts to follow! You can keep up to date on recent articles, event information, the latest news from hypnosis societies, and discussion on hypnosis research.

- [@IJCEH](https://twitter.com/IJCEH) – The *IJCEH*'s Official Twitter Account
- [@ElkinsGary](https://twitter.com/ElkinsGary) – Follow the Editor of the *IJCEH*
- [@tandfonline](https://twitter.com/tandfonline) – Taylor & Francis Research Insights' Official Twitter Account

The Clinical Hypnosis Association

The Clinical Hypnosis Association (CHA) is a component section of the American Society of Clinical Hypnosis. While we access the activities of the other component sections, our meetings, once a month, focus on a topic presentation and clinical case discussions. We have a truly talented mix of therapists from different backgrounds – physicians, social workers, and psychologists one who trained under Milton Erickson.

Last month Age Regression was discussed by a member who performs regressions for forensic purposes. Topics including IBS, self-hypnosis and inductions have been presented/discussed by experts. Our membership reaches from the East to the West Coast, South America, and Europe.

Should anyone be interested in more information, please contact me at: pwgmd@drgardnerhypnosis.com.

Peter W. Gardner, M.D., FACP

President, CHA

Board Member, ASCH

Approved Consultant, ASCH

The American Journal of Clinical Hypnosis

Founded by Milton H. Erickson, MD in 1958, The American Journal of Clinical Hypnosis (AJCH) is the official journal for the American Society of Clinical Hypnosis. Stephen Lankton, LCSW, DAHB, FASCH currently serves as the Editor-in-Chief. Published on a quarterly basis, the AJCH publishes original scientific articles and clinical case reports on hypnosis, as well as reviews of related books and abstracts of the current hypnosis literature. In 2019 the AJCH was ranked 43rd out of 83 "Complementary and Alternative Medicine" journals.

We are proud to announce an upcoming Special Issue series dedicated to the neurophysiology and neuropsychology of hypnosis:

63(4) Special Issue: Neurophysiology and Neuropsychology of Hypnosis: Recent advances and future perspectives (Part I)

Guest Editor Giuseppe De Benedittis, University of Milano, Italy

64(1) Special Issue: Neurophysiology and Neuropsychology of Hypnosis: Recent advances and future perspectives (Part II)

Guest Editor Giuseppe De Benedittis, University of Milano, Italy

Stephen Lankton, LCSW, DAHB, FASCH

Editor-in-Chief

David B. Reid, Psy.D., FASCH

Science Editor

What Type of Hypnosis Should I Do?

- By Peter W. Gardener, M.D., FACP

92 Jordan Lane, Stamford, CT 06903

I recently did a point counterpoint with another therapist, the topic was "What Type of Hypnosis is Best". We came up with that topic because hypnotherapists are constantly asked that question - Should I be more direct? Should I be more permissive? How long should the session be? Where can I find different scripts that would work? How does one write their own scripts? What type of induction should I use? What type of deepening? Is deepening necessary? What if the client is moving, and scratching themselves, repositioning - does that mean they're not hypnotized? And the questions go on and on.

Frankly, these questions and more is what makes hypnosis so fascinating to me. I'm curious to learn how it works, why it works, how to make it more powerful, how to best integrate it into therapy... and again, the questions go on.

These are all questions with which each of us wrestled when we began integrating Hypnosis into therapy. Hypnosis is a type of therapy not the therapy itself - it integrates into the entire therapeutic process. And although we say "I'm going to do this or do that" while we're delivering hypnosis, all we are doing is opening the person up to new ways, new ideas, new possibilities that may or may not have occurred to them or that they haven't yet explored. When we are very direct and "tell" a person what to do maybe it'll work maybe it won't work, but does the client walk away with the sense that they are in control? Do they feel that they are making the change or rather that we are deciding upon what's best (for them) and then making changes for them? Is that disempowering?

I explain to all clients that suggestions I use must be in congruity with their core values and ethics, and relevant to their current distress. Without those elements I don't believe therapy can affect a positive change while empowering the client (and isn't that the goal of therapy?). One's core values and ethics may be ones with which I disagree, but I don't believe we can "change" someone's core values through hypnosis.

Rather, again, during hypnosis we can offer possibilities on how to change them and what reasons there might be to change them - it's then their decision to take us up on our "offer". Take the example of someone who would like to stop smoking. We use their motivation to quit, we use their reasons for wanting to quit, we don't tell them what they already know - that smoking isn't good for you - but offer the possibility of their living in a world without cigarettes. I call them "non-smokers" rather than "ex-smokers" for that very reason (in their new world without cigarettes they truly are a non-smoker).

So, back to the question - "What type of Hypnosis Should I do"?

First off, what is it you are trying to do? What is the client's goal? What is your goal? Are you clear about the goal? Has the patient been able to articulate it? For example, I was in a seminar and one of the people learning Hypnosis said to the group "I am an Epileptic". I asked him to reframe that and suggested that rather than say "I am in all epileptic", he say "I am a person with epilepsy". With the former, I don't know where to begin - in a sense it defines him and it's a daunting task to try to even understand therapeutically. Rather, if he is a whole person and yet has epilepsy, we've compartmentalized, we've separated him from his condition, and now we can address whatever change he's seeking without epilepsy getting in the way. And it's the same for other reasons people may come to therapy. If a client says to me "I am an anxious person", I do the same thing - I ask them to consider thinking about themselves as being "a person with anxiety" - it no longer defines them. Not only does that rephrase put them in control but it also gives me a target for my hypnosis, a goal to which we're going to work.

Certainly, we've all experienced that when a client tells us they have anxiety in one part of their life - for example, anxiety about school tests - the odds-on favorite is that they have anxieties in other parts of their life. So, we have the choice of addressing each circumstance in which they have anxiety or we can address how they generate their anxiety, how is it that they see or experience something that's not anxiety provoking in one person and yet creates a sense of foreboding in them? If they've gotten anxious about a recurring event in the past, is it so surprising when they're in the same situation, they get anxious again? Or could they have seen it coming? The content of what the situation is, I don't find, is all that important - it's the process they go through on their way to that experience of anxiety.

And so, if my goal is to give the client insights into their own anxiety, and how to manage it, then I want my post-hypnotic suggestion (PHS) to be something along the lines of recognizing situations that may provoke the symptoms of anxiety and noticing that they are manageable and tolerable rather than "each and every time you are in situation x, you'll be calm rather than anxious" because what if there's a modification of the situation we haven't accounted for in our suggestion?

So why did I jump to the post-hypnotic suggestion? Because that's where I start. I decide what I want my suggestion to be, what I believe it should be after listening to what they want, what would be most beneficial, and then I work backwards to structure the session so it ends up at our target, what it is we'd like to modify.

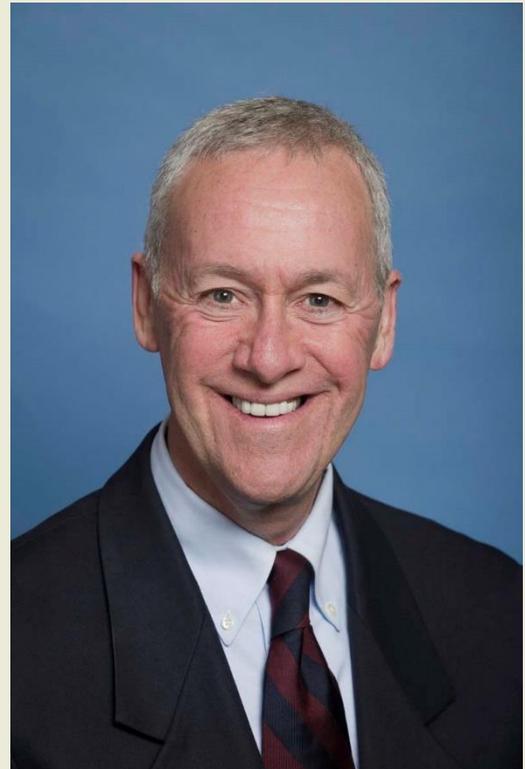
All the while I'm speaking with the client, I'm evaluating whether they want and need concrete suggestions, or might they be more receptive to slightly more abstract ones. Before the hypnosis I ask if they followed my reasoning, understand my examples? Would being concrete be more helpful? How do they describe themselves within the context of their anxiety or the presenting issue? Are they "asking" to be told what to do? Or would they rather feel that they'd rather consider various alternatives?

Then I decide how concrete, direct, or how permissive, indirect, I need to be. Certainly, that gets fine-tuned in the second session when I find out what they're experienced during the first. This may sound a bit complicated or even convoluted but isn't it what we do all the time when probing one's thoughts and feelings? Asking questions that may or may not be leading? Asking directly or a bit more obtusely?

So, to begin with, I think about the type of induction I'd like to do. Do I tell them to close their eyes, take deep breaths, see themselves in a certain way, walk down a flight of stairs or a hill, tell them that they can see their body here or there (concrete association) and then walk them through and continue to give direction? Or do I suggest that they can close their eyes when they choose, that deep breaths might help calm them (I always point out that the phrase "take a deep breath, calm down" is such a common one), and then very gently guide them in the direction I'd like them to go, all in order to end up at my post-hypnotic suggestion.

When beginning, I wondered about whether people were truly in a trance when they adjusted their position in the chair, scratched an itch... So, were they in hypnosis? Were they bored and just wanted it over? Were they really going to integrate the post-hypnotic suggestion? What should I be doing differently? Maybe I'm no good at this? All of these thoughts went through my head... maybe, somehow, I could do things "differently" to "get them into a trance". A more experienced hypnotherapist said to me "is it working? Are you getting the desired results"? And to my surprise I did seem to be getting good results most of the time.

So back to my initial question "What Type of Hypnosis Should I Do?". The short answer is, any type that works for both you and the client. The corollary, though, is to study or read up on several different methods and decide which one you feel you can deliver with confidence, meaning, and caring for any particular client. That's the one you should do.



Peter Gardner is a physician who transitioned into hypnosis full-time, 10 years ago. He is President of the Clinical Hypnosis Association, a component section of ASCH. He is an Approved Consultant with ASCH and serves on the ASCH Board. He is in private practice in Stamford, CT.

FEATURED ARTICLE

Reflections on Using Hypnosis to Cope with COVID-19 and Guillain Barre Syndrome

- By Ian E. Wickramasekera II, Psy.D.

Naropa University, Boulder, CO

I never cease to be amazed with how helpful learning about hypnosis has been to me personally throughout my whole life. Originally, my Father and Mother taught me self-hypnosis when I was 10 to help work with chronic migraine headaches that were painful enough to cause nausea and disruption of my attendance in school. Hypnosis worked perfectly well for me and within 6 months I had reduced my headache frequency to near zero headaches a month. I've used hypnosis almost every day of my life since then in some way or another to help me cope life's many difficulties or to take advantage of some challenge in the integration of my mind/body relationship. Until recently, the biggest challenge that I ever faced was running marathons using hypnosis as a way to cue "runner's high" and to make the experience of long distance running a very enjoyable and ecstatic experience. However, this was until 2020 when COVID-19 entered my life along with Epstein Barre Syndrome, 2 strokes of my Cerebellum, and Guillain Barre Syndrome.

Sometime around March 19th I started to get sick with COVID-19 at my home near Denver, CO. I was originally not that concerned about it although it did seem strange to me how high my body temperature was rising and I talked with my physician. Around this time, I also had my first likely transient ischemic attack which I noticed when suddenly I experienced the left side of my tongue disappear entirely from my perception although I could still feel it rubbing on the inside of my mouth. Next, I became very weak and tired as Epstein Barre Syndrome (EBS) began to set in. Finally, about a week after my first symptoms had set in, I developed symptoms of Guillain Barre Syndrome (GBS) and was unable to walk and was hospitalized as my body soon became almost completely paralyzed within a 24-hour period. GBS is a disease in which the motor neurons of the body become dysregulated and dysfunctional due to a hyper aggressive autoimmune response.



Medical Centre of Aurora ER

Thus, simple actions like holding a cellphone and walking became impossible as all my voluntary and involuntary motor activity got shut down by GBS.

A neurologist in the hospital told me that my near complete paralysis was likely due to GBS and that perhaps it had been set off by COVID-19. I told him that I was

relieved to hear this information because I thought that this meant that GBS had already done its worst on my body since I was already nearly totally paralyzed from the neck down. He then gravely told me that unless the progression of the GBS was altered, that I would soon develop difficulties with breathing and swallowing that could kill me within the next 12-16 hours. He also told me that he thought it might be possible to keep me alive on a ventilator in a medically induced coma but that I might possibly pass away from the combination of problems that I was experiencing. I was being kept on a special COVID-19 floor where we were all isolated from the other patients and where I could neither receive a visitor or communicate with anyone since I no longer had the strength to hold and operate my cell phone. Staff coming to treat me were under strict orders to limit their time in the room while wearing extensive protective equipment for their own safety. A few of them kindly operated my cellphone for me so that I could speak to my Son and other family members for a few minutes or so at a time.

I let my family know of my condition and I told them that I loved them while saying goodbye to them potentially for the last time. My voice became almost unintelligible and very faint as the GBS reduced my breathing, swallowing, and speaking down to almost nothing. However, even at the end I was able to say at least a few words like "Love You" with minimum volume before I lost the ability to speak entirely.

I'm sure that many people facing these circumstances might have felt very frightened, hopeless, lonely, and depressed. I must confess that each of these emotions and many more passed through my heart and mind as I pondered what potentially, my last 12 hours before slipping into a medically induced coma and/or death would be like.

FEATURED ARTICLE

As grim as this all sounds, I am happy to report here to you all that our good mutual friend hypnosis became one of several keys that I used to transform this terrifying experience that I was going through into an experience of transcendent joy, gratitude, and contacting the innate happiness and possibilities of life under any circumstances. I did feel all of the difficult emotions that any person might experience in these kinds of moments when dying but I also experienced the innate ability of my heart and mind to rise to this challenging moment. Hypnosis became an important part of how I was able to face up to the challenge of dying and find gratitude, comfort, joy, and deep satisfaction with my life even if it was to be ending within a few hours.

In truth, I had been using hypnosis to cope with my problems long before I got to the hospital. I used hypnosis to cope the experience of suffering from a high fever and the numerous aches and pains that I had in my body when the COVID-19, Epstein Barre, and TIAs came about at home. I worked with my self-talk with hypnosis and post hypnotic suggestions like "Calm, Relaxed, and Free" to accept what was happening to me and to try and find things that I could do to improve my health.

I came to view the time that I was spending ill as a nice relaxing vacation where I could do nothing but care for myself and to do spiritual practices such as Dzogchen, mindfulness, mantras, and other hypnotic-like practices (Wickramasekera II, 2020). I became very relaxed and was really partly enjoying the challenge of keeping my heart and mind focused on healing and positive self-talk using healing imagery techniques such as Tong-Len and many other hypnotic-like practices. watched silly videos of comedians and inspiring spiritual teachers that I have studied with over my 40 years of spiritual practice when I needed a break from active practice. I was actually feeling quite calm and peaceful most of the time and I could contact this kind of innate happiness that is not dependent on anything other than recognizing it that is called the nature of mind in the hypnotic-like tradition of Dzogchen (Wickramasekera II, 2020). I found that it was possible for me to find a part of me that was not fixated on suffering even when painful and distressing symptoms demanded my attention to do something about them to in order to treat the illnesses that began to get much worse. It became more difficult to cope with all of this when the paralytic symptoms of GBS kicked in and I had many anxious thoughts about the mysterious and sudden origin of my inability to walk and crawl around my home.



*Northern Colorado
Rehabilitation Hospital where
I learned to walk again*

However, even at this point I found it possible to use a hypnotic-like awareness that is discussed in Dzogchen (Wickramasekera II, 2020) to acknowledge what had happened to me and also to realize what functioning was still available to me and use this awareness to marshal my remaining resources for all the challenges that I was going through. It occurred to me that things could get better I kept working with the situation as it was instead of making it worse by either denying what was happening or catastrophizing in panic.

At the hospital I used every single thing that I've ever taught patients and about how to deal with acute procedure related pain and also chronic pain issues. The worst pain that I experienced in the hospital came from the intravenous immunoglobulin (IVIG) treatment that I received which saved my life by reversing the progression of the GBS that had nearly ended my ability to breathe, swallow, and speak. I felt like someone had lit my blood on fire within 30 minutes when the IVIG medicine was administered to me for the first time. I was offered all kinds of analgesic medication including opiates to cope with this pain but I refused them all worrying that they might make me sleepy and that I might fall asleep. I was worried that falling asleep would end my practice of mindfulness meditation on my breathing which I could observe was improving my oxygen saturation levels just as it had for so many of my COPD patients that I've worked with in the past. Instead, I used a hypnotic-like meditation practice called Tummo (Wickramasekera II, 2014) coupled with some hypnotic awareness techniques to connect with the cleansing power of the fiery sensation of the IVIG medicine and to experience it as a strong blissful energy. It was very challenging, but I found that I could do this and felt proud that my ability to practice this way was indeed giving my body a better chance to heal by continuing the IVIG medicine and mindfulness practice as well. So it came to pass that after 5 days of daily IVIG treatments that lasted about 4 hours that not only was the GBS's progression stopped but also that my.

FEATURED ARTICLE

breathing, swallowing, and speaking started to make very noticeable improvements. After this I went to a rehabilitation hospital where I was given fantastic care to regain the ability to move and walk. For about 5 weeks I was put in all kinds of painful, embarrassing, uncomfortable, and yet helpful exercises in rehabilitation while coming to terms with the amazing and paradoxical miracle that I was not going to die but that I was now still mostly paralyzed. I used hypnosis in this phase of my treatment extensively reduce and eliminate the acute pain of many hundreds of things like receiving painful injections, being placed in painful body positions, etc., while also using hypnosis to cope with chronic pain issues like sore spots on my back and posterior due to my inability to change my body position due to GBS. As before, I focused on what I could do and accepted what I was not able to do using my hypnotic-like awareness. Every day it seemed like there was some very small new thing that I could do such as move a new toe that I could not move before. I would then spend hours moving every part of my body that I could do so voluntarily and scan for small signs that another part of my body was returning.

The wonderful people helping me saw how hard I was working using my mind/body abilities and became very interested in what I could do with hypnosis and meditation during rehabilitation exercises. We seemed to feed off of each other's enthusiasm and curiosity and my rehabilitation began to move at speeds that I have subsequently learned are not commonly seen in GBS treatment. I only required the one IVIG treatment and 5 weeks of highly skilled and compassionate rehab to walk out of the rehabilitation hospital that I was blessed to be treated at.

I have no doubt that the many prayers and healing wishes that people extended to me had a huge effect on my rapid healing from Covid19, strokes, EBS, and GBS. I have partially written this testimony to thank many members of Division 30 that helped me during this time of challenge with friendship and their prayers

I am also so grateful for everyone in the hypnosis community who is responsible for giving me the very training in medical hypnosis and hypnoanalysis that was a key part of what allowed me to walk away from the terror and pain of suffering from these powerful illnesses. I am so grateful and hope that I can repay you all in some way with the life was restored to me. May this testimony inspire anyone who reads it to think about their life with gratitude and to realize that even at the moment of death there is always something that we can do to rise and meet the challenge with hypnotic-like awareness.

References

- Wickramasekera, I. E. (II) (2020). Hypnotic-like aspects of the Tibetan Tradition of Dzogchen meditation. *International Journal of Clinical and Experimental Hypnosis*, 68(2): 200-213.
- Wickramasekera II, I. E. (2014). Early psychological knowledge. In: T. Leahey, S. Greer, G. Lefrançois, T.Reiner, J. Spencer, I. Wickramasekera, II, & E. Willmarth (Eds.), *History of psychology*(pp. 15–42). SanDiego, CA: Constellation.
- A longer interview about my experience with using hypnosis and Dzogchen during this illness can be viewed at: [\(219\) Ep79: Dr Ian Wickramasekera - Agony Into Bliss, Facing Covid With Dzogchen – YouTube](#)



Fully recovered from COVID-19, Ian hiking in August 2020 with his son;
The most mesmerising motivation to recover of all.

The Editor Interviews



Discovering the Mechanisms behind “The Psychology Talk, Podcast” and its Applications to Hypnosis

- By Charlotte A. Young, M.A., Eng.

More than half of Division 30's 600+ membership are Baby Boomer seniors, who grew up on “radio” as their most significant, recreational, listening medium. “Podcasting” has similarities to radio, except podcasting does WiFi broadcasts using tiny antennas for transferring data, modulated over internet service; at much higher frequencies and wavelengths (2.4GHz-5Ghz bands), so that massively wider audiences can participate & listen-in, at their leisure.

Radio transmits and receives electromagnetic waves visibly lower (87.5-108.0 MHz) for coding the modulation waves that will travel very long distances; but they take up major space by using giant-size, heavy antennae towers, with limitations of running slow in their broadcasting range. Radio is not affected by power failures, related to climate change, but has much smaller audience sizes to convey major ideas such as in hypno-therapy and in the psychology profession.

The Podcasting platform has since done a cross-over, to overtake radio as the #1 mainstream, audio-listening medium. Since the pandemic, podcasting has exploded with more celebrities & academics, choosing to be guests on podcasts, than over radio.

When Division 30 Executive Member & President Elect, Scott Hoye, Psy.D. agreed to discuss anecdotes about his specialized Podcast for the Division 30 Newsletter, we were thrilled. Originally known as, “The Chicago Psychology Podcast”; now called “Psychology Talk Podcast”, Hoye conducts interviews from the widest range of applied, integrative, clinical and experimental, psychology practitioners, who also use hypnosis as therapeutic tools.

I consider his podcast guests, as psychology celebrities, for all being maven leaders in their field. Hoye clears up misconceptions, so the listening public may become aware of the vast expertise available for what psychologists can do for you. This interview is intended to educate our Division 30 members on the wide range of practitioners, who apply hypnotherapy in their professional practices.

Young: Hello Scott, Let's begin with your motivational, mindset on the creative process of how you and your partner, Kyle Miller, LCPC, were inspired to launch a podcast? How did you determine your selection of theme music? How did you organize, find & research potential guests? Did you use any educational self-help, books; or other variables to develop your expertise in how your Podcast came into fruition?

Hoye: Thanks for seeking me out for an interview, Charlotte!

The podcast kind of grew organically. Both Kyle and I know each other from working at a group practice post graduate school. I was acquiring post doc hours, and he was acquiring post-masters' hours for full licensure. We were of a similar mindset: behavioral health, psychology, counseling, and psychotherapy all seem to be at an all-time high need presently. But they are still presented as mysterious and unapproachable subjects to many people.

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Conversely, there are countless influencers and silly memes that reduce the work and effort of psychotherapy and behavioral health research to mere slogans. So, we devised to make a show that was approachable and could shed light on just what people in the field do, and inform and stimulate listeners.

We determined the theme music simply because, in an earlier incarnation, I performed in a progressive rock band, the obscurely Italianesque-named, Seranati. So, I can use the music as much as I like. It's energetic, and sets an upbeat tone for the episodes. Plus, I know it was actually performed by real, live, breathing (ostensibly), human beings. I like that.

We experimented with using the music of other musicians, friends of mine from the folk and Celtic music world, on some of the episodes. That has since stopped, but I am always open to supporting independent artists, visual, auditory, or otherwise, so I would be open to using other music in the future.

We conduct interviews two ways: authors, clinicians, and researchers reach out to us, or we to them. In the case of authors, their publishers can reach out to us as well for an interview. In the case of authors that Kyle and I enjoy, we may seek them for an interview.

With regards to the research involved in recording and setting up the podcast, I did a lot of internet research. There is a ton of free information on YouTube and the overall internet to discern how to begin podcasting. Pat Flynn's free YouTube series was the best available advice for set up, recording, and editing.

I have recorded and distributed my own music, so I understood the main concepts of using the internet for distribution. That made it a lot easier for me to jump into it and teach Kyle how to edit from his end.

Young: Going directly onto the topic of Hypnosis, can you outline the range of how your guests' apply integrative, applications of Hypnosis? For example, I recognize some of your more popular special guests who are well-known Division 30 practitioners of Hypnosis such as, Don Moss PhD; Michael Yapko, PhD; David Paul Smith PhD; and John Mohl, PhD etc. You also have had guests who use hypnosis in specialized ways, such as 'exploring everyone's multiple ego-state, inner voices' by Bridgit Dengel Gaspard; 'couples therapy hypnosis' with Stephen Kahn; 'resolving gut disorders with hypnosis' with Dr. Sarah Quinton; 'hypnosis in child Birth' with Krysta Dancy; 'children's hypnosis in pediatrics' with Dr. Lisa Lombard etc. Explain in greater detail how to navigate to the hypnosis content and what listeners will learn from each of those uniquely diverse guests you have?

Hoye: The specific hypnosis content is available at the Soundcloud playlist for the podcast:

<https://soundcloud.com/user-274229294/sets/hypnosis>

As far as the specific application of our guests' uses of hypnosis, it is as varied as the guests themselves! I would recommend that people listen to the interviews to take home the diversity of applications and research.

Two examples of this diversity can be seen in the example of the episode with John Mohl and Krysta Dancy. John Mohl's episode goes into great detail about hypnotic suggestibility scales and the phenomena of hypnosis, as well as the current issues with the College Board exam excising hypnosis information from their psychology testing. Krysta Dancy discusses a great deal of the clinical applications of hypnosis for child birth, and also the cross over between EMDR and other techniques for trauma work. David Smith's episode on the confluence of traditional healing and hypnosis is informed by his own experience of working with First Nation healers in sweat lodges and other settings, as well as his academic and clinical background.

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By the way, one of my favorite interviews, left off of your list, is with Dan Brown on dissociative disorders, trauma, and attachment.

https://www.spreaker.com/user/11347814/dissociation-trauma-attachment-theory-wi_1

Dan provides a wealth of information of research on attachment, memory, and trauma, and it is chock full of scientific literature, as well as the application of hypnosis to treatment, integrated with mentalization techniques. In a sense, it is a combination of clinical and experimental literature filtered through the mind of a great clinician.

Another favorite, though not hypnosis per se, is with George Greer, MD of the Heftler Institute.

Episode:

<https://www.spreaker.com/user/11347814/psychedelic-medicine-behavioral-health-w>

Dr. Greer explains the psychedelic research and applications for behavioral health can be found in that one episode.

Young: In my early career as an analog, electronics engineer, every broadcasting segment, required multiple, coordinated teams of specialists or professionals. They each had expertise on highly complicated, individual pieces of studio recording equipment that used a massive range of technological, electronic components & these systems filled entire studio buildings to operate. Today, making a podcast appears to be more spontaneous & highly simplified, but requires some extensive digital, technical expertise, within its own right. And so, can you answer some modern technical, digital technology questions on what you use to Podcast?

For example, what kind of microphones do you use e.g. Shure MV88 etc? What editing equipment do you use? Do you use Apps like Audio Editor; Garageband; Audacity; or Motiv? Is there any future technology investments you would like to make, as a wish list?

Hoye: Mics: We use the Blue Yeti mic. It is a warhorse of a USB condenser mic, and has four settings, for diverse applications. I researched this years ago when did a home recording: https://www.wirestrungharp.com/revival/home_recording_harp/

Here is a link to listen to the recording on Apple Music:

<https://music.apple.com/us/album/black-rose/532868116>

That first link goes into some details of what we use, GarageBand, for recording the show. It's a free music and audio editing platform in macs. We both use macs; we use GarageBand. Audacity would be a second choice if I were to be using a PC. Basically, it's the same thing. Pro Tools is what I would use for recording and mixing music on a PC. The second is the end result of experimenting and recording and composing along the way.

We record interviews on Skype with the Ecamm app. Editing and mixing is in Garage band, with a post-production tweak of levels with an online platform, Auphonic.

Future tech investments? Sure, why not! I am looking to expand recording capacities for future music projects. The Yeti is all you really need, or some sort of equivalent, or a higher-grade mic, to podcast. It's really just a narrative vocal.

Young: Have you ever attended any of the massive International, annual Professional, PodCast Conventions for big name Podcaster keynote addresses & masterclasses that instruct on technology and marketing; such as "Podcast Movement: Evolutions in 2022"; "On Air Fest"; "We Are Podcast"; "PODWORK Virtual Summit"; "Podfest Expo" etc. ?

Would you ever conduct an APA pre-convention Workshop for, "How to Run your own Podcast?"

Hoye: Nope. Not interested as of this writing with any "pro podcast conventions." Why? Those appear to be a gathering of people who are all too ready to part with their money to "influencers" -

FEATURED ARTICLE

whose opinions are not worth a whole lot, in my not so humble opinion. Podcasting is something that can be done on the cheap, and doesn't need to be mainstream. Or, it can become mainstream precisely because a show or the format is home to something off of the beaten path, a rare jewel found amongst the mirky riverbed of internet noise. Most of the information they give out is readily available for free. Just do the research and apply it to your gear, and keep making episodes, is my advice.

As far as a pre-conference workshop: sure. If someone from APA approached Kyle and I, we would probably be up for it! I say this at the risk of sounding like a hypocritical, aforementioned "influencer," snake oil salesman. But so be it. I think we could supply a goodly amount of information succinctly, and help more psychologists launch their shows, and, hopefully, be heard above an internet full of balderdash and hokum about psychology and behavioral health.

Young: Have you considered all the passive income, marketing ways to monetize your podcast? Is there a choice in acceptance of Ads, to pay you royalties, or charge membership fees? Will you make an E-book collection of the best nuggets from all the diversity of your psychologist guests? How many listeners do you have and from what areas of the world do they tune in?

Hoye: We were originally ad free. We switched to Spreaker and added monetization. It's not a lot of income at this point, but we are both too busy with our respective practices, running the show, and living life to really have done a strong marketing pitch. But perhaps that is just around the bend.

As far as sponsorships or memberships, we haven't considered it. I think marketing would be a first step, increasing the audience. That would increase the ad revenue setup we have through Spreaker. Other ventures could be approached afterwards.

As far as an E-book, I am not sure what permissions would be needed per each guest. We are considering adding transcripts for shows to make them available for the general public.

Ultimately, the podcast was imagined as a public service. Both I as a clinical psychologist and Kyle as a counselor are very much in tune with giving back and helping the public through information. If anyone is touched by this, we are meeting our main goal.

The Psychology Talk Podcast has a global reach. We've had around 20,000 downloads. Our audience is in North and South America, Europe, the Middle East, South and East Asia, Australia and New Zealand. We hope to inform and connect people around the planet with the knowledge, wisdom, and utilitarian aspects of what psychology can provide for humanity.

Young: Lastly, where can members subscribe to your Podcast link? What is the process to supply feedback on individual guests? Or ask questions? Is there a rating scale to click rating stars after each guest? Where would one find the extra comments and extra liner notes discussed within each Podcast? Is there a separate discussion website to find out more about your guests? If Division 30 members have ideas for a podcast topic or want to be a guest, how can they reach you?

Hoye: For those interested, they can tune in here:

Apple Podcasts:

<https://podcasts.apple.com/us/podcast/psychology-talk-podcast/id1460318424>

Spreaker:

<https://www.spreaker.com/show/psychology-talk-podcast>

Spotify:

<https://open.spotify.com/show/15nGgiPbTNUJGGFrQF2pFs>

Stitcher:

<https://www.stitcher.com/show/psychology-talk-podcast>

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There is no rating availability per each guest/episode, but a general review that mentions guest interviews that were (hopefully) enjoyed can be left at Apple Podcasts.

The show's webpage is: <https://psych-talk.com>

There are a few show notes, with greater links to the guests' webpages, books, etc.

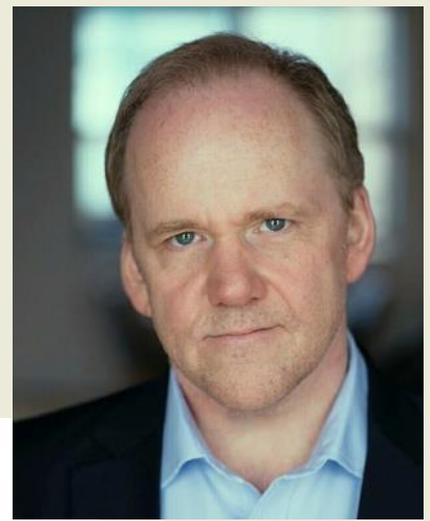
We can be reached here at this webpage for interview ideas or comments:

<https://psych-talk.com/get-involved>

Thanks for reaching out to me, Charlotte!



Kyle Miller, LCPC



Scott Hoyer, Psy.D.



PSYCHOLOGY TALK
P O D C A S T

MEMBERS' ACCOMPLISHMENTS

We Ask Members

What did YOU do during the pandemic?

Dr. Stanley Krippner talks about his new two books

We wanted to acknowledge Division 30 member Dr. Stanley Krippner (et al) for his magnificent feat of publishing two (!) books during this lockdown year.

"Understanding Suicide's Allure was published a few months ago by ABC-CLIO/Praeger in Santa Barbara, CA and elsewhere. The book focuses on suicide's relationship with combat trauma, sexual assault, and bullying. There are several chapters devoted to prevention and to therapy, ranging from Rational-Emotive Psychotherapy to psychedelic-assisted psychotherapy. Recent Guidelines from the American Psychological Association are summarized; suicide among various ethnic and social class groups are presented; two evolutionary theories of suicide are included."

"The other book is one I co-edited: , published by McFarland.

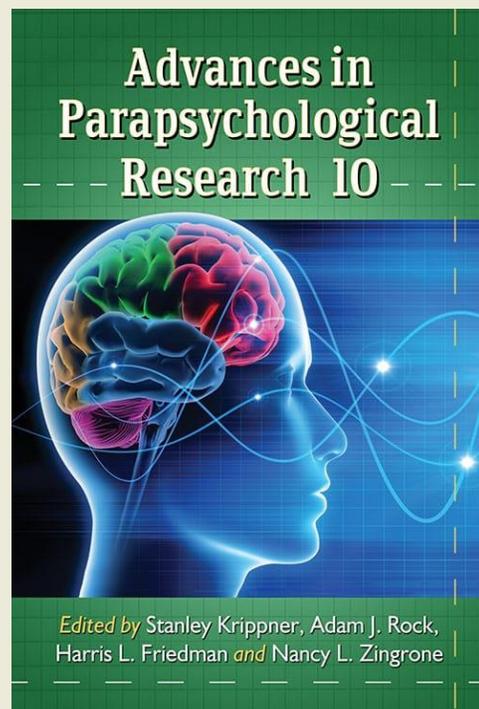
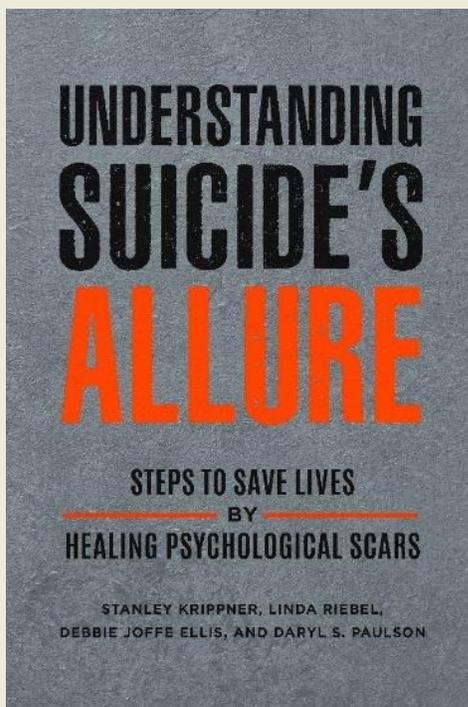
The chapters include a meta-analysis of "psychics" and their role in police investigation. The research studies disclosed some individual successes, but nothing that could be considered reliable.

Another chapter is a meta-analysis on the purported psychic ability of "mediums." Again, there were a few successes but overall the results were not significant.

There is a chapter on quantum theory, neuroscience, and parapsychological phenomena that I think is "cutting edge."

The other chapter is an evaluation of the recent American Psychologist article that advocated ignoring parapsychological data because they were "impossible." This chapter is a keen analysis of the flawed assumptions made in this article."

– Dr. Stanley Krippner



APA 2021 ANNUAL CONVENTION

Feature Presenters

Sat. 8/14/2021

Presidential Address

- **Session ID 887** 2021 Society of Psychological Hypnosis Presidential Address by Eric Willmarth, Ph.D.

Invited Addresses

- An Update on the Experimental Evidence for Parapsychological Phenomena by Etzel Cardeña, Ph.D., **Session ID 798**
- Re-Alerting: You Can Count on It Without Counting by David B. Reid, Psy.D., **Session ID 975**

Skill Building Session

- Utilizing Clinical Hypnotherapeutic Intervention With CBT to Treat Pandemic Symptomology by Rodney Luster, PhD. **Session ID 875**

Symposium (Session ID 877) Report on Task Force on Guidelines for the Assessment of the Efficacy of Clinical Hypnosis:

- Guidelines for the Assessment of Efficacy of Clinical Hypnosis Interventions by Zoltan Kekecs, Ph.D.
- Best Practice Recommendations for Hypnosis Research Randomized Clinical Trials by Gary Elkins, Ph.D.
- Key Findings of the International Survey of Hypnosis Clinicians and Researchers by Olafur Palsson, Psy.D.

Poster Presentations (Session ID 274)

- The Effect of a Suggestion Based Intervention on Human Cooperation by Melvin S. Marsh, M.S.; Michael E. Nielsen, Ph.D.
- Innovations in Clinical and Research Applications of the Hypnotic Induction Profile (HIP) by John E. Alexander, Ph.D.; Jessie Kittle, M.D.; Katy H. Stimpson, M.S.
- Mindful Meditation and Hypnosis: Applications for African Americans by Marty Sapp, Ed.D.; Michele Gloede, M.S.; Kayla D. Lewis, B.A.
- Hypnosis and the Alleviation of Clinical Pain: A Comprehensive Meta-Analysis by Leonard S. Milling, Ph.D.; Keara E. Valentine, Psy.D.; Lindsey M. LoStimolo, M.A.; Alyssa M. Nett, M.A.; Hannah S. McCarley, M.A.
- Optimizing the Cost Effectiveness of Self-Hypnosis for Gender Minorities by Kayla D. Lewis, B.A.; Marty Sapp, Ed.D.; Michele Gloede, M.S.
- Hypnotic Alterations of Agency in Fibromyalgia by Afik Faerman, M.S.; Katy H. Stimpson, M.S.; James H. Bishop, Ph.D.; Eric Neri, M.S., Angela Phillips, Ph.D., Merve Gülser, B.Sc., Heer Amin, B.Sc, Aryan Fotros M.D., Nolan R. Williams, M.D.; David Spiegel, M.D.
- Hypnosis to Address Academic Anxiety and Achievement by Steffanie Schilder, Ph.D.; Elizabeth Gill, B.A.
- Using Hypnosis to Relieve Performance Anxiety in Sports by Anna M. Sharkey, B.S.; Joseph Tramontana, Ph.D.

HYPNOSIS IN ARTS & ENTERTAINMENT

Communism, Hypnotism and the Beatles

Almost 60 Years Later, what have we learned since? A Discussion between Charlotte A. Young and Rev. Coady Everett Wright

Lampooning a book's title, "Communism, Hypnotism and the Beatles" (1) whether it's in entertainment jest; or dismissed as a "conspiracy theory of propaganda" could both be overly judgmental, reactions. Even academic criticism for the use of "circular reasoning" could be like casting too much emphasis on 'grammatical spelling', without a focus to determine, what pragmatic content does this book offer, at its core?



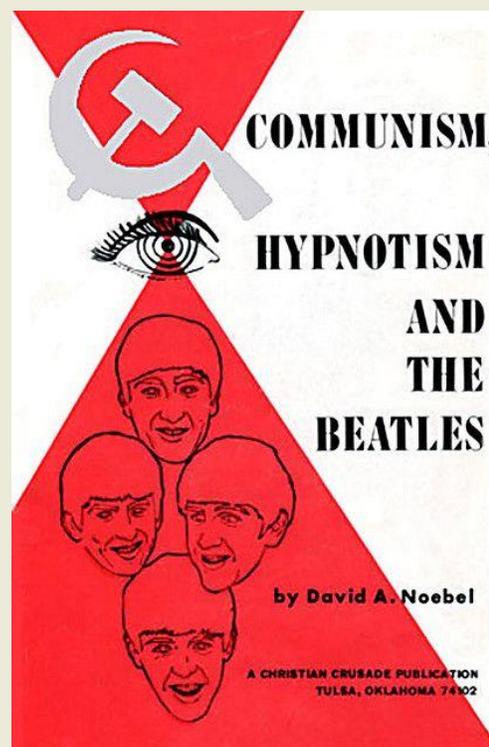
Charlotte A. Young
Div. 30 Co-Editor



Rev. Coady Everett
Wright

I wondered, "Why does this rare publication continue to be Sold-Out with mint copies that have run between \$75.50 to \$1,200 online?" We know at least half the population has doubts about Hypnosis; therefore, can't we benefit to understand the context of why?

And so, as a Canadian, I reached out to Rev. Coady Everett Wright, aka Rev. DJ Coady, a Pastor, Disc Jockey and a Rogerian Hypnotist, in California, to ask: "Is there an alternative way to view this publication to have a more compassionate understanding of that period, back in time?" It turns out, far more depth was behind this publication, as I had imagined.



Young: McCarthyism in late 1940's & 50's was a strange period engrained in American history. Wild suspicions identified Soviet Communism as having a clear intent to erode hardcore, American values. Before getting into this publication, it helps to understand how "fear of a soviet communist invasion" had repercussions that linger to this day and are applied to almost everything, politically left leaning, receiving a label as "Communism".

Everett Wright: Fears of a communist invasion, leads up to the reason for why the book "Communism, Hypnotism, and the Beatles" (1) became published. It's a 28-page research thesis of background notes to supplement a speech that the Rev. David Noebel had delivered in 1964. It's about how subversive tactics could be used to destroy America's stability. What it lacks in size, is supplemented by 168 footnotes & references that are a fascinating resource on their own, for independent study about all of those destructive influences. The author uses massive triangulation of data to bolster his position.

Young: The premise of the booklet is about how Soviet Communism had a subversive, master plan to psychologically undermine American values, through the hypnotic use of music. The progression is an attempt to draw parallels for how seemingly virtuous aspects of Psychology; of Music; and of Hypnosis can all dualistically become manipulative tools, to control and to do harm; especially if reverse-engineered to target youth.

Everett Wright: Some of the esoteric, sourced references Noebel used to validate his fears in this publication came from actual soviet psychology, experiments by Alexandra Luria & Ivan Pavlov that today would be viewed as animal cruelty and be human rights violations such as in *The Nature of Human Conflicts* (2). He cites K.I. Platonov too, about how easily people can be influenced by word and body language.

Young: Alexandra Luria, was acknowledged as a pioneer in neuropsychology. His approaches were through the use of hypnotic methods & disorganization, to artificially induce neurosis & mental illness in previously healthy & normal humans, from children to adults that he used as his subjects. Ivan Pavlov's research also evolved into the field of Human Behaviorism Psychology of today that demonstrated initially through animal & then human experimentation, how all of our muscles, glands and skin can be manipulated or "conditioned" to alter behaviors. And both Luria & Pavlov, conducted acoustic experiments to test how harmonic dissonance of discordant beats in musical meters could pull human drives and emotions into opposite directions. This would exhaust & incapacitate the nervous system.

Everett Wright: It's clear The Rev. Noebel was deeply impassioned about the insidious nature of all of the research he uncovered; including how these acoustic applications were subversively being applied through music and hypnosis.

Young: Other leading authorities of hypnosis during that time such as Granville F. Knight; J.A. Boucher; William J. Bryan Jr. all verified how hypnotic inductions would occur by adjusting sound stimuli to match the human pulse. At that point of synchronization, lyrical suggestions will have an increased influential impact. If you accept the suggestion, it becomes a compulsion.

Everett Wright: It was some of Rev. Noebel's propositions about the influence of hypnosis and music that had caught my attention. Rev. Noebel deftly connects those hypnosis authorities to show how the communists were brainwashing children with Soviet produced hypnotic music from kindergarten onward from the 50's. He points to the fact that these "known communist entities" (The Children's Record Guild and Young Peoples Records) were able to insert themselves into our daily school and home life from early childhood on, by using music disguised as safe for good Christian Americans to play. He states that the children are given suggestions for control and illness through these recordings that later in life will make them susceptible to artificial neurosis. I was able to find the songs referenced in the text on a YouTube channel and quite enjoyed the album, "Train Songs". He goes on to describe the influence for what happens to those same programmed children when they become teens in the 1960's. Enter Rock-n-Roll and Beatlemania explodes onto the music scene followed by wildly subversive, behavioral neurosis. The media was over-playing the same segments from Beatles concerts to demonstrate a contagion of mass hysteria, along with citing the loss of impulse control and emotional ecstasy of girls who "loved" the Beatles and that did happen, but...

Young: calling the phenomena, 'cybernetic warfare by nerve-jamming youth into mental illness' is overly excessive.

Everett Wright: Looking back, it has been generations since this was produced and it begs the question, “if there was a Communist plot to destroy our youth, it’s been taking quite the long way around”. In my humble opinion, some of Rev. Noebel’s conjectures are built to self-support his beliefs. There are many songs on the early childhood recordings that could be hypnotic in nature (as is all communication). The ones he singles out are too few, overall, to be effective in the way he suggests. There have been many American success stories to come out of the very same times. Not every person who was a Beatles fan or participated in the radicalism of the times turned into a Communist. Some became wildly successful entrepreneurs and statesmen promoting freedom and democracy on a global scale. Much like the episodes of hysteria at Beatles concerts, those cases were hyped to a point where the easily influenced would already be primed to act out as shown by example; but only a small segment of society would be susceptible. That dialogue about how music influences emotional states goes back as far as Egyptian times and even Plato suggested how certain types of music should not be allowed, due to ability to influence people into wild states that cannot be controlled in Music and Its Secret Influence: Throughout the Ages (3).

Young: Beethoven was accused of influencing the creation of Psychoanalysis. Even classic composers like Bach, Handel & Frédéric Chopin were called out for radical manipulation and shape-shifting society.

Everett Wright: The art of manipulation has grown into a modern science with how hypnotism and music has ability to influence. It covers body language, color theory, language patterns, sounds and rhythm (not just audio, but visual and other sensory rhythm). It’s widely used in advertising and sales, as well as therapeutically.

Young: Fields of study in human cognition and perceptual processing, are being explored today to research aspects about how we have an innate capacity to be exploited.

Neurologically, we all have powerfully vulnerable limitations built within, that even areas in psychology do not yet understand. In 2018, Dr. Jay Olson from the Neuroscience Research Institute at McGill University in Montreal, Canada stated, “Although we may consciously feel that we are always in charge of our own decisions, those decisions are often much more malleable than what we intuitively think of, as being free will” (4).

Everett Wright: I feel for Rev. Noebel and his plight to protect and inform people of how they can be manipulated. There is no doubt in my mind that corporations, governments and individuals use this stuff, to influence our decisions. The best we can do is to be aware of the power of influence, the tools, and how to use them. In knowledge, comes the ability to see the influencers as they approach and make appropriate decisions. Like a stoplight, if we know the red, yellow, and green of influence, we can safely navigate every situation.

Footnotes: The following links are where to further access topics that were discussed in the interview.

- 1) <https://www.testimonypress.org/wp-content/uploads/2015/11/Communism-Hypnotism-and-the-Beatles.pdf> (Link to the booklet)
- 2) The Nature of Human Conflicts (Luria’s detailed research & philosophies)
- 3) Music and Its Secret Influence: Throughout the Ages (on the compelling, esoteric influence of music to shape our psyche & our lives)
- 4) <https://razlab.org/media/the-science-of-magic/> (Suzuki, David, CBC The Nature of Things; 2018, Ep. 618 CNEHD is the Interview with Dr. Jay Olson on the malleability of free will)

Note: The positions expressed in this entertainment interview are those of the author and guest, not to be reflective of APA Division 30 perceptions.

HYPNOSIS IN ARTS AND ENTERTAINMENT

Freddy Jacquin's Magic Bag to Catch Invisible Problems

- Annotated by Charlotte A. Young

In this article, I share an acoustic tool, in entertainment-hypnosis to instantly, overcome anxiety. It applies to any toxic emotion (jealousy, anger, anxiety, fears). A demonstration of the technique is available for Division 30 members on the [Division 30 YouTube channel](#).

The technique was invented by Freddy Jacquin, College of Medicine and Integrated Health, Portugal. He developed a magic trick to offer to distressed children, grandchildren, social friends and strangers that can even be practiced in front of an audience..

Begin with a story e.g. describe how you were taught a technique in ancient, magic arts from your great uncle, for how to use a brown paper bag to catch invisible problems and it will be offered to that person, if they wish to volunteer.

Ask the adult or child, "Do you have an anxiety, fear, pain, or bad feeling?" Invite them to come forward and have a seat. (You do not have to ask for details). Request that they take that problem out of their head or body, wrap it up into a tight ball & give it over you, by placing that ball into your hand & advise them, to watch you closely.

Then you, as the entertainment hypnotist, look up at the invisible ball as you toss it into the air. Hold out the bag to get ready to catch the toxic ball of energy, so it lands with a heavy thud, directly inside the bag. The only technique, you place only your middle finger on the inside of the bag & thumb on the outside. Then you also look up and watch. You *SNAP* your finger on the inside edge of the bag for special effect,



to show that the ball of toxic energy has 'kerplunked' inside the bag. In that precise moment, you say, "You will never see that problem, affect you again!

You bundle up the bag, to trap that problem inside. You send them off (& discard the bag of negative energy).

Another coffee-table, variation for adults is you line-up a row of paper bags with each emotion labeled on the outside of the bags in advance. Ask, "Does anyone here have an unnecessary problem that matches the label on that bag?"

The mechanism behind the technique results from the acoustic distraction which produces an unexpected shock-effect when the ball (i.e., the problem) lands into the paper bag. It creates a *blink-flash*, moment-of-confusion & wonderment within the person. The direct suggestion, "you will never experience that anxiety problem again" becomes embedded within the limbic system. It especially fascinates children who genuinely believe their problem will never affect them again. They feel better.

THE BACKBONE OF DIVISION 30

The Backbone of Division 30

All Division 30 Executive Members were invited to contribute a bio-sketch that answers the hypnosis question: What were your introductions to hypnosis? And how did that play out? These are in addition to casual activities, family photos, and accomplishments, not found in other Division 30 Bios.

It was inspired by the "Psychology Talk Podcast" (in episode #9 June 4, 2019, The State of Hypnosis) in a discussion between Scott Hoye and John Mohl, when they wondered what standards of hypnosis were being taught around the world.

The hypnosis bio-sketches of executive members, who eventually respond to these questions, will be featured in this section of future Newsletters, on an ongoing basis.

Donald Moss, Ph.D.

My Introduction to Hypnosis

My introduction to hypnosis came in stages. My first personal experience of hypnosis came during my clinical psychology internship at the Staunton Clinic, in the University of Pittsburgh Health Center, in 1977, when another psychology intern practiced her inductions on me. Then in the early 1980's, I participated in a peer training group in Michigan, with two other young psychologists. We took turns practicing inductions, deepening strategies, and various kinds of hypnotic therapeutic work with one another.

I utilized hypnosis with patients throughout the 1980's and 1990's, largely for relaxation and stress reduction, and occasionally to revisit painful events, and desensitize the accompanying emotion. I experimented with integrating hypnosis and healing imagery into psychotherapy. I also worked closely with Ian Wickramasekera through the national organization, the Association for Applied Psychophysiology and Biofeedback.



Ian was a pioneer in utilizing physiological monitoring while conducting hypnosis sessions. I attended Ian's trainings and conducted trainings with him, on psychophysiological psychotherapy, the combination of physiological monitoring and psychotherapy.

Finally, at Stanley Krippner's urging, in November 2003 I took a formal introductory workshop at a Chicago meeting of the Society for Clinical and Experimental Hypnosis (SCEH) and then in November 2004 an intermediate hypnosis workshop at a Santa Fe meeting of SCEH. The SCEH trainings brought me to a much higher level of hypnosis skill and understanding, through the skillful teaching of Max Shapiro, Peter Bloom, David Wark, and others.

From that point onward, I attended SCEH, ASCH, the International Society of Hypnosis, and APA Division 30 meetings regularly, and benefitted from many advanced workshops with Michael Yapko, Gary Elkins, Carolyn Daitch, David Wark, Cory Hammond, David Patterson, Mark Jensen, and many others.

In addition, I intermittently attended a hypnosis training group in Grand Rapids, Michigan, organized by Eric Willmarth, to practice and sharpen my skills.

My Role with APA Division 30

I am a past-president of Division 30 (2010-2011), past treasurer (2010-2014), and served as the Division 30 delegate to the APA Council of Representatives for six years (2014-2020). I am now once again on the Board as a Member at Large. My experience is that Divisions play an important role in APA. APA itself is huge, and the annual meetings can be overwhelming. My Divisions, however, provide a home for me within The larger meeting. I enjoy the Divisional social meetings as well as the scientific programs organized by the Divisions. I am currently a member of APA Divisions 30, 32, 36, and 56..

My Home and Life

I live with my wife Nancy in the sand dunes and on a bike path along the Lake Michigan shore, between Grand Haven and Holland, Michigan. I enjoy gardening, cooking, and travel. Travel to the APA, SCEH, ASCH, and ISH meetings over the years has enabled me to share unique and interesting places around the US and around the world with Nancy and my many hypnosis friends in Bremen, Germany, Paris, France, Montreal and Toronto, Canada, as well as Reno, Seattle, Boston, San Francisco, and Washington DC.

Career and Writing

I have worked as faculty member and administrator for Saybrook University in California for 21 years, and currently serve as the Dean of the Graduate College of Integrative Medicine and Health Sciences for Saybrook. There, working with past Saybrook faculty Stanley Krippner and Claire Frederick, and current Saybrook faculty Eric Willmarth and David Reid, I have built graduate training programs in clinical hypnosis, biofeedback, neurofeedback, and many other mind-body and integrative medicine disciplines. We have enjoyed training over 175 graduate students in hypnosis, with memorable in-class experiences of hypnosis, including imagery-rich guided experiences with Claire Frederick. We have also enjoyed introducing many of our Saybrook graduate students to their first professional organization experiences with Division 30, SCEH, and ASCH.

I have written and edited a number of books over the years, most of them in the areas of mind-body therapies, integrative medicine, and psychophysiology. My most recent larger projects were a book co-authored with Angele McGrady, *Integrative Pathways: Navigating Chronic Illness with a Mind-Body-Spirit Approach* (Springer, 2018), and three edited books: *Mindfulness, Compassion, and Biofeedback Practice* (AAPB, 2020), *Physiological Recording Technology and Applications in Biofeedback and Neurofeedback* (AAPB, 2019), and *Foundations of Heart Rate Variability Biofeedback* (AAPB, 2016). Currently, I am bringing out a new biofeedback textbook with my colleague Fred Shaffer, *A Primer of Biofeedback*, which will appear in English and Spanish in the next year.

I am also working now with Angele McGrady on a book for lay persons with chronic illness, based on our *Integrative Pathways* book. The purpose of the new book will be to guide lay persons to combine self-care practices and positive lifestyle changes with their use of professional therapies and medical treatment.

This project to increase the integration of self-care with professional care has been a long-standing interest of mine. Many of my past patients and individuals who have attended community workshops I conducted have benefitted from self-directed use of self-regulation strategies for decades after the formal treatment ended.



~ Donn and Nancy Moss, Croatia, September 2019; Last vacation, prior to pandemic shut-down ~

THE BACKBONE OF DIVISION 30

Charlotte A. Young, M.A., Eng.



Tanisi – hello. My exposure to hypnosis has a range of interdisciplinary, multi-cultural approaches & spans across academia. As your newsletter, content-editor & a recent, subscriber to Division30, most of you won't know me. And so, my bio-tale has an extended, enigmatic length and it's filled with multiple, embedded, nested loops for Zeigarnik effects.

Intro To Indirect Hypnosis #1

I am Indigenous, more specifically, Métis – Swampy Cree. Swamplands carry the most powerful, medicinal flora because they thrive under the most violent, environmental conditions. Am descendant of Grandmothers' Noquay Wiegand, and Peaske (& later colonial, assigned-name, Charlotte Green); both of Makwa (Bear) Clan from East Main, Micawbanish (New Brunswick House) whose Chief was George Gladman. I was born on unceded, Ojibway/Chippewa territory of Fort William, First Nation on Lake Superior & am a member of The Metis Nation of Ontario, where hypnosis is a natural part of our ceremonial traditions (being my first exposure). Where I'm from in Fort William was renamed The City of Thunder Bay, that legitimately earned a reputation as the toughest, most violent City, to Indigenous populations, across Canada (1).

In the late 60's, I pleaded with my Indigenous father to rescue my school chums from after-school, conditions of Residential School. I didn't believe his claim that to do so was illegal & would land him in prison. At that precise moment, the radio confirmed what he said, with the PM warning, 'any Canadian who is caught being nice to an Indian; or who provides aid in any manner to an Indian; that fosters savage rituals of tribal dancing; or the use of hoops, wheels and spheres; or who even allows entrance of an Indian into a pool hall, will be fined \$400 and serve 1 month in prison'. I vowed to change the mentality of government when I got older.

Post Graduate School, I relocated to Gatineau, Quebec, to have my house built on Mi'kma'ki, Algonquin unceded territory; only to find out, Quebec is officially measured, as "the most hated Province" in Canada (2). I relocated here, post MA Psychology, Grad school because this is where I was recruited as part of an inaugural team, to spearhead the launch and development of The National Aboriginal Health Organization (NAHO), in Ottawa, to represent First Nations, Métis and Inuit; to promote physical, emotional, intellectual and spiritual, health of entire Indigenous communities.

My look as a "white Indian" has complications, but the advantage is to quash all unconscious biases of colonial racism situations, by those who let their guard down in front of me.

Intro To indirect-Hypnosis #2

My academic career started out by earning an Engineering degree in late 1980's specializing in acoustics, sound & audio. John M. Woram, (U of Miami) instructed the training seminars on acoustic signal processing, where I learned to master engineering tools of limiters, compressors, transducers, equalizers and filters etc.

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Cont'd Intro to Hypnosis #2

My second interdisciplinary, introduction to Hypnosis (without consciously calling it that), includes a skill set for audio-mixing, trance-inducing, acoustic techniques in the electronic recording studio. I used my engineering knowledge of signal processing tools to create Reggae's hypnotic, repetition of tones, designed to slowly, synchronize the human heart rate to reduce to 60 bpm; while interspersed with Rastafarian messaging for global dominion; based upon the universal Law of "One Love". I produced music festivals & closely coordinating groups such as Black Uhuru, Burning Spear, Steel Pulse, Peter Tosh, Toots and the Maytals, Messenjah, Satallites, BB King and rock band, The Police. (SEE FIG. 1)



Fig 1 Audio engineer mixing, of reggae acoustic, trance-tones in studio (approx. 1984-94)

Fifteen years later, I detoured from Engineering, to earn an Environmental Science Degree, paired with an Honours BA in Psychology. More specifically, my goal was to innovate the field of "Community Environmental Assessment". Reforms were needed in the cost/benefit, economics formula, calculated for profits in raw, resource-extraction. While these were 'gold standard' practices accepted by industry, academia, & politics; the practice clearly fell short filled with blatant errors by omitting all numerical variables to account for the compromise to health and well-being of entire communities; both in restitution and clean-up.

Intro To Hypnosis #3

My 3rd exposure to Hypnosis was introduced in a 5th year University course called, "Motivation Psychology" where hypnosis was the topic. It was while earning my duo 1992 Honours of Bachelor's degrees (in Science and Arts, BSc / HBA) at Lakehead University, (or how Div. 30's, past President, John Mohl hilariously refers to all Bachelor degrees, as the Degrees of being "Super Single" in the 2019 Psychology Talk Podcast).

We were a class of 40 students. The professor (who also taught psychotherapy) instructed, "Everyone close your eyes". He gave a description of the most exquisite detailing on a bold, mega-ram, red truck. We were then told, "everyone who can see the image of that truck, very clearly in your mind, raise your hands. Now open your eyes & look around". I was shocked, there were only 6 of us. The process was repeated, 67% only saw a vague image of the truck & 1/6 claimed to only see black, with zero visual imagery. He exclaimed, "Congratulations, all of you just experienced all that there is to know about hypnosis". I thought, "well that sucks!" dissolving any curiosity I might have had further about hypnosis. Through that class, I learned my most preferred method to communicate, using visual imagery was the least effective for being understood.

Pre-Grad School activity**My First Thesis Research, Publication**

During my HBA year, I was secure upon graduation that I had a high-paying, Socio-Environmental Assessment, Federal position all lined-up that was backed by an Official, "Letter-Of-Offer". And so, I thoroughly enjoyed my undergraduate, Honours year and deliberately over-reached the prerequisites to attempt a MA/Phd level thesis; one that every graduate student had already turned down, for being too difficult.

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The topic was on the economic cost-benefit analysis of combat in Game Theory; a method to predict evolutionary, survival tactics in behavioral psychology. I analyzed over 52,000 subject's data for 3,204 major league baseball players, tracked over 14 decades, from 1876-1990. My thesis was published in the Journal of Comparative Psychology (June, Vol 110 (2), 164-169), on "The Evolutionary Stable strategy (ESS) of Handedness in Major League baseball".

During this same HBA year, I was the only one who would step-in & step-up to instruct Psychology courses for profs who had emergencies; even if it was a midnight phone call, for an early morning class, (after professors would go through a list of all graduate students, who declined). I just happened to keep Timothy Leary's "Wheels of Emotion" as my secret-research, back-pocket, topic. (I envisioned Timothy Leary, deriving his wheel from the 5,000 to 10,000 year old, environmental sacred circles, & ancestral spiritual spheres of Native medicine wheel teachings). I learned later, through the grapevine, that students by the dozens, gave feedback to several professors, crediting me as their #1 determining influencer, to officially choose careers in Clinical Psychology, based upon my ad hoc, lectures.

How I wound up in Grad School

It was while I was volunteer-coaching my HBA colleagues to help them prepare for their GRE exams with their aspirations to be accepted into Graduate Clinical psychology programs. I was cajoled that I might as well take the exam & apply too (& so I did) even though "being a psychologist" was not at all, on my radar as a career path.

Disaster struck. A right-wing government, led by then Prime Minister, Brian Mulroney had made a mid-afternoon, announcement, (broadcast as Breaking News on all University TV screens). A massive, federal restructuring was immediately, in effect that included a sudden layoff of 130,000 Federal, Public Service, employees.

Within that same hour, (during advanced statistics class) I did not have time yet, to process how I no longer had a career in-waiting or that my "Letter-of-Offer" was worthless. An ominous, BANG!, BANG! BANG! rapped on the door. It was representatives from the External Advisory, Review Board Committee with an announcement. They selected just one student who clearly stood out, ahead of mainstream applicants for Psychology Graduate school. It was ME!!!

Indirect Hypnosis Exposure #4

My 4th story for how I was exposed to Hypnosis once again was in 1993 & continues after the entire Faculty of the Clinical Psychology department of Lakehead University, played a "hazing-prank" on me. It was their 'gift' for my being the 1st person chosen, to attend Grad School for the coming Fall. I was gifted with a plane ticket & address where to show up. The only clue I was given as to where I was going was, "This will be, what the rest of your life is going to be like". Off I went from my small town, to venture into the big city of Toronto.

I was in culture shock to see so many people in one place. I was handed a catalogue at the registration desk & was mortified when she demanded I supply a list of workshops I would enroll-in for each hour, over the next 5 days before they closed in 20 minutes; when I still had no idea where I was.

I plunked myself down, direct center, in rows of empty tables & openly cried, silent tears. I was stuck. Speed-flipping through pages of a program-catalogue, all I could see were numbered codes that meant nothing to me. At that moment, a mysterious, tall, dark stranger came over to me & asked, "is there anything that I can do to help?" I glumly asserted, "Not unless you can perform a Miracle!"

I watched, as he cautiously & very slowly, seated himself, beside me. It was that precise moment I found out from a mysterious stranger that I was attending an "American" psychology convention of all bizarre things, being held in Canada.

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It turned out, all that was being asked of me at the Registration Desk was I was supposed to report the closest thing to my interest in Environmental Psychology, which was "Division 34, Environmental population" (never heard of it before). The stranger kindly explained, circling in my catalogue, where & how, I would find those environmental psychology presentations. He observed how all my Div 34's were happening at the exact same time as his Division 30 "Hypnosis" presentations (except for one on the development of Toronto's urban, architectural environment). And that, was how I found out "Hypnosis" was actually 'a thing' to specialize in.

The uplift of massive stress was so intense & heartfelt mitigated, it became an energy transmuting, catalyst for what happened next. I thanked the mysterious stranger for his "miracle", who turned out to be, "Ian Wickramasekera". I explained I felt an incredible pull, to immediately, run next door, to attend the Major Series, Blue Jays, baseball game, to celebrate. When he noted, it was sold-out, I exclaimed, "nothing is ever sold-out"!

The transmutation of energy I moved along, for the next person's Miracle

Inside the Blue Jays stadium, 40,000 people were synchronized in a toxic, group trance. The crowd was ruthlessly BOOing one man in an amplified, force field of negative energy. "Holy, I thought, whoever he is, sure has more stress than I was just experiencing, only minutes prior".

The deeply humiliated man began to climb upstairs to depart, just as I was descending the empty concrete staircase, to find my seat. We locked eyes, as he lifted his head to pass. It was the right wing, Prime Minister of Canada, Brian Mulroney!!! Seizing the moment, I self-introduced and directly told him, "You might be interested to know, even though I am politically, left-wing; the only reason I am here right now, is to attend a Convention next door, pre-Grad school, to now become a psychologist because you cancelled my career as a Federal Environmental Assessment Officer. Lemonade can always be made from lemons"!

His face magically lit up & I could see the burden uplift off his shoulders. His body began shaking as he shook my hand with "tears of joy" & exclaimed, "Thank you SOOO MUCH, Charlotte. You just gave me the 'Miracle' that I needed"!!! The PM turned around, head-up, shoulders-back & he marched right back to his seat. All 40,000 pairs of eyeballs were now focused upon me & the entire stadium became so quiet you could hear a pin drop, as I remained standing on the stairs. In that moment, I savoured the resonating, power surge that channeled out from my body. I felt exactly how a transistor, semi-conductor becomes a catalyst to amplify energy; only this alchemy of energy that I moved forward, was derived from my encounter of being assisted (from my only major, problem in life) from the mysterious, hypnosis gentlemen, Ian Wickramasekera.

Masters Thesis published

During my Masters program, Graduate Year at L.U. I was the first person to assess environmental, public perceptions, using the psychophysics of "vision" as the dependent variable for an objective measure of landscape aesthetics (previously considered to only be a subjective measure of perception). My external advisory committee/collaboration was with a prof from U of Illinois, Dept. of Landscape Architecture, and Mike Wesner, Phd from U of Chicago. I got offered a medal for innovations in Northern studies research. I was sought out by The United Nations to publish in their scientific journal, in 6 languages on my research, Measuring Public Perceptions of forest Industry operations (UNASYLVA, No. 213 Food and Agriculture Organization of the United Nations).

I accepted a career offer (departing from NAHO) with the Canadian Forest Service of Natural Resources Canada (NRCAN) as an Environmental Psychologist and International Marketing Analyst. I conducted behavioral profiles for all global, environmental groups. I was required to evaluate the trade patterns of 8 countries in Europe & the U.S. to ensure no trade wars were emerging that would impede our sales of raw exported timber.

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I tracked all activity that potentially, could become campaigns objecting to our country's main practice of clear-cut logging. I disliked those 15 years of that career; except for one task: While at NRCan, I was appointed as Global Ambassador & Conflict Resolution Mediator to represent Indigenous Peoples tribes from 140 countries, including for the United Nations Indigenous Peoples forum & the XII World Forestry Congress held for 8 days in Quebec City on the theme "Forests Source of Life". As a delegate, my research was then published in the Federal archives of Congress Proceedings (See Figs. 2, 3).



Figs. 2, 3, Global Ambassador to 140 Indigenous Countries at the UN Indigenous Peoples Forum & the XII World Forestry Congress over 8 days & delegate presenting on theme "Forests Source of Life"

After my experience of standing up for global, Indigenous inequities, I was sought after to be a Union activist by the leadership within The Professional Institute of Public Services Canada, first as a steward, then member of several, executive committees and now, I am Chair of the Human Rights and Diversity Committee in conceptualizing the 1st Indigenous Caucus, to combat systemic racism in both the Union, workplace and community environments.

CHAIR of Env. Psych Section of Canadian Psychological Association

I won an election position (stretching 4 years) as CHAIR of the Environmental Psychology Section of The Canadian Psychological Association (See Fig. 4). I ran on a platform to demonstrate how to cultivate resilience to the most catastrophic, environmental conditions.

For example, I profiled Peter Duinker (Dean of Dalhousie U) to demonstrate how to recover from catastrophic hurricanes that destroy entire communities, such as how Hurricane Juan decimated the Halifax harbor.



Fig. 4. Election Photo, as Chair of Canadian Psychological Association (CPA), Environmental Psychology Section (2010-14)

I exposed the environmental injustice of Big Oil in Sarnia's chemical valley through the eco-justice resolve of First Nations communities to fight, because I believe children have a right to health and to not be exposed to carcinogenic, neurotoxins, such as benzene in their air and water. It was through Indigenous Elder, Ada Lockridge (of Aamjiwnaang First Nation) and Manuel Riemer, PhD, Director of Laurier U, Community Psychologist.

I predicted the impending failure of Canada's infrastructure in oil profits without a paradigm shift from destructive fossil fuels into renewable future energy in wind, solar, biomass by Ken Church (a NRCan chemical engineer specializing on environmental impacts.)

In my final 4th year as Chair, my focus was on community infrastructure to develop Canada's poorest neighbourhoods because I stand for children having equal rights to be free from gang activity & to integrate with the same features received by children in privileged neighbourhoods. The solution was achieved by world-renown, international landscape architect and urban planner from UBC, Larry Beasley.

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My personal Life

Something unusual you would never know just by looking at me in person; I survived 3 near-fatal, death-defying accidents involving trucks between the ages of 28 to 48 that each resulted in my faculties wiped-out with head, spinal cord and organic injuries. I concur with Psychiatrist Scott Peck (in *The Road Less Traveled*) that he is not convinced surviving fatal accidents is some quirky twist of fate, but an "unconscious synchronicity of when our mind tunes into its riches". And so, for the most-part, my life is mostly in self-imposed, solitary isolation, to self-heal & to manage, chronic pain as another full-time job. Over a decade ago, I designed my architectural, landscape environment as an ideal, social isolation oasis with boulders, logs and waterfalls. (And so, the only thing this pandemic interrupted from me, was my access to the Gym).

As an artist, I contributed to the "Walking With Our Sisters", Memorial Art gallery installation, that travelled to 13 gallery ceremonies across Canada over 4 years. My Indigenous-beaded, vamps (among 2,000 other, moccasin tops) represents all of us, walking together with the spirits of all the thousands of Missing and Murdered Indigenous women (and children) (MMIWC). My original, beaded design carries a psychology, billiards metaphor to represent a Truth and Reconciliation program I developed, towards healing Indigenous youth to build emotional resilience after suffering severest of generational trauma abuses, such as at residential schools (See Fig's 5, 6).

I was a delegate to the first ever, Canadian Labour Congress & PIPSC Union, "Indigenous Lobby day" that was held in the Gothic Revival, Parliament Hill buildings. We were trained as lobbyists to directly influence the Senate, politicians & MP's in the House of Commons to make political changes to advance Indigenous inequities in Health, Justice, Education & community infrastructures.

As a result, my recommendations derived from that experience were published in the Indigenous issue of [Canadian Psychological Association CPA magazine, Psynopsis](#).

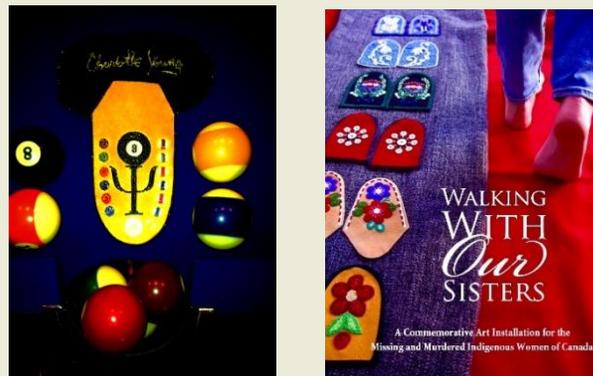


Fig 5, 6 Indigenous beaded moccasin vamps I produced in a travelling Museum tour as a billiards metaphor for my walking with spirits of Missing and Murdered Indigenous women and children & my T&R plan of action for restitution

Thousands of mass graves will continue to be found in Canada's over 140 residential school, burial grounds that were penitentiaries to over 150,000 children ages 4-16. It was all done for colonial access to Indigenous natural resources of old growth trees, oil, silver, water and land, so that Canada could prosper, at their expense. With the last school that did not close until 1996, I went to the same, day school with many of these kids. For Canada's National Orange Shirt memorial within PIPSC public service institute, I designed the following Indigenous Residential School, embroidered crest (to not require words to depict the terror). My symbol for missing and murdered Indigenous children is inspired from the sacred Indigenous cross, in ancient petroglyphs thousands of years before Christianity began. The male & female children were drawn according to how First Nations, North American Indian drew genders in caves. The winding, "red road" of blood symbolizes the right path of life for tens of thousands of inter-generations of survivors, who will continue to have difficult lives ahead to achieve self-empowerment until Canada fulfills all obligations to Truth and Reconciliation (Fig. 7).

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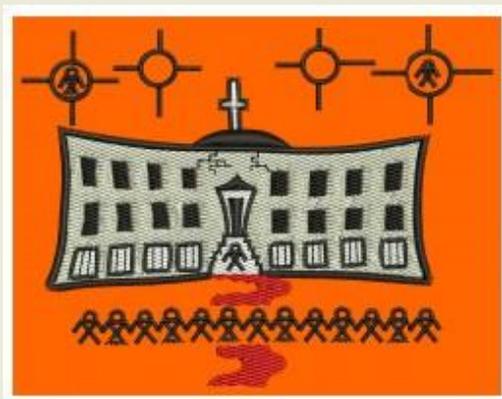


Fig. 7

Recent Hypnosis Activities

I participated as an observer in the last 3, non-virtual, pre-Pandemic, APA Hypnosis conventions (Toronto, Denver, Chicago), of Division 30's, presentations, lectures and symposiums where I learned from hypnotists such as I. Wickramasekera; S. Krippner; I. Kirsh,; E. Willmarth, S. Freedman, D. Moss.

I presented my hypnosis research as a delegate at the 29th International Congress of Applied Psychology entitled, "The Mesmerizing Art of Story-telling, when you want Mass Market Appeal". It was about how narratives will strategically, always override logical arguments, when you want to persuade public opinion. I referenced how ancient, Indigenous, hypnosis-like cultural practices, preceded psychology theorists, to empathically transform the individual, by using visualization with imagery, creativity and power words for capturing attention.

While attending a Humanistic Health convention in Toronto, Canada, Division 30 President Elect, (& host of the Psychology Talk Podcast) Scott Hoye, Phd recommended I attend one convention, solely devoted to Hypnosis.

With perfect timing, the 2018 "XXI World Congress of Medical and Clinical Hypnosis" arrived in Montreal Canada, only a 2-hour drive away & a 2-in-1, "Intensive Hypnosis Training" all for the same price. I received 3 Hypnosis certifications during pre-conference, workshop instruction by global Hypnotists (such as Julie Linden U.S.; Fathi Mehdi, Iran; Katlin Varga,

Hungary; Enayatollah Shaidi, Iran; Camillo Loriedo, Italy; Woltemade Hartman, S. Africa; Jeffrey Zeig, U.S.; Leora Kuttner, Can.; Michael Yapko, U.S.; The Spiegals, U.S.; and Don Moss, U.S

Ph.D.: Last Future Goal

Lastly, I have one remaining life goal. Am the only Psychologist who developed a "billiards / pool metaphor" as a bio-feedback teaching tool; for mostly Indigenous youth, to cultivate innate, life skills in emotional resilience.

My program embodies meditation, hypnosis, & 6 neuro-cognitive processes that align with Hookes Law of elasticity (from 1660's physics engineering). The system is a transpersonal cultivation of self-determination tactics, to thrive in every challenging, environmental scenario. By working through a series 12 obstacle course, interactive challenges, one enhances their innate resources to spring forward, from the dichotomies that divide the attainment of hope-to-happiness. While the pilot study (with myself as test-subject) was an overwhelming success; no other existing psychology program, specifically reaches out to the unmet needs of Indigenous youth and to combat Vets who fall between the cracks.

I wish to take my research to a higher position of authority, for further verification in a PhD level thesis program (organized through any country that doesn't incur bankruptcy, as an academia price to assist humanity). And that is the only overwhelming, sticking-point, problem that I have yet to resolve in my life, today.

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