Hypnosis for Inner Conflict Resolution Introducing Parts Therapy

Roy Hunter MS FAPHP

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Introducing Parts Therapy

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Introduction

How often do people experience inner conflicts that inhibit successful attainment of important goals? Parts therapy may provide the answer.

Counselors and hypnotherapists often use proven techniques to help their clients change undesired habits and/or to achieve desired personal and professional goals. Yet, in spite of the best efforts of both client and therapist, unresolved inner conflicts often inhibit clients from attaining their ideal empowerment. Often smokers, after rejecting both direct and indirect suggestions to quit, can finally attain inner resolution through parts therapy. Likewise, numerous clients attempting to control eating habits often gain important insight about themselves after experiencing hypnotic inner-conflict resolution. Other inner conflicts can also be resolved even after clients fail to respond to common hypnotic techniques.

Increasing numbers of therapists around the world are discovering the benefits of parts therapy and its variations to help clients get past personal barriers, and it continues to grow in popularity. Other therapists employing variations of parts therapy often use different names, such as *ego-state therapy*, *submodalities*, *subpersonalities*, *voice dialogue*. Regardless of the label, this author believes this complex technique to be the most beneficial hypnotic technique available for helping clients resolve inner conflicts.

The late Charles Tebbetts, a hypnotherapy instructor who taught thousands of students during his life, promoted and taught hypnotic inner-conflict resolution as *parts therapy*. Originally borrowing it from Paul Federn, this twentieth-century hypnosis pioneer evolved parts therapy into a client-centered approach that can be learned by almost any experienced hypnotherapist competently trained in the basic concepts of facilitating subconscious release and relearning. Blazing new trails inside a relatively new hypnotherapy profession that American psychologists labeled "lay hypnotism",

Tebbetts was inducted into the International Hypnosis Hall of Fame for Lifetime Achievement. His work with parts therapy played a significant role in that honor.

Referred to by many hypnotists as a "master teacher", Charles Tebbetts wrote Miracles on Demand, a book about parts therapy and other hypnotic techniques, which went out of print after his death in 1992. Before he died, he asked me to continue his work; and one of the first tasks was to put my mentor's work back into the printed page. Although famous for his work with parts therapy, Charlie taught a number of other hypnotic techniques. After I had added my own professional updates, the total work became a two-volume text: The Art of Hypnosis: Mastering Basic Techniques (2000), 3rd edition (Kendall/Hunt Publishing), and The Art of Hypnotherapy (2000), 2nd edition (Kendall/Hunt Publishing). When I first wrote The Art of Hypnotherapy, I devoted one lengthy chapter to parts therapy. This effective hypnotic technique was sprinkled into several other chapters, with considerable additional information packed into the rest of the text. Other books are available describing parts therapy or its variations, but little is available originating in the hypnotherapy profession that is dedicated to parts therapy.

Over the years, I've enjoyed the privilege of teaching parts therapy workshops at various hypnosis conventions and hypnosis schools on both sides of the ocean. Students thirsty for knowledge frequently ask me where they can find additional information, because they need more than what my older text provides regarding this complex technique. Most of the additional information available regarding parts therapy and its variations is written for psychotherapists and other healthcare professionals who might use hypnotherapy as an adjunct to their practice, with minimal information available for those who specialize in the use of hypnosis as their primary profession. This book is intended to help fill that gap.

My primary purpose in devoting an entire book to parts therapy is to provide a learning tool for both the teacher and student alike. I intend this to be a "how to" guidebook, containing step-by-step instructions for facilitating competent, client-centered parts therapy from start to finish. I'll share techniques to help the properly trained hypnotist know when to consider parts therapy for a client, as well as how to obtain good results.

While other therapists may take their clients down different paths, my own professional experience validates the benefit of following the steps described in this book. If you are a therapist using ego states therapy, voice dialogue, or any other variation of parts therapy, then consider what I present only if it adds to your proven program. I will not debate with successful results. However, if you are not already trained in a successful variation of parts therapy, my strong recommendation is that you closely follow the discipline presented in the chapters that follow.

This book guides you through effective steps in sequence, with scripts (where appropriate), and also reveals potential pitfalls in order to minimize the risk of falling into one. Occasionally, we may run into detours along the way, and I'll share ideas that have helped me get past the detours over the years. Additionally, the discipline I present here assumes that parts therapy is combined with hypnosis in order to maximize the probability of longer-lasting beneficial results. Rather than simply employing parts therapy with little or no hypnotic depth, my students facilitate *hypnotic inner-conflict resolution*. This requires deeper states of hypnosis, which increases the probability of long-term success.

Hypnosis instructors need this book if they plan to teach parts therapy, even if they only recommend this book to their students as reference. Additionally, because I update my own work, the reader who owns a copy of either of the first two editions of *The Art of Hypnotherapy* will discover some additional changes to my older instructions. I consider one of these changes to be very important, and explain why in Chapter 2.

In conformance with my established writing style, I frequently use first-person format. Also, I use simple language for easy reading. While the discipline for effective parts therapy is complex, I believe that easy reading makes the learning process easier. Client examples included will be changed sufficiently in details in order to protect client confidentiality, except where permission was given. My professional opinions stated in these chapters resulted from insight provided by both my own experience and that of others.

This book is dedicated to all competent professionals who wish to master client-centered parts therapy in order to help clients resolve inner conflicts.

Chapter 5 **The First Four Steps**

After properly preparing my client for parts therapy and verifying sufficient hypnotic depth, I move right on into the first four steps. They appear together in one chapter because a skilled therapist may flow through the first three smoothly enough to blend them together almost as one step. The fourth step follows immediately after the part emerges and responds. My students learn the steps by examining each one separately in order to understand what to say, and why.

Although I include scripts where appropriate, you may paraphrase them to your comfort. You should still obtain results with most of your clients if you follow the steps in accordance with the concepts presented in these pages. In addition to the scripts, a sample session is included to further demonstrate the steps. The sample session appears in sans-serif type, and the scripts appear in bold serif type. Rather than asking my students to memorize scripts for the eleven steps, I encourage them to understand the concepts behind each step of the parts therapy process.

5.1 The risk of imagery in parts therapy

Some therapists who enjoy guided imagery and Ericksonian techniques may notice the absence of imagery in most of my scripts. Numerous therapists take the client to an imaginary room with a conference table. Several years ago, I personally experienced parts therapy with a therapist leading me into an imaginary conference room. While that imaginary place was fine for me, similar imagery could push buttons with a client who heard bad news (or got fired) while sitting in a conference room.

Some therapists guide a client to a meadow or some other imaginary place for calling out the parts. Programmed imagery that the

resolve their dispute. Linda is like the motivating part and Roger represents the conflicting part. Obviously Linda will probably have a strong desire to come to the mediation table, because she has already demonstrated her motivation to make a change; but what about Roger? He continues working, business as usual, either ignoring Linda or causing her more stress because he believes his way is the right way.

If Linda spills her negative opinions about Roger or his department, how might Roger react if I show any indication of taking Linda's side? My best chance of persuading Roger to talk is to thank him for agreeing to allow me to mediate, compliment him, and make him feel that he may safely communicate his opinions. This metaphor holds true for parts therapy, because we obtain best results by treating each part with the same courtesy and respect as we might use with a separate person.

We start building rapport by complimenting the part and by providing some assurance that it will not be subjected to criticism by the therapist. This especially applies to the conflicting part, because, if it believes the therapist will take sides with the motivating part, the conflicting part might refuse to respond. We must remain neutral throughout the entire parts therapy process, acting like an objective mediator.

By gaining rapport quickly, we increase the chances of effective communication with all parts involved. Conversely, if we sabotage rapport, building it back is much more difficult than gaining and maintaining good rapport from the start. One of my former students lost rapport with a part during parts therapy, and it took him two additional sessions to regain it and get the therapy back on track. (He provided the extra sessions at no charge to compensate her for his mistake.)

I'll return to the metaphor. In my classes, I demonstrate Step 2 by saying, "Roger, thank you for coming to this discussion. You are doing important work for Company XYZ, and probably have good reasons for doing what you are doing. Linda will listen without interrupting, and I will listen ..." The participant in my workshop posing as Roger almost always agrees that he would communicate when asked in this manner. Let's consider an unwise alternative.

His reaction might be very different if I say, "Linda presented a good argument. Why don't you listen to her and apologize for your actions?" When I use this example for the metaphor in workshops, I again ask the student acting in Roger's role what happens to rapport. The response confirms that all rapport is gone, and Roger either refuses to talk or leaves the room.

Now let's get back to John, and notice how building rapport follows immediately after identifying the conflicting part in the first step.

Therapist: There is a part of you that makes you snack frequently after dinner, and it is doing a very good job. I'm talking to that part of John that causes him to snack frequently. You are an important part of John. There is probably a good reason for what you're doing ... and you are doing a good job.

Gaining and maintaining rapport is easier when calling out the motivating part; but we still should watch our words closely. If we already called out the conflicting part and it presented a good case to justify its actions, the motivating part might need some persuading to emerge. I'll provide more suggestions regarding rapport with calling out subsequent parts when I cover Step 6 in a later chapter.

5.4 Step 3: Call out the part

Once we identify and compliment that part, it's time to call it out.

Therapist: John is willing to listen, and I am willing to listen. I'm sure that you are doing what you think is right, but another part of John is unhappy, and feels that better communication can enlighten both of you with a few ideas that could make John much happier. If you would like to gain more information and communicate, John is willing to listen to whatever you have to say. When you are willing to communicate, please let us know by saying the words "I am here" or by moving the yes finger.

Charles Tebbetts simply said, "If it's available and wishes to talk, say, 'I am here.' " During my first ten years of practice, about 25 percent of my clients failed to respond when I attempted parts therapy. Although we could speculate a number of different reasons to

Chapter 11 Sample Sessions

Students and therapists alike are interested in knowing how parts therapy has successfully helped others to resolve inner conflicts.

When Charles Tebbetts wrote *Miracles on Demand*, his detailed discussion of case histories was one of the book's strongest selling points. The words spoken during sessions were preserved almost verbatim in printed form in his book. Some of his case summaries appear in a chapter in my book, *The Art of Hypnotherapy*, as well as mine, and some facilitated by my students. One of Charlie's best sessions was detailed in an entire chapter of my text, with that client's written permission.

Today, in the absence of written permission from clients, I am far more cautious regarding any details of sessions that could reveal a client's identity. (Laws are stricter now in the USA than they were before the dawn of the new millennium.) In order to illustrate effective parts therapy, I have interwoven composites of actual conversations heard during sessions, both in my earlier example of John and in the sample session of the smoker in this chapter. Most of the statements made by parts are phrases that I've heard numerous times from clients over the years. Names are also fictitious to further maintain anonymity. The case summaries that appear in my book are taken either from my demonstrations at workshops, or with students in my classes over the years, although I changed their names and occupations (except where otherwise noted). Most part names are accurate.

11.1 The smoker

Now let's explore a sample parts therapy session for a smoker trying to quit. This sample session has a few surprises and detours, based on a composite of several similar cases over the years. Again, **Therapist:** What would you like Smokey to do for you? And, if Smokey agrees, what are you willing to do for Smokey?

Healthy: Smokey needs to just get over this smoking nonsense, or get lost.

Therapist: Is there anything else you wish to say to Smokey at this time?

Healthy: No, because I doubt if Smokey would listen.

Therapist: Would you like to ask Smokey to take on a new job?

Healthy: No, because it would be fruitless. Smokey is stubborn.

Therapist: Would you listen again while I talk to Smokey?

Healthy: Yes, but I doubt that it will do any good.

Therapist: Smokey, how do you respond to Healthy?

Smokey: I don't trust Healthy, and I don't like her.

Therapist: What would it take for Healthy to earn your trust?

Smokey: She needs to back off on this nonsmoking nonsense, and that won't happen. Nobody has the right to tell Donna not to smoke. If Donna had faith the size of a grain of a mustard seed, she could smoke without getting sick—but *no*, she has to buy into the bias of people who feel they have a right to tell us how to live our lives. Healthy needs to grow up and quit telling Donna what to do.

Therapist: How can we resolve the conflict between you and Healthy?

Smokey: There is *no* way that I will quit smoking, so the question is irrelevant. If Healthy keeps on pushing me, I'll make Donna smoke three packs a day.

Therapist: Would you at least hear what Healthy has to say in response?

Smokey: Yes, but I doubt that it will do any good.

Therapist: Healthy, how do you respond to Smokey?

Healthy: Smokey is a rebellious idiot. Tell her to get lost before she destroys Donna's good health. Smokey does not belong here.

Therapist: Is there another part that can offer a solution, or give some words of wisdom? If so, please come forward and indicate your willingness by either moving the "yes" finger or saying, "I am here."

Third part: I am here.

Therapist: Thank you for emerging. What name or title should I call you?

Third part: Call me Serena.

Therapist: Hi, Serena. What job do you do for Donna?

Serena: I am Donna's Guardian Angel.

Therapist: Thank you again for being here. Have you heard what both Smokey and Healthy have said today?

Serena: Yes.

Therapist: What words of wisdom do you have to offer to help us find resolution?

Serena: Well, the impasse is because neither part has accepted the possibility of compromise. Donna can smoke five or six cigarettes daily, smoking only when she is consciously aware of each and every time she lights up. Smoking occasionally, in moderation, will be far less risky to her health than smoking heavily.

Therapist: Thank you. Healthy, how do you respond to Serena?

Healthy: I didn't think it was possible to smoke occasionally. Others have told Donna that you either do not smoke, or you are out of control. Is it really possible to smoke only a few cigarettes daily?

Therapist: Serena says that it is possible. Can you allow this?

Healthy: Yes, as long as Donna doesn't go out of control.

Therapist: Is there anything you would like to say to Serena?

"This book is really a 'must read' for any serious student of parts therapy, or for any hypnotherapist who wants to move beyond direct suggestion hypnosis. It is just what our profession needs at this time and I will recommend it to all of my new students as well as the many graduated from our school."

Calvin D. Banyan MA, CEO Banyan Hypnosis Center for Training & Services Inc, NGH Board Certified Hypnotherapist & Certified Instructor FNGH

"The main tasks of the hypnotist are to remove the subjects' misconceptions and negative attitudes, establish rapport in order to elicit their maximum cooperation, and release and guide their capabilities for resolving inner conflicts and for reintegrating the various parts of their various ego states. The importance of these tasks is commendably emphasized in Mr Hunter's incisive and highly readable presentation. This text should have a long and fruitful life."

Don E. Gibbons PhD, The New Center for Counseling and Psychotherapy

"Since 1989 parts therapy has been one of my primary tools in helping clients facilitate permanent change. I couldn't do effective work without it. *Hypnosis for Inner Conflict Resolution* is an excellent resource for anyone wanting to learn this extremely valuable technique. I highly recommend it."

Katherine Zimmerman CHT, Author of Hypnosis in Action

"This book is the single finest work for performing parts therapy I have ever seen. Every therapist must have this book because it is a step-by-step guide to one of the more complicated and important elements of hypnotherapy. Replete with examples and contingency plans, Roy Hunter has covered every base. The book makes parts therapy understandable to the beginner and offers numerous new insights to the skilled practitioner. I wish I would have written it!"

Kevin Hogan PsyD, Author of *The New Hypnotherapy Handbook* and *The Science of Influence*

"There has been little written regarding the important subject of client-centered parts therapy, as pioneered by Charles Tebbetts. Well-known author Roy Hunter would make his late mentor proud with *Hypnosis for Inner Conflict Resolution*. This unique and easy to read book is a significant addition to the field of hypnotherapy."

Randal Churchill, Director, Hypnotherapy Training Institute, Author of *Regression Hypnotherapy* and *Become the Dream*



