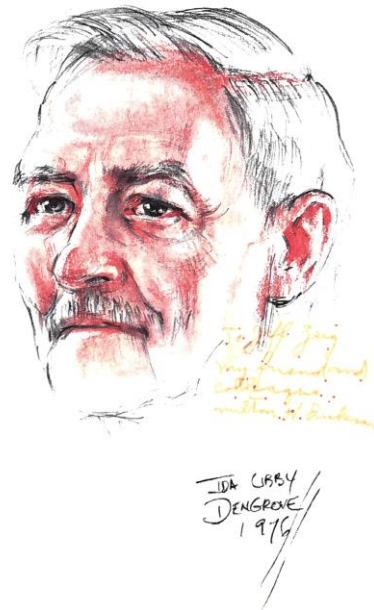


# Dedicated to:



# With great appreciation.

**13<sup>th</sup> International Congress on Ericksonian Approaches  
to Hypnosis and Psychotherapy  
December 12-15, 2019. Phoenix, AZ**

**Guided Imagery with Hypnosis for Brief Psychotherapy  
Friday December 13. 2:00-4:00 PM**

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## Description

**Guided imagery (GI) was used initially to help people with life-challenging diseases, yet it is also highly applicable to psychotherapy. A brief history of GI will be presented. The presenter has used it successfully in brief therapy for almost all of his recent clients. Hypnosis is an essential part of GI sessions. The requirements for using GI will be described. It is necessary to tailor the session to the client's individual background and needs, and this will be discussed. The attendees will have the opportunity experience this via a group guided imagery session. And, the session will end with a GI healing meditation.**

# **Educational Objectives**

- 1. Describe the three pieces of information needed for a guided imagery session.**
- 2. Describe the necessity of individually tailoring these pieces of information to the individual client.**
- 3. Describe the role of hypnosis in a guided imagery session.**





# Four Guided Imagery Pioneers\*

1. **Jeanne Achterberg**: She was a physiologist who did important research on using guided imagery for its beneficial effects on both physical and mental issues.
2. **Carl and Stephanie Simonton**: Carl is an oncologist and Stephanie is a psychologist. They teamed up to develop the use of guided imagery with cancer patients.
3. **David Spiegel**: He is a psychiatrist who used group support sessions to help patients cope with life-challenging diseases like cancer. His pioneering study was with women who had 4<sup>th</sup> stage breast cancer. His group's 2007 study reported: "We didn't confirm earlier observations that group psychotherapy extends overall survival for women with metastatic breast cancer, but we did again show a positive effect on mood and pain," said Spiegel. "I still very much believe this type of therapy is crucial to cancer care."

\* See list of references.

## **Four Guided Imagery Pioneers - continued**

**4. Belleruth Naparstek: She has produced and continues to sell more guided imagery recordings on endless subjects than anyone. Her 1994 book is still a major reference book in this field. Her web site ([www. healthjourneys.com](http://www.healthjourneys.com)) contains many resources in guided imagery. For example, there are 13 recordings each for cancer and mental & emotional issues!**







# **QUESTIONS – For Healing and Psychotherapy (Based on Bernie Siegel's Work)**

**Why me?**

**Why now?**

**Why this particular disease or concern or trouble?**

**Why am I getting better or worse at this time?**

## **Rabbi Hillel's Questions and Wisdom\***

**If I am not for myself, who will be?**

**If I am only for myself, what am I?**

**If not now, when?**

**"I get up. I walk. I fall down. Meanwhile, I keep dancing."**

**\* Just because I like these statements!**

**At the beginning of a session I like to suggest  
to a client that he/she just  
let Mary Goulding's opening question  
kind of just "Rattle Around"  
in the back of their mind  
during the session.**

**"What are you willing to change today?"**





# COMPONENTS OF A GUIDED IMAGERY SESSION

## 1. Duration of Session:

- a. Achterberg's research: relaxation =  $10 \pm 2$  min
- b. Rossi's research on ultradian rhythms:  $20 \pm 17$  min  
for relaxation or meditation session
- c. Result = relaxation portion of  $10 \pm 2$  min  
imagery portion of  $10 \pm 2$  min  
15 to 20 min optimum  
(best = 5-7 relax + 8-10 imagery)
- d. Re-entry and affirmations about 2 min
- e. Can shorten relaxation time by incorporating  
into main session

- 2. Choosing an Image: highly individual.  
Examples: Healing Light; Healing Hands;  
Healing Presence (God, person);  
Specific Intervention or Modality;  
Metaphoric or Realistic.**
- 3. Choosing a safe healing place, uniquely theirs.**
- 4. Practice in face-to-face session; then prepare specific “designer” CD.**



# Guided Imagery Basically Needs 3 Pieces of Information

1. Relaxation – client chooses preferred method
2. Safe Haven – client chooses a place (real or imaginary) where they feel safe and secure, and describes this place.
3. Guided Imagery Healing Modality – client chooses this (can be realistic or metaphoric).

## Parts of Guided Imagery Session

1. Relaxation – Generally with hypnotic language. [3-5 minutes. Caution that occasionally stray thoughts may wander through mind.]
2. Safe Haven – “Within your mind now, just drift off to your own special safe place (haven).” [Add their details about this place.]
3. Healing Modality – Deliver the healing/changing and message/action that client has chosen. [10-15 minutes]
4. Continuity of healing/changing work – [This will continue within you and be available when you need it and as you need it.]
5. Re-entry – Thank client for their trust and their attention.

## **Guided Imagery Factors**

**Most important that client makes these choices.**

- 1. Relaxation Method – client chooses. RB generally uses paying attention to breathing.**
- 2. Safe Haven – client chooses, but you can suggest possibilities. Obtain details.**
- 3. Healing Modality - client chooses and describes. You can suggest possibilities.**

**RB occasionally asks permission to hold a client's hand during some part of 3 above so he can say,**

**“ Somehow, somehow, from me and through me the healing and changing will occur.”**

**(Useful to let the client pick a small smooth stone to keep as an anchor for what occurred during the session.)**





**Group guided imagery session on theme of participants' choice (healing hands, healing light, healing presence).**

**For groups the theme needs to be *generic* and not specific.**

**For an individual the healing “image” is *their* individual and specific choice.**

## **Discussion of FIVE PARTS OF PREPARATION FOR SURGERY (as Time Permits)**

- 1. Induction and relaxation**
- 2. Pre-operation experience**
- 3. During the operation**
- 4. Post-operation recovery period**
- 5. Returning home and to normal functioning**



## **Rossi's Similar Mirroring/Healing Hands 4-Step Model**

- 1. Establish that the client is ready to work on a particular concern\*.**
- 2. Have them explore the relevant parts and history of that concern.**
- 3. Have them consider several realistic solutions about that concern.**
- 4. Have them indicate that they will choose one or more of those solutions as needed.**

**[NOTE: This will be described, and the group led into experiencing this as time permits.]**

**\* Note: RB's clients have concerns, troubles or bothers (rather than "problems").**

# **Closing Group Healing Meditation**

- 1. Relaxation**
- 2. Hold a hand**
- 3. From me and through me:**
  - a. Healing energies**
  - b. Healing knowledge**
  - c. Atom to atom, cell to cell, nerve to nerve**
  - d. Strengthening immune system**
  - e. Hand-to-Hand; Heart-to-Heart; Mind-to-Mind;  
and Spirit-to-Spirit**
- 4. Continuity of this work**
- 5. Re-entry with affirmations**



## References

- Achterberg, J. (1985). *Imagery in healing: shamanism and modern medicine*. Boston: New Science Library.
- Battino, R. (2000). *Guided imagery and other approaches to healing*. Carmarthen, UK: Crown House Publishing.
- Battino, R. (2014). Expectation: the essence of very brief therapy. In “Capturing the Moment.” Eds. M.F. Hoyt & M. Talmon. Carmarthen, UK: Crown House Publishing.
- Battino, R. (2015). *When all else fails. Some new and some old tools for doing brief therapy*. Carmarthen, UK: Crown House Publishing.
- Naparstek, B. (1994). *Staying well with guided imagery*. New York Warner Brothers.
- Simonton, O.C., Simonton, S. & Creighton, J. (1980). *Getting well again*. New York: Bantam Books.
- Spiegel, D.: *The effect of peer counseling on quality of life following diagnosis of breast cancer: An observational study* PSYCHO-ONCOLOGY Giese-Davis, J., Bliss-Isberg, C., Carson, K., Star, P., Donaghy, J., Cordova, M. J., Stevens, N., Wittenberg, L., Batten, C., Spiegel, D. 2006; 15 (11): 1014-1022.