Play can be a wonderful vehicle for implementing therapeutic suggestions.

Among older children and adolescents hypnotherapy has been effective in dealing with behavioral problems and delinquency. Clinicians, regrettably, often turn to hypnosis as a last resort. Experience indicates success is greater when the patient acknowledges distress and has personal motivation to change. The fact remains that hypnosis is virtually impossible in cases where the client does not want to be hypnotized. Successful therapy demands patient assent and cooperation.

Hypnotherapy for drug abuse, for example, virtually requires that the client be aware of and concerned with the potential for harm and have an expressed desire for change. Therapists must be aware that teenagers with behavior problems may be struggling for autonomy; therapists need to evaluate and understand the extent of the client s motivation for change, and the cognitive, social, emotional and psychosexual development factors which contribute to attitudes and behaviors.

Your Local Hypnotherapist

Shaun Brookhouse

GCGI, MA, CertEd, ADHP(NC)
DEHP(NC), ECCH, ECP, FNCSAG

Registered Psychotherapist

Richmael House, 25 Edge Lane Chorlton, Manchester, M21 9JH Tel: 0800 8496327

Email: enquiries@hypno-manchester.co.uk
Web:www.hypno-manchester.co.uk

he National Guild of
Hypnotists was founded in 1951
and is the oldest and largest hypnosis
organization of its kind. Professional
membership in the NGH signifies
that an individual possesses
specific qualifications, agrees
to abide by a strict code
of ethics, and will pursue
continuing-education
studies for annual recertification. Medical or psychological
referrals may be required for
certain conditions.

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CHILDREN: THE BEST

This brochure is presented for the information of the general public to discuss the applications of hypnosis available for dealing with such matters as habit control. stress, excessive eating, smoking, fears, motivation, self-confidence, concentration, learning enhancement, insomnia, qual-setting, relationships and other areas which lead to unhappiness, dysfunction or difficulty in achieving personal goals.



Member

CHILDREN: THE BEST SUBJECTS

Multiple Uses of Hypnotherapy



hildren often are marvelous subjects
for hypnosis. Once they have developed
to the level where they have an adequate
attention span they tend to be easily
hypnotizable. This may be due to
the fact that much of early children
is spent in hypnosis, Children play

games that include deep involvement,
which is a form of hypnosis. They include
in fartasies and pretend experiences, which
are forms of hypnosis.

Children are additionally benefited by the fact
that many inhibitions which commonly
a fect adults have not yet developed.
Children also have limited capacities
for critical judgment. Trust and
positive rapport are essential and
bringing out these qualities can be
difficult, especially in cases where a
child is presented by a feared authority
figure. Confidence must be earned.
Apprehensions must be allayed.



Communication must be established.

PPLICABLE UTILIZATIONS

Why would a child need or be
benefited by hypnotherapy? Like
the famous answer to the question,
How do I love thee? let me count

'.' from home, school or other sources),

the ways! Certainly among important
usages must be the early control or elimination
of childish habits bedwetting, nose-picking,
mannerisms and often attitudes. As children grow
older hypnosis can dramatically affect attention problems, learning enhancement,
study procedures, anxieties (whether

self-esteem, motivation, athletic performance, creativity, non-understood grief (or loss or separation) the list is virtually endless.

To a professional it is incredible the amount of psychological damage that can be and is done to children by parents, relatives, siblings, teachers or authority figures. Much of it is well meaning efforts intended to provide direction and motivation, coming from a trusted source who intends no harm.

However, children differ (just as adults db). Some are introverts, some are extroverts; some come from homes that offer praise and encouragement, others come from environments where criticism and lack of recognition are considered appropriate; some come from environments of love, some come from environments of discord and abuse. One of the greatest gifts a child can receive is prolonged contact with an individual (whether teacher, parent, older sibling, coach or counselor) who can and will offer sensitivity, understanding and appreciation of value.

Children respond to comments by authority figures in differing ways. A parent or teacher, on viewing a poor report card, might comment: You are going to be the dumbest kid in the class all your life! The intent might well be to motivate the child to change this detrimental distinction by trying harder. A self-assured child might respond in that manner. Yet an insecure child might well accept the statement literally as a true prognostication and experience a psychological inner flip which locks in place accept ance of the self as unworthy, incapable and domed to fulfill the stated destiny.

The files of psychologists, psychiatrists, psychotherapists and hypnotherapists are filled with cases of adult clients who have sought therapy to get out from under self-deprecating childhood imprints imposed by well-meaning (and often not so well-meaning) guardians.



HE GIFT OF IMAGERY

Young children are not usually aware of the complexities of the mind, or of its fartastic array of powers. They do not comprehend that, what the mind can conceive, the body can achieve. They do not understand the dramatic capabilities of visualization. Yet they have the child s ratural talent for dreaming for picturing achievements of childhood ambitions in their minds. It is this characteristic that the hypnotherapist can use to summount the afflicting problems and free children from bonds which restrict them from achieving their potentials.

Children normally are very visual. They respond beautifully to tales, bedtime stories, and related communications with which they can identify. They are quite narcissistic they like to have a part in a story that is being related and tend to slip into hypnosis easily.

Children in the six or seven age range have little df ficulty. Those in the four to six range, with shorter attention spans, may respond to induction techniques which are less formalized or directive. Preschool ages may combine the worlds of fart asy and reality. Pre-induction data should focus on gathering information about a child s likes and dislikes, fears, imagery experience, and social environment all in a manner in keeping with the child s communication level and oriented toward building rapport.

Being familiar with and participating in the child s play therapy may help develop rapport, revealing the child s interests and imaginative capabilities.