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commentary

A Somewhat Altered Debate about the Hypnotic State

Commentary: On the Centrality of the Concept of an Altered State to Definitions of Hypnosis.

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Sixteen years ago, Wagstaff proposed another sweeping redefinition of hypnosis (Wagstaff, 1998), on which we provided a critical commentary (Woody & Sadler, 1998). Now he is proposing a new definition of hypnosis (Wagstaff, this issue), and we are again providing a critical commentary. It is like déjà vu all over again.

In some ways, Wagstaff's new definition is strikingly different from his earlier one. Indeed, it is surprising that he does not cite our earlier commentary, because in crucial ways he has adopted the position we proposed and abandoned his original position that we critiqued. For example, readers of Wagstaff (this issue) may be surprised to hear that Wagstaff (1998) was extremely critical of those who attempt to define hypnosis as an altered state. Indeed, he argued that they were committing a basic logical error, called a category error. In our critique, we explained why this criticism was itself not logically sound, and commented:

We respectfully reject the implicit reductionism in Wagstaff's characterization of an altered state in hypnosis as a category error. Whatever the strengths and weaknesses of the altered-state notion turn out to be, it is not simply an error of logic to entertain it. (Woody & Sadler, 1998, p. 178)

We are gratified to hear that after sixteen years, Wagstaff has adopted our position on this issue.

In addition, Wagstaff (1998) argued that the empirical evidence about hypnosis, such as neuroimaging, failed to demonstrate that hypnosis evokes a unique brain state, and thus, on empirical grounds (as well as logical ones), hypnosis should not be regarded as an altered state. In response, we pointed out that this was setting the bar impossibly high, in that almost no well-recognized psychological states are associated with a unique brainactivation signature. Further, we commented that Wagstaff (1998)

defines hypnosis as any suggestion that one is "entering a special state . . . we call 'hypnosis'" (Wagstaff, 1998, p. 159), such that "if you can convince people that they have been 'hypnotized' then they have" (p. 161). Wagstaff does not equate the belief that one is hypnotized with an altered state of consciousness: "whether they are actually in or out of, or have been in an 'altered state of consciousness' . . . is an irrelevance" (p. 161). But the belief that one is hypnotized is *itself* an altered state of consciousness—that is, a state of awareness that one clearly did not have prior to hypnosis. (Woody & Sadler, 1998, p. 179)

In other words, we argued that people's belief that they are in a state of hypnosis is sufficient to infer that they are in an altered state. We are gratified to find that Wagstaff has adopted our position on this issue as well.

Despite these changes, in other respects Wagstaff's old and new definitions of hypnosis are essentially the same. Indeed, some of the criticisms we made of Wagstaff (1998) still apply equally well to Wagstaff (this issue). For example, with regard to Wagstaff (1998), we pointed out that "we do not find in his view any particularly consistent perspective on whether hypnosis is a state of consciousness, and whether it is 'altered' or not" (Woody & Sadler, 1998, p. 179). At first blush, Wagstaff (this issue) seems to espouse a clearer position;

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† Department of Psychology, Wilfrid Laurier University, Waterloo, Ontario, N2L 3C5, Canada for example, in his foreword, he states, "regardless of one's theoretical perspective, the concept of an altered state should be a core feature of any definition of hypnosis" (p. 90). We strongly agree with this bold position and wish he had left it at that. However, later in his article he states that he "aims to remain relatively non-committal as to the actual existence of such an altered state, or whether it is useful to postulate the existence of one" (p. 102). As a result of this kind of hedging, his proposed definition of hypnosis is an awkward combination of different things. This can be illustrated by using his syntax to "define" something else, such as obesity:

Obesity can be defined as 1) an alleged altered state of weight \ldots or 2) acceptance of the suggestion that one is in such a condition.

As this illustration suggests, a definition of this form is probably muddling things that are distinct (what is *alleged* versus what *is* versus what is *believed*).

In our previous commentary, we also criticized Wagstaff's reliance on what we termed the "rhetoric of nothing-but." Wagstaff (1998) argued that rather than being anything particularly complex, hypnosis was simply the "suggestion that we are, will be, or have been, in a special condition we call hypnosis" (p. 160). Similarly, Wagstaff (this issue) argues that a sufficient condition for hypnosis is an "acceptance of the suggestion that one is in such a condition" (p. 104). This unidimensional (and rather circular) thinking seems too simplistic. Over the years we have repeatedly pointed to a wide array of evidence that hypnosis is a complex amalgam of social experiences and cultural expectations, individual differences in multiple underlying abilities, and important contextual factors (e.g., Woody & Barnier, 2008; Woody, Bowers, & Oakman, 1992; Woody & McConkey, 2003; Woody & Sadler, 1999). It cannot be reduced to one thing (i.e., the belief that one is in an altered state).

Finally, we strongly agree with Wagstaff's reservations about the 2003 definition of hypnosis by the American Psychological

Association Division of Psychological Hypnosis (Green, Barabasz, Barrett, & Montgomery, 2005). Indeed, in our commentary article on this definition (Woody & Sadler, 2005), we advanced some very similar points. However, Wagstaff's presently proposed replacement for the APA definition inadvertently perpetuates what we identified as a serious error in the APA definition. Specifically, consider the following line from Wagstaff's (this issue) proposed definition:

A hypnosis procedure will typically involve an introduction to the procedure during which the subject is told that suggestions for imaginative experiences will be presented. (p. 104)

On the contrary, as we pointed out previously (Woody & Sadler, 2005), no commonly used hypnotic introductions and inductions, including those used in the Stanford scales and their derivatives, refer to imagination or anything "imaginative." Thus, it is not true that this is what a hypnosis procedure "typically" involves. More importantly, the link of hypnosis with imagination is disconfirmed by the single most consistent and interesting finding from neuroimaging research on hypnosis: In the patterns of brain activity evoked, hypnotically suggested phenomena are readily distinguishable from imagined events, whereas they closely resemble real events. Szechtman, Woody, Bowers, & Nahmias (1998) first showed this for auditory hallucinations, and since then, using this design contrasting the three conditions, the same pattern has been shown for a wide range of other important types of hypnotic suggestion (Woody & Szechtman, 2012). In short, it is empirically problematic to define hypnosis as akin to "imaginative experiences."

To conclude, defining hypnosis is a difficult task, and we commend Wagstaff for grappling with it and raising tough issues. We would like to think of his latest efforts as a work in progress, and we look forward to seeing how his definition may have evolved in another 16 years.

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