

Disruption of Hypnotic Behavior

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ABSTRACT

Hypnosis has often been considered a *mysterious* phenomenon. In recent decades, procedures have been developed that have allowed us to explain this behavior in terms of variables of social or cognitive theories. However, previous approaches have not permitted formulating or delimiting the conditions that are responsible for following suggestions or their explanation in terms of involuntariness. For this purpose, two experiments were performed. In the first one, two hypnotic protocols were compared, the differences of which were aimed at influencing the voluntary and involuntary explanation of following suggestions and the effect of multiple exposure to both protocols. In the second experiment, four procedures to facilitate the voluntary interpretation of behavior were incorporated. The results of the first experiment yielded no statistically significant differences. However, in the second experiment, it was noted that changing the assessment questionnaire of the hypnotic experiences decreased following suggestions by 26%, and together with this, the use of explicit instructions did so by 67%. These results are discussed with regard to changes in rule-governed or instructional behavior in the so-called hypnotic phenomenon. *Key words:* hypnosis, hypnotic susceptibility, rule-following, behavior-behavior relations.

Novelty and Significance

What is already known about the topic?

- The analysis of hypnosis phenomenon has been approached in term of variables from social or cognitive theories.
- Different procedures have been applied to make subjects who do not follow suggestions become highly suggestible. However, no study has been carried out disrupting the hypnotic behavior.

What this paper adds?

- Our paper present two successive studies aimed at manipulating the conditions that could explain the following suggestions and the involuntary interpretation of behavior.
- The results show that the hypnotic suggestion can be disrupted through the manipulation of the rules that generate a context for the involuntary interpretation of behavior.

One of the most debated points in the comprehension of hypnosis is whether suggestibility is a stable construct or, in contrast, a type of behavior susceptible to modification. Supporters of the first position are the so-called “state theorists,” who understand hypnosis as a kind of *special altered state of consciousness* or *trance*, to which only the virtuosos of hypnosis (the highly suggestible) could have access (Bowers & Davidson, 1991; Hilgard, 1986).

In contrast, the “non-state theorists” consider that hypnosis does not constitute a special altered state of consciousness, but instead that behaviors attributed to the

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hypnotic trance are among the rest of human beings' *psychological capabilities* and therefore, modifiable (Kirsch, 1985; Sarbin & Coe, 1972; Spanos, 1986; Wagstaff, 1981; Wagstaff, Parkes, & Hanley, 2001).

Among the variables that have been considered modifiable during suggestion are motivation, attributions, attitudes, expectations, and beliefs (Barber, 1969; Kirsch, 1985; Spanos, 1986). Of all of them, expectations about being hypnotized (Kirsch & Council, 1989), the demands of the experimental situation (Orne, 1979), and the interpretation of hypnotic behavior as an involuntary event (Spanos, 1986) are those that have awakened the most interest. In fact, the involuntary interpretation of response to suggestions is what determines whether hypnosis has taken place (Spanos, Radtke, Hodgins, Stam, & Bertrand, 1983).

Although the above approach breaks away from the mystical nature of hypnosis, replacing it with other concepts such as expectations or attributions, it provides no explanations of hypnotic behavior because the conditions that are responsible for following hypnotic instructions and the involuntary -or out of one's control- interpretation of such behavior has not been formulated or delimited (Luciano, 2000). The alternative for the identification of the conditions responsible for both behaviors (following suggestions and causal interpretation) requires the manipulation of the elements involved.

One possibility could refer to the manipulation of the type of instructions/rules and their impact on the subject's behavior, for example, in the form of explicit instructions of the behavior to perform, or a description of the behavior in question. This kind of behavior refers to the relation between what a person says, thinks, understands about others' instructions, and what he ultimately does, and to the relation between what he does and what he says or thinks about what he has done. This repertory of behavior-behavior (Hayes & Brownstein, 1986) would underlie self-discriminant behavior and the rules used to explain one's behavior (causal rules). Summing up, it would be an example of rule-governed or instructional behavior (e.g., Dymond & Barnes, 1995; Deacon & Konarski, 1987; Hayes, Barnes-Holmes, & Roche, 2001; Törneke, Luciano, & Valdivia, 2008; Luciano, Valdivia, & Ruiz, 2012).

The contextual cues regulating these types of behavior make it possible not only to follow an instruction never followed before but also to make a particular interpretation for the first time, without prior experience directly related to the hypnotic phenomenon (Hayes, Barnes-Holmes, & Roche, 2001; Visdómine & Luciano, 2002). An example of this would be the meaning acquired by the word hypnosis in society, related to the mystical or to loss of control. Hence, it is consistent that, although an individual has never been in contact with the hypnotic context, he behaves according to the rules derived from hypnosis, for example, carefully following instructions, which explains the lack of voluntariness in that context. Moreover, he will provide a mystical or involuntary interpretation of his behavior.

One of the procedures or contexts that facilitates the experience of involuntariness with regard to following instructions is the use of intensified mands in the sense established by Skinner (1957). Specifically, the use of mands with the appearance of tact. For example, instead of instructing or manding "raise your arm," introducing a description that serves as a rule that contextualizes both what must be done and the

lack of voluntariness. For example: “your arm is rising”. To this can be added that following is promoted when preceded by experiences as natural as ocular fixation and that are appraised in terms of hypnotic events (Cangas, 1998, 1999). Along this line, different procedures have been applied to make subjects who do not follow suggestions become highly suggestible (Cangas & Pérez Álvarez, 1997; Diamond, 1974; Gorassini & Spanos, 1986; Sasch & Anderson, 1967). However to date, no study has been carried out altering the context in which the suggestions are interpreted as involuntary and in which the following of such suggestions has been analyzed. This is the goal of the present study. We present two successive studies aimed at manipulating the conditions that could explain following suggestions -and their explanation as being out of voluntary control. In the first experiment, we compared the effect of two hypnotic protocols: the reduced classic protocol and a reduced and modified protocol. The differences between them refer to the changes made in the evaluation questionnaire, which were aimed at influencing the explanation for following the suggestions (voluntary/involuntary). In addition, we analyzed the effect of multiple exposures to the hypnotic protocols, evaluating this effect as a function of the number of suggestions followed and explained as involuntary. In the second experiment, we incorporated successive cues to facilitate voluntary interpretation of the behavior.

EXPERIMENT 1

METHOD

Participants

Twenty-six non-psychology undergraduate students (9 male and 17 female) volunteered to participate in the experiment. Their ages ranged between 18 and 42 years. The participants were randomly assigned to two experimental conditions.

Materials, Experimental Setting and Measures

The experiment was conducted in a room that contained a table, two chairs, a tape recorder and armchair. The following material was used:

- *Reduced Carleton University Responsiveness to Suggestions Scale (CURSS-R)*. We used a reduced version of the original scale (CURSS; Spanos et al., 1983). The CURSS-R hypnotic protocol consisted of: (1) a hypnotic induction; (2) three hypnotic suggestions (arm levitation, arm moving apart, and arm rigidity) (see Annex for the complete transcription); and two questionnaires: (3) an objective overt measure (CURSS-R: O); and (4) an involuntariness measure (CURSS-R: I). The CURSS-R: O ranges from 0 to 3 and indicates the number of suggestions followed by the participants. Suggestions were marked as followed when: (a) the arm rose at least 15 cm for arm levitation; (b) the hands separated at least 15 cm for arm moving apart; and (c) the arm was not bent more than 5 cm for arm rigidity. The CURSS-R: I ranges from 0 to 3 and reflects the number of suggestions that were evaluated by the participant as having occurred involuntarily (see Figure 1). A third, final score (CURSS-R: IO) was gener-

- ated representing the objectively followed suggestions (CURSS-R: O score) that were also evaluated as involuntary (alternatives *c* or *d* on CURSS-R: I). This score was set as a criterion to conclude that suggestion had taken place (Spanos *et al.*, 1983).
- *Modified Reduced Carleton University Responsiveness to Suggestions Scale* (CURSS-RM). This hypnotic protocol was identical to CURSS-R except for the involuntariness measure (CURSS-R: I). The four alternative responses were replaced, emphasizing the person's responsibility for his own actions. That is, the previous alternative response (a) *not at all* was changed to *I realized perfectly well that I raised my arm*; the alternative response (b) *to a slight degree* was changed to: *I noticed how I raised my arm, although sometimes I did not pay attention and I raised my arm without noticing I was doing so*; the alternative response (c) *a moderate degree* was changed to: *I raised my arm without realizing I was doing so (although I know that I lifted it)*; and, finally, (d) *a great degree* was changed to: *I did not realize that I had raised my arm (although I know that I did)*.

Arm levitation (right arm).

You were told that your arm was light and rising in the air.

During this suggestion, my arm felt like it rose in the air by itself. I experienced this

- (a) Not at all
- (b) To a slight degree
- (c) To a moderate degree
- (d) To a great degree

Remember: if you chose to lift your arm voluntarily, or if your arm did not feel like it rose by itself, you should choose alternative (a)

Figure 1. Questionnaire and experience of involuntariness (CURSS-R: I) for the item *Arm levitation*.

Experimental Design

A repeated measures design with two inter-subject factors was employed. The 26 participants were randomly assigned to 2 experimental conditions. The difference between the conditions was the type of questionnaire they completed. 13 participants completed the CURSS-R, and 13 participants completed the CURSS-RM.

Procedure

Participants were recruited from University of Almeria through in-class announcements. After giving their informed consent, participants were exposed to the experimental procedure (Figure 2). The experimental procedure was administered individually and the suggestions were applied by means of a cassette in the presence of the researcher:

- *Phase 1. Hypnotic Protocol.* The participants were invited to sit comfortably in a chair and to carry out the hypnotic protocol (CURSS-R or CURSS-RM). First, all the participants received hypnotic induction and the three suggestions. Then, they were invited to sit in a chair (situated two meters away from the chair where the hypnotic induction took place) and to complete the two scales (O and I) of the CURSS-R or the CURSS-RM, respectively, in the two conditions.

- *Phases 2-4. Repeated Applications of the Hypnotic Protocol.* At the end of Phase 1, the participants repeated the same sequence (CURSS-R or CURSS-RM) three more times. The total duration of the session was approximately 50 minutes.

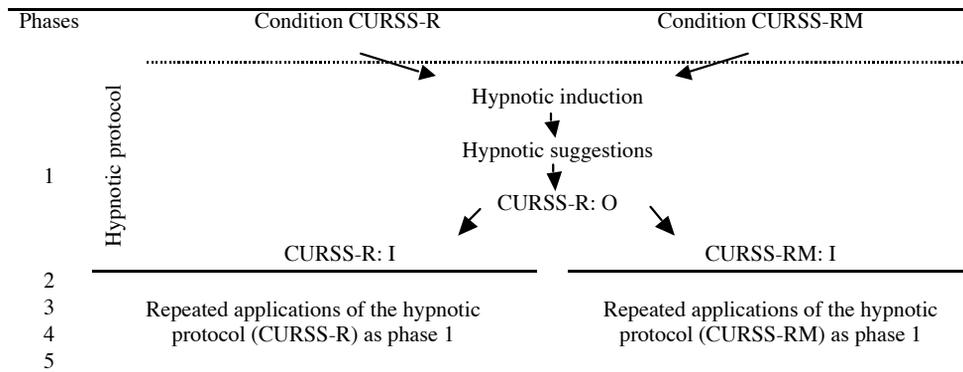


Figure 2. Schematic overview of the procedures employed in Experiment 1.

RESULTS

Table 1 shows the number of followed suggestions that were appraised as involuntary by each participant in both conditions (CURSS-R: OI and CURSS-RM: OI). Participants in Phase 1 responded similarly in both conditions, with no group differences ($p > .05$). In the CURSS-R condition, 6 (46.15%) participants responded to none or one suggestion and 7 to two or three. In the Condition CURSS-RM, 8 participants (61.54%) responded to none or one suggestion and 5 to two or three.

During the repetitions of the procedure (phases 2 to 5), participants in both conditions behaved similarly. Mixed 2 (Group: CURSS-R, CURSS-RM) \times 5 (five Repetitions of the hypnotic protocol) ANOVA did not reveal group differences or main effects ($p > .05$). Only one participant per condition increased the number of performed suggestions explained as involuntary.

DISCUSSION

The effect of the changes induced in the questionnaire on involuntariness of the CURSS-R was analyzed. The results indicated no statistically significant differences between responses to CURSS-R and to the modified version (CURSS-RM).

In addition, it was observed that mere repetition of the hypnotic protocol neither decreased nor increased the subjects' responses in both conditions. This suggests that, once the behavior is attributed to hypnosis, this type of interpretation does not vary across repetitions of the procedure.

The lack of group differences may be due to the fact that only minor modifications were introduced in the questionnaire. In addition, the study precludes the analysis of

Table 1. Number of suggestions followed as involuntary (OI) in CURSS-R condition and CURSS-RM condition in the five phases in all participants (*Note.* Boldface indicates changes in the participants' responses).

	Participant	Phase 1	Phase 2	Phase 3	Phase 4	Phase 5
CURSS-R Condition	1	0	0	0	0	0
	2	1	1	1	1	1
	3	1	1	1	1	1
	4	1	1	1	1	1
	5	1	1	1	2	2
	6	1	1	1	1	1
	7	2	2	2	2	2
	8	2	2	2	2	2
	9	2	2	2	2	2
	10	2	2	2	2	2
	11	2	2	2	2	2
	12	3	3	3	3	3
	13	3	3	3	3	3
CURSS-RM Condition	14	0	0	0	0	0
	15	0	0	0	0	0
	16	1	1	1	1	1
	17	1	1	1	1	1
	18	1	1	1	1	1
	19	1	1	1	1	1
	20	1	1	2	2	2
	21	1	1	1	1	1
	22	2	2	2	2	2
	23	2	2	2	2	2
	24	2	2	2	2	2
	25	2	2	2	2	2
	26	3	3	3	3	3

the effect that the experimental manipulations would have produced if were applied individually. Therefore, the goal of the second study was to analyze the effect of different modifications of the hypnotic protocol at the intra-subject level.

EXPERIMENT 2

METHOD

Participants

Thirty-three non-psychology undergraduate students (12 male and 21 female) volunteered to participate in Experiment 2. Their ages ranged between 18 and 42 years.

Materials, Experimental Setting and Measures

The sessions were performed in the same room as Experiment 1. The following measures were used:

- *Reduced Carleton* (CURSS-R) and *Modified Reduced Carlet* (CURSS-RM), as were described in the previous experiment.

- *Daily Voluntary-automatic Examples Questionnaire*. The questionnaire contained four examples of voluntary but automatic behaviors similar to those that can occur during the hypnotic protocol. For example, paying a lot of attention while learning to drive and occasionally driving inattentively and several months later (in our case, moving one's hands inattentively), or walking, or moving one's hands without paying attention. The participant was asked whether he agreed that such examples were automatic and requested to give other examples with the same functional meaning.
- *Voluntary Examples in the Hypnotic Setting Questionnaire*. This questionnaire involved four questions, the first three were open-ended and the last one with several response options: (a) what the participant would do if, while under hypnosis, a fire alarm sounded (would he run out of the room or stay in it?); b) the differences between the way the hypnotist talked to the research participant and how people talk in other settings. Is the tone the same? What are the differences?; and (c) What the participant thinks about becoming a hypnotist after some training? The final question (d) was an evaluation of the hypnotic experience with three response options: voluntary, voluntary but not being able to explain it very well, and involuntary.

Experimental Design

An intra-subject multiple treatment design was employed.

Procedure

Selection of participants and application of the hypnotic protocol was the same as described in Experiment 1. The participants who responded to at least one suggestion at the end of each phase went on to the next phase, whereas those who did not respond were excluded from the experiment. The study consisted of the five phases (see Figure 3):

- *Phase 1. CURSS-R Hypnotic Protocol*. The protocol was identical to the one applied in Experiment 1. The participants who responded to at least one suggestion ($N= 23$ of 33) continued in the experiment.
- *Phase 2. CURSS-RM Hypnotic Protocol*. The protocol was identical to the respective condition in the Experiment 1.
- *Phase 3. Direct Instructions*. Participants repeated the CURSS-RM hypnotic protocol (Phase 2), but the presentation of the hypnotic suggestions was modified. In this phase, they were presented with direct instructions instead of suggestions. For example, instead of saying, 'your arm is rising', we used the statement, 'I want you to raise your arm'.
- *Phase 4. Daily Voluntary-Automatic Examples*. In this phase, participants repeated the same hypnotic protocol as in Phase 3. Prior to the protocol, they were asked to evaluate whether or not activities from a list of daily activities were automatic and to enumerate similar examples from their life.
- *Phase 5. Hypnotic-Voluntary Examples*. In this phase, participants repeated the same hypnotic protocol as in Phase 3. Prior to the protocol, they responded to open-ended questions designed to normalize the hypnotic protocol as just one more activity under the research participant's control.

To sum up, beginning Phase 2, participants responded to the Modified CURSS questionnaire (CURSS-RM), and changes were added in a cumulative way during phases

3, 4, and 5. The whole experimental procedure was conducted in one session that lasted approximately one hour and fifteen minutes.

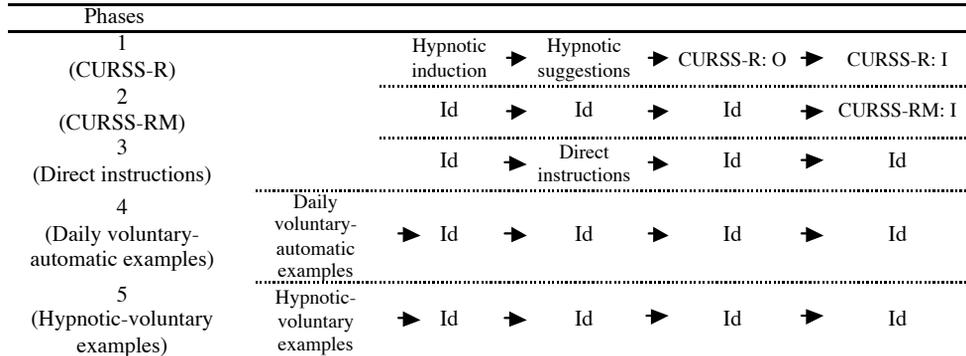


Figure 3. Schematic overview of the procedures employed in Experiment 2.

RESULTS

Agreement about the movement recorded by the experimenter during the hypnotic session and the research participant's report of his/her own action on the CURSS-R and CURSS-RM objective scores was 100%.

In Phase 1, 10 of 33 participants responded to none and they were excluded from further participation. 9 of 23 participants responded to one (39%), 5 to two (22%) and 9 to three suggestions (39%), in accordance with the CURSS-R: OI scores. Considering the participants who responded to at least one suggestion in Phase 1, the second phase produced a disruption of hypnotic behavior in 9 participants out of 23 (39%). The third phase, direct instructions, did so in 12 participants out of 18 (67%). The fourth phase, daily voluntary-automatic examples, when added to the previous direct instruction phase, disrupted hypnotic behavior in 3 out of 7 cases (43%). The final phase, voluntary examples in the hypnotic setting, disrupted hypnotic behavior in 1 out of 4 participants (25%) (Table 2).

Specifically, the Phase 2 and Phase 3 showed a greatest degree of reduction in the followed suggestion as involuntary for participants who responded to one suggestion in Phase 1 and the Phase 3 showed a greatest degree of reduction for those participants who responded to two and three suggestions in Phase 1 (Figure 4).

Overall, Wilcoxon test confirmed a significant decrease in the number of suggestions between the first and the second phase ($Z = -2,807, p = .005$). Decreases were also significant between the second and the third phase ($Z = -3,307, p = .001$). However, there were not significant differences between the third and fourth phases ($Z = -1,134, p = .257$) or between the fourth and fifth phase ($Z = -1,000, p = .317$).

Table 2. Number of suggestions followed as involuntary (OI) by each participant in the five experimental phases (Note. Boldface indicates changes in the participants' responses and blank spaces indicate the participants who were excluded from the experiment for not responding to any suggestion).

Participant	Phase 1	Phase 2	Phase 3	Phase 4	Phase 5
1	1	0	-	-	-
2	1	0	-	-	-
3	1	1	0	-	-
4	1	0	-	-	-
5	1	1	0	-	-
6	1	1	0	-	-
7	1	0	-	-	-
8	1	1	0	-	-
9	1	1	1	0	-
10	2	2	2	3	3
11	2	2	0	-	-
12	2	2	1	0	-
13	2	1	0	-	-
14	2	1	0	-	-
15	3	3	3	3	3
16	3	2	2	0	-
17	3	3	0	-	-
18	3	3	0	-	-
19	3	1	0	-	-
20	3	0	-	-	-
21	3	3	0	-	-
22	3	3	3	3	3
23	3	3	3	3	0

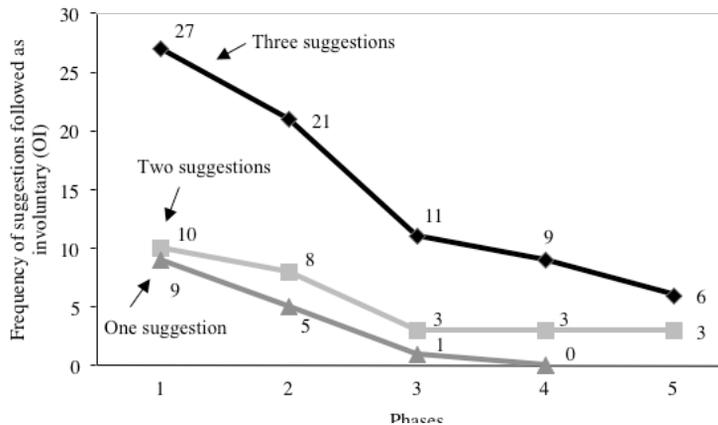


Figure 4. Frequency of suggestions followed as involuntary (OI) in the five experimental phases (black line indicates participants who responded to three suggestions in Phase 1; light grey line indicates participants who responded to two suggestions in phase 1 and dark grey line indicate participants who responded to one suggestion in Phase 1).

DISCUSSION

The present experiment shows that the manipulation of the instructions or rules that generate a context for the involuntary interpretation of behavior can reduce following hypnotic suggestions and their interpretation. In this sense, the CURSS-RM was especially effective in the participants who only responded to one suggestion in Phase 1, and to a lesser degree in the rest. This may indicate that the incorporation of cues to signal alternative responses, that place the responsibility of the behavior on the individual rather than on the hypnotic effect, was not sufficient to alter the experience of involuntariness in highly suggestible individuals. This could be due to the prior experience that emphasized the involuntariness of the behavior with the hypnotic induction itself as well as the application of the three suggestions.

The manipulation of the instructions as explicit commands about the behavior to perform in the hypnotic experience produced the greatest impact on the participants' behavior. The function acquired by the instructions along the previous experimental protocols may have allowed him to discriminate his behavior as due to the effect of the therapist's instructions and not to the effect of the so-called hypnosis, thereby altering both the following of hypnotic suggestions and the involuntary interpretation of the behavior. These results underscore the use of instructions as mands or descriptions as tactics to facilitate, respectively, the voluntary or involuntary interpretation of the behavior as causal rules and to alter following or not following the instructions (e.g., Cangas & Pérez Álvarez, 1997).

Lastly, the examples of voluntary behaviors, both in everyday life and in the hypnotic context, produced noticeable changes, taking into account that both conditions were applied only to those participants who continued to maintain hypnotic responses after the prior phases. The application of examples of what occurs in the hypnotic context and other examples from everyday situations discriminated as voluntary may have allowed the participant to establish a functional equivalence between both contexts and so, alter the framework in which hypnosis operates. However, a more detailed analysis of the implications of this type of procedures for hypnotic behavior is still necessary.

These results should be analyzed in the light of certain limitations. Perhaps the most important one is the cumulative effect of the successive protocols which prevented the observation of the independent impact of each experimental condition. Likewise, the exclusion of the participants who did not follow the suggestions did not allow determining whether they might follow them later on. However, this seems unlikely because no participant displayed similar behaviors in the first experiment. Subsequent experiments should overcome the previous limitations and isolate the components involved.

GENERAL DISCUSSION

The way in which an individual explains his behavior is relevant because even when it is not the cause of either subsequent or precedent behaviors it can operate as a reason to behave. In the case of hypnotic behavior, one point is following the hypnotic suggestions and another point is the explanation, given by the participants of their

own behavior in terms of automatic or unconscious behavior. The causal relation of giving reasons as automatic or involuntary to explain hypnotic behavior depends on the function that such reasons have acquired in the individual's history on the basis of how the community has developed and maintained certain ways of understanding phenomena equivalent to hypnosis (Luciano, 2000). The clarification of the conditions under which both of these behaviors -following suggestions and automatic or involuntary explanations of such following- emerged, as well as the conditions under which these explanations might be altered, might be very well understood by using the conceptualization of language and cognition as relational behavior (Hayes, Barnes-Holmes, & Roche, 2001). That is, to fully address the hypnotic phenomenon, a careful analysis of the individual following rules or instructional behavior should be necessary (e.g., Dymond & Barnes, 1995; Törneke, Luciano, & Valdivia, 2008; Visdómine & Luciano, 2002). For instance, if in the individual's history interactions have been promoted in certain contexts as attributed to external or involuntary factors -which would include the hypnotic context-, the self-discriminative functions of behavior could be transferred to the hypnotic context, and the following of instructions would underlie the functions acquired by specific rules in equivalent circumstances (e.g., Visdómine & Luciano, 2002; López, Rodríguez, & Luciano, 2011). This could explain why, in the hypnotic context, some people behave from the start following hypnotic rules and explain their behavior in terms of lack of voluntariness, whereas others do or do not do this, but interpret their behavior in another sense. Summing up, the framework in which hypnotic effects operate seems to include equivalence and transformation of the resultant functions between contexts involving loss of control and the hypnotic context might be just one of them. The analysis of this study shows that not only is possible an increase of hypnotic susceptibility in the participants (as have been demonstrated in classical studies (e.g., Gorassini & Spanos, 1986; Sach & Anderson, 1967), but also a decrease in it, which helps to understand different variables that can determine the hypnotic susceptibility.

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Annex. Hypnotic Protocol (CURSS-R)

1. Hypnotic induction procedure

Close your eyes. The ability to be hypnotized depends entirely on your cooperation. It has nothing to do with intelligence. If you like, you can pay no attention to me and stay awake the whole time. However, if you pay attention to what I say to you and you follow my instructions, you can easily slip into a hypnotic sleep (...). Now, relax and make yourself comfortable. Relax completely. Relax all the muscles of your body. Relax your leg muscles. Relax all the muscles of your hands. Make yourself comfortable. Relax more and more, more and more. Relax completely. Relax completely. Relax completely.

Your legs feel heavy and weak, heavy and weak. Your arms are heavy, heavy, heavy as lead. Your whole body is heavy, very heavy (...). Soon you will sink into a deep sleep, but you will have no trouble hearing me. You will not wake up until I tell you. Remember that the danger of hypnosis is a myth. We will not do anything dangerous. I'm going to start counting. Whenever I count, you will sink deep, deeper, deeper into remedial sleep. A sleep where you can do all the little things I tell you. One... You are slipping into a deep sleep. Two... Deeper, deeper, deeper, deeper, a comfortable sleep. Three. Four... More and more into a deeper and deeper sleep. Five. Six. Seven... You are sinking into a deep, deep sleep. Nothing bothers you. Only listen to my voice and to what tell you. Eight. Nine. Ten. Deeply asleep. Remain in this state until I tell you otherwise (...). You are ready to respond to and experience what I'm going to ask you to do. Fully prepared to respond to each suggestion I'm going to give you now.

2. Hypnotic suggestions

Arm levitation. Now, please stretch out your arm (allow 5 seconds). Only pay attention to your arm, notice how you feel a tingling sensation, and how it is slightly numb. Also notice how you start to feel it is lighter and lighter, you feel it is so light that it begins to rise in the air. Imagine that your arm is like a balloon. Imagine that it begins to rise in the air and you feel it is lighter and lighter. Feel your arm lighter and lighter, lighter and lighter, like a balloon that floats higher and higher, higher and higher in the air. It is rising, rising, notice it is lighter and lighter, rising higher and higher (allow 10 seconds).

Okay, let your arm return to its original position. Your arm no longer feels light and like a balloon. It feels comfortable and relaxed like the other arm.

Moving hands apart. Now please extend both hands forward at shoulder height with the palms of your hands facing each other and the fingers of one hand touching the other. Pay attention to your hands. Notice the feeling in your hands: heat, a feeling of tingling, and a bit heavy. Also notice how your hands begin to separate and move. Your hands are separating more and more, more and more apart. Feel your fingers as if they were two magnets that repel each other, they separate more and more, they separate more widely, moving more and more apart.

Okay, let your arms return to their original position and rest.

Arm rigidity. Please, hold your left arm forward at shoulder height (allow 5 seconds). Notice how your arm is numb, and it starts to get hard, stiff, stiff and rigid. Imagine that your arm is like a board that cannot bend at the elbow. Feel your arm stiff and rigid, solid and rigid, you feel it rigid and impossible to bend. Your arm feels so stiff and rigid that you cannot bend it. Try to see how stiff and rigid it is. Try to bend your arm (allow 10 seconds).

Okay, you no longer feel your arm is stiff and rigid. You can now bend it easily. Rest and let it lie back in its place.