

# Hypnosis

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*trance* 1. A state of partly suspended animation or of inability to function; a daze; a stupor. 2. A state of profound abstraction of mind or spirit as in religious contemplation; ecstasy. 3. A sleeplike state such as that of deep hypnosis.

—*Webster's New Collegiate Dictionary (1973)*

The word *trance* usually has negative connotations for us. If someone acts stupidly, we are liable to say he is in a trance. A trance need not be merely passive stupidity, but can include an active, organized pursuit of the wrong things. When we feel someone is in a trance, we tell him to wake up, to use his natural abilities to the full.

*Trance* is no longer common as a scientific word, partly because it carries negative connotations, partly because it has never been clearly enough defined. A scientific technical word should be clearly descriptive of what phenomena are, without confusing what they are with what we feel about them. It is the negative connotations that concern us here.

In spite of the positive uses of hypnosis in medicine and psychotherapy and as an aid to learning, and in spite of decades of work by responsible professionals to educate the public to have a more positive view of hypnosis in common usage hypnosis is still usually referred to as a trance. Hypnosis has negative connotations: a hypnotized person is thought to lack animation, to be partly asleep, to be in the power of the superior mind and will of the hypnotist, to be controlled and manipulated.

Is there, perhaps, a deeper reason for the negative image of hypnosis, of trance, to persist?

Gurdjieff was, among many other things, an accomplished hypnotist. His knowledge included Eastern versions of hypnosis and its application that are still little known in the West today. He knew that *hypnosis, in various forms, is a major part of everyday life for almost all people*, rather than being an exotic and unusual phenomenon. When hypnosis is carried out in a formal way, with a designated "subject" and "hypnotist," with a formal procedure for inducing, testing, using, and terminating it, we recognize its great power. When hypnoticlike procedures and states are interwoven with many life activities, they are not so obvious, yet can be just as powerful. We will look at hypnosis in detail, for it can alert us to less obvious things that are part of our everyday lives.

Hypnosis fascinated me from my early teenage years and was the major focus of the first decade of my research career. My master's thesis and doctoral dissertation were studies of new uses for hypnosis in actively controlling both the process and the content of nocturnal dreaming. I spent two years in intense postdoctoral study of hypnosis at

Stanford University and carried out research studies for several years thereafter. I am supposed to be an expert on hypnosis, yet in spite of years of study I still find it quite incredible.

## **SETTING AND PRELIMINARIES**

Let us look at a modern hypnotic procedure, the administration of the Stanford Hypnotic Susceptibility Scale, Form C. This is a standardized psychological test procedure widely used in research for determining how hypnotizable a subject is.

There is nothing obviously theatrical or mysterious about administering the scale. The hypnotist does not wear a cloak or "gesture hypnotically," there is no "Look into my eyes!" rigmarole. It is standardized to the point where, after initially getting acquainted, the procedure is read word for word from printed instructions. Responses are evaluated in a standardized way: "Does the subject's arm move less than  $x$  inches in  $y$  seconds?," for example.

The setting is low key. Typically the subject, often a college student seeking extra credit, reports to a psychological laboratory that is basically just a quiet room with a comfortable chair. The subject usually has not met the hypnotist before and knows nothing about him except that he is, presumably, competent to practice hypnosis. After a few minutes of casual conversation and filling out of forms, the usual getting-acquainted ritual, the hypnotist asks the subject to sit comfortably. He reassures the subject that there is nothing dangerous or threatening about what is going to happen, that it won't be embarrassing, and that being hypnotized is actually a rather normal sort of occurrence,

## **BEGINNING THE INDUCTION**

The formal induction of hypnosis begins by asking the subject to look steadily at a small, shiny spot on the wall (such as a chrome-plated thumbtack) while listening to the hypnotist. The point of fixation is called the target.

A number of suggestions to guide the subject's thoughts and perceptions are then repeated over and over. "Suggestions" means just what it ordinarily means, verbal statements to lead the subject's thoughts. An example would be "Think how it would feel to be very relaxed and sleepy." There are small variations in wording in the printed instructions, rather than simple repetition, and the hypnotist will usually speak without long pauses, to keep the subject's mind occupied with the suggestions.

The hypnotist suggests that the subject keep looking steadily at the target, that he can be hypnotized if he looks at the target and follows the hypnotist's instructions, if he concentrates on what the hypnotist says. The hypnotist suggests that the subject's very presence there indicates that he is willing to be hypnotized. The subject should just let himself go, just let things happen.

The hypnotist continues to suggest that if the subject's mind wanders from following the hypnotist's voice, he should gently bring it back to following it. Interspersed with these suggestions are farther reassurances that hypnosis is normal, that it's like things the subject has already experienced, such as being so absorbed in a conversation while driving that you don't notice the scenery going by. He is further reassured that his experience will be interesting.

While this is going on, the subject has been gazing steadily at the target. Most people don't think about it, but gazing steadily at anything fatigues the eye such that the image starts to undergo unusual changes. Parts of it may fade or brighten, colors may change, shadows may appear or disappear. Early in the induction procedure the hypnotist suggests that these changes will occur: when they do, the subject interprets them as an effect of the procedure, a sign that he is beginning to be hypnotized. In one way, this is a trick: the changes would have occurred without the hypnosis induction. In another way it is an effective and useful way of creating a connection between ideas and experience, between the hypnotist's suggestions and what happens. It seems that the hypnotist's suggestions are working, which reinforces the subject's belief that the hypnotist can indeed hypnotize him. If the suggestions have already started taking effect, the heaviness in the eyes is also a genuine effect.

### **THE SLEEP PARALLEL**

After a few minutes the hypnotist suggests that the subject's eyes are feeling tired (as they likely are anyway from gazing intently), that it would be very pleasant to close his eyes, that he would welcome their closing of themselves. He suggests that the subject is already very relaxed and getting more relaxed. Thinking of relaxation brings on relaxation: his body is getting numb and heavy, his eyelids are heavy, he's breathing freely and deeply and feeling more and more drowsy. (You may notice that even reading these suggestions tends to make you feel sleepy. Resist!) The hypnotist suggests that the subject give up trying to actively control his experience, that he just relax and experience these pleasant feelings of drowsiness and relaxation. He is experiencing pleasant, warm sensations in his body; he's going deeply asleep. Even though he's going to sleep, he can clearly and easily hear the hypnotist, and he will want to do what the hypnotist says.

The analogy with sleep implicitly drawn in the suggestions and the repeated suggestions of sleepy, drowsy feelings are very powerful. Hypnosis does not have to be induced by reference to sleep, but it is the most common way. Sleep is the universal altered state of consciousness, the one we have all experienced, the one we all understand. There is an implicit understanding between hypnotist and subject, of course, that this is not ordinary sleep but hypnotic sleep, a special sleeplike state in which the subject can still hear and respond to the hypnotist.

The sleep suggestions become more and more frequent as the induction goes on, and become more direct. Instead of suggestions that you feel sleepy, the suggestions become statements that you are asleep and you are going even deeper asleep all the time. Further

suggestions are added that nothing will disturb the pleasant quality of that sleep, that the subject will stay deeply asleep, experiencing whatever the hypnotist suggests, until the hypnotist tells the subject to wake up. The subject is told he can even move or talk or open his eyes in response to the hypnotist's suggestions without waking.

This standardized induction procedure takes between twelve and fifteen minutes, depending on how rapidly the hypnotist reads the script. Following this induction, a standard set of instructions is followed to test how responsive the subject is, how deeply hypnotized he is.

## **HYPNOTIZABILITY**

People's responses to this induction procedure vary a good deal. At one extreme, a subject might suddenly sit up and say, "When is something going to happen? I'm bored." More typically, the subject will gaze with a fixed look; his eyelids will begin to droop and finally close, looking as if they are closing by themselves rather than as a result of the subject's volition. Typical subjects will tell you later that this was indeed the case. The twelve standard suggestibility tests of the Stanford Hypnotic Susceptibility Scale that follow the induction are designed to test how well the subject behaves like a classically hypnotized person. The first tests are fairly easy in that many people pass them; the later tests get more difficult. If you count up the number of tests passed as your measure of hypnotizability, you almost get a normal, bell-shaped distribution. The majority of people are moderately suggestible or hypnotizable; a few are not hypnotizable at all, and a few are very hypnotizable. The "almost" qualification comes from the fact that there are considerably more subjects scoring at the high extreme than at the low extreme. This has been interpreted to mean that there is a normal distribution of hypnotic susceptibility that almost everyone fits into, but there are also a small number of people who have some special hypnotic talent, so they swell the numbers who pass all the tests. To put it in rough numbers, about 5 percent of people show almost no response to this (and similar) hypnotic procedures; they are un hypnotizable. Most people show moderate responses; they are lightly to moderately hypnotized. About 10 percent are very responsive, and some of these people can be hypnotized to extremely deep degrees.

Contrary to popular stereotypes, a person's degree of hypnotizability does not show any strong correlations with obvious personality characteristics. A deeply hypnotizable person is not necessarily smarter or dumber than average, more or less gullible, male or female, extroverted or introverted, healthy or neurotic. The idea that a superior hypnotist uses his will to master a dumb, subservient, or gullible person doesn't fit reality very well.

We will now examine the effects that can be experienced in the hypnotic state. For convenience I will describe them as they are experienced by the more talented hypnotic subjects, rather than those who don't respond very well to the induction.

## THE EFFECTS OF HYPNOSIS

The first formal test of the effectiveness of the induction is whether the subject's eyes close by themselves by a certain point in the induction. If they don't, the hypnotist requests the subject to close them deliberately.

The subject is then asked to hold his arm straight out horizontally and imagine that it is becoming very heavy. The arm will feel heavy to the subject, too heavy to hold up, and start lowering, eventually coming to rest in his lap.

Now the subject holds his arms out horizontally about a foot apart. The suggestion is that there is a force developing between his hands, pushing them apart. Subjects often experience this as being like magnetic repulsion. Without their conscious volition, their hands repel each other and move apart.

A perceptual suggestion is then given, namely that a mosquito has gotten into the room. This annoying mosquito lands on the subject's head. Slap! Responsive subjects kill the mosquito before it can bite them. They later report hearing its buzz and feeling it landing.

The hypnotist further modifies perception by suggesting that the subject tastes a sweet or sour taste. The subject's mouth may pucker up, and the taste experience may be quite strong.

The above suggestions may be experienced to some degree, even strongly, by a fair number of people. The following are more difficult but are experienced with complete realism (sometimes "realer" than real) by talented subjects.

The subject is again asked to hold his arm out. Now he is told his arm is becoming rigid, by itself, so rigid that if he tried he wouldn't be able to bend it. Eventually he is challenged to try to bend his arm. In spite of great effort, the arm does not bend; he has lost his normal muscular control over it.

Now we leave altered perceptions of body and reality and go within. The subject is told he will have a dream, a vivid dream, and then is given a period of silence. Asked to recount his experience afterward, he will often report a vivid dream. When subjects are asked to compare the reality of these dreams with their nocturnal dreams, they report that these dreams are sometimes just as real, sometimes even more intense. The content of the dream can also be affected by suggestion, as in suggesting that the dream will represent what it is like to be hypnotized.

Age regression is one of the more dramatic hypnotic phenomena. The subject is told he is going back in time, that he is no longer his adult self but much younger. A specific time to regress to, such as a birthday party at a certain age, is typically suggested. The

degree of effect varies, but the most responsive subjects experience themselves as children again. Their manner of speaking and writing can change, and they feel as if they are re-experiencing an earlier part of their life rather than remembering it.

A particularly dramatic test is anosmia, the inability to smell. In spite of the number of times I have administered it and seen it passed, it continues to amaze me. After I have suggested to the subject that he cannot smell anything, a bottle of household ammonia is held under his nose and he is asked to take a good sniff. Talented, deeply hypnotized subjects take a deep sniff, show no reaction, and deny that they smelled anything. The smell of ammonia is not only extremely strong but painful in our ordinary state of consciousness. Although it is not further tested in Form C, other standardized hypnosis procedures administer a variety of painful stimuli after suggestions that the subject cannot feel pain. This ability to reduce or eliminate pain is one of the most puzzling (and useful) aspects of hypnosis.

We have seen external sensations reinterpreted or eliminated, and external perceptions replaced with a dream. They can also be replaced with hallucinated perceptions, perceptions for which there is no physical basis at all. In the next test the subject is told that the research laboratory's secretary forgot to ask him some preliminary questions, but will now ask them over the intercom in the lab. Responsive subjects hear the questions and reply to them!

An extreme modification of perception is now tested, a negative hallucination. The subject is told that when he opens his eyes he will see two boxes on the table in front of him. Actually there are three boxes, but the highly responsive subject will see only two. Maintaining the hypnotic state with eyes open is also a mark of a highly talented subject.

Finally, the hypnotist suggests that when the subject awakens from the hypnosis he will not remember anything about what happened. When the hypnotist gives a certain cue, however, his memories of what happened will return. The subject is now dehypnotized and questioned about what went on. A responsive subject will report coming in to be hypnotized, sitting down and relaxing, and then feeling that he must have fallen asleep, as he can't recall anything else. On cue, the full memories return.

Another common hypnotic effect that is routinely tested, although not in this particular susceptibility scale, is posthypnotic suggestion. While the subject is in the hypnotic state, it is suggested that sometime after he awakens from the hypnotic state, the hypnotist will give him some sort of cue, such as mentioning that the day is pretty warm. Whenever the subject hears this cue, he will do some specified thing, such as opening the door and looking into the hall. The hypnotist also suggests that the subject will have no memory of being given this posthypnotic suggestion.

After the hypnotist has dehypnotized the subject, and the latter is presumably in his ordinary state of consciousness, the hypnotist will occasionally give the cue, usually casually working it into ordinary conversation. The responsive subject will carry out the suggested action, without remembering that he is responding to a posthypnotic

suggestion.

For the example of opening the hall door and looking out, after this has happened several times, most people would think this was a strange thing to do. The talented subject will provide a rationalization for his odd behavior, often without even being asked. "I thought I heard a funny noise outside," or "It's stuffy in here; I'm letting a little air in." Posthypnotic suggestions are striking demonstrations of how we can be totally unaware of the reasons for our behavior.

In spite of its great power, hypnosis does not give the hypnotist total control over the subject. If the hypnotist suggests that the subject do something quite dangerous or antisocial, for instance, such as shoot someone, the subject will usually ignore the suggestion or awaken from the hypnotic state, sometimes feeling very upset. This is usually interpreted to mean that hypnotic suggestions will work well as long as they do not conflict with our deeper convictions.

There is a more disturbing interpretation, which will become clearer after you read the next chapter on consensus trance. When someone is hypnotized, the hypnotist can give a posthypnotic suggestion that the subject will not be able to be hypnotized by any other hypnotist than the original one. Until this suggestion wears off, which may take hours in some cases or months in others, the subject will not respond to a hypnotic induction by someone else, but will remain hypnotizable by the original hypnotist. This suggestion could be modified so that the subject would be hypnotizable by others, but unable to respond to certain kinds of suggestions. When we examine the construction of ordinary consciousness and its trancelike qualities, we will see that resistance to an antisocial suggestion in hypnosis may partially represent moral virtue, but may also simply show that the original hypnotist, the culture, has left posthypnoticlike suggestions operative that block later change.

### **DISBELIEF IN THE REALITY OF HYPNOSIS**

If a part of your mind is rather incredulous, it is quite understandable— especially if I add that there are more dramatic hypnotic phenomena than those included in Form C: we have two forms of the Stanford Hypnotic Susceptibility Scales for testing really talented subjects!

I have hypnotized people with these standardized tests and seen these phenomena dozens and dozens of times. I must accept their reality because of my repeated experience. Or must I?

After all, they smack of magic. There were no drugs, no operations on the brain, no powerful emotions to push people to extremes of functioning. Two strangers sat in a rather ordinary room. The one called the hypnotist did nothing but talk to the one called the subject. And yet the subject's reality changed in drastic, impossible-seeming ways. Isn't that magic, when the magician's spell (words) changes reality?

## EXPLANATIONS OF HYPNOSIS

In trying to understand and explain hypnosis, most theorists roughly fall into two general classes, the credulous and the skeptical. The credulous theorists generally take the subject's behavior and reports at close to face value: when the subject doesn't react to the sniff of ammonia and reports that he smelled nothing, it is because he smelled nothing. Skeptical theorists see the phenomena of hypnosis as inherently unlikely or impossible, and so view the subject as involved in some sort of pretense: he smelled the ammonia and it was painful, but he acted as if he didn't smell it and lied about his experience.

### *Experiential Theories of Hypnosis*

I think the designation of the first class of theorists as "credulous" must have been coined by a skeptical theorist, since *credulous* has a connotation of naiveté. I shall substitute the term *experiential*, to indicate in a more neutral manner that these theorists accept the behavior and reports of the hypnotized subject as reasonably accurate indicators of their experiences.

The experiential theorists run into problems when they try to further explain the experience of the hypnotized subjects. *Why* can their experience be so profoundly altered? A major line of speculation has been that hypnosis involves profound physiological changes in the nervous system, comparable to sleep or drug-induced states. Unfortunately for this theory, these changes have not been found. While brain waves are a crude measure, the brain waves of hypnotized subjects are pretty much the same as those of people in ordinary states. Other physiological changes in the body turn out to be associated with the relaxation that is normally part of hypnosis. You can eliminate the relaxation and associated physiological changes with suggestion, though, yet the person can still remain deeply hypnotized.

We will probably find some sorts of physiological changes in hypnosis when our instrumentation becomes sufficiently advanced and sensitive. There are already hints of changes in the evoked potentials of the brain in conjunction with negative hallucinations, for example, but there are no gross changes to explain what hypnosis is at this time. Even more important, we are still unable to explain how such profound changes can be brought about just by talking to someone.

### *Skeptical Theories of Hypnosis*

The skeptical theorists assume that the behaviors associated with hypnosis are actually "normal," that is, within our ordinary capacity. They are just rare and unusual. When we see a lot of them together in the context designated hypnosis, we mistakenly think there is something special about them. Further, these theorists usually reason that the overt compliance with the suggestions is largely a matter of play-acting. The subject is not in some sort of mysterious hypnotic "state," but is in a normal state acting the part of a hypnotized subject.

Skeptical theories have been with us since hypnosis was introduced to our culture by Anton Mesmer as "animal magnetism." For example, a British physician stationed in India, James Esdaile, discovered that hypnosis could be used to anesthetize many patients for surgery. Chemical anesthesia had not been discovered yet. Ninety-five percent of patients who had surgery died from it, as well as suffering terribly. Esdaile reported that not only did his Indian patients feel no pain, but 95 percent survived the operation.

The British medical journals refused to publish his papers. When he returned to Britain, he put on a demonstration for his colleagues of the British College of Physicians and Surgeons. After hypnotizing a man with a gangrenous leg, he amputated it in front of them while the man lay there calmly smiling. The conclusion of his skeptical colleagues? Esdaile was fooling them. He had hired a hardened rogue for a gold piece to lie there and pretend that he was feeling no pain.

They must have had very hard rogues in those days.

### **THREE DIMENSIONS OF HYPNOSIS**

I believe the reality is that there is a wide variety of reactions to hypnotic induction, such that both the experiential and the skeptical positions are partly true, depending on what particular person at what particular time they are talking about.

Ronald Shor, a prominent investigator of hypnosis, talked of three dimensions of hypnotic depth, three different kinds of alterations of psychological functioning that could occur singly or in combination as a result of the induction. These dimensions were role-playing involvement, trance, and archaic regression. Variations in our mental functioning also occur along these dimensions in everyday life.

#### *Role-Playing Involvement*

The concept of role playing is something we all understand. An actor plays Hamlet on the stage, but he knows he is not Hamlet, only himself playing Hamlet. We play various roles in life that are clearly artificial; they are not us. When told that the research laboratory secretary needs to ask him some questions over the intercom, for example, the subject who is playing the role of a deeply hypnotized subject figures out the kinds of questions that are likely to be asked in that situation and speaks some reasonable answers aloud. What may start as deliberate role playing can change, though. The concept of role-playing involvement refers to the fact that we can start to become identified with a role we are playing, instead of just deliberately playing it. Our heart is in it; we forget that it is just a role. It can take over, and the role plays us.

A few people can simply play the role of a hypnotized subject in response to the induction, but for most the role will start to become automatic, unconscious to various degrees. At its extreme, the subject deeply caught up in a role involvement will show all the external behavior of a deeply hypnotized subject. Indeed, it doesn't occur to him that

he has any choice; he automatically complies with the expectations he has about how a hypnotized subject behaves; he forgets that he is playing a role. If questioned about his internal experiences later, though, he is likely to report that he experienced nothing out of the ordinary. His arm did not *feel* heavy, but there seemed no other reasonable thing to do than to lower his arm as if it felt heavy. Role-playing involvement is a form of identification, a powerful process we will examine in Chapters 11 and 12.

### *Trance*

The trance dimension refers to a fading of the intellectual framework by which we automatically evaluate our experiences. Shor called this framework *generalized reality orientation*. I have renamed it the *consensus reality orientation* (CRO), to take away that quality of obvious truthfulness that "general" implies and to remind us that our orientation to reality is very much a product of our particular culture's consensus of what is real and what is important. We shall deal with these cultural factors at length in later chapters.

Ordinarily, when someone says something to you, it is immediately and automatically evaluated in relation to the accumulated knowledge that forms part of the CRO. If a salesperson, for example, says, "This is the best product on the market," you immediately and automatically evaluate it in terms of your CRO knowledge that salespeople exaggerate, even lie, about the things they have a stake in selling. You take in the statement, but you add the qualification to it that it has questionable truth value.

As the CRO fades in response to the hypnotic induction, the hypnotist's statements stop being automatically evaluated. At the beginning of the induction, for example, the hypnotist might suggest, "It would be so pleasant to drift off to sleep." With a fully functioning CRO you might think about that statement: "Do I really want to go to sleep now? Is sleep really that pleasant? Might I miss something if I go to sleep? He's suggested I'm already sleepy, but do I really feel sleepy?" With the automatic processing of the CRO fading as you become more hypnotized, the statement becomes a simple, unevaluated statement of fact: it *would* be so pleasant to drift off to sleep. Your experiences become "dissociated," no longer automatically or consciously associated with relevant information, a point we shall examine at length later.

The trance dimension, then, is one in which experiences occur in isolation, without automatic or conscious evaluation with respect to your general CRO knowledge. Either there is no evaluation at all or the evaluation is done only with respect to a specialized set of knowledge peculiar to the trance state. A subject who is deeply hypnotized on the trance dimension experiences all the classic phenomena: they are perfectly real to him, and his externally responding as if he is experiencing what is suggested is indeed a straightforward reflection of his internal experiences.

### *Archaic Regression*

The archaic regression dimension of hypnosis evolves from the experiences we all had as children in relating to our parents. We were small, ignorant, and almost powerless, with

little self-understanding or internal control. Our parents were giants, possessed of knowledge, control, and power far beyond our understanding. Compared to us, they were godlike. We developed an automatized perception of them as godlike, as understanding us, as expecting unquestioning obedience. In turn they rewarded us by caring for our physical needs and loving us. Our expectations were apparently validated.

Underneath the surface of our sophisticated adult selves, this set of automatic attitudes still exists and can operate without our knowledge. Freud spoke of it as *transference*: we transfer this childlike cognitive/emotional attitude onto some people in our world, often with confusing and unhappy results. Suppose your boss asks you to perform some task for him, and in doing it part of your mind makes him into your father. All your expectations of how your father ought to relate to you start to color your relationship with your boss. Since he doesn't know he's supposed to love you and understand your deepest feelings without your needing to express them overtly, his behavior, by ignoring these needs, seems to reject you. You begin to think that he doesn't like you. Misunderstanding can pile on top of misunderstanding.

One response to the induction of hypnosis is to unknowingly transfer the attitudes you had toward one or the other (or both) of your parents onto the hypnotist. The hypnotist now has the sort of magical qualities your parent had when you were a child. Of course the things he suggests become true. It would be *bad* if you didn't obey and experience the things the hypnotist/parent says. This can make for occasional intense emotional episodes around the hypnotic procedure, as well as overt external compliance with the hypnotist's suggestions. Internally the suggestions may be experienced with great reality.

A hypnotized subject can show strong degrees of psychological change along one or more of these dimensions. All of these dimensions of altered psychological functioning affect us far more than we realize in everyday life.

### **AVERSION TO "TRANCE"**

In writing the above descriptions of hypnosis and some of the internal processes underlying it, I have mostly written in a scientifically neutral style, a sort of "here are the facts, I make no judgments about them" approach that is supposed to characterize the objective scientist. Even so, what sort of feeling do you get about the hypnotized subject? Though the subject agreed to be hypnotized in the first place, hasn't he given up his will to someone else and yielded to more "primitive" psychological functioning? The hypnotist now has an extremely large and powerful (but not complete) control over the subject's reality.

I think that part of our aversion to a trance state such as hypnosis arises because at some level we recognize a very unpleasant fact. We are already in a trance. We have spent too much of our life in one or another kind of trance. Our behavior and our internal experiences *are* strongly controlled by others, and we have little hope of change. Hypnosis only stands out as an obvious "trance" because the particular things we do in it are socially

unusual.

Modern psychological research has discovered many of the mechanisms whereby our trancelike state is induced and maintained, without discovering the fact that we are in a trance. Gurdjieff recognized our trancelike state, studied it in great detail to see exactly what the factors were that kept us in this waking trance, and provided hope of waking up and methods for waking up. If an outsider, a hypnotist, can have such great effects on us, what would be possible if we could take control of our own minds? An outside hypnotist is also limited in that he is probably just as entranced as we are. Suppose we were our own controllers and were awake? The nature of waking trance and our possibilities for waking up are what this book is about.

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