

Hypnosis or Meditation?

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DEDICATION

This book is dedicated to my clients, patients, and students past, present, and future. This is also dedicated to my parents, and to my wonderful wife, Susan.

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My further gratitude and appreciation goes to all of you, the real Magic Mike Likey fans, who after thirty-four years, still remember and support me.

Nothing's forgotten. Nothing is ever forgotten.

DISCLAIMER

Advice and instruction on alternative-wellness techniques herein such as hypnosis, meditation, scientific-prayer, etc. as well as lifestyle suggestions, vitamin intake, etc. are for explanation purposes only and are not substitutes for, nor should be mistaken for conventional medicine.

Always seek first the guidance of your healthcare professional before endeavoring to add complimentary medicine/alternative-wellness to your conventional healthcare regiment.

CHAPTER 1-INTRODUCTION

I find it necessary to write this essay, entitled “Hypnosis or Meditation?” primarily because of my passion for my professional work as a Hypnotherapist, and also because of my passion for teaching Meditation. It is also because I have successfully treated and assisted my clients in re-empowering themselves using either Hypnosis or Meditation, without limiting myself or the patient to one method or the other, that I feel compelled to write this essay, as well. The areas of Non-Metaphysical (or Clinical) Hypnotherapy I have, and am currently practicing in, include: Weight-Control, Smoker’s Therapy (Stop-Smoking), Self-Esteem, Relaxation, and Fear Elimination Therapy. The areas of Metaphysical Hypnotherapy I am currently working in, include Past-Life Regression, Soul (or Life-Between-Lives) Regression, and I have done so for more than five years. I have seen incredible breakthroughs for my clients and patients as a result of all of these practices.

The areas of Meditation I am teaching, currently, are both Western (techniques, including, but not limited to, positive affirmations and visualizations for altering unwanted thoughts, behaviors, and improving health, overall) and Eastern Meditation (for experiencing God-Mind, Higher Consciousness). I was given the Eastern Meditation techniques more than twenty-years ago, by an Indian Mystic, or Mahatma (“holy-person”) while I was on a journey of personal self-growth. These “keys” for going inward, and the resulting experiences, have been providing clear answers for me on every level of my existence ever since. It is no wonder that I am an enthusiastic advocate and teacher of Meditation!

In addition, I have been teaching both “moving-meditation” (Tai Chi) and “stillness-meditation”, (Qi Gong) for five years.

One might categorize Qi Gong as “stillness-meditation”, as the practitioner stands, sits or lays in silent contemplation and focuses, while

Tai Chi may be called “moving meditation”, because the practitioner meditates while performing various graceful movements. The goal of Tai Chi and Qi Gong is not to experience the Divine, according to Wang and Liu (1995), but merely to improve and maintain one’s health. It is also because of my professional background and years of experience that I feel qualified to write this essay.

It has been my professional observation over the years, that, “Clinical” Hypnotherapists will often limit their practice to only employing Hypnosis only, while often ignoring and neglecting Meditation, even when qualified and capable of practicing it, for their clients, if that method might better suit the “personality” or receptiveness of that client. Within the context of this work, I intend to clearly define the terms “Clinical Hypnotherapy”, “Meditation”, and “Self-Hypnosis”, as they will be utilized within this essay.

I intend to also describe the techniques, goals and brainwave-states unique and common to Hypnosis and Meditation, and the specific, unique and common benefits that Meditation and Hypnosis has had on my patients.

In addition, I intend to illustrate how Clinical Hypnotherapists may apply Meditation or Self-Hypnosis for the Metaphysical as well as non-Metaphysical (Clinical) benefit of their patients, as well as how Practitioners of Metaphysics/Meditation Teachers may apply “Clinical” Hypnosis for the Metaphysical and non-Metaphysical (Clinical) benefit of their students and clients. I intend to do this by sharing a number of practical examples from my case-files. Of course, the names and details of my clients have been changed to maintain their anonymity.

It is my hope, that by writing this essay, more Metaphysicians and Clinical Hypnotherapists will successfully treat and assist their clients, students, and patients in re-empowering themselves, by not limiting themselves or their clients, to employing one method over the other.

You decide: “Hypnosis or Meditation?”

CHAPTER 2-REVIEW OF LITERATURE

The amount of literature that exists on the topics of Hypnosis and Meditation is endless. So too, are the schools of thought on each of them. Everything from “channeled” information, to the findings of science, clinically analyzing the brainwave-states, and measuring the Meditation and/or Hypnosis experiences.

After graduating from the Robert Shields College some years ago, (I will be referring to information from this course for this thesis) where I earned my Clinical Hypnotherapy degree, in addition to doing much of my own subsequent research which included almost every single hard-copy and online journal regarding Hypnosis for therapeutic purposes, I began to appreciate that online (or “Distant-Learning”) school from England that Principal Shields started back in 1986.

Robert Shields, himself, started off as a Metaphysician, earning a solid reputation in England, which included many regular television, and newspaper appearances. At the age of forty, (he is well-past retirement age at this writing) Shields entered the more clinical field of Hypnotherapy, where he continued to help others to grow, and to heal. What eventually followed, was a Hypnotherapy school, founded by Shields. This college was to be more than a school that teaches their students how to do a simple Induction, (more on this later) a Deepening, (again, more on this later) eventually resulting in a client who remembers their former traumas. This was, and is, a school that ethically educates the potential therapist in how to safely and effectively use hypnosis for freeing the client of debilitating thoughts and behaviors. I have even learned the necessity of qualifying (or screening) clients, lest permanent emotional damage results in hypnotizing them. Unlike many other schools, (I personally know of a

colleague, who upon graduating from a local Hypnotherapy school, now takes on any and all clients) Shields also informs us of what to look for in a client, (through a question-period) which would indicate to us that we should not hypnotize them, nor take them on as Hypnotherapy-clients. (This includes such “contra-indications” as depression, and being on anti-depressants within the last six months, for example) What is included, as well, (I understand that many Hypnotherapy schools do not include these) are small courses on N.L.P., (Neuro-Linguistic Programming) Psychology, Past-Life Regression, Self-Hypnosis, Dream Analysis, and much more, which I have researched, can separately cost thousands and thousands of dollars each. Methods for “Uncovering” (or discovering) the root-causes of unwanted behaviors, in addition to Weight-Loss and Stop-Smoking therapies, make for an intensive, (and exhausting) but comprehensive course.

What I have found the most impressive, however, is that Shields has never limited himself, his students, nor his clients, to any one specific mode of therapy or treatment, be it metaphysical, or clinical in nature. The client’s good health is all that matters. If a Past-Life Regression will free them from a current-life trauma, because they understand, now, where they are coming from as far as their soul’s growth is concerned, according to Goldberg (1998) so be it. Or, if it takes numerous sessions of uncovering, year-by-year, a client’s activities until the specific trauma which caused their current emotional debilitation is discovered, so be it, whatever it takes.

Utilize metaphysical or clinical methodologies, this is one of the many things I got out of my education with Robert Shields, whether this was his conscious intention or not: a balance of the metaphysical, as well as the clinical. Thankfully, both my professional and personal backgrounds include the Metaphysical, as well as the Clinical.

I will be referring to Robert Shields College of Hypnotherapy course, (1986) for the Clinical Hypnotherapy techniques contained there in. Dr. Bruce Goldberg is a Doctor of Dentistry, with a background in Biology, Chemistry and Counseling Psychology. Yet he is most famous for his Oprah, Donahue, Montel, and Regis television appearances on Past and Future-Life Regressions. He sells countless numbers of books, tapes and CD’s on these subjects, which are Metaphysical in nature, and yet his education is nothing less than medical/scientific/clinical in nature. He is a Clinical Hypnotherapist, yet one of his many books, “New Age Hypnosis” (published in 1998) contains “how to” topics such as “receiving spiritual guidance from your higher self or masters”, “contact departed loved ones”, “contact the souls of unborn babies”, and so on. I am sure that Dr. Goldberg knows what sells, but he also knows who he is, what his passions are, and what his clients need. He, too, doesn’t limit himself to utilizing Metaphysical or Clinical methodologies, in order to assist his clients. For

this reason, I refer to Dr. Goldberg's book, for some definitions, and to cross-reference techniques (both Metaphysical and non-Metaphysical) for the purposes of this thesis.

William W. Hewitt, (deceased) with his background as a professional writer/editor, Clinical Hypnotherapist and professional Astrologer, lectured on such topics as mind power, self-improvement, and Metaphysics. His extensive series of books and tapes were on such seemingly-diverse themes as Psychic Development, Tea-Leaf Reading, Stop Smoking and Weight-Loss. Upon closer inspection of his Hypnosis techniques, one will see a great overlap between Metaphysics and the clinical. It is for this reason, that I make reference, for the purposes of this thesis, to his book "Hypnosis for Beginners" (1997) for both the clinical and metaphysical Hypnotherapy and Self-Hypnosis techniques.

In his nearly-three-hundred-page-book, "The Everything Hypnosis Book", (2003) Michael R. Hathaway spans the spectrum from Meditation, to Clinical and non-Clinical Hypnosis, covering such subjects as the history of Hypnosis, "Instant Hypnosis", "Reasons to Change a Habit", "Improving Your Health", Meditation techniques vs. Hypnotic techniques, and much, much, more. This is an easy-to-read, well-illustrated tome (in the style of those "Idiot's Guide" books) and that's why I liberally refer to it for comparisons and similarities between Meditation and Hypnosis.

Finally, Dr. Paul Leon Masters' "University of Metaphysics" Doctorate Program (1989) contains much information regarding the use of Meditation, and Self-Hypnosis for Metaphysical, as well as Clinical purposes. I will make many references to the material from this comprehensive program.

CHAPTER 3-METHODS

Most of the potential clients who approached me about Hypnotherapy as a means of altering unwanted behavior such as smoking, fear elimination, low self-esteem, and over-eating, generally, I have discovered, did not concern themselves with, nor did they necessarily believe in living a spiritual existence, nor did they particularly have an interest in, or belief in Metaphysics or Meditation. There was even a certain amount of skepticism on their part about the effectiveness of Hypnosis!

This is ironic, as daydream, Meditative, light-Hypnotic and “Alpha” brainwave-states have been scientifically measured and proven to be identical, according to Shields (1986).

These potential clients were, however, generally on a *journey of self-improvement and growth*. Those who inquired about Hypnotherapy as a means of exploring past and between-life existences, discovering their angels and guides, etc., had a definite interest in things Metaphysical, we had observed. They, despite, belief in the effectiveness of Hypnosis, had sometimes requested Guided-Visualizations, and/or Meditations to accomplish all of this, instead of Hypnosis, because they did not realize that it is all the same thing, that is to say, the brainwave-state under light-Hypnosis, is the same as a Meditative, and/or daydream-state, according to Shields. (1986)

They sometimes doubted that they could be hypnotized, in which case I provided for them the statistics that only two- percent of the population cannot be hypnotized, as stated by Shields (1986). I then went on to explain and to define, in scientific terms, the hypnotic-state, comparing it to a daydream-like state, as stated by Hewitt (2004).

We did suggestibility tests, as described by Hathaway (2003) or susceptibility test, as referred-to by Shields (1986), with these potential clients, which proved to both the potential patient and the Practitioner that

they (the potential patient) could indeed be hypnotized.

They too, were on a *journey of self-discovery and growth*. Those who had approached me to teach them Meditation, were more concerned with matters Metaphysical, as opposed to the logistical, problem-solving, areas of life, we learned.

They generally, intended to use Meditation as a means of stress-alleviation and/or experiencing God.

Often unaware of the other, *practical* benefits of Meditation such as improving self-esteem, stop-smoking, weight-control, lowering blood-pressure, etc., I attempted, occasionally succeeding, in educating them to these facts.

They too, were on a *journey of self-discovery and growth*. It is interesting to note that although I had found in my private practice, both group settings and one-on-one, that, for the most part, all of the aforementioned, in regards to clients' requests and needs were generally true, there were some exceptions, although they were few and far between. I am grateful that my professional, as well as my educational background allowed, and still allows me, to provide the choices of either Meditation or Hypnosis for the potential client. In regards to other professionals and/or Practitioners in the field of Metaphysics, teachers of Meditation and Clinical Hypnotherapists, I hope that there are exceptions to every rule, although, thus far I have yet to discover this.

I can only, therefore, refer to my own professional experiences in regards to employing Meditation in place of Hypnosis, and vice-versa.

That is, sometimes I (as a Clinical Hypnotherapist) will utilize Meditation/Guided Visualizations with a client to alter and improve their self-esteem, or even uncover several previous lives, for the purpose of the client understanding their true nature and purpose this time around. Hopefully other "professional" Clinical Hypnotherapists will also have the skill and leeway to accomplish this, if he/she is flexible enough to go with the wishes and belief-system of the client.

Someone with little, or no Higher Education/degree, should not attempt any serious therapy with a client for legal and moral reasons. The skills necessary might not be present. This is why, I have found previous to my Clinical Hypnotherapy degree, for example, that practicing/teaching Meditation mainly for the purposes of relaxation, and/or contact with inner Higher Consciousness was acceptable and effective for everyone, as opposed to using Meditation as a means of "problem-solving", that is, altering unwanted behaviors and habits, for example, which is best left to a professional. It is even recommended, that to avoid potentially negative legal ramifications, that rather than, as a Metaphysician, one hypnotizes a client, or engages in "Hetero-Hypnosis," as Masters (1989) refers to it as, that they teach the client how to hypnotize themselves! I will now discuss

some specific cases and instances, where Meditation, Self-Hypnosis, and Hetero-Hypnosis were interchangeable for the particular needs of the client.

“Angela” (not her real name) was an attractive, educated, and motivated forty-year-old, with self-esteem issues due to her weight. She was working on losing twenty pounds, and quickly succeeding, when she approached me for Hypnosis for weight-loss. Although she had already been seeing a Hypnotherapist for weight-loss, she was not getting the results she desired.

She was somewhat skeptical as to the effectiveness of Hypnosis to begin with, and this was hindering her progress. I suggested that instead of Hypnosis, we could try Meditation as a means of allowing her to “let go” of past, hurtful events, and healing them through “Mind-Treatments Affirmations”, as described by Masters. (1989) Furthermore, I suggested, that throughout the weekly Meditation-course that I was offering her, we would also do weekly “Meditational Programming Treatments”, as described by Masters, (1989) if she would follow up with her own daily “Mental Rebirth Treatments”, as provided by Masters (1989), that I would be teaching her. This, I suggested, would help her to rebuild her self-esteem while she was losing weight, so that she would never again eat to make herself feel good, but merely go inward for strength. In the process, the goal would also be to experience the Divine within. I mentioned that I would teach her a different Meditation technique each week, so that she could decide what worked best for her. She agreed. The first week, we started with the “Candle Concentration Technique” as described by Masters (1973), to get her used to focusing. One might say that we were doing a kind of Hypnotherapy/Self-Hypnosis program for self-esteem, and indeed, if we did say that, she psychologically wouldn’t be open to it, because of the previous ineffectual Hypnosis experiences. The addition of going inward to experience God-Mind/Higher Consciousness/The Divine, etc. made the sessions both Western and Eastern Meditation, according to Masters (1989), as opposed to “Hetero-Hypnosis”, as referred-to by Masters (1989) which would have necessitated the use of “Inductions” and “Deepenings” according to Shields (1986) to guide her into an Hypnotic-state, which she didn’t want, regardless.

As weeks went on, Angela felt better and better about herself, lost another ten pounds, and could now see light inside of herself with her eyes open or shut, reinforcing her faith/belief in matters Metaphysical! Upon completion of our weekly one-on-one Meditation course, Angela decided to join our weekly group-meditation evenings, which to this day she still attends.

Angela’s case clearly shows how Meditation was substituted for Self-Hypnosis, to effectively help her to improve her self-esteem, and eventually to help her to succeed in losing weight. Further on, you will see an example

of Jeff's case, where Self-Hypnosis produced similar results, that of building positive self-esteem.

"Sally", (not her real name) one of my Reiki-students, approached me one day for Hetero-Hypnosis, as referred-to by Masters (1989) to help her release a past emotional trauma, which, she believed, prevented her from attracting and maintaining intimate relationships. Sally was a smart, ambitious, thirty-eight year-old, with a quick, and skeptical mind. The very fact that previously, she requested that I teach her Reiki, a Metaphysically-based system of energy-healing, was a breakthrough for her and her somewhat cynical and skeptical mind.

She practiced Reiki regularly on others and herself, for minor issues. This day, she wanted to rid herself of an emotional obstacle that she believed was preventing her from living life to the fullest. She was also consciously aware of what the event was, which made it easier for me. I might have had to employ Hypnosis to also uncover this incident, which could have been locked deep within her unconscious mind, but not in this case. A lot of time and money would now be spared for her.

Because she was aware of the relatively-minor event, I felt that this allowed her the luxury of choosing whether she preferred "Hypnosis or Meditation." She suggested Meditation, not because she was skeptical of Hypnosis, (indeed, her sister was successfully treated previously using Hypnotherapy) but because it felt "less rigid" for her. I agreed.

Because this was "Meditation" and not "Hetero-Hypnosis", or one-on-one Hypnosis, as referred-to by Masters (1989), I didn't have to do a susceptibility test, as described by Shields (1986).

She was already susceptible, willing and comfortable to my guiding her into an altered-state. The fact that she trusted me also helped. I could proceed, feeling unhindered by an Hypnotic-script, using only improvised guided-visualizations and getting her to focus on her breathing to accomplish what an Hypnotic Induction and Deepening, as described by Shields (1986), would do, which is guiding the patient gently into an altered-state of consciousness, or Meditation, which is the same brainwave-state as being in an Hypnotic-trance, or Alpha brainwave-state, according to Shields (1986). Others, like Hewitt (1997), also refer to this as a "daydream"-state. She had a positive emotional release, as opposed to a negative one, or "abreaction", as described by Shields (1986), which might have occurred had she remembered the actual event, "re-living it," and then letting it go; this is often as traumatic as the original incident.

I have researched that in the long-term, this "re-living" and "letting go" does not benefit the patient, as the unwanted-symptoms caused by the original trauma, often return days, weeks, months, or years later. So why re-traumatize the patient in the first place?

Sally slowly began to welcome into her life intimate relationships, which she has managed, to this day, to maintain, when previously, for her, this was either difficult or impossible.

Sally's case was a successful example of employing Meditation instead of Self-Hypnosis or even Hetero-Hypnosis, as described by Masters (1989), for the purposes of the client re-empowering themselves by releasing a previous trauma. Similar results could have been achieved through Self-Hypnosis. Upon guiding the client into a Self-Hypnotic-trance, utilizing "Inductions" according to Hewitt (1997), "uncovering" methods such as the "Diagnostic-Scanning Technique", referred-to by Shields (1986), or "Free-Floating Regression", as taught by Shields (1986), for determining at what age, and specifically what trauma(s) occurred, and then eventually, employing Self-Hypnosis to "re-program" the person's thoughts and unwanted responses to the past trauma, as per Hathaway (2003).

Teaching Self-Hypnosis to Jeff, a Computer-Technician, was more effective than employing Meditation, in his case, for building and maintaining, positive self-esteem.

Jeff came to me one day, at the suggestion of his friend, a former client of mine. It was my "Clinical Hypnotherapist" degree that made this particular method of self-help more palatable for Jeff, who "avoided New-Age stuff like the plague!" Jeff shared with me, on this particular day, the fact that at thirty-three, he avoided the singles' scene because he was too shy. As a youngster growing up, he was teased by his peers for being overweight. He had somehow managed to conquer his weight-problem, but not his self-esteem issues. He dated occasionally, but expressed a willingness to date more frequently, and eventually get married, except that he didn't always have the "courage" to ask women out. Other than that, Jeff appeared to be a relatively well-adjusted, well-dressed, affluent, and educated adult. Self-Hypnosis for building self-esteem was one of my specialties; I even was marketing, at the time, an audio-CD for this purpose. Even if I would have been familiar with, at that moment, the benefits of teaching Meditation for daily Spiritual Mind-Treatments and Spiritual Mental Re-Birth Treatments, as described by Masters (1989), for the purposes of building positive self-esteem, it would still have been appropriate to teach Jeff Self-Hypnosis for building positive self-esteem. He just wasn't comfortable with anything else; he was even familiar with the scientific end of it all, including quoting sources on brainwave-states and their functions.

After determining that Jeff was still a candidate for hypnosis, i.e.- a susceptibility test as taught by Shields (1986), involving his eyes shut tight with arms outstretched, palms up, at my voice suggestions that he imagine a

helium-filled balloon was tied to one of his wrists, while in his other palm he held a large, heavy book; one arm went quickly down as the other went quickly skyward, confirming his suggestibility., as described by Hathaway (2003). As well, we determined that he had no contra-indications, as referred-to by Shields (1986), such as depression or anti-depressants taken within the last six-months. I proceeded with a series of long, guided-visualizations, or “Inductions”, as well as “Deepenings,” as taught by Shields (1986), to insure that Jeff was ready for this six-part therapy. For the Inductions and Deepenings, I decided to use the “sea-shore” and “stairs” visualizations, as taught by Hewitt (1997), initially employing some relaxation-exercises involving visualizing a mountain-top view and meadow, streams, etc. visualization, as described by Goldberg (1998).

I suggested that Jeff will go deeper and deeper each time that he hears my voice, as suggested by Hewitt (1997), to reinforce that listening to the Hypnosis-CD I give my patients at the end of the last treatment, will work. Each time Jeff came for his session, I reinforced a particular positive-self-esteem suggestion, then taught him how he could, anytime, any place, hypnotize himself, giving himself any of the 24 positive self-esteem suggestions from the sheet I supplied him, as well.

Jeff eventually went on to meet, date, and marry the “woman of his dreams”, even starting a family.

This was a case where Self-Hypnosis, as opposed to Meditation combined with positive affirmations, was the answer to someone building their self-esteem. I could have easily substituted (had I been familiar with, at the time) Meditation, Spiritual Mind-Treatments, and Positive Affirmations combined with Spiritual Mental Rebirth affirmations/visualizations as taught by Masters (1989), as in Angela’s case, for Jeff’s growth.

These previous examples from my case-files indicate how Meditation could have easily been substituted for Self-Hypnosis, and vice-versa, for the effective treatment/altering of unwanted behaviors of the particular patient. All that is really needed is the flexibility and education of both the practitioner and the patient.

CHAPTER 4-FINDINGS

Firstly, let's clarify the terms "Hypnosis", "Self-Hypnosis", "Clinical Hypnotherapist" and then "Meditation" "Hypnosis" and "Self-Hypnosis" are techniques that enable one to achieve an altered-state of Consciousness, (the day-dream state) deliberately, and direct one's attention to specific goals in order to achieve them, as taught by Hewitt (1997).

Strictly speaking, the term "Clinical Hypnotherapist" refers to one who has a professional degree in the area of hypnosis and psychotherapy, according to Shields (1986), and may apply this to help patients to rid themselves of unwanted behaviors such as over-eating or smoking, for example, by guiding them into a state of hypnosis using any number of "inductions" or visualizations. "Self-Hypnosis", according to Shields (1986), may be taught to the patient in order for them to relax more, boost their self-esteem, motivate themselves, and to support their willingness to not smoke, for example. This is accomplished by the patient guiding themselves into an hypnotic-state using their own inductions and visualizations. According to Masters (1989), for legal reasons, the Practitioner should only teach "Self-Hypnosis", rather than practice "Hetero-Hypnosis" i.e., Hypnosis induced upon another. As a Metaphysician and Clinical Hypnotherapist, I have found that employing "Hetero-Hypnosis" for uncovering the previous, and between-life existence of a client rewarding for themselves, as they discover in this way their soul's purpose in this lifetime.

"Meditation", according to Dr. Masters (1989), is accomplished by using one or more methods to withdraw the five senses and the mind from its attention to the world outside oneself and to make contact with the inner mental world of one's own mind. The popularity of Meditation in North America is thanks to the popularity of the Beatles in the 1960's and their teacher, the Maharishi Mahesh Yogi, whom they sought out for

personal growth, according to Masters (1989).

Meditation may be divided into “Eastern”, or Transcendental (experiencing the God-Mind within) and “Western”, or using this altered-state to allow positive prayers and affirmations into one’s unconscious mind for the purposes of improving one’s “outer-self”, referred-to by Masters (1989).

We would also like to clarify, at this point, the individual Hypnotic-states, and their relationship to each other.

Scientists, employing a device called an electroencephalogram or EEG, measure and define the various electrical-impulses put out by the human brain during its various stages of consciousness, described by Goldberg (1998). These waves emitted from the brain are measured in “cycles-per-second”, or cps. For example, the wide-awake state, or “Conscious Mind Proper”, as referred-to by Goldberg (1998), is referred-to as Beta, and is generally 14-20 cps; the “Subconscious Mind”, as described by Goldberg (1998), or Alpha-state, is the brainwave-state that most Hypnotherapists desire to get their patients to, for it is the state that allows the patient to be the most open, or susceptible to, positive affirmations and suggestions, in other words, anything said to the patient while they are in Alpha-state will “sink-in” or stay in their subconscious mind. This is the same brainwave-state as “daydream state”, and it is also the same brainwave-state as Meditation, although sometimes the Meditative-state will dip deeper, that is, into Theta, as described by Hewitt (1997).

Psychic experiences sometime take place in Alpha, according to Hewitt (1997). It is generally 7-14 cps. Theta’s frequency-range is generally 4-7 cps, and this is where hypnosis can sometimes take place as well, suggested Hewitt (1997). All of our emotional experiences seem to be recorded in this state, and is the special range where that opens the door of consciousness beyond hypnosis into the world of psychic phenomena. Theta is the range where psychic experiences are most likely to occur, according to Hewitt (1997). Total unconsciousness is measured at 0 to approximately 4 cps and is called Delta. Not much is known about this range, states Hewitt (1997).

According to Dr. Michael Newton, best known for his “Life-Between-Lives” or “Soul Regression” work, states that there are actually three-levels of Alpha-state: (a) The lighter-stages, used for Meditation, (b) The medium stages, generally associated with recovering childhood traumas, is often useful for behavior modifications such as stop smoking, gaining/losing weight, etc., and (c) The deeper Alpha-states, where past-life recovery is likely to occur, according to Newton (2004). I personally employ Theta-stages for any kind of Past, and/or Soul-Regression work, in addition to stop-smoking and weight-control therapies. I generally employ Meditation (Light-Alpha stages) for behavioral modifications such as building positive self-esteem, which often leads the patient to losing weight on their own. My

clients and I have made great strides towards their building their self-esteem through the use of Meditation, as opposed to say, the deeper-stages of Theta, during Self-Hypnosis, which have proven successful for the clients as well. It is often less intimidating for the client, if we use Meditation for the aforementioned purposes, as they may have some issues about being hypnotized, such as skepticism, according to Newton (2004), fear of staying hypnotized, or even of revealing personal secrets, according to Shields (1986).

There are great similarities in the methodologies used in entering into a Meditative, and/or Self-Hypnotic-state.

Firstly, in the initial stages of Hypnosis and Meditation, both attempt relaxation and concentration simultaneously, according to Masters (1989). That is to say, that a focal point of concentration may be utilized, (in Hypnosis, for example, a spiraling hypnotic-wheel, a point on the wall or ceiling, the sound of a metronome; in Meditation, focusing, with closed eyes up into your third-eye, or the use of a candle-flame) in order to achieve a mental-focus and thereby relaxing.

I agree with Dr. Masters (1989) when he states that a Student of Self-Hypnosis is better at practicing Meditation, and a Student of Meditation is better at practicing Self-Hypnosis, because both students are used to the same basic initial methodologies for achieving relaxation and concentration simultaneously. It would, therefore, not be so unimaginable, that if one were to walk down the hallway of an office-building where people were engaging in Meditation in one room and Self-Hypnosis in another room, that one might see a Meditation student sitting, gazing at a candle-flame, and likewise, the student practicing Self-Hypnosis gazing at a bright-light or a pendulum, according to Masters (1989). Both are using a “fixation-object” to concentrate their mind’s energies or to achieve mental focus, for the purposes of relaxation.

Insofar as the similar goals of Self-Hypnosis and Western Meditation are concerned, both are essentially concerned with improvement in one’s outer self. We have already described how we have helped others to achieve this, employing either Self-Hypnosis or Meditation. Either methodology is as effective. The only limitations are those imposed by potential patients, or even the Metaphysicians or Clinical Hypnotherapists themselves, often because of the misinformation and lack of acceptance of Hypnosis by the medical profession until recently, and being branded “the work of the devil” by the Christian Science Church, as stated by Masters (1989), and the competence level of the Practitioner themselves, according to Shields (1986).

Recently, I came across a colleague’s brochure on Hypnosis, in which I was delighted to find the quote: “All Hypnosis is Self-Hypnosis.” This quote, I feel, takes away the potential fear surrounding Hypnosis, legally

also shifting the emphasis from “Hetero-Hypnosis”, as Masters (1989) calls it, to “Self-Hypnosis”, desirable, according to Masters (1989), as previously outlined.

A Clinical Hypnotherapist may insure the reality of this quote thusly: When utilizing susceptibility tests, for example, as taught by Shields (1986), one may determine whether the patient is:

A) Suggestible to direct suggestions from the Hypnotherapist; categorized as “Authoritarian”. In my opinion, undesirable, as the goal is always to have the client self-hypnotize themselves.

B) Able to give themselves suggestions internally; categorized as “Permissive”. Desirable, because they can tell themselves that it’s okay to relax into a Meditative/Self-Hypnotic state, or Alpha using their own will and desire.

C) Able to use their heightened imagination for entering into Self-Hypnosis/Meditation; categorized as “Creative”. This is also desirable as they are using their own will/skills to enter into Meditative/Self-Hypnotic state.

The more control of their own free will the client knows they have, and the more the patient participates in the “Induction”-process, the more in control of their free will they will feel they have, and the less fear and resistance they will have entering into Meditative/Self-Hypnotic state.

The client may therefore, truthfully and accurately refer to the process as “Self-Hypnosis” which is more desirable, not “Hetero-Hypnosis”, or “Hypnosis”. Therefore, the statement “All Hypnosis is Self-Hypnosis” will promote the useful and legal concept/belief that the patient utilizes their own free will to enter into Meditation/Self-Hypnosis. The exception would be with patients who, for whatever reasons, need an authoritarian figure, and/or someone to tell them what to do. They would fall under the susceptibility category of “A”, previously referred to above. These patients will willingly and more easily, in my experience, go with the verbal Hypnotherapy inductions/guided-meditations specifically designed to relax them into an altered-state, but strictly speaking, this would be categorized as “Hypnosis”/“Hetero-Hypnosis”, not “Self-Hypnosis”, in which case a waiver-form, signed by the potential client in any and all cases, could relinquish the Hypnotherapist of any legal and financial responsibilities, in the case of patient dissatisfaction, for whatever their reason.

I have described generally, initial methods for Hypnosis/Meditation common to both, as well as the goals common to both, but let me describe now, in greater detail, the techniques and philosophies that differ between the two, in other words, those that clearly differentiate between Meditation

and Self-Hypnosis.

It is crucial that I reiterate, at this stage, what I said earlier about professionals, as opposed to non-professionals, utilizing Hetero-Hypnosis: unless you have some sort of recognized and legal degree/certification/license to practice Hetero-Hypnosis, I recommend against its practice. Employ Meditation. There are no legal requirements, nor are there any therapeutic promises or suggestions in regards to Meditation, other than for promoting relaxation, particularly, in general, with Western Meditation. Utilizing positive affirmations for strengthening self-esteem, in Meditative-state, will accomplish, as I have outlined earlier, just as much as the more lengthy, and costly, Hypnosis for Self-Esteem. If you are blessed enough to have a legal Hypnotherapy degree, then utilization of both, in one's Metaphysical practice, is most desirable, according to Masters (1989).

Strictly speaking, the terms and specific "Inductions" and "Deepenings" techniques, as described by Shields (1986) are exclusively employed in Hypnosis and Hetero-Hypnosis, as opposed to Meditation; but the concentrating inwardly on one's third-eye, and/or mental/verbal uttering over and over of a mantra, or the focusing on one's breathing, as is employed in Meditation, also accomplishes the same goals of focusing and relaxing, but is not referred-to as an "Induction" and "Deepening", when discussing Meditation.

Initially, according to Goldberg (1998), fixation-points such as a candle-flame, or spiraling hypnotic-wheel for relaxation and focusing may be used in Hypnosis, but Inductions and Deepenings as described by Shields (1986) or Hewitt (1997) must eventually be used to guide the subject into a deeper state of Hypnosis. Whereas, with Meditation, the repeated focusing inward, as previously described, results in achievement of the desired Alpha-state, required for both Hypnosis and Meditation. The reasons for the differences are cultural and scientific, that is to say, that Meditation came to North America via the spiritual-mystique of India, (as previously discussed) while Hypnosis and its origins were scientific: During the 1840s and 1850s, according to Hathaway (2003), Dr. Elliotson successfully treated patients for epilepsy, hysteria, headaches and rheumatism using Hypnosis. He also, during this time in England, performed over 200 painless operations, again, employing Hypnosis.

A specific example of an Induction, according to Shields (1986) is a "Progressive Relaxation", where in the subject is asked to concentrate on relaxing each and every part of their body, one-at-a-time. Then, according to Hewitt (1997), a Deepening such as imagining oneself walking down a long and winding staircase, one-step-at-a-time, until one reaches the bottom is employed. A variation of this, according to Shields (1986), is the escalator, or lift (British word for elevator) method, whereby the subject is

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asked to “see” in their imagination, each numbered-floor lighting up in the elevator, as they are “descending lower and lower, deeper and deeper into relaxation”. Of course, one might similarly state here that visualizations are often used in Meditation, which are sometimes referred-to as “Guided Meditations”, whereby the Meditator is visualizing themselves walking on a beach, for example, which Hewitt (1997) also employs in Hypnosis. Again, the end result is common to both Meditation and Hypnosis: entering into the altered-state of Alpha brainwave state.

CHAPTER 5-DISCUSSION

The findings expressed within this essay will impact society in a number of positive ways, provided that these findings are willingly and truly attempted and practiced consistently by professionals in the field of Metaphysics as well as in the field of Clinical Hypnotherapy.

Although the individual levels of competency of these Practitioners will vary greatly due to varying academic and practical experience, in addition to the individualistic views, attitudes and personal perspectives of these Practitioners, in addition to their varying levels of skepticism and confidence, one must still acknowledge the measurable positive impacts of the practices should they be put into general use.

For example, no longer will a patient be limited to the standard choices of treatments, Inductions and Deepenings offered by the Clinical Hypnotherapist, as outlined previously. If the patient feels more comfortable staring at a candle-flame, and focusing on their breath, or sitting cross-legged, mentally repeating an affirmation or mantra for the purposes of entering into an altered level of consciousness, as opposed to staring at a spinning, spiraling Hypnotic wheel, this would now be possible, for that same brainwave-state to be entered into.

Conversely, if the patient feels at home with the more clinical methodology of watching that hypnotic spiraling wheel, versus having incense and New Age music playing in the background as they focus inwardly up into their third-eye, they now have that option for entering into an altered-state of consciousness. If someone wishes to experience their Past Lives, but they feel more comfortable in a more clinical atmosphere, then the Hypnotherapist may guide them into those realms using the more clinical methodologies of hypnotic-wheel, longer Induction and Deepening, etc. Provided that the Metaphysical Practitioner is licensed, and experienced to do counseling, they may effectively use Meditation in

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place of Hypnosis to aid patients in the areas of self-esteem, weight-control, smoking, current past-life traumas, etc. if the patient feels uncomfortable in a more clinical setting of the Hypnotherapist. That is to say, provided that the academic and legal qualifications of the Metaphysician are met, they may employ their Meditational treatments in place of the Clinical methodologies of the Hypnotherapist, and vice-versa.

This would impact society greatly, as the patient would now have more options and flexibility of choices, in regards to bettering themselves, with lesser personal limitations.

This would also impact society positively, as the professional Metaphysician and Clinical Hypnotherapist could now have greater choices and flexibility of methodologies, in order to assist patients in their betterment.

Both the professional and the patient could potentially grow in experience and flexibility as well. Ultimately, however, what will determine the broader use of these tools, will be the initial flexibility of both patient and Practitioner, as well as the general competency, and recognition of the Practitioner for the need of the use of a methodology not usually employed by them in assisting the specific individual needs, and catering to, the individual belief-system of their patient. Perhaps now, this essay will shed light on these possibilities, and societal benefits.

CHAPTER 6-SUMMARY AND CONCLUSION

It should be clear now, as to what Meditation, Clinical Hypnotherapy, Hetero-Hypnosis and Self-Hypnosis are, the brainwave-state they have in common, as well as the techniques for entering into Self-Hypnosis and Meditative-state, common to each other, as well as differing from each other.

What is now uncovered, as well, is that either Meditation or Self-Hypnosis may be employed equally effectively, by either a Metaphysical Practitioner and/or Clinical Hypnotherapist, for improvement of one's outer self, potentially providing more services and flexibility, therefore, for the patient and/or Meditation-student.

Since Self-Hypnosis and Meditation have been shown, within the context of this essay, to be interchangeable in methodologies, brainwave-state and benefits, the title of this thesis, as well as the question, "Hypnosis or Meditation" have been realized and answered.

The only remaining issue that might persist in the mind of the Metaphysical Practitioner and/or Clinical Hypnotherapist, is not necessarily in the effectiveness of Meditation or Self-Hypnosis, but rather in that of their own competency in executing the methodologies. In addressing these personal doubts, we ask only that the regular and diligent practice and execution of Meditation and/or Self-Hypnosis be realized. As for the possible doubts as to the effectiveness of these modalities in actual and practical clinical or Metaphysical practice, we ask only that the Metaphysician and/or Clinical Hypnotherapist attempt interchanging their use, either in their own private research, or in practical, clinical use, in their own practice, for the purposes of educating themselves and others as to the effectiveness of these modalities.

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"I just finished reading your book and I absolutely loved it! I was so inspired and motivated while reading it. Your book is so wonderful and I want you to teach me the tools from your book. I've never emailed anyone after I read their book and I really hope you will reply to this email.

Again thank you for sharing your knowledge and wisdom and I am so thankful I came upon your book in a bookstore."

-Rebecca-

"I have known Rev. Dr. Michael for at least ten years, and I've been grateful to call him both a peer and a friend. In his persistent efforts to help others, he has taken it upon himself to constantly do research (both personal and professional), and to this end he has earned numerous credentials and degrees in his related fields. I have rarely seen him say "no" to assist others, and his professional skills, God-given talents, as well as his consistence to be all he can be has also resulted in him writing several books which I have the privilege of owning.

Dr. Michael shares these ancient and time-proven tools that you'll find are infinitely worth practicing, revisiting, and living for yourself".

-Grace Talson,

www.movingforwardwithgrace.com

"Dr. Likey is an accomplished metaphysician with decades of experience, and in this, his latest book, he shares insights based on his lengthy pastoral and hypnotherapeutic career. This book is a worthy development of that study combining metaphysics with an easy to adopt frame for a better life. I know few people more widely versed in metaphysical study, and it shows in the astonishing variety of influences at play – enjoy!"

-Adam S. Adams, CPC MH CISH CHt.

"Dr. Likey challenges and encourages new methods of self-exploration and discovery through new and ancient wisdom. His unique take on classic and modern therapy and techniques leaves the reader with a greater understanding of mind and soul. His information is both practical and simple to implement into your life. Dr. Likey's personal writing style makes for an easy and interesting read".

-**Sara Adams**, Owner, Finding Avalon - Spiritual ReConnection through Avalonian Archetypes

www.finding-avalon.com

"You've...helped me transcend much of the fear I was living with when I first started coming to the gatherings on Sunday mornings-I feel quite fearless now...you've helped reinforce the value of life/living for me through your tireless work. Thank you again."

-**S.K.**

"Rev. Dr. Michael is the amazing host of Dr. Michael's Soul Dialogue radio show. I had the privilege of being a guest on his show and was touched by his insight into the history of spirituality, relationships' dynamics as well as his deep knowledge of the human soul. I truly believe that Dr. Michael is providing a great show that can help people in their personal growth and spiritual search."

-**Milena Cerin**

Top Qualities: Personable, Expert, High Integrity

"Dr. Likey brings a mixture of new thought, traditional psychology and parapsychology to his client sessions. He approaches his work with consideration to all aspects of the clients situation and goes the extra mile to ensure his counsel is complete and comprehensive. I recommend Dr. Likey's services in combination with alternative healing (e.g. acupuncture, naturopathic, light therapy), and traditional mental/emotional therapy, as well as for lighter "am I on the right track" counsel."

-**L. Miller**

Top Qualities: Great Results, Personable, Good Value

"I have attended a number of Michael's meditation evenings where I had a great number of experiences being guided through my spiritual development. I found Michael to be very intuitive, patient and perceptive of his clients needs. I have also worked with Michael doing healing work and I learned quite a bit from his extensive knowledge and practical skills."

-M. Chong

Top Qualities: Great Results, Expert, High Integrity

"Dr. Likey's abilities in the metaphysical field are unmatched in my opinion, his ability to provide insight into your life will amaze you. Dr. Likey provides many other services to enhance your life, seminars, Reiki therapy, and many books related to living a better life. I highly recommended visiting Dr. Likey."

-T. Hobbs

Top Qualities: Great Results, Personable, Expert

"I was privileged to study Reiki under Mike's expert care, and was astounded by the depth of knowledge that he has on all matters metaphysical.

The ability to turn the arcane into the comprehensible and digestible is rare, yet Mike has it in spades.

His personal qualities are outstanding, and the whole experience of learning from him was enjoyable and deeply rewarding. Michael is a great teacher - knows his stuff, he takes research and experience and blends them seamlessly into practical and fun trainings."

-S. Adams MH, CHt

"You are truly a Master and have shown this over and over... God bless and reward you".

-Patti