Human Subjects Issues in Hypnosis Research

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It's easy to think up hypnosis experiments, but not always so easy to get them approved by your local Human Subjects Committee. This is largely because of the myths and urban legends surrounding hypnosis, which unfortunately are shared by many of our colleagues.

Based on the model of the Human Subjects protocol that Martin Orne used at Penn when I was there, I have crafted an updated protocol that has succeeded at a number of different institutions: Harvard, Wisconsin, Arizona, Yale, and Berkeley. The latest iteration of that protocol is at http://socrates.berkeley.edu/~kihlstrm/HypnosisHumSubs.htm. Start there, revise to suit local conditions, and then submit and resubmit until you get approval. It won’t take long.

But a word of caution: Once you submit a protocol like this, you’ve got to follow it. That isn’t always easy, short cuts always look attractive. But if you take the steps outlined here, actually doing what you say you’re going to do, you can enjoy many years of productive hypnosis research with very little hassle.
Describing the Project

- Keep it Broad
- Hypnotizability
- Experiments on Specific Phenomena
- Nonhypnotic Studies (Background)
- Separate Studies of Clinical Populations

Some investigators submit a new human subjects application for every individual project, and some Human Subjects committees may require this. But I prefer to submit as few as possible. I do this by submitting one broad application, that covers everything I might want to do. Like my NIMH grant, my Human Subjects application was entitled “Personality and Cognition in Hypnotic Phenomena” – a title, which, by design, covers just about everything.

So, there are studies of hypnotizability and its correlates; there are experiments on specific phenomena, like hypnotic effects on perception and memory; and there are studies of nonhypnotic aspects of personality, perception, and memory, which provide the background for the hypnosis research. Only if a study comes up that departs radically from one of these themes (e.g., a study of social influence on hypnotizability), or which raises significant human subjects issues (e.g., a study of pain), or which uses a nonstudent subject population (e.g., studies of children or PTSD patients) would I feel it necessary to submit a new application.
Subjects

- Rant: They’re Subjects, Not “Participants”
  - Participant Roles in Research in General
    - Subject
    - Experimenter
    - Assistants
    - Technicians
- Specific Roles in Hypnosis Research
- 18 Years of Age
- Native Speakers of English (?)
  - Adequate ability to Speak/Understand English
  - Translations of HGSHS:A

You’ll notice that I refer to “subjects”, because that’s what they are. Perhaps out of an abundance of political correctness, the APA Publication Manual wants us to refer to our subjects as “participants”. But this neglects the fact that there are lots of participants in the social interaction known as “taking part in an experiment”. Each of these participants has a role. To be blunt about it, the subjects does what he or she is told to do by the experimenter. The “participant” problem is exacerbated in hypnosis research, because “subjects” marks a specific role in hypnosis: the hypnotist gives suggestions, while the subject carries them out.

Our subjects are drawn from the local population of college students. UCB rules require that students younger than 18 get permission from their parents. That’s too much work, so we exclude them from our research. We also require fluency in English, because it’s important that subjects be able to understand the nuances of the procedure.
We recruit our subjects for HGSHS:A from the Psych Department subject pool, which covers all students in the introductory course as well as students in our mid-level survey courses. There are lots of different experiments for students to choose from, so there is no coercion involved. After the Harvard Scale, we pay our subjects for Form Cs and formal experiments: the going rate is about $8/hour.

When working with volunteers, be careful about subjects’ mixed motives, like for entertainment or self-help. Although I’ve administered the Harvard Scale in classroom settings, I don’t like to do so, because it almost inevitably takes on a quality of “entertainment”. Also, it’s a little coercive. I never “demonstrate” hypnosis in fraternity or sorority houses. We don’t take volunteers from outside, either, because such individuals usually want some sort of help that we can’t provide.

Some psychology department subject pools forbid experimenters from describing their experiments, as a way to prevent self-selection and non-random assignment (I first confronted this at Wisconsin). But you can’t recruit subjects for experiment XJACB and have them show up in a big room, only to find out that it’s a hypnosis experiment. That’s not informed consent. Subjects who wouldn’t ordinarily volunteer for hypnosis may feel coerced into participating, and that’s a prescription for trouble. Make sure that, before your subjects show up, that they know they’ve volunteered for a hypnosis experiment.
Human Subjects committees are often worried about “screening” on ethical grounds: they are concerned that members of minority groups, for example, aren’t inappropriately screened out, and prevented from participating in research. We don’t screen for mental illness or other medical conditions.

There is a little problem, however, with the Harvard Scale, which we sometimes informally describe as a procedure for “screening” for hypnotizability. That is how we use it, but we present the Harvard Scale as a full-fledged study of individual differences in hypnotizability, and include some other individual-difference assessment (like Tellegen’s Absorption Questionnaire) along with it. That makes the Harvard Scale not just a “screening”, but also a formal experiment, to which all subjects – even the insusceptible ones, who are likely to be screened out of further hypnosis research – contribute.
We recommend a two-step procedure for assessing hypnotizability.

The Harvard Scale provides us with an initial assessment of hypnotizability. Equally important, it familiarizes subjects with hypnosis, and provides an experiential basis for informed consent to participate in further hypnosis research.

We then administer the Stanford Form C to provide a final assessment of hypnotizability. Form C really is the “gold standard” of hypnotizability assessment. It has a wider range of “cognitive” items, and it’s administered individually so the experimenter can really get an idea of how the individual subject responds. Hilgard showed that the Form C can be “tailored” for specific purposes, but substituting single items of special interest, at no cost to the scale’s psychometric soundness.

For clinical studies, the combination of the Harvard Scale and Form C may just be too much. As an alternative, we recommend the Stanford Hypnotic Clinical Scales, which provide a good assessment of hypnotizability and take only about 20 minutes to administer.

For more on the assessment of hypnotizability, see the companion presentation at

We try to avoid “mixed motives” as much as possible, so we make clear that individual subjects will derive no psychological, medical, or personal benefits from the experiments. They get paid, either in course credits or dollars, but we don’t offer to make them better people. If subjects derive any other benefits from their participation in research, your research may be labeled “clinical” rather than “basic”, and subject to other constraints imposed by your Human Subjects committee.
We go to great pains (sorry) to make clear that there are no special risks attached to hypnosis research – because that’s true. There is an extensive literature on this, which we cite chapter and verse, and which shows that the risks of negative sequelae in hypnosis research are no greater than you find in other studies, including questionnaire sessions.

There are, of course, occasional discomforts in hypnosis research. We do not detail these to subjects. This may make your Human subjects committee a little unhappy, but I have convincingly argued that to detail these possible aftereffects to subjects may, in effect, suggest to them that they will occur – thus actually increasing the risk to subjects. So far, they’ve accepted this argument.

Still, experimenters can take various precautions to minimize the risks to subjects. First, by emphasizing that they are here for research, not for personal growth or therapy, much less entertainment. We ask that they consider removing their contact lenses for the duration of the experiment (though this is much less of an issue now than in the past). We make sure that the room is a comfortable as we can make it.

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### Risks

- **No Risks!**
  - No Greater in Hypnosis than Other Research
    - No Greater for Hypnotizable Subjects
- **Occasional Discomforts Not Specific to Hypnosis**
  - Don’t Detail These to Subjects (Suggestion)
    - Drowsiness
    - Headache, Neck Ache
    - Stiffness
- **Take Precautions to Minimize Risks**
  - No Role Confusion
    - Psychotherapy, Personal Growth, Entertainment
  - Contact Lenses
  - Proper Seating (Head Support)
  - Ventilation
Training of Experimenters

• Anyone Can Hypnotize!
• Necessary Abilities
  – Build Rapport, Listen With the Third Ear
  – Read with Expression
  – Handle Occasional Awkward Situation
  – Communicate Expertise
• Phases
  – Presentations about Nature of Hypnosis
    • Assist in HGS:SHS:A
  – Practice Among Themselves
  – Initial Sessions Observed by Senior Staff

The key to minimizing risks is found in the training of hypnotists. They shouldn’t have mixed motives either! No power fantasies, no rescue fantasies.

Our training begins by having the students read some of the literature on hypnosis, beginning with Mike Nash’s *Scientific American* article, classics by people like Jack Hilgard (e.g. “The Domain of Hypnosis”) and Martin Orne (especially the latter’s papers on demand characteristics) and continuing with papers that are particularly relevant to what’s going on in the lab. They help out with the Harvard group runs, to get a sense of how things go. We demonstrate the Form C for them, and then they practice on each other. Then we observe their initial sessions with real warm bodies, and check up on them periodically thereafter.
The key to the ethical conduct of hypnosis research – indeed, any psychological research – is that the experiment is episodic in nature, meaning that it has no consequences for the subject outside the laboratory setting. Nothing should be done to compromise the episodic nature of the experiment.

Another key is what Martin Orne called “anticipatory socialization”. Human subjects are sentient beings, trying to figure out what is going on in the world around them. This is no less true in a psychological experiment. Accordingly, the experimenter should outline the subject’s role, what is expected of him. If the experimenter and the subject to not establish common ground, then they will be participating in two quite different experiments – and the ecological validity of the experiment will be threatened. Particularly when administering the hypnotizability scales, we go to great pains to tell subjects, truthfully, that we are interested in the entire range of responsiveness to hypnosis – thus legitimating low as well as high scores.

After some experience administering the standardized scales, the temptation will be for the experimenter to “show off” by delivering the scripts from memory. Don’t do this. You will slip and make a mistake and ruin your own experiment. More important, the presence of the script, and the fact that the experimenter is reading from it, will help assure the subject that the session has been planned in advance, the procedure is familiar, and the experimenter is not flying by the seat of his pants.
Confidentiality

- Storing Response Booklets
- Acquaintances of Student Assistants

Every Human Subjects committee has its own rules about this. Note that the Harvard Scale response booklets collect quite a bit of personal information about subjects. This information needs to be treated carefully.

Relatedly, we never let student assistants (or any experimenter, for that matter) run someone they know in an experiment. This almost logically follows from the idea that an experiment should be episodic, and have no consequences for the subject outside the experimental setting.
Every Human Subjects committee has its own preferred consent form. Start with the samples provided on my website, and adjust to conform to local standards.

Informed Consent

• Specimen Consent Forms on Website
• No Deception about Use of Hypnosis
  – No Need to Describe Specific Suggestions
  – No Need to Specify Possible Sequelae
Again, in order to avoid mixed motives, or any form of exploitation, we insist that all subjects be compensated for their service in the experiment – either with a monetary reimbursement, or course credit.
Yogi Berra, the great catcher for the New York Yankees, was once asked to explain the game of baseball. His reply: “Throw the ball. Hit the ball. Catch the ball”.

Much the same advice could be given about publishing research – and, for that matter, getting hypnosis research approved by your local Human Subjects Committee. Write the paper, Submit the paper. Revise the paper. (Or protocol.)

Start with the sample protocol at http://socrates.berkeley.edu/~kihlstrom/HypnosisHumSubs.htm. Then revise in response to questions from your local committee, and resubmit.