

The Technique of Covert Anchoring in the Treatment of Addiction - Description of the Method and Basic Principles

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Received: July 09, 2018; **Published:** October 30, 2018

Abstract

The purpose of this article is to briefly describe the technique and application of covert anchoring. The covert anchoring technique is a new approach that constitutes a complement to the hypnotherapeutic treatment plan. This technique has proved effective in single case studies in my practice in treating certain addictions, such as smoking, drinking and can also be used to address poor dietary habits, such as eating too many sweets as well as intractable behavioral traits like fingernail biting. The technique combines the NLP concept of anchoring with elements of hypnotherapy and aversion therapy. Although the terms 'aversion therapy' and 'anchoring' are not new terms in psychotherapy, the stimulus-response coupling is carried out using a combination of words (the so-called core sentence) which, when triggered, causes disgust in the client, so that the addictive behaviour is effectively interrupted. Because the interruption is not only caused by the addictive behaviour itself, but already by the thought of a certain word (e.g. 'wine'), this is a new technique that also permits the hypnotherapeutic treatment of addictions in outpatient practice as a short-term approach. That the method presented here is also a tribute to the covert conditioning approach [1] has already been referred elsewhere [2].

Keywords: *Covert Anchoring; Addiction*

Meticulous preparation is required before its implementation, along with the careful observation of indications and contraindications. Moreover the practical application of covert anchoring requires a solid grounding in hypnotherapeutic procedures.

Using the technique

The technique is broken down into six steps: Establishing an anchor (1); create a hypnotic suggestion ("string of key words") (2); weave the hypnotic suggestion into a neutral narrative (3); perform the neutral narrative while the client is in trance (4); releasing the anchor (5); future-pacing and post-hypnotic instruction (6).

Establishing an anchor

In preparation the client is taught in a relaxation technique. Next, the client is instructed to construct an emotionally aversive scenario. In a trance, he imagines a place-for example a laboratory where he is presented with something disgusting which is mixed with the addictive substance (beer, chocolate, chips, or the like). This way, a linkage is created between the feeling of disgust and the targeted food or beverage. When disgust reaches the maximum (ten on a scale of one to ten) the anchor is established. Usually this happens by touching a knuckle for up to one second.

Create a hypnotic phrase (succession of keywords)

Once the anchor has been established the client is encouraged to leave this imaginary laboratory. The client usually experiences the mental image of this laboratory and the associated feeling of disgust as stressful. For this reason he is now taken to a mentally neutral place where he or she can “recover” and where the therapist guides him into deeper trance. While still in a trance, the client can still be asked what he would like to learn and which hypnotic phrase (also called a hypnotic suggestion) would fit best. The hypnotic phrase consists of a succession of keywords that the client associates with behavior change. It is recommended that such a phrase be chosen during the preliminary conversation with the client so that he can now be asked to reassess the fit of the hypnotic phrase. The purpose of asking again is to validate and fine-tune the hypnotic phrase. In an aversive setting, the author deals extensively with hypnotic phrases that sound like the following examples: “I feel queasy when I drink a beer!” -or- “It makes my stomach turn to think of a glass of beer!” -or- “It makes me feel sick, when I think of a cigarette.” A few clients favor “defused” variants of hypnotic phrases. In other words they prefer to avoid feeling queasy. Clients who are afraid they could vomit create hypnotic phrases that sound like the following: “I couldn’t care less about chocolate.” -or- “I’m indifferent toward potato chips”.

A hypnotic phrase (it is also called the core sentence) is a short, pithy statement that should consist of no more than eight to ten keywords. The therapist should let the client know if the wording is inappropriate. For example, he should be dissuaded from using a keyword phrase such as “I will throw up if I smoke”. This phrase could lead to embarrassing situations in public. For the most part, such side effects are also undesirable in aversion treatment.

As far as my research has revealed that there is no difference between an external suggestion (i.e. “You feel ...”) and the self-suggestion form (“I feel ...”). Hypothetically the author establishes that the choice depends on the therapist’s attitude and/or the client’s ego strength.

Weave the hypnotic suggestion into a neutral narrative

The therapist has already formulated a neutral narrative into which he weaves the keyword sentence in advance. I will offer an example shortly. If at this point the therapist is not yet settled in his development of such a narrative, it can be discussed at a future appointment between therapist and client. Nonetheless, I recommend completing the entire procedure in one session and to repeat the entire procedure once again in a later session.

Developing a narrative is a matter of choosing a “neutral area,” for example an outdoor location (meadow, woods, beach, or the like) which the therapist describes to the client.

As a rule it’s not about a therapeutic form of a safe place. Since the hypnotic phrase has already been woven into the neutral narrative, the anchor can be fired as the client is being instructed in the narrative. Communication is now taking place on two levels: We have the “neutral narrative” in the foreground which creates the surface level. Woven into it are the individual keywords (second level) of the hypnotic phrase.

Perform the “neutral narrative” while client is in trance

The “neutral narrative” into which the hypnotic phrase is woven, is now presented to the client. As each keyword of the hypnotic phrase is sounded, the therapist touches, say, a knuckle, thus triggering the anchor. For simplicity, I’ll give an example: “When you walk on the beach and feel your feet on the sand it’s quite different to that sick feeling you had the day before and if someone says that you can have a drink from that wonderful clear source of water you have no notion of drinking beer” (Sollmann, no date).

Note that the neutral narrative is in fact knitted very simply. The narrative contains a great deal of redundancy or, as a client expressed it during a follow-up interview: “The language was quite flowery, not very penetrating. I could detect nothing remarkable”. To other clients, the narrative seemed like an imaginary journey. Yet others saw it as a nicely packaged affirmation.

Releasing the anchor

The anchor is triggered during presentation of the neutral narrative. Releasing the anchor happens simultaneously with each keyword as it occurs while presenting the narrative.

By way of illustration I will repeat the “neutral narrative” once more, emphasizing the keywords with capital letters. The anchor is triggered at each keyword by touching the client’s forearm or hand. Here is the neutral narrative once again, this time with the keywords highlighted: “When YOU walk on the beach and FEEL your feet on the sand it’s quite different to that SICK feeling you had the day before and IF someone says that YOU can have a DRINK from that wonderful clear source of water you have no notion of drinking BEER”.

The core sentence (s. o.) is: “You feel sick if you drink beer”. Experience shows that most clients miss the connection between the keywords and triggering the anchor. According to the neuropsychological findings cited [2,3] earlier, change in emotional processes is easier because conscious functions of the brain are cut off. According to the results of these studies, it should be possible to infer a corresponding response (e.g. disgust) in the brain.

Future-pacing and post-hypnotic suggestion

To improve the sustainability of this intervention either future-pacing can be implemented or a post-hypnotic suggestion can be integrated into the end of the session. Future pacing can refer to a view into the (smoke- or alcohol-free) future. Empirically, a positive outlook into a future free of unhealthy habits is recommended as a supplementary motivating force. Simultaneously a post-hypnotic suggestion can be kept simple and can take place non-covertly. “From now on, you’re a non-smoker” (or: you’ll decline alcohol when it’s offered). The therapist has to ensure that the posthypnotic suggestions are oriented towards the reality of the client’s everyday life.

Discussion and Conclusion

For the method described here, a number of positive individual case vignettes exist, which have not yet been explored in systematic studies. The author therefore confines himself to the discussion of previous experience with the note that efficacy studies are necessary for the replication of the individual case observations.

In this essay I would like to discuss, beyond the description of the method, some aspects concerning the basic principles of this therapeutic technique. Since no neuropsychological studies on the effect of covert anchoring are available, neuropsychological studies from basic psychological research must serve as alternative explanatory approaches with regard to their transferability.

As the author quotes elsewhere [2,3], the effectiveness of covert anchoring can be proven from a series of findings on unconscious learning and neuropsychological research [4-7]. The author regards unconscious learning as an essential factor of covert anchoring.

In Whalen, *et al.* [7] we find indications of unconscious learning. In the experimental layout presented by Whalen, *et al.* it is the extremely short time (millisecond) range during stimulus is presented. This design prevents emotionally significant information from reaching the consciousness of the subjects. The basic premise of this study is therefore: Test persons showed emotional fear reactions, but could not state the reason for this. It is obvious that, in this study, the time limitation is the ‘covering’ factor. In covert anchoring, the decisive element is not the time factor, but the embedding of the core sentence into a network of information and redundancy, that exceeds the capacity of the working memory. The factor that prevent the covert information from reaching consciousness are therefore different. In covert anchoring the details of the description of the neutral story lead the client’s attention away from the core sentence. In the preceding laboratory scenario (see above), the working memory is also utilized in such a way that the “actual” information (i.e. the core sentence and the emotional meaning attached to it) is covered up. Clients were informed about the meaning of the procedure during anamnesis but after the treatment were not able to specifically name the sentence which is woven in the neutral story nor to reconstruct the connection between word and anchor. I see this as a clear indication that, analogous to the investigation of Whalen and Colleagues, the unconscious level is addressed and reached, because the clients could not identify the emergence of disgust or the connection between word, anchor and emotion.

Based on this observation, the author assumes that the essential factors of the method presented here are based on unconscious learning. In fact, in about 50 documented cases, none of the clients was able to give an accurate assessment of the process of covert anchoring. The author concludes from this observation that it has capacitive reasons that prevent the details of the treatment from entering the patient's consciousness.

If we disregard the question of temporal vs capacitive aspects as the cause for the circumvention of consciousness, a subliminal (unconscious) stimulus-reaction coupling can be assumed as mechanism of action for the method described here. However it is not exactly clear how the neuropsychological mechanisms take place. After all, parts of the brain must recognize the information hidden in the neutral story in order to establish a connection between the core sentence, the anchor-triggering and the amount of feelings of disgust. It would be helpful in this context to demonstrate significant amygdala activity in connection with the development of disgust in the client. It is already apparent at this point that the recognition of the meaning of the core sentence from the web of information (the 'Gestalt-recognition') per se already represents a complex brain achievement. This complexity, which must be coordinated across different areas and functions of the brain, considerably exceeds a simple stimulus-response mechanism as an explanatory approach.

The assembly model by Engel and Singer [8] provides a possible explanation of how the brain masters this puzzle task and combines the individual information units into a complete unit. In their model of recognition and coding of visual signals Engel and Singer refer to Gestalt psychology. They describe the neurophysiological mechanism underlying 'Gestalt recognition'. According to the assembly model, nerve cells join together across different brain areas to form associations in response to sensory signals, such as those triggered by the stimulus-response set during anchoring. These neuronal associations form the basis for the neuronal representations of entities which could lead to the perception of a 'Gestalt'.

According to Engel and Singer, the coordination performance of the neuronal associations over different brain areas is based on a timecoding mechanism. The neurons activated by a perceived object are coordinated by synchronizing the pulses and combined into assemblies. Neuronal 'firing' in a certain time cycle thus represent the basis for the perception of complex entities, consisting of a sensory stimulus (i.e. alcoholic beverage), the core sentence and the connection between emotion and anchor. From the author's sight, this model provides a suitable explanation for the formation of complex reactions and represents a basis for explaining and understanding the effects of covert anchoring [9].

Further research efforts are needed to fully clarify the specialties and basic principles for this technique, presented here.

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Volume 7 Issue 11 November 2018

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