QUESTIONING THE SUBCONSCIOUS + SAMPLE QUESTIONS

(for Allergy & Asthma / Dental Fear / Insomnia / Weight Loss / Pain)

After hypnosis has been induced and finger signals have been established, the hypnotherapist may want to ask questions in the six common areas that cause difficulty. Examples of questions in each category follow.

(1) **CONFLICT**

"Is this condition caused by a conflict in your mind between the desire to do or have something and the fear or guilt about the consequences?"

"Does this condition come from feelings of guilt about something?"

"Is the condition punishment for something you did, said, or thought?"

(2) SECONDARY GAIN

"Is this condition serving another purpose?"

"Is this condition serving to protect you in some way?"

"Is this condition giving you an excuse for not doing something?"

"Is this condition giving you an excuse to do something you want to do?"

"Are you using this condition to gain sympathy or attention?"

"Does this condition prevent you from doing something?"

(3) ACCEPTED SUGGESTIONS

"Has anyone ever said anything to you that might be resulting in this condition?"

"Did you ever hear anything that may be causing or contributing to this condition?"

(4) ORGAN LANGUAGE

"Is this condition a physical manifestation of thoughts you hold about an unpleasant experience in your life?"

"Is this physical condition associated in anyway with the way you feel about something else in your life?"

"Are the teary eyes, runny nose, etc. taking care of the need to cry?"

(5) <u>IDENTIFYING WITH ANOTHER</u>

"Are you identifying with someone else that has this condition?"

"Are you trying to be like someone else that has this condition?"

(6) PAST EXPERIENCE

"Is this condition associated in some way with a past experience?"

"Is this condition a result of a past experience?"

BRACKET YEARS TO DETERMINE AGE

"Was it before the age of 10 years?"

"Before the age of 5 years?"

"Before the age of 3 years?"

"Before your first birthday?" etc.

ALLERGIES Sample Questions

Is it all right for you to know the reason for your allergies?

Is the allergic reaction caused by a conflict in your mind about something you want or something you want to do and any fear or guilt about that?

Is the allergic reaction caused by guilt about something?

Does having this allergy protect you in some way?

Does having allergies give you an excuse not to do something?

Do you enjoy the attention and sympathy which you receive because of the allergy?

Is the allergy a result of something that someone once said to you? Something you heard?

Does this allergy conceal your need to cry?

Is there anything happening in your life that you feel allergic to?

Is there anyone in your life that you feel allergic to?

Is your allergic reaction related to some specific part of your life?

Are you identifying with someone that is allergic?

Is the allergy associated with a past experience? (Bracket years to find age.)

Was it before the age of 10 years?

Before the age of 5 years?

Before the age of 3 years?

Before your first birthday? etc.

DENTAL PHOBIA

Sample Questions

Is it all right for you to know the reason for your fear of dentistry? Does this fear and the anxiety it causes you fulfill a need to be punished? Does displaying fear of dental procedures serve any other purpose? Does your fear of dentistry give you an excuse for something? Do you enjoy the attention and sympathy you receive as a result of this fear? Has anyone ever said anything to you that resulted in this fear? Have you ever heard anything that resulted in your fear of dentistry? Is this fear associated with the way you feel about something else in your life? Are you identifying with someone else that was fearful of dental work? Is your fear of dentistry associated with a past experience? More than one? Did the first experience happen _____ (Bracket years to find age) Was it before the age of 10 years? Before the age of 5 years? Before the age of 3 years? Did a dentist do something that caused this fear when you were ____ (age)? Is this fear associated with a particular instrument the dentist used? Is this fear associated with an injection you had? Is this fear associated with the dentist himself?

INSOMNIA Sample Questions

Is it all right for you to know the reason for your insomnia?

Is there some inner conflict that keeps you from sleeping?

Does this conflict involve sex?

Does it involve death?

Are you associating sleep with death?

Are you afraid you may die while asleep?

Does fear keep you from sleeping?

Are you afraid of nightmares?

Are you punishing yourself by staying awake?

Does failing to sleep serve another purpose?

Does failing to sleep give you an excuse for doing or not doing something?

Is failing to sleep causing you to receive attention and sympathy from others?

Has anyone ever said anything to you that resulted in the failure to sleep well?

Have you ever heard anything that is associated with your lack of sleep?

Is your failure to sleep well associated with the way you feel about another part of your life?

Are you identifying with someone who had trouble sleeping?

Is there an emotional or psychological reason you have difficulty sleeping?

Does worry prevent you from sleeping?

Does your expectation of insomnia keep you awake?

Is this insomnia connected to a past experience? (Bracket years to find age).

WEIGHT LOSS Sample Questions

Is it all right for you to consciously know the reason you are overweight?

Do you have a conflict in your mind about sex which is associated with your weight or

eating habits?
Are you using the extra weight to hide from something?
Is being overweight associated with guilt about something?
Are you using the extra weight to punish yourself?
Does being overweight serve another purpose?
Does being overweight protect you in some way?
Does being overweight give you an excuse not to do certain things?
Has anyone ever said anything to you that has resulted in your being overweight?
Did you ever hear anything that caused you to be overweight?
Is this overweight condition associated with the way you feel about something else in your life?
Are you identifying with someone else who is overweight?
Is there some reason your body needs to weigh more than pounds?
Is an emotional reason the cause of your being overweight?
Do you overeat when you feel (rejected, lonely, depressed, angry, guilty, anxious, worried, etc.)?
Does overeating make you feel secure?
Do you eat as a reward?
Is there a thought, idea or belief in your mind causing you to be overweight?
Is your overeating (or need to be overweight) associated with a past experience? (Bracket years to find age.)

PAINSample Questions

Is it all right for you to know the reason for your discomfort?

Is this condition a result of something you feel guilty about?

Is the discomfort caused by fear about something?

Is this condition a form of self-punishment?

Is this condition giving you an excuse for something?

Are you using this condition to acquire sympathy or attention?

Does this condition prevent you from doing something?

Has anyone ever said anything to you that might have caused this condition?

Is this discomfort associated in any way with the how you feel about something else in your life?

Are you identifying with someone that has or had this condition?

Is the discomfort a result of thoughts you hold about something unpleasant in your life?

Is this condition related in some way to a past experience? (Bracket years to find age).