

HYPNOTHERAPY, & PRE-RECORDED DATA FOR SELF-HYPNOSIS

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Introduction

Milton H. Erickson, M.D. (1901-1980) is a man widely recognised as the foremost Hypnotherapist of the century. Erickson described hypnosis as a valuable therapeutic tool for enhancing a person's self-awareness and facilitating therapeutic communication.

"Our multiple minds must interact – People have a conscious mind and an unconscious mind" (Erickson, M). This observation is the cornerstone of Erickson's hypnotherapeutic system.

The model of Hypno-Psychotherapy that I was taught to use is called Ericksonian, because it was developed by Milton H Erickson, M.D. the foundation of his hypnotherapeutic system is his orienting assumption that people have a conscious mind and an unconscious mind. Erickson used the term 'unconscious mind' to refer to all the cognitions, perceptions, and emotions which occur outside of a person's normal range of awareness. He reserved the term 'conscious' mind for the limited range of information that enters the restricted focus of attention of most people in everyday life, he observed and recognised that people try to rely upon the limited capabilities of their conscious mind for direction and support, even though their unconscious mind has more resources and a better sense of reality.

Chapter One

Background to Theory.

Most of you reading this I'm sure, will be familiar with those stage hypnotists seen on the television and in the media, or even down at your local pub, but Clinical Hypnotherapy is quite another matter, and it is by no means a new phenomenon, in fact the use of hypnotherapy and hypnosis to solve emotional and psychological problems; in other words therapeutically, dates back as far as 1779, with Franz Anton Mesmer's theory of animal magnetism, later referred to as mesmerism.

We are still learning about how the mind works as oppose to the brain, and although Clinical Hypnotherapists have been practising for a long time using tried and tested methods, there are still a number of theories as to what the state of hypnosis actually is, and how it works.

I feel that having some theoretical background knowledge about these theories plays an important part in the successful outcome of the process, and its ongoing usefulness for any individual that wants to use it. I am therefore, going to briefly outline the main theories or assumptions about the state of Hypnosis (as there are many more than those listed here) and there are some excellent books available if you really want to get your teeth into the subject in some depth, suffice to say, that recent developments have resulted in a common view that the 'State of Hypnosis' is both scientific and phenomenological based. I will explain later what is meant by the conscious and unconscious (sometimes also referred to as subconscious) minds.

Essentially, theorists fall into two main categories; **State Theory** and **Non-State**, but a common understanding and agreement that all theorists share, is that the process of hypnosis can be utilised to benefit individuals psycho-biologically.

Disassociation Theory:

Theorists suggest here that the subject disassociates from conscious mental activity and external events, whilst accessing other compartments of the mind with the focus being on internal experience. This theory claims that this can be likened to wakefulness and full conscious activity to sleep and dream activity.

Atavistic Theory:

Suggests that the individual overrides intellectual and critical mental functioning to access a primordial compartment of the brain that operates on a primitive simplicity level; in other words we all have an ancient remnant within our brains that is the left over from when we were a primitive species, and this compartment is tapped into during the hypnotic state.

Hyper-suggestibility Theory:

Suggests that all behaviour, thoughts and feelings are learnt; that individuals are products of conditioning and that our responses to life can only be understood in relation to conscious and 'out of aware' stimuli. This theory suggests that our mental processing and our behavioural responses are all governed by internal responses to environmental suggestion, and that the contextual setting for hypnosis heightens the potential for conditioned responses to suggestion.

Altered State Theory:

Suggests that not only is another part of the mind accessed during hypnosis but also in addition, another level or dimension of consciousness is entered into. *'Hypnosis may be defined as an altered state of awareness affected by total concentration on the voice of the therapist. It will result in measurable physical, neurophysiological and psychological changes in which may be produced distortion of emotion, sensation, image, and time'* (Waxman 1981)

Erickson was less concerned about this state v non-state debate; the response of the client to the suggestion was far more important than the question of whether it was a function of conscious compliance or unconscious processes.

Well, now you have some basic knowledge of what the theorists and experts in the field think hypnosis could be, you can perhaps understand why it is so difficult to answer in a few words when people ask me, 'how does it work'. I guess what you really want to know is 'will it work for me?' Well, like all alternative and complimentary therapies, there are no guarantees, much as there often isn't with traditional medicine, but if you have an open mind and an imagination, there is every chance it will do. It is generally accepted that 90% of the population can be induced into the hypnotic trance state by an individual Hypnotherapist, provided that the subject is willing, has an imagination, and is not afraid. Analytically minded people that try to work out the why and wherefores of what is happening to them during hypnotherapy, are not likely to find the hypnotic process as easy to relax into as others, but even for these people sufficient depth of the hypnotic state for successful treatment can be obtained, with adequate preparation, patience, repetition and perseverance.

I must stress here that Hypnotherapy is not a panacea for all ills, and contraindications do exist, one being when a person's psychological state of mind would make the process unsafe for them; as in the condition of schizophrenia or any type of psychotic personality disorder or psychosis that already causes an altered state of mind, or disassociation or a distortion of reality. If you are receiving E.C.T. or any form of treatment for a psychological problem, I would advice you check with your Doctor before using Hypnotherapy, and as hypnosis lowers the blood pressure, if you already suffer with low blood pressure, and this is being treated with medication, I would advice you to check with your GP first.

Chapter Two

How Hypnotherapy Works.

Hypnotherapy works by accessing the 'unconscious' mind; (also called 'subconscious') so what is meant by the conscious and unconscious minds?

When we talk about the conscious mind, we refer to the thoughts that are going through our heads right now, the ones that we are aware of as we think about something, the little voice in our head or on our shoulder, the one you can hear right now, as you think of your shoulder. The conscious mind is rather less significant than our unconscious mind. To make it clearer, or not as the case may be, If you compare your mind to an iceberg; an analogy that one of my lecturers favoured, then the tip of the iceberg that you see above the surface of the water is the conscious mind, and the larger more substantial part of the iceberg that is out of sight, below the water line (but supports the tip), is the unconscious mind, a significantly larger part.

The unconscious mind is the seat of our emotions, and directs nearly all our behaviour. Everything that has ever happened to us, and everything we have ever seen, smelt, touched or heard is stored away there for future reference. It contains all our wisdom and intelligence; it is our source of creativity. The number of activities our unconscious mind performs and controls for us is quite humbling and astounding. Whenever we need to remember something, a name, date, place, an instruction, an understanding or insight, up it pops out of our unconscious mind like magic, whether the conscious mind wants it to or not. Without ever being consciously aware of it, we breathe, walk, talk, drive a car and use complicated pieces of technology, never giving a second thought as to where all that knowledge came from. However, the conscious mind constantly takes credit for, and finds explanations for the activities of the unconscious mind, over which it actually has no control and about which it is unaware.

Over many years, the conscious mind becomes very good at this act so that it is able to offer such impressive rationalisations and explanations for its behaviour that we don't even question it. Nevertheless, the unconscious mind is much more observant, wise, intelligent, adaptive, and skilful than the conscious mind could ever be; it is said that the conscious mind can only hold eight thoughts at any one time; usually in small chunks, which is why we tend to remember numbers more easily if they are in small bundles.

The unconscious mind can also delete information from our awareness. It would be impossible to process all the information we receive consciously, so the unconscious mind sorts it and then presents us with a summary of what is taking place. We have all heard anecdotal stories of extreme bravery when someone has badly injured himself or herself, but feels no pain and has no awareness of their own injuries until after the traumatic event. The unconscious mind had sorted through the information and decided what we need to know to help our actions at that moment in time. The interaction between the conscious and unconscious minds is going on all the time and we never give any of this process a second thought.

Our conscious mind uses questions to reason, our conscious mind; the voice in our head or on our shoulder, is always evaluating - critically and analytically – by comparing, contrasting and noticing, but in hypnosis, and the hypnotic trance state, the conscious mind is *dampened down* and this allows excellent communication with the unconscious mind, and without it's critical analytical partner, changes in core beliefs and behaviours can take place.

But this ability of the unconscious mind to accept without critical analyses has a downside, because it can just as easily hang on to negative experiences, so that whenever a similar event to that previously experienced occurs again in the future, the old feelings of discomfort that were felt the first time, are instantly brought back to the conscious mind in an attempt to protect us; this is how phobias start.

So to recap, during a hypnotherapy session, it is the unconscious part of the mind that is spoken to, where new ideas, concepts and affirmations can be implanted, and it is here that old limiting beliefs can be changed. Past phobias and learnt negative behaviours, feelings and concepts can be looked at and laid to rest, allowing the conscious mind to adopt a more rational positive outlook. The subconscious part of our mind has no critical awareness, and is only limited by our imagination.

Chapter Three

Panic, Anxiety, Fear and Phobia.

Nature has been very clever in installing a small chip into our brains that is designed, amongst other things, to protect us if something life threatening is happening, or about to happen, (the Hypothalamus - part of the endocrine system) and not surprisingly, when we do something that this chip perceives as a potential threat to its host, it starts to react, and this is when we run into problems.

The unconscious mind starts to ask questions like; "why are you doing what you are doing? Do you need to do what you are doing? When will you stop doing it? Do I need to take action?", and then our conscious mind analyses the situation from the stimulus it receives via our environment and our senses such as smell, sound, sight, temperature touch and so on. If the host – that's you and me - doesn't come up with a sensible, rational, logical, objective explanation, and the unconscious mind makes a connection between the outside stimuli and a previous negative experience, the chip in our brain starts to take charge and produces chemicals that will help the body to survive an attack; that's the flight or fight instinct that we hear so much about. When this happens we feel the effects in all sorts of places, our stomachs, legs, arms, wrists, ankles, heart and head, and psychologically it causes feelings of anxiety, stress, panic and fear; phobias can be created associated with this perceived threat, that can last for days months and even years. In prolonged periods, it can cause stress leading to distress, and in sever cases, depression, a less effective immune system causing general ill health, and heart problems.

So let's look in more detail at what's going on. **Stress and anxiety** have some rather devastating affects on the human body. When we are stressed, anxious or frightened, the chemicals our brain releases are: **Adrenaline, Noradrenaline** and **Cortisol** - an '*Alarm Reaction*', part of the **Sympathetic Nervous system**, and this creates all sorts of problems, the eyes adjust to long vision, in preparation for finding an escape route, so that near vision becomes blurred; the skin sweats and becomes pale as blood is drawn from the surface to important organs; muscles under the skin partially contract in readiness to spring into action causing 'goose pimples'; the heart increases its output and blood pressure goes up so you feel your heart pounding; breathing becomes more rapid so that adequate oxygen can be transferred to the blood; the spleen releases more red blood cells from its store; and non essential systems are inhibited, so the digestive system slows and speech is difficult.

With all this going on in the body, it's not surprising that we feel sick; we feel hot or cold; we get headaches; our muscles go into spasms; we feel there is as a knot in the stomach and we can't eat; we are short of breath; our mouth goes dry; we shake; we can't get our words out; our minds go blank and our concentration starts to deteriorate. Is this sounding familiar?

Those people that suffer with anxiety and panic attacks will be only too familiar with these symptoms, as will those that dread public speaking, flying, exams, going to the dentist, and those that suffer with social phobias.

This flight and fight response stuff is understandable, and as I've said, acceptable and very useful when faced with something that is actually life threatening, but when there is only a moderate danger, or none at all (other than in our distorted perception) we need to be able to reduce the output of these chemicals, and dampen down the psychological, emotional and

behavioural responses they create. Changing our perception of a situation; the way we think, changes the way we feel, and changes the way we behave.

Our thoughts, feelings, behaviour and emotions are so closely intertwined with one another, this sequence is more like an electrical circuit, when the circuit is activated anywhere along its length, it creates a chain reaction that completes the circuit before we even have time to consciously think about. Which comes first is still debated in the medical field, some feel that the chemical response is activated by the mere thought of danger, or by acting as if frightened, others feel the unconscious instinctive part of our brain picks signals up we are not aware of, and then produces the chemicals. But all we need to really concern ourselves with is how do we break this cycle, short circuit it and change the negative direction that the electrical current is flowing in, to a positive one? This is where Hypnotherapy, hypnosis and the hypnotic-trance-state really start to work.

Chapter Four

The Process of Hypnosis.

During the state of hypnosis the conscious mind is bypassed, the unconscious part of the mind is spoken to (and if we stay with the electrical circuit metaphor); the negative current is short-circuited, overridden, and the current is reversed in a positive direction, and then rejoined to a positive terminal. Once we have reprogrammed the unconscious mind, and the unconscious mind reconnects with the conscious mind, our perception alters, we feel different, and depending on the reason for hypnotherapy, we find that whatever blockage was stopping us from achieving our goal, has either been reduced to such a degree that we can now live with it, or it has been removed completely. When Hypnotherapy is used for improving health the process can actually affect the way our body functions, causing blood to flow better, veins to dilate, heart rate to reduce, and white blood cells counts to increase, thus improving our immune system.

The first part of the process of hypnosis is the **“induction”** of the trance state; a day dreamy state of mind, often experienced when listening to music, or driving for a long time on a boring road, listening to a long lecture, or during meditation. Think how many times you have driven home from somewhere and you can't remember the actual journey; or in the middle of listening to someone you have drifted off to somewhere else; you are engrossed in a book or TV program to such an extent that you have forgotten the time; that half-awake feeling as you drift to the surface of sleep caught between wakefulness and sleep, these are 'trance' states or 'altered states of mind'.

At this point, I want to lie to rest any misconceptions you may have about the power of hypnotherapy and the hypnotic trance state. Despite publicity in the media, and those that 'perform' on the stage using hypnosis for entertainment, hypnotherapy cannot make you do anything, or say anything or behave in any way that is unnatural to you. It cannot override your sense of morality, alter your judgement about what is right and wrong, or make you more susceptible to the unethical behaviours of others. During a hypnotic trance, you will always be aware of your surroundings when you need to be, you will still hear a fire alarm go off for example, and be able to open your eyes, get up and walk away, or respond to a question asked and answer. You will always be in control just as you are in a fully wakeful state. A hypnotic trance state is arrived at by 'agreement', not by way of coercion.

The Induction sequence of a trance state is to allow your body and mind to move into a state of complete relaxation. This prepares your mind and body to transfer on to the next stage of the hypnotic process. Breathing techniques, relaxation, visualisation imagery, use of metaphors or bombarding the critical mind with an overload of information can all induce the mind to start to alter its state of awareness. The old stereotypical image of swinging a watch in front of a subject's eyes is to some extent valid; it was just another technique to get the conscious critical mind to switch off, to allow the subject to concentrate on what was being said to them and to start to focus on the inner self. Today there are allsorts of hi-tech gadgets about that create moving shapes or noises, but they are just that – gimmicks, and when it comes to listening to Self-Hypnosis Audio Recordings, there is no concrete evidence that using headphones with two different voices in stereo sound, overlaying of voices one on top of another, or special sound effects actually increases the success of the process at all, furthermore, clients of mine than have tried these techniques elsewhere, have told me that they actually find these most annoying, and rather than allowing them to focus on the voice it actually distracted them to such an extent that they gave up using the process. Why re-invent the wheel if it works as it is?

The next stage of the hypnotic process is called the **“trigger”**. Depending on the therapeutic training of the Hypnotherapist and their personal preferences, different techniques will be used to increase the depth of the hypnotic trance state, sometimes a word is offered, or a particular behaviour, such as touching ones ear or pressing a finger and thumb together. This trigger can be used in the normal waking state to reproduce the same state of calmness and relaxation achieved during hypnosis. It can also be used to bring back to the conscious mind any imagery or suggestion that the unconscious mind has visualised or heard during hypnosis. It is always emphasised by the Hypnotherapist, that this “trigger” word or action, will **ONLY** take on this special significance when used in relation to hypnosis, in all other circumstances the word or action will have the same meaning as it always has.

The next level of the hypnotic process is called the **“deepener”**, this stage takes the mind through a process that encourages the critical conscious mind, to fade into the background and the unconscious mind to come into the foreground, and a much deeper hypnotic trance state is established. This state is associated with a vivid involvement in imagined events, a shift into a context-free literal understanding of words and phrases, and a removal of the restrictions ordinarily imposed upon conscious abilities and responses. Hypnotherapy is designed to take full advantage of these characteristics. The Trigger and deepener stages are interwoven with each other and the listener is taken ever further from the conscious world.

During the next stage, the ‘Therapeutic’ stage of the hypnotic trance state, the unconscious part of the mind is spoken to with more precise language with either direct or indirect suggestions; the negative electric current is short-circuited, overridden, and then rejoined to positive terminals. R. A. Havens and C. Walters (1989) say: *‘As a result of these changes in conscious attitude or state of mind, clients in a trance are able to pay closer attention to their own unconscious resources of potential information and guidance. They also are able to more comfortably accept indirect and even direct statements from the therapist...while in a trance state, clients can experience imagined events with such clarity and relaxed involvement that they undergo many of the same changes in learning, performance and belief that they would in the actual situation’.*

Once the unconscious mind is reprogrammed, using a variety of techniques such as deep relaxation, therapeutic language, positive imagery, metaphors, indirect or direct suggestion, and post hypnotic anchors, the unconscious mind can then positively influence the conscious mind in any given situation or series of events. Our perceptions of the situation can be altered, we feel differently about it, and depending on the reason for the hypnotherapy in the first place, we may feel more relaxed, calmer, optimistic, energised, healthier, motivated and more in control of our responses, habits and behaviours. This control increases our confidence. With growing confidence comes the realisation that we can actually achieve those goals that we never thought possible – and the actual subsequent achievement is our biofeedback, and as mentioned before, hypnosis can actually change the way our body functions, causing blood to flow better by dilating blood vessels, reduce heart rate, increase cell production to improve health, as well as may other recorded improvements.

All through a Hypnotherapy session and the hypnotic trance state, whether it be face-to-face or listening to a Self-Hypnosis Audio Recording, positive language is used to encourage you, to motivate you and reward your achievements, positive confidence building are the foundation blocks of the whole process, and added to this are other more specific elements.

Interwoven within the language are suggestions, concepts, and ideas that will help you long after the session has finished.

During the session you will experience the actual event or events that you are struggling to deal with, or the health issue, but this time you will only experience positive sensations, you will see the goal you want and actually be there. You will use all your senses, of smell, hearing, taste, touch, and feelings to experience this achievement; feeling all the positive emotions associated with that achievement. All negative non-productive thoughts, concepts, ideas, feelings, and behaviours are reduced or rationalised and put into their true perspectives. Post hypnotic anchors are used to enable you to make an instant connection between the thoughts, feelings and emotions you have experienced during the hypnotic state, to the here-and-now situation you're in.

The final stage, "**The Termination**" is when the hypnotic trance is brought to an end, and the subject is gently brought back to full consciousness and wakefulness. During this process, the subject is offered the option of bringing back with them into their conscious world, all the thoughts, feelings, and behaviours that they have experienced during the hypnotic trance, and they can also leave behind any that they do not want. This suggestion allows the subject to decide for himself or herself what feelings, thoughts, and emotions they have found most pleasurable and beneficial, that they may wish to hold in their conscious mind.

When the session is finished, you should be left feeling very calm, relaxed and peaceful.

Often during hypnosis, you may experience various physiological and biological changes. Your Legs and arms may feel particularly heavy as if they weigh more than normal, or they may feel light as if they are floating or you experience a tingling sensation in them or sometimes they feel as they are not there any more. You may be aware of your heartbeat slowing down and your breathing becoming shallower. Sometimes the stomach can start to bubble and gurgle and be quite noisy. There maybe increased watering of the eyes and fluttering of the eyelids. Others report that they feel as if they have become at-one with the chair or couch they are resting on, there can be a reluctance to move, and there is a distortion in the passing of time (often an underestimation of the time spent in hypnosis). As you start to drift back from the hypnotic state, you may experience a feeling of euphoria and wellbeing.

The positive feelings of motivation, confidence and improved health, can often take some time develop. There doesn't seem to be any particular reason why hypnotherapy works instantly for some people, but takes time for others. And even when it feels that nothing at all has actually happened, you'll be surprised at just how much has changed, but this is only noticed in retrospect when you look back at how you were before you started using hypnosis.

Chapter Five

Face-to-Face and Audio Recordings; possible uses.

In an ideal world, face to face Hypnotherapy is the preferred way to use this form of therapy, but in today's fast moving busy life, few of us has the luxury of time or money to go for regular Hypnotherapy sessions and there may not be a qualified registered Hypnotherapist that specialises in your problem within commuter distance.

The main advantage of a face-to-face session though, is that a consultation process is gone through first, during this session information is gathered so that the language used during hypnosis is tailor-made to that of the listener. This increases the intensity of the therapy and depth of the hypnotic trance state, and this can improve the success rate.

However, with the advent of new technology and a better understanding of hypnotic scripts and techniques, Hypnotherapy via an audio recording has become a very good alternative. It is possible to train oneself to use self-hypnosis and gain almost the same benefits of face-to-face Hypnotherapy, and is safe, gentle and non invasive and can be repeated as often as the listener requires at no added expense.

Possible Uses:

Over the past decade, hypnotherapy has established widespread therapeutic use in medical and psychotherapy settings. It is now recognised by the National Health Service in the United Kingdom as an Alternative and/or Complimentary Therapy, and can be offered as such to patients as a valuable, safe therapy for a whole host of emotional, psychological, and physical ailments.

Many of you will be familiar with its use for smoking cessation, to control over eating, and helping to cure phobias and fears, but you may not be as familiar with its use for anxiety, depression, and insomnia, panic attacks and stress, for confidence building and Sports Psychology interventions. Here are just a few of the issues that hypnotherapy has been used for with continued success. You will not see amongst this list issues such as "how to attract the opposite sex", promoting hypnotherapy for this purpose and similar, would be unethical and only serves to discredit the profession.

- Ego Strengthening
- Self-Advocacy
- Develop calmness, relaxation, and confidence
- Develop insight and clarity
- Establish self-control and direction
- Generate new and productive behaviours
- Challenge limiting beliefs and self-perceptions
- Maximise resources and potentials
- Generate awareness, options and goals
- Unlearn and re-learn

- Complete business (catharsis/let go of blocked emotions)
- Regression – to obtain freedom from aspects of the past
- Relaxation and stress management
- Management of pain (physical manifestations)
- Management – control of fears and phobias
- Management – control of habits and compulsions.
- Control I.B.S.
- Boosts the Immune System
- Vein Dilation

For some, Hypnotherapy, and particularly Self-Hypnosis, does not work, and there are different theories as to why this is, as mentioned earlier, those people that are very analytical, and question everything to such an extent that they find it impossible to accept a concept that they perhaps don't fully understand, may find the hypnotic state eludes them. If you find losing control or enjoying yourself doesn't come easy, then this can also make relaxing into a hypnotic state very difficult.

Sometimes hypnosis fails because we self-sabotage the process, and I know this sounds odd when you really are convinced in your own mind that you want something to change. If the desire to hang on to these thoughts, feelings and behaviours is very resistant to removal, it maybe that they are serving a useful purpose. Just imagine this scenario.

Lets say you have a boss that makes your life a misery at work, and over the months you have tried to find another job but can't. Then out of the blue, you start to develop panic attacks, they are diagnosed as such by your GP, and you are forced to take some time off work. Whilst you are off work, you can avoid the daily terror of facing the boss (or any other situation that you want to avoid). In this case, it would be self defeating to find a cure for the panic attacks, because this would result in you returning to work. Therefore, if there is a 'positive' side to an unwanted behaviour, phobia or fear; there is the motivation for it to remain, because removing it may cause an even worse situation. Another good example of this is young girls that smoke, but are unaware that they do this as a substitute for food, (to avoid gaining weight). They find it difficult to stop smoking, even though they feel they really want to, because unconsciously there is a stronger motive to carry on.

If there are other underlying reasons for the preservation of a phobia or fear, then these really need addressing, if Hypnotherapy doesn't work for you, and you still want to get to the bottom of your problem, think about seeing a qualified Counsellor or Psychotherapist that works in an integrative way, combining various models of therapy to suit you.

I hope you have found this eBook useful, and if you need any further information about my CD's or Audio Downloads, please don't hesitate to contact me through my website

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END

Bibliography:

Waxman, D., (1981). *Hartlands medical and Dental Hypnosis*. Baillier Tindall, London.

Thompson, A., (2001). *Handbook for students*. Salford College, Manchester, England.

Havens, Ronald A., and Walters C. (1989). *Hypnotherapy scripts*. Brunner/Mazel Publications, New York.

Greenberger, D., and Padesky A. (1995). *Mind Over Mood*. The Guilford Press, New York.

Looker T & Gregson O. (1997). *Managing Stress*. Hodder and Stroughton. London.

Lloyd, P., Mayes A., Manstead, A., Meudell, P., Wagner, H.,(1990). *Introduction to Psychology*. Fontana Press, Glasgow.