

CASE STUDY – ARACHNOPHOBIA



Trevor Eddolls - creepy crawley tales

With arachnophobia in at number one (as they used say) in the phobia charts, I wasn't surprised to be asked by her mum to help a 16 year old girl with a fear of spiders. What made this different from the usual phobia treatments was that the girl was going off with the school to Borneo for four weeks in the summer and there was only a very short time before the end of term and the trip leaving. In fact, the phobia-busting was all going to have to be done in a single session!

I decided that we would make it a double session with a short break. And I decided to see Sally (not her real name) and her mum together for the first half, which was pretty much an initial consultation with the focus on how our primitive brain leaps in to help us and runs through a behaviour template until we feel safe again. Why did I see them together? Because I thought they could chat over the information in the car going home, and as often as they liked afterwards – and so reinforce the information I was giving which the girl might have begun to forget without someone to remind her.

As we moved towards the end of this first session, I let Sally briefly tell me about how she behaved at the moment, and then we spent much longer looking at how she wanted to behave – particularly how she wanted to be in Borneo. I spent some time getting Sally to make the picture in her mind of how she wanted to behave clearer, brighter, and more vivid.

So, by the time we finished the first session, they knew that Sally needed to stay in her intellectual brain (like Mr Spock) and not be automatically

pushed into her primitive brain if she saw, or thought she saw, a spider.

We took a short comfort break. Both said how much they had enjoyed that first session.

For the second session, I saw Sally on her own. I told her we were going to do three things – firstly an easy way to relax (because when you relax you're more able to stay in your intellectual brain); secondly an anchoring technique (so that she could quickly recover the feeling of being confident and in control, even when in situations where she might have felt she wasn't); and thirdly, a fairly standard rewind with a brief reframe at the end.

So, I recapped on relaxation being good for staying in the intellectual brain and staying in control, and then I got her to practice peripheral vision relaxation. Usually when people use this technique you can notice that their breathing becomes a little slower and may change from chest breathing to stomach breathing. You also often notice their faces relaxing, and they may notice these things and their hands getting warmer! What's going on? It seems

that foveal vision (that kind of focused looking) is associated with the sympathetic nervous system (part of the autonomic nervous system), which is associated with activity (arousal and releasing adrenaline). Whereas, peripheral vision is associated with the parasympathetic nervous system (also part of the autonomic nervous system) that is responsible for relaxation and calmness.

The technique is to get the client to focus on a point in front of them and slightly above – I have a point in the curtain rail that does the trick. This is foveal vision, the one they use for reading and watching TV. I then ask the client to gradually become aware of what is around them, to let their vision spread out in front of them to the corners of the room, while their eyes are not moving, still looking at the same spot. I then ask them to become more aware of the periphery of their vision. I suggest that they could stretch out a hand on either side of them and find the point on the very edge of their peripheral vision where they can only see their hand when they wiggle fingers. And then I suggest that they let their awareness spread behind them. Not that they can see behind, but that they could let their senses

of hearing, touch, smell, and spatial awareness spread out to the periphery and then behind them. And as they do that, I ask them to notice the changes in their physiological state.

I told Sally that this was the first of the techniques that she could take away with her and use anytime she wanted to relax.

The second technique was an anchor. I asked Sally what stimulus she wanted to use. Some people prefer rubbing their ear, some like pressing their finger and thumb together, or holding their wrist. She chose rubbing the

lobe of her ear. I asked her what feeling she wanted to be reminded of when she 'fired' her anchor, and she said confident and in control. I asked Sally to just shut her eyes and think about what it feels like to be confident and in control. I told her to turn up the colour even higher, and the contrast, and brightness, and see those images really vividly. I told her to notice all the positive sounds that are associated with being confident and in control, and turn up the volume on these, and notice the timbre, tone, etc. I asked her to allow herself to notice how she feels inside, and, again, to turn up all the positive feelings. When Sally looked at the peak of her confident/in control experience with all her senses and emotions engaged, I told her to rub her ear – and to keep going for about 10 seconds while she was optimally associated with the desired state. Then I told her to let go.

I immediately asked: "What's your mobile phone number backwards?" This was to stop Sally associating the action (anchor) with a decreasing feeling of confidence – which would have happened if I switched her focus (breaking state).

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I repeated these two steps a couple of times (asking questions about carpet colour) to ensure that the anchor was linked to the feelings of being in control and confident (called the resourceful state).

I then asked Sally to rub her ear and asked: “How does that feel?” She said that it did make her feel confident and in control. She added: “That’s amazing!”. I told her that she could use this when she was in Borneo to keep in control and in her intellectual brain. She seemed very pleased with the technique.

The third, and the most important, technique was the rewind. Sally got on the couch and I put on the usual hypnotherapy music. We’d already said that she needed to have the first and worst examples of her arachnophobia in mind and she said that she had those memories. I told her that part of the cleverness of this technique is that if she couldn’t remember all the details, she could make them up in her head. I then ran through a simple relaxation

starter and straight into a standard rewind session. I kept an eye on the numbers on the GSR monitor and she seemed to be working hard.

Once we’d finished that, I gave her an improvised paragraph from confidence scripts about how what we think can affect our whole lives. I then spent a little while reframing with some of the information, about how she would like to be, that we had talked about earlier. Finally I told her that when she was ready, and no longer fearful of spiders, she could open her eyes.

Sally and her mum thanked me and left. I found out that, later that evening, her boyfriend had been What’sApping her photos of spiders and she had been laughing at them. Her mum also sent me a picture of Sally holding a spider in her hands that she’d picked from the bath.

It looked like the session had been a complete success ■

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