

The Hypnosis Examiner



HAPPY 4th OF JULY!

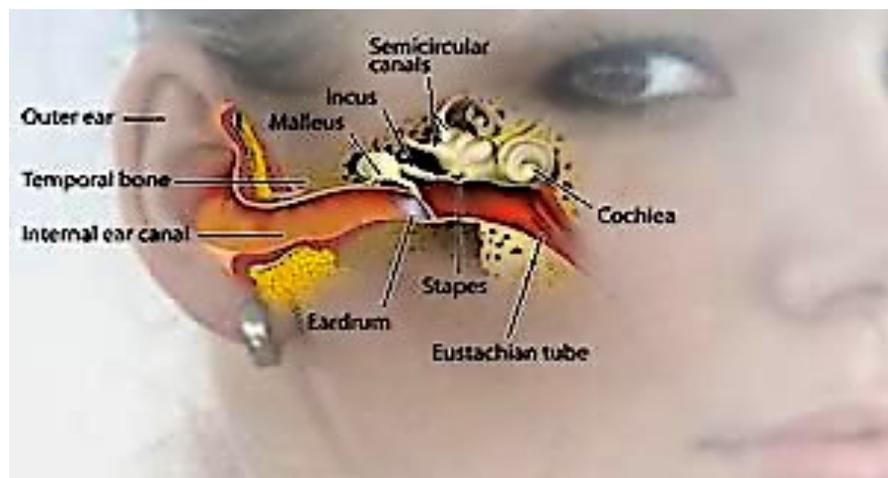
Independence Day is a day of family celebrations with picnics and barbecues, showing a great deal of emphasis on the American tradition of political freedom. Activities associated with the day include watermelon or hotdog eating competitions and sporting events, such as baseball games, three-legged races, swimming activities and tug-of-war games.

Independence Day is a patriotic holiday celebrating the positive aspects of the United States. Many politicians appear at public events to show their support for the history, heritage and people of their country.

This year may be celebrated a bit differently than any other due to recovery attempts from the COVID-19 pandemic.

-The Editor

Feature Article: “MARVELS OF THE HUMAN BODY: Ears & Sound”



The ear is the organ of hearing and, in mammals, balance. In mammals, the ear is usually described as having three parts—the outer ear, the middle ear and the inner ear. The outer ear consists of the pinna and the ear canal. Since the outer ear is the only visible portion of the ear in most animals, the word "ear" often refers to the external part alone. The middle ear includes the tympanic cavity and the three ossicles. The inner ear sits in the bony labyrinth and contains structures which are key to several senses: the semicircular canals which enable balance and eye tracking when moving; the utricle and saccule which enable balance when stationary; and the cochlea which enables hearing. The ears of vertebrates are placed somewhat symmetrically on either side of the head, an arrangement that aids sound localization.

Sound waves traveling through the outer ear are modulated by the middle ear and are transmitted to the vestibulocochlear nerve in the inner ear. This nerve transmits information to the temporal lobe of the brain where it is registered as sound. Sound that travels through the outer ear impacts on the eardrum and causes it to vibrate. The three ossicle bones transmit this sound to a second window (*the oval window*) which protects the fluid-filled inner ear. In detail, the pinna of the outer ear helps to focus a sound which impacts on the eardrum. The malleus rests on the membrane and receives the vibration. This vibration is transmitted along the incus and stapes to the oval window. Two small muscles, the tensor tympani and stapedius, also help modulate noise. (see page 2 - EARS & SOUND)

EARS & SOUND

(from front page)



The inner ear houses the apparatus necessary to change the vibrations transmitted from the outside world via the middle ear into signals passed along the vestibulocochlear nerve to the brain. The hollow channels of the inner ear are filled with liquid and contain a sensory epithelium that is studded with hair cells. The microscopic "hairs" of these cells are structural protein filaments that project out into the fluid. The hair cells are mechanoreceptors that release a chemical neurotransmitter when stimulated. Sound waves moving through fluid flows against the receptor cells of the organ of Corti. The fluid pushes the filaments of individual cells. Movement of the filaments causes receptor cells to become open to receive the potassium-rich endolymph. This causes the cell to depolarize and creates an action potential that is transmitted along the spiral ganglion which sends information through the auditory portion of the vestibulocochlear nerve to the temporal lobe of the brain.

The human ear can generally hear sounds with frequencies between 20 Hz and 20 kHz (*the audio range*). Sounds outside this range are considered infrasound (*below 20 Hz*) or ultrasound (*above 20 kHz*). Although hearing requires an intact and functioning auditory portion of the central nervous system as well as a working ear, human deafness (*extreme insensitivity to sound*) most commonly occurs because of abnormalities of the inner ear rather than in the nerves or tracts of the central auditory system.

Providing balance, when moving or stationary, is also a central function of the ear. The ear facilitates two types of balance: static balance which allows a person to feel the effects of gravity and dynamic balance which allows a person to sense acceleration.

Static balance is provided by two ventricles, the utricle and the saccule. Cells lining the walls of these ventricles contain fine filaments and the cells are covered with a fine gelatinous layer. Each cell has 50–70 small filaments and one large filament, the kinocilium. Within the gelatinous layer lie otoliths, tiny formations of calcium carbonate. When a person moves, these otoliths shift position. This shift alters the positions of the filaments which opens ion channels within the cell membranes creating depolarization and an action potential that is transmitted to the brain along the vestibulocochlear nerve.

Dynamic balance is provided through the three semicircular canals. These three canals are orthogonal (*at right angles*) to each other. At the end of each canal is a slight enlargement known as the ampulla which contains numerous cells with filaments in a central area called the cupula. The fluid in these canals rotates according to the momentum of the head. When a person changes acceleration, the inertia of the fluid changes. This affects the pressure on the cupula and results in the opening of ion channels. This causes depolarization which is passed as a signal to the brain along the vestibulocochlear nerve.

Dynamic balance also helps maintain eye tracking when moving via the vestibulo–ocular reflex.

Although we depend on both vision and hearing to interact with our environment, we generally consider blindness a greater disability than deafness. At least when we've lost our hearing, we can still see to navigate through the world and we can learn sign language or lip reading to communicate. While blindness leaves our language abilities intact, however our mobility and independence are greatly impacted.

For sighted people, hearing takes the center stage of our attention when the visual input is unclear. Imagine you're deep in a forest and it's getting dark. All you can see are trees and shadows but a rich panoply of sounds will tell you what's going on around you. You don't know if it's an illusion or reality but the woods or forest sound much noisier after dark.

We don't experience our senses individually. Rather, our brain meshes with our vision and hearing to create our conscious experience of the world. What you see can influence what you hear and likewise what you hear can affect what you are seeing.

Although speech is perceived through the ears, what we see can change what we hear.

Hearing can also affect what you see. If an image flashing once on screen is accompanied by two beeps, you'll see the image flashing twice. Likewise, two dots crossing diagonally on a screen appear to pass each other if there's no sound but they appear to bounce off each other if you hear a "boing" at the precise moment the two dots overlap.

For sighted people, vision dominates conscious experience. We focus our attention on what we look at. Hearing is relegated to a secondary role, mainly to monitor the environment for potential threats or opportunities that call on us to shift our visual attention. Right now you're reading this article but if you heard a loud noise behind you, you'd turn to look for its source.

People with profound hearing loss however, need to use their vision both for focused attention and for monitoring the environment. As a result, the brains of deaf people process more information from a single glance than do hearing people. This widened span of visual perception has unexpected consequences.

Our intuition tells us that our senses are separate streams of information. We see with our eyes, hear with our ears, feel with our skin, smell with our nose and taste with our tongue. In actuality though, the brain uses the imperfect information from each sense to generate a virtual reality that we call consciousness. It's our brain's best guess as to what's out there in the world but that best guess isn't always right.

Hearing, like vision, extends further than mere sounds traveling from our environment to the tympanic membrane for interpretation.

Sound and sight are intake organs that absorb information from our surroundings for our brain to process and interpret. (*see page 6*)

Sports Page



“SPORTS PSYCHOLOGY”

Athletes and coaches generally focus on the physical training and discipline to master sports skills. However, mental and emotional skills training can be just as important for success in sports and in life beyond sports. The aim of sports psychology is to address the mental and emotional needs of athletes. This enhances their overall well-being and boosts their sports performance to the highest level possible.

Everyone experiences stress but many athletes experience unique internal and external pressure to excel both on and off the playing field. Sports psychologists work with athletes to help manage these stressors, improve their sports performance and develop emotional balance.

Today, mental skills training has become as much a part of athletic success as strength, power and endurance training. This is thanks to the mindfulness movement and the popularity of meditation, yoga and visualization practice in mainstream media. Research on the benefits of mindfulness meditation on resilience and stress management have carried over to the field of sports psychology. Many athletes continue to benefit from adding mental skills training to their fitness training routine.

The origin of sports psychology is not easy to identify. Some believe it developed out of the field of psychology and others believe it emerged from a branch of physical fitness training. The first serious attempts by researchers to study how the mental and emotional landscape of athletes affects their athletic performance can be traced to the 1920s when dedicated sports psychology labs

began emerging in Germany, Russia and the United States.

Many consider Dr. Coleman R. Griffith the father and founder of sports psychology as we know it in the United States today. Griffith created a research lab and taught courses in sports psychology at the University of Illinois in the 1920s and authored two books focused exclusively on the psychology of sport: *The Psychology of Coaching* published in 1926 and *The Psychology of Athletics* in 1928.

No longer a fad or a luxury, sports psychologists are routinely employed by a large majority of professional athletes and teams. Even amateur athletes are finding value in adding mental skills training to their workouts.

The current academic and practical side of sports psychology includes specific and uniform standards of training, research and implementation. In 1986, the American Psychological Association (*APA*) created Division 47 which is focused specifically on exercise and sport psychology. There are also several academic journals including *The International Journal of Sports Psychology*, that is dedicated exclusively to the study of sports psychology.

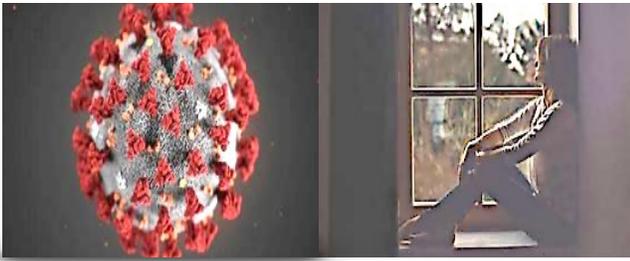
The field of sports psychology continues to grow as research accumulates but there are some common areas of focus employed by the majority of sports psychology practitioners. These areas tend to address three core aspects of mental and emotional training in athletes:

Performance Enhancement

Visualization and mental rehearsal have long been the cornerstone of sports psychology research and training. Its main focus is to help improve an athlete's performance. Such practice allows an athlete to prepare mentally for the perfect scenario and develop a mental 'map' of a given outcome. The science of visualization, also called imagery or self-hypnosis, indicates that an imagined experience is interpreted similarly to an actual event and therefore leads to improved confidence and competence in an athlete.

Some studies even indicate that visualization may lead to strength gains in athletes. Similar to visualization, self-talk and cultivating a positive attitude can be a critical feature of regular mental skills training. Whether an athlete needs to work on attention, centering and focus or reducing and managing anxiety during stressful situations, these techniques all aim to reduce distractions in order to improve an athlete's sports performance.

(See Psychology page 6)



SOCIAL ISOLATION

2020 brought the planet Earth a new challenge no one ever expected, . . . COVID-19 novel coronavirus pandemic! The only immediate answer to controlling this horrific disease that swept the entire world was “STAY AT HOME” and self-isolate from everyone outside of your own personal domicile!

Medial science had and still has no resolution to controlling the continual deadly spread of coronavirus which led leaders of our nations to take the “bull-by-the-horns” enforcing the Stay-At-Home order until other means of management can be found.

This meant that private citizens had to confine their world to their “immediate surroundings” and with very limited movement for essential items only. This included “social distancing” during essential travel and public exposure. This, of course, meant social isolation had to become a part of everyone’s daily life.

Social isolation can generally be defined as “the absence of social interactions, contacts and relationships with family and friends, with neighbors on an individual level and with ‘society at large’ on a broader level.” This isn’t just some amped up offshoot of cabin fever, mind you, the psychological stress that social isolation causes can have extreme detrimental effects on a person’s mental, emotional and even physical health.

Humans are hardwired to interact with others, especially during times of stress. Yes, other people can be irritating but they are also our greatest source of comfort and an impressive amount of psychological research underscores the importance of human contact. When we go through a trying ordeal alone, a lack of emotional support and friendship can increase our anxiety and hinder our coping ability.

Prolonged social isolation physically changes the shape and function of your brain. The hippocampus, the region responsible for learning and memory not only shrinks in size in response to long-term isolation, it loses its plasticity and may eventually shut down altogether. At the same time the amygdala, which regulates your fear and anxiety response, goes into overdrive. And the longer the confinement lasts, the more pronounced these changes become.

People can be socially engaged while still being physically isolated, thanks to modern remote communication technologies like Zoom, Instagram Live, Teams or even telephones. It boils down to whether people perceive themselves to be socially isolated or not. And that physical isolation may be a factor that weighs in on that decision but it’s not the only factor and sometimes it’s not even a factor at all.

Of course some people will both physically and socially isolate themselves on purpose such as astronauts. Whether they’re prepping for a trip to the moon or just orbiting in the ISS, isolation is par for the course when it comes to space science. It’s also something that NASA and other national space agencies have spent years studying. Whether you’re stuck 254 miles above the Earth or quarantined in your apartment, you’ve got plenty of options for fighting off the effects of social isolation.

Don’t just sit and watch TV. Try watching different kinds of shows from what you normally would. Prepare different kinds of meals from what you normally would, learn a new skill! It’s important not to think you’re on holiday with no routines and no goals. That’s what they do in the space station, they have routines and established time for things to avoid becoming complacent during your time in isolation.

Alone in an unchanging environment, the sensory information available to us and the ways in which we process it, can change in unpredictable ways

For example, we normally spend most of our time attending to and processing external stimuli from the physical world around us. However, monotonous stimulation from our surroundings may cause us to turn our attention inward, which most of us have much less experience handling.

This can lead to a profoundly altered state of consciousness. We may begin to question what’s going on in our surroundings: Is that creaking sound upstairs just your old house pushing back against the wind or something more sinister? This ambivalence leaves us frozen in place and wallowing in unease, especially if we’re alone. When we’re uncertain, the first thing we usually do is to look to the reactions of others to figure out what is going on. Without others with whom to share information and reactions, ambiguity becomes very hard to resolve. When this happens, our mind can quickly race to the darkest possible conclusions.

Unpleasant things can also happen when small groups of people experience isolation together. Much of what we know about this phenomenon has been gathered from observing the experiences of volunteers at research stations in Antarctica especially during the “wintering-over” period. Antarctica’s extreme temperatures, long periods of darkness, alien landscapes and severely reduced sensory input create a perfect natural laboratory for studying the effects of isolation and confinement. Volunteers in these studies experience changes in appetite and sleep patterns. Some stop being able to accurately track the passage of time and lose the ability to concentrate. The boredom that results from being around the same people, with limited sources of entertainment, causes a lot of stress and everyone else’s mannerisms become a grating, annoying, and an inescapable source of torment.

There are, however, ways to manage the feelings of isolation:

Watch a movie or TV show together. Find a friend or family member you are distanced from who has similar tastes and commit to watching the same show, then calling or texting one another to discuss it;

Have a date night with another couple. Make dinner and pour some wine, then switch on the video chat to enjoy a meal with another couple;

Start or join a virtual book club. Get to know others through your mutual love of books. Book clubs can easily be held online and there are websites specifically made for this activity;

Learn something new together. Pick a topic and find a friend who wants to learn along with you. You could set up a video chat date to discuss what you’ve learned. If you have a friend or family member with a skill that can be taught over video chat, ask them to teach you! Many subjects can be taught from a distance;

Create a group video chat and catch up with your whole family or friend group at once. These chats can be hard to manage with so many voices but are fun to coordinate every once in a while;

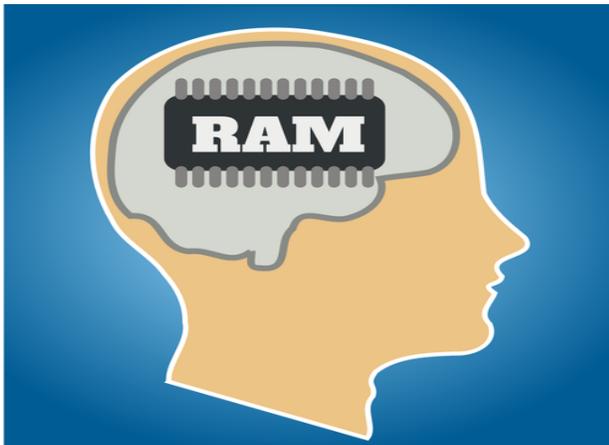
Collaborate and plan something together. Websites and apps make collaborating on work and non-work tasks easy. Start a shared document and complete ideas or links together.

The Blog Post

“CAN HYPNOSIS REALLY RECOVER LOST MEMORIES?”

Posted on November 18, 2016

This Blog Post is a contribution by Ara Trembly, a Board Certified Hypnotherapist and Licensed Professional Counselor based in St. Marys, GA. He maintains a web site at www.10-10hypnosis.com and a blog at www.10-10hypnosis.com/blog.



The answer to this question depends on what kinds of memories we are talking about.

For example, one of the most controversial uses of hypnosis has been in the so-called recovery of “suppressed memories” of traumatic events.

There was a time not so long ago when it was believed that the subconscious mind records an exact record of everything that happens to a person, and that if hypnosis could tap this record, even long-lost memories could be recovered. This technique has been famously used to allegedly help victims of psychological and physical trauma to recover memories of what was done to them long in the past, and by whom it was done. The idea is that the memory has been suppressed by the unconscious mind because it is too painful for the conscious mind to deal with.

Unfortunately, this way of recovering “memories” rests on a false premise: namely that what the unconscious mind records is an exact record of what went on—similar to a video recording. Research has shown, however, that this is simply not so. What the mind remembers is its own “story” of what happened, and this story—told by an individual to himself or herself—has many contributing factors, such as the emotional state of the individual at the time of the event, the ability of the individual at that time to understand what was happening, the influence of those attempting to recover the memory,

and the desire of the individual to change the story to make himself or herself appear more heroic or blameless. Readers interested in this subject should consult Elizabeth Loftus’ groundbreaking work “The Myth of Repressed Memory.”

The key point is that what is “recovered” could certainly be tainted by a number of factors to the point that it is far from a factual representation of any situation remembered. I have yet to see any convincing evidence that exact memories of past events can be extracted by hypnosis, but I have seen that an individual’s feelings about such events can be uncovered by reliving the the events under hypnotherapy. This can be highly useful in therapy.

Other memories, such as the location of a lost object, can indeed be recovered, but this is more a case of the individual concentrating on the object—aided by hypnosis—and simply accessing information already contained in the mind. This information is usually not of a traumatic nature, so suppression for that reason is not a factor.

To be sure, this is a very complicated subject, and we have barely scratched the surface here. It is worth remembering, however, that hypnosis—while it may look like magic—is not. Helping the mind to relax and focus is sometimes all that is needed to retrieve the “lost” information sought.

This blog post is printed unabridged, verbatim, without editing and/or spell corrections. It is not necessarily reflect the same views shared by the editor.

“THE NEW NORMAL”

This is a new catch phrase that is floating around our communities as we slowly (*or sometimes quickly*) surface from the strictness of the previous “Stay At Home” executive order put in place by most states in the United States of America.

What does “the new normal” mean? Is it indicative that we will never return to the familiarity of lifestyles that we once enjoyed (*or not enjoyed*) or does it mean we will never be the same since COVID-19 has entered our existence?

I guess that no one can definitively answer that question at this point in time but more importantly, what does it mean to you?

As we eventually emerge from the global devastation of the coronavirus, our actions (*or reactions*) will determine what our tomorrow will look like, be like and become in the days ahead.

One thing is for certain, what we do today, “will” change the reality of tomorrow.

Change IS a constant!

The Editor

MORE EARS & SOUND

(continued from page 2)

When you hear people talking, sound waves travel through the air and into your ears, vibrating your ear drums. Your brain then transforms those vibrations into sound. However, when you're the one talking, your vocal cords and airways also vibrate. That means that you receive two sources of sound: the sound waves that travel into your ears from your own voice and vocal cord vibrations.

When we talk, it's like everyone hears the sound through speakers but we're hearing it through a cave complex inside our own heads. The sound is going around our sinuses, all the empty spaces in our heads and the middle part of our ears which changes the way we hear sounds compared to what other people hear. People perceive their own voice to be the combination of those two sources of sound but everyone else just hears the external stimulus. This is why when you listen to your voice in a recording, it sounds different from the voice you're used to hearing. You're hearing only the external stimulus rather than the combination of the two sounds.

Most people don't sit around listening to the sound of their own voice independently from talking so they can become detached from how they actually sound. When we hear our own voice in a recording, it can often feel surprising and disappointing. We get used to the sound we hear in our heads even though it's a distorted sound. We build our self-image and vocal self-image around what we hear rather than the reality. This reality can have profound affects on our self-image and the imprints of who we receive to be rather than who we really are.

We hope you enjoyed this article, however, be sure to look forward to the next feature, "Marvels of the Human Body" in this year's last edition of THE NEWSLETTER.

PSYCHOLOGY

(continue from page 3)

Some experts point out the very real impact of the so-called placebo effect produced by an athlete's beliefs as highlighted by the many superstitions and rituals some athletes swear by.

Resilience and Injury Recovery

Another area where a sports psychologist can make an impact on an athlete is by helping them develop mental and emotional resilience, particularly after a major setback, loss, or injury. This skill is essential for injured athletes who may succumb to

the emotional stress of injuries by becoming depressed, isolated or withdrawn. Learning how to use specific mental skills for coping with an injury and to use the power of the mind to facilitate physical healing, may sound far-fetched. But sports psychologists and athletes have found real benefits in practicing these mental skills.

Motivation and Emotional Stress

Any athlete may occasionally feel fatigued, washed out or simply unmotivated to train day after day. Sometimes it indicates a deeper issue. Motivation, and the lack of motivation, is another area in which a qualified sports psychologist may step in to help athletes discover the root of their issues. Perhaps they are physically or mentally fatigued, overtraining or even facing other emotional stresses.

Motivation isn't always a matter of finding the right music playlist or reading a motivational quote. Sometimes, the real issue with lacking motivation is psychological, physical or social stress. A qualified sports psychologist can uncover the core issue and help an athlete design a strategy and set appropriate goals to rekindle the desire to play.

A sports psychologist is a specific type of practitioner who works with athletes to improve their emotional and mental well-being in efforts to promote optimal athleticism. In the process of working with a sports psychologist, many athletes will see their sports performance improve dramatically but even if this doesn't happen, most clients will experience an increase in their emotional balance and stability on and off the playing field.

The world of sports psychology is large and varied. Some experts work with professional athletes either one-on-one or in teams and are well compensated. Others prefer working with amateur athletes, children or athletes of a specific sport.

Becoming a qualified sports psychologist requires both academic and practical experience. The educational routes are also varied with applied psychology at the core of most academic programs. The gold standard requires an advanced degree, such as a Ph.D. in Psychology and specific training with athletes. However, many Master's degreed professionals also have a specialization in sports psychology.

Though less common, some personal trainers and hypnotherapists have also joined the growing number of experts who help athletes manage stress, anxiety and performance issues related to their thoughts and underlying beliefs.

WHAT IS THOUGHT?

Thought encompasses an "aim-oriented flow of ideas and associations that can lead to a reality-oriented conclusion."

Although thinking is an activity of an existential value for humans, there is still no consensus as to how it is adequately defined or understood.



Because thought underlies many human actions and interactions, understanding its physical and metaphysical origins and its effects has been a longstanding goal of many academic disciplines including philosophy, linguistics, psychology, neuroscience, artificial intelligence, biology, sociology and cognitive science.

Thinking allows humans to make sense of, interpret, represent or model the world they experience and to make predictions about that world. It is therefore helpful to an organism with needs, objectives and desires as it makes plans or otherwise attempts to accomplish those goals.

Psychologists have concentrated on thinking as an intellectual exertion aimed at finding an answer to a question or the solution of a practical problem. Cognitive psychology is a branch of psychology that investigates internal mental processes such as problem solving, memory, and language. The school of thought arising from this approach is known as cognitivism, which is interested in how people mentally represent information processing. It had its foundations in the Gestalt psychology of Max Wertheimer, Wolfgang Köhler, and Kurt Koffka and in the work of Jean Piaget, who provided a theory of stages/phases that describes children's cognitive development.

Cognitive psychologists use psychophysical and experimental approaches to understand, diagnose and solve problems, concerning themselves with the mental processes which mediate between stimulus and response. They study various aspects of thinking, including the psychology of reasoning and how people make decisions and choices, solve problems, as well as engage in creative discovery and imaginative thought. Cognitive theory contends that solutions to problems either take the form of algorithms: rules that are not necessarily understood

but promise a solution, or of heuristics: rules that are understood but that do not always guarantee solutions. Cognitive science differs from cognitive psychology in that algorithms that are intended to simulate human behavior are implemented or implementable on a computer. In other instances, solutions may be found through insight, a sudden awareness of relationships.

In developmental psychology, Jean Piaget was a pioneer in the study of the development of thought from birth to maturity. In his theory of cognitive development, thought is based on actions on the environment. That is, Piaget suggests that the environment is understood through assimilations of objects in the available schemes of action and these accommodate to the objects to the extent that the available schemes fall short of the demands. As a result of this interplay between assimilation and accommodation, thought develops through a sequence of stages that differ qualitatively from each other in mode of representation and complexity of inference and understanding. That is, thought evolves from being based on perceptions and actions at the sensorimotor stage in the first two years of life to internal representations in early childhood. Subsequently, representations are gradually organized into logical structures which first operate on the concrete properties of the reality, in the stage of concrete operations and then operate on abstract principles that organize concrete properties in the stage of formal operations.

In recent years, the Piagetian conception of thought was integrated with information processing conceptions. Thus, thought is considered as the result of mechanisms that are responsible for the representation and processing of information. In this conception, speed of processing, cognitive control and working memory are the main functions underlying thought. In the neo-Piagetian theories of cognitive development, the development of thought is considered to come from increasing speed of processing, enhanced cognitive control and increasing working memory.

Positive psychology emphasizes the positive aspects of human psychology as equally important as the focus on mood disorders and other negative symptoms. In Character Strengths and Virtues, Peterson and Seligman list a series of positive characteristics. One person is not expected to have every strength, nor are they meant to fully encapsulate that characteristic entirely. The list encourages positive thought that builds on a person's strengths, rather than how to "fix" their "symptoms."

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COMEDY CORNER

This little corner is designated to helping you get through your day with a bit of a smile.

We’re all aware that ‘humor is the best medicine.’ So, here’s your quarterly dose. Enjoy!

A three-legged dog walks into a saloon in the Old West. He slides up to the bar and announces: “I’m looking for the man who shot my paw.”

Two vultures board an airplane, each carrying two dead raccoons. The stewardess looks at them and says, “I’m sorry, gentlemen, only one carrion allowed per passenger.”



METATHESIOPHOBIA

The fear of change or changing things is called Metathesiophobia. It is often linked with Tophophobia which is the fear of moving. The origin of the word Metathesiophobia comes from Greek ‘meta’ meaning change and phobos meaning fear.

This specific phobia can reduce one’s will to live. Metathesiophobes often feel that they have no control over their lives owing to constant changes. S/he tends to live in the past and may also be depressed. Their phobia makes them unwilling to move, to progress or to change anything from routine. This can severely impact one’s professional and personal lives.

The fear of change is evolutionary in humans. Since times immemorial, man has liked routine. Our internal predispositions (*heredity and genetics*) teach us to resist change mainly to ‘always feel in control’. The normal fear of change becomes a full blown phobia when it is irrational, persistent and very intense.

Personal emotional distress caused by many life changes can trigger such a fear of change. A child who has experienced moving multiple times in short periods of time or the death of a family member or loved one might also have experienced changes in financial situations or lifestyle owing to these changes. This can lead him/her to resist change of any type even in adulthood.

Fear of being unable to adapt, fear of meeting new people or fear of environmental changes can also deter one’s adaptability. Insecurity and guilt are other common emotions behind Metathesiophobia.

If you suffer from the fear of change or Metathesiophobia, note that it is neither a mental illness nor a sign of weakness. Many people suffer from this phobia but the key is to accept change as part of life and, if need be, seek out therapy to guide one through difficulties faced during the time of change.

T.H.E. BACK ISSUES

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January 2019 - Vol. 8 #1

Feature: Habits-What Are They: Part 1

April 2019 - Vol. 8 #2

Feature: Good Habits: Part 2

July 2019 - Vol. 8 #3

Feature: Bad Habits: Part 3

October 2019 - Vol. 8 #4

Feature: Changing Habits: Part 4

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T.H.E. Editor

8th Year of Publication



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PhD, LPN, RMT, CSH, MHt

- 🎓 Master Hypnotherapist
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- 🎓 Medical & Dental Specialist Boards:
- 🌐 International Hypnosis Federation
- 🌐 American Board of Hypnosis
- 🌐 International Association of Counselors & Therapists
- 🌐 International Medical Dental Hypnotherapy Association



ONE JERSEY

Our pledge to you as an employer

We will:

- ✓ Provide appropriate PPE for your job
- ✓ Provide sanitization materials, training, and time to practice safe hygiene as recommended by CDC.
- ✓ Support contact tracing efforts, while respecting your privacy
- ✓ Require that you and/or any of your colleagues with COVID-19 symptoms stay home

Your pledge as an employee

I will:

- ✓ Follow hygiene guidelines, including regular hand-washing
- ✓ Wear face coverings at all times and gloves for certain activities
- ✓ Participate in staff health screening on arrival
- ✓ Clean high-touch areas frequently

For more information:

[covid19.nj.gov](https://www.covid19.nj.gov)

Know your rights in NJ:

[nj.gov/labor](https://www.nj.gov/labor)





ONE JERSEY

Our pledge to you

We will:

- ✓ Wear face coverings and gloves for contact with our customers and goods
- ✓ Ensure social distancing to the greatest extent possible
- ✓ Follow hygiene guidelines, including regular hand-washing
- ✓ Clean high-touch surfaces frequently
- ✓ Train our employees on all health and sanitization protocols
- ✓ Conduct employee health screenings
- ✓ Support contact tracing initiatives in the interest of public health
- ✓ Require employees with symptoms of COVID-19 to stay home

Your pledge to us



Stay home if you're not feeling well



Keep your distance (6 feet)



Mask up

For more information: covid19.nj.gov

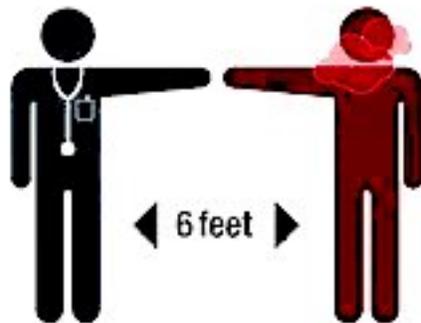




BE RESPONSIBLE SAVE LIVES!

Wear a mask/face covering
when appropriate

Maintain



Social
Distance

Wash your hands
frequently with soap
and water

**WE'RE ALL
IN THIS
TOGETHER**

