Uncommon Hypnosis Master Series

The truth about hypnosis and memory

I have first hand experience of remembering something that never happened. My memory seemed real and had I been pressed I would have sworn that it was true, until I learned that, in fact, it couldn’t have been.

I have a clear snap shot memory of being fourteen, on holiday with my parents in San Francisco. In the picture in my mind I’m looking out over the Bay at the infamous island jail of Alcatraz. I happened to mentioned this memory to my mother twenty years later. She looked at me and said: “We went to LA and San Diego, but we never went to San Francisco. What are you talking about?” Was I crazy? I had a memory – didn’t I! My dad and sister both corroborated my mother’s statement that we hadn’t stopped by at the famous Bay – or even got close! The weird thing was I must have seen San Francisco countless times in the movies or in other people’s holiday snaps, and somehow constructed this memory. Am I a one off freak? (OK, don’t answer that!) Am I alone in being able to construct clear memories of things that never occurred?

Just as a car mechanic needs to know about engines, so a psychotherapist or counselor needs to know about psychology. It sounds obvious, but it’s not. Some therapists will still talk about ‘recovering memories’ or using hypnotic regression techniques to ‘find out what really happened’. Hypnosis has been the favored tool of such practitioners. But hypnosis is no longer permissible in law as a tool to uncover ‘facts’ about witness reports, and hypnosis certainly shouldn’t be used as a tool in psychotherapy to ‘discover’ memories. Because memory doesn’t work like that.

However much it may seem so, human memory is not just like a tape recorder that you can use to record, rewind and accurately replay events exactly as they happened. This doesn’t mean that we can’t review memories at all during hypnosis – sometimes we can do this very powerfully. It means that our memories are modified by experiences we’ve had since the memory was first laid down. Because of this, what we remember changes through time. Some interesting research showed how language, for instance, can change the way we recall memories.

Back in 1974 psychologists Loftus and Palmer carried out memory research. Participants viewed footage of a car accident and were then asked questions about it one week later. The researchers found that participants were much more likely to describe recalling seeing broken glass in the film (even though there was none) if the researchers asked about the car ‘smash’ rather than using the word ‘hit’ or ‘collision’. The language of the experimenter reliably changed the memories of the subjects – and they weren’t even using hypnosis! So we know that memory is significantly influenced by suggestion, whether the person asking the questions is aware this is happening or not. And this has vital implications for psychotherapy.

A few years ago there was a spate of incidents where the clients of some therapists – who claimed they could unlock memories that had been ‘suppressed’ – sued their
parents, or other adults, using the supposed ‘recovered memories’ as proof of abusive behavior. In spite of the fact that they had no such memories before visiting the therapist. Why would well-meaning therapists do this?

Well, the underlying assumption here is that memories that are too painful become ‘suppressed’ by the unconscious mind and have to be recalled consciously in order for the person to get better from what ails them. This locating the memory and then ‘releasing’ it then becomes the ‘purpose’ of the therapy. These assumptions as to how the brain works have never been proven either by neuro-science or by psychological experiment. But do we ‘repress’ memories?

Actually, we don’t tend to forget things because they were traumatic – on the contrary, the traumatized brain is all too good at recalling traumatic events. But forgetting all kinds of things is normal. If you recalled everything you’d ever done, seen, heard, ate, etc, you’d be completely overwhelmed. Many people don’t recall vast amounts of their childhoods. This isn’t due to trauma, but to neurological and developmental reasons. As the brain develops throughout childhood so does the physical way that memories are processed. For example, many memories up to the age of around five are ‘snapshot’ memories – like still images rather than ‘running movie’ memories – this is quite natural for biological reasons and has nothing to do with psychological ‘repression’. So where does the idea of ‘repression’ of unpleasant or unacceptable experiences come from?

It was Sigmund Freud who popularized the idea that unacceptable memories could become suppressed. His theory was that these repressed memories produced psychological symptoms which could be cured once the memory was discovered, ‘released’ and ‘let go’. It was one of Freud’s mentors, Jean Martin Charcot, who first formalized this idea. Charcot was not a psychologist but a neurologist. He studied how the brain worked long before X-ray or EEG recording equipment could image what was going on.

So in Charcot’s time neurological disorders such as Tourette’s Syndrome and epilepsy were misdiagnosed as psychological disorders, such as the so-called ‘hysteria’. In the time of Charcot and the young Freud even the effects of closed head injury – concussion – were not understood. For example, in October 1885 a Parisian workman was delivering flowers for a florist, and was wheeling his barrow home when it was hit from the side by a speeding carriage. The man, who had been holding the handles of his barrow tightly, was spun through the air and landed on the ground. He was picked up completely unconscious, although apparently otherwise physically unharmed. Although he spent the next six months in hospital, and became partially paralyzed, had a permanent headache, suffered severe nose bleeds and seizures, and reported having ‘blanks’ in his memory, Charcot did not recognize the symptoms of closed head injury, and concluded from the fact that the man could not recall the accident itself that it must have been so horrific that he had ‘repressed’ it. Charcot put the seizures down to ‘hysteria’.

No modern doctor – let alone a neurological specialist – would consider this man’s symptoms ‘psychological’, but many psychological ideas about how memory works came from Charcot via Freud to misinform psychologists – and to some extent the general public – for generations.

It’s amazing to speculate that the entire theory of ‘repression’ may have resulted from this one incident.

If something very bad happens to us we usually remember it. We might choose not to think about it, but we know it happened. If it is very emotional and traumatic it might be hard to express it verbally because the memory is locked into the hippocampus – the short term memory processing part of the brain. Recalling it will alert the amyg-
dala – the fight or flight part of the brain – so it will be difficult or impossible to talk about because it’s always harder to speak during fight or flight. This doesn’t mean the memory has been buried. It also does not mean that if someone experiences panic attacks or depression that some unresolved, forgotten-about issue from their past needs to be ‘discovered’.

I teach on a hypnotherapy and psychotherapy diploma course at Brighton University. We believe it’s important to address the myths around memory early on.

We show our students a video clip of the esteemed hypnosis researcher Dr Orne asking a young woman whether she slept well the night before. She says she has, and he records this conversation. He then hypnotises her and suggests she was awoken in the night by the sound of an explosion ‘like a car backfiring’. She accepts this suggestion. He then awakens her and again asks her how she slept the night before. This time she tells him she ‘remembers’ being woken up in the night by an explosion noise – ‘like a car backfiring’. He then play her the tape of her earlier conviction (prior to his suggestions) that she had not been woken up – much to her confusion.

Hypnosis has many life enhancing benefits if used well, but it is not a truth serum or a reliable way to access so called ‘buried memories’.

In summary, I have described here how memory works and why false memory syndrome happens. You have learned about the limitations of hypnosis and now understand more about the workings of memory than many therapists. I hope this will help protect you and others around you from the misuse of suggestion and hypnosis.

I’m happy to say that I have now genuinely been to San Francisco. I really have looked out across the bay to Alcatraz, I have the photos to prove it and can now count that as a real memory.

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