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John R. Murray

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Will The Hypnotized Person Commit A Crime?

Modern Research On An Old Question

JOHN B. MURRAY, C.M.

Are you tense? Overweight? Want to give up alcohol or smoking? Have you considered hypnosis? Many people do. The Yellow Pages list hypnotists. Mail-order firms sell equipment for hypnotism, e.g., crystal balls, whirling disks. Hypnotism is easy to learn but dangerous in the hands of amateurs. Properly used hypnotism has contributed importantly to analgesia for dentistry and surgery, as an adjunct in psychotherapy, and as an instrument in psychological investigation of vision, hearing, and memory.

Franz Anton Mesmer first popularized hypnotism under the name "animal magnetism."¹ Mesmer had written his medical thesis (1765) on the influence of planets on man. Magnetism appeared to have a similar potency for operating at a distance. Mesmer hypothesized man as having poles like a magnet; disease might mean imbalance of the fluids in man and health might be effected by restoring the balance in the body, gathering them about the poles as a magnet does filings. Mesmer contributed to his own defeat by the trappings of showmanship he affected. When he was rejected in Vienna, Mesmer moved to Paris but there his views were dismissed by a Scientific Commission on which Benjamin Franklin sat.²

Almost a century later hypnotism acquired its modern name and had its respectability restored by Dr. Braid, an English physician. Medical centers were slow in accepting hypnosis but Dr. Esdaille performed many operations with hypnotism as analgesia, and babies were noted in the daily newspapers as delivered with hypnotism. Dr. Braid saw that hypnotism depended on suggestion, although he believed it was a form of sleep.

In France about 1880 two great schools of hypnotism began investigations. Drs. Charcot and Janet at Salpêtrière in Paris believed that hypnotism was proper to the hysterical patients whom they treated, and was itself abnormal. Drs. Liebeault and Bernheim at Nancy in France considered hypnotism a normal process. Freud studied first under Charcot and later under Bernheim, and used hypnotism in his first work with patients. Soon Freud appreciated that the effects of hypnotism might not be permanent, and that the accounts of hypnotized subjects were not creditable without checking. Freud changed the approach to hypnotism from a static to a dynamic concept wherein unconscious and suppressed material could be revealed.

In the United States Clark Hull's

research in 1931 gave the impetus to experimental examination of the nature of hypnosis.³ There is still no accepted view on the nature of hypnosis but research since Hull's time has clarified many of the effects of hypnosis and its limitations. Scales were developed to measure the depth or degrees of hypnosis. Hilgard and Weitzenhoffer have published the latest Hypnosis Scales based on college student subjects at Stanford University.⁴ Shor has extended these Stanford Scales for use in group administration.⁵ Two journals, the *American Journal of Clinical Hypnosis* and the *International Journal of Clinical and Experimental Hypnosis*, report research on hypnosis. The latest survey of the 2500 members of the American Society of Clinical Hypnosis indicates that 70% are physicians and psychiatrists, 19% are dentists, others are psychologists.

For over a century the question has recurred in research with hypnosis — can the hypnotized individual be induced to commit immoral acts? Modern study has not ignored this issue. The answer given is still conditional but investigations have delimited the problem significantly. Before reviewing the findings of research, mention should be made of Fr. Gormley's thesis which reviewed the history of medical hypnosis in the light of moralists' and papal statements.⁶ Pope Pius XII spoke of hypnosis as a scientific tool, subject to the controls and cautions of good science.⁷

But consciousness can also be reduced by artificial means. There is no essential difference, from the moral standpoint, whether this result is obtained by the

administration of narcotics or hypnosis — which can be called a psychic analgesic....

The subject which engages us here is hypnosis practiced by the doctor to serve a clinical purpose, while he observes the precautions which science and medical ethics demand equally from the doctor who uses it and from the patient who submits to it.

But we do not wish what we say of hypnosis in the service of medicine to be extended without qualification to hypnosis in general. In fact, hypnosis, whether it is an object of scientific research, cannot be studied by any casual individual, but only by a serious scholar, and within the moral limits valid for all scientific activity. It is not a subject for a group of laymen or ecclesiastics to dabble in, as they might in some other interesting topic, merely for experience or even as a simple hobby.

Dr. Odenwald expressed the clinician's view of hypnosis, and concluded in his opinion that a person in hypnosis would do nothing that is contrary to his moral or basic principles.⁸ Fr. Mangan summarized the moral aspects of hypnosis, and Fr. Lynch included hypnosis in a recent review of morality.⁹

Some positive statements may clarify the modern interpretation of hypnosis before beginning the pros and cons of the amount of control the hypnotist exerts over his subject. Hypnotists as entertainers, as well as movies and TV, have fashioned a distorted picture of hypnosis. Scientific and medical hypnosis has exploded the obsolete view that the subject in hypnotism is an automaton. Although the superficial appearance and the procedure of hypnotism does suggest it, the will of the hypnotized subject is not imposed upon. The process of hypnosis itself possesses no in-

trinsic compulsive power or property which is capable of causing the subject to commit anti-social actions. In a recent newspaper interview a psychologist, who was treating alcoholics with hypnosis, was asked could hypnosis change the alcoholic? He answered: "Under hypnosis a person will do what he wants to do, and it is not feasible to try to make him do otherwise." The hypnotized person is not asleep: scientific tests of brain waves and reflexes indicate the waking state. The hypnotized person is not unconscious nor in a trance in the popular sense. He can answer questions and solve difficult problems when assigned to him. Probably, the hypnotized person cannot do anything under hypnotism which he could not do without it, although hypnotism may facilitate some phenomena. The subject is not passive, nor helpless, nor defenseless. He remains in active control and can and will refuse suggestions given him.¹⁰ Post-hypnotic suggestions may be considered as continuations of hypnosis, and the same statements made about them, although post-hypnotic behavior has not received as much research."¹¹

Between the years 1888 and 1927 authors debated the question: can immoral or criminal acts be induced by hypnosis?¹² The Nancy School of Bernheim believed that the hypnotized individual subject was an automaton. The Salpêtrière School of Charcot and Janet observed that even deeply hypnotized subjects refused suggestions disagreeable to them. More recently in the United States the view that a sub-

ject might be forced to do anything if the technique was adequate was upheld by Wells, Rowland, Schneck, Watkins, Brenman and others. Other men, Erickson, Branwell, Hull, and Schilder disagreed.¹³ Estabrooks¹⁴ and Weitzenhoffer¹⁰ see many variables in the situation and in the subject which make crime or anti-social acts very unlikely.

Orne,¹³ Weitzenhoffer,¹⁰ and Deckert¹⁵ among the modern authors give excellent reviews of the experimentation and explanations. A summary of some experiments on anti-social behavior under hypnosis is offered here:

- 1) Rowland used a live rattlesnake behind a glass and wire cage. Two hypnotized subjects were instructed to pick up the "piece of coiled rubber rope." One tried to do so. Two other hypnotized subjects were told about the rattlesnake and explored for it with their hands. One of 42 un hypnotized subjects also tried to pick up the snake, because she said she was sure it was an artificial snake.¹⁶
- 2) Erickson compiled data on 50 hypnotized subjects, testing them in five different ways:
 - a) experiments involving physical and mental harm to the self; hand electrodes giving a shock were offered but subject refused
 - b) experiments involving damage or loss of personal property
 - c) experiments in violation of subjects' moral or convention code; subjects refused to tell deliberate lies
 - d) experiments in violation of

personal privacy; author's own sisters refused to disrobe for a physical examination for him, as a physician, even with their mother present

e) experiments in offense against good taste and privacy; subjects refused to tell a risque story in mixed company¹⁷

3) Wells induced subjects to take a dollar from another's pocket by making it appear to be their coat or their money.¹⁸

4) Watkins induced a soldier to throttle another by suggesting to him that the victim was an enemy agent, a "dirty Jap."¹⁹

Hypnosis does not occur in a social vacuum. Suggestion and suggestibility are key notions in modern interpretations of hypnosis. Yet suggestion and suggestibility surround us: one person yawns and others follow suit; one removes his coat because it is too warm and others begin to notice their own discomfort. Many of the phenomena of hypnotism can be affected without hypnosis. Hence, one of the difficulties in measuring the amount of control the hypnotist has over the subject arises from the overlap between commonplace suggestibility and suggestion, and hypnotic suggestion.²⁰

Experimental studies of anti-social behavior fail to deal with this crucial issue, namely, the social context in which the studies were performed. Factors traceable to the situation, the hypnotist, the technique used, and the subject are all important conditions of hypnosis; and their impact must be examined

before hypnosis itself is credited with controlling human behavior. Orne illustrates the power of the experimental situation to shape the subjects' behavior as follows:

Some casual acquaintances were asked whether they would be willing to do a favor and, on their acquiescence, they were asked to perform five push-ups; their common response was, "Why?" Subjects equally little known to the experimenter were asked if they would be willing to participate in an experiment, and after they agreed to do so, they too were asked to perform five push-ups; their common response was, "Where?" The simple establishment of a subject-experimenter relationship modified the degree of control.

Authors have explained the reported results of experiments on criminal actions under hypnosis in terms of subjects playing their role:

- 1) subjects believed that there were protective measures;
- 2) subjects trusted the hypnotist;
- 3) subjects had confidence that the requests were reasonable, and the hypnotist knew what he was doing.²²

The hypnotist regularly stands in a personal relation to the subject. In experimental studies the hypnotist is an instructor or professor; sometimes an army officer; in clinical settings the physician-patient role obtains; in some legal cases there are indications of long-standing and intimate personal relations which accompany, supercede, or at least contaminate the hypnotist-subject relationship.²³ In all these relationships there are built-in assurances, implicit cues, to the subject that there is nothing to fear, no risk to life, that the hypnotist would do nothing to injure his own reputation. If a doctor says this pill is

poisonous and will kill you, now take it and swallow; in the waking state the subject would think: "it must be a joke, or he is testing my sanity"; under hypnosis the subject must reinterpret the command: "since no responsible experimenter or doctor would administer poison, it must be all right, I am protected somehow."²⁴ In Rowland's experiment when he asked the hypnotized subjects to pick up a poisonous snake he instructed them that it was a rubber rope. One control subject who had not been given the instructions put her hand in among the snakes and was very surprised to find that they were real. She had assumed that in an experiment some substitution was made. Schneck's post-hypnotic suggestion by an army officer to a soldier entailed his missing some of his duties. The soldier in the situation could interpret that an officer would not ask a soldier to do anything which actually violated regulations.²⁵

Another aspect of the social context is the technique used by the hypnotist. Actually, there is some variation in the approach and words used by hypnotists, but essentially the method of induction of hypnosis includes fixation on an object and sleep suggestions.²⁶ Studying the effect of commands or persuasion methods, Lyons tested college student subjects. He found that anti-social acts were committed much more readily when the subjects were persuaded and thus could justify their behavior.²⁷ Erickson believed that subjects try to play the role of a good subject, performing the tasks as they think the experimenter

wants them to. To counteract these experimental limitations Erickson confronted his subjects with real "inescapable facts"; he refused to take responsibility for their actions, and obviated their compliance by making it clear that he would not be displeased if they refused. Many of Erickson's subjects refused to fulfill requests, even requests which in a waking state they agreed to do. Erickson concludes that:

...his findings disclose consistently the failure of all experimental measurers to induce hypnotic subjects in response to hypnotizer's suggestions, to perform acts of an objectionable character, even though many of the suggested acts were acceptable to them under circumstances of waking consciousness. Instead of blind, submissive, automatic, unthinking obedience and acquiescence to the hypnotizer and acceptance of carefully given suggestions and commands the subjects demonstrated a full capacity and ability for self protection, ready and complete understanding with critical judgment, avoidance, evasion or complete rejection of commands, resentment and objection to instrumentalization by the hypnotizer, and for aggression, and retaliation, direct and immediate against the hypnotizer for his objectionable suggestions and commands.²⁸

As early as Hull and as late as Orne's work there is no evidence that hypnosis enables the subject to carry out behavior which exceeds his normal volitional capacities.²⁹ It is assumed, especially in legal settings, that the subject in hypnosis has no wish to carry out the behavior requested by the hypnotist, and that the impetus required for the act is provided solely by the hypnotic suggestion. Now it is obvious that the individual may be asked to do something quite congenial, e.g., kiss a pretty girl, for which the push from the hypnotist is hardly neces-

sary. As happens in college initiation settings the subject may perpetrate pranks which aside from the social situation he might not do. In other situations an individual might be ambivalent toward an action, weighing the arguments on either side, e.g., cheating on an exam. It is conceivable that hypnotic suggestion may tip the balance in favor of one action. In hypnosis consideration must be given to the desire and need of the subject for the action required, independent of the commands of the hypnotist.

Gindes in his work as a clinician has discovered that the subject's own misconceptions of hypnosis play a part.³⁰ Some patients believe that in hypnosis the subject releases control to the hypnotist. They enter hypnosis believing that they cannot control themselves, and hence that the hypnotist will be to blame for whatever happens. Alcohol, which has a similar reputation, may be used in the same way. A man drinks and makes advances to a woman; if she accepts he can proceed; if she refuses he can pass it off, that he didn't know what he was doing; and when he comes to his senses, as in hypnosis, he may have a convenient amnesia for what happened, and profess disbelief. It is interesting that Frs. Ford and Kelly use the example of alcohol in the opposite way to discount responsibility in hypnosis.³¹

A person who is hypnotized may talk rationally and afterwards remember nothing. No one would hold him accountable *in actu* for what he says or does while hypnotized.

On the contrary, hypnotists would hold him accountable. Gindes be-

lieves that it is wise at times to apprise the patient of the fact that hypnosis removes neither his will nor his judgment. It does not confer a temporary immunity to the patient's own rules of conduct. Hypnosis does not tamper with his ability to distinguish right from wrong. He is as responsible for himself on the hypnotic level as he is responsible during his waking life.³² This statement is a cry from the automatons of the Nancy School of hypnotism, and similar to Erickson's focusing of hypnosis for his subjects.

Moreover, in Gindes's experience these attempts to release oneself from prevailing reality restraints are invariably of a sexual nature. Schilder agrees with Gindes's observation.³³ Erotic excitement in hypnosis — and the psychoanalytic view is that hypnosis is rooted in sexuality — may be attended by fantasies, distorted to a point that the subject falsely remembers having been sexually misused by the hypnotist. Without the psychoanalytic interpretation, the relaxation in hypnosis could release erotic excitement. But seduction is not easier under hypnosis; it is a very ineffective technique. The subject out of her own desire, or from a misunderstanding of hypnosis, may be accepting sexual advances in entering hypnosis. Patients in psychotherapy may develop sexual feelings toward the therapist regardless of the technique employed, that is, with or without hypnosis. Subjects in a therapeutic context are less able to distinguish actuality from fantasy. Many instances of alleged rape by

means of hypnosis are so judged only days and months after the fact. Though the instances are infrequent, the doctor knowing something of the dynamics of the patients will provide a witness in dangerous situations.

Odenwald lists the fear that a girl could be hypnotized into a marriage as one of the popular misconceptions of hypnosis, as is the notion that hypnosis "weakens the will" of the subject.³⁴ The conditions of hypnosis which depend upon the subject can be concluded with the statistics on hypnotizability. Hilgard compared the results with the new Hypnosis Scales and the published data of the great investigators of the past, and found substantial agreement. About 10-20% are incapable of hypnosis; perhaps as high as 25% would be very good subjects for hypnosis; and others fall somewhere between the two extremes.³⁵

Pope Pius XII spoke of hypnosis as an object of scientific research, and not for dabblers or amateurs. Odenwald says that no one should be hypnotized without a medical examination. No one should attempt hypnosis without knowledge of psychodynamics and medicine. No great dangers are involved in working with normal subjects, as for example the college groups, but only one who is experienced or trained could detect an incipient psychotic patient, and hypnotism with such a person can be very dangerous.³⁶ Removal of symptoms by suggestion under hypnosis may go along easily but substitution of another symptom, one which the per-

son cannot handle may be fraught with trouble. By removing the discomfort of pain in a subject the hypnotist risks passing over symptoms which if properly diagnosed could lead to early treatment.³⁷

In conclusion, the issue of immoral actions under hypnosis has been illuminated by the quantity and quality of research that has been completed, but there is need for still more. Because of the ethical restraints on experimentation with human subjects it will be difficult to test the question rigorously. Clinical material and court cases may provide some answers but dredging the essential from individualized data is laborious. The experimental literature does not support the picture of hypnosis envisaged by fiction writers, and the lay public. Subjects in experiments have performed actions under hypnosis which appear antisocial or immoral, but non-hypnotized subjects would be willing to perform such tasks, and controlled evidence is lacking. Situational variables of hypnotizer, role-playing of subjects, and technique differences need to be watched. There is a large but undefined degree of control of behavior buried in the social context of hypnotizing. There is no definitive evidence that a person in hypnosis can be forced to carry out behavior against his morals.³⁸

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Father Murray is associated with the Psychology Department, St. John's (New York) University.

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