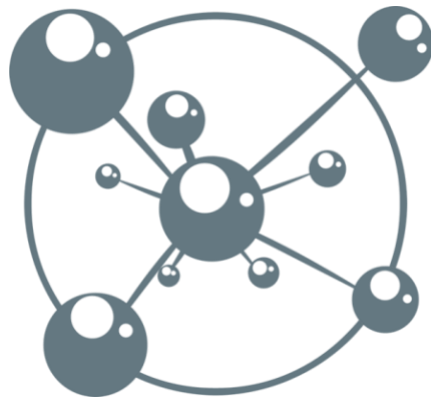


Dolores Cannon's
Quantum Healing Hypnosis
TechniqueSM



Level 1 Class Notes

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Quantum Healing Hypnosis Technique

What makes my technique different and unique from other hypnosis techniques is that I have found a way to go directly to the Source of All Knowledge. This extremely powerful force has the answers to all questions we could ever ask and also is capable of performing instantaneous healings on the body. I call it the “Subconscious” because I did not know what else to call it. But it is not the subconscious as defined by psychiatrists. That is a childish part of the mind, and is the part that is used by practitioners to work on habits like stopping smoking and losing weight. That is not the part we will be working with. If I could define it, I would refer to it as the Higher Self, the Higher Consciousness or the Oversoul. It is so big and so huge that it has the answers and solutions to everything. I call it the “Subconscious (SC)” for simplicity, and “they” have said, “We don’t care what you call us, we will work with you.” I have found a simple and easy way to put the client into the deepest possible state of trance, the somnambulistic state, so we can have access to this part. ***As human DNA continues to be further activated, I’m finding that my clients are more aware of what happens in their sessions than they used to be so that is becoming more normal.*** The SC comes through everyone this way. Of course, there are always exceptions to the rule, but I have found the technique to be successful in over 90% of my cases.

I have been involved with hypnosis for over 45 years and have spent more than 30 years refining this technique. Thus everything in it has a definite proven reason for doing it, which will be explained during the class. It is also full of safeguards so that the client will not be harmed if these steps are followed.

I normally spend at *least* 5-6 hours with each client and many require more time than that. Thus, I can only do one session per day. This, of course, may not be feasible for all practitioners because they have to see more clients in a day in order to support their practice, but I have found that I can address all of the client's problems (physical, emotional and relationships) in one session and they do not need any more. All I will have is one session because I may never see the client again. So I have to do intense therapy and counselling, and accomplish everything that is needed in that one session. Thus the interview and pre-induction are very important to condition

the client's subconscious to cooperate with me. This must be established from the beginning and in fact should begin with the very first contact with the client.

The Interview

I spend at least two hours interviewing the client. This can become longer if they decide to unload their problems and turn me into "Mother Confessor." Yet this time is important because this is when trust is established. I do not allow anyone else to be present during the session. They often bring their spouse or close friend with them (especially if they have driven a long distance). But I tell them they will have to find something else to occupy their time, by going somewhere and returning at the approximate time expected for the closure of the session. Or if the house I am staying in has other rooms, they can sit in the living room etc. until the session is completed. I do this for specific reasons. No matter how close they are to their spouse or the friend (they often insist they will tell them everything anyway) they have a tendency to hold back if there is someone else in the room. During the interview I want to find out as much as possible about their life, and this includes personal information about their marriage and private life. Things are often revealed that they do not want the other person to know. Besides, when they are in trance many personal and highly emotional subjects may emerge. They often feel embarrassed, crying or becoming emotional with me, and I know they would tend to hold back if there was someone else in the room.

These emotions are a very important release, and they must be allowed to vent. This is part of the healing. When the emotion comes through during the session, I know we have hit something important because I have found that emotion cannot be faked during the session. Often they don't know where the emotion is coming from, or why it is affecting them so strongly, but after the session when we discuss it, it makes perfect sense and was an important link they were looking for.

The Interview

During the interview I try to establish trust and rapport with the client. Sometimes they will insist they don't have any problems, their life is fine, and they just want the session out of curiosity. Yet the longer we talk, and they realize that I do care about them, they open up, and I can find the real reasons for the therapy.

Pre-Induction

From the moment I meet the client I have begun subliminal instructions to the subconscious. This is called the "silent induction" by Milton Erickson. I have already begun to make a deal with the subconscious to cooperate with me, although the subject is unaware of what is taking place.

Hypnosis is like magic in the sense that you never know the magician's secrets, and he is not about to reveal them. The same is true here. The client does not need to know that something is going on behind the scenes, by the subtle words and phrases used by the practitioner.

The Induction

I like to do the session with the client lying on a bed because then they can be totally comfortable and can stretch out with no restrictions.

Over the years I have learned there are many parts of the normal accepted induction that are time-consuming and unnecessary. I have learned that much of this can be eliminated, so that the induction takes about fifteen minutes, less in some cases and about twenty in more difficult cases. It is very important to record all sessions, minus the induction, and to give the copy to the client before they leave or get it to them as soon as possible. I was surprised at how many practitioners do not record or give the client the copy. They say it does not matter because the client remembers everything. I have found this is not true. At the deeper levels they may think they remember everything, but they do not. They remember only bits and pieces like we do when we awaken from dreams. It is important for them to hear their own voice reporting the events. Often the past life will be so mundane that I think nothing of importance occurred. But the client will later say that one sentence was the key, and the way it was said meant more to them than the entire session.

The instant the client closes their eyes, they have already begun to go into trance because you have closed off one of the most important sensory inputs: sight. They will then become focused on your voice and will follow it. During this stage the monitoring of the body is very important because you can watch the progress as the body enters the trance state. There are various signs of resistance that will be visible here if the conscious mind is trying to maintain control. The client may think they are ready for the session, yet they may try to maintain control. The conscious mind will attempt to distract them from relaxing and entering the trance state by focusing their attention on the body. This can be observed and overcome through observation.

Once they feel safe, they will begin to play the game and go under. It is similar to going to sleep at night. In the beginning stages of the visualization there may at times be resistance to enter a past life, often because of fear that the subject insists they did not know about.

These are *rare* cases (the resistance during induction or upon entry into the past life). I have these more often occur with men, especially businessmen who have control-oriented occupations. They often feel they will lose control if they allow themselves to relax and follow instructions. These types of people require more work in order to break through (I will discuss the common type first because they are in the majority, then I will discuss the problem type – left brain).

The regression must finalize on the death experience because this is where most of the problems (physical and mental) in the present lifetime originate from. Every life has a lesson or a purpose, what was that lesson or purpose? Ask these questions. Then, “Let’s move away from that scene, drift away from that scene and leave that person to continue on his own journey, he will find peace.”

Regressing to Events in This Lifetime

Occasionally the client will want to regress to an event in this lifetime, instead of going into a past life. Maybe they want to find more information that they cannot remember, or re-live an event that disturbed them, etc. (This is also how I obtained UFO information by keeping the person in this lifetime.)

Another alternative when the client moves to an event in the current lifetime -Moving back through time before birth to find out why they chose this lifetime/parents/etc.

Missing information can be supplied quite easily. If trauma is suspected I have found the best way to uncover it is to take the person to *before* the event occurred, and approach it from that side. If you try to take them immediately to the event, they will resist because they are consciously afraid of what will be uncovered. So it is approached from the other direction, through the back door. After you have explored all of the relevant information do not move forward in the current life, just ask to move to another appropriate time and place. ***NEVER go to the last day of life/death scene of "this" lifetime.***

Dealing with Traumatic Events

The client will often display intense emotion with crying, etc. This is a very important release mechanism and acts as a catharsis. They should be allowed to vent for a few minutes before therapy is continued. (This also applies to past lives because they have often been carrying this unreleased emotion around for hundreds of years. Its release is important to the cure of any illnesses.) If an intense traumatic event is encountered, carefully monitor the body signs to see if the client is handling it. If too much fear and anxiety is trying to take over, then remove the client to a position where they can watch the event as an observer rather than a participant. Always remember the subconscious is also monitoring the person. It will not allow harm to come to the body. If things get too tense and the practitioner does nothing, then the subconscious will take over and wake the person up (just as waking from a nightmare). The person is returned to the conscious state safely (although often shaken up), but the opportunity for therapy has been lost.

The practitioner must always be in control of the situation and convey this to the client through loving words and suggestions of protection so they will feel safe.

An unusual occurrence can sometimes occur during a reliving of a traumatic death and should be watched for. (For this reason I do not perform sessions in very dark rooms. A light must be on somewhere.) This is when the body also remembers the event and can cause marks and symptoms to appear on the client's physical body.

This will be explained in the section about removing physical symptoms before the client is awakened. It is not dangerous, and does not last long, but I do not believe in having the client suffer from any discomfort whatsoever. If the subconscious knows I will not allow the client to have any discomfort it will work very effectively with me. In addition to the body sometimes displaying *physical* marks, it may also carry over the symptoms of the illness leading up to the death, and the person may exhibit these for a few days after the session. This is why it is so important to remove all of this before the client is awakened. Many practitioners do not realize the importance of this, and the client may suffer unnecessarily.

It is important for the practitioner to maintain control over their own emotions at all times. If something unexpected occurs, it must be handled in the gentlest, calmest way possible. Use your common sense to handle any situation. In this sensitive state the client will automatically pick up on the emotions the practitioner is unconsciously projecting. They are highly sensitive and perceptive. I have had them report on conditions in the room etc. that they could not possibly know about. **IMPORTANT! DO NOT** awaken the person quickly just because of your own discomfort. This is the worst thing you can do under the circumstances. Follow normal procedure.

Regressing to Animal/Object or Energy Body

We regularly hear of practitioners who abort sessions when they are not past lives. This is not the correct thing to do. In this age of second and third wave Volunteers many clients may be experiencing their first trip to Earth and consequently they will describe experiences that may at first sound unusual, but the more you practice the more these unusual cases will become normal. Be ready for anything and go with the flow. The experience/life is being shown for a reason...trust in the SC.

Contact With The Subconscious

After the subject has entered the past/current/future life and all the steps are followed to take them through significant events and eventually the death experience, they are moved to the other side where they can view the entire lifetime from that perspective. (NOTE: Do not take a 'current life' client to their death experience for this life. Instead, move them to another appropriate time and place or back them up in the current life until you get to before birth to get them to the spirit side.) After they report what was done with the body, then I ask them what lesson was learned from that lifetime, and if there were any people in that life that they know in their present lifetime. At this point you can explore the spirit side and the life review, etc. if that is desired. After all of this has been followed, then I contact the subconscious.

This is the most important part of the session because this is where we can get the answers for physical/emotional/spiritual issues and the understanding of other problems that have not been explained by this point. The subconscious has all the information and its cooperation is essential. Other practitioners have failed to realize the significance of the subconscious' participation. Most procedures (especially for the resolving of habits: stop smoking, lose weight, etc.) try to dictate the terms to the subconscious in a dictatorial manner. "You will not want to smoke. You will not want to eat certain foods," etc. This does not work as well because I see the subconscious at times as a little child with a particular stubborn streak. I can see it digging in its heels and saying, "Oh, yeah! Make me!" Like any little child it will resist being told what to do. I have found that by asking its cooperation it will work with me in a wonderful manner, as long as I don't overstep

its boundaries. If those are violated it will shut back down and will not answer. If it says the information cannot be revealed at this time, I respect that and do not try to force the issue, or communication with it will be terminated. (The removal of habits can be done easily by allowing the subconscious to give suggestions.)

When contact is established with the subconscious I then proceed with the list of questions the subject wanted information about, whether health-related issues, family problems, phobias, allergies, or their life purpose.

If the main purpose of the session deals with a physical ailment, especially one that is painful (migraines etc.), do not use the word "pain." This is important because any mention of that word only reemphasizes it and gives it power. You ask the subconscious about the "discomfort" that the body has experienced. Use past tense if possible. (This also applies to any discomfort experienced during the regression. This often is the conscious mind attempting to take control by creating distraction. Give suggestions to alleviate it [referring to the troubled spots while applying suggestions etc.], but do not dwell on it.) Always tell the subject if you are going to touch them. The body (or mind) in this state is very sensitive to the practitioner's use of words.

When the list of questions is complete, I then ask the subconscious if it has a message or advice for the subject because they will be able to hear it on the recording. After this is given I then close the session treating the subconscious with the respect it deserves for having helped.

I am careful how long the session lasts. I will keep the client in trance no longer than about 2 hours without getting permission from the SC to go a little longer. Remember the SC is caring for the body and you can always ask it how the client is doing. With practice the practitioner learns how to pace the session, but you should still 'watch the clock.' This is important because I found in the early days of my work that if the person is under longer than the recommended time, they will be too groggy and disoriented upon awakening. It takes longer to come back to this reality, just as if you had been awakened from a very deep sleep.

Bringing The Subject Back

This is a very important part that is often rushed by the practitioner. First I make sure the subconscious has receded. Then I ask all the different entities or other personalities from the past lives to also recede to their proper places. Then I make sure that all physical and mental symptoms and influences are left in the past to keep them from causing lingering physical effects after the subject has returned to this world. The body also remembers, and I have seen graphic examples of this. Always count out the client no matter what. Even if the client sits up and wants to end the session for any reason, even early in the session, they must lie back down and be counted out.

The subject can exhibit physical symptoms for a few days afterward if this step is not followed. They can carry over especially the symptoms exhibited in their death in the other life. This must be removed prior to bringing the subject to consciousness. If the practitioner feels there was not enough information given in the session to help the subject, then suggestions can be given that the subject will gain more information through meditation, asking questions just prior to falling asleep and listening to the answers, or by watching their dreams in the next few nights for clues.

If there is any reason that the practitioner thinks continued work with the subject is needed, this is the point to plant suggestions for "keywords." These are very powerful and can last for years. Using keywords eliminates time-consuming inductions each time the client is seen. All you have to do is say the keyword (after permission has been given), and you can proceed directly with therapy or investigation. The keyword automatically puts the client back into the trance state.

Then I return all of the consciousness and personality of the subject to the body and orient them back completely to the present day and time. Then I bring them back to consciousness *slowly*. This is another point that is not followed by most practitioners. They often bring the subject back too fast. This has the effect of being shaken awake suddenly from a deep sleep. It will make the subject dizzy and disoriented. Thus I bring them back slowly and gently (but NOT with your induction voice) by counting to ten with breaks in between so they are oriented at each step

along the way. You may talk slightly louder as you do this to help them recede from the trance state.

Also with suggestions that they will be wide awake and feeling wonderful. If I know they will have to drive I add the suggestion that they will feel fully alert also.

When they awaken I always ask how long they think they were under. They consistently reply that it seemed like only about 15 minutes, surely not more than an hour. They are always surprised to realize that two hours have passed. I then explain about the similarity between this type of hypnosis and general anesthetic where time also stops. It is important for them to know that a block of time has passed so they can reset their biological clock. Otherwise they might be disoriented the rest of the day. I am very careful about these points because I want the person to have a beneficial experience, and I have only their welfare at heart, so great care must be taken to insure their wellbeing. Instead of telling the client what happened, have them tell you what they remember of the session because they always think they remember everything.

Discussion After The Session

I then ask what they remember about the session. The majority will remember some of the beginning parts and perhaps the last thing that occurred before awakening. The rest may be remembered in snatches like pieces of dreams, but it begins to fade quickly and only major parts may be remembered. I explain that it was like having a dream, except that I was in the dream with them with my faithful recorder. Although we are working in the somnambulistic state, what I've discovered is that as the additional strands of human DNA are getting activated, clients are having very different states of remembrance. Some will not remember anything. Some will remember everything and others will remember as though they were standing to the side listening to themselves talking but not comprehending how it can happen or what is being said. All of these 'remembering' conditions are completely normal.

I discuss the answers we found to the major problems they wanted to explore, and when I am satisfied that they are fully awake and can function in the outside world, then they can leave. I tell them not to play the recording in the car while driving home because my voice has a tendency to put them into trance again.

I then instruct the client to listen to the recording (especially the subconscious part) again and again after they return home because each time they hear it, they will get more information. Also each time they hear it, they receive more healing. **THIS IS VERY IMPORTANT.** The recording will aid immeasurably in their healing. Stress this point.

Deviations From The Norm

If a difficult subject is encountered that will not (for whatever reason) enter into a scene that can progress through a past life, and after using all my bag of tricks (which will be expanded upon in the Level 2 class), I can still use this state for therapy. They have definitely entered an altered state where the subconscious is accessible, so I can work on the problems they were concerned about through positive suggestions. This state must not be wasted. I will often use the Silver River Meditation at this point. Some practitioners awaken the subject because they think there is no progress being made. This is not true. The client is definitely in an altered state even though the conscious mind is attempting to derail the session. So this state can be used for positive suggestions in their life. **REMEMBER:** there are no bad subjects, only inept practitioners. **NEVER** blame the subject for your own inexperience, impatience, or lack of knowledge of procedure.

Your Body Is The Shadow Of Your Mind

This is a short list to get you thinking about what message the body is trying to deliver.

Anemia: Not recognizing one's self value; a feeling of weakness.

Arthritis: Holding on to something/someone very tightly. Not releasing.

Cancer: Severe hate and/or resentment/anger toward another individual, but not expressing it openly; anger turned inward.

Colds: Indecisiveness, need to make a decision and not doing so; feeling sorry for self and wishing to delay activity. Are over worked and needing to rest.

Colitis and Elimination Problems: Over attachment, not releasing situations.

Constipation: What are you trying to hold onto?

Diarrhea/Frequent Urination: What are you trying to move quickly from your life?

Diabetes: Lack of sweetness/love in your life.

Digestive Disorders: What's going on that you're not able to "stomach"?

Ulcers: What's "eating" you? Are you allowing others to control you.

Eye Disorders: Inability or refusal to see things as they really are or not wanting to look at something.

Foot, Leg or Hip Pain: Not going in the right direction, or holding back on what you should be doing.

Headaches: Pressure/stress in this life or possibly from past-life trauma.

Hearing Disorders: Inability or refusal to listen or accept what is heard. Not wanting to hear something.

Heart Attack: Feeling pressured by responsibility; wanting to escape. The heart is the seat of the emotions, problems with the love life.

Liver/Kidney Disorders: Firstly, rid the body of deadly toxins/poisons. Secondly, what are you trying to get out of your life? What is poisoning your life?

Lower/Middle Back (The support system): Not feeling supported.

Upper Back, Neck & Shoulder Tension: Carrying other people's problems, feeling like you have the whole world on your shoulders.

Lung Disorders (Asthma): Feeling restricted, feeling smothered by individuals or situations.

Nervous Disorders: Stress, worry.

Prostate Disorders (Male): Feeling a loss, dysfunction or misuse of power.

Sexual Problems: Not enough or too much sex, may have taken the vow of celibacy in another life.

Reproductive Disorders (Female): (Creative Center) Not appreciating the feminine expression, guilt and/or fear in expression of the receptive quality. Not feeling creative. Wanting to have children or feeling guilty for lost pregnancies.

Sinus Problems: Pressure applied by self.

Throat Disorders: Not speaking your truth or holding back. Fear of speaking out.