Suggestions of Power: Searching for Efficacy in Indonesia’s Hypnosis Boom

Abstract
From relative obscurity in the 1990s, hypnotherapy has become a major industry in contemporary Indonesia. This article examines its tremendous surge in popularity, and the subsequent trajectories of its vernacularization. It shows the hypnosis boom to have been underpinned by the introduction of a distinctive ‘thirty percent theory, seventy percent practice’ seminar format, structured in such a way as to allow mass-market consumers to experience themselves as hypnotically efficacious. With such efficacy proving unsustainable outside the seminar context, Indonesians reached for and developed alternative conceptions of ‘hypnosis’ that allowed them to continue as effective hypnotherapists. Such material demonstrates the value of incorporating a theory of interactional affordances into anthropological models of cultural transmission and globalization.

[efficacy, hypnosis, globalization, Indonesia, interaction, psychotherapy]

Abstrak

[kemanjuran, hipnosis, globalisasi, Indonesia, interaksi, psikoterapi]
Indonesia’s hypnosis boom came late to the Sumatran town of Tanjung Pinang. But by the end of 2011 its influence was undeniable. Billboards for an exclusive clothing boutique offered a special promotion: spend 500,000 rupiah (at the time, around US$55) and get thirty minutes’ free hypnotherapy. Cafés drummed up trade by offering hypnotherapy alongside drinks and snacks. News reports carried regular features: ‘SCHOOLCHILDREN CRY HYSTERICALY DURING MASS HYPNOMOTIVATION’, the students’ headteachers having invited professional ‘hypnomotivators’ to help them pass their exams. Some teachers even trained as hypnotists themselves, hoping that ‘hypnoteaching’ might get their pupils more engaged with the curriculum. Saidah, a Junior High School ‘hypnoteacher’ found hypnosis was also a useful skill around the home. If her children, three and five years old respectively, were naughty, she no longer got angry. Instead, she said, ‘they’re taken to the bedroom, they’re hypno-ed (dihipno), and for the next two weeks they’re no trouble at all.’

In Java, such scenes have been commonplace since the mid-2000s. The Indonesian Board of Hypnotherapy, or IBH—only established in 2002—is now the largest professional hypnotherapy association in Asia, with over 22,500 registered affiliates. Numerous smaller organizations have sprung up in its wake. Between them, these organizations stage dozens of training seminars every weekend, producing ‘batches’ of Certified Hypnotists (CH) and Certified Hypnotherapists (CHt) who use the knowledge they have acquired to help friends and family, open clinics, and ply their trade to schools and businesses. With this explosion of hypnotherapeutic practice, the language of ‘hypnosis’ and ‘suggestion’ has become mainstream parlance across Indonesia.

At first glance, this appears to be an Indonesian echo of a by-now familiar anthropological tale regarding the ‘psychologization’ of society. All the usual elements are present: subjects in the Global South understanding themselves and others differently following the dissemination of Western psychological discourse (Bubandt 2012; De Vos
2013; Yang 2013); autochthonous mental health professionals propagating novel psychological concepts through clinical encounters and ‘outreach work’ in the public sphere (Chua 2013; Tran 2017; Wilce 2004); psychotherapy as a technique for creating and managing knowable, stable, achievement-oriented subjects (Matza 2012; Zhang 2017); but also evidence, in Saidah’s improvised attempts at ‘hypnoparenting’, of local actors appropriating and creatively recasting imported discourse (Behrouzan 2015; Zhang 2014). Yet questions remain. Compared to other forms of psychotherapy, hypnotherapy is an unlikely candidate for a ‘boom’. Relatively marginal in Western psychiatry, it has been far less vigorously advocated by international organizations than the prescription of psychotropic drugs or other forms of ‘psychosocial intervention’ (Mills 2014). Prior to the current boom, it was not promoted by the state (cf. Yang 2013), rarely even featuring in Indonesian psychiatric training. So why should an interest in hypnotherapy have arisen so suddenly in the mid-2000s, and subsequently acquired such extraordinary momentum? This is an ethnographic puzzle in itself.

Equally interesting is the sheer diversity of ways in which Western conceptions of hypnosis are being vernacularized. Indonesia has at least seven mainstream ‘cultures of hypnotherapy’, each involving significantly different understandings of what hypnosis is and how it proves effective. Moreover, these novel conceptions have not, generally, emerged during initial encounters with hypnosis discourse but as Indonesian hypnotherapists try to live with, and use, the conceptions they have already acquired. Accounting for this situation requires moving beyond the truism that psychotherapeutic discourses are dialogically reconstituted as they move around the globe and towards a framework that can account for the specificities of how, why, and when this happens.

At its core, then, this paper constitutes an enquiry into the mechanics of cultural transmission, specifically in contexts of globalization and cross-cultural encounter. This has
long been a topic of interest for psychological anthropology, the very fact that some conceptions are merely *acquired* or parroted as clichés whilst others are *internalized* and held with strong conviction, and others still are rejected or reformulated, showing cultural transmission to be mediated by the mind (Spiro 1997, 4-5). How to theorize that mediation is thus a theoretical priority for the field. An especially fertile point of departure is Pritzker’s (2011, 2014, 2016) concept of ‘living translation’, developed to understand the transmission of therapeutic techniques between China and the U.S. Pritzker’s approach has three principal strengths. Firstly, she recognizes that one’s social world is not just influenced by the ‘values and norms’ into which one is socialized, but also ‘direct social experience—interaction with others and lessons learned… based on their reactions and the resulting outcomes’ (Tomasello 2009, 28-30). Secondly, she follows Csordas (1994) in recognizing the foundational importance of human embodiment, that ‘felt experience, rooted in the body and emerging through interaction, is the existential ground upon which terms are understood… and translated into practice’ (Pritzker 2011, 399). She shows, for instance, how American students of Chinese medicine grasp for ways of comprehending the terms they encounter, establishing understandings when their interactions with tutors allow them to ‘map’ or ‘inscribe’ the term onto their own embodied experiences (2011, 399-401). Finally, this leads her to conceptualize the reterritorialization of discourse as an ongoing process. Social actors ‘create and recreate meaning through narratives and indexical processes that both reproduce and transform elements of the source’ in an ‘ongoing stream of interaction’ with textbooks, tutors, peers and patients—including the ‘intercorporeal’ clinical experience of engaging with patients’ bodies (2011, 396; 2014, 10, 88). Horizons of meaning are ever-precarious interactional achievements.

This raises the question of why interactions unfold as they do. Here Pritzker’s model starts to show its limitations. She shows that the interactions in which students encounter
Chinese medical concepts are guided by fantasies of Oriental difference, the views that they, their tutors, and their textbook authors hold regarding what best helps learners grasp new concepts, and even sensual engagements with different textbooks (2014, 87-144). But such analysis merely offers anthropologists a more theoretically sophisticated, micro-ethnographic and processual version of well-established models in the anthropology of globalization, which has long emphasized that ideas and practices in transnational circulation are interpreted through the lens of pre-existing cultural and personal imaginations, and ‘elaborated’, ‘adapted’, or ‘vernacularized’ to fit with local ‘tastes’, ‘values’ and ‘fantasies’ (see e.g. Boellstorff 2003; Merry 1996; Michelutti 2008; Moore 2011).

By contrast, while her argument that the ‘felt experience’ of a clinical encounter serves as an existential ground through which practitioners’ understandings of therapeutic concepts are either reformulated or maintained is more theoretically radical, it could be developed further by examining how ‘felt experience’ is not just ‘emergent’ in interaction, but structured by interaction in specific, theorizable ways. Relevant here is scholarship analyzing how different combinations of entities in interaction—what Solomon (2015, 338) terms ‘interactional ecologies’—and their different configurations, or ‘topologies’ (Adams 1998), afford and preclude particular ways of being. Such affordances might result from the social conventions pertaining to various interactional contexts: for example, some situations of language use are more tolerant of inexpert speech than others (García Sánchez 2016, 162). They also result from human psychology. Not only do we develop new capacities for joint attention and shared intentionality as we grow (Tomasello 2009), psychological experiments indicate that certain interactional ecologies and topologies routinely potentiate distinctive forms of embodied experience, albeit via mechanisms that remain poorly understood. A well-known example is the ‘synchrony effect’, whereby participation in synchronous activity, such as communal ritual, elicits intense feelings of ‘bondedness’ and ‘moral unity’
(Whitehouse and Cohen 2012, 406-07). Especially relevant to this paper is the observation that certain topologies heighten the plasticity of human subjectivity, enabling others to induce felt experience via a process of ‘suggestion’ (Blackman 2007; Borch 2012; Humphrey 2012). Building on Pritzker’s insights, this article argues that we can better theorize the ‘living translation’ of concepts and practices by attending systematically to the topologies of interaction in which they are deployed, what is afforded by each of these, and the differentials in felt experience that result.

Such an approach is especially relevant for understanding the vernacularization of therapeutic techniques. Whatever one’s ultimate reason for becoming a therapist, one’s proximate goal is efficacy: whenever possible, patients should leave appointments feeling better, or at least open to further treatment by the same therapist for either their present or future afflictions (Poltorak 2013; Waldram 2000; Young 1976). Put differently, therapists strive for successful interactions. Their understandings and practice of their techniques will thus, necessarily, be mediated by the interactional affordances of therapeutic topologies. Indeed, concern with interactional success is already implicit in many accounts of therapeutic vernacularization. For example, since psychotherapy relies upon effective channels of verbal communication and ‘a fund of tacit knowledge shared by patient and clinician’ (Kirmayer 2006: 163), it is unsurprising that psychotherapists should self-consciously ‘indigenize’ imported models to fit their clients’ expectations, desires, and sensibilities (Kasiram and Oliphant 2007; Pritzker 2016; Zhang 2014). Such modifications increase the likelihood of successful interactions. But appeasing a client is not the only prerequisite for interactions to be successful; therapists must also know what to say, establish rapport, and project professional authority. Some requirements are therapy-specific: in hypnotherapy, for instance, the interactional ecology must be conducive to suggestion. Nevertheless, it remains possible to propose a general theoretical model, in which the trajectory of a therapy’s
vernacularization depends on three things: what is required for ‘interactional success’ when using that therapy; which, if any, of the topologies through which therapists move afford the possibility of meeting those requirements; and the pre-existing conceptions, sensibilities and resources that therapists can use to make sense of, and mitigate against, differential interactional outcomes. In the remainder of this article, I draw on fourteen months of fieldwork across Indonesia to show how such a model can illuminate both hypnotherapy’s sudden surge in popularity and the trajectories of its subsequent vernacularization. The article thus provides an overview of an important new field of Indonesian therapeutic practice, whilst demonstrating the value of attending to interactional affordances when studying the transmission of discourses in global circulation.

A History of Hypnosis

In 1841, the Scottish surgeon James Braid coined the term ‘hypnosis’ to describe subjects voluntarily suspending their will and producing trances by a combination of imagination and attention—just one possible interpretation of the controversial consciousness-altering mesmeric practices sweeping nineteenth-century Europe (Winter 1998, 184-85). Such ‘mesmerism’ took its name from the physician Franz Anton Mesmer, who had believed every human body to contain a magnetic ‘fluidum’, which could be manipulated via magnets or the hands to induce trance and overcome illness (Winters 1950). Mesmer’s ‘animal magnetism’ treatment was a widely-publicized success, leaving Europeans gripped by the questions it raised. What did it reveal about the mind’s potential, and the capacity of one human being to influence another? Was it genuine? How did it work?

While Mesmer believed his therapies to be physiological in nature, others, such as Braid, considered them psychological phenomena caused by ‘suggestion’, ‘autosuggestion’ and ‘imagination’. This latter stance became dominant following the publication of Hippolyte
Bernheim’s influential writings on suggestion and by 1900 had become orthodoxy (see Borch 2012; Mayer 2013; Stäheli 2013). It was brought to the Netherlands East Indies by colonial psychiatrists and administrators, who saw in Indonesian animism and sorcery beliefs evidence of a highly suggestible native mind (Pols 2007). But although such conceptions of hypnosis and suggestion informed colonial policy and practice, and were latched onto by Indonesian nationalists—Mohammad Hatta (1972 [1928], 266-67) famously proclaimed his countrymen victims of a ‘colonial hypnosis’—substantive engagement with psychological discourses of hypnosis has, until recently, remained the preserve of a highly educated minority. For others, and even this was a predominantly metropolitan discourse, ‘hypnosis’ was associated with street crime, the media documenting countless incidents in which victims were made to surrender property ‘without awareness’, the ‘hypnotist’ their uncanny perpetrator (Fuller 2012; Siegel 2011, 110-15; Simon 2014, 153-54). Such criminal hypnotism was not considered psychological, however, but supernatural.

The Indonesian criminologist Josias Runturambi (2003, 143) writes that ‘a wide range of crimes are underpinned by “hidden” abilities and strengths,’ labeling these ‘spiritual’ or ‘metaphysical’ crimes. Viewing ‘spiritual crimes’ as a ‘real social phenomenon’, he criticizes Indonesian criminal law for defining ‘theft’ and ‘fraud’ without exploring ‘the situation and process behind such acts despite it being common knowledge that perpetrators often furnish themselves with “special abilities” from outside of themselves, such as ilmu hipnotis… when committing their crimes.’ Of interest here is how Runturambi conceptualizes ‘hypnosis’. It is a category of ilmu—a term meaning ‘knowledge’, both scientific and mystical. Here the latter is clearly implied. Runturambi’s claim that ilmu hipnotis involves ‘ability from outside of oneself’ refers to the widespread mystical practice of establishing relationships with denizens of the alam gaib—the invisible realm that overlays our own—and procuring their assistance in worldly affairs (Wilson 2011, 307). Hypnotic phenomena thus arise not from the mind or
physiology of the subject, nor their relationship with the hypnotist, but from the supernatural agencies hypnotists have co-opted.

Historically, then, *ilmu hipnotis* has been understood with reference to the conceptions of selfhood posed by Indonesia’s mystical traditions, where the ideal existential state is one of ‘mindful awareness’ (captured most precisely in the Javanese term *eling*; cognate concepts exist across the nation). To be *eling* is to be self-contained, fully cognizant of oneself and one’s obligations, and impervious to the influence of others and one’s emotions:

Éling is an attitude of rigorous self-control. And in the power such control demonstrates, it also implies control of one’s environment. People who are éling are never overwhelmed by their reactions to events, but neither are they unaware of attempts to deceive them, say, or slights to their prestige. They are able to detect all such maneuvers because they are so perfectly attentive, and they are able to respond effectively to all events because they never let any passion make them forget themselves (Keeler 1987, 221).

Conversely, to be ‘blank’ or mentally ‘empty’ (*ngalamun, pikiran kosong*) leaves one prone to illness, spirit possession and irresponsibility (Browne 2003, 60; Ferzacca 2002, 97-100; Keeler 1987, 221-25). Emptiness can arise at the subject’s instigation—via reverie or daydreaming. It can occur in the presence of powerful others; attending a shadow play staged by a spiritually potent puppeteer may lead audience members to forego their self-containment and succumb to the pleasurable distractions of the play’s world of illusions (Keeler 1987, 232-34). But it can also be induced via black magic, sorcerers using incantations (*rapal, mantra*) to command a supernatural entity to strip a victim of their thoughts. Such a process
lies at the core of *ilmu hipnotis*. Having ‘forgotten themselves’, the hypnosis victim becomes so compliant with requests that they willingly surrender their property.\(^5\) Prospective victims will only be unaffected if they are ‘*sakti*’, or ‘potent’, having amassed, via ascesis or the acquisition of mystically charged artifacts, sufficient reserves of mystical power (*kesakten*; *kekuatan batin*) to withstand the assault.

For much of the twentieth century, ‘learning hypnosis’ therefore involved apprenticeship to a ‘master’ (*guru*) skilled in the mystical arts: a very particular pedagogical relationship, highly personalized and involving an extensive ritual component (Barth 1990; Wilson 2011). Estu, a hypnotherapist from Central Java, who first learned about hypnosis by studying with a local *dukun* (traditional healer; sorcerer) laughingly described how lessons involved evenings of ‘staring into a candle flame’ in order to cultivate a mesmeric gaze, alongside meditative techniques designed to augment spiritual potency. Although such pedagogy may have appealed to citizens with a taste for esotericism, as well as those with a strong interest in acquiring hypnotic skills (e.g. street criminals), the time commitments involved, the moral ambivalence surrounding supernatural practice, and the relative paucity and inaccessibility of suitable masters all prevented hypnosis from becoming a mainstream pursuit.

Matters began to change in 1999, when Yan Nurindra, a self-styled ‘Human Achievement Specialist’ and founder of the IBH started developing a training seminar format through which Indonesians could master the fundamentals of hypnosis and hypnotherapy.\(^6\) Yan Nurindra, who had a lifelong fascination with esoteric traditions, had begun his career teaching *reiki*, an energy healing technique of Japanese origin, to thousands of fellow Indonesians via weekend-long seminars and workshops. Involvement with *reiki* introduced him to the international ‘alternative healing’ circuit, where he learned that the ‘hypnosis’ he had hitherto studied as a supernatural accomplishment was, in the West, seen as
psychological and institutionalized as a therapeutic technique. He began to wonder whether hypnotherapy might, like reiki, be brought to the mass market via the training seminar format.

His first attempt was unsuccessful. He invited two masters of ilmu hipnotis to coach an audience of around twenty, but their methods were not suited to the format; the seminar ‘lacked structure’ and attendees ‘weren’t able to take much away’. For his next event, he invited an American hypnotherapist to deliver a workshop in Jakarta, and was struck by the way it combined theory with practical exercises. With some adaptations, he decided, this model would be perfect for Indonesia. As he rolled out his seminars across the country, hypnosis training became accessible to mass-market consumers for the very first time. Yet Indonesia’s hypnotherapy scene initially remained small, confined largely to those with prior interests in psychology or in the worlds of traditional, complementary and alternative healing.

The final catalyst for the ‘boom’ was a television series called Hipnotis, screened on SCTV in 2004. A vehicle for the performer and American-trained hypnotherapist Romy Rafael, Hipnotis featured an extraordinary array of tricks that, to an outside observer, appear to combine hypnosis and suggestion with illusion, sleight of hand and misdirection. Yet Romy eschewed the labels of ‘magician’ or ‘conjurer’, attributing his feats to hypnotic psychology alone (Tribunnews.com 2013). Viewers were enthralled.

It seems plausible that the appeal of Hipnotis was linked to broader historical concerns. Winter (1998, 16-24) argues that the profound social change sweeping Britain was one reason mesmerism became such a widespread preoccupation in the nineteenth century; Britons were searching for models through which to understand the ‘altered state’ of their own society. Similarly, Indonesian interest in hypnosis coincides with the end of Suharto’s 32-year-long ‘New Order’ regime, and the start of a tumultuous period of democratization, in
which questions of authority and influence took on renewed vitality (see Gibbings 2013). Regardless, the show attracted a tremendous buzz, sometimes airing several times a week, and as viewers dreamed of acquiring similar skills, demand for hypnosis courses skyrocketed.

Although many new hypnosis associations were founded in the wake of Romy Rafael’s success, the IBH was best placed to capture the growing demand for training. As part of his product range, Yan Nurindra had devised a ‘Training of the Trainers’ (TTT) workshop allowing participants who had completed the IBH’s ‘Fundamental Hypnotherapy’ and ‘Advanced Hypnotherapy’ workshops to learn how to run those workshops for themselves on a franchise basis. By 2004, numerous hypnotherapists had already taken the TTT course, seeing it as an opportunity to recoup their investment. Scores more followed suit in the face of surging public demand. Yan Nurindra’s model of hypnotherapy spread rapidly across Indonesia.

As it did, seminar participants came to discover that hypnosis was about more than amusing tricks; it could be used to make a positive difference to Indonesian society. This in itself fueled the hypnosis boom. Widespread disappointment with the degree of economic growth following democratic reform has led many Indonesians to believe that their nation’s population is simply ‘not ready’ for democracy, and that development depends on transforming the national mindset from weak-willed and corrupt to honest and entrepreneurial (Rudnyckyj 2009). Hypnotherapy, as a practice that explicitly claims to restructure patterns of thought, stands as an obvious tool by which development-minded Indonesians might transform their country’s future (see also Allen 2015). There are clear echoes here of the neoliberal rationalities and ‘therapeutic governance’ that anthropologists have often associated with both the practice and popularity of psychotherapy (Bondi 2005; Lester 2017; Matza 2012; Zhang 2017), these national anxieties explaining why
hypnotherapeutic techniques have penetrated spaces associated with human development, management, education and parenting. Yet demand for hypnotherapy would soon have dissipated had it not appeared effective: its spread resulted not just from contextual factors precipitating demand, but the ways hypnotic topologies allowed Indonesians to achieve interactional success. It is to these I now turn.

The IBH seminar

Most contemporary Indonesian hypnotherapists begin their career in a training seminar. In most cases, that seminar is directly affiliated with the IBH and uses the IBH syllabus: the IBH has become a powerful brand, not least because registration with the IBH allows Certified Hypnotherapists to obtain a license for clinical practice from Indonesia’s Ministry of Health. Other organizations offering introductory workshops attempt to distinguish themselves by advertising distinctive syllabi featuring material that cannot be learned elsewhere. In practice, however, their syllabi still largely approximate that of the IBH, with the ‘exclusive’ material included as a bonus session at the end. The IBH format, gradually perfected by Yan Nurindra and his colleagues over a period of seven years, can therefore be taken as a prototype for the vast majority of initial hypnosis training.

IBH staff are extremely proud of their seminars’ efficiency, noting that whilst hypnotherapy courses in the U.S. and Europe lasted over a hundred hours (thereby burdening participants with ‘superfluous’ detail), they have managed to distill the key principles into two eight-hour sessions. Participants could become skilled hypnotherapists in a single weekend. Key to the format’s success, they emphasized, was their decision to keep the exegesis of ‘theory’ to a bare minimum. Participants are told that there are two domains of thought: the conscious (pikiran sadar), comprising 12 percent of mental activity; and the subconscious (pikiran bawah sadar) comprising the remaining 88. To influence another
person’s behavior, it is necessary for speech to penetrate their subconscious, ‘the elephant on which conscious thought rides’. This often proves difficult because a ‘critical factor’ prevents ideas moving from consciousness into the subconscious realm. Hypnosis, trainers explain, involves the suspension of this ‘critical factor’ so that a hypnotist’s verbal suggestions (sugesti) can ‘reprogram’ their interlocutor’s subconscious; a process facilitated by high degrees of ‘connectedness’ and ‘rapport’, as well as a hypnotist’s ‘authoritative’ demeanor. These basics having been established, at least seventy percent of seminar time is allocated to ‘practice’, allowing participants to master the skills necessary for a new career as a hypnotherapist.

The speed with which the IBH syllabus allows a participant to ‘become a hypnotist’ has proven highly alluring to customers, and partly accounts for its market dominance. Participants expressed surprised delight at how quickly they had acquired a remarkable new skill, seeing this as evidence of their own previously hidden talents. Such delight only heightens the ‘buzz’ surrounding hypnosis, and continued interest in it after the seminar’s end.

The IBH seminar format is thus integral to the story of how hypnosis has spread across Indonesia with such speed and in a way that garners such enthusiasm. But what makes it so effective? In this section I argue that the success of the seminar format relies on its capacity to turn participants into ideal hypnotic subjects, whose high responsiveness to each others’ suggestions makes hypnotists of them all. Ironically, then, a ‘training’ which participants experience as the acquisition of skills or discovery of talent—either way, a change located resolutely within themselves—actually hinges upon transforming the others with whom they are in hypnotic relation: a point with crucial implications for the afterlife of the conceptions they acquire.
Psychological experiments have repeatedly indicated that responsiveness to so-called ‘simple suggestions’ inciting feats such as ideomotor phenomena, ideosensory changes, and hypermnnesia is heightened by task motivation and response expectancy (Hammond 2015, 440). Psychologists have been divided over what such findings mean. Spanos (1986, 466), a notoriously skeptical researcher, interpreted them as indicating that hypnotic phenomena did not involve, as some had suggested, an ‘altered state of consciousness’, but rather the ‘voluntary’, ‘active’, ‘goal-directed’ behavior of ‘motivated subjects’ seeking to conform to the roles expected of them. Subjects’ reports of involuntary responsiveness were merely misinterpretations, delusions, or fakery (1986, 489-93). But in the face of repeated testimonies that hypnosis really does feel involuntary, most contemporary psychologists concede that suggestions can trigger if not ‘altered states of consciousness’ then ‘altered experiences’ in which subjects become detached from their own sense of agency and volition (Kirsch 2000, 275-77). How this occurs remains hotly debated, but there is general agreement that such outcomes are situationally mediated and more likely when subjects are intellectually and emotionally invested in their occurrence.

It may reasonably be presumed that IBH customers already have a degree of investment in the power of hypnosis prior to attending a training seminar: they have, after all, paid a considerable fee to be present. The early stages of a seminar are devoted to cultivating that investment further and translating it into a disposition of heightened responsiveness. Proceedings begin with a video of Yan Nurindra hypnotizing television presenter Anie Rahim and explaining that hypnotic street crime relies on psychological principles that can also be used for healing, and that no supernatural agents are involved—although conducting sorcerous rituals may give criminals the confidence to administer
suggestions with aplomb. In the ‘theory’ session that follows, trainers return to mystical themes again and again. One tells her participants that her ‘favorite thing about the workshop was that it doesn’t involve any mysticism, any energy, any prana, or anything like that. At all.’ ‘Don’t imagine you’ll immediately be sakti,’ warns another, ‘This is a skill, it takes practice.’

Such explicit repudiations of the supernatural have three effects. Firstly, as Indonesia’s ‘Islamic movement’ encourages ever-more Muslims to renounce anything that smacks of local heterodoxy (Brenner 2011, 478), they reassure anxious participants that the training really is scientific, secular and Islamically permissible (halal). Secondly, they flush out any participants secretly hoping to acquire mystical knowledge—anyone can leave during the first ninety minutes and receive a full refund. Finally, by retheorizing well-known and widely documented ‘supernatural’ phenomena, hypnosis discourse is given their force. The coverage of mass possessions grips newspaper readerships; tales of sorcerous thefts haunt trips to the marketplace. By acknowledging these phenomena as real but reframing them as caused by hypnosis, psychology is imbued with as much power as spirits. Hypnosis is not just for parlor tricks; it is as potent and desirable as kesakten. If, as Kirsch (2000) argues, the efficacy of ‘hypnosis’ treatments largely derives from what the term’s cultural connotations lead patients to anticipate, trainers’ very efforts to distinguish their practice from mysticism only serve to infuse participants’ existing expectations with centuries-old traditions of wonder and fear, heightening expectancy yet further.

Thus primed, participants begin their first practical exercise: suggestibility tests. First, the trainer administers a test to everyone present, exhorting them to imagine their arm being made of rigid, inflexible iron and then asking them to bend it at the elbow. Usually most arms bend, if stiffly, but around two or three participants continue holding their arms in front
of them. ‘Good!’ says the trainer, walking over to ‘normalize’ (normalkan) them. ‘You’re the best!’

The trainer then informs seminar participants that ‘on the Stanford Hypnotic Susceptibility Scale’, there are three categories of person: those whose suggestibility is good, moderate, and ‘not so good’ (kurang)—a widespread euphemism for ‘bad’.10 This choice of terms is not accidental. Framing responsiveness as an ability—something at which one can be good, or bad—rather than a trait which may be ‘high’ or ‘low’ infuses the suggestibility test with task motivation. This heightens further as a competitive dimension is introduced. ‘Let’s find out who’s the best,’ the trainer announces. ‘Remember, “the best” doesn’t mean the person who’s best at hypnotizing! It’s the person who’s most responsive.’

Each participant is asked to practice a range of tests and then use them to compare the suggestibility of two other trainees. ‘Decide who is better’, the trainer instructs, ‘and mark them on your worksheet with an X. The Xs will get to participate in the shock induction session this afternoon’. Not just competition, then, but exclusion for the losers! The trainer justifies this, explaining that the tests measure a person’s ‘natural suggestibility’ and that only someone whose suggestibility is good will respond to a shock induction. Yet in asserting this seemingly objective fact, the trainer establishes a structure of desire that resonates with the widespread emphasis on contests, competition and achievement in contemporary Indonesia (Parker and Nilan 2013), filling participants with the desire to be ‘good’—better still, the best—and avoid at all costs the shame of being labeled ‘kurang’.

It is hence no surprise that as the first suggestibility tests are administered, far more participants prove responsive than when a test was administered to the whole group by the trainer. This is the first real opportunity for participants to interact with each other, and there are countless moments of laughter and bonding as they stumble over their scripts and gasp in wonder at the catalepsies they induce and have induced in them. The session thus gives
participants the opportunity to experience themselves as responsive to suggestion (very few participants ever fail to respond to any of the tests), to witness responsiveness in others, and to experience the feeling of ‘connectedness’ that trainers have already advised is a conduit for hypnotic responsiveness. All these factors heighten response expectancy and, by extension, future responsiveness. A session purporting to measure one’s fixed, natural ‘suggestibility’ actually cultivates that very quality.

The rest of the weekend builds upon this foundation. Having practiced reciprocally inducing ‘trance’, participants practice three basic therapeutic techniques on each other. First is ‘conditioning’, used to dispel negative emotions. Participants are put in trance, prompted to visualize something they find distressing, and then to visualize a ‘safe place’ until their negative feelings fade. Second is ‘anchoring’: as participants hypnotically re-live a time when they experienced intense motivation, this feeling is attached to a gesture (the ‘anchor’) that they can deploy to summon the same affective state post-hypnotically. Last comes ‘empowerment’, in which participants are prompted to visualize their aspired-for future self in such vivid detail that it will propel them to achieve their goals. Music is played throughout these sessions; it keeps the hypnotists’ speech slow and rhythmic, covering any gaps in their scripts with soothing and emotive cadences. Participants often report profound affective changes during the exercises, and the fact that these feel pleasant—calming and motivating—only heightens their enthusiasm to continue with hypnotherapy after the seminar. Meanwhile, trainers patrol the room making sure that any ambiguous outcomes—changes in affective state that are less dramatic than hoped for, anchors that only last a short while—are reframed as successes.

Participants consequently leave the seminar convinced of two things. First is that hypnosis can powerfully alter one’s affective engagement with the world. It can elicit and dispel painful feelings; it can calm; it can motivate. They have seen this happen to others;
they have experienced it themselves. As Pritzker (2011) argues, embodied experience serves as the existential ground for emergent understandings, confronting subjects with new knowledge of the self that demands interpretation and explanation. Most readily latch onto the psychological framework set out in the ‘theory’ session to make sense of the seminar’s events. Second and equally important is the embodied knowledge that they can hypnotize; that they have the ability to bring about these changes in others. Many find this realization extraordinarily affirming.

Such ability, however, is an affordance of a training seminar context in which participants have been rendered highly responsive to each other’s suggestions, and in which music and encouraging words from trainers lead a suggestive atmosphere to prevail. The suggestions on offer are ‘simple’ ones, that under favorable conditions can elicit response from subjects with only ‘minimal dissociative talent’ (Hammond 2015, 440). Moreover, the ‘therapeutic interventions’ may prove effective precisely because their recipients are not actually in need of therapy. Removing an unpleasant feeling that was briefly cultivated for an exercise, for instance, is a different proposition to calming a patient experiencing acute emotional distress. The hypnotic prowess about which participants feel such enthusiasm thus emerges from an interactional context quite different to those they will encounter outside the seminar. It is as hypnotherapists mediate this disjunction between topologies that IBH discourse becomes vulnerable to destabilization and new cultures of hypnotherapy begin to emerge.

**After the Seminar**

Having graduated from a training seminar, fledgling hypnotherapists face the challenge of how to apply the techniques they have learned to a diverse range of clients. The enterprise is full of risk.
As we have seen, mainstream training seminars present hypnotherapy as a practice in which therapeutic suggestions are administered to clients following the induction of a trance. They do this for several reasons. Firstly, they are following the received wisdom on the international healing circuit that responsiveness to suggestion is heightened when a subject is in a ‘hypnotic trance’, and that ‘trance’ therefore has unique therapeutic benefits. Secondly, the very spectacularity of trance induction—of making someone ‘sleep’ on command and lose all strength in their body—contributes to the seminar’s thrill. Scenes of hypnotic subjects collapsing into a ‘trance’ feature widely in trainers’ promotional materials, and replicating such feats convinces participants that they have acquired (or unlocked) remarkable abilities.

Yet precisely because trance induction is visually spectacular, it becomes painfully apparent when it fails. Unlike the subjects that hypnotherapists practiced on during their workshops, actual clients have not been primed to be receptive to suggestion. Indeed, they may be too distressed to easily focus on the therapist’s words or feel uncomfortable surrendering to a ‘trance state’, consciously or unconsciously resisting the induction. Every appointment thus confronts hypnotherapists with the prospect of failure, an outcome which threatens humiliation, reputational damage, and to shatter their own confidence in their abilities.

Once successfully induced, trances sometimes go wrong. One novice hypnotherapist described how a patient ‘began to weep uncontrollably’ following induction; another had a patient maraud around the room whilst ‘roaring like a tiger’. Neither knew what to do and had to phone their trainers for advice. Both were troubled by the experience. Had the trance induction so ‘emptied’ their patients’ thoughts that spirits had possessed them? Had the longstanding cultural associations of ‘trance’ with ‘possession’ endowed the patients with an unanticipated response expectancy? Or was this, as the trainers suggested, a cathartic release
of long-suppressed emotion, integral to the healing process? Regardless, it was clear that trance induction could unleash unanticipated forces, requiring hypnotherapists to think on their feet—an intimidating prospect.

Finally, the therapeutic encounter challenges hypnotists to devise interventions to treat a diverse range of problems, many of which will be unfamiliar. Anticipating this difficulty, the IBH recommends its practitioners pursue ‘solution focused brief therapy’, asking patients what they want their life to be like once their problem has been surmounted, and then providing suggestions to help achieve those goals. By listening to patients’ language during the initial consultation, therapists can identify images and phrases that will resonate with patients’ existing patterns of thought, allowing them to provide effective suggestions without detailed psychiatric study. Yet many novice hypnotherapists felt daunted by speaking extemporaneously, and doubted whether they could retain their authority when composing a script impromptu.

These above-mentioned interactional risks are inherent to the IBH training model, not only because trance induction features so centrally, but because the compressed training schedule and emphasis on ‘practice’ over ‘theory’—the very features that have helped stoke the hypnosis boom—afford little opportunity for participants to cultivate the knowledge and experience required to mitigate against them. Hypnotherapists respond to the risks in diverse ways. Some abandon therapeutic practice altogether. Others stick with ‘brief therapy’, steadily cultivating their abilities to identify effective therapeutic language and manage unexpected developments in the consulting room. But many more who want to remain active hypnotherapists find themselves overwhelmed by the interactional risks outlined above. Turning to their stories demonstrates how the training seminar format has contributed not just to the spread but also the diversification of hypnosis discourse in contemporary Indonesia.
A Culture of Expertise

Enah, a forty-five year old university graduate from Banten, attended an IBH seminar in the early 2000s hoping that hypnotherapy would let her overcome some problems in her personal life. She left convinced that hypnotherapy could also help many of her friends—wealthy housewives whose opulent lifestyles masked profound feelings of personal dissatisfaction. Yet her early attempts to treat patients were less successful than she hoped. She wasn’t sure what to say; the therapy often failed. She decided that she needed additional training and signed up for a hypnosis workshop in Singapore.

That she did so supports Pritzker’s (2014, 88) contention that therapeutic understanding emerges through an ‘ongoing stream of interaction’. But it also shows that stream’s trajectory to be mediated by pre-existing conceptions, fantasies and sensibilities—as well as access to resources. Many Indonesian hypnotherapists are, like Enah, education-minded cosmopolitans, captivated by psychology’s capacity to rationalize the seemingly mystical; they are intuitively drawn to a very particular further interaction—supplementary training. Pursuing this abroad has even greater allure (see Nilan 2008). But their strategy can yield unforeseen results.

‘I was shocked,’ Enah recalled. ‘The course was 100 hours. We covered so much—different problems and how to treat them. And there was so much homework!’ The experience left her ‘ashamed’ (malu) that in Indonesia, one could be certified as a hypnotherapist and open a clinic after only sixteen hours of training. The very succinctness that IBH trainers presented as evidence of Indonesian ingenuity was reframed, in Enah’s understanding, as proof of Indonesian ignorance. She stopped listing her IBH certifications on her business cards.

I heard similar accounts from other hypnotherapists wealthy enough to have studied overseas. Not all were as negative about the IBH as Enah; they often expressed their
gratitude to Yan Nurindra for introducing them to hypnosis, and praised how effective his seminars were for teaching hypnotherapy’s fundamentals to a lay audience. But, having studied abroad, they worried that the title ‘Certified Hypnotherapist’ was being given out too quickly, flooding Indonesia with a glut of overconfident but underqualified practitioners who would bring hypnotherapy into disrepute. Adi W. Gunawan, a Surabaya-based hypnotherapist who studied extensively in the U.S. following his IBH training, has subsequently developed 100-hour and 200-hour courses in clinical hypnosis, hoping to raise Indonesian hypnotherapy to international standards. Yet with fees starting at 30 million rupiah (US$2250) and a stringent admissions test, these courses are only accessible to an elite few. Those who complete them, however, emerge with a wide range of therapeutic techniques at their disposal—their practice is consequently quite different from the ‘brief therapy’ of hypnotists who have only been trained in IBH seminars.

One Size Fits All: Islamic Hypnotherapy

A devout Muslim living in Jakarta, Memed first studied hypnosis hoping to learn tricks that he could use in stage magic routines. His training seminar, however, convinced him there were ‘better’ things he could do with hypnosis. Helping people overcome their problems was, he felt, incumbent upon him as a Muslim, and would accrue considerable merit (pahala). He vouched to become a hypnotherapist. Used to public speaking, as both a conjurer and an Islamic proselytizer (da'î), Memed had no anxieties about speaking in front of his clients. But he was soon overwhelmed by the sheer diversity of the problems he was having to treat: from salespeople struggling to meet performance targets to young men wanting to slough off their same-sex desires. He was not convinced that improvising therapeutic scripts was effective; but he could not afford additional training. What was he to do?
Then it hit him: the cases were not as different as they first seemed. Each client was getting so preoccupied by their worldly difficulties that they were neglecting their closeness to God and their adherence to the path they were supposed to follow as a Muslim. If they could ‘re-focus’ on what really mattered, then they would flourish. So he developed an Islamic self-improvement script, encouraging regular prayer, disciplined reading of the Qur’an and compassion towards others, and used it to treat all his patients; with a few tweaks it could even work for non-Muslims.

One of a growing number of ‘Islamic hypnotherapists’ (see also Allen 2015), Memed’s story sheds an interesting light on recent work concerning the rise of Islamically-inspired therapy and self-help in Indonesia. This trend has frequently been attributed to the influence of reformist Islam on Indonesians’ conceptions of the good, and the related emergence of an ‘Islamic consumer culture’ (Fealy 2008; Hoesterey 2016). Yet although styling himself as a ‘religious hypnotherapist’ certainly allowed Memed access to a particular segment of the market, he never presented this as a reason for streamlining his practice. And while Islamic sensibilities led Memed to become a therapist, they initially inspired him to attempt tailor-made treatments for each of his clients. Only when this proved unsatisfactory did he draw on his religious knowledge to develop a therapeutic practice that posited the cultivation of piety in others as their pathway to healing. Memed’s embrace of reformist piety discourse should thus be seen not as a business strategy or a religious act but as a practical response to interactional difficulty given his limited knowledge of clinical hypnosis and his moral commitment to therapeutic efficacy.

Memed, Enah, and Adi W. Gunawan all responded to the interactional difficulties of hypnotherapy by drawing on their pre-existing ideas, sensibilities and resources to develop modes of practice distinct from those for which they had originally been trained. Nevertheless, they all retained the IBH’s theoretical vision that hypnotherapy was the
therapeutic administration of suggestion following the induction of a sleep-like ‘trance’. It was amongst practitioners who encountered difficulties with trance induction that more radically different conceptions of hypnosis emerged.

Redefining ‘Trance’: Waking Hypnosis

Mia took her seat opposite Adang, her school’s wild-eyed ‘hypnocounselor’. Her grades had plummeted. He asked her what was wrong.

After a brief hesitation, Mia began speaking very rapidly. Her parents were quarreling at home. Objects had been thrown. It was upsetting her so much that she could not concentrate on her schoolwork.

Was there anyone, Adang asked, that her parents both respected? Someone who might be able to intervene on Mia’s behalf? Once again, the fifteen-year-old hesitated. Perhaps her aunt, she ventured.

‘Then you should tell your aunt about these problems,’ Adang advised, ‘and let her speak to your parents.’ Mia nodded and left the room.

Adang explained that Mia had been struggling because of a ‘block’ in her thinking, believing she had to cope with her family problems alone. His intervention had questioned that assumption, opening up promising new pathways for action. Adang’s account was clearly influenced by ‘neuro-linguistic programming’, a popular psychotherapeutic approach in Indonesia (and elsewhere), in which therapists challenge the underlying presuppositions in their clients’ worldviews to help them overcome their problems (Bandler and Grinder 1975). A useful conversation for Mia, then, but not—seemingly—a hypnotic one. But on this, Adang begged to differ. ‘That was hypnosis!’ he argued. ‘She was in a trance!’

I regularly encountered similar claims. Firman, a Senior High School ‘hypnoteacher’, described always wearing brightly colored clothes to work, and opening his lessons with
jokes. ‘The kids all look at my clothes and laugh at my jokes,’ he explained, ‘and that in itself is hypnosis!’ Ulung, a university professor, had once persuaded Yan Nurindra to give a talk on the educational value of hypnosis to trainee teachers. ‘That kind of lecture isn’t cheap,’ he told me, ‘but when I explained how hostile my colleagues were to hypnosis, he agreed to speak for a substantially reduced fee. Turns out I could hypnotize Yan Nurindra pretty quickly!’ ‘It’s not necessary to put someone to sleep for hypnosis,’ Adang explained, when I queried whether such examples really counted as ‘hypnosis’. ‘I do waking hypnosis. It’s different from classic hypnosis—I use the Ericksonian approach.’

Given that the ‘classic’ approach taught by the IBH is indebted to the work of Milton Erickson, it was puzzling to hear Adang (and others) contrast it with ‘Ericksonian’ practice. This appellation arose in the mid-2000s, after several IBH graduates, inspired by their learning but dissatisfied with their limited proficiency, traveled to Arizona to study at The Milton H. Erickson Foundation. On their return, they staged seminars on ‘Ericksonian hypnosis’, out of which the ‘waking hypnosis’ movement was born. Erickson (1980b, 479-80) had posited that ‘trance’—understood as a state of absorption or reverie in which one’s attention is directed inward, rather than to the outside world—was an everyday experience for most people. Through making reference to such absorptions and patterning his conversational speech in particular ways, Erickson found it was possible to induce trance without using a shock induction or progressive relaxation technique. Yet since he insisted that hypnotic trance involved a ‘quiescence of the “consciousness” simulating normal sleep’ and ‘a delegation of the subjective control of the individual functions, ordinarily conscious, to the “subconsciousness”’ (1980a, 8), it seems unlikely that Erickson would have classified Adang and Ulung’s endeavors (in which an interlocutor was prompted to consciously respond to their prompts) or Firman’s teaching (which sought to capture students’ conscious attention as they engaged with the external world) as ‘hypnotic’. Conversely, rather than
seeing conversation as one of several techniques of induction, ‘waking hypnotists’ had come to understand all conversation as inherently hypnotic.

This slippage in the parameters of the ‘Ericksonian’ approach should be understood in light of the differences between Euro-American and Javanese metaphysical traditions. Consider the possibility mooted by Spanos (1986, 466): that ‘hypnotically responsive’ subjects may only (and voluntarily) be behaving ‘as if’ they were hypnotized. This argument proved controversial in Western psychological circles, partly because so many hypnotic subjects fiercely denied role-playing, but also because the presence or absence of volition has far-reaching implications for how actions should be understood in Euro-American philosophy. Beahrs (1986, 467) tellingly designated ‘the hypnosis/nonhypnosis continuum’ as ‘one of the most important research issues in all of the life sciences’ precisely because ‘the degree of voluntariness that we attribute to another person’s actions will determine how we treat that person at all levels, from everyday interpersonal relationships to a court of criminal justice’. In Javanese metaphysics, however, the distinction between involuntary response and conscious compliance carries far less weight. Both cases involve a loss of self-control and surrender to the wishes of the other. Both are opposed to the ideal state of eling (mindful awareness). Moreover, while volition is phenomenologically salient in the Indonesian life-world, it is not a reliable indicator of responsibility or control; the ethnographic record is replete with cases where informants have retrospectively understood their ‘voluntary’ actions to have been directed by outside (often sorcerous) forces (e.g. Bubandt 2014, 79; Wikan 1990, 224). When the most culturally salient alteration in a ‘state of consciousness’ is not the suspension of volition, but the dissolution of self-containment, the capturing of students’ attention is readily understood as ‘trance’; persuasion by an interlocutor a feat of ‘hypnosis’.

This expansive conception of trance and hypnosis proved attractive for various reasons. Ulung was drawn to it following disappointing experiences after an IBH seminar.
Having hypnotized several people successfully during the training, he had failed to induce a single trance thereafter. His wife had mocked him mercilessly. ‘So much money, to get so little,’ she had said. Like Enah, he sought out supplementary training. Unable to study overseas, he attended a seminar on ‘Ericksonian hypnosis’ and encountered the proposition that all conversation was hypnosis of a kind. The idea appealed, perhaps because it allowed him to discover that he was already a skilled hypnotist after all. Indeed, though it does not feature on the IBH syllabus, some IBH trainers recommended ‘waking hypnosis’ to participants who ‘lacked the confidence’ to successfully induce trance. Several therapists commented that ‘waking hypnosis’ was also less stressful for clients, who were often afraid of hypnotic sleep, associating it with mind control or possession. Moreover, even if one could successfully deliver ‘classic’ hypnosis, the conversational approach was quicker, and much less hassle, especially in busy environments like schools.

Though not denying the veracity of the material imparted at IBH seminars, ‘waking hypnotists’ reframed the ‘classic’ approach as one of many effective and valid hypnotherapeutic practices in ways that often led them to abandon the techniques they had learned from the IBH in favor of an approach with lower levels of interactional risk. Doing so gave rise to an emergent new therapeutic culture, whilst promoting a psychologized worldview in which even mundane social interactions could be understood as reflections of one’s hypnotic prowess or vulnerability, and conceptions of sociality and selfhood were saturated with the language of ‘hypnosis’ and ‘suggestion’.

Redefining ‘Suggestion’: The Resurgence of Magnetism

Recent years have seen the burgeoning popularity of ‘non-verbal’ models of hypnosis, often labeled *magnetisme* or *mesmerisme*, which understand hypnosis to be not a psychological but
a physical, energy-based, phenomenon. Some such practices draw on longstanding Javanese metaphysical ideas— that the universe is animated by a ‘formless, constantly creative energy’ that potent individuals can accumulate so as to ‘act like a magnet that aligns scattered iron filings in a patterned field of force’ (Anderson 1990, 22, 33)— to breathe new life into Mesmer’s theory of ‘animal magnetism’. By rearranging the energy in a patient’s body, with or without the assistance of supernatural entities, the hypnotherapist affects a cure. Others, influenced by ‘New Age’ thought, claim the world is produced by the vibrations of cosmic energy, and that by manipulating one’s own wellspring of energy it is possible to change another person’s reality.

Verbal suggestion therefore derives power not from a client’s interpretation of the hypnotist’s words, but from the physical force, or vibration, of the hypnotherapist’s speech, which transforms the organization of the client’s body. Suggestions ‘lodged in the mind’, mesmerists told me, because the brain was an aqueous organ, and water proved especially adept at capturing ‘vibrations’. Mesmerism and magnetism could thus explain ‘classic’ hypnosis, whilst offering additional avenues for ‘hypnotic’ treatment. Simply by channeling one’s energy, one could put a patient in a trance and heal them. Unsurprisingly, then, some IBH trainers recommended these non-verbal approaches to trainees who felt desperately uncomfortable speaking in front of clients.

But more than the fear of interactional failure rendered non-verbal hypnosis appealing, as evident in the case of Dodie Magis, a good friend of Romy Rafael who has originated a pioneering ‘Javanese magnetism’ therapy. Having studied Javanese metaphysics with a village dukun for eight years, Dodie was certain hypnosis involved mystical abilities. In 2006, to convince him otherwise, Romy Rafael invited Dodie to a seminar in Jakarta given by American hypnotherapist Julie Griffin. Dodie arrived ‘willing to believe that hypnosis was just psychological’. Yet when he entered the seminar, he was struck by the atmosphere.
Being near Griffin elicited the same dizziness he felt in the presence of potent mystical objects or powerful dukun. He could feel her ‘streaming out energy’. And as she walked past the participants, they fell into trance almost instantly, in contrast to the laborious and time-consuming inductions that seminar participants usually perform on each other. She was clearly a person of extraordinary efficacy. Dodie concluded hypnosis had both ‘psychological’ and ‘physiological’, energy-based, dimensions, which when combined allowed someone to become ‘a true master’. From this understanding Javanese magnetism was born.

Dodie’s story fits well with Pritzker’s (2011, 2014, 2016) model of ‘living translation’, his seminar embodiment ‘resonating’ with previous experiences to generate new understandings of what was at stake in ‘hypnosis’. But his magnetism theory also resolved an intellectual conundrum raised by psychological discourses of hypnosis: why some hypnotists prove to be routinely more adept than others at hypnotizing clients of ostensibly similar ‘suggestibility’. This illuminates why, despite many trainers expressing beliefs that magnetism and mesmerism achieved their outcomes via symbolic suggestion, fledgling hypnotherapists were frequently open to the energy-based ontology in which the therapy was grounded. IBH seminars explain away differences in competence via the intangible concepts of ‘connectedness’ and ‘rapport’; with little time to spend on ‘theory’, such concepts are left underdeveloped. Javanese magnetism, by contrast, grounds differential efficacy in clearly elaborated metaphysical principles, offering practical steps—the meditation and ascesis long believed to augment ‘spiritual potency’—by which better results could be obtained. Though most participants are initially drawn to magnetism training by the spectacular visual drama of the technique, its principles appeal to those who have already dabbled in hypnotherapy because it can not only mitigate the risk of interactional failure, but also accommodate interactional inconsistency and suggest pathways to improved interactional success. The idea
lodges not just because it resonates with trainees’ pre-existing metaphysical imaginaries but because it harmonizes with the interactional goals they seek to pursue once they leave.

Consider Din, a hypnotherapist from Banten. Before starting university he, like other young men in his village, trained extensively in esotericism, cultivating inner energy (*tenaga dalam*) through relations with supernatural entities (Wilson 2011). After attending an IBH seminar as a student, he dismissed such practices as mere superstition. Convinced that psychology could explain all of Indonesia’s ‘supernatural’ phenomena, he stopped meditating and began a successful career as a hypnotherapist. He had nothing but disdain for mesmerists and magnetists; he considered them imprisoned by their own superstitions. A few years after qualifying, however, he was struggling to attract clients and financial difficulties were creating tension in his marriage. ‘I realized that I had turned my back on the very things that had allowed me to be successful,’ he explained, ‘my meditation, my esotericism. I asked my wife for permission to start meditating again.’ He began offering a new range of treatments, combining hypnotherapy with paranormal cures; soon he was solvent once more.

Din had readily accepted Yan Nurindra’s psychological discourse, even though it flew in the face of his pre-existing worldview, because it was still congruent with what he sought, and was able to achieve, in his hypnotic interactions. Only a few years later, when—perhaps because of an increasingly saturated market—Din could not sustain his interactional success did he develop his own version of the magnetism model. Despite the IBH’s insistence that hypnosis does not involve mysticism, energy, magic, or anything of the sort, Din reframed his virtuoso performance in his training seminar as having been underpinned by his tremendous reserves of inner energy. He had, he realized, been practicing a form of *ilmu hipnotis* all along.

As both Din and Dodie show, the variable outcomes of hypnotic practice, both between different practitioners and over one’s own life-course, can prompt hypnotherapists
favorably disposed to IBH discourse to seek out supplementary explanations of how hypnosis works. So it is that, fulfilling the predictions of the tabloid media, contemporary hypnotists may end up participating in mystical practices and forging relations with denizens of the numinous realm.

Conclusion

This paper has used a very specific ethnographic case—the vernacularization of hypnotherapy in Indonesia—to explore the more general problematic of how and why concepts are transformed as they circulate around the globe. Agreeing with Spiro (1997, 5) that a theory of cultural transmission requires ‘a theory of the mind’ and attention to the cognitive and motivational dynamics underpinning engagement with discourse, I also recognize, following Csordas (1994) and Pritzker (2011, 2014, 2016), that such engagement is necessarily embodied, that ‘felt experience’ can consequently be seen as the existential grounds of culture, and that this emerges in interaction. But since not all forms of ‘felt experience’, and hence not all forms of meaning-making (or meaning-maintenance), are equally possible in all interactions, a theory of culture also requires a theory of interactional affordances that examines how different topologies and interactional ecologies potentiate or preclude ways of being.

More is at stake here than simply accounting for individual moments of experience. Since different social forms—pedagogical formats, for instance—involves participants moving through different topologies in different sequences, felt experience comes to be patterned in particular ways. In response to these patterns—to differentials in felt experience, and any existential anxieties and intellectual conundrums they evoke—subjects may draw on the cognitive, social and material resources at their disposal to forge revised understandings of what they have learned and cultivate new outlooks on the world. Interactional affordances
thus lie at the heart of cultural transmission, cultural invention, and ‘living translation’. They even shape the course of major cultural transformations, such as psychologization.

My ethnographic materials demonstrate this especially clearly because hypnotherapy confronts practitioners with such specific requirements for interactional success: not just fluent, authoritative, professional speech, but a client’s responsiveness to their suggestions. The irony of Indonesia’s hypnosis boom is that the topologies of interaction that allowed ‘classic’ conceptions of hypnosis to take root in the popular imagination—those of the weekend-long training seminar—also paved the way for those conceptions’ reformulation. Seminars enabled acceptance of and enthusiasm for the IBH’s model of hypnosis precisely because they were carefully structured and sequenced interactions that arranged bodies, speech, sound and spectacle in ways that heightened suggestibility and elicited ‘altered experiences’. Thus, while some participants (like Dodie) brought their own interpretive lenses to the training, most were sufficiently awed by their (and others’) experiential transformations to wholeheartedly accept the IBH model. When subsequent interactions did not afford the same possibilities, or carried a heightened risk of failure, participants’ conceptions and practices of hypnosis were reworked into versions that afforded greater possibilities of interactional success; the precise trajectory taken depending both on their prior sensibilities and the resources and opportunities they had access to.¹⁴

Yet the analytical significance of the seminar format could easily have been overlooked, were it not for the participant observation method, which confronted me as a researcher with the same differentials in experience as my informants, and the years of psychological research into suggestibility (and other interactional affordances), which identified patterns through which I could explain them. Though psychological experiments are far from exhaustive, and often framed in ways that reflect the cultural biases of Euro-American researchers (Whitehouse and Cohen 2012, 411), I thus agree with Blackman
(2007, 577) that closer engagement with social psychology should be a priority for social and anthropological theory. Indeed, by putting experimental findings in dialogue with ethnographic observations it might, ultimately, be possible to develop a theoretical model of felt experience that has the ‘structured precision’ (Hemmings 2005, 562) of affect itself.

What psychological experiments cannot anticipate is how subjects will respond to the experiences their interactions afford: this requires detailed biographical and ethnographic knowledge, especially regarding subjects’ interactional goals. For those seeking efficacious interactions, therapists being a prime example, the significance of interactional affordances can be analyzed fairly straightforwardly. The anthropologist simply needs to investigate what the subject defines as a ‘successful’ interaction, whether (and when) the topologies through which they move afford such interactional success, and what work is done, and with what resources, to comprehend and mitigate against differential outcomes. Other interactional goals (or combinations thereof) may require more complex models of mediation.

Nonetheless, several general conclusions hold true. When studying the global spread of unfamiliar concepts or practices, it is crucial to consider the forms through which they are disseminated. Understanding their vernacularization, moreover, not only involves recognizing ‘felt experience’ as the ‘existential ground’ of meaning-making (cf. Csordas 1994; Pritzker 2011, 2014), or studying the values, fantasies and ‘ethical imaginations’ that influence those ideas’ reception (cf. Boellstorff 2003; Moore 2011). It also involves accounting for when and why subjects can use them to achieve the interactional outcomes they desire. [9999 words]

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Notes

1 See e.g. https://www.youtube.com/watch?v=dOZmekvxDXk [accessed February 15, 2017].

2 Most names in this article are pseudonyms. When referring to figures who have played an important role in the development of Indonesia’s hypnosis industry—Yan Nurindra, Romy Rafael, Adi W. Gunawan, Dodie Magis, and Julie Griffin—I have preserved their original names.

3 See http://www.ibhcenter.org/list-member/ [accessed July 6, 2017]. By comparison, Pols (2006, 369) estimates there are only around 500 psychiatrists working in Indonesia.

4 Fieldwork was conducted between 2011 and 2016, and included semi-structured interviews with 51 hypnotherapists and participant observation of numerous hypnotherapy sessions, trainings and demonstrations.

5 This form of ilmu hipnotis is sometimes referred to as gendam or nyblek in Java, and pukau or lodes in Sumatra. A second, rarer form of ilmu hipnotis places victims in such a deep sleep that they will not be roused during a house burglary, and is also known as sirep (Runturambi 2003, 145).

6 I never met Yan Nurindra; by the time I began fieldwork in Java he was suffering from stage 4 cancer, and he died shortly thereafter. The account that follows is constructed from interviews with his former pupils and colleagues at the IBH.

7 The terms ‘critical factor’, ‘reprogramming’, ‘connectedness’, and ‘rapport’ are all used untranslated, as English loanwords. No prior knowledge of English is expected of seminar participants, however, and these terms are carefully explained during the training.

8 Detailed overviews of these experiments can be found in Barber (1969), Kirsch (1985), and Spanos (1986).
A day’s training costs from 600,000 to three million rupiah (US$45-225), depending on the reputation of the trainer and the prestige of the training venue. In practice, this means that trainees are predominantly middle-class.

In practice, IBH suggestibility tests more closely approximate those used by the Barber Suggestibility Scale (see Barber 1969, 33-54) than the Stanford Hypnotic Susceptibility Scale.

Responsiveness to more ‘difficult’ suggestions, such as anesthesia, profound amnesia or hallucination, appear to require certain degrees of ‘dissociative talent’ on the part of individual subjects (Hammond 2015, 440). It is debated to what extent such abilities are genetically innate or developmentally acquired (see Heap, Brown, and Oakley 2004).

Such a stance is controversial in academic psychology, where experiments have repeatedly indicated that subjects become highly responsive following ‘trance induction’ only because the induction process encourages deep relaxation, heightened focus, and high expectations of suggestibility—all of which can be established via other means (Kirsch 2000). However, as Green et al. (2005, 260) note, many hypnosis practitioners remain heavily invested in the concept of hypnotic trance as an ‘altered state of consciousness’. The view that hypnotic trance is ‘fundamentally different from normal waking consciousness and from other altered states such as dreaming and relaxation’ is especially widespread amongst followers of the late Milton Erickson (Kirsch and Lynn 1995, 848), who were often cited as the most profound intellectual influences on the Indonesian hypnosis scene.

Hoesterey (2016, 77-86) offers a fascinating account of this idea’s promulgation on the Indonesian training circuit.

Such dynamics have historical precedent: Freud developed his theory of psychoanalysis in part because of the difficulties he encountered transferring hypnotherapeutic methods from
the communal space of the psychiatric hospital to his private Vienna consulting room (Mayer 2013, 146-60).