



## RESEARCH ARTICLE

# Enhancing Metacognitive Awareness Through Hypnotherapy: Implications for Mental Health Outcomes

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## Abstract

The purpose of this study is to present a narrative review on the subject of hypnotherapy's influence on mental health outcomes and its efficacy in enhancing metacognitive awareness. The goal of the study is to increase our knowledge of how focused interventions might enhance mental health results. If successful, hypnotherapy may offer a simple and efficient means to promote emotional control and self-awareness, opening the door for more widespread uses in mental health care. This study offers insight into a novel therapeutic method by being one of the first to examine the potential of hypnotherapy in enhancing mental health outcomes and metacognitive awareness. If successful, hypnotherapy could be a useful adjunct or substitute for conventional therapy, especially for people who want to better understand and control their mental processes in a less regimented and more intuitive way than Cognitive Behavioural Therapy. The purpose of narrative reviews is to give a summary of the existing literature, point out any gaps, and improve comprehension of a subject.

**Keywords:** Hypnotherapy, metacognition, metacognitive awareness, intervention, conventional therapy, emotional regulation, cognitive behavioural therapy, narrative review

## Metacognition

Metacognition Based on the word "metamemory," which the same scholar had previously proposed, it was first used by John Flavell in the early 1970s (Flavell 1971). According to Flavell (1979), metacognition is "knowledge and cognition about cognitive phenomena"—that is, learners' understanding of their own cognition. According to Flavell (1987), because they provide possibilities for self-conscious learning, good schools should be "hotbeds of metacognitive development." In a similar vein, Paris and Winograd (1990) have maintained that teachers should directly foster this awareness by teaching their students effective problem-solving techniques and talking about the cognitive and

motivational aspects of thinking. They also contend that students' learning can be improved by becoming conscious of their own thinking as they read, write, and solve problems in the classroom. Gunstone and Northfield (1994), who obviously shared this opinion, went one step further and supported the idea that metacognitive teaching should play a key role in teacher preparation. In a similar vein, Borkowski and Muthukrishna (1992) have maintained that metacognitive theory holds great promise for supporting educators in their endeavours to create classroom settings that emphasize adaptable and innovative strategic learning.

## Metacognition components include

Metacognitive knowledge refers to awareness of one's own thinking processes. It includes understanding one's knowledge gaps, recognizing different learning strategies and knowing when to use them, and being aware of one's learning preferences, strengths, and weaknesses. Regulation of metacognition has three sub-components: planning, monitoring, and evaluating. Planning involves selecting appropriate strategies for a task or learning goal. Monitoring means keeping track of one's performance or level of understanding while working on a task. Evaluating involves reviewing and reflecting on how well one performed after completing the task.

Metacognition plays an important role in various fields. Learning outcomes improve when students are encouraged

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to use metacognitive strategies such as self-questioning, summarizing, and reflection. It also helps in identifying and changing ineffective strategies. By improving flexibility, self-awareness, and decision-making, metacognition contributes to better emotional intelligence.

For example, when preparing for an exam, identifying which topics you know well and which need more study represents metacognitive knowledge. Creating a study schedule and choosing effective techniques such as flashcards, note-taking, and summarizing reflects planning. Testing yourself to check your understanding involves monitoring. Finally, evaluating how well your study methods worked after the exam helps you improve your approach for the future.

### **Hypnotherapy**

The word "hypnosis" was first used by Braid in his work *Neurypnology* (1843). He reported successfully treating illnesses like paralysis, rheumatism, and aphasia and was primarily interested in the therapeutic potential of hypnosis. The Greek god of sleep, Hypnos, is the source of the word "hypnosis." Deep relaxation, enhanced suggestibility, and focused attention are all characteristics of hypnosis. The application of hypnosis for therapeutic ends is known as hypnotherapy. After assisting the client in achieving a hypnotic state, the hypnotherapist offers recommendations that support the subconscious mind in achieving the intended therapeutic outcomes.

According to the cold control hypothesis of hypnosis, hypnosis is a metacognitive process. Goethe, Chopin, Sergei Rachmanicoff, Nikola Tesla, Aldous Huxley, Albert Einstein, and Thomas Edison. What is the connection between these individuals? To test and push the limits of their intelligence, they all employed hypnosis. The ability to simultaneously connect the mind to the outer world and the inside is a natural condition of hypnosis. The term "trance" refers to this state of being aware of both the interior (experienced, "then and there") and the outside (sensory, "here and now"). The simplest way to describe trance is as "Inward Focus." The normal transition from wakefulness to sleep and vice versa also results in hypnosis.

The fourth state of consciousness is hypnosis. Being awake, sleeping, and dreaming are the three states of consciousness. One may consider hypnosis to be the fourth level of consciousness, combining the best aspects of the other three to produce an extremely potent experience. Hypnosis is frequently likened to the aforementioned. Meditation is traditionally described as a "goalless journey in a pathless land." Self-hypnosis is comparable to guided imagery, creative visualization, and goal-oriented meditations. Self-hypnosis is only one aspect of hypnosis. A hypnotic condition produced by someone else is known as hetero hypnosis. Self-hypnosis is a self-induced hypnotic condition.

### **Hypnotic state and sleep**

Sleep is a state in which you are not aware of your surroundings. In a state of hypnosis, you are cognizant of your surroundings and have the capacity to learn. The fact that we do not learn when we are asleep is another significant distinction. An overabundance of message units induces hypnosis by disrupting our critical thinking, or inhibitory process, which sets off our fight-or-flight response. This leads to a hyper suggestible condition, which grants access to the subconscious. "Anxiety Induction for Anxiety Reduction" is what this is. Changes brought on by the fight/flight response that take place during hypnosis induction: Breathing abnormalities a. dry lips and throat b. fast eye movements c. After entering hypnosis, the body relaxes, respiration shallows, and the flight mechanism takes over. A profound state of relaxation ensues as the parasympathetic nervous system takes over. An underload of message units during self-hypnosis, meditation, guided imagery, or creative visualization causes the inhibitory process to organize and the critical mind to relax, opening the subconscious mind. This is "reduction of anxiety." Similar to how the environment creates hypnosis, the hypnotist does the same. In order to induce hypnosis, the hypnotist induces a condition of anxiety.

### **Suggestibility**

Suggestibility is the way a person accepts and processes information (such as message units) or how they were spoken to from birth to adulthood is known as suggestibility.

Before 1967, hypnotists could induce hypnotic sleep using one of three fundamental methods. They were: 1. Eye-Catching 2. The Authoritarian Method 3. Gradual Relaxation Regrettably, the majority of hypnotists continue to use straightforward, literal advice in their language. Since straightforward, literal suggestions only work with one kind of person, this did not and still does not work with half of the population.

Dr. Kappas (1974) discovered that suggestibility can be divided into two categories. This clarified why half of the population was not responding well to the straightforward, literal recommendations.

#### *Emotional suggestibility*

A suggestible behaviour that is typically linked to hypnoidal depth and is characterized by a high degree of reactivity to inferred suggestions that alter emotions and restrict physical body reactions. As a result, the emotionally suggestible learns better through deduction than through explicit, literal recommendations.

#### *Physical suggestibility*

A suggestible behaviour that is restricted in emotional reactions and very susceptible to recommendations that influence the body; typically linked to cataleptic stages or more. Whereas an emotional suggestible is left-brain dominant, a physical suggestible is right-brain dominant.

### **Somnambulist**

A person who has 50/50 suggestibility—that is, 50% physical suggestibility and 50% emotional suggestibility—is considered a somnambulist. All suggestions, whether explicit or implied, will have an equal impact on this type's body and emotions.

**Suggestible intellectual** This personality type is highly analytical and typically highly suggestible. The intellectually suggestible is always attempting to analyze, disprove, or rationalize everything the hypnotist says because they dread being dominated by them. The "Auto-dual" approach, which will be covered later in the course, is the induction of choice for this kind of suggestibility.

**Our communication mode** The physical suggestible person speaks in metaphors and inferences yet learns literally and immediately. While speaking clearly and literally, the emotionally suggestible learns indirectly and inferentially. Would you tell me your name, for instance? "Yes," the Physical would reply. In response, the emotional person would give you their name.

We can learn suggestibility from birth until about age five, learning is first carried out by our mother, who serves as our primary caregiver. The child's suggestibility is also influenced by his instructors, peers, and other people between the ages of six and nine. The secondary caregiver, or father, starts to affect the child's suggestibility between the ages of nine and fourteen. There are three components to any interpersonal message: 1. Textual material. 2. Non-verbal (extraverbal) content 3. The receiver's mental condition.

The child learns direct, literal communication (i.e., physical) if the mother follows through on her words. The child receives contradictory messages if the mother does not follow through on her statements, and they start to search for the emotional meaning behind the words. The concept that the child's physical experiences are being rewarded is reinforced if the mother spansks them and then gives them hugs, kisses, and other affections. The converse happens and ego sensations are suppressed if the mother does not offer any reward. The physical suggestibles put their bodies on display and shield their feelings, especially rejection. To defend their physical bodies, the emotional suggestibles display protective emotions like dread, humiliation, and discomfort.

Three fundamental stages of hypnosis exist. Rapid eye movement (REM) is a hypnoidal trait. The lightest stage of hypnotic sleep is this one. Eye movements from side to side are a sign of cataleptic. It is the middle sleep stage. The eyes rolling up beneath the eyelids is a sign of somnambulism. The deepest phase of hypnotic slumber is this one. Three phases of somnambulism exist: About 20–40% of first-stage somnambulists have spontaneous amnesia, while about 60% of second-stage somnambulists do the same.

The deepest subject, a third stage somnambulist, will react to any kind of recommendation. This subject will show complete spontaneous amnesia, meaning he won't recall anything that happened during hypnosis. Building enough message units in the initial session is intended to move the subject to the first, second, or third stage of somnambulism. In order to achieve a complete conversion, it is crucial to peak the subject's suggestibility during this initial session. Later on, the individual will naturally return to their typical suggestible state. But if needed, the hypnotist can later cause somnambulism.

Include a post-hypnosis recommendation at every hypnotic stage. You can then return the subject to that state of hypnosis. Use terms that convey a lot of information, like "lifting," "rising," "higher," "jerking," etc.

A condition of increased concentration, calmness, and suggestibility, hypnosis allows access to the subconscious by reducing the activity of the conscious mind.

### **Essential Elements of Hypnotherapy**

Hypnotherapy begins with hypnosis induction, during which the hypnotherapist uses techniques such as progressive relaxation, guided imagery, or focused breathing to guide the client into a calm, trance-like state. This is followed by the therapeutic suggestion phase, where the therapist gives suggestions aligned with the client's goals, such as developing healthier habits, reducing anxiety, or changing negative thought patterns. After this, the therapist gradually brings the client out of hypnosis, helping them return to full awareness and discussing their experience to reinforce the therapeutic work. Finally, follow-up sessions are often conducted to strengthen the desired changes and build upon the client's progress.

Hypnotherapy is frequently used for mental health purposes, such as lowering stress, anxiety, and sadness, handling the symptoms of post-traumatic stress disorder (PTSD), resolving anxieties and phobias. It also helps in assisting people in quitting smoking, breaking bad behaviours or overeating, increasing self-esteem or confidence, taking care of persistent pain, managing IBS, or irritable bowel syndrome, encouraging improved sleep (insomnia), improving concentration and academic or athletic performance, getting ready to give birth (hypnobirthing, for example).

There is scientific support for hypnotherapy for a number of ailments, including IBS, stress reduction, and chronic pain treatment. The therapist's ability and the subject's receptivity to hypnosis determine its success.

### **Health and Well-Being**

A wide range of subjects pertaining to mental, social, and physical well-being are included in the concept of health and well-being. Here are some important factors to think about:

### **Physical health**

Consuming a varied, well-balanced diet promotes healthy bodily functions and helps prevent illness. Regular physical activity improves mood, builds muscle, and supports cardiovascular health. Adequate, good-quality sleep is essential for rest, memory, and overall vitality. Routine check-ups, immunizations, and screenings help maintain health and allow for early detection of problems.

### **Mental wellness**

Stress can be reduced through practices such as deep breathing, mindfulness, and meditation. It is important to build trusting relationships with others and seek help when needed. Getting professional support for mental health issues such as depression or anxiety can be life-changing.

### **Social well being**

Getting involved with friends, family, and the community creates a strong network of support. Making time for relationships and hobbies improves overall happiness.

Some lifestyle suggestions for general health include staying hydrated, cutting back on alcohol, stopping smoking, and staying away from narcotics. To increase happiness, focus on the good things in life. Last but not least, it is important to have a goal in life. Whether professional or personal, goals can offer fulfilment and direction.

### **Significance of the Research**

This study offers insight into a novel therapeutic method by being one of the first to examine the potential of hypnotherapy in enhancing mental health outcomes and metacognitive awareness. If successful, hypnotherapy could be a useful adjunct or substitute for conventional therapy, especially for people who want to better understand and control their mental processes in a less regimented and more intuitive way than Cognitive Behavioural Therapy.

### **Review of Literature**

Yerzhan et al (2025) in their systematic review and meta-analysis found that medical hypnosis was associated with reduced acute pain and decreased opioid use, highlighting its potential as a complementary approach to pain and stress reduction—relevant because both pain and stress are strongly linked with mental health outcomes.

Rosendahl et al.(2024), Over half of the outcomes across randomized trials showed at least medium effects, with various positive mental and physical outcomes (e.g., stress, anxiety, pain).

Ekanayake et al(2025) review reported that roughly two-thirds of well-designed studies showed positive impact of hypnotherapy on smoking cessation and related health outcomes.

### **Study Methodology**

Narrative reviews are carried out in order to give a summary of the existing literature, spot any gaps, and improve comprehension of a subject.

### **Enhancement of Metacognition By Hypnotherapy**

Enhancing metacognition, the awareness and control of one's own mental processes can be greatly aided by hypnotherapy as a therapeutic tool. This is how it helps:

#### *Improving Self-Awareness*

By promoting deep relaxation, hypnotherapy enables people to access the underlying ideas and convictions that shape their actions. Greater understanding of their emotional and cognitive patterns is facilitated by this increased awareness, which is essential for metacognition.

#### *Enhancing Reflection and Thought Regulation*

People can learn to observe their ideas objectively while in hypnosis, which helps them control negative thought patterns and sharpen their problem-solving skills. Metacognitive monitoring is improved by this introspective ability.

#### *Dispelling Limiting ideas*

Limiting ideas about one's skills are the root cause of many metacognitive difficulties. Through the identification and reframing of these subconscious beliefs, hypnotherapy can assist people in developing a growth mindset and more accurately assessing their own learning and decision-making processes.

#### *Improving Focus and Cognitive Flexibility*

Hypnosis typically involves guided visuals or concentration exercises. These exercises improve cognitive flexibility and attentional control, two qualities necessary for successful metacognitive techniques.

#### *Reducing Anxiety and Emotional Blocks*

Metacognitive processes can be hampered by emotional states such as anxiety. By lowering tension and emotional resistance, hypnotherapy fosters a mental atmosphere that promotes improved self-control and clearer thinking.

#### *Promoting Experiential Learning Through hypnotherapy*

People can practice reactions to scenarios or replicate experiences in a safe mental environment. Better planning, assessment, and adjustment—all essential components of metacognition—are encouraged by this "mental rehearsal."

### **Evidence and Research**

Although research on hypnotherapy's effects on metacognition is still in its early stages, studies indicate that hypnosis improves emotional control, cognitive restructuring, and mindfulness. Better metacognitive abilities are indirectly supported by these advantages.

In domains where metacognition is essential for success, such as education, therapy, and personal growth, hypnotherapy may be a useful adjunctive method if used methodically.



## Metacognition Improves Health And Wellbeing

By enhancing mental, emotional, and behavioural management, metacognitive awareness—the capacity to examine and control one's own thought processes—can greatly improve health and well-being. Here's how:

### *Better control of emotions*

- *Trigger awareness*

Metacognition enables people to identify emotional triggers and comprehend how their thoughts affect their emotions. This realization enables more flexible reactions to pressure or difficulties.

- *Less rumination*

By examining one's own thought processes, one might break the cycle of worry or pessimism, reducing the likelihood of developing anxiety and depression.

### *Better Handling of Stress*

- *Improved coping strategies*

By keeping an eye on and modifying thought patterns, people can swap out stressful behaviors for healthy ones, such changing the way they see things.

- *Mindfulness integration*

Metacognitive awareness promotes mindfulness, which enhances general health by lowering physiological stress reactions like elevated cortisol levels.

### *More Effective Decision-Making*

- *Health decisions*

As people become more conscious of how lifestyle choices affect their well-being, they may make wiser choices regarding their nutrition, exercise, and sleep patterns.

- *Preventing impulsive actions*

By controlling impulsive actions, metacognitive awareness can help avoid bad habits like binge eating or drug abuse.

### *Increased Sturdiness*

- *Cognitive flexibility*

People can react to setbacks with more adaptability and optimism if they recognize and modify harmful thought habits.

Metacognitive awareness facilitates adaptive problem-solving, which helps people deal with life's obstacles more skilfully.

- *Better interactions with others*

Empathy Development: Thinking back on one's ideas helps one become more understanding and empathetic toward others, which strengthens bonds and emotional support networks.

- *Conflict Resolution*

Healthy communication and less confrontations might result from being aware of one's own prejudices or misunderstandings.

### *Preventing chronic disease*

- *Behavioural change*

Understanding the connection between ideas and behaviours encourages routine exercise, quitting smoking, and following medical advice.

- *Stress reduction*

Metacognition lowers the risk of stress-related conditions like diabetes, cardiovascular disease, and hypertension by reducing the mental impacts of stress.

### *Encouraging a Growth Mentality*

- *Continuous improvement*

People who are metacognitive acknowledge their potential for growth and development, which motivates them to consistently work on their own growth and self-care.

- *Decreased dread of failure*

This way of thinking lessens the dread that causes people to shy away from health-related obstacles like attempting new exercise regimens or food adjustments.

## **Real-World Uses**

### *Journaling*

Assists in recognizing and combating harmful mental habits.

### *Mindfulness training*

Promotes present-moment awareness, which improves metacognitive abilities.

### *Cognitive behavioural techniques*

Facilitates the formation of more robust thought-action connections.

Metacognitive awareness helps people make better decisions, successfully manage stress, and maintain emotional equilibrium, all of which improve quality of life. It does this by encouraging self-reflection and adaptive thinking.

## **Conclusion**

Hypnotherapy, a therapeutic approach that leverages hypnosis, has shown significant potential in enhancing metacognition—our ability to understand, monitor, and regulate our cognitive processes. By improving metacognition, hypnotherapy can contribute to better health and well-being.

### **Limitations**

- Hypnotherapy cannot be done with all, like people suffering from Bipolar, and depression are not suitable

persons. As hypnotherapy works on one's subconscious level, therefore it might trigger their symptoms.

- People who are highly sceptical or resistant to hypnosis are less likely to benefit.
- Individuals with significant cognitive impairment (eg, dementia, intellectual disabilities) may struggle to follow the process, limiting its effectiveness.

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