

SCIENCE AND THE HOFFMAN PROCESS: REVIEWING EXISTING RESEARCH



The Hoffman Process (HP) is a unique intensive psycho-emotional education program, in which 90,000 people have participated worldwide over the past 40+ years. The Hoffman Process is currently running in 11 countries. A review of existing research from 1985 to 2013 shows that participating in the one-week program has a positive and lasting effect on overall psychological adjustment, in particular, reducing negative affect while improving positive affect, health and wellbeing. The relationship with oneself and with family members has also been found to benefit from HP, along with professional performance and emotional competence in the work environment. The Process is in line with recent and mainstream scientific disciplines and its techniques concur with various evidence-based methods in a structured and practice-oriented manner. Several renowned scientists have provided testimonials on their own experience and appraisals of the HP.

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by Maria Camara, MSc, PhD

Review of the existing research (1985-2013) and remarkable testimonials

A review of the studies that have been done about the Hoffman Process will be described by focusing on the different areas in which HP has been revealed significant: global psychological adjustment, relationship with the inner-self, relationships with family, and professional performance. Moreover, several renowned scientists and experts, from different backgrounds, have given their views about the HP. The testimonials are of great value for two reasons: the experts' high qualification in their specific field of action and their experience of having directly participated in the program.

1. Global Psychological Adjustment and Well-Being

Global psychological adjustment

Improvements in global psychological adjustment (e.g. self-acceptance, anxiety, depression, trust, etc.) and coping strategies used to deal with distress are supported by the Caldwell Study (Caldwell & Hileman, 1985) that measured 11 dimensions of mental health in 58 participants, before and 13 weeks after the HP.

Reducing negative affect, increasing positive affect, health and well-being. Outstanding effects of forgiveness and spirituality on depression

The HP not only produces significant lasting reductions in negative affect (i.e. depression, anxiety, hostility, interpersonal oversensitivity, and obsessive-compulsive symptoms) but also engenders significant lasting increases in positive affect (i.e. emotional intelligence, spirituality, forgiveness and empathy) along with increases in physical energy and vitality. These changes were demonstrated in the University of California's Study (Levenson et al., 2006). This rigorous study with a one-year follow-up showed that most of these gains were sustained over the time in comparison with the control group. Depression practically disappeared a week after the HP and remained low after a year, with only a 17% relapse rate, while, for example, CBT has shown a relapse rate of 30.8% and antidepressant medication of 76.2% after one year (Hollon et al., 2005). The outstanding effects on depression were mediated by increases in forgiveness and spirituality.

As Lee Lipsenthal, M.D., ABHM¹, has acknowledged:

“To understand your intellect, your emotional capacity, your physical self, a whole person is connected with their Spiritual Center, which they access through the work of the Process. From that place -the Spiritual Center-, there’s not much room for depression.”

This fact points out one of the idiosyncratic features of the HP since the program directly targets those positive constructs. Of course, previous research has found that spirituality is associated with better mental and physical health (Rippentrop, 2005) and forgiveness reduces health-related risk and promotes health resilience (Worthington & Scherer, 2004). And the known author Dr. Joan Borysenko² confirmed that:

“The Hoffman Process is the finest and most complete expression of what healing and spirituality are all about.”

More life satisfaction and less depression, somatization and compulsiveness, compared to 1-year of therapy. Long lasting effects

A German study recently investigated not only the course of depressive mood states but also the course of depressive disorders in HP participants within three months after intervention. 94% of the participants diagnosed with a depressive disorder before the HP did not fulfill the criteria three months later (Grossmann, 2010). The same study aimed at the comparison of the HP and individual Schema Therapy (Young, 1999) focusing on mental and emotional structures acquired during childhood. 28 participants of the HP reported significantly more life satisfaction and less depression, somatization and compulsiveness three month after intervention than did 40 patients after at least one year of therapy. The results of this comparison study support the effectiveness of the intensive and well-structured format of the HP as one-week residential course.

Furthermore, HP shows to produce long lasting and ongoing effects like Prof. Michael Ray³ has declared:

“I did the Process over a quarter century ago and I still am benefiting from that experience. Any accomplishments that someone might list after my name came largely because of this experience.”

¹ Lee Lipsenthal, M.D., ABHM, Past president of the American Board of Holistic Medicine and the founder and director of Finding Balance in a Medical Life program.

² Dr. Joan Borysenko, Co-founder of Mind-Body Clinic at Harvard University.

³ Prof. Michael Ray, Professor (Emeritus) of Creativity, Innovation & Marketing at Stanford University Graduate School of Business

The author Oliver James⁴ describes it in the following way:

"This unique course has a hugely impressive record for helping individuals achieve lasting emotional growth. Nothing else comes close."

2. Relationship with the Inner Self

Greater self-awareness and self-esteem

A recent survey (Page, 2012) of individuals who had done the HP across 11 countries worldwide with a final sample of 2497 respondents is worth mentioning. Results showed that 90% of the participants found a greater level of self-awareness and 81% greater self-esteem after doing the HP, qualities that are usually acquired within the context of long-term therapy processes and are considered as common factors of success in any kind of intervention.

Increased self-worth and self-confidence

The HP stands out for producing rapid therapeutic benefits in regard to self-esteem related variables. A comparative study (Windhausen, 1997) between the HP and a three-month group therapy, at the Fliedner Hospital (Düsseldorf, Germany) on a sample of 78 participants, showed higher ratings for the HP in some of the measured variables related to the self (i.e. self-worth, self-confidence, sensitivity and mood), while it had similar results on the others variables.

3. Relationships with Family Members

Greater compassion towards parents

Interpersonal relationships have shown to be positively affected by doing the HP. Compassion for parents is a dimension that is directly targeted by the HP. As the Graduates Survey (Page, 2012) showed, 89% of the participants found increased compassion for their parents. Relationship with parents "dramatically improved" according to Windhausen's study (1997). In the words of the known author, Dr. Claudio Naranjo⁵:

"Hoffman is the best method I know for the realignment of relationships with parents and parent surrogates."

⁴ Oliver James, Best known clinical psychologist in Britain, bestselling author (e.g. Affluenza).

⁵ Dr. Claudio Naranjo, renowned psychiatrist and author who is considered a pioneer in integrating psychotherapy and the spiritual tradition.

Better relationships with partners and children

Another outcome of the HP is improvement in relationships with other family members such as partners (92%) and children (90%) according to Candate's study (1991).

4. Professional Performance

Increased sense of empathy with patients

At the level of professional healthcare, interesting results can also be drawn from a survey of 129 health care professionals (Hoffman Institute Foundation, 2005). 77% of clinicians experienced more open communication with their patients, 78% felt more connected and present with them. In other words, clinicians were more empathic with their patients after having done the HP.

Improved emotional competence at Harvard University

For five years the Hoffman Process was offered at the Center for Public Leadership at Harvard. Preliminary results from a small study suggest benefits for the business world as well, specifically related to improvements in emotional competence and authentic leadership qualities. In 2008, 35 participants completed emotional competency and effective leadership measures before the program, two weeks after the program, and 3 months post-process. At the two-week point, students showed significant improvements in all 52 domains of emotional competence relating to leadership. Three months later, not only were gains in all 52 domains, but 17 of them demonstrated continued improvement (Gill, 2008).

The leadership consultant and author, Anni Townend⁶ had asserted:

"The benefits of the Hoffman Process for people and for business are huge. I recommend it wholeheartedly as a personal and professional journey to all HR Professionals looking for a course that will make a long lasting difference to their people and to their business success."

⁶ Anni Townend is a leadership consultant, coach, facilitator and author, working with leaders in organizations.

Current Scientific Theories in line with the Hoffman Process

The HP is consistent with recent and mainstream scientific disciplines and evidence-based therapies and it is organized in a structured, protocol driven format. Some of the HP core assumptions will be described here along with corresponding scientific evidence.

Childhood as the core

The basic assumption of the HP is that childhood experiences with parents shape our self-image, attitudes, moods and behaviors. Mainstream classical psychological theories (i.e. the Psychodynamic Approach; the Developmental Approach, Piaget, 1928; the Attachment Theory, Bowlby, 1969) as well as more recent ones (i.e. the Schema Therapy, Young, 1999; Brain developmental theories, i.e. Byrnes, 2001; Trauma theories, i.e. EMDR, Shapiro, 1989, etc.) have consistently demonstrated an existing relationship between childhood experiences and adjustment in adulthood. For example, a major American epidemiological study found a relationship between adverse childhood experiences and adulthood physical and mental health (The ACE Study, Felitti et al., 1998).

In coherence with these theories, much of the work in the HP aims at examining the core influence of childhood experiences on adult life and resolving repressed childhood pain, anger, shame, and resentment, and working towards increased forgiveness and compassion for self and other. The trauma psychologist, Dr. Shawn Katz⁷, has described it in the following way:

“HP addresses internalized negative beliefs and self-concepts formed in childhood which lay at the foundation of one’s destructive and self-sabotaging behavioural patterns in the present. This increased awareness of patterns enables a person to make better choices for their future.”

Working with the different aspects of the self. An experiential program

The HP follows an integrative model that progressively and skillfully works with four aspects of self: emotional, cognitive, physical, and spiritual, and their interactions. For example, inducing dialogue among the different aspects of self, results in a more integrated self. Similar procedures can be found in humanistic approaches such as Rogers’ Person Centered Therapy (1951) and Gestalt Therapy (Perls, 1951). The Hoffman program is highly experiential in nature so that functional patterns, visions, and behaviors are explored at all different levels, i.e., somatic, emotional, and cognitive. It is widely recognized by brain science that new neurological pathways will only be “recorded” if multiple aspects of the self are involved (Graham, 2013).

⁷ Dr. Shawn Katz, counseling psychologist, trauma psychotherapist, and consultant to the NHS.

As Dr. Bruce H. Price⁸ has said:

“Clearly the Hoffman Process works through neurobiology. The extraordinary thing we have found [about the brain] is the concept we call “plasticity,” that the connections and functions of the brain at all its levels of organization respond to social forces. The Hoffman Process most likely fundamentally alters brain function.”

The family as an interacting system

Taking a systemic paradigm, the individual has to be approached as an active participant of dynamic and interacting systems, at macro and micro levels, rather than from an isolated perspective. In particular, Systemic Family Therapies (e.g. Haley, Minuchin, Nardone, Watzlawick, etc.) focus on the functioning of the family system as a whole; and the individual is understood in the context of the family system. The HP's main target is to help participants understand the internalized family system with their specific roles they had to adopt in their family in order to support the family system's homeostasis.

The ‘Negative Love Syndrome’ as an explaining model

Hoffman's concept of the ‘Negative Love Syndrome’ - the adoption of the negative behaviors, moods and attitudes and roles from parents to secure their love and attention - adds an explanation on how the personality and character patterns have been formed and compulsively acted out in an ongoing attempt to be loved. Its conceptual framework has common factors with the Psychodynamic theory of personality, particularly ‘self –psychological’ and kohutian perspectives.

Existential Perspective of the Hoffman Process

Irvin Yalom sees the awareness of an individual's own mortality, if properly confronted, as a way to *“alter one's life perspective and promote a truly authentic immersion in life”* (Yalom, 1980, p.187) as well as diminish anxiety as *“the fear of death constitutes a primary source of anxiety”* (Yalom, 1980, p. 188). The HP contextualizes ‘death’ within a transpersonal framework that helps participants alleviate death anxiety and uses the recognition of mortality as a motivating force to initiate positive behavioral change.

Emotional regulation and expression; behavioral change strategies

An important outcome of participating in the HP is an improvement in emotional literacy and emotional intelligence. In other words, individuals will learn to have deeper insight and perception of their emotions, as well as how to better regulate them. That is, of course, a common factor

⁸ Dr. Bruce H. Price, Chief at the Department of Neurology in McLean Hospital at Harvard University.

in any personal development work. This program not only works with increasing self-awareness, but also with transforming disruptive behaviors into functional ones. The methodology employed is basically the kind of relaxation and visualization techniques that have been successfully used in hypnosis, biofeedback, meditation, and other neuroscience and psychotherapeutic disciplines.

Enhancing the positive: The power of forgiveness, compassion, and spirituality

A relative recent approach to psychology comes from Positive Psychology where, rather than focusing on negative affect and illness, the aim is to enhance the resources of the person and the positive affect. Humanistic approaches (e.g. Maslow, 1943), among others, had already emphasized that focusing on the person's potential has, in itself, therapeutic effects. Similarly, HP highly promotes positive affect by working on forgiveness, acceptance, compassion, love and appreciation for oneself and others. The therapeutic power of "acceptance" has been shown in Mindfulness-based therapeutic approaches (such as the Acceptance and Commitment Therapy, Hayes et al., 1999), which, contrary to other models, does not focus on changing what is dysfunctional but on accepting it. Spirituality is also key in explaining the potential HP has to make people rely on their inner self and to enhance trust and self-confidence. In the words of Dr. Ken Blanchard⁹:

"The Hoffman Process brings forth spiritual leadership in a person."

The discipline of Transpersonal Psychology has also addressed the spiritual or transpersonal aspect of the self as core in the process of self-actualization.

⁹ Dr. Ken Blanchard, Chairman at "Blanchard Training and Development Company" and bestselling author of "One Minute Manager" series.

Final conclusions

- The Hoffman Process has a highly beneficial effect on overall adjustment: reducing negative affect, enhancing positive affect, and improving health and wellbeing.
- Depression levels drastically decrease through working on forgiveness and spirituality as presented in the HP.
- Relationship with the inner-self and with others improves after the HP.
- Emotional intelligence relating to leadership, and empathic responses are more present in the work environment after participating at a HP.
- The HP is in line with existing scientific models and its evidence-based practices.
- To strengthen the promising findings about the HP, future studies should explore quality of life benefits for larger populations, as well as specific clinical effects, such as trauma reduction and stress prevention with rigorous randomized control and longitudinal designs.

Article written by Maria Camara Serrano, MSc, PhD

Dr. Camara has an MSc in Health Psychology and a PhD in Psychology and Family. Her research career, at the University of Deusto, Spain, has mostly focused on studies related to early childhood experiences and their effects on distress, coping strategies and social support, families and resilience, etc. with several publications and participation in scientific conferences as a result. She also works as clinical practitioner following various therapy approaches, such as Gestalt Therapy, Schema Therapy, Positive Psychology, and Mindfulness-based programs. She started to work as a Hoffman Process teacher in 2005. She is also currently co-director of the Spanish Hoffman Institute, and co-director of the Hoffman International Institute.

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References

- Byrnes, (2001). *Mind, brain, and learning*. New York : Guilford Press.
- Caldwell, A.B. & Hileman, C.S. (1985). *The Caldwell Report*. Downloaded from <http://www.hoffman-international.com/caldwell-report.htm>
- Candate, A. (1991). *The Candate Report*. Downloaded from <http://www.hoffman-international.com/candate-report.htm>
- Felitti, M. D., Vincent, J., Anda, M. D., Robert, F., Nordenberg, M. D., Williamson, M. S., ... & James, S. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults: the Adverse Childhood Experiences (ACE) Study. *American journal of preventive medicine*, 14(4), 245-258.
- Gill, A. (2008). Improved Emotional Competence and Leadership among Harvard Student Leaders. Downloaded from <http://hoffman-international.com/emotional-competence-and-leadership.htm>
- Graham, M. F. T. (2013). *Bouncing Back: Rewiring Your Brain for Maximum Resilience and Well-being*. New World Library.
- Grossman, I. (2010). *Is schema therapy also effective in 50 hours therapy within 8 days, called Hoffman-Quadrinity-Process (HQP or HP) also and in comparison to behavioral therapy?*. Unveröffentlichte Diplomarbeit, Humboldt-Universität zu Berlin.
- Hayes, S. C., Strosahl, K. D., & Wilson, K. G. (1999). *Acceptance and commitment therapy: An experiential approach to behavior change*. Guilford Press.
- Hoffman Institute Foundation (2005). *The Health Care Professionals Survey*. Downloaded from <http://hoffman-international.com/health-care-professionals-survey.htm>
- Hollon, S. D., DeRubeis, R. J., Shelton, R. C., Amsterdam, J. D., Salomon, R. M., O'Reardon, J. P., & Gallop, R. (2005). Prevention of relapse following cognitive therapy vs medications in moderate to severe depression. *Archives of general psychiatry*, 62(4), 417.
- Levenson, M.R., Aldwin, C. M., & Yancura, L. (2006). Positive emotional change: mediating effects of forgiveness and spirituality. *Explore*, 2 (6).
- Lanius, R. A., Vermetten, E., & Pain, C. (Eds.). (2010). *The impact of early life trauma on health and disease: The hidden epidemic*. Cambridge University Press.
- Maslow, A. H. (1943). A theory of human motivation. *Psychological review*, 50(4), 370.
- Page (2012). *The Graduates Survey*. Downloaded from <http://hoffman-international.com/the-graduates-survey.htm>.
- Perls, F., Hefferline, G., & Goodman, P. (1951). *Gestalt therapy*. New York.
- Rippentrop, A. E. (2005). A Review of the Role of Religion and Spirituality in Chronic Pain Populations. *Rehabilitation Psychology*, 50(3), 278.
- Rogers, Carl (1951). *Client-Centered Therapy*. Cambridge Massachusetts: The Riverside Press.
- Shapiro, F. (1989). Efficacy of the eye movement desensitization procedure in the treatment of traumatic memories. *Journal of traumatic stress*, 2(2), 199-223.
- Windhausen, C. (1997). *Transformed Self-Images*. Downloaded from <http://www.hoffman-international.com/windhau-sen-study.htm>
- Worthington, E. L. & Scherer, M. (2004). Forgiveness is an emotion-focused coping strategy that can reduce health risks and promote health resilience: Theory, review, and hypotheses. *Psychology & Health*, 19(3), 385-405
- Yalom, I. D. (1980). *Existential psychotherapy*. Basic Books.