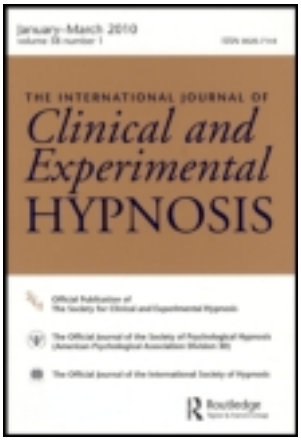

International Journal of Clinical and Experimental Hypnosis
Publication details, including instructions for authors and subscription information:
http://www.tandfonline.com/loi/nhyp20

Portuguese Norms for the Harvard Group Scale of Hypnotic Susceptibility, Form A

Cláudia Carvalho [a]
[a] Higher Institute of Applied Psychology, Lisbon, Portugal
Published online: 21 Feb 2013.

To cite this article: Cláudia Carvalho (2013) Portuguese Norms for the Harvard Group Scale of Hypnotic Susceptibility, Form A, International Journal of Clinical and Experimental Hypnosis, 61:2, 219-231, DOI: 10.1080/00207144.2013.753833

To link to this article: http://dx.doi.org/10.1080/00207144.2013.753833

Intl. Journal of Clinical and Experimental Hypnosis, 61(2): 219–231, 2013

ISSN: 0020-7144 print / 1744-5183 online
DOI: 10.1080/00207144.2013.753833

Routledge
Taylor & Francis Group

PORTUGUESE NORMS FOR THE HARVARD GROUP SCALE OF HYPNOTIC SUSCEPTIBILITY, FORM A[1]

Cláudia Carvalho[2]

Higher Institute of Applied Psychology, Lisbon, Portugal

Abstract: The Portuguese version of the Harvard Group Scale of Hypnotic Susceptibility, Form A (HGSHS:A) was administered to 313 Portuguese college students. Score distribution, item pass rates, item analysis, and reliability of the HGSHS:A are presented and compared to earlier published reference samples. No differences were found between males and females. Reliability of the HGSHS:A Portuguese version was lower than that reported by most of the studies but within the range of the non-English versions. In general, Portuguese data are congruent with the reference samples and the Portuguese translation of the HGSHS:A. It appears to be a viable instrument for primary screening of hypnotic suggestibility in a Portuguese context.

Assessment of individual differences in response to hypnosis is a common and important procedure in hypnosis research. Barnier and McConkey (2004) summarized the empirical and clinical articles published in the *International Journal of Clinical and Experimental Hypnosis* between 1992 and 2003 and noted that 88% of the published articles reported formal assessment of hypnotic responsiveness. In 46% of the published papers, the Harvard Group Scale of Hypnotic Susceptibility: Form A (HGSHS:A; Shor & Orne, 1962) was the measure of choice. The HGSHS:A is a group adaptation of the Stanford Hypnotic Susceptibility Scale, Forms A and B (SHSS:A&B; Weitzenhoffer & Hilgard, 1959). This was the first standardized scale to assess hypnotizability, which is no longer in use, and was later replaced by the Stanford Hypnotic

Manuscript submitted September 28, 2011; final revision accepted December 7, 2011.

[1]The author wishes to thank ISPA–Instituto Universitário's graduate students Rita Pontes and Ricardo Simplício for their assistance with the translation and recording of the Portuguese version of the HGSHS:A. Thanks also to graduate students Soeli Santos, Margarida Guimarães, Hugo Guerra, and Vanda Robalo for their assistance in data collection.

[2]Address correspondence to Cláudia Carvalho, ISPA–Instituto Universitário UIPES–Unidade de Investigação em Psicologia e Saúde, Rua Jardim do Tabaco, 34, 1149-041 Lisboa - Portugal. E-mail: claudia.carvalho@ispa.pt

Susceptibility Scale, Form C (SHSS:C; Weitzenhoffer & Hilgard, 1962). The SHSS:C is considered the gold standard (Perry, Nadon, & Button, 1992) and is also widely preferred by researchers (Barnier & McConkey, 2004). The HGSHS:A presents some advantages to researchers, however. It is less resource intensive and less demanding to participants than the SHSS:C, is relatively simple to administer and allows for efficient testing of large groups of subjects. Therefore, the HGSHS:A is particularly useful when there is a need for screening large samples of participants of varying levels of hypnotic suggestibility.

The HGSHS:A consists of a standardized test that includes an initial explanation about hypnosis, followed by an induction and 12 relatively easy and simple suggestions that can be presented either orally or via audiotape.

Participants are required to self-assess and report their experience in a booklet with standard questions, which are later scored by the experimenters. The HGSHS:A has also become the most commonly used instrument internationally (Benham, Smith, & Nash, 2002), making cross-cultural comparisons possible. Normative data have been collected in the United States (Shor & Orne, 1963) and in 12 other countries without substantial change in its psychometric properties (Australia: McConkey, Barnier, Maccallum, & Bishop, 1996; Sheehan, & McConkey, 1979; Canada: Laurence, & Perry, 1982; Denmark: Zachariae, Sommerlund, & Molay, 1996; Finland: Kallio & Ihamuotila, 1999; Germany: Bongartz, 1985; Israel: Lichtenberg, 2008; Italy: De Pascalis, Russo, & Marucci, 2000; Korea: Pyun & Kim, 2009; Romania: David, Montgomery, & Holdevici, 2003; Spain: Lamas, del Valle-Inclan, Blanco, & Diaz, 1989; Sweden: Bergman, Trenter, & Kallio, 2003; and Poland: Siuta, 2010).

This article presents data on the Portuguese translation of the HGSHS:A and compares it with data reported by the 13 reference samples.

Method

Participants

The HGSHS:A was administered to a total of 333 college students. Twenty did not complete the self-assessment and were not included in the analysis. Analyses were performed on the remaining 313 college students, of which 21% were males and 79% were females, ranging in age from 18 to 59 years ($M = 24.74$, $SD = 7.40$). One participant did not report age, and 81% of the sample was under 26 years of age. Fifty-three percent of participants were psychology graduate students, and 38% were psychology undergraduate students at ISPA–Instituto Universitário in Lisbon, Portugal. The remaining 7% of participants were undergraduate students enrolled in courses of arts ($n = 9$),

engineering ($n = 4$), law ($n = 4$), marketing ($n = 2$), communication ($n = 2$), and veterinary ($n = 1$) (6 participants failed to provide information about their courses). Forty-six percent of the sample is from the Lisbon area, and 54% are natives from other Portuguese areas. Two hundred and eighty-two participants (90% of the sample) did not have previous experience with hypnosis (3 failed to provide this information). Participation was voluntary, and students registered in advance at the university laboratory or simply showed up at a previously advertised session in order to be part of the experiment. Participants did not receive any compensation, monetary or other, for participating in the study. Participants were tested in the years 2009–2010, in groups that varied between 3 and 87 people, in a total of 30 sessions.

Materials

The HGSHS:A was translated into Portuguese by the present author and two graduate students in clinical psychology, all fluent in both English and Portuguese. To check the quality of the translation, a native English speaker fluent in Portuguese translated the scale back into English, and the new English translation was consistent with the original English protocol. The Portuguese translation of the hypnotic induction and 12 suggestions was then recorded using digital voice recording in an MP3 format.

Procedure

The HGSHS:A administration followed exactly the instructions of the original version (Shor & Orne, 1962). Participants received a translated response booklet, provided basic demographic information (sex, age) and signed the informed consent. The experimenter presented a brief introduction closely following Shor and Orne's protocol, describing the experimental procedure (i.e., that there would be a relaxation-based hypnotic induction followed by suggestions and a response questionnaire). The prerecorded Portuguese version of the HGSHS:A was then presented by three different teams of two experimenters each. One team with the first author and a trained graduate student (Team 1) and two teams of two graduate students trained in the procedure (Teams 2 and 3). At the end of the recording, participants completed and returned the booklets. All sessions took place in normal classrooms with normal light, equipped with computer and integrated sound system (used to play the prerecorded script). At the end of each session, participants were given the opportunity to briefly discuss their experience and were asked to avoid discussing the procedure with their colleagues.

Scoring

Each item of the HGSHS:A was assigned one point if the suggestion was carried out, as described by Shor and Orne (1962). The amnesia

item (Item 12) was scored in two different ways. Following standard scoring procedure of the HGSHS:A, one point was assigned if the participant recalled three or less of the items induced within hypnosis before the signal to remember was given; following a reversibility criterion (Kihlstrom & Register,1984), one point was assigned if the participant recalled three or less items before the signal to remember was given and recalled two or more items after the amnesia was lifted.

All booklets were rated independently by two experimenters with a correlation between the two raters of .98 ($p < .001$). For protocols rated differently, the final score was decided by consensus between the two raters.

Results

Mean Total Scores and Sample Distribution

To test for potential differences between sample scores resulting from the three different teams of experimenters, an analysis of variance (ANOVA) one-way was performed. The Team 1 ($n = 136$) mean was 7.09 ($SD = 2.32$), the Team 2 ($n = 83$) mean was 6.37 ($SD = 2.80$), and the Team 3 ($n = 91$) mean was 6.48 ($SD = 2.48$). No significant effect of experimenter's team on total HGSHS:A score was found, $F(2, 311) = 2.755$, $p = .065$. We also tested for potential differences between gender, and no significant differences between males and females were found, $t(311) = –1.275$, $p = .203$ (males: $M = 6.38$, $SD = 2.78$; females: $M = 6.82$, $SD = 2.43$). All analyses were therefore conducted in the entire sample of 313 participants. Score distribution of the Portuguese sample on the total score of HGSHS:A is presented in Table 1.

Participants fell into three categories of suggestibility: 47 participants were high (scoring 10 to 12, 15%), 203 medium (scoring 5 to 9, 65%), and 63 were low (scoring 0 to 4, 20%) (Kirsch, Council, & Wickless's, 1990 criterion). The mean score of the Portuguese participants was 6.73 ($SD = 2.51$), which represents a median when compared to the reference samples. The Portuguese mean score was below the mean score of the Swedish, Korean, Spanish, Finish, American, and Danish samples (mean scores between 6.77 and 7.64) and above the Canadian, Australian, Israeli, Romanian, Polish, Italian, and German samples (mean scores between 5.38 and 6.51). Mean scores, standard deviation, and percentage passage per item for the Portuguese and the 13 reference samples are presented in Table 2.

Item Difficulty

The highest pass rates in the Portuguese sample were on Item 5, finger lock (75%), Item 12, amnesia (72%), Item 3, hand lowering (68%),

Table 1
HGSHS:A Score Distribution in the Portuguese Sample

Raw score	No of cases	% of Cases	Cumulative Percent
0	3	1.0	1.0
1	6	1.9	2.9
2	10	3.2	6.1
3	15	4.8	10.9
4	29	9.3	20.1
5	37	11.8	31.9
6	33	10.5	42.5
7	47	15.0	57.5
8	46	14.7	72.2
9	40	12.8	85.0
10	39	12.5	97.4
11	7	2.2	99.7
12	1	0.3	100
High (10–12)	47	15	15
Medium (5–9)	203	65	80
Low (0–4)	63	20	100

and Item 7, hand moving (67%). Percentage passing for finger lock was generally higher than most of the reference samples but comparable to the Danish (76%) and the Swedish (74%) samples. Amnesia's passing rate was quite superior to those of 12 other samples, although similar to the result reported by the Danish sample (71%). When the amnesia item was scored using the reversibility criterion (Kihlstrom & Register, 1984), the pass percent was considerable lower, decreasing from 72% to 29%, a result closer to other samples' reports. Participants who passed the amnesia item using the standard HGSHS:A criterion ($n = 135$) had a mean total score of 6.73. Participants who passed the reversibility criterion ($n = 89$) had a mean total score of 7.54, results that are similar to the findings reported by the Swedish sample, which also computed Item 12 with both scoring methods.

The lowest pass rate in Portuguese participants was found on Item 9, hallucination (12%). Although considerable lower than the percentage found in most of the samples, similar results were reported by the Polish (12%), Swedish (14%), and Israeli (15%) samples. Passage rates for all remaining items fell within the range of the reported reference samples.

Reliability

The point-biserial item-total correlations (correlation of each item with the total score minus the contribution of that item) for the Portuguese and the 13 reference samples are presented in Table 3. The

Table 2
Means, Standard Deviations (SD) *and Item Pass Rates (in Percent) for Portuguese and Reference Samples*

Country	PRT	USA	AUS	CAN	GER	SPA	DAN	FIN	ITA	ROM	SWE	ISR	KOR	POL
N	313	132	1944	535	374	220	376	285	376	340	291	253	271	1174
HGSHS:A Item:														
1. Head falling	58	86	61	65	73	73	86	84	70	68	70	48	73	54
2. Eye Closure	60	74	57	63	73	64	48	86	62	60	76	78	64	66
3. Hand Lowering	68	89	71	66	83	60	75	89	56	59	66	75	60	78
4. Arm Immobilization	57	48	36	47	52	58	72	43	55	56	61	37	64	48
5. Finger Lock	75	67	53	50	57	67	76	66	60	58	74	50	71	59
6. Arm Rigidity	65	57	41	47	52	69	75	53	63	59	65	51	72	58
7. Hand Moving	67	86	71	64	74	79	78	78	64	61	64	76	78	71
8. Communication Inhibition	51	50	42	43	49	74	73	56	48	52	56	51	54	61
9. Hallucination	12	56	25	36	47	29	38	28	28	34	14	15	19	12
10. Eye catalepsy	46	56	38	36	47	59	61	52	40	52	51	37	72	46
11. Posthypnotic Suggestion	44	36	17	15	31	29	11	37	35	35	15	30	14	55
12. Amnesia	72	48	33	19	36	52	71	53	56	30	65	13	54	16
Mean Percentage per item	56.3	61.3	45.0	44.8	56.1	59.4	63.6	60.4	53.1	52.1	56.4	46.8	57.9	52.1
Sample Mean	6.73	7.39	5.45	5.38	6.51	7.13	7.64	7.26	6.41	6.24	6.77	5.61	6.95	6.25
Sample *SD*	2.51	3.04	2.95	3.28	2.43	2.61	2.50	2.61	2.80	2.68	2.50	2.59	2.25	2.69

Note. PRT = Portuguese; AUS = Australian; CAN = Canadian; GER = German; SPA = Spanish; DAN = Danish; FIN = Finnish; ITA = Italian; ROM = Romanian; SWE = Swedish; ISR= Israeli; KOR = Korean; POL = Polish.

Table 3
Item-Scale Correlations and Total Scale Reliability for the Portuguese and Reference Samples

Country	PRT	USA	AUS	CAN	GER	SPA	DAN	FIN	ITA	ROM	SWE	ISR	KOR	POL
N	313	132	1944	535	374	220	376	285	376	340	291	253	271	1174
HGSHS:A Item:														
1. Head falling	.29	.34	.39	.44	.21	.30	.17	.20	.29	.30	.36	.19	.28	.38
2. Eye Closure	.28	.30	.39	.51	.06	.27	.16	.19	.24	.25	.30	.33	.14	.34
3. Hand Lowering	.28	.48	.25	.44	.25	.09	.24	.08	.19	.47	.20	.28	.13	.26
4. Arm Immobilization	.31	.66	.36	.53	.33	.38	.45	.48	.29	.56	.34	.31	.38	.36
5. Finger Lock	.34	.86	.59	.71	.42	.52	.55	.54	.43	.48	.43	.47	.41	.46
6. Arm Rigidity	.43	.89	.55	.70	.42	.51	.44	.41	.35	.57	.42	.52	.48	.47
7. Hand Moving	.35	.44	.42	.60	.18	.22	.29	.25	.34	.57	.34	.34	.18	.27
8. Communication Inhibition	.43	.78	.51	.65	.38	.40	.44	.40	.38	.55	.45	.53	.49	.49
9. Hallucination	.10	.48	.34	.53	.23	.31	.35	.33	.19	.47	.14	.13	.15	.21
10. Eye catalepsy	.45	.74	.53	.75	.47	.46	.50	.46	.50	.68	.45	.57	.48	.49
11. Posthypnotic Suggestion	.03	.46	.18	.47	.14	.11	.19	.27	.30	.26	.07	.02	.22	.12
12. Amnesia	.02	.39	.18	.65	.09	.18	.18	.28	.23	.38	.06	.16	.17	.19
Total Scale (Kuder-Richardson)	.63	.80	.76	.84	.62	.68	.70	.71	.70	.71	.66	.69	.62	.70

Note. PRT = Portuguese; AUS = Australian; CAN = Canadian; GER = German; SPA = Spanish; DAN = Danish; FIN = Finnish; ITA = Italian; ROM = Romanian; SWE = Swedish; ISR= Israeli; KOR = Korean; POL = Polish.

point-biserial item-scale correlations in the Portuguese sample ranged from rather low $r = .02$ (Item 12, amnesia) and $r = .03$ (Item 11, posthypnotic suggestion) to $r = .45$ (Item 10, eye catalepsy). Item-total correlation when computed by introducing Item 12 scored with the reversibility criterion was substantially higher ($r = .14$), thus closer to the other samples' reports. Correlations for Item 5, finger lock ($r = .34$), and Item 9, hallucination ($r = .10$), were lower than in any other reported sample (correlations for finger lock range from $r = .41$ to $r = .86$; correlations for hallucination ranged from $r = .19$ to $r = .48$). Correlations for Items 1, 2, 3, 4, 6, 7, 8, and 10 were within the range of item-scale correlations in the reference samples.

The total scale reliability (Kuder-Richardson's coefficient) was .63, which is somewhat lower than reliabilities reported by most of the studies but is still in the range of the reports of the 13 reference samples (the highest coefficient reported is .84 of the Canadian sample, and the lowest is .62 reported for the Korean and German samples), and within the range of the non-English versions, in which the maximum coefficient was .71, reported by the Finnish and Romanian samples. When the Kuder-Richardson's coefficient was computed entering Item 12 scored with the reversibility criterion, the total reliability coefficient of the scale for the Portuguese sample rose to .65. Generally, the Portuguese data are comparable to the pattern of findings of the reference samples, as indicated by the Spearman rank-order correlation coefficients ranging from $r_s = .48$ (Finnish sample) to $r_s = .94$ (Swedish sample), as displayed in Table 4.

Discussion

Data presented for the Portuguese translation of the HGSHS:A are generally congruent with data reported for the 13 reference samples.

In line with previous findings in the Australian, Canadian, German, Spanish, Finnish, Romanian, and Israeli samples, no significant differences between males and females were observed.

As mentioned earlier, we obtained quite a high percentage passing on Item 12, amnesia (72%), higher than in most of the reference samples (ranging from 13% in the Israeli sample to 71% in the Danish sample). High percentages passing on the amnesia item were also obtained by the Swedish (65%), Korean (54%), Italian (56%), Finnish (53%), and Spanish (52%) samples. This has been interpreted in the literature (Bergman et al., 2003) as due to a misunderstanding of what is actually being asked by the sentence on the booklet, "Please write down in your own words a list of all the things that happened since you began looking at the target." It seems that participants tend to interpret this request in terms of what happened during the induction procedure, rather than

Table 4
Rank Order Correlations for the Portuguese and Reference Samples

	N	USA	AUS	CAN	GER	SPA	DAN	FIN	ITA	ROM	SWE	ISR	KOR	POL
Portugal	313	.64*	.88**	.60*	.77*	.72**	.66*	.48*	.81**	.82**	.94**	.93**	.77**	.91**
USA	132		.60*	.65*	.91**	.74**	.89**	.77*	.59*	.70*	.60*	.59*	.73*	.60*
Australia	1944			.67*	.70*	.85**	.62*	.53	.79**	.60*	.91**	.87**	.68*	.87**
Canada	535				.61*	.73*	.72**	.77**	.71*	.68**	.56	.70*	.65**	.56
Germany	374					.78**	89**	72**	64*	76**	.78**	.69*	.75**	.77**
Spain	220						.76**	.83**	.69*	.57	.78**	.69*	.77**	.82**
Denmark	376							.76**	.64*	.79**	.61*	.61*	.69*	.58*
Finland	285								.62*	.60*	.52	.45	.74*	.51
Italy	376									.69*	.82**	.77**	.86**	.74**
Romania	340										.63*	.72**	.62	.60*
Sweden	291											.89**	.81**	.97**
Israel	253												.67*	.89**
Korea	271													.80**
Poland	1174													–

Note. PRT = Portuguese; AUS = Australian; CAN = Canadian; GER = German; SPA = Spanish; DAN = Danish; FIN = Finnish; ITA = Italian; ROM = Romanian; SWE = Swedish; ISR = Israeli; KOR – Korean; POL = Polish.
*$p < .05$. **$p < .01$.

focus on the suggestions they remember to have experienced. Lamas et al. (1989) have suggested that in translated versions the verb "to do" should be used (e.g., "please write down in your own words a list of all the things that you were asked to do since you began looking at the target"). In addition, 17% of the Portuguese participants also provided incidental subjective reports (e.g., I felt very calm; I was relaxed, etc.) rather than the critical suggestions, an occurrence noted also by Kihlstrom and Register (1984) that suggests that participants might be misunderstanding what is intended. Thus, a change in the booklet's wording of the sentence from "all the things that happened" to "all the things that you were asked to do" on Item 12 should be considered in future studies in Portuguese language. Moreover, when the amnesia item was scored using the reversibility criterion, the pass percent was considerable lower (decreased from 72% to 29%) and the item-total correlation was substantially higher (increased from $r = .02$ to $r = .14$), which supports Kihlstrom and Register's findings and their claim that Item 12 may be contaminated by a variety of factors in addition to suggested amnesia. Woody and Barnier (2008) have also argued the amnesia item is psychometrically weak and problematic and suggest revising it.

In general, the data reported here indicate that the Portuguese sample behaves in a very similar way as the reference samples on the HGSHS:A. Despite the differences discussed above, patterns in item difficulty are similar in the Portuguese and the reference samples. The high significant rank-order correlation between the Portuguese and the 13 reference samples show that the Portuguese translation is a viable instrument for use in further hypnosis research in Portuguese-speaking participants.

References

Barnier, A. J., & McConkey, K. M. (2004). Defining and identifying the highly hypnotizable person. In M. Heap, R. J. Brown, & D. A. Oakley (Eds.), *The highly hypnotizable person: Theoretical, experimental and clinical issues* (pp. 30–60). London, United Kingdom: Routledge.

Benham, G., Smith, N., & Nash, M. R. (2002). Hypnotic susceptibility scales: Are the mean scores increasing? *International Journal of Clinical and Experimental Hypnosis*, *50*, 5–16.

Bergman, M., Trenter, E., & Kallio, S. (2003). Swedish norms for the Harvard Group Scale of Hypnotic Susceptibility, Form A. *International Journal of Clinical and Experimental Hypnosis*, *51*, 348–356.

Bongartz, W. (1985). German norms for the Harvard Group Scale of Hypnotic Susceptibility, Form A. *International Journal of Clinical and Experimental Hypnosis*, *33*, 131–139.

David, D., Montgomery, G., & Holdevici, I. (2003). Romanian norms for the Harvard Group Scale of Hypnotic Susceptibility, Form A. *International Journal of Clinical and Experimental Hypnosis*, *51*, 66–76.

De Pascalis, V., Russo, P., & Marucci, F. S. (2000). Italian Norms for the Harvard Group Scale of Hypnotic Susceptibility, Form A. *International Journal of Clinical and Experimental Hypnosis*, *48*, 44–55.

Kallio, S. P., & Ihamuotila, M. J. (1999). Finish norms for the Harvard Group Scale of Hypnotic Susceptibility, Form A. *International Journal of Clinical and Experimental Hypnosis*, *47*, 227–235.

Kihlstrom, J. F., & Register, P. A. (1984). Optimal scoring of amnesia on the Harvard Group Scale of Hypnotic Susceptibility, Form A. *International Journal of Clinical and Experimental Hypnosis*, *32*, 51–57.

Kirsch, I., Council, J. R., & Wickless, C. (1990). Subjective scoring for the Harvard Group Scale of Hypnotic Susceptibility, Form A. *International Journal of Clinical and Experimental Hypnosis*, *38*, 112–124.

Lamas, J. R., del Valle-Inclan, F., Blanco, M. J., & Diaz, A. A. (1989). Spanish norms for the Harvard Group Scale of Hypnotic Susceptibility, Form A. *International Journal of Clinical and Experimental Hypnosis*, *37*, 264–273.

Laurence, J.-R., & Perry, C. (1982). Montréal norms for the Harvard Group Scale of Hypnotic Susceptibility, Form A. *International Journal of Clinical and Experimental Hypnosis*, *30*, 167–176.

Lichtenberg, I. (2008). Israeli norms for the Harvard Group Scale of Hypnotic Susceptibility, Form A. *International Journal of Clinical and Experimental Hypnosis*, *56*, 384–393.

McConkey, K. M., Barnier, A. J., Maccallum, F. L., & Bishop, K. (1996). A normative and structural analysis of the HGSHS:A with a large Australian sample. *Australian Journal of Clinical and Experimental Hypnosis*, *24*, 1–11.

Perry, C., Nadon, R., & Button, J. (1992). The measurement of hypnotic ability. In E. Fromm & M. R. Nash (Eds.), *Contemporary hypnosis research* (pp. 459–490). New York, NY: Guilford.

Pyun, Y. D., & Kim, Y. J. (2009). Norms for the Korean version of the Harvard Group Scale of Hypnotic Susceptibility, Form A. *International Journal of Clinical and Experimental Hypnosis*, *57*, 117–126.

Sheehan, P. W., & McConkey, K. M. (1979). Australian norms for the Harvard Group Scale of Hypnotic Susceptibility, Form A. *International Journal of Clinical and Experimental Hypnosis*, *27*, 294–304.

Shor, R. E., & Orne, E. C. (1962). *Harvard Group Scale of Hypnotic Susceptibility, Form A*. Palo Alto, CA: Consulting Psychologists.

Shor, R. E., & Orne, E. C. (1963). Norms on the Harvard Group Scale of Hypnotic Susceptibility, Form A. *International Journal of Clinical and Experimental Hypnosis*, *11*, 39–47.

Siuta, J. (2010). Polish norms for the Harvard Group Scale of Hypnotic Susceptibility, Form A. *International Journal of Clinical and Experimental Hypnosis*, *58*, 433–443.

Weitzenhoffer, A. M., & Hilgard, E. R. (1959). *Stanford Hypnotic Susceptibility Scale, Forms A and B*. Palo Alto, CA: Consulting Psychologists.

Weitzenhoffer, A. M., & Hilgard, E. R. (1962). *Stanford Hypnotic Susceptibility Scale, Form C*. Palo Alto, CA: Consulting Psychologists.

Woody, E. Z., & Barnier, A. J. (2008). Hypnosis scale for the twenty-first century: What do we need and how should we use them. In M. R. Nash & A. J. Barnier (Eds.), *The Oxford handbook of hypnosis: Theory, research and practice* (pp. 255–280). Oxford, United Kingdom: Oxford University Press.

Zachariae, A., Sommerlund, B., & Molay, F. (1996). Danish norms for the Harvard Group Scale of Hypnotic Susceptibility, Form A. *International Journal of Clinical and Experimental Hypnosis*, *44*, 140–152.

Portugiesische Normen für die Harvard Gruppen Skala für hypnotische Suszeptibilität, Form A

Cláudia Carvalho

Abstrakt: Die portugiesische Version der Harvard Gruppen Skala für hypnotische Suszeptibilität, Form A (HGSHS:A) wurde bei 313 portugiesischen Collegestudenten angewandt. Es werden Ergebnisverteilung, Merkmalraten, Merkmalanalysen und die Verläßlichkeit des HGSHS:A vorgestellt und mit früher veröffentlichten Referenzbeispielen verglichen. Es wurden keine Unterschiede zwischen Männern und Frauen gefunden. Die Reliabilität des HGSHS:A der portugiesischen Version war geringer als bei den meisten der vorangegangenen Studien angegeben, jedoch im Bereich der nicht-Englisch-Versionen. Allgemein läßt sich feststellen, daß die portugiesischen Daten mit den Vergleichsdaten und der portugiesischen Übersetzung des HGSHS:A kongruent sind. Für ein primäres Screening hypnotischer Suggestibilität in einem portugiesischen Kontext scheint es ein brauchbares Instrument zu sein.

Stephanie Reigel, MD

Normes Portugaises du Questionnaire de L'échelle de Susceptibilité Hypnotique du Groupe de Harvard, Formulaire A

Cláudia Carvalho

Résumé: Une version portugaise du questionnaire de l'échelle de susceptibilité hypnotique du Groupe de Harvard, formulaire A (HGSHS:A), a été administrée à 313 étudiants universitaires. La distribution des résultats, le taux de réussite des items, l'analyse des items et la fiabilité du HGSHS:A y sont présentés et comparés avec ceux d'échantillons de référence publiés précédemment. Aucune différence n'a été relevée entre les sexes. La fiabilité de la version portugaise du HGSHS:A était plus faible que celle signalée dans la plupart des études, mais se situait dans la plage des versions non anglophones. Dans l'ensemble, ces résultats sont en accord avec les échantillons de référence et avec la traduction portugaise du HGSHS:A. La version portugaise semble constituer un instrument valable de préclassement de la suggestibilité hypnotique dans un contexte portugais.

Johanne Reynault
C. Tr. (STIBC)

Normas Portuguesas para la Escala Grupal de Harvard de Susceptibilidad Hipnótica, Forma A

Cláudia Cavalho

Resumen: La versión Portuguesa de la Escala Grupal de Harvard de Susceptibilidad Hipnótica, Forma A (HGSHS: A) se administró a 313 estudiantes universitarios Portugueses. La distribución de calificaciones, la proporción de reactivos aprobados, el análisis de reactivos, y la fiabilidad de la HGSHS: A se presentan y comparan con las muestras de referencias publicadas. No se encontraron diferencias entre hombres y mujeres. La fiabilidad

de la HGSHS: A versión Portuguesa fue menor a la reportada por la mayoría de los estudios pero dentro del rango de las versiones que no están en inglés. En general, los datos Portugueses son congruentes con las muestras de referencia y la traducción Portuguesa de la HGSHS: A parece ser un instrumento viable para la detección primaria de habilidad hipnótica en la población Portuguesa.

Omar Sánchez-Armáss Cappello, PhD
Autonomous University of San Luis Potosi, Mexico