##  condensed and edited from Hypnotherapy (HYP200, Geers, 1994), pp. 14-17

**What Next?**

Whether you are using hypnosis training for personal growth and development, or for career development, you will most likely begin with a basic class that is structured around direct suggestion. Assuming you have studied and practiced basic hypnosis to the point of competence, you understand how to get a person into and out of hypnosis, meaning you are familiar with and can recognize state and shifts of state, plus you have gained fluency in building expectancy, cultivating rapport, and formulating effective suggestions.

When direct suggestions are insufficient to help a person achieve a specific goal, what do you do next?

After you have completed a basic hypnosis program, you may encounter hypnosis subjects for whom directive therapy is ineffective. This is the reason the Hypnosis Alliance team of educators are available to help you meet the hours required for certification with the IMDHA and IACT. We want our graduates to be highly competent hypnotherapists, able to draw from a range of effective intervention strategies. When you and a client are failing to get the desired outcome, you and the client are stuck. That’s the technical term, “stuck”.

I infer that stuckness indicates where the exploration of curiosity is most useful. There is something underlying the client’s goal that is preventing the person from aligning with and achieving a goal or target of change. When you and your client are “stuck” using direct suggestions, you need to shift into a less directive, more inquisitive approach to uncover the stuckness, loose the freeze, restore the ability to adapt and accommodate for an ever changing world.

In order to broaden your skill set and scope of practice, hypnosis is a lifelong learning process. Cultivate a diverse range of theoretical approaches; such as non-directive hypnosis, hypnoanalysis, Ericksonian hypnotherapy, neurolingustic programming (NLP), emotional freedom therapy (EFT), prayer, and meditation.

In order to be of best service to your clients, build a collaborative referral list that includes other professionals in your community: medical practitioners open to complementary therapy, massage therapy, acupuncture, chiropractic, yoga studios, meditation groups, taiji, martial arts, gyms, Twelve Step programs, community sponsored health and wellness options, and nutritional counseling.

This article will be contrasting two less directive hypnotherapy options: Gestalt with its focus on Now, and Regression or pinpoint in its temporal setting of past / present / future, abreaction and catharsis.

A less directive, more permissive approach is intended to lead a person into greater self awareness, personal responsibility, accepting the commitment and willingness to change. Sometimes a client is stuck. Stuckness is most likely the reason he or she has come to a hypnotherapist seeking help. It is something for which their own level of awareness, perceptions and willingness has failed to achieve a desired goal. Sometimes a client wants to be stuck for some reason, which is called secondary gain. Something is more important than achieving the stated goal. This is an interesting lateral move into what is really motivating the individual to think, feel, and act in this matter. A stuck client may want to have you join them in stuckness, or even hope to sucker you into taking responsibility for their change and lack thereof.

In basic hypnosis, questions tend to be clumped at the beginning and end of the sessions, in Gestalt and regression hypnotherapy, the questioning tends to continue throughout the session.

**Be Here Now**

My style is based on some Gestalt concepts from the work of Fritz Perls, as taught by Mark Gilboyne at his California school in 1987. From the Gestalt perspective, change revolves around a concept of being authentic, genuine, and fully present right here right now. Perls was on a more directive end of the humanistic spectrum than Carl Rogers in the Existential – Humanistic model of therapy. My style is not completely non-directive, it moves at a fairly fast pace interaction. If I were to be a truly non-directive client centered therapist, I would set our sacred space, hold that safe space for the unfolding process of change with an attitude of unconditional regard, and limit my comments to, ““Mmmm hmmmm”, . . . “tell me more.”

I’m more directive than the soft support of a Rogerian humanist. I do incorporate the client centered acceptance of a client for who and what he or she is. Realistically, if I’m not finding it in me to love my clients like a grandmother, I refer those folks to other clinicians in my community.

From my Gestalt based perspective, client centered hypnotherapy is an ongoing practice of being fully present, authentic about my state and response to the individual, holding sacred space for an unfolding greater than the sum of the two of us, and I am mirroring the client’s interests, reflecting back questions intended to deepen a person’s self awareness.

**Assumption #1 Indwelling Wisdom:** The client has an indwelling wisdom, knows what is needed, knows what he or she is willing to do and be. The client knows what is liked / disliked / wanted or needed that have yet to be achieved.

From a basic hypnosis class, you may have learned that what the person says upon first contact, in the first few minutes, is what the person is really there for. Perhaps your basic class encouraged you to assess for conscious and unconscious alignment of purpose by asking again after a successful test for somnambulism (such as a number drop / loss, p74-77, [[1]](#footnote-1)).

Ask, “What are you really here for?”

When the client is congruent, meaning what is said upon the first contact (phone or in person) is the same as what is requested after a successful test for somnambulism, the person has an aligned conscious and unconscious mission. Sometimes what the client says after achieving the depth of relaxation found in somnambulism is different from the first stated goal, indicating that the conscious mind and subconscious mind are not aligned with the same mission. This is a useful bit of information in client motivation, so I tend to initiate the quest into the issue that comes out after the test for somnambulism whether it aligns with the initial request or not. I trust the client’s subconscious mind to give me information that the conscious mind may not be aware of.

From my Gestalt perspective, I prefer to follow the spontaneous unfolding moment of Now. This means the unfolding session is following the clues offered by the spontaneous moment. It may lead someplace different than what is expected.

*(This is the first half of a two part article. The second half will be released in \_\_\_\_\_ Spring 2017)*

**What Next? *(part 2, CONTINUED, from Fall 2016 article)***

**Be Here Now** – Gestalt (*continued)*

If I want to shift the power of choice more fully to a client, be less directive, I can ask for a client buy in, “Which do you think is the most valuable trail to follow in your journey of growth and development first at this time, the \_\_\_\_\_\_\_ (first presenting symptom), or the \_\_\_\_\_\_\_\_\_ (second presenting symptom)?”

Figure and ground, foreground and background are Gestalt concepts of visually perceiving what is occurring in one’s own life. The issue of interest is the figure at the foreground. The rest of the client’s life is the ground, a background frame of reference to the situation at hand. The figure is in the foreground until it is resolved, or something emerges from the background to take the spotlight. When the issues in the foreground are resolved, or overwhelmed, they slide into the background, and a new, pressing matter / figure emerges that wishes to be addressed; perhaps a desire for a glass of water, or to relieve oneself. This unfolding, emergent sense of self is an ongoing, living experience, not a past tense memory.

From the Gestalt perspective, the plan is to restore a full awareness of this moment, the unfolding present, one’s own response to it, in an authentic / genuine expression of self in response to this moment right now.

When there is a movement, or inhibition of a movement, such as a breath, encourage the client to do it again, exaggerate it. The previously unobserved clenched fist leads to awareness of the unarticulated anger that is oozing out the skin. Authentic anger and frustration can be expressed instead of bottled up. Authentic feelings are released and the body relaxes. Maybe the client becomes aware of the crossed arms, crossed legs and feet pointing to toward the door, discovering that the body is always giving signals about what it wants, it is withdrawing and wants to leave. Words can lie, feet don’t lie. Watch the feet.

The finger tapping, “If it could speak, what would it say?”

The body is wise, follow its lead.

Some folks get stuck in wanting to know “why”. Get ready for the long haul, this is rarely a rapid transformation when the “why” question is being thrown around. Perls suggested that the “why” questions are a search for a rationalization as to what happened. Asking “why” involves a convoluted examination of self inflicted reasons for doing or not doing what was done in the past, and may be used to justify the continuity of the behavior in the present. Avoid the “why” questions if the goal is to find a more rapid resolution of problems in favor of personal awareness, authenticity, and genuine responses to the opportunities life presents to live fully.

Change the question, change the frame of reference, shift the brain toward a different loop of understanding. Perls recommended that better questions for the full understand of self involve, “how,” “when”, “where”, “who”, and “what”.

My goal as a hypnotherapist is to trap the brain into thinking for itself, perceiving in a different way, noticing that which was not noticed before. I want to help remove blinders that are preventing the person from perceiving his or her genuine, authentic response to the life opportunities at hand.

Hypnotherapy encourages the subject to use the tools of self knowing in situations not only related to the presenting problem, it tends to leave the person with working tools that can generalize into the rest of their lives as a benefit of their broadened self awareness.

## Back Then

Hypnosis has a capacity to open communication between the conscious and subconscious minds. The enhanced memory reported through the use of hypnosis is known as hypermnesia. Some folks, such as the False Memory Syndrome theorists, propose that the so called memories are only creative license to understand by the unconscious mind, false memories. Hypnotically induced testimony is not eligible in Florida Courts of law. Since we are not doing forensic work in most of our clinical research and outcome goals, what is important is that what the person perceives is personally meaningful. All behavior is meaningful, at some level. The decisions are personally meaningful. The ability to re-decide is empowering.

In basic hypnosis, the goal is to recognize and avoid abreaction. In some aspects of hypnotherapy, abreaction is sought in order to achieve the relief of full catharsis. The deliberate use of abreaction and catharsis is one of the differences between directive and non-directive therapeutic applications of hypnosis.

When using a regression to cause, or pinpoint method, the pattern of change involves examining the past in decisions, how those decisions impacted a person at the time of the decision, and how that old decision is influencing the person today. This is a different approach from the Gestalt focus on being here now. Regression to cause, or a pinpoint method, or the future pacing of NLP, involve shifts in the temporal sense with a past / present / future frame of reference.

Hypnotherapy provides a rapid access for recalling and revivifying memories and emotions that have been buried inside for a very long time. The cause of a presenting problem is known as an initial sensitizing event (ISE). Once the ISE is identified, the subject is asked to review and understand what is going on from his or her adult perspective, and notice how that decision or those decisions influence the present behavior and decisions.

Review if that old decision is effective, and what, if any recommended change or corrections to one’s own decisions and behavior is best to resolve the presenting problem or achieve a goal. An individual will rarely be willing to give up something perceived to be valuable, for something perceived to be less valuable. When an option is no longer perceived to be the best or ideal option, the individual is more inclined to make a new decision, something more appropriate for the current situation, age, relationships, values and mature preferences. Reframing through applying adult understanding can shift everything quickly. Happy can become a more natural, normal way of being.

When an initial event is contacted, it sometimes reveals its emotional attachments, the expression of those unresolved emotions is an abreaction. When a full catharsis of the previously stuck emotions is achieved, the person tends to report feeling remarkably good. When abreaction is done and catharsis is complete, you will see a shift in state evident in the body (posture, breathing, skin and voice tone), breathing, emotional expression, ability to articulate and relax fully.

Additional events that layer and deepen the personal meaning on a particular experience are called subsequent sensitizing events (SSE). There may need to be similar evaluations of each SSE to identify and release any additional maladaptive decisions and emotional loads.

Be flexible; expand your skill set and scope of practice with lifelong learning.

1. pp. 74 -77, Basic Hypnosis, free download https://www.hypnosisalliance.com/pdf\_downloads/Hypnosis101.pdf [↑](#footnote-ref-1)