

Principles & Process of Rapport, Attunement, Trance Elicitation, Re- Alerting and Re- Orienting

CLINICAL WORKSHOP

LEVEL 1

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Disclosures

The majority of the PowerPoint Presentation was created by Mary Wells, Ph.D. The examples and material presented have been acquired from many, many professionals who have participated in ASCH and other Workshops over the past 40 years!

Rapport

Making a connection.....



Rapport Definitions

a close and harmonious relationship in which the people or groups concerned understand each other's feelings or ideas and communicate well. (Oxford dictionary)



a friendly, harmonious relationship. especially : a relationship characterized by agreement, mutual understanding, or empathy that makes communication possible or easy (Merriam-Webster)



Ability to connect with others in a way that creates a climate of trust and understanding (Zakaria and Musta'amal, 2014)

Opposite of Rapport

Absence of warmth, attention and caring

No sense of connection

Not feeling seen or heard

Making it hard for the other to feel seen or heard

Interrupting, using judgmental language, power differential is emphasized

Therapeutic Rapport



Developed between care provider and patient/client



Essential to effective treatment



50% of the change agent in a therapeutic encounter is the relationship itself, regardless of encounter type



Increases safety and willingness to change



Considered the cornerstone of the therapy process



Includes sense of connection, trust, sharing and safety, the dynamic of the relationship

How to Build Rapport

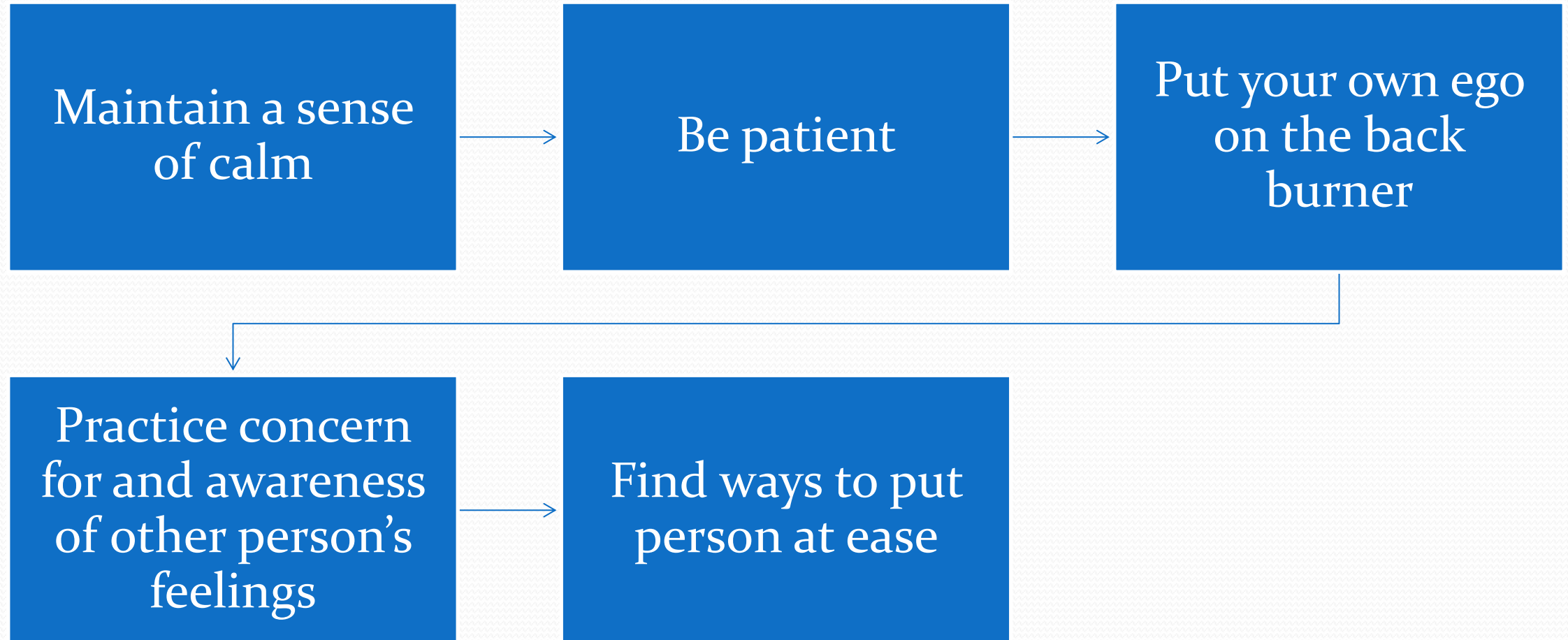
Body language and mirroring

Tone and prosody

Warmth, interest, openness

Non-judgmental style

Rapport Building as Clinician



Additional Rapport Building Tools



Break the ice with small talk



Integrate humor as appropriate



Show empathy and compassion



Treat other as a partner in the treatment process



Attend to non-verbal cues



Use reflective listening



Maintain positive, enthusiastic and supportive attitude



Ensure environment is peaceful, private and comfortable

Additional Tools

1

Use a calm tone of voice

2

Don't move too quickly, proceed at client/patient pace

3

Avoid technical jargon

4

Avoid disruptions or distractions

5

Avoid being judgmental

6

Be flexible and open minded

Attunement

Paying attention....



Definition of Attunement

To bring into harmony : to make aware or responsive (Merriam-Webster)



Attunement is the reactivity we have to another person. It is the process by which we form relationships



Dr. Dan Siegel says, "When we attune with others we allow our own internal state to shift, to come to resonate with the inner world of another. This resonance is at the heart of the important sense of "feeling felt" that emerges in close relationships".

Clinical Attunement



Goes beyond empathy



A kinesthetic and emotional sensing of others



Tuning into rhythm, affect and experience by metaphorically being in their skin



Two-person experience, connectedness by providing reciprocal affect or resonating response



Communicated both verbally and non-verbally



Validation of other's needs and feelings



Concept of “in tune ment”



Trance Elicitation

Understanding the Induction Process

Definitions-Content

Altered state of consciousness or awareness that is different from normal waking or sleep

Resembles meditative states with narrowed focus of attention

Primary process thinking and ego receptivity

Characteristic alterations in cognition-dissociation, trance logic

Sometimes hard to distinguish from relaxation, mental or physical

Components of Hypnosis

Focused attention

Absorption

Dissociation

Distortion

Suggestibility and generalization

Dispel Myths

Not stage hypnosis

Fear of not re-alerting or waking up

Fear of being told to do something patient doesn't want to do

Remembering something from the past

“Cluck like a chicken”

Motivation and Readiness

What is the presenting problem?

How does hypnosis help with moving toward resolution of the problem?

What does the patient expect to happen?

Patient expectation about ability to be hypnotized>

Key Points to Discuss

Trance is a natural ability

Hypnosis is a talent with variable natural biological ability

Hypnosis is a skill that can be learned and improved on with practice

Trance is easy, what we do with it is the process of hypnosis-tailored to fit patient needs and issues

What is an Elicitation?

The beginning of formal hypnosis

The first step in the process

A way to enter an altered state by choice

A transition from wakefulness to hypnotic trance state

This invites the possibility or beginning of change

Procedure to induce hypnosis (Elkins, 2015)

Occurs before suggestions are introduced

Trance Elicitation-Purposes

Transition from everyday experiences to hypnotic context

Used to seed ideas that will be included in suggestions

Not all inductions work for all clients/patients

Significant research support of tailoring inductions to the patient/client in front of you

Efficacy is context dependent

Scripted inductions lose that tailoring and are less effective

Principles of Elicitation and Suggestion



Prepare the patient



Establish rapport



Create positive expectancy



Law of reversed effect-willpower does not work



Law of dominant effect-strong emotions take precedence over weaker ones



Law of concentrated attention-repetition of suggestion to concentrate attention in this area

Preparing for Initiation of Trance

Done while fully alert (not in trance)

Explanation of process

Establishment of rapport

Creating positive expectancy and motivation

Educate about levels of awareness or alertness

Setting goals and focus of treatment

Formal Elicitation

Fixation of attention and deepening involvement.

Narrowing attention and facilitation of inward absorption, not necessarily relaxation.

Common inductions are available, find your own style
Try different ones in this process to learn what works for you.

Signs or Indicators of Trance

from

<https://britishhypnosisresearch.com/recognising-the-minimal-cues-of-trance/>

Defocused
gaze or eye
fixation

Pupil dilation

Change in
blink reflex

Rapid eye
movement

Eyelid flutter

Smoothing of
facial muscles

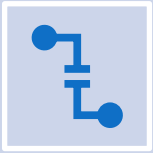
Slowed
respiration

Reduction of
swallow
reflex

Body
immobility

Inner
absorption

Elicitation



Facilitating unconscious (involuntary) response



Trance Ratification



Removing suggestions and re-alerting

Useful Considerations for Elicitation of Trance

This is the patient's experience, not yours

You are the guide to new experiences

Pace suggestions, individualize

Be attuned to patient cues-breathing, posture, movements

Stay in contact, focus on patient at all times

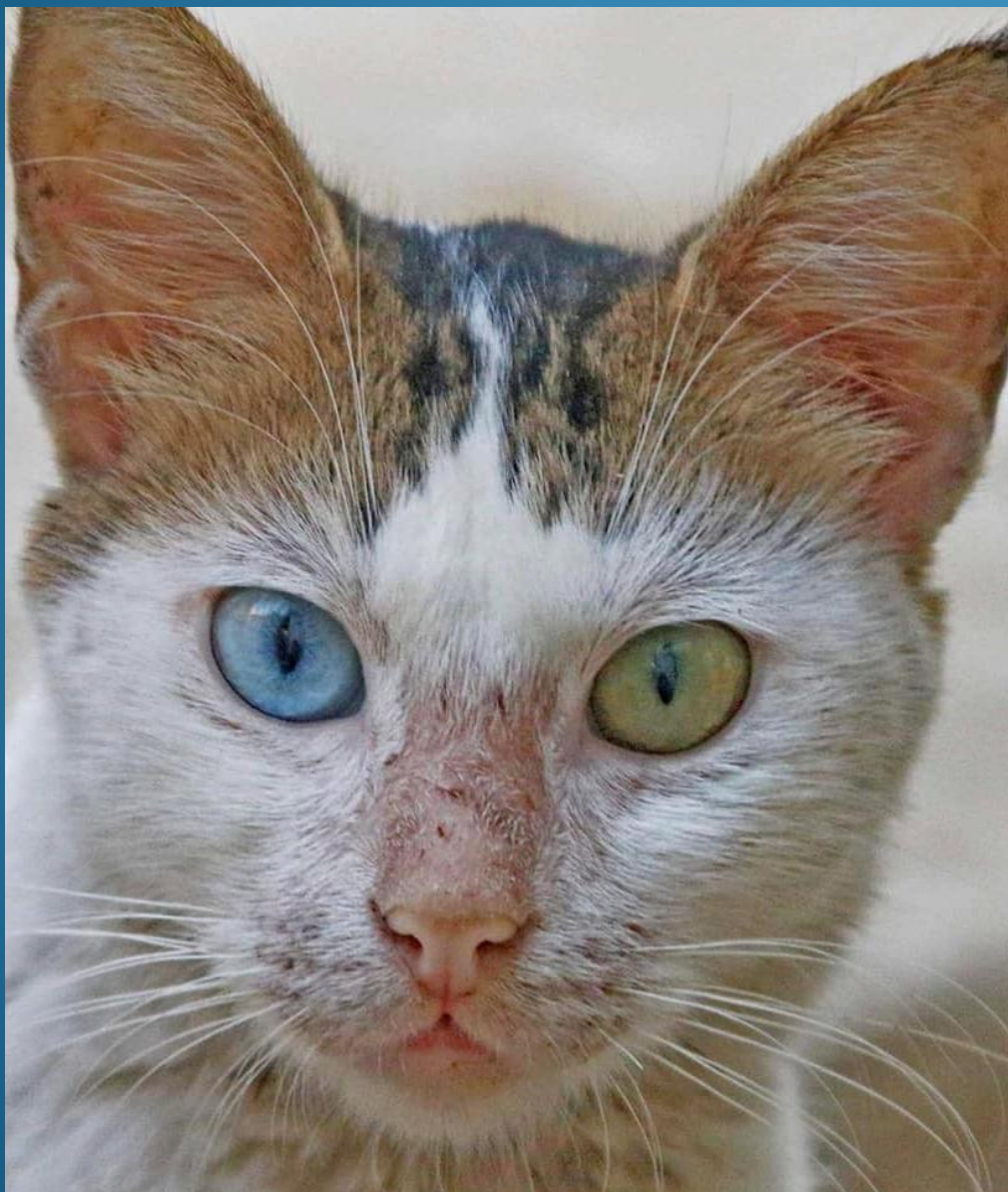
This allows for pacing and leading

Types of Elicitations

- Naturalistic
 - Breathing
 - Relaxation
 - Imagery
 - Waves of comfort or relaxation

Types of Elicitations

- External or Active
 - Hands coming together
 - Chiasson
 - Arm drop or coin drop
 - Eye fixation
 - Eye roll



Re-Alerting

The essential final step

Importance of re-alerting



We want our patients back to normal cognitive state before they leave us



Remove any specific suggestions such as anesthesia or limb rigidity.



Need to integrate the experience and process or debrief



Ensure safety and well being



Restoration of normal function

Howard Alertness Scale



Developed by Hedy Howard



Used both pre and post to determine level of alertness prior to initiation of trance and afterward to see if individual is back to baseline



Can be either 1-10 scale or 0-100 scale



Explain that alertness is variable and likely to change with hypnosis



Hedy A. Howard (2017) Promoting Safety in Hypnosis: A Clinical Instrument for the Assessment of Alertness, American Journal of Clinical Hypnosis, 59:4, 344-362, DOI: [10.1080/00029157.2016.1203281](https://doi.org/10.1080/00029157.2016.1203281)

Pre-Measure

- How alert are you now? Awake and alert-acquire a number on the scale you set (0-10, 0-100)

Process of re-alerting

- Start shortly before with statement that it is going to happen
 - In a few moments you will hear me count to 3 and as I do so, you will find yourself returning to more traditional awareness, alert, refreshed, ready for the rest of your day
 - 1...breathing deeply and comfortably, 2..more alert and awake, and 3..fully awake, eyes open, sensations normal

Re-Alerting

- Use your voice to guide the experience with increased volume, speed, engagement in surroundings
- Encourage return of normal movement, fingers stretching, arms and legs moving, toes and fingers, torso and head, eyes open
- “And how was that experience for you today?”
 - Past tense, it is over now.

Post Measure

How alert are you now?

1-10 or 0-100

If not back, what steps to take?

- Open eyes
- Look around room
- Move hands and feet
- If not fully alert after several minutes, may need to re-elicite trance and then realert

Debriefing



What was that like for you?



What did you enjoy?



Anything you would change in the future?



What was useful?



What would make this even better for you?

Images, speed, suggestions, inductions

Group Hypnotic Experience



Elicitation

Centering in, breathing
PMR



Deepening

Count backward, 10-1, staircase down



Suggestions for a good experience

Comfort with process
Enhanced well being throughout weekend
Ease of learning and retaining new information
Excitement about new learning

Group Hypnotic Experience



Post Hypnotic Suggestion

Each time in trance a better and more fulfilling experience

Enjoyment of process

Ease going in and out of trance



Re-Alerting

3-2-1

Return to traditional awareness

Demonstrations



Questions

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