

Conclusion

Over time and with attention to one's failures and successes, a therapist can find his voice; that special combination of knowledge and intuitive insight that fuses in creative acts of therapy. Finding our voice and becoming a therapist is an act of becoming our full selves. Only then can we truly express ourselves (Felder, 1991).

Becoming a therapist involves finding expression for your full self in your work. When we are constricted, constrained by our patient failures, or when we hang on to techniques that once worked with another patients, we diminish ourselves and what we therefore can offer our patients.

The road to our full selves entails keeping our paths free of obstacles stemming from our failures and the seductive allurements of our successes and allows our artistic voice that has always been inside to come out and play. At this point, success and failure melt away and we find we are effective in our work in new and creative ways. We constantly approach our work in "an infinite variety of ways" that reflect our deepest sense of who we are. In essence then, we can say we have found our voice in becoming the therapist we have always yearned to be.

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Minimal Cues in Diagnosis and in the Hypnotherapeutic Process

Camillo Loriedo

■ *Minimal cues are those behavioral indicators, seemingly trivial and irrelevant, of a specific state of mind or internal processes, usually not considered a signal by the untrained people because only a careful observation reveals the connections between these indicators and meaningful behavioral responses. Attention to minimal cues and to the slight differences in the subjects behavior or are probably the best indicators of the therapist's experience and effectiveness. Intuition, anticipation and clinical skills are the results of a good training to observe minimal indications of the subject combined with patient exercise. Hypnotic rapport is also considered as a mutual sensitivity of both hypnotist and subject to each other's minimal cues. Suggestions for recognizing different types of minimal cues' are given together with some general guideline on their hypnotherapeutic use.*

In all forms of psychotherapeutic approaches there is a general tendency to isolate special life events, facts that are considered to have the greatest importance in the story of each single individual. These events are usually given a notable value in order to explain that peculiar human being's behavior and/or the reason why problems and symptoms arose in the course of that individual's life.

On the contrary I have always been impressed by the fact that despite this diffused tendency to identify meaningful and unique events that could have, by themselves, the power to change the habitual way of living, one of the most important contribution of Erickson's work and of hypnosis in general has been the attention paid to little, seemingly unimportant details and cues that, because of their profound impact and implications can produce enormous and often unexpected changes in a person's life.

Hypnosis, has always stimulated popular fantasy because of its spectacular effects, and these dramatic qualities that sometimes the trance state is able to produce created serious misunderstanding of the hypnotic reality. The unconscious power amplifies greatly the

slight physiological, behavioral and mental changes that hypnosis produces, but I think the essence of the hypnotic trance is much more connected to minimal but profoundly meaningful details that create a significant difference of response in the individual's behavior.

In order to improve hypnotic effectiveness it is important not to be attracted by the dramatic effects of some trance states, overlooking the minimal cues that are at the basis of every hypnotic responses. Not paying enough attention to these cues will both impede the hypnotist to reach meaningful results and will not allow him/her to use them.

Beginning hypnotists are usually in search of spectacular phenomena, like hand levitation, positive and negative hallucinations, total amnesia, age regression and so on, and tend to miss the subtle body movements, the slight changes in the breath rhythm, the eyes' little patterns, the differences in the tone of voice of the subject. Hunting for dramatic events, they miss the many important opportunities of having access to the unconscious processes the subject is giving them.

Many hypnotherapist who have not been trained to notice minimal cues may find themselves in the paradoxical situation of trying with all possible efforts to induce the hypnotic trance in subjects who are already in deep hypnosis. Not realizing the presence of little trance indicators often means to reawaken the subject or to miss the deep hypnosis benefits for effective psychotherapy because the hypnotist continues to behave as in front of a nonhypnotized subject.

It happened to me several years ago with a young man. This was a very shy and proud graduate student, with a gentle and soft tone of voice; in order to induce him in hypnosis I tried all the most sophisticated maneuvers I knew with no avail. Despite my expectations he appeared to be one of the most resistant subjects I could ever imagine. After half an hour of useless efforts the young man continued to maintain his eyes wide opened, a great number of body movements, and as an adjunct to this he began to laugh in a very noisy way.

When asked about the reason for such laughing the subject answered „Well, I laugh at the stupid people“. When I tried to know more about who the stupid people were, he replied laughing once more: „You, for example. You see, you're trying to hypnotize me since half an hour and it doesn't seem to work“.

Thinking that after all he was right, I didn't try to object to the accusation. Then after a few minutes I suddenly realized that the laughing and the irreverent comments on my stupidity, though in some way justified, were not in tune with the young man's shyness and his gentle attitude that I had the opportunity to observe a few minutes before when I started the trance induction.

When I asked to the subject if he could please stop laughing he replied with some sur-

prise: „I can't“. Then we both had the confirmation he was in trance when after completed the dehypnotization he was now able not to laugh anymore and again gentle and shy. He apologized for having been rude during the trance, but when he was induced for the second time he started again his unusual behavior.

A more assertive tone of voice and the laughing were the minimal cues: since I didn't realize their importance I almost missed the very deep sunnambulist trance the subject experienced. That was to me an unforgettable lesson on how it is important to thoroughly observe the subject and consider all his/her even minimal utterances as a possible indicators of trance state and of hypnotic phenomena.

Minimal cues

Minimal cues are those indicators, seemingly trivial and irrelevant, of a specific state of mind or internal processes, usually not considered a signal by the untrained people because only a careful observation reveals the connections between these indicators and meaningful behavioral responses. They can be an important and useful instrument to be used consciously by the therapist who pays particular attention to them. This particular attention should be considered one of the crucial factors of the therapeutic use of minimal cues, the subject will in fact consciously or unconsciously respond to the hypnotist attention that by itself proves to be a very relevant cue in creating the therapeutic relationship.

In the dyadic conception of trance it isn't only the peculiar attention of the subject that creates the hypnotic state: the hypnotist's „careful observation“ of the subject's contribute as well to the mutual trance relationship. Without this hypnotist's contribution to the therapeutic trance I doubt that any hypnotic therapy can be done. In some sense the therapist's hypnosis represents for the subject the proof of the therapist participation to the process of therapy or the „anesthesia for change“ as Carl Whitaker would say.

The hypnotic rapport is in fact a very peculiar relationship that has been defined in a number of ways but in my opinion should be simply defined as the mutual sensitivity of both hypnotist and subject to each other's minimal cues. Rapport is a very powerful aspect of the hypnotic experience that demonstrates how trance can prevail over the outside world. This power of hypnotic rapport was used with a married couple:

Therapy was asked because of the wife's sexual problem: she couldn't tolerate husband proximity and as soon as he was at an intimate distance she started to scream and develop panic reactions. She used to be in control of her husband in a very obsessive way, she was continuously monitoring his actions and movements and directing him on what to do on any occasion. I noticed how he was ready to respond as a well trained disciple to the little nonverbal indications she was giving him: she silently indicated him where to seat, when

to speak and what to say and he performed accordingly.

Needless to say she was very reluctant to accept going into trance: the simple idea of losing even partially her control over the situation evoked anxiety. But she accepted the husband going in trance first, with the agreement that she would be allowed to watch him all the time.

As the husband entered the trance, I had the opportunity to realize that his previous sensitivity to the wife's nonverbal suggestions disappeared while he developed a good responsiveness to all my verbal and nonverbal cues. She probably noticed something different was going on and asked if he was in trance and I responded: "Why don't you ask him directly?" But when she posed him the question, she didn't obtain any answer. She tried again, and with a louder voice, but he didn't respond.

As soon as she realized he was still responding to my questions while she was unable to reach him, she felt her control on him was gone and then she said to me: "I think I feel anxious: could you please hypnotize me?"

General guidelines for the therapeutic use of minimal cues

By their nature minimal cues tend to not be seen, unless there is a special training in observing them and I think a good hypnotic training should include practicing on identifying the more subtle cues in both the client's and hypnotist's behavior.

As a general rule it is important to be oriented to ask for minimal indications and to be ready to react to them with minimal interventions. It is not a question of economy in our efforts to respond to our subjects, but is just another minimal cue that we may convey to our clients: hypnosis is so effective that there is no need to emphasize, to underline or to repeat suggestions, a little move is enough to generate a significant change. After all, what people generally consider mysterious and inexplicable in hypnosis comes from minimal cues that have not been noticed by the observer.

Guidelines for the therapeutic use of minimal cues

1. Observe little things, even the most irrelevant: they will make sense later.

One common objection to the attention to be paid to minimal cues is that they could be not relevant to the therapeutic context; so quite often they can be noticed by the observer, but immediately discarded as a nonsense. The difficulty to give a sense to the little piece of behavior the subject is showing depends on the fact that we don't know enough about our client.

Usually minimal cues are forms of behavior ignored even by the subject that performs them. Since in these cases the subject is unable to explain the ignored behavior, it is

obvious not to find an immediate meaning for the little cue the attentive therapist has noticed.

Nevertheless to find immediately a meaning is not necessary because the minimal cue can make sense later, when we will know more about our subject or when the same subject will discover that a seemingly insignificant behavior has a valuable importance.

2. Don't translate minimal cues

If and when it is possible to find a meaning for the minimal cues, it is not advisable to translate the cue and explain its meaning to the subject. These forms of behavior are usually very distant from consciousness and their immediate interpretation will rarely find the patient prepared to accept the unexpected meaning. It is usually much better to ask subjects if they have a reason for such a minimal behavior: Even if we will not receive an immediate reply, such a request that is not related to any important event in the individual's life, will frequently activate interest and curiosity on the part of the subject: something like, "Why did the therapist gave importance to my breath rhythm change?"

The subject has already good answers for all of his/her meaningful life events: "I'm not depressed because my father died" and these answers support beliefs that are difficult to eradicate. Subjects, on the contrary, very rarely have in their mind responses for their unnoticed behaviors and if someone puts questions about these behaviors, this will easily create unbalance and internal search.

It's preferable to facilitate this internal process instead of trying a possible translation of the minimal cue's meaning: particularly when there isn't any consciousness of the behavior or they are performing in the here and now, subjects don't like interpretations and tend to develop intense resistance.

3. Divide the subject's responses in smaller ones

The expectation for a good hypnotic response is a heavy burden for the subject that has to decide each time whether or not to obey the hypnotist's suggestion with a number of implications upon their relationship that will certainly influence not only the present response but also the future ones.

A request of a very slight response, of a subtle, unnoticeable, modification will eliminate this "all or nothing" effect and enormously reduce the influence of the response on the subject/hypnotist relationship. Little responses can be later added to other little responses to form a more massive change in the subject's behavior so it is possible subdivide the path bringing to the requested change in a number of little subsequent steps that will make the subject's modification more gradual and acceptable both by the same subject and by the other family members. The equilibrium, frequently very delicate, the family and the sub-

ject reached in the long process of reciprocal and often painful negotiation will thus not be threatened by such a little response since it will not be perceived as a menace by anyone.

Furthermore the difficult task of the hypnotist who tries to elicit meaningful responses by the subject and to avoid resistance can be made almost impossible if a dramatic response is expected. Every therapist's failure will make subsequent responses on the part of the subject more difficult to elicit. On the contrary even a very small positive response to the therapist's suggestion will create a sense of success both for the subject and the therapist, thus ensuring a favorable attitude and notably reducing the risks of failure for the therapy.

If some major change is required it is then preferable to subdivide the process of inducing such a change in a series of small steps that will gradually bring the requested goal. This „small steps“ strategy will not raise resistance and in this case each positive response will enforce the next one; or it will raise only small resistant behavior and in this case the therapist will not lose so much credit and this will be considered only a small and easy reversible failure.

4. *Don't trust big and dramatic phenomena*

Because psychotherapists are supposed to bring change in the individual's life there is usually a strong expectation of some dramatic event to happen in psychotherapy. An unforeseen insight, a new and unusual behavior, a performance never obtained before, the complete disappearance of the symptom or of the problem are some of the most common results a therapist is supposed to reach as soon as possible.

There is no doubt that these results are to be pursued in therapy. Nevertheless a strong expectation for these results will easily induce both the patient and the therapist to overemphasize these types of change and to neglect the slight variations that take place during the single session. These slight variations are necessary steps on the way to the major change that therapy is supposed to bring in and neglecting them might dangerously slow down the therapeutic process.

If, searching for the dramatic events in therapy, therapist and patient don't realize the minor events they have necessarily to go through, they may completely lose their way like explorers that don't recognize the stages they are supposed to touch before reaching their ultimate destination. During these stages they may of course find a number of dramatic events, but these shouldn't be misrecognized as the final goals of therapy.

Dramatic changes in the early phases of therapy seem durable but quite often they don't last and may easily fade away as rapidly as they appeared. So it is a good rule of thumb not to trust big and dramatic changes: they usually are deceptive and ephemeral.

5. *Connect minimal cues to memory*

It is not easy to understand fully how memory works in human beings, but minimal cues have certainly a great importance in the process of establishing and recalling a memory. Introducing minimal cues, Erickson described the process of learning poems climbing trees (4). Every poem was associated with a particular tree and it was possible to remember it, even after years, climbing that particular tree.

Everybody has gone through the experience of remembering something in a place and forgetting the same thing as soon as the place was left. Music, smell, images can activate memories and allow a connection between a seemingly irrelevant stimulus and important events that appeared to be forgotten.

This connection of memories and minimal cues can be used in hypnosis. To connect a cue to some event and then to evoke it indirectly simply mentioning the cue or facilitate amnesia withholding the cue the event was connected to, are only two examples of possible hypnotic use of minimal cues with regard to memory.

6. *Accept the subject information on the therapist's minimal indications*

A hypnotist sensitive to the minimal cues will certainly appear very attentive to the subject. Sensitivity to minimal cues will also increase the hypnotist's therapeutic competence. Yet psychotherapy, and particularly hypnotherapy, is mostly effective when not only the therapist is able to notice and respond to the client's cues, but when the client becomes as well sensitive to the therapist's minimal indications. This reciprocal sensitivity corresponds to the definition we previously gave of rapport, the unique and exclusive relationship that connects hypnotist and subject.

Milton H. Erickson has described in many of his papers how the hypnotist's subtle indications can be intentionally produced in order to reach the subject's unconscious and promote change without raising any form of resistance.

The hypnotist's use of space and nonverbal communication (Erickson, 1964), of little body movements (Erickson & Rossi, 1980b), of breath rhythm (Erickson, 1980a), the voice dynamics (Erickson, 1980c), the emphasis put on a word (Erickson & Rossi, 1980a), all this and more can influence the subject's response in an indirect and very effective way (Erickson, 1980b). The same Erickson indicated in an experimental study (Erickson, 1980d) how involuntary cues and expectancy can be as much influential in eliciting the subject's hypnotic responses.

Both involuntary and voluntary indications are effective but the hypnotist is usually aware only of the latter and is therefore often unable to use the former on purpose. To become able to voluntarily use his/her own minimal indications as well to recognize the pre-

sence of the involuntary cues is an essential part of the hypnotist's training. This training can be enforced by a careful evaluation of the patient's minimal cues, and by the continuous exercise of trying to connect these cues to the hypnotist's more subtle indications.

Sometime the subject gives to the hypnotist direct feedback on the stimuli he/she considers more effective: „Your phrase is still in my mind“, „The tone of voice you used created in me the sensation of being able to fly“, „I can't remember anything starting from the moment you moved that paperweight on the table“, „When you began to walk in the room your voice seemed to come from everywhere“. In these cases, it is valuable for the therapist to accept the subject's suggestion and implement the minimal indications the subject shows to appreciate more.

7. Develop sensitivity to your own minimal cues

The search for the subject's minimal cues and for the hypnotist's voluntary and involuntary indications that he/she actively use to influence the subject, doesn't tell us so much about the hypnotist's own cues, i.e. what signals and stimuli the hypnotist is more sensitive to.

To better distinguish these three different aspects: a) the subject's minimal cues, b) the hypnotist's minimal indications and, c) the hypnotist own cues that are usually referred to with the general name of minimal cues, see the concepts definitions and their role in hypnotherapy reported in table 1.

A great number of authors considers the question of what the therapist is sensitive to an irrelevant one. Therapy can be done without posing this question and probably be as effective. In my opinion the reason for posing this question comes from the hypnotic rapport:

<p>Subject's Minimal Cues</p> <p>indicators, seemingly trivial and irrelevant, of a specific state of mind or internal processes in the subject. Only a careful observation reveals the connections between these indicators and meaningful behavioral responses.</p>
<p>Hypnotist's Minimal Indications</p> <p>inapparent indications that the hypnotist gives to the subject. These cues voluntarily or unvoluntarily influence the subject's behavior</p>
<p>Hypnotist's own Minimal Cues</p> <p>minimal cues the hypnotist is sensitive to. These cues influence the hypnotist's behavior and the hypnotic rapport</p>

Table 1: Definitions and roles of minimal cues in hypnosis

a very peculiar relationship in which both participants are specially sensitive to each other's minimal cues. Given this definition of the hypnotic rapport, the hypnotist minimal cues are necessarily part of the hypnotic induction and of the therapeutic process.

Why the hypnotist is unable to induce hypnosis in certain patients? Why is he sometimes so absent-minded? And why he doesn't remember some sessions? These and other questions have probably their responses in the therapist's own minimal cues.

These cues can contribute to a great extent to the therapist's participation to therapy, to the diagnostic process and to the therapist creativity in the difficult moments therapy goes through.

Furthermore the therapist can directly benefit from the minimal cues that can activate in him/her some helpful responses. To develop this sensitivity to one's own minimal cues requires experience and a careful self-observation. We will probably be able to do all this when we develop better instruments to understand hypnotic trance as well as the psychotherapeutic process as a bilateral experience that includes the person of the therapist no less than the person of the patient.

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