**THE SWAN INCIDENTALS (**minor accompaniments to the whole)

Here is the exact wording Bob Burns uses in every single Swan Session, and for good reasons.
(However after doing the workshop you will totally understand the Goldilocks Principle, so you will not be phased by any of the following 😊).

The Swan Protocol should always be prefixed by and include 6 incidentals:
1) a gathering of (small amount) information
2) a statement of wonder
3) a statement of fact, followed by a question of confirmation.
4) enquiry re: their manual and which is their dominant hand
5) 3 instructions
6) 3 suggestions
7) Swan Contact

1]
**The Gathering of Information**
(although this is also the start of The Consultation it is added here because often you will ONLY be doing… The Swan)
This is about asking why they are here **today** (today being the operative word) as there might have been a recent happening which you need to know about in order to ascertain their actual problem (we find that nobody ever comes to a hypnotherapist with a CONSCIOUS problem!)

2]
**The Statement of Wonder**
… is made AFTER gathering a small but sufficient amount of information, which prompts the therapist to say:

"Well, the good news is that you don't actually have a problem!
That is... not a CONSCIOUS problem. Rather yours is a SUBconscious problem, which tells me that it's all INSIDE of you, yet totally OUTSIDE of your control.... would that be about right?"
(and watch how they always say yes.
Remember, that if THEY say it, only THEN does it become true!).

It's funny but all over the world, in workshops, the students continually ask:
"What happens if they DON'T confirm that: 'YES, this IS the case?' That they don't have a conscious problem, but rather it is: ‘a SUBconscious problem, all inside them yet totally outside their control’.
... and the annoying answer [LOL] I promise you, is that it never EVER happens!!!
And even if it DID happen then that would mean that the therapist has erred in either: hesitation, modulation, emphasis or inflection
(in their presentation of the question).

3]
**A Statement of Fact (followed by confirmation)**
"So if you don't have a conscious problem but rather a subconscious problem then that means I'm probably wasting my time talking to YOU. But rather I'd be far better talking to that part within your SUBconscious which understands just what the problem is. Maybe when, why and how it was caused and how it can be helped or even fixed! Does THAT make sense, yeah?"
(again look for that confirmation).

4]
**Enquiry re: Manual and Dominant Hand**

A) “Did you bring you manual with you? No? Pity. Wouldn’t it be great if you simply walked in the door, told me what’s bothering you and then handed me your manual in order that I could look it up in order to follow the instructions on how to fix you.
So if you don’t have a manual (smile) that means I have to fidget (the word *ficher* is used in Scotland) a little with you, in order to find out just how you work, yeah?

B) “Tell me, are you right or left handed ? Great, so put your left hand like this (shape of The Swan)”
And of course whatever they answer the therapist (assuming the therapist uses their own right hand, chooses the client’s LEFT hand) solely for the purpose of symmetry).

5]
**3 Instructions**
“So three things:
I don’t want you to fight me.
But I don’t want you to help me either.
Rather you simply allow me to work, okay?”

and then…

“So, your job… is to do nothing! So what’s YOUR job?”

That last question (as important as it IS) I feel can *only* be for the therapist who is comfortable within their own ‘bedside manner’. It should be said with a smile and/or a shrug, and obviously NOT in a condescending way. 😊
(I really like it. I stole it from a great therapist & Swanner in Newcastle, Australia, Lance Baker)

6]
**3 Suggestions**
“One of three things is now about to happen. The first is, as crazy as this sounds, your hand will move, all on its own.
The second thing is that your hand won’t move, but you’ll feel it trying to move.
And of course the third thing could be that not only will it not move but you won’t feel anything either.
And all of that is okay, as it simply tells me a little more of how you work, I simply get feedback. Is that okay?”

7]
**SWAN CONTACT!**
(assumed name of client is Sue)
*“Great! So remember Sue, I’m now going to totally ignore you, so excuse my bad manners. I’m simply going to talk to that part inside you, and see what happens… is it okay if I tap you a couple times on the outside of your left knee?”*
(when they acknowledge… turn and face the hand)

Understand that unlike most hypnotic protocols rather than coerce, cajole or motivate, with The Swan there doesn’t have to be A Pitch. Indeed the therapist can even appear quite pessimistic!

Bob Burns has a favourite line with all clients and indeed students:
“I’m very pessimistic in the therapy room by the way.
I’ve had to actually train myself to be that way, since I discovered over many years that being optimistic brought me many disappointments, whilst being pessimistic got me got me no disappointments, yet many wonderful surprises.
But I’m not a negative pessimist. I am indeed a very positive pessimist!”
(said with a smile. *Always* with a smile).

This does 2 things. First it immediately lessens the impact of potential failure (acting as an *out* for worst case scenario) in order that although there might BE a failure… is not actually *recognized* as failure.
It also acts as a form of intended confusion like that of a witchdoctoring technique, inasmuch that the client will often smile in disbelief that such a statement could even be made by a therapist in a therapy room. But I honestly believe that this has the power to build counter expectancy (“would he really say that unless he *knew* something?”).

Remember, we are NOT seeking any form of social compliance. On the contrary we MUST destroy it if at all possible. It’s not a somnambulistic circus. We want to KNOW if we are *winning*, and not just *looking* *good*?

*“So hi* (said to The Swan), *I’m not talking to Sue anymore, I’m talking to you. I want you to know that I see you, I believe in you, and I want to talk to you!
Now you can either do this or you can’t, or you want to do it or you don’t. But let’s find out…shall we?
I want you please to simply tweak one of Sue’s fingers… it might be a forefinger that wants to lift or curl, or maybe even the small finger… or a thumb… that’s right”*

IF the finger moves we say ‘to Sue’:
*“You’re not doing that just to please me are you* (seeking confirmation that no social compliance is taking place)?”

If no movement takes place we say (to Sue):
*“Tell me can you feel anything happening within any of the fingers?”*
Regardless of the answer we then say:
*“You might find this interesting……”*
(this again is intentionally an OPEN statement)

… before turning back to The Swan and saying:
*“So now… I want you to go into Sue’s entire hand, and arm, and simply turn it like this* (showing with your mirroring arm) *around towards her face. Do that for me now please…. Thankyou!”*

(So if the fingers did not move, we *totally ignore that* and carry on. Very often although the fingers fail to move the hand will!
And don’t forget to be using a language that includes PLEASE and THANKYOU)

After the turn:
*“That’s lovely, thankyou. And now can I ask, if you were to say ‘HELLO’ to Sue, how exactly would you DO that? I mean would you be able to wave the whole hand?
Or would it simply be a finger that moves? Can you show me how please?”*

(This of course will be seen by many as totally ridiculous, which of course makes any movement totally miraculous)

If no movement ask the client:
*“And tell me Sue, could you feeeeeeeel something going on there?”*

Now address The Swan:
*“Thankyou, and now I’d very much like you to take Sue’s hand and that whole arm and turn everything all the way back to face me please. SO you’re now having to find and use different nerves, fibres and muscles.”*

If it’s taking some time then prompt with:
*“… and you may have to work this out yes? I realize you’ve never been asked to do this before… so do take your time… that’s right…”* etc

By this time the therapist should be extreeeeeeemely comfortable with both the client and ‘the caller/part’ however the last part of this initial teaching of The Swan is to go for what some people might wish to term: an ideo-motor response (IMR).
The therapist then continues with the final three questions before conversation can be initiated:
1) *“So if I asked you a question and the answer was YES can you show me how you would say yes to me? Would it be a nodding hand or the lifting of a particular finger…?*”
2) *“Thankyou and how might you say NO to me?”*
3) “*And if you wished to convey that you either didn’t KNOW or were UNSURE how would you convey that to me?”*

This concludes ‘The Incidentals’ for The (basic) Swan Protocol.

**However…. Why not try for…. Direct Voice!**

(Still to The Swan…)
*“I was just wondering, if you can move a finger, a hand or a whole arm… can you do more…* (rhetorical)… *would you be happy to try more?
For example, and I’m not asking you to DO it, I just want to know if you could, and if you’d like to.
If it were possible for you to (you look as if you are in deep thought)…
…SPEAK… to me… do you think you could…..?*(Be comfortable in the silence. This will often be one of the biggest moments of their lives…)
 *Would you like to try…..?*
*Would you like to try now…?*
(big smile and perhaps a gentle touch of an arm, as you get client agreement)
*“Are you okay with this Sue?”*

(back to The Swan)
*“So, when you’re ready, in your own time. Just allow yourself to take control of Sue’s cardiovascular system, her heart, her lungs, her mouth. her tongue. And when YOU are ready, just take a nice deep breath and simply say the word… Hello!”*

**…..and when this happens for the first time, you, as a therapist… will simply explode! 😊**