Rapport building: breathing, tone and words

In the second part of this series, Jane Lelean expands on how to build deeper rapport with patients through the power of breathing, tone and words

In the previous article we considered why rapport is so important within the dental practice, and explored how gestures and posture are important in establishing rapport. In this article we will be turning our attention to breathing, tone and words.

What is your habitual pattern of breathing? Take a few moments to breathe normally with one hand gently placed on your thorax, then your belly and finally on your diaphragm. Notice in which location your hand moves with each breath, because this is where you are breathing from.

How you breathe determines how you move, how you speak and even your thought patterns, and conversely how you move determines how you breathe. Try this experiment – stand upright in an erect posture and re-create the images of a very memorable happy event, use your hands to notice the site, rate and depth of breathing. Then hunch your shoulders, look down and remember a not very pleasant event, again notice the site, rate and depth of breathing; experience how they differ.

As with gestures and body postures, matching someone's breathing rate and style will give you an extraordinarily deep and quick way to establish rapport. In practice I found these skills to be unbelievably powerful when working with patients with anxieties and phobias, as well as with children.

As discussed in the previous article, deep rapport is achieved by matching the breathing patterns and pacing it until you can take the lead, changing your breathing style. When working with an anxious patient, you would match the rapid, shallow breathing from high in the thorax for long enough to establish rapport, and then take the lead, gradually slowing down and deepening the breathing from the belly so the breath is calm and controlled. Your patient will naturally follow you and adopt your relaxed breathing style. Do not underestimate the power of using breathing to establish deep rapport and relaxation; many hypnotherapists can induce a therapeutic trance in their clients by following breathing patterns alone.

To notice someone's breathing pattern it is often easiest to use your peripheral vision to watch for movement in the chest or shoulders, or a fold in the patient's clothing, rather than watching the chest directly. When the shoulders rise they are inhaling, and when they drop they are exhaling.

Speech is often another useful way to measure breathing patterns, as we can only speak on exhaling. By far the easiest way to determine your patient's breathing patterns in the dental scenario is to place a reassuring hand on their shoulder and feel the movement. As with matching and mirroring, use pacing and leading to monitor your depth of rapport and influence.

The power of tone

Now, I would like to explore what is meant by tone and how it can help you to establish rapport and influence with your patients. As I mentioned in the previous article, studies have shown that tonality creates 38% of the meaning of the communication.

Have you ever had the situation where you have been talking to someone and not believed what they are saying, as their words and tone don't match? Vocal tone really does matter, so I would encourage you to begin to pay attention to it and use it to assist your patients.

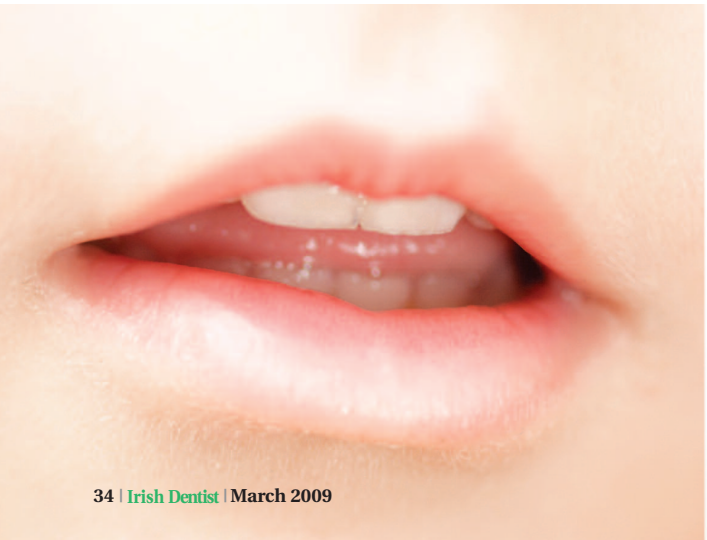
To consider matching someone's voice patterns, you must listen closely and pay attention to their:

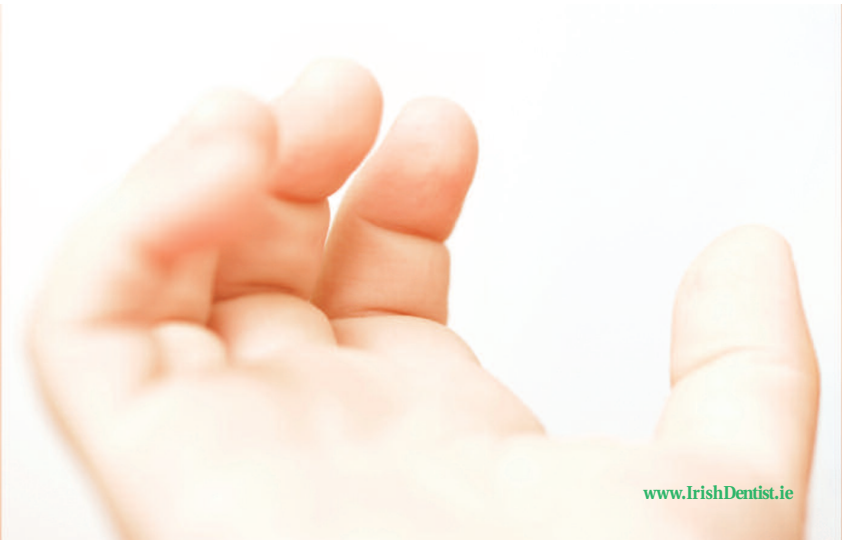
- Speed of speech
- Volume of speech
- Rhythm of speech
- Accent
- Characteristic sounds, e.g. coughs, sighs or hesitations.

Have you ever noticed how some people's accents change with the company they keep, and as a reflection of the rapport established? One of my old boyfriend's mothers could tell if he was ringing her from my house or from his, as his accent changed, imperceptible to me, but noticeable to his mother. While I am not advocating mimicking accents, I do suggest that you notice speech patterns, you begin to match them to build rapport, in exactly the same way as we have discussed for gestures and breathing.

Now, consider this for a moment – have you ever been in a situation where you are cross and frustrated about poor service and you became short-tempered and raised your voice to the sales assistant?

Conventional teaching suggests that the sales assistant speaks to you in a very calm and quiet way to reduce your frustration; but in most cases all this does is annoy you even further. I would suggest the reason for this is the assistant is mismatching your voice pattern and you don't feel heard. In this situation, it would be far more productive if the sales assistant matched the passion, rate and volume of your voice at a similar yet slightly lower way initially. Once they have established rapport, you feel heard and sense they are on





your side. They then change their voice tone, volume and rate, leading you to the calmer, quieter voice, influencing your emotions and allow the more amicable resolution of the problem.

I would strongly encourage you to have a staff meeting and train your reception and telephone staff how to match voice patterns as a way of establishing rapport with patients. While on the telephone, there are obviously no gestures or body language that can be seen, so matching vocal qualities is extraordinarily important as a way to establish rapport. I encourage you to test this out in your practice and notice what happens to your reception staff's effectiveness in confirming appointments.

Vocal mismatching is also an elegant way to end a conversation that has over-run its purpose.

The power of words

In his book *Men are from Mars, Women are from Venus*, John Gray suggests that men and women come from different planets and therefore have different styles of communication. I would like to suggest that individuals actually have their own preferred dialect, and if we are to communicate effectively it is essential that we learn to recognise this and speak another language.

We know that words only influence 7% of the meaning of communication, and yet you can make that 7% work much more effectively and now I want to tell you how.

Have you ever stopped to notice how differently patients answer the question: 'How are you today?' Some of the many responses may include:

- 'I am as bright as a button'
- 'I am grumbling along'
- 'I am bouncing back'
- 'I am fresh as daisy'
- 'I am sweet'.

As humans we all experience life by receiving information through any of our five senses:

- Visual
- Auditory
- Kinesthetic
- Olfactory
- Gustatory.

We experience the present and create memories and futures by representing events using a combination of our five senses.

Whether we are aware of it or not, each of us have preferred senses by which to receive information in the world around us. If we are to communicate and establish effective rapport with others, it is essential that we know their preferred data presentation and communicate using that.

In the examples given as an answer to 'how are you today?', the information need has been provided so we know what types of words to use in our communication so the other person feels heard:

- 'I am as bright as a button' – visual
- 'I am grumbling along' – auditory
- 'I am bouncing back' – kinesthetic
- 'I am fresh as daisy' – olfactory
- 'I am sweet' – gustatory.

I would encourage you to listen very carefully to the words your patients use, as they are not accidental. Begin to deepen your relationships with them by using words in their preferred representational system.

Table 1: Commonly used words relating to the five representational systems

Visual	Auditory	Kinesthetic	Kinesthetic (emotions)	Olfactory	Gustatory
Appearance	Accent	Burning	Anxious	Air	Appetite
Brilliant	Argue	Drag	Calm down	Aroma	Bite
Colourful	Buzz	Embrace	Disgusted	Breath	Bitter
Dark	Echo	Fee	Ecstatic	Burnt	Chew
Enlighten	Groan	Grab	Embarrassed	Clear the air	Digest
Envision	Gurgle	Hard	Emotional	Fragrant	Dilute
Focus	Gurgle	Luke warm	Enthusiastic	Fresh	Flavour
Frame	Hear	Lumpy	Exasperated	Fruity	Fruity
Hindsight	Hush	Numb	Excited	Fume	Half-baked
Imagine	Listen	Pressure	Feel	Nose	Hot
Look	Music	Rigid	Frustrated	Nutty	Insipid

In Table 1 above there is a brief list of commonly used words relating to the five representational systems. A more detailed list is available on request (jane@healthyandwealthy.co.uk). The list will help you to identify the other person's preferred sensory system and assist you in learning to speak their language.

Once you have identified your patient's preferred representational system, incorporate words from that system as you talk to them. This will enable you to speak their language and present your treatment plans in a way that is most appropriate to them.

You will have more success converting your treatment plans if you show pictures to a visually dominant patient that present how natural looking the colours and translucency of a Procera crown is, as compared to a conventional metal ceramic. Conversely, you will have more success with a kinesthetic person letting them touch and feel and play with models of implants than you will showing them pictures and videos.

If you would like to know more about business coaching, dental practice training programmes or neuro-linguistic programming (NLP) training offered by Dr Jane Lelean, please email her at jane@healthyandwealthy.co.uk or call +44 (0) 1296 770462.